

TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS AND CONTRACTORS

Title: Jamaica COVID 19 Vaccination uptake Research	Funding Code: 	Type of engagement <input checked="" type="checkbox"/> Consultant <input type="checkbox"/> Individual Contractor Part-Time <input type="checkbox"/> Individual Contractor Full-Time	Duty Station: Kingston
Purpose of Activity/Assignment: Background: <p>The COVID-19 vaccination effort in Jamaica is seriously challenged by low uptake of vaccines. Concerns about this have been expressed by various stakeholders, including the Ministry of Health and Wellness (MOHW). Low rates of vaccination threaten the government of Jamaica's goal to achieve herd immunity by 2022.</p> <p>The MOHW had outlined the delivery of COVID-19 vaccines to specific groups in the population in its January 2021 Interim Vaccination Implementation Plan which was presented to Parliament. The plan has "Demand Generation and Communication" as one of its operational components. Initially, JMD \$422 million was allocated for the development and roll out of a communication campaign to support the national vaccination programme but it was later announced that these funds would be re-allocated.</p> <p>As of October 19, 2021, a total of 350,483 persons in Jamaica have been fully vaccinated. A total of 571,498 persons have received only the first of two doses of the vaccine. This means that about 12 per cent of the total population has been fully vaccinated against COVID-19.</p> <p>Jamaica, like most developing countries, faces the very real challenge of procuring vaccines. However, there have also been reports in the media and from government officials indicating that some targeted/prioritized groups have not been as responsive as desired to the invitation to get vaccinated. There have been reports of vaccine hesitancy among teachers (JTA) and nurses (NAJ) the elderly failing to get vaccinated in the numbers targeted and reluctance among athletes' (footballers at the National Premier League level) to access vaccines made available to them. Equally alarming are reports from Jamaica's Chief Medical Officer that a number persons who have taken their first dose have failed to return for the second dose of the vaccine at the scheduled time.</p> <p>UNICEF had earlier this year initiated a social media listening dashboard for Jamaica, showing conversations/content about the COVID-19 vaccine. Very basic data has been collected by stakeholders like the Private Sector Organization of Jamaica (PSOJ) and the MOHW to determine how willing private sector employees and health workers were to get vaccinated, but there is an absence of in-depth research and analysis of levels of and reasons for vaccine hesitancy among Jamaicans and the levels of and reasons for accessing/not accessing the COVID-19 vaccines among various groups.</p> <p>UNICEF now requires a consultant to conduct research that is needed to inform demand generation and communication work to support vaccine efforts, including communication and engagement to encourage vaccine uptake</p>			

Objective

The overall objective of this consultancy is to conduct research to inform demand generation and communication work to support vaccine efforts, including communication and engagement to encourage vaccine uptake.

Key Functions, Accountabilities & Tasks

The consultant will review Jamaica's progress in vaccinating the targeted priority groups, assess available data on vaccine hesitancy and conduct a series of focus groups with targeted groups to provide a picture of Jamaicans' concerns, perceptions and attitudes towards COVID-19 vaccination. This will seek to identify factors driving/underpinning vaccine hesitancy among specific groups and in the wider populace, and to provide better insight on Jamaica's progress in reaching the targeted priority groups under its vaccination implementation plan. Given the urgency of the issue this will be a rapid assessment.

The consultant will:

1. Develop a **detailed workplan** of activities and actions with a projected timeline required for successfully completing the assignment.
2. Lead a critical **review of data** from UNICEF's social listening platform on COVID-19 and Jamaica and from specific surveys and data sources of 2020 and 2021 which looked at issues of vaccine hesitancy, including surveys from PAHO/WHO, the Johns Hopkins Center for Communication Programs COVID Behaviors Dashboard data on Jamaica, the RJR Gleaner Don Anderson poll (August/September 2021), and Nationwide News Network/Bluedot poll (August 2021).
3. Conduct a **desk review** of Jamaica's progress so far in vaccinating the target groups per parish, based on the numerical targets set for Phase 1 per targeted groups and parish distribution. The desk review will be based on the MOHW data on vaccination, surveys conducted by the MOHW and the private sector and the UNICEF-initiated social listening data.
4. Conduct **focus group discussions** (FGDs) with targeted groups on factors influencing uptake/lack of uptake of the COVID-19 vaccine. The consultant will conduct a minimum of twelve (12) FGDs focus groups with representatives of priority groups (teachers, health care workers, private sector workers, the elderly) and from the general public, including young people. The consultant will submit the design of the sample for the focus group and the assessment instruments to UNICEF for approval.
5. Collaborate with UNICEF Jamaica's social messaging programme for youth, "[U-Report Jamaica](#)", to conduct a poll of young people on factors influencing vaccine uptake and hesitancy based on questions from the focus group instrument. Poll would be conducted via automated messaging: SMS, WhatsApp and Facebook Messenger.
6. Prepare **preliminary and final reports** to detail and provide an analysis of the findings of the desk review and focus group discussions. This report should also include recommendations on critical areas to be addressed in engagement and communication around COVID-19 vaccination in Jamaica.
7. Prepare a **Power Point Presentation** with the main findings of the research.

Key Deliverables:

- Workplan and Methodology plan
- Desk Review report
- Preliminary Report
- Final report and PowerPoint presentation

Reporting line:

The consultant will report directly to UNICEF's Health Promotion Specialist (or her designate in her absence).

Child Safeguarding

Is this project/assignment considered as "[Elevated Risk Role](#)" from a child safeguarding perspective?

☐ YES ☒ NO If YES, check all that apply:

Direct contact role ☐ YES ☒ NO

If yes, please indicate the number of hours/months of direct interpersonal contact with children, or work in their immediately physical proximity, with limited supervision by a more senior member of personnel:

N/A

Child data role ☐ YES ☒ NO

If yes, please indicate the number of hours/months of manipulating or transmitting personal-identifiable information of children (name, national ID, location data, photos):

More information is available in the [Child Safeguarding SharePoint](#) and [Child Safeguarding FAQs and Updates](#)

Budget Year: 2021	Requesting Section/Issuing Office: Programme/Kingston Jamaica	Reasons why consultancy cannot be done by staff: Time and technical expertise to conduct a qualitative research																										
Included in Annual/Rolling Workplan: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please justify: Support to the MOHW's COVID 19 response is document in the HPP work plan.																												
Work Assignment Overview <table border="1"> <thead> <tr> <th>Tasks/Milestone:</th> <th>Deliverables/Outputs:</th> <th>Timeline</th> <th>Estimate Budget</th> </tr> </thead> <tbody> <tr> <td>Signed Contract</td> <td></td> <td>15/11</td> <td rowspan="4">35%</td> </tr> <tr> <td>Workplan and methodology</td> <td>Workplan and methodology</td> <td>22/11</td> </tr> <tr> <td>Report from Desk Review</td> <td>Report from Desk Review</td> <td>1/12</td> </tr> <tr> <td>FGD Assessment Instruments</td> <td>FGD Assessment Instruments</td> <td>1/12</td> </tr> <tr> <td>Preliminary Report</td> <td>Preliminary Report</td> <td>20/12</td> <td>35%</td> </tr> <tr> <td>Final Report</td> <td>Final Report+ Presentation</td> <td>20/1</td> <td>30%</td> </tr> </tbody> </table>			Tasks/Milestone:	Deliverables/Outputs:	Timeline	Estimate Budget	Signed Contract		15/11	35%	Workplan and methodology	Workplan and methodology	22/11	Report from Desk Review	Report from Desk Review	1/12	FGD Assessment Instruments	FGD Assessment Instruments	1/12	Preliminary Report	Preliminary Report	20/12	35%	Final Report	Final Report+ Presentation	20/1	30%	Consultant sourcing: <input checked="" type="checkbox"/> National <input type="checkbox"/> International <input type="checkbox"/> Both Consultant selection method: <input type="checkbox"/> Competitive Selection (Roster) <input checked="" type="checkbox"/> Competitive Selection
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If Extension, Justification for extension:																												
Supervisor: Novia Condell		Start Date: November 15, 2021	End Date: January 20, 2022																									

Minimum Qualifications required: <ul style="list-style-type: none"> Academic qualification: Postgraduate degree in communication or behavioural sciences; Research skills: Requisite skills for both qualitative and quantitative data collection and analysis and report writing. Experience in conducting qualitative research to inform social and behaviour change communication. Competencies: Good knowledge of and ability to apply qualitative research techniques, knowledge of and experience in using research findings to inform communication products and strategies, particularly communication strategies for social and behaviour change. Excellent analytical and written communication skills. <input type="checkbox"/> Bachelors <input checked="" type="checkbox"/> Masters <input type="checkbox"/> PhD <input type="checkbox"/> Other	Knowledge/Expertise/Skills required: <ul style="list-style-type: none"> At least 5 years work experience in qualitative research. Previous work experience within the Health sector will be an advantage.
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