

Project to Eliminate Cervical Cancer

Request for proposals for pilot grants: implementation of screening and prevention of cervical cancer in LMICs

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Project leads: Professor Sean Kehoe, Chair of the FIGO Gynecological Oncology Committee; Professor Joanna Cain, Past Chair and current member of WHO Guidelines Development Group (GDG) for elimination of Cervical Cancer; Professor Neerja Bhatla, member of FIGO Committee and WHO GDG; and Professor Mary Ann Lumsden, CEO FIGO

Project Contact: Francesca Hearing

RFPs should return completed forms to francescah@figo.org by **23.59 (UTC+1) on 31 July**. If you have any queries about the project or submission process, please contact francescah@figo.org

Project Overview

Each year over 500,000 women ¹ are diagnosed with cervical cancer, and over a quarter of a million die. More than 85% of these deaths occur in low- and middle-income countries. The WHO, along with many global partners, including FIGO, sees a path to the eradication of this deadly disease through an emphasis on vaccination and screening. However, gaps exist in professional and community education, sustainability of prevention strategies, and coordination of implementation in-country.

FIGO's new pilot project aims to develop evidence-based models on successful collaborative structures to facilitate the sustainable implementation of the WHO evidence-based guidance for vaccination and screening. The project will focus on three clear aims: 1. To identify gaps impacting present vaccination strategies; 2. To work with member societies to develop reproducible projects targeting collaborative introduction of a vaccination programme where none exists, or addressing underlying gaps in current rollout, and 3. To expand knowledge in addressing global implementation, with special but not exclusive interest in non-GAVI LMICs.

¹ Source: https://apps.who.int/gb/ebwha/pdf_files/EB146/B146_9-en.pdf

FIGO is calling for Requests for Proposals for Pilot Grants

We are calling for proposals for preliminary studies to act as pointers as to where efforts to achieve our aims will best be focused.

RFPs will propose an initial pilot to assess feasibility, define a potential road map or create policy to address one or both of the following aims:

Aim 1: Identify educational and professional gaps/ barriers impacting the implementation of present HPV vaccination and/ or screening strategies with development of a viable strategy or road map to address the gap/barrier.

Aim 2: Propose a project or an initiative known to be successful in a new setting or country that you would be able to trial in your country. This would require working with a FIGO National and/or Regional organisations that seek to target collaboration/education/facilitation of introducing a vaccination programme where none exists and/or addresses underlying educational, policy, or professional gaps that have hindered roll out of programs for vaccination and screening.

Examples that address these aims may include (but are not limited to):

- Addressing identified gaps/barriers such as ensuring maximum number of gynecologists are knowledgeable and support vaccination
- Advocating for comprehensive vaccination to professionals and society
- Helping identify and remediate gaps in provision of care including development of digital forms of data collection
- Education of women, girls, teachers, and other community and governmental leaders (videos, flip charts, mobile phone education programmes, etc.)
- Evidence based development of proposals for roadmaps or policy changes that could address the greatest gap/barrier to cervical cancer eradication in the area (for example transition from VIA to HPV testing; anti vaccination misinformation; etc.)

FIGO plans to award up to **4 grants at approximately £20,000 each**, or **£40,000 for combined regional applications**. These will be distributed globally to societies in lower-middle income countries (LMICs).

Selection process

The FIGO Committee for Gynecologic Oncology will score and rank the applications according to the criteria below and will forward their selection to the trustees.

Applicants will receive a final decision within 1 month of closure of submissions.

Selection will be made with consideration of the following criteria (not all are required):

1. The grant is targeting a gap/barrier in the screening and vaccination programs to which the society or region can uniquely and/or meaningfully contribute.
2. The grant shows commitment to engagement beyond the society membership to leverage other potential sponsors/ governmental/ societal levers.
3. The proposal may allow the society to move into position for further collaboration or funding for the program or roadmap developed.
4. The society has the organisational structure to deliver the proposed project in the timeline required.
5. Assessment of overall impact of the grant outcomes in addressing the identified barrier/gap in short- and long-term.

Requirements following grant receipt

The grantees' work will be supported by designated members of the FIGO Committee for Gynecologic Oncology, associated Gynecological Oncologists, and FIGO headquarters.

Successful applicants will be expected to provide upon grant receipt:

1. Interim reports, timing set by FIGO Committee for Gynecologic Oncology
2. Final plan at end of grant that details items such as: evaluation of project, engagement of stakeholders, impact on capacity building, and what the next steps to implement or adopt the grant focus will be.

Further grants may be available subsequently, based on success, needs and available funds, to enable grantees continue sustainable implementation of the pilot project.