Being_

REQUEST FOR PROPOSALS

Mental Health and Wellbeing of Young People

Applications Open: April 8th, 2024

Grand Challenges Canada / Grands Défis Canada

In partnership with Canada

fondation BOTNAR

UNITED FOR GLOBAL MENTAL HEALTH

FUNDED BY NIHR National Institute for Health and Care Research

UKaid from the British people

Executive Summary

Mental health challenges disproportionately affect the most marginalized members of society – people living in poverty, women and girls, refugees, young people, and those most at risk of violence and discrimination. While populations in low-and middle-income countries bear 82% of the global burden of mental ill-health,[1,2] up to 90% of their mental health needs are not met due to a lack of resources and insufficient infrastructure.[3,4]

The global mental health burden is magnified for youth living in low resource settings. The majority of mental health challenges – 75% – start before the age of 24.[5] Poor mental health in youth negatively impacts the development of social connections, cultural belonging, and emotional wellbeing. It can also impact young people's access to educational opportunities and economic resources. Many of these challenges can be addressed and supported if mental health conditions are identified and treated early. These impacts can be multiplied by working further upstream on prevention initiatives, enabling the mental health field to shift from a reactive to proactive approach.

There is an urgent need for youth-informed mental health approaches that shift from an individually focused and medicalized approach to one that addresses the social, cultural, and economic drivers that impact young people's mental wellbeing. This will create enabling environments across sectors and supportive communities that cater to the needs of young people.

We are looking to fund bold prevention and promotion ideas that address the early drivers of mental health and wellbeing for the most underserved 10- to 24-year-olds. Being seeks to fund innovative solutions that meet the context-specific upstream drivers of young people's mental health and wellbeing along with ecosystem-level efforts that address the broader systemic barriers that hinder sustainable implementation and broader integration of mental health and wellbeing promotion and prevention initiatives.

Being seeks culturally sensitive and community driven approaches that account for the complex social and environmental factors contributing to young people's mental health and wellbeing. Importantly, these approaches must take a person centered, rights-based approach, and must involve young people and people with lived experience of mental health challenges from the outset.

Projects must be implemented in at least one of **12 priority countries**: **Colombia, Ecuador, Ghana, India, Indonesia, Morocco, Pakistan, Romania, Senegal, Sierra Leone, Tanzania, and Vietnam**, and should also align with specific thematic priorities identified through the

---

[1] Aksunger, N., Vernot, C., Littman, R., Voors, M., Meriggi, N. F., Abajobir, A., Beber, B., Dai, K., Egger, D., Islam, A., Kelly, J., Kharel, A., Matabaro, A., Moya, A., Mwachofi, P., Nekesa, C., Ochieng, E., Rahman, T., Scacco, A., … Mobarak, A. M. (2023). COVID-19 and mental health in 8 low- and middle-income countries: A prospective cohort study. *PLOS Medicine*, *20*(4), e1004081. https://doi.org/10.1371/JOURNAL.PMED.1004081

[2] World Health Organization. (2022). *World mental health report: transforming mental health for all*. World Health Organization. https://iris.who.int/handle/10665/356119

[3] Patel, V., Maj, M., Flisher, A. J., de Silva, M. J., Koschorke, M., Prince, M., Tempier, R., Riba, M. B., Sanchez, M., Campodonico, F. D., Risco, L., Gask, L., Wahlberg, H., Roca, M., Lecic-Tosevski, D., Soghoyan, A., Moussaoui, D., Baddoura, C., Adeyemi, J., … Richardson, G. (2010). Reducing the treatment gap for mental disorders: a WPA survey. *World Psychiatry*, *9*(3), 169–176. https://doi.org/10.1002/J.2051-5545.2010.TB00305.X

[4] World Health Organization. (2022). *World mental health report: transforming mental health for all*.

[5] Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., & Walters, E. E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the national comorbidity survey replication. In *Archives of General Psychiatry* (Vol. 62, Issue 6). https://doi.org/10.1001/archpsyc.62.6.593

locally-led landscape analyses and consultations in each of these countries. Please refer to Appendix A for country specific information.

Three types of funding opportunities are available: 1) Proof of Concept 2) Transition to Scale, and 3) Ecosystem Catalyst. Each funding opportunity has different scopes, funding amounts, timelines, and evaluation criteria. Please refer to sections 3-5 for specific information related to each funding opportunity. Being's intention behind the three different funding opportunities is for approved projects in each country to coordinate with one another to achieve a shared goal (i.e. strengthening the country's mental health landscape).

Successful project teams will include individuals who understand the mental health needs of young people in priority countries. Eligible applicants include organizations (e.g. social enterprises, non-profit, for-profit, limited liability companies, research/academic institutions) that are formed, legally incorporated and can receive and administer funding. Preference for certain types of organizations is outlined in section 2.1.

Proposals should show evidence of meaningful involvement of young people and/or young people with lived experience of mental health challenges, in the design, testing and/or evaluation of the project.

APPLICATION PROCESS: Applications for all three types of funding opportunities will be accepted on a rolling basis. This means that applications are continually accepted and reviewed at specific intake periods until the total funding allocated for each opportunity has been awarded. Please refer to the Frequently Asked Questions (FAQ) document found on the Grand Challenges Canada website and Being website for application intake deadlines. All applications will involve a two-stage process: completing a screening questionnaire and submitting a project summary (stage one) and submitting a full project application (stage two). Only those applications that pass stage one will be invited to submit a full application (stage two).

REVIEW PROCESS: All applications will go through a two-stage review process led by Grand Challenges senior management before making a final funding decision: screening (stage one) and external peer review (stage two). As part of stage one, applicants who meet the eligibility criteria will be evaluated based on an Innovation Screen for Proof of Concept and Transition to Scale applications and a Relevance Screen for Ecosystem Catalyst applications. Applicants who pass stage one will be invited to participate in the full application process, which will involve applicants undergoing external peer review (stage two). Applications for all funding opportunities will be reviewed periodically over the next few years and may be reviewed more frequently within the first year of the RFP.

See sections 3-5 for detailed information about the Application and Review Process for each funding opportunity, including an overview of the timeline. Please refer to the Frequently Asked Questions (FAQ) document found on the Grand Challenges Canada website and Being website for specific review dates.

To apply for funding, applicants MUST use the online application form provided, which is ONLY accessible via Grand Challenges Canada's Fluxx Portal <https://gcc.fluxx.io**>.** Existing users should login to their account and new users must register for an account on the main application portal on Fluxx. **(See Appendix D *Instructions for Using the Fluxx Application Portal*)**

For technical assistance with registration or the online application, contact Grand Challenges Canada's Fluxx Technical Support team at: http://www.grandchallenges.ca/fluxxsupport/. Please note that this form is only for questions or issues related to the Fluxx portal, unfortunately we are not able to respond to program inquiries regarding non-technical issues.

Email info@being-initiative.org **with 'Request for Proposals' in the subject line, for questions not answered in the Frequently Asked Questions (FAQ) found on the** Grand Challenges Canada website and Being website**.**

Table of Contents

Executive Summary 2
Table of Contents 5
1. Introduction 8
1.1 GRAND CHALLENGES CANADA 8
1.2 ABOUT GRAND CHALLENGES CANADA'S MENTAL HEALTH WORK 8
1.3 THE PROBLEM 9
1.4 BEING: OUR APPROACH 10
2. Program Scope 11
2.1 AVAILABLE FUNDING 11
2.2 GENERAL AREAS OF FOCUS 12
2.3 WHAT WE WON'T FUND 13
2.4 SCALE AND SUSTAINABILITY 13
2.5 EFFECTIVE LEADERSHIP AND PROJECT TEAMS 13
2.6 UNDERSTANDING LOCAL CONTEXT 14
2.7 STAKEHOLDER INVOLVEMENT 15
2.8 GENDER EQUALITY, ENVIRONMENTAL SUSTAINABILITY, HUMAN RIGHTS BASED APPROACH 15
3. Proof of Concept (POC) 16
3.1 POC GENERAL SCOPE 16
3.2 POC GENERAL AREAS OF FOCUS 16
3.3 POC PRIORITY HEALTH OUTCOMES 17
3.4 POC TARGET USERS 18
3.5 ESTABLISHING PROOF OF CONCEPT 18
3.6 POC INTEGRATED INNOVATION 19
3.7 POC APPLICATION PROCESS 19
3.8 INSTRUCTIONS FOR APPLICATION PORTAL, FLUXX 21
3.9 POC APPLICATION PROCESS TIMELINE 21
3.10 POC APPLICATION REVIEW TIMELINE 21
3.11 POC REVIEW PROCESS 21
4. Transition to Scale (TTS) 25
4.1 TTS GENERAL SCOPE 25
4.2 TTS GENERAL AREAS OF FOCUS 25
4.3 TTS PRIORITY HEALTH OUTCOMES 26
4.4 TTS TARGET USERS 27
4.5 TTS MONITORING, EVALUATION, AND LEARNING 27
4.6 TTS INTEGRATED INNOVATION 28

4.7 TTS APPLICATION PROCESS 29
4.8 INSTRUCTIONS FOR APPLICATION PORTAL, FLUXX 31
4.9 TTS APPLICATION PROCESS TIMELINE 31
4.10 TTS APPLICATION REVIEW TIMELINE 31
4.11 TTS REVIEW PROCESS 31
5. Ecosystem Catalyst (EC) 36
5.1 EC GENERAL SCOPE 36
5.2 EC COLLECTIVE GOAL AND PRIORITY OUTCOMES 36
5.3 EC TARGET USERS 37
5.4 EC MONITORING, EVALUATION and LEARNING 37
5.5 EC APPLICATION PROCESS 38
5.6 INSTRUCTIONS FOR APPLICATION PORTAL, FLUXX 40
5.7 EC APPLICATION PROCESS TIMELINE 40
5.8 EC APPLICATION REVIEW TIMELINE 40
5.9 EC REVIEW PROCESS 40
6. Post-Application: Next Steps & Resources 43
6.1 FUNDING DECISIONS 43
6.2 ACTIVITIES AND DELIVERABLES 44
6.3 BEING LEARNING AND SUPPORT PROVIDER 45
7. Guiding Principles and Additional Terms 45
7.1 FINANCING TERMS 45
7.2 SUBMISSION MATERIALS AND PRIVACY NOTICE 48
7.3 WARRANTY 50
7.4 INTELLECTUAL PROPERTY AND SHARING AND ACCESS FOR IMPACT STRATEGY 50
7.5 RESEARCH ETHICS POLICY 52
7.6 RIGHTS OF GRAND CHALLENGES CANADA 52
7.7 COSTS 53
7.8 GOVERNING LAW 53
7.9 RISK MANAGEMENT, SAFETY, ANTI-TERRORISM, ANTI- CORRUPTION, ANTI-BRIBERY 54
7.10 FUNDER COMPLIANCE TERMS 54
Appendix A: Country Priorities 55
Colombia Focus 55
Ecuador Focus 57
Ghana Focus 58
India Focus 59
Indonesia Focus 60
Morocco Focus 61

Pakistan Focus 62
Romania Focus 63
Senegal Focus 64
Sierra Leone Focus 65
Tanzania Focus 66
Vietnam Focus 67
Appendix B: Key Indicators for POC & TTS 68
Appendix C: A Relational Approach to Wellbeing & Mental Health 70
Appendix D: Instructions For Using the Fluxx Application Portal 72

1. Introduction

1.1 GRAND CHALLENGES CANADA

GRAND CHALLENGES CANADA / GRANDS DÉFIS CANADA ("Grand Challenges Canada") is dedicated to supporting Bold Ideas with Big Impact®. With funding from a variety of government partners and organizations, including Global Affairs Canada, our mission is to support innovation that saves and improves the lives of the most vulnerable in low- and middle-income countries (LMICs) and Canada. Our vision is a world in which innovation accelerates the achievement of the United Nations' Sustainable Development Goals.

One of the largest impact-first investors in Canada, and with a feminist investment approach, Grand Challenges Canada has supported a pipeline of over 1,400 innovations in over 100 countries. Grand Challenges Canada estimates that these innovations have the potential to improve up to 64 million lives by 2030.

Grand Challenges Canada is hosted in Toronto at the Sandra Rotman Centre at the University Health Network. For more information, please see: http://www.grandchallenges.ca/

1.2 ABOUT GRAND CHALLENGES CANADA'S MENTAL HEALTH WORK

Grand Challenges Canada has supported one of the largest portfolios of global mental health innovations in the world. Supported by Global Affairs Canada through the Department of Foreign Affairs, Trade and Development (DFATD), the United Kingdom's Department of Health and Social Care (DHSC) through the National Institute for Health Research (NIHR), and Fondation Botnar, Grand Challenges Canada has invested $63 M CAD to support 151 projects across 47 LMICs over the last 11 years.

Grand Challenges Canada's ongoing global mental health portfolio includes Proof of Concept innovations aimed at meeting the mental health needs of the most underserved 10- to 24-year-olds, using culturally sensitive and community driven approaches to enhance mental health literacy and provide youth-friendly mental health services. Our current portfolio also includes Transition to Scale innovations focused on bold solutions that provide evidence-based, person-centred mental health interventions in community-based settings across the life span.

In response to the ongoing mental health challenges faced by young people, particularly those in LMICs, Grand Challenges Canada launched a bold new phase of our mental health program in 2022, entitled Being. Being is the product of a collaborative partnership between Fondation Botnar, Grand Challenges Canada, the Science for Africa Foundation, and United for Global Mental Health, alongside support from the United Kingdom's DHSC through NIHR and Global Affairs Canada through DFATD. Orygen will serve as Being's learning and support provider and will provide technical support to the funded projects.

Being envisions a world where young people feel well and thrive. Being's mission is to work in partnership with young people to improve their mental health and wellbeing. Being funds and supports research, innovation, advocacy, and ecosystem building with a focus on prevention and promotion in 12 priority countries: Colombia, Ecuador, Ghana, India, Indonesia, Morocco, Pakistan, Romania, Senegal, Sierra Leone, Tanzania, and Vietnam. Being's funding priorities are guided by locally driven country analyses and consultations with youth, policymakers, local organizations, and mental health experts.

Being integrates a relational approach to wellbeing[6,7,8,9] (see Appendix C for a description of main principles and additional resources), looking beyond individual psychology and behavior to the early drivers of mental health challenges. This includes a strong emphasis on connections with people, the environment, and the socio-economic systems in which young people live. This approach seeks to promote cycles of wellbeing that are ultimately self-sustaining. Following an ecosystem building approach, **Being combines research with policy work, stakeholder engagement and support for the development and scaling of innovative programmatic approaches to create positive, lasting change in local communities and beyond.**

1.3 THE PROBLEM

Mental health challenges disproportionately affect the most marginalized members of society – people living in poverty, women and girls, refugees, young people, and those most at risk of violence and discrimination. While populations in low-and middle-income countries bear 82% of the global burden of mental ill-health,[10,11] up to 90% of their mental health needs are not met due to a lack of resources and insufficient infrastructure.[12,13]

The global mental health burden is magnified for youth living in low resource settings. The majority of mental health challenges – 75% – start before the age of 24.[14] Poor mental health in youth negatively impacts the development of social connections, cultural belonging, and emotional wellbeing. It can also impact young people's access to educational opportunities and economic resources. Many of these challenges can be addressed and supported if mental health conditions are identified and treated early. These impacts can be multiplied by working further upstream on prevention initiatives, enabling the mental health field to shift from a reactive to proactive approach.

The current focus of mental health initiatives does not meet young people's diverse needs and demands. Of the current global investment in mental health research, more than 50% is focused on basic discovery science research, while only 7% is focused on much needed research on prevention and treatment.[15] The focus on individual factors does not address holistic factors and the systems individuals live in, which contribute to mental ill health. This focus also fails to address the social, cultural, and economic drivers that impact mental wellbeing among youth. There is an urgent need for youth-informed mental health approaches that shift from an individually focused and medicalized approach to one that creates an enabling environment across sectors and supportive communities that caters to the needs of young people.

---

[6] Atkinson, S., Bagnall, A. M., Corcoran, R., South, J., & Curtis, S. (2020). Being Well Together: Individual Subjective and Community Wellbeing. In *Journal of Happiness Studies* (Vol. 21, Issue 5). https://doi.org/10.1007/s10902-019-00146-2
[7] Emirbayer, M. (1997). Manifesto for a relational sociology. *American Journal of Sociology*, *103*(2). https://doi.org/10.1086/231209
[8] Pérez del Pulgar, C., Anguelovski, I., & Connolly, J. (2020). Toward a green and playful city: Understanding the social and political production of children's relational wellbeing in Barcelona. *Cities*, *96*. https://doi.org/10.1016/j.cities.2019.102438
[9] White, S. C. (2015). *Relational Wellbeing: a Theoretical and Operational Approach*. (pp. 1-30). Centre for Development Studies, University of Bath. http://www.bath.ac.uk/cds/publications/bpd43.pdf
[10] Aksunger, N., et al. (2023). COVID-19 and mental health.
[11] World Health Organization. (2022). *World mental health report: transforming mental health for all*.
[12] Soghoyan, A., et al. (2010). Reducing the treatment gap.
[13] World Health Organization. (2022). *World mental health report: transforming mental health for all*.
[14] Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., & Walters, E. E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the national comorbidity survey replication. In *Archives of General Psychiatry* (Vol. 62, Issue 6). https://doi.org/10.1001/archpsyc.62.6.593
[15] Woelbert, E., White, R., Lundell-Smith, K., Grant, J., & Kemmer, D. (2020). *The Inequities of Mental Health Research Funding*. Digital Science. https://doi.org/10.6084/M9.FIGSHARE.13055897.V2

Being is committed to investing in evidence-based, effective mental health and wellbeing approaches that focus on prevention and promotion, especially in ways that address the social, cultural, and economic drivers that impact mental wellbeing. We believe that this approach is essential to address the pressing mental health challenges among young people and create lasting change.

1.4 BEING: OUR APPROACH

Being is deeply rooted in rights-based, participatory, inclusive, and collaborative principles with the overall goal of supporting young people's mental health and wellbeing through a combination of research, ecosystem engagement, and innovation. Please refer to the Being website for more information.

There are three main pillars of work within Being:

1. **Learn** - We believe learning is a driver for systems change. Our research funding and programming aims to understand young people's mental health needs and drivers in each priority country, help build consensus around priorities for advocacy and funding, and guide funding priorities in research, innovation, and ecosystem building. Additionally, we want to increase our understanding and anticipate the long-term impacts of emerging stressors, like emergencies, urban growth, pandemics, and climate change, on young people's mental health and wellbeing.

2. **Invest** – We fund and support youth-led organizations to address the drivers of young people's mental wellbeing identified through our invest pillar. With a focus on prevention and promotion, we invest in new ideas as they're tested and proven. We also support tested high-impact innovations targeting youth mental health and wellbeing along their scaling journey to help catalyze their sustainability and impact.

3. **Mobilize** – We aim to unite donors, funders, investors, governments, multilateral scaling partners, local intermediaries, and communities by promoting the ongoing exchange of new evidence, innovation and learnings to advance global dialogue and advocate for young people's wellbeing. We also fund ecosystem building grants to help address systemic barriers preventing long-term implementation and integration of mental health services into related health, policy, and other areas.

Locally Driven Priorities

We believe those closest to the challenges are best placed to identify needs and barriers and offer impactful and sustainable solutions. That's why Being's funding priorities are guided by locally driven country analyses and consultations with youth, policymakers, local organizations, and mental health experts.

As a key step in determining Being's funding priorities, local organizations in each of the 12 priority countries were contracted to conduct landscape analyses to synthesize the available evidence on youth mental health and wellbeing. Stakeholder consultations and consensus building activities were also conducted to identify priority research, innovation, and ecosystem needs, barriers, and opportunities. To provide additional perspective and local expertise, Being's two advisory groups, the Youth Advisory Group and the People with Lived Experience Advisory Group, were engaged to feed into the prioritization process. As well, the Being Council,

made up of leading researchers, young people, people with lived experience of mental health challenges, and mental health and wellbeing experts, provided insight and guidance. The results of this process have formed the basis for this Request for Proposals and the focus areas for each country, as outlined in country specific information (see Appendix A for country specific information).

2. Program Scope

2.1 AVAILABLE FUNDING

There are three types of available funding opportunities:

1. Proof of Concept (POC) (see section 3 for detailed information)
2. Transition to Scale (TTS) (see section 4 for detailed information)
3. Ecosystem Catalyst (EC) (see section 5 detailed information)

Proof of Concept grants support early-stage innovations[16] to test and refine bold ideas. The goal of these grants is to strengthen the pipeline of tested mental health innovations targeted at young people that are ideally developed and managed by young people themselves.

Transition to Scale grants support tested innovations along their scaling journey. The goal of transition to scale funding is to support innovators to build out the evidence and/or attract additional capital and smart partnerships from local governments, multilateral institutions and/or private investors.

Ecosystem Catalyst grants support ecosystem-level solutions that address the broader systemic barriers that hinder sustainable implementation and broader integration of mental health and wellbeing into adjacent areas and begin to build local demand. The goal is to strengthen local ecosystems for youth mental health.

We expect projects across all three funding opportunities to coordinate, leverage findings and expertise, and work together towards strengthened landscapes for young people's mental health and wellbeing in the 12 priority countries.

We expect to fund approximately 40 – 45 Proof of Concept projects, 30 – 40 Transition to Scale projects, and 20 – 24 Ecosystem Catalyst projects.

Eligibility Criteria

Each applicant must meet the following criteria in order to be eligible for consideration for this request for proposals:

(i) Organizations must be legally incorporated (or the equivalent) and based* in any country in order to be eligible to apply for funding through this RFP; and

[16] We encourage proposals for innovation in all forms: technologies, products, services, processes, business models, policy approaches and/or delivery mechanisms.

(ii) Only organizations implementing their project in at least one of Being's 12 priority countries (Colombia, Ecuador, Ghana, India, Indonesia, Morocco, Pakistan, Romania, Senegal[17], Sierra Leone, Tanzania, and Vietnam) will be considered; and
(iii) Organizations must meet all other eligibility requirements set out in this RFP and FAQ found on the Grand Challenges Canada website and Being website.

Preference will be given to eligible organizations according to the following order of criteria (1 being the most preferred):

1. Youth-led organizations based* in one of 12 priority countries. This includes organizations in which fifty percent (50%) or more of the individuals in key leadership positions (such as senior management, Board of Directors, Chief Executive Officer, Chief Operating Officer) are youth 35 years and under.
2. Organizations based* in one of Being's 12 priority countries.
3. Organizations based* in a low- and middle- income country that are collaborating with a locally-based organization in at least one of Being's 12 priority countries.
4. Other eligible organizations.

*Based: legally incorporated (or the equivalent) in the applicable country.

Please note:
Grand Challenges Canada may not be able to fund into a particular country because of funder restrictions, sanctions and other legal regulations, or for business and other reasons. Please visit the FAQ found on the Grand Challenges Canada website and Being website for an up-to-date list of countries in which we are not able to fund.

2.2 GENERAL AREAS OF FOCUS

Being seeks bold prevention and promotion ideas to meet the mental health needs of the most underserved 10- to 24 year-olds. We fund culturally sensitive, community driven, youth-friendly, innovative approaches that account for the complex social, cultural and environmental drivers contributing to young people's mental health and wellbeing in at least one of the priority countries.

Prevention and promotion initiatives should address the various drivers of mental health by reducing risks, building resilience and establishing supportive environments for mental health. This requires action beyond the health sector, and can involve "education, labour, justice, transport, environment, housing, and welfare sectors."[18] Importantly, these initiatives must take a person centered, rights-based approach, and must involve young people and people with lived experience of mental health challenges from the outset.

While each priority country has specific areas of focus related to young people's mental health and wellbeing for each funding opportunity (see Appendix A for country specific information), this section highlights general areas of focus which must be considered when developing proposals.

[17] Please note that proposed projects in Senegal are only eligible for Proof of Concept and Ecosystem Catalyst funding. Transition to Scale funding is not available for Senegal at this time.
[18] World Health Organization. (2022, June 17). *Mental Health Fact Sheet*. https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response

Projects should try to shift detrimental societal norms regarding mental health using a culturally appropriate lens by building upon local systems and engaging with local government and policy makers where necessary. Projects must be accessible and/or impactful for the most underserved young people and have the potential to be sustainable at scale. Successful projects will serve as models that can be replicated, scaled, or provide lessons for other low-resource settings.

Your project team must be led by effective, results-driven leaders, capable of developing, testing and refining these initiatives and their delivery. **We highly encourage organizations led by young people to apply to this Request for Proposals.**

2.3 WHAT WE WON'T FUND

Being will not fund the following:

1. All projects for which the core intellectual property rights are owned by a third-party institution, unless that third party:
    a. grants the applicant sufficient license rights to the innovation to permit eventual scaling in low and middle-income countries; or
    b. signs an undertaking to comply with Grand Challenges Canada's Sharing and Access for Impact Strategy
2. Projects implemented in countries outside of the 12 priority countries (implemented outside of Colombia, Ecuador, Ghana, India, Indonesia, Morocco, Pakistan, Romania, Senegal, Sierra Leone, Tanzania, and Vietnam).
3. Projects that focus on mental health treatment and care, such as reducing symptom severity for youth with mental health conditions or capacity building of health professionals to deliver treatment and care.

2.4 SCALE AND SUSTAINABILITY

Being is looking for projects that can be scaled up and project teams who are willing to pursue this. Your clear path to scale should take into account the following factors:

- The state of local infrastructure
- Social, political, and economic forces
- Capacity of the organization and its leadership
- Available funding and revenue streams
- Other potential barriers to scale

Applicants are encouraged to leverage local systems for efficiencies and involve young people with lived experience of mental health challenges to increase the likelihood of being able to scale. Applicants should convincingly show in their proposal how and why they believe their projects will eventually be scaled. The plan should clearly define the geography or context of use at scale, as well as exit strategies from grant funding.

2.5 EFFECTIVE LEADERSHIP AND PROJECT TEAMS

To achieve impact at scale, bold ideas need to be championed by effective, results-driven leaders with the capacity to convene and engage with key influencers. Effective project teams need expertise, or a plan to involve relevant expertise, in:

- Young people's mental health
- Monitoring and evaluation / data analysis and statistics
- Intervention design (e.g. conceptualization, design, creating innovative approaches)
- Working in the implementation region/country.

Multidisciplinary / cross-sector teams are encouraged to ensure relevant scientific, social, and business expertise. An understanding of the local mental health landscape will be an advantage for situating proposed projects within the country context and identifying how projects contribute towards overall systems change. Teams should demonstrate evidence of individual project members' input.

2.6 UNDERSTANDING LOCAL CONTEXT

To help ensure both impact at scale and sustainability, project teams need member(s) who understand that the social determinants of mental health, also known as relational wellbeing drivers, are highly contextual. Local infrastructure and the social, political and economic context, such as local cultures, traditions and societal beliefs regarding mental health, particularly with respect to young people, must be fully understood to design and implement projects that are effective in a given country.

Relational wellbeing takes a holistic approach, recognizing that wellbeing is highly depended on the intricate network of relationships individuals experience, both with other people and the environment and systems around them. Several factors can influence the quality and dynamics of the relationships that youth experience and should be considered in project applications, including:

Mental Health Related Stigma: Teams with an understanding of the influence of cultural factors and beliefs on mental health related stigma is important for successful youth mental health initiatives. An understanding of context-specific public stigma and related stereotypes, such as prejudice and discrimination, will allow project teams to account for and address these aspects, as they may provide challenges, particularly for Proof of Concept and Transition to Scale program uptake. From an ecosystem perspective, public stigma may also have a negative impact on how decision-makers address mental health related priorities, legislation and funding, thus hindering the development of supportive ecosystems.

Power Dynamics: Given the negative influence that limited agency and autonomy has on youth mental health and wellbeing, teams should also have an understanding of the local power dynamics experienced by young people. Teams with deep contextual knowledge about youth-adult power imbalances, particularly within family, community, schools, and places of employment, will be well positioned to integrate these aspects into innovations and ecosystem level engagement.

Gender Inequality: Gender inequality and context-specific gender norms have a significant impact on youth mental health. Gender norms and expectations can restrict agency and limit access to and control over resources in different ways for different gender identities. Contextual knowledge about these dynamics will position the teams well to develop and implement mental

health innovations that will make a meaningful impact on young people's mental health and wellbeing.

2.7 STAKEHOLDER INVOLVEMENT

Youth mental health is influenced by multiple factors including:

- Peers
- Family and dwelling
- Local communities
- Socio-cultural norms
- Educational professionals, programs and settings
- Health and social programs and services, and/or
- Regional, national and global environments.

Based on this, successful projects will be guided and supported by:

- Families, peers
- Communities and community leaders
- Businesses
- Healthcare providers and institutions
- Teachers
- Policy makers
- Governments, and/or
- International agencies.

2.8 GENDER EQUALITY, ENVIRONMENTAL SUSTAINABILITY, HUMAN RIGHTS BASED APPROACH

Grand Challenges Canada is committed to furthering the principles of environmental sustainability, gender equality and a human rights-based approach as follows:

Environmental Sustainability: Grand Challenges Canada requires that applicants commit to ensuring that the innovation will not have significant adverse environmental effects including, but not limited to, long-term and cumulative effects. Applicants shall ensure that the management of environmental effects, including any analysis, is carried out in accordance with the environmental processes and requirements of Grand Challenges Canada. Where possible, applicants should incorporate having positive environmental effects throughout the project.

Gender Equality: Grand Challenges Canada is committed to furthering principles of gender equality in the innovations it funds and across the organization. Specifically, Grand Challenges Canada is supportive of the following objectives:

1. Advancing women, girls, boys, men, and people with diverse sexual and gender identities' equal participation as decision-makers in shaping the sustainable development of their societies;
2. Promoting the realization of the human rights of all genders; and
3. Reducing gender inequalities in access to and control over the resources and benefits of development. We believe that supporting gender equality is an important objective in

and of itself, and that using a gender lens in the sourcing and management of development innovations, will bolster sustained impact.

Human Rights Based Approach: Grand Challenges Canada is committed to furthering a human rights-based approach. This includes the recognition that inequality and marginalization deny people their human rights. This particularly includes the principles of participation, inclusion, equity, transparency, and accountability in an applicant's project.

For more information, see Grand Challenges Canada's Policy on Gender Equality, Environmental Sustainability, and Human Rights and Inclusion. Additional guidance about gender equality can be found in Grand Challenges Canada's Gender Equality Portal, and under Innovator Resources, particularly the Innovation, Gender Equality and Sustained Results Brief.

3. Proof of Concept (POC)

3.1 POC GENERAL SCOPE

Proof of Concept (POC) funding of up to $250,000 CAD over 15, 18 or 24 months is available under the RFP. POC funding supports early-stage innovations to test and refine bold ideas. POC funding not only prioritizes innovations focused on young people, it also prioritizes applications from organizations that are primarily led by young people. The goal of these innovations is to strengthen the pipeline of tested mental health innovations targeted at young people that are developed and managed by young people themselves.

3.2 POC GENERAL AREAS OF FOCUS

Being seeks Proof of Concept innovations that:

- Focus on the prevention and promotion aspects of youth mental health needs,
- Are age and stage appropriate, given the wide age range of the target population (i.e. 10 – 24 years),
- Aim to support and amplify the voices of young people,
- Deliver mental health supports through youth-friendly, health and non-health mechanisms (such as schools), and
- Meet people where they are by integrating mental health and/or wellbeing interventions into existing education or social care systems.

In addition to addressing the country specific priorities outlined in Appendix A, POC innovations should seek to integrate one or more of the following cross-cutting themes:

- Tackle the outcomes of damaging gender norms and consider the mental health needs of people with diverse sexual and gender identities;
- Consider the distinct mental health needs arising from intersecting experiences of discrimination and marginalization across various identities (such as socio-economic status, religion, etc);
- Acknowledge the influence of power differentials on young people's mental health and consider the limited agency and autonomy faced by young people;
- Address stigma and discrimination related to mental illness with a specific focus on stigma experienced by young people;

- Creatively leverage technology that is highly used and trusted by young people, while considering rigorous monitoring and evaluation and tracking of priority outcomes.

3.3 POC PRIORITY HEALTH OUTCOMES

Being seeks bold ideas that improve the mental health and wellbeing of the most underserved 10- to 24-year-olds in the 12 priority countries.

In general, prevention and promotion initiatives may achieve this through one or more pathways. For example, initiatives may directly target youth mental health and wellbeing; they may address stigma, attitudes and practices; they may also aim to tackle access to the wider social and environmental determinants of youth mental health and wellbeing, such as but not limited to parenting practices or employment.

Additionally, improvements in mental health and wellbeing for young people may look different across contexts and may have a variety of approaches to measurement. Successful applications will clearly define at least one relevant priority health outcome that the innovation will set out to achieve, with clear plans to track progress using appropriate measurement tools.

While each priority country has specific areas of focus related to young people's mental health and wellbeing (see Appendix A for country specific information), this section highlights a wide range of priority health outcomes. Innovators must ensure that their project's priority health outcomes speak directly to their country's focus area.

Below are some examples of priority health outcomes that innovations may set out to achieve. **This is not a comprehensive list of priority health outcomes that can be achieved through prevention and promotion initiatives**. We welcome applications with other relevant priority health outcomes:

- Improved wellbeing
- Improved life satisfaction
- Improved emotional regulation
- Improved connectedness
- Improved social capital
- Improved self esteem
- Improved coping
- Improved self-efficacy
- Improved resilience
- Effects on knowledge (ex. mental health literacy)
- Effects on attitudes (ex. reductions on stigmatizing attitudes)

POC project plans should include priority health outcomes and tools that are relevant to demonstrating success of the proposed innovation. See Appendix B for guidance on priority health outcome definitions, measurement tools, as well as other key monitoring and evaluation requirements. POC innovators are also expected to report against any additional outcome and output indicators listed in Appendix B that are relevant to demonstrating success of their innovation.

3.4 POC TARGET USERS

POC innovations must ultimately benefit the most underserved 10- to 24-year-olds in at least one of the 12 priority countries; however, they may choose to focus on a specific age group within the range of 10- to 24-year-olds. Projects should take into consideration the wide developmental range between 10 and 24 years of age and consider which types of interventions are best aligned with the developmental needs of specific age groups. Innovative solutions should be targeted to the most relevant age group for the country specific area of focus.

While young people are the primary target beneficiaries, certain countries may include parents / caregivers, community leaders, teachers or school counsellors as secondary target beneficiaries. Please refer to Appendix A for country specific information.

3.5 ESTABLISHING PROOF OF CONCEPT

Monitoring and evaluation plans are critical for measuring the success of an innovation. All proposals should provide an overview of monitoring, evaluation and learning activities that will take place during the project period, including:

- How Proof of Concept is defined and will be assessed;
- Plans to monitor and evaluate the effects of the innovation on the targeted priority outcome(s);
- A strategy to identify shortcomings, challenges, and unexpected results

Data collection plans should track the innovation's use, access and impact; plus, a brief overview of how the team will evaluate results over the project's lifecycle and measure outcomes. Proposals must also include short, medium and long-term indicators, and a description of how these will be monitored and evaluated over the life of the project. For innovations that are not able to demonstrate Proof-of-Concept, it is expected that innovators will be able to articulate why their innovation did not work in order to accelerate progress in the sector.

Projects are expected to demonstrate measurable change and may align with selected priority health outcomes described in Section 3.3, as well as other outcomes and outputs that are relevant to the innovation (see Appendix B for further guidance).

How we define success:

- Evidence with appropriate methodology (ideally from a controlled or limited setting) that the innovation improves one or more of the priority health outcomes (see section 3.3 for a list of potential priority health outcomes that may be used) amongst the most underserved 10- to 24-year-olds
- Feasible next steps or plans for how the innovation can be sustained in the target region and/or scaled across a larger region, and/or
- Evidence of demand among key stakeholders for ongoing implementation and scale

Projects will have the opportunity to access monitoring and evaluation technical support from the Being Learning and Support Partner. Projects are also expected to participate in peer-to-peer learning with other funded projects in the ecosystem.

Communicating results is crucial to accountability. While doing this via scientific publications is important, it should not be the primary objective of any funded project without a well-articulated justification that this is a step on the critical path to impact and sustainability.

3.6 POC INTEGRATED INNOVATION

We encourage proposals for innovation in all forms: technologies, products, services, processes, business models, policy approaches and/or delivery mechanisms.

Projects are encouraged to have an Integrated Innovation® approach that coordinates scientific/technological, social and/or business innovation, to develop solutions to complex challenges. This does not discount the singular benefits of each of these innovation types, but instead highlights the powerful synergies of aligning any of the three. Therefore, your solutions should include any of the following three areas:

- **Scientific/technological innovation**: has a base in the psychological, natural, health or behavioral sciences or in engineering or economics; can be simple as there is no requirement for high-tech solutions.

- **Social innovation:** recognizes and/or addresses the broader social, structural and/or political determinants of health, with a particular focus on gender and intersectional inequalities; addresses local and/or cultural contexts that factor into implementation and scaling.

- **Business innovation:** maximizes the value, relevance and unique quality of the solution to create demand and financial sustainability; addresses barriers to affordability and accessibility.

3.7 POC APPLICATION PROCESS

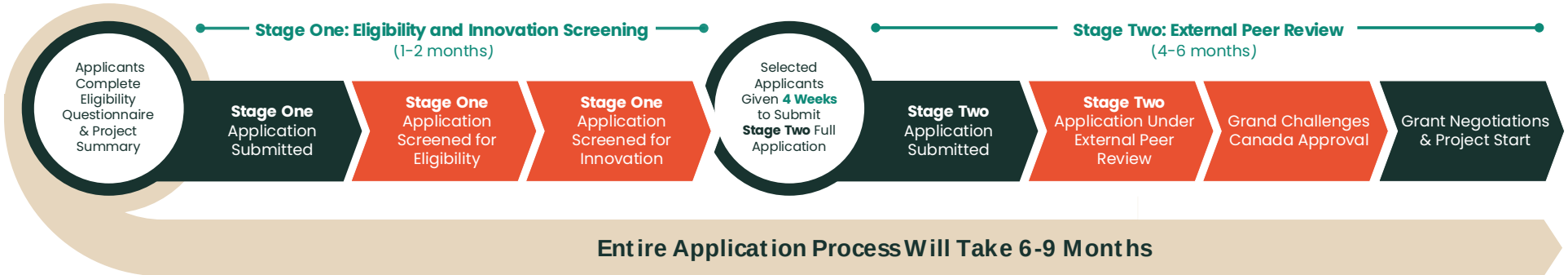
Applications will be accepted on a rolling basis and involve a two-stage process: completing an eligibility questionnaire and submitting a project summary (stage one) and submitting a full application (stage two). Only those applications that pass stage one will be invited to stage two. During stage two, applicants will be given an opportunity to edit their responses to the stage one questions if needed.

Language: Applications may be submitted in English or French. Applications in any other language will be rejected without review. Note that quality of the English or French language proposal will not play a factor in the evaluation of the proposal unless it significantly affects the clarity of the information.

Innovator Toolbox

Applicants are encouraged to access Grand Challenge Canada's online Innovator Toolbox, which contains materials to help researchers and innovators to develop their project proposals and to plan for how their innovation can be sustainably scaled and have global impact. Our Gender Equality Portal provides a set of gender equality tools.

Two-Stage Process for Proof Of Concept (POC) Funding Applications



3.8 INSTRUCTIONS FOR APPLICATION PORTAL, FLUXX

To apply for funding, applicants must use the online application provided, which is only accessible via the Grand Challenges Canada's Fluxx Portal (https://gcc.fluxx.io).

See Appendix D for a detailed description of how to access FLUXX.

3.9 POC APPLICATION PROCESS TIMELINE

POC funding will take approximately six to nine months to move through the application process from stage one application submission to project start. POC applications will be accepted on a rolling basis. This means that applications are continually accepted and reviewed at specific intake periods until the total funding allocated for POC opportunities has been awarded. Given the rolling deadline, submitted applications will be reviewed periodically over the next few years and may be reviewed more frequently within the first year of the RFP.

Application intake deadlines will be included in the Frequently Asked Questions (FAQ) document found on the Grand Challenges Canada website and Being website. Please check the FAQ to ensure you have the most up to date information about application intake deadlines.

3.10 POC APPLICATION REVIEW TIMELINE

Stage one applications will be reviewed approximately 1-2 months after the application intake deadline and unsuccessful applicants will be notified within this timeframe. Successful applicants will be invited to submit a full application (stage two) and will be given approximately four weeks to complete their stage two application.

3.11 POC REVIEW PROCESS

All applications will involve a two-stage review process: screening (stage one) and external peer review (stage two). Only those applications that pass the eligibility / innovation screen (stage one) will be invited to participate in the full application process, which will undergo external peer review (stage two).

Proposals that pass through the two-stage process will be reviewed for a final funding decision. The review process involves the following steps:

STAGE ONE: SCREENING

POC Eligibility Screen

Grand Challenges Canada will screen all funding applications on the basis of the eligibility criteria outlined below. Applications that do not meet the eligibility criteria will be removed from the review process. The eligibility criteria are listed below:

1. Eligible applicants include legally recognized organizations (e.g. social enterprises, non-profit, for-profit, limited liability companies, research/academic institutions) that:
    a. are formed and legally incorporated
    b. can successfully perform activities in their technical area
    c. can receive and administer funding

    The following are ineligible:
    - Individuals
    - Sole proprietorships
    - Unincorporated trusts and partnerships
    - Government organizations
    - United Nations country offices

2. Projects must be implemented in one of the 12 priority countries.

3. There can only be one (1) Project Lead for each project, and they must be affiliated with the applying organization. The Project Lead should be the person with the highest level of responsibility working directly on the project and will be the point of contact for Grand Challenges Canada.

4. A Project Lead can only be listed on one (1) application. Single organizations can submit multiple applications, but each needs a different Project Lead.

5. The Review Committee will only consider applications that include all required information and answers to all questions.

6. Your innovation must align with:
    a. Section 3.1 POC General Scope (funding amount and funding period)
    b. Appendix A: Country Priorities (alignment with the country specific area of focus)

    Section 2.3 outlines what Grand Challenges Canada will not fund.

7. Applicants must obtain any legal and/or regulatory approvals, consents or reviews required to accept foreign grant funds and/or conduct the project activities, before concluding a funding agreement. For example, project activities in India may require prior registration with the Ministry of Home Affairs under the Foreign Contribution Regulation Act 2010 (FCRA). As such, successful applicants would have to provide either FCRA registration or written certification. Failure to comply with FCRA requirements may result in financial and/or criminal penalties against your organization. Get advice to determine if FCRA applies. Other examples of jurisdictions that require approvals are Vietnam. Applicants are responsible for understanding and complying with these regulations and laws before receiving funding from Grand Challenges Canada.

8. Grand Challenges Canada may, at any time and at our sole discretion, change the eligibility criteria for applicants, Project Leads and/or eligible countries, as long as it doesn't substantially undermine the review process.

Please note:

- Grand Challenges Canada must approve any change in Project Lead, applicant organization or country of implementation from the originally submitted application.
- While it's not required, we do encourage applicants from outside of the priority country of implementation to collaborate meaningfully with innovators from the priority country of implementation.
- Project Leads must get their affiliated institution's sign-off before submitting any application.

POC Innovation Screen

Applications that are deemed eligible will move forward to the Innovation Screen as part of stage one of the review process. During this stage, the Project Summary will be assessed by Grand Challenges Canada staff and Being partners based on the below criteria. Proposals lacking innovation are removed from consideration.

Applications are scored against the below criteria. 'Innovation' and 'Relevance' carry equal weight:

1. **Relevance (Yes/No)**
    - Does the proposed innovation align with the country priority(s) in Appendix A?
    - Does the proposed innovation focus on the prevention and promotion aspects of youth mental health needs?
    - Does the proposed innovation integrate one or more cross-cutting themes outlined in Section 3.2?
    - Does the proposed innovation have the potential to lead to one or more of the priority health outcomes, such as but not limited to those listed in Section 3.3?
    - Does the proposed innovation demonstrate meaningful involvement of young people and/or people with lived experience of mental health challenges in the design, implementation, and/or evaluation of the innovation?
    - Is the proposed innovation age and stage appropriate for the target population?
2. **Innovation (Scored 1 – 5)**
    - Is the proposed project innovative and clearly articulated?
    - Does the proposed innovation represent more than an incremental improvement over current approaches and/or an innovative approach to implementation or delivery of a known intervention?

STAGE TWO: EXTERNAL PEER REVIEW

POC Full Application

Applicants who pass stage one screening will be invited to submit a full application for stage two. An independent expert peer review committee of external youth, scientific, social and business experts will advise on the merit of full applications and evaluate each one against the criteria below.

Evaluation Criteria

1. **Leadership Capability to Champion Change**
    - Is the organization and/or project majority locally led?
    - Is the organization and/or project majority youth led?
    - Do the Project Lead(s) and key team members demonstrate the expertise required to design and assess proof of concept innovation? Note: expertise includes lived experience of mental health challenges.
    - To what extent are the project team and collaborators appropriately connected to and/or have lived experience in relation to the target populations and communities?
2. **Relevance, Innovativeness and Impact**
    - Does the proposed innovation align with the area of focus for the target country as outlined in Appendix A?
    - Could the idea significantly impact one or more priority health outcome, such as but not limited to those listed in Section 3.3?
    - How bold, novel and/or how much of a departure from incremental improvements is the innovation over current approaches? Innovative approaches to implementing and delivering known interventions are encouraged.
    - How well does the proposed idea integrate any of the areas of scientific/technological, social and/or business innovation?
    - Does the monitoring and evaluation plan identify clear outcomes that demonstrate proof of concept of the idea by the end of the project period? Projects must include appropriate measures to target at least one appropriate priority health outcome associated with improving the mental health and wellbeing of young people. See Appendix B for details.
3. **Project Execution Plan**
    - Is the project designed to demonstrate proof-of-concept of the idea?
    - Is the project technically sound and feasible within the funding amount and timeline?
    - Does the proposed innovation include appropriate and meaningful involvement of young people and young people with lived experience of mental health challenges?
    - Does the project recognize potential risks and present potential mitigation strategies?
    - Does the proposal consider and aim to address the gender equality, environmental sustainability, and human rights-based approach objectives (described in Section 2.8)?
4. **Pathway to Sustainable Scale**
    - Does the proposal highlight clear steps to develop and/or scale up the innovation?
    - How clearly does the plan identify potential barriers to scale and sustainability?
5. **Value for Effort**
    - Are the scope of the proposed work and the funds requested, reasonable and commensurate with the proposed project goals?
    - Does the proposal represent a particularly thoughtful and efficient use of resources?

4. Transition to Scale (TTS)

4.1 TTS GENERAL SCOPE

At Transition to Scale (TTS), Being will support promising innovations that have achieved proof-of-concept or demonstrated initial positive results of the innovation and have significant potential to achieve sustainable impact at scale or as it reaches more people. Our goal is to support innovators to Transition to Scale through the 'missing middle' with funding offered between $300,000 CAD and $1,500,000 CAD over 12–48 months.

There are different possible objectives for TTS funding based on the stage of development of the innovation:

- Generate evidence of impact needed for scale-up, and/or address gaps in existing evidence (e.g. through validation studies)
- Advance planning for scale and sustainability (develop or validate a viable plan, business model, etc.)
- Build organizational capacity needed to scale
- Grow and strengthen strategic partnerships, including diversified funding sources needed for scale, and/or smart partners towards a sustainable end game
- Begin scaling in new or expanded geographies, and/or with new partners

Innovators must identify the purpose(s) of their TTS project and the amount of funding requested in their application.

Investment Instruments

Grand Challenges Canada aims to provide funding that is patient, allowing innovators the room to fail fast and repeat along a non-linear path to scale, while also encouraging accountability through having project objectives (milestones) during the funding period with funding provided in stages upon meeting the milestones. We offer grants and other funding such as loans and equity instruments, structured to maximize an organization's sustainability and ability to bring in other funders. Grand Challenges Canada reserves the right to negotiate funding agreements, and to make limitations on the time, scope and amount of funding provided, at its own discretion.

Strategic Partnerships
Grand Challenges Canada assumes that to scale sustainably beyond our funding, innovators need support from strategic partners that provide money, and critical 'more than-money' access to resources, networks, markets, and expertise.

Innovators are required to secure 1:1 match funds (minimum of 1:1 cash-based match to Grand Challenges Canada funds) through strategic funders and partners. At its option, Grand Challenges Canada may require more than 1:1 match funds based on the stage of the innovation. Though it is preferred, innovators may not be required to secure a commitment of match funds at the application stage and exceptions may be made on a case-by-case basis by Grand Challenges Canada, at its option.

4.2 TTS GENERAL AREAS OF FOCUS

Being seeks TTS innovations that:

- Focus on the prevention and promotion aspects of youth mental health
- Are age and stage appropriate, given the wide age range of the target population (i.e. 10 – 24 years)
- Aim to support and amplify the voices of young people
- Deliver mental health supports through youth-friendly, health and non-health mechanisms
- Meet people where they are by integrating mental health and/or wellbeing interventions into existing education or social care systems

In addition to addressing the country specific priorities outlined in Appendix A, TTS innovations should seek to integrate one or more of the following cross-cutting themes:

- Tackle the outcomes of damaging gender norms and consider the mental health needs of people with diverse sexual and gender identities;
- Consider the distinct mental health needs arising from intersecting experiences of discrimination and marginalization across various identities (such as socio-economic status, religion, etc.);
- Acknowledge the influence of power differentials on young people's mental health and consider the limited agency and autonomy faced by young people;
- Address stigma and discrimination related to mental illness with a specific focus on stigma experienced by young people; and/or
- Creatively leverage technology that is highly used and trusted by young people, while considering rigorous monitoring and evaluation and tracking of priority outcomes.

4.3 TTS PRIORITY HEALTH OUTCOMES

Being seeks bold ideas that improve the mental health and wellbeing of the most underserved 10- to 24-year-olds in priority countries.

In general, prevention and promotion initiatives may achieve this through one or more pathways. For example, innovations may directly target youth mental health and wellbeing; they may address stigma, attitudes and practices; they may also aim to tackle access to the wider social and environmental determinants of youth mental health and wellbeing, such as but not limited to parenting practices or employment.

Additionally, improvements in mental health and wellbeing for young people may look different across contexts and may have a variety of approaches to measurement. Successful applications will clearly define at least one relevant priority health outcome that the innovation will set out to achieve, with clear plans to track progress using appropriate measurement tools.

While each priority country has specific areas of focus related to young people's mental health and wellbeing (see Appendix A for country specific information), this section highlights a wide range of priority health outcomes. Innovators must ensure that their projects priority health outcomes speak directly to their country's focus area.

Here are some examples of priority health and wellbeing outcomes that innovations may set out to achieve. **This is not a comprehensive list of health and wellbeing outcomes that can be**

achieved through prevention and promotion initiatives. We welcome applications with other relevant health and wellbeing outcomes.

- Improved wellbeing
- Improved life satisfaction
- Improved emotional regulation
- Improved connectedness
- Improved social capital
- Improved self esteem
- Improved coping
- Improved self-efficacy
- Improved resilience
- Effects on knowledge (ex. Mental health literacy)
- Effects on attitudes (ex. Reductions on stigmatizing attitudes)

TTS project plans should state which health and wellbeing outcomes will be assessed and reported, and the relevant tool(s) that will be used to demonstrate progress and success of the innovation. See Appendix B for guidance on health and wellbeing outcome definitions, measurement tools, as well as other key monitoring and evaluation requirements. TTS innovators are also expected to report against any additional outcome and output indicators listed in Appendix B that are relevant to demonstrating the success of their innovation.

4.4 TTS TARGET USERS

TTS innovations must ultimately benefit the most underserved 10- to 24-year-olds in at least one of the 12 priority countries, however they may choose to focus on a specific age group within the range of 10- to 24-year-olds. Projects should take into consideration the wide developmental range between 10 and 24 years of age and consider which types of interventions are best aligned with the developmental needs of specific age groups. Innovative solutions should be targeted to the most relevant age group for the country specific area of focus.

While young people are the primary target beneficiaries, certain countries may include parents / caregivers, community leaders, teachers or school counsellors as secondary target beneficiaries. Please refer to Appendix A for country specific information.

4.5 TTS MONITORING, EVALUATION, AND LEARNING

Monitoring and evaluation plans are critical for measuring the success of an innovation. All funding proposals need a monitoring and evaluation plan and approach to ensure they are able to:

- Measure the effects of the innovation on mental health and wellbeing and demonstrate evidence of effectiveness;
- Monitor outcomes to ensure the positive benefits are maintained as the innovation scales and is more widely adopted;
- Monitor and report on progress towards achieving the intended outcomes; and
- identify shortcomings and limitations.

For TTS, data collection plans should track the innovation's use, access and impact; plus a brief overview of how the team will evaluate results over the project's lifecycle and measure outcomes. In addition to reporting on selected priority health and wellbeing outcome(s) (see section 4.3 for a list of potential priority health outcomes), proposals must also include short, medium and long-term indicators, and a description of how these will be monitored and evaluated over the life of the project.

How we define success:

- Evidence from a controlled or limited setting that the innovation improves one or more TTS priority health and wellbeing outcome(s) (see section 4.3 for a list of potential priority health outcomes) for the most underserved 10- to 24-year-olds
- Evidence the innovation can be feasibly implemented, sustained, and financially supported at scale in the target setting(s) or region(s), and/or
- Demonstrated interest, financing, and/or commitments from key stakeholders, influencers and partners for scaling up and sustaining the innovation

Projects will have the opportunity to access monitoring and evaluation technical support from the Being Learning and Support Partner. Projects are also expected to participate in peer-to-peer learning with other funded projects in the ecosystem.

Communicating results is crucial to accountability. While doing this via scientific publications is important, it should not be the primary objective of any funded project without a well-articulated justification that this is a step on the critical path to impact and sustainability.

4.6 TTS INTEGRATED INNOVATION

We encourage proposals for innovation in all forms: technologies, products, services, processes, business models, policy approaches and/or delivery mechanisms.

Projects are encouraged to have an Integrated Innovation® approach that coordinates scientific/technological, social and/or business innovation, to develop solutions to complex challenges. This does not discount the singular benefits of each of these innovation types, but instead highlights the powerful synergies of aligning any of the three. Therefore, your solutions should include any of the following three areas:

- **Scientific/technological innovation:** has a base in the psychological, natural, health or behavioral sciences or in engineering or economics; can be simple as there is no requirement for high-tech solutions

- **Social innovation:** recognizes and/or addresses the broader social, structural and/or political determinants of health, with a particular focus on gender and intersectional inequalities; addresses local and/or cultural contexts that factor into implementation and scaling

- **Business innovation:** maximizes the value, relevance and unique quality of the solution to create demand and financial sustainability; addresses barriers to affordability and accessibility.

4.7 TTS APPLICATION PROCESS

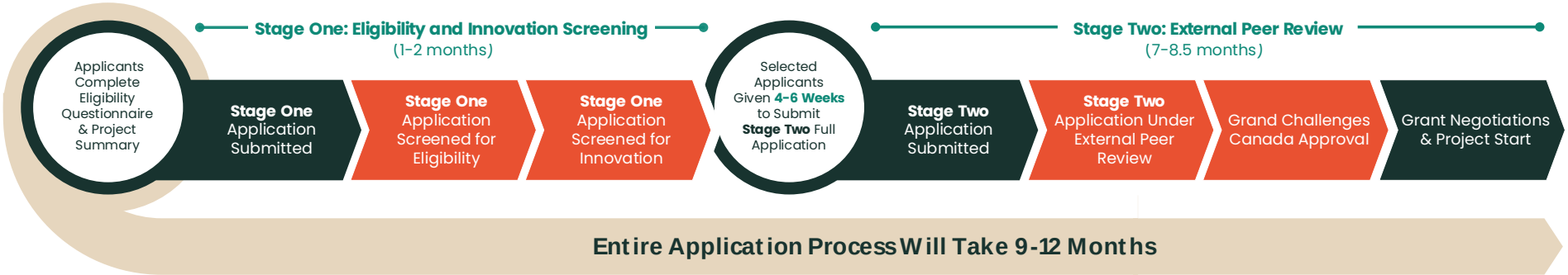
Applications will be accepted on a rolling basis and involve a two-stage process: completing a screening questionnaire and submitting a project summary (stage one) and submitting a full project application (stage two). Stage two consists of two parts: Part 1: Health Impact Questionnaire and Part 2: Due Diligence. Only those applications that pass stage one will be invited to submit a full application (stage two).

Language: Applications may be submitted in English or French. Applications in any other language will be rejected without review. Note that quality of the English or French language proposal will not play a factor in the evaluation of the proposal unless it significantly affects the clarity of the information.

Innovator Toolbox

Applicants are encouraged to access Grand Challenge Canada's online Innovator Toolbox, which contains materials to help researchers and innovators to develop their project proposals and to plan for how their innovation can be sustainably scaled and have global impact. Our Gender Equality Portal provides a set of gender equality tools.

Two-Stage Process for Transition To Scale (TTS) Funding Applications



4.8 INSTRUCTIONS FOR APPLICATION PORTAL, FLUXX

To apply for funding, applicants must use the online application provided, which is only accessible via the Grand Challenges Canada's Fluxx Portal (https://gcc.fluxx.io).

See Appendix D for a detailed description for accessing FLUXX

4.9 TTS APPLICATION PROCESS TIMELINE

TTS funding applications will take approximately 9 – 12 months to move through the application process from stage one application submission to project start. TTS applications will be accepted on a rolling basis. This means that applications are continually accepted and reviewed at specific intake periods until the total funding allocated for TTS opportunities has been awarded. Given the rolling deadline, submitted applications will be reviewed periodically over the next few years and may be reviewed more frequently within the first year of the RFP.

Application intake deadlines will be included in the FAQ document found on the Grand Challenges Canada website and Being website. Please check the FAQ to ensure you have the most up to date information about application intake deadlines.

4.10 TTS APPLICATION REVIEW TIMELINE

Stage one applications will be reviewed approximately 1-2 months after the application intake deadline and unsuccessful applicants will be notified within this timeframe. Successful applicants will be invited to submit a full application (stage two) and will be given approximately 4-6 weeks to complete their stage two application.

Proposals that pass through the two-stage process will be presented to the relevant body of Grand Challenges Canada for a final funding decision. Below is an overview of the review process.

4.11 TTS REVIEW PROCESS

All applications will involve a two-stage review process: screening (stage one) and external peer review (stage two). Only those applications that pass the eligibility / innovation screen (stage one) will be invited to participate in the full application process, which will undergo external peer review (stage two).

STAGE ONE: SCREENING

TTS Eligibility Screen

Grand Challenges Canada will screen all funding applications on the basis of the eligibility criteria outlined below. Applications that do not meet the eligibility criteria will be removed from the review process. The eligibility criteria are listed below:

1. Eligible applicants include legally recognized organizations (e.g. social enterprises, non-profit, for-profit, limited liability companies, research/academic institutions) that:

a. Are formed and legally incorporated
b. Can successfully perform activities in their technical area
c. Can receive and administer funding

The following are ineligible:

- Individuals
- Sole proprietorships
- Unincorporated trusts and partnerships
- Government organizations
- United Nations country offices

2. Projects must be implemented in one of the 11 countries eligible for TTS funding (Colombia, Ecuador, Ghana, India, Indonesia, Morocco, Pakistan, Romania, Sierra Leone, Tanzania, and Vietnam. We are not accepting TTS applications for projects in Senegal at this time).

3. There can only be one (1) Project Lead for each project and they must be affiliated with the applying organization. The Project Lead should be the person with the highest level of responsibility working directly on the project and will be the point of contact for Grand Challenges Canada.

4. A Project Lead can only be listed on one (1) application. Single institutions can submit multiple applications but each needs a different Project Lead.

5. The Review Committee will only consider applications that include all required information and answers to all questions.

6. Your innovation must align with:
   a. Section 4.1 TTS General Scope (funding amount and funding period)
   b. Appendix A: Country Priorities (alignment with the country specific area of focus)

   Section 2.3 outlines what Grand Challenges Canada will not fund.

7. Applicants must obtain any legal and/or regulatory approvals, consents or reviews required to accept foreign grant funds and/or conduct the project activities, before concluding a funding agreement. For example, project activities in India may require prior registration with the Ministry of Home Affairs under the Foreign Contribution Regulation Act 2010 (FCRA). As such, successful applicants would have to provide either FCRA registration or written certification. Failure to comply with FCRA requirements may result in financial and/or criminal penalties against your organization. Get advice to determine if FCRA applies. Other examples of jurisdictions that require approvals are Vietnam. Applicants are responsible for understanding and complying with these regulations and laws before receiving funding from Grand Challenges Canada.

8. Grand Challenges Canada may, at any time and at our sole discretion, change the eligibility criteria for applicants, Project Leads and/or eligible countries, as long as it doesn't substantially undermine the review process.

Please note:

- Grand Challenges Canada must approve any change in Project Lead, applicant organization or country of implementation from the originally submitted application.
- While it's not required, we do encourage applicants from outside of the priority country of implementation to collaborate meaningfully with innovators from the priority country of implementation.
- Project Leads must get their affiliated institution's sign-off before submitting any application.

TTS Innovation Screen

Applications that are deemed eligible will move forward to the Innovation Screen as part of stage one of the review process. During this stage, the Project Summary will be assessed by Grand Challenges Canada staff and Being Partners based on the below criteria. Proposals lacking innovation are removed from consideration.

Applications are scored against the below criteria using the **Project Summary**.

1. **Relevance (Yes/No)**
    - Does the proposed innovation align with the country priority(s) in Appendix A?
    - Does the proposed innovation focus on the prevention and promotion aspects of youth mental health needs?
    - Does the proposed innovation integrate one or more cross-cutting themes outlined in Section 4.2?
    - Does the proposed innovation have the potential to lead to one or more of the priority health outcomes, such as but not limited to those listed in Section 4.3?
    - Does the proposed innovation demonstrate meaningful involvement of young people and/or people with lived experience of mental health challenges in the design, implementation, and/or evaluation of the innovation?
    - Is the proposed innovation age and stage appropriate for the target population?

2. **Innovation & Potential for Impact (Scored 1- 5)**
    - Is the proposed approach innovative and clearly articulated?
    - Does it represent more than an incremental improvement over current approaches and/or an innovative approach to implementation or delivery of a known intervention?
    - Is proof of concept evidence provided that demonstrates positive health and wellbeing outcomes?
    - Is there evidence that demonstrates that the innovation is ready to transition to scale?
    - Is the innovation achieving significant or transformational impact on the lives of each person reached?

3. **Scale & Sustainability (Scored 1 – 5)**
    - Is there a realistic and sustainable path to achieve scale?
    - Is there a clear and realistic path to reach financial sustainability once the last Grand Challenges Canada dollars have been spent?

STAGE TWO: EXTERNAL PEER REVIEW

TTS Full Application

Applicants who pass stage one screening will be invited to submit additional documents for stage two: 1) Health Impact Questionnaire (evaluated by an external peer review process overseen by Grand Challenges Canada) and 2) Pitch Deck and Due Diligence (evaluated by Grand Challenges Canada staff).

Evaluation Criteria

Health Impact Questionnaire (HIQ)

The HIQ form will detail the scope, innovation, proof-of-concept results, and outcomes of the TTS work. This component of the application will be evaluated through the external peer-review process overseen by Grand Challenges Canada and conducted by independent and external youth, scientific, social and business subject matter experts based on the following criteria:

1. **Proof of Concept**
    - Has the innovator presented enough convincing evidence to support the impact of their idea on selected priority health outcome(s) and/or the reduction of significant barrier(s) to health in a controlled or limited setting?
2. **Potential for Impact**
    - Is the innovation designed to improve the lives of underserved young people 10- to 24-years of age?
    - If the innovation reaches the young people who need it, will it have a significant or transformational impact on their lives?
3. **Monitoring and Evaluation**
    - Does the innovator describe a clear learning agenda or monitoring / evaluation plan for the innovation?
    - Is the innovator's monitoring and evaluation plan strong enough to draw the appropriate conclusions by the end of the funding period?

Due Diligence

Strong applications will be invited to engage in due diligence with staff reviewing supplementary responses and documentation submitted by the innovator. As part of due diligence, applicants will be supported to prepare a Pitch Deck that includes information such as the proposed solution, team, target market size, systems map (including competition and complementary solutions), and scaling and sustainability plan.

Due diligence may include, but is not limited to, an assessment of the innovation and/or organization's health impact, operations, historical and projected financials, scaling plan, intellectual property, policies and procedures, partnerships, gender equality, environment sustainability, team, and governance. Due diligence may include interviews with an applicant's partners, funders, advisors, and third-party stakeholders. Applicants will also be required to

provide rules and policies that adequately implement internal controls in regard to anti-corruption, antifraud, antibribery, and other situations of misuse of funds.

Due diligence and investment decisions will be made including but not limited to following criteria:

1. **Boldness**
    - Is the proposed innovation bold / innovative?
    - Is the solution designed to meet the specific needs of young people 10- to 24 years who are underserved by current approaches?
2. **Impact**
    - Is the innovation reaching young people 10- to 24 years who are underserved?
    - Is the innovation achieving significant or transformational impact on the lives of each young person reached?
    - Does the proposed scope of work enable the innovator to reach significantly more people and/or have greater impact on each person reached?
    - To what extent does the applicant demonstrate an understanding of the overarching youth mental health landscape and where the innovation is situated within it?
3. **Scale**
    - Is there a realistic and sustainable path to achieve scale?
    - Will the activities outlined in the proposed scope of work allow the innovator to achieve significant progress on its path to scale?
4. **Sustainability**
    - Is there a clear and realistic path to reach financial sustainability once the last Grand Challenges Canada dollars have been spent?
    - Does the team have the commitment from appropriate strategic partners and funding partners to provide for the long-term sustainability of the innovation?
    - Is the investment structured to maximize an organization's sustainability and ability to crowd in other funders?
5. **Team**
    - Is the team led by people with relevant lived experience and connections to the communities they are seeking to serve?
    - Does the team have the capacity, skills and ability to implement on their proposed vision and strategy to achieve impact, sustainability and scale?
    - Does the team have the capacity, skills and ability to convert potential partners into strategic partners and funders?
    - Does the team have the capacity skills and ability to learn from the proposed scope of work?
6. **Value Add**
    - Does the innovation add value to Grand Challenges Canada's portfolio?
    - Does Grand Challenges Canada offer any 'more-than-money' access to resources, networks and/or expertise that the innovator requires at this stage?
    - Is Grand Challenges Canada well-placed to support the innovator in bringing in strategic partners and funding?

5. Ecosystem Catalyst (EC)

5.1 EC GENERAL SCOPE

One of the ultimate outcomes of Being is to strengthen country ecosystems for youth mental health. To achieve this objective, efforts are needed to address the broader systemic barriers that hinder sustainable implementation; promote broader integration of mental health and wellbeing into adjacent areas; and begin to build local demand for youth mental health and wellbeing products and services. This requires ecosystem-level solutions. Ecosystem Catalyst funding is intended to support national and sub-national level activities that strengthen local ecosystems for youth mental health and related innovations and foster an enabling environment that can help prevention and promotion initiatives thrive and scale.

Ecosystem Catalyst funding between CAD $200,000 - $300,000 over 24 months is available. We acknowledge that this type of systems changes takes longer than this timeframe, so there will be potential for renewal funding in priority areas.

System level changes often also require the action of multiple partners. To increase the likelihood of success, catalyst grants will be judged more favourably when they draw on / build from partnerships across relevant groups, e.g. civil society, government, research, etc.

Ecosystem Catalyst projects should address priority barriers to scale, such as legislation, evidence, coordination, and/or mobilize demand for the scale up of effective solutions. Areas of focus for Ecosystem Catalyst projects are country specific; please refer to Appendix A for detailed information.

Ecosystem Catalyst project teams are expected to have experience in:

- Data analysis and knowledge translation;
- Influencing positive systemic change;
- Supporting, and/or advocacy for, scale-up of mental health and wellbeing solutions;
- Engaging with innovators and/or innovator networks;
- Public and multi-sector engagement; and
- Monitoring, evaluation and learning.

5.2 EC COLLECTIVE GOAL AND PRIORITY OUTCOMES

Each Being country faces unique barriers that hinder sustainable implementation of innovations; constrain the broader integration of mental health and wellbeing; and limit local demand for youth mental health and wellbeing prevention and promotion initiatives. In turn, the collective goal of Ecosystem Catalyst (EC) projects is to **build the country's enabling ecosystem for prevention and promotion initiatives and related innovations for youth mental health and wellbeing.**

Within each priority country, successfully striving towards this collective goal may include, but is not limited to, achieving priority outcomes such as:

- Written changes in mental health related policies, procedures, and/or regulations;
- Improved coordination among key stakeholders working to secure mental health improvements;

- Increased government budgetary allocation to mental health priorities;
- Increased private sector investment in mental health priorities;
- Numerical and qualitative measures of increased mobilization of local demand for the scale-up of effective innovations.

EC projects will be expected to leverage significant existing networks and infrastructure / capacities.

Grand Challenges Canada is open to different strategies and approaches to achieve the goal outlined above, including the funding of consortia of organizations.

5.3 EC TARGET USERS

EC projects must focus on national and/or sub-national level activities that strengthen local ecosystems and address barriers for youth mental health and wellbeing and related innovations.

Given this focus, target users will involve a range of actors and may include:

- National government decision-makers and departments
- Global agencies supporting young people's mental health in priority countries
- Public sector representatives at national, sub-national, and local levels
- Advocacy organizations
- Community service organizations
- Public and private funders supporting young people's mental health and wellbeing programming
- Key influencers and community leaders
- Other youth mental health stakeholders, including youth and people with lived experience of mental illness.

5.4 EC MONITORING, EVALUATION and LEARNING

Monitoring, evaluation and learning plans are critical for evidence-based decision making and demonstrating impact. Successful applications will include clear plans for impact measurement, including assessments of progress on achievement of outcomes The EC's staged application process will require applicants to begin with submitting information about their theory of change, followed by more detailed information regarding proposed key metrics to access progress and success, impact measurement approaches, and learning plans.

If invited to participate in the second stage of the application process, applicants will be required to outline their monitoring, evaluation, and learning plans in detail. In particular, applicants will be required to propose at least three (3) key success metrics that will be used to routinely assess progress and performance. Proposed key success metrics should be accompanied by a description of why these measures are positioned to effectively illustrate progress toward the achievement of priority outcome(s); how baselines and targets will be established; and how impact measurement will be carried out.

To complement the key success metrics, applicants will also be required to describe the series of short, medium, and long-term outcomes and accompanying metrics that they will monitor across the life of the project and beyond.

In acknowledging the complex and challenging nature of ecosystem building, Grand Challenges Canada does not expect projects to achieve medium and long-term priority outcomes (i.e., those listed in Section 5.2) by the end of the funding cycle. However, monitoring progress using key success metrics will be critical for demonstrating steady progress towards those priority outcomes.

Grand Challenges Canada acknowledges the iterative and responsive nature of systems change. Therefore, we recognize that plans may evolve. Applicants are expected to provide a specific description of how learning and iteration will be managed during the project period. Applicants will be required to outline a learning plan, complete with at least three (3) learning questions. Applicants will need to explain how data and insights will be drawn throughout the funding period to answer each question. Learning plans may include qualitative and quantitative methods.

Communicating results is crucial to accountability. While doing this via scientific publications is important, it should not be the primary objective of any funded project without a well-articulated justification that this is on the critical path to impact and sustainability.

5.5 EC APPLICATION PROCESS

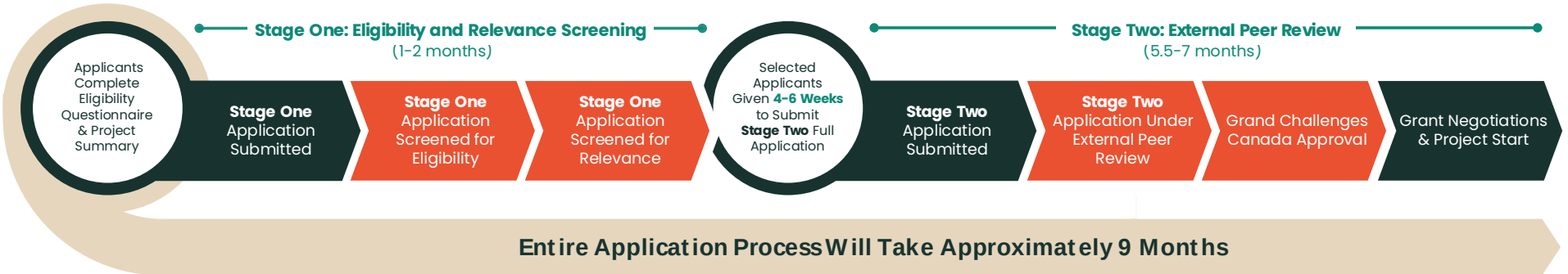
Applications will be accepted on a rolling basis and involve a two-stage process: completing an eligibility questionnaire and submitting a project summary (stage one) and submitting a full application (stage two). Only those applications that pass stage one will be invited to submit a full application (stage two). During stage two, applicants will be given an opportunity to edit their responses to the stage one questions if needed.

As part of the stage one application process, applicants must submit a robust Theory of Change (TOC) that clearly outlines how proposed activities will lead to envisioned outputs; short-, medium-, and longer-term outcomes; and the collective EC goal (see section 5.2). Applicants are strongly encouraged to consider the country focus area and ecosystem context described in Appendix A in the development of their TOC. The TOC should also include a description of key assumptions underpinning how change will occur, and any major risks that may affect progress.

The series of activities, outputs, outcomes and related assumptions will ideally inform the key metrics that will be monitored and evaluated throughout the project. Several public resources to construct a theory of change can be found on the internet. A few examples of resources are listed here from the UN Development Group, Global Affairs Canada, Think NPC's Ten Step Process and Center for Theory of Change.

Language: Applications may be submitted in English or French. Applications in any other language will be rejected without review. Note that quality of the English or French language proposal will not play a factor in the evaluation of the proposal unless it significantly affects the clarity of the information.

Two-Stage Process for Ecosystem Catalyst (EC) Funding Applications



5.6 INSTRUCTIONS FOR APPLICATION PORTAL, FLUXX

To apply for funding, applicants must use the online application provided, which is only accessible via the Grand Challenges Canada's Fluxx Portal (https://gcc.fluxx.io).

See Appendix D for a detailed description for accessing FLUXX.

5.7 EC APPLICATION PROCESS TIMELINE

EC funding applications will take approximately nine months to move through the application process from submission to project start. EC applications will be accepted on a rolling basis. This means that applications are continually accepted and reviewed at specific intake periods until the total funding allocated for EC opportunities has been awarded. Given the rolling deadline, submitted applications will be reviewed periodically over the next few years and may be reviewed more frequently within the first year of the RFP.

Application intake deadlines will be included in the FAQ document found on the Grand Challenges Canada website and Being website. Please check the FAQ to ensure you have the most up to date information about application intake deadlines.

5.8 EC APPLICATION REVIEW TIMELINE

Stage one applications will be reviewed approximately 1-2 months after the application deadline and unsuccessful applicants will be notified within this timeframe. Successful applicants will be invited to submit a full application (stage two) and will be given approximately 4-6 weeks to complete their stage two application.

Proposals that pass through the two-stage process will be presented to the relevant body of Grand Challenges Canada for a final funding decision. Below is an overview of the review process.

5.9 EC REVIEW PROCESS

All applications will involve a two-stage review process: screening (stage one) and external peer review (stage two). Only those applications that pass the eligibility / relevance screen (stage one) will be invited to participate in the full application process, which will undergo external peer review (stage two).

STAGE ONE: SCREENING

EC Eligibility Screen

Grand Challenges Canada will screen all funding applications on the basis of the eligibility criteria outlined below. Applications that do not meet the eligibility criteria will be removed from the review process. The eligibility criteria are listed below:

1. Eligible applicants include legally recognized organizations (e.g. social enterprises, non-profit, for-profit, limited liability companies, research/academic institutions) that:
    a. Are formed and legally incorporated
    b. Can successfully perform activities in their technical area
    c. Can receive and administer funding

    The following are ineligible:
    - Individuals
    - Sole proprietorships
    - Unincorporated trusts and partnerships
    - Government organizations
    - United Nations country offices

2. Projects must be implemented in one of the 12 priority countries (Colombia, Ecuador, Ghana, India, Indonesia, Morocco, Pakistan, Romania, Senegal, Sierra Leone, Tanzania, and Vietnam).

3. There can only be one (1) Project Lead for each project and they must be affiliated with the applying organization. The Project Lead should be the person with the highest level of responsibility working directly on the project and will be the point of contact for Grand Challenges Canada.

4. A Project Lead can only be listed on one (1) application. Single institutions can submit multiple applications but each needs a different Project Lead.

5. The Review Committee will only consider applications that include all required information and answers to all questions.

6. Your innovation must align with:
    a. Section 5.1 EC General Scope (funding amount and funding period)
    b. Section 5.2 EC Collective Goal and Priority Outcomes
    c. Appendix A: Country Priorities (alignment with the country specific ecosystem context)

    Section 2.3 outlines what Grand Challenges Canada will not fund.

7. Applicants must obtain any legal and/or regulatory approvals, consents or reviews required to accept foreign grant funds and/or conduct the project activities, before concluding a funding agreement. For example, project activities in India may require prior registration with the Ministry of Home Affairs under the Foreign Contribution Regulation Act 2010 (FCRA). As such, successful applicants would have to provide either FCRA registration or written certification. Failure to comply with FCRA requirements may result in financial and/or criminal penalties against your organization. Get advice to determine if FCRA applies. Other examples of jurisdictions that require approvals are Vietnam. Applicants are responsible for understanding and complying with these regulations and laws before receiving funding from Grand Challenges Canada.

8. Grand Challenges Canada may, at any time and at our sole discretion, change the eligibility criteria for applicants, Project Leads and/or eligible countries, as long as it doesn't substantially undermine the review process.

Please note:

- Grand Challenges Canada must approve any change in Project Lead, applicant organization or country of implementation from the originally submitted application.
- While it's not required, we do encourage applicants from outside of the priority country of implementation to collaborate meaningfully with innovators from the priority country of implementation.
- Project Leads must get their affiliated institution's sign-off before submitting any application.

EC Relevance Screen

Applications that are deemed eligible will move forward to the Relevance Screen as part of stage one of the review process. During this stage, the Project Summary will be assessed by Grand Challenges Canada staff and Being Partners based on the below criteria.

Applications are scored against the below criteria using the **Project Summary**.

1. **Assessment of Analysis and Alignment (Yes/No)**
    - Does the application demonstrate an understanding of the current state of the youth mental health ecosystem in the focused country?
    - Is the proposed project aligned with the EC Collective Goal and Priority Outcomes outlined in Section 5.2?
    - Does the proposed project align with the identified ecosystem barriers (in Appendix A) for the identified priority country?
2. **Potential for Impact and Influence (Scored 1-5)**
    - Do evidence and common sense suggest that the activities, if implemented will lead to proposed outcomes?
    - Are underlying assumptions articulated and fair?
    - Does the team own enough accountability and existing relationships to influence this theory of change?
    - Is there a clear plan for collaborating with other stakeholders in the mental health ecosystem to maximize project impact?
    - Does the organization demonstrate a proven track record in successfully implementing similar projects?

STAGE TWO: EXTERNAL PEER REVIEW

An independent expert peer review committee of external youth, scientific, social and business experts will advise on the merit of full applications and evaluate each one against the criteria below. Reviewers will also consider the criteria used in stage one (analysis and alignment with the RFP, and potential for impact) from the Project Summary.

Evaluation Criteria

1. **Relevance**
    - Does the proposed project include appropriate and meaningful involvement of young people and young people with lived experience of mental health challenges?
2. **Leadership Capability to Champion Change**
    - Is the organization and project majority locally led?
    - Are the project team and collaborators appropriately connected to and able to influence the target ecosystem? Do they have significant relationships with public sector and/or other relevant stakeholders?
    - How well does the team reflect the experience to execute on the proposed plan of work?
3. **Monitoring, Evaluation, and Learning**
    - Does the monitoring and evaluation plan identify clear success metrics that will allow for performance measurement and tracking or progress towards priority outcomes?
    - Are the proposed indicators appropriate for measuring the short-, medium- and long-term outcomes selected and is there a clear rational for why these measures are positioned to effectively illustrate success and progress toward the priority outcome?
    - Does the team have the capacities to report on the outcomes of the proposed work?
    - Has the team articulated a clear plan for managing iteration and learning?
4. **Proposed Plan of Execution**
    - Is there a fair level of detail on the proposed plan of work that can be suitably assessed?
    - Are proposed activities reasonable to achieve outcomes within proposed timelines?
    - Does the team identify potential risks and barriers?
    - Does the application propose specific and realistic steps to overcome these barriers?
    - Is there evidence that the proposed activities and outcomes align with government and key stakeholder priorities in the country?
5. **Value for Money**
    - Are funds requested reasonable, commensurate and sufficient to achieve proposed outcomes?
    - Does the proposal represent a particularly thoughtful and efficient use of resources?

6. Post-Application: Next Steps & Resources

6.1 FUNDING DECISIONS

External Peer Review will result in a ranked list of applications. Based on these results, funding recommendations will be made to the relevant body of Grand Challenges Canada, which will make the final funding decisions, including its reserved rights set out in Section 7.6.

Based on the results of the review panel or during the negotiations process, refinements to the proposed project plan, structure, amount, and governance may be required before a funding agreement is finalized.

6.2 ACTIVITIES AND DELIVERABLES

Projects funded under this effort will be expected to engage in the following activities and provide the specific deliverables listed below.

1. Performance reporting, focused on use of funds and outcomes achieved. Reporting will be every three or six months, depending on our assessment of project and institutional risk.

2. Robust monitoring, evaluation and learning (MEL). As an impact-first investor, Grand Challenges Canada requires all funded projects to report on the activities, outcomes and impact resulting from their projects. The Grand Challenges Canada team works with project teams to ensure an appropriate and rigorous approach to MEL is used to measure results. Twice a year, innovators report quantitative and qualitative results to Grand Challenges Canada.

3. Access to the funded innovation, creating and putting into action an “Access Plan” to provide access to the funded innovation at an affordable price to target end users (which will be defined in the funding agreement) who are most in need within applicable low- and middle-income countries, including specifically those who are underserved or unserved and most in need in low-resource settings.

4. Sharing of project knowledge, creating and putting into action a “Sharing Plan”, including sharing with other organizations, and through social media, open access publications, depositing of data into publicly accessible repositories, press releases, conferences and other public engagement activities including stakeholder engagement, and contributing to the learning agenda for specific challenges, including through participation in meetings (e.g., Grand Challenges Annual Meeting, panel discussions) with other Grand Challenges Canada innovators.

5. A final report that accounts for financial spending and that captures a clear assessment of the impact of the project, including progress towards ensuring access to innovations to those most in need of the innovation and widespread dissemination of knowledge. Instructions for reporting will be provided to successful recipients. Please note that a 5% hold back of funds will be applied to all funding under this program, to be released to teams upon project completion and full justification of costs and a satisfactory final report.

6. Continued post-investment updates on management of intellectual property rights in supported innovations and on progress in implementing Sharing and Access Plans.

The full list of activities and deliverables will be reflected in the grant agreement with Grand Challenges Canada.

Funded projects must retain supporting project documentation until April 1, 2034, after the end of the Grant Agreement, including financial records, and may be audited by Grand Challenges

Canada or any funders of this initiative. Associated requirements, as well as the full and detailed listing of activities and deliverables will be reflected in the Grant Agreement.

6.3 BEING LEARNING AND SUPPORT PROVIDER

The Being learning and support provider will be delivered by Orygen, a global leader and Australia's Centre for Excellence in Youth Mental Health. Orygen in collaboration with its regional partners will provide technical support to the project teams funded under the Being initiative and participation in this support is highly encouraged. Orygen will be a responsive resource to maximize the impact of Being projects and to boost the collective impact of the program. Specifically, they will:

- Provide one-on-one venture advisory services to funded projects, including but not limited to leadership building, meaningful youth engagement, government engagement, monitoring and evaluation support.
- Create, manage and support communities of practice to enhance knowledge sharing, including facilitate face-to-face convenings.
- Support and facilitate learning with the initiative, its partners, and the broader global mental health ecosystem.

Additionally, Orygen will hold optional workshops for short-listed applicants on various topics, such as project design, implementation, fundraising, governance, youth engagement, partnership building, and monitoring, evaluation and learning.

7. Guiding Principles and Additional Terms

This section reflects a high-level outline of Grand Challenges Canada's guiding principles and terms of funding. If selected for funding, project teams will be required to comply with the related Cost Directive. These policies may be updated from time to time and can be found on the on the Grand Challenges Canada website (see https://www.grandchallenges.ca/innovator-resources/).

7.1 FINANCING TERMS

1.1 ELIGIBLE COSTS

The following provides a high-level overview of costs directly related to the implementation of the Project which are eligible under Grand Challenges Canada funding. For more information, please refer to the Cost Directive on the Grand Challenges Canada website (see https://www.grandchallenges.ca/innovator-resources/).

Remuneration – Funding Recipient's Employees
Remuneration includes salary and daily wage rates paid to employees for work directly related to the Project. Salary and wage rates should be comparable to the local market for similar types of work. The following costs are considered remuneration: direct salaries and benefits in accordance with internal policies.

Subcontractor Fees

Subcontractors are external individuals or groups who are engaged by an Innovator to provide goods and/or services as part of the Project. Payments are made under a subcontract agreement. The Innovator and the subcontractor must have an arm's length relationship to avoid real or perceived conflicts of interest.

Individual rates or amounts negotiated under a subcontract agreement must comply with the requirements of Grand Challenges Canada's Procurement Policy and shall not exceed the fair market value for the service or good in question. Contracts greater than CAD $25,000 for goods and greater than $40,000 CAD for services in each fiscal year, must be tendered competitively, unless there is a valid reason not to, which would require prior approval from Grand Challenges Canada.

Where multiple contracts are signed with the same vendor, the cumulative value of these contracts should be considered when applying the thresholds noted above.

Examples include youth engagement consultant, mental health workshop facilitator, web development specialist, local language translator, researcher, technical advisor, psychologist, counsellor, etc.

Travel Costs
Actual and reasonable travel costs directly related to the implementation of the Project and incurred by the Innovator for employee travel in accordance with the provisions of Grand Challenges Canada's Travel Policy are eligible expenses.

Please note that a total of CAD $7,000 must be included within the budget to cover the travel costs of one project team member attending one Grand Challenges Canada Global Mental Health community meeting per year.

Goods and Supplies

Actual and reasonable costs arising from the purchase, rental, maintenance, transportation, and installation of goods, assets and supplies directly related to the Project, provided that such costs do not exceed the fair market value and are eligible expenses.

Examples include mental health workshop materials, tablets needed for project learning activities, posters and training manuals, Personal Protective Equipment (PPE) for in- person activities, etc.

Equipment Costs
"Equipment" is defined as a good with a useful life of more than one year and costs more than CAD $500 per unit.

Any equipment and/or supplies purchased in part or fully from Grant funds are considered "Programme Funded Assets" if they:

- Have a useful life of more than one year; and either
    - The purchase price or development cost of the Asset is in excess of $500 CAD or equivalent in local currency;

- They form a group of lower value items (e.g. pharmaceutical products, food, relief packs, etc.) where the combined value is in excess of $500 CAD or equivalent in local currency; or
- They can be considered an attractive item regardless of cost (e.g. mobile phones, cameras, laptops, tablets, satellite phones, vehicles, etc.).

The acquisition or improvement of fixed assets are ineligible for reimbursement. Fixed assets are defined as a one-time large purchase of property, land or equipment used for revenue generation over a long period of time.

The price paid for this expense must be reasonable compared to alternative options in the market. Costs may include the basic purchase price, freight, and installation of the equipment.

Equipment which costs more than CAD $25,000 annually, must be tendered competitively in accordance with Grand Challenges Canada's Procurement Policy, unless there is a valid reason not to, which requires prior approval from Grand Challenges Canada.

Examples include laptop for project staff, projector, etc.

Project Administration Costs
Actual and reasonable administrative costs directly related to the implementation of the Project are eligible. These include:

- Youth participant stipends or honorariums;
- Bank fees;
- Telecommunication expenses (internet, fax, cellular), mail and courier costs;
- Translation and word processing costs, printing and production costs associated with Project reporting and production of reading material;
- Meeting, workshops, conference costs (includes meal and travel costs for participants);
- Costs related to office space and associated utilities, required to implement the Project;
- Publication fees during the Project period;
- Ethical approvals and review board costs; and
- Other administrative type of expenditures relating directly to project activities

Sub-grants
A sub-grantee is defined as an external organization that acts like a partner to provide key services required to complete the Project and cannot be easily replaced by a vendor or supplier. Sub-grantee costs are eligible expenses as long as the following requirements are met:

- Sub-grantees must be legal entities, which can enter into legal agreements;
- Sub-grantees are subject to the same eligible expense requirements and policies as the Innovator; and
- Sub-grantees must keep track of expenses incurred in a detailed general ledger and shared with the Innovator to be maintained. Sub-grantees may be required to submit this detailed general ledger to Grand Challenges Canada (where applicable).

Indirect/Overhead Costs

Projects are entitled to indirect costs, calculated as 10% of all direct costs. Indirect costs are costs that cannot be directly traced to a specific project activity.

Projects must consistently charge costs as either indirect or direct costs and must not double charge or inconsistently charge the same cost, or categories of costs, as both.

Indirect costs must be reported to Grand Challenges Canada as actual expenses incurred. Grand Challenges Canada does not allow lump sum or Indirect Cost Pool reporting.

Please note: Only costs incurred during the project period are considered eligible. Any expenses incurred after the project end date cannot be allocated to Grand Challenges Canada's funding.

1.2 TERMS OF DISBURSEMENT

1) Advance Disbursement: An initial advance equal to the estimated cash flow requirements for Eligible Costs forecasted for the first period will be made following signature of the Grant Agreement and any agreed upon milestones. Subsequent payments will be made through quarterly or semi-annual advances based on the estimated cash flow requirements for Eligible Costs. Advances will be subject to a 5% holdback on the amount forecasted.
2) All advance requests and financial reports submitted shall be signed by a senior executive holding a certified professional accounting designation and the Project Lead.
3) Outstanding Advances: Advance Disbursements cannot cover more than two periods and at no time shall there be outstanding advances covering the cash flow requirements of more than two periods. For example, before an advance payment is issued for a third period, the first period must be accounted for.
4) Separate Bank Account and Interest Earned on Advance Disbursements: a separate bank account, bearing interest, may be required to be maintained for the project.
5) Final disbursement will be subject to the following conditions:
    a. The Project is completed in accordance with the grant agreement; and
    b. Grand Challenges Canada has received and accepted all Final Reports, including completion and submission of any outstanding milestones and documentation due under the grant agreement.

1.3 AUDIT

Project expenses will be subject to audit by Grand Challenges Canada until March 31, 2031, following the termination of the grant agreement between Grand Challenges Canada and the funding recipient.

7.2 SUBMISSION MATERIALS AND PRIVACY NOTICE

To help us in the evaluation and analysis of projects, all proposals, documents, communications, and associated materials submitted to Grand Challenges Canada (collectively "Submission Materials") may be shared with Global Affairs Canada, and/or with other funding partners, and may be publicly disclosed. By submitting any Submission Materials to Grand

Challenges Canada, each applicant thereby grants to Grand Challenges Canada and His Majesty the King in right of Canada ("His Majesty") a worldwide, perpetual, irrevocable, non-exclusive, non-commercial, free of charge and royalty free license to use, reproduce, adapt, modify, improve, develop, translate, publish, disseminate, distribute, communicate to the public by telecommunication and display the Submission Materials, in whole or in part, in any form, media, or technology now known or later developed, including the right to authorize others to do such acts and the right to sublicense such rights to others, on the same terms. Each applicant also thereby waives any and all moral rights that it has in the Submission Materials in favor of Grand Challenges Canada, His Majesty, and each of their sub-licensees, successors, representatives, assigns, employees, and agents.

The proposals will be subject to external review by independent subject-matter experts, advisors, and potential co-funders (the results of which will be confidential), in addition to analysis by our staff. Please be advised that a copy of the external reviews for each submitted proposal will be shared with Grand Challenges Canada staff and may be disclosed to Grand Challenges Canada's Investment Committee.

Please carefully consider the information included in the Submission Materials. If you have any concerns about the disclosure of confidential or proprietary information (including information related to inventions), please advise us as soon as possible and in any event prior to disclosure of such materials to Grand Challenges Canada. We also recommend you consult with your legal counsel and take any steps you deem necessary to protect your intellectual property. You may wish to consider whether such information is critical for evaluating the submission and whether more general, non-confidential information may be adequate as an alternative for these purposes.

Grand Challenges Canada will attempt in good faith to respect the confidentiality of information that is received in Submission Materials, if it is clearly marked "Confidential". Nonetheless, notwithstanding your characterization of any information as "Confidential", Grand Challenges Canada reserves the right to disclose all information contained in Submission Materials as may be required by law and as is necessary to potential co-funders, advisors, and external reviewers (such as government entities) to evaluate them and the manner and scope of potential funding, consistent with appropriate regulations and their internal guidelines and policies. Grand Challenges Canada expressly disclaims any and all liability that may arise from disclosure of confidential information contained in Submission Materials. Upon signing a grant agreement, successful applicants will have the option to keep their name and/or project confidential.

Privacy Notice

In order to conduct due diligence and audits, and to manage and monitor the performance of a grant agreement, Grand Challenges Canada may collect personal information (such as names, addresses, employment history, criminal and other legal checks where legally permissible) about some of a successful applicant's directors and officers, employees, project lead(s), and others engaged on the project before and during the course of the grant agreement. Some of this personal information is collected for the purpose of complying with applicable legal and policy requirements that apply to Grand Challenges Canada and our funders in order to provide the funding and services by Grand Challenges Canada under a grant agreement. Refusing to provide information that Grand Challenges Canada needs in order to conduct required legal and

contractual due diligence may impact Grand Challenges Canada's ability to provide such funding and services and may result in not being able to enter into a grant agreement with you or early termination of a signed grant agreement. Grand Challenges Canada's Privacy Policy explains how Grand Challenges Canada collects, use, discloses, and protects the personal information that it collects and receives. By submitting any personal information about others, you represent and warrant that you are authorized to do so. If applicable law allows or requires you to supply the information without authorization, you represent and warrant that you have abided by that law and that it allows Grand Challenges Canada to receive and disclose the information under the Privacy Policy without any further action on the part of Grand Challenges Canada. You agree to indemnify and hold harmless Grand Challenges Canada against any failure by you to comply with the requirements set out here.

7.3 WARRANTY

By providing any Submission Materials, applicants represent and warrant to Grand Challenges Canada that they have the right to provide the information submitted.

7.4 INTELLECTUAL PROPERTY AND SHARING AND ACCESS FOR IMPACT STRATEGY

Grand Challenges Canada is not able to fund projects for which the core intellectual property rights are owned by a third-party institution, unless that third party; (i) grants the applicant sufficient license rights to the innovation to permit eventual scaling in low- and middle-income countries; or (ii) signs an undertaking to comply with Grand Challenges Canada's Sharing and Access for Impact Strategy and the Grant Agreement.

The solutions supported by this program comprise innovative technologies, services, business models, knowledge and/or products to promote global health in LMICs. The successful development and deployment of these solutions in order to ensure meaningful access for target beneficiaries in LMICs may require involvement by, support of, and/or collaboration with multiple organizations, including the private sector, government, and academic and/or non-profit research institutions. Accordingly, it is the intent of this program to support the formation of appropriate partnerships that are essential to meet these urgent global health needs. Successful applicants retain ownership of intellectual property rights in supported innovations, including those rights that arise in outputs of funded projects. Grand Challenges Canada aims, however, to ensure that any such intellectual property rights are utilized and managed in a manner that is consistent with achieving the goals of this program. Grand Challenges Canada's Sharing and Access for Impact Strategy guides the organization's approach to intellectual property and all applicants are urged to consider their willingness to submit an application in compliance with Grand Challenges Canada's Sharing and Access for Impact Strategy, which includes a respect for the inherent right to self-determination and sovereignty of Indigenous and other communities around the world.

The purpose of the Strategy is to outline how Grand Challenges Canada will work with innovators to: (1) help innovators achieve the greatest possible impact through sustainable, affordable, and as widespread as is appropriate, access to their innovations for the public good;

and (2) enable responsible sharing of new knowledge and data they generate, in a manner that enables scale and sustainability, addresses (rather than perpetuates) inequities and power imbalances, and honours the diverse needs, priorities and values of self-determination of innovators and their communities.

Successful applicants will be required to commit to compliance with the Grand Challenges Canada Sharing and Access for Impact Strategy; to develop an Access Plan for making their innovations meaningfully accessible to target beneficiaries in LMICs, meaning broadly and quickly available at costs that are reasonable in the context; and to sign a Sharing and Access for Impact Agreement with Grand Challenges Canada, in line with the guiding principles, applicable to the innovative solutions and project outputs supported by this program.

The Sharing and Access for Impact Agreement may provide to Grand Challenges Canada a non-exclusive license to intellectual property rights in supported innovations (including background intellectual property) and/or an agreement for distribution and supply of products, in each case permitting Grand Challenges Canada and its sub- licensees to implement and disseminate products, processes, knowledge, or solutions in low- and middle-income countries in which applicants or their partners are unable to achieve meaningful accessibility.

The Sharing and Access for Impact Agreement will require all applicants to enter into covenants:

(1) to employ best efforts and endeavour in good faith to provide widespread, affordable and equitable access to the supported innovations to achieve the greatest possible impact for those most in need;

(2) to employ best efforts and endeavour in good faith to (i) openly and publicly disseminate results and conclusions of the project, whether positive, neutral, or negative, within 12 months of project completion; (ii) make publications arising from the project immediately openly discoverable and accessible online under a Creative Commons Attribution (CC BY) or equivalent license; and (iii) deposit data outputs into a relevant open access repository within 12 months of project completion or immediately upon publication, whichever is sooner; and

(3) to acknowledge Grand Challenges Canada in all publications arising from the project.

Applicants will be required to develop and submit an Action Plan that specifies when and how the those most in need will be afforded access to the supported innovation, findings and publications will be made openly accessible, data access will be implemented, and the timeframe for data release, while respecting the inherent right to self-determination and sovereignty of Indigenous and other communities around the world.

At a minimum, ‘data’ refers to final, annotated quantitative and qualitative datasets, and accompanying information, such as metadata, codebooks, data dictionaries, questionnaires and protocols.

Grand Challenges Canada recognizes the value of intellectual property and commercialization, and the benefits of first and continuing use of data, but not prolonged or exclusive use. In some

cases, intellectual property protection, laws or regulations may delay or preclude access to data. In cases where an adequate justification has been provided, Grand Challenges Canada may grant a partial or complete waiver of the data access requirement.

Applicants should note that the above sharing and access for impact commitments survive the end of project activities.

7.5 RESEARCH ETHICS POLICY

It is the policy of Grand Challenges Canada that research involving human subjects, research with animals, and research subject to additional regulatory requirements must be conducted in accordance with the highest internationally recognized ethical standards. In order to receive funds from Grand Challenges Canada, initially and throughout the course of a research project, researchers must affirm and document compliance with the guiding ethical principles and standards outlined below.

1. Research involving human subjects must be conducted in a manner that demonstrates, protects, and preserves respect for persons, concern for the welfare of individuals, families and communities, and justice.
2. Research involving animals must be conducted in a manner that ensures their humane care and treatment.
3. Certain research endeavors, including but not limited to research with recombinant DNA, biohazards, and genetically modified organisms, may be subject to enhanced regulation and oversight.

While not necessary for this application and as applicable to the individual project, Grand Challenges Canada will require that, for each venue in which any part of the project is conducted either by the applicant organization or a sub-grantee or sub-contractor, all legal and regulatory approvals for the activities being conducted will be obtained in advance of commencing the regulated activity. We will further require you to agree that no funds will be expended to enroll human subjects until the necessary regulatory and ethical bodies' approvals are obtained. For further details, please see the Grand Challenges Canada Ethics policy.

7.6 RIGHTS OF GRAND CHALLENGES CANADA

This Request for Proposals is part of a discretionary granting program. Submission of an application does not create a contractual relationship between the applicant and Grand Challenges Canada to advance a grant to any applicant and/or enter into any contractual relationship.

Furthermore, all applicants acknowledge that the program may evolve and that all terms in this Request for Proposals are subject to change. In particular, Grand Challenges Canada reserves the right, in its sole discretion and without notice, to:

1. Cancel this Request for Proposals at any time and for any reason.
2. Amend and re-issue the Request for Proposals at any time and for any reason. This Request for Proposals is valid commencing on April 8, 2024, and supersedes any

previous Request for Proposals of this nature. The terms and conditions of this Request for Proposals apply to all applications submitted from April 8, 2024, going forward and may be replaced by a revised Request for Proposals in the future. Grand Challenges Canada recommends checking for any revisions to the Request for Proposals and/or the FAQs prior to the submission of your application materials.

3. Accept or reject any application that is non-conforming because it does not meet the eligibility criteria, does not comply with the application instructions and/or does not comply with the instructions for allowable costs.
4. Not award an application based on performance on a previous Grand Challenges Canada grant or project or based on the award of a grant to the applicant for the same or similar research by one of Grand Challenges Canada's partners or collaborating institutions.
5. Disqualify any application at any stage where there is an indication that the proposal was, in any way, plagiarized.
6. Accept or reject any or all applications, regardless of an application's rating based on the evaluation criteria, with or without providing an explanation.
7. Award fewer awards than expected.
8. Award applications with different funding amounts, different durations and/or different conditions than set out in this Request for Proposals.
9. Verify any information provided by applicants through independent research or by contacting third parties deemed to be reliable by Grand Challenges Canada and use that information to inform Grand Challenges Canada's funding decision.
10. Modify eligibility and evaluation criteria, including but not limited to criteria assessed at the triage stage, at any time.
11. Use video or other visual representation submitted by applicants on Grand Challenges Canada's Fluxx portal or otherwise for public engagement.
12. Not provide critiques or feedback regarding the reasons a proposal was or was not selected.
13. Design grant awards to link to possible funding partners, including private sector investors.

7.7 COSTS

No payment will be made for costs incurred in the preparation and submission of an application in response to the Request for Proposals. Costs associated with preparing and submitting an application, as well as any other costs incurred by the applicant associated with the evaluation of the application, are the sole responsibility of the applicant.

7.8 GOVERNING LAW

This Request for Proposals and any resulting agreement shall be governed by and construed in accordance with the laws of the Province of Ontario and the federal laws of Canada applicable therein. Each applicant agrees that this any and all disputes, actions or proceedings relating to this Request for Proposals whether as to interpretation, validity, performance or otherwise, shall be subject to the exclusive jurisdiction of the courts of the Province of Ontario and each applicant and Grand Challenges Canada irrevocably attorn to the jurisdiction of the courts of such province.

7.9 RISK MANAGEMENT, SAFETY, ANTI-TERRORISM, ANTI- CORRUPTION, ANTI-BRIBERY

Proposals must comply with all relevant Canadian legislation, as well as any applicable international anti-bribery and anti-terrorism legislation. Any person or organization named in Canadian or United Nations Security Council sanctions will not be funded. We may add to this list as more partners join the challenge.

Innovators are to manage material risks.

Proposals for projects that include work in insecure locations, must detail how they'll manage the safety and security risks faced by people and assets. If selected for funding, during negotiations innovators will be required to explain how they will avoid corruption and the diversion of funding from its intended purpose.

For example, during negotiations innovators will be asked to provide a description of the organization's policies and procedures to address conflicts of interest and financial or other irregularities, including without limitation, adequate procedures:

- Requiring the organization and its representatives to declare any personal or financial interest in any matter concerning the funded activities, and exclude that individual from the matter concerned
- Identifying steps to investigate an irregularity
- A timely and appropriate plan of action to recover any funds that have been subject to proven fraud.

During negotiations, innovations will also be required to include a description of the organization's policies and procedures to adequately implement internal controls for preventing bribery, corruption, fraud, and other situations of misuse of funds.

7.10 FUNDER COMPLIANCE TERMS

Some or all of the grant funds advanced to a successful Applicant have been made available to Grand Challenges Canada in connection with grant agreements between Grand Challenges Canada and (1) Global Affairs Canada through DFATD, (2) the United Kingdom's DHSC through the NIHR, and/or (3) Fondation Botnar. The Grand Challenges Canada Grant Agreement with a successful applicant will flow down certain of these funders' compliance obligations that apply to all recipients of funds, including any grantees. The Applicant will be required to acknowledge that it has read and understood these funder compliance obligations and will make the representations, warranties, declarations, and guarantees, and agree to comply with the terms and conditions, contained in the applicable funder compliance terms as a condition of receiving grant funding from Grand Challenges Canada.

Appendix A: Country Priorities

Each of Being's 12 priority countries have a specific area of focus and target population(s) for Proof of Concept and Transition to Scale funding. Each country has also identified a specific area of focus for Ecosystem Catalyst funding.

Colombia Focus

Proof of Concept & Transition to Scale Context

In Colombia, approximately 25% of teenagers experience some form of family dysfunction.[19] Much of this dysfunction is the result of weakened family structures due to Colombia's long history of internal armed conflict and violence, poverty, financial hardship, intergenerational trauma, familial separation, and internal displacement.[20,21] As a result, communication challenges, emotional invalidation, conflict, and violence have emerged within family structures, contributing to mental health issues among young Colombians, including depressive symptoms, self-harm, trauma and suicidal ideation.[22] National policies currently prioritize youth mental health and wellbeing by promoting strong families and nurturing school environments, which position both communities and the education system as ideal settings to develop and test innovative approaches that improve family functioning among young people and their parents / caregivers.[23,24,25,26]

In Colombia, we seek bold Proof of Concept and Transition to Scale ideas to strengthen family functioning. These innovative solutions should address family conflict and violence by promoting healthy communication styles and increasing family cohesion with the goal of improving parent-youth relationships.

Target Population: Young people, aged 10-24 years, and their parents / caregivers

Ecosystem Context

National policies in Colombia currently prioritize young people's mental health and wellbeing, including promoting nurturing family and community environments. The School Coexistence Law (2013) has also integrated mental health with a focus on prevention and early detection of behaviours that threaten school coexistence, specifically with regards to violence and bullying. Although these policies are in place, there are no mandatory standardized guidelines or

[19] Ministro de Salud y Protección Social (Minsalud), & Departamento Administrativo de Ciencia, T. e I. (Colciencias). (2015). *Salud Mental Encuesta Nacional de 2015*. https://www.minjusticia.gov.co/programas-co/ODC/Publicaciones/Publicaciones/CO031102015-salud_mental_tomoI.pdf

[20] Gómez-Restrepo, C., Tamayo Martínez, N., Bohórquez, A., Rondón, M., Medina Rico, M., Rengifo, H., & Bautisa, N. (2016). Trastornos depresivos y de ansiedad y factores asociados en la población adulta colombiana, Encuesta Nacional de Salud Mental 2015. *Revista Colombiana de Psiquiatria*, *45*. https://doi.org/10.1016/j.rcp.2016.04.009

[21] Tamayo-Agudelo, W., & Bell, V. (2019). Armed conflict and mental health in Colombia. *BJPsych International*, *16*(02). https://doi.org/10.1192/bji.2018.4

[22] Moe, C. A., Villaveces, A., Rivara, F. P., & Rowhani-Rahbar, A. (2022). Self-harming behavior in relation to exposure to inter-personal violence among youth and young adults in Colombia. *International Journal of Injury Control and Safety Promotion*, *29*(1). https://doi.org/10.1080/17457300.2021.2001830

[23] Carrillo, S., & Ripoll-Núñez, K. (2014). Family Policies in Colombia: A Focus on Policies for Vulnerable Families. In M. Robila (Ed.), *Handbook of Family Policies Across the Globe* (pp. 425–444). Springer New York. https://doi.org/10.1007/978-1-4614-6771-7_27

[24] Ley 1122 de 2007, 2007 El Abedul, Diario Oficial (2007). https://www.minsalud.gov.co/Normatividad_Nuevo/LEY%201122%20DE%202007.pdf

[25] Política Marco de Convivencia y Seguridad Ciudadana, Ministerio de Defensa Nacional (2019). https://www.suin-juriscol.gov.co/imagenes//21/07/2022/1658416507854_Marco%20de%20convivencia.pdf

[26] Ramos, C., Nieto, A. M., & Chaux, E. (2007). Aulas en Paz : Resultados Preliminares de un Programa Multi-Componente. *Revista Interamericana de Educacion Para La DEmocracia*, *1*(1). https://www.academia.edu/6157875/Aulas_en_Paz_1_Resultados_preliminares_de_un_programa_multi_componente

procedures for mental health policy implementation in school settings, and there are no monitoring mechanisms to track adoption of the National Mental Health Policy. Improved monitoring of mental health policy implementation in schools and their adoption in community settings can highlight opportunities to address challenges or limitations with existing initiatives concerning youth, family functioning and supportive environments.

We seek Ecosystem Catalyst proposals to support implementation and accountability mechanisms for national youth mental health policies such as schools and community settings.

Ecuador Focus

Proof of Concept & Transition to Scale Context

In Ecuador, a distressing proportion of youth are impacted by in violence, with 770 crime-related fatalities among children and adolescents recorded in 2023, a dramatic 640% increase from 104 cases in 2019.[27] Insecurity, violence, and the fear of being physically harmed have a detrimental impact on young people's mental health. Data indicates that 26% of adolescents aged 10-18 feel unsafe in their school and family environments,[28] and 33% of young people aged 8 to 17 feel unsafe when walking outside their neighborhood or community.[29] Young people who have been involved in or exposed to violence often experience stress, anxiety, post-traumatic stress disorder, substance abuse and attempted suicide. These experiences can cause isolation and hinder the development of social relationships, which ultimately contributes to mental health conditions such as depression.[30] With the newly elected government's focus on youth, there is an opportunity to develop and test innovative approaches that promote safe environments.

In Ecuador, we seek bold Proof of Concept and Transition to Scale ideas to improve the physical and emotional safety of young people by developing safe community, school, and/or family environments. These innovative solutions should prevent violence against young people by promoting healthy communication and conflict resolution skills among young people, their parents / caregivers and/or teachers.

Target Population: Young people aged 10-24 years, and their parents/caregivers and teachers

Ecosystem Context

The mental health ecosystem in Ecuador is challenged by fragmentation and limited collaboration among the various national-level stakeholders who work in this space. A well-coordinated network of stakeholders working in, and championing youth mental health is critical for identifying and integrating promising approaches to promoting the safety of young people within national mental health frameworks and resource plans.

We seek Ecosystem Catalyst proposals to support better alignment and collaboration among mental health stakeholders in Ecuador to advance youth mental health and their safety on the national agenda.

[27] UNICEF. (2024, January 15). *Ecuador: Homicide rate among children and adolescents soars 640 per cent in four years*. https://www.unicef.org/press-releases/ecuador-homicide-rate-among-children-and-adolescents-soars-640-cent-four-years

[28] la Red Nacional de Niñas Niños Adolescentes y Jóvenes Wamprakunapak Yuyaykuna, World Vision Ecuador, & Ministerio de Educación. (2023). *SALUD MENTAL DE NIÑAS, NIÑOS, ADOLESCENTES Y JÓVENES EDICIÓN da Resultados Encuesta Nacional*. https://2623910.fs1.hubspotusercontent-na1.net/hubfs/2623910/Ecuador/Descargables/TuVozTusDerechos-Digital%20(1).pdf

[29] CARE Ecuador, Consejo Nacional para la Igualdad Intergeneracional, Fundación Observatorio Social del Ecuador, Plan Internacional, Save the Children Ecuador, UNICEF, & World Vision Ecuador. (2016). *NIÑEZ Y ADOLESCENCIA desde la intergeneracionalidad*. https://www.unicef.org/ecuador/media/1011/file/Ni%C3%B1ez%20y%20Adolescencia%20desde%20la%20Intergeneracionalidad.pdf

[30] Farley, H. R. (2020). Assessing mental health in vulnerable adolescents. *Nursing*, *50*(10), 48–53. https://doi.org/10.1097/01.NURSE.0000697168.39814.93

Ghana Focus

Proof of Concept & Transition to Scale Context

In Ghana, bullying in schools is increasingly being recognized as a mental health concern, driven by a complex interplay of factors closely tied power dynamics and peer pressure. There are notable gaps in bullying awareness where perpetrators (bullies) are often not aware of the impact of their actions on others, and victims (those being bullied) may not recognize the harm done to them or the support available. Bullying is correlated with depression, anxiety, low self-esteem, poor physical health and school absenteeism.[31] Ghanian schools currently lack a standardized approach to tackle bullying, leaving youth with limited avenues to report incidents and access resources needed for behavior change. Promoting positive youth mental health and wellbeing in Ghana will require that effective anti-bullying programs are implemented in schools.

In Ghana, we seek bold Proof of Concept and Transition to Scale ideas to prevent bullying in schools. These innovative solutions should focus on rights based anti-bullying interventions and educational initiatives in schools with the goal of creating safe school environment and enhancing the overall well-being of students.

Target population: Youth aged 10-24, school staff (teachers, counsellors)

Ecosystem Context

Ghana has a well-structured mental health ecosystem at the national level with both the Mental Health Authority of Ghana and Ghana's education system recognizing the significance of school mental health. However, the current school health program primarily focuses on nutrition and lacks the necessary structures and frameworks to support mental health initiatives in schools, specifically those targeting anti-bullying.

We seek Ecosystem Catalyst proposals from organizations to work with government bodies and other stakeholders to effectively integrate mental health initiatives, including innovations, into the school health programs.

[31] Balluerka, N., Aliri, J., Goñi-Balentziaga, O., & Gorostiaga, A. (2023). Association between bullying victimization, anxiety and depression in childhood and adolescence: The mediating effect of self-esteem. *Revista de Psicodidactica*, *28*(1). https://doi.org/10.1016/j.psicod.2022.10.001

India Focus

Proof of Concept & Transition to Scale Context

India, home to 1.4 billion people, has a significant youth demographic, with 26% of its population aged between 10 and 24.[32] According to the National Crime Records Bureau's 2022 report, 34.6% of suicides are among those aged 18-30, with a noted 4.2% increase in the national suicide rate in 2022. This rise is predominantly attributed to family-related issues, such as hostile family environments, poor family interactions, and a lack of perceived support.[33] Given the pivotal role families play in influencing young people's well-being, both positively and negatively, addressing these dynamics is essential. In response to post-COVID-19 mental health challenges, India has implemented initiatives like the National Suicide Prevention Strategy and the UMMEED guidelines, aimed at reducing self-harm and suicide among students. However, there remains a critical gap in evidence-based family support interventions, underscoring the need for focused efforts to address these issues effectively.

In India, we seek bold Proof of Concept and Transition to Scale ideas to strengthen family functioning. These innovation solutions should focus on addressing parent-child communication and parents' perceptions of mental health with a goal of improving parent-youth relationships.

Target population: Young people, aged 10-24 and their parents/caregivers

Ecosystem Context

The current frameworks for mental health programming in India often overlook the crucial role of parental involvement, which holds significant potential to improve the well-being of young people. Ensuring adequate policy support is in place to demonstrate public sector endorsement of approaches to strengthen family functioning is an important driver for scaling and sustaining innovations.

We seek Ecosystem Catalyst proposals from organizations that can enhance multi-sectoral coordination to champion family-related interventions at both national and state levels. The focus will be on increasing action on this important issue, including efforts to augment domestic funding.

[32] National Statistical Office, M. of S. and P. I. (2022). Youth in India, 2022. In *National Statistical Office, Ministry of Statistics and Programme Implementation*.
[33] Radhakrishnan, R., & Andrade, C. (2012). Suicide: An Indian perspective. In *Indian Journal of Psychiatry* (Vol. 54, Issue 4). https://doi.org/10.4103/0019-5545.104793

Indonesia Focus

Proof of Concept & Transition to Scale Context

Young people aged 10 – 24 years comprise approximately 28% of the overall 65 million population in Indonesia.[34] Many have experienced Adverse Childhood Experiences (ACEs) related to violence, such as bullying, harassment, and sexual, psychological, verbal, and physical abuse committed by both peers and family members. For instance, 17% of students reported experiencing more than one instance of ACEs and 32% experienced more than four instances.[35] ACEs lead to both immediate and long-term mental health outcomes, such as substance misuse, depression, PTSD, and an increased risk of chronic mental illness.[36,37] Research also shows that ACEs are associated with dropping out of school and child marriage, whereas exposure to multiple ACEs place young Indonesians at a higher risk of perpetrating violence against their peers.[38]

In Indonesia, we seek bold Proof of Concept and Transition to Scale ideas to prevent adverse childhood experiences of violence among young people. These innovative solutions should address peer and/or family violence, promote coping strategies and build resilience, with a goal of mitigating the mental health impacts of violence among youth.

Target population: Young people, aged 10 – 24 years, and their parents/caregivers

Ecosystem Context

While the national mental health policy framework in Indonesia is robust, implementation is challenged by decentralization, with different governance arrangements for each region and locality. Inconsistent alignment of regional and local stakeholders with national mental health policies and priorities compromises the effective implementation of mental health initiatives. Designing an approach for multi-stakeholder engagement, particularly at the regional and local level, is important to ensure alignment and accountability for implementation of mental health initiatives, especially those with a focus on youth.

We seek Ecosystem Catalyst proposals to strengthen coordination among mental health stakeholders in Indonesia to support accountability of national mental health policy implementation at regional and local levels, particularly those policies focused on youth, at all levels.

[34] UNFPA Indonesia. (2017). *Addressing the Needs of Young People and Promoting their Potentials*. https://indonesia.unfpa.org/en/topics/adolescent-pregnancy-1

[35] Ramaiya, A., Choiriyyah, I., Heise, L., Pulerwitz, J., Blum, R. W., Levtov, R., Lundgren, R., Richardson, L., & Moreau, C. (2021). Understanding the Relationship Between Adverse Childhood Experiences, Peer-Violence Perpetration, and Gender Norms Among Very Young Adolescents in Indonesia: A Cross-Sectional Study. *Journal of Adolescent Health*, *69*(1), 560. https://doi.org/10.1016/j.jadohealth.2021.01.025

[36] Dhamayanti, M., Noviandhari, A., Masdiani, N., Pandia, V., & Sekarwana, N. (2020). The association of depression with child abuse among Indonesian adolescents. *BMC Pediatrics*, *20*(1). https://doi.org/10.1186/s12887-020-02218-2

[37] Kaloeti, D. V. S., Rahmandani, A., Sakti, H., Salma, S., Suparno, S., & Hanafi, S. (2019). Effect of childhood adversity experiences, psychological distress, and resilience on depressive symptoms among Indonesian university students. *International Journal of Adolescence and Youth*, *24*(2). https://doi.org/10.1080/02673843.2018.1485584

[38] Ramaiya, A., et al. (2021). Understanding Adverse Childhood Experiences. *Journal of Adolescent Health*, *69*(1), 556.

Morocco Focus

Proof of Concept & Transition to Scale Context

In Morocco, with one-third of the population under the age of 25, youth represent both the largest demographic group and the most pivotal one for the country's future development.[39] Despite their significance, young Moroccans face growing mental health challenges. Low self-esteem is a significant concern, driven by cultural norms, religious beliefs, social factors, and media influence. These dynamics are exacerbated in school environments due to the absence of guidance from school staff, instances of bullying and violence, and stigma associated with mental illness. This is contributing to growing trends related to youth disengagement from education, strained relationships with teachers, and engagement in risky behaviors. Research underscores the critical role of fostering a positive school environment, wherein strong connections with teachers and peers can cultivate socio-emotional resilience and enhanced self-esteem. Addressing these challenges is imperative for nurturing a healthier, more resilient Moroccan youth and fostering a more robust society.

In Morocco, we seek bold Proof of Concept and Transition to Scale ideas that create positive school environments. These innovative solutions should focus on addressing the lack of supportive and safe spaces within schools with a goal of improving self-esteem amongst young people.

Target population: Young people (10-19), school staff including teachers, school counsellors etc.

Ecosystem Context

In Morocco, current national strategies, plans, and government commitments provide a foundation for addressing youth mental health issues. In educational settings, the government has taken initiatives like the establishment of listening units and youth clubs within schools and universities, and parent associations within schools, to tackle emerging mental health issues. However, despite these efforts, a lack of effective implementation and sustained action currently limits the effectiveness of these initiatives in providing a strong enabling environment for youth mental health prevention and promotion. Current policies specifically related to school health remain inadequately translated into actionable programs that establish and encourage forums for discussing youth mental health, primarily due to a lack of prioritization by key stakeholders and insufficient resources.

We seek Ecosystem Catalyst proposals from organizations to work with government and non-government bodies to bridge the gap between policy intent and on-the-ground implementation to ensure that adolescents in Morocco are supported by a positive school environment.

[39] World Bank. (2019, May 10). *Morocco Invests in its Young People*. https://www.worldbank.org/en/news/feature/2019/05/10/morocco-invests-in-its-young-people

Pakistan Focus

Proof of Concept & Transition to Scale Context

Pakistan's youth, a major segment of its population, face significant mental health challenges. Family dynamics play a pivotal role in this context, with issues such as depression, self-harm, and stress closely linked to family functioning. In a society that places high value on parents, parental support is crucial for the mental well-being of young people. However, traditional norms favoring strict parenting can hinder open dialogue within families, leading to increased mental health risks among youth. Positive parenting practices can serve as a key protective factor. They promote healthy social behaviors and relationships by enhancing emotional intelligence among the youth. Addressing the need for improved family communication and support is vital in nurturing a mentally resilient younger generation in Pakistan.

In Pakistan, we seek bold Proof of Concept and Transition to Scale ideas to strengthen family functioning. These innovative solutions should focus on addressing strict parenting styles and a lack of parental support with a goal of improving parent-child relationships.

Target population: Young people, aged 10-24, and their parents/caregivers

Ecosystem Context

While there are interventions targeting the mental health of young people in Pakistan, most of these have been implemented at a small-scale. The lack of focus in national level strategies poses a significant barrier to the successful implementation of youth mental health initiatives across the country. As a result, provincial governments lack implementation guidance and sufficient resourcing to scale and sustain youth mental health initiatives. Historically, other health programs in the country have been scaled only through the support of national-level leadership, highlighting the need for advocacy efforts at the national level.

We seek Ecosystem Catalyst proposals from organizations that can convene national-level stakeholders from different ministries, as well as non-government organizations, to increase their commitment, create demand and resource mobilization for youth mental health promotion and preventive approaches.

Romania Focus

Proof of Concept & Transition to Scale Context

Romania consistently ranks among the top three countries with the highest incidence of bullying in schools. Recent evidence suggests that over 70% of Romanian students have witnessed bullying in schools, a phenomenon that is adversely affecting their mental health.[40] Similarly, there is also a rise in negative online experiences (33% in 2018 compared to 21% in 2010), contributing to a significant increase in cyberbullying cases.[41] Research shows that bullying has serious psychological effects on young people, and these effects can influence the adult lives of those who are confronted with it. Exposure to bullying is associated with suicidal ideation among adolescents. Moreover, there is significant evidence indicating an association between young people's relationships within families, the school environment (including relationships with teachers and peers), and the incidence of bullying. Romanian schools do not currently have structured mental health promotion programmes that foster safe and supportive environments to ensure a healthy and resilient young population.

In Romania, we seek bold Proof of Concept and Transition to Scale ideas to prevent bullying, including cyberbullying. These innovative solutions should focus on school-based anti-bullying interventions with the goal of promoting safe school environments.

Target population: Young people (10-19), school staff such as teachers, school counsellors etc.

Ecosystem Context

Romania has made strides in adopting progressive mental health policies, aligning with the European Union's comprehensive approach to mental health. However, the implementation of these policies has been slow, marked by a notable delay in allocating dedicated human and financial resources. There is also a lack of implementation guidelines outlining activities to effectively tackle bullying through evidence-based interventions. Alongside this, there is a limited understanding and/or mechanisms for various stakeholders to collaborate effectively around the implementation of these policies.

We seek Ecosystem Catalyst proposals from organizations that can engage various national-level stakeholders, including the private sector, with the goal of developing national-level implementation guidance and coordination mechanisms on solutions to prevent bullying, including cyberbullying.

[40] Gradinaru, C., Manole, M., & Stanculeanu, D. (2016). *Bullying Among Children: National sociological study*. https://resourcecentre.savethechildren.net/pdf/save_the_children_romania_bullying_en.pdf/

[41] Velicu, A., Balea, B., & Barbovschi, M. (2019). Access, use, risks and opportunities of the internet for Romanian children. Results of the EU Kids Online survey 2018. In *EU Kids Online*. http://rokidsonline.net/wp/wp-content/uploads/2019/01/EU-Kids-Online-RO-report-15012019_DL.pdf

Senegal Focus

Proof of Concept Context

In Senegal, stigma related to mental health is widespread, often stemming from cultural beliefs associating mental illness with evil spirits or supernatural causes. This leads to an environment where conversations about mental health remain taboo, perpetuating misconceptions and stereotypes. Young people often face barriers to seeking help due to fear of judgement, shame and discrimination. Stigma is creating a culture that undermines mental health and well-being, denying youth the support and understanding they need to thrive. Improved knowledge around mental health and challenging harmful cultural beliefs can help reduce stigma, foster a supportive environment, and enhance resilience among youth.

In Senegal, we seek bold Proof of Concept ideas to reduce stigma related to mental health. These innovative solutions should address the lack of knowledge about mental health and dispel harmful cultural beliefs in schools and communities, with the goal of having a supportive environment that promotes youth mental health and well-being.

Target population: Youth aged 10 – 24 and families/caregivers, community stakeholders, and/or teachers.

Ecosystem Context

Senegal's limited policies on mental health predominantly focus on treatment, overlooking crucial aspects of prevention and promotion. Senegal is currently developing its first national mental health strategy, creating a critical opportunity to strengthen mental health policies in the country to ensure a strong integration of prevention strategies for youth mental health. Current efforts to integrate prevention and promotion in the development of the new strategy are limited by lack of data for evidence-based decision-making and fragmentation among various stakeholders supporting the process.

We seek Ecosystem Catalyst proposals from organisations to work closely with key stakeholders, including government bodies, to improve coordination and advocacy for data driven youth mental health strategies and appropriate resourcing to enable a strong focus on prevention and promotion.

Sierra Leone Focus

Proof of Concept & Transition to Scale Context

In Sierra Leone, the high prevalence of substance use among youth is causing serious psychological and social problems. A new highly addictive drug, Kush, was declared a national emergency by the government in 2023 and its use is widespread among youth, especially in urban areas. High youth unemployment and limited youth engagement or skills-building programs are underpinning the growing use of the drug as youth seek to escape the realities of their lives.[42] Increasing understanding among youth about the risk and consequences of substance use, alongside alternative programming, is critical to address the underlying risk factors associated with substance use.

In Sierra Leone, we seek bold Proof of Concept and Transition to Scale ideas to reduce and prevent substance use among young people. These innovative solutions should combine substance use education and alternative youth programming, with the goal of providing youth with the skills and opportunities they need to thrive.

Target population: Youth aged 10 - 24

Ecosystem Context

The Sierra Leone National Drug Control Act of 2008 criminalizes harm-reduction activities and drug users for both the possession and use of substances. Criminalizing harm-reduction activities can perpetuate stigma surrounding drug use and addiction, often giving the perception that it is a moral issue, rather than a complex health issue. Punitive laws fail to address the complex underlying factors that contribute to drug use, such as poverty, trauma, lack of access to economic opportunities, and mental health issues. At the same time, current legal frameworks for mental health issues (including the Lunacy Act of 1902 and the Constitution (1971)) foster a discriminatory environment for mental illnesses. The recently established Presidential Taskforce on Mental Health and the declaration of Kush as a national emergency offers an opportunity to strengthen preventative approaches to youth mental health and wellbeing.

We seek Ecosystem Catalyst proposals from organisations to support advocacy efforts with the goal of influencing national action plans and regulatory frameworks related to mental health and substance use towards effective prevention and promotion strategies and stigma reduction.

[42] Human Capital Project (HCP). (2023). *Sierra Leone: Human Capital Country Brief*. https://thedocs.worldbank.org/en/doc/64e578cbeaa522631f08f0cafba8960e-0140062023/related/HCI-AM23-SLE.pdf

Tanzania Focus

Proof of Concept & Transition to Scale Context

Stigma against those living with mental health challenges is widespread in Tanzania due to strongly held cultural beliefs and the spread of misinformation. Common beliefs include the notion that people with mental health conditions are “cursed” and need to be treated by traditional healers. Stigma starts at an early age, as youth currently do not receive proper mental health education and learn to discriminate against people living with mental health challenges from parents, teachers, and peers. Improved access to and quality of mental health education for youth that targets deeply rooted cultural norms and beliefs around mental health will lead to a reduction of stigma against people living with mental health challenges, improve care-seeking behaviors and community resilience.

In Tanzania, we seek bold Proof of Concept and Transition to Scale ideas to reduce stigma related to mental health. These innovative solutions should focus on addressing the lack of appropriate mental health education in schools and communities, with the goal of reducing harmful cultural norms and discrimination.

Target population: Youth aged 10 – 24, their teachers and families/ caregivers, and community leaders.

Ecosystem Context

Tanzania is set to launch the country’s first mental health strategic plan in 2024 and has increased resource allocation to the Ministry of Health to improve prevention and promotion services. Given the government’s current prioritization of mental health, a coordinated approach involving local mental health experts and youth representation will be critical to ensure Tanzania’s mental health priorities include drivers for youth mental health and wellbeing.

We seek Ecosystem Catalyst proposals from organizations to improve national-level coordination and advocacy efforts among key stakeholders around the development, sustainable financing, and implementation of the strategic plan.

Vietnam Focus

Proof of Concept & Transition to Scale Context

In Vietnam, 67% of 10-to-17-year-olds experiencing mental health issues indicate that family dysfunction is a contributing factor to their challenges.[43] Overly controlling parenting approaches are pervasive, with 69% of children between the ages of 10-14 experiencing some form of violent discipline by a household member in the last month.[44] One influential factor is parental focus on school/career achievement, which often comes at the cost of neglecting youth mental health needs. For instance, 22% of Vietnamese adolescents reported having mental health issues in the last year, however only 5% of the respondents' caregivers identified that their adolescent may need support.[45] Lack of supportive parent-child relationships, especially combined with conflict and violence arising from familial tensions, are root causes of low-self-esteem, substance misuse, anxiety, depression, and suicidal ideation among youth.[46] Although there is evidence that family is a key determinant of youth wellbeing in Vietnam, there are few initiatives focused on strengthening the relationships between family members, particularly between parents/caregivers and their children.

In Vietnam, we seek bold Proof of Concept and Transition to Scale ideas to strengthen family functioning. These innovative solutions should address strict parenting styles and family conflict / violence by promoting healthy communication and conflict resolution skills with the goal of improving relationships between young people and their parents / caregivers.

Target Population: Young people, aged 10-24 years, and their parents / caregivers

Ecosystem Context

National policies in Vietnam currently prioritize the prevention, detection, and treatment of youth mental health disorders, such as the National Plan to Prevent Non-Communicable Diseases and Mental Health Disorders (2022 – 2025) and the National School Health Program (2021-2025). Although this robust policy framework exists, there is limited focus on family functioning and the inclusion of parents / caregivers in youth mental health prevention and promotion targets and guidelines.

We seek Ecosystem Catalyst proposals to support the prioritization and integration of improved family functioning and parental / caregiver involvement in national policies and/or guidelines that govern provinces and school settings.

[43] Institute of Sociology, University of Queensland, & Johns Hopkins Bloomberg School of Public Health. (2022). *Viet Nam Adolescent Mental Health Survey: Report on Main Findings*.
[44] Thi Quynh Hoa, N., Levy, M., Basu, R., Lai, J., Anh Lan, L., Harvey, R., & Vinci, V. (2022). Comprehensive Study on School-related Factors Impacting Mental Health and Well-Being of Adolescent Boys and Girls in Viet Nam. https://www.unicef.org/vietnam/reports/study-school-related-factors-impacting-mental-health-and-well-being-adolescents-viet-nam
[45] Institute of Sociology, et al. (2022). *Viet Nam Adolescent Mental Health Survey*.
[46] Socialist Republic of Vietnam. (2023). VOLUNTARY NATIONAL REVIEW 2023 ON THE IMPLEMENTATION OF THE SUSTAINABLE DEVELOPMENT GOALS SOCIALIST REPUBLIC OF VIET NAM. Retrieved March 7, 2024, from https://hlpf.un.org/sites/default/files/vnrs/2023/VNR%202023%20Viet%20Nam%20Report.pdf

Appendix B: Key Indicators for POC & TTS

Key Indicators

Funded TTS projects must report on various outcomes and outputs, including those listed below. Projects funded at POC have fewer reporting requirements (given the early stage of the innovation) but may benefit from having a longer-term view on impact measurement (especially if they plan to apply for TTS funding after their POC funding is complete). Please note, this is not a complete list, and **not every project must achieve all of them**. Final priority health and wellbeing outcomes and outputs will be determined in collaboration between the project team and Grand Challenges Canada. Funded project teams will work with other grantees in the Being program to share lessons with the wider community.

Priority Health and Wellbeing Outcomes

Being ultimately aims to ensure that young people ages 10 to 24 experience measurable benefits to their mental health and wellbeing. In general, prevention and promotion initiatives may achieve this through one or more pathways. For example, innovations may directly target youth mental health and wellbeing; they may address stigma, attitudes and practices; they may also aim to tackle access to the wider social and environmental determinants of youth mental health and wellbeing, such as but not limited to parenting practices or employment.

Additionally, improvements in mental health and wellbeing for young people may look different across contexts and may have a variety of approaches to impact measurement. Successful applications will clearly define a relevant priority health outcome that the innovation will set out to achieve, with clear plans to track progress using appropriate measurement tools. Priority health outcomes are the long-term impacts resulting from the innovation. Priority health outcomes should be achievable and measurable by the end of the funding period.

Here are some examples of priority health outcomes that innovations may set out to achieve. **This is not a comprehensive list of priority health and wellbeing outcomes that can be achieved through mental health and wellbeing prevention and promotion initiatives for young people**. We welcome applications with other relevant priority health and wellbeing outcomes.

- Improved wellbeing
- Improved life satisfaction
- Improved emotional regulation
- Improved connectedness
- Improved social capital
- Improved self esteem
- Improved coping
- Improved self-efficacy
- Improved resilience
- Effects on knowledge (ex. Mental health literacy)
- Effects on attitudes (ex. Reductions on stigmatizing attitudes)

Measuring Priority Health and Wellbeing Outcomes

Being supports mental health and wellbeing prevention and promotion innovations across a wide range of cultures, populations, and areas of intervention. As such, we acknowledge that the best approaches for impact measurement for priority health and wellbeing outcomes may vary significantly depending on the outcome itself, as well as the implementation context. Given that a wide variety of scales and tools are available for mental health, it is critically important for innovators to carefully select measurement tools.

To measure priority health and wellbeing outcomes, all POC and TTS innovators must plan to select appropriate measurement tools that:

- Align with their theory of change
- Are appropriate for and/or validated for their context
- Have validated thresholds and cut-offs

Intermediate Outcomes
Intermediate outcomes are the medium-term changes resulting from the innovation. These outcomes should be achievable and measurable within the time and resource availability indicated in the RFP. Examples of intermediate outcomes that Being focuses on are:

- Number of young people with changes in knowledge or skills as a result of the innovation
- Number of young people using the innovation to improve their mental health, wellbeing, and/or resilience
- Number of intermediaries using the innovation to improve mental health in their communities

Immediate Outcomes
Immediate outcomes are the short-term changes resulting from the innovation. These outcomes should be measurable and achievable relatively soon after the project is implemented, and should be directly linked to the project's outputs. Examples of immediate outcomes that Being focuses on are:

- Number of facilities/sites implementing the innovation
- Number of intermediaries with changes in knowledge or skills as a result of training on the innovation

Outputs
Outputs are the products or services that are directly produced, developed or implemented as part of the innovation. Examples of outputs that Being focuses on are:

- Number and type of outreach and community engagement activities conducted
- Number of jobs created as a result of the innovation
- Number of project outputs, peer reviewed papers or patents filed if applicable
- Number of intermediaries trained on how to use the innovation ("intermediaries" are the young people, service providers, community health workers, educators, family members, etc., who use the innovation to improve young people's mental health and wellbeing).

Appendix C: A Relational Approach to Wellbeing & Mental Health

Main Principles

1. A positive orientation
A wellbeing approach to mental health emphasises health, rather than illness. It therefore aims to promote positive mental health by supporting people in securing their needs:

- To uphold the safeguarding of all vulnerable persons
- To avoid abuse and have a sense of dignity
- To move from a sense of isolation to a sense of togetherness or belonging
- To overcome helplessness and to gain a sense of control
- To avoid suffering and gain a sense of purpose

2. An inclusive approach
A relational approach recognizes that mental health is a continuum – everyone has strengths and everyone experiences difficulties.

Some will need an intervention to deal with a particular issue. While this may manifest in psychological terms – for example, anxiety – it may reflect other problems – for example, unemployment. In such cases it will be at least as important to address the social or economic issue, as the psychological one.

A smaller group may have a mental illness that requires a psychiatric intervention. These people also, however, have the needs and strengths of the other group, and so should be linked to resources that enable them to continue or resume participation in their communities.

Everyone may move back and forth between these two groups.

3. An integrated approach
Mental health is intrinsically linked to our life in community. This means that communities and institutions need to be structured and function in ways that help promote positive mental health. This has significant implications for how we organise schools, hospitals, universities, job centres, housing estates, town planning, etc.

4. A rights-based approach
The right to positive mental health is part of the broader right to enjoy good health. If people become ill, this means that they have a right to be offered appropriate treatment and the information to decide whether to take this up. Those who care for them also have the right to the economic, social and other forms of support that they need to fulfil this role.

5. A community-based approach
Individualised therapy is neither appropriate nor affordable in all contexts. Community-based care needs to ensure that people suffering mental ill health are connected to resources within their communities that can support them. It also needs to work with communities to ensure that they are sensitive to the mental health needs of their members. This is likely to be particularly important if mental health interventions are to be sustained in areas where mental health services are hard to access.

6. A culture-aware approach

Culture makes a difference to the way that mental health is perceived. This affects the labelling and perceived prevalence of mental ill health, obscuring its incidence in some contexts and accentuating it in others. It can also affect how mental illness or disability is diagnosed and addressed: as a clinical condition to be medicated; as a sign of spiritual affliction to be purged or blessing to be honoured; as a personal quality to be accepted and lived with; or as a source of shame to be hidden, denied, discarded or expelled.

7. A socially and politically aware approach
Mental ill health may manifest itself and be perceived differently by gender, race/ethnicity, age, class, sexuality and other social characteristics. Mental illness may also have social consequences. For example, a high proportion of homeless people all over the world suffer mental ill health. There are also clear, multi-directional links between mental ill health and poverty and inequality more broadly.

8. A holistic approach
A relational approach to wellbeing emphasises the integration of subjective, relational and material dimensions of mental health. It sees these as co-constitutive, not substitutable. It therefore resists subjective wellbeing approaches that represent people as 'poor but happy' or maintain that material poverty can be discounted against the 'relational richness' of lives lived in economic hardship.

For more information:

Atkinson S. Beyond Components of Wellbeing: The Effects of Relational and Situated Assemblage. 2013 May 17;32(3):137–44.

Ferrari G. What is wellbeing for rural South African women? Textual analysis of focus group discussion transcripts and implications for programme design and evaluation. Humanities and Social Sciences Communications. 2022 Jul 25;9(1):246.

Helne T. Well-being for a better world: the contribution of a radically relational and nature-inclusive conception of well-being to the sustainability transformation. Sustainability: Science, Practice and Policy. 2021 Jun 13;17(1):220–30.

Rojas M. Relational Wealth: Quantity and Quality of Interpersonal Relations. In: Well-Being in Latin America: Drivers and Policies. 2020. p. 103–24.

Street M. Society's readiness: How relational approaches to well-being could support young children's educational achievement in high-poverty contexts. Children & Society. 2021 Feb 28;35(5):736–51.

White S, Jha S. RWB - 4 Part Video Series [Internet]. Relational Wellbeing Collaborative. Available from: https://rwb-collab.co/resource#videos

Wissing MP. Meaning and relational well-being: a reflection on the state of the art and a way forward. Journal of Psychology in Africa. 2014 Aug 5;24(1):115–21.

Appendix D: Instructions For Using the Fluxx Application Portal

To apply for funding, applicants must use the online application provided, which is only accessible via the Grand Challenges Canada's Fluxx Portal (https://gcc.fluxx.io). Please refer to the Fluxx Reference Guide for additional information.

1. Go to **https://gcc.fluxx.io**

Existing users:

- If you have applied for funding in the past, you already have an account and do not need to register for a new one.
- If you do not remember your password, you can reset it and gain immediate access to the Portal, simply click on the Create or reset password link.
- If your email address or organization affiliation has changed since you last registered, you will need to register for a new account.

New users

- Click the Create an account now button. It will take at least one (1) business day but could take up to three (3) business days to process your request. Be sure to do this as soon as possible, so you have sufficient time to review and complete the application.
- Fill out the online form with your information. To ensure your account is set up correctly, please enter the name and information of the Project Lead (applicant) and applying organization. The information you register with will automatically appear on the application and cannot be changed without contacting Grand Challenges Canada.

2. Once your information has been processed, you will be emailed a username and a URL link to set up a password. If you do not receive your login email, check your junk/spam folder. Click on the URL link provided in the email to select a password of your choice.

3. Once you have your account details, input your username and password. Click **Sign in.**

4. Click on the Welcome/Bienvenue link on the left menu, scroll to the Being funding opportunity, and click on the **Start New Application** button.
    - You can save your work at any time and return to it later by logging into your account and clicking on **Drafts / Ébauches**, then clicking on **Edit**.
    - When you are done editing, save your form and click the **Submit** button. Once you submit, you will no longer be able to edit.