

## TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS AND CONTRACTORS

<b>Title:</b> International consultant to lead coverage assessment of the Integrated Management of Acute Malnutrition (IMAM) programme in Moyamba District	<b>Funding Code:</b>	<b>Type of engagement</b> <input checked="" type="checkbox"/> Consultant <input type="checkbox"/> Individual Contractor Part-Time <input type="checkbox"/> Individual Contractor	<b>Duty Station:</b>  Freetown
<p><b>Purpose of Activity/Assignment:</b></p> <p>The COVID-19 pandemic and Russia-Ukraine war have led to an unprecedented downturn in global economic activities. Moreover, the war has multiple implications for global markets and food supplies, causing significant food insecurity in many countries, and especially the low-income food import dependent countries. Sierra Leone continues to grapple with the effects of global resurgences of COVID-19 to trade and aid, higher debt burdens, and rising inflation, fuel and market prices. The current economic hardships and worsening food insecurity situation in the country hit hard the people's livelihood, increasing their vulnerability to illness and malnutrition, particularly among vulnerable population groups including children.</p> <p>Already in 2020, 4.7 million people in the country were food insecure of which 963,217 were severely food insecure and 3,790,029 were moderately food insecure<sup>1</sup>. During 2021, Food Consumption Score continued to deteriorate.<sup>2</sup> National Nutrition Survey 2021 indicated that more than a fourth<sup>3</sup> of children under-five years of age in Sierra Leone are stunted while approximately 62,486<sup>4</sup> are severely malnourished and are at higher risk of dying<sup>5</sup> if left untreated.</p> <p>Moyamba District is the fifth highest food insecure district in the country with a drastic increase in the proportion of food insecure population from 52 per cent in October 2015 to 66 per cent in 2020.<sup>6</sup> Food insecurity in Moyamba is pervasive throughout the district with 6 out of the 14 chiefdoms with more than 70 per cent food insecurity rate and 5 chiefdoms with 50 per cent – 70 per cent food insecurity rate.<sup>7</sup> While global acute malnutrition (GAM) rate in the district reduced from 4.3 per cent in 2017 to 3.5 per cent in 2021, severe acute malnutrition (SAM) rate have slightly increased from 0.4 per cent in 2017 to 0.7 per cent in 2021 which translates to 2,502 severely malnourished children aged 6-59 months needing immediate treatment and support for survival.</p> <p>In Moyamba, as with the rest of the districts in Sierra Leone, the Integrated Management of Acute Malnutrition (IMAM) programme is being implemented as a critical component of the Basic Package of Essential Health Services and recognized as a life-saving intervention which complements child health programme on Integrated Management of Neonatal and Childhood Illness (IMNCI), Integrated Community Case Management (iCCM), and Pediatric Emergency Triage, Assessment and Treatment (ETAT). Through the IMAM programme implemented by Ministry of Health and Sanitation (MoHS) with support from Action against Hunger and UNICEF, there are 70 health facilities providing outpatient treatment services and a district hospital providing in-patient treatment services in Moyamba. In 2021, 2,704 severely malnourished children in Moyamba were admitted to the IMAM programme. Out of the 2,704 children admitted, 2,465 were discharged of which 99.2 per cent (2,446) were cured, 0.2 per cent (4) defaulted, and 0.5 per cent (13) died. This performance meets the global SPHERE standards for cure rate at above 75 per cent, for defaulter rate at less than 15 per cent, and for death rate at less than 10 per cent. Despite this, numerous bottlenecks have been observed, documented, and experienced potentially affecting IMAM</p>			

<sup>1</sup> Statistics Sierra Leone (Stats SL) and World Food Programme (WFP). 2020. *Comprehensive Food Security and Vulnerability Assessment*. Freetown, Sierra Leone: WFP.

<sup>2</sup> World Food Programme (WFP). 2021. *Sierra Leone Food Security Monitoring System Report August 2021*.

<sup>3</sup> Stunting prevalence rate is at 26.2%, Source: Preliminary Results – Sierra Leone National Nutrition Survey 2021

<sup>4</sup> The combined severe acute malnutrition (cSAM) rate among children under-five years of age is 1.4% (Source: Sierra Leone National Nutrition Survey 2021). cSAM is an aggregated indicator defined as all cases of GAM by WHZ <-2, MUAC <125 mm, and/or bilateral pitting oedema.

<sup>5</sup> Olofin I, McDonald CM, Ezzati M, Flaxman S, Black RE, Fawzi WW, et al. (2013) Associations of Suboptimal Growth with All-Cause and Cause-Specific Mortality in Children under Five Years: A Pooled Analysis of Ten Prospective Studies. *PLoS ONE* 8(5): e64636. <https://doi.org/10.1371/journal.pone.0064636>

<sup>6</sup> Statistics Sierra Leone (Stats SL) and World Food Programme (WFP). 2020. *Comprehensive Food Security and Vulnerability Assessment*. Freetown, Sierra Leone: WFP.

<sup>7</sup> *Ibid*.

coverage and effectiveness such as: (1) low quarterly nutrition screening coverage at an average of 6 per cent of children 6-59 months; (2) stock-outs of nutrition therapeutic supplies in an average of 31 per cent of IMAM treatment sites (22 out of the 71) monthly; (3) poor referral system between outpatient and inpatient facilities with only 1 out of the 158 internally referred patients from outpatient facilities admitted in the in-patient facility; and (4) lack of supplementary feeding programme for the treatment of moderate acute malnutrition (MAM).

**Purpose and objectives:**

The purpose of this consultancy is to help improve the IMAM coverage and effectiveness in Moyamba through conducting a semi-quantitative evaluation of access and coverage (SQUEAC) of the IMAM programme in Moyamba.

Specific objectives include: (1) provide a realistic picture of the district IMAM programme coverage; (2) identify and investigate on the contextual factors affecting the programme coverage and effectiveness; (3) identify and investigate on boosters and barriers to service access and uptake; and (4) develop recommendations and action plans

An international consultant with adequate experience will lead the SQUEAC exercise in Moyamba district to collect data and evidence needed to improve the IMAM programme in the district.

**Scope of Work:**

- (1) Develop a SQUEAC protocol based on globally accepted standards and techniques following a consultative process with key stakeholders at the national and district levels
- (2) Secure ethical clearance for the exercise
- (3) Coordinate with Directorate of Food and Nutrition, Moyamba District Health Management Team (DHMT), and other relevant stakeholders to select qualified enumerators
- (4) Develop a training protocol for enumerators
- (5) Train enumerators on the assessment protocol and primary (quantitative and qualitative) data collection tools
- (6) Supervise and monitor primary data collection, review, and verification
- (7) Review secondary data (routine programme data and other available data)
- (8) Lead mixed methods data analysis with triangulation by source, validation exercise, recommendation and action plan development, and report writing

**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):

3 months

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

Work Assignment Overview			
Tasks/Milestone:	Deliverables/Outputs:	Timeline	Estimate Budget US\$
Design research protocol (literature review, data collection methodology and tools)	Deliverable #1: Final draft research protocol	01 - 30 Sep 2022	
Submission of research protocol for ethical review and secure ethical clearance	Deliverable #2: Ethical clearance	01 - 31 Oct 2022	
Develop and finalize terms of reference for recruitment of enumerators (as part of training protocol) and coordinate with MoHS on the recruitment process	Deliverable #3: Final training protocol		
Develop and finalize training protocol			
Train enumerators based on the training protocol	Deliverable #4: Training and field report	01 – 15 Nov 2022	
Lead and supervise data collection		16 Nov – 10 Dec 2022	
Data analysis (primary and secondary data), report writing, and validation meeting presentation	Deliverable #5: PPT for validation meeting	11 Dec 2022 – 10 Jan 2023	
Validation meeting, including discussion on recommendations and action plan		11 – 20 Jan 2023	
Finalization of report based on feedback from validation meeting	Deliverable #6: Final report	21 Jan – 10 Feb 2023	

<b>Budget Year:</b> 2022	<b>Requesting Section/Issuing Office:</b> Health and Nutrition Section – Sierra Leone Country Office	<b>Reasons why consultancy cannot be done by staff:</b> A specialized qualification and experience on coverage assessment using SQUEAC methodology is required which is not readily available for UNICEF Sierra Leone Health and Nutrition Officers and Specialists profiles. Given the intensity of the assessment activities, UNICEF staff who has other duties to perform do not have time to allocate to lead this exercise, but UNICEF staff will provide overall guidance and oversight to a selected consultant.	
<b>Included in Annual/Rolling Workplan:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please justify:			
<b>Consultant sourcing:</b>  <input type="checkbox"/> National <input checked="" type="checkbox"/> International <input type="checkbox"/> Both  <b>Consultant selection method:</b>  <input type="checkbox"/> Competitive Selection (Roster) <input checked="" type="checkbox"/> Competitive Selection (Advertisement/Desktop Review/Interview)		<b>Request for:</b>  <input checked="" type="checkbox"/> New SSA – Individual Contract  <input type="checkbox"/> Extension/ Amendment	
<b>If Extension, Justification for extension:</b>			
<b>Supervisor:</b>	<b>Start Date:</b> 01 September 2022	<b>End Date:</b> 30 March 2023	<b>Number of Days (working):</b> 105

<b>Estimated Consultancy fee</b>	
Travel International (if applicable)	2 round tickets: (1) Protocol submission to field data verification (2) Validation meeting
Travel Local (please include travel plan)	UNICEF provided vehicle for field trips, 30 days field trip to Moyamba
DSA (if applicable)	20 days, Based on UN DSA rate for Freetown
<b>Total estimated consultancy costs<sup>i</sup></b>	<b>USD 52,720 (including travel-related costs)</b>
<b>Minimum Qualifications required:</b> <input type="checkbox"/> Bachelors <input checked="" type="checkbox"/> Masters <input type="checkbox"/> PhD <input type="checkbox"/> Other  Enter Disciplines:  University Degree in Nutrition, Public Health, Epidemiology, Biostatistics, Social Sciences, Monitoring & Evaluation, or related discipline with the relevant technical knowledge in Survey Methodology, Research Methods etc	<b>Knowledge/Expertise/Skills required:</b> <ul style="list-style-type: none"> <li>• Extensive experience (5 years or more) in coordinating and managing nutrition surveys and assessments (both quantitative and qualitative) is mandatory. Experience in having led a coverage assessment using mobile devices for data collection is a must;</li> <li>• Knowledge in open-source digital toolkit for field data collection (e.g. Kobo Toolbox) is an asset;</li> <li>• Candidate must have proven managerial/team lead experience, knowledge of working in pandemic and experience in managing nutrition surveys and assessments in fragile contexts will be considered a plus;</li> <li>• Ability to effectively grasp and incorporate inputs/feedback from multiple contributors</li> <li>• Previous UNICEF, UN and/or INGO experience in a similar role is desirable</li> </ul>
<b>Administrative details:</b> Visa assistance required: <input checked="" type="checkbox"/> Transportation arranged by the office: <input checked="" type="checkbox"/> (for field purposes only)	<input type="checkbox"/> Home Based <input checked="" type="checkbox"/> Office Based: If office based, seating arrangement identified: <input checked="" type="checkbox"/> IT and Communication equipment required: <input type="checkbox"/> Internet access required: <input checked="" type="checkbox"/>
<b>Request Authorised by Section Head</b>       20 July 2022	<b>Request Verified by HR:</b>
<div> <div> <i>Approval of Chief of Operations (if Operations):</i>      </div> <div> <i>Approval of Deputy Representative (if Programme)</i>      </div> </div> <i>Representative (in case of single sourcing/or if not listed in Annual Workplan)</i>	

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<sup>i</sup> Costs indicated are estimated. Final rate shall follow the “best value for money” principle, i.e., achieving the desired outcome at the lowest possible fee. Consultants will be asked to stipulate all-inclusive fees, including lump sum travel and subsistence costs, as applicable.

Payment of professional fees will be based on submission 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

**Text to be added to all TORs:**

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.