



Request for Proposals (RFP) for a delivery partner for The Mental Health Data Prize – Africa

1. RFP Background & Objectives

Wellcome supports science to solve the urgent health challenges facing everyone. One of the strategic priorities that we are focusing on is [mental health](#): we aim to create a world where no one is held back by mental health problems. Wellcome aims to drive a transformative change in our ability to intervene as early as possible in the course of anxiety, depression and psychosis, in ways prioritised by the people who experience these problems. This work involves advancing scientific understanding of how the brain, body and environment interact in the trajectory and resolution of these problems; finding new and improved ways to predict, identify and stratify groups of people so that we can provide more timely and personalised interventions; and finding new and improved ways of intervening early on. An important tool for achieving this aim is the use of existing data to address current challenges in mental health science. With these principles in mind, The Mental Health Data Prize- Africa aims to support trustworthy data science to transform how mental health research solves challenges around anxiety, depression and psychosis in Africa while building data capacity on the continent.

The first [Wellcome Data Prize in Mental Health](#) was launched in the summer of 2022. This was Wellcome's first data prize, and it brought together 11 teams working on existing data from the UK and South Africa to create digital tools that enable research into the prevention, treatment, and management of youth anxiety and depression. Wellcome partnered with [Social Finance](#) to deliver this first prize. Though this initiative successfully reached out beyond Wellcome's established networks and created a multidisciplinary community that is using data to help advance our mental health mission, it did not attract as many applications as expected from South Africa. To understand the reasons behind this, we conducted a follow-up evaluation involving (1) a qualitative survey, (2) a workshop with the African data science community and (3) expert consultations with relevant stakeholders.

By taking on board the feedback received, we now want to support "The Mental Health Data Prize- Africa", which is better tailored to the needs and priorities of African data scientists and mental health researchers. Together with a selected supplier, we will support teams to use existing datasets from across the continent to answer research questions relating to understanding and intervening in anxiety, depression and psychosis (see [link](#) for more information on our mental health strategy).

The structure of this data prize will involve a "set-up phase" during which the focus will be on (1) finalising data sources, (2) reaching out to relevant communities and potential participants, (3) forming multidisciplinary teams and (4) providing bespoke support and training to participants. Teams will be invited to submit proposals that use existing data from across the African continent to answer research questions around improving understanding of the trajectory and resolution of anxiety, depression and psychosis in African contexts. Through a competitive evaluation process, 5-10 multidisciplinary teams will be selected to receive a prize (i.e.: funding from Wellcome) of £200,000 each. Prize teams will then spend the following 12 months on their data analysis and/or tool development. At the end of the 12 months, teams will present their outputs as part of their final pitch to Wellcome and *may* be invited to submit a proposal for larger support.



This RFP aims to find a supplier based in Africa, that will lead on the ~9-month-long **set-up phase**. We will however consider suppliers from outside Africa that can showcase strong links to African partners. The set-up phase will have following high-level objectives:

- Build on the initial scoping undertaken by the Wellcome team, to identify potential longitudinal datasets across the continent that can be used as part of this prize
- Lead on the engagement with potential participants (focusing on African data scientists and mental health researchers) through a strong communications campaign
- Provide data-related training on specific topic areas based on the needs of the engaged community
- Lead on the team formation by matchmaking individuals to fill gaps in skillsets within multidisciplinary teams, involving data scientists and mental health researchers from the African continent
- Organise the selection process to identify 5 multidisciplinary that will receive the prize money
- Make the awards on behalf of Wellcome

2. RFP Specification

The goal of The Mental Health Data Prize- Africa is to generate tangible and scalable outputs that support mental health research and build data-related capacity across the continent.

This section sets out the specification of services for this RFP exercise in relation to the objectives outlined above. Suppliers should use this section to fully understand Wellcome's requirements and to inform their response.

1. Managing the Prize:

The supplier will be responsible for the project management pipeline, including the procurement and the management of subcontracted support as needed/required. As soon as the project kicks off, the supplier will develop a detailed delivery plan with timelines which will be approved by Wellcome and reported on regularly. The supplier will be responsible for monitoring risks and issues, and for ensuring delivery is on track. Budget management and accounting will also be under the supplier's responsibility, with regular reporting against cash flow required.

2. Reviewing and finalizing the Prize content and principles:

Once the supplier has been appointed, the Wellcome team will share the set-up report, feedback and any other relevant information from the first Wellcome Data Prize. Considering this information, the supplier will adjust and finalize the content and principles for The Mental Health Data Prize- Africa, as appropriate. As part of this process, the supplier is expected to put in place an advisory board of leading experts on mental health research, data science, data ethics and lived experience experts to sense check these principles. Wellcome will not be a member of this advisory board but will input ideas for potential members. The supplier may want to consider using some of the members of the advisory board as members of the selection panel during the evaluation process (please see below).

3. Scoping longitudinal mental health datasets in Africa:



Based on our dataset criteria (Appendix 1), we have already identified potential datasets from across the continent that could be used as part of this Prize (Appendix 2). Building on this initial scoping, the supplier will:

- (1) Conduct a more in-depth deep dive of the proposed datasets contained in Appendix 2
- (2) Identify any additional datasets that meet the criteria outlined in Appendix 1, and which may be used in the Prize
- (3) Engage with relevant data holders to understand and summarize access protocols, legal requirements and regulatory requirements relevant to the identified datasets. The data holders of each of these datasets should be consulted by the supplier on the most effective way to access their data, with details documented which can be shared with potential participants. As an example of the level of detail expected please see [the document](#) that was used in Wellcome's first data prize.

In relation to the above, it is a requirement that these activities will be done without the supplier accessing any individual-level data (regardless of whether the data is pseudonymised or similar) of the proposed datasets.

4. Creating and delivering a communications and engagement plan for the Prize:

The supplier will be responsible for creating an engagement plan which includes several communications assets on multiple channels and platforms to maximise the number of potential applicants across the African continent. We expect the engagement plan to be multi-faceted and to include webinars, social media gathering as well as written blogs that reach a diverse community. The supplier will be required to liaise with Wellcome's communications team to ensure consistency.

5. Creating, training and supporting multidisciplinary teams:

Our aim for this Prize is that it acts as a vehicle for data-related capacity building on the African continent. This is the reason why we have chosen to provide the training component up-front to the interested community, instead of limiting it to the selected winning teams. We want to identify areas for training based on the needs of potential participants and in alignment with the overarching aim of the Prize. Therefore, the supplier will also need to be responsible for:

- (1) Crowdsourcing ideas from interested prize participants about areas in which they may need training and support
- (2) Identifying at least three areas where training and support may fill the biggest gaps in knowledge
- (3) Delivering training and support in these areas

The supplier will also be required to support individual applicants with the formation of multidisciplinary teams. The supplier will develop a plan for a hands-on approach to match-making through which individuals with different knowledge, skillsets and backgrounds will be introduced to collaborate and develop a proposal together.

6. Managing the selection process and prize giving:

The supplier will be responsible for launching an online platform for receiving applications, developing the eligibility criteria, the assessment criteria and organising a multidisciplinary selection panel to lead on the evaluation process of applications. These tasks will be carried out via regular interaction with the Wellcome team to ensure that the process aligns with Wellcome priorities. The Wellcome team will share useful material, such as the assessment criteria that were developed as part of the first Mental Health Data Prize, and which can be adjusted in line



with the principles of this Prize. Once the winning teams are selected, the supplier will be required to make the awards on behalf of Wellcome for which the budget will be provided separately. These awards must incorporate Wellcome grant terms and conditions (<https://wellcome.org/grant-funding/guidance/grant-conditions>) and grant funding policies (<https://wellcome.org/grant-funding/guidance/grant-funding-policies>), and such other conditions and policies as determined by Wellcome from time to time.

7. Organising the final Prize pitch:

At the end of their 12-month long data analysis and/or tool development, the prize-winning teams will be required to do final presentation to present their outputs via a final Prize pitch. Based on the outcome of final Pitches, prize teams may be eligible for further funding from Wellcome. The supplier will be responsible for delivering this final event.

8. Data protection and safeguarding:

The supplier will be responsible for identifying and handling data protection and safeguarding considerations arising from this project. The use of personal data in this project must be compliant with the UK GDPR, regardless of the supplier's or any prize team participant's geographical location. The supplier is expected to assess and determine the purpose and means of processing personal data, including any risk assessments (such as a data protection impact assessment). Similarly, the supplier is expected to assess any safeguarding risks posed by the project. For the work done by the prize teams, in line with Wellcome's standard grant terms & conditions, each prize team (and not Wellcome) will be responsible for its compliance with data protection and safeguarding (as well as any other applicable law) and the supplier must ensure that it does not take any steps that would alter this.

9. Legal support:

The supplier will be responsible for obtaining the legal support needed to set up the legal framework such as participation contracts and intellectual property advice.

3. RFP Timetable

#	Activity	Responsibility	Date
1	RFP issued to Suppliers	WT	w/c 19 June 2023
2	Submission of Supplier Q&A to Wellcome Contact	Supplier	7 July 2023
3	Return of Supplier Q&A to Suppliers	WT	12 July 2023
4	Submission of RFP Response	Supplier	28 July 2023
5	RFP Evaluation Period	WT	31 July – 2 August 2023
6	Supplier Presentations	Supplier	7 – 11 August 2023
7	Notification of Contract Award	WT	w/c 14 August 2023



8	Contract Negotiation	WT & Supplier	15 August – 15 September 2023
9	Contract Start Date	WT & Supplier	TBD

4. Response Format

The following headers support the timetable by providing further detail of key steps.

Supplier Q&A

Prior to the submission of your RFP response, suppliers are given the opportunity to submit any questions they have about the exercise and the activity. All questions are to be submitted to the Wellcome Contact in accordance with the RFP timetable. All questions will be collated, anonymised, answered and returned to all Suppliers. Please make sure you ask all questions at this stage – once Wellcome has responded to all submitted questions, additional questions will not be answered, to ensure that this is a fair and equitable process. There will be no adverse consequences for any supplier who doesn't use the supplier Q&A process.

RFP Proposal

Suppliers are required to submit proposals which respond to the following questions:

RFP Questions

This section requests responses from Suppliers to specific questions in relation to this RFP.

#	Question	Max
1	Outline your approach for delivering the activities and objectives of this RFP. Please include: <ul style="list-style-type: none"> Your methodology for delivering Parts 2, 3 and 4 under the RFP specifications (pages 2-4). Timeframes in which you propose to meet the requirements. Your approach to working closely with the Wellcome delivery team. 	1,000 words
2	Describe your approach to managing the breadth of the topic, making specific reference to content specified under Part 5 including: <ul style="list-style-type: none"> How you plan to reach out to a diverse community of potential participants across the African continent? How you plan to gain insights into the gaps in training and support (e.g. Data-related skills) of the potential prize participants? How you plan to provide the training and support needed to potential prize participants? 	750 words
3	If applying as a group of Suppliers: <ul style="list-style-type: none"> Outline your previous experience of working in this way. Summarise your approach to project management. Clarify who will act as lead Supplier. 	300 words



	<ul style="list-style-type: none"> • Explain why each Supplier is necessary. • Provide team member bios (as an appendix). <p>If applying as a single Supplier:</p> <ul style="list-style-type: none"> • Summarize your approach to project management. • Clarify how your team members will work together. • Explain how the membership of your team will ensure to draw insights from across the African continent. • Provide team member bios (as an appendix). 	
4	Provide 2-3 examples of previous work where you have successfully completed a similar data prize/challenge or project. Please include any previous experience of awarding and managing grants.	300 words for each
5	Outline your current thoughts on how you will engage and/or involve lived experience expertise in the design of the Prize. Please include any previous experience of working with lived experience expertise (if any) and/or potential organisations that you are planning on collaborating.	300 words
7	Confirm how you will structure the project to ensure that you will be the sole independent data controller, at all stages of the project. This should include an initial risk assessment of data protection issues arising from your proposal. Your proposal (and the ultimate project structure) must not be structured in a manner that could result in Wellcome becoming a data controller for the personal data used in this project.	200 words
8	Explain how you will address environmental sustainability considerations within the project delivery plans.	200 words
9	Provide a cost proposal excluding VAT, which details and justifies the proposed costs to meet our requirements, as well as your preferred currency for payment.	200 words
10	Highlight any risks and/or issues you foresee with meeting Wellcome's requirements and describe your approach to managing them.	200 words

Proposals will be assessed against the following criteria:

Methodology 40%	<ul style="list-style-type: none"> • Coverage: How well are the research questions covered in the proposed methodology addressed? • Quality: Are concepts clear? Is the proposed methodology aligned with our needs? • Utility: Will the proposed methodology deliver the desired, credible and useful results?
Experience 25%	<ul style="list-style-type: none"> • Skills and Experience: Does the Supplier have the relevant skills, experience and contextual understanding to deliver this work?



Delivery and Outputs 25%	<ul style="list-style-type: none"> • Communication: Is there a good plan for communicating and engaging with the Wellcome team? • Delivery plan: Is the proposed delivery plan appropriate and achievable? • Feasibility: How feasible is the delivery plan? Are there significant risks or issues associated with the proposed timelines, and how well are they being mitigated?
Budget 10%	<ul style="list-style-type: none"> • Value for Money: Does the proposed work offer good value for money?

Contract Feedback

This section allows Suppliers to provide specific feedback to the contractual agreement which will be used should their proposal be successful. This is the suppliers' opportunity to provide negotiation points on Wellcome's terms and conditions, we will not consider negotiations that are only raised after the contract has been awarded so as not to delay the contracting process. Please ensure you engage with a relevant legal contact if applicable.

Contract feedback is to be incorporated into your proposal as an annex and in the following format:

Clause #	Issue	Proposed Solution/Comment

Suppliers submitting proposals as a registered company should review Wellcome's Terms and Conditions which can be found [here](#).

Individuals submitting proposals as a sole trader (not registered) should review this [document](#).

Individuals submitting proposals through their own personal services company please highlight this to the Wellcome contact immediately (see point 7 below).

Wellcome Data Protection Compliance

Under [GDPR/Data Protection law](#), Wellcome must keep a record of all personal information it is processing (i.e., collecting, using, and sharing). This record will be made available to the Information Commissioner's Office upon request.

This is Wellcome's record of data processing activities which meets GDPR article 30 requirements.

Suppliers are asked to complete the [TPSRA2](#) assessment **before** the RFP submission deadline for Wellcome to assess how you handle data.

Supplier Presentations

Following submission of proposals, shortlisted Suppliers will be invited to an online meeting which will last 1 hour in total and will be a PowerPoint presentation followed by a question and answer session.

5. About Wellcome



Wellcome supports science to solve the urgent health challenges facing everyone. We support discovery research into life, health and wellbeing, and we're taking on three worldwide health challenges: mental health, climate and infectious diseases. Find out more about Wellcome and our work at: [wellcome.org](https://www.wellcome.org).

6. Non-Disclosure and Confidentiality

Prospective Suppliers should be aware that inappropriate publicity could have a serious effect upon Wellcome's business. The information contained within this document or subsequently made available to prospective Suppliers is deemed confidential and must not be disclosed without the prior written consent of Wellcome unless required by law.

7. Prospective Suppliers Personnel – IR35 and Off Payroll Working Rules

Before the RFP response deadline, Prospective Suppliers must make the Wellcome Contact aware if they are intending to submit a proposal where the services will be provided by any individuals who are engaged by the Prospective Supplier via an intermediary i.e.

- Where the Prospective Supplier is an individual contracting through their own personal services company; or
- The Prospective Supplier is providing individuals engaged through intermediaries, for the purposes of the IR35 off-payroll working rules.

8. Independent Proposal

By submission of a proposal, prospective Suppliers warrant that the prices in the proposal have been arrived at independently, without consultation, communication, agreement or understanding for the purpose of restricting competition, as to any matter relating to such prices, with any other potential Supplier or with any competitor.

9. Funding

For the avoidance of doubt, the output of this RFP exercise will be funded as a **Contract** and not as a Grant.

10. Costs Incurred by Prospective Suppliers

It should be noted that this document relates to a Request for Proposal only and not a firm commitment from Wellcome to enter into a contractual agreement. In addition, Wellcome will not be held responsible for any costs associated with the production of a response to this Request for Proposal.

11. Sustainability

Wellcome is committed to procuring sustainable, ethical and responsibly sourced materials, goods and services. This means Wellcome seeks to purchase goods and services that minimise negative and enhance positive impacts on the environment and society locally, regionally and globally. To ensure Wellcome's business is conducted ethically and sustainably, we expect our Suppliers, and their supply chains, to adhere to these principles in a responsible manner.



12. Disability Confident

The Wellcome Trust is proud to be a Disability Confident Employer (DC Level 2) and we encourage all our partners and Suppliers to do the same. More information about this can be found on the government website [Disability Confident employer scheme and guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/disability-confident-employer-scheme). Disability Confident is creating a movement of change, encouraging employers to think differently about disability and take action to improve how they recruit, retain and develop disabled people.

13. Accessibility

Wellcome is committed to ensuring that our RFP exercises are accessible to everyone. If you have a disability or a chronic health condition, we can offer adjustments to the response format e.g. submitting your response in an alternate format. For support during the RFP exercise, contact the Wellcome Contact.

If, within the proposed outputs of this RFP exercise, specific adjustments are required by you or your team which incur additional cost then outline them clearly within your commercial response. Wellcome is committed to evaluating all proposals fairly and will ensure any proposed adjustment costs sit outside the commercial evaluation.

14. Diversity & Inclusion

Embracing [diversity and inclusion](#) is fundamental to delivering our mission to improve health, and we are committed to cultivating a fair and healthy environment for the people who work here and those we work with. As we learn more about barriers that disadvantage certain groups from progressing in our workplace, we will remove them.

Wellcome takes diversity and inclusion seriously, and we want to partner with suppliers who share our commitment. We may ask you questions related to D&I as part of our RFP processes.

15. Wellcome Contact Details

The single point of contact within this RFP exercise for all communications is as indicated below;

Name: Olivia Donovan
Role: Procurement Officer
Email: RFP@wellcome.org



Appendices

Appendix 1: Dataset Criteria

To be considered for inclusion in the Prize, datasets will need to:

- Include data on participants aged 0-30 years old
- Include measures either directly relating to anxiety, depression and/or psychosis, or proxy measures (for example, measures of mood or emotion, frequency of social interactions, engagement with positive activities, heart rate, life satisfaction, hopefulness, etc.)
- Contain data on biological, social and/or psychological aspects, relevant to research questions of how brain, body and/or environment interact in the trajectory and resolution of anxiety, depression and/or psychosis, with a view to finding new and improved ways to predict, identify and/or intervene as early as possible
- Be large enough, depending on the richness of the dataset, with the number of people represented in the data in the hundreds at least
- Be longitudinal, with at least three waves of data collected tracking the same individuals over time
- Not be over researched; there must be value in conducting more mental health research and a possibility of finding new insights using the dataset
- Be in a format that is ready to analyse or feasible to clean within the resource available.
- (Where relevant) already be linked to other datasets. Based on the timeframes typically involved in data linking, we do not expect to undertake new linking for this Data Prize, unless in exceptional circumstances where this is assessed to be feasible prior to the start of the Prize
- Be accessible to the team(s) that want to use it or be in a state where it can be made accessible by the time the Prize launches.



Appendix 2: Example datasets

Name	Link	Countries	Participants	Data access	Short profile
National Income Dynamics Study (NIDS)	https://www.saldru.uct.ac.za/project/national-income-dynamics-study-nids/	South Africa	Nationally representative sample of over 28,000 individuals in 7,300 households across the country.	Free, through DataFirst Portal: http://nids.uct.ac.za/nids-data/data-access	5 waves of data from 2008 – 2020, including on mental health. As these studies were designed to capture economic and social wellbeing, they also provide rich data on factors including household structure, poverty and income, education, labour market participation and social cohesion.
The Alliance for Maternal and Newborn Health Improvement (AMANHI) biobanking study	https://academic.oup.com/ije/article/50/6/1780/6356791	Bangladesh, Pakistan, Tanzania	10001 mothers, Age 15-19= 1126 Age 20-29 = 6027; 9938 new-born babies	Free, hosted by WHO, contact AMANHI group for access	Cohort of pregnant women and their babies, studying the interactions between genes and environment. Includes data on depression in mothers.
SAPRIN (South African Population Research Infrastructure Network)	https://saprindata.samrc.ac.za/index.php/catalog/80/related-materials	South Africa	More than 75,000 households (320,000 individuals), 15 years and over in 5 different regions	https://saprindata.samrc.ac.za/index.php/catalog/80/study-description	Novel dataset compiled for prize teams, incorporating Covid-19 surveillance data and including measures of depression and/or anxiety.
Young Lives Cohort	https://www.younglives.org.uk/	Ethiopia, India, Peru, Vietnam	<i>Younger cohort:</i> 8,064 babies recruited 6-18 months. Now 21- 22 years old.	Free, https://www.younglives.org.uk/usa-our-data	Longitudinal study investigating childhood poverty over a 15-year period. Includes data on depression and anxiety.



			<i>Older cohort: 3,722 children 7-8 years old. Now 28-29 years old.</i>		
Birth to 30 (Bt30)	https://bt30.org/	South Africa	3273 children from Soweto-Johannesburg tracked since 1989	Accessible to max. one prize team, through direct application to the project leaders at the University of the Witwatersrand.	The overarching vision of Bt30 is to understand child and adolescent health and development, including mental health.
Cape Area Panel Study (CAPS)	https://www.saldru.uct.ac.za/surveys/cape-area-panel-study-caps/	South Africa	4800 participants from Cape Town	Free, through DataFirst Portal: https://www.datafirst.uct.ac.za/dataportal/index.php/catalog/266/	The Cape Area Panel Study (CAPS) is a longitudinal study of the lives of youths and young adults in metropolitan Cape Town, South Africa. With five waves between 2002 and 2009, the study covers a wide range of outcomes, including schooling, employment, health, family formation, and intergenerational support systems.
StrongMinds Dataset	https://strongminds.org	Uganda, Zambia	230,000 women and adolescents	Contact them to gain access and understand data format, etc.	Intervention study of 230,000 women and adolescents with symptoms of depression, enrolling into group talk therapy in Uganda and/or Zambia. Data collected 2016 to 2019, including on health, income, marital status, social network, etc.
Adolescent Health Outcomes Study (AHOS)	https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-020-8435-0	Kenya	600 adolescents aged 12-17 years	Raw data available upon request	A longitudinal study (3-year period with annual assessments) that looked into the health outcomes (executive function, scholastic, and mental health) of 600 adolescents living with HIV, HIV exposed uninfected, and healthy controls (n=200 for each group)



GAGE (Gender and Adolescence: Global Evidence)	https://www.gage.odi.org	Ethiopia, Rwanda, Bangladesh, Nepal, Jordan, Lebanon	20,000 girls and boys	Free, through the UK Data Service. Contact them regarding access to clean data sets.	GAGE is the largest global study on adolescents, following 20,000 girls and boys over 10 years (2015-2025) in developing countries to understand what works to enhance adolescent capabilities and empowerment. Includes data on mental health and self-esteem.
Context of Violence in Adolescence Cohort (CoVAC)	https://www.ishm.ac.uk/research/centre-s-projects-groups/covac	Uganda	3431 adolescents participated in a survey in 2014 when the majority were aged 11–14 years, Wave 2 survey in 2018; again in 2021 (aged 18–21 years).	Contact data holders regarding access	Violence exposure in adolescence is associated with a range of poor health and social outcomes, including both the perpetration and experience of violence in later intimate relationships. However, there is little longitudinal evidence on how both individual and contextual characteristics encourage or interrupt these associations. The CoVAC study was designed to provide evidence on these pathways for Ugandan adolescents, with the aim of providing information to improve the design of violence prevention interventions for adolescents and young adults. Includes measures of depression and emotion/wellbeing.
West African Birth Cohort	https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0187267	Côte d'Ivoire, Ghana	1030 women and their children	Researchers may request the data by contacting the secretariat of University Medical Center Hamburg-Eppendorf at kjp@uke.de	The aim of the study was to investigate the long-term course of depressive symptoms in ante- and postpartum women and to examine potential risk and protective factors associated with these trajectories. This prospective birth cohort study collected data between 2010-2014, including on depression and anxiety of the mothers.
The Malawi Longitudinal Study of Families and	https://web.sas.upenn.edu/malawiresearch/	Malawi	Married women aged 15-49 and their husbands were recruited in 1998.	https://web.sas.upenn.edu/malawiresearch/data/mlsfh-survey-data/	One of the few long-standing, publicly available African longitudinal cohort studies. It has followed up to 4,000 individuals since 1998 during which depression and anxiety have been assessed (assessments in 1998, 2001, 2004, 2006, 2008, 2010 and 2012).



Health (MLSFH)					
C-MaMiE: Child outcomes in relation to Maternal Mental disorders in Ethiopia	https://www.centreforglobalmentalhealth.org/c-mamie-child-outcomes-in-relation-to-maternal-mental-disorders-in-ethiopia	Ethiopia	1065 pregnant women were recruited from the predominantly rural demographic surveillance site in Butajira, south central Ethiopia		The women have been followed up since 2004 to examine the impact of maternal mental health problems on child growth, physical and mental health, development, educational attainment and survival.
Productivity, Family Planning and Reproductive Health in Burkina Faso	https://www.poppov.org/productivity-family-planning-and-reproductive-health-an-interdisciplinary-study-in-burkina-faso/	Burkina Faso	900 pregnant women, with follow-up over a nine-month period, aged 15-44		The ultimate aim of this project is to conduct multidisciplinary research on the impact of pregnancy on income-generating and nonincome-generating production in Burkina Faso; and to investigate how investments in reproductive health might contribute to reducing poverty and fostering economic development and equity. Includes data on depressive and anxiety symptoms.
Intrepid II	https://www.intrepidresearch.org/	India, Nigeria and Trinidad	240 people with psychotic disorders, a close relative when possible and 240 matched controls in each location. Need to check age range.	https://www.intrepidresearch.org/contact.html	The study aims to investigate the incidence, presentation, outcome and impact of psychosis across the three sites. They also collect a wide range of other types of data including clinical assessments and biological samples.



Mauritius Child Health Project	https://academic.oup.com/ije/article/39/6/1441/735294	Mauritius	1795 children enrolled at birth from three generations	To explore potential collaborations, contact the PI araine@sas.upenn.edu	The Mauritius Child Health Project is a birth cohort of 1,795 children that focuses on early child health and development and the identification of early risk factors for psychopathology. Spanning across 37 years, the study has enrolled three generations of families for mental health assessment including depression, anxiety, PTSD, and psychosis using standard measures.
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