

Health and Science Research Request for Proposals (RFP)

TOPIC

Ending the Smoking Epidemic by Advancing Global Research for Innovative Smoking Cessation

Open Funding Announcement for Large-Scale Investigator-Initiated Applications

Issue date	Friday, November 22, 2024
Closing date	Friday, May 23, 2025
Closing time	12:00 PM – UK Time
Submit proposals to	See submission instructions in RFP
Financing instrument	Grant
Financing amount	Maximum of USD 2,500,000 total, amount consistent with proposal and work plan
Financing duration	Maximum of 24 months, consistent with proposal and work plan
Contact information	support@actiontoendsmoking.org

Background

Smoking cessation is a major public health challenge worldwide, despite significant progress made from tobacco control. Smoking is the leading cause of preventable death and disease, and 8 million people die each year from tobacco use.^[1] While smoking rates continue to decline overall in high-income countries (HICs), over one billion people still smoke cigarettes. Over 80 percent of the world's smokers live in low- and middle-income countries (LMICs) and smoking rates in LMICs are declining slower or even rising in some regions.^[1,2] Declines, like those seen in HICs, often mask disparities among marginalized populations who smoke more than the general population, including people of low socioeconomic status, people with mental health conditions or substance use disorders, sexual and gender minorities, and Indigenous peoples.^[3] The progress made in tobacco control has not yet benefited all, and as the tobacco landscape changes rapidly across countries, new research is needed to accelerate equitable smoking cessation.

Rigorous, interdisciplinary research was instrumental in the evolution of effective tobacco control interventions to help drive declines in smoking. Key international agreements, such as the World Health Organization's Framework Convention on Tobacco Control (FCTC) provide a blueprint for comprehensive measures that synergistically prevent initiation and promote cessation. These measures encompass evidence-based interventions such as tobacco tax increases, advertising bans, smoke-free environments, and comprehensive cessation services.^[4] Much of the effort in response to FCTC's recommendations has focused on high-impact policy interventions, while less effort has been dedicated to cessation services or dependence treatment.^[5,6]

Current smoking cessation services include cost-effective behavioral and pharmacological interventions such as nicotine replacement therapy (NRT), brief advice from health professionals, and Quitlines. While these services have helped some smokers quit, effects have been modest and few countries offer these services at 'best practice level,' especially LMICs.^[4,7,8] Even when services are available and accessible, many smokers across both LMICs and HICs do not use them to quit. Most adults in LMICs who attempt to quit do so without assistance.^[9] In the United States, where cessation services are more likely to be free, only 38% of smokers reported using behavioral counseling or NRT to quit.^[10]

New research is needed to (1) enhance existing tobacco control interventions at the population, community, and individual levels and (2) explore new approaches for cessation such as the role of reduced-risk products (RRPs) that contain nicotine (e.g., e-cigarettes, snus, nicotine pouches, heated tobacco products). A Cochrane systematic review concluded with high certainty that e-cigarettes are more effective than NRT to increase quit rates.^[11] Other credible evidence suggests e-cigarettes are significantly less harmful than traditional cigarettes, causing less than five percent of the harm from combusted tobacco.^[12] Despite an expanding evidence base, the use of RRP for smoking cessation remains a controversial and polarizing approach in both LMICs and HICs. New research is needed to respond to the urgent and intersectional needs of specific countries and marginalized populations.

Call for Proposals

Consistent with its charitable mission, Global Action to End Smoking (GA) seeks research grant proposals that aim to fill scientific gaps and identify new solutions that help individual smokers quit cigarettes. GA funds research on different approaches aimed at ending the global smoking epidemic, including research on both traditional evidence-based interventions as well as newer reduced-risk nicotine products for smokers who cannot or will not quit using traditional interventions. Additionally, if cessation interventions have historically been developed in HICs, there is a need for strong implementation research to examine the important and dynamic factors that influence successful adaptation of these interventions to the unique contexts of LMICs (e.g., cultural, political, social, economic, regulatory, tobacco-type product use). To support equitable public health benefits and to address unmet needs, GA encourages country-specific research in LMICs tailored to the needs of each country, as well as research for marginalized populations in HICs. A strategic goal of this Request for Proposals (RFP) is to add local and contextualized findings to the evidence base while also expanding research capacity to advance global efforts for smoking cessation.

Objective

In support of its charitable mission, GA invites research grant proposals for *Ending the Smoking Epidemic by Advancing Global Research for Innovative Smoking Cessation*. GA's strategic objective is to accelerate comprehensive, evidence-based global efforts to end the smoking epidemic, with a focus on LMICs and marginalized populations in HICs. GA funds research that relate to three purposes, which are articulated in GA's Certificate of Incorporation, Article Third. This RFP will provide grant funding opportunities for investigator-initiated applications that address GA's broad areas of interest in [Health and Science Research](#) and will be open for up to two years with posted submission deadlines on the [GA](#) website. See a companion RFP for Dissemination, Implementation, and Training grants ([DIT RFP](#)).

Proposals responsive to this RFP should fill scientific gaps in the evidence base related to tobacco use and smoking cessation through novel and non-duplicative research. This may include traditional cessation approaches, as well as the potential role of reduced-risk nicotine products. All proposals should have a rigorous research plan that clearly defines (a) a significant unsolved problem and (b) a corresponding research question that describes specific and measurable study aims. Applicants should demonstrate a sound approach to research methodology and explain why the proposed research has the potential to advance knowledge and public health practice. Proposals should be based on prior evidence and demonstrate a robust understanding of the published literature. GA will prioritize applications that demonstrate the capacity to generate valid and reliable results that can translate to real-world impact on public health. Applicants are expected to complete their suggested project within the stipulated period and have an appropriate plan for dissemination and communication of results.

This RFP is specifically designed for **large-scale**, population-level, or confirmatory studies with sufficient preliminary data to justify the study design, aims, and hypotheses. For studies smaller in scope/budget/duration, or for studies that lack sufficient preliminary data (e.g., pilot tests, hypothesis-generation, exploratory research), GA recommends investigators use the Small-Scale Developmental Research funding announcement found [here](#). Applicants who are unsure about what mechanism to use are encouraged to reach out to GA via the [support e-mail](#) function.

Proposals should align with GA's *broad* areas of interest related to tobacco and smoking cessation. Suggested topics include, **but are not limited to**, public health research areas covering various topics, such as:

- **Tobacco use, smoking cessation, and/or the potential impact of reduced-risk products on cessation and public health outcomes** (e.g., improving or tailoring behavioral interventions; local epidemiology and surveillance studies; population-based survey methodology; randomized controlled trials or observational cohorts for switching studies; real-world evidence generation)
- **Rigorous evaluation research to test the effectiveness of education and dissemination interventions** to correct misperceptions about nicotine relative to combusted tobacco, and accurately communicate the continuum of risk^[13] to stakeholders including people who smoke (e.g., mixed-method message testing; quasi-experimental or experimental designs for health communication campaigns; outcome evaluation of physician education programs)
- **Health systems change or health care delivery research specific to smoking cessation outcomes** (e.g., multilevel interventions within public health practice, community settings, clinics, or other health systems to improve or expand on cessation services; embedding cessation services within existing non-communicable disease programs)
- **Sociodemographic research about disparities in smoking prevalence and cessation outcomes in LMICs or HICs** (e.g., diverse research methods focused on groups disproportionately impacted by smoking including understudied or marginalized populations; vulnerable groups with higher failed quit attempts or limited access to cessation options)
- **Health economics research related to evidence-based tobacco control programs and/or reduced-risk nicotine products** (e.g., experimental or quasi-experimental policy evaluation, discrete choice experimentation, consumer behavior modeling; cost-effectiveness or cost and benefit analysis)
- **Implementation research to expand and improve evidence-based interventions or to develop novel demonstration projects** (e.g., implementation science models that describe how to adapt existing interventions to new contexts; design and evaluation of locally-relevant programs tailored to the country of interest; research to identify and examine contextual factors that act as facilitators or barriers to country-specific implementation outcomes)

The research areas listed above are **not** meant to be an exhaustive list of topics; other topics not listed here may also align with GA's charitable mission. Additionally, applicants may identify an

overlap between example topics listed above and develop a proposal that addresses multiple aims. GA encourages applicants to review the [GA](#) website and propose creative research questions that can advance knowledge and close existing research gaps.

GA will consider appropriate methodologies best suited for the applicant's chosen area(s) of research. However, the proposal must demonstrate a complete and competent understanding of the research area and include a detailed rationale for using the stated methodology. The research may cover one or more areas according to the expertise and capacity of the respective applicant.

The findings (including null results) of funded research should be appropriately disseminated to increase the potential for positive, real-world impact on public health and individual smokers. Applicants should establish a comprehensive plan to disseminate new knowledge through effective channels relevant to the scope of research, country context, and priority audience. The final product(s) for dissemination should demonstrate how findings will be used and how they will be made accessible within the specific country or population. Final products should include suggestions for further action as well as recommendations for future research areas. Dissemination plans may include conference presentations, technical reports, case studies, or other “grey literature” that is widely accessible to the country or population of interest. Research findings may also be submitted to a peer-reviewed academic journal for publication as a primary dissemination strategy, if appropriate to the scope of the research. Applicants must disclose GA as the source of funding in journal articles. To ensure findings can be accessible to researchers in diverse countries as well as the general public, GA encourages publication in open-access journals when possible.

Eligibility

Eligible institutions include academic, think-tank, and health-related research and science centers, and other collaborating centers and institutions with experience in related subject areas such as public health, behavioral health, psychology, epidemiology, economics, disease prevention, and health communications. Previous experience in research related to smoking cessation, tobacco control, marginalized populations, or harm reduction-informed approaches to public health is desirable, but not required. Proposals should be submitted by entities registered in their country of origin with an ability to accept grants from not-for-profit foundations incorporated in the United States.

Geographic/Population Focus

GA's goal is to fund investigator-initiated projects that generate new knowledge specific to populations disproportionately burdened by the smoking epidemic in both HICs and LMICs. A geographic priority is countries with historically high smoking rates and disease burden from traditional tobacco use, with a focus on LMICs and populations that are most at risk for premature morbidity and mortality. GA also prioritizes research specific to marginalized populations within HICs with higher smoking rates and those with poor cessation outcomes, including but not limited

to, people of low socioeconomic status, people with mental health conditions or substance use disorders, sexual and gender minorities, and Indigenous peoples.

Applicants should provide relevant information about the country or population of interest, a rationale for selecting the priority study population, and available resources to conduct the research including professional networks, academic research mentors, and stakeholder engagement activities. If research is specific to reduced-risk nicotine products, research should be conducted where those products are legally available. However, GA may also review applications for research in localities where reduced-risk nicotine products are not available, depending on the aims and scope of the proposed research.

Estimated Budget, Duration, and Timelines

Budget

The application budget needs to be consistent with the large-scale proposal and respective work plan. Awards for this announcement may not exceed USD 2,500,000 per project.

Duration

The scope of the proposed project should determine the project duration. The maximum duration shall not exceed 24 months.

Timelines

Anticipated submission dates will be posted on [GA's](#) website. GA will review proposals for a duration of 24 months. Applicants are allowed to revise and resubmit their proposal. Please check the [GA](#) website for the exact deadlines for each subsequent submission.

Evaluation Criteria

Applicants are advised to read and understand GA's [Strategic Plan](#). All project objectives must align with GA's goals and demonstrate a clear understanding of GA's mission and specific purpose of this RFP.

The following criteria will be used to evaluate submissions:

- Significance of the research question and potential to advance knowledge or public health practice
- Methodological approach and description of hypotheses, study design, sample size, statistical analyses, human subjects' protections (if applicable), and rationale for study population or country
- Necessary and sufficient preliminary evidence used to establish scientific plausibility
- Feasibility of the research plan, list of study deliverables, and timelines
- The expertise and prior experience of the Principal Investigator and named staff, including demonstrated experience on similar projects

- The research environment including description of adequate physical, financial, and intellectual resources to meet the aims of the proposed project
- Capacity to conduct research aligned with [Open Science](#) principles
- The communication and dissemination plan for results, as appropriate to the scope of the research
- Budget relative to significance/impact of the proposed research and scientific contribution
- Key organizational documents provided to GA as part of the due diligence process, as outlined in [Grant Solicitation and Application Process](#)

Each application will undergo a scientific review by GA in accordance with the following scoring criteria (see **Table 1**; also see [GA](#)'s website):

Table 1 Evaluation and Scoring Criteria

Criterion	1	2	3	4
Description	Importance of Research	Research Factors	Expertise and Resources	Assessed but not scored
Weight	25%	50%	25%	n/a
Scoring Elements	a) Significance	a) Methodological Approach	a) Qualifications of Principal Investigator(s) and Named Staff	a) Budget
	b) Actionability	b) Feasibility	b) Research Environment	b) Communication and Dissemination Plan (if relevant)
	c) Alignment with GA research priorities	c) Approach to Human Subjects Protection/Data Confidentiality (as appropriate)		

The applicant organization/institute must have the appropriate infrastructure in place to comply with reporting and other grant agreement requirements. The GA Grants Management team is the primary reviewer of the detailed budget and all grant agreement requirements. While the scientific review panel does not assign a score to the budget, they review the budget in the context of the proposed research, and consider overall costs as a factor in their recommendations (“budget relative to significance and scientific contribution”).

Submission Instructions

Applications should be submitted through GA's online portal, which can be accessed [here](#). This link will start a new application form. Upon clicking the link, you will be prompted to log in, and then be taken to the application form.

The application form has links to three templates, which are also listed here:

- [Proposal template](#)
- [Budget template](#)
- [Work plan template](#)

You may save your application at any time by using the *Save & Finish Later* button at the end of each page. To return to an in-progress application, [log in to the portal](#). A list of application portal FAQs can be found [here](#).

If you have any technical issues during the application process, please contact the Grants Management Team via support@actiontoendsmoking.org and we will be happy to help.

Key Information

Global Action makes no representations that any grant proposal will be funded. All decisions to fund grants remain in the sole discretion of Global Action. Grant proposals and related documentation will be disclosed to employees, consultants, legal counsel, and others. Grant proposals and related documentation will not be treated as confidential and Global Action does not maintain the confidentiality of any such materials. Grant applicants should carefully consider the content of grant proposals and related documentation and not include any proprietary or confidential information if there is any concern about the impact of disclosure of these materials.

To be considered for an award, the applicant agrees that GA may:

- amend or cancel the RFP, in whole or in part, at any time;
- extend the deadline for submitting responses;
- determine whether a response does or does not substantially comply with the requirements of the RFP;
- issue multiple awards.

The applicant must ensure that it has responded to the RFP with complete honesty and accuracy. If information in the applicant's response changes after submission of an application, the applicant will supplement its response in writing with any deletions, additions, or changes within five days of the change. Any material misrepresentation, including omissions, may disqualify the applicant from consideration for an award.

Grants that Global Action Does Not Fund

Grants that Global Action does not fund include those that are prohibited by applicable laws and regulations including grants in support of lobbying or political campaign activities. These include grants relating to attempts to influence legislation, either by communicating with government personnel who are involved in the legislative process or urging the public to do so. These prohibited grants include both domestic and international activities. Similarly, Global Action grant monies are not used to influence the outcome of any political campaigns or to conduct voter registration drives, neither within the United States nor abroad. Global Action generally may fund grant activity that properly qualifies as an exception to lobbying, such as grants for nonpartisan analysis, study, or research, and grant work being performed in response to a written request for technical assistance.

In addition, grants will not be made to any organization that is not authorized in its country of origin to receive grant funds from Global Action and/or whom Global Action is prohibited or restricted by law or regulation from funding. Global Action's rigorous procedures for making and monitoring grants ensure that its grant funds are used for the intended charitable purposes and not to support terrorist or other illegal activities.

About Global Action to End Smoking

[Global Action to End Smoking](#) is an independent, U.S. nonprofit 501(c)(3) grantmaking organization whose mission is to end the smoking epidemic. It is dedicated to accelerating science-based efforts worldwide to end combustible tobacco use, which remains the leading preventable cause of death globally. Global Action focuses on three main subject areas: Health and Science Research, Cessation Education, and Agricultural Transformation. Historically, Global Action received funding through PMI Global Services. As of September 2023, the funding agreement was terminated, and Global Action formally adopted a policy not to seek or accept funding from companies that produce tobacco or non-medicinal nicotine products.

References

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