

**TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS AND CONTRACTORS**

Title:	Funding Code:	Type of engagement	Duty Station:
Investment case to expand community health committees to Regions 1,7 and 8		<b>Consultant (National)</b> Individual Contractor Part-Time Individual Contractor Full-Time	Georgetown, Guyana

**I. Background**

Community engagement remains an important tool in promoting community participation in health and for changing health seeking behaviours among people in a given population. Community Health Committees (CHCs) serve a community-based platform for sustained and adaptable community engagement. Since 1989, it was recommended globally that Community Health Workers (CHW) programmes have the support of a group composed of members of the community with active links to the Health Sector. A CHC is a committee that comprises of a group of community volunteers working along with the Community Health Worker (CHW) linked to the health facility within that community. CHCs serve to respond to barriers to health-related behaviour change, assist with health education and promotion activities to improve the community involvement in health-related activities, assist with communication to and from the health system and advocate for issues leading to improved health systems with the community.

In Guyana, the Ministry of Health piloted this initiative in 16 communities in Region 9 between 2017 to 2022. Initially, activities focused on maternal and child health issues, however, following the emergence of COVID-19 pandemic, CHCs expanded their focus and efforts beyond maternal and child health to include educating community members on the prevention of COVID-19 and promoting the uptake of the COVID-19 vaccine. In addition, with support from UNICEF, CHCs have further broadened their focus, adopting an integrated health approach to encourage health-seeking behaviors. CHCs now lead social and behavior change (SBC) activities in areas such as safe motherhood, child nutrition, immunization, sanitation, dengue fever and malaria prevention. This expansion was supported by focused capacity-building initiatives and SBC materials.

These Terms of Reference are for an individual Consultant to develop an investment case to provide evidence and financial analysis to support the expansion of CHCs to Regions 1, 7 and 8. The investment case will utilise an equity-focused and risk informed approach and will provide an in-depth financial and cost-benefit analysis for the expansion of CHCs to inform at scale programming. The Ministry of Health is partnering with UNICEF for the development of this investment case.

**II. Scope of Work:**

Under the guidance/ supervision of the Health Officer, the consultant is expected to provide technical support for the cost benefit analysis of CHCs and the expansion to other hinterland regions. The investment case will examine financial projections and risks associated with the establishment, monitoring and supervision of CHC in communities in Regions 1, 7 and 8 and a cost benefit analysis for establishing CHC in these regions. It will also consider inputs, achievements, and bottlenecks of the CHCs in Region 9 to provide a basis for analysis for expansion. The investment case will focus on the impact CHCs make on indicators for antenatal care, immunization and child nutrition.

**III. Methodology**

The development of this investment case will follow a structured, evidence-informed, and participatory approach to ensure that the expansion of Community Health Committees (CHCs) in Regions 1, 7, and 8 is

feasible, cost-effective, and aligned with national health priorities. This methodology outlines a pathway to strategically develop the investment case.

The methodology consists of the following key phases:

### 1. Situational Analysis and Needs Assessment

A comprehensive assessment will be conducted to establish the current state of CHCs and identify gaps and opportunities for expansion. This will involve:

- **Desk Review:** Analysis of existing policies, reports, and data on community health structures, health indicators, and prior CHC interventions in Guyana. This review will examine CHCs globally, successes and challenges, mode of implementation and funding mechanisms.
- **Stakeholder Mapping:** Identification of key actors, including government agencies, community leaders, healthcare providers, donors, and non-governmental organizations (NGOs).

### 2. Data Collection and Analysis

#### Primary data collection

A mixed-methods approach will be used to collect quantitative and qualitative data, ensuring a holistic understanding of the CHC landscape.

- **Key Informant Interviews:** Key informant interviews (KIIs) with representatives from central and regional MOH staff, RHOs, CHC members, community members to examine functions, activities, cost, funding, gaps, achievements, challenges and sustainability.
- **Focus Group Discussions (FGDs):** Engagement with community members to capture perceptions, experiences, and expectations regarding CHC operations and expansion.
- **Comparative Analyses:** Evaluate CHC models from similar contexts, in LAC, to identify good practices.

#### Secondary data Collection and data analysis

To support the investment case, a financial and economic analysis will be conducted, including:

- **Cost Estimation:** Determination of financial resources required for CHC expansion, including training, equipment, and operational costs.
- **Funding Source Identification:** Exploration of potential funding mechanisms, including government budget allocations, donor funding, and private sector partnerships.
- **Cost-Benefit Analysis:** Evaluation of the return on investment (ROI) of CHC expansion, demonstrating the long-term health and economic benefits.

### 3. Stakeholder Engagement, Consensus Building and Development of the Investment Case and Implementation Plan

To ensure sustainability and alignment with national and local priorities, the methodology will include:

- **Stakeholder Consultations:** Regular engagement with policymakers, local health authorities, and community leaders to gather inputs and build support.
- **Validation Workshop:** Present preliminary findings to stakeholders for feedback and refinement.

Using data from phase 2, a structured investment case will be developed, including:

- **Strategic Priorities and Objectives:** Defining clear goals for CHC expansion based on identified needs.

Finalization and Submission of the Investment Case

- **Drafting of Investment Case:** Develop a comprehensive investment using all findings.
- **Stakeholder Review and Endorsement:** Share investment case with stakeholders and request feedback before finalisation.
- **Finalize investment case and budget for expansion:** Submit final investment case and estimated budget for expansion.

#### IV. Deliverables and Payment Schedule

Payment of professional fees will be based on submission and approval of agreed deliverables. UNICEF reserves the right to withhold payment in case the deliverables submitted are not up to the required standard or in case of delays in submitting the deliverables on the part of the consultant. The Consultant will submit all deliverables in soft copy in Word document format and a PDF format.

Deliverable	No. of Days	% of Fee	Delivery Deadline
1. Inception report which will include: a. Findings of the desk review and stakeholder mapping b. Detailed workplan	10 days	15%	By May 30, 2025
2. Report on data collection and analysis	20 days	40%	By June 20, 2025
3. Final investment case	15 days	45%	By July 25, 2025

#### V. Profile of Consultant

These terms of reference are for an individual consultant. The following characteristics are required and desirable.

*Required:*

This consultancy is for a person who must possess the following:

- A master's degree in health economics, economics, public health, health policy, global health, or related areas with a foundation in economics.
- A minimum of 5 years of professional experience in field of health economics, economics or public health including conducting economic analysis of health systems, programmes and/or interventions in developing countries.
- Previous experience in research and/or operational work on health system/public health issues. A record of peer reviewed publications is an advantage.
- Previous experience working multiple stakeholders including international development partners, government agencies and civil society groups.
- Fluency in spoken and written English
- Good ability to write reports clearly and concisely.

- Strong organisational, and presentation skills

*Desirable:*

- Previous work experience with the United Nations System or other international development organizations and/or national governments.
- Previous experience in developing investment cases is highly desirable.
- Experiential knowledge of Guyana's sub-regional contexts.
- Proven experience in the design and methods for qualitative data collection is an asset.

### **Ethical considerations**

UNICEF supports data generation in full compliance with ethical considerations. No information, including data, that are reviewed for this assignment or data to which the Consultant is privileged during the assignment - as a direct or indirect result of being the Consultant for this assignment - can be shared and or be used by the Consultant neither can s/he approve the use of the whole or any part of it, for personal or professional purposes, without approval in writing from the Ministry of Health and UNICEF, jointly. The Consultant is required to disclose in writing any experience, of himself or his immediate family, which may give rise to a potential conflict of interest, and to deal honestly in resolving any conflict of interest which may arise during this assignment.

### **Application Requirement**

Interested persons are asked to apply by **April 28, 2025** online (link will be provided in Advertisement). Please ensure the application is completed thoroughly and the following is shared with the expression of interest. Successful candidates will be notified by the UNICEF Human Resources officer by the end of the second week after the application closes.

- A technical proposal for the assignment
- A financial proposal for the assignment

The technical proposal should include a CV, a report or publication, and other relevant information to ensure the quality of the presented proposal and minimize the disqualification.

The financial proposal should be a lump sum proposal and should include consultant's fee, travel costs and per diem, etc.

Individuals engaged under a consultancy or individual contract will not be considered "staff members" under the Staff Regulations and Rules of the United Nations and UNICEF's policies and procedures and will not be entitled to benefits provided therein (such as leave entitlements and medical insurance coverage). Their conditions of service will be governed by their contract and the General Conditions of Contracts for the Services of Consultants and Individual Contractors. Consultants and individual contractors are responsible for determining their tax liabilities and for the payment of any taxes and/or duties, in accordance with local or other applicable laws.

The selected candidate is solely responsible to ensure that the visa (applicable) and health insurance required to perform the duties of the contract are valid for the entire period of the contract. Selected

candidates are subject to confirmation of fully vaccinated status against SARS-CoV-2 (Covid-19) with a World Health Organization (WHO)-endorsed vaccine, which must be met prior to taking up the assignment. It does not apply to consultants who will work remotely and are not expected to work on or visit UNICEF premises, programme delivery locations, or directly interact with communities UNICEF works with, nor to travel to perform functions for UNICEF for the duration of their consultancy contracts.

UNICEF offers [reasonable accommodation](#) for consultants with disabilities. This may include, for example, accessible software, travel assistance for missions or personal attendants. We encourage you to disclose your disability during your application in case you need reasonable accommodation during the selection process and afterwards in your assignment.

**Child Safeguarding**

Is this project/assignment considered as “[Elevated Risk Role](#)” from a child safeguarding perspective?

YES **NO** If YES, check all that apply:

**Direct contact role** YES **NO**

If yes, please indicate the number of hours/months of direct interpersonal contact with children, or work in their immediately physical proximity, with limited supervision by a more senior member of personnel:

**Child data role** YES **NO**

If yes, please indicate the number of hours/months of manipulating or transmitting personal-identifiable information of children (name, national ID, location data, photos):

More information is available in the [Child Safeguarding SharePoint](#) and [Child Safeguarding FAQs and Updates](#)

<b>Budget Year:</b> 2025	<b>Requesting Section/Issuing Office:</b> Guyana Survive and Thrive	<b>Reasons why consultancy cannot be done by staff:</b> This task required specialized knowledge in the field of nutrition related strategic planning and policy setting.
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Included in Annual/Rolling Workplan: **Yes** No, please justify:

**Consultant sourcing:**

**National** International Both

**Competitive Selection:**

**Request for:**

**New SSA – Individual Contract**

Extension/ Amendment

<b>Advertisement</b> Roster			
<b>Single Source Selection</b> (Emergency - Director's approval)			
<b>If Extension, Justification for extension: N/A</b>			
<b>Supervisor:</b> Joann Simpson	<b>Start Date:</b> May 12, 2025	<b>End Date:</b> July 30, 2025	<b>Number of Days</b> 80 days
<b>Estimated Consultancy fee</b>			
Travel International (if applicable)			
Travel Local (please include travel plan)			
DSA (if applicable)			
<b>Total estimated consultancy costs<sup>1</sup></b>			
<b>Minimum Qualifications required*:</b>		<b>Knowledge/Expertise/Skills required *:</b>	
Bachelors <b>Masters</b> PhD Other		<ul style="list-style-type: none"> <li>See description under Section VI</li> </ul>	
<b>Evaluation Criteria</b> (This will be used for the <a href="#">Selection Report</a> (for clarification see <a href="#">Guidance</a> ))			
A) Technical Evaluation (e.g. maximum 75 Points)		B) Financial Proposal (e.g. maximum of 25 Points)	
- Education – 30 points - Experience – 45 points - Financial Proposal – 25 points			
<b>Administrative details:</b>			
Visa assistance required: <input type="checkbox"/>		<b>If office based</b> , seating arrangement identified: <input type="checkbox"/>	
<input checked="" type="checkbox"/> Home Based <input type="checkbox"/> Office Based:		IT and Communication equipment required: <input type="checkbox"/>	
		Internet access required: <input type="checkbox"/>	

