

UN VOLUNTEER DESCRIPTION OF ASSIGNMENT

TUVR000009--UNV HIV/STIs/TB Specialist

The United Nations Volunteers (UNV) programme is the UN organization that promotes volunteerism to support peace and development worldwide. Volunteerism can transform the pace and nature of development and it benefits both society at large and the individual volunteer. UNV contributes to peace and development by advocating for volunteerism globally, encouraging partners to integrate volunteerism into development programming, and mobilizing volunteers. In most cultures volunteerism is deeply embedded in long-established, ancient traditions of sharing and support within the communities. In this context, UN Volunteers take part in various forms of volunteerism and play a role in development and peace together with co-workers, host agencies and local communities. In all assignments, UN Volunteers promote volunteerism through their action and conduct. Engaging in volunteer activity can effectively and positively enrich their understanding of local and social realities, as well as create a bridge between themselves and the people in their host community. This will make the time they spend as UN Volunteers even more rewarding and productive.

General Information

Country of Assignment	Tuvalu
Host Institute	United Nations Development Programme
Volunteer Category	International Specialist
Number of Volunteer	1
Duration	6 months
Expected Starting Date	Immediate
Duty Station	Tuvalu [TUV]
Assignment Place	Family Duty Station

Assignment Place Remark

Family duty station

Living Conditions

Tuvalu, formerly known as the Ellice Islands, is a Polynesian island nation located in the Pacific Ocean, about midway between Hawaii and Australia. It comprises three reef islands and six true atolls, west of the International Date Line. Tuvalu has a population of 11,052 (July 2017 est.). Situated in Oceania, the total land area of the islands of Tuvalu is 26 square kilometres (10 sq mi).

The [GDP per capita](#) is **USD 3,083.62** (2016) World Bank and [Gross domestic product](#) is **USD 34.22 million** (2016) World Bank. The economy of Tuvalu is constrained by its remoteness and lack of economies of scale. Government revenues largely come from fishing licences (primarily paid under the South Pacific Tuna Treaty); ^[2] direct grants from international donors (government donors as well as from the Asian Development Bank); and income from the Tuvalu Trust Fund (established in 1987 by the United Kingdom, Australia, New Zealand).^[3]The lease of its highly fortuitous .tv Top Level Domain (TLD) also contributes revenue;^[4]

Life expectancy among the total population is 66.9 years, male - 64.7 years, female - 69.2 years (2017 est.)

The [Princess Margaret Hospital \(PMH\)](#) on [Funafuti](#) is the only hospital in Tuvalu. The Tuvaluan medical staff at PMH in 2011 comprised the Director of Health & Surgeon, the Chief Medical Officer Public Health, an anaesthetist, a paediatric medical officer and an obstetrics and gynaecology medical officer. Allied health staff include two radiographers, two pharmacists, three laboratory technicians, two dieticians and 13 nurses with specialised training in fields including surgical nursing, anaesthesia nursing/ICU, paediatric nursing and midwifery. PMH also employs a dentist. The Department of Health also employs nine or ten nurses on the outer islands to provide general nursing and midwifery services.

Accounting for around 30% of annual health expenditure, overseas referral and treatment of cases continues to be major challenges for the health service as high curative health services do compromise funding to preventive health programmes. Furthermore, overseas diagnostic and laboratory costs are also increasing. The internal referral of patients from outer islands is also a growing concern since costs involved continued to increase.

[Tuvalu has high TB burden with 20 TB cases of all forms diagnosed in 2016 making TB incidence of 207 per 100,000 population. The PMH has the TB isolation ward and TB laboratory. This is the only diagnostic and treatment centre in the Island country. The outer Islands refer any chest symptomatic case for diagnosis and subsequent hospitalised treatment.](#) The program has 1 Gene Xpert unit, which is utilized sub optimally for confirming diagnosis of TB patients. All diagnosed TB patient are hospitalized for at least 2 weeks of the Intensive Phase of treatment or depending on the sputum conversion. Contact tracing of smear positive patients is undertaken but IPT is not provided and records of IPT for children are not available. A CME was conducted in 2017 for all the medical officers and clinical nurses in the hospital on the end TB strategy, newer diagnostic tools and way forward for early diagnosis, patient centred approach for treatment and involvement of community volunteers. In 2018, Tuvalu received mobile X-Ray unit to ensure universal coverage with TB screening.

While Tuvalu has only a small number of people living with HIV (9 cases currently reported), three groups are vulnerable to infection: seafarers, transgender/men who have sex with men, and female sex workers. Our of 9 registered cases, none is receiving ARV treatment and have been lost to follow up. Health service capacity is limited and it is unknown how well these services meet the needs of these groups. It is estimated that there are between 20 and 40 transgender in Tuvalu; however, due to the hidden nature of the population, it is impossible to provide an accurate estimation of the number of men who have sex with men. It is estimated that there are at present up to 10 women involved in transactional sex. At present, there is only one facility capable of undertaking HIV tests in Tuvalu, which is at the Princess Margaret Hospital on Funafuti. There are no appropriate facilities for diagnosing and treating HIV on the outer islands, and lack of access to facilities has the potential for issues associated with underreporting (Ministry of Health of Tuvalu 2015). As in other nations of the

Pacific, there is a high rate of STIs in Tuvalu (Homasi 2007).

Frequent medical staff turnover is one of the main challenges the national health system faces. The HIV/STIs and TB Coordinators have changed multiple times in the last three years.

Currently, there is no HIV/STIs/TB Coordinator in the country. The Ministry of Health of Tuvalu requested support in clinical capacity building and mentorship of their staff in HIV/STIs and TB areas.

Assignment Details

Assignment Title UNV HIV/STIs/TB Specialist

Organizational Context & Project Description

UNDP is a lead agency in UNAIDS for addressing the dimensions of HIV and AIDS relating to human rights, gender and sexual diversity. In addition, UNDP contributes to public health and development partnerships through collaborations with the Global Fund to Fight AIDS, Tuberculosis and Malaria (the 'Global Fund'), Roll Back Malaria, Stop TB Partnerships, and special programmes on human reproduction and infectious diseases that disproportionately affect poor populations.

As part of its wider engagement with the United Nations, the Global Fund has partnered with UNDP since 2003 to ensure that grants are implemented and services are delivered in countries facing complex challenges. The partnership focuses on three closely linked areas of work: implementation support as interim Principal Recipient (PR), capacity development, and policy engagement. UNDP was nominated as the PR by the Country Coordinating Mechanism in December 2014 for the Multi-country Western Pacific grants (TB and HIV; and Malaria (Vanuatu)) (the 'Multi-country Programmes').

For the implementation of the Multi-Country Integrated HIV/TB Programme in 11 PICs UNDP partnered with Ministries of Health in each country through sub-recipient agreements. The Ministry of Health in Tuvalu has been one of UNDP's partners in Tuvalu since 2016. With signing of the new agreement for 2018-2020 this partnership will continue for three more years.

The HIV/STI/TB Medical Specialist in Tuvalu will support the Ministry of Health in effective communicable diseases response. Under the overall guidance and supervision of the Chief Public Health and the Director of Health the HIV/STIs/TB Specialist is responsible for support to communicable diseases programme in Tuvalu with focus on HIV/STIs/TB, provision of clinical and technical support as well as mentorship to the incoming national HIV/STIs/TB Coordinator whose recruitment is on-going.

The HIV/STI/TB Medical Specialist will function under the overall direction and technical guidance of the immediate supervisor at the Ministry of Health and will have a close working relationship with relevant professional and administrative staff in the UNDP Global Fund Team and with WHO Regional TB Advisor based in Suva, Fiji. The HIV/STI/TB Medical Specialist will work with the National Government to facilitate coordinated approaches in the implementation of the various projects and initiatives within HIV/STIs and TB Programmes.

Sustainable Development Goals

3. Good Health and Well-being

UNV Focus Area

National capacity development via volunteer schemes

Task description

This position requires a responsible medical/health professional to work in the development, coordination and implementation of efforts to decrease incidence of TB and HIV in Tuvalu through the provision of preventive measures, early diagnosis, treatment, care, management and support. The selected candidate serves as the lead for day-to-day program management; and a technical personal on TB and HIV. Under the general supervision of the Chief Public Health and the Director of Health, the incumbent exercises judgment and discretion to ensure program desired outcomes are achieved.

The role of the HIV/STI/TB Medical Specialist includes the following key activities and functions:

Facilitate the provision of comprehensive TB, Leprosy, HIV and Sexually Transmitted Infections (STI) services within the Tuvalu Ministry of Health (MoH).

Oversee the identification, assessment, screening and evaluation of contacts who may have been exposed to a person with TB, develop screening plans and strategies, evaluate screening results and ensure further screening is progressed as required in collaboration with TB/ HIV clinicians.

Facilitate TB case detection and diagnosis through active case finding.

Coordinate TB and HIV preventive activities such as outreach, training and workshops for key populations.

Develop HIV and TB workplan for UNDP multi- country grant and facilitate implementation of endorsed activities in the workplan.

Implement TB and HIV Strategies in accordance with the TB/HIV Guidelines for the Prevention and Control of TB and HIV and other relevant policies and guidelines.

Coordinate a case management model of care within the MoH TB and HIV Service.

Evaluate TB and HIV clinical services within the MoH and provide technical and strategic advice on the delivery of care for patients with TB, HIV/STIs.

Facilitate regular meetings of TB/HIV Advisory Group to ensure high quality technical and strategic support to the TB and HIV Service.

Assist with the management of patients with HIV/STIs and opportunist infections

Monitor and support adherence to ART and TB drugs

Ensure HIV screening to all TB patients and vice versa.

Data management

Collect, collate and enter data relating to cases of TB and HIV into the TB, HIV register and database.

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Use local surveillance data to inform needs based TB/HIV services for the local population.

Collaborate with the Public Health Unit to maintain timely and high quality local disease surveillance.

Collaborate with the Chief Public Health and Epidemiologist (through the regular technical supporting mechanisms) to ensure national and donor TB and HIV surveillance reporting requirements are met.

Submit timely reports to MoH senior management for endorsement, prior to submitting to donor agencies accompanied with supporting documents. Note: The Coordinator must submit their final end of contract report two weeks prior to their end of contract date.

Governance

Oversee the implementation of TB and HIV practice standards amongst healthcare workers.

Comply with standard MoH reporting requirements including in the event of a critical TB or HIV related incident, and liaise with the Chief Public Health, Director of Health and WHO TB Technical Advisor to plan and implement an appropriate response.

Critical incidents include:

identification of cases of multi drug resistant and extensively drug resistant TB

evidence of local transmission of TB identified through epidemiological or clustering of cases

adverse outcomes resulting from deviation from recognized best practice in TB care

non-adherence of patients with TB care, respiratory isolation or TB treatment

Identification of PLHIV who are not receiving ART

any other issue deemed by the TB/HIV Coordinator to require a coordinated response.

Seek advice/assistance from the Chief Pharmacist and the Drug and Therapeutic Committee in relation to the procurement, supply and distribution of all HIV or TB related drugs and consumables.

Participate in professional development relevant to TB/HIV prevention and control.

Furthermore, UN Volunteers are required to:- Strengthen their knowledge and understanding of the concept of volunteerism by reading relevant UNV and external publications and take active part in UNV activities (for instance in events that mark International Volunteer Day)- Be acquainted with and build on traditional and/or local forms of volunteerism in the host country- Reflect on the type and quality of voluntary action that they are undertaking, including participation in ongoing reflection activities- Contribute articles/write-ups on field experiences and submit them for UNV publications/websites, newsletters, press releases, etc.- Assist with the UNV Buddy Programme for newly-arrived UN Volunteers- Promote or advise local groups in the use of online volunteering, and encourage relevant local individuals and organizations to use the UNV Online Volunteering service whenever technically possible.

Results/Expected Outputs

Results/Expected Outputs

The development of medical staff capacity through coaching, mentoring and formal on-the-job training, when working with (including supervising) national medical staff and (non-) governmental counterparts, including Implementing Partners (IPs) in Tuvalu;

Enhancing the work of the Ministry of Health of Tuvalu in HIV/STIs/TB control.

Improving clinical management, surveillance and reporting on HIV and TB

Improving case finding and treatment adherence of HIV and TB patients

• The development of capacity through coaching, mentoring and formal on-the-job training, when working with (including supervising) national staff or (non-) governmental counterparts, including Implementing Partners (IPs); • Age, Gender and Diversity (AGD) perspective is systematically applied, integrated and documented in all activities throughout the assignment • A final statement of achievements towards volunteerism for peace and development during the assignment, such as reporting on the number of volunteers mobilized, activities participated in and capacities developed

Qualifications/Requirements

Required Degree Level Bachelor degree or equivalent

Education - Additional Comments

Medicine, Nursing or other health disciplines from a recognized university.

Postgraduate studies or training in public health, TB or epidemiology is an advantage.

Required experience 60 months

Experience Remark

Professional work experience in communicable diseases control. TB and/or HIV clinical and public health setting is an asset

Language Skills

- English (Mandatory) , Level - Fluent

Area of Expertise

- Healthcare administration Mandatory

Area of Expertise Requirement

Clinical and public health

Need Driving Licence No

Competencies & Values

- Accountability
- Adaptability and Flexibility
- Client Orientation
- Commitment and Motivation
- Commitment to Continuous Learning
- Communication
- Ethics and Values
- Planning and Organizing
- Respect for Diversity
- Working in Teams

Conditions of Service and other information

Condition of Service [Click here to view Conditions of Service](#)

Conditions of Service for International Specialist:

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The contract lasts for the period indicated above with possibility of extensions subject to availability of funding, operational necessity and satisfactory performance. However, there is no expectation of renewal of the assignment.

A UN Volunteer receives a Volunteer Living Allowance (VLA) which is composed of the Monthly Living Allowance (MLA) and a Family Allowance (FA) for those with dependents (maximum three).

The Volunteer Living Allowance (VLA) is paid at the end of each month to cover housing, utilities, transportation, communications and other basic needs. The VLA can be computed by applying the Post-Adjustment Multiplier (PAM) to the VLA base rate of US\$ 1,602. The VLA base rate is a global rate across the world, while the PAM is duty station/country-specific and fluctuates on a monthly basis according to the cost of living. This method ensures that international UN Volunteers have comparable purchasing power at all duty stations irrespective of varying costs of living. The PAM is established by the International Civil Service Commission (ICSC) and is published at the beginning of every month on the ICSC website <http://icsc.un.org>.

For example, kindly enter the link [Calculator](#)

In non-family duty stations that belong to hardship categories D or E, as classified by the ICSC, international UN Volunteers receive a Well-Being Differential (WBD) on a monthly basis.

Furthermore, UN Volunteers are provided a settling-in-grant (SIG) at the start of the assignment (if the volunteer did not reside in the duty station for at least 6 months prior to taking up the assignment) and in the event of a permanent reassignment to another duty station.

UNV provides life, health, permanent disability insurances as well as assignment travel, annual leave, full integration in the UN security framework (including residential security reimbursements).

UN Volunteers are paid Daily Subsistence Allowance at the UN rate for official travels, flight tickets for periodic home visit and for the final repatriation travel (if applicable). Resettlement allowance is paid for satisfactory service at the end of the assignment.

UNV will provide, together with the offer of assignment, a copy of the Conditions of Service, including Code of conduct, to the successful candidate.

Application Code

TUVR000009-2529

Application procedure

** Not yet registered in the UNV Talent Pool?*

Please first register your profile at <https://vmam.unv.org/candidate/signup>. Important: After creating your account, complete all sections of your profile and submit it. Then go to 'My Page' at <https://vmam.unv.org/candidate/mypage> and click on the 'Special Calls' hyperlink. Lastly, select the special call to which you would like to apply.

** Already registered in the UNV Talent Pool?*

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Please first update your profile at <https://vmam.unv.org/candidate/profile>. Then go to 'My Page' at <https://vmam.unv.org/candidate/mypage> and click on the 'Special Calls' hyperlink to select the special call to which you would like to apply.

Application deadline: 23 March 2018

Disclaimer

United Nations Volunteers is an equal opportunity programme which welcomes applications from qualified professionals. We are committed to achieving diversity in terms of gender, nationality and culture.

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