

## TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS

Title:	Duty Station:
A National Consultant to conduct an evaluation of innovations to strengthen early detection, referral and treatment of child wasting	Home-based

## Purpose of Activity/Assignment:

To conduct an evaluation of interventions to strengthen prevention, early detection, referral, and treatment of child wasting implemented by the ICO-Nutrition section and the Ministry of Health (MoH)

## **Background:**

In Indonesia, one in ten (over 6 million) children under five are wasted (too thin for their height/length). Wasting represents a critical threat to a child's survival, growth, and development. This condition has the highest mortality rate amongst all forms of malnutrition, especially in its most severe form. Children with severe wasting are almost 12 times more likely to die than their healthy peers. Child wasting and stunting share common risk factors and can reinforce one another, with wasted children more than three times more likely to become stunted than their well-nourished peers.

Accordingly, the Government of Indonesia (GoI) has made substantial efforts to tackle wasting and stunting simultaneously. Specifically, the treatment of child wasting has been included as one of the main development indicators in the National Medium-term Development Plan 2020–2024. Subsequently, the Ministry of Health (MoH) has developed national targets to reach at least 60 per cent of primary health centres (Puskesmas) with child wasting treatment services by 2024 and a Presidential decree (no. 72) on stunting reduction acceleration, launched in 2021, has included a target to provide treatment to 90% of severely wasted children by 2024.

To accelerate Indonesia's efforts to reach the national and global targets on child wasting, UNICEF has been supporting the GoI introducing several innovative interventions aiming to strengthen prevention, early detection, referral, and treatment of child wasting through Family-led MUAC (Mid-upper-arm-circumference) – an approach to empower caregivers to be able to monitor child wasting at home with low literacy tool (MUAC tapes); and Early Childhood Development (ECD) Centres-led screening – a model to leverage ECD Centres' role as one of community based health platform to boost up early detection and referral of child wasting in selected districts across UNICEF focus provinces. Furthermore, in 2022, UNICEF supported the MoH to develop and rollout a combined curriculum and module training of Integrated Management of Childhood Illness (IMCI) and Integrated Management of Acute Malnutrition (IMAM) for primary healthcare workers.

Against this background, UNICEF is hiring a national consultant to conduct evaluations on the implementation of the interventions to strengthen prevention, early detection, referral, and treatment of child wasting implemented by the ICO-Nutrition section and the Ministry of Health (MoH) through the Family-led MUAC approach, ECD Centres-led screening child wasting, and integrated training course of IMCI and IMAM.

### Scope of Work:

The Consultant will be requested to conduct a qualitative evaluation of the following three interventions:

- 1) Empowerment of caregivers for monitoring child wasting at home with MUAC tapes through a Family-led MUAC approach in UNICEF focus provinces (Aceh, Central Java, East Java, East Nusa Tenggara, Papua, South Sulawesi, and West Nusa Tenggara)
- 2) Early detection and referral of child wasting in ECD Centres in East Nusa Tenggara, Papua, and South Sulawesi Provinces
- 3) Integrated blended training course of IMCI and IMAM in UNICEF focus provinces (Aceh, Central Java, East Java, East Nusa Tenggara, Papua, South Sulawesi, and West Nusa Tenggara)



The objectives of the assignment are to:

- 1) Assess the interventions' relevance, coherence, effectiveness, impact, and sustainability of results, including key results of cascade training from all key stakeholders involved.
- 2) Capture perceptions and perspectives from relevant government focal points and key actors on the interventions.
- 3) Provide evidence-based recommendations and best practices/lessons learned to inform policy and programmatic decisions, including the scaling-up of the interventions; and
- 4) As an integral part of the assignment, undertake case studies to help develop a comprehensive understanding of the impact of Family-led MUAC and ECD-led child-wasting screening.

Under the guidance of the UNICEF Nutrition Team and the Gol's Nutrition and Maternal Child Health Directorate (GiKIA), Ministry of Health, the Consultant, will be requested to:

- 1) Conduct desk review on existing documents (guidelines, curriculum and training modules and job aids, IEC materials, policy documents and reports) related to early detection and referral of child wasting at ECD Centres, Family MUAC and integration of IMCI and IMAM training.
- 2) Develop evaluation protocols and tools related to each evaluation topic.
  - Due to the nature of the interventions, the targeted respondents will be identified jointly with the MoH and UNICEF. The sample size should be sufficient to reach robust findings of the target population. Detailed total sample size will be discussed and agreed upon with UNICEF and the MoH.
  - Ethical considerations as part of the research protocol, the successful consultant will identify and outline an approach to addressing potential ethical issues in this assessment. In addition, the successful consultant in consultation with UNICEF shall submit Ethical Review Approval from a reputable national Institutional Review Board (IRB) entity.
- 3) Data collection, including consultations/interviews with key stakeholders at the national, province-districts, sub-districts/Puskesmas and village level, ECD's teachers, Posyandu Kader, and caregivers of children under five. Data collection will be done in person and online. The in-person data collection will target at least three provinces implementing all three interventions. Data collection in other provinces, and with key national stakeholders will be instead held online.
- 4) Gauge the impact of the interventions using a qualitative case study methodology for this work by drawing upon various data collection methods, consultations, and data triangulation.
- 5) Develop and share the preliminary results with the key stakeholders.
- 6) Revise and finalise the reports.

Supervisor:	Start Date:	End Date:
Blandina Rosalina Bait – Nutrition Specialist	1 July 2023	31 January 2024
Work Assignment Overview		
Tasks/Milestone	Deliverables/Outputs	Timeline Estimate Budget



1.	Prepare an inception report in	Draft inception report consisting of the	3 weeks	25%
1.	English (~15 pages, excluding annexes), including a detailed work plan with clear timelines and proposed tools, define indicators and sources of data.	following components submitted to UNICEF:  In-depth desk review of available documents and reports related to the interventions.  Evaluation protocol including methodologies, implementation plan, objectives, detailed sampling frameworks, data collection instruments, risk, and how to mitigate and handle. unintended consequences  Detailed work plan.	after the contract signed	23/0
2.	Final inception report in English (~15 pages, excluding annexes)	<ul> <li>Revise the inception report to incorporate consolidated comments from UNICEF and key government stakeholders.</li> <li>Ensure the report includes ethical review approval and findings from the initial desk review.</li> </ul>	5 weeks after the contract signed	
3.	Recruit and train qualitative research assistants	Qualitative research assistants training report, approximately 5 pages, excluding annexes.	6 weeks after the contract signed	
4.	Collect data through consultations/interviews with different stakeholders at the national and sub-national levels (hybrid with travel required to at least 3 provinces)	<ul> <li>Data collection conducted according to the agreed methodology and data analysis completed.</li> <li>Research findings, including transcripts of in-depth interviews and minutes of FGDs (where applicable) submitted to UNICEF.</li> </ul>	8 weeks after signing the contract	40%
5.	Develop and share the preliminary reports of the three interventions and case studies of two interventions (Family-led MUAC and ECD-led child wasting screening) with UNICEF and relevant government counterpart	<ul> <li>Prepare draft reports in English containing a robust analysis of the data collected, including clear and logical infographics, tables and charts (each innovation report ~15 pages, excluding annexes)</li> <li>Develop two collective case studies of Family-led MUAC and ECD-led child wasting screening in 3 provinces (one case study in 3 provinces)</li> <li>Each case study should be approximately 5 pages and</li> </ul>	16 weeks after signing a contract	20%



	summarise key findings and lessons learned.  • Prepare a draft PowerPoint presentation of the report and case studies in English and Bahasa Indonesia, summarizing the key findings/lesson learned and recommendations and present this to UNICEF's Nutrition team and other relevant government partners for their review and approval	
6. Revise and finalisation of the reports and case studies based on inputs	<ul> <li>Incorporate consolidated comments provided by UNICEF and relevant government in the final report and case studies (each intervention narrative report should be ~25 pages, excluded annexes)</li> <li>Produce a summary PowerPoint presentation and present this during a meeting with key partners (English and Bahasa Indonesia versions; each PPT should be ~12 slides)</li> <li>Prepare a briefing note should in simple and clear English and Bahasa Indonesia summarizing the key findings, lesson learned and recommendations.</li> <li>Prepare and submit raw data files, as required by UNICEF and following the format agreed by UNICEF.</li> </ul>	20 weeks after signing the contract
Minimum Qualifications required:  ☐ Bachelors ☐ Masters ☐ PhD ☐ G  Enter Disciplines:  Nutrition, Global/Public Health, or other	health, particular programme and millness  Expertise in the enutrition programme.  Strong research sk of mixed methods, to systematic revi	on Child nutrition and rly on child wasting anagement of childhood evaluation of health and



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administering surveys and facilitating
participatory data collection through
interviews and FGDs)
At least 5-7 years of relevant professional
experience in undertaking systematic
primary and secondary nutritional or health
data analysis.
Have experience working with UN agency
Communication and report writing skills
Written and spoken fluency in Bahasa
Indonesia and English is essential
Experience with remote working modalities
preferred