

**SOUL CITY INSTITUTE: MEDIA ADVOCACY FOR THE CAMPAIGN OF ACCELERATED REDUCTION OF  
MATERNAL AND CHILD MORTALITY (CARMMA)**

**AUGUST 2014**

**TERMS OF REFERENCE**

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**1. CONTRACTING AUTHORITY**

Soul City Institute for Health & Development Communication.

**2. DURATION OF THE CONTRACT AND DELIVERY DATE**

This contract is for the provision of media advocacy to support Soul City Institute's Campaign of Accelerated Reduction of Maternal and Child Mortality in Africa (CARMMA). The scope includes stimulating debate on the topic and lobbying for policy change that will contribute to a reduction in our maternal and child deaths in South Africa. The contract will be effective for four months from approximately 1 October 2014.

**3. RELEVANT BACKGROUND**

Soul City's believes that society, communities and individuals have a right to live their best lives in an environment that is safe, supportive and sustainable. To support this frame of mind, the Advocacy Unit promotes a healthy public policy through changing policy and stimulating public debate in the media on Maternal and Child Health (MCH) issues through advocacy campaigns that bring about social change.

The Soul City Institute for Health and Development Communication (SCI) has been delivering advocacy campaigns for 20 years, leading the way in promoting healthy public policies through media advocacy linked with campaign programmes. SCI has two decades of experience in the field of social change.

CARMMA is one of the most embraced initiatives in place in South Africa (since 2012) to reduce maternal and child mortality. It was launched by the African Union Commission (AUC) and UNFPA. Soul City sees CARMMA as a vital campaign to support and be involved in.

It is estimated that in South Africa for every 100 000 live births in 2012, 310 mothers die. With one million live births per year in South Africa, this means 3100 mothers will die during pregnancy, in labour or shortly after giving birth. This maternal death rate is unacceptable considering the resources that South Africa has.

Furthermore, children deaths in South Africa are estimated as follows; Under-5 mortality rate (U5MR) = 41 per 1 000 live births, Infant mortality rate (IMR) = 27 per 1 000 live births and Newborn mortality rate (<28 days) =12 per 1 000 live births. These rates are very high and need to be reduced with immediate action.

Preventable factors that cause maternal deaths are divided into three delay categories; 1) delay in deciding to seek care by the individual and/or family – User factors; 2) delay in reaching an adequate health care facility – service accessibility; and 3) delay in receiving adequate care at the facility – quality of medical care.

Recommendations we have as Soul City to reduce maternal and child deaths in South Africa include that;

- A transport plan be developed and approved for every pregnant woman. The clinic committee and community based monitors oversee such that women who visit a health care facility for antenatal care arrive there on time. This plan can either be in form of private family organised transport or the provision of transport vouchers / or a list of transport providers who have been trained and are willing to transport women during labour,
- Extension of the child support grant to include the pregnancy period, and

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- Constructions of maternity waiting homes in areas where health care facilities are very far away.
- Cell phone airtime vouchers for pregnant women

**4. SOUL CITY'S CARMMA**

The objective of the brief is to provide media advocacy services to support Soul City Institute's maternal and child health campaign. This includes stimulating public debate on the topic and lobbying for policy change that will contribute to a reduction in our maternal and child deaths in South Africa. The campaign should target the media, influencers and policy makers in the country, and stimulate public debate on maternal and child health. The media advocacy proposal should be attractive with a potential to stimulate social change on maternal and child health issues.

Principles underlying the activities include:

- Innovation;
- Participation;
- Evidence informed;
- Partnerships building;
- Strong and courageous media leadership

SCI's media advocacy brief model is to stimulate public debate on the maternal and child health and lobby for policy change that will contribute to a reduction in our maternal and child deaths.

**5. Brief**

This tender is to conceptualise, and produce a media advocacy campaign brief for maternal and child health.

The target audience is target media people, public influencers and policy makers in the country.

The proposal should not be longer than 4 pages and should contain:

1. Concept
2. Slogan
3. Team involved in the brief
4. Experience with health campaigns
5. Experience in media advocacy
6. High level budget
7. Possible time frames