### **Invitation for Proposals**

UNFPA, United Nations Population Fund, an international development agency, invites interested organizations to submit proposals for "Promoting inclusive Adolescent Health: Bridging Gaps for Tribal Communities and Individuals with Disabilities through Innovative Approaches 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 the 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: <a href="mailto:bids.india@unfpa.org">bids.india@unfpa.org</a> by 24 February 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 **06 February 2024**, 23:59 hours IST at the latest addressed to the 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 <u>Working with UNFPA</u>: Key information for <u>UNFPA Implementing Partners on completing the Protection from Sexual Exploitation and Abuse (PSEA) Assessment</u>.

Section 1: Background	
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 <a href="http://unfpa.org/India">http://unfpa.org/India</a>
1.3 Terms of reference	A. Background and Rationale:
	UNFPA is the United Nations Sexual and Reproductive Health Agency and has been operating in India since 1974. UNFPA's 10 <sup>th</sup> Country Programme (2023-27) is inspired by UNFPA's Strategic Plan (2022 – 2025) and is aligned with 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.

In Rajasthan, UNFPA is supporting the state government (Health Department and Education Department) to strengthen the Adolescent Health Programme which includes the two flagship programs i.e. the *Rashtriya Kishore Swasthya Karyakram* (RKSK) and the School Health and Wellness Programme (SHWP) to improve access to correct and comprehensive information, enhancing availability and access to adolescent-responsive health services, and creating a conducive environment for healthy behaviors and practices. The SHWP is currently implemented in nine districts of Rajasthan i.e. Dholpur, Baran, Bundi, Jaisalmer, Karauli, Banswara, Rajsamand, Sirohi and Udaipur covering around 7000 government and government-aided schools reaching out to approx. 10 lakhs adolescent girls and boys. It is planned to scale up the SHWP to an additional 24 districts in the next two years i.e. 2024-25 and 2025-26. Besides, 319 Kasturba Gandhi Balika Vidyalaya (KGBVs), 53 Tribal Schools, and 9 Special Schools will also be covered during the scale-up of the SHWP in the state.

The national program, spearheaded by the government, demonstrates a commendable commitment to the well-being of adolescents across spheres. Nevertheless, despite these laudable efforts, it is imperative to acknowledge existing structural gaps within the program, particularly with its outreach strategies for adolescents with disabilities and those belonging to tribal communities. Identifying and addressing these gaps is crucial to ensuring the inclusive success of the programme.

The current approach relies on peer educators or trained teachers who may not possess subject expertise, necessitating the development of innovative job aids and teaching materials to enhance the quality of sessions. Furthermore, the reach of adolescent health services under the national program is limited to selected districts, thus restricting access for specific groups such as adolescent girls, those with limited mobility due to disabilities, and adolescents from minority communities. Moreover, the availability of qualified counselors, who play a crucial role in meeting adolescents' counseling needs, is severely limited.

Although the government is committed to expanding these services nationwide, the challenges of achieving universal access in every corner of the country and state are immense. Therefore, there is an urgent need to address these gaps and ensure inclusivity and universal access to adolescent health services and counseling. By developing relevant curriculum adaptations, providing necessary teaching aids, and strengthening the availability of quality counseling services, we can bridge these gaps and enhance the effectiveness and reach of national adolescent health programs.

UNFPA India has recently embarked on a project to strengthen the adolescent health program to make it inclusive, reaching out to adolescents from LNOB groups (Disability, Tribal Communities), and unlocking additional resources towards transformative results. While there is a commitment from the government to reach out to every adolescent, it doesn't have any tested solution through which the existing gaps under the adolescent health programme can be addressed.

UNFPA is looking to partner with experienced and credible organizations to implement the ambitious agenda envisaged in the 10<sup>th</sup> country programme. This Invitation for

Proposal (IFP) is for interested NGOs to serve as UNFPA's partner for implementing a multi-pronged approach to "Promote Inclusive Adolescent Health: Bridging Gaps for Tribal Communities and Individuals with Disabilities through Innovative Approaches in the State of Rajasthan"

B. **Objective:** The overall objective of this project is to address the structural gaps in the current national adolescent health program to make it inclusive and unlock additional resources.

## The specific objectives are as follows:

- a) To equip adolescents from tribal communities and adolescents with disability with life skills to make informed decisions and live healthy lives.
- b) To build capacities of key stakeholders to impart life skills education to adolescents with disabilities and from tribal communities.
- c) To establish convergence with different departments and ministries to connect adolescents with relevant schemes and programs for development and well-being.
- d) To generate resources from government and private partners to scale up and sustain the intervention and approaches.
- C. **Scope of Work:** The scope of work is aimed at achieving the five broad objectives of the project that are listed **but not limited to the following**:
- a. Establish Project Management System and Structure: A Project Management Unit will have to be established having representatives from UNFPA Rajasthan Office, technical experts, and the selected agency at the state level for planning, monitoring and smooth implementation of the project. The selected agency will be responsible for overall coordination with the respective departments (Health, Education, Tribal Welfare, Social Justice, and Empowerment). Similar structures will be developed at the district level where interventions will be piloted.
- b. Formation of a State-Level Advisory Committee: It will provide technical oversight of the project and make recommendations for the different strategies and approaches to achieve the desired project objectives
- c. Partner with institutes /agencies having technical expertise to work with disability and tribal communities. Further, opportunities should also be explored to partner with agencies of repute to develop innovative affordable solutions in the field of adolescent health with a focus on marginalized groups
- d. Provide technical support to key departments (education) for strengthening and expansion of the adolescent health program in the state. Work in close collaboration with relevant departments to garner their support for the cause and project activities
- e. Develop digital tools, such as interactive modules and multimedia resources, to make the learning experience engaging and accessible.
- f. Design and implement high-quality life skills sessions specifically catering to the diverse needs of adolescents in special schools and tribal hostels
- g. Ensure that the content aligns with the cultural context and is adaptable to different learning abilities.
- h. Deploy and demonstrate innovative tech and non-tech solutions to enhance the reach and access of SRHR information and services among adolescents from marginalized

- communities. This will also help in improving the efficiency, effectiveness of existing adolescent health programs.
- i. Develop support systems, including job-aid tools and online learning courses, to empower teachers in special schools and tribal hostels.
- j. Conduct capacity-building programs for teachers, special educators, wardens, caregivers, counselors, and other stakeholders involved in the implementation and expansion of adolescent health programs
- k. Establish a support system for mentoring teachers, special educators and wardens to sharpen their skills
- 1. Strengthen existing school infrastructure with IT-enabled platforms. This includes computers, audio devices, and internet facilities, among others. This is mainly to promote online transactions of the SHWP curriculum and infotainment
- m. Provide a repository of resources, including lesson plans, multimedia content, and assessment tools, to enhance the teachers' capabilities in delivering effective life skills education
- n. Collaborate with media outlets to generate high-impact coverage of the initiative, raising awareness and reaching a wider audience
- o. Conduct periodic assessments/ dipstick surveys/ studies to inform and measure the progress of the project
- p. Map key stakeholders, CSR, CSOs, and Private agencies working with adolescents from marginalized communities
- q. Organize stakeholder summits and marketplace interventions to engage key stakeholders, foster partnerships, and mobilize additional resources for the project

Note: The scope of work is indicative and agencies can also share the strategic approaches along with the detailed activities to achieve the specific objectives of the project.

#### **D.** Indicative Deliverables:

- a. Project Steering Committee formed to guide and implement project activities with participants from the Department of Health, Education, UNFPA, and other partners.
- b. Job-aid tools and online learning courses for teachers developed to improve their knowledge and skills on health and well-being topics
- c. Develop a cadre of master trainers (state and district trainers, approx. 100) on the new SHWP curriculum for adolescents with disability and from tribal communities.
- d. Number of adolescents from marginalized groups (Tribal, minorities, those with disabilities) benefited explicitly or implicitly from the project (Target: At least 1000 students from special schools and 60,000 from tribal communities)
- e. Tech-based tools piloted/deployed and later scaled up to strengthen school infrastructure to support the transaction of SHWP curriculum and online counseling sessions. (Target: At least one tech-based solution piloted and scaled up)
- f. Establish a technology-based real-time integrated Management Information System (MIS) to track the progress of the project
- g. Periodic assessment (Baseline, Midline, Endline) to measure project progress and impact.
- h. Partnerships established with the private sector, philanthropic foundations, and bilateral agencies towards unlocking funding for SHWP in the state of Rajasthan.

- i. Process documentation and dissemination of success stories with key stakeholders to mobilize more resources and allies. (Target: 10 Human Interest Stories and Photo documentation of the project)
- j. Collaboration with popular media outlets to generate high-impact coverage, raising awareness and reaching a wider audience.
- k. Sustained advocacy resulted in the expansion of the SHWP curriculum throughout the state including special schools and tribal schools by 2025
- E. **Geographic Coverage:** Across the state with a focus on UNFPA priority districts (Udaipur, Jaisalmer, Sawai Madhopur)
- F. **Duration:** The proposal is sought for two years starting February / March 2024. The year-wise budget should be submitted for two years. However, UNFPA will provide financial support on an annual basis depending on the availability of funds and progress of the project.

G. Evaluation Criteria: Technical and Financial Proposals are to be submitted separately. The technical proposal will carry 80% weightage and the financial proposal will carry 20% weightage in evaluating the proposals of agencies. The broad areas of evaluating the technical proposal are as follows:

S.N o	Area of Evaluation	Allocated Score	Remarks
1	Relevant Work Experience	25	<ul> <li>Experience of working on SRHR and Gender issues with adolescents with a focus on disabilities.</li> <li>Demonstrated Innovative tech and non-tech solutions for persons with disabilities / tribal students will be an added advantage</li> </ul>
2	Composition / Strength of NGO Team Members	20	Qualification and Experience of the team / key personnel
3	Approach, Methodology and Action Plan	40	<ul> <li>Appropriateness of the proposal.</li> <li>Are the activities proposed appropriate, practical and consistent with the objectives and expected results</li> <li>Is the implementation plan clear and feasible?</li> <li>Does the proposal contain objectively verifiable indicators for the outcomes of the action</li> <li>Result-based framework is desirable</li> </ul>
4	Familiarity with the state	15	<ul> <li>Familiarity of working with different departments of the state government</li> <li>Implemented similar/other project in the state</li> <li>Acquaintance with the state's demographic situation as well as geography.</li> </ul>
	Total	100	

# Format to be used by the agency to submit the proposal

Section A. NGO Identification		
A.1 Organization	Organization name	
information	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	Name	
information	Designation	
(Authorized	Telephone & Mobile	
Representative)	Email	
Contact details of	Name	
the nodal officer for the project	Designation	
	Telephone & Mobile	
	Email	
A.3 United Nations Partner Portal	Are you registered in the	
	<u>United Nations Partner</u>	
	Portal?	
	If yes, provide the UNPP	
	Partner ID	

# Section B. Overview of the organization

B.1 Annual budget (250 words)	Annual budget (previous year, INR /USD)	
	Main funding partners/	
	donors	

B.2 Credibility (Include specific	To what extent is the NGO or academic institution recognized as credible
examples of working	by the government, and/or other key stakeholders/partners?
with State / National	
Govt.) (600 words)	

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	Proposed Start Date: DD/MM/YYYY
project (50 words)	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.
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.

Please provide 3 references to support your proposal. Include name, title, contact information and brief summary of relationship.		
Reference 1:		
Reference 2:		
Reference 3:		
	g Sexual Exploitation and Abuse (PSEA) Capacity Assessment lts of this assessment may be shared with other United Nations entities	
E.0 Preliminary Screening	Does the organization have direct contact with beneficiaries? Yes $\square$ No $\square$	
	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 $\square$ If no, complete G.1 through G.8	
E.1 Policy Requirement	Please provide supporting documentation for any fields marked "Yes".	
Requirement	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 $\square$ No $\square$	
	Supporting documentation may include:  Code of Conduct (internal or interagency)  PSEA policy	
	<ul> <li>Documentation of standard procedures for all personnel to receive/sign PSEA policy</li> <li>Other (please specify):</li> </ul>	
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 □
	<ul> <li>Supporting documentation may include:</li> <li>Reference check template including check for sexual misconduct (including reference from previous employers and self-declaration)</li> <li>Recruitment procedures</li> <li>Other (please specify):</li> </ul>
E.4 Training	Your organization holds mandatory trainings (online or in-person) for all IP employees and associated personnel (herein "personnel") on PSEA and relevant procedures. The training should, at a minimum include:  1. a definition of SEA (that is aligned with the <u>UN's definition</u> );  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

	<ul> <li>Description of reporting mechanism</li> <li>Whistle-blower policy</li> <li>Other (please specify):</li> </ul>
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
	<ul> <li>Guidelines on victim assistance and/or training on GBV and GBV case management principles</li> <li>Other (please specify):</li> </ul>
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 □
	<ul> <li>Supporting documentation may include:</li> <li>Written process for review of SEA allegations</li> <li>Dedicated resources for investigation(s) and/or commitment of partner for support</li> <li>PSEA investigation policy/procedures</li> <li>Contract with professional investigative service</li> <li>Other (please specify):</li> </ul>
E.8 Corrective Measures	Your organization has taken appropriate corrective action in response to SEA allegations, if any.
	Yes □ No □ N/A □
	<ul> <li>Supporting documentation may include:</li> <li>Evidence of implementation of corrective measures identified by the UN partner entity, including capacity strengthening of staff.</li> <li>Specific measures to identify and reduce risks of SEA in programme delivery.</li> <li>Other ((please specify):</li> </ul>