# TERMS OF REFERENCE

**FORSS PROGRAMME**  
Train, Follow up and Support: Community mobilisation against HIV in the MENA region

<table>
<thead>
<tr>
<th><strong>Title</strong></th>
<th>Recruitment of a consultant specialising in research methodology</th>
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<tbody>
<tr>
<td><strong>Sector</strong></td>
<td>Health– HIV/AIDS</td>
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<tr>
<td><strong>Project</strong></td>
<td>FORSS Program Train, Follow up, and Support: Community mobilisation against HIV in the MENA region</td>
</tr>
<tr>
<td><strong>Project implementor</strong></td>
<td>Solidarité Sida in partnership with ITPC-MENA</td>
</tr>
<tr>
<td><strong>Project Location</strong></td>
<td>France, Morocco, Mauritania, Tunisia, Lebanon, Egypt</td>
</tr>
<tr>
<td><strong>Contract Type</strong></td>
<td>Consultancy contract</td>
</tr>
<tr>
<td><strong>Contract Duration</strong></td>
<td>48 working days</td>
</tr>
<tr>
<td><strong>Reference code</strong></td>
<td>FORSS-AC-02</td>
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I. BACKGROUND

1. Project Summary

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<tr>
<th>Project Title</th>
<th>FORSS - FORmer/Train, Suivre/Follow up, Soutenir/Support: Community mobilisation against HIV in the MENA region</th>
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<tbody>
<tr>
<td>Project implementor</td>
<td>Solidarité Sida</td>
</tr>
<tr>
<td>Project Partners</td>
<td>ITPC-MENA – International Treatment Preparedness Coalition (Morocco)</td>
</tr>
<tr>
<td></td>
<td>AGD – Association des Gestionnaires pour le Développement (Mauritania)</td>
</tr>
<tr>
<td></td>
<td>Al Shehab – Al Shehab Foundation for Comprehensive Development (Egypt)</td>
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<tr>
<td></td>
<td>ATP+ - Association tunisienne de prévention positive (Tunisia)</td>
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<tr>
<td></td>
<td>M-Coalition – MSM Coalition in MENA region (Lebanon)</td>
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<tr>
<td></td>
<td>RDR-Maroc – Association nationale de réduction des risques des drogues (Morocco)</td>
</tr>
<tr>
<td>Target Countries</td>
<td>Egypt, France, Lebanon, Morocco, Mauritania, Tunisia</td>
</tr>
<tr>
<td>Starting date</td>
<td>01 June 2018</td>
</tr>
<tr>
<td>Project Duration</td>
<td>36 months</td>
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</table>

The Middle East and North Africa (MENA) region remains one the regions with the lowest coverage for HIV related prevention and treatment services. Consequently, AIDS-related deaths remain on the rise.

The HIV epidemic in the MENA region is mainly concentrated among key populations. The region is challenged by limited access to testing services, very low Antiretroviral treatment coverage (29% of average), significant stigma and discrimination and weak community-based monitoring systems.

In response, Solidarité Sida, in partnership with ITPC-MENA and five associated partner associations, has launched the FORSS Program (“Train, Follow up, Support: community mobilization against HIV in the MENA region”) in June 2018. Funded by the 5% Initiative, the FORSS program aims to set up five community-based observatories in the five target countries of the programme; namely, Egypt, Lebanon, Morocco, Mauritania and Tunisia. It also aims to implement advocacy actions to influence national and international strategies. This community-based monitoring system also aims to improve the quality of prevention, care and treatment services delivery in the MENA region for PLWH and key populations.

The proposed approach entails the establishment of data collection sites in the five countries included in the programme. This approach aims to collect data on both the barriers faced by PLWH and key populations (cost of services, inadequate delivery of care in comparison to current needs, etc.), in addition to various forms of stigma and discrimination facing them while accessing available care. The programme plan includes questionnaires distribution and conduction of focus groups as data-collection tools. The programme also includes setting up a mobile application and a website to be used as interfaces for data collection and analysis.

The launching of these pilot observatories will contribute to identifying and documenting the existing barriers to the availability, accessibility and quality of HIV-related prevention, care and treatment services. The collected data will enable for more effective advocacy to influence current HIV strategies in the MENA region, both in terms of legal environment for key populations as well as provision of quality health services for PLWH.

This programme shall respond to a major challenge facing the AIDS response in the countries of the MENA region. It will ensure the availability and access to timely and reliable data to advocate for the inclusion of those most affected, including Key populations and PLWH, in national, regional and international HIV/AIDS strategies.
2. Programme Partners

**SOLIDARITÉ SIDA - France**
Solidarité Sida was founded in 1992 as a youth-led collective that aims for citizens’ mobilisation in terms of their health and sexuality. In addition to its staff members, Solidarité Sida is currently supported by more than 3,000 youth volunteers who keep spreading the organisation’s mission « to help, to prevent, and to defend and to mobilise ». The organisation’s mission entails helping the most vulnerable to reduce inequalities in access to treatment and care within France and worldwide through similar civil society-led partnerships. Prevention constitutes the second pillar of the organisation’s mission, especially in the light of continued AIDS-related deaths, and low condom utilisation among young people in France. Furthermore, Solidarité Sida aims to mobilise young people to advocate among governments and media for universal access to HIV related care and treatment services throughout its specific campaigns as part of its “defend and mobilise” mission.

**ITPC-MENA - Morocco**
ITPC-MENA is a regional network of activists, people living with HIV and their advocates working together to ensure universal access to treatment, prevention and health services for PLWH and key populations. The association is currently hosting the MENA Regional Platform, one of six regional platforms supported by the Global Fund. These platforms aim to increase the capacity of civil society and key populations groups to be able to engage effectively within the global fund processes. In collaboration with a wide array of networks and partners, the MENA platform promotes sharing of information, builds the capacity of civil actors on global fund processes and conducts needs assessments of civil society actors. The platform also supports civil society actors and key population groups to identify technical assistance opportunities and their relevant providers. Additionally, the platform works on provision of knowledge on global fund updates and guidelines in the local languages of the MENA region to facilitate access to information.

**AGD - Mauritania**
AGD is a civil society organisation that was founded in July 2003 in Nouakchott to respond to the population’s need for education and behavioural change. The organisation focuses on promotion of human rights education (citizenship and good governance), sexual and reproductive health and rights, HIV/AIDS, youth participation and entrepreneurship as part of its mission.

**AL SHEHAB – Egypt**
Al Shehab foundation aims to assist vulnerable and marginalised populations (with a special emphasis on women and children) in slum areas and informal settlements in Egypt. Their approach targets them through provision of knowledge and tools to attain their basic rights and their meaningful engagement in community development. Al Shehab addresses violence against women, HIV/AIDS among sex workers and advancing the legal rights of PLWH in the Governorates of Cairo and Alexandria.

**ATP+ - Tunisia**
ATP+ is a key actor for the provision of support and care for PLWH in Tunisia. Its work focuses on the rights of at-risk populations, including women, girls and LGBT+. Its main mission is focused on provision of support people targeted by discrimination to ensure that their rights are respected, and they can have access to HIV services with fairness and dignity of.

**M-COALITION / AFE-MENA - Lebanon**
The mission of Arab Foundation for Freedom and Equality is to encourage and support activists in the MENA region who work on human rights, sexual health and gender equality, including activists who work specifically on LGBT+ issues. M-Coalition, hosted by AFE, was officially launched at the International AIDS conference held in Melbourne in 2014. M-coalition focuses on the right to health and the other human rights of MSM, to providing them with prevention, care, treatment, and other services; all this by promoting the exchange of good practices between activities from the countries of the region.
RDR - Morocco

The Moroccan association for harm reduction (Réduction des Risques-Maroc) has been created in 2008. The association focuses on the provision of harm reduction services in several priority locations in the North of Morocco (including Nador, Rabat, Al Hoceima and Oujda) as part of the National AIDS strategy to address the HIV epidemic among people who inject drugs. In addition, it contributes to the oversight for eight addiction treatment centres all-over Morocco. It is also a key actor in the mobilisation of civil society groups and governmental bodies as part of its mandate on harm reduction and drug abuse.

3. Project goal, objectives and outlined activities

Main goal: To improve the quality of HIV-related prevention and support services and the access to Antiretroviral Treatment especially among key populations in the MENA region, particularly within the target countries.

Objectives:

1- To improve the knowledge and practices of community actors in relation to HIV care, support and treatment services provided to PLWH and key populations.
2- To generate national and regional data on the quality and accessibility of prevention, treatment and support services for PLWH and key populations.
3- To influence HIV prevention and care strategies on the national, regional and international levels and their implementation.

This consultancy is planned as part of the second objective.

Prior to the establishment of the community observatories, several other activities were carried under the first objective.

Production of national reports on the status of the available services within the targeted five countries

In-depth studies were conducted in each of the targeted countries with a special focus on key populations (MSM, SW and PWID). These studies were carried out to provide a clear picture on the current available prevention, testing and treatment services.

These studies aim to compile and analyse the available information on the services provided within national and international documents. It is an essential step prior to the establishment of the community observatories and also these reports will feed into the development of advocacy approaches aimed at the improvement of HIV services provision.

Simplification and adaptation of WHO guidelines: development of community guides

Lack of familiarity and knowledge of the World Health Organisations (WHO) recommendations by policy makers and community actors poses a challenge to national and regional HIV responses. Indeed, these documents, in their current format, in the language used (complex terms), as well as the language (English), are difficult to be understood by stakeholders.

This activity entails the simplification and adaptation of WHO recommendations through the production of six independent community guides covering the following topics: testing, treatment, prevention, MSM, SW, PWID and youth. These documents will be produced in Arabic and French and disseminated among all civil and institutional actors in the MENA region.

The status reports and community guides will contribute to improving their knowledge and practices of prevention and care services for PLHIV and key populations among community actors, and thus ensuring their empowerment to develop advocacy actions to influence national and international policies.
Capacity building trainings
Six thematic regional workshops will be implemented in the second half of 2019 to train 18 trainers (three per partner association) on the six themes mentioned above aiming to improving knowledge and practices on HIV-related prevention and care services.

Five national training workshops (in cascade) will be conducted in the five target countries by each of the partner associations, on the six themes, for community leaders. The objective of these workshops is to enable community actors to link between the status of existing and available services in the target countries, the national strategic plans and the international recommendations in terms of quality of service prevention, care, and access to treatments. Each workshop will target 15 community leaders. Some of these community leaders will be directly involved in community observatory activities including the data collection. The objective is to train a total of 360 actors and community leaders (75 in Morocco, Tunisia, Egypt, Lebanon and 50 in Mauritania).

4. Project Beneficiaries

Six partner associations (ITPC-MENA, AGD, Al Shehab, ATP +, M-Coalition, RDR-Morocco) are the direct beneficiaries of the project, also the community leaders in the five target countries. In the context of the project, community leaders are the individuals from the key populations targeted by the project (MSM, IDU, PW, PLHIV, etc.) and working to serve them to improve prevention, screening and access to care and treatment.

In a broader perspective, the project aims to provide better and adapted services to PLHIV and key populations in the target countries. The number of indirect beneficiaries in the five target countries of the project is estimated to be more than 350,000.

II. CONSULTANCY PURPOSE

In order to set up efficient and harmonized observatories of quality, Consultant’s support is sought to build the research methodology, as well as the implementation modality. The aim is to define the research protocol and the data collection tools that will be deployed by the partner associations, also to identify the methods for collection, analysis, consolidation, management and protection the collected data.

The consultant will also be required to undertake the following tasks:
- Information exchange with all of the FORSS programme managers in targeted countries on the national contexts particularly. This workshop will enable the recruited consultant to have a solid vision of each context to tailor and propose a suitable methodology.
- To facilitate a regional training workshop on methodology, data collection and analysis (organized by AGD in Mauritania) with the support of Solidarité Sida and ITPC-MENA, in order to standardize the knowledge and practices of all partners.

1. Objectives and expected results

General Objective: To provide a comprehensive research protocol to provide partner associations setting community observatories with the tools needed for quality data collection, management and analysis.

Expected Results: The partner associations are able to adapt the protocol and are able to:
- Set up and coordinate data collection, analysis and consolidation.
- Train national data collectors to guarantee the quality of the data and therefore it's validity for advocacy actions.
2. **Detailed description of tasks**

Under the supervision of the FORSS project team of Solidarité Sida, and in collaboration with the project teams of partner organisations, the recruited consultant is expected to undertake the following tasks:

**Literature Review:**
- Analysis of the documents produced by already existing observatories;
- Analysis of the documents produced by the FORSS programme (national and regional reports, community guides);
- Analysis of the documents produced by partner associations and international organisations that can contribute to better understanding of the national and regional contexts.

**Development of the following documents:**

- **Research protocol**
  - Define the research protocol for the five community observatories that will be used to set-up and the implementation of the research:
    - Research question and sub-themes
    - Research hypotheses
    - Study design
    - Target population(s)
    - Sampling frame
    - Study key indicators
    - Data collection sites in each country (and their criteria of selection)
  - Develop an ethical code of conduct for all stakeholders on data collection
  - Develop a guide on the safety and protection of data collectors and respondents

  **Attention Point**
  *Development of a standardized protocol should allow the collected data to be comparable between sites, also between countries. However, the consultant should take into account the specificities of each country to adjust the protocol if necessary, and to avoid discrepancies within the collected data.*

- **Data collection tools**
  - To elaborate the data collection tools that will be used by all the collectors identified by partner associations in each country, also the frequency of collection of each tool used:
    - **Quantitative Data:**
      - Questionnaires
    - **Qualitative Data:**
      - Interview guides
      - Focus group discussion guides (including participants information sheets)

  **Attention Point**
  - For questionnaires development, it is important to consider the average time taken by data collectors to interact with respondents to ensure the quality of the data collected.
  - The data collection tools should be responsive to the contextual specificities and experiences to ensure complete and valid data.

- **Data collection**
  - Identify the profile of different actors in the data collection process (data collectors and supervisors) and the extent of their involvement in the context of the study, also their roles and functions;
  - Develop a guide for data collectors and supervisors which can be comprehensible and easy to use;
- Develop a training curriculum for data collectors (to explain the research purpose, the protocol, data collection tools, mock-up scenarios and exercises, role and responsibilities, research ethics, etc.) and produce the necessary documents for its implementation;
- Develop a pilot tool to be tested during the data collection training.

Attention Point
- The "collector's guide" makes it possible to overcome the consequences of a possible turn-over of the data collectors and thus ensure the sustainability of the data collection process.
- The training of the data collectors allows the comprehension of the protocol, the methods and tools of collection, ensures the quality of the data and the respect of the persons engaged in the research.

Data entry, storage and analysis
- To develop a model for data entry, storage and analysis
  - Identification of responsibility;
  - Development of tools;
  - Identify the frequency of data collection and analysis.

Follow-up
- Develop a quality control tool to monitor the data collection

Attention Point
- The data collectors must be accompanied after the training. Once in the field, they must have proper understanding of the process and to feel sufficiently equipped while being aware of their limits.
- The monitoring of the data collection is essential to detect any divergence from the protocol and to adjust the practices in the field accordingly.

WORKSHOP FACILITATION ON DATA COLLECTION

Methodology training workshop
- To prepare the training curriculum and develop the necessary documents for the conduction of training (facilitation, training materials, etc.);
- To develop the terms of reference for the training and a detailed agenda;
- To facilitate the training workshop;
- To provide a training report following its closure.

3. Expected Deliverables

As part of this assignment, the recruited consultant will be required to provide various deliverables for project coordination team (at Solidarité Sida and ITPC MENA) and partner associations, including those involved in data collection process, including:
- A detailed research protocol;
- Ethical code of conduct document outlining the methods to respect the confidentiality and anonymity of respondents;
- A guide on safety and security of data collectors and respondents;
- Documents related to the data collection training for partner associations:
  - The training outline and agenda;
  - Training materials to be used during the workshop (presentations, case studies...etc.);
  - Training manual on Data collection;
  - The data collection guide to be disseminated to recruited data collectors on the national level.
- Data collection tools:
  - Questionnaires
  - Interview guides
  - Focus group discussion guides
Data coding guide
• Data analysis and consolidation tools.

Solidarité Sida shall be able to make internal and external use of the consultant’s outputs related to the project.

4. Locations(s), duration and practical arrangements for performing

The duration of this consultancy is estimated at 48 working days (5 days in the field and 43 days working from home to develop the protocol and expected deliverables, mission preparations and production of reports), the duration is broken down as follows:

• 30 days for the development of all deliverables
• 3 days for meetings with the Solidarité Sida team: launching, mid-term and closure meetings
• 10 days for protocol adaptation following discussions with partner associations at each target country.
• 5 days for travel mission to facilitate the training workshop on the methodology, data collection for partner associations (Mauritania):
  - 1 day of travel
  - 3 days workshop
  - 1 day for writing the training report

III. COMPETENCES AND SKILLS REQUIRED

• Master’s degree holder in social sciences and/or public health;
• Demonstrated experience in the field of social sciences and/or public health research and protocol development;
• Solid understanding and knowledge in the field of HIV/AIDS and access to treatment, and rights of key populations;
• Experience working with international and/or national organisations;
• Knowledge of health systems in the MENA region especially among the targeted countries of the project (Mauritania, Morocco, Tunisia, Egypt, Lebanon) is considered as an asset;
• Must be fluent in English and French. Arabic is considered as an asset;
• Professional experience in the MENA region will be considered as an asset.

IV. APPLICATION PROCESS

Interested applicants are encouraged to apply by providing an application package consisting of the following documents:

• Consultant’s CV, demonstrating similar experiences in research and development of protocols in the fields of social sciences and/or public health (supported by samples);
• A technical offer;
• A detailed financial offer outlining incurred costs.

1. Technical offer

The technical offer must meet at least the following elements:
- Understanding of the expected deliverables;
- Presentation of the methodological approach and theoretical frameworks upon which the study will be based. It is possible to propose adjustment to the methodological approach outlined in this call, supported with justification;
- Implementation steps;
- Detailed timeline.

The technical offer should not exceed 20 pages (excluding CV). Other documents deemed relevant to the proposal may be attached as annexes.

2. Financial Offer

A consistent financial offer must be submitted jointly with the technical offer. This financial offer must include a detailed budget including:

- The amount of consultant’s remuneration (daily fees x number of days);
- Possible additional costs.

While developing the detailed budget, candidates should take into account the following elements:

<table>
<thead>
<tr>
<th>Mission to facilitate the data collection training workshop</th>
<th>The following expenses will be covered by Solidarité Sida as part of the organising the data collection workshop:</th>
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<tbody>
<tr>
<td></td>
<td>- Round trip transportation (train or plane tickets)</td>
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<tr>
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<td>- Visa and insurance fees</td>
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<td>- Transportation to and from the airport</td>
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<td>- Perdiem according to the regulations set for the FORSS Program (including meals, accommodation, local means of transport)</td>
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<td>- Catering (during the workshop)</td>
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</table>

| Human resources                                           | - The human resources required for the implementation of activities outlined in this call are the responsibility of the recruited consultant. |
|                                                          | - National teams of partner associations can be mobilised and engaged during discussions on the adaptation of the research protocol at the national level and for the proper implementation of activities once a prior agreement has been concluded between the consultant and Solidarité Sida. |

| Office resources                                          | Hosting association will provide the consultant with office space and equipment needed for the data collection training. |

| Communication                                             | Communication costs are expected to be the consultant’s responsibility. |

It will not be possible for Solidarité Sida to reimburse additional expenses (regardless of their nature) beyond those stated in the financial offer.

V. SELECTION PROCESS

1. Submission of offers

Interested candidates are welcomed to submit their offers by email only to amit@solidarite-sida.org and talal.maarouf@itpcmena.org, no later than July 2nd, 2019 – 11.59pm (Paris time). The email subject should indicate the following: « FORSS-AC-02 - Application LAST NAME First Name ».

Offers received after the deadline will not be considered.

Interested candidates can request additional information from Anais MIT and Talal MAAROUF, Project managers of the FORSS programme at Solidarité Sida and ITPC-MENA respectively, through the same emails stated above, no later than June 27th, 2019. Beyond this date, Solidarité Sida and ITPC MENA will not be able to respond to any inquiries regarding this consultancy.
2. Selection steps

A joint committee formed by Solidarité Sida and ITPC MENA will be in charge of evaluating the applications received.

Following reviewing offers, the committee may contact applicants for further details about their offers.

Once requested details have been provided, the committee will select the applicant(s) according to the pre-set criteria.

3. Selection criteria

The contract will be awarded to the best technical offer in terms of the quality of the proposed methodology and deliverables, experience and profile of the candidate. The financial offers will be evaluated in terms of being realistic (consistency of unit costs with prevailing market estimates, and the total proposed cost against the available budget for this consultancy).

Particular attention will be given to the experience and references provided by the candidate individuals/organization who undertaken similar assignments.

Prior to final selection, shortlisted candidates might be contacted by the selection committee for fine-adjustments of their technical and financial offers.

4. Timeline

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
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<tbody>
<tr>
<td>Deadline for requesting additional information</td>
<td>June 27, 2019</td>
</tr>
<tr>
<td>Deadline for submission of offers</td>
<td>Juy 2nd, 2019 at 11:59pm (Paris time)</td>
</tr>
<tr>
<td>Tentative date for the start of the consultancy</td>
<td>Mid-July 2019</td>
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### ACRONYMS AND ABBREVIATIONS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>ARV</td>
<td>Antiretrovirals</td>
</tr>
<tr>
<td>ATP+</td>
<td>Association tunisienne de prévention positive</td>
</tr>
<tr>
<td>GFATM</td>
<td>Global Fund for AIDS, Tuberculosis and Malaria</td>
</tr>
<tr>
<td>HIV</td>
<td>Human immunodeficiency virus</td>
</tr>
<tr>
<td>LGBT+</td>
<td>Lesbians, Gays, Bisexuals and Transgender +</td>
</tr>
<tr>
<td>M-Coalition</td>
<td>MSM Coalition in MENA region</td>
</tr>
<tr>
<td>MENA</td>
<td>Middle East and North Africa</td>
</tr>
<tr>
<td>MSM</td>
<td>Men who have sex with men</td>
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<tr>
<td>NGO</td>
<td>Non-governmental organisation</td>
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<tr>
<td>PLWH</td>
<td>People Living with HIV</td>
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<tr>
<td>PWID</td>
<td>People who inject drugs</td>
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<tr>
<td>RDR</td>
<td>Réduction des risques</td>
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<tr>
<td>SW</td>
<td>Sex workers</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organisation</td>
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