



**Pre-Announcement of a Request for Applications
on Implementation Research on Hypertension
in Low and Middle Income Countries**

8 December 2010

**[Final announcements to be issued by contributing member agencies in
April 2011]**

The Global Alliance for Chronic Diseases is pleased to announce its intention to release a Request for Applications (RFA) on Implementation Research on Hypertension in Low and Middle Income Countries, inviting investigators to submit proposals to improve effective approaches to the prevention and control of hypertension.

The Members of the GACD include the Medical Research Councils (MRC) of the United Kingdom and South Africa; the Australian Health and Medical Research Council; the Canadian Institutes of Health Research (CIHR); the National Heart, Lung, and Blood Institute (NHLBI) of the National Institutes of Health (NIH) in the United States; and the Chinese Academy of Medical Sciences (CAMS).

RFA on Hypertension Control

Overview:

Hypertension is a major contributor to the growing global pandemic of cardiovascular disease and stroke. This RFA seeks research projects which will emphasize implementation science and will focus on hypertension prevention and control in Low and Middle Income Countries (LMICs).¹ Poor control rates for hypertension and a lack of strategies to maintain normal blood pressure, particularly in LMICs, reflect the challenges of effective and affordable implementation in health care and other systems. This program seeks to improve the implementation of existing approaches to prevention and control rather than to develop new treatments.

The GACD Members will support research from a variety of settings in LMICs. Research involving the active engagement of Aboriginal communities in Canada and Australia will also be considered.

The overall aims of this program will be:

- to develop a better understanding of key barriers at local, national and international levels that affect hypertension control and to consider how these implementation challenges can be overcome
- to understand how innovations for hypertension control can be introduced and scaled-up across a range of settings
- to identify what elements of systems most need to be strengthened to prevent hypertension and its consequences (e.g. stroke)
- to improve hypertension control rates while reducing disparities in hypertension control across population sub-groups

¹ Reference here to low and middle income countries follows the World Bank Atlas method definitions by which economies are divided into income groups according to 2009 GNI per capita: Low income countries, \$995 or less; lower middle income countries, \$996 - \$3,945; upper middle income, \$3,946 - \$12,195. See also: <http://data.worldbank.org/about/country-classifications>

This RFA is designed to optimize cumulative learning across individual projects, and ensure that results are interpretable and generalizable across locations. These include standard metrics and/or protocols for examining outcomes and for assessing features of the health care system and the broader context. The development of these standard metrics and/or protocols will be undertaken in consultation with input from national and international investigators, decision-makers and policy-makers. Funded teams will come together as a consortium to develop approaches to standardize data collection and are expected to use these standardized approaches in their respective projects. This will allow the sharing of outcome data across projects. A standards and technical advisory group will be established for this RFA.

Outcomes:

Outcomes expected from this RFA across participating countries will include:

- Established networks of teams involved in implementation research for chronic disease prevention and management
- Advances in the field of implementation science with applicability to other settings and other health issues
- Common protocols for implementation science initiatives developed and refined, including protocols for systems analysis
- Strengthened capacity for implementation research in chronic disease
- A prototype for the international peer review of implementation research on chronic disease in LMICs

Who will be eligible to apply:

Research teams and relevant stakeholders from low and middle income countries in collaboration with research teams from the contributing Global Alliance member countries. Each member of the GACD will further detail any other eligibility requirements at the time of the RFA call. Funding per team will be in the order of 250-500 thousand US dollars per year for up to 5 years.

Proposals:

Research projects will need to address components crucial for the prevention and control of hypertension.

Applications will need to address:

- system barriers to hypertension prevention and/or control and how these can be addressed
- how decision-makers and other knowledge users will be engaged in the project
- an implementation strategy
- an assessment of equity and gender gaps in blood pressure prevention and control
- the multidisciplinary composition of research teams
- an appropriate plan for knowledge translation and exchange

Investment in this RFA:

The GACD members and their partners collectively expect to invest a total of at least \$22M US dollars in this RFA.

Timeline:

All agencies providing funding for this initiative will finalize their timelines and their specific requirements at the time of the launch of the RFA.

However, the following anticipated timeline will be common to all funders:

- Announcement of RFA: April 2011
- Notification of funded teams: March 2012

Contacts:

Please direct press enquiries to secretariat@ga-cd.org

Interested researchers should contact individual member agencies at the time of the final announcement in April 2011.

Appendix:

The Global Alliance – Goal and Member Agencies:

The Global Alliance for Chronic Diseases was founded in 2009 by a group of the world's foremost health research funding agencies. It seeks to coordinate research activities that will address, on a global scale, the prevention and treatment of chronic diseases. The Alliance will collectively seek to identify common approaches to develop the evidence base needed to guide policy and identify best practices for fighting chronic diseases, thereby contributing to a sustainable and significant reduction of illness, disability and premature death around the world. Although its interests are global, it has a focus on low and middle income countries and under-served populations in high income countries. A major goal of the Alliance is to raise awareness and increase available resources for research to inform policy on chronic disease prevention and management, particularly in low and middle income countries.

The first major joint research priority of the Alliance is on Hypertension. The Alliance is also sponsoring a grand challenges exercise on global mental health which will be published in 2011.

Members of the Global Alliance for Chronic Diseases:

- [Australia's National Health and Medical Research Council](#)
- [Canadian Institutes of Health Research](#)
- [Chinese Academy of Medical Sciences](#)
- [South Africa's Medical Research Council](#)
- [The U.K.'s Medical Research Council](#)
- The U.S.'s National Institutes of Health, specifically the [National Heart, Lung and Blood Institute \(NHLBI\)](#), the National Institute of Mental Health (NIMH), and the [Fogarty International Center \(FIC\)](#)