

## Qualitative Interview Project on Reasons for Not Contracepting

### I. Project Overview

The National Campaign to Prevent Teen and Unplanned Pregnancy is seeking proposals to conduct qualitative interviews among unmarried community college students age 18 to 29 to explore their pregnancy intentions, contraceptive decisions and behavior as well as the reasons behind such decisions and behavior. ***Our primary emphasis is on the reasons why young adults not seeking pregnancy either don't use contraceptive methods or don't use them effectively.*** We also want to understand more about the young adults who are vigilant users of contraception.

***Above all, the proposed project must be structured to produce results that clearly suggest actionable strategies for promoting more effective use of contraception.*** The Campaign is familiar with the vast literature on contraceptive behavior, and the infinitely complex array of factors influencing contraceptive use. Therefore, to be successful, this project must go beyond simply highlighting the depth of those complexities. We do not expect these interviews will fully map all the factors affecting contraceptive outcomes; rather, interviews should focus primarily on barriers or potential solutions that seem most salient and actionable.

Based on this solicitation, the Campaign intends to award a firm fixed-price contract in mid-2008 for the design and fielding of these interviews, analysis of the data, and a thoughtful report that distills the themes and insights learned from these narratives. We expect the project will last a total of 15 months, and will include two waves of interviews with the respondents occurring roughly six months apart. Anticipated funding for this project is approximately \$400,000.

While our primary focus is why young adults not seeking pregnancy do not use contraceptive methods effectively, we recognize that pregnancy intentions and contraceptive behavior both occur along a continuum. Therefore, offerors are invited to propose in greater detail how the sample would best be defined in terms of contraceptive behavior and pregnancy intentions in order to meet the Campaign's primary objectives for this study. In addition, we are seeking input from offerors as to whether this study should focus on women respondents, women and men respondents, couples, or some combination thereof.

Topics to be explored during the qualitative interviews include how respondents characterize their pregnancy intentions, behaviors and decisions concerning sexual activity and contraception, the reasons they offer for those decisions and behaviors, their relationships, degree of planfulness and future orientation, the factors they feel might enable them to use contraceptive methods more effectively, and a limited number of basic socio-demographic characteristics. While offerors are not expected to present a complete literature review in their proposal, proposals should be grounded in existing research and a coherent conceptual/theoretical framework and should include a discussion of potential barriers to contraception as well as examples of potential remedial steps that these barriers might suggest.

Although this study will rely primarily on qualitative interviewing, offerors may suggest other efforts in combination with a qualitative interview approach, such as mixed mode strategies, that they feel would enhance the success of this project in meeting its practice-focused objectives.

## II. Background

Founded in 1996, the National Campaign has, until recently, focused exclusively on teen pregnancy prevention. Since the 1990s, teen pregnancy and birth rates have decreased dramatically (even taking into account the uptick in teen birth rates in 2006). But there has been less progress among young adults: their rate of unplanned pregnancy in 2001 is virtually identical to the 1995 level and is almost as high as the teen rate. While the *rate* of unplanned pregnancy is highest among teens, the largest *number* of such pregnancies is found among women 20 and over, and over 80 percent of abortions are to women 20 and above as well. As a result, the National Campaign has recently expanded its mission to address unplanned pregnancy, particularly among single, young adults, while remaining committed to preventing teen pregnancy as well.

The National Campaign's goal is to improve the lives and future prospects of children and families and, in particular, to help ensure that children are born into stable, two-parent families who are committed to and ready for the demanding task of raising the next generation. Our specific strategy for reaching this goal is to prevent teen pregnancy and unplanned pregnancy among single, young adults. We support a combination of responsible values and behavior by both men and women and responsible policies in both the public and private sectors. If we are successful, child and family well-being will improve. There will be less poverty, more opportunities for young men and women to complete their education or achieve other life goals, fewer abortions, and a stronger nation.

More effective use of contraceptive methods is critical to reducing the incidence of unplanned pregnancy. Approximately half of all unintended pregnancies occur to women who report using a method of contraception in the month of conception—about nine in 10 of these are estimated to result from inconsistent or incorrect method use. Among the other half of women having an unplanned pregnancy—that is, those who report they were *not* using a method of contraception—nearly half of them said that they did not think they could get pregnant.

However, these basic facts by themselves are not sufficient to point the way toward promoting more careful and consistent use of contraceptive methods. For example, we do not fully understand what is really meant when these women said they didn't think they could get pregnant; nor do we know how strategies to encourage use of contraceptive methods among those using no method at all may differ from strategies to encourage more effective use of contraceptive methods among ineffective users. We have an existing literature that highlights literally dozens of barriers to more effective use of contraceptive methods, yet the field struggles to put these various factors together in a way that suggests how to promote more effective use of contraceptive methods.

Please see **Appendix A** for a list of relevant articles and links to publications that speak to these issues. More about the National Campaign and its mission can be found at:

<http://www.thenc.org/>

### III. Project Details

Introduction. The efforts covered under this solicitation include the design and fielding of a series of qualitative interviews, an analysis of the interview results, and a report that presents and distills qualitative results as well as suggests potential strategies for ways to promote more effective use of contraceptive methods. The project will last for 15 months, with preliminary results from the first wave of interviews due within nine months.

Level of Funding. When contemplating study designs and developing their proposals, offerors should consider that we anticipate funding this project at a level of approximately \$400,000. This should, however, be considered a general guide rather than an absolute amount. It signals, for example, that we do not intend to fund a large-scale survey or to incorporate an intensive ethnographic/environmental portrait of the college communities (or other communities) within the study. As a general rule, the Campaign will view cost-effective proposals more favorably. However, our primary goal is to assemble a sample of interview responses that is sufficiently large and sufficiently rich that it can shed light on potential strategies for promoting more effective use of contraceptive methods, rather than simply produce an interesting collection of stories. Therefore, we will consider proposals above or below \$400,000 to the extent the offeror clearly demonstrates these are the costs necessary to meet this goal.

Target Population. As stated above, the target population envisioned for this study is unmarried community college students age 18 to 29. While the Campaign recognizes that unplanned pregnancy occurs among many different populations, we also recognize that trying to capture too broad of a population within a qualitative study is not feasible. To narrow the population, we have focused on community college students. This is because, while this population is diverse, it approximates a middle tier in terms of economic resources, future opportunities and aspirations, and intentional or planful behavior, and it is with this middle tier where we feel we have the greatest potential to reduce unplanned pregnancy. In addition, this focus complements ongoing work by the National Campaign to engage community colleges in the issue of preventing unplanned pregnancy as a way to meet the colleges' goal of increasing student retention and success. Note, however, that while we see community colleges as one strong approach for honing in on this middle tier of young adults, *the Campaign is open to proposals focusing on other populations that offerors feel would accomplish the mission of this project.*

While our primary interest is in identifying the reasons why adults not seeking to get pregnant do not use contraceptive methods effectively (or, sometimes, at all), we recognize that both contraceptive behavior and pregnancy intentions occur along a continuum. Contraceptive behavior ranges from consistent and effective use, to inconsistent and/or ineffective use, to no use. In terms of pregnancy intentions, adults may be clearly seeking to get pregnant or to avoid pregnancy, may have moderate pregnancy intentions, and may have feelings that are quite mixed or not well understood. This categorization does not lend itself to a simple set of screeners. Therefore the study should be based on a broadly defined sample of respondents, rather than screening strictly for those with definitive intentions to avoid pregnancy and/or those who use no contraceptive method at all. Offerors are invited to propose in greater detail how the sample would best be defined in terms of contraceptive behaviors and pregnancy intentions in order to meet the Campaign's primary objectives for this study.

Within this target population, offerors may propose to focus strictly on a sample of women, on a sample of women and men, on couples, or on some combination thereof. Each design will have inherent tradeoffs. For example, because targeting men will be an important component of any strategy to promote more effective use of contraceptive methods and there is much about male contraception behaviors and decision making that is unknown, it would be highly desirable to include both men and women in these interviews. Yet, splitting the sample of respondents between women and men may reduce the power of this study to offer robust observations about either group. Similarly, focusing on couples would be valuable because contraceptive decisions and behaviors are often strongly influenced by sexual partners. Yet, there are concerns that the sample of women and men who agree to be interviewed as couples is highly skewed, and that many women and men would not necessarily identify themselves as a part of a couple. Offerors should focus on the sample design they feel is best suited to the goals of this project.

Sampling Frame. There are several networks of community colleges already dedicated to increasing student retention and success that could be considered as possible sites for this research. For example, the Achieving the Dream: Community Colleges Count is a multiyear national initiative working with approximately 80 colleges in nine states to help more of their students succeed (for more information, see <http://www.achievingthedream.org/default.tp>). In addition, the Opening Doors demonstration project, launched by the Manpower Demonstration Research Project in 2003, is working with six community colleges in four states to study the effects of community college programs designed to help students persist in school and achieve greater academic and personal success (go to [http://www.mdrc.org/project\\_31\\_2.html](http://www.mdrc.org/project_31_2.html) for more information). The Opening Doors project has included a number of questions related to pregnancy, contraception and related issues in their survey of participating students.

Note that while colleges participating in these projects might be particularly interested in hosting research related to unplanned pregnancy prevention, these networks are offered as examples; the Campaign has not communicated directly with any of these schools pertaining to this project. We are certainly open to other sampling strategies as well, and, as discussed above, target populations other than community college students.

Interview Timing. We anticipate interviews will be conducted with each respondent twice, approximately six months apart. The goal of this second round of interviews is to highlight interesting changes in status with respect to relationships, sexual activity or contraceptive behavior, as well as inconsistencies between intentions expressed in one period and behavior or situations observed in the next. Offerors may propose alternate spacing interviews that they feel would capture these changes over time while still maintaining sufficient connection between interviewer and respondent as well as accommodating a 15 month project period.

Interview Content. Topics to be explored during the qualitative interviews include the following: where along the continuum of pregnancy intentions respondents fall; how respondents would characterize their sexual activity and decisions concerning sexual activity; how consistently or effectively they use contraceptive methods; the reasons governing their contraceptive decisions and behavior; what factors respondents feel might enable them to use contraceptive methods more effectively; how respondents would characterize their relationships and interaction with sexual partners; degrees of self efficacy, planfulness and future orientation; and basic demographic characteristics such as age, race, educational attainment, family composition and socio-economic status. In discussing these topics, offerors should describe what time period they

think is most relevant to probe (e.g. sexual activity during the last month, during the last year, or during the last five years), and how the interview structure between the first and second waves of interviews might differ.

In exploring barriers to contraception and potential solutions, interviews should focus both on increasing use of contraceptive methods among those who use no method and on improving use of contraceptive methods among those who use it ineffectively or inconsistently. Exploring the factors respondents feel might help them use contraceptive methods more effectively is particularly important given that the goal for this study is to go beyond the existing literature and produce results that suggest actionable strategies for promoting more effective use of contraceptive methods. We are also interested in learning more about young adults who use effective contraceptive methods consistently, and their narratives might suggest strategies for improving use of contraceptive methods among young adults.

Proposed Methods. We recognize that a primary value of qualitative interviewing is its ability to elicit a story that often provides deeper insights on complex issues and perhaps a more frank discussion of socially sensitive topics than might be possible with national surveys. Therefore, in discussing interview approach and structure, ***proposals should go beyond simply offering a list of interview topics.*** In addition, offerors will need to discuss how they will employ methods of qualitative interviewing to elicit insightful narratives that can make a unique contribution to our understanding of barriers to better contraceptive use and potential solutions.

While this study will focus primarily on qualitative interviewing, offerors may suggest other efforts they would combine with qualitative interviews, such as mixed mode strategies, that they feel would enhance the success of this project in meeting its practice-focused objectives.

Additional Details and Key Considerations. The list below describes other key considerations pertaining to the design and fielding of this project that should be addressed when developing proposals for this solicitation:

- It is already well known that the constellation of factors influencing contraceptive decisions and outcomes is complex—a key goal of this project is to go beyond simply documenting this complexity further or creating interesting narratives, and to produce actionable findings suggesting strategies for promoting more effective use of contraceptive methods.
- However, we do not expect these interviews will fully map the complete array of factors that influence contraceptive outcomes; nor do we expect to fully plumb the depths of young adults' contraceptive psyches. While it will be important to gain some understanding of the interaction between personal and environmental factors, our goal is to focus most intently on barriers or potential solutions that seem most salient and actionable. Classic barriers already explored in the literature, such as access and cost, are of as much interest as new and undocumented barriers.
- Interviews must go beyond simply confirming particular barriers or solutions, and must elicit genuine feedback on the barriers or solutions respondents themselves feel are most critical.

- Although the richness of qualitative interviews owes in part to their flexible and open-ended nature, interviews must be structured in a way that allows for the identification of key themes across narratives and over time. Sufficient resources and thought must be dedicated to the effort of interpreting and presenting the findings from these interviews.
- Interview design and implementation must meet rigorous standards for protecting data confidentiality and protection of human subjects, and must meet IRB approval. Offerors are responsible for identifying the IRB they would work with.
- Contractor should anticipate working closely and collaboratively with the Campaign as well as members of its research advisory panel during all phases of work.
- The success of qualitative interviews owes in large part to the skills of the interviewer in gaining the trust of the respondent and raising sensitive topics. Therefore, the offeror should discuss in detail who will be conducting the interviews or, if interviewers are not yet identified, how the interviewers will be selected and trained.

#### IV. Instructions for Submitting Proposal

**Letter of Intent Requested:** Organizations intending to submit a proposal are strongly encouraged to first submit a letter of intent. Letters of intent can be brief, (one page), and need only provide a general overview of the proposed project. Letters of intent are purely for aiding the Campaign's planning efforts, and will not be a factor in screening or scoring proposals.

**Due Date for Letters of Intent:** Letters of intent are requested by 4:30 p.m., EST, June 5, 2008.

**Due Date for Full Proposals:** Proposals must be received no later than 4:30 pm, EST, June 23, 2008. To the extent that proposals are deemed incomplete but received at least 48 hours prior to the submission deadline, the Campaign will seek to notify those offerors and provide them the opportunity to address the gaps in their application prior to the deadline; however the Campaign makes no guarantees in this regard. *Proposals received after the submission deadline will not be considered for funding under this solicitation.*

**Contact Person:** Katy Suellentrop, Senior Manager of Research Programs, will be the Project Officer for this contract. Questions about this solicitation may be directed to Ms. Suellentrop at 202-478-8515 or [ksuellentrop@thenc.org](mailto:ksuellentrop@thenc.org).

**Method of Submission:** Proposals may be submitted via hard-copy or electronically. However, the Campaign is not responsible for any difficulties encountered by the applicant in transmitting electronic files.

Hard copy files may be mailed to or delivered to:

The National Campaign to Prevent Teen and Unplanned Pregnancy  
Attn: Katy Suellentrop  
1776 Massachusetts Ave., NW  
Washington, DC 20036

Electronic files must be in Word or PDF format and may be e-mailed to:  
[ksuellentrop@thenc.org](mailto:ksuellentrop@thenc.org)

E-mail submissions should include the words “Qualitative Interview Proposal” in the subject line.

Offerors may also wish to consult [http://www.thenationalcampaign.org/fund/rfp\\_open.aspx](http://www.thenationalcampaign.org/fund/rfp_open.aspx) where a list of frequently asked questions and responses regarding this solicitation will be posted.

**Available References:** Offerors are encouraged to consult the references listed in Appendix A or other materials related to reproductive health decisions and outcomes in preparing their proposals.

**Content of Proposal:** Proposals must adhere to the following specifications regarding content and format. *Offerors whose proposals do not fully meet these specifications at the time of the submission deadline will be scored less favorably:*

- A cover page, clearly stating the name and contact information of the applicant and any proposed partners, a one paragraph summary of the proposed study and the total cost.
- A table of contents that clearly identifies each section and each attachment.
- A proposal narrative of no more than 30 pages double spaced (1 inch margins, 12 point font). Note that only the first 30 pages of proposal narrative will be considered in reviewing the application. Proposal narrative must include the following sections:
  - Description of proposed study design and methodology, including sample design and interview structure, as well as efforts to recruit respondents, develop and conduct interviews, code and analyze data, and present results.
  - Work plan for all proposed efforts, including a time line for key milestones and deliverables, based on a 15 month performance period overall and a nine month period for delivering preliminary results from the first wave of interviews.
  - Budget and budget justification for the proposed work, broken out by major task and cost category (e.g. labor, other direct and indirect costs).
  - Staffing plan, including summary of qualifications for key personnel, their role and proposed time commitment to this project. Discussion of interviewer qualifications, or, if not yet identified, how interview staff will be selected and trained, is critical.
  - Description of organizational capabilities relevant to this project, including capacity to field major, high quality interview or survey projects with limited start-up time.

- All necessary attachments. Attachments shall include:
  - CV's for all key personnel proposed for this project
  - Letters of commitment for any outside organization proposed to play a role
  - One-page summaries of other qualitative interview projects completed successfully

**Additional guidance on presenting proposed study design and methodology.** The National Campaign recognizes that designing a major qualitative interview project requires significant effort, and expects that some of this effort will occur *post-award*. Therefore, applicants are *not* expected to submit as part of their proposals complete specifications for interview guides, sample designs or analysis plans. However, the proposal must describe the structure and scope of proposed efforts in sufficient detail for reviewers to assess whether it meets the Campaign's objectives for this project and satisfies the key considerations described above, and whether it is reasonable relative to the budget proposed. Furthermore, offerors must clearly demonstrate in their proposals that they possess the level of expertise and thorough understanding of activities necessary to implement such a study. Details of proposed study design and interview content must be presented within a coherent conceptual framework, and offerors should include hypotheses regarding the potential barriers to contraception they think respondents might focus on and examples of potential actions steps that these barriers might suggest. Specifically, applicants should include in their discussion sufficient detail on:

- Proposed interview structure. While this does *not* have to include fully specified interview guides, it should include a description of topics to be covered, how qualitative methods will be used to explore these topics, and how the structure of interviews may vary between waves, or among adults who use no contraceptive methods, those who use contraceptive methods inconsistently or ineffectively, and those who use contraceptive methods vigilantly. Discussion should be grounded in a conceptual framework based on existing research, and offerors are invited to propose interview topics beyond those mentioned in the RFP that the research suggests are critical
- Proposed sample design must describe in detail how characteristics regarding contraceptive behavior and pregnancy intentions will factor into the selection of respondents, as well as whether the sample will focus on women, women and men, or couples. Competitive proposals will discuss the tradeoffs of various options and why the proposed design is best suited to meet the Campaign's objectives for this project.
- Proposed sampling frame must describe the number of community colleges to be approached, how those colleges will be chosen, (or other sampling units if community college students is not the target population) how potential respondents will be identified and the number of completed interviews expected.
- Proposed study design and budget should factor in "warm-up" efforts—that is, any efforts the offeror feels are needed to introduce the study and foster sufficient trust among respondents given the sensitive nature of the interviews.

- Proposed efforts to safeguard data confidentiality and protect human subjects, including plans to secure IRB approval must be included in timeline and budget (note that offerors are responsible for identifying an IRB to work with).
- Proposed efforts to transform interview responses into qualitative data and to analyze those data in a way that highlights critical themes and actionable findings.

## V. Scope of Work

Below is the list of tasks the National Campaign anticipates will be completed under this project. Note that all deliverables under this contract will be subject to project officer approval. These tasks should factor into applicants' proposals and budgets accordingly:

### Task 1. Project Initiation, Planning, and Management.

- 1.1 Review of background materials, particularly research findings or interview guides pertaining to contraceptive decisions and behavior that the contractor is not already familiar with.
- 1.2 Hold meetings with the National Campaign, including an initial project meeting as well as interim and final briefings in Washington DC, monthly conference calls between the contractor and the National Campaign, and additional correspondence with the Campaign as needed.
- 1.3 Submit final project work plan, including timeline, milestones, deliverables and staffing, based on plan submitted in original proposal and subsequent revisions agreed to by the National Campaign and contractor.
- 1.4 Monthly reports listing progress toward milestones and challenges encountered. Approximately 1 page and can be submitted via e-mail.

**Task 2. Finalize Design of Qualitative Study** based on original proposal and subsequent discussions or developments post award.

- 2.1 Finalize sample design and sampling plan. Sampling design and sampling plan shall be documented in terms of characteristics of respondents to be sampled, which community colleges (or other sampling units) to be targeted, how potential respondents will be identified, timing of interviews, number of completed interviews expected, and other details as relevant.
- 2.2 Finalize interview procedures. Include methods for contacting respondents and methods to enhance proportion of completed interviews, as well as procedures to safeguard data confidentiality.
- 2.3 Develop qualitative interview guides, based on the conceptual model developed in the proposal, existing research on contraceptive decisions and behavior, as well as input from the National Campaign and other advisors. Interview guides shall be developed

that address the key questions of interest to the Campaign and that appropriately reflect the chosen sample design—specifically the composition of the sample with respect to gender, pregnancy intention and contraceptive use. Interview guides shall focus particular attention on exploring the barriers to contraception that seem most actionable and on the factors that respondents think might help them use contraceptive methods more effectively. Contractor shall take into consideration how the content for the first and second round of interviews might differ.

- 2.4. Finalize plans for any additional information gathering activities. (if relevant)
- 2.5. Obtain IRB approval. As the Campaign does not have an IRB, contractor will be responsible for accomplishing this through its own channels. Make any revisions to study plan as needed per IRB.

### **Task 3. Field Interviews**

- 3.1 Recruit (if necessary) and train interviewers to ensure they have the necessary skills to conduct interviews, including familiarity with interview guide, skills needed to successfully complete qualitative interviews, issues related to gathering sensitive information, and other skills as relevant. Provide ongoing assessment of interviewer quality and implement any corrective action needed.
- 3.1 Contact respondents and conduct interviews, as well as all other activities detailed under Task 2. Efforts shall consist of two rounds of interviews with the respondents approximately six months apart.
- 3.2 Provide ongoing assessment of interview strategies and progress, and take corrective action as appropriate. Provide detailed field report to project officer approximately mid-way through first round of interviews, outlining progress, concerns thus far, and any need for corrective actions.

### **Task 4. Analyze Responses**

- 4.1 Transcribe data. Transform interview responses into qualitative data through the construction of narratives and other efforts as agreed to in final work plan.
- 4.2 Analyze data using standard qualitative methods. Identify salient themes across narratives and over time, summarize key outcomes and characteristics, and distill responses in terms of implications for promoting more effective contraception. Draft summary memo with preliminary findings from first round of interviews within nine months of project start.

### **Task 5. Project Summary Document**

- 5.1 Submit draft outline describing how the project summary document will be organized. Content areas should include, at a minimum, a brief overview of existing research on contraceptive decisions and behavior as it relates to this project, the conceptual framework that guided this study, information on study design and methodology, results

from distillation of narratives and qualitative analyses, and implications for concrete strategies to promote more effective contraception. Revise as needed.

5.2 Submit draft report based on final outline.

5.3 Submit final report and revise as needed.

## VI. Period of Performance and Contract Structure:

The anticipated performance period under this contract will be 15 months from date of award, with initial summary tabulations of data from the first round of interviews expected within nine months of award. This will be a firm fixed price contract.

## VII. Evaluation Criteria For Award

In reviewing applications, methodology and approach, staffing and personnel, budget and workplan, and organizational capacity will all factor prominently. The criteria to be used in reviewing applications and their relative importance are discussed in more detail below:

	Points
Methodology and Conceptual Approach	35
Staffing/Personnel Expertise and Experience	35
Budget and Work Plan	15
Organizational Capacity, Facilities and Equipment	10
Adherence to RFP requirements	5
<b>TOTAL</b>	<b>100</b>

### **Methodology and Conceptual Approach (35 Points Maximum)**

Proposal should describe all activities related to study design, fielding interviews, analysis of responses, distillation of narratives and presentation of results in sufficient detail to demonstrate that the proposed effort would result in a successful study that meets the National Campaign's project goals and addresses the key considerations described above. Discussion of proposed study design should be grounded in a coherent conceptual framework. Proposal must include discussion of efforts to secure IRB approval and protect data confidentiality.

### **Staffing/Personnel Expertise and Experience (35 Points Maximum)**

Applicant's staffing plan and description of key personnel should clearly reflect an understanding of the type of team needed to carry out a project of this scope at all personnel levels, and should demonstrate that key personnel collectively have expertise not only with respect to fielding qualitative interviews, but also with respect to studying reproductive health decisions and behavior. Staffing plan should clearly state the role and time commitment of all key personnel and summarize their relevant expertise. CV's for all key personnel should be included as attachments. Describing the qualifications of interviewers or, if not yet identified, the selection and training of interviews is critical.

**Budget and Work Plan****(15 Points Maximum)**

Proposed budget and work plan should include sufficient detail to demonstrate that applicant understands the resources and efforts needed to successfully complete a study of this scope and complexity. Budget narrative should delineate costs by major task and category of expense (e.g. labor, other direct and indirect) and demonstrate that they are reasonable and proposal is cost-effective. As noted above, the Campaign anticipates funding of approximately \$400,000 for all expenses incurred under this project, but this should serve as a general guide only, and proposals above or below this amount will be considered provided the costs are fully justified. Work plan should include a timeline and demonstrate that applicant can successfully complete all project deliverables within 15 months and provide a summary of results from first wave of interviews within nine months.

**Organizational Capacity, Facilities and Equipment (10 Points Maximum)**

Proposal should clearly demonstrate that the applicant and any partnering organizations collectively have the capacity necessary to develop and field a study of this scope. If applicant is partnering with other organizations, the unique role of each partner should be described and letters of commitment for each partner should be included as attachments. Proposal should include a brief summary of other relevant qualitative interview efforts the applicant and any partners have completed and include a one page description of each effort in the attachments.

**Adherence to Requirements Expressed in RFP (5 Points Maximum)**

Proposal should adhere to all formatting and content requirements described under section IV of this Request for Proposals. Proposals that are incomplete or improperly formatted will be scored less favorably. If information critical to assessing a proposal's technical merit is missing, proposal may lose points not only under this criterion, but under other criteria as well. Proposals that are not received by the deadline will not be considered for funding under this solicitation.

**VIII. Further Considerations in the Award Process**

The National Campaign will only consider those applicants that score highly based on the criteria above. However, the Campaign will not necessarily choose the recipient based on exact rank ordering of scores. While the National Campaign anticipates awarding a survey contract pursuant to this solicitation in 2008, it reserves the right to make no award if no suitable applications are received or if other unforeseen circumstances arise.

**Rights in data.** All data derived and findings tabulated from interviews conducted during the contract period become the property of the Campaign. However, upon the contract's completion and the Campaign's initial public release of summary findings, it is the Campaign's intent that the contractors would then have full discretion to complete and submit for publication further analyses they feel are informative.

**Appendix A: Examples of Articles on Topics Related to Contraceptive Use****General Information about Teen and Unplanned Pregnancy and Contraceptive Use**

Abma JC, Martinez, GM, Mosher, WD., Dawson BS. (2004). Teenagers in the United States: Sexual activity, contraceptive use, and childbearing, 2002. *Vital Health Statistics*, 23(24).  
[http://www.cdc.gov/nchs/data/series/sr\\_23/sr23\\_024.pdf](http://www.cdc.gov/nchs/data/series/sr_23/sr23_024.pdf)

Chandra, A, Martinez, GM, Mosher, WD, Abma, J, and Jones, J (2005). Fertility, Family Planning, and Reproductive health of U.S. Women: Data from the 2002 National Survey of Family Growth, *Vital Health Statistics*, 23 (25). [http://www.cdc.gov/nchs/products/pubs/pubd/series/sr23/pre-1/sr23\\_25.htm](http://www.cdc.gov/nchs/products/pubs/pubd/series/sr23/pre-1/sr23_25.htm)

Finer, LB and Henshaw, SK (2006). Disparities in Rates of Unintended Pregnancy in the United States, 1994-2001. *Perspectives in Sexual and Reproductive Health*, 38 (2): 90-96;  
<http://www.guttmacher.org/pubs/psrh/full/3809006.pdf>

Frost, JJ, Singh, S and Finer, LB. (2007). U.S. Women's One-Year Contraceptive Use Patterns, 2004, *Perspectives on Sexual and Reproductive Health*, 39 (1): 48-55.  
<http://www.guttmacher.org/pubs/psrh/full/3904807.pdf>

Kost, K., Singh, S., Vaughan, B., Trussell, J., Bankole, A. (2008) Estimates of Contraceptive Failure from the 2002 National Survey of Family Growth, *Contraception*, 77(1): 10-21;  
[http://www.ncbi.nlm.nih.gov/pubmed/18082661?ordinalpos=1&itool=EntrezSystem2.PEntrez.Pubmed.Pubmed\\_ResultsPanel.Pubmed\\_RVDocSum](http://www.ncbi.nlm.nih.gov/pubmed/18082661?ordinalpos=1&itool=EntrezSystem2.PEntrez.Pubmed.Pubmed_ResultsPanel.Pubmed_RVDocSum)

Mosher, WD, Martinez, GM, Chandra, A, Abma, J, and Wilson, S. (2004). Use of Contraception and Use of Family Planning Services in the United States: 1982-2002, Advance Data from Vital and Health Statistics, Number 350;  
<http://www.cdc.gov/nchs/data/ad/ad350.pdf>

**Reasons for Contraceptive Nonuse**

Ayoola, AB., Nettleman, M and Brewer, J. (2007) Reasons for Unprotected Intercourse in Adult Women, *Journal of Women's Health*, 16 (3).  
[http://www.ncbi.nlm.nih.gov/pubmed/17336821?ordinalpos=4&itool=EntrezSystem2.PEntrez.Pubmed.Pubmed\\_ResultsPanel.Pubmed\\_RVDocSum](http://www.ncbi.nlm.nih.gov/pubmed/17336821?ordinalpos=4&itool=EntrezSystem2.PEntrez.Pubmed.Pubmed_ResultsPanel.Pubmed_RVDocSum)

Bedimo, AL, Bennett, M, Kissinger, P and Clark, RA (1998). Understanding Barriers to Condom Usage Among HIV-Infected African American Women, *Journal of the Association of Nurses in AIDS Care*, 9 (3): 48.  
<http://www.ncbi.nlm.nih.gov/pubmed/9589420>

Bell, D.C., Trevino, RA, Atkinson, JS and Carlson, JW. (2003). Motivations for condom use and nonuse, *Clinical Laboratory Sciences*, 16 (1): 20-33.  
[http://findarticles.com/p/articles/mi\\_qa3890/is\\_200301/ai\\_n9233880](http://findarticles.com/p/articles/mi_qa3890/is_200301/ai_n9233880)

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