

2015 PAHO/TDR Small Grant Programme

Introduction

The Special Programme for Research and Training in Tropical Diseases (TDR), promotes and supports research on infectious diseases of poverty that leads to health improvement. It also helps to strengthen individual and institutional research capacity in developing countries. Translating research results into policy and practice, and engaging individuals and communities in using research evidence to reduce the disease burden in their respective countries, are key components.

The Small Grants Programme is a joint initiative of TDR and the Pan American Health Organization (PAHO) in place since 1995. The goal of the research proposal funded under this call is to develop operational strategies that integrate and deliver joint interventions to control or eliminate infectious diseases of poverty listed below. Projects should incorporate implementation/operational research and research capacity strengthening, and research which includes co-morbidity of infectious diseases with non-communicable diseases is encouraged.

Priority areas for support:

Tuberculosis	Evaluate new tools for diagnosis and treatment of tuberculosis (e.g. rapid diagnostic tests, new drugs, shorter regimens, etc.)
	Develop strategies to integrate and deliver joint TB/HIV interventions, including antiretrovirals, at the first level of health sector level, to TB/HIV co-infected patients.
	Create innovative operational strategies/models for active and enhanced tuberculosis case detection, including co-infections with other diseases/conditions (e.g. TB/HIV; TB/diabetes, TB/ mental health, TB/alcoholism, TB/tobacco smoking).
	Evaluate new models/interventions for implementation of ambulatory multi-drug resistant TB (MDR-TB).
	Develop system for MDR-TB contact tracing and prevention treatment.
	Operational strategies to shorten the time from disease onset to diagnosis and treatment, which is crucial in decreasing transmission
	Develop studies of inequity and inequality in TB and linked to gender
	Development and implementation of models/interventions on social protection, health insurance and social inclusion for people with TB and their families.
	Evaluate specific TB interventions in vulnerable populations such as indigenous, afro-descendent, homeless, inmates, children and other
Malaria control and	Develop epidemiological surveillance formulary and data base information systems, including standards of operation for the use of the data collection system. This could include better traveling history, molecular classification of parasites, details of treatment success and follow up, contact tracing and e-Health procedures –

elimination	use of cell phones, internet, tablets.
	Develop effective and feasible strategies for ensuring quality case management and engagement in case reporting in endemic areas.
	Develop effective and feasible strategies to engage the community for malaria control and elimination.
	Develop strategies for identifying and providing services, including vector control, in support of malaria elimination among mobile and remote groups.
	Develop evidence on appropriate use of Mass screening and treatment (MSAT) particularly in Haiti
	Develop evidence on appropriate Focalized screening and treatment (FSAT) particularly in Haiti.
Neglected infectious diseases	Conduct epidemiological and entomological study of visceral leishmaniasis at the border area of Bolivia and Brazil.
	Produce training on leishmaniasis diagnostic to strengthen institutional capacity on parasitology and molecular biology
	Evaluate vector control strategies of leishmaniasis by chemical control and/or environmental management.
	Document historic and current geographic distribution and prevalence of <i>Strongyloides stercoralis</i> in the Latin American and the Caribbean Countries (LAC), with experiences in its prevention, treatment and control, and its estimated impact on human health in the LAC region.
	Develop or use sensitive transmission assessment techniques (individual or combined) for the verification of the interruption of transmission of human schistosomiasis (<i>S. mansoni</i>) and/or filarial infections (lymphatic filariasis and human onchocerciasis) in former geographic foci in the Americas that are now controlled. These techniques may be applied to human populations or other hosts (insect vectors, snails), or water sources which the vector uses.
	Develop historical and current geographical distribution of the invasive African land snail, <i>Achatina fulica</i> , in the

	LAC, being the intermediate host and vector of the rat lungworm <i>Angiostrongylus contonensis</i> , and its impact on human health in the LAC region.
	Develop strategies to increase the active search and early case detection of leprosy.
	Conduct operational research on ways of identifying appropriate groups of leprosy contacts for counseling, examination and treatment (when necessary), possibly in conjunction with chemoprophylaxis.
	Pilot projects implementing leprosy chemoprophylaxis under routine programme conditions to assess acceptability, cost-effectiveness, feasibility, and ethical issues.
	Develop new or improved strategies for increasing the adherence to treatment and the cure rates of leprosy patients.
	Develop strategies to reduce stigma and discrimination of people with leprosy and family members.

Eligibility criteria: Health care workers and researchers are eligible to apply for this grant, including those working in the communicable disease control programmes embedded within ministries of health, academic institutions, research institutes; non-governmental organizations (including professional societies and civil service organizations involved in tropical disease research activities).

Applications from qualified young researchers, female researchers and under-represented countries are strongly encouraged.

Selection process: Proposals will be selected on a competitive basis by external reviewers and WHO staff in PAHO and TDR. Scoring will depend on scientific merit and public health impact of the project. The publications resulting from the supported projects and data will follow the open-access policy, and should clearly refer to the PAHO/TDR Small Grant Programme support and indicate grant number.

Funds: Up to US\$ 15 000 per grant. Co-funding from domestic or other sources is encouraged.

Study duration: one year

TDR Small Grant Application Form – [PDF Version](#)

TDR Small Grant Application Form – [Word Version](#)

Formulario de solicitud de pequeñas subvenciones del TDR – [Versión PDF](#)

Formulario de solicitud de pequeñas subvenciones del TDR – [Versión Word](#)

Application deadline: 15 March 2015.

How to submit the application: The completed application form should be signed by all investigators and submitted by e-mail to **PAHO-TDR focal point & Regional Advisor on Communicable Diseases Research:** Dr Zaida Yadon : yadonzai@paho.org