

TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS

Title: Malaria consultant to accelerate malaria elimination in Papua and NTT Provinces	Type of engagement <input checked="" type="checkbox"/> Consultant (ZCNT)	Duty Station: Assigned Province(s): Papua's Provinces Nusa Tenggara Timur (NTT) Province (Sumba Island) <i>Consultant should be based in the assigned region and will not have assigned desk or office space.</i>
Purpose of Activity/Assignment: The purpose of this consultancy assignment is to provide technical assistance in Papua's Provinces and NTT Province (Sumba Island) to support accelerating malaria case reduction and elimination efforts in these areas. These Consultants will be liaised with local government and based in the assigned districts with additional task to support nearby districts. These Consultants will be based in <ol style="list-style-type: none"> 1. Papua's Provinces: <ul style="list-style-type: none"> - Papua – Based in Yapen and supporting additional districts: Waropen, Biak Numfor and Supiori - Papua Selatan – Based in Merauke and supporting additional districts: Asmat, Boven Digoel and Mappi - Papua Tengah – Based in Timika and providing additional support for Nabire district 2. NTT Province, in Sumba Island – Based in Sumba Barat Daya and supporting additional districts: Sumba Timur, Sumba Tengah and Sumba Barat Districts 		
Background: Indonesia is aiming to achieve malaria elimination by 2030. Currently, there are 393 of 514 districts (76 per cent) declared malaria-free. To reach the elimination target by 2030, the country needs to accelerate efforts to have around 18-20 districts certified as malaria-free annually. In some districts, the progress is stagnant or even worsening, with an increasing number of malaria cases reported during the last five years. As part of the Country Program Action Plan (CPAP) for the cooperation between the Government of Indonesia and UNICEF for 2021 – 2025, UNICEF will provide support in accelerating malaria reduction toward elimination in Eastern Indonesia Provinces, especially in Papua and Papua Barat, where 93 per cent of malaria cases occurred. To date, malaria incidence is highest in Papua Provinces with Annual Parasite Incidence (API) 104,7 in 2023. Among its 42 kabupaten/districts in all regions, challenging districts including the nine very high endemic districts: Mimika, Mamberamo Raya, Keerom, Sarmi, Kabupaten Jayapura, Kep. Yapen, Waropen, Asmat, and Kota Jayapura. The API in these nice districts exceeded 100 cases per 1000 population in 2023. Papua region, achieved remarkable milestone, when South Sorong and Pegunungan Afrak Districts achieved malaria elimination status in 2022 and 2023. In NTT, Sabu Raijua and Belu had become the latest additions to the list of districts achieving malaria elimination status in 2023. At the moment nine of NTT's 22 districts have attained malaria-free certification. The number of high-endemic districts has decreased from three to two, with all located on Sumba Island. Notably, the total number of confirmed malaria cases in NTT also witnessed a decrease, dropping by 52% from 14,239 cases in 2022 (API 2.26) to 6,796 cases in 2023 (API 1.24). To speed up the reduction of malaria cases to be able to achieve the malaria elimination goal in these areas, UNICEF provided direct assistance to the provincial health offices (PHOs) and district health offices (DHOs) in Papua and NTT Provinces, aiming to directly influence policy development, program management and service delivery with the ultimate goal to protect children and pregnant women from the devastating effects of the malaria on this Island. The consultant for this assignment will need to work in close collaboration with local government and other partners to achieve this goal. Scope of Work: The consultant will focus on the following tasks during the assignment period:		

<ol style="list-style-type: none"> Ensuring access and compliance to standard malaria diagnosis and treatment protocol in public and private health facilities, including integrated program with maternal and child health (malaria in pregnancy program and integrated management of childhood illnesses) for the assigned areas. Providing technical assistance improve vector control and larvae source reduction – community-based management in the at the assigned areas. Providing technical assistance to strengthen malaria surveillance, data analysis, malaria recording and reporting through e-Sismal Ver 3.0 and SMILE apps at the assigned areas. Under the coordination of a health specialist or health officer, develop networks and encourage cross-sectoral collaboration to accelerate malaria case reduction for the assigned districts by improving enabling environment to ensure malaria elimination achievement through Behaviour change communication (BCC) and community engagement at the assigned areas. Support and initiate innovation including developing of knowledge products in the form of policy briefs, fact sheets, etc., for policy advocacy and evidence-based decision- making in accelerating malaria reduction toward elimination at the assigned areas. 			
Supervisor: <ol style="list-style-type: none"> Papua's consultants will be supervised by Health Officer, Papua Field Office. NTT's consultant will be supervised by Health Officer, Kupang Field Office. 		Start Date: August 2024	End Date: July 2025 (1 year)
Work Assignment Overview			
Tasks/Milestone	Deliverables/Outputs	Timeline	
<ol style="list-style-type: none"> Providing technical assistance to Improve quality case management and malaria treatment compliance and assessment of districts readiness toward malaria elimination progress using self-assessment tools 	Report on province/districts capacity on improving standard malaria diagnosis and treatment protocol in public and private health facilities, including integrated program with maternal and child health (malaria in pregnancy program and integrated management of childhood illnesses): (1) distribution and accessibility of malaria laboratory, (2) quality of malaria diagnostic, and (3) functionality of malaria laboratory quality assurance both in privately- and publicly owned laboratories (4) Situation and status of malaria logistic. (5) Report on district readiness and progress toward elimination. The report will be approximately 20 pages length, excluding annexes.	Aug 24	20%
<ol style="list-style-type: none"> Providing technical assistance to improve vector control and larvae source reduction – community-based management in the at assigned areas 	Report on province/districts capacity on vectors and larvae source management mapping activities, community-based malaria prevention & vector control interventions. The report will be approximately 20 pages length, excluding annexes.	Oct 24	20%
<ol style="list-style-type: none"> Facilitate the improvement of e-Sismal Ver 3 implementation and logistic recording in SMILE, data analysis and program management for health staffs at district and health centers for the assigned districts. 	Report on e-Sismal Ver 3 and SMILE technical support; data analysis, logistic and malaria situation at the assigned areas, including the integration program malaria and maternal & child health (malaria in pregnancy program and integrated management of childhood illnesses) . The report will be approximately 20 pages length, excluding annexes.	Dec 24	20%

United Nations Children’s Fund

<p>4. Facilitate malaria advocacy; cross-sectoral collaboration; and development of local regulation toward malaria elimination</p>	<p>Policy briefs or fact sheets produced and disseminated for the strategic stakeholders for the assigned district. The policy briefs will be approximately 10 pages length, excluding annexes.</p>	<p>Mar 25</p>	<p>20%</p>
<p>5. Development of policy brief, malaria factsheet and malaria innovation for elimination at local level and development of Final report and updated malaria situation towards elimination.</p>	<p>Report and producing of Policy briefs or fact sheets produced and disseminated for the strategic stakeholders for the assigned district. Final report and update analysis on malaria elimination interventions status and recommendation for future action for the assigned districts. The report will be approximately 40 pages length, excluding annexes.</p>	<p>May 25</p>	<p>20%</p>
<p>Minimum Qualifications required: <input checked="" type="checkbox"/> Bachelors <input type="checkbox"/> Masters <input type="checkbox"/> PhD <input type="checkbox"/> Other Enter Disciplines: Medical doctor or degree in health/health related subject.</p>	<p>Knowledge/Expertise/Skills required:</p> <ul style="list-style-type: none"> • At least 3 years of experience in the field of public health. • Experience with government, health systems and administration regulations • Experience in malaria program • Experience in Eastern Indonesia is an advantage • Pro-active and resourceful, effective communication skills in negotiating and liaising with counterparts and partners. 		