**Background**

Family Planning constitutes a key part of primary health care services. While substantial progress has been made nationwide over the last few decades in bringing the total fertility rates to near replacement levels and increasing utilization of modern contraceptive methods, some regions continue to face unique challenges in furthering the family planning objectives. In north-east India, despite good levels of knowledge among general population regarding benefits of family planning and different modern contraceptive methods (when compared to other regions of the country), utilization of family planning services is low. As per the National Family Health Survey report, 2015-16, prevalence of not using any contraceptive method in Northeastern states remains high (Arunachal Pradesh-73.5%, Manipur- 75%, Meghalaya- 67.2%, Nagaland- 68.7%, Sikkim- 63.2%, and Mizoram- 61.5%).

The unique topography, cultural practices, ethnic and socio-economic situation of north-eastern states entails the need to understand the perception and attitude of the north-east communities, particularly young eligible couples, towards family planning services.

We therefore plan to conduct a study with the objective of understanding the barriers and facilitators to provision of family planning services for young and low parity couples in select NE states of India.

# **Project Specifications**

**Title: Understanding the barriers and facilitators to provision of family planning services for young and low parity couples in NE states of India: a mixed methods study**

The overall objective of this study will be to understand the landscape of provision and uptake of family planning (FP) services among young and low parity couples[[1]](#footnote-2)in NE states of India(Meghalaya, Nagaland, Manipur and Mizoram), particularly from the context of primary healthcare level. The findings from the study will be utilized to identify potential interventions/solutions for implementation at the primary health care level to facilitate access to and uptake of FP among young and low parity couples.

# **Scope of Work**

Consultant will be responsible to work with various stakeholders to ensure that a quality end deliverable is produced.

Key Scope of work for Consultant will include

1. Ensure that all the interviews have been done properly, data is being captured as part of the translated transcripts and are providing data inputs in line with the discussion guide/data collection tools.
2. Build a data matrix to bifurcate the data into logical blocks for easy analysis.
3. Build a framework for analysis and analyze the data obtained from the interviews to provide response to two questions:
   1. What are the key barriers to provision of FP services for young and low parity couples at the primary health care level in NE states of India?
   2. Which are the factors that influence the decision of young and low parity couples on adopting a family planning method in NE states of India?
4. Review the analysis with different stakeholders and incorporate feedback.
5. Build the final deliverable and share the same with Access Health International
6. Review the deliverable with Access Health international and incorporate feedback
7. Submit the final deliverable.

# **Exclusions to the Scope of Study**

1. Consultant will not be responsible for managing the primary data collection.
2. Quantitative analysis.

# **Project Plan**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sl. No.** | **Detail Items** | **Month 1** | | | | **Month 2** | | | | **Month 3** | | | | **Month 4** | | |
| **W1** | **W2** | **W3** | **W4** | **W5** | **W6** | **W7** | **W8** | **W9** | **W10** | **W11** | **W12** | **W13** | **W14** |
| **1** | **Inception Report, Review of Artefacts & Support Training of field investigators** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2** | **Review interviews to ensure data quality** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **3** | **Review transcription and translation to ensure data quality** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **4** | **Qualitative Data Analysis** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **5** | **Development of the draft study report** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **6** | **Draft sharing with client and feedback incorporation** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **7** | **Development of the final report** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **8** | **Submission of the final report** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **9** | **Electronic dissemination of the final report and policy suggestions** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Compensation**

The total Consultancy fee for this engagement is INR 5,24,000. The payment will be disbursed in four instalments, in the proportions given below and the consultant should provide the invoice against each deliverable.

**Milestone for Payments**

|  |  |  |
| --- | --- | --- |
| Milestone | % Payout | Amount (INR) |
| Inception Report [Wk 1] | 10% | 52,400 |
| Completion of Field Interviews/Data Collection [ End of Wk8] | 25% | 1,31,000 |
| Presentation of Preliminary Findings/Development of Draft Report [ End of Wk10] | 50% | 2,62,000 |
| Submission and acceptance of Final Report [End of Wk14] | 15% | 78,600 |
| Total | **100%** | **5,24,000** |

\*The costing is based on transcription rates of INR 80 per minute and considering 60 minutes per session for FGD and transcription of Qualitative interviews at the rate of INR 30 per minute and considering LOI=60 min. Increase in length of interview will impact costs proportionately at the rates given above.

**Term**

This engagement shall commence upon execution of this Agreement. The Agreement shall continue in full force and is effect from **June 15, 2022** to **September 30, 2022.**

1. Young and low parity couple refers to a newly married couple in which the female partner is aged between 15 and 24 years of age and has either one or no living child. [↑](#footnote-ref-2)