

## IPPF WISH RFP: Women's Integrated Sexual Health (WISH) Barrier Analysis

### 1. Background

International Planned Parenthood Federation (IPPF) works in 170 countries to empower the most vulnerable women, men and young people to access lifesaving health services and programmes. Supported by millions of volunteers and 3,000 staff, IPPF Member Associations (MAs) are autonomous, local non-profit organizations that provide sexual and reproductive health information, education and services through 46,000 service delivery points. Services provided include contraception, abortion care, maternal and child health and STI and HIV/AIDS prevention and care. In line with our Strategic Framework - Locally Owned: Globally Connected – IPPF plans to significantly extend our programme of integrated services with a focus on family planning in Africa and South Asia.

In partnership with UK Department for International Development (DFID), Women's Integrated Sexual Health (WISH) is a flagship family planning programme to deliver 20% of the UK's Family Planning global commitments. With a value of over £200 million over three years the programme's service delivery budget is set to deliver an additional 2.8m – 4.1m family planning users by end 2020. In working across Africa and Asia to provide a comprehensive package of sexual and reproductive health and rights (SRHR), the programme has a primary focus on increasing the number of additional Family Planning (FP) users alongside reducing maternal mortality and improving access to safe abortion. The priority populations include youth and some of the poorest and marginalised in society, and as such the programme has significant social and behaviour change components including media messaging and community mobilisation to increase demand for services.

IPPF, as the prime contractor of a consortium of partners, is a leader in the sector and is currently **seeking a consultancy agency or individuals to manage and undertake Barrier Analysis studies in three countries to identify determinants that influence health seeking behaviour towards sexual and reproductive health and rights services.**

The Barrier Analysis studies will be done in a phased approach in up to 16 countries in Africa and Asia over a one-year period; **this contract will be to implement initial studies in 3 countries (Ethiopia, Mozambique and Uganda) during a 3-month inception phase to be completed by February 2019** to inform social behaviour change communications, service delivery strategies, and subsequent implementation of the Barrier Analysis methodology in additional countries. **The behaviour change focus for this three-country study is modern contraceptive use among young people under age 20 in marginalized areas, including married and unmarried females and males in at least 2 geographic areas in each country (e.g., rural/urban).**

The successful consultancy agency or individuals will be required to design, implement and report on the Barriers Analysis studies.

## 2. Scope of Work

The consultancy agency or individuals will:

- Familiarize themselves with materials provided by IPPF to provide a comprehensive report that will reflect key areas for mass media and service delivery efforts
- Manage and implement all aspects of studies and preparation of final reports
- Coordinate with IPPF's in-country partners to identify locations and participants
- Train people on the Barrier Analysis Methodology, including in-country enumerators and IPPF partners
- Develop and/or adapt and pre-test Barrier Analysis tools, incorporating a more qualitative focus to existing family planning Barrier Analysis questionnaires
- Conduct Barrier Analysis Surveys in three countries among target populations (young people under age 20 in marginalized areas, including married and unmarried females and males in at least 2 geographic areas in each country)
- Code and analyse data
- Present and submit detailed reports including recommendations

The deliverables for the consultancy are:

- Recruited and trained Barrier Analysis enumerators in each of the three countries
- Barrier Analysis surveys for the identified behaviours
- Interviews with 90 respondents (45 doers and 45 non-doers) for each of the identified populations in each country completed for a total of at least 2,160 interviews
- Collated, cleaned, and coded dataset
- Complete reports for each country<sup>1</sup>

## 3. In Scope Countries

The initial contract will be for Phase 1 to complete Barrier Analysis studies in three countries: Ethiopia, Mozambique and Uganda. Based on evidence and learning generated from the initial phase, there is the

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<sup>1</sup> Reports should be focused on recommended actions organized around a structure similar to the recommendations beginning on p 18 of the report: Perera, S. M., Masterson, A. R., & Advisor, R. (2016). *Barrier Analysis of Exclusive Breastfeeding, Minimum Dietary Diversity and Early Antenatal Care Seeking Behaviors of Syrian Refugees in Lebanon*. Retrieved from <https://reliefweb.int/sites/reliefweb.int/files/resources/BarrierAnalysisinLebanonFinalReport9-30-2016.pdf>

potential to expand to a total of 16 countries in Africa and Asia, incorporating a training-of-trainers approach to build the capacity of IPPF partners to implement the Barrier Analysis methodology.

In addition to Ethiopia, Mozambique and Uganda, WISH countries where additional implementations may be carried out through future contracts are: Afghanistan, Bangladesh, Burundi, Madagascar, Malawi, Pakistan, Rwanda, Somalia, South Sudan, Sudan, Tanzania, Zambia and Zimbabwe.

#### 4. Consultancy Selection

The consultancy agency or individuals should be experienced with the Barrier Analysis methodology. In particular, the consultants should have a proven track record in:

- Collecting and centralising qualitative and quantitative data from marginalised populations in Africa and Asia
- Social or Behavioural Sciences, Health Education/Promotion, or Public Health
- Minimum of 5+ years of relevant work and research experience in Social Behaviour Change Communication (SBCC) and/or Public Health; experience in Public Health SBCC is a plus
- Minimum of 5+ years relevant work experience in developing countries; contacts/networks in WISH countries is a plus
- Knowledge of the country contexts for sexual and reproductive health and rights in Ethiopia, Mozambique and Uganda; knowledge in the countries where future implementations may be carried out a plus (Afghanistan, Bangladesh, Burundi, Madagascar, Malawi, Pakistan, Rwanda, Somalia, South Sudan, Sudan, Tanzania, Zambia and Zimbabwe)
- Adapting to and troubleshooting in environments with limited information and guidance
- Working both in a team and independently
- Computer literacy (Web, MS Outlook, Word, Excel, PowerPoint, etc.)
- Oral and written English; fluency in languages spoken in WISH countries is a plus
- Working with international and local NGOs; experience with organisations in the SRHR industry a plus

IPPF may choose to award the contract to multiple suppliers supporting different countries.

#### 5. Consultancy Pricing and Requirements

Please provide:

- Number of dedicated staff required and examples of experience of proposed staff.
- Project methodology, timeline and sequencing to deliver the scope of work within a 3-month time frame in Ethiopia, Mozambique and Uganda.

- Indicative days required for the scope of work.
- Indicative day rates of proposed staff.
- Budget in GBP for the delivery of the scope of work to be broken down by key activity and/or deliverable.
- Any additional costs or fees associated.

## 6. RFP Format

IPPF requests that proposals are submitted in either PDF or PowerPoint format evidencing how the organisation's experience and proposed approach will meet the requirements of the scope of work along with the consultancy pricing information, indicative timelines and preferred project methodology.

## 7. Evaluation and Award Process

The contract will be awarded to the organisation(s) who can best evidence meeting the required scope of work and provide a commercially competitive proposal. Shortlisted organisations may be invited to discuss the proposal further. All organisations who submit a proposal will be contacted three weeks after submission to advise them of the outcome and next steps.

## 8. Process Schedule

The deadline for proposals is COB **Friday 19<sup>th</sup> October 2018**. Please email proposal and direct any inquiries to:

- Kate Gray [kgray@ippf.org](mailto:kgray@ippf.org)
- Tia Jeewa [tjeewa@ippf.org](mailto:tjeewa@ippf.org)
- Rebecca Koladycz [rebeccak@ippf.org](mailto:rebeccak@ippf.org)