Population Reference Bureau
Request for Applications (RFA)

RFA Information

Issue Date: March 11, 2021
RFA Name: Identifying Promising Practices for Use of Digital Health in Family Planning Programs
Ceiling Amount: $50,000
Point of Contact: Toshiko Kaneda, PhD dhealth@prb.org

Due Dates

Questions Due: 5:00pm EST on March 22, 2021
Applications Due: 5:00pm EST on April 20, 2021

Submit the questions and proposals to Toshiko Kaneda at dhealth@prb.org. Responses to questions will be shared with all interested vendors. PRB expects to make an award in early-May.

Request for Applications

Overview

The Population Reference Bureau (PRB) requests applications from eligible organizations interested in partnering with PRB to house and maintain the Digital Health Compendium, lead bi-annual updates, and engage in regional digital health technical assistance networks in sub-Saharan Africa (SSA) to promote the adoption, evaluation, and scale-up of digital technology to improve the impact of family planning programs.

PRB anticipates entering into a subaward with the successful applicant.

Issuing this RFA does not constitute a commitment for PRB to issue a subaward, nor does it commit PRB to pay for costs incurred in the preparation and submission of an application.

Required Qualifications and Eligibility

PRB seeks applications from organizations that meet the following qualifications.

- Location: Based in SSA, with regional presence particularly in USAID priority countries.
- Technical expertise: Experience working in digital health. Experience in the family planning field preferred, though not required. Strong project management, communications, and editorial skills.
- Web management: Experience managing a WordPress site. Familiarity with PHP (Hypertext Preprocessor) and CSS (Cascading Style Sheets) and some experience with custom fields preferred.

**Project Background**
In October 2020, the PACE Project (Policy, Advocacy, and Communication Enhanced for Population and Reproductive Health) supported by the United States Agency for International Development (USAID) released the Digital Health Compendium to enable users to explore case studies across a range of digital health technologies used to enhance family planning programs. All of the case studies were submitted by the implementing organizations in response to a call for submissions and are mainly from SSA, though include some from other regions.

Family planning and reproductive health programs can benefit from unprecedented opportunities to improve services. Investments in digital health tools have expanded exponentially, but information on what works and what does not remain limited and scattered. To advance greater adoption of digital technology in family planning programs, more data and information on the challenges, opportunities, scalability, and results are needed. The Digital Health Compendium aims to consolidate emerging information and data on applications of digital technology in family planning programs to inform adoption and scale-up of successful approaches. The case studies give policy and program decisionmakers insights on real-world applications of digital health, promising practices, challenges, and other lessons that can be applied to current and future programs.

**Purpose**
The PACE subawardee will maintain the Digital Health Compendium by leading two rounds of updates between May 2021-March 2022. With support from PRB, the subawardee will issue a call for case study submissions, consolidate and publish new case studies, and actively participate in digital health learning and technical assistance networks in SSA. The subawardee will also disseminate information about the Digital Health Compendium widely online and through other opportunities (e.g. meetings, events) on an on-going basis.

**Activity Overview**
Responsibilities related to maintaining the Digital Health Compendium will include, but will not be limited to:

1. Drafting a call for submission of case studies to be published in the Digital Health Compendium.
2. Adapt and update the form originally developed by PRB to be filled by those submitting the case studies as appropriate. The form should include standard sections, such as a description of the digital health intervention, program context, evaluation findings, lessons learned, references, and a link to upload accompanying image(s).
3. Disseminate the call for submissions widely online, through relevant networks, and at regional and international meetings and events.
4. Review the case study submissions content to ensure alignment with Digital Health Compendium case study components and correspond with the authors if any sections are incomplete or needs clarifications.
5. Copy edit the final versions of the case studies to ensure quality and consistency of content.
6. Upload the final versions of the case study and accompanying images to the Digital Health Compendium site using Wordpress.
7. Provide project management services to maintain a project timeline and track the status of case study submissions, correspondence and finalization.
8. Review all the case studies on the Digital Health Compendium before and after publishing to ensure they were transferred correctly.
9. Publish the newly added case studies on the Digital Health Compendium and disseminate about the new update widely online and other venues as appropriate.
10. Throughout the process above, meet with PRB staff periodically (and as requested) to provide updates.

Additional responsibilities will include:
- Participating in regional digital health technical assistance and learning networks, such as the African Alliance of Digital Health Networks and the Global Digital Health Network.
- Leading a session at the Global Digital Health Forum or other relevant conferences highlighting learning and selected case studies from the Digital Health Compendium.
- Identifying opportunities and strategies to promote continued learning and exchange across countries to facilitate greater adoption, evaluation, and scale-up of digital health interventions for family planning programs.

**Deliverables**
Due dates may be revised with written approval from PRB.

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<td><strong>Call for Submission of Case Studies</strong></td>
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<td>Produce a call for submissions and a case study form to collect information about projects.</td>
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A.3 | Disseminate the call for submission online and other venues as appropriate. | The call for submission disseminated | May 20, 2021 | Dec 6, 2021

**B** | Review and Edit of Case Studies

B.1 | Edit the case studies after obtaining and clarifying all the necessary information. | Edited, final case studies | Aug 11, 2021 | Mar 8, 2022

**C** | Upload Case Studies to Digital Health Compendium

C.1 | Upload the case studies and images to the compendium site. | New case studies uploaded on the compendium site | Aug 25, 2021 | Mar 22, 2022

**D** | Publish New Case Studies and Disseminate

D.1 | Publish the case studies and disseminate about them widely online and other venues. | Wide dissemination about the updating of the compendium with new case studies | Aug 31, 2021 | Mar 31, 2022

**Proposal Format**
The proposal should include:

- Organizational description (no more than 1 page)
- Names, roles, and CVs of individuals who would work on the project
- Examples of previous work in the digital health field
- Examples of previous work in the family planning field, if any. If no family planning experience, then identify a consultant with expertise in the area to be hired if awarded.
- Examples of previous experience with a WordPress site.
- Itemized budget for a total between $40,000 and $50,000

PRB anticipates awarding a fixed-price contract with payment based on the successful completion of deliverables.

**Selection Criteria**
PRB will select the subawardee based on a combination of factors, including quality of the proposal, appropriateness of the staffing, the organization’s previous experience working in the digital health field, experience working with a WordPress site, and price reasonableness. While

1 Please note that the selected subawardee will be required to obtain a DUNS Number if they do not already have one.
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About PRB
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