

TERMS OF REFERENCE (ToR) – TL-AFSi GEDSI TRAINER

Position Title: GEDSI Trainer for TL-AFSi Project, under UK Health Security Partnership (UK-HSP)

Position Type: National (Open only for Timorise)

Contracting Entity: Instituto de Ciências da Saúde (ICS) Timor Leste, under Fundasaun da Graça Deus (FGD-ICS)

Project Consortium: Ministry of Agriculture, Livestock, Fisheries and Forestry (MALFF), *Autoridade de Inspeção e Fiscalização da Atividade Económica Sanitária e Alimentar* (AIFAESA), Ministry of Health, specifically National Institute of Public Health of Timor-Leste (INSP-TL), and Archipelago Biotechnology Indonesia, Ltd.

Duty Station: Dili, Timor-Leste (in-person training)

Contract Duration: 2 working days (consecutive, as scheduled during the Inception Phase, Months 3)

Reporting Line: The GEDSI Trainer will work under the direct supervision of the TL-AFSi GEDSI and Safeguarding Officer, in close coordination with the Project Management Unit (PMU) and the MEL Officer.

1. Project Background

1.1 The Problem: A Critical Gap in Food Safety and AMR Surveillance

Timor-Leste is a nation heavily dependent on imported food, with over seventy percent (70%) of its consumables coming from abroad. A significant and growing portion of these imports is frozen food—including poultry, seafood, meat, and vegetables—a commodity class particularly susceptible to carrying foodborne pathogens if cold chains are compromised. The convergence of Antimicrobial Resistance (AMR) and food safety presents a clear and present danger. Zoonotic pathogens such as *Listeria*, *Salmonella*, and *E. coli* in the frozen food chain can act as vectors for the silent pandemic of AMR, transferring resistant genes from the environment and animal sectors directly to human consumers.

Despite this risk, Timor-Leste currently lacks any systematic surveillance infrastructure for AMR in imported frozen foods. The national AMR surveillance system, centered on the National Action Plan (NAP-AMR), is confined to human clinical settings, leaving a dangerous blind spot in the food sector. This gap is particularly alarming given that frozen food products can harbour resilient pathogens that survive freezing temperatures, and the lack of cold-chain monitoring increases contamination risks. The population is unknowingly exposed to resistant pathogens, while the health system remains ill-equipped to manage resulting drug-resistant infections.

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1.2 The Three Interconnected Problems

The TL-AFSi project is designed to confront three specific, interconnected problems identified in Timor-Leste's National AMR Action Plan and Food Safety Master Plan:

1. **No Systematic AMR Surveillance in Imported Frozen Foods:** The absence of any systematic surveillance means the nation cannot detect, monitor, or respond to AMR threats entering through the food supply chain. This is a critical weakness in Timor-Leste's core capacity under the International Health Regulations (IHR) at Points of Entry.
2. **Fragmented Food Safety Legislation:** The foundational Basic Food Law (Decree-Law 5/2021) is not fully harmonized with international Codex Alimentarius standards or regional ASEAN frameworks. This creates legislative gaps for implementing modern, risk-based import control systems and standardized microbiological criteria for AMR pathogens. Border inspectors lack legally mandated, science-based protocols to intercept contaminated frozen food consignments.
3. **Critical Shortage of Technical Expertise:** The authority mandated for food control, AIFAESA, lacks full laboratory capacity and human resources for routine testing. While the Health Laboratory at INSP-TL provides ad-hoc support with basic microbiological tests (e.g., for *Salmonella*), it does not conduct Antimicrobial Susceptibility Testing (AST), meaning AMR in the food chain goes entirely undetected. Border inspection staff also lack training in risk-based inspection techniques specifically designed for frozen food commodities.

1.3 The TL-AFSi Project: An Integrated Solution

The **Timor-Leste AMR-Food Safety Nexus Initiative (TL-AFSi)** – under **HSP Grant Reference CG1-014326** – is designed to directly confront this multifaceted threat by establishing a foundational, integrated One Health system where none currently exists. The project is implemented as a single, integrated 24-month initiative that strategically combines core technical activities with a dedicated Peer Exchange component, ensuring that capacity building and partnership development are embedded from the outset rather than added as an afterthought.

Grant CG1-014326 operationalizes critical implementation gaps identified in Timor-Leste's National AMR Action Plan and Food Safety Master Plan, transforming policy aspirations into tangible operational capabilities. The integrated workplan delivers the following interconnected activities:

- **Establishing a systematic, risk-based sentinel surveillance system** for AMR and priority pathogens in imported frozen foods at four key Points of Entry: Tibar Port, Motaain, Motamasin, and Wini. This is done in collaboration with the Unit of

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Quarantine and Biosecurity (UQB) under the Ministry of Agriculture, Livestock, Fisheries and Forestry (MALFF). Through the Peer Exchange component of this grant, this activity is directly supported by peer-exchange partner to observe and adapt risk-based port surveillance SOPs, followed by virtual mentorship to contextualize these protocols for Timor-Leste.

- **Building sustainable national laboratory capacity** for pathogen isolation, Antimicrobial Susceptibility Testing (AST), Whole-Genome Sequencing (WGS), and other advanced analyses. This involves technology transfer, provision of small/portable equipment and consumables, and intensive hands-on training of Timorese laboratory scientists and technicians at AIFAESA and the Health Laboratory at INSP-TL. Through the Peer Exchange component of this grant, this capacity building is delivered via a technical attachment with peer-exchange partners to achieve proficiency in gold-standard methods for pathogen isolation and AST from frozen food matrices, alongside virtual and in-person WGS bioinformatics training with Northumbria University (UK).
- **Using generated evidence to harmonize existing regulations** and draft enforceable, science-based food safety regulations fully aligned with Codex Alimentarius and ASEAN frameworks, ensuring regional trade compatibility while protecting public health. The Peer Exchange component reinforces this by facilitating joint development of regionally-aligned SOPs and a draft WGS Data Integration Protocol, all of which feed directly into the project's policy drafting and validation workshops.

Under Grant CG1-014326, the Peer Exchange activities are not a separate grant but rather the essential capacity-building engine for the overall project. The 12-month structured workplan within the 24-month project timeline—comprising study visits, technical attachments, virtual mentorship, and an intensive bioinformatics workshop in Timor-Leste—is deliberately sequenced to ensure that learnings are immediately applied to project implementation. Tangible outputs such as the Draft WGS Data Integration Protocol, the customized Timor-Leste Lab Protocol, and the co-developed regionally-aligned SOPs are designed for immediate institutional adoption within the project's surveillance and regulatory streams. A dedicated integration phase ensures these outputs are synthesized into the overall workplan, while a co-created "Sustainability and Mentorship Plan" with all partner institutions guarantees ongoing support beyond the project period.

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1.4 Expected Outcomes

By strengthening core IHR capacities at borders and mandated laboratories, the TL-AFSi project will advance the specific Health Priorities of Food Safety (HP 21) and Combatting AMR (HP 11) outlined in regional frameworks. Expected outcomes include:

- The first-ever national baseline dataset on AMR prevalence and antimicrobial resistance patterns in the frozen food supply chain.
- A functional national testing capability embedded within existing laboratory infrastructure (AIFAESA/INSP-TL) for ongoing surveillance and outbreak response.
- Data-driven interception protocols for non-compliant imports that pose unacceptable health risks.
- Formally drafted evidence-based regulations submitted for government adoption through appropriate legislative channels.
- A trained cadre of laboratory technicians, border inspectors, and relevant officers equipped with standardized operating procedures, quality assurance protocols, and continuous professional development pathways.

1.5 Alignment with National and Regional Policies

The project directly operationalizes critical components of Timor-Leste's National AMR Action Plan (NAP-AMR) and Food Safety Master Plan that are currently missing from the public health architecture. It is explicitly designed to ensure compliance with the ASEAN Food Safety Policy and leverages the technical risk assessment framework of the ASEAN Risk Assessment Centre for Food Safety (ARAC). By anchoring legislative reform in both project-generated data and the benchmarks of the Codex Alimentarius, the project strengthens the legal foundation for a modern, science-based food safety control system, directly enhancing Timor-Leste's capacity to meet its regional obligations and contribute to ASEAN health security.

2. Overall Objective of the Position

To design and deliver a high-quality, participatory 2-day in-person training workshop on GEDSI integration and safeguarding principles for the TL-AFSi project team (PMU) ensuring that project implementation is inclusive, equitable, and compliant with HSP safeguarding requirements.

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3. Key Responsibilities

3.1 Pre-Training Preparation

- Review key project documents (this ToR, project summary, workplan) to contextualize GEDSI principles to the specific technical areas of AMR surveillance, frozen food safety, border inspection, and laboratory work.
- Develop or adapt training materials (slide decks, handouts, case studies, group exercises) relevant to the Timor-Leste context, including examples from the food safety and health security sectors.
- Prepare pre-training assessment tools (e.g., short questionnaire) to gauge participants' baseline knowledge of GEDSI concepts.
- Coordinate with the PMU to finalize the training agenda, participant list, venue logistics, and translation requirements (Tetum/English as needed).

3.2 Training Delivery

- Deliver interactive, participatory training sessions covering the following core modules:
 - Module 1: Foundational GEDSI concepts (gender equality, disability inclusion, social inclusion) and their relevance to AMR and food safety surveillance.
 - Module 2: Identifying and addressing barriers – how gender roles, disability, and social marginalization affect access to food safety information, participation in One Health workforce, and vulnerability to foodborne illness.
 - Module 3: Safeguarding against Sexual Exploitation, Abuse and Harassment (PSEAH) – definitions, reporting mechanisms, and responsibilities of project staff.
 - Module 4: Practical GEDSI integration – how to apply GEDSI principles to port sampling, laboratory training, stakeholder consultations, and policy development (using real project scenarios).
- Facilitate group discussions, case study analyses, and role-playing exercises to ensure practical understanding.
- Administer post-training assessment to measure knowledge gain and gather feedback.
- Ensure the training environment is accessible and inclusive for all participants (e.g., consider language, physical access, diverse learning needs).

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3.3 Post-Training Deliverables

- Submit a GEDSI Training Report to the Programme Leader, including:
 - Final training agenda and list of participants.
 - Pre- and post-training assessment results (anonymized).
 - Summary of key discussions, questions raised, and challenges identified.
 - Recommendations for integrating GEDSI into project MEL framework, recruitment, and activity implementation.
 - Participant feedback and suggested improvements.

4. Key Deliverables

- Training materials (slide decks, handouts, case studies, pre/post assessment tools) in English/Tetum (as appropriate).
- Delivery of 2-day in-person GEDSI and Safeguarding training workshop.
- Post-training assessment results and participant feedback summary.
- Final GEDSI Training Report.

5. Qualifications & Experience

Essential:

- Bachelor's degree in Social Sciences, Gender Studies, Development Studies, Public Health, Law, or a related field. A Master's degree is an advantage.
- Minimum 3 years of proven experience designing and delivering GEDSI and/or safeguarding training workshops, preferably for international development or public health projects.
- Demonstrated understanding of GEDSI principles, including gender mainstreaming, disability inclusion (social model of disability), and social exclusion dynamics.
- Proven knowledge of safeguarding principles, including PSEAH standards and reporting mechanisms.
- Strong facilitation skills with experience in participatory, adult-learning methodologies.
- Excellent written and verbal communication skills in English.
- Proficiency in Tetum (essential for effective training delivery with local participants).

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Desirable:

- Experience working with government counterparts (Ministries of Health, Agriculture) in Timor-Leste.
- Familiarity with One Health, food safety, or AMR-related projects.
- Existing network or experience with disability organizations or women's networks in Timor-Leste.
- Previous experience with FHI 360, HSP, UK-FCDO, or similar donor-funded projects.

6. Working Arrangements & Conditions

- Full-time during the 2 training days.
- Termination: The contract may be terminated immediately by FGD-ICS if the trainer fails to deliver the training on the agreed dates without valid justification, or if deliverables are not submitted to acceptable quality.
- Breach & Dispute Resolution: Any breach will first be resolved through friendly consultation; if unresolved, either party may submit the dispute to a court with jurisdiction in Timor-Leste.

7. Commitment to Safeguarding & GEDSI

The GEDSI Trainer shall adhere to FGD-ICS's safeguarding and PSEAH policies. The trainer must model inclusive, respectful behavior at all times and ensure that all training materials and activities are free from discriminatory content. Any safeguarding concern raised by participants during training must be immediately reported to the TL-AFSi Programme Leader using established protocols.

This TOR is Approved by:



Dr. Ali Budhi Kusuma, M.Sc., ALS., CFP.Med

(On behalf - TL-AFSi Project Management Unit Team)

Date: 10/06/2026

Consortium members:

