

PROCESS EVALUATION OF RISE AND SOUL BUDDYZ CLUB AS IMPLEMENTED IN THE GLOBAL FUND GRANT 2016-2019 BRIEF.

1. BACKGROUND

Young Women and Girls Programme

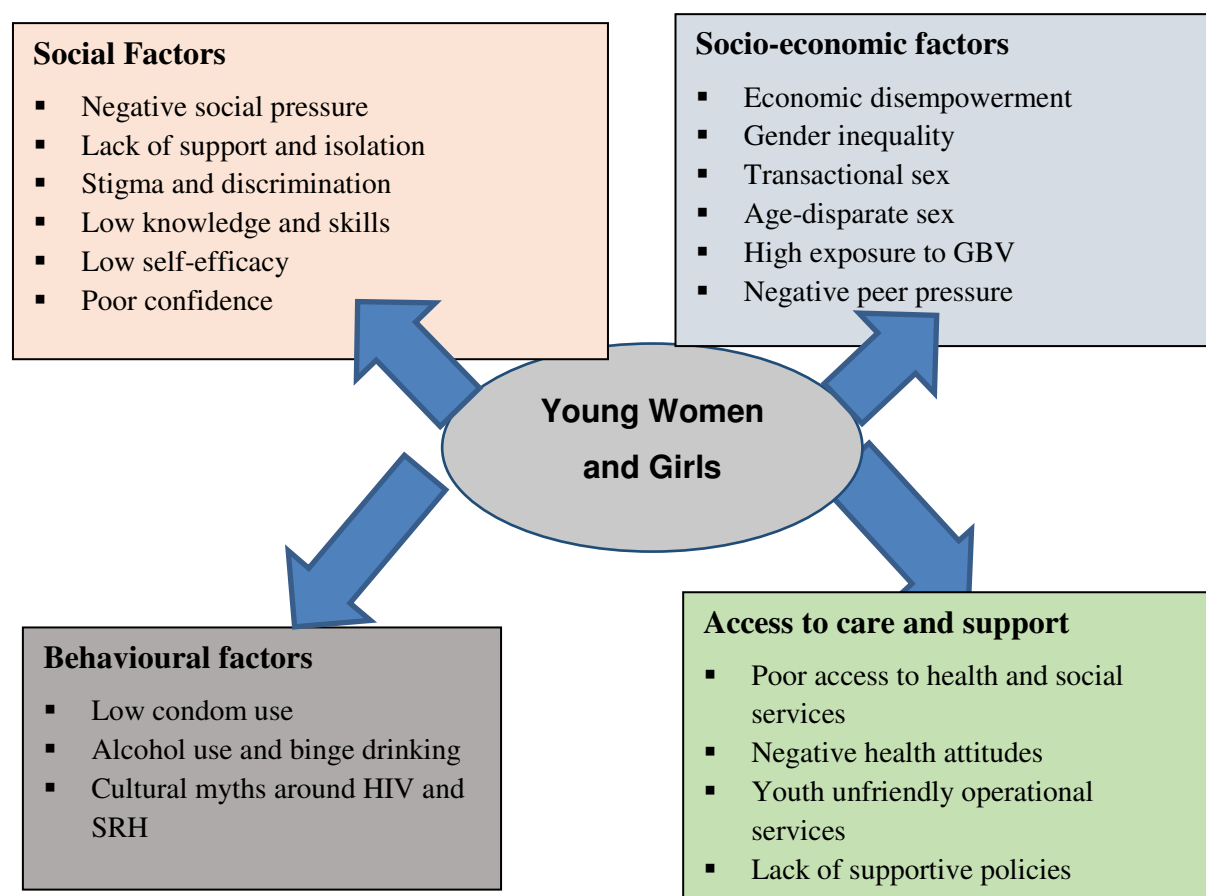
At an aggregate level, global HIV incidence has shown a decline over the last decade. Whilst this achievement is important, granular analysis of epidemics across the world have shown an increase in risk and burden amongst some population groups, which are known as key populations. These key populations are at a high risk of HIV acquisition and transmission and represent a major share of the global HIV epidemic and influence the epidemic dynamics and play a role in determining the nature and effectiveness of the response.

The World Health Organisation (WHO) defines key populations as groups, who due to specific high risk behaviours, are at increased risk of HIV infection, irrespective of the epidemic type or local context. This disproportionate burden is a result of specific behaviours common to them and structural barriers that prevent their link to HIV prevention and care services. Inadequate coverage and poor quality of service for key populations further undermine the response to HIV, making HIV programming a key public health and equity consideration in these groups.

Although South Africa has a generalised epidemic, key populations continue to be affected disproportionately. The Human Science Research Council (HSRC) survey in 2012 reported that young women and girls between the ages of 15-24 years accounted for almost a quarter of all new infections and were 4 times more likely to be infected by HIV than their male peers (HSRC 2012). Adolescent girls have an HIV prevalence of 5.6%, which is eight times higher than their male counterparts at 0.7%. Further, South Africa is home to 15% of all adolescents living with HIV globally, with 320,000 10-19-year olds living with the virus. Among young women aged 20-24, HIV prevalence is 17.4%, three and a half times greater than young men in that same age bracket (5.1%). Until their 50s, women in all age brackets are disproportionately affected by HIV, though the gap is especially prominent for those 15-24, and particularly for adolescents. Moreover, while HIV incidence is falling among the general population in South Africa, HSRC estimates that incidence has only marginally decreased among females aged 15-49 and 15-24. The HSRC estimates on HIV incidence show that almost a quarter of all new infections occur amongst young women age 15-24 and about 81% of all incident cases in their age cohort.

Similarly, young women and girls are also at risk through high risk behaviours such as transactional and age disparate sex, and as victims of gender based violence (GBV) and poor social support structures. Complex psychosocial and socio-economic factors and poor access to and uptake of services increase their vulnerability and risk. Policy barriers and negative attitudes of health workers further limit their access to HIV and SRH services. They often face stigma and discrimination and as a result, many adolescents are reluctant to attend diagnostic and treatment services. Consequently, they remain hidden from many essential health interventions, further perpetuating their exclusion.

Figure 1: Factors contributing to vulnerability of young women and girls



The Global Fund (GF) Programme for Young Women and Girls (YW&G) is an intensive, comprehensive HIV prevention intervention that aims to use a combination prevention approach to reduce new HIV infections among YW&G. It is one of the programmes that aims to contribute to the South African national government’s target of reducing HIV incidence by 50% over two years. The intervention will be implemented in ten South African districts which have been purposively selected as they include some of the most vulnerable YW&G in the country, with the highest HIV incidence. Sub-districts within priority districts were selected based on population numbers, HIV prevalence, level of teen pregnancy and the level of GBV and poverty. The focus of the grant is to saturate each sub-district with the relevant HIV prevention interventions. The intervention comprises a comprehensive package of health, education and support services for boys (10 to 14 years) and young women and adolescent girls (aged 10-24 years), in and out of school, within the ten districts. This combination prevention approach provides a supportive system for young girls, promoting agency, resilience and building their social capital.

There are five Principal Recipients (PRs) responsible for the “Young Women and Girls” Programme. These include Soul City Institute (SCI); Networking HIV/AIDS Community of South Africa (NACOSA); Kheth’Impilo (KI); Western Cape Department of Health (WCDoH) and KwaZulu-Natal Treasury (KZN). Collectively the PRs cover 10 districts as follows:

Province	District	Sub-districts, wards or areas for intervention#	Principal Recipient of Global Funding	Sub Recipients
KwaZulu-Natal	Uthungulu	Abaqulusi Nongoma	KwaZulu-Natal Treasury	Mpilonhle NGO

	Zululand	Abaqulusi Nongoma	NACOSA	Humana Childline South Africa MIET Africa
Mpumalanga	Ehlanzeni	Bushbuckridge Mbombela Nkomazi		Childline Mpumalanga GRIP MIET Africa
	Gert Sibande	Albert Luthuli		Childline Mpumalanga Humana MIET Africa
Limpopo	Greater Sekhukhune	Greater Tubatse		Humana Childline South Africa MIET Africa Zakheni
North West	Bojanala	Moses Kotane, Moretele, Rustenburg Madibeng	Soul City Institute	Positive Womens Network Show Me Your Number
Gauteng	Tshwane	Winterveld, Hammanskraal Garankuwa Olievenhoutbos Mamelodi East Bronkhorspruit		Childline Blueberry Institute Zakheni
Eastern Cape	O.R. Tambo	King Sabata	Kheth'impilo	Small Projects Foundation (SPF)
	Nelson Mandela Bay	Region A		Kheth'impilo
Western Cape	City of Cape Town	Klipfontein/Mitchells Plain	Western Cape Department of Health	Desmond Tutu Foundation

Each PR is responsible for appointing Sub-Recipients (SR) in their respective districts to implement the full package.

The following process evaluation will focus on the Soul Buddyz Club and Rise clubs.

Soul Buddyz Club

The Soul Buddyz Club (SBC) programme is a movement of young children supported by volunteer teachers (facilitators). The Clubs are primary school based and have 25 members per Club, with approximately 60% girls. The Clubs work together to create a platform that gives voice to and promotes real community action for and by children towards their health and wellbeing, with a large focus on HIV/AIDS and the promotion of positive gender norms. Clubs meet about week and undertake activities and projects guided by materials provided by SCI (Unit Guides, Zone Magazines and posters). The SBC facilitators impart knowledge and help to develop skills amongst the club members to enable them to make healthy and safe choices. In addition, they create an environment of ongoing learning with peer support and help mobilise children and build agency to tackle issues affecting them in their school

and communities. A number of studies have shown that the SBC build resilience in children and have in the long term been protective of girls acquiring HIV later in life.

Rise Young Women's Clubs

The Rise Young Women's programme recognises the feminisation of the HIV epidemic and seeks to understand local level gender specific risk factors and empower young women to address them. The clubs comprise of young women and girls aged 15 to 24 years, who meet regularly to discuss issues that affect them and share their experiences and learnings. Some of the clubs are based in high schools where they are part of an initiative to keep girls in school. The clubs aim to build the resilience of young women and link them to biomedical services such as HTS, PMTCT, ART, modern contraception and other sexual reproductive health services. By following an evidence based curriculum, clubs members are also equipped with skills to deal with socio-economic factors that increase young women's vulnerability, such as intergenerational and transactional sex. The clubs also link young women to educational and economic opportunities through TVET colleges (former FETs) and local microenterprise development organisations. In addition, young women support each other to navigate socio-cultural drivers of risky sexual behaviour.

2. PURPOSE OF THE EVALUATION:

The purpose of the evaluation is to:

- Verify that the objectives of the programmes are being met or are on track
- Assess the quality of implementation of the programmes and report on improvements that can be made to quality
- Assess the appropriateness and feasibility of the SBC and RYWC Club apps
- Assess the sustainability of the clubs, with a particular focus on RYWC
- Document different implementation methods and the impact thereof
- Suggest ways that might inform scale-up
- Assess whether there are any unintended outcomes

3. KEY RESEARCH QUESTIONS:

This evaluation seeks to answer the following questions:

1. What is the ideal implementation model for the programmes?
2. Where are the gaps between program design and delivery?
3. What are the best practices in the programme?
4. What are the enablers and barriers to optimum delivery of the programme?

The following will be considered in looking at aspects of the program to evaluate:

- *Who*: The program Principal recipients (PR's), sub recipients (SR's), YW&G, Field workers, mentors, SBC facilitators, Principals, Children.
- *What*: Activities/steps of the program, behaviours, materials, budget
- *When*: Frequency and length of the contact, coverage of the curriculum, activities
- *Where*: The community context and physical setting
- *How*: Strategies for operating the program or intervention

In addition the evaluation will look at the following components:

1. Establishment and registration of the club (paper and electronic processes)
2. Training of PR's SR's (by SCI and PR's)
3. Membership of the club - Are the clubs reaching the most vulnerable? (at risk)
4. Recruitment strategies
5. Materials for clubs
6. Retention strategies and their impact
7. Program activities

8. Interaction with others programmes / CBO's etc.
9. Data: Collection (using the app vs. paper based tools), flow, tools, successes and challenges
10. Allocation and use of resources
11. Sustainability

The report must include recommendations and lessons learnt.

4. METHODOLOGY

The evaluation should adopt a mixed methods approach, utilising both qualitative and quantitative methods. However, the applicant should propose a suitable, robust research design and data collection methods to effectively address the evaluation objectives and questions. The approach should allow reflection on what is working well, for whom, under what circumstances and how to address challenges.

Data collection could include, but is not limited to: site visits to clubs in all 10 districts, observations, individual level semi-structured interviews, focus groups, analysis of secondary data housed in the Goldmine database. Desktop reviews will be necessary.

5. EXPERIENCE

The applicants must have both qualitative and quantitative research experience. Knowledge of social and behaviour change programmes particularly HIV prevention programmes and proven expertise in process evaluation.

The appointed applicant(s) (including the organisation /firm) is required to possess the following skills and experience, which should be clearly reflected in the proposal:

- Extensive evaluation experience, particularly in South Africa and in undertaking similar evaluations;
- Evaluation design and research skills, including statistical sampling expertise;
- Programmatic and / or evaluation experience in HIV/AIDS (e.g. HIV prevention programmes);
- Experience in employing both qualitative and quantitative data collection methods, including participatory evaluation techniques. Noting the sensitivities in conducting research with children, applicants should demonstrate appropriate experience and skills within the team or how they will consider/prepare to minimise harm and maximise benefits to respondents;
- Good project and people management skills and the ability to deliver within time frames as reflected in the work plan; and
- Excellent writing skills in English.

6. BUDGET

The financial proposal will be considered once the technical proposal is assessed.

7. TIME FRAME

The study needs to begin in July 2017 and continue until the 3rd quarter of year 3. Reports will be expected every 6 months (December 2017 and June 2018, with the final report due on the 15th January 2019).

8. PROCUREMENT COMPLIANCE: SPECIFIC REQUIREMENTS FOR TENDER SUBMISSION

All tenderers need to provide us with the following and the Tender Dossier will be available on the Soul City Website www.soulcity.org.za

A. TECHNICAL OFFER

- i. Answer to Terms of Reference (ToR)
- ii. Provide a payment schedule
- iii. Where applicable, a valid B-BBEE rating certificate with a rating of at least 4. Ratings higher than 4 will be an advantage.
- iv. Background information on your company including your experience related to the required specifications
- v. Company information (document provided – Annexure C, Tender Dossier)
- vi. Declaration Form (document provided – Annexure B, Tender Dossier)
- vii. Certificate of incorporation for your organisation
- viii. OFFER TO BE PUT IN A SEPARATE SEALED ENVELOPE MARKED Technical offer and name of the company.

B. FINANCIAL OFFER

- i. Please provide a detailed budget
- ii. Audited Financial Statements (if applicable: company or firm/organisation)
- iii. OFFER TO BE PUT IN A SEPARATE SEALED ENVELOPE MARKED Financial offer and name of the company.

9. SUMMARY DESCRIPTION OF REQUIRED DOCUMENTATION

- 1 outer envelope
 - Technical offer envelope - A
 - 1 Financial offer envelope - B
- Set of Original documents
- 5 Sets of copies of all documents
- Response to Terms of Reference
- Company Background Information, including relevant experience that relates to this tender
- Company Information
- Declaration Form
- Certificate of incorporation
- Valid B-BBEE certificate
- Tax Clearance Certificate
- A separate electronic copy (where possible), to be emailed by due date.

IF ANY OF THE ABOVE MENTIONED CONDITIONS ARE NOT MET AND/OR ANY OF THE REQUESTED DOCUMENTS ARE NOT SUBMITTED AS PRESCRIBED, THE TENDER EVALUATION COMMITTEE SHALL HAVE DISCRETION TO DISQUALIFY THE TENDERER'S BID

10. DELIVERY DETAILS FOR PROPOSALS

Interested applicants must send in their submissions to Soul City **By 15:00 GMT 15 June 2017.**

Hand delivered or posted at the following address

**First Floor - Dunkeld West Centre
281 Jan Smuts Avenue
(Cnr. Bompas Road)
Dunkeld West
Johannesburg
South Africa**