

2023 Knowledge Attitude Behaviour and Practice (KABP) Survey Terms of Reference

Background

The adult HIV prevalence in Jamaica stands at 1.5% with an estimated 32,617 PLHIV (revised UNAIDS estimates, 2019). At the end of December 2019, almost 16% of PLHIV (5,282 persons) were unaware of their status. In 2018, 1,165 new cases were reported to the MOHW; 53% were males. Most cases (n=992, 85%) were in the 20-59 age group with males accounting for 55% of the cases in this age group. Seventy-six percent (76%) of the cases were reported in the parishes of Kingston, St. Andrew, St. Catherine, St. James, Westmoreland and Clarendon.

Jamaica continues to have both a generalized and a concentrated HIV epidemic. The highest proportion of new cases were identified among key and vulnerable populations in 2019. These were: heterosexual males (43% of new cases), low risk women (32% of new cases), youth (16% of new cases), and persons who self-identify as MSM (10% of new cases), inmates (6% of new cases) and FSW (2% of new cases) (Ministry of Health Surveillance data, June 2019). The HIV prevalence among men who have sex with men has remained high for nearly three decades with the most recent 2018 survey indicating 29.6% (876 survey, 2018).

The National HIV/STI Programme (NHP) has since 1991 conducted KABP studies in Jamaica in an effort to understand the knowledge attitude behaviour and practices of the general population towards HIV/AIDS and among concentrated populations who practices high risk behaviour. The findings will assist in directing the Programme's prevention, treatment and enabling resources to key areas in tackling HIV/AIDS.

Key findings from the 2017 KABP survey indicate a need to scale up HIV prevention interventions and continue monitoring efforts. Among the cohort of persons 15-24 years, only 32.9% were able to correctly identify both ways of preventing transmission while rejecting major misconceptions. High risk behaviours such as multiple sex partnerships increased marginally with 45% of males and 16% of females reporting more than one sex partners in the last 12 months. There was a general decline in condom use with the main reason for non-use being loving and trusting their partner (51%).

Objectives

The objectives of the study are to:

1. Conduct a nationally representative knowledge attitude behaviour and practices survey with regards to HIV/AIDS in adults aged 15-49 years in Jamaica.
2. Provide data required to report on the National Focus Indicators
3. To provide empirical data that assesses the impact of current prevention efforts.
4. To inform the development of policies and programmes aimed at behaviour change in the general population.
5. Fulfil reporting requirements on Indicators for the general population and critical enablers and synergies with development sector for the Global AIDS Response Progress Report.
6. Fulfil the reporting requirements on outcome indicators of the Global Fund Project
7. Provide national and subnational estimates of the population size of key populations – Men who have sex with men, transgender persons, and female sex workers.

The Survey

The implementation of this study will be guided by established protocols. Protocols included a cross-sectional, household-based survey using self-administered questionnaires and face-to-face interviews assuring confidentiality of data. Stratified random sampling is used to select households and respondents that accurately represents the population distribution with respect to population size and density, age and gender.

Scope of Work

The consultant/ firm will be required to conduct a population-based KABP survey in Jamaica, based on the specific objectives stated in these terms of reference. The consultant's technical approach to the conduct of survey should include processes for: sampling, fieldwork, data capture and analysis and report preparation and dissemination.

The consultant will collaborate with the Ministry of Health and wellness, National HIV/STI/TB Unit and the National Family Planning Board.

Length of project

Pre-study and study implementation, data entry and preliminary analysis will be completed between January 9, 2023 – November 9, 2023

Qualifications and Experience

The lead Consultant(s) should possess at least a Master's degree in any of the following areas – Public Health, Social Sciences, Demography or a related discipline with an emphasis on quantitative research methods.

The consultant should have experience with managing and conducting national KABP surveys.

Essential Requirements

- The consultant(s) should be experienced in conducting health or social surveys within the Caribbean region
- Knowledge and application of research methods.
- Experience in the Statistical Package for Social Sciences.
- Excellent Project management skills
- Excellent reporting and technical writing skills
- Experience analysing national datasets
- Ability to work in a team
- Excellent interpersonal skills and ability to establish rapport with a range of stakeholders

Reporting Relationship

The Consultant will work under the overall guidance of the Senior Medical Officer (Acting) and Strategic Information Advisor, HIV/STI/TB Unit, Ministry of Health and Wellness and Global Fund Technical Support representative. Direct supervision will be given by the Director Health Promotion and Prevention, National Family Planning Board.

Delivery Schedule

Activity	Timeframe	Cost (J\$)
Technical proposal including work plan	January 23, 2023	Final calculation to be determined
Research proposal to be submitted for ethical approval	February 22, 2023	
Ethical approval letter received		
Data collection completed	August 7, 2023	
Draft report and separate detailed calculation of indicators listed in Appendix 1	September 7, 2023	
Final survey report (Electronic and hard copies) that addresses the comments of stakeholders	September 27, 2023	
Participation at dissemination meetings to present study findings to stakeholders	Annual HIV/STI Review – date to be determined	

Appendix 1: List of key GAM Indicators to be included in KABP survey and due February 24, 2024.

1. Percentage of young women and men aged 15–24 who correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission
2. Percentage of young women and men aged 15-24 who have had sexual intercourse before the age of 15
3. Percentage of adults aged 15–49 who have had sexual intercourse with more than one partner in the past 12 months
4. Percentage of adults aged 15–49 who report the use of a condom during their last 10 sexual intercourse
- 5.
6. Percentage of adults aged 15–49 who had more than one sexual partner in the past 12 months and who report the use of a condom during their last intercourse*
7. Percentage of women and men aged 15-49 who received an HIV test in the past 12 months and know their results
8. Proportion of ever-married or partnered women aged 15-49 who experienced physical or sexual violence from a male intimate partner in the past 12 months
9. Percentage of young adults, 15 to 19 years old, who have never had sex
10. Percentage of young women and men aged 15-24 reporting the use of a condom the last time they had sex with a regular or non-regular partner
11. Percentage of men and women aged 15-49 who received HIV testing in the last 12 months and who know their results
12. Percentage of people 15-49 years expressing accepting attitudes towards people with HIV/AIDS
13. Percentage of men and women aged 15 -49 who engage in transactional sex

Indicator –NHP Calculation	Male	Female	Total
<p>1. Percentage of young women and men aged 15–24 who correctly identify both ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission</p> <p>Numerator: # of respondents aged 15–24 who gave the correct answer to all five knowledge questions - one partner, 100% condom use, healthy looking person, mosquito bites, sharing food.</p> <p>Denominator: #Number of all respondents age 15-24</p>			
15-19			
20-24			
<p>1.1 Percentage of young women and men aged 15–24 who correctly identify that HIV transmission can be reduced by using a condom every time they have sex</p> <p>Numerator: Number of respondents/population who gave correct answer to question 1</p> <p>Denominator: Number of all respondents age 15-24</p>			
15-19			
20-24			
<p>1.2 Percentage of young women and men aged 15–24 who correctly identify that HIV transmission can be reduced by having sex with only one uninfected partner who has no other partners</p> <p>Numerator: Number of respondents/population who gave correct answer to question 2</p> <p>Denominator: Number of all respondents age 15-24</p>			
15-19			
20-24			
<p>1.3 Percentage of young women and men aged 15–24 who correctly identify that a healthy-looking person can have HIV</p> <p>Numerator: Number of respondents/population who gave correct answer to question 3</p> <p>Denominator: Number of all respondents age 15-24</p>			

Indicator –NHP Calculation	Male	Female	Total
15-19			
20-24			
<p>1.4 Percentage of young women and men aged 15–24 who correctly identify that you cannot get HIV from mosquito bites</p> <p>Numerator: Number of respondents/population who gave correct answer to question 4</p> <p>Denominator: Number of all respondents age 15-24</p>			
15-19			
20-24			
<p>1.5 Percentage of young women and men aged 15–24 who correctly identify that you cannot get HIV by sharing food with someone who is infected</p> <p>Numerator: Number of respondents/population who gave correct answer to question 5</p> <p>Denominator: Number of all respondents age 15-24</p>			
15-19			
20-24			
<p>1.6 Percentage of young women and men aged 15–24 who correctly identify that HIV transmission can be reduced by abstaining completely from all kinds of sex</p> <p>Numerator: Number of respondents/population who gave correct answer to question 6</p> <p>Denominator: Number of all respondents age 15-24</p>			
15-19			
20-24			
<p>2. Sex before the age of 15</p> <p>Numerator: # of respondents age 15 -24 report the age at which they first had sexual intercourse as under 15</p> <p>Denominator: Number of all respondents aged 15-24</p>			

Indicator –NHP Calculation	Male	Female	Total
15-19			
20-24			
3. Multiple Sex Partners in past 12 months Numerator: # of Respondents aged 15 – 49 who have had sexual intercourse with more than one partner in the last 12 months Denominator: # of all respondents aged 15 - 49			
15-19			
20-24			
25-49			
4. Multiple Sex Partners in past 12 months + condom use at last sex Numerator: # of respondents (aged 15-49) who reported having had more than one sexual partner in the last 12 months who also reported that a condom was used the last time they had sex Denominator: Number of respondents (15-49) who reported having had more than one sexual partner in the last 12 months			
15-19			
20-24			
25-49			
5. Proportion of ever-married or partnered woman aged 15 – 49 who experienced physical or sexual violence from a male intimate partner in the past 12 months Numerator: Ever married or partnered women aged 15-49 include women who have ever been married or had an intimate partner. An intimate partner is defined as a cohabiting partner, whether or not they had been married at the time. These women are asked if they experienced physical or sexual violence from a male intimate partner in the past 12 months. Those reporting at least one incident corresponding to any one of these items the last 12 months are included in the numerator Denominator: Total women surveyed aged 15-49 who currently have or had an intimate partner.			

Indicator –NHP Calculation	Male	Female	Total
15-19			
20-24			
25-49			
<p>6. Percentage of women and men aged 15–49 who report discriminatory attitudes towards people living with HIV</p> <p>Numerator: Number of respondents (aged 15–49) who respond no to either of the two questions - would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV? (yes, no, don't know/not sure/it depends) and do you think children living with HIV should be able to attend school with children who are HIV negative? (yes, no, don't know/not sure/it depends)</p> <p>Denominator: Number of all respondents (aged 15–49) who have heard of HIV.</p>			
15-19			
20-24			
25-49			
<p>6.1 Percentage of women and men aged 15–49 who answered no to the question "Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV?"</p> <p>Numerator: Number of respondents (aged 15–49) who respond no to question 1</p> <p>Denominator: Number of all respondents (aged 15–49) who have heard of HIV.</p>			
15-19			
20-24			
25-49			
<p>6.2 Percentage of women and men aged 15–49 who answered no to the question "Do you think children living with HIV should be able to attend school with children who are HIV negative?"</p> <p>Numerator: Number of respondents (aged 15–49) who respond no to question 1</p>			

Indicator –NHP Calculation	Male	Female	Total
Denominator: Number of all respondents (aged 15–49) who have heard of HIV.			
15-19			
20-24			
25-49			

Appendix 2. Populations size estimate

Table 1 - Population size for key populations at risk for HIV estimated by Network Scale-up in Jamaica, 2016

Regions		MSM	
		Age Group	Frequency
		Total	
	MSM	15-19	
Urban		20 – 24	
		Total	
		15 -19	
Rural		20 -24	
	Transgender	Total	
		15-19	
Urban	Women	20 – 24	
		Total	
		15-19	
Rural		20 -24	
	Female sex	Total	
		15 -19	
Urban	Workers	20 -24	
		Total	
		15 – 19	
Rural		20 – 24	

Evaluation Criteria

Evaluation Criteria					
	Max (%)	Marks Allotted			
Adequacy of the proposed technical approach, methodology and work plan in responding to the Terms of Reference (20)	20				
Financial Proposal (10)	10				
Key professional staff qualifications and competence for the assignment: [(i+ii+iii) x weight]		a	b	c	d
<i>(weight)</i>					
a. Team Leader/Manager 25%	$\Sigma(a-e) = 70$				
b. Research Assistant 20%					
c. Biostatistician 20%					
d. Other 5%					
Total (criterion ii) 70%					
Total Points (staff): x/70					
The number of points to be assigned to each of the above positions or disciplines shall be determined considering the following three sub criteria and relevant percentage weights:	30	a	b	c	d
i. General Qualifications Master's degree in Demography, Public Health, Social Science, or at minimum, another Masters eg. Statistics degree with emphasis on quantitative research methods (30%)					
2. ii. General Experience conducting surveys (45%)	50	a	b	c	d
Experience in Project Management (5%)					
iii. Experience conducting social/ behavioural/health- related surveys (20%)	20	a	b	c	d
<i>Individual Total (/100)</i>					
Total (1+2+3) Minimum required: 80 marks					