

INDIVIDUAL CONSULTANT

Consultancy Service to Conduct a Continental Level Situational Analysis of Viral Hepatitis Prevention and Control Programs

Reference Number: ACDC/DCP/C/003

1. Background

Officially launched in Addis Ababa, Ethiopia, in 2017 as a specialized technical institution of the African Union, the Africa Centres for Disease Control and Prevention (Africa CDC) is Africa's first continent-wide public health agency. Africa CDC envisions a safer, healthier, integrated, and stronger Africa, where the Member States can effectively respond to outbreaks of infectious diseases and other public health threats. The agency's mission is to strengthen the capabilities of Africa's public health institutions and systems to detect and respond quickly and effectively to disease outbreaks and other health burdens through an integrated network of continent-wide disease control and prevention, preparedness and response, surveillance, laboratory, and research programs. To achieve its mission, the Africa CDC works in all geographic regions of the African continent and has instituted technical divisions to focus on five priority areas, namely Surveillance and disease intelligence, Preparedness and response, Laboratory systems and networks, Disease Control and Prevention, and Public Health Institutes and research.

The Agenda 2063: The Africa We Want is the African Union's (AU) strategy for the development of the continent and the Africa Health Strategy 2016-2030 aims to ensure healthy lives and promote the well-being for all in Africa in the context of "Agenda 2063: The Africa We Want" and the Sustainable Development Goals. One of its objectives is to reduce morbidity and end preventable mortality from communicable and non-communicable diseases and other health conditions in Africa by implementing several strategic priorities including "Ending AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other emerging and re-emerging communicable diseases".

To support African countries to address issues related to prevention and control of endemic diseases and neglected tropical diseases (NTDs) on the continent, Africa CDC has established a Unit of Endemic and NTDs under the Division of Disease Control and Prevention. One of the flagship programmes of the Unit is the prevention and control of viral hepatitis. According to the World Health Organization (WHO), 82 million people are living with HBV and 9 million with HCV on the continent. Furthermore, HBV and HCV infections are responsible for more than 50% of primary liver cancer on the African

continent. However, detailed epidemiology and understanding of the disease burden in Africa are absent due to the scarcity of reliable prevalence data and population-based estimates. Therefore, for any continental viral hepatitis prevention and control program to be effective, this major gap needs to be urgently addressed and surveillance systems implemented to obtain reliable estimates of the burden of the disease in all countries on the continent.

Cognizant of this critical public health issue, Africa CDC has recently signed a grant agreement with the Korea International Cooperation Agency (KOICA) for the implementation of a continental four-year viral hepatitis prevention and control program aiming to build sustainable systems and capacities to support AU Member States with viral hepatitis elimination efforts. In the first phase of this four-year project, a situational assessment will be conducted to evaluate viral hepatitis prevention and control programmes of 55 AU Member States (MS).

2. The objectives of the assignment

General objectives

The overall objective of this consultancy is to conduct a continental situational assessment and analysis of existing capacity and gaps of viral hepatitis prevention and control programmes of 55 MS in close collaborations with key stakeholders from MS and Africa CDC. This assessment will identify gaps, challenges, and opportunities in viral hepatitis prevention and control, programmes in Africa.

Specific objectives

1. Develop a questionnaire for conducting this situational assessment at a continental level to identify gaps, challenges, and opportunities in existing viral hepatitis prevention and control in line with the strategic objectives and mandate of Africa CDC;
2. Conduct close follow-ups with and provide support as required (including through online workshops) to 55 MS to ensure timely completion of the questionnaire;
3. Identify a longlist of 10 countries that could benefit the most from a viral hepatitis baseline sero-survey and establishment of sentinel surveillance system for viral hepatitis B and C;
4. Conduct in-depth field assessments of viral hepatitis prevention and control programs, with a focus on surveillance programs in 10 countries;
5. Write reports, including interim reports of findings, and final report of situational assessment questionnaire findings and in-depth country reports.

3. Scope of work (activities /task to perform)

The situational assessment will assess viral hepatitis prevention and control programmes in the areas of health governance, public health legislation, financing, and institutional support; health promotion and disease prevention; workforce development; health protection; surveillance and data collection; laboratories and diagnostics; and public health research in all 55 AU MS. The consultant will work closely with the support of a team from the Unit of Endemic and NTDs under the Division of Disease Control and Prevention at Africa CDC.

The Consultant is expected to undertake the following tasks:

1. To conduct a desk review of all existing documents pertaining to viral hepatitis prevention and control in Africa, such as but not limited to the national viral hepatitis plans, annual reports of member states pertaining to viral hepatitis, published articles, conference reports, and other peer-reviewed and grey documents.
2. To carry out a stakeholder mapping and conduct interviews with relevant stakeholders to identify who is doing what to support MS with prevention and control of viral hepatitis
3. Develop assessment tool for conducting this situational assessment at a continental level to identify gaps, challenges, and opportunities in existing viral hepatitis prevention and control programs in line with the mandate of Africa CDC.
4. To share the assessment tool with the focal persons from MS for completion and support MS to complete the assessment tool by close follow-ups and organizing workshops to discuss information required in the questionnaire and provide answers to any queries that might be raised
5. To write interim reports on findings from responses of MS to be presented by Africa CDC at relevant conferences etc.
6. To identify a longlist of 10 countries where Africa CDC would have the most impact with conducting a viral hepatitis baseline sero-survey and establishment of sentinel surveillance system for viral hepatitis B and C.
7. To develop an assessment tool to conduct in-depth field evaluations of viral hepatitis prevention and control programs, with a focus on existing surveillance programs.
8. To review and analyse data gathered from the in-depth evaluations and support Africa CDC in selecting 5 countries for conducting sero-surveys into a draft assessment report, including specific country reports, and present it to Africa CDC and partners.

9. To incorporate comments and feedback from Africa CDC on the draft report into a final report.

4. Expected results, the deliverables of the assignment

The consultant will be expected to deliver the following:

- Inception report with work plan and clear timelines, key deliverables, and the methodology to be used to carry out the assignment.
- Situational assessment tool that should be developed for collection of pertinent information described above before conducting the situational assessment.
- Weekly progress reports (via Zoom and email) and interim reports on preliminary findings to be shared with Africa CDC. Africa CDC may request ad-hoc reports and/or presentations on findings to be shared with the Africa CDC leadership and/or at conferences.
- Longlist of 10 countries where Africa CDC would have the most impact with conducting a viral hepatitis baseline sero-survey and establishment of sentinel viral hepatitis surveillance system.
- Evaluation tool for an in-depth field assessment of viral hepatitis prevention and control programs, with a focus on existing surveillance programs that will take place in these 10 countries.
- Draft assessment report with data gathered from the in-depth situational assessments including specific country reports
- Assessment report audit trail: Comments and changes by the consultant in response to the draft report should be retained by the consultant to show how they have addressed comments.
- Any interim reports and presentations on findings from situational assessment and in-depth evaluations as required by Africa CDC.
- Final Situational Assessment report.

The Consultant will report directly to the Head of Disease Control and Prevention Division. All outputs, including the raw data and draft documents, analyses, zoom recordings, and final documents and products will belong to Africa CDC.

5. Timeframe

The service will be completed within a period of six (6) calendar months from the date of signing the contract (effective date). The following time frame/schedule (in months) is proposed for the key deliverables:

✓ Signing/Effective Date of Contract

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| ✓ Inception report | M+0.5 |
| ✓ Situational assessment tool | M+0.5 |
| ✓ Interim reports on findings | M+2 |
| ✓ Longlist of countries report | M+3 |
| ✓ In-depth field evaluation tool | M+3.5 |
| ✓ Submission of draft assessment report, including country reports | M+5.5 |
| ✓ Final situational assessment report | M+6 |

6. Respective responsibilities of Africa CDC and consultant

Component	Activity	Outputs	Lead
Situational Assessment	Desktop review of all existing documents	Summary/synthesis of disease burden and MS health system capacities in prevention and control of viral hepatitis	Consultant
	Stakeholder mapping and conduct interviews with relevant stakeholders	Stakeholder meetings, correspondence & events, report	Consultant/Africa CDC
	Develop assessment tool for situational assessment	Assessment tool	Consultant
	Share the assessment tool with MS and support them to complete the assessment tool by close follow-ups and workshops	Weekly progress reports on responses obtained Minutes from support workshops with MS	Consultant
	Collate and analyze findings of MS responses and write interim report on findings	Interim report	Consultant
	Presentations of findings to the Africa CDC leadership or at conferences.	Meeting/conference report	Africa CDC

	Identify a longlist of 10 countries for in-depth evaluations.	List of 10 countries with appropriate justifications	Consultant/Africa CDC
	Develop an assessment tool to conduct in-depth field evaluations in 10 countries	In-depth field evaluation tool	Consultant
	Analyze data gathered from the in-depth assessments	Draft assessment report	Consultant
	Collate the findings into a final report, including specific country reports, and present it to Africa CDC and partners	Final report, meeting minutes	Consultant
	Provide comments and feedback on the report	Audit trail of the report	Africa CDC
	Incorporate the comments and provide final situational assessment report	Final Situational Assessment report	Consultant
Project management	Establish roadmap for situational assessment and analysis	Roadmap	Consultant
	Establish meeting schedule	Meetings	Consultant
	Finalize Gantt chart and risk matrix	Gantt chart and risk matrix	Consultant
	Regular meeting notes	Meeting notes	Consultant

Africa CDC will provide to the Consultant the following documents and facilities:

- a) Open channels of communication between the consultant and the focal points of the member states.
- b) Any necessary internal documentation and information required for the assignment.
- c) Maintain regular follow-up of the activities done by the consultant, review and comment on the submitted deliverables and work done.
- d) Assist in organizing workshops, meetings and consultative forums with Member States and other stakeholders
- e) Provision of office room and internet facility at the Africa CDC HQ.

7. Consultancy Fee and Duty Station

Duty station will be the Africa CDC HQ in Addis Ababa, Ethiopia. Payment will be a fixed amount of 49,500 USD. This cost includes all consultant's fee and profit. Fees payable do not include costs associated with project related travels, coordination/organization of project related activities and events, stakeholder dialogues, consultations, and workshops. These costs will be met by Africa CDC. This is a lump sum contract and payment will be against deliverables.

DELIVERABLES	PAYMENT
Inception report	10%
Situational assessment tool	10%
Interim reports on findings	20%
Longlist of countries report	15%
In-depth field evaluation tool	15%
Submission of draft assessment report, including country reports	20%
Final situational assessment report	10%

8. Application Specification

Interested consultants should include in their application the following:

Personal Capacity Statement

- a) Statement about understanding of the assignment and why the desire to work with Africa CDC
- b) Technical Proposal not exceeding 8 pages on:
 - a. Understanding and interpretation of the TOR
 - b. Methodology to be used in undertaking the assignment
 - c. Time and activity schedule
- c) Curriculum vitae of the Consultant stating his/her relevant experience and capacity to undertake the work;
 - o Proof of experience in conducting assessments and development of necessary tools;
 - o Experience of previously engaging with government officials; diplomacy skills and other soft skills;
- d) Written reference and contacts of at least two organizations previously worked for and contact persons.
- e) Two (2) referees with good knowledge of the candidate's past assignment, furnishing full contact details, telephone and e-mail addresses.

9. Qualifications and experience of consultant

Education

- University degree (PhD or Masters) of Public Health, health sciences, or another relevant field. A specialisation in viral hepatitis is desirable.

Experience

- At least 10 years of work experience in global health and disease prevention and control programmes on the African continent is required.
- Clear understanding and working experience in the field of viral hepatitis, in particular at programmatic level, is desirable.
- Proven practical experience in conducting or supporting situational analyses (needs assessments) at institutional, country, or international level.
- Demonstrate good knowledge of investigative methods that combine qualitative inquiry and document reviews (including desktop reviews), with strong record on producing analytical work.
- A good understanding of project management, planning and design related issues.
- Demonstrated capacity for strategic thinking and excellent analytical and writing skills

- Initiative, ability to work independently, sound judgment and good interpersonal skills
- Experience in working with international organizations such as WHO, UN agencies, AUC, etc.
- Excellent diplomatic, representational, interpersonal and communication skills, and ability to interact with stakeholders and decision-makers in technical and other professional settings.

Language

- Collective excellent oral and written communication skills in at least two of the official AU languages (mainly English and French).

10. Evaluation and qualification criteria

Technical Evaluation

1. Education, Qualification, and Relevant Training – 20
2. Experience of the consultant and relevance to the assignment and number of years – 30
3. Technical proposal – 40
4. Language - 10

Total – 100

11. Required Documentations

- a) Cover letter with statement of understanding
- b) A detailed and updated curriculum vitae (CV), and indicating nationality, age and gender.
- c) Detailed technical proposal not exceeding 8 pages on:
 - a. Understanding and interpretation of the TOR
 - b. Methodology to be used in undertaking the assignment
 - c. Time and activity schedule
- d) Two written references

12. Invitation

The Africa CDC now invites eligible Individual Consultants (“Consultants”) to submit their CVs in providing the Services and required documents as listed in the ToR. Interested Consultants should provide information demonstrating that they have the required qualifications and relevant experience to perform the Services. The shortlisting criteria are listed in the ToR.



A Consultant will be selected in accordance with the Individual Selection method set out in the Procurement Manual of Africa Union, Version 2.0.

Further information can be obtained at the address below during office hours 8:00-13:00hrs and 14:00-17:00 hours, Addis Ababa Time.

CVs must be delivered in a written form following the above shortlisting criteria to the emails below before 15:00 Hours Local Time on 24th November 2022

Africa CDC,

Attn: Administration and Management Division

P.O. Box 3243, Addis Ababa, Ethiopia

Tel +251-115517700, Facsimile (fax): +2515517844

E-mails: africacdctender@africa-union.org and zemenua@africa-union.org