Questions and Answers

Innovations in Increasing Immunisation Thematic Window

The questions listed in this document were received by 3ie as part of the request for proposals under 3ie’s Thematic Window 10, Innovations in Increasing Immunisation. A few of the questions may have been summarised or rephrased to be more over-arching so that the guidance can be useful to all applicants.

Deadline for questions: 20 May 2015

Q1. Is Yap State, Federated of Micronesia eligible for this grant? We are in the Western Pacific region between Guam and Palau. I see that priority is given to South Asian countries. Will it be fruitless for us in Micronesia to apply? Do you have other categories of grant funds that we are eligible to apply for?

A1. All Gavi-eligible countries can apply under this programme. Yap state, Federated of Micronesia is not Gavi-eligible and therefore is not eligible for this call.

Q2. Papua New Guinea is not a priority country; can I still work on a proposal?

A2. All Gavi-eligible countries can apply under this programme. Papua New Guinea is not Gavi-eligible and therefore is not eligible for this call.

Q3. I would like to find out whether an application relating to community engagement for knowledge dissemination in vaccine trial communities can be submitted for a 3ie grant?

A3. Grants are not being given for clinical trials under this programme. However, a proposed study that examines the effectiveness of knowledge dissemination methods with a specific focus on examining community engagement approaches for increasing immunisation coverage in any of the Gavi-eligible countries is eligible.

Q4. I am in contact with an agency that has completed implementation of an immunisation project. There have been some evaluations but no robust impact evaluation. Would you be willing to accept a proposal to evaluate a project that has already been implemented or does it need to be an ongoing project?
The impact evaluation proposal for a project that has already been implemented is eligible as long as the proposal is rigorous and allows for attribution and causal claims to be made using a credible identification strategy.

Q5. I want some clarification on the formative and impact evaluation. I work in Ghana and have tested an innovative approach called GECI (get every child immunised). We want to work in Ghana by scaling up our work for which we wish to collaborate with other organisations (Nationals) in Nigeria. Could you help us? Will you also support work in Ghana knowing that priority is Nigeria, Pakistan and East Africa?

A5. All Gavi-eligible countries can apply under this programme and since Ghana is a Gavi country, it is eligible for this call. Please note that the grants under this programme are primarily to support high quality evaluations of community engagement approaches. Intervention costs are eligible for support but only to the extent that this is top-up implementation funding for programmes and also to the extent that this is required for the evaluation. It is unlikely that the grant programme will be able to support implementation of programmes that are large and also support high quality evaluations.

Q6. We are thankful to have the 3ie Grant opportunity. I would like to know if the HPV-vaccine related evaluations (type 1 and type 2) are also eligible for proposals? As one of the Gavi-supported countries, the HPV vaccine is currently being introduced as a demonstration project and many research questions on engagement of communities have emerged. This grant would help the country in answering some of them.

A6. The focus of this grant programme is on evaluating community engagement approaches for improving vaccine coverage for different vaccines. We do not restrict types of vaccines as long as the focus of the programme is on evaluating the use of community engagement approaches.

Q7. Can the researcher be from the organisation implementing the project?

A7. Yes, the researcher can be from the organisation implementing the project. However, please note that applicants are required to respond to 3ie’s conflict of interest declaration question in the proposal form.

Q8. We are currently implementing an innovative project on immunisation of one year duration in high risk areas of Karachi, Pakistan. It will end on 31 August 2015. Can we propose to evaluate this project? Can we propose to upscale this project in a wider geographical area and evaluate it?

A8. Type 1 grants: 3ie will fund formative evaluations of pilot programmes that test previously untried or untested approaches in engaging communities to increase immunisation coverage. Limited support for the implementation of these programmes is available. Given the restricted budget, 3ie encourages organisations to secure funding for implementation from other sources. Please refer to the Request For Proposals (RFP) to see what main questions may be answered in a formative evaluation.

Type 2 grants: 3ie will fund rapid impact evaluations and full impact evaluations of innovative community engagement approaches to increase immunisation coverage. The impact evaluations must measure the impact of the programme on vaccination coverage. They must also aim to produce robust and policy-relevant evidence on the most effective and innovative...
approaches for engaging communities to increase their participation in the planning, provision, monitoring and implementation of immunisation services. A part of the budget may be allocated to support the implementation of the programme, especially if it is deemed necessary for the impact evaluation and is directed at a new and innovative programme.

Q9. Do the researcher and implementer have to be from the same country?

A9. No, the implementer and researcher do not have to be from the same country. However, 3ie encourages substantive involvement of developing country nationals in the team.

Q10. Is Nepal eligible for this call?

A10. Yes, all Gavi-eligible countries can apply for this call and Nepal is a Gavi-eligible country.

Q11. We are interested in applying for a Type 1 grant as a part of the recent RFP issued for evaluating immunisation coverage. We understand that 3ie is able to provide some funding for the implementation of interventions under Type 1 grants. The RFP notes that this is limited funding. Is there a monetary ceiling or maximum proportion of the budget that can be used for implementation of the intervention? Also the RFP states that 3ie encourages applicants to seek additional funding for implementation of the intervention. If we are in the process of seeking other funding but have not yet been awarded that funding by the proposal submission date, should we include this information in our application?

A11. The overall budget envelope for the Type I grant is USD 200,000. There is no fixed proportion for how much should be budgeted for implementation and how much for evaluation and we are flexible about this. However, please note that the primary focus of this grant window is evaluation with limited support available for implementation. The evaluation component of the study should be strong and of good quality. Please include the information regarding the funding sought from other sources.

Q12. The programme we are looking to evaluate has multiple objectives, increase in immunisation coverage being one of them (SBA coverage etc. being the others). Is it okay to bid for evaluating an assignment, which has more than just 'increase in immunisation coverage’ as an objective?

A12. Yes, the study can include other outcomes in addition to immunisation coverage. However, please note that the focus of this grant programme is on evaluating community engagement approaches that directly aim to increase immunisation coverage.

Q13. Is the Type 1 grant of US$200,000 for evaluation only, or for the evaluation + implementation both? We assume this is for the evaluation component only, and if the evaluation demonstrates success, we will apply for type 2, in coordination with the implementing partner? However, we will specify who the potential implementing partner will be. Please confirm.

A13. US$200,000 for type 1 grants is for both implementation and evaluation. 3ie will fund formative evaluations of pilot programmes that test previously untried or untested approaches in engaging communities to increase immunisation coverage. Limited support for the
implementation of these programmes is available. Given the restricted budget, 3ie encourages organisations to secure funding for implementation from other sources. Please also refer to our RFP document which states “if formative evaluations of these programmes show that there is potential for replication and scale-up, awardees are eligible to apply for type 2 grants at a later date.” This however depends on the availability of funds to 3ie at a later date.

Q14. If the Type 1 grant (US$ 200,000) is for both evaluation + interim scale up (9-12 months), please advise if there is any guidance on the scale-up itself i.e. does it have to be within the same district or can it be in a completely new province? Or is it up to the implementation team altogether?

A14. These funds are for both the evaluation and implementation with a focus on high quality evaluations of community engagement approaches. There is no guidance at this point on scaled up initiatives. All applications will be judged on the quality and the credibility of the submitted proposal including the strength of the theory of change. In the case of Type 2 grants previous evidence will also be assessed in implementation feasibility.

Q15. It is noted that the project team should include nationals of the country where the assignment is taking place. Does this also mean that no non-national can be part of the team? Please confirm.

A15. The team can and should include nationals from other countries as well.

Q16. We are looking to evaluate a programme which was commissioned as a pilot in September 2014, and its implementation funds will expire in Sept 2015. It’s a new idea, and the kind of technology it is using to engage communities and improve immunisation is unique. Will this kind of project suffice within the ‘new approach’ requirement for the type 1 category?

A16. Yes, this project is eligible.

Q17. Can members of the evaluation team serve on the implementation team and vice versa or are the two teams expected to be mutually exclusive?

A17. Yes, please note that applicants will have to respond to 3ie’s conflict of interest declaration question in the 3ie proposal form.

Q18. I have a general question about your direct cost policy that I hope you can answer. In the list of non-allowable costs is “salary and other staff costs for staff of the implementing agency”. By implementing agency, do you mean the agency implementing the programme under evaluation, as opposed to the organisation doing the research (a separate organisation)?

A18. Implementation costs are eligible under this grant programme.

Q19. Can one organization apply for both type 1 and type 2 grants?

A19. Yes, the same organisation can apply for both types of grants.
Q20. I am a researcher from an L&MIC and will be the evaluator of the impact evaluation study of the intervention. I am also the developer of the VIR band and principal investigator of the VIR band community effectiveness trial in Karachi. Will this pose any conflict of interest as per 3ie policy? The implementing agency will be Trust for Vaccine and Immunization, Karachi, Pakistan.

A20. Applicants will have to respond to 3ie’s conflict of interest declaration question in the proposal form.

Q21. During the consultative meeting in London, UNICEF Nigeria representatives showed interest in implementing the VIR band intervention in Nigeria. Can UNICEF Nigeria submit a proposal for VIR band impact evaluation? And will it be considered as a separate grant?

A21. Yes, they can submit a proposal and this will be considered a separate grant proposal.

Q22. The RFP indicates that 3ie could provide limited support for implementation. However, in the proposal template it states that “In particular, note that 3ie will not fund any part of the intervention itself.” Please clarify, as these two statements seem contradictory.

A22. This has been corrected. Implementation costs are eligible under this grant programme.

Q23. As per the timeline, revised proposals are due on Oct 5, 2015. When will the final award be made? When should the awardees plan to start the evaluation?

A23. We expect to sign the grant agreements two weeks after satisfactory full proposals have been received.

Q24. If citations are included in the text of the proposal form, will they be counted against the word count? Or will there be a mechanism to include citations separately?

A24. Yes, citations will be counted against the word count. We recommend that a separate document with a list of references be submitted separately, in case the proposal contains several citations.

Q25. Will it be possible to embed hyperlinks into the proposal form?

A25. URL can be added in the form. However, hyperlinks cannot be embedded in the proposal form on 3ie’s grant management system.

Q26. Will it be possible to embed images in the proposal form, where relevant?

A26. No, images cannot be embedded in the proposal form.

Q27. A corporate capabilities statement is not mentioned in the proposal form. Is a corporate capabilities statement not needed?

A27. A corporate capabilities statement is not required at this point.
Q28. Beyond the “Additional Documents” stated, will it be possible to also include other relevant documents?

A28. Yes, other additional documents can be uploaded. Please title them clearly.

Q29. In the proposal form, you recommend ensuring 9 months after last data collection. Can you confirm a) if that 9 month period is required in our work plan or can be adjusted based on our expectations of the time the analysis and dissemination will take and b) if the 9 months is from the start or end point of the final data collection?

A29. Yes, the work plan can be adjusted.

Q30. Is a country national required as a principal investigator (PI) or a co-PI or can country nationals be engaged through a local research partner or role on the evaluation team?

A30. A country national is required as a PI or co-PI. 3ie encourages engaging local partners.

Q31. In the Approvals section of the Type 2 application it states: “It is the responsibility of the study team to provide all necessary approvals before the start of the study, whether obtained by the researchers, the grant-holding agency, and/or the intervention implementing agency. Awarded grantees must send copies of each of the required approvals below prior to grant signing, to 3ie. Is this to state that any Institutional Review Board (IRB) approvals must be obtained in advance of the award and costs and time for such preparations will not be covered as part of the evaluation budget?

A31. No, it is not required that IRB approvals are obtained in advance of the award.

Q32. Is it possible to have a link to the following report, given its importance in providing a working definition of community engagement for this initiative? “Bill & Melinda Gates Foundation. Community engagement to strengthen routine immunisation: lessons for improving immunisation coverage from a literature review and landscape analysis. Bill and Melinda Gates Foundation, August, 2014”

A32. We will post this document on our webpage soon.

Q33. Is it possible to have a high-resolution version of the gap map in Table 5 of the scoping study? The table in the report is almost impossible to read.

A33. Yes, we have posted this document on our webpage.

Q34. Is there a population size recommendation for the three communities that should be included in the study?

A34. No
Q35. Are there recommended types of vaccinations that should be included in the intervention or will this depend on the study site?

A35. The focus of this grant programme is on evaluating community engagement approaches for improving vaccine coverage for different vaccines. We do not have a restriction according to types of vaccines as long as the focus of the evaluation is to assess community engagement approaches.

Q36. Should the intervention include one vaccination initiative or more than one?

A36. There is no restriction on the number of initiatives.

Q37. Should the intervention focus on one of the community initiatives highlighted in the scoping study prepared by 3ie or is it possible to use a community engagement tool that has not been tested before with vaccinations such as Relational Coordination (http://rcrc.brandeis.edu/)?

A37. There is no restriction on the types of community engagement initiatives.

Q38. Does 3ie have a preferred Excel tool for sample size calculations?

A39. No, 3ie does not have an official excel tool for sample size calculations. However if you would like guidance, we can provide excel sheets and documents for this (these are currently in draft form and will be finalised soon.)

Q39. Does 3ie have any guidance on defining “socially and structurally marginalized and vulnerable sub-populations”?

A39. No, we do not.

Q40. Does 3ie have a preferred indicator of immunisation coverage (i.e., antigen-specific; fully immunised child; on-time) that they would like applicants to measure?

A40. No, there is no one preferred indicator for measuring immunisation coverage.