Request for Proposals

Development and Implementation of a Mass Media Campaign aiming to positively position Methadone Treatment in the mind of policy makers, general public, and injecting drug users

Proposals must be submitted by September 17th 2013

In fairness to all agencies, no extension will be granted under any circumstances

Late proposals will be rejected

For further information regarding this RFP Please contact:

FHI 360 Vietnam
Attention: My Ha, SBC Technical Officer
nmyha@fhi360.org

Request For Proposals

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1. General Information on the Request For Proposals

The Methadone Treatment (MMT) Program, implemented by FHI 360 Vietnam and its partners with funding from USAID, issues this request for services of a professional agency to develop and implement a mass media campaign to position MMT positively in the mind of policy makers, general public and drug users. In particular, at the end of the campaign, policy makers would think of MMT as a smart solution; general public will associate MMT as a solution to reduce crime, and for drug users: a way out for a better life. The attitude changes are needed aiming to advocate for a favorable attitude of policy makers toward increasing financial support to MMT in Vietnam.

1.1. Reference

<u>Title of the project</u>: Development and Implementation of a Mass Media Campaign aiming to positively position MMT in the mind of policy makers, general public, and injecting drug users.

This RFP is issued on Tuesday September 3, 2013 by USAID SMART TA under the Methadone program.

1.2. Definitions and Abbreviations

The following definition and abbreviations are used throughout the request for proposal:

- Contractor means an agency awarded the contract
- **HIV** refers to the Human Immunodeficiency Virus
- **MMT** refers to Methadone Treatment
- RFP refers to Request For Proposals
- **USAID** refers to the United States Agency for International Development

1.3. Incurring Costs

All costs directly or indirectly related to preparation of a response to this RFP, or in any oral presentation required to supplement and/or clarify the RFP, or during the negotiations between the selected agencies and FHI 360 for the development of the contract, shall be the sole responsibility of, and shall be borne by, responding agencies. Any materials delivered by the agencies will be returned upon request.

1.4. Confidentiality and Reproduction

This document has been prepared by FHI 360 in connection to the bidding process for the development and the implementation of the campaign. It may be not used for any other purposes, reproduced (in whole or in part), quoted, nor passed on to any other agency or individual without a specific written permission of FHI 360.

2. Background and Rationale

Methadone Maintenance Treatment (MMT) has been implemented in Vietnam with first 5 clinics since 2008. Over the last 5 years the MMT program has shown **significant achievements in terms of public health** (opiates addiction treatment, HIV transmission control in key population of injecting drug users towards community); and **social stabilization** (criminal reduction, better community integration for heroin users regarding improved relationship and employment in their daily life). With approval from Vietnamese Government, it is the Ministry of Health's plan to scale up the MMT program to current 60 clinics in 20 provinces providing methadone treatment for 80,000 heroin users up to 2015.

While continuously and rapidly scaled up, the MMT program currently faces key challenges, particularly in terms of medication procurement and program financing. Since Vietnam became a middle-income country this means it needs to be ready to provide the services less dependent on external funding sources. Moreover, this condition calls for stronger Government leadership and commitments as well as social/community support and contribution from drug users and their families. In addition, although MMT program has proven its success of helping drug users change their addictive behaviors to reintegrate into the society and live a healthy life for their families and the community, general public and mass media have not got opportunity to experience and understand specifically about social, economic and legal effectiveness of this community evidenced-based treatment towards the society and drug users. That seems to be another barrier for promoting methadone to achieve Vietnam's goal of treating 80,000 opiates users by 2015. Apparently, it is necessary to raise public and community's understanding and awareness as well as engage them into MMT program from different angles of influence to pursue the common goal of sustainable development for MMT by 2015. As the result of MMT scale up, more and more drug users/their families may be benefited from the treatment as a "recovery roadmap" not only for their health care but also for their self-efficacy to improve relationship and contribute greatly to their families and the community/society.

As a technical assistance partner, FHI 360 with funding from USAID/PEPFAR seeks to initiate a two month mass media campaign until end of 2013. It aims to position METHADONE as THE SMART SOLUTION to drug use in the mind of policy makers, THE SOLUTION TO REDUCE CRIME in the mind of general public and THE WAY OUT in the mind of drug users/their family.

More details of the campaign are outlined below. FHI 360 is now looking for an outsourced experienced media, communication or advertising firm to work as partner with us in this campaign.

3. Agency Creative Brief

3.1. Campaign Theme/Purpose

The campaign aims to position METHADONE as THE SMART SOLUTION to drug use in the mind of policy makers, THE SOLUTION TO REDUCE CRIME in the mind of general public and THE WAY OUT in the mind of drug users/their family.

3.2. Audience

- 1. Policy makers
- 2. General public
- 3. Drug users/their family members

3.3. Communication Objectives

Over the course of the campaign, our primary audiences will:

Decision makers

- **KNOW** the benefits of MMT over traditional 06 approach in terms of cost effectiveness (financial benefit)
- BELIEVE that MMT is a financially smart solution to drug use issues
- **BEHAVE** make decision to support financial investment in MMT programs

General public

- **KNOW** that MMT patients are more likely to control their behaviour and less likely to be under financial pressure, thus less likely to commit crime
- BELIEVE that MMT reduces crime
- **BEHAVE** show favourable attitude toward MMT programs

Drug users

- **KNOW** that MMT patients are less likely to relapse
- **BELIEVE** that MMT treats drug dependence more effectively
- **BEHAVE** seek MMT

3.4. Obstacles

- Existing social stigma toward drug use/users
- Mass media has negatively portrayed addiction and created fear toward drug users
- Opposite opinion: There is existing belief that methadone use means replacing, switching from an illegal drug to another drug without appreciation of the nature of continuum care by methadone program.

3.6. Campaign Tone

The tone of the campaign will be friendly, modern and informative. Messages and media should surprise, stimulate and engage the primary audience. Obviously we would like the campaign to be memorable, aspirational and compelling to the people we reach. It is imperative that the

campaign tone is not preachy, judgmental or moralistic. It also cannot directly criticize the tradition 06 approach.

3.7. Communication Channels and Openings

Communication channels should focus on social media, together with television, newspaper and formal government portal.

Possible openings can include, but not limited to, World AIDS Day (Dec. 1, 2013) and The 5th National Scientific Conference of HIV/AIDS Control (Dec. 2-3, 2013)

3.8. Creative Considerations

In this campaign, it is important that:

- We avoid any images that negatively portray drug users
- We include USAID, VAAC logos when appropriate

4. Campaign Timeline and Budget

The campaign will be executed over two month period.

The overall budget for the campaign will not exceed \$100,000 USD, which will cover all activities listed in the Scope of work attached (design, production, placement and management (e.g. special events) of campaign components, as well as all fees and agency commissions).

It is anticipated that the campaign will be officially launched no later than **November 2013**.

6. Preparing Proposals

Agencies are required first to submit in English (A) a technical proposal, and (B) a cost estimation proposal. Instructions for each proposal are provided below. Please follow the sequence of the topics as indicated in the instructions.

6.1. Technical Proposal

The technical proposal for this RFP consists of 3 parts (not exceeding 20 pages, excluding organizational chart and resumes):

Part 1: Agency Experience and Capabilities

- Describe your agency and why it is qualified to undertake this project. Include prior experience (especially on advocacy campaigns), size and history of organization, etc. Provide a list (if not included in Expression of Interest) of significant projects accomplished in the past two years, including project names, brief description of the project and work performed, name, address and telephone number of clients.
- 2. Evidence that your agency is able to work with government, non-government and community groups through participatory, non-discriminatory and non-stigmatizing approaches.

Part 2: Staff Qualifications and Management Approach

1. Present the organization chart and elaborate on project management for this project.

- 2. Provide resumes describing the educational background and work experiences for each of the key staff (particularly the Account Manager and Creative Director) who will work on this project.
- 3. Indicate the percentage of their time that will be devoted to this project.

Part 3: Strategic Approach and Media Plan

- 1. Describe the agency's understanding of the communication problem to be addressed, the objectives of the campaign and the strategic approach recommended by the agency. The strategic approach should reflect the goals outlined in the agency brief and should address how the various components of the strategy (including creative approach, use of mass media, and use of public relations activities/events) will be used/linked in order to achieve the communications objectives. It is not necessary to include creative concepts or materials in this proposal.
- Propose a recommended media plan and schedule for all recommended advertising and public relations. Please include in your recommendation the materials/activities included in the "Communication Channels" section of the Agency Brief, and propose other communications channels that would best utilize the campaign's budget and meet communications objectives.
- 3. Identify any anticipated complications which may arise in the implementation of the campaign how to address and resolve such complications.

6.2. Cost Proposal

Agencies are requested to provide a cost proposal for this project with a detailed budget not exceeding \$100,000 USD.

The template for the cost proposal is as follows:

Budget Category	Amount (USD)
Salaries	
 Staff 1 – Title – Level of Effort 	
 Staff 2 – Title – Level of Effort 	
• Etc	
Total Salary Costs	
Fringe Benefits	
 Type of benefit/amount 	
Total Fringe Benefit Costs	
Consultants/Endorsements	
Description/amount	
Total Consultant or Endorsement Costs	
Travel	
Description/amount	
Total Transportation Costs	
Other Direct Costs	
 Materials production costs 	
(description/amount)	
 Other campaign costs 	
(description/amount)	
Total Other Direct Costs	
Indirect Costs (if applicable)	
Fee (if applicable	
Total Budget	

7. Proposal Submission Requirements

Each agency must submit an original plus three (3) unbound copies and one (1) CD-ROM of their proposal.

Proposals (in English) must be physically received at FHI 360 by <u>5:00 pm on September 17th</u> <u>2013</u> (see address below). Proposals not physically received by the stated time will not be accepted. In fairness to all agencies, no extension will be granted under any circumstances:

Proposal for Development and Implementation of a Mass Media Campaign

Family Health International (FHI 360)
7th floor, Hanoi Tourist Building, 18 Ly Thuong Kiet street
Hanoi, Vietnam

Only short-listed candidates will be contacted. Proposals with accompanying documentation will not be returned to unsuccessful candidates.

8. Presentation

Notification of the short-listed agencies is anticipated to be made immediately by <u>September 20th 2013</u>. The short listed companies will be at that time requested to prepare a 30-minute oral presentation (using Power Point) of their proposal (technical and cost proposals). <u>This presentation should not be submitted with the proposal mentioned above</u>. However, this presentation should be ready for the final selection process that should happen shortly after short list candidates are announced. FHI 360 will make every reasonable attempt to schedule each presentation at a time that is agreeable to the agency. Failure of an agency to conduct a presentation on the date scheduled may result in rejection of the agency's proposal.

9. Selection Criteria and Scoring

Evaluation of the proposals through the oral presentation will be conducted by the Review and Selection Committee. The proposals and the oral presentation will be scored against the below criteria. The scoring will be tabulated and the proposals will be ranked based on the numerical scores received.

Criteria	Value of Criteria
1. Technical Proposal	
 Agency's Experience and Capabilities 	10
 Proposed Staff Qualifications and Management Approach 	20
Strategic Approach	30
Media Plan	20
2. Cost Proposal	30
3. Oral Presentation	20
Total	130

The Committee will make a final selection to award the contract based on the proposal score and the reasonableness of the cost.

10. Award Process

Notification of final selection is anticipated to be made before **Sept. 30**th **2013**. FHI 360 reserves the right to make final decisions, and its decision is final.

After the final selection has been made, FHI 360 will work with the selected agency to develop a phased contract under which the agency will implement the project. The selected agency is expected to commence work once the contract is signed.

The selected agency may be required to undergo a pre-award review prior to signing the contract. The purposes of the pre-award review are 1) to determine if the agency can manage and account for the amount of funds awarded, 2) to determine if the agency can comply with terms and conditions of an agreement with FHI 360, and 3) to inform the agency on accounting record expectations and requirements.

11. Right to Reject Proposals and Negotiate Contract Terms

FHI 360 reserves the right to reject any and all proposals and to negotiate the terms of the contract, including the award amount, with the selected agency prior to entering into a contract. If contract negotiations cannot be concluded successfully with the highest scoring agency, FHI 360 may negotiate a contract with the next highest scoring agency.

FHI 360 creates no obligation, expressed or implied, by issuing this RFP or by receipt of any responses submitted. The mutual obligations and responsibilities of FHI 360 and the successful agency will be recorded in a contract to be written later. FHI 360 is under no obligation to contract with any agency should negotiations regarding contractual terms be unsuccessful.

12. Clarification and Further Inquiry Regarding the RFP

Any questions concerning this RFP must be submitted in writing to: nmyha@fhi360.org

Any questions must be received by **September 10th 2013** to allow answers to be circulated to all potential contractors.

IMPORTANT DATES:

Proposal submission: Sept 17th 2013

Short listed candidates notification: Sept 20th 2013

Presentations from shortlisted candidates: Sept 21 – 25, 2013

Final selection made: Sept 30th 2013

Pre-campaign preparation and contract processing: Oct, 2013

Campaign launched: Nov 2013

Campaign finished and documentation/evaluation starts: Dec 31st 2013

All requested reports/documents submitted: Jan 15th 2014