

Request for Proposals for Implementation Research in Health Campaign Effectiveness

Questions and Answers

Feb. 16th, 2021 Update

The HCE program was pleased to receive many Expressions of Interest in response to our recent Request for Proposals (RFP) for implementation research, and has additional guidance for applicants preparing proposals. This funding opportunity is for a study on the delivery of health interventions via health campaigns. The study should focus on either the integration of 2+ health campaigns or transition of a health campaign to the primary health care system.

To ensure that your proposal is eligible for funding under this RFP, an applicant should ask consider:

1. Does the proposal pertain to health intervention(s) delivered via a campaign? (see definition below)
2. Does the proposal pertain to:
 - the integration of 2 or more health campaigns? OR,
 - the integration of two or more interventions delivered via a campaign? (Consider both full and partial integration; see definitions below). OR,
 - the transition of a health campaign to the primary health care system?
3. Does the proposal address one or more of the health areas of interest, which are immunizations including polio, malaria, neglected tropical diseases and vitamin A supplementation?
4. Does the proposal have clearly articulated primary and secondary research questions? Do these questions address the priority research questions stated in the RFP?

A 'yes' answer to all of the questions above would lead to a higher likelihood of funding. A 'no' answer to any of the questions above would suggest the proposal is unlikely to be funded.

Definitions

Health campaigns are time-bound, intermittent activities deployed to address specific epidemiologic challenges, expediently fill delivery gaps, or provide surge coverage for health interventions.

Full integration involves coordinating most or all campaign components (e.g., microplanning, registration, logistics, implementation, evaluation) to allow simultaneous or co-delivery of two or more health interventions at the point of service delivery.

Partial integration involves collaboration or sharing of specific campaign components between vertical health programs to improve efficiency and effectiveness of multiple campaigns, but *without* co-delivery of interventions at the same service delivery points.

Transition of campaigns to primary health care system

Transition to or integration of campaign interventions with the PHC system refers to the eventual assimilation of delivery of vertical health interventions into primary health care services with integrated governance, financing, planning, service delivery, and monitoring and evaluation mechanisms.

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**Feb. 12th, 2021**

The following queries arose with interested potential applicants at a Feb. 4th webinar. The questions and answers have been organized according to the RFP structure.

**PLEASE NOTE**--While not required, it is strongly recommended that you submit an Expression of Interest form. Once your form has been submitted, you will see a screen confirming that your responses have been saved.

### **PURPOSE AND OVERVIEW**

**1) Q. If one health/PHC intervention/campaign only shares some data, which helps planning/delivery of another health campaign, would that be referred to as 'integration', allowed to be assessed under this call?**

A. Yes, this falls into the category of partial integration (see definition on page 1 of the RFP).

**2) Q: Is the focus of the RFP on a component or the full campaign?**

A. The study can focus on either full integration (co-delivery) or partial integration (collaboration in specific campaign components).

**3) Q. Can the study be about campaigns related to non-communicable diseases?**

A. The proposed research project must address at least one of the following health campaign domains: neglected tropical diseases (NTDs), malaria, polio, other vaccine preventable diseases, or vitamin A supplementation. Additional health domains to be co-delivered or partially integrated can be specified in the proposal (this can include non-transmissible diseases).

**4) Q. For a health campaign that is already being delivered in an integrated manner, could there be a third intervention integrated partially?**

A. The applicant should describe the integrated campaign that is happening and the third intervention as something that is new or being added/integrated which needs to be studied. The research questions can be focused on the new integration and how it relates to addressing the country's health needs.

**5) Q. Is COVID-19 vaccine campaign considered as a vaccine-preventable disease (VPD) domain?**

A. If the COVID-19 vaccination campaign is being integrated (partially or fully) with an existing (VPD or other) campaign, we will consider that for IR if it is a country priority and aligned with a priority research question in the RFP.

**6) Q. Are all NTDs included in the focus on NTDs?**

- A. Yes. All NTDs that deliver interventions in a campaign mode are included and no specific NTD is excluded. The interventions must be delivered by campaigns (see definition on RFP page 1).

**7) Q: Is there any specification on the size of the population where campaign integration needs to be demonstrated?**

- A. There is no stipulation for the population size of the geographic area. The rationale for the integrated campaign that is being explored or planned should be described, including the epidemiological situation and population needs.

**8) Q. Can the study be retrospective or is it only prospective? [Related question: Q: We have identified an integrated campaign in a state that will take place soon. So it would be a retrospective study, is this ok?]**

- A. Health campaigns of focus for the proposed IR project should be planned and/or implemented during 2021 and early (first quarter of) 2022.

**DELIVERABLES**

**9) Q: Who should attend Collaborative Learning sessions?**

- A. A minimum of one representative from the study team should attend and additional members are welcome; the number of participants can vary based on the topic and needs of the awardees.

**ELIGIBILITY**

**10) Q: What countries are eligible?**

- A. Low and middle-income countries.

**11) Q: Can a Ministry of Health apply?**

- A. The organizations or institutions eligible to apply include universities and academic institutions, public health institutes, research organizations and non-governmental organizations that conduct IR. Ministries of Health are also eligible to apply as long as they can conduct implementation research. The applicant institutions should be based (or have an office or established presence) in low or middle-income countries. The applicant institutions will need to work in collaboration with Ministry of Health departments or other government agencies, as appropriate for their IR study. There may be various partners in the collaboration with clear roles.

**12) Q. Can private sectors organizations apply?**

- A. Yes, private sector organizations are eligible as long as they have a strong relationship with the government overseeing campaigns, and have the necessary research experience.

**13) Q. If an implementing partner works with Ministry of Health (MoH) on an integrated campaign, can they propose a joint research project with the relevant MoH department(s) (eg: MoH-EPI, the**

### **Research Division at MOH, etc)?**

A. Yes. The applicant can describe the collaboration and roles in the proposal.

### **14) Q. Can an academic institution collaborate with a governmental agency to carry out a project?**

A. Absolutely, yes.

### **15) Q. Can two institutions apply together?**

A. Yes, we would like each applicant organization to have a collaboration with government department(s) and other partners, as necessary; however, please designate one lead applicant organization. If selected, the Task Force for Global Health will contract with the lead organization.

### **16) Q. Does it matter what is the funding source for the campaigns on whether there can be an implementation research study in collaboration with the campaign?**

A. There is no exclusion based on the funding source of the campaign.

### **17) Q. Will the HCE Program award more than two projects in one country?**

A. We will make up to 10 awards. We would like the projects to be in a range of countries and regions. However, it is possible that two projects may be in the same country if they are addressing different questions or have a different purpose or study objectives. Letters of support would be required from the MOH for both studies.

## **BUDGET**

### **18) Q: Is a budget narrative required?**

A. In the budget template in Excel, Budget Justification text for each line item must be filled out (see the second tab, column H). The text should indicate the activities that the line item is linked to and provide sufficient justification for the associated budget cost (typically one to three sentences for each line item). A separate budget narrative is not required.

### **19) Q: Is the funding limited to \$150,000 (USD) for a period of 16 months?**

A. Yes, the maximum award will be \$150,000 (USD) for a period of sixteen (16) months. Applicants should request a smaller amount if that is what is needed.

### **20) Q. Reading through the RFP, it states that the cost of implementation (or payment of health workers) would not be funded by this grant. However, we would like to ask that if the design of the study requires that we add an additional resource person (CHW) to the campaign distribution team beyond the regular team members funded by the government to test a different model of delivery, would this be something the grant can cover?**

- A. The costs related to campaign intervention service delivery is not funded by this RFP for IR studies on campaign integration. If the CHW is being hired to help gather data as part of the IR project team, that is allowable and reasonable to include in the budget.

**21) Q. What do indirect costs include?**

- A. Indirect costs are subject to the caps established by our donor (15% of the total of all direct costs in the budget). Rent, utilities, etc. are all considered indirect costs and should not be listed as separate costs. Unallowable indirect costs include: more than one indirect cost or indirect costs calculated based on contribution regardless of if there are multiple implementing entities involved in the project.

**TERMS OF AGREEMENT/CONTRACT**

**22) Q: Is the funding mechanism a contract or a grant/cooperative agreement?** The funding mechanism is a contract.

**23) Q: Is it ok to share this Request for Proposals with partners?**

- A. Yes, please share this Request for Proposals with teams in low and middle-income countries working with the government on integrated campaigns. Applicants will have to meet the eligibility criteria. Due date for submitting the proposal is March 1st at 9 am EST (GMT-5).

**24) Q. Could we have a copy of the contracts prior to the submission for internal review?**

- A. We may be able to provide a copy during the review process but not prior to submission. With direct questions about contract terms or specifics, please email us at [HCEproposals@taskforce.org](mailto:HCEproposals@taskforce.org)].

**SUBMISSION INSTRUCTIONS (RFP AND EOI)**

**25) Q. What are the requirements for the Expression of Interest? Are specific signatures required?**

- A. The Expression of Interest (EOI) should be submitted via the online form by the Project Lead, or that person's designate by Feb. 12th (highly recommended).

**26) Q. Will there be feedback on the expression of interest (EOI) after it is submitted?**

- A. The EOI is being used to ensure candidates are eligible and to help the Program Office ensure an appropriate review committee is in place before full proposals are received. Requests for feedback may be written in the Additional Information section, and will be considered on a case by case basis. The EOI is due on Feb. 12th.

**27) Q: Can proposals be submitted in languages other than English?**

- A. Initial proposal submissions (via our English web form link) are acceptable in French and Spanish (please indicate in the Expression of Interest). Supporting documents can be submitted in both languages. If an applicant's study is selected for funding, we will require a final English version of

the proposal. Contracts will be drafted and finalized in English only. The project applicant is responsible for providing English versions. Translation costs may be included in project budgets if required (note maximum project budget of USD \$150,000).

**28) Q. When does an applicant supply a letter of support from the government agency partner?**

- A. Letters of support from the Ministry of Health or other national agencies and implementing partners may be included at the time of proposal submission, if possible, and if selected for funding, **must** be received prior to the time of signature of the contract.

**29) Q. Can a single organization submit more than one application to this funding opportunity?**

- A. Yes, an applicant organization can submit more than 1 project application. Each project with a complete submission (submitted by the due date) will be reviewed on its own merit. However, we recommend that an organization only put forward and submit its best work.

**30) Q. Is there a Word limit or page limit for the proposal?**

- A. We would like answers to be complete (covering all the requested elements), yet succinct. There is no set limit except for the abstract, which is limited to 400 words or less. Responses must be entered into the web form.

**AWARD DURATION, TIMELINE, KEY DATES**

**31) Q. We anticipate disruptions in conduct of health activities this year due to phased roll out of vaccination against COVID-19 and we intend to include mitigation strategy for these anticipated disruptions that might include planned dates and nature of campaigns and even more. We want to know if there are hard timelines or milestones that we need to consider in the proposal. [Related question: Can an application be made with tentative (uncertain) campaign dates? In most cases campaign timelines change due to unforeseen circumstances.]**

- A. The applicant should describe, with the latest knowledge available on the date of submission, the dates of the planned campaigns, and also describe the possibility for delay or amount of uncertainty. The campaign(s) must be scheduled to take place in 2021 or early 2022 (first quarter). The applicant should take note of the Key Dates related to the RFP and award listed on pages 9-10 of the RFP.

**32) Q. If an organization has a current grant from HCE addressing a research question on integration of health campaigns, can the same organization apply for a research question addressing other components of integration of health campaigns, or leveraging the work done on the previous grant?**

- A. Yes, a current awardee may apply to the RFP for IR and is not excluded. The new proposal idea would need to be justified and align with country priorities.