
**Terms of reference for the consultant/-s
on "Access points for reaching different key populations' representatives from different
countries of the EECA region with services, research and communication efforts in the times
of COVID19" study**

1. Introduction

The International Charitable Foundation "Alliance for Public Health" (hereinafter - the Alliance) is a leading professional organization that, in cooperation with key civil society organizations, the Ministry of Health and other government agencies, is fighting the HIV/AIDS epidemic in Ukraine, ensuring leadership of prevention programs and the provision of high-quality technical support and financial resources to field organizations. All these efforts are aimed at achieving universal access in the country to comprehensive services in connection with HIV/AIDS, tuberculosis and viral hepatitis C in Ukraine and an effective response to the epidemic at the community level, based on achieved results and best practices.

These Terms of Reference were developed within the framework of the regional project "Sustainability of services for key populations in the Eastern Europe and Central Asia".

The regional project "Sustainability of services for key populations in the Eastern Europe and Central Asia" (2019-2021) is implemented with the support of the Global Fund to Fight AIDS, Tuberculosis and Malaria by a consortium of organizations from the EECA region under the leadership of the Alliance for Public Health in partnership with the All-Ukrainian Network of PLWH" (100% Life), the Central Asian Association of People Living with HIV, and the Eurasian Key Populations Health Network. The main goals of the project are as follows:

- Improving the financial sustainability and efficiency of HIV programs;
- Reducing existing legal barriers and respecting the most important human rights to access HIV prevention and care services;
- Improving the efficiency and accessibility of HIV service delivery models (testing and continued care) for key populations.

The project is being implemented in 14 countries of the EECA and SEE region: Belarus, Bosnia and Herzegovina, Georgia, Kazakhstan, Kyrgyzstan, Moldova, Russia, Romania, North Macedonia, Serbia, Tajikistan, Ukraine, Uzbekistan, Montenegro. Particular attention in countries is paid to cities that have signed or are preparing to sign the Paris Declaration, namely: in Belarus - Minsk, Soligorsk and Svetlogorsk, in Kyrgyzstan - Osh, in Russia - St. Petersburg and Kaliningrad, Novosibirsk, Sverdlovsk, Chelyabinsk region, in Tajikistan - Dushanbe, in Uzbekistan - Tashkent and Samarkand region.

2. Feasibility justification

The COVID-19 pandemic is having a significant impact on the health care system in all countries of Eastern Europe and Central Asia. The situation caused by the spread of the COVID-19 demonstrates the need for more resilient, flexible and results-oriented health systems around the world. This also applies to services for people living with HIV, people who inject drugs, sex workers, men who have sex with men, and trans* people: HIV services (such as prevention and testing, harm reduction programs, substitution maintenance therapy, ART) and related services (for example, diagnosis and treatment of tuberculosis, viral hepatitis C).

At all levels of service provision to these groups, changes are taking place in connection with COVID-19 - decisions are made at the legislative level, adjustments are made at the level of health facilities and social services, the approach to work is being revised at the level of donors and organizations funding the above activities, and initiatives and new formats for working with key populations are emerging at the level of non-governmental organizations and other service providers. For example, during the pandemic, many initiatives and programmatic changes have emerged to ensure the sustainability and

continuity of preventive, treatment and support services. The demand for online services has increased, ranging from online or telephone consultations to ordering diagnostic and treatment tools. There was a need to receive services in an independent format - self-testing, vending machines issuing consumables and diagnostic tools in public places.

National stakeholders have been developing and implementing programs as well as planning and carrying out demand creation and awareness raising information campaigns among KPs for over 20 years. At the same time, the times are changing, new development, new barriers are emerging; issues like the COVID19 pandemic and its related restrictions, changing drug scenes, methods of acquiring drugs, environments and ways of working for sex workers and all related communication are changing. Some are moving online, accompanied by development of new means for this connection – new social network and messengers, new groups, etc; some are staying offline but changing the modality of their interaction. All this is hard to keep track of and hadn't yet been researched in complex. At the same time, it is crucial information for our effective work within this and other regional programs. We need to know where to find our beneficiaries and key audiences in order to be able to work with and for them.

3. The goal:

The main goal of the study is to understand the best ways to access different key populations' representatives from different countries of the EECA region with services, research and communication efforts in the times of COVID19 and beyond.

Based on the results of this study, we would have more information on how to best adapt our HIV and other related services in the times of COVID to best reach our target populations and be able to provide our partners in the countries of the region with region- and country-specific recommendations for their reference.

This will allow to provide for better coverage of key populations in EECA countries with information, campaigns, services and for more comprehensive involvement in further studies and research aimed at these groups.

The above goal suggests the following tasks:

1. Design and carry out a study to identify ways to reach the representatives of different key populations with information, communication messages, services and research efforts in the COVID reality.
2. To analyze the collected data analysis and develop a report, including recommendations for service providers and decision makers, involved into program and project planning and implementation
3. Disseminate study results appropriately among relevant stakeholders.

4. Target populations:

Representatives of key populations - people living with HIV, sex workers, men who have sex with men, people who use drugs - in countries of the EECA region.

5. Geography:

Country level - 5 countries to be determined in collaboration with APH (to include different subregions of the region).

Regional level - all countries of the EECA region.

6. Methods and sampling

A more detailed methodology for collecting and analyzing data, tools for working within this ToR should be developed and proposed by the consultant/s in collaboration with APH.

6. Activities and expected results:

№	Activities	Expected results
Preparatory stage		
1	Protocol, methodology and research tools development, including the recruitment plan and the questionnaire for both online and offline components as well as any interview guides as envisioned by the methodology to be developed	Protocol and toolkit agreed with the Alliance
2	Receipt of ethical committee approval of the protocol	The Alliance ethical committee approves the protocol
3	Translation of the questionnaires into local languages	Translated questionnaires into all target languages
4	Preparation work for launching the survey online	The survey is operating on a platform agreed with the APH and ready for launch
5	Preparation work for launching the survey offline	The country focal points are identified, the interviews are planned, the questionnaires are printed out
Field work stage		
6	Online survey carried out	Data set
7	Offline survey carried out	Data set
Data analysis stage		
8	Collected data is cleaned and analysed	Data analysis results
Final - report writing - stage		
9	Development of the report, including recommendations for service providers working with these groups in these countries and at the regional level.	Report
Results presentation and dissemination stage		
10	Presentation of work results for ICF "Alliance for Public Health"	Materials of the presentation and the actual event
11	Presentation of the results of the work for the participating countries and international partners, interested stakeholders	Materials of the presentation and the actual event

7. Timeframe: November 2021 – April 2021.

№	Task	Tentative deadlines
1	Preparatory stage	6 weeks starting from the contract date
2	Field work stage	about 4-6 weeks (to be proposed in the protocol) - 12 weeks starting from the contract date
3	Data analysis stage	4 weeks - 16 weeks starting from the contract date
4	Final - report writing - stage	4 weeks - 20 weeks starting from the contract date
5	Results presentation and dissemination stage	April 2021

8. General requirements to the consultant/s with regard to this assignment:

- Experience in the development of protocols and tools for qualitative research;
- Experience in conducting desk studies and secondary analysis of results;
- Experience in analyzing research data and preparing reports on its results;
- Experience in online study management (experience in coordinating online international research would be an advantage);
- Experience in national offline study management (experience in coordinating international research would be an advantage);

- Teamwork experience;
- Experience working in the field of HIV/AIDS, including with representatives of key populations, government health agencies, non-governmental organizations and government decision-makers;
- Relevant specialized education (sociology, public health, health care management, etc.);
- High level of knowledge of Russian language and level of English proficiency not lower than Upper-Intermediate;
- High level of computer literacy and knowledge of relevant data analysis tools on a proficient level.

9. Competition procedure:

The competition participants should provide the following package of documents:

- A summary indicating the list of studies, written analytical reports, developed tools for assessing situations carried out from 2017 to 2021;
- A letter of motivation indicating relevant experience and expected remuneration for the job (daily rate(s) and the amount of days expected to be required);
- A short proposal for the implementation of the study (description of the main stages and terms, if they differ from those indicated in the terms of reference or a more detailed description of the vision and approach to be used);
- Examples of reports on the results of research/articles and/or other publications created by the participant/s of the competition and/or with their participation (with the indication of the degree of involvement into the study and the development of the document).

The Alliance and the consultant/s will sign the contract for the provision of consulting services, the consultant/s shall provide the services agreed upon by these Terms of Reference within the agreed period of time. A comprehensive report on the "Access points for reaching different key populations' representatives from different countries of the EECA region with services, research and communication efforts in the times of COVID19" study will be the final confirmation of the consultant/s fulfillment of their commitment hereunder.

Payment terms: payment will be made in full after the submission of the report on the results of the work and after the signing of the acceptance certificate for the services provided. The preliminary budget ceiling for this assignment is USD 25,000, however, the final amount is to be determined based on the consultant/s proposal and the final determined and agreed upon scope of work.

The package of documents must be sent to hrebenkov@aph.org.ua by 6:00 p.m. Kyiv time on November 29, 2021. In the subject line of the letter, indicate which position you are applying for: "Consultant on Access points study".

Only the candidates shortlisted upon preliminary consideration of the submitted package of documents will be invited to the interview.

ICF "Alliance for Public Health" abides by the equal opportunities policy, therefore, it hires qualified specialists from different sectors of society, regardless of their socio-demographic characteristics, HIV status and individual preferences.