



Issued on: 30-09-2024

To
Ms./Mr
Individual Consultant/Consultancy firm
Subject: Letter of Invitation for Midterm Review of National Strategy For Adolescent Health 2017-2030.
Dear Madam/Sir,

The Right Here Right Now (RHRN) is a multi-country coalition project, funded by the Ministry of Foreign Affairs of the Kingdom of the Netherlands and executed by Rutgers. The project is continuing its second phase (RHRN2) on 2021-25, in 10 countries across the world, including Bangladesh, Benin, Burundi, Ethiopia, Indonesia, Kenya, Morocco, Nepal, Tunisia, and Uganda.

In Bangladesh, RHRN is continuing with 7 partner organisations- BRAC, Nagorik Uddyog, Naripokkho, Oboyob, RHSTEP, Wreetu Health and Well-being Foundation, Youth Policy Forum (YPF) and is being led by BRAC. BRAC's Social Empowerment and Legal Protection (SELP) Programme is currently hosting this project. The project works to preserve the sexual and reproductive health rights (SRHR) of young people aged 15-35. Its goal is to contribute in achieving the SDGs 3, 4, 5, 10, and 16, keeping the youth of Bangladesh at the forefront of all interventions to promote gender justice.

Adolescents are the largest human resource to expedite the process of accomplishing SDG by 2030, they also play the key role in the economic growth of the country. Therefore, the investment in the wellbeing of the adolescents will bring a triple dividend of benefits for today, for decades to come, and for the next generation [1]. In Bangladesh, the Ministry of Health and Family Welfare (MoHFW) is providing health care services to its citizens by taking various policies, strategies or action plans. Simultaneously, many research organisations and development partners are engaged with conducting operation research, action research, and evaluation research to provide a direction to the government. In that context, the Government is currently implementing the National Strategy for Adolescent Health (NSAH) 2017 to 2030.

The vision of the strategy is 'By 2030, all adolescent boys and girls of Bangladesh, especially those who are most vulnerable, will be able to enjoy a healthy life.' The strategy has four strategic directions e.g., Adolescent Sexual and Reproductive Health, Violence against Adolescents, Adolescent Nutrition, Mental Health of Adolescents and two cross cutting issues: Social and Behavior Change Communication and Health Systems Strengthening. There are also guidelines on addressing issues of Vulnerable Adolescents and Adolescents in Challenging Circumstances. A detailed plan of action namely 'National Plan of Action for Adolescent Health Strategy 2017-2030 has also been developed to implement the strategy.

The strategy focuses not only on the Sexual and Reproductive Health (SRH) but also on the holistic approach for the adolescents, therefore it is termed as a "comprehensive strategy" (NSAH, 2017). However, a clear implementation plan and monitoring mechanism of the current strategy is yet to be developed.[2] The UN Post-2015 Development Report [3] suggests that access to sexual and reproductive health and rights increases rates of education, reduces healthcare costs, promotes gender equality and leads to economic gains. The timeframe of the strategy is 14 years (2017-2030) by which the goals and objectives under each theme are to be achieved. Currently we are at the mid-term (7th year) of the time frame which is a good time to

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review the strategy to identify the progress, challenges and way forward for the next half.

However, reviewing the whole strategy requires a significant amount of time and resources. Keeping the resources constraint in mind, we are willing to review some parts of the strategy in collaboration with the Directorate General of Health Services (DGHS) and <u>Directorate General of Family Planning (DGFP)</u> to identify specific learnings and challenges and provide concrete recommendations for future action plans on the segments.

For this reason, we are looking for a suitable consultant/ consultancy firm to serve the purpose.

Here we are enclosing the ToR for the consultancy service. We are looking forward to receive (i) CV/ Profile of the Individual mentioning the required experiences as per the attached ToR (ii) a technical proposal describing the methodology (iii) a budget for the assignment

RFP No: BPD/2024/RFP-2444

Closing Date & Time: 14-10-2024 02:30 PM (Dhaka Local Time)

Please submit the Proposal on 14-10-2024 02:30 PM (Dhaka Local Time) in tender.brac.net. Any offer via email or hard copy is treated as non-responsiveness.

BRAC recognizes the empowerment of women and girls as fundamental to the organization's vision and mission. Women and gender-diverse individuals are encouraged to participate in the procurement. Without compromising organizational compliance in procurement, the selection of the supplier/vendor would be finalized.

During the participation in any tendering/enlistment process, if any Consultant/Consulting firm provides fake document, they will be banned from business with BRAC for certain years as per BRAC Procurement Guideline

Payment Condition:

Mode of payment will follow the below conditions:

All payments are subject to deduction of appropriate VAT and Tax as per government rules and regulations.

30% - after submission and approval of the inception report

30% - after submission and approval of the draft report

Final payment (40%) at the submission of final report along with all remaining deliverables.

Payment would be made to the Consultant/Consultancy firm after acceptance/recommendation by the programme through an automatic Bank transfer directly into any scheduled Bank in Bangladesh in favour of consultant/consultancy firm.

For payment, Consultant/consultancy firm has to submit an invoice duly describing the agreed accomplishment.

It is noted that the Firm must fill up their accounts information as per instruction i) Account name ii) A/C number iii) Bank name iv) Branch name v) E-mail address vi) Routing Number. Payments will be subject to deduction of VAT & Tax at source as per Govt. Rule. (If applicable).

Payment will be disbursed within 45 days after vetting by Programme.

Consultant/Consultancy Firm must submit 13 digits new BIN, Updated Trade license (Applicable for firm) & TIN, updated income tax certificate (applicable for both firm & Individual) with proposal and Mushok 6.3 Applicable for firm and updated income tax certificate (applicable for both firm & Individual) with invoice.

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Name: TAZKIA RAZEKIN PIN: 00263387. Designation: Deputy Manager, Procurement Email: tazkia.razekin@brac.net https://erp.brac.net Printing Date & Time: 30-09-24 04:32 PM



As per the Finance Act-2022, the rate of tax shall be fifty percent (50%) higher if the payee (Vendors) fails to submit proof of submission of Income tax return at the time of making the payment.

Please note: Invoice date and Mushak 6.3 date must be the same. (Invoice submission time). You are requested to affix 10Tk stamp on the bill.

Please provide team composition details with consultant's name and role for this project. CV's are required for the consultants who will work for consultancy Firm

For approval of your account during the supplier registration process, and for any other clarification, please contact with Tazkia Razekin, BRAC Procurement Department (BPD), Phone: +8801325070202, Email: tazkia.razekin@brac.net.

STANDARD REQUEST FOR PROPOSALS (RFP) DOCUMENTS

Section 4: Financial Submission Form (BPD 5-15)

To:

BRAC Procurement Department **BRAC Head Office** BRAC Centre, 6th Floor 75, Mohakhali, Dhaka 1212

Date:

Ladies/Gentlemen:

We agree to be bound by the Letter of Invitation and we hereby submit our attached Financial Proposal for the

<insert currency and amount in both, words and figures>

The amount is including of local taxes & vat.

We confirm that our Proposal shall remain valid, from the closing date, for the period stated in the RFP.

Our Financial Proposal is binding upon us and shall be subject to any modifications resulting from Contract negotiations, up to expiration of the validity period of the Proposal.

Commissions and gratuities paid or to be paid by us to agents relating to this Proposal and Contract execution, if we are awarded the Contract, are listed below:

Name and Address of Agents/Recipient	Amount and Currency	Purpose of Commission or Gratuity

We understand you are not bound to accept any or all Proposals you receive..

Yours sincerely,

Authorized Signature:

Name and Title of Signatory:

Name of Firm:

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Address:

Firm's Seal or Stamp:

Terms of Reference (ToR)

Midterm Review of National Strategy For Adolescent Health 2017-2030

Introduction:

The Right Here Right Now (RHRN) is a multi-country coalition project, funded by the Ministry of Foreign Affairs of the Kingdom of the Netherlands and executed by Rutgers. The project is continuing its second phase (RHRN2) on 2021-25, in 10 countries across the world, including Bangladesh, Benin, Burundi, Ethiopia, Indonesia, Kenya, Morocco, Nepal, Tunisia, and Uganda.

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The vision of the strategy is 'By 2030, all adolescent boys and girls of Bangladesh, especially those who are most vulnerable, will be able to enjoy a healthy life.' The strategy has four strategic directions e.g., Adolescent Sexual and Reproductive Health, Violence against

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Adolescents, Adolescent Nutrition, Mental Health of Adolescents and two cross cutting issues: Social and Behavior Change Communication and Health Systems Strengthening. There are also guidelines on addressing issues of Vulnerable Adolescents and Adolescents in Challenging Circumstances. A detailed plan of action namely 'National Plan of Action for Adolescent Health Strategy 2017-2030 has also been developed to implement the strategy.

The strategy focuses not only on the Sexual and Reproductive Health (SRH) but also on the holistic approach for the adolescents, therefore it is termed as a "comprehensive strategy" (NSAH, 2017). However, a clear implementation plan and monitoring mechanism of the current strategy is yet to be developed.[2] The UN Post-2015 Development Report [3] suggests that access to sexual and reproductive health and rights increases rates of education, reduces healthcare costs, promotes gender equality and leads to economic gains. The timeframe of the strategy is 14 years (2017-2030) by which the goals and objectives under each theme are to be achieved. Currently we are at the mid-term (7th year) of the time frame which is a good time to review the strategy to identify the progress, challenges and way forward for the next half.

However, reviewing the whole strategy requires a significant amount of time and resources. Keeping the resources constraint in mind, we are willing to review some parts of the strategy in collaboration with the Directorate General of Health Services (DGHS) and <u>Directorate General of Family Planning (DGFP)</u> to identify specific learnings and challenges and provide concrete recommendations for future action plans on the segments.

Objectives of the assignment

The objective of the assignment is to assess the progress made towards achieving the goals and objectives outlined in the National Strategy for Adolescent Health 2017-2030 for the themes: Adolescent Sexual and Reproductive Health, Social and Behaviour Change Communication (SBCC) and Health System Strengthening. The specific objectives are to:

- 1. Review the strategic objectives, key strategies and the action plans regarding the three themes of NSAH: Adolescent Sexual and Reproductive Health (ASRH), Social and Behaviour Change Communication (SBCC) and Health System Strengthening (HSS) to identify the time bound progress of the strategy and action plan.
- 2. Identify key challenges, barriers, and gaps in the implementation of the strategy, including policy, programmatic, and resource-related issues that may be delayed the progress.
- 3. Find out the good practices, effectiveness and efficiency of the current programs, interventions, and resource utilisation in addressing the health needs of adolescents.
- 4. Develop actionable recommendations for policy makers, development practitioners (CSOs) and stakeholders to improve the implementation and reach the goals of the strategy in the coming years.
- 5. Suggest any revisions e.g., target or others of the strategy or action plan in current country context

Scope of Work

The mid term review will cover the following areas:

1. Design the study:

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• Develop an appropriate methodology including interview guidelines, FGD/survey questionnaire, consent forms, sampling and field visit plan. Also Identify the necessary tools/frameworks to assess the progress

1. Assessment of Progress:

- 1. Assess progress made towards achieving the specific objectives and targets set in the strategy and action plan based on scientific methods/accepted frameworks
- 2. Review the utilisation of resources allocated for adolescent health
- 3. Identify trends and changes in adolescent health outcomes since the strategy's inception

2. Stakeholder Engagement:

1. Engage with key stakeholders, including government agencies, non-governmental organisations, health care providers and adolescents to gather feedback

3. Identifying Learnings, Challenges and Gaps:

- 1. Review the best practices from Bangladesh and other similar countries
- 2. Identify any learnings, challenges or barriers to effective implementation of the strategy.
- 3. Highlight gaps in policy, service delivery, and resource allocation.

4. Recommendations:

- 1. Recommend feasible action plans to mitigate the challenges
- 2. Suggest strategies for enhancing the implementation of the strategy in the remaining years.
- 3. Propose mechanisms for improved monitoring and evaluation of the strategy of the NSAH, including a community based accountability mechanism of the health facilities
- 4. Advice if there is any change needed in the strategy itself based on the evidence

Proposed Methodology:

- 1. **Desk Review:** Reviewing the National Strategy for Adolescent Health 2017-2030, National Plan of Actions for Adolescent Health 2017-2030 and other necessary documents e.g., reports, studies newsletters, websites of the relevant ministries and other development organisations, relevant articles, global documents and reports
- 2. **Key Informant Interviews (KII):** semi-structured interviews (8-10) with the government stakeholders e.g., representatives from MoHFW, MoWCA, MoLGRDC, development practitioners experienced in this field, UN representatives preferable who were involved in formulating the strategy and action plans e.g., from UNICEF, UNFPA, WHO etc.
- 3. **FGD:** Focused group discussions (15-20) with the health service providers, adolescents who availed the services/monitored the services, parents. Survey of the participants if needed
- 4. **Field visits:** Minimum 15-20 local health facilities visits to understand and experience the challenges, learnings and progresses from at least 3 Divisions of the country
- 5. **Workshop:** Conduct one inception workshop to present and validate the methodology and frameworks with the relevant stakeholders e.g., RHRH coalition partners government officials and NGOs

Deliverables:

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- 1. Inception report and presentation that would include understanding of the assignment, brief overview of adolescent health situation, proposed methodology, reflection of experiences
- 2. Draft mid-term review report of the strategy and action plan
- 3. Concise notes of all conducted interviews including any transcripts
- 4. Final Revised report incorporating all the feedback from the key stakeholders
- 5. PowerPoint presentation of final report including the background, methodology, key findings and recommendations
- 6. National dissemination of the findings for validation of findings

Timeline:

The assignment to be carried out for 50 calendar days from the date of contract sign. But the key tasks are to be completed by November 2024.

Expected competencies of the consultant

- 1. Consultant/s with prior experience of working with policy level advocacy and substantial SRHR knowledge will be eligible for applying for the consultancy. Strong understanding of Bangladesh's health sector, particularly adolescent health programs and strategies is required.
- 2. Master's degree or higher in public health, social sciences, or a related field, and at least 5 years of experience in health policy evaluation, with a specific focus on adolescent health, SRHR, SBCC, and health system strengthening is preferred.
- 3. Prior track record of working with the Ministry of Health and Family Welfare (MOHFW), Ministry of Women and Children Affairs (MOWCA), DGFP and DGHS is required . He/she should have a progressive stance on sexual and reproductive health and rights, specifically young people's rights.
- 4. Demonstrated capacity in research and publications will be preferred. Detailed CVs will be evaluated along with the technical and financial proposals.

Submission of proposals:

A proposal will include the following:

- 1. Cover letter
- 2. A technical proposal highlighting a coherent literature review, proposed methodology,
- 3. academic qualification of the consultant team, relevant experiences.
- 4. A work plan for the assignment
- 5. A financial proposal (with appropriate budget breakdown and a summary top sheet). The budget should include all the remuneration and consultancy fees, consultation cost including inception and methodology validation workshop). The costing for the national level dissemination workshop of the study findings will be borne by BRAC.
- Sample of a recently completed research report or advocacy strategy / brief for INGOs/NGOs

Ethical considerations

The research must follow the Safeguarding policy of BRAC to demonstrate the highest standards of behaviour and sensitivity to child right, gender inclusion and cultural contexts.

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Voluntary participation must be ensured, whereby the research objectives will be clearly explained to all the stakeholders. The consultant will obtain informed consent forms from all stakeholder consulted and notify them of their rights to confidentiality. The consultant must be sensitive to cultural norms during interactions with stakeholders. The final report will preserve anonymity and confidentiality of the stakeholders.

Coordination and Reporting

The consultant will work in close collaboration with the Country coalition lead - BRAC, along with other partners. BRAC will provide direct supervision, will review the progress of the study milestones and ensure quality of the deliverables. All documents, data and reports produced during the assignment are to be treated as confidential and restricted for public use. The consultant must submit all original documents, consent forms, data sets and financial bill vouchers etc. to BRAC when and as required within deadlines.

Payment schedule

All payments are subject to deduction of appropriate VAT and Tax as per government rules and regulations.

30% - after submission and approval of the inception report

30% - after submission and approval of the draft report

Final payment (40%) at the submission of final report along with all remaining deliverables.

References

- [1] Patton G.C., Sawyer S.M., Santelli J.S., Ross D.A., Afifi R., Allenn B., et al. (2016). Our future: a Lancet commission on adolescent health and wellbeing. The Lancet. 387(10036):2423-78.
- [2] https://ijols.com/resources/html/article/details?id=190913&language=en
- [3] UN Women & UNICEF (2018). International technical guidance on sexuality education: an evidence-informed approach. UNESCO Publishing

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Thanking You For BRAC

Tachmer

Tashnuba Binte Anwar Senior Manager, Procurement

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