

Terms of Reference

Coordination of implementation of the ‘Sustainability of Services for Key Populations in the EECA region’ regional project (2022 – 2024) in Kazakhstan, Tajikistan, and Uzbekistan

Alliance for Public Health is seeking a qualified consultant to coordinate implementation of the regional project ‘Sustainability of Services for Key Populations in the EECA region’ during 2023-2024 in Kazakhstan, Tajikistan, and Uzbekistan

1. Background

There were an estimated 1.7m people living with HIV (PLHIV) (range 1.4m-1.9m) in the EECA region in 2019, an increase from 1.5m in 2018 and 1.4m in 2017. The percentage of PLHIV who know their status was 70% (range 61%-79%) in 2019, a slight increase from 68% (range 59%-76%) in 2018 and 66% (range 57%-75%) in 2017. The EECA is the only region in the world where new HIV infections among all ages have continued to rise¹. Though in Kazakhstan, Tajikistan, and Uzbekistan number of people knowing their status and receiving treatment is continuously increasing, there still is the place for more broad and innovative interventions to ensure full-scale provision of HIV testing, prevention and treatment services.

Of crucial importance is the lack of sustainable domestic financing of the HIV response for KPs throughout the EECA region. Despite some progress made on allocating domestic funds for HIV services for key populations, social contracting mechanisms for NGOs and CSOs to deliver HIV services for KPs are still lacking in a number of countries to ensure accessibility, transparency, accountability, flexibility and customer focus. Thus, regulatory legislation of service packages and delivery modalities is needed, as well as the strengthening of NGO and CSO capacity to advocate and partner with authorities, including budgetary work, to sustain HIV services for KPs from domestic resources.

Furthermore, low levels of domestic funding, and low coverage of comprehensive and quality-based harm reduction services results in the failure of states to uphold the right to health for all and blocks progress towards universal health coverage (UHC). Decentralization of HIV treatment and testing services in line with the WHO recommendations would contribute to scaling-up access to HIV prevention and treatment services for key populations, as well as help to get closer to the UHC.

Involvement of communities’ representatives to decision making in the area of healthcare and HIV/AIDS is crucial for successful HIV response and has to be established and scaled up.

Monitoring of human right violations of KP and PLHIV kicked off strongly during 2020 in several projects and activities. While in Tajikistan, and Uzbekistan REAct system for documenting human rights violations

¹ UNAIDS. UNAIDS Data 2020. Geneva; UNAIDS, 2020. https://www.unaids.org/sites/default/files/media_asset/2020_aids-data-book_en.pdf

was launched during 2020-2021 and now is confirming its effectiveness, in Kazakhstan its functioning started in 2022 with the efforts of ECOM, and national scale-up of these activities is planned in the country during 2023 – 2024.

2. Project objectives and approach

In response to this context, Alliance for Public Health (Ukraine) in a consortium with the WHO, PAS, 100% Life (All-Ukrainian Network of PLWH), SEE RCN, the Central Asian Association of People Living with HIV, International Budget Advocacy Hub, and the Eurasian Key Populations Coalition, with the participation of regional key populations networks as well as technical partners have initiated a regional project to support responses to HIV in key populations in 14 countries of the EECA and SEE regions. There are up to 13 mln USD allocated by the Global Fund to Fight AIDS, Tuberculosis and Malaria for the project implementation during 2022 – 2024.

The project has **three major objectives**:

1. Institutionalizing effective models of, and processes in, HIV responses in the EECA region to impact the HIV care cascade in the region.
2. Removing barriers to services for key populations to promote quality health interventions based on human rights principles; addressing gender barriers to services.
3. Budget advocacy for sustainable services for key populations in the EECA region.

The design of the project envisages that a number of interventions will be held in Kazakhstan, Tajikistan, and Uzbekistan by a number of international partners with involvement of local consultants. At the same time, Alliance for Public Health deems necessary to involve a focal point in who'll be coordinating these activities and ensure achieving of the results.

The main **project activities and targets** for Kazakhstan, Tajikistan, and Uzbekistan in 2023 – 2024 include:

- Advocacy to decrease the ARV prices by 15% by the end of 2024 compared to 2021 prices (implementing partner – 100% Life through HAC);
- Assessment of HIV tests (CD4 and VL) and advocacy to decrease the prices by 20% by the end of 2024 compared to 2021 prices (implementing partner – 100% Life through HAC);
- Advocacy actions aimed at cumulative increase of domestic funding for HIV services for key populations and PLHIV by 500 000 USD by the end of 2024 compared to 2021 expenses (implementing partner – 100% Life through International Budget Advocacy Hub);
- Increased number of people receiving PrEP in Kazakhstan, Tajikistan and Uzbekistan (implementing partners – NGOs in the countries through advocacy);
- Increased number of people on ART in selected regions (implementing partner – SPIN Plus NGO in Tajikistan);

- Inclusion of PrEP into nationally approved service packages for MSM and/or other key populations to increase number of people receiving PrEP (implementing partners – ECOM and WHO Euro Office);
- Development of HIV testing and ART optimization strategies (implementing partner – 100% Life);
- Decentralization of HIV testing services through the removal of normative, legal and technical barriers (implementing partners – 100% Life through International Budget Advocacy Hub, WHO Euro Office);
- Decentralization of HIV treatment services through the removal of normative, legal and technical barriers (implementing partners – 100% Life through International Budget Advocacy Hub, WHO Euro Office);
- Introduction of self-testing, community-based testing and decentralised testing into national policy documents and clinical guidelines, and harmonised testing policies and processes with new WHO recommendations (implementing partners – WHO Euro Office and PAS Center);
- Integration of community-led monitoring into the health care system to assure quality of services for PLHIV and key populations (implementing partner – 100% Life through EHRA/ECOM);
- System of human rights violation reporting (REACT) functioning at national level; Legal redress in cases of human rights violations documented through REAct (implementing partners – APH, 100% Life through ECOM);
- Identification and systematic addressing of gender barriers to accessing HIV services (implementing partners – APH, 100% Life through EWNA);
- Development and promotion of the Guiding principles (recommendations, model legislation etc.) on drug policy (implementing partners – APH, ECECAD)
- Development of legal changes to reduce the criminalization of PLHIV and key populations in the EECA countries (implementing partner – 100% Life);
- Stigma index survey (implementing partner – Central Asian Association of PLHIV, GNP+ and Global Partnership);
- Functional social contracting mechanisms (implementing partner – 100% Life through International Budget Advocacy Hub);
- Advocacy and technical support by NGOs to communities in Kazakhstan to revise the respective legal framework that regulates national supply chain systems (implementing partner – 100% Life);
- Implementation of Fast-Track interventions by signing Paris Declaration by municipalities in Tajikistan (implementing partner – SPIN Plus NGO).

3. Goal and objectives of the consultancy

The overall goal for the consultant is to serve as in-country focal point to coordinate implementation of all these activities and ensure successful achievement of the goals established in the Performance Framework; to provide advice and assistance (when needed) to the implementing partners for smooth and effective operations in the countries.

The specific objectives include:

- Presenting the interests of the regional project in the countries;
- Discussion with the countries' partners and stakeholders to ensure complementarity of the activities and avoiding duplication of efforts;
- Preparing the information and on the existing needs and suggestions on planning/re-planning of activities;
- Presenting the information on the activities of the regional project to CCMs and to other key stakeholders in Kazakhstan, Tajikistan, and Uzbekistan;
- Facilitation of getting official letters of support from CCMs and other relevant institutions that authorize implementation of the project activities and programs in the frames of the regional program;
- Facilitation of collection of needs for new interventions and existing activities in the frames of the regional program, including the programs implemented by APH in response to COVID-19;
- Initial coordination to identify the implementers of activities and final recipients of humanitarian or technical assistance (when needed);
- Other activities on coordination and successful implementation of the program agreed with the Alliance for Public Health.

4. Qualifications requirements

Alliance for Public Health invites eligible consultants to indicate their interest in providing services for the regional project during 2022 – 2024. Consultants should enclose their CVs outlining experience in the HIV/AIDS response in Kazakhstan, Tajikistan, and Uzbekistan and cover letter explaining why their involvement to implementation of the regional project will be beneficial.

The Qualification requirements are:

1. General experience in HIV/AIDS activities in Kazakhstan, Tajikistan, and Uzbekistan;
 - experience of working with international organizations and/or national agencies implementing externally funded programs and projects;
 - technical capacities to ensure smooth implementation and high-quality outputs;
2. Specific experience:
 - proven experience in successful cooperation with governmental and non-governmental, national and international organizations in Kazakhstan, Tajikistan, and Uzbekistan (confirmed by reference list);
3. Personal characteristics:
 - ability to hold multiple tasks and set priorities;
 - observing deadlines;
 - high level of self-organization, ability to work without direct supervision;

- knowledge of MS Word, MS Excel, MS PowerPoint, MS Outlook, using social networks and online messengers to ensure rapid communication;
- spoken and written English and Russian skills.

5. Duration of the assignment

The overall duration of the assignment is two years – 2023 – 2024. The initial contract will be concluded for one year (2023) with possibilities of extension in case the selected consultant will demonstrate the successful implementation of the activities.

6. Reporting requirements and outline

The consultant shall provide the written monthly or quarterly report and describe the activities implemented by the consultant, as well as overall progress/challenges that appeared in the course of implementation of the regional project activities by the implementing partners. At the same time, it's possible to have an update on the project on monthly basis through the monthly online meetings. Brief calls with the Alliance for Public Health staff are also possible upon the need to discuss some issues that cannot wait till quarterly report.

Please contact Program Manager for the Regional Grant Tetyana Perepelytsia at perepelytsia@aph.org.ua for any further information.

Expressions of interest (CV, cover letter) including expectations on the monthly payment rate gross must be delivered to obilous@aph.org.ua by **December 28, 2022, 6:00 PM**, Ukraine local time.

Wishing you success!