



## **Terms of Reference (ToR)**

### **Peer Contact Point**

#### **Bridging Care: Comprehensive HIV Services for Ukrainian Refugees in Poland**

### **Background**

Plan International is an alliance of 83 countries who act together with one ambition: “All girls standing strong creating global change”. To make this a reality, Plan International addresses the root causes of rights violations and inequalities, which are often rooted in power structures, stereotypes, policies, and the level of youth engagement. Community action and data collection to support advocacy work at national, regional, and local levels can bring about significant changes in policy and behaviour.

Plan International started operating in Poland in March 2022 to provide humanitarian help to the increased number of refugees arriving from Ukraine. Since the start of the conflict more than 1.3 million people have entered Poland through the Polish-Ukrainian border to seek asylum, and as of June 2023, over 1,6 million refugees registered for Temporary Protection. Plan International Poland collaborates with National partner organizations to exchange experiences and strengthen capacities. Through a localized partner-led approach, we focus on the key issues faced by the most vulnerable children, especially girls, among refugee and host communities.

The main programme areas of intervention include Child Protection, Education, Mental Health and Psychosocial Support, Sexual Reproductive Health and Rights, and Gender Equality & Inclusion. We work directly at the border to Ukraine as well as in major cities in Poland. As of March 2023, a total of 37,40

### **Objective of the Assignment**

The Bridging Care: Comprehensive HIV Services for Ukrainian Refugees in Poland project aims to improve access to free, confidential, and culturally sensitive HIV and sexual health services for refugees, migrants, people living with HIV, and key populations in Warsaw. Implemented by Plan International Poland, the project provides HIV/STI testing, consultations, PrEP/PEP services, referrals, and awareness-raising



activities, while addressing barriers such as stigma, discrimination, and limited access to healthcare. Based on findings from the project Midline Evaluation and Year One implementation experience, the project is piloting a Peer Contact Point role to strengthen outreach through trusted community networks and uptake of available services among populations that may not be reached through facility-based services alone.

The Peer Contact Point will support outreach and information-sharing about the project's free, anonymous HIV/STI testing, PrEP/PEP and STI consultations, and related services within Key Populations (KP) and migrant community spaces in Warsaw. The role is strictly informational and outreach-based, not clinical or case-level.

### Scope of Work

#### The Peer Contact Point will:

- Carry information about the Health Centre's services into KP and refugee/migrant community spaces in Warsaw
- Maintain and develop active community contacts that support outreach reach and trust
- Distribute project materials in physical and online community spaces
- Report back to the Plan International Poland Project Manager and SRHR/HIV Specialist on community feedback, observed needs, and uptake patterns
- Operate within the project's safeguarding standards and within the scope and boundaries set out in this ToR
- Distributing project leaflets, posters, and QR-code cards in KP venues (clubs, bars, saunas), cafés, community centres, Ukrainian-run businesses, and at events where the target population gathers
- Posting and cross-posting about the Health Centre services in online community groups (e.g. Telegram channels, Facebook groups, Instagram pages oriented to Ukrainian MSM, refugee networks, and broader KP communities in Warsaw)
- Holding informal in-person conversations at community events — Pride-related events, Ukrainian cultural events, KP gatherings,



events organised by migrant-led and refugee-led organisations — presenting the Health Centre services in peer-to-peer settings

- Networking with owners and managers of KP venues and Ukrainian community spaces to maintain regular distribution of materials
- Responding informally to community questions about service availability, location, opening hours, and what to expect at a first visit — without providing medical, counselling, or case-level advice
- Participating in short weekly check-ins with the Plan International Poland Project Manager and SRHR/HIV Specialist
- Submitting brief bi-weekly activity notes (template provided)
- The Peer Contact Point will not:
  - Operate inside the Health Centre
  - Have access to service-user data, medical records, or any client-identifiable information
  - Conduct follow-up with individual service users after their visits to the Centre
  - Provide medical, psychological, or counselling services
  - Represent Plan International Poland or its Partner Organisation in formal meetings without prior coordination
- These boundaries protect service-user confidentiality, keep the role within the project’s existing scope, and avoid clinical workflow integration with the Partner Organisation.

Deliverable	Frequency	Description
Activity note	Bi-weekly	Brief summary (template provided): channels engaged, organisations/institutions/venues involved, materials distributed, events attended, community feedback observed, issues to flag
Online check-in meeting	Weekly	15-30 min online check-in meetings with Plan International Poland Project Manager and SRHR/HIV Specialist



Deliverable	Frequency	Description
Mid-pilot review input	Once (after 6 weeks)	Reflection on what is working, what is not, and recommendations for the remaining pilot period
Final pilot review input	Once (after 3 months)	Reflection on the full pilot period and recommendations on continuation, adjustment, or discontinuation

### Qualifications and Experience

- Lived experience within at least one of the project's target key populations — i.e., men who have sex with men (MSM), people who use drugs (PWUD), sex workers (SW), and/or transgender people (TG) — and/or lived experience as a person living with HIV (PLHIV).
- Preferably with refugee experience from Ukraine and/or Ukrainian or Russian language proficiency.
- Active contacts and credibility within KP and/or refugee and migrant community networks in Warsaw.
- Comfortable speaking publicly about HIV prevention, testing, and PrEP/PEP in non-clinical, non-stigmatising terms.
- Reliable, organised, able to work independently.
- Polish or English language proficiency sufficient for cooperation with the project team.
- Formal qualifications are not required. Lived experience and community trust are the primary criteria.

### Level of Effort

<b>Duration</b>	3 months (pilot phase), with a feasibility review after 6 weeks and an option to extend for another 3 months based on review findings
<b>Level of effort</b>	Approximately 20 hours per month, organised flexibly around community events and outreach opportunities. Total over 3 months: approximately 60 hours.
<b>Location</b>	Community-based; no requirement to be present at the Health Centre (just to pick up printed materials)