Invitation for Proposals (to be issued by UNFPA)

| UNFPA, United Nations Population Fund, an international development agency, invites interested organizations to submit proposals for **Towards universal access to Sexual Reproductive Health and Rights (SRHR) and reaching the unreached though an integrated approach in the state of Rajasthan**  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 or section 1.3 below.  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 of UNFPA India Country Office  bids.india@unfpa.org  By 07th November 2022, 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 14th October 2022, 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 India Country Office, UNFPA works with the government and other partners to achieve overall goal of 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 | 1. **Background and Rationale:**   UNFPA is the United Nations sexual and reproductive health agency and has been operating in India since 1974. Our mission is to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled ensuring rights and choices for all.  UNFPAs 10th Country Programme (2023-27) is inspired by UNFPA’s Strategic Plan (2022 – 2025) and is aligned to the United Nations Sustainable Development Cooperation Framework, supporting in achieving the National Development Goals and the Agenda 2030. UNFPA will support national programmes that aim to advance the sexual reproductive health and rights of women, girls and young people, and accelerate achieving the three transformative goals of zero unmet need for family planning, zero preventable maternal deaths and zero gender based violence and harmful practices and the unfinished agenda of ICPD Programme of Action. While continuing to retain focus in the states of Bihar, Madhya Pradesh, Odisha and Rajasthan, the 10th country programme will scale up efforts and drive accelerated progress towards the three transformative results.  In Rajasthan, UNFPA works in close collaboration with key government departments such as Health, Women Empowerment, Youth, Education and Panchayati Raj. UNFPA is the lead development partner for RMNCH+A and Aspirational Districts in the state. It will continue to support government’s flagship programmes like the RMNCH+A, *Mission Parivar Vikas*, *Rasthriya Kishore Swasthya Karyakram* (RKSK), School Health and Wellness Programme (SHWP), Child Marriage, *Udaan-* Menstrual Health and Hygiene Management, *Chirali, Beti Bachao Beti Padhao (BBBP)* and such others.  UNFPA is looking to partner with experienced and credible organisations to implement the ambitious agenda envisaged in the 10th country programme. This **Invitation for Proposals (IFP) from organizations is for implementing a multi-pronged approach to promote and ensure “*Universal access of Sexual Reproductive Health and Rights (SRHR), reaching the unreached though an integrated approach in the state of Rajasthan”.*** The focus of the project will be on quality of care and ensuring essential package of SRHR interventions that includes (a) maternal health (b) family planning (c) prevention and treatment of HIV and other STIs (d) comprehensive sexuality education (e) detecting and preventing sexual and gender-based violence (f) other emerging SRH issues and (g) Information, counselling and services for sexual health and well-being.  **Objective:** *The overall objective of the project is to address SRH needs of people of Rajasthan with focus on marginalised groups and young people by promoting an integrated approach through evidence based advocacy, technical support to large scale programmes and facilitating effective monitoring and coordination.*  **The specific objective of the project are as follows:**   * 1. Strengthen comprehensive SRH services in the state with focus on Reproductive, Maternal and Adolescent Health Services   2. Strengthen systems, and institutional capacities to address discriminatory norms and harmful practices and promote gender responsive and rights based laws, policies and programmes   3. Increase knowledge, skills and opportunities for adolescents and youth, particularly adolescent girls from the marginalised populations, to ensure their right to bodily autonomy, leadership and informed decision making  1. **Scope of work:** The scope of work is aimed at achieving the three broad objectives of the project are as follows :   **Specific Objective A:** Strengthen comprehensive SRH services in the state with focus on Reproductive, Maternal and Adolescent Health Services  **Scope of work :**   1. Improve quality of MH services, including adherence to evidence-based practices and standards 2. Support in rolling out of Midwifery programme in the state 3. Strengthen implementation of national / state initiatives (LaQshya & SUMAN) to ensure quality, respectful, dignified and assured care, especially for women from marginalised communities 4. Improve the quality of Maternal Death Surveillance and Reporting (MDSR) in the state with focus on seven UNFPA supported districts (pls refer Section 4 - geographical coverage) 5. Pilot interventions to create demand for quality SRH service, with focus on young people 6. Suggest interventions to address the impact of climate change on SRH and address vulnerabilities of girls and women 7. Promote availability of package of comprehensive SRH services[[1]](#footnote-0) at various levels of public health facilities 8. Strengthen FP supply chain and LMIS to reduce stock outs in the state, including demonstrating tech based solution for commodity security and linkages of the FPLMIS with clients in one of the UNFPA priority/ intervention districts 9. Strengthen family planning counselling services with focus on post-partum family planning   **Indicative Deliverables**   1. Planning and implementation of capacity building sessions and monitoring to improve quality of comprehensive SRH health services in the state 2. Pilots designed and implemented to create demand for quality SRH services 3. Capacity building and monitoring to strengthen the supply chain and ensure availability of contraceptives in health facilities. 4. Capacity building and mentoring to improve family planning counselling services.   **Indicative Results and Outputs :**   1. % of facilities in intervention districts(seven) are certified on LaQshya standards in the state. 2. % of facilities in the UNFPA intervention districts (seven) following SUMAN guidelines 3. No. of intervention districts (out of seven) implementing MDSR according to the national guidelines 4. Number of interventions piloted / demonstrated to improve demand for SRH services 5. Number of interventions piloted or consultation organised to advance SRH intervention in context of climate change 6. Development of State level FP 2030 Roadmap (Yes/No) 7. % of health facilities upto PHC level (disaggregated by level) which report no stock out of contraceptives in last 3 months   **Specific Objective B:** Strengthen systems, and institutional capacities to address discriminatory norms and harmful practices and promote gender responsive and rights based laws, policies and programmes  **Scope of work :**   1. Strengthen the multi-sectoral response to Gender Based Violence (GBV) from a gender, rights and public health perspective (health sector and One stop centres) 2. Support in transacting gender-transformative, rights-based life skills education to out of school adolescent girls through community-based interventions (Scheme for Adolescent girls) in the state 3. Undertake evidence based advocacy and documentation of best practices for wider dissemination and learnings     **Indicative Deliverables**   1. Training sessions designed and implemented on screening, treatment and referral of GBV survivors. 2. Community interventions strengthened for LSE for out of school adolescent girls.     **Key Indicators:**   1. % health providers who have been trained protocols / SOPs related to screening, treatment and referral of GBV survivors as an integrated package of SRH services 2. Number of out-of-schools girls reached through community based interventions such as Scheme for adolescent Girls.   **Specific Objective C:** Increased knowledge, skills and opportunities for adolescents and youth, particularly adolescent girls from the marginalised populations, to ensure their right to bodily autonomy, leadership and informed decision making  **Scope of work :**   1. Support in implementation of comprehensive sexuality education or life skills education (LSE) and promote integrating counselling services for adolescent girls studying in Kasturba Gandhi Balika Vidyalaya (KGBV) schooling system. Pilot tech based solution or develop Learning labs / model sites for strengthening implementation of LSE in the state   **Indicative Deliverables :**  i) Design and implementation of capacity building and monitoring of teachers to conduct LSE session and provide integrated counselling services for adolescent girls.  ii) Design and implementation of technology based solutions / learning labs to strengthen implementation of LSE in the state.  **Key Indicators**   1. Increase in knowledge, aptitude and practices among adolescent girls and other key stakeholders on life skills themes 2. Learning labs / model sites demonstrated in KGBV schools for implementation of LSE programmes      1. **Geographic Coverage:**  * State level support in the identified areas working through concerned departments of the state government. * Seven UNFPA priority districts - Baran, Dholpur, Jaisalmer, Karauli, Sirohi, Sawai Madhopur and Udaipur)  1. **Duration:** The proposal is sought for a period of three years starting January 2023. Year wise budget to be submitted for three years. UNFPA will provide financial support on an annual basis depending on the availability of funds and progress of the project.   Based on the above objectives and the broad scope of work, interested agencies are required to detail out the key activities in detail including suggestive collaboration or partnership with key government departments or any other CSOs. They are also expected to indicate expected level of achievement against each indicator and broad deliverables.  Approaches or activities related to adopting Human Rights based approach, evidence / data led strategies / activities, innovations, leveraging government / private agency resources, tech based solution, partnership with civil societies or development partners will be greatly valued and will be an added advantage during the comparative evaluation of the IfP. Kindly highlight the same in the proposal. |

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 project implementation geographies* |
| 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 objectives.* |
| 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.* |
| 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[[2]](#footnote-1) (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. *Comprehensive SRH services is defined as 24\*7 delivery, CAC, 5 reversible contraceptives RTI/ STI Management, GBV response to health services in facilities (DH, SDH, CHC and 24X7 PHCs)* [↑](#footnote-ref-0)
2. Associated personnel include sub-contractors, consultants, interns or volunteers and others associated with or working on behalf of the Partner. [↑](#footnote-ref-1)