HIV and Hepatitis Social Marketing Campaign Application

**Funding Title**
Office of Minority Health Resource Center (OMHRC)
HIV and Hepatitis Social Marketing Campaign Subcontracts

**Funding Source**
OMHRC’s HIV/AIDS and Hepatitis Awareness, Screening and Referrals Initiative support by the Department of Health and Human Services Office of Minority Health

**Award Amount**
Up to $35,000 for each subcontract (pending available funds), with a total of 12 subcontracts

**Eligible Applicants**
Community based organizations (CBOs), faith based organization, state/local tribal governments, health departments, health ministries in the U.S. and U.S. territories are eligible to apply. This includes American Samoa, Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, Guam, Puerto Rico, Republic of Marshall Islands, the Republic of Palau and the U.S. Virgin Islands. Partnerships between local CBOs and their local health agencies are highly encouraged for this application.

**Application Deadline**
Monday, January 11, 2016, 5 pm PST.

**Project Period**
February 1, 2016 – August 15, 2017
Funds may be utilized within any given month during the project period, or the project may be implemented over the entire project period. Upon completion, a final report must be submitted to OMHRC. The format for the final report will be forwarded shortly after receipt of the award letter. Full funding of these subcontracts are based on fund availability to OMHRC.

**Summary and Purpose**
The project goal is to implement an HIV and Hepatitis social marketing campaign that supports increased awareness of the co-infections of HIV and Hepatitis and increase HIV testing and Hepatitis screening with referral to care of minority and hard-to-reach communities. Agencies will demonstrate their competence in conducting social marketing campaigns and stipulate how they will utilize their expertise in connecting with minority populations. These subcontracts may be utilized to strengthen existing HIV/AIDS, Hepatitis and community health worker (CHW) programs, combined HIV testing and Hepatitis screening, and improvement of Hepatitis networks to increase racial and ethnic minority population referrals into HIV treatment and Hepatitis care. Agencies and networks will need to demonstrate how they provide culturally competent care and create culturally and linguistically appropriate social marketing materials. Information must be community informed and may include or address sexual and reproductive health messaging and services to at-risk individuals.

OMHRC was established by the U.S. Department of Health and Human Services, Office of Minority Health in 1987. OMHRC serves as a national resource and referral service on minority health issues. The center collects and distributes information on a wide variety of health topics, including substance abuse, cancer, heart disease, violence, diabetes, HIV/AIDS and infant mortality. OMHRC also facilitates the exchange of information on minority health issues.
HIV and Hepatitis Social Marketing Campaign Application

increasing the number of people talking about HIV and Hepatitis, increase number of media outlets covering HIV and Hepatitis related issues, reduce silence and stigma associated with HIV and Hepatitis, increase number of people accessing HIV and Hepatitis care, services, and testing.

All materials developed through this subcontract will go through review process by the Office of Minority Health Resource Center before printing and distribution. Developed materials will be given up to a 30 day period for review.

All materials developed must be 508 compliant. http://www.hhs.gov/web/section-508/making-files-accessible/index.html

Funding Availability
Twelve (12) awards will be made during this fiscal year. Funds are provided to be of assistance to develop and implement an HIV and Hepatitis social marketing campaign within the U.S. and U.S. territories. Social Marketing campaigns must focus on one target population; applicants are encouraged to focus on specific sub-populations within each population.

Webinar
On Monday, December 14, OMHRC will host a webinar to discuss this application. Please register using this link: https://attendee.gotowebinar.com/register/1337148347077935874

Application Review
1. Criteria
The technical review of the HIV and Hepatitis social marketing applications will consider the following four generic factors listed, in descending order of weight:

A. Factor 1: Organizational Experience and Need (20%)
   - Demonstrated knowledge of the problem at the local and regional level.
   - Significance and prevalence of HIV and Hepatitis in your region
   - Extent to which the applicant demonstrates access to the target population, and whether it is well positioned and accepted within the population to be served.
   - Extent and documented outcome of past social marketing efforts and activities with the target population.
   - Experience on providing HIV testing and Hepatitis screenings or referrals

B. Factor 2: Program Proposal (35%)
   - Appropriateness and merit of proposed approach and specific activities for each objective.
   - The degree to which the project design, proposed activities and products to be developed are culturally appropriate.
   - Logic and sequencing of the planned approaches as they relate to the statement of need and to the objectives.
   - Soundness of the established partnership and roles of partnership members in the program.
   - Degree to which the objectives are stated in measurable terms.
   - Attainability of the objectives in the stated time frames.

C. Experience on providing HIV testing and Hepatitis screenings or referrals
   - Identified partnership with agency for referrals for HIV testing and Hepatitis screening

D. Factor 3: Evaluation (25%)
   - The degree to which expected results are appropriate for objectives and activities.
   - Appropriateness of the proposed data collection plan (including demographic data to be collected on project participants), analysis and reporting procedures.
   - Suitability of process, outcome, and impact measures.
   - Potential for the proposed project to impact the HIV and Hepatitis health status of minority populations.
   - Soundness of the plan to disseminate project results.

E. Factor 4: Capacity Building and Sustainability (20%)
   - Extent to which the applicant demonstrates ability to build capacity for their region
   - Degree to which agency has plans to sustain services after the one time subcontract has been awarded
2. **Review and Selection Process**
Accepted applications will be reviewed for technical merit. Applications will be evaluated by an external Review Committee. Committee members are chosen for their expertise in minority health and their understanding of HIV and Hepatitis. Equity in geographical location and target populations may be considered in the final decision of the awards.

**Application and Submission Information**

1. **Contact Information**
Provide agency, name of authorized representative and contact information, name of project director, department’s address, phone number, fax number, e-mail address and web site.

2. **Background (1 ½ pages maximum)**
Outline and describe your HIV and Hepatitis services, social marketing capabilities and connection to the targeted population.

3. **Need (1 ½ pages maximum)**
Explain the justification for the proposed HIV and Hepatitis project in your community and identify the target ethnic or racial minority population to benefit from your proposed project.

4. **Project Activities (3 pages maximum)**
Describe the proposed program or project. Describe the project goals and objectives. Describe how the health information campaign will reach the targeted audience. *All materials developed must be 508 compliant.*

5. **Monitoring and Evaluations (1 pages maximum)**
Describe how this HIV and Hepatitis social marketing campaign will be monitored and evaluated—your measurable goals as stated in the “proposal” section will be the basis for the evaluation.

6. **Capacity Building (1 page maximum)**
Discuss how your HIV and Hepatitis campaign will help to build capacity for your agency to provide HIV and Hepatitis services to your target populations.

7. **Sustainability (1 page maximum)**
Discuss how your agency plans to sustain operation after the one time HIV and Hepatitis campaign has been completed.

8. **Timeline (1 pages maximum)**
Submit a timeline for your proposed HIV and Hepatitis campaign. Your agency has up to August 15, 2017, to complete the project. State all activities associated with your HIV and Hepatitis campaign on a **quarterly** basis.

9. **Budget**
Submit a line item budget attachment for your proposed HIV and Hepatitis social marketing campaign. Funds cannot be used for food or refreshments.

**Application Instructions**
- Applications are **12 pages maximum**, excluding attachments or Budget and Budget Narrative
- Completely fill out agency contact information
- Signed Certification
- Attach a copy of your department’s annual HIV and/or Hepatitis operating budget
- **E-mail completed application to** hepinfo@minorityhealth.hhs.gov by Monday, January 11, 2016, 5 pm PST

**Contact Information:**
Henry Ocampo
Senior Program Analyst
Office of Minority Health Resource Center
510-797-7682
301-251-2160 Fax
E-mail: hepinfo@minorityhealth.hhs.gov

**Schedule of Deliverables and Payments**
In accepting an HIV and Hepatitis Social Marketing Campaign Award, applicant organization agrees to provide quarterly Progress Reports and a Final Report to OMHRC. Report forms and due dates will be provided with award letter. $20,000 of the funds will be released at the onset of the contract in January 2016. $12,000 of the funds will be released upon approval of the Progress Report in October 2016. $3000 of the funds will be released upon approval of the Final Report at the end of contract in August 2017.
### Organization Contact Information

| Agency Name: | |
| Authorized Representative: | |
| Job Title: | |
| Program Director: | |
| Mailing Address: | |
| Work phone: | |
| Fax: | |
| E-mail Address: | |
| Web site: | |

Would you like to receive information via email?  Yes ____  No ____

| Board President Name: | |
| Executive Director Name: | |
| Financial Officer Name: | |

When was the organization founded? (please enter month and year)

| Organization Type (e.g. health department, CBO, faith based, etc.) | |
| Does the agency have a 501(c) 3 status? | |
| Does the agency have a Letter of Incorporation? | |
| What is the agency’s Employer Identification Number (EIN)? | |
| What is the agency’s current HIV/AIDS budget? | |
| What is the agency’s current Hepatitis budget? | |
| What is the agency’s current annual operating budget? | |
| Does the agency currently receive funding from Office of Minority Health? | |
CERTIFICATION

The information contained in this application, including all attachments and support materials, is true and accurate to the best of my knowledge. I understand that if I am awarded and accept a HIV and Hepatitis Social Marketing Campaign Award that my acceptance of the award requires a commitment to complete the project as stated in the application and to abide by the administrative requirements set by the Office of Minority Health Resource Center.

Agency Name: ____________________________________

Print Name of Official: ______________________________

Signature of Official:_______________________________

Date: ___________________________________________
BACKGROUND (Factor 1) (1 ½ pages maximum)

Agency or Department’s Mission:

Organizational History:

Agency’s capacity to implement the program:

Outline of current services delivered:

NEED: Explain the justification for the proposed HIV and Hepatitis Social Marketing Campaign in your community, and identify the target ethnic or racial minority population to benefit from your proposed project. (Factor 1) (1 ½ pages maximum)

PROPOSAL: Describe the proposed HIV and Hepatitis Social Marketing Campaign. State each goal and objective in measurable terms. Provide a description of duties for each proposed consultant and identify which objectives they will address. All materials developed must be 508 compliant. A description of how to write SMART objectives can be found on the following website: http://www.cdc.gov/healthyyouth/evaluation/pdf/brief3b.pdf. (Factor 2) (3 pages maximum)
MONITORING and EVALUATIONS: Describe how this HIV and Hepatitis Social Marketing Campaign Award will be monitored and evaluated. Please refer to the measurable objectives as stated in the proposal section to be the basis of the evaluation. (Factor 3) (1 pages maximum)

CAPACITY BUILDING: Discuss how your HIV and Hepatitis Social Marketing Campaign will help to build capacity for your agency to provide HIV and Hepatitis services to your target populations. (Factor 4) (1 page maximum)

SUSTAINABILITY: Discuss how your agency plans to sustain operation after the one time HIV and Hepatitis Social Marketing Campaign Award has been awarded. (Factor 4) (1 page maximum)

TIMELINE: Submit a timeline for your proposed HIV and Hepatitis Social Marketing Campaign. Your agency has up to August 15, 2017, to complete the project. State all activities associated with your HIV and Hepatitis Social Marketing Campaign on a quarterly basis. (1 page maximum)
BUDGET: Submit a line item budget attachment for your proposed HIV and Hepatitis Social Marketing Campaign project. Indirect costs are maximized at 10% for this subcontract.

<table>
<thead>
<tr>
<th>Sample Budget</th>
<th>Proposed Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Personnel</strong></td>
<td></td>
</tr>
<tr>
<td>Graphics Designer</td>
<td>$3,000</td>
</tr>
<tr>
<td>Translation Services</td>
<td>$2,000</td>
</tr>
<tr>
<td><strong>Supplies</strong></td>
<td></td>
</tr>
<tr>
<td>Printing Costs</td>
<td>$6,000</td>
</tr>
<tr>
<td>Radio/TV/Newspaper ads</td>
<td>$3,000</td>
</tr>
<tr>
<td><strong>Community Incentives</strong></td>
<td>$1,500</td>
</tr>
<tr>
<td>Incentives for community members to participate in focus group</td>
<td>$30 per person x 10 people = $300</td>
</tr>
<tr>
<td>Incentives for models in campaign</td>
<td>$50 per person x 5 people = $250</td>
</tr>
<tr>
<td>TOTAL</td>
<td>14,550</td>
</tr>
</tbody>
</table>

BUDGET NARRATIVE: Provide a narrative budget justification, which describes how the categorical costs are derived. Discuss the necessity, reasonableness, and allocation of the proposed costs. Only the direct costs requested in this application need to be justified. Describe the specific functions of the personnel, consultants, and collaborators (if relevant).

BUDGET: Submit an overall agency budget describing your most recent fiscal year.