



Request for Proposal (RFP) for Vitamin Angels' Multiple Micronutrient Supplements (MMS) Learning Experience Evaluation

Service Required:	Process Evaluation
Term of Contract:	6 Months
Submit Proposal to:	programs@vitaminangels.org
Date of Issue of RFP:	11 th March, 2024
Date Questions Due:	18 th March, 2024
Date Proposal Due:	25 th March, 2024

SCOPE OF WORK

Background

The 2020 update on the World Health Organization (WHO) antenatal care recommendations for a positive pregnancy experience recommends the use of multiple micronutrient supplements (MMS), containing iron and folic acid in addition to other micronutrients, in the context of rigorous research (WHO, 2020). Further, the WHO has included MMS in the Model List of Essential Medicines as one of the medicines for reproductive health and perinatal care (WHO, 2021). The United Nations International Multiple Antenatal Preparation (UNIMMAP) MMS, which has been shown to be more effective in improving maternal and birth outcomes compared IFA, contains 10 vitamins and 5 minerals including 30 mg of iron from ferrous fumarate and 400 mcg folic acid, taken orally once every day (MMS-TAG & MNF, 2020).

A systematic review of the effectiveness of MMS during pregnancy on maternal, foetal, and infant health outcomes concluded that using MMS led to improve pregnancy outcomes and positive effects on the child's first one thousand days of life than iron and folic acid (IFA) (Smith ER et al., 2017 & Bourassa MW, 2019). Additionally, MMS is more cost-effective than IFA (Kashi et al., 2019; Engle-Stone et al., 2019; Nutrition International, 2020).

In Nigeria, MMS has been included in the Micronutrient Control Guidelines, and has been provisionally added to the national EML. However, more work is needed to develop and scale an effective national MMS program throughout Nigeria.

Vitamin Angels (VA) has been supporting Christian Health Association of Nigeria (CHAN), National and State Primary Health Care Development Agency, and non-government organizations (NGOs) with grants of MMS for pregnant women since 2017. Through its network of program partners across six geopolitical zones, VA reaches around 600,000 pregnant women with MMS annually, a notable increase from its pilot start in 2017.

Project Description

As Nigeria moves towards the adoption of MMS at the national level, learnings from partner-supported implementation of MMS could help inform the design and scale-up of the MOH-led national program. There is a need to more systematically document these learnings to understand the contextual factors, enablers, barriers, and potential solutions to deliver and scale proven nutrition interventions. Therefore, VA seeks to conduct an assessment of their MMS program to qualitatively document valuable learnings from key program stakeholders.

Research Questions

The overarching question for this process evaluation is to examine VA's approach to the delivery of MMS. We also seek to document the enablers and barriers to MMS delivery and use.

The specific research questions to be addressed are:

1. How are program partners obtaining and delivering MMS in Nigeria?
2. What are the enablers and barriers to delivering and using MMS?

Objectives

The study aims to document the MMS delivery system implemented by VA's program partners and the facilitators and barriers to MMS distribution and use. Findings will be used for both internal VA learning and reporting, and shared with MOH and other relevant stakeholders to inform broader MMS programming and scale up.

The survey specific objectives:

1. Describe the process through which program partners obtain MMS from Vitamin Angels;
2. Describe the distribution platform through which MMS is being delivered to pregnant women by VA's program partners; and,
3. Explore barriers and enablers to MMS use and adherence amongst service providers and pregnant women.

Study Design or Approach

1. *Study Area*

The study will be conducted in 1 state in each of the six geopolitical zones (South-West, South-South, South-East, North-West, North-East and North-Central) in Nigeria. We aim to sample respondents from both state actors and non-state actors including local and international NGOs in each of the states.

2. *Study Design*

The proposed study will use a mix of qualitative methods to gather a wide range of information, insights, experiences, best practices, and other perspectives from the range of respondents identified.

The agency/consultant will be required to obtain relevant permission from the appropriate ethics body or government ministry. This is expected to have been obtained at least two weeks before the commencement of data collection.

The agency/consultant will also be responsible for obtaining local authority approval to conduct data collection in each state.

Any required ethical and authority approval documentation must be provided to Vitamin Angels prior to commencing data collection.

Activities, Deliverables, and Timeline

Activity	Deliverable	Timeline
Agency/Consultants bidding, selection, and award of contract	Signed contract	8 th April, 2024
Develop study protocol	Final study protocol	26 th April, 2024
Design recruitment scripts and questionnaires, consent forms, data collection tools (FGD and IDI guides) (including review and edits)	Finalized study tools	3 rd May, 2024
Data collection tool translations (including review and edits)	Finalized translated tools	10 th May, 2024
IRB Approvals (including submission and resubmissions if required)	IRB Approvals	7 th June, 2024
Training of data collectors	Training report	Week of 3 rd June, 2024

Data collection	Detailed data collection summaries confirming completion by state.	10 th June – 21 st June, 2024
All qualitative interview summaries received	<ul style="list-style-type: none"> • Summaries of findings by respondent categories using an agreed template • Audio files for all recordings • Clearly typed transcripts in MS Word for all respondents in language of moderation and translations in English. 	5 th July, 2024
Analysis and draft report	Draft report	26 th July, 2024
Full report (incorporating review feedback, full transcripts from the qualitative interviews and a summary slide desk)	Final report	30 th August 2024

PROPOSAL SUBMISSION REQUIREMENTS

Interested agencies/consultants should provide a Technical and Financial Proposal as indicated below. All proposals must be submitted in English.

Technical Proposal:

1. **Technical Approach:** please describe how your organization plans to answer the objectives, research questions, and complete the outlined deliverables (maximum 3 pages).
2. **Summary of relevant work experience** (2-3 pages), including relevant technical experience, relevant experience working in Nigeria, and experience delivering similar projects.
3. **Company profile:** a brief (1-2 pages) description of your company, including its date and location of incorporation, and number of years of work experience relevant to this RFP.
4. **List of representative clients** in Nigeria, and a sample of previous similar work undertaken.
5. **Key personnel:** please specify which personnel are key to the project implementation and provide a short biographical statement on each. Please attach CVs of three (3) key personnel not exceeding three pages per CV.
6. **Contacts of two references** who you have delivered similar work for that can be contacted by Vitamin Angels recruitment team.

Financial Proposal:

1. Financial offer, aligned to the provided budget template which details the following:
 - Fees for all personnel, including project managers, field supervisors, and data collectors with daily rate and number of person-days.
 - Travel costs, including transport, per diems (if applicable), and lodging.
 - Communications (airtime)
 - Training costs, including venue rental, meals, equipment, printing
 - Any indirect costs or overhead
 - Other costs with appropriate justification
2. Please note that the maximum budget for this assignment is **USD 30,000**.

Please channel any request for clarification / additional information to oorefunwa@vitaminagels.org by **18th March 2024 (5pm West African Time)**.

The deadline for submitting applications is on **25th March 2024 (5pm West African Time)**. The applications must be submitted via email to **oorefunwa@vitaminagels.org**. The applications must consist of the documents listed above; incomplete applications will not be considered.

The hired data collection agency/consultant should carry out fieldwork to a high standard and deliver within the agreed timeframe.

SELECTION CRITERIA

For the purpose of selection, the evaluation will be based on the following weighted point scale (totalling 100 points) of the proposal in its entirety, including, but not limited to, the following:

Criteria	Points
Technical Approach	50
<ul style="list-style-type: none"> Technical capability, expertise, and ability to meet the deliverable requirements 	
Capabilities and Past Performance	25
<ul style="list-style-type: none"> Organizational and technical capabilities to complete this work. Previous successful past experience completing deliverables for similar activities with similar organizations, groups, or projects. 	
Proposed Costs	25
<ul style="list-style-type: none"> Reasonableness of fixed prices based on proposed services and market value. 	
Total	100

References:

- WHO (2020). Antenatal Care Recommendations for a Positive Pregnancy Experience. Nutritional Interventions Update: Multiple Micronutrient Supplements during Pregnancy
- WHO (2021). World Health Organization Model List of Essential Medicines - 22nd List. <https://doi.org/WHO/MHP/HPS/EML/2021.02>.
- MMS-TAG & MNF (2020). Expert consensus on an open-access United Nations International Multiple Micronutrient Antenatal Preparation—multiple micronutrient supplement product specification. *Annals of the New York Academy of Sciences*, 1470(1), 3–13. <https://doi.org/https://doi.org/10.1111/nyas.14322>.
- Smith ER, Shankar AH, Wu LS-F, Aboud S, Adu-Afarwuah S, Ali H, et al. Modifiers of the effect of maternal multiple micronutrient supplementation on stillbirth, birth outcomes, and infant mortality: a meta-analysis of individual patient data from 17 randomised trials in low-income and middle-income countries. *Lancet Glob Health*. 2017;5(11): e1090–e1100.
- Bourassa MW, Osendarp SJM, Adu-Afarwuah S, Ahmed S, Ajello C, Bergeron G, et al. Review of the Evidence Regarding the Use of Antenatal Multiple Micronutrient Supplementation in Low- and MiddleIncome Countries. *Ann N Y Acad Sci*. 2019 May;1444(1):6–21.
- Kashi, B., M Godin, C., Kurzawa, Z. A., Verney, A. M. J., Busch-Hallen, J. F., & De-Regil, L. M. (2019). Multiple Micronutrient Supplements Are More Cost-effective Than Iron and Folic Acid: Modeling Results from 3 High-Burden Asian Countries. *The Journal of Nutrition*, 149(7), 1222–1229. <https://doi.org/10.1093/jn/nxz052>.
- Engle-Stone, R., Kumordzie, S. M., Meizen-Dick, L., & Vosti, S. A. (2019). Replacing iron-folic acid with multiple micronutrient supplements among pregnant women in Bangladesh and Burkina Faso: costs, impacts, and cost-effectiveness. *Annals of the New York Academy of Sciences*, 1444(1), 35–51. <https://doi.org/https://doi.org/10.1111/nyas.14132>.
- Nutrition International (2020). Cost-effectiveness analyses for the WHO review on multiple micronutrient supplements during pregnancy: Technical Report. https://www.nutritionintl.org/wp-content/uploads/2021/01/MMS-Technical-Report_FINAL.pdf.