**ANNEX : B**

**TERMS OF REFERENCE FOR INDIVIDUAL CONTRACTORS/ CONSULTANTS**

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| **PART I** | | |
| Title of Assignment | **Provide technical assistance to develop a survey protocol and associated tools to estimate the rates of HIV seroconversion among pregnant and breasfeeding mothers; and evaluate the related mother to child transmission rates, Kigali,** | |
| Category of the Consultancy | **National** | |
| Proposed level of Consultancy | **Senior level** | |
| Section | **Health** | |
| Location | **National** | |
| Duration | **2 months (44 working days)** | |
| Start date | **From:**01/07**/** 2021 | **To:**31/08/ 2021 |



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| --- | --- | --- | --- |
| **PART III: Signatures** | | | |
| **Function** | **Name** | **Signature** | **Date** |
| Prepared by | Kondwani Ng’oma – HIV & AIDS Manager |  |  |
| Reviewed by | Maharajan Muthu - Chief of Health |  |  |
| Reviewed by | Dominique Tuyirate - HR Specialist (OIC) |  |  |
| Approved by | Nathalie Hamoudi - Deputy Representative |  |  |

**Background and Justification**

Mother-to-child transmission (MTCT) of HIV is a significant contributor to the HIV pandemic, accounting for 9% of new infections globally. MTCT of HIV occurs when HIV is transmitted from a woman living with HIV to her baby during pregnancy, labour or delivery, or after delivery through breastfeeding. Without treatment, approximately 15–30% of infants born to HIV-positive women will become infected with HIV during gestation and delivery, with a further 5–15% becoming infected through breastfeeding. HIV infection of infants results in early mortality for many or creates a lifelong chronic condition that greatly shortens life expectancy and contributes to substantial human, social and economic costs.

Dual elimination of Mother to child transmission of HIV and Syphilis serves to improve a broad range of maternal and child health (MCH) services and outcomes. This achievement directly contributes to Sustainable Development Goals (SDGs) 3, 5 and 10 and to first billion of more people benefitting from universal health coverage of WHO GPW-13 which both aspire to ensure health and well-being for all, achieve gender equality and empower women and girls, and reduce inequalities in access to services and commodities.

The global community has committed to eliminating mother-to-child transmission (EMTCT) of HIV and syphilis as a public health priority. International and regional goals have been set, and countries are scaling up programmes towards EMTCT of HIV and syphilis. The processes and criteria to validate EMTCT of HIV and/or syphilis has been defined by WHO and partners to guide countries to apply a standard approach across a wide range of epidemiological and programmatic contexts.

In Rwanda, the UNAIDS estimates a mother to child HIV transmission of 6% which is much higher that the estimate from the program of 1.5%. The discrepancy may be mainly due lack of Rwanda specific data regarding mothers who drop off the program and those who get infected during pregnancy or breastfeeding period respectively, affecting the quality of estimates

Thus, the EMTCT national steering committee has recommended to conduct a deep study to estimate the HIV transmission rates among pregnant who receive ART services to reduce the MTCT, those who dropped out of the service, provide the size estimates for women with unmet need for PMTCT. Further, it is recommended to estimate the seroconversion among the pregnant and breastfeeding women as well as the vertical transmission from those mothers. These data will feed into the 2021 Rwanda HIV spectrum estimates.

***Main objective*:**

The main goal of this specific survey is to estimate the seroconversion rate among pregnant and breastfeeding women and evaluate the related vertical transmission.

***The specific objectives of survey are to:***

1. Estimate the overall seroconversion during pregnancy and breastfeeding period (24 months)
2. Assess factors related to the seroconversion during pregnancy and breastfeeding period
3. Identify and characterize individuals at high risk of seroconverting during pregnancy and breastfeeding period.
4. Estimate the vertical transmission for mother who seroconvert during pregnancy and breastfeeding period.
5. Outline recommendations to support review of national guidelines regarding re-testing schedule for pregnant and breastfeeding mothers

***Brief description of methods of survey:***

It is envisaged that the study will consists of two arms:

The first arm will collect baseline data, at the time of delivery, from mothers who were tested HIV negative during pregnancy, to estimate the seroconversion. We will use the routinely reported data into the HMIS to conduct a retrospective analysis of factors related to the HIV seroconversion.

The second arm will measure the seroconversion during the breastfeeding period. We will sample mothers, who were tested negative during labor, at different stages of vaccination and test them for HIV and Recency testing. Children of mothers who will be tested HIV positive will also be tested to measure the vertical transmission. Given that the breastfeeding time exceed the vaccination period, a cohort of mothers will be sampled at the last vaccination (15 months) and be followed up to 24 months and be retested for HIV. Similarly, children of mothers who will be tested HIV positive will also be tested to estimate the MTCT rate in this group

**Purpose of Consultancy**

UNICEF seek to hire consultancy services to provide technical assiatance to Rwanda Biomedical Centre in developing a quality survey protocol and associated study tools with an elaborate methodology, including to facilitate submission to Rwanda National Ethics Committee and obtaining ethical approval.

***Specific outputs and tasks will include the following:***

*Task 1.1*: Review of the national PMTCT program, available data and gaps in knowledge and data

*Task1.2*: Convene the EMTCT- TWG to present the inception report and workplan

*Task 1.3*: Develop the study protocol with clear methodology and study design and draw a representative sampling design

*Task 1.4*: Develop a detailed plan and associated budgets for implementation of the research protocol

*Task 1.4*: Submit and present survey protocol as well as implementation plan to PMTCT – TWG for technical validation

*Task 1.5*: Submit, present and obtain ethical approval from the Rwanda National Ethics committee.

**Work relationships:**

The consultant will work under the leadership of UNICEF HIV/AIDS Manager in close collaboration with the HIV Division Manager at RBC/MOH and other relevant partners including WHO, UNAIDS, PEPFAR

**Schedule of outputs and deliverables**

| **Specific Numbered Deliverables** | **Outputs / Tasks** | **Duration**  **(Estimated # of days or months)** | **Timeline/Deadline** | **Payment % on each deliverable** |
| --- | --- | --- | --- | --- |
| **Work Plan**  **Draft survey protocol and associated tools developed** | PMTCT programme data reviewed and summary report produced  PMTCT TWG convened to present summary report of data review and workplan  Survey protocols, tools drafted, submitted and presented at PMTCT TWG  Develop a detailed plan and associated budgets for implementation of the research protocol | 30 days/1 Month | End of month 1 | 50% |
| **Final survey protocols and tools inclkuding implemntation plan & associated budgets completed**  **Ethical clearance obtained from RNEC** | Finalise drafting study protocols, tools and implentation plan, incorporating inputs from PMTCT TWG  Submit, present survey documents, and obtain ethical clearance from Rwanda National Ethical Committee (RNEC) | 30 days/1 Month | End of month 2 | 50% |

**Desired competencies, technical background and experience**

1. *Education:* An individual with any of the following – Advanced degree (Masters or Higher) in public health, medicine, epidemilogy, biostastics, social and allied sciences
2. *Relevant work experience:* a minimum of 8 year’s experience in the Rwanda national HIV programme and public health sector in general.
3. *Competencies:* The individual must have ability and deep understanding of the PMTCT programme in Rwanda, with **demonstratable experience in scientific research and evaluation methods**.
4. *Languages needed:* English.

**Evaluation Criteria**

The Technical proposal is weighted at 70% and 30% for the Financial proposal.

**Please note that the final remuneration will be negotiated by HR.**

**Payment Schedule**

Payment is linked to agreed deliverables upon satisfactory completion and certification of deliverables by the supervisor*.*

**General Conditions: Procedures & Logistics**

* The consultant will work on his or her own computer(s) and use own office resources and materials in the execution of this assignment. The consultant fees shall be inclusive of all office administrative costs
* The candidate selected will be governed by and subject to UNICEF’s General Terms and Conditions for individual contracts.

As per UNICEF procedure on consultants and individual contractors, payment is made against approved deliverables. No advance payment is allowed unless in exceptional circumstances against bank guarantee, subject to a maximum of 30 per cent of the total contract value in cases where advance purchases, for example for supplies or travel, may be necessary.

**How to Apply**

UNICEF is committed to gender equality in its mandate and its staff. Well qualified candidates, particularly females are strongly encouraged to apply.

Interested candidates should send their complete Personal History (P11) form, which can be downloaded form (<http://www.unicef.org/about/employ/files/P11.doc>) or a CV/resume, as well as a cover letter explaining what makes them suitable for this consultancy.

Qualified and experienced candidates are requested to submit a letter of interest including a **Technical Proposal** outlining a road map for review and implementation timeline. In their letter of interest, candidates should highlight their previous work experience relevant to the assignment, the attributes that make them suitable, their proposed approach to the assignment.

Only successful candidates from the technical evaluation exercise will be contacted and requested to submit their most competitive Financial Proposal.

*UNICEF has a zero-tolerance policy on sexual exploitation and abuse, and on any kind of harassment, including sexual harassment, and discrimination. All selected candidates will, therefore, undergo rigorous reference and background checks.*

**Only shortlisted candidates will be contacted.**