

# Global Health Research Consortiums: When is it Time to Transition to Direct Funding?

Alyson Shumays<sup>1</sup>, Sonia Rao<sup>1</sup>, Ann Van Haney<sup>2</sup>, Hannah Atlas<sup>1</sup>, Patricia Pavlinac<sup>1</sup>, Kirsten Vannice<sup>3</sup>

<sup>1</sup>Department of Global Health, University of Washington, Seattle, USA; <sup>2</sup>Division of Infectious Diseases and Geographic Medicine, Stanford University, CA, USA; <sup>3</sup>Enterics, Diagnostics, Genomics & Epidemiology, The Bill & Melinda Gates Foundation, Seattle, USA

## Background

- The Enterics for Global Health (EFGH) Research Consortium aims to establish the incidence and consequences of *Shigella* diarrhea in 7 high burden countries.
- EFGH governance includes investigators from 7 country sites and local institutions, partner institutions in the United States and United Kingdom, and is coordinated by the University of Washington (Figure 1).
- Bi-annual survey to identify partner priorities for operational and administrative needs highlighted the desire of many low- and middle-income country (LMIC)-based institutions to receive direct funding from study funders, instead of through subawards from coordinating-bodies (usually based in the US or UK/Europe).
- EFGH Coordination team conducted an assessment of interest and readiness to receive direct funding as part of this and future research consortiums.

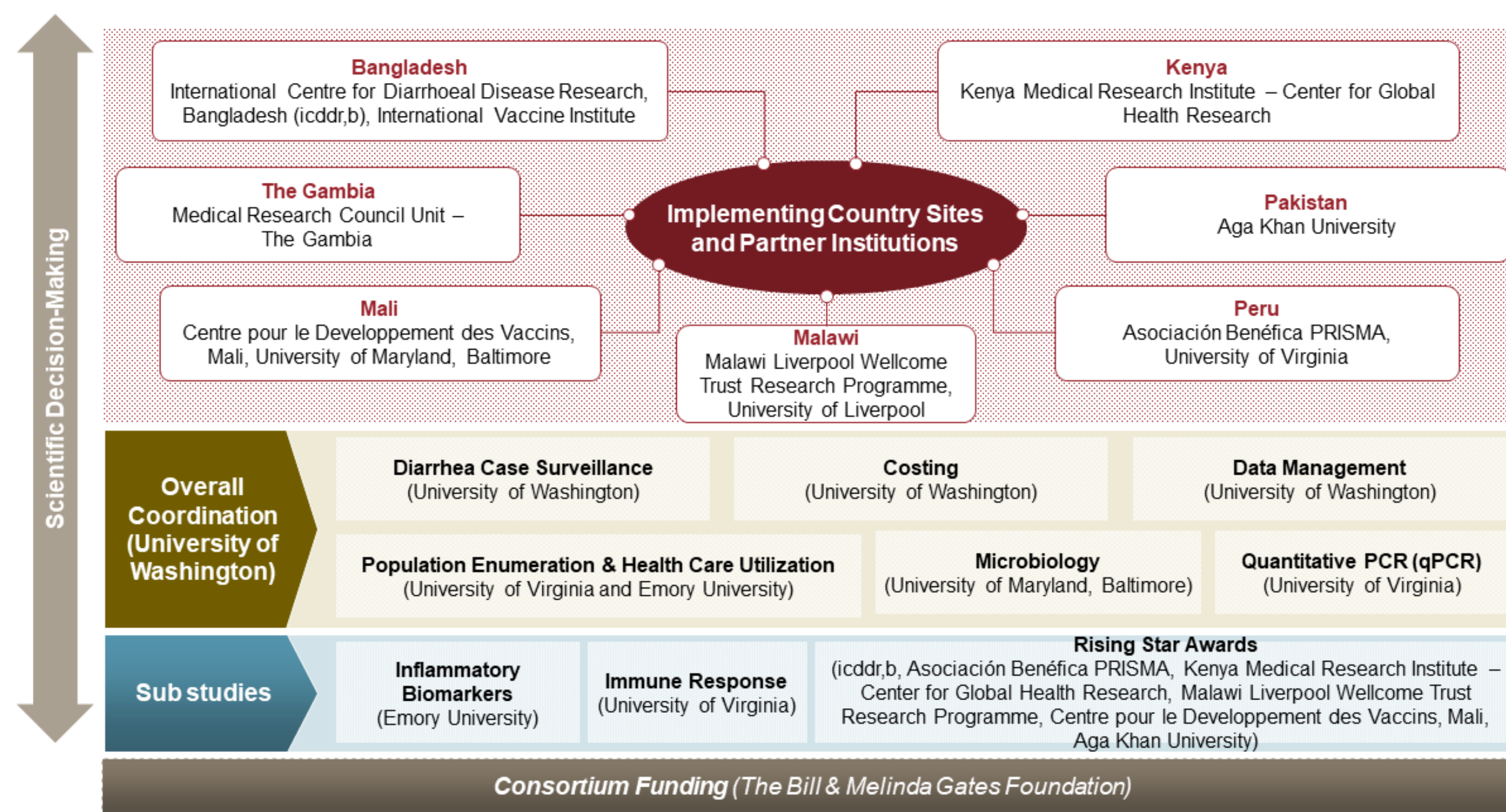
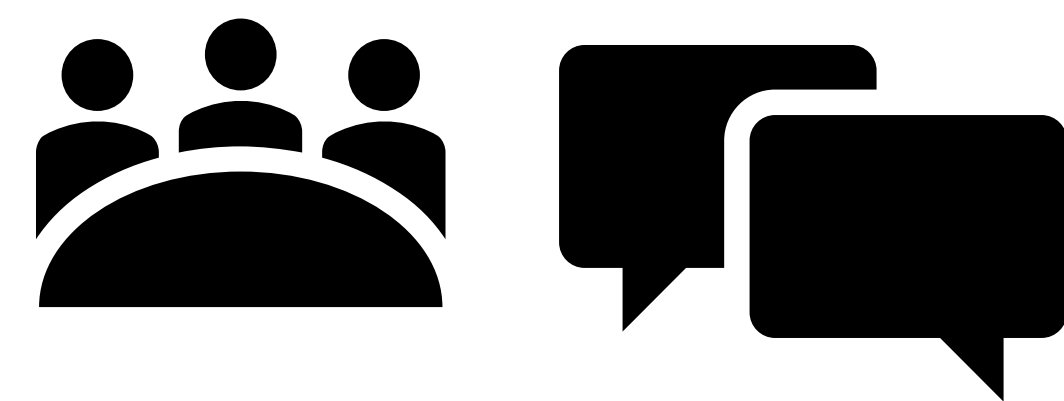


Figure 1. EFGH Consortium Structure

## Methods

- Interviews were conducted in-person or virtually with grant administrators in Malawi, Kenya, The Gambia, Mali and Peru (and separately with US/UK partner institutions if applicable) to understand:
  - organization history,
  - current administrative structure,
  - financial policies and procedures,
  - other funding sources and
  - preferences for future funding.
- As part of EFGH, two country sites (Pakistan and Bangladesh) already receive direct funding and were not included in the interviews.
- Anonymized results from interviews were shared among EFGH investigators and the funder to solicit group reactions/ input on key questions:
  - What are the key aspects of equitable research consortiums?
  - How do we build equitable research consortiums while maintaining the benefits of centralized coordination?
- Final report will be shared with funder and with the EFGH Consortium.



## Findings

- All respondents stated a preference for direct funding and view it as an opportunity to strengthen institutional financial management capacity and systems.
- Direct funding to LMIC research sites is a way to redefine funding pathways and financial decision-making and strengthen local institutions' administrative leadership, moving towards changes in global health research power dynamics (Figure 2).
- Direct funding can also lead to career advancement for investigators.
- Some institutions are not legally set up to receive direct funds from multiple sources.
- Funders may require additional bandwidth to manage progress reporting from several institutions.
- In multi-site studies, even with direct funding, there is a need for a coordinating body to standardize protocols & data systems, promote consensus building on key scientific decisions and manage consortium operations such as authorship, supply procurement (if applicable), communication, and accountability for outputs.

### Challenges with direct funding

- Some funders do not provide advanced funding which can be problematic for institutions who do not have funds on hand to advance
- Legal status of institution
- Supply chain and procurement - high import fees and taxes, supply availability
- Maintaining benefits of consortium model (Figure 3)
- Need for research administration strengthening
- Variability in burn-rate leading to variability in study timelines
- Budget equity in the context of variable funding flows and management
- High burden of reporting/ possible duplicative output reporting

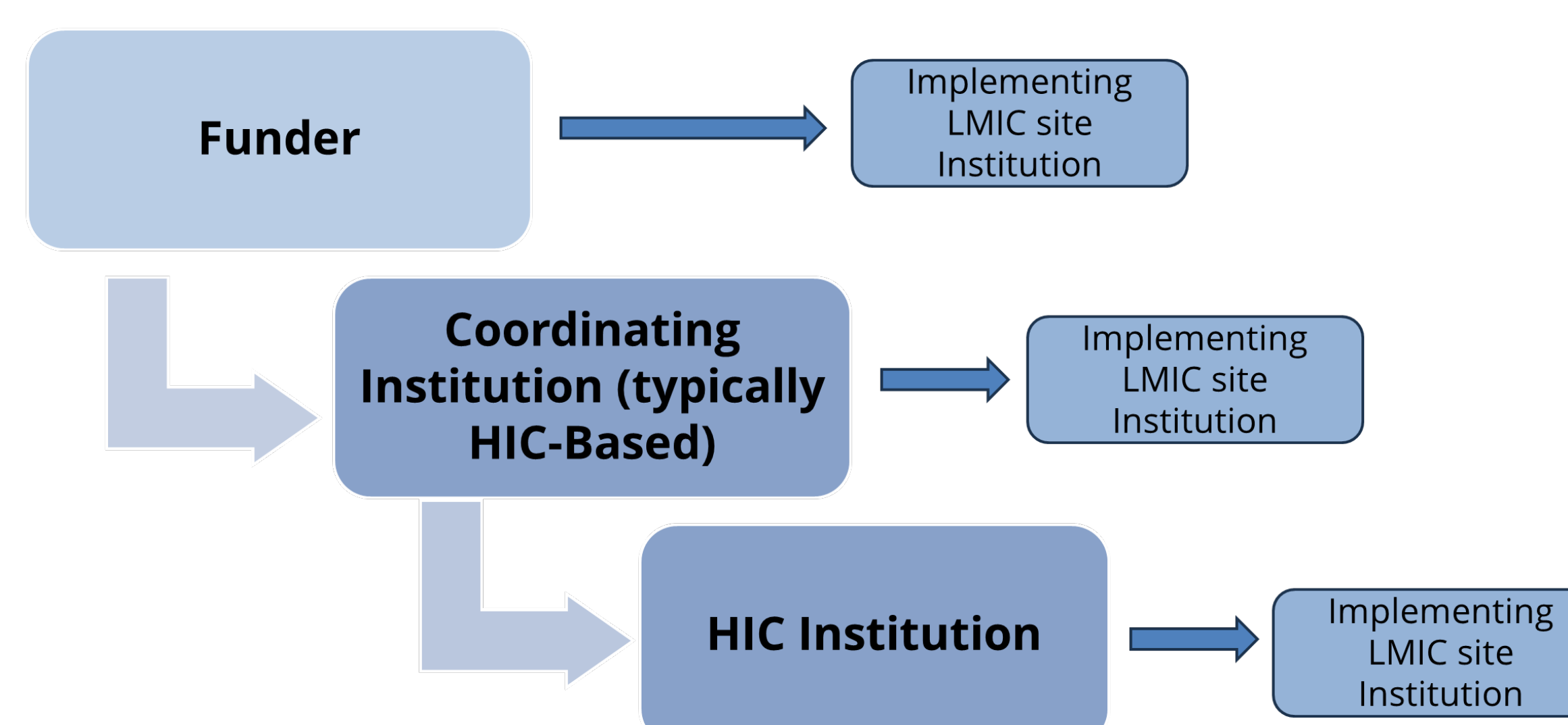


Figure 2. Typical indirect and direct funding flows for Consortium studies being implemented in LMIC settings

- In discussions of direct funding, teams raised benefits and challenges of Consortium models, summarized below (Figure 3).

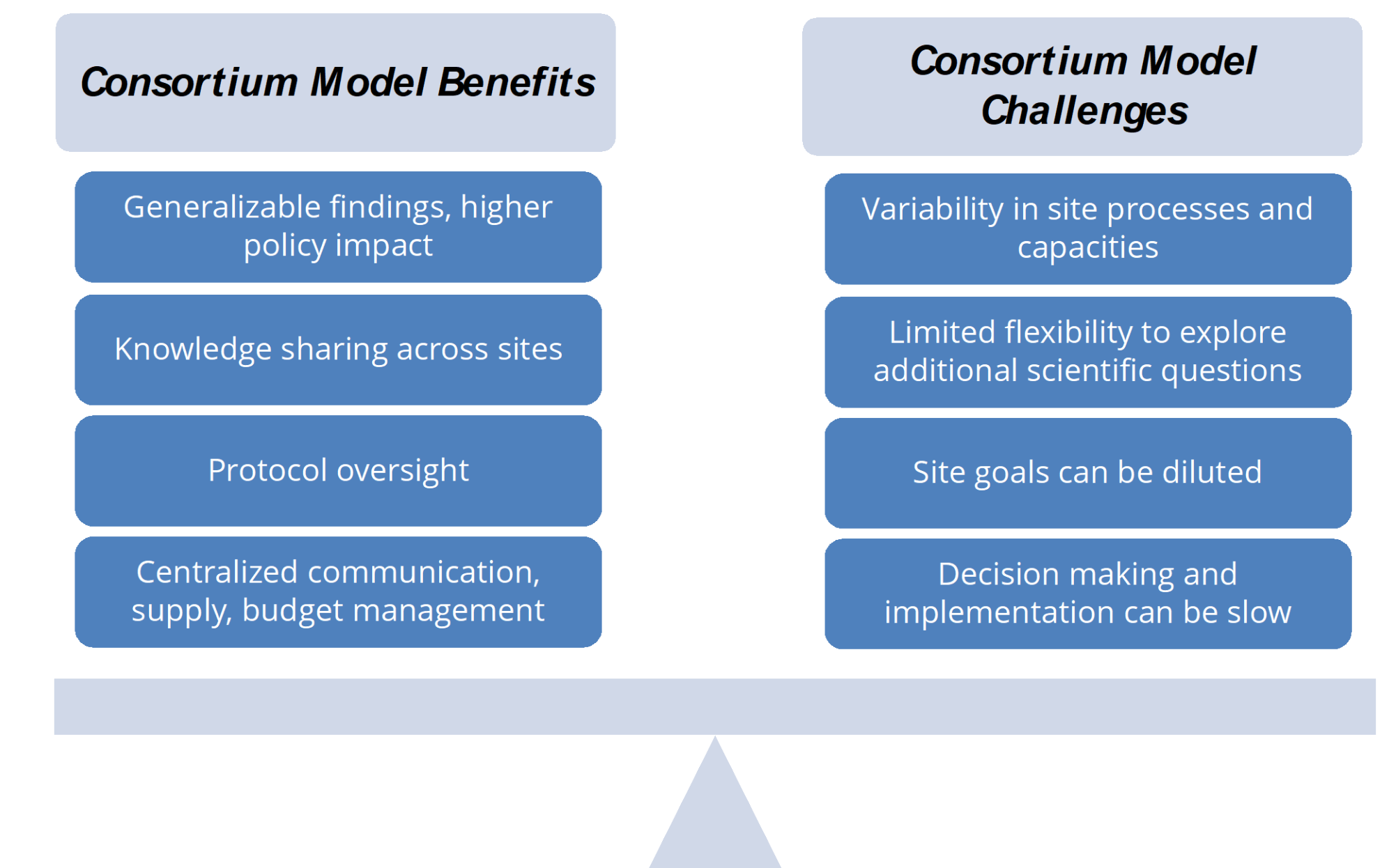


Figure 3. Consortium model benefits and challenges

- Key components of equitable Consortium models identified in key informant interviews included:
  - Bi-directional communication and feedback mechanisms
  - High impact science with quality research outputs
  - Intentional, inclusive and participatory decision-making and processes
  - Commitment to equitable and transparent partnerships

## Next Steps

Direct funding within research consortiums should be paired with clear governance models, tailored capacity building, and project and grant management support, as necessary.

### Opportunities with direct funding

- Further capacity building across all departments
- Direct involvement of local grants team with funder
- Improved grant agreement negotiation processes
- Removal of administrative layers and indirect costs

### Considerations:

- Small sub-awards from coordinating body to directly funded sites to maintain funding channel.
- Separate funding to coordinating body for coordination activities.
- Memorandum of understanding between coordinating body and directly funded sites.
- Research administration and grant management capacity building is essential.