



THE REPUBLIC OF UGANDA

MINISTRY OF WORKS AND TRANSPORT

ANNEX B: STATEMENT OF REQUIREMENTS

TERMS OF REFERENCE FOR PRE-QUALIFICATION OF CONSULTANCY FIRMS (NOMINATED SERVICE PROVIDERS) TO UNDERTAKE AWARENESS CREATION, PREVENTION OF HIV/AIDS AND TB, PROMOTION OF GENDER INCLUSION AND MONITORING, MITIGATION OF GBV AND VAC, COMMUNITY AND OCCUPATIONAL SAFETY AND HEALTH AND OTHER SAFEGUARD

Ministry of Works and Transport MoWT is responsible for managing, maintaining and developing the national road network across Uganda. Based on lessons learnt on the link between infrastructural projects and the Social Safeguards risks, MoWT implements Safeguards program on all ongoing infrastructural projects to mitigate against social risks among the project workers and host communities.

The program encompasses the following components;

- a) HIV/AIDS and TB awareness and control among the workforce and communities;
- b) Gender mainstreaming and prevention of Gender Based Violence;
- c) Child Care and Protection;
- d) Community and Occupational, Health and Safety;
- e) Other safeguard risks include Malaria, Hepatitis B.; and
- f) Others social emergencies that may come up based on the nature of the project.

As part of the implementation initiatives, MoWT engages service providers to plan and manage the program on the ongoing infrastructural projects. The ministry nominates Employer's Nominated Service Providers (NSP) to plan and manage HIV/AIDS program and Gender monitoring on ongoing projects.

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In line with this, MoWT wishes to undertake the pre-qualification process to generate a short-list of pre-qualified firms from which the Employer's service providers will be selected and recommended to the Civil Works Contractor of roads and Bridges projects for the service provision under the program.

Qualification of the Firms

- a) General Experience: The bidder must have at least 3 years' experience for Awareness Creation, Prevention of HIV/AIDS and TB, Gender, GBV, VAC, Community and occupational safety and Health and other safeguard risks for the last 3 years prior to Bid Submission.
- b) Specific Experience: Provide evidence of at least 2 similar assignments in undertaking Awareness Creation, Prevention of HIV/AIDS and TB, Gender, GBV, VAC, Community and occupational safety and Health and other safeguard risks for road projects or similar infrastructure projects in Uganda.

The program components are detailed as below;

1.1 HIV/AIDS and TB Awareness and Control among the Workforce and Communities

The road transport sector has shown to be a major vector for the HIV/AIDS and TB and other sexually transmitted infections (STIs), in both construction and operations. More roads and more transport mean more people travel, and therefore can spread HIV/AIDS and STIs further and faster. Transport can connect areas of high and low prevalence. Building of transport and other infrastructure often involves mobility of construction workers, engineers and communities. This brings people into situations which increase their vulnerability to HIV transmission; a vulnerability that is particularly acute in areas of high poverty. However, road projects also provide an opportunity for focused education to both the workforce and the local community of the dangers of HIV/AIDS and methods to reduce the risk of infection.

1.2 Gender mainstreaming and prevention of Gender – Based Violence (GBV) including Sexual Exploitation and Abuse (SEA).

The consideration of gender in the transport sector is essential to ensure that transport is equitable, affordable and that it provides access to resources and opportunities required for development. As much as possible, positive impacts through increased employment and economic opportunities for women as well as men should be encouraged. Negative affects women and girls such as inequitable resettlement compensation for lost livelihoods, sexual exploitation and abuse, sexual harassment potential increase in human trafficking and the

transmission of HIV should be mitigated. Cultural acceptance and personal safety are also major concerns for women in relation to accessing and using transport.

Successful mainstreaming of gender in transport will require the removal of institutional and physical barriers and the enhancement of incentives to increase accessibility to work and transport opportunities for women. The Nominated Service Provider (NSP) will identify such barriers and design strategies for increasing women access to road construction opportunities as relevant to the project. Intervention tools may include:

- Good understanding of relevant macro and sector policies & legislation
- Gender analysis linked to the project cycle, project activities and outputs
- Use of participatory and social/gender analysis tools
- Undertake gender analysis
- Collect gender disaggregated data (baseline, and evaluation studies) to establish travel patterns of men and women
- Develop monitoring and evaluation framework

The following are some of the strategies that could be considered:

- Economic empowerment through participation in construction of road and bridge projects as well as other related activities e.g. supply of required services like food water etc
- Removing access barriers during construction, because they may affect more on women.
- Improving urban road safety and security by consulting women in proposed design features (this could relate to road safety issues or other road furniture).
- Gender Based Violence (GBV) including Sexual Exploitation and Abuse (SEA) and Sexual Harassment are among the major social risks on infrastructural projects. These can manifest in form of;
- Emotional abuse (insults, controlling behaviour, threats of job loss, refusal to sign time sheets and or cancellation of hours/days worked, humiliation and degrading treatment) to female project workers
- Physical violence such as slapping or the use of weapons
- Sexual violence, which includes any form of non-consensual sex including rape;
- Demands for sexual favours in exchange of job opportunities or other entitled project related benefits
- Denial of job opportunities for which individuals are qualified on grounds of refusal of sexual advances

Whereas the above violence occurs within a workplace setting, violence that occurs within the community can at times involve project workers in which case it becomes a responsibility for

MoWT to protect the victims. GBV/VAC in the community setting manifests in the following forms:

- Economic abuse and the denial of resources, services, and opportunities (such as restricting access to financial, health, educational, or other resources with the purpose of controlling or subjugating the individual;
- Acts of physical violence perpetrated by a spouse/partner
- Intimate Partner Violence (IPV) acts of violence perpetrated by a partner.
- All projects are required to put in place procedures for preventing and responding to these risks including managing associated grievances.

1.3 Child care and protection

The aim is to ensure children are safe and protected from harm and exploitation. Both in and out of school children who are below 18 years as per Ugandan laws should be protected. During road construction children may face the following risks:

- Risk of abuse and exploitation through child labour and sexual abuse of minors by project workers including contractors, sub-contractors and service suppliers.
- The temporary or permanent acquisition of land and displacement can directly affect children through the loss of homes, the disruption or loss of livelihoods, and disrupted access to schools and medical facilities.
- The in-migration / population influx may cause or escalate sexual abuse and exploitation of children (including defilement, prostitution and trafficking); early/forced marriages, teenage pregnancies and the spread of communicable diseases.
- When companies transport materials by truck, the abuse and exploitation of children along transport routes can increase.
- The potential increase in alcoholism, drug use and crime that increase levels of family and community-based violence and neglect.
- Safety of children on the road during and after construction

1.4 Community and Occupation Health and Safety

The leading cause of public roadside work injuries and fatalities is exposure to construction hazards and construction vehicles and equipment, unprotected excavations, lack of warning systems on diversions and narrow roads, horse play in construction area etc. Workers operating

construction equipment are most likely to be injured by collisions or overturning equipment and other construction hazards. The purpose of this component of the project is to sensitise workers and the community about the roles and responsibilities in preventing such occurrences to both construction workers and the community. Strategies will include the promotion of the use of PPE for workers, sensitization and of different parties awareness of the construction hazards, controls and road safety culture to the community.

1.5 Other safeguards risks

The other safeguards risks will include malaria and other health outbreaks like Ebola, Mpox etc,

1.6 Objectives of the program

1.6.1 Overall Objective of the program

The overall objective of the program is to provide services for designing and implementing a program for project workers and communities on awareness creation and management of HIV/AIDS, promotion of Gender inclusion, mitigation of Gender-Based Violence, Child Protection, Community and Occupational Health and Safety and other Safeguard risks associated with infrastructural projects. This will include identification, prevention and response services for the target population at risk that is; project workers and communities.

1.6.2 Specific Objectives of the program

The specific objectives of the program for awareness creation and management of HIV/AIDS, Gender mainstreaming, mitigation of Gender-Based Violence, Child Protection, Community and Occupational Health and Safety and other Safeguard Risks associated with road and bridge development projects are;

- a) To increase awareness of HIV/AIDS and TB /GBV/VAC and community and OSH risks among the target population (road workers and host communities)
- b) To enhance timely identification, management and reporting of HIV/AIDS, GBV, VAC and OSH incidents within the project areas for effective response with relevant actors
- c) Provide support to victims of GBV/SEA/VAC working with other stakeholders in the referral pathways

1.7 Key Interventions of the program

The key interventions to deliver a comprehensive a HIV/AIDS, GBV, VAC and OSH on MoWT projects include: -

- a) Review existing documents on a project that include but not limited to, **ESIA, RAP, contractor's workplace polices on: HIV/AIDS, Child Protection, Gender Based Violence, VAC, OSH and Code of Conduct** with a view of understanding prevailing social risks in the project area and proposed mitigation measures.
- b) **Develop Management Plans for HIV/AIDS, Child Protection, Gender Based Violence and VAC**
- c) **Undertake Baseline Assessment** of conditions in the project area with respect to HIV/AIDS, gender (including GBV) child protection and community and health and safety issues and disseminate the findings to the stakeholders in the project area.
- d) Development of a **Monitoring Evaluation and Learning Framework** for the HIV/AIDS, Child Protection and Gender Based Violence (GBV) and OSH Programme
- e) **Design and implementation of HIV/AIDS, GBV, VAC and OSH awareness and mitigation programme** in the contractor workforce and project affected communities (including schools) and provision of all associated materials such as condoms, HIV testing kits, information posters and leaflets.
- f) The NSP shall staff and operate a **HIV/AIDS and TB clinic** on site for contractor personnel. The clinic shall also be used for general First Aid. It shall not be the service provider's responsibility to equip or stock this clinic for anything other than the requirements of the *HIV/AIDS and sexual health programme, but the fully qualified nurse that shall be provided by the Service Provider shall be expected to work full time and to provide essential First Aid services to the contractor's personnel (in addition to HIV/AIDS testing services).*
- g) **Provide support to the Construction Supervision Consultants Sociologist** in sensitising communities on potential project impacts – this may include wider issues of contractor-community relations and project works.
- h) Sensitize contractor's, and Consultant's staff and communities on HIV/AIDS and TB, GBV, VAC and Occupational Health and Safety and other safeguard risks including Malaria and TB in the project area
- i) Road safety awareness programs for both workers and communities shall also be formulated and conducted.
- j) Undertake activities that increase gender awareness and equity in project implementation.
- k) Undertake activities that promote child protection.

- l) Identify and support locally existing structures to assist in programme implementation and to enhance sustainability of the program output/ outcome

Task description with performance indicators and expected outcome

		indicators	
Task 1	Review of Contractor's policies; HIV/AIDS Workplace Policy, Child Protection policy, Policies on Protection against Sexual Exploitation, Gender Based Violence, Malaria, TB and Hepatitis B and Code of Conduct Policy .		
	The NSP is required to review contractor's policies in line with existing National guidelines for the components of the assignment. Indicate the outcome of the reviews and provide guidance. There should be evidence of NSP's guidance and support to improve policies.		Review comments
Task 2	Preparation and approval of the NSP's reports		
a	Preparation and approval of the inception report to demonstrate the understanding of the assignment, scope of work and methodology.		
	The NSP will ensure the inception report is prepared and approved The NSP should be of standard quality demonstrating clear understanding of the assignment, methodology and monitoring framework for the assignment Should go through approved the approval mechanism (RE's sociologist and MoWT (ESSD)	No. of inception report	Demonstrated methodology of implementing the assignment
b	Preparation and approval of baseline report showing assessment of conditions in the project area with respect to HIV/AIDS, Child Protection and Protection against Sexual Exploitation, Gender Based Violence, Malaria, TB and Hepatitis B and community Health and Safety		
	The NSP is required to prepare the baseline report The baseline should be of acceptable quality and should demonstrate baseline information on all components of the assignment. HIV/AIDS, GBV, VAC	Baseline report	Established reference point for future comparison and assessments of the assignment

	<p>and community/OSH</p> <p>Should demonstrate Knowledge, Attitudes and Practices (KAP) on the aspects of the assignment.</p> <p>Approval mechanism should be followed (RE's sociologist and MoWT (ESSD)</p> <p>The report should indicate clear findings which will inform the interventions</p> <p>The NSP should disseminate findings of baseline study to relevant stakeholders like District officials (e.g Health and Community departments)</p>		<p>Enhanced targeted interventions of the aspects of the assignment based on baseline findings</p>
c	<p>Preparation and approval of monthly reports in respect to HIV/AIDS, Child Protection and Protection against Sexual Exploitation, Gender Based Violence, Malaria, TB, Hepatitis B and community Health and Safety</p>		
	<p>The NSP shall prepare monthly reports of satisfactory quality</p> <p>The reports should provide information on performance indicators of the component of the assignment (HIV/AIDS, GBV, VAC and community/OSH)</p> <p>The reports shall follow the approval mechanism (RE's sociologist and MoWT (ESSD)</p>	<p>Monthly reports</p>	<p>Tracked implementation progress</p> <p>Enhanced timely identification of progress challenges and timely interventions</p>
Task 3	Operate project HIV/AIDS clinic		
a)	Operating a HIV/AIDS clinic		
	<p>The NSP will operate a clinic on the project to attend to project workers should be operational as</p>	<p>Operational clinic</p> <p>(MoU or meeting minutes on agreed</p>	<p>Enhanced wellbeing of workforce</p>

	<p>required in the contract</p> <p>NSP should ensure that the clinic meets the required standards</p> <p>Should keep records of treatment of illness</p> <p>The NSP should establish relations with the existing medical service providers for referral services</p>	Collaboration)	
b)	NSP Staffing		
	<p>The NSP's should ensure staffing status of fulltime; key staff are in line with the contract.</p> <p>The NSP should put in place attendance book to ascertain to ease monitoring of attendance of the staff</p>	Availability of staff	Enhanced compliance with contract staffing requirement
c	<p>The NSP should ensure that he recruits and deploys staff as indicated in the proposal/ contract</p> <p>In case of change of staff, the proposed staff should be approved. And should have the equivalent of higher qualifications and experience.</p> <p>The NSP should submit files of staff with their CVS to RE for approval.</p> <p>The Nurse should display registration certificate</p>	<p>No. First Aid kits on project</p> <p>No of first Aiders trained on project</p> <p>No of First Aiders available on project – indicate which sections</p> <p>No of ple attended to/given first aid and by for which injuries</p>	<p>Effective implementation of the assignment</p> <p>Enhance staff monitoring</p>
d	<p>NSP should ensure that there are First Aid kits on the project</p> <ul style="list-style-type: none"> • Ensure that the kits are well stocked • Establish records of location of the kits • Location of kits • Records of restocking • Ensure there are First 		Enhance response to work-related injuries

	Aiders and arrange for their training to enable them manage first aid		
Task 4	Implementation of HIV/AIDS awareness, prevention and mitigation program		
a)	Conducting HIV/AIDS and TB Awareness raising meetings to project workers inclusive of sub-contractors, service providers and food vendors - including induction of new staff		
	<p>The NSP will hold HIV / AIDS prevention awareness campaigns for project workers and communities and will prepare reports of sensitization meetings which must include information that demonstrates progress on implementation of all aspects of assignment, (HIV/AIDS, GBV)</p> <ul style="list-style-type: none"> • Prepare engagement plans • Clearly indicate the receptors of sensitization • (General communities, (General communities, • Boda-boda stages, Schools, Tax operators, Sex workers or workers) • Indicate methods of sensitization- meetings, radio talk shows and drama shows • Ensure adequate mobilization- use of LCS • Ensure official communication about the awareness campaigns • Be conscious about the time of the meetings to consider women's 	<p>Use of introductory letters</p> <p>No of engagements (separate workers & community)</p> <p>No of participants segregated by gender</p> <p>Attendance sheets</p> <p>Activity photos</p>	<p>Sensitized workforce and host communities</p> <p>Increased knowledge and awareness on HIV/AIDS transition, prevention AND treatment options of HIV/AIDS</p> <p>Reduced risks of new HIV infections amongst project workers and communities.</p> <p>Reduced Stigma and discrimination against people living with HIV/AIDS</p> <p>Increased testing and counselling</p>

	<p>attendance</p> <ul style="list-style-type: none"> • Ensure attendance lists/ photos • Ensure acceptable / professional processes and procedures of sensitization 		
b)	Condom education and distribution		
	<p>The NSP is required to distribute condoms to workers and communities to mitigate against spread of HIV/AIDS and other STIs amongst workers and communities</p> <p>Ensure;</p> <ul style="list-style-type: none"> • Sensitization on proper condom use • Records of condom distributions amongst workers and communities • Keep records their location shall procure and place condom dispensers for workforce and communities on appropriate locations • Make sure you engage the owners of the locations before placing the dispensers to avoid conflicts 	<p>No of condoms distributed (separate workers and community)</p> <p>segregated Male and Female condoms</p> <p>No. of condom dispensers</p>	<p>Enhanced safe sex practices and reduced risks of new HIV/STI infections, amongst project workers and communities</p> <p>Enhanced information on condom use, availability decision about sexual life styles</p> <p>Increased accessibility to condoms</p>
c)	Promote voluntary early diagnosis in the project workforce and local communities		
	<p>The NSP will conduct Voluntary Counselling and Testing (VCTs) for project workers and communities</p> <ul style="list-style-type: none"> • Undertake adequate mobilization for the activity 	<p>No of pple tested</p> <p>No positive and referred</p> <p>In each case separate workers</p>	<p>Enhance early HIV diagnosis and timely interventions</p> <p>Increased access to treatment and</p>

	<ul style="list-style-type: none"> Keep records of VCT 	and community - segregated by gender	improved health.
d)	Assist individuals living with HIV/AIDS access care and treatment		
	<p>The NSP will refer positive clients to specialized facilities for ART management</p> <ul style="list-style-type: none"> NSPs will establish partnerships with referral centres for ART management Ensure the processes and procedures for referral are done professionally Keep records of referrals 		Effective enrolment of Project staff and communities ART treatment.
e)	Production and distribution of HIV/AIDS IEC materials		
f)	The NSP will produce and distribution of IEC materials in line with approval from MoH and Uganda AIDS Commission	No. of IEC materials	Increased awareness on prevention and management of HIV/AIDS and reduced new HIV infections
g)	Carry out radio talk shows on HIV/AIDS awareness	No. of radio talks held	Increased awareness on prevention and management of HIV/AIDS and reduced new HIV infections
h)	Film Shows (Moonlight shows) and drama shows	No. of film shows conducted	Increased awareness on prevention and management of HIV/AIDS and reduced new HIV

			infections
5	Distribution of IEC materials covering HIV/AIDS, GBV, Gender and VAC , Malaria, TB, Hepatitis B		
a.	The NSP is required to distribute IEC materials for all the components of the assignment. Ensure the quality of the materials distributed; should be of National standards or as recommended by the Uganda AIDs Commission. The NSP should ensure that IEC materials are approved by an authorized organization eg UAC /MoH	No of IEC materials distributed by Type	Increased awareness on prevention of HIV/AIDS, GBV/VAC and OSH risks
b.	The NSP will be required to translate the IEC materials into the local language with approval of UAC.	No of IEC Materials (by Type) for each major local language (in case of several languages in the Project area)	Increased awareness on prevention of HIV/AIDS, GBV/VAC and OSH risks
6	Sensitize on Occupational Health and safety for the contractor's staff and communities in the project area		
a	In partnership with contractor's OSH officer, the NSP will conduct toolbox talks First establish the topics be covered Mobilize properly Keep evidence; records photos	No of tool Box talks – in detail indicate dates No of ple reached/ participants Segregated by gender	Increased awareness on potential OSH risks and avoidance mechanism Reduced OSH risks Improved overall well being and productivity
b	The NSP will conduct risk assessment and hazard identification and guide on mitigation measures.	No of sensitizations meetings No of ple reached/	Increased awareness on prevention OSH risks

	Ensure quality of the content and quality of reports	participants	
c	<p>To enhance safety of General population, the NSP shall conduct community safety awareness activities.</p> <ul style="list-style-type: none"> • Conduct proper planning and mobilization of the communities • Indicate the receptors e.g communities, boda bodas, schools, tax operators etc • Make formal communication • Make use of LCs as entry points into communities • Keep records /attendances, photos report and establish safety aspects covered? • Ensure professionalism in processes, procedures methodology used 	<p>Segregated by category and by gender</p> <p>No of GBV/SEA/SH /VAC incidences reported and managed</p> <p>No of GBV/SH /VAC survivors supported</p> <p>\- indicate support provided</p>	Increased awareness on reduced safety risks
7	Identify and support locally existing structures to assist in program implementation		
a.	The NSP is not supposed to work in isolation but rather Identify locally existing structures/ stakeholders and collaborate with the identified stakeholders on program- related issues to ensure sustainability including relevant departments of hosting districts.	<p>Number and type of existing structures that provider is collaborating with and in which activities</p> <p>No of IEC materials on GBV/SEA/SH/VAC distributed</p>	Increased awareness on prevention of HIV/AIDS, GBV/VAC and OSH risks
8	Undertaking Gender Awareness, monitoring and equity in project implementation (evidence based)		
a.	The NSP is required to conduct gender monitoring awareness	No. of women and men employed on	Increased support for inclusive