



Call for Proposals: Evidence and Effectiveness Grants for Mental Health and Disability Inclusion

Ghana Somubi Dwumadie
(Ghana Participation Programme)

18th December 2020



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1. Introduction and background

1.1. Introduction

Ghana Somubi Dwumadie (Ghana Participation Programme) is a four-year disability programme in Ghana, with a specific focus on mental health. This programme is funded with UK aid from the UK government. The programme is run by an Options' led consortium, which also consists of BasicNeeds-Ghana, Kings College London, Sightsavers International and Tropical Health, and focuses on four key areas:

1. Promoting stronger policies and systems that respect the rights of people with disabilities, including people with mental health disabilities
2. Scaling up high quality and accessible mental health services
3. Reducing stigma and discrimination against people with disabilities, including mental health disabilities
4. Generating evidence to inform policy and practice on the effectiveness of disability and mental health programmes and interventions

Ghana Somubi Dwumadie is also undertaking a range of activities to address the impact of the COVID-19 pandemic on people with disabilities, including mental health disabilities.

Ghana Somubi Dwumadie, as a component of the wider Leave No One Behind (LNOB) Programme in Ghana, will contribute to the overall LNOB impact goal whereby all people with disabilities, including mental health disabilities are engaged, empowered, and able to enjoy improved wellbeing, social and economic outcomes and rights.

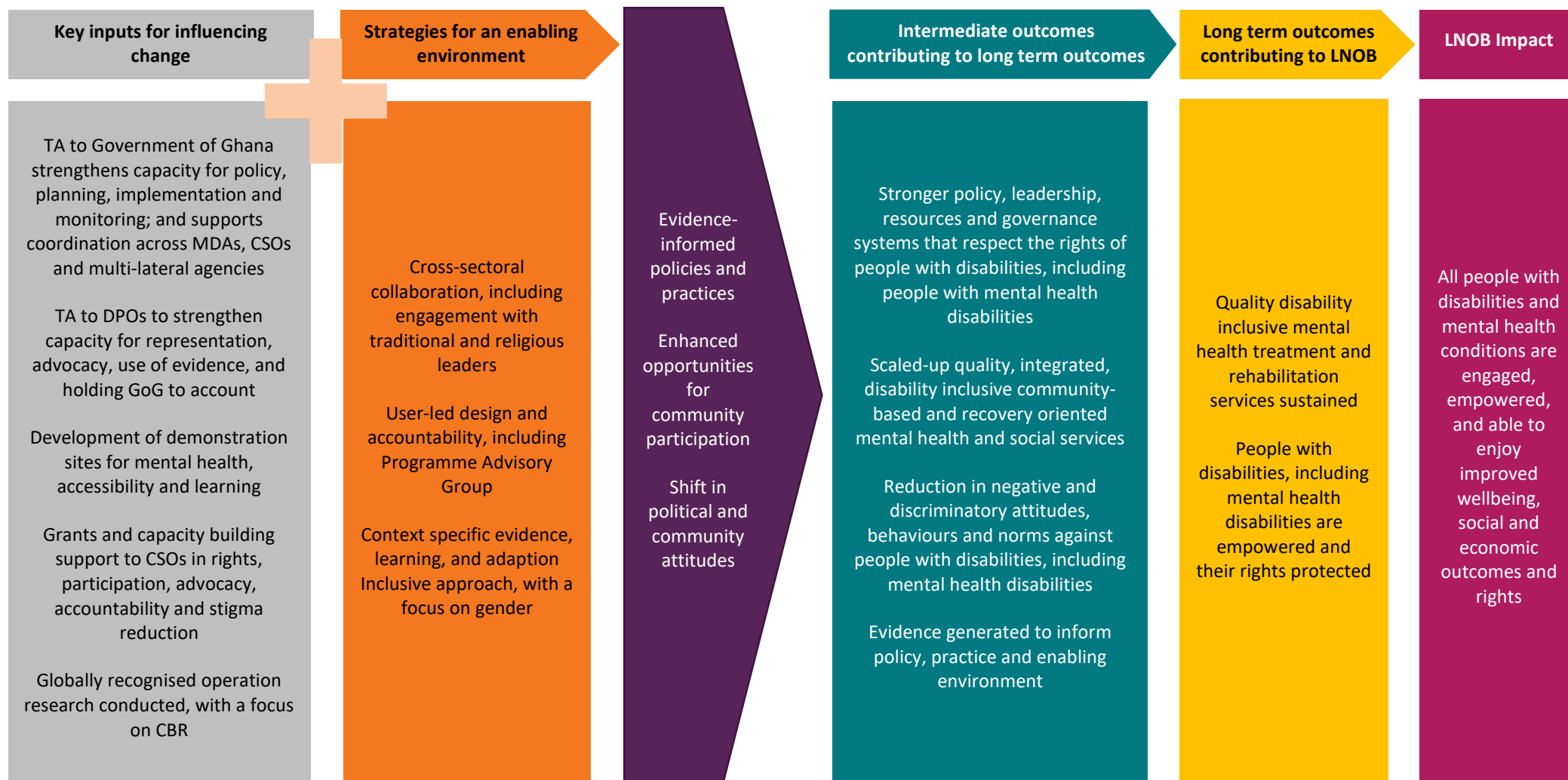
Evidence gathered during the inception period¹ involved target groups and stakeholders and supports the contention that people with disabilities, including mental health disabilities, in Ghana have not fully benefited from health and development progress. In addition, they face stigma and discrimination, exclusion and human rights abuses and violations. People with mental health conditions and psychosocial disabilities are particularly at risk of encountering more barriers to accessing the services and support needed. A major gap identified is also the availability of quality disaggregated data to inform evidence-based policies as well as advocacy activities.

The Theory of Change (ToC), as depicted in the visual below, reflects our current understanding of the pathways of change required to create an environment where the overall impact goal is met. Key Programme inputs are brought together through a set of interconnected enabling strategies to achieve change based policies as well as advocacy activities.

¹ For example, Political Economy Analysis (PEA) of Mental Health and Disability Inclusive Policies, Plans, Strategies, Services and Programmes, Draft Report, July 2020; Ghana Somubi Dwumadie Inception Report, July 2020; PEA Validation Meeting 11/09/2020

Ghana Somubi Dwumadie Theory of Change

Key assumptions: Stable socio-political environment maintained; Government policy is driven by evidence; Disability inclusion and mental health is a priority for Government; Collaborative approaches are adopted by MDAs; All 3 LNOB components continue to operate as planned (Synergy Fund, Social Protection through World Bank Trust Fund, and this programme); Effect of COVID-19 and accompanying restrictions remains at current levels (Sept 2020)



1.2. Background to Call for Proposals

In Ghana, there are estimated to be more than 2 million people with disabilities; the Ministry of Gender, Children and Social Protection (MoGCSP) estimates that 20% of the population in Ghana has some form of disability². Approximately 2.8 million (10% of the population) are estimated to have some form of mental health condition³. People with disabilities, including mental health disabilities, in Ghana are poorer than their non-disabled peers in terms of access to education, healthcare, employment, income, justice, social support and civic involvement.

Barriers to inclusion: discriminatory attitudes, inaccessible environments, exclusionary institutions and inadequate data, statistics and evidence on what works⁴. Early social exclusion and limited education and skills training leads to more difficulties in finding and keeping employment and limited career advancement⁵. Compounding this, people with disabilities and their families may face additional costs such as extra medical, housing, caregiver, and transport costs⁶. The treatment and quality gap remains high: according to an assessment in 2015, an estimated 2% of people with mental health disabilities were being treated,⁷ and anecdotally we believe it is now around 15%.

Progress has been made in education and sensitisation on the rights of people with disabilities and mental health disabilities, to be treated on an equal basis with others. However, there is a continued stigma, negative attitudes and discrimination towards people with disabilities, including mental health disabilities, in Ghana, and few opportunities to take a stand against stigma, discrimination and abuse.

A lack of inclusion and engagement can be seen to flow down from policy and decision making to subsequent funding and resource allocation, service design, delivery and regulation; enabling practices of stigma and discrimination to persist across health, economic, social, environment and political structures for people with disabilities, including mental health disabilities.

Several integrated policy and legal measures have been adopted in line with global commitments and development goals to improve participation and inclusion of people with disabilities, including mental health disabilities. However, despite these concerted efforts, opportunities remain to more significantly enable people with

² MoGCSP 2014b referenced in World Bank, 2016, "Ghana: Social Protection Assessment and Public Expenditure Review", <http://documents.worldbank.org/curated/en/776791491300371576/pdf/114004-revised-Ghana-SP-report-Draft-for-publicdisclosure.pdf>

³ Drawn from Policy, and DFID assessments

⁴ Rohwerder, B. (2015). Disability inclusion: Topic guide. Birmingham, UK: GSDRC, University of Birmingham

⁵ Groce, N., Kett, M. (2013) The Disability and Development Gap, Leonard Cheshire Disability and Inclusive Development Centre, University College London. Available at <https://www.ucl.ac.uk/leonard-cheshire-research/research/publications/documents/working-papers/wp-21.pdf>

⁶ Ingstad, B. & Eide, A. (2011). Disability and poverty: A global challenge. Bristol: Policy Press.

⁷ Ohene, S., *Sustainable Mental Health Care in Ghana: A Demonstration Project*. 2015

disabilities, including mental health disabilities, to remove the barriers which prevent them from participating fully in their communities, including quality education, decent work, and having their voices heard and incorporated in policies and programmes that affect them directly.

Implementation and enforcement of these laws and policies are inconsistent. Both disability inclusion and mental health are under-prioritised and under-resourced. There is no specific budget allocation for disability inclusion and there is limited spending on mental health.

Progress has been made in a number of areas, for example the establishment of the Mental Health Authority (MHA) and the National Council for People with Disabilities (NCPD), and an improved policy environment. Nevertheless, the real participation and leadership of People with Disabilities, including people with mental health disabilities is crucial to minimise the attitudinal, environmental and institutional barriers that affect them.

Mitigating the impact of the pandemic in Ghana on people with disabilities, including mental health disabilities, is also the focus of a range of Ghana Somubi Dwumadie activities, including a Call for Proposals for psychosocial support projects – seven grantees were awarded grants to work in this area in October 2020.

1.3. Summary of Call for Proposals

Table 1: Summary of grants outline

Principles and Approach	
Funding principles	<ul style="list-style-type: none"> • Participation • Knowledge-building • Collaboration • Adaptability
Funding approaches	<ul style="list-style-type: none"> • Inclusion and diversity management • Sustainability and value for money • Do No Harm and responsible granting • Robust management of conflict of interest
Scope and Eligibility	
Targeted end users	<ul style="list-style-type: none"> • People with disabilities. • People with mental health disabilities.
Thematic areas of funding	<ul style="list-style-type: none"> • Evidence-based approaches to improve integration and accessibility of mental health and social services, and user-led advocacy initiatives • Social behaviour change communication (SBCC) and stigma reduction • Studies to generate evidence to inform policy and practice on disability and mental health

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	needs, programmes and interventions, in particular CBR initiatives
Geographic scope	<p>Ghana, with priority to underserved regions including:</p> <ul style="list-style-type: none"> • Northern Region • Upper East Region • Upper West Region • Savana Region • North East Region • Bono East Region • Bono Region • Volta Region • Oti Region • Central Region
Eligible organisations	<ul style="list-style-type: none"> • Disabled People’s Organisations • Self-Help Groups • Women’s Rights Organisations • Other Civil Society Organisations • Research Organisations/Institutions • Media Organisations
Exclusions	<ul style="list-style-type: none"> • Activities which do not meet the eligibility criteria • Activities which may lead to civil unrest • Activities which discriminate against any group based on age, gender reassignment, disability, race, colour, ethnicity, sex and sexual orientation, pregnancy and maternity, religion, or belief • Activities that are fully funded by other sources whether in cash or in kind • Costs incurred prior to a formal agreement being executed including those associated with preparing bid or grant proposals <p>A full list of exclusions will be available as part of the application process.</p>
Resources and duration	
Available funds for entire grant call (i.e. all grants)	Up to GHS 11,000,000
Key financial details	<ul style="list-style-type: none"> • Large grants up to GHS 600,000 per year • Small grants up to GHS 200,000 • All grants are capped at 50% of organisation’s latest annual turnover

	<ul style="list-style-type: none"> • Up to 15% of grant amount can go towards organisation overhead expenditure • Up to 5% of grant amount each can be devoted to capacity building and monitoring and evaluation (M&E) • No match funding is required
Grant duration	Up to 12 months for small grants Up to 33 months for large grants
Mechanisms	
Grant application mechanism	<ul style="list-style-type: none"> • Competitive/open • Direct solicitation under special consideration

1.4. Objectives and Priority Focus of the Call

The overarching objective of the Ghana Somubi Dwumadie evidence and effectiveness grants for mental health and disability inclusion is to ensure that people with disabilities, including people with mental health disabilities are in the lead on approaches to improve their wellbeing, social and economic outcomes, and rights.

The specific objectives of this call are as follows:

- To improve the wellbeing of, and empower people with disabilities, including mental health disabilities, through evidence-based approaches to improve integration and accessibility of mental health and social services and user-led advocacy initiatives
- To reduce stigma and discrimination against people with disabilities, including people with mental health disabilities
- To generate evidence through research to inform policy and practice on disability and mental health needs, programmes and interventions, in particular community-based rehabilitation (CBR) initiatives.

To facilitate the achievements of these objectives in the priority areas, Ghana Somubi Dwumadie shall offer both small and large grants.

2. Ghana Somubi Dwumadie principles and approach to granting

2.1. Principles

Programme grant making will be delivered in line with the following principles, and applications should be mindful of these principles:

- **Participation** – a founding principle of the disability rights movement is 'Nothing About Us Without Us'. Grants will only be given to projects which clearly demonstrate a participatory approach, involving persons with disabilities, and /or mental health disabilities.
- **Knowledge-building** – sharing learning with partners, stakeholders and the wider sector to support meaningful change. Grants will be used to promote a culture of learning and sharing among grantees.
- **Collaboration** – working with a wide range of stakeholders within and beyond the disability and mental health spectrum. The Programme will facilitate regular structured occasions for collaborative reviews of grant progress and achievements and the participation of the grant's target participants will be encouraged.
- **Adaptability** – to the evolving disability and mental health policy environments.

2.2. Approaches

Programme grant-making will follow these approaches in order to implement our principles, and applications should be mindful of these principles:

Inclusion and diversity management

The grants mechanism is committed to supporting Disabled People's Organisations (DPOs) and self-help groups (SHGs) to access funding and to support their development. A range of inclusive measures will be taken, including:

- Only grantee projects which are participatory in nature will be funded.
- Grantee projects which fill inclusion gaps, whether in terms of geography, or in terms of marginalised groups, will be prioritised. For example, projects which work with women and girls with disabilities and mental health conditions.
- Grant payments will be made in advance, to support robust financial management of smaller organisations.
- The monitoring, evaluation and learning approach is designed to foster inclusion.

The programme granting team will expect consideration of gender as an integral dimension of all prospective grantees. This will including institutional governance structure, proposal preparation, implementation, understanding gender dimensions of the proposed area for funding.

Sustainability and Value for Money (VfM)

The grants mechanism will integrate sustainability and VfM approaches into all aspects of the grant making process in order to achieve lasting change. Specific actions include:

- Developing a capacity building and knowledge-sharing programme for grantees, which they will commit to as a condition of the grant.
- Making the level of post-grant sustainability an assessment criterion when scoring grant proposals.
- Making VfM a specific assessment criterion, where ensuring VfM is about reaching the highest possible programme quality and impact at lowest possible cost
- Prioritising projects most likely to achieve lasting change, for example because they provide an evidence base for decision-making.

Do No Harm and responsible granting

The Programme's granting mechanism will establish a clear, robust systematic and locally relevant approach to risk management for the grants with a particular focus on safeguarding and do no harm approaches.

All Programme grants will be awarded on the premise that all activities will improve the overall situation in the places which they operate. We will mitigate risks through a number of measures, including:

- Undertaking due diligence on potential grantees to ensure have adequate systems in place to receive funding.
- Where weaknesses in organisational capability exists, which we believe can be mitigated, this will be done through capacity building and/or technical assistance.
- We will undertake regular monitoring visits, and have regular and open communication with grantees, in addition to ensure regular financial and technical reporting. Frequency will be set depending on the project being funded.
- Grantees will be required to commit to the principles of safeguarding and child protection. Where grantees do not have policies and procedures in place they may not be funded.

Robust management of conflict of interest

Due to the relatively small operating environment of mental health and disability programmes and activities in Ghana, the Ghana Somubi Dwumadie grants mechanism acknowledges that conflicts of interests (COI) may occur or appear to occur for the granting mechanism. As such, the Programme is committed to ensuring that COIs are well managed, reported and appropriate steps are taken to mitigate and manage them.

A COI may arise where an organisation's or an individual's own interests, whether direct or indirect, may impact on, or be perceived to impact on, their ability to act with integrity or impartiality. Conflicts of interest may include the involvement of family, political affiliations, organisational membership or economic interests between an applicant or grantee, and a member of the grants programme.

Known and unknown conflicts of interest are managed by:

- Obligation for grantees to declare potential COI and propose mitigation strategies
- Eligibility checks being undertaken by two members of the grants team.
- Assessments being undertaken by two different members of the grants team.
- The clear division of responsibility and authority at each stage of the grants process
- Ensuring that an individual with a known conflict of interest does not decision-make or unduly influence an application, or management of an approved grantee.

3. Scope and eligibility

3.1. Eligible organisations and end users

Organisations eligible to apply for funding under this call include:

- Disabled People's Organisations (DPOs)
- Self-Help Groups (SHGs)
- Women's Rights Organisations (WRO)
- Civil Society Organisations (CSOs)

In addition to these, Research Institutions (this can include universities) and Non-Governmental Organisations are eligible to apply for grants under the theme "Studies to improve the effectiveness and evidence base of intervention in particular community based rehabilitation (CBR) initiatives"

Media organisations can apply in partnership or consortium with DPOs, SHGs, WROs or CSOs under the theme "Social behaviour change communication (SBCC) and stigma reduction".

Organisations must be registered and operating in Ghana. Targeted end-users of the grant must be one or more of the following groups:

- People with disabilities
- People with mental health disabilities

3.2. Geographical scope

This call covers the whole of Ghana, but with priority to the location of projects in underserved regions including:

- Northern Region
- Upper East Region
- Upper West Region
- Savana Region
- North East Region
- Bono East Region
- Bono Region
- Volta Region
- Oti Region
- Central Region

However, a proposal that from other regions/districts other than mentioned above will also be possible, in particular for national level policy work, or where a specific gap or need is identified and evidenced in the proposal.

3.3. Summary of what we will consider funding

We are interested in supporting projects on one of the following themes:

- Evidence-based approaches to improve integration and accessibility of mental health and social services and user-led advocacy initiatives.
- SBCC and stigma reduction.
- Studies to improve our understanding of mental health and disability needs and the effectiveness and evidence base of intervention in particular community-based rehabilitation (CBR) initiatives.

Examples of priority topics under each thematic area are outlined below. Applicants should read this section carefully to ensure that their project proposal meets Ghana Somubi Dwumadie priorities and expectations.

3.4. Evidence-based approaches to improve integration and accessibility of mental health and social services and user-led advocacy initiatives

Work in this area includes capacity building and financial support to SHGs and DPOs to provide peer support to people with disabilities, including mental health disabilities to improve their health and wellbeing. Examples could include support for:

- Access to services
- Income generation for low income groups
- Advocacy activity, including advocating with Government of Ghana (GoG) for increased investment in mental health
- Implementation of Ghana Accessibility Standard
- Advocacy for enabling environment including adoption of the Disability Amendment Bill and implementing commitments from the African Disability Protocol
- Integrating mental health into primary care
- Human rights work
- Working with Government and service providers to adopt user-led approaches which genuinely engage with DPOs and SHGs

3.5. Social behaviour change communication (SBCC) and stigma reduction

This theme will focus on the participatory development and operationalisation of the Ghana Somubi Dwumadie SBCC strategy.

All grants awarded in this theme must include at least one month of capacity to work with fellow grantees to refine operationalisation of the SBCC strategy and agree appropriate messages and approaches.

Grants will be considered under three topic areas:

1. Positive Language for mental health and disability

Working with media, traditional and religious leaders, and community leaders to develop more positive words and phrases around mental health and disability, in local languages as well as in English. Following development of these words and phrases, encouraging widespread adoption at local, national and policy levels through incentives, innovative tactics to challenge the old language and to embed the new language.

2. Creating a culture of support for people with disabilities and mental health disabilities to reach their full potential

Creating a supportive community environment to enable people with disabilities, including people with mental health disabilities, to realise their fullest potential. This could be done for example, through engaging traditional and religious leaders, community and interpersonal dialogue approaches, persuasive and innovative messaging through the use of local media (district and community radio and drama), role modelling or civic engagement.

3. Ensuring duty bearers enforce and abide by Ghana's policies and laws

Working at a policy level, both locally and nationally, to ensure people with disabilities, including people with mental health disabilities, are able to access their rights and entitlements. This could be achieved for example through policy work, providing advice services, or undertaking strategic litigation.

3.6. Studies to generate evidence to inform policy and practice on disability and mental health needs, programmes and interventions, in particular CBR initiatives

This theme is focused on developing an increased evidence base on mental health and disability inclusion in Ghana. The focus of granting in this area will particularly be on operational research to provide an evidence base for the effectiveness of CBR. The topic areas identified for this call align with existing frameworks or classification regimens such as the Grand Challenges of Global Mental Health research, and Ghana's Mental Health Authority research priorities.

Research grants for this call will be supported across four topic areas, as well as cross-cutting themes:

1. Intervention studies

This may include design and evaluation of interventions that:

- Employ social interventions (for example CBR, livelihood support/user groups) and evaluate their impact on mental health outcomes: proposals that focus on

design and evaluation of the impact of CBR initiatives will be given particular attention

- Determine models of mental health care that are effective and cost-effective to address the burden of mental health conditions
- Optimize mental health promotion strategies
- Seek to prevent mental health conditions, for example in adolescents or youth
- Promote awareness/mental health literacy, or
- Use mHealth to address mental health conditions

2. Epidemiological studies

- Research that reports on the prevalence or incidence of mental health conditions. Research that takes a nationally representative approach is particularly encouraged.
- Research that identifies risk and protective factors for mental health conditions, and what makes people more susceptible or resilient than others. Research on social determinants of mental health and disability is particularly encouraged.

3. Health systems, policy, legislation studies

This may include:

- Research on innovative funding of mental health services.
- Studies on human-rights based approach to mental health and disability, e.g. research to unpack human rights issues and their impact on mental health; research that addresses the human rights of persons with mental health and disability
- Research to improve access to quality and affordable mental health services
- Research on how to integrate mental health services in primary healthcare
- How to develop an integrated approach to mental health and other disability, in both policy and practice
- Studies/models on how to maintain competencies of mental health professionals/staff at primary health care level
- Mental health information systems, e.g. improving data quality in terms of the key parameters of accuracy and completeness (and inclusiveness, e.g. data on other disabilities), and flow processes

4. Public health emergencies and mental health studies

This may include:

- Assessing the impact of COVID-19 pandemic on the economic, health and social lives of persons with mental health conditions and disabilities in Ghana, where it adds to existing studies
- Context-sensitive studies into vaccine preparedness and vaccine-related communications and engagement for persons with mental health conditions
- Studies to understand societal, economic, organisational, behavioural and cultural influences on adherence to evidence-based prevention and control measures

Cross-cutting themes

As well as projects addressing the specific thematic areas of this call, research proposals are encouraged to include the following cross-cutting themes: early interventions, community/public engagement, community level interventions, ethics, domestic violence, gender and equity, cultural validity of measurement instruments, socio-cultural factors including the role of traditional and faith healers, and a life-course approach to mental health.

3.7. What we will not fund

Examples of activities sitting outside this granting round include:

- Logistical support for Government
- General public education
- Support for children (under 18 years old)

Other excluded activities are:

- Activities which don't meet the eligibility criteria
- Activities which may lead to civil unrest
- Activities which discriminate against any group on the basis of age, gender reassignment, disability, race, colour, ethnicity, sex and sexual orientation, pregnancy and maternity, religion or belief.
- Activities that are fully funded by other sources whether in cash or in kind.
- Costs incurred prior to a formal agreement being executed including those associated with preparing bid or grant proposals.

4. Resources and duration

4.1. Overview

The total grants call is worth approximately GHS 11,000,000.

Grant allocations will not exceed GHS 200,000 (small grants) or GHS 600,000 per year (large grants) for any given project. This does not mean each project will receive this amount.

It is anticipated that three to five small grants and seven to eight large grants will be awarded.

Small grants	Large grants
<ul style="list-style-type: none">• Grants will be awarded across any of the three thematic areas• Will cover a maximum period of one year (12 months)• The maximum amount of award will be GHS 200,000.	<ul style="list-style-type: none">• Grants will be awarded across any of the three thematic areas• Will cover a maximum period of 33 months• The maximum amount of award will be GHS 600,000 per year

<ul style="list-style-type: none">• Goes through a one-stage application process	<ul style="list-style-type: none">• Goes through a two-stage application process
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4.2. Other key information:

- Once the implementation period has elapsed, grantees will be required to return unspent funds to the Programme.
- All grants are capped at 50% of organisation's latest annual turnover.
- Up to 15% of grant amount can go towards organisational overhead expenditure.
- Up to 5% of grant amount can go towards capacity building and M&E activities
- Match funding is not a requirement of this grant.

5. Assessment Criteria

Applications will be assessed based on the application form and accompanying documents. Key assessment criteria include:

- The proposal addresses at least one of the call topic areas
- The proposed intervention must benefit at least one of the key priority populations listed above
- The proposal demonstrates a participatory and user-led approaches involving the target groups it seeks to support
- The project proposal demonstrates that the intervention approach is based on an evidence-based approach, or seek to build the evidence basis where evidence gap is identified
- The project demonstrates a robust approach to safeguarding, in particular safe and managed conclusion to the project end
- The application clearly shows how it will deliver the project within the chosen time frame
- The project outlines a realistic plan for interventions to be sustained post-grant funding, where relevant
- The project represents good value for money
- The applicant organisation has a strong track record or prior experience relevant to the proposal
- Both the applicant and the proposal demonstrate strong commitments to gender equity and equality
- If the proposal is focused on research study (Theme 3), it should present a high quality methodologically rigorous and ethical research design

6. How to apply

6.1. Open Competition

The call for proposals will be publicised and any organisation (as listed above) can make an application. Ghana Somubi Dwumadie Programme under special consideration may undertake direct solicitation under circumstances it deems fit. Applications (whether competed for or directly solicited) will be checked for eligibility and then assessed against the assessment criteria.

6.2. Small grant applications

There will be a one stage application process. Applicants will be assessed based on their application. Following assessment and review, a small selection of applicants will undergo due diligence checks. If these are successful, the Programme will make a recommendation of funding to selected applicants to the Programme Board and the donor.

6.3. Large grant applications

There will be a two-stage application process. Applicants will be assessed based on their application. Following assessment and review, a small selection of applicants will be invited to discuss and develop their proposal further, and submit a stage two application. Following further assessments by the programme, a reduced selection of applicants will undergo due diligence checks. If these are successful, the Programme will make a recommendation of funding to selected applicants to the Programme Board and the donor.

6.4. Key information

Applications for this call will open on 18th December 2020.

Interested applicants should visit <https://options.co.uk/work/ghana-somubi-dwumadie-grants-round-two-call-for-proposals> and download the application pack.

Applicants should complete the application form and submit via email to Grants@GhanaSomubi.com by 17:00 pm on Monday, 18th January 2021, with requested accompanying documents. Kindly note that no application will be considered after this date and time.

We expect to complete assessments of proposals by mid-February 2021.

For large grant applicants who are invited to submit a second stage proposal, they will have a further two weeks to submit this.

It is anticipated that disbursements of funds to grantees will be done in April 2021, with projects starting in April 2021. Small grants recipients will end by April, 2022 and multi-year large grants recipients ending December 2023 at the latest.

Shortlisted applicants will undergo a Due Diligence Assessment before grants are awarded.

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Please note that the successful submission of a proposal does not represent any commitment for funding. The decision whether to fund your project will be based on the review of your proposal and the assessment of your organisation.

For large grants, continued funding in subsequent years will depend on a range of factors including performance, availability of funds, etc.

Further details will be made available in the application pack. This pack includes:

- Grants Strategy
- Frequently Asked Questions (FAQ)
- Application form
Grantee Code of Conduct
- List of inclusions/exclusions which are eligible to be charged to the grant project budget
- Safeguarding policy checklist
- Theory of Change
- Example grant agreement template
- Budget template

Appendix 1: List of Abbreviations

CBR	Community based rehabilitation
COI	Conflict of interest
CSO	Civil society organisations
DPO	Disabled people's organisations
GoG	Government of Ghana
LNOB	Leave No One Behind
M&E	Monitoring and evaluation
MDA	Ministries, Departments and Agencies
MHA	Mental Health Authority
MoGCSP	Ministry of Gender, Children and Social Protection
NCPD	National Council for People with Disabilities
SBCC	Social behaviour change communication
SHG	Self help groups
TA	Technical assistance
ToC	Theory of Change
VfM	Value for Money
WRO	Women's rights organisation