

## **A Study “Ukrainian refugees in receiving countries: barriers, coping strategies and community engagement to enable effective access to HIV and TB care”**

September 6, 2022

### **TERMS OF REFERENCE**

For a Consultant to conduct a Study on provision of HIV and TB care to Ukrainian refugees in receiving countries.

We are looking for a **Social Researcher (Sociologist or anthropologist)**.

### **ABOUT THE ORGANIZATIONS**

**Regional Exert Group on Migration and Health in Eastern Europe and Central Asia** was established by civil society activists and researchers to develop an expert position that would help improve the quality of life of international migrants in the countries of the region. The aim of the group is to provide expertise to ensure continuous access of mobile populations to health services along the entire route from countries of origin to countries of destination in the EECA region.

The goals of the Regional Expert Group on Migration and Health are the following:

- To conduct research to assess the health situation of migrants and access to healthcare services;
- To present research results to the public and discuss evidence-based arguments with decision-makers, representatives of civil society, the academic community, and international organizations;
- To initiate and support expert dialogue to foster cross-border cooperation between sending and receiving countries of migration, as well as creation of bilateral and multilateral agreements in the area of mobile populations health;
- To create a common information space for cross-border cooperation.

REG, registered in Georgia, is a public non-profit association consisting of individual expert members, an Advisory Council, country representatives, as well as an Executive Committee that coordinates the activities of the REG. For details, pls. follow <http://migrationhealth.group/en/>

### **RESEARCH RATIONALE**

The neighboring countries have received 8,7 million Ukrainian refugees, most of whom are women and children. Over 3,8 million refugees registered for Temporary Protection or similar national protection schemes in Europe (UNHCR July 10, 2022).

Key populations among refugees such as substitution therapy clients, sex workers, men who have sex with men, trans people, people living with HIV or affected by tuberculosis (TB), in particular, pregnant women are particularly in need of a prompt support and assistance in accessing life-saving services that cannot be deferred. The humanitarian aid system of the receiving countries, including healthcare, had to be swiftly reprogrammed to provide emergency assistance, without having much enough time to analyze the situation.

HIV. Before the Russian invasion started in February 2022, there were an estimated 260 000 people living with HIV in Ukraine, 57% of whom were on antiretroviral therapy (UPHC 2021). An estimated 31,000+ people Ukrainian refugees with HIV have been able to access high quality healthcare in EU

countries (WHOa 2022). Although EU countries were prompt to include Ukrainian nationals into national health coverage, barriers related to stigma, language barrier, long routes and subsequent relocations remain (Agadjanian & Zotova, 2019; Kuran et al. 2020). Russia is one of the few countries in the world to keep an HIV residence ban for foreign nationals were international migrants and refugees living with HIV are particularly vulnerable. They have to look informal strategies to access treatment using transnational networks and informal actors (Kashnitsky 2020; Meylakh 2017).

TB. Ukraine has the fourth-highest TB incidence in the WHO European Region (TB notification rate was 40.1 per 100 thousand in 2020 which is on average 10 times the rate in Central and West Europe and the fifth-highest number of confirmed cases of extensively drug-resistant TB in the world (WHO, 2022). Since the Russian invasion on Feb 24, Ukraine's health-care system has come under increasing pressure amid relentless bombardment of cities and targeting of hospitals and health-care workers by Russian forces. The war in Ukraine could contribute to worsening an already serious tuberculosis epidemics in the country and overall, in Europe.

### **OBJECTIVES OF THE STUDY**

The proposed project aims are *to explore* specific barriers Ukrainian refugees living with HIV and affected by TB face in receiving countries and the coping strategies they have to use to access care, and *to asses* community engagement to enable effective access to HIV and TB care.

It is planned to use social determinants of health (WHO 2008), as a framework that analyzes circumstances shaped by the distribution of power and resources at global, national, and local levels, including migration as a social determinant of health by itself (Castaneda et al 2015).

### **EXPECTED TASKS OF THE STUDY**

- Identify barriers that Ukrainian refugees face in access to HIV and TB services in receiving countries (France, Germany, Poland, Lithuania, Moldova, and Georgia).
- Identify formal and informal coping strategies that refugees living with HIV or TB use to access relevant services in receiving countries.
- Understand and describe the role of stigma that refugees living with HIV and refugees affected by TB experience in receiving countries.
- Explore the role of formal and informal actors in helping to access HIV and TB care, including transnational actors, such as regional NGOs that operate hotlines and other online services.
- Explore the role gender plays in creating different vulnerabilities and barriers in accessing health services by refugees.
- To develop a brief analysis of legal regulation of residence and access to HIV and TB care will be conducted in the six receiving countries of the WHO Europe region: France, Germany, Poland, Lithuania, Moldova, and Georgia.

For each abovementioned question we will consider the following dimensions of research:  
- emergency measures of refugee support as well as the support in long-term integration.

This research will make a focus on the role of civil society in providing refugees with access to HIV and TB services. Comparative analysis and critical reflection on the implication of HIV and TB policy and health policy toward international migrants and refugees in several EU countries and in EECA will help formulate recommendations how to improve the practice of migrants' access to HIV and TB care in receiving countries in emergency situations and them progress towards a more inclusive healthcare systems and a universal health coverage (WHO 2019).

### **METHODS OF THE STUDY AND PRELIMINARY DISCRITION OF THE STUDY SAMPLE**

Semi-structured interviews will be conducted with 45 Ukrainian refugees and 15 service providers in 6 receiving countries - France, Germany, Poland, Lithuania, Moldova, Georgia and in Ukraine who will

be recruited using a combination of purposive and snowball sampling techniques (Dahlgren et al., 2004).

Key elements of the [TB Stigma Assessment](#) will be implemented in the methodology.

The main method for conducting an analysis of a legal regulation of residence and access to HIV and TB care will be desk-research.

### **Preliminary sample:**

For France, Germany, and Poland (11 for each country):

5 people living with HIV (at least three females),

2 people affected by TB

4 experts (doctor, legal specialist, 2 community/NGO specialist, 1 #helpnow hub expert)

For Georgia, Lithuania, and Moldova, (9 for each country):

4 people living with HIV,

2 people affected by TB

3 experts (doctor, legal specialist, community/NGO specialist)

For Ukraine: 10 experts who provide distance support to refugees (2 doctors, 2 NGO leaders, 2 state public health officer, 4 experts from regional organizations).

70 interviews in total.

The choice of countries is prompted by geographic distribution: Germany and France (West Europe), Poland and Lithuania (Central Europe), Moldova and Georgia (Eastern Europe) as well as by the scale of refugee flows.

## **EXPECTED OUTPUTS**

### **Part 1 of the project:**

Developed Guides for a Semi-structured interview for refugees and public health experts and NGO specialists

Developed draft version of the report, that should include following parts:

- a literature review
- an analysis of interviews
- a description of key barriers in access to HIV and TB care that Ukrainian refugees face in receiving countries
- a description of community response to enable effective access to HIV and TB care including emergency measures and long-term assistance
- a brief description of analysis of a legal regulation of residence and access to HIV and TB care
- Conclusion and recommendations

### **Part 2 of the project:**

Final version of the report with included Client's edits and comments (30-35 pages excluding annexes)

Presentation of the report at various platforms suggested by a Client.

## **PROPOSED TIMEFRAME**

**September 2022** – Development of a methodology and guides for the interviews.

**September – October 2022** – Field work

**November – December 2022** - Analysis of an interviews and drafting key points of the report

**December 2022** – Internal discussion within the methodology group

**January - March 2022** – Presentations of first results and public discussion: brief report and recommendations

**March 2023** - Final version of the report in English, translated version in Ukrainian.

**LANGUAGE OF THE REPORT:** The report is to be prepared in Russian, English or Ukrainian; the final version will be translated into Ukrainian.

### **ETHICAL PRINCIPLES**

All information and data collected in the course of the study should not be transferred to third parties or used in other studies or reviews until the publication of this report. After the publication, the use of data is possible only with a link to the report of the Regional Expert Group on Migrant Health in Eastern Europe and Central Asia (EECA) and TB People Ukraine.

The authors of the report retain the right to the name; the rights to the report and the results of the study will belong to the Regional Expert Group on Migrant Health (REG) in Eastern Europe and Central Asia (dissemination, translations into other languages, etc.).

### **TERMS OF PAYMENT**

Payment of the total amount of the contract is made in one or two payments as agreed with the Contractor.

### **EVALUATION CRITERIA FOR TENDER PARTICIPANTS**

Knowledge of qualitative data collection and analysis methods (40%)

Experience in analyzing publications and data on public health issues in EECA countries (20%)

Experience of interacting with vulnerable groups is desirable (20%)

Service cost (20%)

### **APPLICATION PROCEDURES**

Individuals, legal entities, self-employed who have the right to engage in relevant activities and are registered as single tax payers, can take part in the competition, by submitting tender proposals.

If you have a question or concerns, or to clarify if you are eligible to apply please consult via e-mail [abrosimova@gmail.com](mailto:abrosimova@gmail.com), before sending the full proposal.

The deadline for submission of the proposals is **September 20, 2022, 18:00** Kyiv time.

Please, submit a proposal by e-mail to Zinaida Abrosimova [abrosimova@gmail.com](mailto:abrosimova@gmail.com) (please, indicate in the topic of the email which position you are applying for).

The proposal should include:

- Description of the experience of the consultant/organization corresponding to the fulfillment of the terms of reference;
- CV;
- Price offer and the budget for the assignment, the cost of one day of the consultant's work (based on 8 working hours per day), an indication of the number of days to complete the tasks required for the implementation of the Study.