



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.

- 1) 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	<p>Operate project HIV/AIDS clinic</p>		
a)	<p>Operating a HIV/AIDS clinic</p>		
	<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

	<p>activities for project workers and communities.</p> <ul style="list-style-type: none"> • First establish the issues to be talked about, ensure the content is of quality • Ensure reports are prepared to reflect what was talked about. • The NSP will document r gender- disaggregated data- • Ratio of women to men employed on the project, • women engaged in traditional men’s jobs • Ensure the sanitation facilities (stances) are adequate – advocacy • Establish number of stances by gender ensure they are labelled. • Ensure there are special facilities to cater for women needs e.g. changing rooms, shelters 	<p>the project (indicate Ratio)</p> <p>No. of women managed service providers (private sector) engaged on project.</p> <p>No of sanitation facilities (stances) for women in relation to Nos of staff.</p> <p>No of women support facilities provided</p>	<p>environment for project opportunities</p> <p>Improved Gender equity</p> <p>Informed decision making on affirmative actions for inclusion</p> <p>Enhanced behavioral change in Gender mainstreaming practices</p>
9	Undertaking activities that promote child protection.		
a.	<p>One of the NSP’s assignments is to conduct awareness creation for child protection on the project. Establish if the contractor has Child protection policy and sensitize project workers about it</p> <ul style="list-style-type: none"> • Establish the receptors, Plan, mobilize and undertake awareness creation activities amongst 		<p>Improved knowledge on child protection issues eg child abuse, child labor</p> <p>Improved child protection systems</p> <p>Improved vigilance</p>

	<p>project workers and communities.</p> <ul style="list-style-type: none"> • Document the proceedings of the activities with evidence minutes and attendances/ photos • Conduct awareness in schools to enhance this aspect and do it professionally. 		<p>in creating protective environment for children</p> <p>Empowered children in risk avoidance</p>
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2.0 Key Deliverables

The service provider shall prepare and submit reports to the contractor who in turn shall present them to the Construction Supervision Consultant for review. Once satisfied, the Construction Supervision Consultant will submit them to the Contract Manager for onward forwarding to HESS for approval.

Inception report

The Service Provider shall prepare and submit to within one month's time after commencement of services an Inception Report including but not limited to;

- Clear understanding of the tasks
- Methodology of how the NSP aims to perform the tasks outlined in the ToRs
- Stakeholder Engagement Action plan
- Detailed draft program and schedule for the activities through which the NSP aims to implement the tasks
- Detail the personnel and the CVs

Baseline Conditions Assessment Report

The Service Provider will prepare a Baseline Conditions Assessment report within 3 months from the commencement of the assignment which will be presented in two volumes and all these will be presented to the Construction Supervision Consultant for review and onward submission to Contract Manager.

- a) Volume 1 will comprise a detailed stakeholder analysis, the prevailing conditions on HIV/AIDS, Gender/GBV, Child protection, health and safety. This volume should also provide a detailed inventory of all service providers, services offered, resources and capacity.
- b) Volume 2: This will comprise the bulk of the report. It will present the socio-economic data. In summary this volume will include the following among others:
 - ∞ An analysis and definition of the project Area of Influence – i.e. the area in which the programme will be implemented; this will comprise the actual construction area and communities that are likely to be directly affected by the project
 - ∞ Socio-economic baseline – key characteristics of the population likely to be directly affected by the project
 - ∞ Existing knowledge and awareness of issues relating to HIV/AIDS, STIs Gender/GBV/VAC/Community and OHS and malaria in local communities
 - ∞ Existing patterns of sexual behaviour and practice in project affected communities, the analysis should be gender and age sensitive.
 - ∞ Existing prevalence rates for HIV, TB and reported cases of STIs;
 - ∞ A gender analysis of Contractor's staff and communities in the surrounding project area identifying key risks for project implementation and proposed mitigation measures.
 - ∞ An analysis of child abuses issues and GBV in the community and potential risks of children from the project.
 - ∞ An analysis on Community and OSH
 - ∞ An analysis on malaria
 - ∞ An analysis of the implications of the baseline conditions and mitigation measures and activities

This will provide an update on the contractor workforce; (where they are from, where they are staying, married etc.)

Monthly report

The monthly report shall describe progress made against program, schedule and key performance indicators, targets and highlight issues and concerns. The monthly report shall include:

- Detailed report of progress made and comparison of actual and planned targets based on the program and scheduled submitted the previous month.

- Program and schedule for the coming three months
- Summary of the targets, progress, challenges, and any issues
- All the supporting data (minutes of all the meetings with signed attendance lists and date stamped photos)

The monthly report shall be submitted by the fifth day after the end of the month.

The first monthly report shall be established for the first complete month after the submission of the Inception Report and cover the entire period from Contract award. The Consultants Sociologist will review the monthly reports.

Quarterly Progress Reports

Quarterly Progress Reports shall report against Planned Interventions and agreed Quarterly Work plans and targets prepared to acceptable standards / formats submitted to Supervising Consultant not later than 8th calendar day of the next month.

Annual Report

The annual report shall include for each task, achievements against planned, key observations, lessons learnt and recommendations on how to enhance performance. It shall further report on any changes in the overall settings relevant to the work package against baseline situation.

The first annual report shall provide a detailed description of the baseline situation including but not limited to social indicators, organisational settings district level performance rates etc.

The annual report shall be submitted along with monthly report by the fifth day after the end of the month.

Completion Report

The completion report shall inform about all activities implemented in line with the ToRs against the original and update program and schedule, outline whether the objectives and key performance indicators were achieved, findings, challenges and recommendations relating to HIV/AIDS, GBV, VAC and community and OSH.

Mode of payment for deliverables

No.	Deliverables	Percentage of payment
1	Submission of Satisfactory Inception report	15%

2	Submission of Satisfactory Baseline Report	20%
3	Submission of Satisfactory quarterly Reports (Prorata)	55%
4	Submission of Satisfactory Completion Reports	10%

3.0 Timing, Logistics and Key Roles and Responsibilities

Timing

The period of program of the HIV/AIDS, Gender/GBV, Child Protection and community /OSH awareness and mitigation will be the period when the road construction project is on-going. The duration of the program therefore shall be the same with the road construction project.

Roles, facilities, services and resources to be provided by MoWT

The Employer will provide the Contractor with the name and details of the Nominated Service Provider (NSP that shall be implementing the program for Awareness creation and management of HIV/AIDS, Gender mainstreaming and Gender-Based Violence, Child Protection, Community/Occupational Health and Safety and other Safeguard Risks Associated with the project.

In respect to the activities of the NSP, MoWT will perform the following roles;

- i. The Contract Manager will oversee the performance of the NSP on the project
- ii. MoWT E&S team on the project will communicate Key Performance Indicators (KPIs) to the Service Provider and agree on a comprehensive monitoring framework. In addition, they will also undertake the following;
- iii. Review and approve the reports of NSPs
- iv. Monitor and assess the performance of the Service Providers and provide feedback.
- v. Build the capacity of service providers to enhance their performance
- vi. Aggregate and consolidate NSP reports on projects for further submission to other relevant offices
- vii. Issue completion certificate to the Service Providers upon satisfactory completion of the assignment

Roles, facilities, services and resources to be provided by the Civil Works Contractor

The Contractor will facilitate the HIV/AIDS/GBV/VAC awareness and Mitigation Programme in their workforce.



The Contractor shall:

- † Prepare and implement Contractor's workplace policies on HIV/AIDS, Gender/GBV/VAC, Community and OSH.
- † Enforce the HIV/AIDS, Gender/GBV/VAC and Community and OSH Policies
- † Provide means of transport/a vehicle to the NSP specifically to facilitate HIV/AIDS/GBV/VAC program on the project
- † Grant representatives of the Service Provider, the CSC and Employer reasonable access to the site in connection with the HIV/AIDS Awareness, Child Protection and GBV and Gender Mainstreaming Programmes.
- † In consultation with the Service Provider, schedule appropriate timing for the implementation of programme activities as part of the work plan of the workforce and staff. The Contractor will allow his personnel to attend the HIV/AIDS Gender/GBV/VAC/OSH awareness programme in the course of their employment and during their normal working hours (three hours per month) or any period of overtime provided for in the relevant employment contracts, but excluding designated rest times such as lunch breaks or pay days (unless otherwise advised by the Engineer), and use all reasonable endeavours to ensure this requirement is implemented.
- † At each monthly site meeting, agree with the Service Provider, Consultant and the Consultants Sociologist on a draft programme for HIV/AIDS, Gender/GBV/VAC/OSH related activities with a timeframe. This programme shall be confirmed in writing by the Contractor to the Construction Supervision Consultant and communicated to the Service Provider at least one week in advance of programmed site activities.
- † Provide suitable space for the delivery of the HIV/AIDS Awareness Programme and encourage Contractor's Personnel to attend the HIV/AIDS Awareness Programme. The "space" has been defined in the Special Specification of the Works Contract as comprising a five room clinic that includes:
 - i. A secure clinical space in the main Contractor's Compound that is suitably equipped for screening and diagnosis of HIV/AIDS cases of the project staff and labour. This space shall be maintained by the contractor who shall ensure a sterile and hygienic environment at all times. The Contractor shall be responsible for providing all non-sexual health related medical supplies.
 - ii. A separate adjoining space for counselling activities: This space should provide a comforting environment for the discussion of sensitive personal issues
 - iii. Reception area and en-suite toilet facilities.
- † A fully equipped sick bay. Note that the clinic space will also be used for general clinical and First Aid activities.



- † Minimize the number of migrant workers employed on the project and housed in the site camp.
- † Facilitate voluntary HIV / STI testing.
- † Provide necessary resources for the Service Provider to provide information concerning counselling, support and care.
- † Provide separate sanitary facilities to the clinic, gender appropriate and with the required supplies
- † Ensure that the Service Provider access all suitable site locations for the provision of condoms, both male and female, complying with the requirements of ISO 4074 available free of charge to all contractor's employees at readily accessible points on the site, suitably protected from weather, for the duration of the contract.
- † Permit the Service Provider to place and maintain HIV / AIDS Gender/GBV/VAC/OSH IEC materials; awareness posters of size not less than A1 in areas that are highly trafficked by construction workers and provide construction workers with a pamphlet, in language largely understood by construction workers, which reinforces the objectives and expected outcome of the HIV Awareness Programme.
- † The Contractor's Safety Officer or another of the Contractor's staff will assist the Service Provider by identifying locations where stocks of condoms may be running low or where staff is requesting specific information regarding HIV/AIDS and STIs. This individual should work with the Service Provider to ensure condom stock levels are maintained. If qualified, the Contractors Safety Officer or other member of the Contractors staff may also carry out awareness training.
- † In accordance with the policies and guidelines of Uganda AIDS Commission and Ministry of Health, the Contractor should put in place non-discriminatory workplace measures to protect the employees living with HIV/AIDS and ensure they have access to treatment and counselling.

It is not a requirement of the Contract for the Contractor to undertake or pay for treatment or medication for personnel found to be suffering from HIV/AIDS. However, such personnel shall not be discriminated against. MoWT will strictly monitor any acts of discrimination on the project.

All provisions with respect to the HIV/AIDS programme shall be made free of charge to all workers.

Any request by the contractor to the Service Provider for services not described in the contract special specification or in this Terms of Reference shall be the subject of an additional contract agreement between the Service Provider and the contractor upon prior approval of MoWT

The Contractor shall support and facilitate all programme activities as described above and is responsible for the activities of the Service Provider, and the Service Provider shall report directly to the Contractor.

The Consultant's Sociologist will supervise all the activities of the NSP and include their performance in the Consultant's monthly report.

Note that HIV/AIDS Clinic will also serve as the Contractors main sickbay and First Aid station.

The Roles, Facilities, Services and Resources to be provided by the Consultant

The Supervision Consultant is MoWT representative on site. As part of the Consultant's team, there will be a Sociologist. The Consultant Sociologist will be responsible for managing, supervising and monitoring the performance of the Service Provider. Their responsibilities with respect to the HIV/AIDS Gender/GBV/VAC/OSH programme will include, but not be restricted to the following:

- † Supporting the MoWT Safeguards team in briefing the Contractor on their obligations with respect to HIV/AIDS, Gender, Child Protection and OSH activities and the significance of their co-operation for the duration of the works.
- † Manage, Supervise and Monitor the activities and performance of the Service Provider against a comprehensive monitoring framework to be agreed with the client.
- † Checking and monitoring the Contractors compliance with the provisions of contract, including a commitment to provide condoms and Information Education and Communication (IEC) material to the workforce; a commitment to ensure access to the workforce at least 3 hours a month for the approved service provider; a commitment to the rights of the workforce to attend a clinic or medical facility for testing, treatment and/or counselling and the provision of a suitable space to the service provider in which to undertake their activities and availability of a functional vehicle to the NSP.

The Service Provider will report to the Contractor's Sociologist who will in turn be supervised by the Construction Supervision Consultant's Sociologist. The Construction Supervision Consultant's Sociologist will provide monthly feedback MoWT's Sociologist attached to the project. The MoWT's Sociologist may from time-to-time issue direct instructions to the Service Provider in accordance with the conditions of contract.

In the event that problems are experienced with the delivery of the HIV/AIDS programme, the Consultant is the immediate and first point of contact for the Service Provider in terms of issues which relate to the Employer.

Roles, facilities, services and resources to be provided by the Nominated Service Provider (NSP)

The Nominated Service Provider shall:

- a. Make all necessary arrangements for carrying out the services and provide support to the staff assigned to the project. This shall include office and living accommodation, subsistence, equipment (including condoms/IEC material/sexual health testing kits etc.), transport, telecommunications, office and other supplies etc.
- b. Deploy staff on site in line with the provision of the contract and keep the book of attendance for easy monitoring of availability of staff on site.
- c. Ensure that their staff have the full authority, to make any technical decisions necessary to complete the services as required
- d. Propose as part of their team, a fully qualified nurse who shall work full time on site. The nurse will in addition to their duties with respect to the HIV/AIDS Gender/GBV/VAC/OSH programme manage the medical issues of the project workers
- e. Maximise linkages with existing services and initiatives and avoid creating parallel and unsustainable structures. Long term sustainability of the intervention should be a key component of the programme design. This will require a strong working knowledge of the project area and of government and community dynamics and power structures.
- f. Ensure maximum integration with existing initiatives in the project area. In its work with local communities, the programme should maximise linkages with existing services and initiatives and avoid creating parallel and unsustainable structures. Long-term sustainability of the intervention should be a key component of the programme design. This will require a strong working knowledge of the project area and of government and community dynamics and power structures.
- g. Provide constructive feedback on all aspects of the assignment and assist MoWT in their efforts for continual improvement.
- h. Implement the HIV/AIDS programme in line with Ministry of Health guidelines on HIV/AIDS response including implementing the Ministry guideline on President Fast Track Initiatives (PFTI).
- i. Participate in monthly site meetings, which will be held at the site of the project. During the meeting, the NSP will provide updates on activities carried out during the month and plans for subsequent months.

Key Personnel, Roles and Qualifications

Personnel	Key staff/Man months	Role/ Responsibilities	Qualifications and Experience
Team Leader /	Intermittent	<ul style="list-style-type: none"> • The Team Leader shall be 	<ul style="list-style-type: none"> • Degree in Public Health



HIV/AIDS / Public Health Specialist		<p>on intermittent and the responsibilities will include;</p> <ul style="list-style-type: none"> • Ensuring quality of service provision • Community and contractor sensitization • Building links with local service providers as necessary • Conduct Base line study • Prepare Monitoring Evaluation and learning framework • Work with the project Sociologist to produce appropriate IEC materials • Preparation of all required reports • Procurement of all materials and supplies • Client and Contractor Liaison • Contract Management • Provision of oversight role on NSP activities 	<p>or Equivalent</p> <ul style="list-style-type: none"> • Minimum 5 years' relevant postgraduate experience including the implementation of HIV/AIDS Awareness Programmes • Experience in Community Social Work and Social Administration will be an added advantage • Demonstrated experience in undertaking social baseline assessments, specifically related to health
Girl	Girl	• Girl	• Girl
Fully Qualified Nurse	Full time	<ul style="list-style-type: none"> • The Qualified Nurse shall be full time and present on site for the duration of the assignment • Conduct HIV/AIDS&TB testing. • Conduct testing for other sexually transmitted infections • Provide general first aid in contractor workforce and application of basic medical testing and treatment, including, but not restricted to Malaria. 	<ul style="list-style-type: none"> • Diploma in Nursing from a recognized institution • Must have a minimum experience of 3 years providing nursing services including HIV/AIDS &TB care, working with a reputable organization

		<ul style="list-style-type: none"> • Maintaining monthly record of all treatment administered and numbers of cases 	
HIV/AIDS / Sexual Health Counsellor	Full time	<ul style="list-style-type: none"> • Counselling of Contractor's Staff before and after HIV/AIDS testing • Counselling of target communities before and after HIV/AIDS testing 	<ul style="list-style-type: none"> • Diploma in Counselling • Must have a minimum experience of 3 years providing HIV/AIDS Counselling Services, working with a reputable organization
Gender/ Child Protection Officer	Intermittent	<ul style="list-style-type: none"> • Undertake monitoring of GBV/SEA interventions specifically data collection, analysis, documentation, and report preparation • Ensuring that the activities target and address child related concerns; • Quality assurance of activities to ensure desired outcomes; • Responsible for design of activities and targets groups for each activity • To design approaches to ensure that target groups are reached and the desired outcomes are realized; <ul style="list-style-type: none"> • Mobilize various government and non-government actors involved in VAC/Child Protection activities and programmes to rejuvenate their activities along the 	<ul style="list-style-type: none"> • Degree in Social Sciences with gender training. • Minimum 4 years' relevant postgraduate experience. • Experience in gender analysis • Experience in sensitising communities on Gender/GBV/Child protection awareness • Experience in implementation and of GBV/VAC support activities

		road project;	
Occupational Safety and Health Officer	Full time	<ul style="list-style-type: none"> • Develop occupational health and safety and road safety awareness and sensitization program and monthly plans • Conduct occupational safety and Health; Public safety and Road Safety sensitization and awareness campaigns to project workers and public communities (schools, taxi drivers, bodabodas, worship places, markets etc) • Monitor and track occupational safety and health for the project related activities. • Guide project in undertaking occupational safety and health interventions. • Document occupational health and safety activities, events and other aspects for the project 	<ul style="list-style-type: none"> • Degree in a relevant field and additional qualifications in OSH • A certificate in NEBOSH is an added advantage. • Minimum 4 years working as OSH officer or expert • Experience in undertaking OSH and Road Safety activities in infrastructure development

		<ul style="list-style-type: none"> • Develop occupational health and safety and road safety awareness and sensitization program and monthly plans • Conduct occupational safety and Health; Public safety and Road Safety sensitization and awareness campaigns to project workers and public communities (schools, taxi drivers, bodabodas, worship places, markets etc) • Monitor and track occupational safety and health for the project related activities • Guide project in undertaking occupational safety and health interventions • Document occupational health and safety activities, events and other aspects for the project 	<ul style="list-style-type: none"> • Degree in a relevant field and additional qualifications in OSH • A certificate in NEBOSH is an added advantage. • Minimum 4 years working as OSH officer or expert • Experience in undertaking OSH and Road Safety activities in infrastructure development
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NB. 1. The Duration of the assignment will be the same as the project period. Extension of the NSP contract will be subject to the performance and availability of funds.

2. For the Sociologist and Counsellor, knowledge of the local language is a key requirement but this shall be applicable during evaluation for selection of the NSP for the project in question.

Performance Evaluation

The Consultant's Sociologist will provide monthly performance reports to MoWT based on key performance indicators and set targets. An annual performance review will take place following the submission of the annual performance report. Upon satisfactory completion of the assignment, the Service Provider will be awarded a MoWT performance certificate. This performance certificate will be incorporated into future procurement processes and contracts.