Cancer Funding Call Text

Primary and Secondary Prevention of Cancer Funding Call

Specific Challenge

The Global Alliance for Chronic Diseases (GACD)[1] funding call will focus on implementation research proposals for the primary and/or secondary prevention of cancer [2] in Low- and Middle-Income Countries (LMICs) and/or in populations facing conditions of vulnerability in High-Income Countries (HICs).[3]

Cancer is becoming one of the most important public health problems worldwide and a leading cause of premature death. In 2018, an estimated 18.1 million[4] people were diagnosed with cancer and 9.6 million died from it. Predictions suggest that 30 million people will die from cancer each year by 2030, of which 75% will be in LMICs. This increase may be attributed to aging societies, high prevalence of cancer risk behaviours, as well as the epidemiologic transition and socio-economic inequalities that result in untimely care seeking, care provision and poor quality care in many LMIC settings.

It is estimated that 30-50% of all cancers are preventable. Specifically, one-third of global cancer deaths are attributable to behavioural risk factors, such as tobacco and alcohol use, low fruit and vegetable intake, obesity and lack of physical activity. Tobacco use alone accounts for around 22% of cancer mortality.[5] Around 25% of cancer incidence in LMICs is attributable to vaccine-preventable infections (HPV and HBV).[6] Within HICs, similar patterns are seen in populations experiencing conditions of vulnerability.

One challenge to reducing this burden of cancer in populations experiencing disparities worldwide is to overcome barriers in implementation of basic cancer prevention and care strategies. Implementation of effective, evidence-based interventions has been central to cancer control in many HICs Yet, in LMICs and other low-resource environments, such interventions are under-used or have limited impact because of implementation challenges that have yet to be identified, researched, and addressed.

Implementation science is the study of strategies to make evidence-based interventions successful in real-world settings, with the aim of improving access to, and use of, these

[1] http://www.gacd.org/
[2] https://www.ons.org/sites/default/files/publication_pdfs/2%20ADVPrac%20chapter%201.pdf
[3] https://databank.worldbank.org/data/download/site-content/CLASS.xls
[4] GLOBOCAN and CONCORD-3
[5] GBD 2015 Risk Factors Collaborators. Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clusters of risks, 1990-2015: a systematic analysis for the Global Burden of Disease Study 2015. Lancet. 2016 Oct; 388 (10053):1659-1724.
[6] Plummer M, de Martel C, Vignat J, Ferlay J, Bray F, Franceschi S. Global burden of cancers attributable to infections in 2012: a synthetic analysis. Lancet Glob Health. 2016 Sep;4(9):e609-16. doi: 10.1016/S2214-109X(16)30143-7.

interventions in populations. In order to achieve the United Nations' Sustainable Development Goal 3.4 ('to reduce premature mortality from NCDs by one third by 2030…')[7], implementation research and healthcare efforts are needed to identify and scale-up the best strategies to prevent and control cancers in LMIC countries and among populations facing conditions of vulnerability in HICs.

Scope

Proposals must focus on implementation research for the primary and/or secondary prevention[8] of cancer in LMICs and/or in populations facing conditions of vulnerability in HICs. Proposals must build on evidence-based interventions (including cost-effectiveness) for the respective population groups under defined contextual circumstances. For promising interventions, a limited validation period can be envisaged. However, the core of the research activities should focus on their implementation in real-life settings. The proposed interventions should be gender-responsive.

The aim should be to adapt and scale-up the implementation of these intervention(s) in accessible, affordable and equitable ways in order to improve the prevention and early diagnosis of cancer in real-life settings. Interventions should meet conditions and requirements of the local health and social system context and address any other contextual factors identified as possible barriers.

Each proposal should:

- Focus on implementation research addressing prevention, and/or early diagnosis strategies derived from existing knowledge about effective interventions.
- For screening interventions, the local capacity and accessibility of confirming diagnoses and treatment must be ensured. The health care pathway for referral of positive cases must be included.
- Include a strategy to test the proposed model of intervention and to address the socioeconomic and contextual factors of relevance to the targeted region and community.
- Lead to a better understanding of key barriers and facilitators at local, national and international level that affect prevention and/or early diagnosis of cancer.
- Align with the priorities in national/regional cancer control programme, if any.
- Propose a pathway to embed the intervention into local, regional or national health policy and practice, addressing:

[7] https://www.who.int/sdg/targets/en/
[8] Tertiary prevention is excluded from the topic.

- A strategy to include policy makers and local authorities (possibly by being part of the consortium), as well as other relevant stakeholders such as community groups, patient groups, formal and informal carers and any other group, where ever relevant from the beginning of the project, which will contribute to the sustainability of the intervention after the end of project.
- Relevance of project outcomes/evidence for scaling up the intervention at local, national and international level and then scaled-up appropriateness with respect to the local social, cultural and economic context.

- Include health economics assessments, such as scalability and equity, as an integral part of the proposed research.

The following types of projects **DO NOT** fall within the scope of this funding call:

- Etiological work, mechanistic, or epidemiological research, which is not part of a wider study to develop implementation science approaches.
- Replication of effectiveness studies and clinical trials testing the efficacy or effectiveness of new or established pharmacological agents (or combination of agents).
- Clinical trials of new diagnostic tools, devices or pharmacological agents. Phase I or Phase II trials.

Research funded under GACD involves regular exchange of research findings and information across participating projects by means of cross-project working groups and annual joint meetings. Wherever feasible, projects should harmonise and standardise their data collection and exchange that data. Applicants must budget for the annual costs of two team members' participation in one Annual Scientific Meeting (location to vary annually). Applicants must budget their involvement in GACD working groups and other GACD wide activities, beyond the lifecycle of their research project.

Some GACD funders explicitly encourage applications involving team members from more than one GACD member country, and will support successful proposals through co-funding between the appropriate funding agencies. Applicants will be required to meet the eligibility criteria for the relevant funding agencies and the agency's specific funding conditions.

Expected Impact (one of or combinations of)

- Advance local, regional or national cancer prevention and/or early diagnostic health policies, alleviating the global burden of cancer;

- Improve affordability and tailor to local settings prevention and/or early diagnosis;

- Establish the contextual effectiveness of cancer intervention(s), including at health systems level;
- Provide evidence and recommendations to national programmes and policies focusing on prevention, screening, and/or early diagnosis;
- Inform health service providers, policy and decision makers on effective scaling up of cancer interventions at local, regional, and national levels, including affordability aspects for users and health providers;
- Reduce health inequalities and inequities, including due consideration of socio-economic, gender and age issues where relevant, in the prevention and/or early diagnosis of cancer at both local and global levels;
- Maximise the use of existing relevant programmes and platforms (e.g. research, data, and delivery platforms);
- Contribute to the United Nations' Sustainable Development Goal 3.4.

Peer Review Criteria

Relevance and Quality of Project

- Proposal fits well within the purpose and scientific remit of the funding call;
- The selected intervention is evidence-based and the proposed work uses established implementation science models to explore adaptation and scale-up across relevant communities/context;
- There is a strong scientific rationale for the proposed methodology to address questions or gaps in knowledge that arise from scale-up. Success is likely to lead to significant new understanding that is relevant for scientists and knowledge-users;
- The proposed implementation and scale-up plans are appropriate and feasible to answer the needs of knowledge-user(s) and are considered best in the international field of implementation science research;
- There is clear anticipation of system barriers (health care and other sectors) to the implementation of the interventions and a high quality of plan to manage them; and
- The relevance of the ethical considerations that might arise in the proposed program of research, and how the team plans to address them, including issues of equity and possible conflicts of interest, are well justified.

Quality of Team

- The multidisciplinary team members have a high-quality track record in fields related to the proposed implementation research and the team has the right balance of expertise given the goal(s) of the research project;
- There is evidence that the research will be jointly managed by researchers from HICs and LMICs, where applicable;
- Early career investigators are part of the team and a strong training plan for research capacity-building is included;
- There is sound evidence that stakeholders, such as decision-makers and service delivery partners, have been actively involved in the research process including the selection and adaptation of the intervention and the research design; and
- There will be demonstrable engagement with the public and/or patient and community groups or other relevant stakeholder groups.

Feasibility of Project

- Major scientific, technical or organizational challenges have been identified, and realistic plans to tackle them are outlined;
- Proposed intervention strategies are relevant to the socio-political, cultural, policy and economic contexts of the study settings and the proposal demonstrates understanding of the contextual factors (e.g. health systems, intersectoral policy, governance, leadership) affecting implementation, indicating how those factors and their impact will be analysed;
- Inequities and equity gaps, including age and gender, have been taken into account;
- Appropriate measures of evaluation have been included. Projects that are able to track long-term clinical, public health, policy and/or health system outcomes are expected;
- There is a clear governance plan, including evidence of ultimate accountability, shared strategic leadership, transparency in decision making, management of conflicts of interest, clearly defined roles/responsibilities/contributions, demonstrating that all key participants are highly engaged and committed;
- There is an appropriate collaboration plan, including but not limited to communication and coordination, management and administration, conflict prevention/resolution, quality improvement, budget and resource allocation and publication approach amongst team members.

Potential Impact

- The expected impacts, as listed in the scope above, are identified;
- The project demonstrates alignment with international and/or national commitments to prevent cancer;
- The project appropriately leverages existing programs and platforms (e.g. research, data, delivery platforms), if relevant;
- There is potential for sustaining intervention at scale; and
- There is potential for the translation of the findings into different settings.

GACD Cancer Funding Call: Research Proposal Guidance

1. General information

Please follow the format as outlined in this document when preparing your research proposal. The completed proposal must be uploaded as part of your application in the relevant section by the application deadline.

It is absolutely mandatory to follow the formatting guidelines when preparing the proposal. A check will be conducted after the submission deadline. Proposals not meeting the formal criteria will be rejected.

- **Format:** DIN A4 format
- **Margins:** All margins at least 2cm
- **Text:** Arial 11 pt. (no Arial Narrow; references and figure legends min. 6 pt)
- **Page limits:** 15 pages (including references)

Please upload your proposal as **one PDF** document.

2. Research proposal

We recommend that you take into account the review criteria as outlined in the call text when preparing your proposal. The guidelines below list general points that should be addressed when writing the case for support. However, each proposal is unique, and it is the responsibility of the applicant to ensure that all the reasonable questions that the reviewers need addressed are answered in the proposal. In addition, please address the following:

- **Aims and objectives -** Please consider the following issues when describing the objectives and importance of the research:
  - Explain the need for research in this area and the rationale for the particular lines of research you plan to pursue;
  - A clear statement of hypotheses to be tested;
  - Describe the intervention of promising or proven effectiveness that you are researching;
  - Describe the evidence that is available to demonstrate the intervention's effectiveness Outline the research questions to be addressed in relation to implementing this intervention;
  - Outline how the proposed study fits within the objectives and scientific remit set out in the call for proposals and show that the aims are scientifically justified and that the work will add distinct value to what is already known or in progress, highlighting the state of the current literature.

- **Study team and Research Environment:**
  - In addition to the information provided in the CVs you have uploaded, you may elaborate on why the group is well qualified to do this research in the case for support;
  - Describe the role and contribution of the investigators at all study sites;
  - Explain how the investigators will work together and outline other major collaborations important for the research;
  - Include information on your contribution to capacity development and the inclusion of junior team members;
  - Describe how the scientific and clinical environment(s) in which the research will be done will promote delivery of the proposed research;
  - Explain how the research will benefit from facilities provided by the Research Organisations;
  - Provide a description of the health care landscape that identifies relevant stakeholders;
  - How local stakeholders (e.g. national and local government) are to be meaningfully engaged in the programme of research.
- **Research plan, methodology and data**
  - Provide a detailed research methodology and timelines to show the feasibility of conducting this implementation study in the proposed setting (including milestones where relevant);
  - Provide a justification for the chosen methodology;
  - Give details of the general approaches, study designs, and techniques that will be used;
  - Are the methods and study designs competitive with the best in the field?
  - Consider key implementation research concepts and outline how your proposal addresses these. Outline the extent to which proof of principle has been established, demonstrate how your proposal addresses context, and consider the use of knowledge translation or implementation frameworks, where appropriate;
  - Where relevant, include information on how you will manage the research data generated and/or collected during the project, in particular addressing the following issues:
    - What types of data will the project generate/collect?
    - What standards will be used?
    - How will this data be exploited and/or shared/made accessible for verification and re-use? If data cannot be made available, explain why.
    - How will this data be curated and preserved?
  - Please provide information on any support for statistical and study design aspects (e.g., consultation of a bio-statistician or a clinical trial support unit);
  - Include major milestones and a justification for the duration requested.

- **Ethics and governance**
  - Issues you should address here include, but are not limited to, informed consent, data protection, and legal issues (e.g., handling of intellectual property rights (IPR), patenting…), according to national regulations;
  - Describe the ethical issues arising from any involvement of people, human samples or personal data in the research proposal. Please give details of how any specific risks to human participants will be controlled;
  - Describe the ethical review and research governance arrangements that would apply to the work done;
  - Adequate information should be included in each proposal to enable the evaluation of any physical or psychological hazard to which participants may be exposed. Each proposal should specify the number, sex, age range and state of health of the human participants. Applicants will need to indicate how informed consent will be obtained and whether the participants are, for example, patients, healthy volunteers or individuals in a control cohort.
- **Exploitation, dissemination and expected impact**
  - Describe how your project will contribute to the expected impact set out in the call text;
  - Outline the expected outcomes and the impact you anticipate they will have;
  - Outline the effect of implementing the intervention on the health system in the proposed setting;
  - Detailed discussion of how research addresses the opportunities for, or barriers to effective implementation of the intervention;
  - How the research being undertaken will contribute to implementation or scale up of the intervention;
  - Where appropriate, provide an economic and health system analysis that addresses issues of cost-effectiveness, scalability and sustainability, including addressing the impacts of scaling up the intervention on the wider health system;
  - Please describe any planned knowledge translation and communication activities;
  - Is the proposed research likely to generate commercially exploitable results?
  - What arrangements and experience does the research group or the host research organisation have to take forward the commercial exploitation of research in this area?