Invitation for Proposals

| UNFPA, United Nations Population Fund, an international development agency, invites interested organizations to submit proposals for **Technical Assistance for strengthening the implementation of adolescent health and well-being programmes including sexual and reproductive health for young people.**  The purpose of the Invitation for Proposals is to identify eligible and most suitable non-governmental organizations 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 UNFPA India Country Office  bids.india@unfpa.org  By 30 November 2024, 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 08 November 2024 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 | **Background and Rationale**  UNFPA, the United Nations sexual and reproductive health agency, has been operating in India since 1974. Our mission is to create 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.  UNFPA’s 10th Country Programme (2023-27) is inspired by the UNFPA Strategic Plan (2022-2025) and aligns with the United Nations Sustainable Development Cooperation Framework, contributing to India’s National Development Goals and Agenda 2030. The programme supports national efforts to advance the sexual and reproductive health and rights of women, girls, and young people, and aims to accelerate progress toward achieving three transformative goals: zero unmet need for family planning, zero preventable maternal deaths, and zero gender-based violence and harmful practices. It also addresses the unfinished agenda of the ICPD Programme of Action.  The 10th Country Programme maintains a focus on the states of Bihar, Madhya Pradesh, Odisha, and Rajasthan, while scaling up efforts to drive accelerated progress toward these transformative results.  The Country Programme reaffirms UNFPA’s commitment to expanding opportunities for young people to lead healthy sexual and reproductive lives, free from discrimination and violence. The Ministry of Health and Family Welfare (MoHFW), in collaboration with other ministries, is implementing national flagship programmes such as Rashtriya Kishor Swasthya Karyakram (RKSK) and the School Health and Wellness Programme (SHWP) to improve adolescent health and well-being.The MoHFW has prioritized the reproductive and sexual health of adolescents and young people, addressing pressing concerns such as teenage childbearing and early/child marriage, across all five FP 2030 commitments of the country, given India's status as home to the world's largest population of this age group. UNFPA is a key partner, working with the ministry to strengthen the implementation of these flagship programmes.  UNFPA looks forward to partnerships and collaborations with NGOs and civil society organizations to advance the agency’s three transformative goals and empower adolescents and young people across the country. This Invitation for Proposal (IFP) seeks organizations to submit proposals for executing a comprehensive and multi-faceted approach to promote and ensure the effective implementation and uptake of government flagship programmes focusing on improving adolescent health and well-being, including the advancement of sexual and reproductive health and rights (SRHR), especially for young people.  **Objectives**     1. To provide technical assistance at the national level for strengthening implementation of adolescent health programs such as RKSK and SHWP. 2. To support the effective implementation of the SHWP-MIS application, enabling key stakeholders to generate quality and timely reports, and facilitating data-informed decision-making under the SHWP programme through training and technical support. 3. To strengthen the SRH ecosystem for youth in India through national-level workshops, training, documentation and knowledge management.   **Scope of work**  To accomplish the above objectives, the following activities will be undertaken:   1. **Technical Assistance**    1. Provide technical assistance through the deployment of technical consultants to strengthen adolescent health and family planning programs at both national and state levels.    2. Provide technical support in mapping, designing, and facilitating mentoring systems to enhance the skills of key stakeholders, including counsellors, medical officers, frontline health workers, peer educators, teachers, and principals.    3. Provide support to ensure the meaningful participation, engagement, and leadership of young people in the formulation, implementation, and monitoring of programmes focused on adolescent health and family planning. This includes creating opportunities for young people to contribute to decision-making processes, fostering youth-led initiatives, and ensuring their active involvement at every stage of programme roll-out.    4. Identify, conceptualise, and pilot innovative approaches to strengthen RKSK, SHWP, and Family Planning programs. This process will involve assessing current challenges, generating innovative solutions, thrust on reaching vulnerable groups, disability inclusion and implementing pilot tests to evaluate the effectiveness of these approaches before scale-up. 2. **Development of resource materials and job aids** 3. Develop training resource materials and job aids focused on adolescent health and sexual and reproductive health (SRH) to support the capacity-strengthening of key stakeholders, including counsellors, medical officers, frontline health workers, peer educators, teachers, and principals. This initiative will encompass the creation of comprehensive training modules and resource materials suitable for both virtual and in-person training sessions, considering disability inclusion. 4. Adapt and contextualise existing resource materials into various formats and languages to ensure relevance and accessibility for different states, to address the needs for varied groups of adolescents, including those with disabilities . This process will involve tailoring content to reflect local contexts, cultural sensitivities, and language preferences, making it more effective for key stakeholders. 5. **Training and capacity building**    1. Organise training and capacity-building programs at both national and state levels to develop a pool of trainers and resource persons for programs under RKSK, SHWP, and Family Planning. The agency will be responsible for onboarding resource persons, subject experts, and facilitators to lead these capacity-building initiatives effectively.    2. Provide mentoring support to national and state trainers involved in RKSK, SHWP, and Family Planning programs. This will include regular guidance, resources, and feedback to enhance their training effectiveness and capacity to support stakeholders in implementing these programs. 6. **Workshops and meetings**    1. The agency is expected to organise national and state-level workshops and meetings, both residential and non-residential, aimed at facilitating cross-learning, experience sharing, and program implementation reviews on adolescent health, family planning and other related subjects. These events will engage key stakeholders, including program managers, state and national officials, development partners, civil society organisations, and young people. The agency is expected to consider reasonable accommodation to ensure participation of persons with disability. 7. **Documentation and communication material**    1. The agency will support the development of diverse communication materials (including disable friendly formats), including posters, brochures, leaflets, newsletters, radio jingles, flipbooks, short videos/films, and compendiums of case studies and success stories, to enhance the implementation of RKSK, SHWP, and FP programs.    2. The agency is expected to support the development of knowledge products in various formats, such as documents, audio-visual content, and graphics, capturing success stories, best practices, process documentation, and case studies. Additionally, the agency will assist in disseminating these knowledge products to relevant stakeholders by organising workshops and meetings at the national and state level. 8. **Monitoring and evaluation**    1. The agency is expected to support the implementation of the national-level SHWP-MIS system for reporting and monitoring, ensuring the timely availability of high-quality data for decision-making. Additionally, the agency will be responsible for building the capacity of state and district officials to effectively use MIS data, as well as supporting review meetings at both the national and state levels.    2. Provide support for need-based evaluation and assessment studies related to RKSK, SHWP, and FP programs. 9. The agency may be requested to undertake additional tasks and responsibilities related to the programmes as per requests from the Government.   **Geographic Coverage**     * Primarily support at the National level * Four UNFPA priority states and 12 districts * Additional states implementing RKSK, SHWP and FP programmes based on future agreement with the government.   **Indicative Indicators**  The project will use the following key indicators to measure progress at both national and state levels:   1. Number of training resources and job aids created for RKSK, SHWP, and Family Planning (FP) programs. 2. Number of government stakeholders and officials trained at the district, state, and national levels, aimed at ensuring the quality delivery of sexual reproductive health services especially for young people. 3. Number of knowledge products developed to support advocacy efforts and disseminate best practices, impact stories, and innovative approaches. 4. Number of districts implementing the SHWP-MIS application for program reporting under SHWP. 5. Number of assessments and evaluation studies conducted Number of communication materials created to enhance the implementation of RKSK, SHWP, and FP programs. 6. Number of workshops and meetings organised at the national and state levels .   **Project Duration**  The proposal is sought for a period of three years. 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. |
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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) |  |
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| Main funding partners/ donors |  |

| B.2 Credibility (Include specific examples of working with State / National Govt.) (600 words) | *To what extent is the NGO 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 with focus on UNFPA priority states.* |
| 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.* [*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)