

TERMS OF REFERENCE

ORGANISATION OF EASTERN CARIBBEAN STATES

INVITATION FOR EXPRESSIONS OF INTEREST

Consultancy for Adaptation and roll out of Antigua and Barbuda's peer referral card system for outreach testing of Key Populations (MSM, SW, TG) in 5 additional OECS member states

The Organisation of Eastern Caribbean States (OECS) Commission invites interested eligible <u>Individual Consultants</u> to submit Expressions of Interest for the Adaptation and roll out of Antigua and Barbuda's peer referral card system for outreach testing of Key Populations (MSM, SW, TG) in 5 additional OECS member states

The Terms of Reference and Guidelines for the Submission of Expressions of Interest for this consultancy are provided below.

ORGANISATION OF EASTERN CARIBBEAN STATES

TERMS OF REFERENCE FOR

Consultancy for Adaptation and roll out of Antigua and Barbuda's key population peer referral card system for outreach testing of Key Populations (MSM, SW, TG) in 5 additional OECS member states.

BENEFICIARY COUNTRIES

Antigua and Barbuda, Dominica, Grenada, St. Kitts and Nevis, Saint Lucia and St. Vincent and the Grenadines

CONTRACTING AUTHORITY

The Contracting Authority for this Consultancy is the OECS Commission.

BACKGROUND AND RATIONALE

The Organization of Eastern Caribbean States is implementing a multi-country Global Fund grant "Strategic Response towards HIV/TB Elimination" Project since 2015. The overall aim of the grant is the reduction of new HIV infections, eliminating TB and ensuring that key populations have equitable and sustained access to quality services. The current grant which commenced implementation in April 2019 is a continuation of the previous grant and builds on the experiences and lessons learned from the former project. The Health Unit of the OCES Commission is the principal Recipient (PR) and is responsible for managing the Multi-country Global Fund Grant for the Eastern Caribbean.

Data from the routine monitoring of the HIV/TB Elimination Project has demonstrated that the 6 OECS countries did not achieve the UNAIDS 90-90-90 target by the end of 2020. At the end of 2019, 3,500 persons were estimated to be living with HIV with 1,402 (40%) on ART and 703 (50%) virally suppressed. There is wide variation in individual country data: Antigua and Barbuda 67-46-16, Dominica 84-20-14, Grenada 92-36-14, Saint Kitts Nevis 95-27-12, Saint Lucia 94-44-30 and 72-49-24 (Table 1).

120% 100% 80% 60% 40% 20% 0% ANU DOM SVG **GRE** SKN SLU ■ Estimated PLHIV ■ On ART Know status Virally suppressed

Table 1: OECS HIV treatment cascade by country, 2019

Source: OECS Monitoring and Evaluation Programme Data 2019

Over the past years a perennial problem has been the low achievement in reaching key populations, i.e, men who have sex with men (MSM), female sex workers (FSW) and transgender (TG) people with a defined package of prevention services. In 2020, the region reached 275 out of a reachable target of 2,993 (9.2%) of MSM, 387 out of a reachable target of 3,645 (10.6%) of FSW and 10 out of a reachable target of 631 (1.4%) TG. HIV testing of the reached KPs was 133/275 (48.4%), 170/387 (43.9%) and 9/10 (90%) respectively for MSM, FSW and TG. One of the contributing factors to this low achievement has been the inability of most member states to contact KPs during outreaches and refer them to HIV services provided by national AIDS programmes. Antigua and Barbuda has developed a card referral system that it uses during outreaches to KPs and successfully refer them for HIV testing and other services (Table 1). Other countries have variable success and would benefit from using such a card system.

Table 1: Key population reached and tested by country, OECS 2020

	# of Key Population reached		# and % Key Population tested			
Country	MSM	FSW	TG	MSM	FSW	TG
Antigua &	40	80	8	40 (100)	46 (57.5)	8 (100)
Barbuda						
Dominica	70	299	0	36 (51.4)	119 (39.8)	0 (0)
Grenada	96	0	0	8 (8.3)	0 (0)	0 (0)
St. Kitts &	16	1	0	16 (100)	1 (100)	0 (0)
Nevis						
St. Lucia	32	7	2	12 (37,5)	4 (57.1)	1 (50)
St. Vincent	21	0	0	21 (100)	0 (0)	0 (0)
& the						
Grenadines						
Total	275	387	10	133	170 (43.9)	9 (90)

This consultancy therefore aims to adapt the Antigua and Barbuda card referral system in Dominica, Grenada, St. Kitts and Nevis, Saint Lucia and St. Vincent and the Grenadines.

Overall Goal: To increase uptake of HIV and syphilis testing by key populations (MSM, FSW, TG) in the OECS.

Specific objectives

- 1. Adapt the Antigua and Barbuda card referral for use in 5 OECS countries.
- 2. Roll out the use of the adapted referral card in 5 OECS countries.

SCOPE OF SERVICES

In pursuit of the above objectives, the Consultant, under the direction of the Senior Technical Specialist of the HIV/TB Elimination Project, will be responsible to the OECS Commission for the direct execution of the following tasks:

- 1. Review Antigua and Barbuda's referral card system and recommend whether changes are needed for adaptation by Dominica, Grenada, St. Kitts and Nevis, Saint Lucia, St. Vincent and the Grenadines.
- 2. Review existing VCT protocols in 6 member states (Antigua and Barbuda, Dominica, Grenada, St. Kitts and Nevis, Saint Lucia and St. Vincent and the Grenadines) and recommend changes for use with the adapted card.
- 3. Development of a hard copy and electronic recording system for the referral card.
- 4. Development of a plan in consultation with national stakeholders for roll out of the card referral system in the 5 countries.

METHODOLOGY

The consultant will conduct a thorough review of the Antigua and Barbuda key population card referral system, and conduct interviews with key stakeholders in Antigua and Barbuda (National AIDS Programme Secretariat staff, staff of civil society organizations [CSOs] and selected key population individuals) to understand the use and user-friendliness of the card referral system.

The consultant will also review the protocols and processes for conducting voluntary counselling and testing in all 6 countries and interview National AIDS Programme Secretariat staff, staff of civil society organizations [CSOs] and selected key population individuals from the 5 countries on the acceptability of a key population peer card referral system for outreaches and referral of KPs to services.

Based on the findings, the consultant will propose an adaptation of the peer referral card and an electronic version and obtain stakeholder feedback on the card and the electronic version. The consultant will develop a plan in consultation with national stakeholders for roll out in the 5 countries (Dominica, Grenada, St. Kitts and Nevis, Saint Lucia and St. Vincent and the Grenadines).

Deliverables

The deliverables of this consultancy are included in the table below and expected to be completed within approximately 60 professional days from October 2021 to December 2021.

Table 2: Deliverables and indicative timeline

Activity	Deliverable	Timeline for
		submission (days)
Inception:	Workplan with schedule for	3
Meeting with the technical team	conducting the consultancy.	
of the HTEP and RCM after which		
the consultant will prepare a		
workplan for conducting the		
consultancy.		
Development of interview tools	Interview tools	2
for interviewing stakeholders on		
the use and user-friendliness of		
the KP peer referral card.		
Review of the Antigua and	Report on the findings from the	15
Barbuda KP peer card referral,	review of the KP peer referral card	
and VCT protocols and processes	and VCT protocols and processes,	
including interviews of key	analysis of interviews and	
stakeholders.	feedback from stakeholders.	
Adapt and develop hard and	Hard and electronic versions of KP	20
electronic versions of Antigua and	peer referral card	
Barbuda KP peer card referral		
system.		
Develop individual country plans	Country plans for Dominica,	20
for roll out of KP peer card referral	Grenada, St. Kitts and Nevis, Saint	
system.	Lucia, St. Vincent and the	
	Grenadines for roll out of KP peer	
	card referral system.	
Total		60

QUALIFICATIONS

The consultant must possess the following:

Academic qualifications

At minimum a Master's degree in Public Health, Sociology, or related discipline.

Experience and skills

- At least 5 years' experience working with HIV/STI programmes.
- Experience working with key populations.
- Knowledge of the Caribbean region and the specific challenges of the Small Island States, especially as it relates to the health system.
- Experience in successfully conducting at least one similar assignment.

Further, the Consultant is expected to demonstrate the following competencies:

- Experience in writing reports and reviewing secondary data/information
- Excellent oral and written communication skills
- Fluency in written and spoken English

WORKING/REPORTING RELATTIONSHIP:

The consultant will be required to report to and be supervised by the Senior Technical Specialist for the OECS Multi-Country Strategic Response Towards HIV/TB Elimination project or a designated officer in undertaking the work as outlined in these Terms of Reference in order to ensure that the deliverables are achieved in an effective and efficient manner.

All documentary deliverables should be presented in draft for review before final submission. One (1) hard copy plus an electronic copy of reports and documentary materials should be submitted.

GUIDELINES FOR SUBMISSION OF EXPRESSIONS OF INTEREST

Consultancy for Adaptation and roll out of Antigua and Barbuda's peer referral card system for outreach testing of Key Populations (MSM, SW, TG) in 5 additional OECS member states

<u>Individual Consultants</u> are invited to indicate their interest in providing the services. Interested Consultants must provide information on their capability and suitability to undertake the assignment.

Consultants interested in undertaking the prescribed services are to submit an Expression of Interest (EOI) to include:

- 1. Information on the Consultant's qualifications and technical competence relevant to the assignment and experience in undertaking similar assignments, including a Curriculum Vitae.
- 2. A concept note on the planned framework for undertaking the assignment and a breakdown of the number of days required for each task (*as per Table 1*).

Expressions of Interests submitted should not exceed 30 pages.

The Consultant shall bear all costs associated with the preparation and submission of his/her Expression of Interest.

The OECS is not bound to accept any Expression of Interest and reserves the right to annul the selection process at any time prior to contract award, without thereby incurring any liability to the Consultants.

An electronic copy of the Expressions of Interest should be submitted by <u>30th August 2021</u>, addressed to:

Dr. Avion Bamodu
Programme Director, Health
Organisation of Eastern Caribbean States
Morne Fortune
P.O. Box 1383
Castries
SAINT LUCIA

At the following email address:

tricia.leo@oecs.int copied to: procurement@oecs.int , kimbely.mills@oecs.int

The email submissions should include the name and address of the Individual Consultant and shall be clearly marked in the subject line as "Expression of Interest – Consultancy for Adaptation and roll out of Antigua and Barbuda's peer referral card system for outreach testing of Key Populations (MSM, SW, TG) in 5 additional OECS member states.

An <u>Individual Consultant</u> will be selected in accordance with the Consultant's Qualifications (CQS) Selection method as detailed in the procedures set out in the Procurement Manual of the OECS dated November 2013 revised June 2017.

The criteria to evaluate the Expressions of Interest received in relation to this assignment will include:

- 1) Academic qualifications of the Consultant;
- 2) Technical competence in undertaking the assignment;
- 3) Experience in undertaking similar assignments; and
- 4) Planned costed framework submitted for undertaking the assignment.

The Expressions of Interest will be evaluated and the Individual Consultant with the most relevant experience, qualifications and technical competence will be selected and requested to submit a fee proposal, which will be the basis for negotiations leading to a contract.

It is expected that the services will be conducted from October 2021 to December 2021, in keeping with the terms outlined in the Reporting Requirements above.