The following general principles should be considered when applying to World Rugby for research funding in the areas of player welfare and safety:

Research must:
- Result in an outcome that directs or informs decision making to improve Player Welfare;
- Be applicable to the global Rugby community and not normally focused on local issues; and
- Be either novel or add to previous research.

Funding
- Funding may be for multiple years but generally will be restricted to three.
- Performance indicators and significant milestones will be jointly agreed upon and continued funding will be linked to the achievement of these indicators and milestones.
- Funding does not cover the cost of office space or secretarial support. Administrative charges by institutions will not be funded.
- Graduate student, technician and research assistant salaries may be funded provided they are adequately justified.

Approval
- Ethics review by an appropriate ethics board is required, as are consent forms of participation for individuals within a study. Funding applications do not require pre-existing ethic approval, however formalizing contracts will require ethic approval. In instances where ethic approval is not deemed necessary, a full justification of why must be provided.
- Applications must be made in English (the international scientific language) and budget items quoted in pounds’ sterling.

The following projects will not be considered for funding unless initiated by World Rugby:
- Basic, laboratory research with minimal likelihood of operational outcomes;
- Research with no direct applicability to rugby;
- Studies relying on in-match player monitoring device data (e.g. GPS, LPS, optical monitoring) unless previously validated;
- Equipment development, and
- Studies that involve animal testing.

The following topics have been identified as priorities for research by the World Rugby Medicine, Science, and Research Group:

- Concussion
  - Effectiveness of policies and materials for different stakeholders
  - Long term neurodegenerative and mental outcomes in retired players
  - Evaluation of current and future potential diagnostic modalities, with particular reference to Recognise & Remove, Head Injury Assessment (HIA), and/or Graduated Return to Play (GRTP) protocols.
  - Evaluation of the head impact forces during match play and training
- Injuries
  - General prevention strategies
  - Long term health outcomes
  - Injury surveillance studies in the community game
  - Risk factors for injury
  - Mechanism of injury for high burden injury types (community and professional)
  - Evolution of game behaviour and activities, with implications for Player Welfare implications
- Anti-doping
  - Anti-doping knowledge and attitudes, and beliefs around doping (players and support personnel)
  - Prevalence and risks of doping in school, professional or community rugby
  - Prevalence and risks of supplementation use in school, professional or community rugby
  - Links between body image and doping in school, professional or community rugby
  - Risk and protective factors for doping
- Playing Surfaces
  - Injury surveillance on synthetic turf versus natural turf surface
  - Use of synthetic turf surfaces and their effects on participation.

By submitting a proposal to World Rugby for funding, applicants agree to the terms and conditions set out at World Rugby Funding Terms and Conditions.