



Request for Proposals to Identify and Test Innovative Solutions to Increase Access to Effective Malaria Treatment

Frequently Asked Questions (FAQs)

Budget/Project Size/Scope

1. What is the approximate grant size? Is there a minimum, maximum, or target?

The total funding specified in the RfP is \$1.5 million USD. For individual research proposals, we have no specific minimum or maximum. Instead, we are looking to fund the highest impact projects for the cost. The impact of the expected project should be commensurate with the budget. The budget should reflect the design, methodology, sample size and intervention proposed, and there should be high impact per dollar spent. For example, if a project is very costly, but has significant implications on the global policy level, then we would consider it.

Since CHAI is implementing a number of projects, we have a strong sense of the major cost components, including costs for launching an intervention and data collection. We will not look favorably on projects where a major portion of the project cost is driven by high overhead and/or study staff salaries.

2. How many projects does CHAI envision funding?

As many high impact research projects as possible.

3. How do you view costs for commodities such as RDTs and other drugs?

We are looking to fund the highest impact projects, and recognize there are cases where commodity procurement is necessary to answer an important policy/operational research question. We have introduced commodities in some of the operational research projects that we are undertaking internally (e.g., RDTs and limited quantities of ACTs where it was necessary to control ACT supply tightly). However, because commodities can be a significant driver of cost, the proposed budget should be linked closely to a feasible study design, appropriate sample size, and a policy relevant question that could not otherwise be answered. Additionally,

any proposed projects that can reduce costs by leveraging AMFm ACTs through working in an AMFm Phase I country, should do so.

4. If we were to propose a project that would leverage funding from other sources (e.g., NIH or the World Bank) to expand upon surveys already in the field, would this be considered a positive or a negative?

If you can demonstrate additional impact, then we would welcome the efficiency gained from leveraging an existing project. Your application should demonstrate that additional funding will allow you to answer an additional question that you would not otherwise be able to address (e.g., by the addition of a treatment arm that is not part of the existing design).

We would like to emphasize that we are not interested in merely topping up existing projects (e.g., if CHAI funding would simply expand power or sample size of a planned project). Additional funding from CHAI should actually add relevant policy questions to the study.

5. How will funds be disbursed (i.e., one time or multiple)?

We typically disburse funds in multiple tranches, with disbursements tied to deliverables or performance targets. Disbursement schedules will be negotiated on a case by case basis however, as we recognize that different projects will have different needs. For example, if one of the disbursements needs to be larger, especially in the case of a large procurement of commodities, we would work with the recipient to agree to a reasonable schedule that meets those needs and still ensures that projects keep to agreed timelines and results.

6. We have had a previously painful experience of waiting for drugs that didn't arrive and delaying start. Thus, would prefer an independent drug supply (via ACT procurement in the budget). How would this be viewed?

We understand that some experimental design research studies require a high degree of control. We defer to applicants on the best procurement procedures to ensure successful project launch and completion.

Project Location

7. Is there a preference for research located in AMFm Phase 1 countries?

We are open to proposals in any relevant country. However, we have a preference for AMFm Phase I countries if working in another country would significantly contribute to cost. For example, if the same project could be just as easily conducted in either a Phase I country or another country, and ACTs would need to be procured separately to work in a non-Phase I country, the project should be conducted in a Phase I country.

Project Timeline

8. Could you please clarify the exact timeline proposed (i.e., start/end dates)?

The deadline for proposal submission is June 1, 2010. Successful applicants will be notified on or before July 15, 2010.

After final selection and notification, we will expedite the grant/MOU process as quickly as possible. This will be done as soon as the terms of the agreement have been finalized by both parties. To be considered for funding, all proposed projects must be able to feasibly launch the project, complete all data collection, and produce analysis by January 2012.

9. What is the driver of the project end date?

All operational research projects funded through this RfP must produce results by January 2012, so that they can inform the Global Fund board decision which will be convening in May 2012. Project results will be incorporated into the independent evaluation for the AMFm that is being done collaboratively between the London School for Hygiene and Tropical Medicine (LSHTM) and MacroInternational. The deliverable for the independent evaluation is a meta-analysis that incorporates the results of data collected in each AMFm Phase I country on ACT prices, availability, and market share, in addition to all operational research results.

Proposal Process

10. Should we submit one or two proposals for two different projects in the same country?

Independent projects should submit separate proposals, irrespective of whether or not they are in the same country.

11. What are ethical guideline/approval considerations for our project?

The Clinton Health Access Initiative does not have its own ethical review board that grants human subjects approval. Principal investigators should seek approval from the review board at their own institution, and also the relevant national review board in the country where the study will take place.

12. Additional Questions?

Questions can be answered during the next live Q&A session on May 14, 2010, scheduled for 9am EST. You may RSVP for this session by emailing malaria.treatment.solutions@gmail.com. You may also send questions to malaria.treatment.solutions@gmail.com.