United Nations Population Fund, UNFPA

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 Date: 08th September 2023

**Request for Quotation – No. LKA/RFQ/23/021 – Re-advertisement**

Dear Sir/Madam,

We hereby solicit your quotation to conduct a study to assess the barriers and stigma towards condom use in Sri Lanka as per the attached ToR – Annex B.

If you are interested in submitting a quotation for the above mentioned assignment as per the ToR, kindly submit your detailed technical and financial proposal and send by email to **lk-procurement@unfpa.org** not later than **25th October 2023 on or before 5.00 pm. UNFPA will expect a credit facility of minimum 30 days. Those who have already submitted the quotation, please re-submit to the mentioned e-mail address.**

 **Only quotations submitted in our format will be taken into consideration.**

Suppliers perceiving that they have been unjustly or unfairly treated in connection with a solicitation, evaluation, or award of a contract, may complain to the UNFPA Head of Office Mr. Kunle Adeniyi, adeniyi@unfpa.org. Should the protestor be unsatisfied with the reply provided by the UNFPA Head of Office, the protestor may contact the Chief of the Procurement Services Branch at procurement@unfpa.org.

UNFPA has adopted a zero tolerance policy on gifts and hospitality. In view of this UNFPA personnel is prohibited from accepting any gift, even of a nominal value, including drinks, meals, food products, hospitality, calendars, transportation, and any other forms of benefits. Vendors are therefore requested not to send gifts or offer hospitality to UNFPA personnel. This Request for Quotation is subject to General Conditions of Contract, which are available at: <http://www.unfpa.org/resources/unfpa-general-conditions-contract>

**ANNEX A**



**Price Quotation Form**

**Name of Bidder: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Bid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Request for Quotation No:** LKA/RFQ /2023/021

 **Currency of Bid price:** LKR

**Delivery time** *(days from receipt of order till dispatch):*

**Expiration of Validity of Quotation** *(The quotation shall be*

*valid for a period of* ***at least 3 months*** *after the Closing date.):*

**Sample payment schedule:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item No.** | **Description** | **Unit** | **Qty** | **Unit Price** | **Total Price** |
| **01** | Upon finalization of the questionnaire for interviews | 01 | 01 | 30% of the total proposed contract value |  |
| **02** | Upon completion of data collection and analysis and submission of draft report for review  | 01 | 01 | 40% of the total proposed contract value |  |
| **03** | Upon submission of final report  | 01 | 01 | 30% of the total proposed contract value |  |

*Note:* Detailed Financial proposal should include detailed cost breakdown for each deliverable (e.g., human resources, transport, printing, stationery, as applicable)

***NB: UNFPA IS VAT EXEMPT AND PREFERABLY QUOTES SHOULD EXCLUDE VAT (please indicate if your prices are inclusive or exclusive of VAT)***

*Vendor’s Comments:*

**I hereby certify that this company, which I am duly authorized to sign for, accepts the terms and conditions of UNFPA (**<http://www.unfpa.org/resources/unfpa-general-conditions-contract> **) and we will abide by this quotation until it expires.**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name and title Date and Place**



**ANNEX B**

**I - About UNFPA**

The United Nations Population Fund (UNFPA) is the United Nations Sexual and Reproductive Health agency. UNFPA’s goal is to achieve universal access to Sexual and Reproductive Health, realize Reproductive Rights, and reduce maternal mortality to accelerate progress on the agenda of the Programme of Action of the International Conference on Population and Development (ICPD), to improve the lives of women, adolescents and youth, enabled by population dynamics, human rights and gender equality.

Our mission is to “deliver a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled”.

Fueling the efforts to achieve UNFPA’s goal and mission are the following three transformative results which strive to,

1. Zero Maternal deaths

2. Zero unmet need for family planning

3. Zero Gender-Based Violence and all harmful practices

These results act as guiding points for UNFPA to facilitate a world in which every girl, woman and young person has the opportunity to exercise their human rights and transform their future. To know more on UNFPA’s efforts towards achieving its vision, please visit: [UNFPA about us](http://www.unfpa.org/about-us)

**Terms of Reference for hiring a Consultancy Firm to assess Barriers and Stigma towards condom usage among targeted groups**

**II – Background**

**Introduction**

There are 4100 people living with HIV (PLHIV) in Sri Lanka currently, according to 2023 statistics of the National STD/AIDS Control Programme. Although new HIV infections in Sri Lanka has remained relatively low during the past, more recent data reveals a 48% increase of new cases in the year 2021, out of which 13% (n = 76) were females, while 86% (n =522) were males and 1% (n = 9) were of transgender. There were 648 reported cumulative deaths due to AIDS in 2022.

While at present, the male to female ratio of reported HIV cases is 1.7, sexual transmission accounted for more than 87 % of all cases reported during 2022. However, in 12.9 % of the cases, adequate data was not available to ascertain the probable mode of transmission. A closer observation of data shows a rising trend in the incidence of HIV infection among male-to-male or bisexual relationships over the years, becoming the predominant mode of HIV transmission currently, while transmission of HIV through heterosexual relationships (male-female) was 33.8% in 2022. Most of these patients diagnosed with HIV were married, thus causing added implications on transmission to spouses and to their babies. The majority of the newly identified cases of HIV during 2022 were between the ages of 25-49 years. A majority (82.5%) of the patients diagnosed were in the HIV stage in 2022. However, due to the stringent patient care and screening practices in Sri Lanka, there has been no HIV cases reported due to blood transfusions since the year 2000, while the World Health Organization has certified elimination of mother-to-child transmission for HIV, Syphilis and Hepatitis B virus in 2019. There are currently 2947 HIV patients under clinic care of the National STD/AIDS Control Programme, while 1440 of them belong to the membership of the three networks dedicated to people living with HIV in Sri Lanka.

Condoms are physical barriers that can reduce the risk of sexual exposure to HIV and STIs that can be present in sexual partners’ body fluids. Some STIs can cause infertility, thus use of condoms indirectly helps to maintain fertility. For persons using PrEP to prevent HIV transmission, concurrent condom use is important for STI prevention. Condoms are also quite effective at reducing unintended pregnancy, though other LARCs are recommended, together with condoms.

In summary, condoms are a highly effective strategy to reduce the risk of HIV transmission when used consistently and correctly.  For persons not in monogamous, stable relationships, promoting safer sexual practices, including use of condoms and lubricant is important for protecting both their own health and the health of their partners. The global impact of condom uses in combating the AIDS pandemic has been significant. According to UNAIDS model simulations, the increased adoption of condoms since 1990 has played a crucial role in preventing approximately 117 million new HIV infections. Sub-Saharan Africa has seen the greatest impact, with nearly half (47%) of the infections averted, followed by Asia and the Pacific, where over one third (37%) of new infections have been prevented, highlighting the vital role played by condom use in curbing the spread of HIV.

Several barriers can hinder condom usage despite its effectiveness in preventing HIV and STI transmission. One significant barrier is the lack of comprehensive sexual education (CSE) and limited awareness about the importance of condom use. Inadequate knowledge about how to properly use condoms, including the correct application and potential benefits, can discourage individuals from using them consistently. Lack of condom negotiation skills is another barriers to correct and consistent use of condoms. Apart from lack of knowledge and inadequate sexual education, the influence of cultural, religious, and social factors leading to stigma or negative attitudes towards condom use acts as a major barrier to condom usage, limiting distribution, acceptance and usage.

Other barriers such as accessibility and affordability can pose additional challenges, issues related to discomfort, reduced sexual pleasure, or misconceptions about condom effectiveness may also deter individuals from using condoms. To address these barriers, it is crucial to promote comprehensive sexual education, challenge stigmas, ensure condom availability, and provide information on the correct use and benefits of condoms, emphasizing their role in preventing HIV/STI transmission and pregnancy prevention, thus promoting overall sexual health.

Recognizing the importance of condom usage to overcome spread of HIV and STIs, Sri Lanka has adopted multiple strategies. The condom programming in the National STD/AIDS Control Programme aims to prevent transmission of STI/HIV, provide family planning services for STD clinic attendees, and prevent transmission of different HIV strains among people living with HIV in Sri Lanka. The main objectives of condom programming in the Family Health Bureau are to provide family planning services for eligible couples and prevention of teenage pregnancies through the “cafeteria” method. The government provides condoms free of charge and the commercial sector also sells condoms as part of a total marketing approach. In addition, there are free condoms available for the key populations in the GFATM led interventions operating in districts through peer leaders of key populations. There are several supportive policies, laws, plans, guidelines, strategies, and programmes in Sri Lanka which oversee and provide a supportive and conducive environment for condom programming for dual protection (prevention of unwanted pregnancies and prevention of HIV/STIs). All legal and other documents support the use of condoms for family planning.

The first comprehensive situation assessment on condom programming in the Sri Lanka was carried out by the National STD/AIDS Control Programme with the partnership of UNFPA in 2015, which revealed that there were no restrictions for accessibility of condoms in Sri Lanka, and they could be purchased over the counter. However, a considerable amount of perceived stigma among condom users was highlighted in the first assessment.

The National STD/AIDS Control Programme developed a national condom strategy based on the key outcomes of the situation assessment of condom programming conducted during 2015, in line with: (i) the National AIDS Policy (2011); (i) the Population and Reproductive Health Policy (1995) ; (ii) the National Maternal and Child Health Policy (2009) ; (iii) the National HIV Strategic Plan (2013-2017); and (iv) the National Strategic Plan on Maternal and Newborn Health (2012- 2016).

The National STD/AIDS Control Programme now aims to further assess the status of barriers and stigma towards condom use in Sri Lanka using a comprehensive questionnaire.

**III - Objectives of the consultancy**

To assess the barriers and stigma towards condom use in Sri Lanka, with the aim of understanding the current situation and provide recommendations for effective support and interventions that would encourage greater acceptance and uptake of condom use by sexually active persons in Sri Lanka.

**IV - Methods**

The data will be collected using an interviewer administered questionnaire. The interviews will be conducted by trained interviewers who will explain the purpose and objectives of the study to the participants and seek their consent to participate. A three-day training programme would be conducted for interviewers at the National STD/AIDS Control Programme to provide them with an understanding of the history, rationale, objectives, and the components involved in condom usage and associated barriers and stigma. Data entry and analysis would be carried out using the SPSS Version 21 Software.

**V - Timeline**

4 months from 1st November 2023 – 28 February 2024

**VI - Scope of the work**

The Consultancy firm shall be responsible for the following activities:

Overall assessment of barriers and stigma towards condom use with the aim of understanding the issue concerned and providing recommendations for effective support and interventions.

**VII - Deliverables**

Report on the assessment of barriers and stigma towards condom usage.

Note: *The Consultancy firm is neither entitled to the authorship of the report nor for publication of the report. The publication would solely belong to the National STD/AIDS Control Programme.*

**VIII - Expected characteristics of the consultancy firm**

1. Should have a team to work with the expertise of the National STD/AIDS Control Programme on barriers and stigma towards condom usage.
2. Should have a demonstrated track record of working within the healthcare sector and specific experience in HIV/AIDS-related projects.
3. Should possess knowledge and experience in conducting assessments and utilizing a variety of methodologies, such as surveys, interviews, statistical design, questionnaire development, focus groups, and data analysis techniques relevant for public health research.
4. Should obtain the approval of the Advisory Committee of the National STD/AIDS Control Programme (NSACP) at each stage of the assessment process.
5. Should have strong collaboration and should be able to work closely with healthcare providers, community organizations, and other relevant stakeholders to ensure their active involvement throughout the assessment process.
6. Should be flexible in accommodating unexpected challenges, changes in timelines, and adjustments in the scope of work.
7. Should commit to non-discrimination and ensure the equitable treatment of all individuals, particularly People Living with HIV (PLHIV), throughout the entire assessment process.
8. Should commit to submit the final draft of report to the Technical Advisory Committee of the National STD/AIDS Control Programme