

FEDERAL GOVERNMENT OF NIGERIA

NATIONAL AGENCY FOR THE CONTROL OF AIDS



CONSULTANCY SERVICES

FOR THE

ENGAGEMENT OF INDIVIDUAL CONSULTANT TO CARRY OUT HIV/AIDS SERVICE CASCADE ANALYSIS STUDY (DATA MANAGER)

INTRODUCTION

National Agency for the Control of AIDS coordinates the National HIV/AIDS response, promoting guidance to all implementing entities, coordinating and reporting on the attainment of national objectives of the response while ensuring that resources are used in the most efficient manner.

NACA 's mandate is to ensure efficient and effective coordination of the national response leading ultimately to the attainment of universal access to HIV prevention, treatment, care and support services for all Nigerians.

BACKGROUND:-

HIV/AIDS continues to be an issue of public health importance globally. Nigeria, with a projected 2016 population of over 180 million and an estimated 3.2 million people infected with HIV, has the second largest number of people living with HIV/AIDS in the world and among the 6 nations that are left behind and facing triple threat of high HIV burden, low treatment coverage and little or no decline in new HIV infections^{1,2}

In an effort to increase access and coverage, the Federal Ministry of Health with the support of its partners, embarked on the implementation of ART programme in 2001. Currently, Nigeria has 1,078 facilities providing ART services with 983,980 persons receiving ART from all the treatment centres nationwide as at December 2016⁴. According to the UNAIDS 2016 report, the ART coverage in Nigeria is 30 percent⁵.

A key priority for the Government of Nigeria is to provide high quality prevention of Mother-to-Child Transmission (PMTCT) services. From 2012 to 2015, Nigeria conducted a scale-up of PMTCT services at the state level, starting with the 12 priority states and the Federal Capital Territory. This increased the number of PMTCT sites across the country by more than twofold from 2,216 in 2012 to 6,440. Despite this increase, overall PMTCT coverage remains low at 30%¹¹. According to the World Health Organization, Nigeria accounts for 30% of the world's gap in achieving the global goal of 80% of women in need of ARVs for PMTCT

The National AIDS/STIs Control program of the Federal Ministry of Health proposes to conduct a HIV Service Cascade study to establish the rates of retention and Lost to Follow Up (LTFU) of patients on ART care and treatment programmes across Nigeria.

As the Federal Government continues to increase care and treatment coverage in Nigeria, it is imperative to establish the level of retention of patients in all states of the federation and to routinely update this data. This will also help the country to track the UNAIDS 90-90-90 target by year 2020.

This has informed the need for a cohort study to determine the level of retention and LTFU of patients on care and treatment. The study will guide the government and its stakeholders on the performance of the ART and PMTCT programmes in Nigeria. Furthermore, it will also provide information on those who have survived or died while on care and treatment as well as strengthen the monitoring and evaluation activities at all levels of HIV programming in Nigeria.

Goal and Objectives

To evaluate HIV service cascade and survival of PLHIV in Nigeria from January 1st 2012 to December 31st 2016.

- To determine the rate of retention and survival rate of PLHIV on treatment (adult, children and TB/HIV co-infected patients) on care and treatment at 12, 24, 36, 48 and 60 months.

- To determine the proportion of HEI who had EID test done within 12 months of birth, and have documented outcomes at 18 months within the review period.

Purpose of Assignment

- In other to generate report with evidence base to justify the study, it is necessary to collect, analyse and interpret data. All abstracted data will make no sense scientifically if not entered in the template that is developed to allow further analysis to be done on them.
- It is important to engage an expertise in data management so as to ensure that true image of the data collected from the field is captured in an appropriate database and analysed.

Key Deliverable and Expected outputs

- Configured tablets with software and study tools.
- Data Management plan.
- Weekly report of data management and challenges during field work.
- A report of challenges encountered during the entry of Piloted data
- A copy of the developed data entry template (CDs)
- High quality HIV Service Cascade Study data set.
- Capacity built in the configuring Questionnaires on tablets and developing data platforms

Qualifications/Requirements

- Advanced degree in Medicine, Biostatistics/ Medical Statistics
- Minimum 5 years of experience in HIV programming including data Monitoring and Evaluation
- Demonstrable experienced of having carried similar consultancy to conduct at least one data analysis for national HIV programme document in the last 2 years in Nigeria
- Demonstrable experienced of having published at least one article in peer reviewed journal in last 2 years in Nigeria
- Excellent English writing skills;
- Ability to meet tight deadlines and to work effectively under pressure, including in a multi-cultural environment;

. GUIDELINE FOR SUBMISSION AND OPENING OF DOCUMENTS

The Curriculum Vitae must be writing in English Language and submitted in two (2) copies (one original & one copy) in a sealed envelope clearly marked at the topmost right corner **"Individual Consultant for HIV/AIDS Service Cascade Analysis Study (Data Manager)"** and the Name, Address, Email and Phone Number of the Consultant boldly written at the back of the envelope, with acknowledgement to NACA office at the address below.

Head of Procurement
National Agency for the Control of AIDS (NACA)

Plot 823, Ralph
Shodeinde Street
Central Business District,
Abuja.

DEADLINE FOR SUBMISSION OF APPLICATIONS

Submission of application closes on 5th July,2018 by 12 noon, and the submission received will be opened immediately after closing at NACA Conference Room (Ground Floor) in the presence of Consultant representatives that choose to attend.

NOTES/DISCLAIMER

- i. Late submissions will not be accepted.
- ii. NACA shall verify any or all documents and claims made by applicants and will disqualify bidders with falsified documents and claims.
- iii. NACA shall not be held responsible for any disqualified proposal as a result of any omission or deletion relating to the submission guidelines.
- iv. This advertisement shall not be construed as a commitment on the part of NACA to award a contract to any Contractor, nor shall it entitle any Contractor submitting documents to claim any indemnity from NACA.
- v. NACA reserves the right to cancel the procurement process in the public interest without incurring any liabilities to the bidders.
- vi. A candidate will be selected on the basis of comparison of individual qualifications (Curriculum Vitae and Experience).

A. FOR ENQUIRIES

Please contact: ishayadawha@yahoo.com;

Signed
Head, Procurement
For: Director-General, NACA