Date: *January, 21, 2021*

REQUEST FOR QUOTATION

RFQ Nº UNFPA/LKA/RFQ/21/01

Dear Sir/Madam,

UNFPA hereby solicits a quotation for the following service:

**“Conducting an assessment of the impact of COVID-19 pandemic on women and girls”.**

UNFPA requires the provision of technical research expertise for the conduct of an assessment of the impact of COVID-19 pandemic on women and girls. The assessment will examine the immediate and longer-term social and economic effects of COVID-19 specifically on women and girls in Sri Lanka. The assessment will

* measure the impact of COVID-19 on the socioeconomic conditions of women and girls including loss of jobs, changes in working conditions and disruption to livelihood, effects on health and wellbeing, gender-based violence and unpaid care work;
* identify the gaps and challenges in the health and social protection systems to provide continuum of services for women and girls during public health emergencies and address the socio-economic impacts post COVID-19;
* understand the effects of media reportage of COVID-19 on the lives of women and girls; and
* provide practical recommendations to address increasing gender inequalities and gender protections risks in the COVID-19 response and recovery interventions/programmes.

The scope of work is detailed in Terms of Reference (Annex II). The users of this assessment include government organizations, UNFPA and UNWOMEN staff, UN Country Team, development partners (DFAT and Canadian government), CSOs and other stakeholders engaged in COVID-19 response and recovery programmes.

This Request for Quotation is open to all legally-constituted local and international research and academic institutions that can provide the requested services and have legal capacity to deliver in the country, or through an authorized representative.

1. **About 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](http://www.unfpa.org/about-us)

1. **Questions**

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

|  |  |
| --- | --- |
| Name of contact person at UNFPA: | *Ms. Poorani Radhakrishnan* |
| Tel Nº: | *0773442909* |
| Email address of contact person: | *radhakrishnan@unfpa.org* |

The **deadline for submission of questions is Thursday, 18th February 2021 at 4:00 PM Sri Lanka time**. Questions will be answered in writing and shared will parties as soon as possible after this deadline.

1. **Content of quotations**

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

1. Document 1 - Technical proposal, in response to the requirements outlined in the TORs (Annex II) and in accordance with the technical evaluation criteria set forth in Section V below.
2. Document2 - Price quotation, to be submitted strictly in accordance with the price quotation form.
3. Document3 – Company Profile, Copy of Business Registration, Copy of most recent Audited Accounts (as applicable).

All pages of the Document 1 and Document 2 of the quotation must be signed by the bidding company’s relevant authority and submitted in PDF format, A4 size.

To avoid any last minute technical difficulties, the bidders are requested to make the submissions well in advanced.

1. **Instructions for submission**

Proposals should be prepared based on the guidelines set forth in Section III above, along with a properly filled out and signed price quotation form, and are to be sent by email to the address indicated below no later than **Monday, March 01st 2021 at 4:00 PM Sri Lanka time***.*[[1]](#footnote-1).

|  |  |
| --- | --- |
| Name of contact person at UNFPA: | *Geetha Fernando* |
| Official Email address: | [Lk-procurement@unfpa.org](mailto:Lk-procurement@unfpa.org) |

Please note the following guidelines for electronic submissions to UNFPAs dedicated email address:

* The following reference must be included in the email subject line: RFQ NO UNFPA/LKA/RFQ/21/01 – Contractor Name. Proposals, including both technical and financial proposals, that do not contain the correct email subject line may be overlooked by the procurement officer and therefore not considered.
* The total email size should not exceed **20 MB (including email body, encoded attachments and headers)**. Where the technical details are in large electronic files, it is recommended that these be sent separately before the deadline.
* Should your offer require to submit more than one email, in the body of this first email, bidders are requested to list the number of messages, which make up their technical offer and the number of messages, which make up their financial offer. In such instances, the Email subject should be as: RFQ NO UNFPA/LKA/RFQ/21/01 – Contractor Name – Email 1.
* Any quotation submitted will be regarded as an offer by the bidder and does not  
  constitute or imply the acceptance of any quotation by UNFPA. UNFPA is under no obligation to award a contract to any bidder as a result of this RFQ.

1. **Overview of Evaluation Process**

The evaluation will be carried out in a two-step process by an ad-hoc evaluation panel. Technical proposals will be evaluated and scored first, prior to the evaluation and scoring of price quotations

**Technical Evaluation**

Technical proposals will be evaluated based on their responsiveness to the TORs listed in Annex II and in accordance with the evaluation criteria below.

| **Criteria** | [A] Maximum Points | [B]  Points attained by Bidder | [C]  Weight (%) | [B] x [C] = [D]  Total Points | |
| --- | --- | --- | --- | --- | --- |
| Technical approach, methodology and level of understanding of the objectives of the project | 100 |  | 30% |  | |
| Work plan/time scales given in the proposal and its adequacy to meet the project objectives | 100 |  | 20% |  | |
| Professional experience of the staff that will be employed to the project proving demonstrated expertise in evaluation and related processes (CVs, etc.)  o   Team leader with 7 years’ experience – 50 points  o   Team members with 5 years’ experience – 30 points  o   Other team members (less than 5 years’ experience) – 20 points | 100 |  | 20% |  | |
| Specific experience and expertise relevant to the assignment, experience of collaboration with UN agencies | 100 |  | 15% |  | |
| Profile of the company, quality of the technical proposal (clarity, language, compliance with requirements etc.) | 100 |  | 15% |  | |
| *Grand Total All Criteria* | 500 |  | 100% |  |

The first page of the technical proposal should list out the table of content as follows:

**Technical proposal - Table of content**

**Description Page number**

01. Introduction to the Organization - Company profile 01

02. Composition of the team, distribution of tasks and their CVs addressing specific experiences and expertise relevant to the assignment

03. Objective of the proposal, technical approach to the proposal (methodology and time frame)

04. Details of the similar engagements/experiences (please attach photos as annexures)

05. Annexures (Company registration, recently audited accounts statement, photos)

The following scoring scale will be used to ensure objective evaluation:

|  |  |
| --- | --- |
| **Degree to which the Terms of Reference requirements are met based on evidence included in the Bid submitted** | **Points**  **out of 100** |
| Significantly exceeds the requirements | 90 – 100 |
| Exceeds the requirements | 80 – 89 |
| Meets the requirements | 70 – 79 |
| Partially meets the requirements | 1 – 69 |
| Does not meet the requirements or no information provided to assess compliance with the requirements | 0 |

**Financial Evaluation**

Price quotes will be evaluated only for bidders whose technical proposals achieve a minimum score of 70 points in the technical evaluation.

Price quotes will be evaluated based on their responsiveness to the price quote form. The maximum number of points for the price quote is 100, which will be allocated to the lowest total price provided in the quotation. All other price quotes will receive points in inverse proportion according to the following formula:

|  |  |  |
| --- | --- | --- |
| Financial score = | Lowest quote ($) | X 100 (Maximum score) |
| Quote being scored ($) |

## Total score

The total score for each proposal will be the weighted sum of the technical score and the financial score. The maximum total score is 100 points.

|  |
| --- |
| Total score = 70% Technical score + 30% Financial score |

1. **Award Criteria**

In case of a satisfactory result from the evaluation process, UNFPA intends to award a Professional Service Contract on a fixed-cost basis to the Bidder(s) that obtain the highest total score.

1. **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.

1. **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.

1. [**Fraud and Corruption**](http://www.unfpa.org/about-procurement#FraudCorruption)

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](http://www.unfpa.org/resources/fraud-policy-2009#overlay-context=node/10356/draft). Submission of a proposal implies that the Bidder is aware of this policy.

Suppliers, their subsidiaries, agents, intermediaries and principals must cooperate with the UNFPA Office of Audit and Investigations Services as well as with any other oversight entity authorized by the Executive Director 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 Agreement, 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](http://web2.unfpa.org/help/hotline.cfm).

1. **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](http://www.unfpa.org/about-procurement#ZeroTolerance).

1. **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 Representative Ms. Ritsu Nacken at [nacken@unfpa.org](mailto:nacken@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).

1. **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

|  |  |
| --- | --- |
| **Name of Bidder:** |  |
| **Date of the quotation:** | Click here to enter a date. |
| **Request for quotation Nº:** | UNFPA/LKA/RFQ/21/01 |
| **Currency of quotation :** | LKR |
| **Delivery charges based on the following 2010 Incoterm:** | Choose an item. |
| **Validity of quotation:**  *(The quotation must be valid for a period of at least 3 months after the submission deadline* |  |

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

Example Price Schedule below: *[Delete after properly completing the Price Schedule]*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Item | Description | Number & Description of Staff by Level | Hourly Rate | Hours to be Committed | Total |
| 1. Professional Fees | | | | | |
|  |  |  |  |  |  |
| *Total Professional Fees* | | | | | $$ |
| 1. Out-of-Pocket expenses (if applicable) | | | | | |
|  |  |  |  |  |  |
| *Total Out of Pocket Expenses* | | | | | $$ |
| ***Total Contract Price***  *(Professional Fees + Out of Pocket Expenses)* | | | | | $$ |

*Vendor’s Comments:*

I hereby certify that the company mentioned above, which I am duly authorized to sign for, has reviewed RFQ UNFPA/LKA/RFQ/21/01 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,](http://www.unfpa.org/resources/unfpa-general-conditions-de-minimis-contracts) [Spanish](http://www.unfpa.org/sites/default/files/resource-pdf/UNFPA%20General%20Conditions%20-%20De%20Minimis%20Contracts%20SP_0.pdf) and [French](http://www.unfpa.org/sites/default/files/resource-pdf/UNFPA%20General%20Conditions%20-%20De%20Minimis%20Contracts%20FR_0.pdf)

**ANNEX II:**

**Terms of Reference**

1. **INTRODUCTION**

The COVID-19 pandemic is not only affecting the global economy but is also exacerbating existing gender inequalities. The social, economic, and health consequences are disproportionately impacting the lives of women, girls and other marginalized groups such as older persons, persons with disabilities, LBTQ+ and those in extreme poverty.

The UN policy brief on the ‘impact of COVID-19 on Women’ highlights that the compounded economic impacts, health impacts, increase in unpaid care work, and increased gender based violence (GBV) are ways in which COVID-19 is disproportionately impacting the lives of women and girls. The policy brief also states that all of these impacts are further amplified in contexts of fragility, conflict, and emergencies where social cohesion is already undermined and institutional capacity and services are limited; and emphasizes the need to ensure that recovery measure must “lead to a more equal world that is more resilient to future crisis.”[[2]](#footnote-2) Further, the diversion of attention and critical resources away from the provision of sexual and reproductive health (SRH) services, including maternal health (MH) care, family planning (FP) and GBV, which are central to health, rights and well-being of women and girls, may result in exacerbated maternal mortality and morbidity, increased rates of adolescent pregnancies, unsafe abortions, HIV and sexually transmitted infections.

These impacts need to be considered in order to ensure that COVID response and recovery programmes cater to the needs of vulnerable populations and support the achievement of SDGs and ICPD commitments. The United Nations Population Fund (UNFPA)country office together with UN Women intends to conduct an assessment to understand the impact of COVID-19 on women and girls including older women, women with disabilities, women with diverse sexual orientations and identities, and women living in extreme poverty. The assessment will provide insights on the impact of COVID-19 on pre-existing structural, social and economic vulnerabilities of these groups; and the challenges faced by them in accessing information and services (Health, protection, education, WASH etc.) and support for livelihood.

The users of this assessment include government organizations, UNFPA and UNWOMEN staff, UN Country Team, development partners (DFAT and Canadian government), CSOs and other stakeholders engaged in COVID-19 response and recovery programmes.

1. **CONTEXT**

The outbreak, COVID-19 has more than 94 million confirmed cases across the globe and 55,189 confirmed cases in Sri Lanka as of 21 January 2020. Global evidence has indicated that the pandemic has resulted in a range of primary and secondary implications. The WHO declared the virus as a global pandemic on the 11th of March and since then countries have taken measures to curb the disease such as restrictions on travel, social distancing and alternative work modalities. However, these measures have resulted in secondary implications which can also lead to restriction and/or violation of human rights given the strict measures taken by authorities.

Disease outbreaks affect women and men differently, and pandemics make existing inequalities for women and girls and discrimination of other marginalized groups such as older persons, persons with disabilities, those in extreme poverty, and women with diverse sexual orientations and gender identities worse.[[3]](#footnote-3) These groups will face additional pressures in the absence of adequate resources and services including reduced access to services. There is increasing evidence that pregnant women are at higher risk of morbidity and mortality from COVID-19, including increased risk of respiratory failure.[[4]](#footnote-4)[[5]](#footnote-5) The impact of COVID 19 on women and girls is intensified due to a lifetime of disadvantages and discrimination. Women are less likely to have been employed, generally are earning less, have fewer savings and assets and holding insecure jobs. Despite the high levels of educational attainment by women and girls, their participation in the labour force, in leadership roles in the corporate sector and political sphere have been minimal. A higher proportion of women are engaged in the informal labour market, and sectors that do not fall within the formal social protection mechanisms as such they are disproportionately impacted by the pandemic, increasing their vulnerability. Further, prevailing social norms dictate that women should carry the burden of unpaid care work at home within families. The nature of this pandemic has confined everyone to their homes bringing additional burden and risk to women. With more children out-of-school due to school closures and increased care needs of older persons, the burden of care on women has increased. Women headed households are made more vulnerable as their ability to cope with the impact of COVID is weakened.

Women's access to health services including sexual and reproductive health is adversely impacted due to the COVID-19 pandemic. Although Sri Lanka has achieved best indicators of maternal health in South Asia due to its free primary health care system, the maternal mortality rate has increased slightly[[6]](#footnote-6) and the contraceptive prevalence rate has been stagnant in recent years. Access to family planning methods have been challenged in the current context increasing the risk of unwanted pregnancies. In a pandemic situation often there are many sexual and reproductive health issues faced by women and girls concerning their access to contraceptives, menstrual health, pregnancy, labour, maternal health and newborn health. Further, LBTQ+ persons regularly experience stigma and discrimination while seeking health services, leading to disparities in access, quality and availability of affordable healthcare. This discrimination can increase their risk due to COVID-19 specially as stay at home restrictions have confined many young women in hostile environments with unsupportive family members or partners, which may increase their exposure to SGBV as well as mental health issues such as anxiety and depression.

As socioeconomic stress increases, it can lead to exponential increase in gender-based violence. The current restrictive measures put women in life threatening situations as many are forced to stay at home with their abusers and are unable to or have limited access to GBV services. The prevalence of violence, including sexual violence against women and girls is high in Sri Lanka. The 2016 Demographics and Health Survey (DHS) Sri Lanka, revealed that 17 percent of ever-partnered women and girls aged 15 -49 years were subjected to physical, sexual or psychological violence by a current or former intimate partner, in the last 12 months.[[7]](#footnote-7) The survey results also indicated that the lowest wealth quintile has a significantly higher prevalence of domestic violence. However, given the power dynamics prevalent within families and at the community level it cuts across all groups of people. The outbreak of COVID-19 has further exacerbated the issue. The National hotline led by the Ministry of Women and Child Affairs and Social Security had received approximately 2,442 calls from the latter part of March to early April of which 463 are very serious domestic violence related cases.

Older women (age 60 years and above) are particularly vulnerable in the current context due to existing health conditions as well as social and economic conditions. Women continue to make up a growing majority of the older population as they on average outlive their male counterparts often leaving them widowed and alone. Majority of older women will not have access to pension and are likely to have fewer assets and savings as they are more likely to not have been employed. Their income and living conditions will be affected, access to health care and social services will be impacted, and as families and young people struggle to cope with the economic and social impacts of COVID-19 family support for older persons will be affected. Due to their restriction on mobility and disability, older persons can be increasingly subject to abuse during an emergency situation, including but not limited to physical, psychological, sexual abuse, financial abuse/exploitation and neglect.[[8]](#footnote-8) Further, social distancing could lead to loneliness which is a serious health risk for older persons.

The increased vulnerability of women and girls including pregnant women, older women, women with disabilities, those in extreme poverty, and women with diverse sexual orientations and gender identities, and the challenges faced by them create a need for ensuring that policies and programmes are sensitive to the specific risks and challenges and prioritize support for women in order to fully respect their human rights and ensure that no one is left behind.

1. **OBJECTIVE AND SCOPE OF WORK**

The overall objective of the assessment is to examine the immediate and longer-term social and economic effects of COVID-19 specifically on women and girls in Sri Lanka.

The specific **objectives** of this assessment are to:

* Measure the impact of COVID-19 on the socioeconomic conditions of women and girls including loss of jobs, changes in working conditions and disruption to livelihood, effects on health and wellbeing, gender-based violence and unpaid care work.
* identify the gaps and challenges in the health and social protection systems to provide continuum of services for women and girls during public health emergencies and address the socio-economic impacts post COVID-19;
* understand the effects of media reportage of COVID-19 on the lives of women and girls
* provide practical recommendations to address increasing gender inequalities and gender protections risks in the COVID-19 response and recovery interventions/programmes

The **scope** of the assessment is as follows:

In line with the UN framework for the immediate socioeconomic response to COVID-19, the study should cover the effects on:

* health and wellbeing including effects on accessing sexual and reproductive health, family planning, maternal health information and services;
* social protection and basic services, including protection from intimate partner violence and sexual and gender based violence inclusive of online violence; and
* jobs and livelihood specifically due to women’s employment in the informal sector, SME, Export processing zone, care sector including unpaid care work.

The study should also examine the influence and impact that media coverage on COVID-19 has had on women and girls. The study should include an examination of how women and girls are accessing information and services relating to the above listed areas, the challenges/barriers in accessing information and services, identify the strategies adopted by women and girls to cope with the impacts of COVID-19, and highlight the strength and weakness in the health and social protection systems to provide continuum of services for women and girls during public health emergencies and address the socio-economic impacts post COVID-19.

The study should cover women and girls aged 15 years and above in urban, rural and estate sectors including those living in disaster prone areas. The sample should be robust and nationally representative not excluding any specific vulnerable sub-populations. The study should cover vulnerable subgroups through quantitative and qualitative measures. The sub-populations include

* women with disabilities, those in extreme poverty, and women with diverse sexual orientations and gender identities
* Women living with family/partner, living alone.
* Women living in government and private residential care facilities, quarantine centers, shelters etc.
* Migrant returnees
* Sex workers and women living with HIV

1. **METHODOLOGY AND ETHICAL CONSIDERATIONS:**

Research partner is required to propose suitable methodology which should provide quantitative and qualitative information. Innovative approaches may be used for data collection given the constraints prevalent. To the extent possible all data should be disaggregated as per the target group, age, sex and geographic location.

Ethical considerations: the assessment should

* Be approved by a recognized Ethical Review Board prior to commencement.
* Guarantee confidentiality and anonymity.
* Obtain informed consent from each participant.
* Observe precautionary measures to avoid any risk of COVID-19 contamination among the assessment team.

1. **KEY TASKS AND OUTPUTS (deliverables)**

**Key tasks:**

* Review existing empirical evidence and collected data, and develop a detailed plan of methods of analysis and structure of the Assessment;
* Conduct primary and secondary data collection and present the preliminary findings, tentative conclusions and emerging preliminary recommendations. All collected data sets (electronic files) should be submitted to UNFPA.
* Produce a comprehensive analysis of the data collected through primary and secondary data collection with clear and detailed findings, conclusions and make practical programmatic recommendations to inform the design of COVID-19 programmatic interventions. The report should contain background information, research methodology, data disaggregated by gender, age, location and vulnerable sub-population groups, findings and analysis, conclusion, recommendations, and a references page. Schedule of visits, tools and resources used for data collection should be annexed to the report.
* Produce case studies on services covering both service users and service providers

**Deliverables:**

* Obtaining ethical clearance
* Inception report detailing the conceptual framework, methodology, outline of the report and work schedule
* Presentation of desk research on the available data
* Periodic updates and progress meetings with UNFPA and TAC (if needed)
* Case studies covering service users and service providers (number to be agreed with UNFPA during inception phase)
* Presentation of preliminary findings, tentative conclusions and emerging preliminary recommendations
* Draft report of the assessment findings, conclusions and recommendations
* Final report of the assessment findings, conclusions and recommendations
* All collected data sets (electronic files).

1. **DURATION OF THE ASSIGNMENT AND TIMELINE**

The total duration of the assignment is from **April 2021 to September 2021.**

|  |  |
| --- | --- |
| **Tasks** | **Tentative timeline** |
| Award of contract | April 2021 |
| Ethical clearance and Inception report detailing the conceptual framework, methodology, outline of the report and work schedule | April 2021 |
| Desk research and presentation | May 2021 |
| Data collection, analysis and presentation of the preliminary findings, tentative conclusions and emerging preliminary recommendations | May – July 2021 |
| Report of the assessment findings, conclusion and recommendations | August – September 2021 |

1. **MANAGEMENT OF THE ASSESSMENT:**

A Technical Advisory Committee (TAC) will be established to provide oversight and quality assurance of the assessment. This TAC will have representation from MOWCSS, UNFPA, UNW, DCS, Civil Society, and private sector. As the lead agency UNFPA will be responsible for management of the assessment and commission an institution (international/local research and academic bodies) to undertake the assessment. The agency/university will be required to engage a multi-disciplinary research team with relevant expertise and experience to conduct the assessment.

1. **REQUIRED QUALIFICATIONS AND EXPERIENCE:**

Local and international research and academic institutions are invited to bid and must possess the following:

* Demonstrate minimum 5 years of experience in conducting similar assessments. Previous work with at least one UN agency or at least one international organization, including donors and stakeholders will be considered an asset;

Team composition:

A multi-disciplinary team comprising a team leader, project coordinator and specialized technical expertise, research and editorial assistance as necessary. Age, gender and ethnicity balance should be considered when forming the team. The team must be able to communicate in local languages; The team should include at a minimum

* One project coordinator
* One international expert or agency or institution
* Two national experts
* One research assistant

The team should comprise international and local experts on the subjects – gender and sexual and reproductive health.

The Team leader should have:

* A master’s degree in social sciences, statistics or any other relevant field
* A minimum of 7 years of experience in research and conducting gender assessments including in emergency context

Technical experts should have:

* A master’s degree in social sciences, statistics or any other relevant field
* A minimum of 5 years of experience in research and conducting gender assessments including in emergency context

Research assistance should have:

* A bachelor degree in social sciences, statistics or any other relevant field
* Experience in conducting assessments

1. **ROLES AND RESPONSIBILITIES**

The Team leader is responsible for the management of the assessment and providing the deliverables as per the agreed timeline. The team will work collaboratively with the pool of field officers attached to the Women's bureau for data collection. It is expected that the local agency partners with an international experts/agency/institution.

UNFPA together with UNW will provide oversight and inputs to draft reports.

1. **QUALITY ASSURANCE**

Quality assurance will be performed for each of the deliverables. Prior to submission of deliverable to UNFPA, the team leader should perform quality control to ensure that the deliverable meets the required quality standard. The reports will be reviewed by the TAC and relevant officers from UNFPA and UNW. The reports will be accepted as final upon approval by UNFPA representative. In the event that the quality is unsatisfactory as deemed by UNFPA, the research partner (research or academic institution) will be required produce revised versions of the reports.

1. <http://www.timeanddate.com/worldclock/city.html?n=69> [↑](#footnote-ref-1)
2. Policy Brief: The Impact of COVID-19 on Women, 9th April 2020, United Nations [↑](#footnote-ref-2)
3. UNFPA (2020), Technical brief - COVID 19: A gender lens, Protecting sexual and reproductive health and rights, and promoting gender equality, available at <https://www.unfpa.org/sites/default/files/resource-pdf/COVID-19_A_Gender_Lens_Guidance_Note.pdf> [↑](#footnote-ref-3)
4. Ellington S, Strid P, Tong VT et al.Characteristics of women of reproductive age with laboratory-confirmed SARS-CoV-2 infection by pregnancy status—United States, January 22–June 7, 2020. MMWR Morb Mortal Wkly Rep. 2020; 69: 769-775 [↑](#footnote-ref-4)
5. Collin J, Bystrom E, Carnahan A, Ahrne M. Public Health Agency of Sweden's brief report: pregnant and postpartum women with severe acute respiratory syndrome coronavirus 2 infection in intensive care in Sweden. Acta Obstet Gynecol Scand. 2020; 99: 819-822 [↑](#footnote-ref-5)
6. 36 deaths/100,000 live births in 2017, from 33/ 100,000 live births in 2015 [↑](#footnote-ref-6)
7. Demographic and Health Survey 2016, DCS [↑](#footnote-ref-7)
8. Silvia Perel-Levin. (2019, May). Abuse, Neglect and Violence against Older Persons. [↑](#footnote-ref-8)