



## Request for Expression of Interests (EOIs) Alliance MAINSTREAM – Malawi

### Institutionalizing learning by mainstreaming embedded implementation research in country immunization programmes (MAINSTREAM) in Malawi

#### Background

A consortium consisting of the Alliance for Health Policy and Systems Research (the Alliance)/World Health Organisation (WHO) Science Division in a coordinating role, together with the WHO Immunization, Vaccines, and Biologicals (IVB) Department, WHO regional and country offices, and Gavi, The Vaccine Alliance launched the MAINSTREAM initiative with the following objectives:

1. To assess knowledge gaps and priorities regarding immunization coverage and equity based on policymaker/implementer priorities, aligned with country research agenda development and implementation (needs assessment objective);
2. To enable the integration of learning through embedded implementation research into national immunization programmes (implementation research integration objective);
3. To scale up learning through embedded implementation research on implementers' priorities as part of regular country support (scale objective) and
4. To improve the use of evidence to guide policy development and implementation of programmes toward improving immunization coverage and equity (policy and practice objectives).

To help execute this initiative in Malawi, the Alliance selected Blantyre Institute for Community Outreach (BICO) as an in-country research institution and a mentor institute for technical support for implementation research and to support stakeholder convening in collaboration with the **Ministry of Health (MoH-EPI)**, World Health Organisation (WHO), the government, and other in-country stakeholders to conduct this work programme.

#### Scope of Work

This request for Expressions of Interest (EOIs) calls for Implementation Research (IR) proposals from Malawi that address priority themes (see Appendix I below) identified during a collaborative research prioritization workshop conducted by BICO, MoH-EPI and WHO-Alliance and other in-country health system decision-makers/stakeholders. Selection criteria for prospective research teams will include (i) a capacity for a high degree of methodological rigor, (ii) the ability to deliver on rapid timelines, (iii) a strong country network, (iv) expertise in immunization, and (v) meaningful engagement and participation of at least one immunization program (EPI) implementer in the research team.

The EOIs will be reviewed by internal and external independent review committee members and a selection process will be undertaken to determine the level of funding support (to a maximum of approximately MK 40,000,000.00) to be awarded by BICO. The duration of the implementation projects will be 6-9 months, and up to 4 projects will be selected.

#### Eligibility Criteria

Applications are open to research teams based at academic and research institutions, non-governmental organizations (NGOs), and government entities involved in vaccines, health, policy and systems-strengthening research. Institutions and research teams must have a



proven track record in conducting research and managing health-related projects. The project team must include an implementer or decision-maker involved in immunization program delivery in Malawi at national, district or facility level. Additionally, other team members can consist of experts in research, clinical or community-based immunization care and support, health policy, and systems research, particularly in assessing and addressing coverage and equity issues. Applicants must adhere to all relevant ethical guidelines and will need to obtain necessary approvals for conducting research involving human subjects.

### **Expectation of the research team**

The research teams will include two Principal Investigators (PIs): one as the lead researcher and one as the lead implementer, and at least 2 other members. Additional research members are optional. Co-PIs and research groups are expected to participate in a protocol development workshop where they will further develop their research protocols and receive feedback from BICO. Following the protocol development workshop, they will work with BICO to obtain all necessary ethical approvals and local permissions before commencing their research.

Research teams are allowed to submit a maximum of two EoIs addressing the given research themes (see Appendix 1). Where appropriate, the EoIs can propose work that addresses more than one research theme. The research must be completed within six -nine months, and teams are responsible for writing up their findings, disseminating them to relevant stakeholders and developing an action plan for implementation. BICO, MoH-EPI, and WHO-Alliance, will provide comprehensive support, including technical guidance throughout the research process, mentorship and capacity-building opportunities through workshops and resources to enhance the research teams' skills and capabilities. Research partners will be responsible for scheduling periodic virtual meetings with BICO to address queries, receive guidance on methodology, and ensure alignment with project objectives.

### **Financial Proposal**

A financial proposal must ensure clarity, transparency, and alignment with the EOI requirements.

This budget is intended to cover all necessary expenses to complete the project, including but not limited to personnel, travel, meetings and materials. The proposed budget should not exceed a maximum of MK 40,000,000.00.

### **Timeline**

Sr#	Procurement & EOI selection activities	Date
1	Eoi Start Date	06 November 2024
2	RFP Submission Deadline	25 November 2024
3	Screening and selection of full EOIs	26 November 2024
4	External Reviews	27 Nov to - 8 December, 2024



5	Consolidating reviewers' feedback & scores	9-10 December 2024
6	Decisions made & selection of up to 4 Implementing research teams done	12 December 2024
7	Grants Disbursement to Implementation research teams	6 to 9 January 2024
8	Proposal development workshop	20 – 24 January 2025
9	Estimated Projects Start Date	1 March 2025
10	Estimated Projects End Date	30 September 2025
11	Dissemination	1 October 2025



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**Expression of Interest Template**

**Name of applying research team, organization and implementing partner institution or organization:**

**Organization type (e.g., NGO, university, other research entity, etc.):**

**1. Tentative title of your project.** (Word limit: 100)

**2. Describe your organization (in-house capacity) and its activities.** (Word limit: 300)

**3. Background information and rationale/justification.** (word limit: 600)

**4. Project Overview includes broad and specific objectives, sample size, location, primary and secondary outcomes, and hypothesis.** (word limit: 600)

**5. Project methodology including strategies (methods/approaches), study design, intervention package (if any), work plan and deliverables\*. Data collection tool(s) must be submitted as an attachment(s)** (word limit: 1000)

*\*Optional: Theory of change/Conceptual framework/Logical framework could be added under 5 as an attachment.*

**6. Data collection, management and analysis plan.** (word limit: 600)

**7. Describe context of your implementation research and relevance to the current immunization-related epidemiological, process/programmatic policy and strategy goals.** (word limit: 500)

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**8. Describe your Team Structure and their role in the study\*.** (word limit: 400)

*Information about the qualifications and expertise of the key personnel involved in the project, including immunization program implementers (e.g. Principal Investigator PI, Co-PI, Co-PI implementer, Operation Manager, Finance Manager, etc.). Clarify the specific roles and responsibilities of the PI and Co-PI, as well as how you plan to collaborate and ensure that research findings and recommendations are integrated into actionable implementation strategies.*

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*\*Optional: Table or Organogram could be added as an attachment*

**9. What specific capacities does your Research team hope to develop during this work, and what support do you anticipate you might need from the mentor institute to achieve these goals?** (Word limit: 300)

*Please detail the type of support required, such as technical guidance or training sessions.*

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**10. Innovation, anticipated results, value for money and sustainability** (word limit: 500)

*Demonstrate a balance between novel ideas and established, validated approaches, ensuring the project's feasibility, robustness and how project offers valuable and original contributions to the field.*

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**11. Possible constraints and mitigation processes** (word limit: 500)

*Demonstrate an understanding of possible constraints, such as methodological and implementation constraints of the proposed research, and plans to mitigate the constraints, if any*

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## **Financial Proposal**

**Attach as a Separate File**

**Please send your EoI to the following email address: [mainstream@bicomalawi.org](mailto:mainstream@bicomalawi.org)  
Closing date is 25<sup>th</sup> November, 2024, at 5 pm**

## **Appendix I. FINAL LIST OF PRIORITIZED RESEARCH IDEAS AND THEMES – Malawi**

### **A. Strategies to Optimize Vaccine Delivery and Strengthen Health Systems**

#### **● Strategies for service delivery**

- What strategies can be implemented to optimize vaccine delivery in the context of climate change?
- What strategies should be established at either community or facility levels and embedded in routine health care to improve vaccine coverage?
- Unintended consequences of different delivery models for immunization services (both positive and negative).
- Last-mile delivery of immunization services in Health Technology Assessments (HTAs).

#### **● Increasing vaccine access**

- How effective is task-shifting in improving vaccine access?
- What strategies can be used to identify and reach zero-dose children?
- How can we strengthen last-mile vaccine delivery and forecasting at the district level?

#### **● Data and information systems**

- How effective and cost-effective are innovative technologies in enhancing data quality and utilization across diverse contexts?
- How can combining immunization data with geospatial data improve the mapping of vaccination coverage gaps and outreach efforts in hard-to-reach areas?
- Exploring strategies to improve Adverse Events Following Immunisation (AEFI) reporting.
- Utilization of immunization data to inform program changes and decisions at all levels.

### **B. Capacity building, supervision and mentorship**

- How can we optimize supportive supervision and mentorship to enhance vaccine coverage and quality?
- Evaluating the effectiveness, cost-effectiveness, and sustainability of interventions to strengthen workforce capacities.



- Identifying approaches to improve the mental health of Expanded Programme on Immunization (EPI) staff to help them cope with workplace pressures.

### **C. Community Engagement and Participatory Approaches**

- Strategies to reduce vaccine hesitancy. What is the effect of male involvement on HPV uptake?
- What strategies can be employed to address misconceptions regarding vaccine uptake?
- A human-centred approach to develop strategies that increase vaccine demand and address misconceptions.
- Community engagement and effective communication strategies with potential for scale-up.
- Examination of how social stratification and profiling affect vaccine hesitancy in urban and rural settings.
- Strategies for increasing vaccine acceptance, with potential for scale-up.