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**PROCUREMENT REFERENCE NUMBER: AFENET/AfCDC / RFP/2024/12/006-RE-ADVERTISED**

# REQUEST FOR PROPOSAL: INDIVIDUAL CONSULTANCY SERVICE TO SUPPORT

# KINGDOM OF LESOTHO AND REPUBLIC OF CAMEROON DEVELOP SEXUAL REPRODUCTIVE MATERNAL NEWBORN CHILD AND ADOLESCENT HEALTH AND NUTRITION (SRMNCAH&N) NATIONAL STRATEGIC PLANS

# BACKGROUND

Established in 2005, the African Field Epidemiology Network (AFENET) is a non-profit networking and service alliance of Field Epidemiology (and Laboratory) Training Programs (FELTPs), and other applied epidemiology training programs. AFENET is dedicated to helping ministries of Health in Africa build strong, effective, sustainable programs and the capacity to improve public health systems on the continent.

The Africa Centers for Disease Control and Prevention is an autonomous technical agency established by the African Union (AU) to enhance the capacity, capabilities, and partnerships of Africa's public health institutions. Its primary goal is to control, prevent, detect, and respond to disease threats and outbreaks by employing science, policy, and data-driven interventions and programs effectively and efficiently.

Africa’s fragile health system remains strained by the high burden of both infectious and non-communicable diseases with reproductive health (RH) outcomes (maternal and new-born morbidity and mortality) substantially accounting for Africa’s reduced success in achieving progress towards improving broader health outcomes and Agenda 2063.

The African Region accounted for 69% of global maternal deaths in 2020, and universal access to sexual and reproductive health-care services for sub-Saharan Africa is only 28%. The major complications which account for almost 75% of all maternal deaths are severe hemorrhage, infection, high blood pressure during pregnancy (pre-eclampsia and eclampsia).

Compared to 2017, in 2020 the maternal mortality ratio increased in 17 countries and decreased in 30 countries and to maintain a trend to meeting the SDG Targets, MMR needs to be reduced by at least 20.3% each year from 2020 (WHO,2023) and this requires concerted efforts.

With less than seven years to the end of the SDGs, Maternal Mortality Ratio (MMR) for Africa is 542/100, 000 compared to a global figure of 221/100,000, against the SDG target of 70 per 100,000 Live Births by 2030.

In addressing these challenges, The Africa CDC Strategic Plan 2023-2027 outlines six Strategic Priorities, whereby Priority 1: Strengthen integrated health systems to prevent and control high burden diseases, and Africa CDC has also successfully validated the Africa CDC Reproductive Health (RH) Strategic Priorities 2022-2026 and have started implementation of this strategy to support the accelerated implementation and monitoring of the MPoA 2016-2030.

Furthermore, key findings from the Africa CDC 2022 online continent-wide Reproductive Health priority survey which partly informed the development of the Africa CDC RH Strategic Priorities found out a very low awareness of the AU continental sexual and reproductive health and rights policy framework and the Maputo Plan of Action 2016-2030. Also, sub-optimal financing for Reproductive and Adolescent Health services, Safe Abortion Care, and the reduction of Gender-based Violence were reported to be making slow progress in achieving national targets. Priority health system areas including financing, health workforce training, deployment and retention, and service delivery including access and quality of care were also reported with some gaps. It was also reported that additional capacity for leadership, management and accountability for RH is required on the continent.

To prioritize support for Member States in developing, aligning, updating their RH strategy in 2024, the Reproductive Health Unit under the Division of Disease Control and Prevention of the Africa CDC, conducted a comprehensive assessment of needs and opportunities related to RH policies and Strategies. The main objective of this assessment was to gather information on the strengths, weaknesses as well as the barriers to Reproductive, Maternal, Newborn and child Health policy development, implementation, communication, monitoring, and Evaluation. The results of this assessment are to be used by Africa CDC and possibly other policymakers and stakeholders to support the development of RH strategy, gain an understanding of the barriers to implementation, improve resource mobilization, update implementation plans, or support advocacy for policy reform. It is premised on these justified reasons that the Africa CDC is hiring an individual consultant to provide support to the Kingdom of Lesotho and the Republic of Cameroon to develop their national reproductive health strategies.

**It is against this background that AFENET on behalf of Africa CDC seeks to hire individual consultant to support Kingdom of Lesotho and Republic of Cameroon develop Sexual Reproductive Maternal Newborn Child Adolescent Health and Nutrition (SRMNCAH&N) national strategic plans.**

**OBJECTIVES OF THE CONSULTANCY**

The objectives of the consultancy service are:

1. To provide the technical lead role for the development of a national SRMNCAH&N strategies that is evidence base and consultative for the Kingdom of Lesotho and Republic of Cameroon
2. To openly source a highly qualified and experienced individual consultant with specialized knowledge on SRMNCAH&N and as well acquire experience in policy / strategy development.
3. To perform an extensive literature search, individual, national and district consultations, field work and as well work with partners to ensure a production and validation of national strategies that are evidence base and consultative.
4. To develop an implementation plan and a monitoring framework to guide the strategy implementation monitoring an evaluation.
5. The consultant will be base at the Africa CDC headquarters under the Division of Disease Control and Prevention to support the Kingdom of Lesotho and the Republic of Cameroon Develop
6. The consultancy should last for 3 months following formal agreement and signatures

**SCOPE OF WORK**

The individual consultant will lead the stakeholders’ consultations, field work and writing of the following technical components of the National SRMNCAH&N Strategic Plans.

1. Situational analysis
2. SRMNCAH&N vision, goals, and priorities
3. Interventions areas
4. M&E and Results framework
5. Costed Implementation plan
6. Resource mapping

**EXPECTED DELIVERABLES**

1. A validated national Strategy with costed implementation plan and monitoring framework produced.
2. Conduct a situational analysis, individual and stakeholders’ consultations and filed work.
3. Provide activity report
4. Accountable to Africa CDC

**DURATION AND TERMS OF CONSULTANCY:**

**Duration of consultancy:** 90 working days, staggered based on the milestones listed below

**Confidential Information:** The individual consultant acknowledges that confidential information concerning the National SRMNCAH & N strategic plan development process belongs to Africa CDC.

The individual consultants must:

1. Maintain confidentiality, unless expressly permitted by Africa CDC.
2. Only disclose information collected under this assignment to persons and organization approved by Africa CDC

**Conduct:**

The individual consultants must not knowingly do anything which harms the interests, standing or reputation of the Member Sate.

**TIMELINES**

| # | **Timelines** | **Due Date** |
| --- | --- | --- |
| 1 | **Bidding process and recruitment of the consultant** | **4 weeks** |
| 1 | Introduction of the consultant to the technical teams at Africa CDC and the Member States. | 2-3 days after engagement |
| 2 | Submission of draft Work Plan and Inception Report (IR) with clear methodology providing projected timelines | 4 days after the introductory meeting |
| 3 | Submission of the final workplan and inception report | 2 days post TWG review meeting |
| 4 | Situational analysis, consultative meetings, field work and SRMNCAH&N writing and costing | 2 months |
| 5 | Zero Draft of SRMNCAH&N strategic plan presented to TWG for review | 5 days |
| 6 | 1st draft of SRMNCAH&N strategic plan submission to the TWG for validation | 2 weeks after reviewing zero draft (10 working days) |
| 7 | Submission of the validated and costed SRMNCAH&N strategic plan Power point presentation | 10 days after validation |

**DUTY STATION:**

The consultant will be based at the Africa CDC Headquarters, in Addis Ababa, Ethiopia for the entire duration of the contract with intermittent travels to the Kingdom of Lesotho and Republic of Cameroon to conduct field work and other works related to the development of the strategic plans.

**REPORTING LINES**

The individual consultant will be supervised by Africa CDC in collaboration with AFENET and the Member States.

**PROPOSED COMPENSATION PLAN**

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| --- | --- |
| **Deliverables** | **Compensation plan** |
| 1. An inception report detailing the methodology/ approaches and timelines associated with the consultancy assignment | 5% |
| 1. Consultative meetings report | 5% |
| 1. Workshops with SRMNCAH&N TWG and relevant Stakeholders reports | 10% |
| 1. A draft of National SRMNCAH&N Strategic Plan covering the period for 2026/27-2030/31 | 15% |
| 1. Validation report following stakeholders’ validation meeting | 15% |
| 1. Timeously completed high quality and validated National SRMNCAH&N Strategic Plans. | 50% |

**QUALIFICATION AND EXPERIENCE**

The individual consultant shall demonstrate ability and meet the following competencies:

1. At least a master’s level university degree in Public Health and Social Sciences or other relevant disciplines; Medical degree (MBCHB) and SRMNCAH & N Specialist qualifications would be an added advantage.
2. Expertise in development of the National Health Strategy
3. Expertise in the costing of the strategy
4. Minimum 10 years progressively responsible professional work experience and knowledge in SRMNCAH &N, including gender issues, human rights, health systems strengthening at national and sub-national levels.
5. Extensive knowledge and experience in strategic plan development, including competencies in costing and data analysis.
6. Proven record of accomplishment of delivering similar projects timeously to a high standard under tight deadlines.
7. Proficiency in Microsoft Office packages.

**OTHER REQUIREMENTS**

1. Five (5) years of experience in a field related to public health.
2. Work experience on health workforce programs in a national or continental capacity.
3. Experience utilizing software for data analysis and use.
4. Experience in conducting needs assessments and implementing training programs.
5. Strong project management skills, including the ability to coordinate multiple stakeholders and manage timelines effectively.
6. Familiarity with monitoring, learning and evaluation methodologies, including data collection, analysis, and reporting.
7. Demonstrated ability to work collaboratively in multicultural and interdisciplinary teams.
8. Excellent communication skills, both written and verbal, to effectively convey complex ideas and facilitate discussions.
9. Familiarity with the Africa CDC work ethics in general
10. Working ability in the AU languages (English, French, Arabic, Portuguese, Swahili, Spanish)

**OTHER COMPETENCIES AND KNOWLEDGE**

* Excellent organizational, communication and facilitation skills.
* Fluency in spoken and written English.
* Ability to work under pressure and meet tight deadlines.

**PERFORMANCE CRITERIA**

The performance of the consultant will be evaluated monthly, with the following criteria:

* Timely implementation of activities.
* Ability to meet deadlines in terms of reporting.
* Quality of the implementation of the assigned tasks
* Submission of progress reports

**EVALUATION AND QUALIFICATION CRITERIA**

1. General educational qualification and relevant training (20 points)
2. Experience related to the assignment (20 points)
3. Detailed and applicable responses to the objectives and deliverables of the consultancy (40 points)
4. Detailed work plan (15 points)
5. Language skills (5 Points)

**INTERESTED CANDIDATES ARE REQUESTED TO SUBMIT THE FOLLOWING DOCUMENTS FOR AFENET and AFRICA CDC’S CONSIDERATION:**

Interested applicants should prepare and submit a proposal in English and formatted in Microsoft Word or pdf, Times New Roman font not lower than 11.0 pts that is organized under the following structure:

1. **The technical proposal/concept note that should include:**
   1. Executive summary maximum of one page
   2. A detailed outline of activities with expected outputs
   3. The proposed implementation arrangements.
2. **A Gantt chart showing activity development timelines.**
3. **Annexes to the application:**
   1. CVs reflecting a description of the proposed consultants’ legality, background, and experience relating to the relevant scope of work outlined in the RFP.
   2. Documentation supporting the legal entity of the applicant.
   3. Relevant qualifications.
   4. Contacts of at least three organizations applicant previously worked for
   5. Applicants should also submit a detailed budget breakdown separately including relevant detailed activity costs.

**INVITATION**

AFENET invites eligible and qualified individuals to indicate their interest in providing the services. Applicants should provide information demonstrating that they have the required qualifications and relevant experience to perform the services.

Further information can be obtained by sending an inquiry to [secprocurement@afenet.net](mailto:secprocurement@afenet.net).

**RESPONSE TO THE CALL**

Electronic submission of the applicant’s resume, Expression of Interest letter, and relevant documentation should be submitted to [secprocurement@afenet.net](mailto:secprocurement@afenet.net) and copied to [skyambadde@afenet.net](mailto:skyambadde@afenet.net)

Deadline for receipt of proposals is **Monday January 20, 2025- 17:00hrs GMT.**

**Please click the link below to access the Standard Forms**





**\*ONLY successful candidates shall be contacted for an interview.**

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