



REQUEST FOR PROPOSALS (RFP)

The Ghana-West Africa Program to Combat AIDS and STI (WAPCAS) in collaboration with the Ghana AIDS Commission (GAC) is requesting proposals from qualified firms or consultants for the third round of:

MAPPING AND SIZE ESTIMATION OF FEMALE SEX WORKERS (FSW) AND INTEGRATED BIO-BEHAVIOURAL SURVEILLANCE SURVEY (IBBSS) AMONG FSW AND INTIMATE PARTNERS

FUNDING AGENCY: The Global Fund to Fight AIDS, Tuberculosis, and Malaria (“The Global Fund”)

A. Background

Ghana’s HIV epidemic is described as generalized with the current estimated adult prevalence of 1.67% (Ghana AIDS Commission, 2018). While this level of HIV prevalence may be relatively low compared to those of other West African countries, results of integrated bio behavioural surveillance surveys (IBBSS) among Key Populations (KP) show HIV prevalence several times higher than that of the general population. The geographical heterogeneity and higher HIV prevalence among key populations underscore the vulnerabilities that have potential to influence the rapid expansion of the epidemic in the general population through bridging populations.

The National HIV and AIDS Strategic Plan (NSP) 2016-2020 prioritizes prevention, treatment and care programmes for key affected populations (KPs). As part of the national HIV and AIDS monitoring and evaluation plan, the integrated bio-behavioural surveillance surveys (IBBSS) conducted among KP populations should be done every three to four years to serve this purpose. This round (3rd) of the FSW IBBSS is thus follow-on to the previous one carried out in 2015.

Funding for the study is from the Global Fund through WAPCAS, the NFM II principal recipient for KP programme. GAC in conjunction will provide coordination and technical oversight pursuant to its mandate. WAPCAS and GAC are collaborating on this study for a successful implementation.



This RFP is seeking technical assistance for the conduct of mapping and population size estimation (MPSE) and integrated bio-behavioural surveillance survey (IBBSS) among female sex workers (FSWs) and intimate partners in all the ten regions of Ghana; to measure HIV prevalence, sexually transmitted infections (STI), related risk behaviours and access to prevention and care services among others.

The results of the MPSE and the IBBSS will contribute to the definition of current trends of HIV and co-infections in these populations, evaluation of the national KPs strategy implementation and eventually inform the National HIV and AIDS Strategic Plan 2021-2025. The results of the studies will also facilitate the measurement of national indicators and tracking of results in terms of effectiveness and coverage of Global Fund New Funding Model II KP grant agreement and PEPFAR Implementation Plan. Furthermore, the studies will generate critical data for policy decisions to inform both strategic and operational planning and resource allocation to ensure proper targeting of comprehensive prevention, treatment and care services for FSWs.

B. Objectives of the Study

The overall objective of the mapping, size estimation and IBBSS is to collect the necessary information to identify appropriate locations for implementing interventions so as to ensure optimum *coverage* of services and to assess the prevalence of HIV and other STIs and behavioral risk factors among FSWs and their intimate partners.

The following are specific objectives;

- i) Describe the operational typology and structures of **FSW** including their intimate partners in each of the locations and their duration in sex work and how this links to their risk of HIV infection
- ii) Conduct a comprehensive mapping of female sex workers in all the ten regional capitals, mining centres, port cities, selected border towns and market/commercial centres as well as other towns where FSWs operate across the country.
- iii) Generate estimates of the size of FSWs and distribution in each mapping site, by different categories in the identified cities and towns



- iv) Describe the sexual network patterns of FSWs and their intimate partners in all the locations
- v) Provide locations of hotspots where HIV risk activities predominantly take place
- vi) Generate information to help understand the mobility patterns of FSWs within and outside the site and the extent of networking among FSWs
- vii) Assess the prevalence of HIV and selected STI (Syphilis, and N. gonorrhoea) and behavioral risks factors among FSWs.
- viii) Identify and track the key behaviours and settings linked to HIV and STI transmission among FSWs and their intimate partners
- ix) Characterize HIV test and health seeking behaviours in these populations
- x) Identify contextual factors that increase risk and vulnerability to HIV and STI among FSWs and their intimate partners and contextual factors that limit access to HIV services
- xi) Assess the coverage, reach, and intensity of HIV/STI prevention and treatment services for FSWs and their intimate partners
- xii) Provide recommendations to address gaps in access to critical prevention, treatment, care and support services for FSWs.**

This study will be managed by WAPCAS with technical leadership from the constituted Scientific Advisory Committee (SAC). The Scientific Advisory Committee will provide operational guidance for the implementation of the study. The study panel will ensure that study methodologies conform to national and international standards.

The study will be implemented in 3 components namely:

- **Pre-Survey Assessment (PSA)**
- **FSW Population Mapping and Size Estimation**
- **IBBS among FSWs and intimate partners**

C. Key activities to be undertaken by the consultants

1. The consultant shall examine the relevant background literature as regards HIV and AIDS in Ghana; including, policies and operational plans, reports of studies and



interventions for the study population and any other relevant reviews, assessment and evaluations done by national or international organizations in Ghana;

2. Study and examine all tools, guidelines and scientific publications on research in particularly, mapping and size estimation and IBBS among FSWs and their intimate partners to inform preparation of background information and determination of appropriate methodologies for the study
3. Conduct a comprehensive mapping and estimate the population size of FSWs and their intimate partners in Ghana as well as conduct integrated bio-behavioural surveillance survey to determine HIV/STI prevalence among subjects of each of the study communities.
4. Produce a comprehensive report with recommendations to support HIV and AIDS interventions among FSWs and their intimate partners in Ghana

D. Study duration

This study will be carried out over a- 10 months period starting from **November 2018**.

E. Qualifications for the consultant

- A research institution of international repute with inter-disciplinary team of seasoned researchers comprising epidemiologists, Statisticians/biostatisticians, sociologists/ anthropologists, public health specialists, and biomedical scientists. The research institution and each member of the inter-disciplinary team should have a sound track record in similar assignments.
- The international research institute must have local (Ghanaian) partners / collaborators.

F. Conditions for applying

- a. This RFP is not an offer. No legal or other obligation will arise between the WAPCAS and the applying organization to the extent permitted by law. The applying institutions will have no claim against WAPCAS arising out of WAPCAS exercise, or failure to exercise, any rights under this RFP, including any delays to the possible presentation selection process.
- b. No funds will be made available to applying institutions for the preparation of the RFP.



c. WAPCAS makes no warranty or representation, and does not assume any duty of care to organizations that the information in this RFP or any other document provided by WAPCAS or any other person on behalf of the REF is accurate, adequate, suitable or complete, and WAPCAS accepts no responsibility for interpretations placed on the information by institutions. Applying institutions should submit their proposals based on their own investigations and determinations and should not rely solely on the information contained in this RFP or such other documents.

d. Without limiting WAPCAS' other rights under this RFP, WAPCAS reserves the right to cancel, amend, and vary, supplement or replace this RFP at any stage.

e. Notwithstanding any other requirements of this RFP, WAPCAS may require institutions to submit additional information. During the review of proposals, WAPCAS may seek clarification or improvement of proposals. Applying organizations must promptly respond to all requests for clarification or improvement in writing and generally within 7 days.

f. Despite any intellectual property or ownership rights which may apply, WAPCAS will be entitled to retain all proposals and all correspondence and other materials received from institutions.

g. WAPCAS reserves the right to consider a non- conforming submission, irrespective of whether or not the institution has submitted a conforming submission.

h. It is required by policy that the highest standard of ethics is observed during the selection and execution of this contract. In pursuance of this requirement:

1. "corrupt practice" is defined as the offering, giving, receiving, or soliciting of anything of value to influence the action of an official in the selection process or in contract execution; and
2. "fraudulent practice" is defined as misrepresentation of facts in order to influence a selection process or the execution of the contract, including collusive practices among Consultants (prior to or after submission of proposals) designed to establish prices at artificial, non-competitive levels.
3. acting by the appropriate Proposal Review Team, WAPCAS will reject a proposal for award if it determines that the institution (Consultant) recommended for award has engaged in corrupt or fraudulent activities for the contract in question



G. Evaluation criteria for technical proposal

No.	Description of Activity	Appointed Score	Max. Score available	Score
1.	Technical capacity of the institution		10	
	a. 5 or more relevant assignments	10		
	b. 2 to 4 relevant assignments	7.5		
	c. 1 relevant assignment	5		
2.	Adequacy of proposed work plan and methodology in response to the terms of reference		45	
	a. Comments/suggestions on terms of reference	5		
	b. Technical approach & methodology	25		
	c. Organization and staffing schedule	5		
	d. Work plan (activities and duration)	10		
3.	Qualification & competence of 3 key staff for the assignment		45	
	a. PhD with relevant experience	15		
	b. Masters or Professionals with relevant experience	12.5		
	c. Degree with relevant experience	10		
	d. PhD without relevant experience	10		
	e. Masters or Professionals without relevant experience	7.5		
	f. Degree without relevant experience	5		
	Total		100	



GUIDELINES FOR PROPOSAL DEVELOPMENT

1 Technical proposal format/contents:

All proposal must contain the following information written in English. The main text should be submitted in Times New Roman, font size 12.

1. A cover letter, briefly describing the institution, the purpose of the proposal, , duration of the proposed study, , total requested funding, name of the principal investigator and the name and address of the technical or administrative point of contract, who can respond to inquiries regarding the request.

2. The technical proposal is limited to 25-40 single –spaced pages (proposals will not be reviewed if they exceed the started page limit) excluding references and other attachments. The proposal should at least contain the following sections/elements:

a) EXECUTIVE SUMMARY – (1 page including a statement of introduction, aims and objectives, summary of methods, analysis and results presentation and statement of the importance of findings for interventions.

b) BACKGROUND AND RATIONALE FOR THE STUDY (2 pages) -Justification for why the study to be undertaken.

c) AIM AND OBJECTIVES

d) RESEARCH METHODS – Proposed study design and procedures, sample size, sampling, data collection methods and analysis. How you will accomplish the study (include province(s) and target population(s).

- STAFFING PLAN –Describing roles and responsibilities of individuals who will work on the study.
- COLLABORATORS- Describe the local partnership with other organisations and what tasks those other organisations will perform.
- PLANS FOR DISSEMINATING PROJECT RESULTS



- ETHICAL PROCEDURES- Risks, benefits and plans for the protection of human subjects.
- e) STUDY WORK PLAN –A detailed timetable covering all major activities of the study.

2 Financial proposal

The financial proposal shall be a detailed budget in US Dollars with notes and justification on all cost. The budget should be broken down into categories to include: Salaries, rates travel, equipment, supplies/materials contracts, overhead, etc. and should also reflect cost per activity

Budget justification should provide short descriptions to support the budget.

3 Technical capacity of the institution

ORGANISATION'S EXPERIENCE & EXPERTISE (as a separate document not included in 25-40 page limit for the technical proposal). Describe the organizational experience, expertise and capacity in undertaking similar projects, and the key staff involved. Also the financial management capacity and expertise of the organization.

Provide CVs of principal investigator (not more than 5 pages) and 3-page CV of all other investigators. CVs should include relevant experiences and summaries the goals and methods of other studies currently being undertaken or completed in the last 5 years by each investigator. Further details may be asked of the institution after the review.



TERMS OF REFERENCE

The Ghana- West Africa Program to Combat AIDS and STIs (WAPCAS), a Principal Recipient of the Global Fund funding to Ghana (2018- 2020), has received funding for which a part is to be applied to engage a consultant to conduct a Mapping and Population Size Estimate (MPSE) of female sex workers (FSW) and integrated bio-behavioural surveillance survey (IBSS) among FSW and intimate partners, third in the series.

1. BACKGROUND

In Ghana, HIV surveillance is conducted annually among pregnant women attending antenatal clinics in line with the World Health Organization (WHO) and the Joint United Nations Programme on HIV and AIDS (UNAIDS) recommendation on HIV surveillance for generalized epidemics. Ghana's HIV epidemic is described as generalized with the current estimated adult prevalence of 1.6% (GAC, 2016). While this level of HIV prevalence may be relatively low compared to those of other West African countries, results of integrated bio-behavioural surveillance surveys (IBSS) conducted among female sex workers (FSWs) (IBSS 11.1% - 2011; 7% - 2015), and men who have sex with men (MSM) (Men's study 17.5% - 2011, 18% - 2016) have shown HIV prevalence several times higher than that of the general population. The geographical heterogeneity and higher HIV prevalence among key populations underscore the vulnerabilities that have potential to influence rapid expansion of the epidemic in the general population.

The mapping, population size estimation (MPSE) and integrated bio-behavioural surveillance survey (IBSS) among key affected populations (KPs) is a tool of the national disease surveillance system established by the Ghana AIDS Commission to track trends in HIV and AIDS epidemic, monitor progress and evaluate the HIV programme for KPs. These surveys are conducted every three to four years among the various sub-groups of KPs including men who have sex with men (MSM), female sex workers and their intimate partners and prison inmates. Through collaboration with the Global Fund, Centers for Disease Control and Prevention (CDC) and German International Cooperation (GIZ), two surveys have been conducted among each of these groups since 2011. The preparation for the conduct of the third round of the surveys is underway for FSWs and their intimate partners.

Unlike the previous surveys, the third round of the survey among female sex workers (FSWs) will involve IBSS among both FSWs and their intimate partners and MPSE will be exclusive to



FSWs. Funding for the study is being provided by the Global Fund through WAPCAS, NFM II principal recipient for KP programme. GAC will provide coordination and technical oversight pursuant to its mandate.

WAPCAS and the Ghana AIDS Commission are collaborating to carry out the MPSE and IBBSS activities among FSWs and their intimate partners in all the ten regions of Ghana; to measure HIV prevalence, sexually transmitted infections (STI), related risk behaviours and access to prevention and care services among others. The overall approach is based on standardized methods for integrated biological and behavioural surveillance surveys (IBBSS) and MPSE used around the world with adaptations to the Ghanaian context. The survey is intended to generate reliable estimates of HIV prevalence, STI, and related behavioural risks, social, and environmental factors that affect HIV and STI transmission among FSWs and their intimate partners in Ghana; and to estimate the number of FSWs in the country for resource allocation and effective design of policy and programme to meet the health needs of FSWs and their intimate partners.

2. OBJECTIVES OF MPSE AND IBBSS

The study will be implemented in 3 components namely Pre-survey assessment, Pre-Survey Assessment (PSA), Mapping and population size estimation of FSWs, and IBBSS among FSWs and intimate partners. The objectives for the various components are as follows;

2.1. Pre-Survey Assessment (PSA): The objectives are to:

- Refine strategies for accessing and recruiting FSW and intimate partners and develop appropriate sampling strategies for the two groups; and
- Sensitize and build rapport with the local communities, including the target populations;
- Identify potential challenges or safety concerns for the study team and target populations.

The PSA will be conducted through a thorough document review of existing resources (including the 2011 and 2015 IBBS) as well as consultative meetings and key informant interviews (KIIs) with key stakeholders.

2.2. FSW Population Mapping and size estimation: The objectives are to:

- Geographically map all FSW hotspots in all 10 regional capitals towns and cities where FSWs operate for sampling frame development; and
- Generate approximate estimates of FSWs at specific hotspot and sites based on key informant interviews. Mapping will comprise of site visits to FSW hotspots and KIIs with



FSW, business owners, and other gatekeepers/community leaders to characterize each hotspot.

- Estimate the size of FSWs across selected cities and towns and special locations throughout the country. Size estimates will be generated using multiple standard methods of estimation.

2.3. IBBS among FSWs and intimate partners: The specific objectives are to:

- Characterize key behaviors linked to HIV and STI transmission among FSW and their intimate partners;
- Determine the prevalence of HIV and select STIs (Syphilis, HSV-2, HBV, and N. Gonorrhoea) among FSWs and intimate partners
- Assess the coverage of HIV/STI prevention and treatment services for FSWs and intimate partners; and
- Provide recommendations to address gaps in access to critical prevention, treatment, care and support services for FSWs and their intimate partners.

FSW not associated with a fixed site (roamers) will be sampled using time-location cluster sampling (TLCS). FSW associated with a fixed site (seaters) will be sampled using conventional cluster sampling (CCS). Sampling of intimate partners of FSW will be developed as part of the PSA, and submitted for IRB review prior to implementation.

3. SCOPE OF WORK

I. The Contractor shall examine the relevant background literature as regards HIV and AIDS in Ghana; including, policies and operational plans, reports of studies and interventions for the study population and any other relevant reviews, assessment and evaluations done by national or international organizations in Ghana;

II. Study and examine all tools, guidelines and scientific publications on research particularly, on mapping and size estimation and IBBS among FSW to inform preparation of background information and determination of appropriate methodologies for the study;

III. Consult WAPCAS in identifying principal and co-investigators for the study;

IV. Collate necessary institutional review boards (IRB) applications and related documents to guide protocol development;



V. Prepare a comprehensive study protocol covering all the 3 components of the study that meets local and international IRB technical and ethical requirements;

VI. Revise the protocol based on IRB comments and submit same to WAPCAS. The revised protocol should address all IRB comments;

VII. Conduct a comprehensive mapping and estimate the population size of FSW in Ghana as well as conduct integrated bio-behavioural surveillance survey to determine HIV/STI prevalence among subjects of the study communities; and

VIII. Produce a comprehensive report with recommendations to support HIV and AIDS interventions for FSW in Ghana

4. TIME FRAME

This assignment will be carried out over 10 months period

5. DELIVERABLES

- a. Ethical Clearance from the Institutional Review Boards (IRB)
- b. Inception report submitted within fourteen days following the signing of contract
- c. Draft study report within four weeks following completion of field data collection
- d. Power Point Presentation on findings to be presented at the SAC meeting, RM&E committee and other stakeholders for validation.
- g. Final study report within four weeks following the receipt of comments on the draft report from WAPCAS who will collate comments from GAC and other stakeholders.

Proposal Submission:



Interested institutions should submit sealed copies each of technical, financial and capacity proposals in separate envelopes to the address below. Sealed Proposals must be clearly marked: “MAPPING AND POPULATION SIZE ESTIMATION (MPSE) AND INTEGRATED BIO-BEHAVIOURAL SURVEILLANCE SURVEY (IBBSS)”.

A total of **four (4) (one original and three copies)** sealed set of under listed documents in separate envelopes to be submitted to the address below. One of the copies **must be embossed ORIGINAL** with the application letter signed accordingly;

1. Capacity profile of prior experience in similar studies (technical capacity)
2. Technical proposal for the IBBSS
3. Financial proposal for the IBBSS

Address to:

The Executive Director
WAPCAS
Box AT 1010
Achimota

OR

Directly to WAPCAS Head Office not later than 9th November, 2018 at 10:30am GMT, sealed proposals must be clearly marked.

Source for Additional Information:

Interested applicants can make further enquiries by E-mail to: shaabadiaba75@gmail.com or comfort.asamoa@gmail.com .

Call Issue Date: 1st October, 2018