1. BACKGROUND OF THE ASSIGNMENT:
The Joint Team on AIDS in Zambia under UBRAF funding of Country Envelope 2020 seek to support country level efforts for HIV prevention focusing on AGYP and Key Populations among other key areas. These interventions will directly contribute to global strategies and goals as follows:

- Target description: Populations left behind have achieved 95 95 95 targets across all provinces and key cities
- Fast-track: FTC 3
- Strategy result areas: SRA 3
- Sustainable development goals: SDG 3 SDG 4 SDG 5 SDG 10 SDG 11

The UNAIDS 2016-2021 Strategy The Fast Track Strategy to end HIV by 2030 identifies migrants as a key population alongside young people, sex workers, men who have sex with men, injecting drug users, transgender people and prisoners (Strategy Target 6: 90% of key populations including migrants have access to HIV combination prevention services by 2020). Other policy frameworks guiding interventions for this population are (i) Resolution on Refugees and Migrants United Nations General Assembly A/71/L.1, September 2016, (ii) Declaration of Commitment on HIV/AIDS United Nations General Assembly Special Session (UNGASS) on HIV/AIDS, 2001 (iii) Resolution on Health of Migrants 61st World Health Assembly, 2008 (iv) Regional strategies and plans National commitments including national health sector strategic plans, national HIV and AIDS strategic plans and so on.

Under the UNAIDS division of labour, the International Organization for Migration (IOM) is responsible for the health promotion and assistance to migrants and other mobile populations. It addresses HIV risks and vulnerabilities at all phases of migration. HIV prevention and research are key activities. IOM also provides direct HIV services to migrants in selected sites, including voluntary HIV testing and counseling for migrants and their communities, and treatment services including anti-retroviral therapy. IOM works closely with policymakers on a range of issues related to HIV and population mobility, including access to health services; regional and cross-border cooperation; and discriminatory legislation and practices, such as mandatory HIV testing. The term "migrant" may be used to discuss diverse populations, such as immigrants from a specific country or ethnic minority that is particularly visible, emigrants in a specific sector of overseas work, or mobile workers constantly on the move. Migrants face serious barriers in accessing HIV services due to stigma and discrimination they are subjected to and are also difficult to identify, follow-up and retain in health services mainly due to their migration status, in some instances, and to high mobility in others. At the same time, efforts must be made to reduce barriers to health services, for the benefit of migrants and their communities.

The National HIV/AIDS/STI/TB Council (NAC) of Zambia is currently revising their Strategic Framework to cover periods 2021 – 2023 with several program results. This work will contribute specifically to Program Result 4: Gender and Human Rights related barriers to service delivery, accessibility and utilization removed by 2023. According to UNDESA, there are over 170’000 migrants in Zambia of which 49% are female.
2. PURPOSE OF THE ASSIGNMENT:

The purpose of this consultancy is to strengthen HIV treatment guidelines for people on the move (Migrants, Truck drivers, KPs & Prisoners). Enhance capacity of health professionals to better support ART coverage for people on the move and pilot a framework for patient information sharing between countries. (Ref: Migrants, Truck drivers, Key Population (MSM, SWs and PWID/PWUD) and Prisoners.

Deliverables

The main deliverables for this consultancy are treatment guidelines for migrants in Zambia that are aligned to regional and international and national requirements as determined by Ministry of Health.
1. Revise Migrants and Mobile populations HIV Treatment Guidelines
2. Design Framework for Patient Information Sharing
And these are subdivided as per table below.

3. DATES AND DETAILS OF DELIVERABLES/PAYMENTS:

<table>
<thead>
<tr>
<th>Deliverable</th>
<th>Output</th>
<th>Days Worked</th>
<th>To be accomplished by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Inception report including final workplan and budget</td>
<td>Three (3) Days</td>
<td>Three working days after signing the contract</td>
</tr>
<tr>
<td>2.</td>
<td>Draft Protocol and Data Collection Tools</td>
<td>Fourteen (14) Days</td>
<td>Seventeen working days after signing the contract</td>
</tr>
<tr>
<td>3.</td>
<td>Facilitation of Consultation Meeting</td>
<td>Two (2) Days</td>
<td>Nineteen working days after signing the contract</td>
</tr>
<tr>
<td>4.</td>
<td>Final Guidelines</td>
<td>Three (3) Days</td>
<td>Twenty-Two working days after signing the contract</td>
</tr>
<tr>
<td>5.</td>
<td>Consultancy Progress Report 1</td>
<td>Submission</td>
<td>Submission</td>
</tr>
<tr>
<td>6.</td>
<td>Design Framework</td>
<td>Ten (10) Day</td>
<td>Thirty-Two Working days after signing the contract</td>
</tr>
<tr>
<td>7.</td>
<td>Facilitation Consultation Meeting</td>
<td>Two (2) Day</td>
<td>Thirty-Four Working days after signing the Contract</td>
</tr>
<tr>
<td>8.</td>
<td>Revise Framework</td>
<td>Three (3) Days</td>
<td>Thirty-seven working days after signing the contract</td>
</tr>
<tr>
<td>9.</td>
<td>Pilot the Framework</td>
<td>Fourteen (14) Days</td>
<td>Fifty-one working days after signing the contract</td>
</tr>
<tr>
<td>10.</td>
<td>Consultancy Progress Report 2</td>
<td>Submission</td>
<td>Submission</td>
</tr>
<tr>
<td>11.</td>
<td>Revision of Guidelines and framework</td>
<td>Three (3) Days</td>
<td>Fifty-Four working days after signing the contract</td>
</tr>
<tr>
<td>12.</td>
<td>Facilitation of Consultation Meeting</td>
<td>Two (2) Days</td>
<td>Fifty-Six working days after signing contract</td>
</tr>
<tr>
<td>13.</td>
<td>Final Versions Guidelines and Framework</td>
<td>Three (3) Days</td>
<td>Fifty-Nine working days after signing the contract</td>
</tr>
<tr>
<td>14.</td>
<td>Final Consultancy Report</td>
<td>One (1) Day</td>
<td>Sixty working days after signing contract</td>
</tr>
</tbody>
</table>

Total | 60 days |

Remuneration

The consultant will receive remuneration in lump-sum payments relevant to his/her qualification and in line with UN financial rules and regulations. Remuneration will be released in four installments subject to receipt and approval of deliverables by UNODC.
i. The first instalment, amounting to 20% of the total cost of the contract will be released upon signature of the contract and UNODC receipt and approval of the detailed inception report with a comprehensive budget and costed work plan.

ii. The second instalment, amounting to 20% of the total cost of the contract will be released upon UNODC receipt and approval of progress report 1 and deliverables 2, 3 and 4

iii. The third instalment, amounting to 40% of the total cost of the contract will be released upon UNODC receipt and approval of progress report 2 and deliverables 6, 7, 8 and 9

iv. The fourth and final instalment amounting to 20% of the total cost of the contract will be released following UNODC receipt and approval of the final documents as described in the deliverables 11, 12 and 13 and a final consultancy report.

Note: Payment is subject to approval of UNODC on all deliverables. Approval will only be granted based on quality assessment of deliverables submitted. A turn-around time of 7 working days should be factored in, for inputs from UNODC.

EVALUATION CRITERIA/EXPERTISE SOUGHT (REQUIRED EDUCATIONAL BACKGROUND, YEARS OF RELEVANT WORK EXPERIENCE, OTHER SPECIAL SKILLS OR KNOWLEDGE REQUIRED):

- Master’s degree or higher (i.e. PhD) in Medicine, Public Health or any other related field
- At least 10 years’ experience of working in the design of HIV services policy and guidelines
- A minimum of five (5) years’ experience working with key populations (ideally some of which will be in sub-Saharan Africa), an added advantage if with migrant populations;
- Experience in facilitating and coordinating stakeholder consultations
- Proficiency in verbal and written English Language. Knowledge of other UN Languages will be an added advantage.

APPLICATION REQUIREMENTS

Applications should be sent to Ms. Nellie MUKUKA: nellie.mukuka@un.org on or before the 28 September 2020, with subject line: “Consultant: HIV Treatment Guidelines for Migrants and Other Mobile Populations.

A completed application must include: Financial and technical proposal, Cover letter, CV, and Personal History profile (UNDP P11 Form). Personal History profile must include past work experiences, computer skills and include three contactable references. (incomplete applications will not be considered)

For enquiries, please contact Mujinga NGONGA at mujinga.ngonga@un.org

These TOR’s will also be available on UNODC website: https://www.unodc.org/southernafrica/en/consultancies-and-opportunities.html
Correspondence will be limited to shortlisted candidates only
UNODC reserves the right not to make an appointment.
CLOSING DATE FOR APPLICATIONS: 28 September 2020