



Structural Collaborative Research in Military Medicine

Call for proposals 2026

Information document including submission and evaluation guidelines and budget rules

Important dates:

Information day: 26 March 2026 (14h00 – 16h00)

Deadline Full proposals: 20 May 2026 (16h00)

For more information on the programme, please visit [SCRiMM Website](#).

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1.1. CONTEXT

In line with Belgian Defence's aim to reinforce the technological and knowledge base at national level, the Royal Higher Institute for Defence wishes to enhance research collaborations with the different universities and associated university hospitals in the field of military medicine. Therefore, an annual call for projects will be launched.

1.2. ROLE OF THE ROYAL HIGHER INSTITUTE FOR DEFENCE - RHID

As a "smart hub" and "honest broker" for scientific and technological research, the Royal Higher Institute for Defence (RHID) is responsible for the development and implementation of the Ministry of Defence's policy on scientific and technological research. Within this policy, twelve focus areas have been identified, including Advanced Military Health, in which research is actively supported and stimulated.

As a "smart hub", RHID aims to promote the growth of Belgian scientific and technological research in the field of defence and security, as well as to restore and strengthen the links between administrations, universities and companies at this prospect. It wishes to achieve this, among others, by promoting and facilitating the participation of Belgium and the Belgian Ministry of Defence in international, national and regional research programmes. In addition, the results of research are published annually for a wide audience and colloquia are held regularly.

As an "honest broker", RHID manages and facilitates, through the department Scientific and Technological Research of Defence (STRD), the research programme of the Ministry of Defence. Although in the past this programme was primarily reserved for Defence research institutions, collaboration with other partners, including Belgian research institutes and industry, is increasingly becoming the norm.

The Ministry of Defence wants to further develop its capabilities through collaborative research with external partners by launching annual calls for proposals within the frame of its research programme. The current call is the second SCRiMM call, based on two (2) research themes in which applicants can propose Defence-relevant research.

More information on the institute and its activities can be found on the website: <https://www.defence-institute.be/en/accueil-english/>.

2. STRUCTURAL COLLABORATIVE RESEARCH IN MILITARY MEDICINE (SCRiMM)

2.1. OBJECTIVES OF THE PROGRAMME

The general objectives of the programme are the following:

- *Support and strengthen scientific excellence.*
- *Develop and realise a critical research mass on themes considered to be a priority for Belgian Defence in order to:*
 - *contribute to short- and long-term capacity development, in line with the Integrated Capability Development Plan (ICDP) and the Strategic Vision for Defence.*
 - *contribute to the culture of innovation planned within Defence, both in terms of technology and process improvement.*
 - *foster employment for Defence.*
 - *contribute, in accordance with the Defence, Industry and Research Strategy (DIRS), to the development of a competitive and credible national industrial and technological base in the field of security and defence.*
- *Encourage the participation of highly qualified Belgian universities and university hospitals in Defence related research.*
- *Promote systemic, multidisciplinary/interdisciplinary and integrative approaches.*
- *Strengthen transdisciplinary research in order to enable potential users to make better use of the research achievements.*

This is the **second call** in the frame of the SCRiMM programme.

2.2. ELIGIBILITY CRITERIA FOR PROJECT PARTNERS

This call is open to **Belgian** public and private non-profit research institutes (both as funded and non-funded partners in the project).

From the **public research sector**, Belgian universities who have an associated University Hospital are eligible partners.

From the **private non-profit research sector**, the associated University Hospitals must have operational and/or research activities in Belgium. They must have legal personality and their registered office in Belgium.

Foreign partners can participate in the call as non-funded partner only. Foreign partners must be registered in a country of the European Union or in a country of the European Free Trade Association or in a country that is a member of NATO.

2.3. INFORMATION DAY

To inform potential applicants about the context, scope and modalities of this call and to offer them network opportunities, an information day will be held on **Thursday 26th March 2026 (14h00 – 16h00) at the Royal Military Academy.**

Registration prior to the event is required.

More details are announced through the [website of the RHID](#) as well as through [social media](#).

3. CALL INFORMATION

3.1. DOCUMENTATION RELATED TO THIS CALL

3.1.1. SCRiMM WEBSITE

The following documents are available on the [SCRiMM Website](https://www.defence-institute.be/call-for-projects-structural-collaborative-research-in-military-medicine-scrimm/) (https://www.defence-institute.be/call-for-projects-structural-collaborative-research-in-military-medicine-scrimm/):

- Information document, including evaluation guidelines and budget rules: general information on the programme and the call, overview proposal content (the present document)
- Evaluation matrix for full proposals: overview of the evaluation ratings for the full proposals
- FAQ
- Full Proposal structure and GANTT Chart
- Annex II – general conditions applicable to the 2026 contracts

3.2. INDICATIVE CALENDAR OF THE CALL

	Date	At / via
Information session	26 March (14h00 – 16h00)	RMA
Deadline Full proposals	20 May 2026 (16h00)	Mail
Ethical Evaluation	20 May – 5 June 2026	N/A
Panel evaluation, incl. interviews with the applicants	1-3 July 2026	RHID
Selection proposal formulated by the scientific committee of the RHID	4 September 2026	N/A
Final selection of proposals by the board of directors of the RHID and allocation of projects	10 September 2026	N/A
Communication of results to applicants	14 September 2026	Mail
Signature contracts	14 November 2026	Mail

3.3. RESEARCH THEMES AND INDICATIVE BUDGET OF THIS CALL

The present call covers the following research themes, with their indicative budget:

	Indicative budget (M€)
Theme 1 – Advancing Military-Relevant Research on (Mild) Traumatic Brain Injury (mTBI)	1.0
Theme 2 – PTSD Treatment	1.0
TOTAL	2.0

There is no set maximum budget per project. However, applicants should take into consideration the total available budget for each theme. The objective is to develop a project with the most efficient use of public resources.

The number of projects that will be funded per theme depends on the evaluation of the proposals and the requested budget per proposal. Passing the threshold of scientific quality, the best ranked proposal per theme

will be funded. The remaining proposals will be put together in a common ranking list based on their final evaluation results (after the Scientific Experts Committee meetings, see [section 5.1.2](#)).

Budget transfers between the themes are possible.

3.3.1. THEME 1: Advancing Military-Relevant Research on (Mild) Traumatic Brain Injury (mTBI)

Background and Defence Relevance

Mild traumatic brain injury (mTBI) represents one of the most prevalent yet under-recognized health challenges in modern military operations, with blast exposure and blunt head trauma identified as major contributors in recent conflicts. Defence forces face a growing need to accurately detect, monitor, and manage mTBI sustained during training, deployment, or combat-related activities, including repeated low-level blast exposures and combined mechanisms of injury. Blast-related mTBI has been associated with persistent symptoms, cortical thinning, and subtle cognitive and executive dysfunction in service members and veterans, underlining its long-term impact on force readiness and health.

Despite increasing awareness and multiple NATO initiatives, significant capability gaps persist in rapid field assessment, early detection of subclinical injury, objective recovery monitoring, and personalized rehabilitation pathways. Addressing these gaps requires interdisciplinary research that bridges neuroscience, biomedical engineering, rehabilitation medicine, and defence technology, and that explicitly considers the unique operational context and cumulative exposure patterns of military personnel. This call seeks projects that respond to these unmet needs while maintaining a clear trajectory towards operational application.

Scope

This call invites 4-year PhD research proposals that aim to explore innovative, evidence-based, and dual-use solutions across the full continuum of mTBI care — from prevention to recovery. Projects may include, but are not limited to:

Prevention & Risk Reduction: e.g. Biomechanical risk modelling of blast and impact exposure, including cumulative and repeated low-level blast loading. Optimization of personal protective equipment, training design, and workload management to reduce mTBI risk across training and deployment cycles.

Detection & Monitoring: e.g. Development or validation of wearable and field-deployable sensor systems, electrophysiological tools, or eye-tracking solutions to support objective concussion diagnosis and triage. Advanced neuroimaging and digital biomarker approaches tailored to military-relevant mechanisms, including blast-related axonal injury and post-deployment symptom trajectories.

Treatment, Rehabilitation & Return to Duty: e.g. Novel neurorehabilitation and symptom management strategies (e.g. graded activity, technology-assisted rehabilitation, VR/AR-based therapies) aligned with military return-to-activity and return-to-duty guidance. Data-driven, individualized progression criteria and algorithms that incorporate symptom burden, cognitive performance, physical exertion tolerance, and exposure history.

Recovery, Long-Term Outcomes & Readiness: e.g. Longitudinal tracking of neurocognitive, psychological, and functional outcomes following mTBI, including the role of repeated exposures and comorbidities.

Integration of mTBI outcomes into readiness metrics, occupational fitness-for-duty assessments, and resilience or risk-stratification frameworks for Defence personnel.

PhD projects should demonstrate clear innovation while maintaining applicability to defence use cases, enabling prototype development, validation in controlled settings (e.g. simulation labs, clinical cohorts, human performance centres), and a credible pathway for subsequent evaluation within the Defence environment.

Collaboration and Supervision Requirements

- The lead supervisor must have proven academic expertise in the proposed research domain (e.g. neurology, neuropsychology, biomedical engineering, rehabilitation sciences, human performance, or related fields). Several supervisors could be appointed as applicable by the rules and regulations of the academic institutions. Supervisors could be affiliated at different BELGIAN universities.
- Defence will designate a Defence-affiliated co-supervisor acting as a subject-matter expert (SME) in military medicine, human performance or related domains, to ensure military relevance and facilitate bidirectional knowledge transfer.
- The research will primarily be conducted outside military facilities (e.g. university laboratories, civilian hospitals, research institutes), but active and ongoing collaboration with Defence partners is expected, particularly for:
 - Access to representative operational scenarios, training data, or existing cohorts where appropriate and ethically feasible.
 - Iterative user feedback on concepts, prototypes, and protocols to ensure operational usability and acceptability.
- The appointed candidate will be selected by the supervisors and the appointed co-supervisor from Defence. The candidate must be a citizen from a country of the European Union or citizens from a country of the European Free Trade Association or from a country that is a member of NATO.

Expected Outcomes

Projects funded under this theme should advance both scientific understanding and Defence capability in the domain of mTBI. Anticipated outcomes could include:

- Novel diagnostic, monitoring, or decision-support technologies operating at TRL 3–5 or higher with clear potential for further maturation in Defence settings.
- Evidence-based prevention, rehabilitation, and return-to-duty strategies, aligned with or extending existing military clinical practice and activity-progression guidelines.
- Strengthened cross-sector partnerships between academia, civilian healthcare systems, and Defence medical or research units, including potential integration with multinational NATO efforts. Participation to NATO scientific working groups (NATO STO) by representing Belgian Defence will be encouraged.
- Well-defined pathways for subsequent translational studies, implementation research, or integration into Defence policy, doctrine, and practice where appropriate.
- The scientific output will be compiled in a PhD thesis.

Literature

1. Philipps H, et al. *Characteristics and Impact of U.S. Military Blast-Related Mild Traumatic Brain Injury: A Systematic Review*. *Front Neurol*. 2020 Nov 2;11:559318.
2. Robinson-Freeman et al *A decade of mTBI experience: What have we learned? A summary of proceedings from a NATO lecture series on military mTBI*. *Front Neurol* 2020 11: 836.
3. Ravula et al. *An update on repeated blast traumatic brain injury*. *Current Opinion in Biomedical Engineering* 2022 24 100409
4. Elder GA, et al. *-induced mild traumatic brain injury*. *Psychiatr Clin North Am*. 2010 Dec;33(4):757-81.
5. Bryden DW et al. *Blast-Related Traumatic Brain Injury: Current Concepts and Research Considerations*. *J Exp Neurosci*. 2019 Sep 12;13:1179069519872213.
6. Eapen, B. C., et al. *The management and rehabilitation of post-acute mild traumatic brain injury*. *Brain Injury* 2022, 36(5), 693–702.
7. Mac Donald CL, et al. *Detection of blast-related traumatic brain injury in U.S. military personnel*. *N Engl J Med*. 2011 Jun 2;364(22):2091-100.
8. Kamil R et al. *Objective Markers for Diagnosing Concussions: Beyond Blood Biomarkers and the Role of Real-Time Diagnostic Tools*. *J Clin Med*. 2025 Oct 30;14(21):7727.
9. Reid MW et al. *A multisite study of the relationships between blast exposures and symptom reporting in a post-deployment active duty military population with mild traumatic brain injury*. *J Neurotrauma*. 2014 Dec 1;31(23):1899-906.
10. Jacob, D et al. *Towards defining biomarkers to evaluate concussions using virtual reality and a moving platform (BioVRSea)*. *Sci Rep* 2022 12, 8996.

3.3.2. THEME 2 – Post-Traumatic Stress Disorder (PTSD) Treatment

Background and Defence Relevance

Public safety personnel (PSP), including military personnel, police officers, firefighters, paramedics and veterans, are repeatedly exposed to potentially traumatic events such as violence, serious injury, or death in the line of duty. This sustained exposure contributes to a markedly elevated risk of developing posttraumatic stress disorder (PTSD) and related operational stress injuries. Despite the existence of well-validated trauma-focused psychotherapies, PSP often face organizational, cultural, and logistical barriers to accessing or completing standard outpatient treatments. As a result, untreated or chronic trauma related disorders continues to impact operational effectiveness, workforce retention, and overall well-being.

Intensive PTSD treatment models, condensing therapy sessions into a shorter time frame (e.g. 1–3 weeks), have gained traction internationally, particularly within military and veteran care systems. These approaches have shown improved treatment engagement, accelerated symptom reduction, and reduced dropout rates compared to traditional weekly models. However, evidence supporting such models for PSP populations remains sparse.

Importantly, the spectrum of operational and trauma-related mental health difficulties extends well beyond PTSD. Comorbid presentations—such as depression, anxiety, moral injury, or substance use—are frequently observed and have been well documented in the literature. Addressing this broader clinical reality calls for a transdiagnostic perspective, which targets shared psychological mechanisms across disorders rather than focusing narrowly on PTSD alone. Such an approach would represent a meaningful innovation, better aligned with the complexity of psychic distress observed among PSP.

This theme addresses a growing need to evaluate intensive treatment pathways for PSP in Belgium, aligning with both national mental health priorities and Defence-related efforts to support trauma-affected operational personnel. It brings together expertise from clinical psychology, psychiatry, occupational health, implementation science, and public safety organizations to generate actionable evidence for system-level improvement.

Scope

This call invites 4-year PhD research proposals focused on designing, implementing, and evaluating innovative, evidence-based models for intensive treatment adapted to PSP needs. Projects may include, but are not limited to:

Feasibility and Acceptability: Evaluation of intensive outpatient program structures, treatment schedules, and team compositions for PSP. Identification of organizational facilitators and barriers to implementation within the public organizations (particular focus on Defence).

Effectiveness and Outcomes: Controlled or observational studies assessing clinical symptom change, functional recovery, and occupational reintegration following intensive treatment. Examination of relapse prevention strategies and long-term outcomes.

Implementation Science and Adaptation: Use of frameworks to adapt evidence-based treatments to high-exposure occupational settings while maintaining fidelity. Development of relevant Belgian or multilingual treatment pathways aligning with PSP culture and values.

Comparative Effectiveness and Cost-Benefit: Comparison of intensive versus standard outpatient care in terms of symptom reduction, cost-effectiveness, operational readiness, and return-to-work metrics.

Digital and Hybrid Delivery Models: Exploration of technology-augmented approaches (e.g. teletherapy integration, digital monitoring tools, peer support components) to enhance accessibility and continuity of care.

PhD projects should emphasize both scientific rigor and translational potential, producing outcomes that can directly inform policy, clinical practice, and organizational decision-making within the Belgian public safety and Defence healthcare landscape.

Collaboration and Supervision Requirements

- The lead academic supervisor must demonstrate research expertise in clinical psychology, psychiatry, mental health care, or implementation science related to trauma or occupational stress injuries. Supervisors may be affiliated with different Belgian universities, as permitted by institutional regulations.
- A Defence representative will designate a co-supervisor to ensure operational and organizational relevance, promote knowledge transfer, and facilitate stakeholder access if needed.
- The research will primarily occur within civilian research settings (e.g. university clinics, hospitals, mental health centres), but collaboration with operational partners is expected for data collection, program adaptation, and feasibility validation.
- The appointed candidate will be selected by the supervisors and the appointed co-supervisor from Defence. The candidate must be a citizen from a country of the European Union or citizens from a country of the European Free Trade Association or from a country that is a member of NATO.

Expected Outcomes

Projects funded under this theme should strengthen both scientific knowledge and practical capacity to deliver effective care for Defence. Anticipated outcomes could include:

- Validated models of intensive outpatient treatment with established feasibility, acceptability, and preliminary effectiveness in e.g. Belgian PSP populations.
- Implementation and adaptation guidelines to inform best practices for trauma treatment delivery in high-stress occupational settings.
- Enhanced intersectoral collaboration between academia, Defence, emergency services, and public health authorities, including opportunities for participation in multinational or NATO-aligned mental health initiatives.
- Evidence-based recommendations for scaling up intensive programs or integrating them within existing PSP healthcare infrastructures.
- Completion of a PhD dissertation and scientific publications contributing to national and international PTSD research.

Literature

1. Gahnfelt, H., Weineland, S., Carlsson, P. F., & Blomdahl, C. (2025). 8-day intensive treatment programme for PTSD and complex PTSD vs treatment as usual: a clinical trial. *European journal of psychotraumatology*, 16(1), 2553422.
2. Held, P., Klassen, B. J., Boley, R. A., Wiltsey Stirman, S., Smith, D. L., Brennan, M. B., ... & Zalta, A. K. (2020). Feasibility of a 3-week intensive treatment program for service members and veterans with PTSD. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(4), 422.
3. Reij, K. M., de Jongh, A., Swens, E. P., & Voorendonk, E. M. (2025). PTSD Symptoms change in response to a brief intensive trauma-focused treatment programme in non-veterans and veterans with war-related PTSD. *European Journal of Psychotraumatology*, 16(1), 2511571.
4. Rubinstein, D., Abargil, M., Duek, O., & Harpaz-Rotem, I. (2025). RESET post-traumatic stress disorder: clinical protocol integrating reconsolidation, exposure, short-term emotional transformation. *European Journal of Psychotraumatology*, 16(1), 2540141.
5. Bettés, G., Saffaran, P., Walker, W., Bennett, S., Beaudette, K., Reitav, J., & Thirlwell, C. (2022). Examining the efficacy and feasibility of a residential retreat program for first responders and veterans with posttraumatic stress disorder: a pilot study. *Integrative and Complementary Therapies*, 28(5), 212-220.
6. Alexander, D. A., & Klein, S. (2009). First responders after disasters: a review of stress reactions, at-risk, vulnerability, and resilience factors. *Prehospital and disaster medicine*, 24(2), 87-94.
7. Haugen, P. T., Evces, M., & Weiss, D. S. (2012). Treating posttraumatic stress disorder in first responders: A systematic review. *Clinical psychology review*, 32(5), 370-380.
8. Kehle-Forbes, S. M., Ackland, P. E., Spont, M. R., Meis, L. A., Orazem, R. J., Lyon, A., ... & Polusny, M. A. (2022). Divergent experiences of US veterans who did and did not complete trauma-focused therapies for PTSD: A national qualitative study of treatment dropout. *Behaviour Research and Therapy*, 154, 104123.

3.4. PROJECT DURATION

The aim of this call is to finance a PhD for the duration of the project.

The projects will have a duration of **4 years**.

3.5. PROJECT PARTNERSHIP

3.5.1. PARTNERSHIP

For both themes, proposals must be submitted by **at least one** (public or private non-profit) **research institute**. The public research institute should act as project coordinator.

Partnership:

- at least one (public or private non-profit) research institute

The Belgian Defence research institute, the Queen Astrid Military Hospital (QAMH), can be a partner in the network¹.

3.5.2. ROLES AND RESPONSIBILITIES WITHIN THE PROJECT

Project partners jointly share obligations and responsibilities during the implementation of the project. The project should be fairly balanced, even if different partners may have different tasks and subsequently different budgets.

A **coordinator** must be appointed in each network proposal.

For each project, a **Steering Committee** shall be established at the start of the project to act as the governing body (see section 6.3.).

ROLE OF THE COORDINATOR

The coordinator is responsible for the overall project management and coordination. He/she is the contact person for the RHID to communicate with the partnership and must transfer all relevant information to the other project partners. He/she shall:

- Coordinate all activities to be carried out in the framework of the project,
- Coordinate the internal meetings between the network members,
- Coordinate the production of the required project reports intended for Belgian Defence as described in section 6.4.,
- Coordinate the synthesis and translation of the research results, with a view to applications and support for decision-making,
- Coordinate the publication and dissemination of the research results,
- Chair all meetings of the Steering Committee, unless decided otherwise in a meeting of the Steering Committee,

¹ MHQA must inform the RMA of all proposals they are participating in.

- Convene meetings of the Steering Committee and write the reports of these meetings. The coordinator shall give notice in writing of a meeting with the agenda to each member no later than fourteen (14) calendar days in advance,
- Inform the Steering Committee and the RHID of any problems that might hinder the implementation of the project.

SUBCONTRACTORS

The project may require specific or punctual expertise, which can be delivered in the form of **subcontracting**. It is the responsibility of the project team to ensure that the rules and practices of the subcontractor, and in particular the ownership and valorisation of research results, publications and communications, are compatible with the rules governing the call. The project team takes full responsibility for the final result of the subcontracted work.

Subcontractors must be registered in Belgium. Subcontractors that are companies, a(i)sbl and foundations must submit accurate and current information on their beneficial owners to the UBO (Ultimate Beneficial Owner) register of the FPS Finances and deliver an extract of the UBO register to the SCRiMM secretariat. This document will be submitted to the General Intelligence and Security Service which will examine it in accordance with its missions and legal powers as defined in the law of November 30, 1998, governing intelligence and security services. The advice rendered by the security service may be based on a classified note.

In case the subcontractor needs access to classified information, the subcontractor must also obtain a security clearance (see section 7.3).

3.6. RESEARCH ETHICS

The "Code of Ethics for Scientific Research in Belgium" is a joint initiative of the Académie Royale des Sciences, des Lettres et des Beaux-Arts de Belgique, the Académie Royale de Médecine de Belgique, the Koninklijke Vlaamse Academie van België voor Wetenschappen en Kunsten and the Koninklijke Academie voor Geneeskunde van België, with the support of BELSPO.

All projects must take this code of ethics into account in their research. If applicable, it is the responsibility of the applicants to consult the relevant Ethical Board for their organisation before submitting a proposal.

The code of ethics for scientific research in Belgium is available here: http://www.belspo.be/belspo/organisation/publ/pub_ostc/Eth_code/ethcode_en.pdf.

It is the responsibility of the applicants to consult the relevant Ethical Board for their organisation before submitting a proposal.

Applicants will be required to complete an "ethics self-assessment" when preparing the Full proposal. The Ethical Advisory Board of the RHID will assess this information and can advise the partnership how to deal with the ethical aspects of its proposal.

3.7. BUDGET RULES

Financing by Defence: This call is subject to the European legislation on State Funding (Art 107 (1) TFEU and the General Block Exemption Regulation in particular. Therefore, financing a public research institute or a private non-profit research centre is set to a maximum of 100% of the eligible costs.

	Public Research Institute and Private non-profit research centre
Partner budget FINANCED BY DEFENCE	100% eligible costs

The total project budget must be detailed in the tables of the budget file (100% cost) of the full proposal. Additional columns are foreseen to indicate the partner contribution to the total project cost (depending on the partner type) and the subsequent RHID funding contribution. (section 2.6 of the full proposal template: Budget assessment).

The project budget is reserved exclusively for the project activities. The different categories of expenditure financed by Defence are:

Staff: Pre-tax wages associated with increases in the cost of living, employers' social security and statutory insurance contributions, as well as any other compensation or allowance due by law and secondary to the salary itself. Defence does not allow cumulative wages for staff. Staff members bound contractually to a public institution - full time or part time - cannot apply for him/herself for Defence staff budget for that part.

The RHID prefers staff to be hired under a labour contract.

Costs related to non-employee staff, i.e. staff working in a management company, as freelancer or interim staff on behalf of the partner are also accepted.

Tax-free doctoral or post-doctoral scholarships are not accepted.

For persons to be hired for the project (so not identified by name in the proposal), the staff costs are limited to a maximum amount of:

- 5 700 €/month FTE for a technician/bachelor (regardless of years of experience)
- 8 000€/month FTE for a Master (regardless of years of experience)
- 8 700 €/month FTE for a Master in engineering (regardless of years of experience)
- 10 500€/month FTE for a PhD (regardless of years of experience)

The funding is limited to the time and period in which the (employee and non-employee) staff participates in the project.

General operating costs: this includes daily/usual supplies and products for the laboratory, workshop and office, documentation, consignments, use of daily software and IT facilities, organisation of internal meetings, etc. The general operating budget may not exceed 15% of the overall project staff budget for the project coordinator and 10% for the other project partners. The amounts claimed must correspond to actual expenditures strictly related to the project, even if supporting documents are not requested. Although no detailed justification is required for

these costs, the administration of the concerned partner must keep these invoices in its accounts in the event of an audit.

Specific operating costs: this includes a list of operating costs specific to the execution of the project tasks, such as costs for project analyses, testing, maintenance and repair of equipment purchased by the project, use of specific IT facilities and software, costs for surveys, open data publications, organisation of workshops and events, etc. These costs need to be clearly described in the proposal and each of them shall be justified by invoices during the project.

Overheads: Institutions' general overheads that cover, in one lump sum, administration, telephone, postal, maintenance, heating, lighting, electricity, rent, machine depreciation, and insurance costs. The total amount of this item is set as a fix amount of 10% of the total staff and operating costs.

Equipment: List of investment goods specific to the implementation of the project and to be purchased on the project budget. It concerns the purchase and installation of scientific and technical equipment and instruments, including computer equipment, to be entered in the inventory or assets of the institute/company. Equipment needs to be clearly described in the proposal and shall be justified by invoices.

Subcontracting: Expenses incurred by a third party to carry out project tasks or provide services that require special scientific or technical competences outside the partner's normal area of activity. The amount may not exceed 25% of the total budget allocated to the partner concerned. If the subcontractor is not yet known then only the nature, the planned duration and the estimated amount needs to be indicated in the proposal.

	STAFF COSTS (monthly costs)	GENERAL OPERATION COSTS	SPECIFIC OPERATION COSTS	OVERHEADS	EQUIPMENT	SUBCONTRACTING
PROJECT COORDINATOR	Technician: 5 700€/month	15% of Staff costs (Automatically generated)	-	10% of [Staff costs + Operation costs] (Automatically generated)	-	Max. 25% of the total budget of this partner
	Master: 8 000€/month					
	Master (engineering): 8 700€/month					
	PhD: 10 500€/month					
OTHER PROJECT PARTNERS	Technician: 5 700€/month	10% of Staff costs (Automatically generated)	-	10% of [Staff costs + Operation costs] (Automatically generated)	-	Max. 25% of the total budget of this partner
	Master: 8 000€/month					
	Master (engineering): 8 700€/month					
	PhD: 10 500€/month					

3.8. GENDER

The RHID strongly encourages the applicants to take into account the equality between women and men and to ensure gender mainstreaming in the implementation of the project. The project should include this both in the choice of the researchers and, where relevant, by integrating the gender dimension into their research.

4. SUBMISSION PROCEDURE

The submission of projects will be done by mail to SCRiMM@mil.be.

FULL PROPOSAL

Applicants must submit the full proposal via the SCRiMM mail address.

Changes in the project partnership (changes in participating institute(s)/company(ies), including the coordination role) can only be accepted after the explicit approval of RHID.

The **full proposal** must be submitted at the latest on **20 May 2026 (16h00)**.
If the full proposal does not comply with the submission rules or has not been submitted in time, it will not be taken into account for evaluation.

Content of the full proposal:

Within the full proposal form:

- The title, acronym and summary of the project.
- The name and contact details of the project partner(s).
- The proposal description:
 - Scope, scientific rationale and objectives.
 - Methodology and expected outcomes (coherence between research objectives and methodology), including design, intervention components, evaluation metrics, and population characteristics.
 - Work plan: work packages, project risk assessment, budget assessment.
 - Relevance and potential impact for Defence, including the data management plan and ethics self-assessment.
 - Defence/Public Safety relevance and translational pathway, describing the anticipated impact on operational readiness and health system improvement.
 - Quality of the partners/partnership of the project, incl. supervisory expertise of the coordinator
 - Collaboration and implementation plan, and potential for national or multi-sectoral integration.

As a separate document:

- The GANTT chart (mandatory)
- Cash or in-kind commitment letter (not mandatory)

5. EVALUATION PROCEDURE AND CRITERIA

5.1. EVALUATION PROCEDURE

5.1.1. EVALUATION OF FULL PROPOSALS

Only full proposals that are complete and submitted in time will be taken into account.

The evaluation of the full proposals runs in three steps:

- Step 1 - Scientific Experts Committee (SEC) evaluation, including interviews with the applicants
- Step 2 - Selection proposal formulated by the Scientific Committee of the RHID
- Step 3 - Final selection of proposals by the Board of Directors of the RHID

STEP 1 – SCIENTIFIC EXPERTS COMMITTEE EVALUATION, INCLUDING INTERVIEWS WITH THE APPLICANTS

Scientific Experts Committee (SEC) evaluation

For each theme, the Scientific Expert Committee of Defence will be composed of members that are relevant for the theme.

Each SEC will have access to the proposals.

Each SEC will organise interviews with the applicants of the full proposals according to the following schedule:

- Introduction (5 minutes)
- Presentation by the applicants, including an introduction of the proposal (15 minutes).
- Questions and answers (Q&A) (25 minutes).
- Deliberation (10 minutes).

The applicants will assist in the meeting for the presentation and Q&A session of their proposal only.

Each SEC will evaluate the full proposals according to specific criteria:

- Scientific excellence and innovation potential.
- Impact/relevance for defence.
- Translational potential.
- Budget alignment.
- Complementarities and/or overlaps between proposals.
- The coherence of the proposals with the strategic objectives (scope) of the themes.
- The cohesion of the partnership, and supervisory expertise.
- General appreciation of the presentation by the applicants.

The SEC resulting Funding Scenario(s) will classify all proposals in:

- Recommended for funding.
- Not recommended for funding.

The SEC will list the proposals that are recommended for funding by order of their final evaluation result.

STEP 2 - SELECTION PROPOSAL FORMULATED BY THE SCIENTIFIC COMMITTEE OF THE RHID

After the Scientific Experts Committee meetings, the best ranked proposal per theme will be proposed for funding to the Scientific Committee of the RHID. The remaining proposals will be put together in a common ranking list based on their final evaluation results.

The Scientific Committee of the RHID is composed of senior scientists and research directors and guarantees the quality level of Defence research. It proposes evaluation methods and research objectives, participates in the drafting of the research programme and evaluates its implementation. The composition of the Scientific Committee is currently defined in the Ministerial Decree of 11 January 2022.

The Scientific Committee will receive the following documents:

- SEC Funding Scenarios(s) per theme, including its motivation
- Common ranking list of all proposals across all themes
- Full proposal of each proposal (on demand)

Based on these documents, the Scientific Committee will perform a strategic selection of the proposals based on the criteria and rules explained hereunder, delivering the Scientific Committee Funding Scenario.

The following aspects will be taken into account when formulating the Scientific Committee Funding Scenario to the governance board of the RHID:

- Alignment of the proposal in relation to Defence priorities.
- Added value of the proposal in relation to Defence priorities.

The Scientific Committee will formulate the Scientific Committee Funding Scenario taking into account the following rules:

- In NO case will proposals deemed 'out of scope' be considered.
- In NO case will proposals deemed 'not recommended for funding' be considered.

STEP 3 - FINAL SELECTION OF PROPOSALS BY THE BOARD OF DIRECTORS OF THE RHID

The final selection decision of proposals to be funded is made by the Board of Directors of the RHID on the basis of the Scientific Committee Funding Scenario.

5.2. EVALUATION CRITERIA

The evaluation criteria that are used in each step of the evaluation procedure are described in the evaluation matrix (full proposal).

6. CONTRACTUAL OBLIGATIONS FOR SELECTED PROJECTS

6.1. PROJECT STARTING AND END DATE

The projects selected within the context of the current call will **start at latest in March 2027**.

The project contracts will have a duration of 4 years (plus 3 months to allow meeting all administrative requirements before the effective start-up of the project).

6.2. CONTRACTS

For the selected proposals, a contract is concluded between Belgian Defence and the funded partners.

The contract is composed of three parts that make up the research contract:

- Basic contract
- Annex I: Technical specifications
- Annex II: General conditions applicable to the 2026 contracts.

The basic contract designates the contracting parties (partners and Defence) and contains the general obligations applicable to the project, including the project and contract duration and budget. **The basic contract is signed by the heads of the partners involved (directors, rectors).**

The content of Annex I “Technical specifications” is specifically related to the operational implementation of the project. It includes the detailed work description and schedule, details on funding by expenditure category etc. **Annex I “Technical specifications” is signed by the programme manager and the promotors concerned.**

Annex II “General conditions applicable to the contract” contains all general provisions applicable to all SCRiMM contracts. Annex II is the same for all SCRiMM projects of a specific call. It is available on the SCRiMM website and **will not be signed**.

Belgian Defence/RHID grants the selected projects the funds required for their implementation. The RHID shall reimburse at most, and up to the amount specified in the granted budget, the actual costs proven by the partners providing these costs are directly related to the implementation of the project.

In case a “Cash or in-kind commitment letter” is associated to the selected project, this commitment and contribution will be formalised by means of a bilateral contract between the external partner(s) and the project partner(s). The bilateral contract shall be in conformity with all the provisions contained in the SCRiMM project contract. The provisions of the bilateral contract shall always be subordinate to the provisions of the SCRiMM contract. A copy of the bilateral contract must be handed over to the Royal Higher Institute for Defence (RHID, scrimm@mil.be).

The partnership is encouraged to conclude a Consortium Agreement to define internal regulations regarding intellectual property (access to foreground and background, valorisation rights and modalities, and any other theme deemed necessary). A copy of the signed Consortium Agreement must be handed over to the Royal Higher Institute for Defence (RHID, scrimm@mil.be).

6.3. COMPOSITION AND ROLE OF THE STEERING COMMITTEE

Each project will be accompanied by a **Steering Committee**, to be set up at the start of the project. The Steering Committee is composed of the project managers of the partners, the programme manager, the research manager of Defence and the intended end user of Belgian Defence.

The Steering Committee acts as a governance body, to ensure that the project remains in line with the research objectives and adapt the project plan accordingly whenever necessary. It ensures that the project reporting is done in accordance with section 6.4.

The Steering Committee should meet at least once a year to discuss the project's progress. The organisation of such meeting must be included in the project work plan and the project budget. Ideally, this(these) meeting(s) should take place in the same period as the delivery of the progress report(s).

The following actions and decisions will be taken by the Steering Committee:

- Examine information collected by the coordinator on the progress of the Project, to assess the compliance of the Project with the Proposal and, if necessary, propose modification of the Proposal.
- Determine the policy for press releases, joint publications and other public disclosures regarding the Project.
- Keep a register of Foreground generated within the Project and patents filed thereon, which is concluded at the end of the Project.
- Examine and approve proposed changes to the work programme. In case of actions with a budgetary impact, the Steering Committee will make proposals to the funding authority but cannot decide without the approval of this funding authority.
- If necessary, propose the termination of all or part of the Project.

6.4. REPORTS

The contract foresees the following reports to be submitted to the RHID:

- Initial report: to be submitted within three months after the start of the project.
- Progress report(s): to be submitted according to the specifications in the contract (annex 1, technical specifications).
- Final report: to be submitted three months after the end of the project.
- If deemed useful by the RHID, an additional report may be requested for an external evaluation of the project.
- The RHID can ask for a report or other input at any time during the course of the project in order to provide scientific support to valorisation and service actions related to the programme.

These reports are to be included in the project work plan and the cost of preparing them (including possible translations) must be covered by the project budget.

They should contain all necessary information to assess the progress of the project in relation to the work packages, deliverables and budget. Problems must be identified, including possible solutions.

7. DATA, RESULTS, INTELLECTUAL OWNERSHIP AND SECURITY REQUIREMENTS

7.1. GENERAL CONDITIONS

The Data Management Plan (DMP), to be submitted as part of the proposal, describes how the project partners deal with the collected data before, during and after the project. It is a key element of good data management.

For all aspects regarding the use of data, intellectual ownership and valorisation of the project results and the confidentiality or security requirements, the conditions of the General Conditions (Annex II of the contract and the articles 12, 13 and 14 in particular) apply.

Ownership of existing information and data (the individual background) remains with the original owner.

As a principle, the Foreground - the results (including information) produced by the project - shall be the property of the partner carrying out the work generating this foreground.

The principles for the use of joint foreground will have to be determined by the project partners, with respect for these General Conditions. These principles can be included in a Consortium Agreement to be concluded between the partners.

7.2. SPECIFIC CONDITIONS

For social and humanities data, a copy of the data and/or metadata can be transferred to SODHA (Social Sciences and Digital Humanities Archive) (<https://www.sodha.be>) after explicit approval of RHID.

7.3. CLASSIFIED INFORMATION/SECURITY RELATED ACTIVITIES

Certain activities undertaken in the frame of the projects may use or generate classified information. This paragraph solely concerns protective measures to be taken to preserve the confidentiality of security-sensitive information regarding these research projects.

A classification is given to documents to prevent their improper use which could damage, among other things, the fulfilment of the tasks of Defence, the external security and international relations of the State and the scientific and economic potential of the country (for the complete list see "Wet van 11 Dec 1998 Art 3/Loi du 11 Déc 1998 Art 3").

According to the same law this identification should be based on the following classification levels:

- The "**TRES SECRET/ZEER GEHEIM**" level is assigned to a piece if its improper use could cause **EXTREMELY SERIOUS** damage to the main Belgian interests listed in the law. Topics that qualify under this category cannot be part of the project.
- The "**SECRET/GEHEIM**" level is assigned to a document if its improper use could cause **SERIOUSLY** damage to the interests listed in the law.

- The "**CONFIDENTIEL/VERTROUWELIJK**" level is assigned to a document if its improper use could harm any of the interests listed in the law.

Documents of which the originator wants to limit the distribution to persons who are authorized to use them on a need-to-know basis, without however attaching legal consequences to this limitation, are marked with the indication "**DIFFUSION RESTREINTE/BEPERKTE VERSPREIDING**".

These classification levels should be applied taking into account both the need to protect information and the need to avoid unnecessary obstruction to the use of research information and results.

Applicants should identify in the Full-Proposal the classification needs for the work packages of the project that involve threat and /or vulnerability assessments and the information on specifications or capabilities of the tool(s) used.

- threat assessments (i.e. estimation of the likelihood of a malicious act against an asset, with particular reference to factors such as intention, capacity and potential impact)
- vulnerability assessments (i.e. description of gaps or weaknesses which can be exploited during malicious acts, and often contain suggestions to eliminate or diminish these weaknesses)
- specifications (i.e. exact guidelines on the design, composition, manufacture, maintenance or operation of threat substances or countermeasure substances, technologies and procedures)
- capability assessments (i.e. description of the ability of an asset, system, network, service or authority to fulfil its intended role — and in particular the capacity of units, installations, systems, technologies, substances and personnel that have security-related functions to carry these out successfully)

Based on the assessment of the provided input a security screening by Belgian Defence might be imposed in the contract on ALL partners of the selected project(s). In that case, these beneficiaries should obtain a security clearance before starting work on classified parts of the project.

The applicable security framework for the action must be in place at the latest before the signature of the contract and will be considered as an annex to the contract.

More information can be found on the website of the National Security Authority (Nationale Veiligheidsoverheid – Autorité Nationale de Sécurité) <https://www.nvoans.be/>.

This security analysis will not be part of the evaluation process but is essential to be able to start the project.

Persons that are involved in a project must be nationals of a country of the European Union or nationals of a country of the European Free Trade Association or nationals of a country that is a member of NATO.

Persons involved in a project may be subject to a verification. Only after a positive verification, a person can be recruited to the project.

8. COMPLAINTS

RHID places great importance on the quality of their service and on improving the way they operate. A complaint about the administrative handling of this call or the content of the call and the contracts will be handled by RHID.

A special form to handle complaints has been created.

The complaint form is available at the SCRiMM website ([SCRiMM Website](#)).

Complaints submitted anonymously or which are offensive or not related to our organisation will not be processed.

A complaint is handled as follows:

- Once your complaint has been filed, a notification of receipt will be sent.
- The complaint will be forwarded to the relevant departments and individuals and will be processed within one month.
- An answer will be sent by e-mail or letter.
- The complaint will be treated with strict confidentiality.

9. CONTACTS

Further information can be obtained by contacting the **secretariat**: SCRiMM@mil.be.