TERMS OF REFERENCE : Health Facility Assessments

UNESCO in partnership with Higher Health is seeking the services of a National Consultant to conduct Health Facility Assessments across 2 higher and tertiary education institutions (HTEIs) in SA.

1. Background and Context

Our Rights, Our Lives, Our Future (O3 Plus) project seeks to ensure that young people in higher and tertiary education institutions (HTEIs) in Eastern and Southern Africa, including South Africa, realize positive health, education and gender equality outcomes through sustained reductions in new HIV infections, unintended pregnancy and sexual and gender-based violence. The project will thus enable them to reach their full educational potential and contribute more effectively to the development of their countries and region as graduates, professionals and young leaders. With support from UNESCO the project is envisaged to implemented across 2 Higher and Tertiary Education institutions (HTEIs) in South Africa in 2022.

Working closely with relevant regional structures, national ministries, higher and tertiary education institutions, Higher Health and key partners, UNESCO will support innovation in access to Life Skills Based Comprehensive Sexuality Education (CSE) and sexual and reproductive health (SRH) services for HTEI students while advocating for policy and practice changes to make campuses safe and inclusive learning environments for students and staff. In doing so, the project will institutionalize health and well-being programs for students while engaging leadership for long-term commitment and sustainability.

The work will be delivered through four complementary pillars or work streams as follows: institutional strengthening for sustainability; student health and well-being; safe and inclusive campus environments; and evidence building and knowledge sharing platform.
Under the student health and wellbeing work stream, UNESCO is commissioning a health facility assessment study across the 2 HTEIs in order to collect comprehensive information on health service delivery for young people in line with existing international youth friendly services (YFS) guidelines and standards, and make recommendations for investments required for the health facilities to be fully functional and deliver services effectively.

2. Scope of the Health Facility Assessments

The Health Facility Assessments (HFAs) will be conducted across 2 HTEIs in South Africa. The Consultant is expected to develop data collection tools in line with the methodology under section 4 below (Methodology), as well as update the existing Facility Observation Tool, which will be provided by UNESCO as necessary.

3. Research Questions

The key research questions to be answered by the Health Facility Assessments (HFAs) are:

1. What are the existing youth friendly health services (YFHS) guidelines, standards and policies in South Africa? How do the guidelines, standards and policies align with international guidelines i.e. WHO Global Standards for Quality Healthcare Services for Adolescents and Youth? Is delivery of health care services at health facilities in tertiary institutions in-line with the guidelines, standards and policies?

2. What type of services are offered at health facilities in HTEIs, and what is the quality of these services as per the existing standards and guidelines? Do the health facilities have the necessary resources i.e. infrastructure, human capacity, financial etc to ensure effective service provision? Are there any guidelines or minimum standards for infrastructure of health facilities in tertiary institutions? Which ministry is responsible for the administration of health facilities in HTEIs? Is there clear ownership and linkages of the health facilities in HTEIs with district, provincial and national level Ministry of Health and Child Care? What are the major sources of funding for the HTEIs?

3. What are the perspectives of health providers on health service delivery for young people in HTEIs? What are perspectives of young people in HTEIs on
the health services provided at the health facilities? What factors enable or hinder young people’s access to health services at the health facilities in HTEIs?

4. How can the health facilities be improved/strengthened to ensure effective health service provision to young people? What resources or capacities are required i.e. infrastructure, equipment, human resources, training etc.?

4. Methodology

The HFAs will use a combination of methods, where primary data collection will be in-person and virtually where feasible. The Consultant is therefore expected to adhere strictly to national guidelines and regulations on COVID19 during in-person data collection.

The proposed data collection methods include, but are not limited to the following:

- **Desk Review** of relevant literature including policies and guidelines such as WHO Global Standards for Quality Healthcare Services for Adolescents and Youth; reports on researches, evaluations, assessments or reviews on youth friendly health service delivery, reports on health facility assessments, as well as relevant government policy, strategy, guidance documents, etc

- **Observation and administration of facility observation checklist/tool** to assess the following: availability of medication, type of equipment, infrastructure etc

- **In-depth interviews** with representatives from Ministry of HTEI, Ministry of Health and Child Care, and CSOs that are active in relation to health and wellbeing in HTEIs, to understand more about the ownership of HTEI health facilities; any existing guidelines or minimum standards for infrastructure of health facilities in tertiary institutions; funding from both Treasury and the ministries, key barriers/challenges to service provisions, and recommendations for strengthening health service provision for young people in health facilities in tertiary institutions

- **In-depth interviews** with health care service providers at the health facilities to examine operational realities, assess service provision and capacity related issues; examine perspectives on health service delivery for young people, and identify areas for improvement to strengthen service provision
Focus Group Discussions with young people, including young people with disabilities, HIV and from the LGBTIQ community, to assess knowledge and use of services; determine factors that enable or hinder access to the health services; examine expectations in relation to delivery of services at the health facilities, and recommendations for improvement.

In-depth interviews with young people, including young people with disability, HIV and from the LGBTIQ community, who have used the health facility to assess knowledge and use of services, examine experiences, and satisfaction with services received. Emphasis will be on young people who would have immediately used the health facility (client exit interviews).

Table 1 below shows the research questions and the corresponding data collection methods:

<table>
<thead>
<tr>
<th>Number</th>
<th>Research Question and Sub-questions</th>
<th>Methods</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>What are the existing adolescent and youth friendly health services (AYFHS) guidelines, standards and policies in South Africa? How do the guidelines, standards and policies align with international guidelines i.e. WHO Global Standards for Quality Healthcare Services for Adolescents and Youth? Is delivery of health care services at the tertiary institutions’ health facilities in-line with the guidelines, standards and policies?</td>
<td>Desk review; Observation checklist; In-depth interviews with representatives from Department of Higher Education and Training (DHET) and Department of Health (DOH) and Civil Society Organizations (CSOs) working in the HTEIs; In-depth interviews with health care service providers</td>
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<td>2.</td>
<td>What type of services are offered at health facilities in HTEIs, and what is the quality of these services as per the existing standards and guidelines? Do the health facilities have the necessary resources i.e. infrastructure, human capacity, financial etc to ensure</td>
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<td>representatives from DHET, DOH, CSOs etc</td>
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<td>3.</td>
<td><strong>What are the perspectives of health providers on health service delivery for young people in HTEIs? What are perspectives of young people in HTEIs on the health services provided at the health facilities? What factors enable or hinder young people’s access to health services at the health facilities in HTEIs?</strong></td>
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<td><strong>How can the health facilities be improved/strengthened to ensure effective health service provision to young people? What resources or capacities are required i.e. equipment, human resources, training etc.?</strong></td>
<td>In-depth interviews with representatives from DHET, DOH, CSOs etc; In-depth interviews with health care service providers; Focus Group Discussions with young people</td>
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**5. Ethical Clearance**

The Consultant is expected to obtain ethical clearance from relevant authorities prior to commencement of data collection. Costs related to the ethical clearance are the responsibility of the Consultant.
6. Duration

It is expected that the Health Facility Assessments will be conducted for an estimated duration of 8 weeks post contractual agreement with the appointed Consultant.

7. Deliverables

The deliverables are as follows:

- **Research Protocol** which will be submitted to UNESCO and Higher Health 7 days after the inception meeting. The research protocol will outline in detail, the research questions; methodology; data collection tools, data management and analysis plan, data quality assurance plan, ethical considerations, etc.

- **Draft report** which will be submitted to UNESCO and Higher Health 6 weeks post inception meeting. The report will also be presented to UNESCO and key stakeholders by the Consultant, at a virtual validation workshop of which the date will be agreed. The Consultant will facilitate this workshop which will be aimed at discussing preliminary findings and conclusions.

- **A final report**, which incorporates comments from the validation workshops, will be submitted to UNESCO and Higher Health a week post the validation workshop. The proposed structure for the report is as follows:
  
  o Executive Summary
  o Project description
  o Objectives and Research questions
  o Methodology
  o Findings
  o Recommendations and conclusions
  o Annexes

- A **PowerPoint presentation** summarising the contents of the final report will be submitted to UNESCO and Higher Health together with the final report.

Table 1 below shows the expected deliverables and corresponding timeframes:

<table>
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<tr>
<th>Task/Activity</th>
<th>Deliverable</th>
<th>Indicative number of days</th>
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<tbody>
<tr>
<td>Briefing/Inception meeting with UNESCO and Higher Health, representatives from participating HTEIs and other key</td>
<td>Research Protocol</td>
<td>1 week post inception meeting</td>
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</table>
stakeholders including DHET, DOH, CSOs and development partners working in HTEIs on health and well-being etc; desk review, development of data collection tools, including revision of Facility Observation Tool

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<tr>
<th>Data collection, analysis and compilation of draft report</th>
<th>Draft report structured as follows:</th>
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<tbody>
<tr>
<td></td>
<td>- Executive Summary</td>
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<td>- Annexes</td>
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<th>Validation workshop where the Consultant will present findings to UNESCO and wide range of stakeholders etc</th>
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</table>

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<tr>
<th>Submission of Revised draft report to incorporate comments/feedback from the validation workshops</th>
<th>Final report with annexes. PowerPoint presentation summarising contents of the final report</th>
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8. Required Expertise and Qualifications

National Consultant

- Master's Degree in any of the following fields: Public Health, Social Sciences, or other related studies; a PhD will be an added advantage
- At least five years’ experience working in the field of adolescents and young people’s Sexual and Reproductive Health and Rights (SRHR) programmes within the ESA region including South Africa with a portfolio of evidence.
- Experience conducting participatory, qualitative assessments, supported by at least 3 references
• Experience conducting health facility assessments, supported by at least 2 references within the country or region
• Registered Company for at least 5 years in the South Africa or ESA Region and with an affiliation in South Africa.

Desirable
• Previous experience working with the UN on similar or related assignments
• Previous experience in working with HTEIs on related work.

Lead Research Assistant
Mandatory
• Bachelor’s Degree in any of the following fields: Public Health, Social Sciences, or other related studies; a Master’s Degree will be an added advantage
• Aged between 22 and 35 years
• At least two years’ experience working/ volunteering in the field of adolescents and young people’s Sexual and Reproductive Health and Rights (SRHR) programmes
• Experience in conducting participatory, qualitative assessments supported by at least 2 references

Desirable
• Previous experience working with the UN on similar or related assignments
• Previous experience working in HTEIs or other similar institutions

9. Evaluation of proposals

All interested Consultants are required to submit a Technical and Financial proposal separately via email. The technical proposal should be no more than 10 pages, and will be assessed on the following:

• Approach to assignment that demonstrates extent to which the Consultant understands the requirements as set out in TOR
• Feasible and technically sound methodology
• Realistic work plan with specific treatment of key deliverables and priorities, and distribution of tasks among team members
• Expertise, experience and qualifications of the Team leader

The financial proposal should be no more than 4 pages and should detail the following:

• An appropriate Price Schedule which includes, as a minimum, the consultancy rate per day, and number of workdays per main activity in order to assist the Contracting Unit to determine, which items may be negotiated, if applicable, or which items can be modified as per the budget. All prices shall be quoted in US dollars.

10. Management

The Consultant will report to UNESCO National Programme Officer, Higher Health under the overall leadership and guidance of the Regional Project Officer for ESA region (EDHW).

The Consultant will be responsible for costs related to ethical clearance; overheads and logistical requirements such as office space, administrative and secretarial support, telecommunications, and printing of documentation.

All deliverables will be prepared in English.

11. Submission of proposal

Interested Consultants to submit technical and financial proposals separately via email to vacancies.harare@unesco.org by 26 August 2022