Global Fund Project 2021 – 2024
Resilient and Sustainable Systems for Health – Community Systems Strengthening

Request for Proposal for Consultancy for Development of a Social Mobilization, Building Community Linkages, Collaboration and Coordination Capacity Building Guide

MARCH 2022
Background

Amref Health Africa

Amref Health Africa is an international non-governmental organization that was officially founded in 1957 as a Flying Doctor’s Service. Since then the organization has expanded into many more areas. The Kenya Country program implements activities under five program areas namely HIV/TB/Malaria/Non-communicable diseases, Reproductive, Maternal, New-born & Child Health, Water, Sanitation & Hygiene, Clinical & Diagnostics and Research, Advocacy & Business Development.

Amref Health Africa’s vision is lasting health change in Africa and the mission is improving the health of people in Africa by partnering with and empowering communities, and strengthening health systems

Amref Health Africa Global Fund Tuberculosis Project

Amref Health Africa in Kenya has been the non-state Principal Recipient (PR) for Global Fund (GF) Tuberculosis and Malaria grants in Kenya since 2011 and 2012 respectively. In 2020, Amref Health Africa in Kenya was again competitively selected by the Kenya Coordinating Mechanism (KCM), as the non-state PR for the Global Fund TB and Malaria grants 2021 - 2024.

Resilient and sustainable systems for health (RSSH) are essential to ending HIV, TB, and malaria as epidemics. They also yield broader outcomes, delivering healthcare in a sustainable, equitable and effective way, accelerating progress toward universal health coverage, and helping countries prepare for emerging threats to global health security. Community systems strengthening (CSS) is an integral component of RSSH which is essential to achieving progress against the three diseases and to fulfil their principles of promoting human rights and gender equity. According to the Community systems strengthening (CSS) Framework by the Global Fund, CSS is an approach that promotes the advancement of informed, capable and coordinated communities, community-based organizations, groups and structures with Social Mobilization, Building Community Linkages, Collaboration and Coordination being one of the pillars. The community actors are enabled to contribute as equal partners alongside other actors to the long-term sustainability of health and other interventions at the community level, including an enabling and responsive environment in which these contributions can be effective.
Social mobilization, building community linkages, collaboration and coordination is key to promote functional networks, linkages and partnerships between community actors, service providers and HIV, TB, and Malaria programs are in place for effective coordination and decision making. According to WHO, social mobilization aims at empowering individuals and communities to identify their needs, their rights, and their responsibilities, change their ideas and beliefs and organize the human, material, financial and other resources required for socioeconomic development including health and human rights. In the context of health development, social mobilization is viewed as crucial in creating an enabling environment and a tool for health promotion. It is an approach that provides individuals and groups with knowledge and skills, and mediates between different interest groups to create environments that support and promote health. Social mobilization is closely linked to, and supports, other health development processes such as service delivery, infrastructure and human resource development, preventive interventions and advocacy for health. The critical contribution of social mobilization to health development is to enhance the participation of various actors, leading to increased knowledge and ownership of health interventions. Some of the key actors include civil society, networks of key and vulnerable populations, key government ministries contributing to the health sectors and the development partners.

PURPOSE, OBJECTIVES AND SCOPE OF WORK

Purpose

The purpose of this consultancy is to work with the Principal Recipient and the CSS technical working group to develop a social mobilization, building community linkages, collaboration and coordination capacity building guide to be used in training on social mobilization and its relevance in the HIV, TB, malaria and COVID-19 response for HIV, TB, Malaria CSOs and communities in 47 counties; and Support the champions to conduct social mobilization at the county and subcounty level.

Overall Objective

The overall objective is the development of Social Mobilization, Building Community Linkages, Collaboration and Coordination Capacity Building Guide.

Objectives

- To undertake a desk review of social mobilization, building community linkages, collaboration and coordination as provided for the Global Fund to fight AIDS, TB and Malaria and other partners in the health sector.

- Develop capacity building guide and tools to support community training in social mobilization, building community linkages, collaboration and coordination for and its relevance in the HIV, TB, malaria in the context of COVID-19. The training
guide should provide a framework for champion recruitment and support for social mobilization

Scope of work

Under the supervision of the principal recipient and the Community System Strengthening Technical Working Group, the consultant will be responsible for developing a social mobilization, building community linkages, collaboration and coordination capacity building guide.

Specifically, the consultant will be responsible for:

- Undertake desk review and data collection through KII, FGDs and other relevant methodologies to understand key issues on social mobilization, building community linkages, collaboration and coordination at global, national and community level in the context of HIV, TB, Malaria, COVID-19 and UHC.
- Develop a capacity building guide and tools on social mobilization, building community linkages, collaboration and coordination
- Develop a guide for the recruitment and support of champions drawn from communities, network and CSOs for social mobilization, building community linkages, collaboration and coordination
- Facilitate feedback sessions with the PR, TWG and other key stakeholders
- Develop a process report

DELIVERABLES

The consultant will work closely with Principal Recipient and the CSS technical working group. All deliverables will be submitted to Principal Recipient on date as mutually agreed during the inception meeting. The reports will be reviewed by Principal Recipient and the TWG. All draft and final documents will be submitted as soft. The consultant should submit following key deliverables: -

- Inception report: Outlining details of activities with proposed methodology and timeline/ delivery dates
- A draft on social mobilization, building community linkages, collaboration and coordination capacity building guide.
• A final on social mobilization, building community linkages, collaboration and coordination capacity building guide
• Tools/ guidance for recruitment and support champions on social mobilization, building community linkages, collaboration and coordination
• Consultancy process report

REQUIREMENTS
The Consultant will be required to have: -

1. Possess at least a post graduate degree in social science, community development, public health, communication, or other relevant discipline.
2. The lead consultant to have at least 10 years’ experience working in the health sector including national and county governments in Kenya.
3. Experience working with communities, CSOs, key and vulnerable population groups in HIV, TB and Malaria response in Africa.
4. Experience working with National and county governments in Kenya and advocating with ministries of Health.
5. Experience training communities, networks and CSOs in social mobilization, building community linkages, collaboration and coordination
6. Excellent written and oral communication skills
7. Strong analytical skills
8. Good interpersonal, communication and coordination skills
9. Ability to work independently with minimal supervision
10. Evidence of at least three (3) consultancies of similar scope

DURATION OF ASSIGNMENT
The Consultancy will be executed over a period of 20 days.

TECHNICAL PROPOSAL FORMAT
The application will be submitted either in PDF or MS Word using the below format. Any extra pages will not be considered during technical evaluation.

<table>
<thead>
<tr>
<th>Section</th>
<th>Maximum Page Limit</th>
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<tbody>
<tr>
<td>1 Cover Page</td>
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<tr>
<td>2 Table of Content</td>
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Other attachments should be sent as guided in the mode of application section below.

**MODE OF APPLICATION**

To respond to the request, the consultant is expected to submit the following documents online through [Proposals.Kenya@amref.org](mailto:Proposals.Kenya@amref.org) by or before Thursday 24th March 2022 at Midnight. The subject of the email should be the title of the assignment. Technical and financial proposals should be sent as separate documents.

1. Provide a technical proposal and attach the following documents:
   a. Workplan
   b. Curriculum Vitae (CVs) of the lead consultant. Any additional CVs must be accompanied by commitment letters.
   c. At least three cliental references.
   d. In case of a company include the profile.
   e. Evidence of consultancy done (either contract, PO, invoice or certificate of completion for at least 3 consultancies in the last 2 years (2019 to date)
   f. Valid Tax Compliance Certificate (TCC)

   (Bids missing any of the above requirements shall be disqualified.)

2. Financial proposal in Kenya shillings

**TECHNICAL REVIEW PROCESS**

The application review process will have 3 key stages
Stage 1: Preliminary review to confirm on mandatory requirements i.e. timely submission, CVs for the led Consultant with commitment letter for additional staff and valid tax compliance certificate

Stage 2: Technical evaluation of the applications that have all the mandatory requirements. The technical application will be based on the following criteria

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Maximum Scores</th>
<th>Score</th>
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<tbody>
<tr>
<td><strong>Academic Qualification</strong></td>
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<tr>
<td>At least advanced university degree (Master's degree or equivalent) in social science, community development, public health, communication, or other relevant discipline</td>
<td>10 Marks</td>
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<td><strong>Relevant Experience (at least 10 years)</strong></td>
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<td>The consultant(s) to have at least ten (10) years of relevant professional experience in (15 marks)</td>
<td>15 Marks</td>
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<tr>
<td>• Social mobilization, building community linkages, collaboration and coordination (5 marks)</td>
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<td>• Policy engagement and advocacy (4 marks)</td>
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<td>• Working in the health sector including with working with CSOs and key and vulnerable population groups. (3 marks)</td>
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<td>• Experience working with National and county governments in Kenya (3 marks)</td>
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<td>Evidence of at least (3) consultancies of similar scope</td>
<td>5 Marks</td>
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<td>• 1 assignment (1 mark)</td>
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<td>• 2 assignments (2 marks)</td>
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<td>• 3 assignments (5 marks)</td>
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<td><strong>Technical Approach and the Methodology (70 Marks)</strong></td>
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<td><strong>Background (10 Marks)</strong></td>
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<td>Understanding Social mobilization, building community linkages, collaboration and coordination</td>
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<td>Understanding the gap/problem in and ongoing initiatives in social mobilization, building community linkages, collaboration and coordination in Kenya</td>
<td>3 Marks</td>
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<td>Understanding of the objectives of the assignment</td>
<td>2 Marks</td>
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<td><strong>Methodology (60 Marks)</strong></td>
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<td>Proposed approach and key steps to developing the Social mobilization, building community linkages, collaboration and coordination training guide</td>
<td>20 Marks</td>
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<td>Identification of stakeholders and engagement</td>
<td>10 Marks</td>
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- Listing of the relevant stakeholders to be engaged (CSOs, Key and vulnerable populations, Ministry of Health, County Governments, etc.)

Consultancy execution/implementation process
- Inception report
- Desk review and data collection
- Stakeholders engagement
- Report writing and validation
- Dissemination – meeting, summary

Data collection approaches
- Qualitative (FGDs, KII, Case narratives etc.) and/or Quantitative (Questionnaires, Interview schedule etc.)

Clear methodologies of data cleaning, analysis and storage
- Use of software like
  - Qualitative (NVIVO, Atlas etc.)
  - Quantitative (SPSS, STATA, R, SAS, Excel etc.)

**Review of the work plan (10 marks)**
- Are activities in the schedule in line with the methodology and the scope of work outlined in the advert? (3 Marks)
- Is time allocation to the activities realistic and feasible to develop a strategy? (5 Marks)
- Timelines (20 days) (2 Marks)

**TOTAL SCORE** **100MKS**

Only bidders who will score a minimum of 80 out of 100 marks in the technical score shall qualify for the interview stage which forms part of the technical evaluation. Only Bidders who qualify after the interview shall proceed to financial evaluation.

Stage 3: Interviews for the candidates/organizations that will have attained 80 marks on technical evaluation