



FIND/Unitaid Advocacy RFP: Applicant Webinar

19 January 2022

#ACTogether

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Agenda



Introduction: context for RFP development

Overview of RFP

- Outline of scope and deliverables
- Applicant profile and exclusion criteria
- Application process and timelines

Panel Q&A

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Introduction: context for RFP development



Overview of RFP

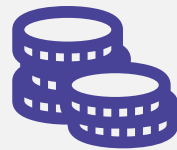
- **Outline of scope and deliverables**
- **Applicant profile and exclusion criteria**
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Panel Q&A

Developing and deploying advocacy strategies to promote **COVID-19** diagnostic testing and linkage to care and treatment in **LMICs**



FIND and Unitaid, as co-convenors of the Dx and Tx pillars, are issuing the RFP jointly with a goal to **create an enabling environment for increased access to and scaled-up use of COVID-19 testing and linkage to treatment** in target regions.



Total envelope: ~ **US\$ 2 million** with an average award of **US\$50,000 to US\$100,000**



RFP issued and applications accepted in **English, French, Spanish and Portuguese**



Closing date: **February 2, 2022**

Link to RFP: <https://www.finddx.org/calls-for-partners/>

Overview of scope and deliverables

Scope

Restricted to **national or regional health awareness raising and advocacy**

Consider **advocacy approaches that will increase testing rates** in line with UNGA testing targets (1 test/1000/day), **and adequate linkage to treatment**

Activities should be centred on developing **advocacy strategies, literacy and messaging and media content for use in local contexts**, as well as wider dissemination and amplification

Deliverables

- I. A **multi-pronged advocacy strategy for increased testing and adequate linkage with treatment** based on information gathered about local context, including challenges, opportunities, and target audiences.
- II. **Tailored (and “pressure-tested”) messages on testing and diagnostics, as well as on therapeutics, for key target audiences**, including media, key opinion leaders, policy makers, and healthcare workers, and public.
- III. **Advocacy and educational materials, translated into local language and tailored to local contexts for both high-level advocacy and community outreach**. To this end ACT-A partners in the Dx and Tx Pillars would provide relevant information as it becomes available to complement other sources.
- IV. **Dissemination and amplification of advocacy and educational materials via multiple channels appropriate for local/regional settings and target audiences**

Applicant profile and exclusion criteria

Inclusive approach: Proposals welcome from a wide range of country-level organizations in LMICs including, but not limited to, health sector implementers, marketing agencies, advocacy organizations, not-for-profits, community-led and civil society organizations (CCSO), and faith-based organizations.

Self-check form

Organization name	
Country of proposed activities	
Project timeline	
Total award amount requested	

Eligibility criteria (please check the Yes or No box below)

	YES	NO
Does your organization have experience setting and implementing advocacy and awareness raising projects in healthcare in the country where you are based? (no global or multi-country projects will be funded)		
Do you have a proposed advocacy approach(es) to increase testing rate in line with UNGA testing targets (testing rates of one per 1,000 people per day)		
Is your organization legally registered in the country of the activities with at least 3 years of continued activities? (No projects for individual advocates or activists will be funded)		
Is your organization's annual financial reporting in line with national legislation complete and up-to-date?		
Does your organization have experience working with the local media landscape and policy makers?		
Does your organization commit to and follow FIND Global Access Policy and FIND Code of Conduct and Ethics ?		

However, there are **certain base requirements for consideration**, as detailed in Section 8 of the RFP (Award Conditions (Exclusion Criteria)).

To aid applicants in assessing their eligibility, we have prepared a **Self-check Form** (Appendix B).

Please note that the self-check form does not cover all eligibility requirements. **Applicants are required to review all exclusion criteria prior to proposal submission.**



Completed proposal document must be submitted by **February 2, 2022** via email to advocacy_rfp@finddx.org



Applications and supporting materials can be submitted in **English, French, Spanish and Portuguese.**

Process and Timelines

	Activity	Expected date
1	Publication of RFP	12 January 2022
2	Webinar sessions (2)	19 & 20 January 2022
3	Closing for submission of written queries	26 January 2022
4	Closing of RFP	2 February 2022
6	Communication on Award/s of Contract	23 February 2022
5	Financial due diligence (if requested)	9 March 2022
7	Contract/s signed with selected organizations	18 March 2022
8	Public announcement of Award/s of Contract	21 March 2022
9	Review of advocacy strategy/materials	By 30 April 2022
10	Mid-term project review/s completed	<i>Varies by project</i>
11	Final reports and performance data	<i>Varies by project - no later than Dec. 2023</i>

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Written queries received & responses

➤ **Is more than one proposal allowed per country?**

Yes, there is no restriction on the number of applications per country

➤ **Will the award/contract be issued in French/Spanish/Portuguese?**

Proposals can be submitted in English, French Spanish and Portuguese but the award/contract will be in English

➤ **Do the advocacy strategies and dissemination materials need to be in English?**

The development of materials (in English, French, Spanish, Portuguese, and other local languages as relevant) is permitted. Strategies and plans should ideally be shared in one of the four languages of the RFP for the review process.

➤ **What is the definition of an LMIC?**

Please refer to the OECD definition



For more information:

Link to RFP:

<https://www.finddx.org/calls-for-partners/>

Email: advocacy_rfp@finddx.org

Webinar recordings and FAQs will be shared on the [FIND Calls for Partners](#) page.



Q&A