Invitation for Proposals

| UNFPA, United Nations Population Fund, an international development agency, invites interested organizations to submit proposals forresearch initiatives focused on addressing critical gaps in two interlinked areas in India. The proposal is sought for two research projects are:   1. **Reimagining Elder Care Economy in India; and** 2. **Gender and Climate Change**   Both studies will generate actionable, evidence-based recommendations to guide policy and practice.  The purpose of the Invitation for Proposals is to identify eligible non-governmental organizations and academic institutions for prospective partnership with UNFPA India Country office to support achievement of results outlined in the 2023-2027 DP/FPA/CPD/IND/10. The organization may submit for one or both the proposals depending upon their areas of expertise.  This Invitation for Proposals is contingent upon the successful conclusion of an agreement with the partner. UNFPA reserves the right to revise or withdraw the call for proposals based on this agreement.  Organizations that wish to participate in this Invitation for Proposals are requested to send their submission through email clearly marked “NGO Invitation for Proposals” at the following address UNFPA India Country Office: bids.india@unfpa.org  By 12 February 2025, 23:59 hours IST.  Proposals received after the date and time may not be accepted for consideration.  Proposals must be submitted in English.  Any requests for additional information must be addressed in writing by 28 January 2025, 23:59 hours IST at the latest addressed to Operations Manager, *bids.india@unfpa.org.* UNFPA will post responses to queries or clarification requests by any applicants through emails to the concerned parties before the deadline for submission of proposals.  UNFPA shall notify applying organizations whether it is considered for further action.  Please see [Working with UNFPA: Key information for UNFPA Implementing Partners on completing the Protection from Sexual Exploitation and Abuse (PSEA) Assessment](https://www.unfpa.org/sites/default/files/admin-resource/Working_with_UNFPA_Key_information_for_IP_on_PSEA_Assessment_Nov2020.pdf). |
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| **Section 1: Background** | |
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| 1.1 UNFPA mandate (250 Words) | UNFPA is the United Nations sexual and reproductive health agency. Our mission is to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled. |
| 1.2 UNFPA Programme of Assistance in India Country office (250 Words) | In the India Country Office, UNFPA works with the government and other partners to achieve the overall goal of the 2023-2027 DP/FPA/CPD/IND/10.  Further information on the programme can be found on <http://unfpa.org/India>] |
| 1.3 Terms of reference | **I. Reimagining Elder Care Economy in India**   1. **Background and Rationale**   India’s elderly population faces complex socio-economic challenges, particularly older women, who are often marginalized due to their gender, age, and socio-economic status. According to UNFPA’s India Ageing Report 2023, the feminization of aging—where older women face social exclusion and financial dependency—is compounded by a lack of adequate elder care infrastructure, especially in rural regions. There is a growing gap between the demand for services and the supply of quality care, with limited governmental policies to address this issue.  India’s elderly care system faces significant challenges due to a lack of comprehensive data on the health status and specific needs of older adults. Over 90% of elderly care is provided informally, resulting in a mismatch between the care provided and the actual needs of seniors. This informal care sector lacks quality standards, which exacerbates the issue. Geographic disparities further complicate the problem, with urban areas experiencing higher demand for care services that are not adequately met. There is also a severe shortage of trained caregivers, driven by low wages, poor working conditions, and inadequate training programs, limiting access to quality care. Additionally, the variability in the quality and cost of both formal and informal services makes it difficult for families to find reliable and affordable options. The absence of reliable, comprehensive data on the elderly population prevents policymakers and service providers from accurately identifying the specific needs of this growing demographic, hindering effective solutions and policy interventions.   1. **Objective**   The proposed research aims to address the critical gaps in India’s elderly care economy, which is characterized by significant imbalances in the availability, quality, and accessibility of care services. With the elderly population projected to increase significantly in the coming decades, understanding the key challenges and identifying data-driven solutions is crucial.  This needs assessment aims to identify the most pressing needs of elderly people in India and to develop recommendations for improving their care.  The specific objectives are:   * To identify the most common health problems and social challenges faced by elderly people in India * To assess the availability and quality of care services for elderly people in India * To develop recommendations for improving the care of elderly people in India  1. **Scope of work**   The research will adopt a mixed-methods approach to generate actionable insights, combining quantitative data analysis with qualitative research to assess the full scope of the elder care landscape in India. Following steps are proposed:   * Review of existing research studies, reports, and government documents on the status of elderly care in India * Interviews with healthcare professionals, policymakers, and other stakeholders to gather their perspectives on the care of elderly people in India * Analysis of existing secondary data from large scale surveys (LASI, NFHS, NSSO) to understand health, social and economic needs of the older persons and their perceptions about the quality of care * Depending upon the data gaps, conduct a survey of elderly people from diverse backgrounds to identify the most pressing needs and extent of unmet needs of required care of elderly people in India. This could be done in states where demographic transition is completed and ageing has emerged as an issue e.g. Tamil Nadu and Kerala, states which will age rapidly e.g. West Bengal and Odisha and a state where ageing issues are far away e.g. Uttar Pradesh and Bihar. * Assessing the status of home care for the elderly in India, as due to increasing cost of institutional care, the desire to keep loved ones close to home, and the growing availability of home care services. Different types of home care services include personal care services such as bathing, dressing, and grooming; nursing care services, such as medication management and wound care’ home health aide services, such as cooking, cleaning, and laundry; and companionship services, such as providing conversation and activities etc. * Role of NGOs and CSOs in elderly care in India * Estimating market size of elderly care needs and contribution to the GDP * Potential innovations in product and services for the elderly care and boosting start-ups * Economic contributions by elderly themselves for care support * Identification of key issues and challenges faced by elderly people in India * Exploration of potential solutions to improve the care of elderly people in India * Preparation of a comprehensive report that summarizes the findings of the needs assessment study * Preparation of policy briefs * Development of recommendations for improving the care of elderly people in India * Dissemination of the report and policy briefs to policymakers, healthcare professionals, and other stakeholders  1. **Expected deliverables**   The needs assessment study of elderly care in India will have a significant impact on the understanding of the challenges and opportunities in this area. The study will facilitate raising awareness of the specific needs of older persons and the importance of geriatric care. It will also provide valuable data and information on the current status of elderly care services in the country and in its different regions together with the identified gaps in service provisions. The study will also help to strengthen the voice of older persons as they are now more likely to speak out about their needs and to demand better care. Following are the deliverables   1. **Comprehensive needs assessment conducted** in service provision for elderly individuals, informing targeted interventions and resource allocation. 2. **Service access and quality evaluated** leading to evidence-based recommendations for enhancing service delivery. 3. **Care improvement recommendations developed** based on the identified health problems, self-care needs, and social challenges faced by older adults. 4. **Stakeholder engagement established** among policymakers, healthcare providers, and community organizations through co-convenings, roundtable dialogues, and workshops, aimed at jointly addressing elder care needs and resources to drive effective solutions. 5. **Indicators [Indicative]**    * + 1. Review of existing literature on elder care in India completed        2. Secondary analysis of quantitative data from large scale surveys conducted to assess the demand for elder care services        3. A design of the needs assessment study through primary data evolved        4. Relevant information from stakeholders and respondents collected        5. Report on the need assessment of the elder care prepared        6. Policy brief on the elder care needs and way forward finalized        7. Consultative and dissemination events organized 6. **Duration**   The total duration of the research initiatives on the Elder Care Economy will be 24 months. The first six months will serve as the inception period, dedicated to laying a robust foundation through strategic planning.  **II. Gender and Climate Change**   1. **Background and Rationale**   India is home to the most people exposed to climate change impacts, with hazards such as high temperatures and heatwaves, erratic rainfall and droughts, floods, cyclones, desertification, and sea level rise affecting different parts of the country. The Ministry of Earth Sciences estimates that since 1901, India has warmed by 0.7°C (Krishnan et al. 2020), and this warming coupled with urbanization, changing livelihoods in rural areas, social and demographic change, and technological advancement, has characterized growing exposure and vulnerability to climate risks.  Climate change impacts are not experienced equally and vulnerability to climate change is deeply mediated by an intersection of gender, age, location, livelihoods, and capacities to adapt (Rao et al. 2019; Prakash et al. 2022). Women often face higher risks and greater burdens of climate impacts to their livelihoods, health, safety, and security, due to existing roles within and beyond the household and cultural norms around work and care (MSSRF 2024; IPCC 2022; Sellers 2016). Women and children are 14 times more likely than men to die in a disaster, and the stronger the disaster, the stronger this effect on the gender gap in life expectancy (Neumayer and Plümper, 2007).  Women also bear the brunt of climate-augmented food and nutritional insecurity and increasing work burdens, resulting in physical health issues and impacts on mental health and emotional well-being (WHO 2014), such as through intimate partner violence (Dehingia 2024). Women face heightened exposure to climate-related risks, such as extreme weather events, migration, and health impacts (including on sexual and reproductive health), due to their limited resources and lack of decision-making power. At the systems level, governance challenges related to climate change management include the absence of sex-disaggregated data, which hampers the development of targeted policies and actions. Furthermore, translating research into practice remains a significant hurdle.  Climate change has often been viewed through environmental or economic lenses, overlooking its social impacts, especially on women. Addressing this gap would benefit not only vulnerable women and girls but also the institutions that shape climate resilience strategies.  While there are several disparate reports on gender and climate change (either for specific states or specific sectors such as agriculture), a comprehensive synthesis for India is missing. In the absence of such an evidence-based assessment, climate and health policy in India has an incomplete engagement with gender-related issues (e.g., women only understood as highly vulnerable but no recognition of their agency). The evidence synthesis will also identify key knowledge gaps and policy entry points, which will serve as inputs in the policy and research impact parts of the proposed project.   1. **Objective**   Given this context of climatic-environmental change, and socio-economic- demographic transitions in India, UNFPA proposes solutions-focussed research to map the landscape of gendered impacts of climate change in India, focussing on how changes in the social-ecological system are leading to perverse health outcomes, differential vulnerability of migrants, and shifting work and care burdens for women and children. Starting from current national and state-level policies and programmes in India, the research will use primary and secondary evidence to map barriers, synergies, and opportunities for achieving key SDG outcomes and implementing systems change.   1. **Scope of work**   It is proposed to use a social-ecological systems (SES) framework to conceptualise evidence generation. This framework posits that social systems (gender, livelihoods, health) and ecological systems (environmental and climate change impacts on natural systems, natural resource-based livelihoods) are intrinsically linked, interacting with, and impacting each other, in dynamic ways. The study will use robust ways to map the research and policy landscape of gender, climate change, health, and livelihoods drawing on multiple lines of evidence.  To develop a holistic understanding of changes and interactions in various social-ecological systems across India, it is proposed to sample study areas, jurisdictionally divided by state boundaries, from different agroclimatic zones, which captures a range of geographic variations and climatic hazards on the ecological side that intersect with a diversity of livelihoods, gendered norms, and institutional arrangements from the social side. (*Based on geographic, ecological, and social diversity, it is proposed to select from eight states: Himachal Pradesh, Assam/Meghalaya, Odisha, Tamil Nadu, Kerala, Karnataka, Bihar, and Rajasthan*).  Focusing on the gendered impacts of climate change, it is proposed to examine the outcomes of existing policies and schemes at national and subnational scales on sexual and reproductive health and livelihoods outcome indicators. Thus, the proposed project scopes the gap between the additional stress climate change is posing to health and livelihoods, and the potential outcomes of current policies and programmes.  The study proposes to use a suite of five methods to generate evidence towards impact.   1. **Literature review:** Rapid evidence mapping of the climate change and gender literature in India using systematic review protocols. The review will map current evidence, knowledge gaps, regional differences, and solutions proposed. 2. **Secondary data analysis:** A macro-level understanding of the gendered impacts of climate change through outcomes on sexual and reproductive health and livelihoods. This requires integrating multiple datasets due to the scattered and sparse nature of data available in India. 3. **Review of programmes and policies** at national, state, and city levels, and of selected state-level budgets to understand policy priorities and financial allocations for gender and climate change. This mapping will examine the extent to which programmes and policies enable safe, gender-inclusive, and climate-resilience and whether health and livelihood outcomes are tracked and evaluated. The review will focus on six categories (climate change, gender, health, social security, migration, and food and nutrition) and conduct content analysis to answer questions about the aims and rationale of interventions, modes of operationalisation and implementation, target groups and who is deemed vulnerable, and links to SDG and gender/health outcomes. 4. **Primary data collection** through Key Informant Interviews with decision and policymakers in select states across different climatic and agro-ecological zones, and levels of economic development. The interviews will help understand state priorities on climate change and gender, capture gaps and challenges in the conceptualisation and implementation of policies and programmes, and identify opportunities to engage with the SES framing and systemic change towards meeting select SDGs. 5. **Stakeholder and partner engagement:** Engaging with key stakeholders through multiple formats including key informant interviews, one on one discussions and stakeholder and partner convenings in a few states involving key sectors such as government departments of environment, health, women and child welfare, labour, government health officers, key NGOs working on climate change, and other academic institutions and think tanks working on relevant sectors and themes. The stakeholder engagement process will be built on a participatory approach that emphasizes co-creation with key community actors, government bodies, NGOs, and other relevant stakeholders. By engaging these stakeholders from the outset, the research initiative will make an attempt to reflect the most current thinking in the field of climate change mitigation and highlight the needs and priorities of the communities most affected by climate change. 6. **Convening of policy dialogues** based on the findings of the study to promote discussions on how climate policy and financing can integrate gender equality and intersectional perspectives. 7. **Expected deliverables** 8. One national consultation and 2-4 regional consultations 9. Interim outputs - literature review, conceptual diagram 10. One comprehensive report with an accompanying policy brief, drawing on geospatial, quantitative, and state-level data 11. **Indicators [Indicative]** 12. A comprehensive literature review competed 13. Secondary data analysis completed 14. Numb of key informant interviews in selected states completed 15. Programmes, policies, budget analysis conducted 16. Thematic or state-level consultations organized 17. Policy brief prepared 18. Dissemination event at the national level organised 19. **Duration**   The total duration of the research initiatives on Gender and Climate Change will be 24 months. The first six months will serve as the inception period, dedicated to laying a robust foundation through strategic planning.  The inception period will focus on essential groundwork to refine research design, engage key stakeholders, and build a support network for effective implementation. This phase will be instrumental in ensuring that both projects are based on localized expertise and tailored to address specific needs in the research area.  Key Activities   1. Identify and onboard partner(s) and project staff with deep research and policy expertise in gender and climate change, and elder care services. 2. Technical advisory groups for both projects will be formed, involving experts from academia, government, NGOs, and think tanks. These groups will play a pivotal role in shaping research questions and validating methodologies. 3. Early mapping and engagement with stakeholders, including policymakers, NGOs, and service providers, will help tailor the research to practical, policy-relevant insights. Regular consultations and feedback loops will ensure that partner inputs shape all aspects of the projects. 4. Based on initial consultations, research questions will be finalized to focus on critical gaps and challenges in both elder care and gendered impacts of climate change. 5. Criteria for selecting study locations will be developed to reflect diverse regional realities and ensure representation of high-need areas. 6. Methodologies that emphasize ethics, participation, and data rigor, with a focus on gender sensitivity, cultural relevance, and inclusivity, will be finalized. 7. Ethical protocols will be established in alignment with national and international standards. This will ensure participants’ privacy, security, and informed consent, particularly in sensitive areas such as gender-based violence and elder care. 8. Practical challenges in data collection, such as access to specific demographics or logistical barriers, will be assessed to mitigate risks.   **Qualifications**   * Applications will be accepted from organisations with specialised knowledge, expertise, and a proven track record of:   + Generating evidence, developing resources and enabling policy advocacy in the areas mentioned above   + Full time staff working on research on the areas mentioned above * Preference will be given to applications from:   + Women’s rights women-led organizations   + Organisations with proven ability to convene dialogues across diverse interest groups and create/leverage platforms for representation and advocacy |

Format to be used by the agency to submit the proposal

| **Section A. NGO Identification** | | |
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| A.1 Organization information | Organization name |  |
| Address |  |
| Website |  |
| Type of Organization ( NGO or Academic Institution) |  |
| Date of establishment of organization |  |
| Place of registration of the organization |  |
| HQ Location |  |
| A.2 Contact information  (Authorized Representative) | Name |  |
| Designation |  |
| Telephone & Mobile |  |
| Email |  |
| Contact details of the nodal officer for the project | Name |  |
| Designation |  |
| Telephone & Mobile |  |
| Email |  |
| A.3 United Nations Partner Portal | Are you registered in the [United Nations Partner Portal](http://www.unpartnerportal.org)? |  |
| If yes, provide the UNPP Partner ID |  |

| Section B. Overview of the organization |
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| B.1 Annual budget (250 words) | Annual budget (previous year, INR /USD) |  |
| --- | --- | --- |
| Main funding partners/ donors |  |

| B.2 Credibility (Include specific examples of working with State / National Govt.) (600 words) | *To what extent is the NGO or academic institution recognized as credible by the government, and/or other key stakeholders/partners?* |
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| Section C. Proposed interventions and activities to achieve intended results | |
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| C.1 Project Title (25 Words) | Please provide the project title along with any brand name to be used for the project. |
| C.2 Background  (300 Words) | This section should provide background and rationale for the proposed project |
| C.3 Goal and Objectives  (300 words) | *This section should clearly spell out 3 to 5 objectives for the project and broader goal.* |
| C.4 Geographic coverage  (150 words) | *The section should indicate the research methodology and geographic coverage* |
| C.5 Duration of the project (50 words) | *Proposed Start Date: DD/MM/YYYY*  *Proposed End Date: DD/MM/YYYY* |
| C.6 Description of strategies, activities and GANTT Chart (4500 words) | *This section should spell out broad strategies and suggested activities under each strategy clearly linked to achieving the proposed activities.* |
| C.7 Human Resource /Team composition for the proposed project (1200 Words) | Organogram with brief role and responsibility table for all position to be hired for the project |
| C.8 Monitoring systems with key monitoring indicators (500 words) | The section should briefly explain the monitoring systems to be put in place for the project with 3 to 5 key indicators which organization proposes to be used for monitoring the project implementation |
| C.9 Budget | *This organization is expected to indicate tentative budget as per the attached template.* [*Click here to download the budget template*](https://docs.google.com/spreadsheets/d/1HF8Hl25ITdHclLiELN0CpXOW_Tl_lGnZc48RtvFJA7g/edit?usp=sharing)*.* |
| C.10 Any other additional information to be submitted ( 600 Words) | *The organization can use the section to provide any additional detail they would like to submit as part of the proposal and not being captured in above heads for the proposal.* |

| Section D. References | |
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| Please provide 3 references to support your proposal. Include name, title, contact information and brief summary of relationship. | |
| Reference 1: |  |
| Reference 2: |  |
| Reference 3: |  |

| Section E. Preventing Sexual Exploitation and Abuse (PSEA) Capacity Assessment  Please note, the results of this assessment may be shared with other United Nations entities | |
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| E.0 Preliminary Screening | Does the organization have direct contact with beneficiaries?  Yes ☐ No ☐  If your response is no, stop here and do not complete this section. However, please note if your organization begins working with beneficiaries at a later date, UNFPA will require your organization to fill out a self-assessment.  If yes, please continue. |
| Has the organization’s PSEA capacity been assessed by a UN entity in the last 5 years?  Yes  ☐    *If yes, share the assessment rating and supporting documentation with UNFPA and do not complete this section.*  No ☐  *If no, complete G.1 through G.8* |
| E.1 Policy Requirement | *Please provide supporting documentation for any fields marked “Yes”.*  Your organization has a policy document on PSEA. At a minimum, this document should include a written undertaking that the partner accepts the standards of conduct listed in section 3 of the ST/SGB/2003/13.  Yes ☐ No ☐  Supporting documentation may include:   * Code of Conduct (internal or interagency) * PSEA policy * Documentation of standard procedures for all personnel to receive/sign PSEA policy * Other (please specify): |
| E.2 Subcontracting | Your organization’s contracts and partnership agreements include a standard clause requiring sub-contractors to adopt policies that prohibit SEA and to take measures to prevent and respond to SEA.  Yes ☐ No ☐ \*N/A ☐  Supporting documentation may include:   * Contracts/partnership agreements for sub-contractors * Other (please specify):   *\* Please Note: If the partner notes that it does not have subcontractors in the self-assessment this core standard is not applicable and UNFPA will assess this core standard as N/A. However, if this situation changes and the same partner subsequently subcontracts activities to another entity, this would warrant a re-assessment.* |
| E.3 Recruitment | Your organization has a systematic vetting procedure in place for job candidates through proper screening. This must include, at minimum, reference checks for sexual misconduct and a self-declaration by the job candidate, confirming that they have never been subject to sanctions (disciplinary, administrative or criminal) arising from an investigation in relation to SEA, or left employment pending investigation and refused to cooperate in such an investigation.  Yes ☐ No ☐  Supporting documentation may include:   * Reference check template including check for sexual misconduct (including reference from previous employers and self-declaration) * Recruitment procedures * Other (please specify): |
| E.4 Training | Your organization holds mandatory trainings (online or in-person) for all IP employees and associated personnel[[1]](#footnote-0) (herein “personnel”) on PSEA and relevant procedures. The training should, at a minimum include:   1. a definition of SEA (that is aligned with the [UN's definition](https://undocs.org/ST/SGB/2003/13)); 2. an explanation on prohibition of SEA; and 3. actions that personnel are required to take (i.e. prompt reporting of allegations and referral of victims).   Yes ☐ No ☐  Supporting documentation may include:   * Training package * Attendance sheets * Training certificates * Other (please specify): |
| E.5 Reporting | Your organization has mechanisms and procedures for personnel, recipients of assistance and communities, including children, to report SEA allegations that comply with core standards for reporting (i.e. safety, confidentiality, transparency, accessibility).  Yes ☐ No ☐  Supporting documentation may include:   * Internal Complaints and Feedback Mechanism * Participation in joint reporting mechanisms * Communication materials * PSEA awareness-raising plan * Description of reporting mechanism * Whistle-blower policy * Other (please specify): |
| E.6 Assistance | Your organization has a system to refer SEA victims to locally available support services, based on their needs and consent. This can include actively contributing to in-country PSEA networks and/or GBV systems (where applicable) and/or referral pathways at an inter-agency level.  Yes ☐ No ☐  Supporting documentation may include:   * Internal or Interagency referral pathway * List of Available service providers * Description of referral or Standard Operation Procedure (SOP) * Referral form for survivors of GBV/SEA * Guidelines on victim assistance and/or training on GBV and GBV case management principles * Other (please specify): |
| E.7 Investigations | Your organization has a process for investigation of allegations of SEA and can provide evidence. This may include a referral system for investigations where in-house capacity does not exist.  Yes ☐ No ☐  Supporting documentation may include:   * Written process for review of SEA allegations * Dedicated resources for investigation(s) and/or commitment of partner for support * PSEA investigation policy/procedures * Contract with professional investigative service * Other (please specify): |
| E.8 Corrective Measures | Your organization has taken appropriate corrective action in response to SEA allegations, if any.  Yes ☐ No ☐ N/A ☐  Supporting documentation may include:   * Evidence of implementation of corrective measures identified by the UN partner entity, including capacity strengthening of staff. * Specific measures to identify and reduce risks of SEA in programme delivery. * Other ((please specify): |

1. Associated personnel include sub-contractors, consultants, interns or volunteers and others associated with or working on behalf of the Partner. [↑](#footnote-ref-0)