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Family Planning Association of Nepal (FPAN) invites proposals from registered consultancy firm in Nepal for the baseline survey of “**Enhancing Availability and Women’s Access to Integrated SRH- HIV Services in Earthquake Affected Districts of Nepal (Japanese Trust Fund Project)**”. The interested firm must meet minimum eligibility criteria mentioned under the ‘Terms of Reference’ available on our website: [www.fpan.org](http://www.fpan.org). Any interested and eligible firm may submit the technical and financial proposals; and should deliver either personally or by courier to the registered office address of FPAN ***no later than March 6, 2020***.

*Note: ‘Terms of Reference’ hosted on our website must be referred before submission of proposals.*

The proposal should be submitted to the Human Resource Division of FPAN



FPAN Central Office  
Pulchowk, Lalitpur, Nepal

## **Terms of Reference**

### **Baseline Survey**

**Project: Enhancing Availability and Women's Access to Integrated SRH- HIV Services in Earthquake Affected Districts of Nepal (Japanese Trust Fund Project)**

**Family Planning Association of Nepal (FPAN)**

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## Background

The earthquake of 2015 that hit Nepal resulted in a huge national loss causing 8,702 deaths and leaving 22,303 people injured (Ministry of Home Affairs, 2015); damaging a total of 446 public health facilities and 16 private facilities completely. Apart from this, 765 health facilities or administrative structures (701 public and 64 private) were partially damaged (NPC 2015). Of the 31 districts that were affected by the quake, 14 districts - including three districts of the project area - were categorized as highly affected districts (NPC 2015). Nearly 84% (375 out of 446) of the completely damaged health facilities were from the 14 most affected districts. Population profile of the country shows that highly affected 14 districts consist of 20% of the total population (Department of Health Services, 2014/15). Similarly, population profile of 2014/15 also shows that 21.1% of currently pregnant women reside in these highly affected 14 districts. There are an estimated 78,000 key affected people (people living with HIV, sex workers, men-who-have-sex-with-men, people who use drugs) residing in the 14 hardest hit districts in Nepal. Out of the 53 ART sites in the country, 16 are situated within these 14 districts.

Nepal needs to improve the delivery of SRH service with the integration of HIV by addressing structural and gender, cultural barriers at the peripheral level that hinder women accessibility in particular of adolescent and youth age group taking note of the low modern contraceptive prevalence, high unmet needs and remarkably high birth rate. This becomes more prominent especially after the earthquake of 2015 that hit the Central Region damaging health infrastructures extensively, destroying hundreds of thousands of houses compelling the residents including women and children to move to temporary shelters. This proposed project will target the vulnerable and key affected women and girls living in temporary shelters, their male partners and children through offering information and services based on the integrated SRH HIV service package.

District Disaster Management Authorities (DDMA) of each district is entrusted with the responsibility of preparing a district disaster preparedness plan with the inclusion of a number of clusters including health. Following the 2015 earthquake, it was clear that not only is it necessary for district disaster preparedness plans to be available, but also all stakeholders involved to have trained and skilled staff to implement the plans. Thus, this project will support to the preparation of a preparedness plan and its implementation through a minimum initial service package (MISP).

Even though there are a number of HIV programs (namely: Saath-Saath Program, GFATM Supported HIV Program) being conducted in these three districts, they are designed to focus on HIV with little or no linkage to other SRH services. Whereas FPAN provides comprehensive HIV services within the broader mandate of SRH in a continuum of care that covers behavior change communication, condom promotion, HIV testing and counselling and linking to treatment as well as SRH services including family planning, safe abortion, addressing gender-based violence, maternal and child health. In order to avoid duplication of services in the three districts, the project will strengthen coordination and develop a good referral pathway for beneficiaries to access comprehensive services.

### **Target Group**

- Reproductive age women
- Adolescence girl
- Poor, marginalized, socially excluded and underserved

**Project Districts-** Kathmandu, Kavre, Makawanpur

**Goal:** The overall goal is to contribute to improved health outcomes for SRHR and HIV of vulnerable communities particularly women and adolescent girls in the three earthquake affected districts.

### **Objectives**

- To enhance access to integrated SRHR including HIV services to 37,530 women from vulnerable communities affected by the earthquake by end of the project.
- To improve disaster preparedness to respond to SRHR through Minimum Initial Service Package (MISP) in three districts by the end of the project
- To strengthen partnerships with concerned agencies including networks setting up a client/ patient tracking system in each of three districts to minimize the number of clients lost to `follow up

### **Methodology**

The consultant will develop and present appropriate methodology of the Knowledge, Attitude and Practice (KAP) Survey to generate baseline information in the proposal which should include study methods/design, sampling techniques/procedure and sample size, relevant indicators, data collection tools (questionnaires, checklists) and techniques, data analysis plan, ethical considerations and other components. The methodology along with questionnaires and checklists will be finalized in consultation with FPAN before carrying out the field work.

### **Duration of Assignment**

The assignment will be due by first week of February, 2020. The consultant's team will complete various steps of survey within four weeks of contract including preparing draft report in final shape. FPAN will give comments on the draft report within three days upon receiving of the draft report and after incorporating the comments, the consultant will submit the final report of the survey to the FPAB within four days. However, the net duration

of the survey should not exceed five weeks. The consultant should propose the detail time plan for the baseline survey.

### **Qualification and Experience of the Consultant**

The lead consultant should be at least graduate in public health or relevant subject with demonstrated knowledge and expertise on biostatistics, preferably co-author of abstracts accepted in international conferences and/or research articles published in scientific peer reviewed journals. The consultant's team should be experienced in conducting survey of health programs. The previous experience with advanced data analysis will be an additional advantage.

### **Submission of Proposals**

The consultant will submit both technical and financial proposals clearly marking 'Technical Proposal for Baseline Survey' and 'Financial Proposal for Baseline Survey.' The proposal should be written in English.

The technical proposal will at least consist of

- Table of contents,
- Introduction
- Methodology
- Timeline plan
- Human resources and their main responsibilities
- Updated CV of key team members with status/copy of citizenship of Lead Consultant
- and other details
- The financial proposal will describe the details of proposed budget including estimated expenditure with taxable and non-taxable cost in terms of following
  - Remuneration for human resources
  - Travel (FPAN's responsibility)
  - Per diem (FPAN's responsibility)
  - Communication
  - Printing
  - PAN
  - Other details.

### **Responsibilities of FPAN**

FPAN will arrange for per-diem and travel to the consultant as per FPAN's existing provision. This is on top of the contractual amount of the consultancy. A separate discussion will be done based on FPAN's provision, need and budget available for the activity.

### **Evaluation Criteria**

The proposals submitted by the consultant or consulting firm/agency will be evaluated based on following criteria. The weightage of technical and financial proposal is 80% and 20% respectively. However, to enter the stage of financial proposal evaluation, the consultant should obtain at least 60% marks in technical proposal. The criteria for evaluation of technical proposal are: Relevant academic qualification of the consultant, experience in similar work in recent past, quality of proposal including detailed methodology with appropriate indicators, time allocation to complete the survey work with breakdown of activities. The lowest bid offered by technically qualified proposal will be considered as the reference to assess the total budget proposed by each technically qualified consultant. If required, negotiation will be done as per the budget provision for the activity.

### **Copy Right of the Report**

FPAN deserves copy right of the report and the researcher cannot publish part or full report without taking prior approval of FPAN.

### **Other Issues**

FPAN reserves the right to supervise and monitor all the progress as and when required. *In case of no satisfactory performance of the consultant as per the contract, FPAN deserves the right to cancel the contract at any stage with prior discussion and notice to the consultant.*

### **Payment Procedure**

The consultant will be awarded based on above criteria of evaluating technical and financial proposals. Mode of installment payment, taxes and other rules and regulations will be as per FPAN's existing practice.

### **Contact person**

For the purpose of responding to this invitation and/or for further information, please contact Mr. Subhash C. Shrestha (phone: 015010302 or e-mail: [fpanfinnish@fpan.org.np](mailto:fpanfinnish@fpan.org.np)) or Mr. Bibek Risal (phone: 015010240 or e-mail: [brisal@fpan.org.np](mailto:brisal@fpan.org.np)).