**Appendix 1**

**TERMS OF REFERENCE (SAMPLE)**

**[Insert consultancy service required]**

**INTRODUCTION**

In June 2015, the Jamaica Country Coordinating Mechanism Proposal to the Global Fund received approval under the New Funding Model (NFM). The National HIV Programme of the Ministry of Health was nominated as the sole Principal Recipient (PR) for the NFM. The 3yr project which is scheduled to commence January 2016 will support:

* Improved access to treatment, care and support and improvements along the treatment cascade
* Scaling up Prevention among Key Populations
* Strengthening Community Systems
* Health Information Systems and Monitoring and Evaluation

The key populations to be targeted by the GF grant are MSM, Transgender and Sex Workers. While youth remain a national priority due to high risk behaviours identified in the 2013 KAPB such as: early sexual initiation, multiple sex partners, transactional sex, cross generational sex and low condom use the available data through the existing surveillance system showed consistently low HIV prevalence. This resulted in youth being excluded as a key population group under the proposal.

In order to address the data gaps and strengthen the adolescent component of national HIV response UNICEF supported an assessment of available evidence and national data in Jamaica. The purpose of the assessment is to support country teams in defining priority actions to accelerate and improve the quality of the national response to HIV among adolescents (ages 10-19). This will be implemented in three phases i.e. Phase 1: Rapid assessment; Phase 2: In-depth Analysis and Phase 3: Evidence-informed planning. The specific objectives of the UNICEF ‘ALL IN’ programme is to:

1. assess national HIV programme response for adolescents focusing on who, where and what will make maximum impact on new HIV infections and AIDS-related deaths;
2. analyze gaps and barriers towards effective coverage of priority programme interventions in priority locations; and
3. inform the development of national plans to accelerate coverage of priority programmes and improve data systems on adolescents

**Purpose and Objective**

The Consultant will provide technical assistance in monitoring and evaluation to complete key time-bound deliverables as follows:

1. UNICEF ‘All IN’ Programme **-** Facilitate technical validation of existing data on adolescent wellbeing and assessment of programme enabling environment to inform definition of priority populations, programmes and geographic settings to accelerate HIV results in adolescents.
2. Grant making preparation for USAID- PEPFAR and Global Fund joint implementation work plan.

**Scope of Work**

Under the supervision of the Executive Director the candidate will undertake the following duties:

1. UNICEF ‘All IN’ Programme

Facilitate technical validation of existing data on adolescent wellbeing and assessment of the relevant programmatic and policy areas to inform the definition of priority populations, programme strategies and geographic settings to accelerate HIV results among adolescents

1. Collate national studies and reports related to demographic, HIV epidemiologic and other adolescent issues
   * Collation of national and sub-national data set on HIV, adolescent sexual and reproductive health issues, education, and gender based violence, social protection and any other relevant adolescent issues.
2. Facilitate technical validation of data in the Adolescent Assessment and Decision Makers Tool (AADM) with members of the technical working group.
   * Facilitate technical review of the revised report in AADM including validation of pre-populated data set in the AADM. Where new data are provided as part of the validation, include the data source in the AADM
   * Guide priority setting on adolescent population groups, programmes and geographic areas and document the rationale for the decisions by the technical working group
3. Finalize the log frame for the HIV and Adolescent National Programme with comments from the stakeholders and technical working group including modalities for linkage with identified strategic programme opportunities for HIV and adolescent at national and sub-national level
4. Review and validate the indicators for the in-depth analysis of the HIV programme intervention(s) in the AADM with the technical working group to ensure alignment with the local context.
5. Provide rationale for data sources and support data collection from varied sources that sub-national disaggregated information in population based studies (HIV surveillance, DHS, AIS, MICS, behavioral survey etc.), abstraction of age-specific data from facilities and administrative records (e.g. HMIS, EMIS) and programme data.
6. Facilitate the technical working group to define key actions (in a micro-plan) to address the priority gaps and barriers
7. Support the National HIV Programme to convene sub-national multi-sectoral stakeholder validation meeting with representation from programme managers from relevant government agencies and implementing partners, and representative of adolescent networks and the UN joint team to review, endorse and advance the proposed actions through existing programmes.
8. Finalize the micro-plans with input from the sub-national technical working group
9. Prepare a report of the In-depth Analysis
10. Grant Making Preparation
11. Update the M&E plan to be in alignment with the strategies and performance targets outlined in the approved work plans.
12. Co-ordinate a stakeholder meeting to disseminate and garner feedback on updates to the M&E plan and finalize the M&E plan based on feedback received.
13. Review performance frameworks and map out the agency-specific targets for both USAID and GF for inclusion in the MoUs to be signed by SRs/SSRs and IEs.
14. Complete the programmatic component for M&E for the HIV annual report - calendar year 2012.
15. Review relevant programme reports to produce a brief HIV fact sheet that summarizes current epidemiological data that can be shared with Ministry officials and other stakeholders for inclusion in press releases, briefs, speeches etc.
16. Complete the Operational and Business Plans for the NHP for 2016/2017 and 2016-2019

**Reporting Relationship**

The Consultant shall report directly to the [insert name], to fulfill deliverables for grant making preparation.

**Remuneration**

The consultant will be paid at the daily rate of [insert amount] per day for [insert # of days]. The total cost of this Consultancy will not exceed J$[insert amount].

**DURATION OF CONSULTANCY**

This consultancy will be for [insert # of days/weeks/months] commencing [insert mm/dd/yy], or upon signing of contract, and will terminate [insert mm/dd/yy].

**Deliverables/Time Frame**

|  |  |  |
| --- | --- | --- |
| **UNICEF All In Initiative** | | |
| **Time Frame** | **Key Deliverables** | **Amount payable** |
|  | | JMD |
| **Deliverable #1 due August 28, 2015** | * Reviewed and validated data collation (within the assessment tool) * Update and Validate programme overview dashboard from AADM and address data gaps | $ |
| **Deliverable #2 due September 25, 2015** | * Validated data set for in-depth analysis in the AADM * Validated micro-plan from AADM * Analytic report of in-depth analysis including log frame for adolescent HIV and adolescent national programme | $ |
| **Deliverable #3 due October 30, 2015** | * Presentation of findings to All In National Technical Working Group * Consultancy report documenting the process, lessons learnt and recommendations for future application | $ |
|  | **TOTAL** | $ |

**Performance Standards**

 The job will be considered to have been satisfactorily performed when:

* Key Deliverables are produced within agreed time frames to required standards.
* Documentation of participatory process to include document review; regional and/or national stakeholder consultative meetings; preparation and presentation of draft plan to stakeholders for feedback and incorporation of feedback.

**Qualifications**

* **Academic qualification:** Postgraduate degree in public health, epidemiology, sociology and/or other social sciences; Experience in Programme Development and Strategic Planning and Experience in HIV and adolescent program development.
* **Research skills:** data collection skills for both qualitative and quantitative data, data analysis, and report writing. Experience in writing report of scientific standard. Communication and analytical skills mandatory. Familiarity with AADM and other framework for national programme assessment and planning
* **Competencies:** Good knowledge of current global research, local HIV epidemic, and/or initiatives on HIV and adolescent, ability to independently liaise with government; CSO; youth and adolescent networks and the UN Joint team

**Ownership of Output**

All outputs will remain the property of the [insert name of procuring entity), the Grant Sub-Recipient. However, the consultant will be formally acknowledged for his/her contribution in any publication arising from these outputs.