



<b>BID/RFQ NUMBER:</b>	RFQ0002315
<b>CLOSING DATE:</b>	15 July 2022
<b>CLOSING TIME</b>	14h00PM
<b>BID VALIDITY PERIOD:</b>	90 Days
<b>DESCRIPTION OF BID:</b>	Development of the National Community-Led Monitoring Framework
Please Indicate whether the bidder is a: Service Provider or Independent Consultant	
RFP/ RFQ TO BE EMAILED TO THE FOLLOWING EMAIL ADDRESSES:	
<ul style="list-style-type: none"> <li>- Email address: <a href="mailto:Beullah@sanac.org.za">Beullah@sanac.org.za</a></li> <li>- Copied: <a href="mailto:Jabulile@sanac.org.za">Jabulile@sanac.org.za</a></li> <li>- Copied: <a href="mailto:pholo@sanac.org.za">pholo@sanac.org.za</a></li> <li>- Copied: <a href="mailto:Mbali@sanac.org.za">Mbali@sanac.org.za</a></li> </ul>	
Both Hard copies and email is accepted for this submission	

## TERMS OF REFERENCE

### The Appointment of the Service Provider for the Development of the National Community-Led Monitoring Framework

#### Contents

BACKGROUND: .....	3
INTRODUCTION.....	<b>Error! Bookmark not defined.</b>
RATIONAL FOR COMMUNITY LED MONITORING...	<b>Error! Bookmark not defined.</b>
PROCESS OF CLM .....	<b>Error! Bookmark not defined.</b>
SCOPE OF WORK.....	4
EXPECTED DELIVERABLES .....	5
QUALIFICATIONS AND EXPERIENCE.....	5
TIMELINES .....	6
CRITERIA FOR SELECTION:.....	6
ASSIGNMENT MANAGEMENT ARRANGEMENTS.....	6
Proposal Format.....	7

## **BACKGROUND:**

South Africa (SA) remains the epicentre of the HIV epidemic, accounting for more than a quarter of new HIV infections in East and Southern African countries with approximately 8 million people living with HIV (PLHIV) in 2018. The country has made significant progress in reducing new HIV infections and AIDS related deaths by 39% and 50% respectively since 2010<sup>1</sup>. Access to HIV testing and effective antiretroviral therapy (ART) has also improved substantially with the implementation of the test and treat initiative, and increased availability of affordable drugs with fewer side effects.

The country remains committed to the Joint United Nations Programme on HIV/AIDS (UNAIDS) 90–90–90 targets which aim to ensure 90% of PLHIV know their HIV status, 90% of people with diagnosed HIV receive sustained ART, and 90% of people on ART are virally suppressed by 2020, with these targets increasing to 95% by 2030. HIV prevalence among the general population remains high at 20.4%, and particularly higher among men who have sex with men (25.3%), transgender people (45.5-63.4%), sex workers (62.3%) and people who inject drugs (21.8%).

Although SA has made progress in reducing the incidence of HIV, the progress is not sufficient to meet the United Nations Sustainable Development Goal (SDG 3.3) global target of ending AIDS as a public health threat by 2030. Much still needs to be done to ensure that targeted populations are reached with tailored packages that are of high quality and accessible to all. Community-led interventions play a major role in making sure that quality services are provided.

## **COMMUNITY LED MONITORING**

CLM is an accountability mechanism for HIV, STI and TB responses at different levels, led and implemented by local community-led organizations of people living with HIV and TB, key populations (KP), other affected groups or other community entities.<sup>2</sup>CLM is implemented through local community-based organizations (CBO) and other civil society groups, who gather quantitative and qualitative data about community related issues, inclusive of accessibility, acceptability, affordability and quality of health

---

<sup>1</sup> [https://www.unaids.org/sites/default/files/media\\_asset/201506\\_JC2743\\_Understanding\\_FastTrack\\_en.pdf](https://www.unaids.org/sites/default/files/media_asset/201506_JC2743_Understanding_FastTrack_en.pdf)

<sup>2</sup> [https://www.unaids.org/sites/default/files/media\\_asset/establishing-community-led-monitoring-hiv-services\\_en.pdf](https://www.unaids.org/sites/default/files/media_asset/establishing-community-led-monitoring-hiv-services_en.pdf)

services. It is important that a framework is developed to guide CLM interventions in SA so that feedback from clients/service users can inform quality improvements and programming.

CLM processes includes capacity building and mentoring for members of directly affected communities to carry out own routine, ongoing monitoring of human rights violations and the quality and accessibility of HIV, TB and STIs services. Monitoring focuses on collecting quantitative and qualitative data through a wide variety of methods that reveal insights from communities about the problems and result in co-problems solving with the health sector where gaps persist.

Although CLM is not a new concept in SA, its implementation has not been coordinated. There have been models of monitoring human rights violations, access to HIV and SRH services for KP and vulnerable populations(VP) in the past. There is a renewed prioritisation of CLM interventions by many Funders recently that include newer focal areas such as human rights, stigma and discrimination, Gender Based Violence (GBV), Intimate Partner Violence (IPV), amongst others. There is a need for a framework to enhance implementation and to ensure coordinated activities by the different Implementation Partners (IP) which will include an ideal operational plan which can be taken to scale. CLM can contribute to shaping effective health services and influence policy changes that are part of the drive to achieve universal health coverage and tailored health care.

## **SCOPE OF WORK**

SANAC seeks to engage a consultant to undertake the following activities, using participatory approaches:

- Conduct rapid assessment of current CLM systems and innovations including those done by civil society in the country.
- Conduct thorough literature review of existing CLM projects implemented in the country and globally.
- Conduct mapping of stakeholders implementing CLM and identify gaps including emerging best practices.

- Develop a national CLM implementation framework with theory of change for CLM, aligned to **UNAIDS Normative Guidance**, and include tools, principles, and a set of common indicators aligned to the applicable national strategies.
- The national CLM Framework should describe SANAC's role in the coordination of Civil Society-led CLM in SA.

## **EXPECTED DELIVERABLES**

The following are the expected deliverables to complete the project:

- Project Inception report: Detailing the consultant's approach to the overall approach, project conceptual framework, and workplan.
- Literature Review Report on existing CLM mechanisms.
- Mapping of organizations that are implementing CLM including service gap analysis.
- Conduct consultation Workshops / Focus Group Discussions
- The Framework should include an M&E and reporting framework and a CLM toolkit.
- Final Print ready CLM strategy with clear indications of SANAC's role and the clear plan of coordination of civil society and KP-led CLM in SA.
- Final print ready national CLM Framework Dissemination report on the final national CLM Framework.

## **QUALIFICATIONS AND EXPERIENCE**

SANAC Trust intends to contract a service provider or consultant with extensive experience that includes:

- a) At least a master's degree, preferably in the field of public health or social sciences.
- b) Excellent knowledge of national policies and strategies and plans on HIV & AIDS, TB and STI is essential.
- c) Good understanding of the context of multisectoral HIV, TB and STIs or vulnerable and key populations in SADC region.
- d) Knowledge of the WHO and other UN standards, normative guidance, and work around legislation on health.

- e) At least 5 years of experience in conducting research and data analysis, particularly on HIV and TB response amongst VP and KP.
- f) Strong track record of technical writing and editing of high-level documents in English on HIV Strategies and Frameworks.
- g) Knowledge of the SANAC structure and its stakeholders, with strong stakeholder management skills and experience working at different levels of the SA Government Structure

## TIMELINES

The consultancy is expected to be completed in **60 days**. All costs inclusive of travel and workshops should be included in the budget for national and provincial consultations.

## CRITERIA FOR SELECTION:

The selection of the best offer will be based on the combined scoring method: (the qualifications and methodology will be weighted 80%, combined with the price offer, which will be weighted 20%).

Technical proposal demonstrating a clear process and methodology for delivering high-quality products in line with the ToR	30%
Demonstrated track record / knowledge of KP / VP access to services in SA	25%
Demonstrated experience in conducting research and data analysis, particularly on HIV and TB response	25%
Financial Plan with cost justification	20%

## ASSIGNMENT MANAGEMENT ARRANGEMENTS

The consultant will work under the overall guidance of the TSU Lead and Technical Advisors (KP and Human Rights)

## **PROPOSAL FORMAT**

A detailed proposal in response to this ToR is due on Friday 15 July 2022 by 14h00pm containing all the information required to evaluate the bid against the requirements stipulated in these terms of reference document. Proposals should include the following attachments:

- i) **Annexure A:** Technical Proposal demonstrating ability to complete the assignment and produce a quality document as per scope of work detailed above
- ii) **Annexure B:** Summary of experience. Please attach CVs of proposed team members, where applicable which show the range of similar assignments they have undertaken and the size of these assignments, three letters of reference or other means of verifying experience
- iii) **Annexure C:** Summary details and qualifications of proposed team
- iv) **Annexure D:** Pricing information. Price proposals should include VAT and should be fully inclusive of ALL costs to deliver the outputs indicated in the terms of reference. The consultant should also include budget notes to justify the cost items.
- v) **Annexure E:** CSD Summary report with a compliant status
- vi) **Successful Bidders will be required to complete the SBD Documents**