



## **Wellcome Trust Mental Health Priority Area Request for Proposals on Core Components: Response to queries raised in Expressions of Interest and Next Steps**

This document is being emailed to all those who submitted an Expression of Interest (EOI). A copy will also be posted on our [website](#) alongside application guidance, key deadlines and evaluation criteria. All those who submitted an EOI are eligible to put in a full proposal.

Below we lay out:

- A) Response to queries raised
- B) Next steps

### **A) Response to queries raised**

We have grouped the queries raised into 12 questions, so your specific query should be answered by one or more of the answers below. Please see 'Next steps' if you feel your query has not been addressed.

#### **1) Can I submit more than one proposal?**

You may be the named Lead on only one proposal but may collaborate on as many as you wish. Each project should have only one Lead (no co-Leads).

#### **2) Can we include more than three people on the proposal?**

Given the scope of the commission you are limited to three named applicants to keep the reviewing process manageable and focused. If a known early career researcher (e.g. PhD student, postdoc) will carry out the bulk of the work, we encourage them to be named on the proposal where possible, and as Lead where appropriate. This does not apply to cases where you plan to recruit a new staff member if successful (e.g. RA assistance). You may collaborate with colleagues who are not named on the proposal, and their time may be costed in a consulting capacity. Named applicants may change between the Expression of Interest and Full Proposal stages and may be drawn from different institutions and organisations.

#### **3) What can be costed in the proposal?**

You may include any justifiable expense towards the production of your review and supporting material as laid out in the Request for Proposals (RFP). Illustrative examples include researcher time (whether named on the proposal or to be recruited if successful), consultancy fees (e.g. for lived experience experts, medical writers or colleagues from collaborating organisations), summer research assistance, admin assistance, software costs, library access (where services are immediately available but require payment), supporting video production, and modest travel costs (e.g. for interviews or meetings with collaborators). Out of scope would be costs not directly related to the production of the review or supporting materials, e.g. service delivery, overheads.

#### **4) Can we conduct primary research?**

Primary research is out of scope for this commission. This means applicants should not plan to include new primary data analysis. All data included in the final submission should be published and/or publicly available (this could range from information posted on a personal webpage to any literature in the public domain). Meta-analysis is within scope, but the applicant would need to justify the necessity of the approach as well as the ability to supply the proposed analysis within the timeframe. Expert commentary may be sought via interviews, e.g. to include the voice of lived experience, but formal qualitative or quantitative analysis is out of scope. It is fine to use multiple



methods of review, and to use 'non-academic' source material such as social media posts, as long as these are not being used as primary research.

**5) I am keen to include lived experience expertise: how can I do this?**

We strongly encourage this and are flexible as to how this is achieved. For example, you could include excerpts from interviews with those with lived experience, include lived experience experts on your team as co-researchers, or include a Patient and Public Involvement (PPI) consultation in your review methodology. Lived experience experts may either be named on the proposal or employed as consultants. In either case they may be eligible for authorship on the final review. If such expertise is to be included, the financial plan should include appropriate remuneration. We recognise that lived experience expertise could come from a range of individuals, including young people, parents and practitioners.

**6) If there are applications in similar research areas, is there scope to collaborate to provide richer insights and reduce replication?**

As outlined in the RFP, successful projects will be offered the opportunity to network and collaborate. However, we are unable to facilitate collaborations at the pre-selection stage. If you know of a group who proposed a similar idea you are welcome to collaborate on the full proposal. However, the proposal would still need to include only three applicants, and the maximum budget would be capped at £45k (exclusive of VAT) as per the RFP document. Please note that we are prepared to fund multiple proposals on similar topics, as different applications may bring different emphases, methodology or scope. Therefore, you are not necessarily at a disadvantage if others submit proposals in the same area.

**7) Can evidence from outside the 14-24 age range be included?**

Yes, provided it supports the efficacy of the core component, and in turn the core component can be shown to help those within the 14-24 age group. For example, you may wish to cite evidence from children or older adults, or from animal models of anxiety and depression. Conversely you may cite evidence relating to the 14-24 age group but discuss implications for this age group in the longer term. A range of evidence may be included (observational, experimental, intervention, qualitative).

**8) At the conclusion of the contract, will it be possible to publish the outcome review in a scientific journal?**

Yes, we are expecting submissions to be of publishable standard, and would strongly encourage submissions to be published. Submissions must be in written form in the format described in our guidance notes. However, you may also include supplementary material in alternative formats, e.g. video, audio. As outlined in the RFP, Wellcome will own the intellectual property created in this commission. Subject to us using the deliverables for our own purposes first, we're keen that it reaches as wide an audience as possible. We therefore expect any publication to be in line with Wellcome's [statement](#) on Open Access.

**9) Could we compare two or more core components?**

The purpose of the commission is to provide focus and so comparing two or more core components as a key aim would be out of scope. However, it is perfectly acceptable to bring in comparison where appropriate, e.g. 'previous best practice focused on X; however new evidence suggests Y'. It is also acceptable to discuss 'subcomponents' of a proposed core component.



**10) Should I focus on specific diagnoses or take a more general approach?**

It is up to you whether you focus in on anxiety or depression specifically or take a more transdiagnostic approach. Focusing on other related diagnoses such as PTSD is out of scope. However, you may wish to address why a specific core component may be particularly effective (or ineffective) in the presence of underlying trauma or co-occurring PTSD symptoms, for example.

**11) Can I focus on a specific subgroup (e.g. university students or looked-after youth) or geographical area?**

Yes, provided that the emphasis is still on the core component, and not on uniquely characterising a specific population. Discussing how a core component is relevant for a specific population is in scope as long as the population includes at least 10 million 14-24 year olds.

**12) Should the RFP include referencing, and if so, will this be included in the word count?**

Up to 50 references should be included, and references are not included in the word count.

**B) Next steps**

**Response to further queries**

We will publish one further round of responses to queries, so if you have any remaining queries, or if you feel your original query has not been fully addressed, please submit them to [mentalhealth@wellcome.ac.uk](mailto:mentalhealth@wellcome.ac.uk) by noon on Thursday 5 March and we will publish answers on Wednesday 11 March.

**Approach to selection**

We are looking to fund a wide range of high-quality proposals to reflect a diversity of approaches, foci and geography. We will be taking these factors into consideration when we make our funding decisions, choosing from all those who meet our quality standards as laid out in the RFP.