

REQUEST FOR PROPOSALS: Developing a Guide for Urban Health Observatories

The World Health Organization Centre for Health Development is requesting proposals for the production of a guide for establishing, operating, and sustaining an Urban Health Observatory at a local government level.

Project title: Developing a Guide for Urban Health Observatories
Responsible Officers: Megumi Kano, Amit Prasad
Deadline for submission: 10 November 2013, 24:00 (GMT)

1. BACKGROUND

1.1 ABOUT THE WHO CENTRE FOR HEALTH DEVELOPMENT (WHO KOBE CENTRE)

As an integral part of the Geneva-based Secretariat of the World Health Organization (WHO), the WHO Centre for Health Development in Kobe, Japan (also known as the WHO Kobe Centre, or WKC) has been conducting research on the health consequences of social, economic, environmental and technological change and their implications for health policies since 1996. This research enhances WHO's capacity to address priority global health issues that require coordinated multidisciplinary and intersectoral action. In recent years, the Centre has been focusing on urbanization as one of the key drivers of health, and has been emphasizing the importance of improving health equity in urban settings.

1.2 ABOUT THE CENTRE'S WORK ON URBAN HEALTH OBSERVATORIES

In a joint report published in 2010, the WHO and United Nations Human Settlements Programme (UN-HABITAT) exposed the extent to which certain city dwellers disproportionately suffer from a wide range of diseases and health conditions.¹ Such inequities exist in cities all over the world. They are a manifestation of differential social and living conditions, often resulting from unplanned urbanization, which can undermine progress in health development.

A key to both understanding the problem and applying the appropriate solution lies in the availability and utility of local health intelligence. In reality, though, routine information systems at regional and national levels often lack urban-level data.¹ They do not specify conditions in the urban areas, not to mention at the sub-urban, neighbourhood level, or by sub-populations in the city. Even when such information exists, it is often limited, fragmented, or is not translated into policy implications.

Through its work on urban health, WKC has become keenly aware that local governments require up-to-date, quality health intelligence about their population in order to make important decisions about policies and resource allocation. This is especially relevant for local governments with jurisdiction over large urban areas with a fluctuating population in a rapidly changing environment. A type of public health institution that might offer a solution is the "public health observatory (PHO)",² or, in the urban context, a local Urban Health Observatory.

The potential need for and utility of WHO technical guidance on Urban Health Observatories was identified during two consultation meetings convened by WKC with international groups of scientific experts as well as representatives of

¹ WHO, UN-HABITAT. Hidden Cities: unmasking and overcoming health inequities in urban settings. Kobe: WHO Centre for Health Development; 2010 (<http://www.hiddencities.org/report.html>).

² Hemmings J, Wilkinson J. What is a public health observatory? *Journal of Epidemiology and Community Health*. 2003; 57: 324-326.

international organizations and regional and local public health observatories. As a follow-up to a recommendation from the first consultation in Kobe, Japan in February 2011, WKC commissioned a research study to identify good practice among existing Urban Health Observatories. The Belo Horizonte Observatory for Urban Health in Brazil undertook the study with WKC, and developed a conceptual framework of an Urban Health Observatory.³

The second consultation held in Amsterdam in the Netherlands in September 2012 resulted in identifying key issues that would be important to address in developing a guide on establishing and sustaining Urban Health Observatories; developing a rough outline of the guide; and generating recommendations on the format and dissemination strategy for the guide.

This Request for Proposals seeks to identify a qualified professional (or team of professionals) to undertake the production of a guide for establishing, operating, and sustaining an Urban Health Observatory at a local government level, taking into consideration the recommendations and outputs from the consultation meeting in Amsterdam in 2012, as well as other relevant existing tools and resources (e.g. UN Habitat's Urban Observatory Guide⁴).

2. TERMS OF REFERENCE

2.1 SCOPE OF WORK

Under the guidance of WKC Technical Officers, the contractor will develop the content for a guide – a document, publishable in either electronic or printed handbook format, primarily targeted to local health officials, which provides practical information, guidance and additional resources to support the establishment, management, operation, and sustainability of a local Urban Health Observatory. Key inputs such as the various reports and documents that have resulted from previous work in this area, including the outcomes of the two consultations, will be provided by WKC. Additional research will need to be carried out by the contractor, for example, by conducting literature reviews, surveys of the target audience, key informant interviews, etc. to determine the necessary and appropriate content and format for the guide. Importantly, as this is intended for a global audience (i.e. WHO Member States and other relevant actors), the content of the guide must be made relevant and applicable to cities around the world to the extent possible.

The guide must be written in English. Tables, figures, images and other types of insets should complement the narrative text as appropriate. Formatting must follow the WHO style guidelines (to be provided by WKC).

2.2 DELIVERABLES & TIMELINE

The expected project start date is **1 December, 2013**. The target completion date is **31 March, 2014**.

Annotated Outline – 8 December, 2013

- An annotated outline - a detailed preliminary outline for the guide with main section headings and sub-headings. A brief description should be written about each section including its main purpose, how it will be developed, and what it contributes. Key references and inputs pertaining to each section should also be identified.

Progress Update – 5 January, 2014

- A brief report on progress made to date, especially noting any changes to the agreed project plan with justifications for those changes.
- An early draft and any other relevant materials developed, or in development, at this point.

First Draft – 2 February, 2014

- A first full draft of the guide, including an articulation of the next steps to be taken.

Second Draft – 2 March, 2014

³ Caiaffa WT, Friche AA, Dias MA, Meireles AL, Ignacio CF, Prasad A, Kano M. Developing a conceptual framework of urban health observatories toward integrating research and evidence into urban policy for health and health equity. *Journal of Urban Health*. 2013. doi:10.1007/s11524-013-9812-0.

⁴ UN-HABITAT. A Guide to Setting Up an Urban Observatory. Nairobi: UN-HABITAT, 2006.

- A second full draft which reflects edits and comments provided by WKC in response to the first full draft.

Final Document – 31 March, 2014

- The final guide formatted according to the WHO style guidelines. Suggestions for final layout and design of the guide should be included.

The deliverables noted above constitute the minimum requirement. Additional drafts may be submitted for review and comments by WKC, as necessary. After submission of each deliverable, WKC will review and comment on the product and discuss with the contractor the revisions that need to be made. Each deliverable must be approved by WKC before proceeding to the next stage. The contractor may consult WKC for guidance at any time in between the stages, subject to availability of the responsible officers.

2.3 PAYMENT SCHEDULE

The payment for the services provided will be made in multiple instalments conditional upon satisfactory and timely submission of required deliverables. The first instalment will consist of 50% of the total cost paid upon satisfactory submission of the first full draft (submission due on 2 February, 2014), and the second and final instalment will consist of the remaining 50% of the total cost paid upon satisfactory submission of the final document (submission due on 31 March, 2014).

2.4 COPYRIGHT

WHO will retain copyright to the final product.

3. TENDER FORMAT

3.1 INTENTION TO BID

Please forward within one week of receipt of this RFP a written acknowledgement confirming your intention to submit a proposal to Megumi Kano, by e-mail to kanom@who.int.

3.2 FORM OF RESPONSE

The proposal must be prepared in English as an electronic document and include:

1. **Cover letter** which identifies the individual authorized to commit to a contract and confirms the period of validity of the bid
2. **Description of qualifications**
 - Details of individual(s) proposed for the project (relevant experiences and references/clients)
 - Institutional affiliation/background of the individual(s)
3. **Writing sample (English):** a sample of previous work on projects of similar scope or nature
4. **Concept paper (500-1000 words)**
 - Project proposal including the methodological approach
 - Include expected limitations of the proposal, specifically the things that it cannot be expected to cover and why
 - Include, as applicable, comments on the scope of work and timeline described in this RFP
5. **Budget:** Financial breakdown of total expected cost in US Dollars including projected number of working days.

3.3 SUBMISSION OF PROPOSALS

Please send an electronic copy of the proposal as an attachment to an e-mail (with the subject heading “Proposal for UHO Guide”) to:

Megumi Kano
WHO Centre for Health Development (WKC)

Technical Officer, Urban Health
Email address: Kanom@who.int

Proposals must be received at the above address by **10 November 2013, 24:00 (GMT)**. Any proposal received after this date or sent to another address will not be considered. All proposal documents shall become the property of WHO and will not be returned.

3.4 EVALUATION OF PROPOSALS

Proposals will be evaluated on the basis of the best fit of the proposed solution to the defined requirements. Please note that WKC may use information other than that provided by the bidder in its evaluation, including, but not limited to, experience working with other UN organizations. WKC is not obliged to disclose such information to bidders.

Bidders will be evaluated against the following key criteria:

1. Overall quality of RFP response (e.g. communication, timeliness, adherence to instructions)
2. Applicant qualification (e.g. background, experience, writing samples)
3. Quality of the concept paper
4. Proposed budget

3.5 SELECTION NOTIFICATION

Selection results will be notified by **22 November, 2013**. WKC will not necessarily acknowledge the receipt of all proposals or explain its decisions.

3.6 BIDDER INQUIRIES

Any inquiries regarding this RFP should be referred to Megumi Kano by e-mail to Kanom@who.int.

3.7 CONFIDENTIALITY

All information contained in the RFP is confidential and considered to be the exclusive property of WHO. Recipients of this RFP are not to disclose any information contained within this RFP unless such information is publicly available. This RFP is provided for the sole purpose of enabling the invited bidders to develop a response.