**Guidelines and Application Form**

**for**

**The Eastern Mediterranean Regional Office Special Grant for**

**COVID-19 Research, 2022**





**World Health Organization**

**Regional Office for   
the Eastern Mediterranean**

# The Eastern Mediterranean Regional Office Special Grant for

# COVID-19 Research

# INTRODUCTION

# On 31 December 2019, a cluster of acute respiratory illness was reported from China, later confirmed as COVID-19 on 7 January 2020. Consequent to its worldwide spread, Dr Tedros Ghebreyesus, WHO Director General, declared the outbreak a Public Health Emergency of International Concern (PHEIC) on 30 January 2020, and pandemic during March 2020. The Eastern Mediterranean Region, like other regions of the world, has been heavily affected by this pandemic. Since the advent of the pandemic, globally, there has been more than 500 million confirmed cases and over six million deaths. Introduction of vaccines and guidance on evolving public health measures have played a critical role in preventing transmission. Recent available data suggests that there is a global decrease in the number of cases whereas in the EMR, 13 countries reported 20%+ decrease in cases, 9 countries reported a decline in the number of deaths and 4 countries had zero deaths during week 14 of 2022.[[1]](#footnote-1) In the EMR, 10 countries (Bahrain, Iran, Kuwait, Morocco, Qatar, Saudi Arabia, UAE, Pakistan, Oman and Tunisia) have 46-97% population fully vaccinated.[[2]](#footnote-2)

The EMRO Incident Management Support Team (IMST) was formulated in order to coordinate COVID-19 response, particularly in bringing together regional partners and driving forward the operational response. Given the importance of research and data driven decision making at national and global levels, EMRO decided to established a cross-cutting Research and Knowledge Management (RKM) pillar within its IMST structure. The pillar was charged to strengthen coordination and collaboration with other IMST pillars in supporting national research studies, assessing availability of the latest evidence in support of decisions, use of evidence in national decision, knowledge management and use of innovation and digital technology, in response to the pandemic. Such studies have included solidarity RCTs, sero-epidemiology surveys, vaccines effectiveness studies and other epidemiological research of key priority, while ensuring to observe ethics in research.

This call for proposals is linked to these areas of work to ensure priority COVID-19 related research is supported through a small grants scheme. Targeted multi-disciplinary research still needs to be conducted in the EMR countries to further understand the characteristics and impact of the pandemic and develop preparedness, response and recovery guidance, which would be useful in response to future outbreaks / epidemics / pandemics. Hence WHO is seeking small scale proposals, 3-6 months, which could shed further light on national and regional experiences and outcomes of innovations as well as the impact of the COVID-19 on health care systems and population health.. We will give priority to proposals that address national level issues, but proposals that deal with large subnational areas with clear messages and potentials for further learning and understanding will also be considered.

**1.1 OBJECTIVES**:

**General objective:** to promote EMR-based COVID-19 research

**Specific objectives:**

The specific objectives of this call for proposals are to:

* Generate local knowledge relevant to COVID-19 pandemic;
* Assist capacity building for research;
* Strengthen the link between evidence generation and health policy making; and
* Enhance experience-exchange between the Region’s member states

## **1.2 Grant Application**

The completed proposal with its annexes should be submitted through email (emrgo[rpd@who.int](mailto:rpd@who.int)) including the following:

* Completed proposal form
* Data collection form(s)
* Completed ethics review checklist
* Informed consent forms (in English and local language)
* Support documents (provisional national/institutional ethical approval; short CVs of investigators)

The responsibility for proper citation rests with authors of the proposal (team of investigators) and their respective institution; all parts of the proposal should be prepared with equal care addressing this concern.

## **1.3 Eligibility of Applicants**

Health related scientists, researchers and scholars based in EMR countries are encouraged to submit proposals. While postgraduate students are not encouraged to submit research proposals on their own, they could support teams of investigators, accordingly. The Principal Investigator (PI) must be a national of a member state of the WHO Eastern Mediterranean Region (EMR) and the research site should be in one of its Member States.

## **1.4 Individuals and Institutions**

Individuals and institutions engaged in EMR health research are considered eligible for submitting proposals which include:

* **Ministries, academic institutions, research institutes** in EMR countries.
* **Non-governmental organizations:** professional societies and civil service organizations involved in EMR health research activities.

## **1.5 Submission of Proposals**

All proposals should be submitted in **English language only,** via email at (emrgo[rpd@who.int](mailto:rpd@who.int)). ***The applications must be signed by the Principal Investigator and the Head of the concerned institution.*** Unsigned copies will be considered incomplete and will not be processed.

# 2. INSTRUCTIONS FOR PROPOSAL PREPARATION

All proposals submitted in response to this call for proposals will be reviewed utilizing the merit review criteria. Concise proposals would assist reviewers in effectively dealing with them. Therefore, **the Project Description should not exceed 10 pages (please follow instructions, accordingly)**.

The proposal document must be typed in MS Word using font size 12 “Times New Roman”. All proposal pages must have 2.5 cm margins at the top, bottom and on each side. Line spacing must be 1.5.

# 3. PROPOSAL PROCESSING AND REVIEW FOR THE COVID-19 GRANT

Proposals received by the Research Promotion and Development Unit (RPD) of SID/EMRO are immediately allotted a unique Grant Proposal Number which is referred to in all subsequent communications.

## 3.1 **Review Process**

The review process is carried out in two steps, i.e. initial screening followed by final selection review.

## 3.1.1 **Initial Screening**

All proposals received before the deadline and considered complete in all respects are carefully reviewed by WHO/EMRO experts. We may contact the PI for further information. All proposals short-listed in the initial screening are provided to the Selection Committee for the final selection.

## 3.1.2 **Final Selection (Technical and Scientific Review)**

A Selection Committee formulated by WHO/EMRO will carry out the final selection review. The selection procedures usually consider the following:

* Merit of the proposal addressing a research area specified in this call for proposals with a clear national / regional perspective
* Observing gender, equity and human rights
* Applying quantitative / qualitative methodologies, as appropriate
* Observing ethical standards in research involving human subjects
* Outlining clear results’ dissemination plan
* Multi-disciplinarily team composition
* Expertise / track record of the team of investigators
* Expected impact of the research outcomes on national and/or regional health profile

The proposals will be recommended for funding during the final meeting of the WHO/EMRO Selection Committee, the decision of which is considered final.

## 3.1.3 **Award Recommendation**

Based on the recommendations of the WHO/EMRO Selection Committee it is decided whether a proposal should be recommended / declined for an award. The entire review and selection process usually takes 2-4 months from the closing date for receiving proposals.

## 3.2 **Condition of a Compulsory Agreement**

The PI(s) of the recommended proposals for funding are required to sign an agreement with WHO/EMRO before receiving the award (please see Section 4 for agreement conditions).

Applicants are informed that only WHO/EMRO may make commitments, awards or authorize the expenditure of funds. An institution / PI providing financial / personnel commitments, in the absence of an agreement, would be doing so at own risk.

The timeline for this small grant scheme is from signing of the contract to submission of final report/draft manuscript is 3-6 months.

# 4. GENERAL CONDITIONS RELATING TO THE AGREEMENT CONCERNING COVID-19 GRANT

The following are general conditions which become effective if an agreement is signed between WHO/EMRO and the Institution of a PI whose proposal is recommended for funding by the Grant. Applicants to the Grant are strongly advised to read these conditions before submitting a proposal, as in case their proposal is recommended for funding and their respective Institution signs an Agreement with WHO/EMRO, they will have to strictly abide by these conditions.

## 4.**1 Principal Investigator and His / Her Employer Organization/ Institution**

1. The Organization/Institution and the Principal Investigator (or Responsible Technical Officer), who must be an employee at the Organization/Institution, shall be jointly responsible for all the technical and administrative aspects of the work referred to in the proposal.
2. The Organization/Institution is required to notify WHO/EMRO immediately of knowledge that the Principal Investigator will cease or ceases to be an employee of the Institution or is no longer continuing the responsibilities described in the proposal. Under such circumstances WHO/EMRO has the right to:
3. Cancel the funding or
4. Agree to continue the project under a new Principal Investigator proposed by the Organization/Institution and approved by WHO/EMRO.

## 4.2 **Financial Arrangements**

Payments shall be made into the bank account(s) of the Organization/Institution as specified in the Agreement and in accordance with the schedule of payments contained therein. The funds allocated to this agreement may not be used to cover any item that is not mentioned in the budget section of the application form and shall be expended only in accordance with its terms. In the event of this Agreement being cancelled under any circumstances, the Institution shall refund to WHO the balance of uncommitted funds.

## 4.3 **Relationship and Responsibility of Parties**

The relationship of the Organization/Institution to WHO/EMRO shall be that of an independent contractor. The employees of the Organization/Institution are not entitled to describe themselves as staff members of WHO/EMRO. The Organization/Institution shall be solely responsible for the manner in which work on the project is carried out and accordingly shall assume full liability for any damage arising from research or other technical services under this Agreement.

## 4.4 **Equipment and Supplies**

Unless otherwise agreed, and subject to subparagraph below, any equipment acquired under this Agreement shall become the property of the Organization/Institution. The Organization/Institution and the Principal Investigator shall be jointly responsible for the proper safeguard, maintenance and care of all equipment acquired under this Agreement.

## 4.5 **Reports, Use of Results, Exploitation of Right and Publication**

1. The Institution or Principal Investigator shall correspond with RPD/SID/EMRO for any follow-up, submission of reports, requests for further release of funds, and any other technical matters.
2. The Principal Investigator shall submit technical and financial reports to WHO/EMRO in accordance with the following provisions:

* Technical reports shall be forwarded through and countersigned by the authorized official of the Institution or his/her authorized representative. ***The day the amount of the first installment of the fund is received by the Principal Investigator, it will be considered as the starting date of the project.***
* Immediately after the first 3-months of starting the project, a ***progress report*** should be submitted according to EMRO format of progress reports.
* Before the expiry date of the project, ***a manuscript for consideration for publication and a final financial report*** should be submitted according to EMRO format of final reports.
* Fiscal reports should be forwarded to WHO/EMRO after being jointly certified by the Institution's chief technical officer and the Principal Investigator.
* All financial and technical reports are subject to audit by WHO/EMRO, including examination of supporting documentation and relevant accounting entries in the Institution’s books. The final technical and financial reports must be submitted before the expiry date of the project.
* The results of the project may be freely used or disclosed provided that, without the consent of WHO/EMRO, no use may be made for commercial purposes and confidentiality shall be maintained with respect to results that may be eligible for protection by property rights. The Institution shall provide WHO/EMRO with the results, in the form of relevant know-how and other information, and to the extent feasible tangible products.
* The industrial or commercial exploitation of any intellectual property rights, including the ownership of know-how, arising from the project shall be designed to achieve, in so far as circumstances permit, the following objectives in the following order of priority:
  + 1. the general availability of the products of creative activity;
    2. the availability of those products to the public health sector on preferential terms, particularly to developing countries.
* In any publication by the Institution or the Principal Investigator relating to the results of the project, the responsibility for the direction of the work shall not be ascribed to WHO/EMRO. ***All publications should include an acknowledgement note indicating that the underlying investigation received financial support from WHO/EMRO under the COVID-19 grant scheme, with reference to the project number.*** TWO reprints or copies of each publication should be sent to EMRO/SID/RPD.

## 4.6. **Research Involving Human Subjects**

1. **Ethical Aspects:** It is the responsibility of the Institution and the Principal Investigator to safeguard the rights and welfare of human subjects involved in research supported in whole or in part by funds from the COVID-19 Grant, in accordance with the appropriate national code of ethics or legislation, if any, and in the absence thereof, the Helsinki Declaration and any subsequent amendments. Such funds may be used only to support investigation where:
   1. The rights and welfare of subjects involved in the research are adequately protected,
   2. Freely given informed consent by participants has been obtained,
   3. An ethical clearance is provided to the project by a local / national research ethics review committee and
   4. Any special national requirements have been met.
2. **Protection of Subjects:** Without prejudice to obligations under applicable laws, the Institution shall make appropriate arrangements to eliminate or mitigate the consequences to subjects or their families in the case of death, injury or illness resulting from the conduct of research.

## 4.7 **Publicity**

The Institution and the Principal Investigator shall not refer to the relationship of WHO/EMRO to the project or to products or processes connected with the project, in any statement or material of a publicity or promotional nature issued for commercial purposes, or with a view to financial benefit.

## 4.8 **Litigation and Liabilities**

WHO/EMRO will not be responsible for any litigation or liabilities that may stem from views and conclusions of the study by the Institution or the Principal Investigator.

# PRIORITY AREAS FOR COVID-19 GRANTS 2022

# Emergency Preparedness and Response

# Effective public health response at points of entry and innovative cross border collaboration during COVID-19 pandemic

# Impact of Public Health Emergency Operations Center (PHEOC) in coordination of COVID-19 response in EMR; operational challenges for COVID-19 response

# Role(s) of health security and Incident Management System during the COVID-19 pandemic and beyond

# Leveraging the COVID-19 response capacities to enhance the preparedness and response for other high-pathogens in EMR

# Rapid Review of M&E systems and their robustness for monitoring emergency response during the COVID-19 pandemic

* Monitoring the SARS-COV-2 integration into influenza surveillance and other emerging respiratory diseases

# Review effect of the COVID-19 pandemic on implementation of Public Health Information Services (PHIS) in emergency countries

# Documenting lessons learned and best practices for the COVID-19 pandemic response in PIP supported countries in EMR

**Health Systems and Services**

* Influence of COVID-19 on the transformation of health professionals’ education towards the use of digital technologies, including challenges faced and coping strategies during the transition and transformation
* Role of PHC in COVID-19 in EMR and how it could be strengthened by building resilient PHC at national and sub-national levels

**Noncommunicable diseases / Mental Health**

# Digital health interventions, including telemedicine, to support self-care management for NCDs in EMR countries

# Current EMR responses on provision of NCD services during COVID-19 pandemic in humanitarian settings

# Effective strategies to mitigate mental health impacts of the COVID-19 pandemic, including on the health workforce

**Science, Information and Dissemination**

* Measuring excess mortality during COVID-19 pandemic according to different causes (direct and indirect) – enhancing/applying methods
* Mapping and critical review guidelines developed, updated and adapted related to COVID-19

# Critical assessment of cost, impact and challenges of using digital health in response to COVID-19 pandemic at national level

# Innovative ways to enhance health information systems to respond to the needs identified during Covid-19 pandemic

# Healthier Populations

# Health impacts of healthcare waste management practices during infectious outbreaks with focus on the COVID-19 pandemic

# Occupational health impacts on teleworking workers during the COVID-19 Pandemic

# Direct and indirect effects of COVID-19 pandemic on newborn/child/adolescent health status and services

# DEADLINE FOR SUBMISSION OF PROPOSALS

**The deadline****for submission of proposals is 15 June 2022.** Proposals received after the deadline shall not be considered in this round. Applicants should allow 1-2 months for review and processing.

**The completed Application Package for the Eastern Mediterranean Regional Office Special Grant for Research in Priority Areas of Public Health 2022 (as described under section “10”) should be mailed to:**

Coordinator, Research and Innovation

Science, Information, and Dissemination

World Health Organization

Regional Office for the Eastern Mediterranean

Abdel Razzak Al Sanhouri Street

Nasr City, PO Box 7608, Cairo 1137, Egypt

Fax: (+202) 2670 24 92/94; (+202) 2276 54 20

E-mail: [emrgorpd@who.int](mailto:emrgorpd@who.int)

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| --- | --- | --- | --- | --- |
| COVER SHEET OF APPLICATION FORM | | | | |
|  | | | | |
| **SHADED AREA FOR OFFICIAL USE ONLY** | | | | |
| DATE RECEIVED (dd/mm/yy) | | | WHO/EMRO PROPOSAL ID NUMBER  **RPD/COVID Research 22/**…………….. | |
| NAME OF COUNTRY OF APPLICANT | | | | HAS THIS PROPOSAL BEEN SUBMITTED TO ANOTHER AGENCY FOR FUNDING  YES  NO |
| NAME OF ORGANIZATION/INSTITUTION | | | | IF YES, WRITE NAME OF AGENCY WITH ACRONYM |
|  |
| TITLE OF PROPOSAL (120 characters maximum): | | | | |
| WHAT IS THE PRIORITY AREA ADDRESSED BY THIS PROPOSAL?  Communicable Disease Prevention and Control  Non-Communicable Diseases & Mental Health  Health Protection and Promotion  Health System Development  Emergency Preparedness and Response  Please indicate the detailed priority area (from section 5): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **NAME OF PRINCIPAL INVESTIGATOR (PI)** | | | | |
| **LAST NAME:** | FIRST NAME(S): | | | |
| TITLE: | | | | |
| POSTAL ADDRESS: | | | | |
| TEL . MOBILE: FAX: | | | | |
| E-MAIL 1: E-MAIL 2: | | | | |
| **NAME OF PI’s INSTITUTIONAL HEAD:** | | | | |
| TITLE | | | | |
| ADDRESS | | | | |
| TEL . MOBILE: FAX: | | | | |
| E-MAIL 1: E-MAIL 2: | | | | |
| UNIVERSITY  GOVERNMENTAL ORGANIZATION  NON-GOVERNMENTAL ORGANIZATION  OTHER | | | | |
| REQUESTED AMOUNT (USD …………) | | PROPOSED DURATION (9 MONTHS MAX):……….. | | |
| SIGNATURE OF THE PRINCIPAL INVESTIGATOR | | SIGNATURE (AND STAMP) OF INSTITUTIONAL HEAD | | |
| NAME & DATE: | | NAME & DATE: | | |

|  |  |
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| **1. PROPOSAL SUMMARY**  Please provide one page executive summary, **up to 500 words**. The summary should include (i) rationale (ii) objectives, (iii) methods, (iv) expected outcomes (national / regional perspective) | |
| **2. BACKGROUND**  Please provide a **2-page background**. Background includes literature review of previous studies on the subject (global / regional / national), stating its public health importance and rationale of proposing the study this time at this place on this population, considering gender, equity and human rights (please quote references using a standardized citation style) | |
| **3. OBJECTIVES**  **3.1 General objective**: the overall aim expected to be achieved from this research  **3.2 Specific objectives**: 2-3 clearly stated SMART specific objectives (specific, measurable, achievable, relevant to EMR, time-bound), which break-down the general objective  1.  2.  3. |

|  |
| --- |
| **4. METHODOLOGY**  An appropriate clear description of activities and information on the general plan of work should be provided here. The methodology section should describe;  **4.1 Study design** (observational / experimental, mentioning specific type, accordingly)  **4.2 Study setting / data sources** (clearly indicating where the study will be conducted: country, city, institution(s), department(s), etc.). This includes settings for primary data  collection, and specific sources of secondary data (e.g. medical records; health registers; insurance registers; national census records, etc.)  **4.3 Study population** (study subjects and their respective characteristics)  **4.4 Sample size** (sample size assumptions / estimate)  **4.5 Sampling method** (method to be used to select subjects ensuring a representative sample of the target population; inclusion and exclusion criteria)  **4.6 Data collection** (data collection method(s) and tool(s) as appropriate: ***data collection tool(s) to be annexed to the proposal*** but sections / variables described under this section; focus group/interview guidelines; checklists; anthropometric measurements (e.g. weight, height, circumference, BMI, WHR, etc.) with reference to measurement / estimation method; biological measurements (laboratory investigations with reference to measurement / estimation method / kit); relevant definitions of exposure(s) and outcome(s) as appropriate to proposal; background / number of data collectors, etc.  **4.7 Data management plan** (A clear plan of data coding, entry, cleaning, and analysis to be used, considering disaggregation of collected data by sex, age and socio-economic quintiles. Please mention specific statistical tests and references software)  **4.8 Coordination, monitoring and quality control** (plan for field work supervision to ensure proper / scientific data collection, data management, quality control indicators, etc.)    **4.9 Ethical considerations:**  All research proposals submitted for the COVID-19 Research Grant must adhere to ethical conduct of research on human subjects. This commitment will be ensured by the WHO/EMRO Selection Committee. The PIs are required to obtain clearance from an official Ethical Review Committee / Institutional Review Board ***before*** submitting the proposal, which is a ***condition*** for consideration for funding. Litigation involving human research must be accompanied by: (a) copy of ethical clearance certification and (b) the informed consent documents (in English and local language).  *Please describe your proposal:*  1. Does this research involve human subjects?  Yes € No €  2. If yes, have you received an ethical approval for this research?  Yes € No €  3. Is there a research ethics committee or institutional review board at your institution which reviews research on human subjects?  Yes € No €  4. If yes, has this committee given ethical approval for the conduct of this research?   1. Yes € No €   5. Will you ensure that confidentiality of collected information (e.g. medical records, biological samples) obtained from subjects be protected in this research?   1. Yes € No €   6. Have you received any training on ethics of biomedical research?   1. Yes € No € |

**5. TIME FRAME OF PROPOSED ACTIVITIES** (Gantt chart) as applicable to your proposal

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Activity | **1st QUARTER** | | | **2nd QUARTER** | | |
| M1 | M2 | M3 | M4 | M5 | M6 |
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| ***Submission of the interim technical report\**** |  |  | *X* |  |  |  |
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| ***Submission of the manuscript for consideration for publication and final financial report\**** |  |  |  |  |  |  |

\*mandatory

**6. BENEFICIARIES OF RESEARCH RESULTS** (who are the direct / indirect beneficiaries of the study, what are the benefits both groups [direct / indirect] are likely to accrue in the short or long term)

|  |
| --- |
| **8. REFERENCES CITED**  Any references cited should be listed here, using standardized citation style (e.g. Vancouver Style). This includes citations for scientific papers, books, reports, laboratory methods, standardized questionnaires / check-lists, biostatistical software, etc. References should be listed in numerical ascending order with corresponding citations in the text, marked as shown [#].  Examples of citing references in this section are given below:   * Journal articles should start with name of author (with suffix et al, if more than six authors), followed by title of study, name of journal, volume, page numbers and **year** of publication (in bold at the end). * Books should start with the title, followed by Editors, Publishers, and **year** of publication (in bold at the end). * Reports should start with title, followed by name of writer, reference to organization for which it was written, reference number of report if any and **year** of reporting (in bold at the end) |

**9. PROPOSAL BUDGET WITH JUSTIFICATIONS**

Budget breakdown should be provided in a tabular format, as shown below, with the full term of requested budget from EMRPPH Grant. The award will range from **$ 8,000 - 10,000**. The breakdown should be restricted to 2 pages.

**Instructions for budget items:**

**i. Personnel**

WHO/EMRO expects that the PIs and Co-Investigators will be faculty / researchers at eligible institutes, with research as one of their normal functions. COVID-19 grant funds **may not be used to pay salary or augment the total or part of the salary** of PIs and Co-Investigators. Personnel costs therefore include compensation for data collectors, field workers, lab technicians, data managers, etc.

**ii. Material and Supplies**

The budget must indicate the general types of expendable materials and supplies required, with their estimated costs. The breakdown should be more detailed when the cost is substantial.

**iii. Equipment**

COVID-19 Grant does not support general purpose equipment, such as a personal computers, telephone sets, photocopying / facsimile machines etc.

**iv. Human Subjects**

The needs for requiring direct compensation of participants (which is not generally recommended) must be fully justified (e.g. transportation, hot meals, etc.)

**v. Travel**

Travel and its relation to the proposed activities must be specified and itemized by destination and cost. COVID-19 Grant does not support foreign travel (travel outside the Applicant’s country)

**vii. Field Work**

Funds may be requested for field work necessary for data collection other than the personnel cost.

**viii. Training**

Training expenses should be minimized to only specialized training needed for staff using related research equipment or improving research skills

**ix. Dissemination of Results**

The cost involved must be in accordance with the proposed dissemination plan such as local conferences, publications and dissemination workshops.

**x. Other Costs**

The budget must identify and itemize other anticipated costs not included under the headings above. Examples include telecommunications and photocopying. Reference books, periodicals and other scientific literature may be charged to the Grant only if they are specifically required for the project.

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| --- | --- | --- | --- | --- |
| **OUTLINE OF THE BUDGET (in USD)** | | | | |
| **Total Amount Requested: US $:** | | | | |
| **Budget Breakdown** | | | | |
| **No** | **ITEM OR ACTIVITY** | **Amount Requested from EMRO Grant** | **Amount available from other Sources** | **JUSTIFICATION** |
| 1. | Personnel\*  -  - |  |  |  |
| 2. | Materials & Supplies  -  - |  |  |  |
| 3. | Equipment  -  - |  |  |  |
| 4. | Local Travel  -  - |  |  |  |
| 5. | Field work  -  - |  |  |  |
| 6. | Training  -  - |  |  |  |
| 7. | Dissemination of results\*\*  -  - |  |  |  |
| 8. | Other Costs\*\*\*  -  -  - |  |  |  |
|  | Total US $ |  |  |  |

**\*Up to 20 % of total budget; \*\*Up to 10 % of total budget; \*\*\*Up to 5 % of total budget**

**10. APPENDICES**

Please provide as appendices:

* Data collection form(s)
* Research ethics checklist for principal investigators
* Informed consent forms (in English and local language)
* National/institutional ethical approval
* CVs of investigators

1. WHO COVID 19 dashboard. Available at: <https://covid19.who.int/> [↑](#footnote-ref-1)
2. WHO EMRO IMST Health Information/ Surveillance. April, 2022. [↑](#footnote-ref-2)