“Call for Proposals “

AN INTEGRATED BIO-BEHAVIORAL SURVEILLANCE STUDY AMONG TWO VULNERABLE GROUPS IN JORDAN: MEN WHO HAVE SEX WITH MEN (MSM) AND COMMERCIAL SEX WORKERS (CSWS)

Joint call for proposals: The National AIDS Program (NAP), Ministry of Health, Jordan and IOM—The United Nations Migration Agency, Jordan

Background

After reporting of the first case of AIDS in 1986 Ministry of Health (MOH) has established the national program to combat HIV/AIDS in Jordan. The NAP’s main aim is to limit the HIV and AIDS epidemic, gather statistics on reported cases of HIV/AIDS, coordinate with NGOs, community based organizations (CBOs), ministries, media, religious leaders, UN agencies and other key stakeholders and improve the situation of people living with HIV and mitigate its spread in Jordan.

Established in 1951, IOM (the UN Migration Agency) is dedicated to promoting humane and orderly migration for the benefit of all. The Migration Health Division (MHD) is one of the major pillars and has the institutional responsibility to oversee, support and coordinate the Organization’s provision of migration health services globally. These services aim to meet the needs of States in managing health-related aspects of migration, and to promote evidence-based policies and integrated preventive and curative health programs that are beneficial, accessible and equitable for vulnerable migrants and mobile populations. The Division provides technical guidance and policy advice and establishes partnerships with relevant governmental, multilateral, civil society and private entities in the domain of migration health. Through the Division’s different units, IOM addresses the needs of migrants and the public health needs of host communities; provides oversight for the Migration Health Assessment Program, which evaluates the physical and mental health status of migrants either prior to departure or upon arrival; promotes access to equitable and quality health services for migrants and mobile populations; and provides technical standards and program support in key thematic areas such as emerging and re-emerging diseases, HIV prevention and care, and psychosocial support.

The humanitarian crisis in the region drives risky, irregular migration in the Middle East and North Africa Region resulting in enormous displacement. The Middle East region is facing a series of crises. This has caused one of the world’s largest internal displacements and migration crisis in one region in a relatively
short span of time. The effect of the conflicts on the health systems of the concerned countries has been severe. The Middle East Response (MER) is an initiative that provides essential HIV, TB and Malaria services to key and vulnerable populations including refugees, Internally Displaced Persons (IDPs), women, children, other conflict affected populations in Syria, Lebanon, Jordan, Iraq and Yemen. In June 2016, the Global Fund identified MHD IOM as the Principal Recipient for its Middle East Response Grant (MER). The Middle East Response (MER) is a differentiated and innovative approach to ensuring that current HIV, TB and malaria grants from the Global Fund to these countries are implemented more effectively and efficiently. In the framework of MER, the Global Fund has approved to conduct an IBBS study for an updated knowledge of the situation of major key population in Jordan, in four governorates (Amman, Zarqa, Irbid, and Mafraq) where majority Syrian refugees live.

Jordan hosts a large number of refugees and one-third (2.9 million) of the total population (9.5 million) are either refugees or migrants. In terms of epidemiology, Jordan is considered as a low HIV epidemic country with an estimated prevalence rate of 0.02% among the general population, and may reach to an average of about 0.05% among the key populations (CSWs, MSM, injecting drug users) according to the last integrated bio-behavioral survey (IBBS) that has been implemented in 2012-2013 in three major cities. As of December 2017, the cumulative number of detected HIV/AIDS cases is 1,408 including 383 Jordanians of whom 129 (34%) died (NAP records). MSMs and CSWs are considered hidden populations in Jordan because of the illegal nature of their activities and the stigma associated with their lifestyles. Of particular importance is collecting baseline data for the existing vulnerable populations in the Jordanian community, namely MSMs and CSWs. At a low level of prevalence, such as the case in Jordan, it is essential to have bio-behavioral data on the "most at risk populations" (MARPs). The stigma that these populations suffer from prevents them from seeking the services that they highly need. This, in addition to the risky nature of their behavior, calls for an immediate assessment and intervention.

**Application instructions**

We are specifically encouraging submissions from partners who already cooperated with NAP to conduct this type of studies in the Jordanian context.

**Objectives of the study**

This study mainly aims to measure the extent to which HIV is affecting populations in Jordan who engage in behaviors that can expose them to HIV, providing an estimate of the prevalence of HIV/AIDS among two vulnerable populations: MSMs and CSWs. The combination of conducting a behavioral survey along
with a biological test for HIV will help us link the risky behavior to HIV status of participants. Prevalence of co-infection of Hepatitis B and Hepatitis C with HIV/AIDS will also be explored among study populations.

Activities of the grant

Following selection of the grant recipients, the research team or organization led by a decision-maker and in coordination with NAP, IOM and other stakeholders (UN organizations, I/NGOs and CBOs) will develop a protocol to conduct the IBBS study.

The grant places the decision-maker/ implementer in the position of principal investigator and leader of the research project.

The protocol will be developed through a coordination workshop convened by NAP/IOM. Collaboration of researchers / research institutions with the public health sector is encouraged.

The protocol is required to be submitted to and receive approval from a local-level ethics review committee (local or national level). IOM/NAP will work with the selected teams to refine the research methodology and, as a result, the protocol is likely to be modified during the course of the workshop. Subsequently, grantees will initiate data collection activities within their respective study sites. In parallel to data collection, all data will be entered in the identified software for statistical analysis in real time.

Technical assistance will be provided throughout the activities to ensure the production of valid and relevant research results and assist in the integration of results into the health program, policy and/or system.

Rules & Guidelines Eligibility

The principal investigator must be from a public health background with relevant experience in HIV (mainly in research among KPs e.g. IBBS studies, operational research focus group discussions, KAPs etc.). Funding may be used to cover the costs of researchers’ time, data collection and analysis and other related research activities. Applications must include a decision-maker (principal investigator) and can include a co-applicant as a researcher.

Evaluation Criteria:

Submissions received by the deadline will be evaluated on the following criteria:

- Demonstrated evidence of effective engagement to complete the study within the agreed upon timeframe with respect to providing high quality data.
o Support and readiness of the institution(s) to ensure successful implementation of the study;
 o Evidence of a strong technical understanding of the proposed subject matter;
 o Capacity to conduct key population related research;

How to Apply

Submit your application by a return email to iomammanmerjo@iom.int

When submitting your application please include the following information: name of research team or organization, organization contact information, and add CV of the principal investigator and co-investigator(s), brief on the institution and its HR capacity, and a detailed budget of proposed activities.

Budgets submitted should not exceed 100,000 USD

Activities & Timeline

Application deadline: 16 September 2018

Anticipated award and work start: 20 September 2018