

DIET, NUTRITION, PHYSICAL ACTIVITY AND CANCER

REGULAR GRANT PROGRAMME

Guidelines for research grant applications





OUR VISION

We want to live in a world where no one develops a preventable cancer.

OUR MISSION

We champion the latest and most authoritative scientific research from around the world on cancer prevention and survival through diet, weight and physical activity, so that we can help people make informed lifestyle choices to reduce their cancer risk.

As a network, we influence policy at the highest level and are trusted advisors to governments and to other official bodies from around the world.

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This document outlines the Regular Grant Programme's Research Principles, Areas and Themes, clarifies the eligibility criteria and provides applicants with details of the review process.

Please, visit our website to get all the "Instructions on how to apply", "Our FAQs" and the "Terms and Conditions for award recipients".

For more information on our Grant Panel, please visit this link.

1. Background and context

Cancer is an increasing burden throughout the world, and a major cause of mortality¹. Together with avoiding tobacco, having a healthy diet, being physically active and maintaining a healthy weight are integral to the prevention of cancer (including primary and tertiary prevention). World Cancer Research Fund (WCRF) Network is unique in its mission to eradicate preventable cancers attributable to diet, nutrition (including body composition) and physical activity. This research grant programme is an important element in how we fulfil that mission.



Since its inception in 2007, our WCRF/AICR Global Cancer Update Programme, in reviewing the most current evidence, has helped identify knowledge gaps.

The 2018 WCRF/AICR Third Expert Report, Diet, Nutrition, Physical Activity and Cancer: a Global Perspective², highlighted several examples of strong evidence, sufficient to support cancer prevention recommendations. It also highlighted many factors for which the evidence was judged to be too limited in amount, quality or consistency to draw firm conclusions, especially for cancer survivors.

The report identified six critical areas of research for the whole scientific community. Four of these research areas are of particular relevance for the

WCRF International Grant Programme:

- Biological mechanisms by which diet, nutrition and physical activity affect cancer processes
- The impact of diet, nutrition and physical activity throughout the life course on cancer risk
- The impact of diet, nutrition and physical activity on outcomes in cancer survivors
- Globally representative research on relevant exposures and cancer

Visit our website for more information on the Global Cancer Update Programme reports and the Third Expert Report wcrf.org/TER

References:

- Bray F, Ferlay J, Soerjomataram I, Siegel RL, Torre LA, Jemal A. Global Cancer Statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. CA Cancer J Clin, in press.
- World Cancer Research Fund/American Institute for Cancer Research. Diet, Nutrition, Physical Activity and Cancer: a Global Perspective. Continuous Update Project Expert Report 2018. Available at wcrf.org/TER



2. World Cancer Research Fund International **Regular Grant Programme**

The World Cancer Research Fund Network operates two research grant programmes that provide similar funding opportunities in different regions of the world:

World Cancer Research Fund International Research Grant Programme, based in London, UK

American Institute for Cancer Research (AICR) Research Grant Programme, based in Washington DC, USA

The World Cancer Research Fund International Research Grant Programme accepts applications from anywhere in the world except the Americas (North America, Central America including the Caribbean, and South America).

World Cancer Research Fund International manages and administers the Regular Grant Programme on behalf of the following WCRF Network charities, who fund the approved grants:

- World Cancer Research Fund in the UK
- Wereld Kanker Onderzoek Fonds (WKOF) in the Netherlands

2a) Regular grant programme schemes

The Regular Grant Programme comprises two main grant types:

Investigator initiated grants

Investigator initiated grants (IIGs) are for established researchers working on our research areas and themes. We encourage collaboration with other teams, therefore it is important to have at least one co-applicant. The aim of this grant funding scheme is to support innovative and original research into the link of diet, nutrition and physical activity in either Cancer Prevention or Cancer Survivors.



IIGs are awarded to Principal Investigators for a maximum of £500,000 for up to four years. Applications that approach the maximum award amount (£500,000) are typically expected to involve primary data collection, and the budget must be clearly justified in relation to the proposed work. The total budget for the grant should be allocated approximately equally across each year of the project duration. Any significant deviations from an equal distribution will be evaluated by the Panel and may require revision during the full application stage. We encourage applicants to submit a budget that accurately reflects the needs of their research proposal.

Pilot and feasibility grants

Pilot and feasibility grants (PFGs) are intended as startup funds for preliminary research to allow researchers to collect preliminary data or test study parameters to take them to a stage where an application for an IIG would be appropriate. PFGs could also study behavioural change in cancer survivors. Lifestyle interventions intending to change behaviour, including change in diet, physical activity, and change related to body composition should have a clear theoretical basis for the mechanism of action and predicted outcomes of the behavioural change. For more information, please see doi.org/10.1146/ annurev-psvch-010416-044007 and doi.org/10.10 **80/17437199.2012.654964**. If the proposal involves investigative research with the aim of testing a scientific hypothesis, it should be submitted as an IIG, even if the required budget and timescale are relatively small.

Only projects that fit with the definition of Pilot or Feasibility study will be accepted:

Feasibility studies address whether something can be done, should it proceed, and if so, how. They aim to find out information such as whether patients and clinicians would be prepared to take part, and how long it might take to collect and analyse the data. They do not substantively address the main research question, for instance about the efficacy or effectiveness or impact of the intervention. The research question for a feasibility study should therefore mainly be related to feasibility.

Pilot studies may address the same questions but also have a specific design feature: in a pilot study a future study, or part of a future study, is conducted on a smaller scale to test that all the main parts of the study work together (eg, recruitment, randomisation, follow-up assessment). Although pilots may give an indication of what a substantive study might show in relation to the research question and generate other relevant information, the main research question should reflect the pilot elements, rather than suggesting a scientific hypothesis-driven study.

Applicants need to be clear and explicit regarding the purpose of the Pilot or Feasibility study, in particular what specific aspects are being studied (eg feasibility, preliminary data for power calculations, testing new methodologies, etc), as well as what the next expected research steps would be after completion of the grant.

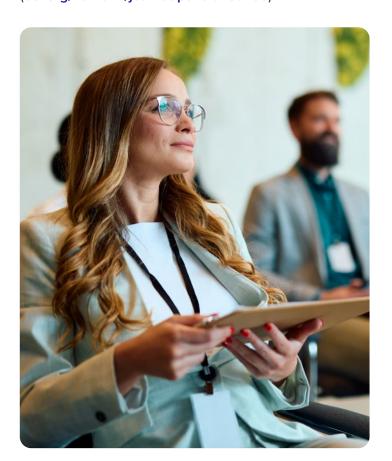
Acceptable outcome measures for pilot or feasibility studies should relate to process, methodological or implementation-focused endpoints, such as recruitment rates, eligibility and consent procedures, participant retention, data completeness, acceptability and adherence to the intervention, fidelity of delivery and feasibility of outcome measures. Projects that assess the clinical efficacy or effectiveness of an intervention, or aim to generate definitive scientific data, may include these as secondary outcomes; however, the primary outcome must focus on feasibility or piloting aspects.

Pilot and feasibility studies should clearly define progression criteria and thresholds that will determine whether the study is considered successful and can advance to the next phase or deemed unacceptable for a full-scale study under the current design.

These grants are for a maximum of £60,000 in total for up to two years. As part of the PFGs we will not accept projects proposing the development of new methodologies or new tools or any projects that do not fit the definition of feasibility or pilot study above.

Note

These definitions follow the framework for defining pilot and feasibility studies by Eldridge et al., 2016 (doi.org/10.1371/journal.pone.0150205)





Mechanistic and epidemiological studies

Pilot or feasibility studies in epidemiological or mechanistic research may be eligible if the primary aim is to assess feasibility-related aspects, such as evaluating sample or data availability, testing recruitment procedures, validating data collection tools or assessing the logistics of biological specimen handling or linkage. However, studies intending to explore or generate scientific hypotheses (eg assessing associations between exposures and outcomes, identifying biological mechanisms or exploring molecular markers) fall outside the scope of this grant type and should be submitted as IIGs, regardless of budget or timescale.

2b) Research principles, areas and themes

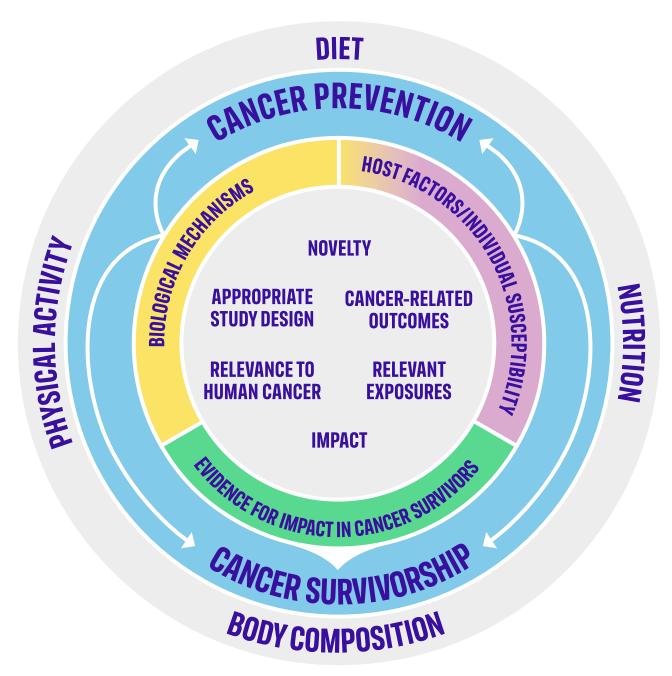
The research principles, areas and themes define the scientific scope of the World Cancer Research Fund International Regular Grant Programme. Applications must address the role of diet, nutrition and physical activity in either cancer prevention or cancer survivors.

Applications should fall into either of the two research themes of biological mechanisms or host factors, or an additional third theme for studying likely causal links in cancer survivors (see Figure 1 below).

Applicants should be aware of the relevant existing evidence presented in the WCRF Global Cancer Update Programme when submitting their grant application.



Figure 1: Research principles, areas and themes



Research principles

Applications must adhere to all Research Principles (listed below) to be considered for review. Applications that do not align with these Research Principles will not be accepted. Please note that all the objectives and aims proposed on the application must be within our remit to be accepted.

Relevant exposures

The aim of the grant programme is to fund research that helps elucidate the role of diet, nutrition (including body composition) and physical activity in cancer.

Relevant exposures encompass both confirmed and possible cancer risk factors related to diet, nutrition (including body composition) and physical activity.

The rationale for the chosen exposure needs to be justified in the application.

Exposures must be well defined and could include:

- Diet, dietary patterns, other diet related behaviours and – provided that they are part of the usual diet – foods, food components and dietary supplements. Please note that proposals focusing on the role of isolated food or herb extracts that are not part of the usual diet will not be accepted.
- Markers of nutritional status, including physiological or metabolic markers; body composition, and measures of growth, development and maturation.
- Physical activity, physical fitness, time spent being sedentary, metabolic or other markers related to physical activity and physical activity related behaviours.
- We accept studies investigating environmental exposures relevant to cancer risk, provided they are ingested dietary contaminants (including drinking water contaminants).
 For more details, please see below.

Exposures must be relevant to usual human exposures. For mechanistic research, exposures should be in a form that would normally be encountered in vivo and at a level that is relevant to humans. Exposures in animal research need to be justified in terms of their relevance to exposure in humans and as to why a human research model is not used. Extreme or unusual exposures, in dose or method of administration, will not be considered.

Environmental exposures

We accept studies investigating environmental exposures relevant to cancer risk, provided they are ingested dietary contaminants (including drinking water contaminants).

Examples of in-scope environmental exposures include ingested aflatoxins, acrylamide, nitrates/nitrites, chlorinated drinking water, mycotoxins, and heavy metals such as arsenic, cadmium, and lead.

We also consider ingested endocrine-disrupting chemicals (EDCs) and related substances with established or suspected relevance to human cancer risk, including bisphenols (eg BPA/BPS), phthalates, formaldehyde-releasing agents, and PFAS (per- and polyfluoroalkyl substances). In addition, exposures to pesticide residues, persistent organic pollutants (POPs), and microplastics are within remit where there is a clear and evidence-based rationale for cancer relevance. All exposures must reflect usual human exposure levels in the general population and be clearly justified in the context of cancer risk.

We do not accept studies focused on exposures from other environmental categories, including air pollution, household or industrial emissions, radiation, chemical carcinogens used to induce tumours in animal models, infectious pathogens, or occupational exposures not relevant to diet, nutrition, or physical activity.

Cancer-related outcomes

Outcomes should be specific and well defined. Relevant outcomes include cancer endpoints as well as recognised surrogate markers of cancer (these do not include risk factors such as obesity, oxidative stress, hormone levels, behavioural change but factors that reflect the cancer process eg mammographic density, colorectal adenomas, leukoplakia, Barrett's oesophagus) or cancer outcome (eg pathological complete response to therapy), but applications must justify the use of a particular surrogate marker.

Please note that for the Cancer Prevention Research Area, body composition (eg adiposity) and behavioural change will not be considered appropriate outcomes, but they could be appropriate exposures (see above). However, for the Cancer Survivors Research Area, a wider range of outcomes is permitted. These are: overall survival, local cancer recurrence, distant metastasis, quality of life during treatment, quality of life after treatment, development of second primary cancers, and impact of treatment (including effectiveness, tolerability, toxicity, comorbidities), as well as body composition. Behavioural change will also be accepted as an outcome but only for Pilot and Feasibility Grants in the Cancer Survivors Research Area.

Please note that in this document the definition of 'cancer' includes the whole cancer process, both before and after diagnosis, from incidence to survivorship, local progression, distant metastasis and cancer mortality.

Drug development or testing new therapeutic targets will not be eligible even only as part of the proposal. Studies focusing on interventions (through diet, nutrition, PA) that aim to improve the response to treatment will be eligible.

Relevance to human cancer

Studies must be justified in terms of their direct relevance to human cancer. Experimental designs outside in vivo human settings, such as animal models, will only be considered for relevant studies that examine mechanistic pathways of the cancer process.

Applications that propose studies performed exclusively in cell lines will not be accepted.

The relevance to humans and to human cancer of the proposed animal model will need to be clearly explained.

The experimental model needs to be clearly described, including the species and any genetic modification of an animal model. Please note that tumour models in animals induced by chemical carcinogens, or any studies outside mammalian systems will not be accepted.

Applications proposing the use of animals must provide a strong and clear justification for the work, including an explanation of why the research aims could not be met using an alternative study model. To help our peer reviewers and Panel of experts assess these applications we ask for detailed information on the proposed research. The questions we ask are based on the advice of the National Centre for the Replacement, Refinement & Reduction of Animals in Research (NC3Rs). The NC3Rs is a UK-based scientific organisation dedicated to the 3Rs. These questions allow applicants to demonstrate how they have considered the 3Rs in their research. For more information visit nc3rs.org.uk

Studies involving humans or animals will need the appropriate ethical approval and the relevant licences and/or certification. WCRF International adheres to the guidelines from the Association of Medical Research Charities (AMRC) and subscribes to the AMRC policy on the use of animals in research. For more information, visit amrc.org.uk/position-statementon-the-use-of-animals-in-research

Appropriate study design

The study design must be appropriate and able to answer the research question. Sufficient information on the proposed study design must be provided. Applicants should clearly outline the project timeline and provide a detailed description of their approach to handling ethical approval, data access, required licenses, or data transfer agreements, if applicable. They should highlight potential challenges or risks and explain how they will be managed. The research question(s) should be formulated as a clear and specific hypothesis, and be explicitly justified. For further information on guidelines for complex intervention studies, please see: bmj.com/content/374/bmj.n2061

Please note that, unless it is not feasible or appropriate to collect prospective data, applications proposing a case-control study design not nested in a cohort study, or a cross-sectional study design, will not be accepted.

Applicants need to provide data to support the

hypothesis that will be tested and to demonstrate the feasibility of the study. When such data need to be obtained, applicants are encouraged to apply for a Pilot and Feasibility Grant, before applying for an Investigator Initiated Grant.

Detailed power calculations for a specific outcome and a clear justification of the proposed sample size must be provided. Please note that applications without sufficient information on the proposed statistical methods, including power calculations, will not be accepted. We strongly recommend that statistical input is obtained before submitting an application; this applies to all studies whether on animals or humans.

Epidemiological and other study designs need to take into account evidence from basic science and experimental models investigating the biological processes for specific exposure outcome links, as well as epidemiological, clinical and other data. An interdisciplinary approach to the research is encouraged, but applicants must demonstrate they have secured the appropriate expertise across all relevant disciplines in their research team (eg through consulting, collaborating and/or staffing provision).

When feasible, applicants should optimise resources through appropriate collaborations, for example the addition of a nutrition or physical activity component to an existing or planned study. When multiple studies are proposed from a single study population, a casecohort design is generally preferred to nested case-control designs.

Additionally, relevant systematic reviews including meta-analyses will also be accepted.

Novelty

Applicants need to demonstrate that the proposed research is novel. Applications should propose a novel research question from careful interpretation of existing data, and/or propose an innovative approach to an existing research question: the aim is to test new or innovative ideas, but please note that applicants must still demonstrate the feasibility of their proposed study.

It must be clear from the application that the researchers have carried out a careful assessment of the existing body of knowledge, including the findings from the Global Cancer Update Programme, to demonstrate the novelty and validity of the proposed research question.



Impact

The research we fund research must have beneficial implications for people's lives by improving our understanding the role of diet, nutrition (including body composition) and physical activity in cancer. The outcome of the research must, in some way, contribute towards helping reduce people's risk of developing cancer, or improve outcomes in people living with and beyond cancer. Applicants need to demonstrate they have considered the potential impact of their research in relation to the following areas, as appropriate:

- Potential for translation into clinical practice
- Usefulness to other researchers in the field
- Outreach to the general public or patients
- Influence on public health, including, when relevant, in policy settings
- Sustainable development goals and application of environmentally conscious practices



Patient and public involvement and engagement

WCRF strongly encourages active public and patient involvement in the design and assessment of clinical research. The expectation is that your research will be "co-produced" with patients or members of the public with direct relevance to the project. Public and patient involvement in this context is not about being a research participant, but rather being consulted on setting research priorities, defining research objectives, and outcome measures, providing other input into study design and conduct, and evaluation of the dissemination of results. Please note that applicants are required to provide details on Public and Patient Involvement as part of their application. When putting together your proposal, please consider the following questions, which are based on the Guidance for Reporting Involvement of Patients and the Public (GRIPP):

- How was the development of the research question and outcome measures informed by patients' priorities, experience, and preferences?
- How did you involve patients in the design of this study?
- Will patients be involved in the recruitment to and conduct of the study?
- How will the results be disseminated to study participants?

For more information on public and patient involvement and engagement in research, visit amrc.org.uk/ guidance-and-tools-for-public-involvement and consult the WCRF PPIE Guidelines document.

Sustainable research environments

WCRF is committed to promoting sustainable environmental practices that reduce the environmental impact of research. We therefore encourage grant applicants to consider and integrate sustainable practices into their research. We also encourage applicants to familiarise themselves with the 17 Sustainable Development Goals (SDGs) so that research is aligned with the SDGs and can address the current global challenges effectively.

Research areas

Applications to the Regular Grant Programme must fall into either the Cancer Prevention or the Cancer Survivors Research Area.

For the Cancer Prevention Research Area, we accept research into the links relating diet, nutrition (including body composition) and physical activity to the causation or primary prevention of cancer. The Cancer Survivors Research Area focuses on individuals who have received a cancer diagnosis.

Applications under each of the Research Areas should address one of the Research Themes.

Research themes

There are two Research Themes that apply to both research Areas, and one that applies only to the Cancer Survivors Research Area.

The Mechanisms research theme applies to both Research Areas, and covers molecular, cellular and physiological mechanisms that help explain the biological connection between relevant exposures and cancer development or progression. This type of research must be coherent with existing laboratory, epidemiological and clinical evidence.

Research in this Theme is especially likely to benefit from interdisciplinary work and the use of new technologies, such as genomics, epigenomics and metabolomics, but such studies should be hypothesis driven and based on preliminary data. For this Theme, we welcome both laboratory studies and epidemiological studies that explore the mechanisms underpinning links between diet, nutrition (including body composition) and physical activity, and cancer- related outcomes.



The **Host factors research theme** applies to both Research Areas and covers factors that might explain the variability between people in their susceptibility to cancer or the biological abnormalities predisposing to it. It also applies to the variability in outcomes after a cancer diagnosis, including in response to treatment. Variation in susceptibility to cancer or in its progression is likely to be influenced by host factors. These might be fixed, such as age, gender, ethnicity and genetic variation, or potentially modifiable, such as hormonal, immunological, metabolic and epigenetic influences. We are interested in how diet, nutrition (including body composition) and physical activity exposures throughout the lifecourse might interact with or operate through these host factors to modulate individual susceptibility and outcome, including response to therapy. In addition, factors related to nutritional status or physical activity might modify an individual's response to other exposures. Better characterisation of the dietary, nutritional or physical activity determinants of variability in an individual's personal susceptibility to cancer and response to treatment, as well as a better understanding of what underpins that variability, would permit a more stratified approach to preventive or management strategies.

A third theme addressing how diet, nutrition (including body composition) and physical activity can improve outcomes after cancer diagnosis applies only for the Cancer Survivors Research Area. This **Evidence for** impact in cancer survivors theme covers research into the role that diet, nutrition (including body composition) and physical activity can play in, for instance, reducing the side-effects of treatment, improving quality of life during and after the completion of treatment, reducing the risk of distant metastasis, second primaries and local cancer recurrence and ultimately prolonging survival. Under this theme, we encourage both interventions and observational designs, including as appropriate robust causal analysis when assessing exposure-outcome associations, for example, using instrumental variables analysis.

While both intervention and observational studies are acceptable, exposures, outcomes and possible confounders, when appropriate, need to be well characterised. Applications including a study component that aims to characterise the biological mechanisms that might explain an effect in cancer survivors are also welcome.

The feasibility of proposed interventions is particularly relevant in cancer survivors research, and must be clearly justified in the application. Applications submitted without sufficient detail on the feasibility, acceptability, compliance, clinical relevance or impact, statistical power or expertise in the research team, will not be accepted. Consider applying for a Pilot and Feasibility Grant (see section 2a) if preliminary data are needed, or study parameters need to be defined.

Additionally, relevant systematic reviews, including meta-analyses, in cancer survivors will be considered.

The exposure must be related to diet, nutrition (including body composition) and physical activity.

Guidelines on cancer survivors research from the Global Cancer Update Programme

Systematic reviews carried out for the Global Cancer Update Programme have examined relationships between diet, nutrition, physical activity and cancer/ non-cancer outcomes in cancer survivors. These have revealed a number of limitations in the current evidence which have largely precluded our expert panel from making strong recommendations. We have identified some key issues that future research should aim to address, and we encourage applications to consider these:

- Conducting well-designed clinical trials that account for differences in cancer sub-types (eg ER+ vs. ER- breast cancer), timing and types of treatment (eg surgery, medication), and other patient characteristics (eg comorbidities, age, race, ethnicity). These factors should be accurately reported.
- Using more accurate methods to assess 'usual' pre-diagnosis dietary intake, physical activity and adiposity, with more accurate reporting of the timing of exposures.
- Providing further information on the biological pathways that may explain the relationships between diet, nutrition, physical activity, body weight, and cancer/non-cancer outcomes.



Figure 2: Schematic diagram presenting the two main research areas, the themes within each area and the remit of the pilot and feasibility grants

CANCER PREVENTION CANCER SURVIVORS Understanding Understanding mechanisms mechanisms **Understanding host Understanding host** factors/individual factors/individual **PILOT AND** susceptibility susceptibility **FEASIBILITY Evidence for impact** on cancer survivors **GRANTS ONLY:** Wide range of **Testing new** outcomes: methodologies/ Overall survival research tools Cancer recurrence **Testing parameters** Distant metastasis **Preliminary data** Quality of life during/ after treatment **Second primary cancers Effectiveness of** treatment (tolerability, toxicity, comorbidities) **Body composition** Behavioural change (only for PFGs)

2c) Eligibility

Grant applications are open to a Principal Investigator based at a research institution from any country outside the Americas (North America, Central America including the Caribbean, and South America).

World Cancer Research Fund International encourages international collaborations. Please note that although the Principal Investigator of an application cannot be from an institution based in the Americas.

co-applicants and collaborators can be based in those countries, and a portion of the research work can be carried out at their institutions.

Applications with the Principal Investigator based in a low- and middle-income country are also encouraged, such as for high quality studies that explore relevant exposure-outcome links in under-researched regions or population. Applicants should ensure the relevant expertise has been secured, for example through appropriate international collaborations.

Institutions

The Regular Grant Programme accepts applications from universities, medical schools, hospitals, research institutes and other academic centres. Research for commercial organisations is not eligible.

A maximum of five applications will be accepted from one institution in any one grant cycle; it is the responsibility of the Principal Investigators and the host institution to coordinate the number of applications submitted. Institutions are encouraged to contact us to discuss the prioritisation of their applications, if needed.

Personnel

The Lead Applicant must be the Principal Investigator who will lead the research and be responsible for delivering the project.

The Lead Applicant (Principal Investigator) must hold a higher academic research degree (PhD or equivalent) and be a senior established researcher, demonstrated by previously receiving at least one independent research grant.

Only one application per Principal Investigator per grant cycle is permitted.

Only one person can act as the Principal Investigator, though an applicant can be a Principal Investigator for one application and a co-applicant in one or more other applications (up to a maximum of four).

The Principal Investigator's salary cannot be covered by the grant, wholly or partly.

The grant may cover the salary or stipend of personnel (other than the Principal Investigator) involved in the project, including the stipend or salary of PhD students.

If a PhD student is to be included in a research grant project, the following criteria must be met:

- The host institution must be responsible for the progress and training of the PhD student and must ensure adequate supervision and assessment of the student's progress and the research training provided.
- The PhD student should be spending 100 per cent of their time on the WCRF funded project, on a full-time or part-time basis.



2d) Grant budgets

Budgets should cover the costs of such items as salaries for personnel (excluding the Principal Investigator), research equipment, Open Access publication fees, supplies and travel to conferences/ meetings.

Budgets must be submitted in pounds sterling (GBP) only. Please note that any fluctuations in the exchange rate will be at the Institution's expense or gain. For more information on payments, please see section 1.5 on our Terms and Conditions.

Full application budgets must contain a detailed breakdown of each item per year and a detailed justification of all elements of the budget.

Personnel

Principal investigator

The salary of the Principal Investigator cannot be included in the grant budget, wholly or partly, except for PIs based in a low-or-middle income country, in which case we would consider funding part of the salary.

If necessary, calculate and include the percentage of any time claimed by any co-applicants and collaborators, if their respective institutions do not cover that time.

Please note that those compensated in whole or in part with funds from a grant shall not be considered as employees of the World Cancer Research Fund Network charities.

PhD student stipend

We appreciate that PhD stipends vary between countries. In order to recruit high quality students, we recommend that the stipend award be at the top end of the scale for PhD studentships.

Additionally, up to £2,000 per year charged by the host institution towards PhD fees can be added to the budget.

Equipment

Please note that only equipment essential for the study will be considered. Items costing more than £700 must be itemised.

Travel to conferences

WCRF International encourages Principal Investigators and other grant personnel to attend conferences and relevant scientific forums to present the grant's outputs, and will provide funds towards the cost of travel, registration and accommodation. These funds must only be used to allow the attendees to present work funded by the grant, in the form of a poster or oral presentation.

The maximum allowance for travel is £3,000 for IIGs and £1,500 for PFGs over the duration of the grant period.

Other pertinent travel costs not related to conferences should be included under the miscellaneous section of the budget.

Open access publication

WCRF International encourages the Open Access publication of research. The maximum allowance for Open Access publication is £6,000 for IIGs and £3,000 for PFGs. Funds to cover the cost of publishing under open access can be included in this budget section.

Miscellaneous

Other relevant and justifiable additional costs pertaining to the study, such as the travel expenses of study participants, travel to any meetings that might be required to co-ordinate multicentre studies, maintenance contracts or the cost of obtaining certification or licenses to carry out research involving humans or animals, can be added under the miscellaneous section.

Please note that all costs added to this budget section will need to be itemised and clearly justified in the application.

Institutional overheads

Budgets should not contain overheads or any institutional expenditure; only the direct cost of research should be included.

For more detailed information on grant budgets, please refer to our IIG/PFG specific application instructions on our 'How to apply' webpage.

3. REVIEW PROCESS

We operate a two-stage process for reviewing IIG and PFG applications. The projects that are shortlisted after the first stage will be invited for a full stage application.

Applications that are not clearly relevant to the goals of the Regular Grant Programme, as outlined in this document, will not be sent for review. Please note that applications that only partially align (ie with components that do not align) with our remit will be rejected.

Final approval for funding of IIGs and PFGs is decided by the relevant WCRF Network charity Board of Trustees at the end of September each year.

Principal Investigators of applications awarded a grant will be notified by early October. Notification of awards will include details of the grant amount and the WCRF Network charity that is funding the grant. Funding must begin between 1 November and 1 April of the following year.

Stage 1: Outline IIG and EOI PFG applications

After the Stage 1 deadline and with the support of our Panel Chair, all the applications will be triaged, and those that do not adhere to the Research Areas, Themes and Principles, as well as those from Principal Investigators who are not eligible to apply, will be rejected. Applications with missing information, forms or attachments may also be rejected at triage.

The Grant Panel reviews the Outline IIG applications and the Expression of Interest (EOI) for the PFGs that are not excluded by triage. During the first Grant Panel meeting, the Panel evaluates the scientific merit of the applications, their feasibility and their

relevance to the Research Principles, Areas and Themes. They then advise on which applications should be invited to submit a full application.

Principal Investigators are notified of the outcome of their application and are provided with feedback from the Panel.

Stage 2: Full applications

The Principal Investigator for each recommended application after Stage 1 is invited to submit a full application. Each full application is assigned two or more external peer reviewers, who provide a written review. Suggested peer reviewers for each application are obtained from the Grant Panel, from the applicants and from suggested peer reviewers who are unable to review the application themselves.

Grant Panel members review the full applications before the second Panel meeting. Full applications are then discussed at the second Grant Panel meeting. At the meeting, after discussion, Panel members give each application a numerical score according to scientific merit. The scores are averaged and the applications ranked by score as a basis for funding decisions.

Further information or clarification may be requested from the applicant after the second Panel meeting before a final decision is made. Please note that this is not an indication that the application will necessarily be put forward for funding. Rejection indicates insufficient merit to warrant funding. The written peer reviews and a summary of the Panel discussion are provided in unattributed form to the applicants at the end of the process.

Final approval of funding for IIG and **PFG** grants

Final approval for funding of IIG and PFG grants is decided by the relevant WCRF Network charity Board of Trustees at the end of September each year. Please note that although approval by the Grant Panel indicates that the application is of sufficient scientific merit to be considered for funding, it is not a guarantee, as this depends on available funds and final Board approval.

The decision to recommend funding will be based on the scientific merits of the application within the context of WCRF network's research strategic priorities. In order to achieve the research objectives of our network members, at least one of the top scoring UK and NL based applications will be presented at the Board for approval.

Principal Investigators of applications awarded a grant will be notified by early October. Notification of awards will include details of the grant amount and the WCRF Network charity that is funding the grant. Funding must begin between 1 November and 1 April the following year after notification of award.

Conflicts of interest



Grant Panel members and external peer reviewers do not review an application that has been submitted by themselves (as Principal Investigator or coapplicant), by a member of their institution, or by an applicant with whom they have had any involvement in the project, or with whom they might have a possible conflict of interest.

If a Grant Panel member has a conflict of interest for a particular

application, the other Grant Panel members review it and the conflicted Panel member is excluded from discussion on the proposed project.

The Regular Grant Programme has been audited by the Association of Medical Research Charities (AMRC) and has been awarded a certificate to show that it follows best practice when peer reviewing grant applications.

Contract terms and conditions

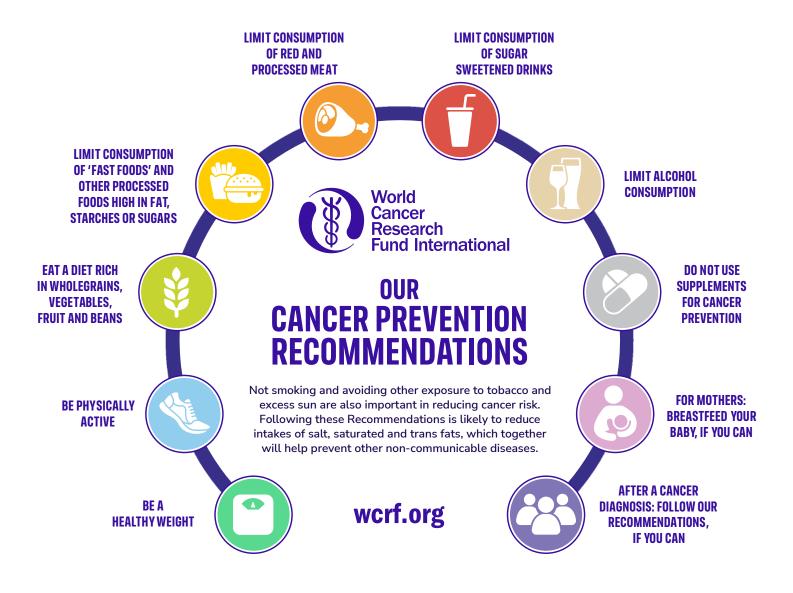
The World Cancer Research Fund International terms and conditions will need to be accepted by the Principal Investigator of the approved grants, as well as by relevant representatives of the host institution, including Finance, Human Resources and Public Relations/ Communications departments. Grant applicants are asked to alert their legal department to the grant's terms and conditions before submitting an application. For more information, please check our Terms and Conditions.

Collaboration with other funding bodies

With the consent of the applicant, World Cancer Research Fund International may occasionally enter into collaboration with other organisations to jointly fund an application for high-quality research that meets the objectives of both organisations. All applications considered for collaborative funding will be reviewed using the standard World Cancer Research Fund International grant application process (detailed in this document), which includes both Grant Panel review and external peer review. In addition, it is expected that the collaborating organisation may also review the application using their internal application review process. Rejection by the collaborating organisation will not affect eligibility for funding by the World Cancer Research Fund International Regular Grant Programme. Applicants will be informed as soon as possible if their application is deemed potentially eligible for a collaborative grant.



CANCER PREVENTION RECOMMENDATIONS





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