

Advocacy in health: Primary health care and vulnerable groups Request for proposals

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1. Background

Health for All (HAP) is a project of the Swiss Agency for Development and Cooperation (SDC) of the Swiss Government and is being implemented in Albania since 2015. The overall goal of the Health for All Project (HAP) in the Consolidation Phase is, the Albanian population benefits from better health thanks to improved and inclusive primary health care.

HAP is supporting the upscaling of homecare services for homebound patients and elderly in six regions of Albania (Berat, Durrës, Korçë, Elbasan, Shkodër and Tiranë) under the leadership of Health Operator and the respective Local Units of Health Care. Apart from public institutions, HAP has been regularly working and collaborating with CSOs for elaboration and implementation of innovative service models in PHC such as home care, management of NCDs via the clinical guidelines and protocols, elderly people care etc.

During its consolidation phase (2023-2027) HAP will further contribute towards improvement of accessibility and quality of PHC services, with the focus on homecare and other newly established service models. This will be achieved among other through the involvement of the Civil Society Organisations (CSOs) and the support for advocacy interventions aiming at inclusion and better accessibility in PHC of vulnerable populations, subject of homecare. Moreover, better participation of citizens in the decision-making processes remains an important topic for the project. Finally, HAP will support strengthening of capacities for CSOs to conduct effective advocacy activities.



In this context, HAP is inviting the CSOs to express their interest and propose plans of activities addressing specific advocacy issues in Primary Health Care to improve inclusion and accessibility for vulnerable populations. This document contains information that will help CSOs to develop their proposals according to Annex 1 *"Project Proposal Form"*. Besides, it orients the focus on specific advocacy issues identified by CSOs on health (Point 2), eligible CSOs (Point 3), project duration and geographic coverage (Points 4&5), budget proposal, and where to submit the proposal.

2. Advocacy issues to be considered

There are many advocacy aspects for which awareness can be raised. However, to be successful and efficient, it is important to select the advocacy topic from the large range of issues and implement activities accordingly. HAP is particularly interested to increase access to homecare services for chronic patients and elderly (especially those living alone), as well as potentially for other vulnerable groups such as people living with mental health problems, women, children and elderly subject to domestic violence, etc. The inclusion of already mentioned vulnerable populations in these advocacy interventions is another objective of these activities. HAP organized a workshop with CSOs to identify advocacy issues in primary health care aiming at inclusion of vulnerable populations and increasing accessibility of PHC and Homecare.

Some of possible streams of work in respect to advocacy emerging from this workshop are:

- 1. Increase financial resources in PHC to improve access to homecare and improve the quality of home care service delivery. More financial resources would make it possible to improve the availability of drugs to be provided to HBC patients, OR more dedicated nurses for homecare services, OR improve transport/payment for homecare nurses, OR provide additional benefits to caregivers, OR improve other aspects of HBC).
- 2. Improve access to homecare ensuring the involvement of and support by LGUs (the case of Korça or Tirana Municipality).
- 3. Increase access to social services within PHC, especially to those benefiting from homecare.
- 4. Increase access to homecare through a better coordination between local social services, LGUs and PHC, with a focus on rural and hard to reach areas for homecare services.
- 5. Increase access to social services offered by the Primary Health Care services.
- 6. Improve benefits for caregivers of those who are categorized as in need for homecare (elderly, chronic ill persons)
- 7. A more accessible PHC referral and counter-referral system for chronically ill patients and their families (define target group(s)) through information, use and navigate of the referral system of PHC (for specific diagnoses, health issues; ex: palliative care, cancer suffering patients, HBC, etc)
- 8. Improve access to Opioids (pain treatment) for a broader range of patients, including those affected by cancer and beyond active cancer patients. Facilitate prescription and administration of opioids by PHC physicians, targeting specifically the categories of patients that are served at home.



The list of advocacy topics was produced during the above-mentioned workshop. However, we believe that it is not an exhaustive list. CSOs are invited to suggest other advocacy issues, being focused on Primary Health Care, increasing access to homecare and introduction or improvement of a holistic approach, including public social services (Municipality Social Services and State Social Services), as well as complementary services for homecare patients and elderly living alone from private sector and/or philanthropy or charity.

The applicants are strongly encouraged to involve beneficiaries in their advocacy activities. Also, the applicants may consider situation analysis activities, as part of their advocacy plan to better guide their advocacy intervention efforts.

3. Who can apply?

This call for proposal is open to Albanian Civil Society Organization (CSOs) local or national, with working experience in advocacy in health, organizing awareness raising, networking and civic engagement initiatives of marginalized communities aiming better access and quality of primary health care in Albania.

By Civil Society Organization (CSOs) it is understood a non-state, non-profit, voluntary organization registered in Albania that can provide advocacy services to the vulnerable individuals and groups, and influence policy-making processes, with emphasis on empowerment, inclusion, and fulfilment of health rights of individuals, by accessing necessary primary health care and social services. Co-applications of CSOs are also eligible for this call for proposals. In this case the leading CSO should be clearly indicated.

Each CSOs is invited to elaborate and submit a project proposal choosing one of the listed advocacy issues (Paragraph 2 of this call for proposals). Moreover, the applicants are invited to suggest other advocacy issues focused on Primary Health Care, with a potential positive impact on the increase of access to homecare, and/or other PHC services, introduction or improvement of a holistic service approach, including public social services, and complementary services provided to homecare patients and elderly living alone from private sector and/or philanthropy or charity.

4. How to apply and what to submit

The following are the documents which MUST be submitted as an application

- A Project Proposal as per Annex 1 form of this call for proposal.
- Advocacy plan and timeline of the proposal as per Annex 2 form of this call for proposal
- A budget proposal as per Annex 3 Form of this call for proposal
- Overview presentation of the organization highlighting specifically previous advocacy work and experiences.
- CVs of main experts to be involved in the advocacy project implementation.
- The court decision certifying the registration of the organization.



- A valid tax registration (NUIS) certificate
- Certificate of tax liability, stating whether they are subject to VAT or not

5. Project duration

The project duration can be up to 12 (twelve) months. Project proposals are encouraged to last a minimum of 10 (ten) months and a maximum of 12 months.

In case a longer period of activities will be envisaged by the applicant(s), this should be very clearly indicated and explained. In any case, HAP will financially support only the activities of the first 12 months. Subsequent support beyond the 12 first months will not be automatically granted by HAP, but this possibility will be thoroughly examined at the end of this first phase of activities.

6. Project proposals supported

HAP will select and support in total 4-6 (four to six) health-related advocacy projects among the submitted proposals, upon budget availability. This is a competition and only the highest ranked proposals will be supported.

7. Budget proposal

The project proposal should include a budget proposal which shall not exceed the total amount of 1,500,000 (one million five hundred thousand) ALL for proposals with one CSO applicant, or 2,000,000 (two million) ALL, for proposals with two or more CSO co-applicants, for an implementation period up to 12 months. Any budget proposal over these amounts for the proposed timeline (up to 12 months) will not be taken into consideration.

7.1 Non eligible expenditures

HAP will support all activities related to advocacy activities and related subjects. However, there are some non-eligible expenditures, for which HAP won't offer any support, such as:

- Salaries or fees for civil servants or experts from public administration or public institutions, being those central and/or local ones.
- Payments for public institutions such as ministries, municipalities, central agencies, local health authorities, hospitals, health centers etc.
- Purchase of equipment (office, or to donate to third parties, etc.);
- Operational costs (i.e. energy bills, water bills, office rent costs, -, etc.);
- Fines and other pecuniary punishments and court expenses;
- Any expense not related to the advocacy areas of interest for HAP;
- Any expense not related to the implementation of this call for proposal;
- Any expenses occurred before the start of the contracting period.



8. Geographical reach

The Health for All Project is being implemented in six regions designated by the Ministry of Health and Social Protection. HAP is working with Local Units of Health Care (LUHC) in Berat, Durrës, Korçë, Elbasan, Shkodër and Tiranë, in 49 health centers. For those advocacy activities that will focus locally, please take into consideration the above-mentioned six regions. There is no need to specify any region for activities designed at central levels (MOHSP, or other central institutions).

9. Evaluation criteria

HAP will conduct the selection process within a month after the submission of proposals. Subject of evaluation will be:

- The relevance of the advocacy issue proposed, in line with Paragraph 2 of this call *Inclusion or Exclusion criteria*.
- Advocacy project proposal plan and timeline (Annex 1 and 2 of the call for proposal) 45 points
- Budget proposal covering the activities proposed, feasible and realistic 20 points.
- CV of the organization highlighting specifically previous advocacy work 15 points.
- CVs of main experts involved in the advocacy project implementation 20 points.

10. How to apply and where to submit

Proposals must be submitted using the Project Proposal Form (Annex 1) and other documents required as per paragraph 4 of this call for proposal. Proposals should be **in English language**. The proposals should be sent at HAP Center: Themistokli Germenji Str., Helios Building, 2nd floor, Tirana, Albania, not later than 30 November 2023. An electronic version (with CD or USB stick) of the proposal should be included in the envelope.

11. Enquiries

If you have any questions concerning this request for proposals, please send them by email to <u>info@hap.org.al</u> by 10 November 2023.The answers will be made available in the website of the HAP project (www.hap.org.al).



Annex 1 Project proposal form

Summary of information on the applicant:

Name of Applicant Organization:	
If a coalition of CSOs, please indicate names	
of the CSOs and/or institutions involved ,	
specifying the leading CSO	
Area of work: (the geographic area where the	
organization works)	
NUIS (NIPT)	
Years of work experience in advocacy in	
health	
Estimated cost of the proposal (in Lek):	
Location/s of the proposed project:	
Total duration of the proposed project:	

Applicant's contact details for the purpose of this action:

Contact person name for this proposal:

Telephone number:

Contact person's email:

Address:

Date of the proposal submission: _____/ 2023

Proposed technical advocacy plan

Title of the advocacy issue (please be specific and clear):

Problem development background: please uncover the problem that you need to address and write a short description of it (its magnitude, severity, and possible causes). Why is that a problem? What evidence can support your definition of the problem (figures, legal background, etc.). **The context:** In what background is the issue/problem being developed (please describe possibly the social, political, legal, economic, cultural settings where the problem is being developed). **The landscape:** Policies, programs, regulations, laws in place. **Barriers/opportunities**: The factors preventing or promoting change. **Please, indicate if there is any need for supporting evidence newly generated, please specify the type of evidence**. (no longer than 1000 words).



Advocacy goals: what will this plan specifically achieve? What is the goal of your advocacy interventions? (no longer than 200 words) 1.

Advocacy objectives: what are the specific objectives of the plan? Specific, Measurable, Attainable, Realistic, Time oriented (SMART objectives). Explain how these objectives contribute to the realization of your goal? For a proposal of maximum 12 months please list a maximum of 3 SMART objectives.

1.

2.

3.

Experience: Has the organization carried out any previous work on this specific advocacy topic? If yes, provide some information. (no longer than 300 words)

Targets (people and/or institutions): who is your advocacy target? What is the situation of the target group? Who has the power to make the necessary changes? Who influences those people/institution? Who are those that you need to move on?

Allies/Partners: who can you work with to build momentum and support? Who can add value to your efforts (based on their previous successes, experiences, etc.)? Shortly explain their role. (no longer than 150 words)

Opponents: who are those people/institutions that can oppose your efforts? How can you influence them? Assess their level of disagreement with your advocacy aspects and think of strategies for their engagement. Shortly explain their role. (no longer than 150 words)

Beneficiaries: who's benefiting from your advocacy actions? Can they be your partners? **You** *are strongly encouraged to involve beneficiaries in your advocacy activities*. Shortly explain their role. Please indicate the number of beneficiaries reached and covered through this advocacy proposal. (no longer than 150 words)

Advocacy activities/Plan of Activities: *Please describe shortly activities to be implemented, to reach your objectives and goal above mentioned.* Please use the template in Annex 2 to develop and present the advocacy activity plan of your proposal.



The impact chain description details how you intend to achieve your objectives and goal. It spells out what specific actions and steps you intend to take. It helps identify at the start if what you want to achieve is feasible. You are strongly encouraged to describe the impact chain in your plan of activities as follows:

- Inputs: (time, people, partners, etc. needed)
- Activities: (things to do)
- Outputs: (results of activities; things that will be produced as result of your activity)
- Outcomes: (changes in policy, etc.)
- Impact: what is the implication of the advocating activity

Risks and contingency plans: there are always risks in achieving advocacy goals. It is helpful to describe them in advance and think for mitigation actions. (no longer than 400 words)

- What can be a potential risk to stop, or make it not implementable your advocacy activity?
- *Probability of happening?*
- Mitigation strategy

Do you consider involving Media in support of your advocacy activities? Yes No

If yes, please specify the following section on Media Involvement.

Media involvement: in case there is added value from media involvement what kind of media are you planning to involve (audiovisual, written)? Please, specify how you plan to involve the media in your activities. What are the activities conducted through media? What would be the added value of involving the media? (no longer than 150 words)

Budget: Please specify the indicated budget and mention main budget lines, human resources involved and activities. Please enter details of these two budget lines as per the needs of your proposal. There is no developed template for developing the budget, so please develop the budget in a separate excel sheet, as per template in Annex 3 and submit it together with other documents.



Annex 2: Template of advocacy activities plan

No.	Inputs (people, time, partners, etc.)	Activity (what are you doing to reach the objectives)	Timeline (when, and how long will the activity take)	Outputs (results of your activities; what is produced because of your implementing activity)	Outcomes (what are the changes in the policy, practices, etc)	Impact (what is the implication of the advocacy activity). (The impact does not depend all on your outputs)
	Goal: XXX					
	Objectives:					
	1.					
	2.					
	3.					
1						
2						
3						
4						
5						
	Add rows as needed					

Annex 3: Budget template



No.	Item description	Unit	Number of Unit	Unit Value	Total Cost in ALL	Comments of the budget items (Provide a narrative clarification of each budget item demonstrating the necessity of the costs and how they relate to the action (e.g. through references to the activities and/or results in the Activity plan)
	DIRECT COST 1					
1.1	Personnel/staff ¹ Technical					
1.2	Administrative/ support staff					
2	External Consultants					
	Other (please specify)					
	Subtotal 1					
	DIRECT COST 2					
	Activity 1					
	Activity 2					
	Activity 3					
	Activity					
	Subtotal 2					
	Total Budget					

¹ The overall budget of personnel/staff and external consultants should not exceed 40 % of the overall application budget.

