



## Effective communication and advocacy for immunisation in Iran

**Request for Proposals (RFP)**

**Bid Reference**

**CD/IRN/06/25**

**Country/Unit Name**

**IRAN/DCD**

**Closing Date:**

**July 10, 2025**

### **General Requirements for Submitting Proposals and Supporting Documents**

All proposals and supporting documents must be submitted via email to: [emacoiratenders@who.int](mailto:emacoiratenders@who.int).

Ensure that the name of your company/institution and the RFP Number is clearly indicated in the subject line of your emails. Submissions without the RFP Number may be excluded from evaluation.

In the body of your email, list all attached files along with the number of pages for each attachment.

Submit technical and financial proposals as separate files.

Name all attachments using the following format:

RFP Number (as stated in the RFP document), Subject  
(e.g., RFP Number – Financial Proposal).

Do not submit documents in ZIP folders, JPG format, or Word documents. All documents must be submitted as separate PDF files, each clearly titled to reflect its content.

Ensure that all required documents are duly signed and stamped by the authorized representative of your institution, as specified in the relevant templates.

In financial proposals, items such as unexpected costs, miscellaneous costs, contingency fund and alike are not acceptable as a budget line. Please either provide a detailed breakdown for such item or remove them for the budget breakdown.



**The World Health Organization (WHO) is seeking offers for Effective communication and advocacy for immunization in Iran.**

**Your ☐ Company ☒ Institution is invited to submit a proposal for the services in response to this Request for Proposals (RFP).**

WHO is a public international organization, consisting of 194 Member States, and a Specialized Agency of the United Nations with the mandate to act as the directing and coordinating authority on international health work. As such, WHO is dependent on the budgetary and extra-budgetary contributions it receives for the implementation of its activities. Bidders are, therefore, requested to propose the best and most cost-effective solution to meet WHO requirements, while ensuring a high level of service.

### 1. Requirements

**WHO requires the successful bidder, to carry out Effective communication and advocacy for immunisation in Iran**

*See detailed Terms of Reference in Annex 1 for complete information.*

The successful bidder shall be a ☐ for profit / ☒ not for profit institution operating in the field of immunisation and public health with proven expertise in health communication .

**The successful bidder is expected to demonstrate experience and list relevant projects as follows:**

#### Mandatory experience:

- Minimum five years of experience implementing public health projects, including health communication and advocacy.
- Comprehensive knowledge of Iran's immunization landscape, including programs, WHO policies, guidelines, and procedures in relevant areas, and the ability to apply them in the country's context.
- Proven experience working with MoHME.
- A team with strong analytical, organizational, and communication skills, demonstrated initiative, sound judgment, and the ability to work collaboratively.
- Staff proficient in English, both oral and written,
- A functional financial system with a valid bank account registered in the institution's name.
- Adequate financial liquidity is required to ensure the availability of sufficient resources for the project execution.
- Desirable
- Working experience with the UN, especially WHO

The bidder is expected to follow the instructions set forth below in the submission of their proposal to WHO.

### 2. Proposal

The proposal and all correspondence and documents relating thereto shall be prepared and submitted in the English language.

The proposal shall be concisely presented and structured to include the following information:

- Confidentiality Undertaking (*please complete Annex 2*)
- Presentation of your Company / Institution (*please complete Annex 3*)
- Proposed solution
- Proposed Approach/Methodology
- Proposed Timeline
- Technical Proposal (*please complete Annex 5*)



- Financial **Proposal** – IRR (*please complete Annex 6*)
- Principal Investigator and Co-Investigators track record (*please complete Annex 7*)

Information which the bidder considers confidential, if any, should be clearly marked as such.

### 3. Instructions to Bidders

The bidder must follow the instructions set forth in this RFP in the submission of their proposal to WHO.

A prospective bidder requiring clarification on technical, contractual or commercial matters may notify WHO via email at the following address no later than July 2, 2025 :

**Email for submissions of all queries:**

[Emacoiratenders@who.int](mailto:Emacoiratenders@who.int)

*(use Bid reference in subject line )*

A consolidated document of WHO's responses to all questions (including an explanation of the query but without identifying the source of enquiry) will be sent to all prospective bidders who have received the RFP.

From the date of issue of this RFP to the final selection, contact with WHO officials concerning the RFP process shall not be permitted, other than through the submission of queries and/or through a possible presentation or meeting called for by WHO, in accordance with the terms of this RFP.

The bidder shall submit, in writing, the complete proposal to WHO, no later than **July 10, 2025 at 17:00 hours Tehran time** ("the closing date"), by email at the following email address:

[Emacoiratenders@who.int](mailto:Emacoiratenders@who.int)

*(use Bid reference in subject line )*

To be complete, a proposal shall include:

- A technical proposal, as described under part 2 above (*Annex 5*)
- A financial proposal, as described under part 2 above (*Annex 6*)
- Annexes 2 & 3, duly completed and signed by a person or persons duly authorized to represent the bidder, to submit a proposal and to bind the bidder to the terms of this RFP.

Each proposal shall be marked Ref: CD/IRN/06/25 .

WHO may, at its own discretion, extend the closing date for the submission of proposals by notifying all bidders thereof in writing before the above closing date and time.

Any proposal received by WHO after the closing date for submission of proposals may be rejected. Bidders are therefore advised to ensure that they have taken all steps to submit their proposals in advance of the above closing date and time.

The offer outlined in the proposal must be valid for a minimum period of 90 calendar days after the closing date. A proposal valid for a shorter period may be rejected by WHO. In exceptional circumstances, WHO may solicit the bidder's consent to an extension of the period of validity. The request and the responses thereto shall be made in writing. Any bidder granting such an extension will not, however, be permitted to otherwise modify its proposal.



The bidder may withdraw its proposal any time after the proposal's submission and before the above mentioned closing date, provided that written notice of the withdrawal is received by WHO at the email address indicated above, before the closing date for submission of proposals.

No proposal may be modified after its submission, unless WHO has issued an amendment to the RFP allowing such modifications.

No proposal may be withdrawn in the interval between the closing date and the expiration of the period of proposal validity specified by the bidder in the proposal (subject always to the minimum period of validity referred to above).

WHO may, at any time before the closing date, for any reason, whether on its own initiative or in response to a clarification requested by a (prospective) bidder, modify the RFP by written amendment. Amendments could, *inter alia*, include modification of the project scope or requirements, the project timeline expectations and/or extension of the closing date for submission.

All prospective bidders that have received the RFP will be notified in writing of all amendments to the RFP and will, where applicable, be invited to amend their proposal accordingly.

All bidders must adhere to the UN Supplier Code of Conduct, which is available on the WHO procurement website at <http://www.who.int/about/finances-accountability/procurement/en/>.

#### 4. Evaluation

Before conducting the technical and financial evaluation of the proposals received, WHO will perform a preliminary examination of these proposals to determine whether they are complete, whether any computational errors have been made, whether the documents have been properly signed, and whether the proposals are generally in order. Proposals which are not in order as aforesaid may be rejected.

The evaluation panel will evaluate the technical merits of all the proposals which have passed the preliminary examination of proposals based on the following weighting:

Technical Weighting:	70 % of total evaluation
Financial Weighting:	30 % of total evaluation

The technical evaluation of the proposals will include:

Addressing of WHO's requirements and expectations	20
Quality of the overall proposal	30
Experience of the firm in carrying out related project	20
Qualifications and competence of the personnel proposed for the assignment	20
Proposed timeframe for the project	10
<b>TOTAL</b>	<b>100</b>

The scoring scale per criteria was defined as follows:

Criteria evaluated as:	Based on the following supporting evidence:	Corresponds to the score of:
Excellent	Excellent evidence of ability to exceed requirements	100%

Good	Good evidence of ability to exceed requirements	90%
Satisfactory	Satisfactory evidence of ability to support requirements	70%
Poor	Marginally acceptable or weak evidence of ability to support requirements	40%
Very Poor	Lack of evidence to demonstrate ability to comply with requirements	10%
No submission	Information has not been submitted or is unacceptable	0%

The number of points which can be obtained for each evaluation criterion is specified above and indicates the relative significance or weight of the item in the overall evaluation process.

A minimum of [70] points is required to pass the technical evaluation.

The final evaluation will combine the weighted scores of both technical and financial proposals to come up with a cumulative total score.

Please note that WHO is not bound to select any bidder and may reject all proposals. Furthermore, since a contract would be awarded in respect of the proposal which is considered most responsive to the needs of the project concerned, due consideration being given to WHO's general principles, including the principle of best value for money, WHO does not bind itself in any way to select the bidder offering the lowest price.

WHO may, at its discretion, ask any bidder for clarification of any part of its proposal. The request for clarification and the response shall be in writing. No change in price or substance of the proposal shall be sought, offered or permitted during this exchange.

NOTE: Individual contact between WHO and bidders is expressly prohibited both before and after the closing date for submission of proposals.

## 5. Award

WHO reserves the right to:

- Award the contract to a bidder of its choice, even if its bid is not the lowest;
- Award separate contracts for parts of the work, components or items, to one or more bidders of its choice, even if their bids are not the lowest;
- Accept or reject any proposal, and to annul the solicitation process and reject all proposals at any time prior to award of contract, without thereby incurring any liability to the affected bidder or bidders and without any obligation to inform the affected bidder or bidders of the grounds for WHO's action;
- Award the contract on the basis of the Organization's particular objectives to a bidder whose proposal is considered to be the most responsive to the needs of the Organization and the activity concerned;
- Not award any contract at all.

WHO has the right to eliminate bids for technical or other reasons throughout the evaluation/selection process. WHO shall not in any way be obliged to reveal, or discuss with any bidder, how a proposal was assessed, or to provide any other information relating to the evaluation/selection process or to state the reasons for elimination to any bidder.

**NOTE: WHO is acting in good faith by issuing this RFP. However, this document does not oblige WHO to contract for the performance of any work, nor for the supply of any products or services.**

At any time during the evaluation/selection process, WHO reserves the right to modify the scope of the work, services and/or goods called for under this RFP. WHO shall notify the change to only those bidders who have not been officially eliminated due to technical reasons at that point in time.



WHO reserves the right at the time of award of contract to extend, reduce or otherwise revise the scope of the work, services and/or goods called for under this RFP without any change in the base price or other terms and conditions offered by the selected bidder.

WHO also reserves the right to enter into negotiations with one or more bidders of its choice, including but not limited to negotiation of the terms of the proposal(s), the price quoted in such proposal(s) and/or the deletion of certain parts of the work, components or items called for under this RFP.

Within 30 days of receipt of the contract between WHO and the successful bidder (the "Contract"), the successful bidder shall sign and date the Contract and return it to WHO according to the instructions provided at that time. If the bidder does not accept the Contract terms without changes, then WHO has the right not to proceed with the selected bidder and instead contract with another bidder of its choice. The Contract will include, without limitation, the provisions set forth in Annex 3.

Any and all of the contractor's (general and/or special) conditions of contract are hereby explicitly excluded from the Contract, i.e., regardless of whether such conditions are included in the Contractor's offer, or printed or referred to on the Contractor's letterhead, invoices and/or other material, documentation or communications.

We look forward to receiving your response to this RFP.

Yours sincerely,  
Dr. Omid Zamani

**Annexes**

1. Detailed Terms of Reference
2. Confidentiality Undertaking
3. Vendor Information Form
4. Contractual provisions
5. Technical Proposal Template
6. Financial Proposal
7. Principle Investigator and Co-Investigators track record template
8. Required Contractual Documents (For awarded bidders)



## **Annex 1: Detailed Terms of Reference**

### **1. Purpose of the Agreement for Performance of Work (APW)**

Current immunization communication and advocacy efforts do not meet the priorities of Iran's contemporary society in a rapidly evolving immunization landscape. This project aims to promote a holistic approach to communication, focusing on the communication needs of the target audiences through behaviour change communication and social mobilisation. Further, this project seeks to support the Extended Program of Immunization in securing sustainable funding for immunization programs within a framework informed by global best practices and adjusted for the local context.

### **2. Background**

In Iran, in the post-COVID era, heightened vaccine hesitancy and mistrust in the healthcare system, coupled with broadened social and economic instabilities, undermine immunisation programs' optimal impact. Further, competing health priorities in a resource-limited setting constrain many functions of the Extended Program of Immunisation, like the timely introduction of new vaccines. The outstanding introduction of pneumococcal conjugate and rotavirus vaccines in 2024 through a GAVI-funded program provided momentum to improve Iran's communication and advocacy strategies.

In Iran, a common perception is that holding a press conference or having an annotated plan for when vaccination messages should be released is sufficient communication. These activities serve policymakers, donors, and the public and are designed to advocate for and raise public awareness of the situation. This type of communication is essential; however, it is only one component of a communication response. Enhancing healthy behaviours and creating a supportive social environment for change demands stimulating an appetite for learning and participation through regular dialogue with the target audiences. As such, comprehensive communication strategies must be evidence-based, use diverse communication tools, facilitate dialogue, integrate a responsive monitoring and evaluation framework, understand the target audiences and their needs, and have adequate executive resources.

In many low- and middle-income countries, including Iran, healthcare budgets are majorly strained. Immunisation managers increasingly struggle to protect current budgets and secure funding to strengthen immunisation programs and introduce new vaccines. Policymakers are fully aware of the success of immunisation in preventing suffering and death. However, the pressing need to increase or, at a minimum, maintain investments to sustain the success of immunisation programs is often not supported. The lack of political prioritisation for immunisation is alarming and may jeopardise past achievements and future opportunities for introducing new vaccines.

The WHO Country Office seeks an esteemed institution as an executing partner to collaborate closely with the Ministry of Health and Medical Education (MoHME) and stakeholders to improve Iran's immunisation communication and advocacy efforts within the below-defined scope:

- Trust and transparency are fundamental principles for effective communication and must be reflected in the development of all deliverables,
- Deliverables must build on existing national and international evidence, good practices developed by international organisations, and examples of media coverage, communication, and advocacy campaigns for specific vaccines.

Gavi, the Vaccine Alliance, funded this project.

### **3. Planned timelines (subject to confirmation) Planned start date: 1 Aug 2025**



Planned end date: 31 Jan 2026

Total Duration: 6 months

#### 4. Requirements - Work to be performed

We highly recommend a careful review and use of the below-listed references in the development of deliverables:

- WHO. Department of Communications (2017). Strategic communications framework for effective communications. <https://www.who.int/docs/default-source/documents/communicating-for-health/communication-framework.pdf>
- WHO. Regional Office for Europe. (2019). Effective communication of immunization data. <https://iris.who.int/handle/10665/346816>
- WHO. Regional Office for Europe. (2017). Advocacy for sustainable funding of immunization programmes workbook. <https://iris.who.int/bitstream/handle/10665/351327/WHO-EURO-2017-4772-44535-63057-eng.pdf?sequence=1&isAllowed=y>
- UNICEF. (2022). Manual for developing a communication strategy for immunization programs in Kazakhstan. <https://www.unicef.org/kazakhstan/en/reports/manual-designing-communication-vaccination-campaigns-kazakhstan>.

Objective 1: To develop guidelines for designing a communication strategy for immunisation programs.

Deliverable 1.1. Develop detailed guidelines for designing and implementing a communication strategy for immunisation. The guidelines must outline a theoretical framework for communication, for example, the Social Ecological Model for Communication or other theories as considered fit for context, and include detailed recommendations for the following chapters: 1) engaging stakeholders and partners at the national and provincial levels, 2) goal setting, including overarching long-term goals and specific behavioural goals, 3) audience analysis, including but not limited to identifying target audiences, and communication, information, and behavioural barriers, 4) designing, testing, and delivering of messages, 5) recommendations for media and social media collaborations, 6) monitoring and evaluation, 7) context-specific budgeting, and 8) crisis and emergency communication. Additional chapters may be included as considered relevant to the context.

Objective 2: To develop vaccine hesitancy communication strategies.

Deliverable 2.1. Develop an evaluation report on vaccine hesitancy in Iran, including reviewing available information about vaccine hesitancy and assessing existing communication and advocacy materials (websites, factsheets, posters, videos, etc.) compared to global best practices.

Deliverable 2.2. Develop vaccine hesitancy communication strategies. Strategies must be informed by national and international evidence and demonstrate the author's understanding that vaccine hesitancy is complex and context-specific, varying across time, place and vaccine type. Strategies must include 1) identification of target audiences and methods for establishing trust, 2) provision of information on both the risks and benefits of vaccination, comprising numeric likelihood of risks and benefits and qualitative information, 3) provision of facts about immunisation and addressing myths, using methods that would emphasise on facts and deflate the myths, and 4) use of visual supports like infographics, videos, and pictures. Finally, strategies must be tested to ensure the content works as intended for the target audience. The finalised vaccine hesitancy strategies must be accompanied by a report including methods for testing the content, feedback received, and subsequent revisions.

Objective 3: To develop communication material for the GAVI-funded immunisation program.

Deliverable 3.1. Develop communication material for projects under the GAVI-funded immunisation program, including details relevant to all stages of projects, including design, findings, and public health implications. The content must be created for targeted audiences, including but not limited to the public, health decision-makers, the people, institutions and stakeholders who may influence decision-makers, and potential immunisation allies. Tailored

messages, desired outcomes, and dissemination methods must be defined for each set of contents. Each set must have a timeline to update the tailored content as projects progress.

Objective 4: To develop advocacy material for sustainable funding of immunisation programs.

Deliverable 4.1. Develop advocacy material to support the Extended Program of Immunisation in advocating for funding for immunisation. The material must be developed using a systematic and structured approach, including but not limited to the following steps: 1) defining the advocacy objectives that are specific, measurable, attainable, relevant, and time-bound, 2) defining activities that are needed to achieve the objectives, including required resources and funding gaps, 3) preparing a list of target stakeholders and potential allies according to activities and findings in step 2. Outline how to collaborate with the stakeholders, organise them according to their perceptions and prioritisation of immunisation, and their influence on how immunisation is perceived and prioritised in Iran, and identify potential barriers and motivations for each one 4) preparing messages for target stakeholders according to findings in step 3, and 5) planning interactions with stakeholders to obtain their support and to build up their knowledge of the benefits of immunisation, of the need for investment and of the risks associated with underfunding. Ensure the advocacy material is informed by previous deliverables, including the communication content developed in deliverable 3.1. All steps in creating the advocacy material must be documented and presented along with the content.

**Please note:**

- **Through the project, WHO staff, in partnership with the project implementation team, will provide technical support and training to develop study material and facilitate dissemination of findings.**
- **All deliverables should be in Farsi and English, as WHO requests for review and feedback.**
- **All publications from this project should follow WHO Publication policies and procedures, including Ethical Clearance and Open Access Policy, and the Copyright holder will be WHO.**
- **The content of the findings must be approved by the Center for Communicable Disease Control (CCDC) at MoHME before publication.**

## 5. Requirements - Planning

<b>Task to be performed</b> (indicate expected work to be performed.)	<b>Work schedule</b> (month/period covered)	<b>Payment</b> (installment or total fee)
countersigning	-	20%
Deliverable 1.1 (and 3.1) *	30 September 2025	30%
Deliverables 2.1, 2.2, (and 3.1) *	31 November 2025	25%
Deliverable 4.1 (and 3.1) *	31 January 2026	25%

\*Deliverable 3.1 is ongoing throughout the project. This deliverable includes preparing tailored information about the progress made across all projects under the GAVI-funded program. Content about the most recent progress must be delivered at each specified date in the remuneration table.

## 6. Inputs

- The WHO country office will provide financial and technical support to the project and provide direct oversight throughout the activity.
- The WHO country office will provide technical guidance on processes and procedures applicable in formulating, managing, monitoring, and evaluating phases.
- The vendor must work independently on the project's administration and provide feedback to the supervisor.

## 7. Activity Coordination & Reporting

The selected institution will work on the supervision of:

<b>Technical issues:</b>	For technical supervision, reporting and instructions		
Responsible Officers	<b>Dr Omid Zamani</b> , National Professional Officer, CD unit head and <b>Dr Maryam Salehi Alavi</b> Immunization Officer	Email:	<a href="mailto:zamanio@who.int">zamanio@who.int</a> <a href="mailto:salehim@who.int">salehim@who.int</a>
Manager	<b>Dr Syed Jaffar Hussain</b> , WHO representative of Iran	Email:	<a href="mailto:hussains@who.int">hussains@who.int</a>
RO focal points	<b>Dr Farid Muhammad</b> , Technical Officer	Email:	<a href="mailto:faridmu@who.int">faridmu@who.int</a>
<b>Administrative issues</b>	For contractual and financial management of the contract		
	<b>Ms Zahra Seifosadat</b> , CD Program Assistant WHO-Iran	Email:	<a href="mailto:emacoiradcd@who.int">emacoiradcd@who.int</a>

## Verification:

Compatibility of the Contract implementation process and results with terms and conditions defined here will be verified and approved by EPI Office of the Center for Communicable Diseases Control at the Ministry of Health and Medical Education.

## 8. Characteristics of the Provider

### Mandatory

- Minimum five years of experience implementing public health projects, including health communication and advocacy.
- Comprehensive knowledge of Iran's immunisation landscape, including programs, WHO policies, guidelines, and procedures in relevant areas, and the ability to apply them in the country's context.
- Proven experience working with MoHME.
- A team with strong analytical, organisational, and communication skills, demonstrated initiative, sound judgment, and the ability to work collaboratively.
- Staff proficient in English, both oral and written,
- A functional financial system with a valid bank account registered in the institution's name.
- Adequate financial liquidity is required to ensure the availability of sufficient resources for the project execution.

### Desirable

- Working experience with the UN, especially WHO.

## 9. Place of assignment



The agency is supposed to work at its premises. Travel may be required, and costs are included in the lump sum outlined in the contract. The implementing agency should prepare a plan for the country's epidemic or related emergencies.



## Annex 2: Confidentiality Undertaking

1. The World Health Organization (WHO), acting through its Department of WCO IRAN-DCD Unit, has access to certain information relating to Effective communication and advocacy for immunisation in Iran which it considers to be proprietary to itself or to entities collaborating with it (hereinafter referred to as "the Information").
2. WHO is willing to provide the Information to the Undersigned for the purpose of allowing the Undersigned to prepare a response to the Request for Proposal (RFP) for " Effective communication and advocacy for immunisation in Iran" ("the Purpose"), provided that the Undersigned undertakes to treat the Information as confidential and proprietary, to use the Information only for the aforesaid Purpose and to disclose it only to persons who have a need to know for the Purpose and are bound by like obligations of confidentiality and non-use as are contained in this Undertaking.
3. The Undersigned undertakes to regard the Information as confidential and proprietary to WHO or parties collaborating with WHO, and agrees to take all reasonable measures to ensure that the Information is not used, disclosed or copied, in whole or in part, other than as provided in paragraph 2 above, except that the Undersigned shall not be bound by any such obligations if the Undersigned is clearly able to demonstrate that the Information:
  - a) was known to the Undersigned prior to any disclosure by WHO to the Undersigned (as evidenced by written records or other competent proof);
  - b) was in the public domain at the time of disclosure by or for WHO to the Undersigned;
  - c) becomes part of the public domain through no fault of the Undersigned; or
  - d) becomes available to the Undersigned from a third party not in breach of any legal obligations of confidentiality (as evidenced by written records or other competent proof).
4. The Undersigned further undertakes not to use the Information for any benefit, gain or advantage, including but not limited to trading or having others trading in securities on the Undersigned's behalf, giving trading advice or providing Information to third parties for trade in securities.
5. At WHO's request, the Undersigned shall promptly return any and all copies of the Information to WHO.
6. The obligations of the Undersigned shall be of indefinite duration and shall not cease on termination of the above mentioned RFP process.
7. Any dispute arising from or relating to this Undertaking, including its validity, interpretation, or application shall, unless amicably settled, be subject to conciliation. In the event of the dispute is not resolved by conciliation within thirty (30) days, the dispute shall be settled by arbitration. The arbitration shall be conducted in accordance with the modalities to be agreed upon by the Undersigned and WHO or, in the absence of agreement within thirty (30) days of written communication of the intent to commence arbitration, with the rules of arbitration of the International Chamber of Commerce. The Undersigned and WHO shall accept the arbitral award as final.
8. Nothing in this Undertaking, and no disclosure of Information to the Undersigned pursuant to its terms, shall constitute, or be deemed to constitute, a waiver of any of the privileges and immunities enjoyed by WHO under national or international law, or as submitting WHO to any national court jurisdiction.

### Acknowledged and Agreed:

<b>Entity Name:</b>	.....
<b>Mailing Address:</b>	..... ..... .....
<b>Name and Title of duly authorized representative:</b>	.....
<b>Signature:</b>	.....
<b>Date:</b>	.....

**Annex 3: Vendor Information Form****Company Information to be provided by the Vendor submitting the proposal**

<b>UNGM Vendor ID Number:</b> <i>If available – Refer to WHO website for registration process*</i>			
<b>Legal Company Name:</b> <i>(Not trade name or DBA name)</i>			
<b>Company Contact:</b>			
<b>Address:</b>			
<b>City:</b>		<b>State:</b>	
<b>Country:</b>		<b>Zip:</b>	
<b>Telephone Number:</b>		<b>Fax Number:</b>	
<b>Email Address:</b>		<b>Company Website:</b>	
<b><u>Corporate information:</u></b>			
<b>Company mission statement</b>			
<b>Service commitment to customers and measurements used</b> <i>(if available)</i>			
<b>Organization structure</b> (include description of those parts of your organization that would be involved in the performance of the work)			
<b>Relevant experience</b> (how could your expertise contribute to WHO's needs for the purpose of this RFP) – <i>Please attach reference and contact details</i>			
<b>Staffing information</b>			

\* <http://www.who.int/about/finances-accountability/procurement/en/>



#### **Annex 4: Contractual Provisions**

Within 30 days of receipt of the contract between WHO and the successful bidder (the “Contract”), the successful bidder shall sign and date the Contract and return it to WHO according to the instructions provided at that time. If the bidder does not accept the Contract terms without changes, then WHO has the right not to proceed with the selected bidder and instead contract with another bidder of its choice. The Contract will include, without limitation, the provisions set forth below (with the successful bidder referred to below as the “Contractor”):

1. **Compliance with WHO Codes and Policies.** By entering into the Contract, the Contractor acknowledges that it has read, and hereby accepts and agrees to comply with, the WHO Policies (as defined below). In connection with the foregoing, the Contractor shall take appropriate measures to prevent and respond to any violations of the standards of conduct, as described in the WHO Policies, by its employees and any other natural or legal persons engaged or otherwise utilized to perform any services under the Contract.

Without limiting the foregoing, the Contractor shall promptly report to WHO, in accordance with the terms of the applicable WHO Policies, any actual or suspected violations of any WHO Policies of which the Contractor becomes aware.

For purposes of the Contract, the term “WHO Policies” means collectively: (i) the WHO Code of Ethics and Professional Conduct; (ii) the WHO Policy Directive on Protection from sexual exploitation and sexual abuse (SEA); (iii) the WHO Policy on Preventing and Addressing Abusive Conduct; (iv) the WHO Code of Conduct for responsible Research; (v) the WHO Policy on Whistleblowing and Protection Against Retaliation; (vi) the WHO Policy on Prevention, Detection and Response to Fraud and Corruption, and (vii) the UN Supplier Code of Conduct, in each case, as amended from time to time and which are publicly available on the WHO website at the following links: <http://www.who.int/about/finances-accountability/procurement/en/> for the UN Supplier Code of Conduct and at <http://www.who.int/about/ethics/en/> for the other WHO Policies.

2. **Zero tolerance for sexual exploitation and abuse, sexual harassment and other types of abusive conduct.** WHO has zero tolerance towards sexual exploitation and abuse, sexual harassment and other types of abusive conduct. In this regard, and without limiting any other provisions contained herein:

(i) each legal entity Contractor warrants that it will: (i) take all reasonable and appropriate measures to prevent sexual exploitation or abuse as described in the WHO Policy Directive on Protection from sexual exploitation and sexual abuse (SEA), and/or sexual harassment and other types of abusive conduct as described in the WHO Policy on Preventing and Addressing Abusive Conduct by any of its employees and any other natural or legal persons engaged or otherwise utilized to perform the work under the Contract; and (ii) promptly report to WHO and respond to, in accordance with the terms of the respective Policies, any actual or suspected violations of either Policy of which the Contractor becomes aware; and

(ii) each individual Contractor warrants that he/she will (i) not engage in any conduct that would constitute sexual exploitation or abuse as described in the WHO Policy Directive on Protection from sexual exploitation and sexual abuse (SEA), and/or sexual harassment and other types of abusive conduct as described in the WHO Policy on Preventing and Addressing Abusive Conduct. Without limiting the foregoing, the individual Contractor shall promptly report to WHO, in accordance with the terms of the respective Policies, any actual or suspected violations of either Policy of which the individual Contractor becomes aware.

3. **Tobacco/Arms Related Disclosure Statement.** The Contractor may be required to disclose relationships it may have with the tobacco and/or arms industry through completion of the WHO Tobacco/Arms



Disclosure Statement. In the event WHO requires completion of this Statement, the Contractor undertakes not to permit work on the Contract to commence, until WHO has assessed the disclosed information and confirmed to the Contractor in writing that the work can commence.

4. **Anti-Terrorism and UN Sanctions; Fraud and Corruption.** The Contractor warrants for the entire duration of the Contract that:

- i. it is not and shall not be involved in, or associated with, any person or entity associated with terrorism, as designated by any UN Security Council sanctions regime, that it shall not make any payment or provide any other support to any such person or entity and that it shall not enter into any employment or other contractual relationship with any such person or entity;
- ii. it shall not engage in any fraudulent or corrupt practices, as defined in the WHO Policy on Prevention, Detection and Response to Fraud and Corruption, in connection with the execution of the Contract;
- iii. it shall take all necessary measures to prevent the financing of terrorism and/or any fraudulent or corrupt practices as referred to above in connection with the execution of the Contract; and
- iv. it shall promptly report to WHO, through the WHO Integrity Hotline or directly to the WHO Office of Internal Oversight Services (IOS), any credible allegations of actual or suspected fraudulent or corrupt practices, as defined in the WHO Policy on Prevention, Detection and Response to Fraud and Corruption of which the Contractor becomes aware and respond to such allegations in an appropriate and timely manner in accordance with its respective rules, regulations, policies and procedures. Furthermore, the Contractor agrees to cooperate with WHO and/or parties authorized by WHO in relation to the response. Relevant information on the nature of any credible allegations of such actual or suspected violations, as well as the details of the intended response and the outcome of any such response, should be communicated and coordinated with WHO, with the understanding that, subject to the terms of the WHO Policy on Prevention, Detection and Response to Fraud and Corruption, confidentiality and the due process rights of those involved will be respected.

In the event that any resources, assets and/or funds provided to or acquired by the Contractor under the Contract are found to have been used by the Contractor, its employees or any other natural or legal persons engaged or otherwise utilized to perform any work under the Contract, to finance, support or conduct any terrorist activity or any fraudulent or corrupt practices, the Contractor shall promptly reimburse and indemnify WHO for such resources, assets and/or funds (including any liability arising from such use).

5. **Breach of essential terms.** The Contractor acknowledges and agrees that each of the provisions of paragraphs 1, 2, 3 and 4 above constitutes an essential term of the Contract, and that in case of breach of any of these provisions, WHO may, in its sole discretion, decide to:

- i. terminate the Contract, and/or any other contract concluded by WHO with the Contractor, immediately upon written notice to the Contractor, without any liability for termination charges or any other liability of any kind; and/or
- ii. exclude the Contractor from participating in any ongoing or future tenders and/or entering into any future contractual or collaborative relationships with WHO.

WHO shall be entitled to report any violation of such provisions to WHO's governing bodies, other UN agencies, and/or donors.



6. **Use of WHO Name and Emblem.** Without WHO's prior written approval, the Contractor shall not, in any statement or material of an advertising or promotional nature, refer to the Contract or the Contractor's relationship with WHO, or otherwise use the name (or any abbreviation thereof) and/or emblem of the World Health Organization.

7. **Assurances regarding procurement.** If the option for payment of a maximum amount applies, to the extent the Contractor is required to purchase any goods and/or services in connection with its performance of the Contract, the Contractor shall ensure that such goods and/or services shall be procured in accordance with the principle of best value for money. "Best value for money" means the responsive offer that is the best combination of technical specifications, quality and price.

8. **Audit and Investigations.** WHO may request a financial and operational review or audit of the work performed under the Contract, to be conducted by WHO and/or parties authorized by WHO, and the Contractor undertakes to facilitate such review or audit. This review or audit may be carried out at any time during the implementation of the work performed under the Contract, or within five years of completion of the work. In order to facilitate such financial and operational review or audit, the Contractor shall keep accurate and systematic accounts and records in respect of the work performed under the Contract. Similarly, WHO may initiate an investigation into credible allegations of fraud and corruption and other forms of misconduct based on information received in accordance with its respective policies, procedures and rules.

In this context, the Contractor shall make available, without restriction, to WHO and/or parties authorized by WHO:

- i. the Contractor's books, records and systems (including all relevant financial and operational information) relating to the Contract; and
- ii. reasonable access to the Contractor's premises and personnel.

The Contractor shall provide satisfactory explanations to all queries arising in connection with the aforementioned audit and access rights.

WHO may request the Contractor to provide complementary information about the work performed under the Contract that is reasonably available, including the findings and results of an audit (internal or external) conducted by the Contractor and related to the work performed under the Contract.

9. **Publication of Contract.** Subject to considerations of confidentiality, WHO may acknowledge the existence of the Contract to the public and publish and/or otherwise publicly disclose the Contractor's name and country of incorporation, general information with respect to the work described herein and the Contract value. Such disclosure will be made in accordance with WHO's Information Disclosure Policy and shall be consistent with the terms of the Contract.

## **Annex 5: Technical Proposal Template**

Find the document in the link below:

<HTTPS://DRIVE.GOOGLE.COM/DRIVE/FOLDERS/1FVVOL9KSROV-FWBHZDB6M3ZKGLXC2ENT?USP=SHARING>

## **Annex 6: Financial Proposal**



to be completed at the time of submission, found here:

[https://drive.google.com/drive/folders/1drns7uRHP8eQpwndfiiQi\\_A560ZQwsa7j?usp=sharing](https://drive.google.com/drive/folders/1drns7uRHP8eQpwndfiiQi_A560ZQwsa7j?usp=sharing)

#### **Annex 7: Principal Investigator and Co-Investigators track record template**

to be completed at the time of submission, found here:

<https://drive.google.com/drive/folders/1g3VyctwUoBCtxdrLg-1eeDFmwcw7QsvQ?usp=sharing>

#### **Annex 8: Required contractual documents**

The awarded bidder needs to provide the documents in the link below:

<HTTPS://DRIVE.GOOGLE.COM/DRIVE/FOLDERS/10TONFNLTOQNWTO4WSW1TBXWCZI5DOJO?USP=SHARING>