

**REQUEST FOR PROPOSAL FOR SERVICES**

**LRPS-2019-9147702**

**29 March 2019**

**UNITED NATIONS CHILDREN'S FUND (UNICEF)**

**Wishes to invite you to submit a proposal for**

**AMENDMENT TO LRPS-2019-9147702R**

Qualitative data collection, transcribing and translation for ARIDA Implementation Evaluation in Ethiopia project in 5 regions. Tools and methodology are already prepared by UNICEF.

Due Date: 17 April 2019 at 10:00 AM local time

(Open for LOCAL vendors/Institutions)

XXXXXXXX FAX/LETTER NOT SPECIFIED IN 'PREPARE ITB (ZMRQ)' XXXXXXXX

THIS REQUEST FOR PROPOSAL FOR SERVICES HAS BEEN:

**REQUEST FOR PROPOSAL FOR SERVICES FORM**

This FORM must be completed, signed and returned to UNICEF.  
Proposal must be made in accordance with the instructions contained in this Request for Proposal for Services (RFPS).

**TERMS AND CONDITIONS OF CONTRACT**

Any Contract resulting from this RFPS shall contain UNICEF General Terms and Conditions for Institutional and Corporate Contracts and any other Specific Terms and Conditions detailed in this RFPS.

**INFORMATION**

Any request for information regarding this RFPS must be forwarded by email to the person who prepared this document, with specific reference to the RFPS number.

The Undersigned, having read the Terms and Conditions of RFPS No. **LRPS-2019-9147702** set out in the attached document, hereby offers to execute the services specified in this document.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Company: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Tel No: \_\_\_\_\_

Fax No: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Currency of Proposal: \_\_\_\_\_

Validity of Proposal: \_\_\_\_\_

Please indicate which of the following Payment Terms are offered by you:

10 Days 3.0% \_\_\_\_\_ 15 Days 2.5% \_\_\_\_\_ 20 Days 2.0% \_\_\_\_\_ 30 Days Net \_\_\_\_\_ Other \_\_\_\_\_

Item	Service Description	Quantity	Unit	Unit Price	Price
------	---------------------	----------	------	------------	-------

**10 Qualitative data collection, transcribing**

Summary

Aim of the contract

To hire a competent firm to do qualitative data collection, transcribing and translation for ARIDA Implementation Evaluation in Ethiopia project in 5 regions. Tools and methodology are already prepared by UNICEF.

Purpose The purpose of this consultancy

To conduct qualitative data collection of an already prepared tools. ARIDA Implementation Evaluations aim to understand how to integrate the diagnostic innovation in national health systems, help identify the practical, #health system-level# lessons that emerge, and inform country planning for future scale up and policy recommendations.

Location - Benshangul Gumuz (Assossa), Oromia (East Hararge, West Shoa), SNNPR (Sidama, Kaffa) and Tigray (Central)

Duration - 2 months

Reporting to - PME, Health section, UNICEF Ethiopia Country Office

1. Background

In Ethiopia nearly 175,000 children die each year mostly from preventable or treatable diseases. Of this, close to 31,500 deaths (18%) are attributable pneumonia. Following the policy breakthrough allowing HEWs to treat pneumonia, the Integrated Community Case Management (ICCM) program launched on 2010 and the community based newborn care program for HEWs to treat newborn sepsis was nationally launched in March 2013.

In 2018 and 2019, UNICEF will conduct/conducted first acceptability field trials followed by a study phase of implementation evaluation for all regulatory approved, commercially available ARIDA devices, specifically ARIDA automated RR and ARIDA multiparameter RR-pulse oximetry devices. The implementation research studies aim to understand the practical lessons that emerge from introduction of ARIDA for counting respiratory rate as an indication of pneumonia within existing iCCM/IMCI systems using the current country-specific monitoring framework. Specifically, the National plan on Integrated Community Case management of common childhood illness (FMOH, 2010) and UNICEF, Ethiopia Central Data Base (October 2014). The implementation research studies aim to determine how best to integrate the innovation into the existing national health systems, and help identify the practical, #health system-level# lessons that emerge.

The implementation research phase of the ARIDA project will be conducted in several UNICEF programming countries in varying regions in order to acquire a more general understanding that may apply to various other country contexts. This specific implementation evaluation will take place in multiple regions of Ethiopia. This country was purposively selected to represent a high burden pneumonia country with a well-established structure for a community health care delivery platform with a high degree of institutionalization of Health Extension Workers (HEWs).

2. Rationale for the data collection activity

The data collection activity is to enable to input first-hand information from HEWS, health workers, Health facility managers, woreda and regional level managers for purpose of the evaluation is to investigate how ARIDA devices may be efficiently and integrated in national health systems and understand potential barriers and considerations for wider scale up.

Objectives

This contract pertains to the qualitative data collection as described in detail under point 6. Specific Task. Analysis and synthesis of this data will be managed by a global level qualitative research consultant affiliated with the University of British Columbia

The objectives of the full evaluation include:

Item	Service Description	Quantity	Unit	Unit Price	Price
------	---------------------	----------	------	------------	-------

A. Explore lessons learned from the implementation of the intervention through key informant interviews with HEWs, health workers, trainers, health centre/health facility managers and district health governance officials. Capture the perceptions of HEWs, the first-hand implementers through key informant interviews in ARIDA target countries/regions where no such activity has previously been conducted.

B. Compile data and information generated from the implementation analysis to develop a suggestion of how to introduce ARIDA into an integrated national health system, including what information is needed for procurement decisions, training and capacity building and policy making decisions for each country

C. Investigate perceptions on pneumonia recognition, care seeking, diagnosis, treatment and reporting in the target area.

### 3. Owners of the research and use of the findings

UNICEF will be the sole owner of the data collected through this series of key informant interviews (KIIs). All data to be recorded after consent has been obtained. All data is to be recorded digitally and shared with UNICEF Ethiopia Country Office. No recorded material should remain with the data collecting firm nor will the data collecting firm have any rights to publish any of the content separately.

### 4. Scope of the study

The scope of the consultancy is to translating tools in local languages conduct qualitative study (tools are already prepared), transcribing recorded interviews and translating in English .

### 5. Methods

The data to be collected is qualitative (i.e, key informant interviews).

#### Qualitative

#### Participants, inclusion criteria and recruitment

Semi-structured Key informant interviews (KIIs) will be utilized to meet the research objectives. Semi-structured guides (see Appendices) have been developed based on current literature in consultation with the CO. Table 2 outlines the variety of perspectives to be recruited for KIIs across the health system. Recruitment will be done utilizing snowball sampling technique of participants who have been involved in aspects related to ARIDA implementation from community (e.g., HEWs), facility (e.g., FLHWF, clinic managers), training (e.g., trainers), district management/decision makers (e.g., woreda and zonal level management, regional key-decision makers). Each interview is expected to last between 30 and 60 minutes. All participants will provide written, informed consent. All interviews will be audio recorded with permission of the participant and transcribed and translated by trained research assistants. The aim of the study is not to reach saturation with research themes rather to collect diverse perspectives across the key players in the health system and geographic areas. The targeted numbers of #n# for each category were selected in consultation with the ECO to be collected within the resources and timeframe of the project. The total number of participants is 50 people.

Table 1. Different perspectives to be interviewed

Level	Description	Inclusion Criteria- (Those providing written informed consent from selected implementation areas who are)	Targeted #n#
Health Post Facility	Health Extension Workers	HEWs trained on ARIDA package and using CHARM	14
Facility	Front Line Health Workforce (FLHWF) at health centers	FLHWF trained on ARIDA package and using RAD-G	14 7
Facility	Clinic Managers		
Trainers	Participants involved in training of HEWs and FLHWF	Those who trained either HEW/FLHWF on the ARIDA package	7
Zonal/District Government	District health system manager/key decision makers/policy influencer (public sector)	Government or implementing partner identified by CO or via snowball sampling technique as a manager, key decision maker and/or policy influencer	7 5
Regional	Regional public-sector health system officials (Child Health focal points at Regional Health Bureau)		

Table 2. Geographical sample of zones from the 5 regions