



Date: *May, 22, 2016*

## **REQUEST FOR QUOTATION RFQ N° UNFPA/KBL/RFQ/2016/025**

Dear Sir/Madam,

UNFPA hereby solicits a quotation for the following service:

### **Conduct Midwifery Needs Assessment**

UNFPA requires the provision of COMPREHENSIVE MIDWIFERY NEEDS ASSESSMENT IN AFGHANISTAN

This Request for Quotation is open to all legally-constituted companies that can provide the requested services and have legal capacity to perform in the country, or through an authorized representative.

#### **I. About UNFPA**

UNFPA, the United Nations Population Fund (UNFPA), is an international development agency that works to deliver a world where every pregnancy is wanted, every child birth is safe and every young person's potential is fulfilled.

UNFPA is the lead UN agency that expands the possibilities for women and young people to lead healthy sexual and reproductive lives. To read more about UNFPA, please go to: [UNFPA about us](#)

#### **II – Service Requirements/Terms of Reference (ToR)**

##### **1.0 Introduction and Background**

This Terms of Reference (ToR) has been developed to facilitate the conduct of a comprehensive Midwifery Needs Assessment in Afghanistan. The assessment is planned to examine Midwifery profession needs from Education, Regulation and Association, as well as explore the environment within which Midwifery interventions are implemented. It is planned that the report of such a comprehensive Midwifery assessment will be used to guide development and implementation of a national Midwifery action plan that will address the needs/gaps identified and contribute to increased utilization of quality Midwifery services in Afghanistan.

##### **1.1 Midwifery in Afghanistan: The facts**

Afghanistan has a projected population of 27.5 million people; 72 percent of whom live in rural areas (CSO, 2014). The Total Fertility Rate (TFR) of 5.1 children is influenced by early marriage, polygyny and desire for the male child.

In 2002, Afghanistan had one of the highest rates of maternal and child mortality in the world due to a lack of basic health care, equipment facilities shortage of Skilled Birth Attendance (SBA). As a result of the Afghan Government and development partners' efforts to improve health services and public health policy, these rates are declining but remain among the highest in the region. In spite of a reported four-fold decrease in the past twelve years, the maternal mortality ratio is 327 per 100,000 live births (Afghanistan Mortality Survey 2010). The infant mortality rate is 77 per 1000 live births; the majority of infant deaths are attributed to neonatal mortality. There is paucity of data on proportion of unintended pregnancies and abortion in Afghanistan.

The percentage of deliveries by skilled birth attendants has increased from 15 percent in 2003 to 40 percent in 2012 with a five-fold increase in rural areas. Similarly, institutional delivery remains low at 40 percent. Although 86 percent of the population has access to health facilities within 2 hours, the difficult terrain, insecurity and inadequate number of female health workers have affected access and utilization of maternal health services, especially in rural areas of Afghanistan. Most causes of maternal and child mortality are preventable. UNFPA remains committed to building Afghanistan's health sector and midwifery program to improve maternal and child health

## 1.2 Midwifery in Afghanistan: the response

In 2002, there were only 467 midwives serving the entire country, with substantial variation in their capacity and Afghanistan was worst places on globe for women's health. In Afghanistan, the efforts to revive and strengthen midwifery since 2002 have been critical to reducing maternal mortality from over 1,600 to 327 deaths per 100,000 live births.

## 2.0 Rational/ Justification

There is need to better understand the factors affecting midwifery services in Afghanistan in order to better design interventions to address them. This is especially important now given the political realization of the need to develop equity based programming as well as due to the growing momentum of mobilized policy makers and other social and institutional structures to support midwifery programmes in the country.

Midwifery program has substantially contributed to improving the status of women in Afghanistan. Engagement of women in this profession has led to political and social empowerment in its truest sense; because of their presence the utilization increased and women allowed to visit the health facilities so this is huge impact. All policy makers, donors and partners need to understand that midwifery is just not working in the hospital but this profession also need supervisors, teachers, managers and leaders; to provide these opportunities Midwives need higher education, professional production in order to provide higher quality of care with advanced level of skills, to get a level above the diploma midwives so they can be eligible to occupy key positions at government and other organizations, to become qualified teachers for diploma midwives ,to get a status in society, equal to men, reduces cultural stereotypical behavior and to have access to further education like Msc and PhD.

Thus the Midwifery Comprehensive Needs Assessment will provide the needed information on what needs to be done to ensure sustainable provision of quality Midwifery services, under the guidance and direction of the Ministry of Public Health.

Maternal mortality & morbidity is still very high in Afghanistan. Amongst other services, midwifery will be a key intervention to solve this challenges. To ensure global standards of midwifery in area of Education, Regulation, Association and Midwifery High Quality services are eventually achieved, the assessment will utilize previously tested global assessment methodology adapted for Afghanistan context.

## 3.0 Objectives

The main objective of the Comprehensive Midwifery Needs Assessment is to map the current status of midwifery in Afghanistan; and determine the situation and environmental needs/gaps that affect sustainable provision of quality midwifery services.

### The specific objectives are:

- Scan and map the current status of midwifery in Afghanistan
- Assess the needs for effective and sustainable midwifery services;
- Determine the quality of services provided

- Assess the needs of Midwives in the Education, Regulation and Association to increased utilization of the midwifery services , especially in the rural areas and population to demand and use midwifery services
- Assess the needs for conducive policy, financing, political and socio-cultural support for an autonomous midwifery programmes

### 3.1 Detailed Scope of Work

The scope of work provides guidance on issues to further examine under each objective.

*Objective 1: Scan and map the current status of Midwifery Education in Afghanistan.*

This objective will assess the current status of midwifery education based on ICM and WHO's midwifery education standards.

- Identify areas in education that need strengthening (schools, faculty, curriculum, equipment, and clinical practice).
- Assess and identified needs for midwifery programme where the information is available from existing literature.
- Identify the main actors in midwifery in Afghanistan; policy and decision makers, development and main implementing partners, key/potential supporters to the Midwifery 2030 agenda.

*Objective 2: Assess the needs for effective and sustainable midwifery regulation.*

This objective will analyses the midwifery professional needs related to regulatory body including review of the needs in each of the health systems and services delivery as it relates to ensuring provision of midwifery services to the population.

Assess to find way to achieve main purpose of regulatory body which:

- a. To protect the public from unsafe practices;
  - b. To ensure quality and standards of midwifery care;
  - c. Fostering the development of the profession;
  - d. Giving an identity (including protection of the title);
  - e. Status to the professional practitioners and supports midwives to work autonomously;
  - f. Promotes an enabling environment so that midwives can work within their full scope of practice.
- Assess the availability, adequacy and appropriateness of policies on regulation in general, and whether they are stand alone or integrated with professional or within the wider National and international Health Policies.
  - Conduct a situation analysis for the establishment of Afghanistan Midwives and Nurses Council (AMNC)
  - Assess to find the gaps to hasten the establishment of the AMNC.
  - Determine client satisfaction with midwifery services and find the needs of midwifery and Nursing council establishment.
  - Assess staff capacity for the leadership and management of Midwifery and Nursing Council.
  - Carry out a SWOT Analysis for establishment of Midwifery and Nursing Council.
  - Present the situation analysis and the SWOT Analysis to MoJ, MoPH, key stakeholders and development partners for validation and feedback
  - Assess the amount of resources allocated and spent by development partners on establishment of Midwifery and Nursing Council
  - Assess the amount of resources allocated and spent from Government budget for the council.

*Objective 3: Assess the needs of Midwifery Association's ability to fulfill its role as a professional organization depends on its organizational capacity.*

The focus of the assessment under this objective relates to midwifery professional association assessing the needs for increased demand for its members and providing midwifery services include: Thus association capacity assessment is an important step in the creation of strong, mission-driven, well-managed, and results-oriented associations able to choose and execute context-specific midwifery, maternal, newborn and child health projects.

- Assess the main socio-cultural and economical barriers (beliefs, values and practices) related to midwifery association in Afghanistan
- Assess the availability of relevant advocacy and communication plan, including its provincial chapters.
- Assessing existing capacity of the association in the areas of governance; management practices and leadership; financial resource management; association functions; collaboration, partnerships and networks; visibility including media relations and sustainability;
- Monitoring progress of association development by re-administering the Member Associations Capacity Assessment Tool( MACAT) periodically
- Assess availability and suitability of the different media of communication for effective social mobilization and communication on AMA provincial Chapters for the different target groups: Provincial Directors, BPHS & EPHS implementers, Midwives, etc.
- Assess the partnership and coordination structure and its functioning for effective AMA leadership and management. Identify any duplication in funding or programme implementation.
- Assess the amount of resources allocated and spent by development partners on professional association

In addition to the Comprehensive Midwifery Needs Assessment, the consulting firm is also required to:

- Conduct a validation workshop on the draft findings of the assessment, and use the workshop to also brainstorm on draft action plan to address the gaps/needs identified
- Prepare a draft National Midwifery Action Plan in response to the findings in the Comprehensive Midwifery Needs Assessment.

#### 4.0 Methodology

The Comprehensive Midwifery Needs Assessment will use a combination of qualitative and quantitative methods of data collection. The consulting firm will determine the most appropriate methodology and tools for conducting the Midwifery Needs Assessment. Amongst the tools to be considered for use are: ICM and WHO Educational Standards, ICM Regulation standards and ICM Member Association Capacity Assessment Tool (MACAT). They will work with a national institution to train and provide oversight for data collection and analysis.

Methods to consider include:

1. *Document reviews* – this will include national laws, policies, survey reports, organizational programmes, plans, reports, and budget and expenditure analysis, amongst other documents.
2. *Key Informant interviews* – This will be undertaken with parliamentarians, policy/decision makers from selected ministries, religious and cultural leaders, development partners and NGOs active in midwifery programmes, as well as managers of health facilities.
3. *Group interviews*: This will be done with health workers in health facilities, community based health workers, staffs of RH directorate and other NGOs working on midwifery issues. Exit group interviews will also be conducted with clients/patients after they have received services. Major partners will also be called to a validation workshop when draft report is ready.
4. *Observations*: The observation of the midwifery program will be done at policy, service and implementation level activities during pre-and in-service education through field visits, to MCH clinics, Maternity Hospital, Midwifery Schools run by government, private, RH Partners including associations and other NGOs. The tools to be used are attached as Annexes.

## 6.0 Expected Outputs

The main expected outputs of the comprehensive Midwifery Needs Assessment are:

- Conduct many meeting for approval of the assessment with MoPH/ IRB and develop the assessment protocols.
- An inception report, detailing approach, methodology and tools for the Comprehensive Midwifery Needs Assessment Report for Afghanistan
- A Validation Workshop Report on Comprehensive Midwifery Needs Assessment
- To prepare and submit the validated Comprehensive Midwifery Needs Assessment Report for Afghanistan
- A draft National Midwifery Strategic Action Plan based on workshop finding and recommendations to address the comprehensive midwifery needs in Afghanistan

## 7.0 Time frame

The period of work is expected to take a period of 35 working days spread over a 3 month period. Part of the work will be done by the firm through out of country work as well as 25 working days in Kabul and selected provinces while working with a national research institution.

The 35 working days will focus on

- a. conducting the comprehensive midwifery needs assessment:
  - a. review of documents (3 days),
  - b. national level interviews, field visits and preparation and planning (5 days),
  - c. data collection and field work supervision, monitoring and QA (15 days),
  - d. data analysis monitoring and drafting the initial report (5 days),
- b. Conducting validation of the Comprehensive Midwifery Needs Assessment report in a workshop with key stakeholders (2 days – 1 day preparation and 1 day workshop). The workshop may also be used to draft actions to respond to the gaps/needs identified
- c. Integrating review comments from the validation workshop and preparing the final Comprehensive Midwifery Needs Assessment Report, as well as a fair draft of the Midwifery Strategic Action Plan, which incorporates based on the assessment findings. (5 days).

## 8.0 Consultancy Logistics and Resources

*8.1 Travel logistics* – The UNFPA Afghanistan CO will arrange for all travels, field visits and facilitate schedules for external meetings, once the consulting firm has developed a programme for undertaking the assignment.

*8.2 Supervision* – under overall supervision of the UNFPA Representative, the consulting firm will be directly supervised and managed by the RH Adviser and National Reproductive Health Officer under the guidance of the Deputy Representative. For purpose of ownership, the firm's work will also be reviewed by Steering Committee in General Directorate of Curative Medicine at the Ministry of Public Health (MoPH). Final report will be signed off by the Representative in consultation with the MoPH and with the advice of the Task Force.

*8.3 Payment schedule* – The consulting firm will be paid according to the following schedule:

- 20% at the signing of the Inception Report for the assignment;
- 30% at the clearance of first draft of the Comprehensive Midwifery Needs Assessment Report and Draft Action Plan by the Task Force and acceptance of quality of the report and the plan by UNFPA
- 50% at submission of the final Assessment Report and its finalized Action Plan

#### 8.4 Consulting Team Profile

The firm should have collective working experience in the area of Midwifery including Education, Regulation and Association and have been involved in development of midwifery strategic plans and situational analysis and a national institution with significant research capacity will be contracted to support the data collection and analysis of this assessment, with a focus also on capacity building for research in midwifery.

The lead consultant should have at least 10 years professional experience preferably in midwifery planning programme in the public and/or private sector is required. He/she should have a PhD level or the equivalent qualification in the area of midwifery, public health, and/or other related social science field. Fluency in oral and written English is required. Knowledge of and previous work experience in Afghanistan is an asset.

#### 9.0 4. Following is the evaluation criteria for the quotations received:

- 1- The bidder should be registered as a company or institution with the Government of Afghanistan;
- 2- The bidder must be operational in Afghanistan for at least 3- 5 years;
- 3- The bidder needs to have previous similar research conducting experience working with international institutions or multi-national companies;
- 4- The bidder must have internal editorial and production capacities in all national languages and English;
- 5- The bidder must have well recognized brand in Afghanistan and must be compliant with the United Nations values.

## II. Questions

Questions or requests for further clarifications should be submitted in writing to the contact person below:

|                                  |                          |
|----------------------------------|--------------------------|
| Name of contact person at UNFPA: | <i>Hamed Rabbani</i>     |
| Tel N <sup>o</sup> :             | <i>0093729261300</i>     |
| Email address of contact person: | <i>rabbani@unfpa.org</i> |

The deadline for submission of questions is **June, 02,2016, 03:30 PM**. Questions will be answered in writing and shared with all parties as soon as possible after this deadline.

## III. Content of quotations

Quotations should be submitted in a single e-mail whenever possible, depending on file size. Quotations must contain:

- a) Technical proposal, in response to the requirements outlined in the service requirements / TORs.
- b) Price quotation, to be submitted strictly in accordance with the price quotation form.

Both parts of the quotation must be signed by the bidding company's relevant authority and submitted in PDF format.

## IV. Instructions for submission



Proposals should be prepared based on the guidelines set forth in Section IV above, along with a properly filled out and signed price quotation form, are to be sent in hard copy I to the contact person indicated below no later than **Sunday, June 5<sup>th</sup> at 10:00 AM, Kabul local time.**

|                                  |  |
|----------------------------------|--|
| Name of contact person at UNFPA: | <i>Hamed Rabbani</i>   |
| Address of contact person:       | <i>UNFPA Country Office, UNOCA Compound, Kabul Jalal Abad Road, Pakitia Kott, Kabul, Afghanistan</i> |

- The following reference must be included on the envelope subject line: **RFQ N<sup>o</sup> UNFPA/KBL/RFQ/2016/025 – [Conduct Midwifery needs assessments]**. Proposals that do not contain the correct subject line may be overlooked by the procurement officer and therefore not considered.

#### V. Overview of Evaluation Process

Quotations will be evaluated based on the technical proposal and the total cost of the services (price quote).

The evaluation will be carried out in a two-step process by an ad-hoc evaluation panel. Technical proposals will be evaluated for technical compliance prior to the comparison of price quotes.

#### VI. Award Criteria

UNFPA shall award a [Purchase Order / Professional Service Contract on a fixed-cost basis to the lowest-priced most technically acceptable offer.

#### VII. Right to Vary Requirements at Time of Award

UNFPA reserves the right at the time of award of contract to increase or decrease by up to 20% the volume of services specified in this RFQ without any change in unit prices or other terms and conditions.

#### VIII. Payment Terms

UNFPA payment terms are net 30 days upon receipt of invoice and delivery/acceptance of the milestone deliverables linked to payment as specified in the contract.

#### IX. Fraud and Corruption

UNFPA is committed to preventing, identifying, and addressing all acts of fraud against UNFPA, as well as against third parties involved in UNFPA activities. UNFPA's Policy regarding fraud and corruption is available here: [Fraud Policy](#). Submission of a proposal implies that the Bidder is aware of this policy.

Suppliers, their subsidiaries, agents, intermediaries and principals must cooperate with the Office of Audit and Investigation Services of UNFPA as well as with any other oversight entity authorized by the Executive Director of UNFPA and with the UNFPA Ethics Advisor as and when required. Such cooperation shall include, but not be limited to, the following: access to all employees, representatives, agents and assignees of the vendor; as well as production of all documents requested, including financial records. Failure to fully cooperate with investigations will be considered sufficient grounds to allow UNFPA to repudiate and terminate the contract, and to debar and remove the supplier from UNFPA's list of registered suppliers.

A confidential Anti-Fraud Hotline is available to any Bidder to report suspicious fraudulent activities at [UNFPA Investigation Hotline](#).

#### X. Zero Tolerance



UNFPA has adopted a zero-tolerance policy on gifts and hospitality. Suppliers are therefore requested not to send gifts or offer hospitality to UNFPA personnel. Further details on this policy are available here: [Zero Tolerance Policy](#).

#### **XI. RFQ Protest**

Bidder(s) perceiving that they have been unjustly or unfairly treated in connection with a solicitation, evaluation, or award of a contract may submit a complaint to the UNFPA Head of the Business Unit Yerkezhan Tabyldiyeva, International Operations Manager at [yerkezhan@unfpa.org](mailto:yerkezhan@unfpa.org). Should the supplier be unsatisfied with the reply provided by the UNFPA Head of the Business Unit, the supplier may contact the Chief, Procurement Services Branch at [procurement@unfpa.org](mailto:procurement@unfpa.org).

#### **XII. Disclaimer**

Should any of the links in this RFQ document be unavailable or inaccessible for any reason, bidders can contact the Procurement Officer in charge of the procurement to request for them to share a PDF version of such document(s).



## PRICE QUOTATION FORM

|   |                      |
|---|----------------------|
| <b>Name of Bidder:</b>  |                      |
| <b>Date of the quotation:</b>   | 22/05/2016           |
| <b>Request for quotation N°:</b>  | UNFPA/KBL/RFQ/16/025 |
| <b>Currency of quotation:</b>   | USD                  |
| <b>Delivery charges based on the following 2010 Incoterm:</b>   | DDP                  |
| <b>Validity of quotation:</b><br><i>(The quotation shall be valid for a period of at least 3 months after the submission deadline.)</i> |                      |

- Quoted rates must be **exclusive of all taxes**, since UNFPA is exempt from taxes.

**Example Price Schedule below:**

| Item   | Description | Number & Description of Staff by Level | Hourly Rate | Hours to be Committed | Total |
|--|-------------|--|-------------|-----------------------|-------|
| <b>1. Professional Fees</b>  |             |  |             |                       |       |
|  |             |  |             |                       |       |
|  |             |  |             |                       |       |
|  |             |  |             |                       |       |
| <i>Total Professional Fees</i>   |             |  |             |                       | \$\$  |
| <b>2. Out-of-Pocket expenses</b>   |             |  |             |                       |       |
|  |             |  |             |                       |       |
|  |             |  |             |                       |       |
| <i>Total Out of Pocket Expenses</i>  |             |  |             |                       | \$\$  |
| <b>Total Contract Price</b><br><i>(Professional Fees + Out of Pocket Expenses)</i> |             |  |             |                       | \$\$  |

*Vendor's Comments:*

I hereby certify that the company mentioned above, which I am duly authorized to sign for, has reviewed RFQ UNFPA/KBL/RFQ/16/025 including all annexes, amendments to the RFQ document (if applicable) and the responses provided by UNFPA on clarification questions from the prospective service providers. Further, the company accepts the General Conditions of Contract for UNFPA and we will abide by this quotation until it expires.

|                |                             |  |
|----------------|-----------------------------|--|
|                | Click here to enter a date. |  |
| Name and title | Date and place              |  |



**ANNEX I:  
General Conditions of Contracts:  
De Minimis Contracts**

This Request for Quotation is subject to UNFPA's General Conditions of Contract: De Minimis Contracts, which are available in: [English](#), [Spanish](#) and [French](#)