

United Nations Children's Fund

TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS AND CONTRACTORS

Title of consultancy: Individual international consultancy on technical assistance to the Ministry of Health and Medical Industry of Turkmenistan (MoHMI) in conducting a Turkmenistan National Micronutrient Survey (TNMS). Survey Expert.	Funding Code WBS: 4360/A0/06/882/002/003 SC 189903	Type of engagement <input checked="" type="checkbox"/> Consultant <input type="checkbox"/> Individual Contractor Part-Time <input type="checkbox"/> Individual Contractor Full-Time	Duty Station: Turkmenistan Location: Ashgabat
Consultant sourcing: <input type="checkbox"/> National <input checked="" type="checkbox"/> International <input type="checkbox"/> Both Consultant selection method: <input type="checkbox"/> Competitive Selection (Roster) <input checked="" type="checkbox"/> Competitive Selection (Advertisement/Desk Review/Interview)		Request for: <input checked="" type="checkbox"/> New SSA – Individual Contract <input type="checkbox"/> Extension/ Amendment	
If Extension, Justification for extension: NO			
Supervisor: Health and Nutrition Specialist	Start Date: August 10, 2022	End Date: July 10, 2023	Number of Days (working) 38 days
Purpose of Activity/Assignment: <p>Turkmenistan pays high attention to maternal and child health and nutrition. There have been tangible efforts to fight iron deficiency and anemia over the past two decades leading to the introduction and nation-wide implementation of flour fortification and universal salt iodization (USI) programmes by the Government. The flour fortification and salt iodization interventions has been started in early 2000 by the Government and have gradually achieved universal coverage. Since 2008 all premium and firsts' grade flour produced in the country has been fortified with iron and folic acid, according to the decree of President of Turkmenistan. In 2004, the country was certified as having achieved universal salt iodization.</p> <p>The country implemented and evaluated a National Nutrition Strategy for 2013-2017, adopted Sustainable Development Goal related to nutrition (SDG2) and recently adopted a new National Nutrition Strategy for 2020-2025.</p>			

According to MICS data (2016), the prevalence of chronic malnutrition (stunting), that reflects the long-term exposure of a child to repeated infections and inadequate nutrition and diets, has decreased from 19 per cent in 2006 to 11 per cent in 2016.

However, the data on anemia, iron deficiency, folic acid deficiency and Vitamin A deficiency are outdated as the last study of anemia among women and children was conducted in 2011. On average, the anemia prevalence in the country was at 44.3% in 6-59 months old children; 52.9% - in pregnant women; 56.5% - in non-pregnant women of reproductive age; and at 38.3% - in men. Although the causes of high rates of anemia are not fully understood in Turkmenistan, the hypothesis is that inadequate coverage of iron/folic acid supplementation for women and children, gaps in exclusive breastfeeding and timely introduction of complementary feeding practices, poor dietary diversity in early years and during pregnancy and for women at reproductive age due to poor practices and also socio-economic reasons in general and lack of adequate hygiene and sanitation could be among the main contributing factors.

Since due to logistic and feasibility reasons the anemia components were not included in the current MICS, to ensure all relevant data is collected while the quality of the data is also preserved, it was decided to conduct a standalone survey. Nevertheless, the design of this anemia survey to the extent possible and scientifically feasible can be linked to the current round of MICS6, this may help some causality analysis of the findings.

Given the significant impact of micronutrient deficiencies on the wellbeing of children and women and considering the fact that the current evidence on micronutrient deficiencies is outdated, undertaking a national micronutrient survey is critical. The national nutrition survey will support the policy makers to understand how the flour fortification programme and supplementation have worked; it will also provide fresh and applied evidence needed for policy advocacy and programming to address the priority micronutrients.

UNICEF office in Turkmenistan as per signed work plans for 2021 and 2022 is committed to support the Ministry of Health and Medical Industry (MoHMI) to undertake this survey and is looking to contract Survey Lead, Survey Expert and Data Support Specialist to work closely with MoHMI, the Scientific and Clinical Centre of Mother and Child Health (MCH) and the assigned National Laboratory, to provide technical assistance in designing and implementing this nutrition survey.

Scope of Work:

Purpose of Assignment:

The survey will assess the nutritional and micronutrients status and the coverage of the wheat flour fortification and salt iodization programs. The results of the survey must be representative to national and sub-national levels of all 6 regions.

This will include designing the methodology, data collections, analyze and reporting current situation of micronutrient deficiencies and some contributing factors in Turkmenistan which will guide evidence-based policy and strategic recommendations, with focus on;

The TNMS will be nationwide in scope, and will collect data about four target groups:

1) households, 2) children 6-59 months of age, 3) non-pregnant women 15-49 years of age, and 4) pregnant women. The specific aims for the various target groups are:

1. To measure the prevalence and severity of anemia in children 6-59 months of age, non-pregnant women 15-49 years of age, and pregnant women based on blood hemoglobin concentrations;
2. To assess the prevalence and severity of iron deficiency in children 6–59 months of age and non-pregnant women 15-49 years of age by measuring serum ferritin adjusted for the presence of inflammation as indicated by elevated levels of C- reactive protein (CRP) and/or alpha-1-acid glycoprotein (AGP);
3. To assess the prevalence and severity of folate deficiency in children 6–59 months of age and non-pregnant women 15-49 years of age measuring serum folate levels;
4. To assess the prevalence of vitamin A deficiency of children 6-59 months of age and non-pregnant women 15-49 years of age by measuring serum retinol or retinol- binding protein;
5. To assess the prevalence of vitamin D deficiency among children 6–59 months of age and non-pregnant women 15-49 years of age using serum 25-hydroxy-vitamin D concentrations;
6. To estimate the median concentration of urinary iodine in samples of pregnant women and non-pregnant women 15-49 years of age;
7. Measure the household coverage of adequately fortified wheat flour and iodized salt.
8. Estimate the minimum dietary diversity among children 6–23 months of age and non- pregnant women 15-49 years of age using the WHO's infant and young child feeding (IYCF) guidelines and FANTA's module of minimum dietary diversity in women (MDD- W), respectively.

The Intended users of the Survey are: the Ministry of Health and Medical Industry, UNICEF and all line ministries, local governments, and academia which will use the results of the Survey to gain more knowledge on situation with anemia and other nutrients deficiency prevalence and to improve their advocacy and practical actions in development nutrition specific and nutrition sensitive interventions.

Scope of Work/ Work Assignments:

The Survey is implemented in 2 phases. First phase was completed in 2021.

1st phase resulted in development of the comprehensive survey protocol, tools, supply procurement support and sampling. All documents are agreed with the Ministry of Health and Medical Industry.

The purpose of this assignment is to provide technical support to the MoHMI in conducting of the 2nd phase of the Turkmenistan National Micronutrient Survey (TNMS) to guide the survey implementation with all required technical assistance in preparation, training, implementation, technical supervision, quality assurance, analysis and reporting of the survey and supervise national partners for data collection and reporting as well as during implementation of the survey.

Specific Tasks:

A Survey Expert will be closely working with Survey Lead and Data Support Expert to ensure full technical assistance to the Ministry of Health and Medical Industry in implementation of the TNMS.

1. **Support** Team Lead in recruitment of the survey team and their capacity building and training and pilot testing the protocol/ methods.
2. **Support survey training and pilot testing:** Team leaders, interviewers, phlebotomists and laboratory technicians are given training on all relevant survey steps. As such, this will include both laboratory testing and procedures about obtaining written informed consent for survey participation, questionnaire administration and data upload, blood sampling and processing, cold chain during transportation, etc. A two-day pilot testing will be conducted in 4 clusters (2 urban, 2 rural), which are not part of the actual sampling frame. During the pilot testing all field procedures including household selection, interviews, anthropometry, phlebotomy, labeling and specimen processing will be practiced.
3. **Support Implementation of the Survey** (to be initiated after the clearance from the Ethic Committee and mobilization of the financial resources) with national partners, including national staff training and Field Work with planning for data collection and supervision of data collection throughout the survey.
4. **Guide**, in cooperation with Survey Lead and National Survey coordinators, **the field data collection** to ensure compliance to protocols for data and specimens' collection; Conduct monitoring of quality of field work, supervise biological specimen collection adherence according to SOPs and support analysis of summary statistics; Together with local staff, perform the serum assay in accordance with test instructions, from serum samples collected during the national survey;
5. **Support Data Analysis** in cooperation with Survey Lead and National Survey coordinators.
6. **Support development of the Survey Report.** Work with team to prepare draft report on the findings, present in a validation workshop. Contribute to development of a final Survey report based on the feedback provided by UNICEF and implementing partners. Contribute to development of a presentation of survey findings and a two pager for easy communication of findings.

7. **Contribute to validation workshop and report finalization:** the draft report and the main findings will be presented in a validation workshop. Following the workshop, feedback will be incorporated into the draft report the final report will be generated.

Work Assignment Overview

The consultancy is covering the period of August 10, 2022 – July 10, 2023 (38 days).

Day to day supervision will be provided by the Health and Nutrition Specialist of the UNICEF Turkmenistan Country Office. Additional guidance and lead will be provided by the Deputy Representative.

The schedule of the TNMS and distribution of days by tasks and corresponding deliverables are suggested below with an assumption on the COVID-19 impact to the in-country visit and field work.

Tasks/Milestone:	Deliverables/Outputs:	Timeline:	Estimate Budget:
1. Support Team Lead in recruitment of the survey team and their capacity building and training and pilot testing the protocol/ methods.	Recruitment support provided.	By November 1, 2022 2 working days	
2. Support survey training and pilot testing: Team leaders, interviewers, phlebotomists and laboratory technicians are given training on all relevant survey steps. As such, this will include both laboratory testing and procedures about obtaining written informed consent for survey participation, questionnaire administration, blood sampling and processing, cold chain during transportation, etc. A two-day pilot testing will be conducted in 4 clusters (2 urban, 2 rural), which are not part of the actual sampling	Survey participants (field team, field supervisors, national coordinators) trained and field testing effectively conducted.	By November 1, 2022 10 working days	

<p>frame. During the pilot testing all field procedures including household selection, interviews, anthropometry, phlebotomy, labeling and specimen processing will be practiced.</p>			
<p>3. Support Implementation of the Survey (to be initiated after the clearance from the Ethic Committee and mobilization of the financial resources) with national partners, including national staff training and Field Work with planning for data collection and supervision of data collection throughout the survey.</p>	<p>Effective supervision of the Survey demonstrated.</p>	<p>By March 31, 2023 5 working days</p>	
<p>4. Guide, in cooperation with Survey Lead and National Survey coordinators, the field data collection to ensure compliance to protocols for data and specimens' collection; Conduct monitoring of quality of field work, supervise biological specimen collection adherence according to SOPs and produce and analyze summary statistics from the data collected daily; Together with local staff, perform the serum assay in accordance with test instructions, from serum samples collected during the national survey;</p>	<p>Field data collection completed.</p>	<p>By January 31, 2023 7 working days</p>	
<p>5. Support Data Analysis in cooperation with Survey Lead and National Survey coordinators.</p>	<p>Data analysis effectively organized and conducted.</p>	<p>By May 30, 2023 7 working days</p>	

<p>6. deficiency anemia among the children 6-59 months of age and non-pregnant and pregnant women of reproductive age.</p>			
<p>7. Support development of the Survey Report. Work with team to prepare draft report on the findings, present in a validation workshop. Contribute to development of a final Survey report based on the feedback provided by UNICEF and implementing partners. Contribute to development of a presentation of survey findings and a two pager for easy communication of findings.</p>	<p>Survey report developed</p>	<p>By June 15, 2023 5 working days</p>	
<p>8. Contribute to validation workshop and report finalization: the draft report and the main findings will be presented in a validation workshop. Following the workshop, feedback will be incorporated into the draft report the final report will be generated.</p>	<p>Validation workshop conducted. Final report submitted online.</p>	<p>By July 30, 2023 2 working days</p>	

UNICEF will regularly communicate with the selected consultant and provide formats for reports, feedback and guidance on performance and all other necessary support so as to achieve objectives of the exercise, as well as remain aware of any upcoming issues related to expert's performance and quality of work. UNICEF will provide logistical support for the in-country trips, such as provision of office space, vehicle for site visits at velayats level and official meetings, organization and coordination of meetings, interpretation and translation and support with obtaining visa and registration, once in-country.

The selected consultant will make own arrangements for the travel. Travel costs for the trip in this consultancy should be estimated and included into the proposal (lump sum and break down by budget lines) along with the requested daily fee.¹

Travel costs not actually incurred due to travel mission cancellation, delays, contract termination or modification are subject to deduction from final contract amount.

Before leaving for Turkmenistan, a valid visa and/or the Letter of Invitation (LoI) – official visa support letter (VSL) approved by the State Migration Service of Turkmenistan should be obtained . Before visiting Turkmenistan, ensure that your UNLP or national passport is valid for at least six (6) months at the time of applying for a LoI.

The request for the LoI should be sent by UNICEF at least three (3) weeks before the planned arrival. It should contain a copy of valid passport with the following details: full name, passport No., citizenship, date of birth (DOB), date of passport issue, date of expiration (DOE), purpose of visit, occupation, and the period of the stay.

The conditions for the registration depend on the type of passport.

General Terms and Conditions

UNICEF's general terms and conditions will apply to the contract awarded to the vendor. Please note that, in the evaluation of the technical merits of each proposal, UNICEF will take into consideration any proposed amendments to the UNICEF General Terms and Conditions. Proposed amendments to the UNICEF general terms and conditions may negatively affect the evaluation of the technical merits of the proposal.

UNICEF retains the right to patent and intellectual rights, as well as copyright and other similar intellectual property rights for any discoveries, inventions, products or works arising specifically from the implementation of the project in cooperation with UNICEF. The right to reproduce or use materials shall be transferred with a written approval of UNICEF based on the consideration of each separate case. Consultants should always refer to UNICEF Turkmenistan support in developing the materials when publishing the results of the research conducted while in Turkmenistan in academic journals, books and websites.

In the event of unsatisfactory performance, UNICEF reserves the right to terminate the Agreement. In case of partially satisfactory performance, such as serious delays causing the negative impact on meeting the programme objectives, low quality or insufficient depth and/or scope of the assignment completion, UNICEF is entitled to decrease the payment by the range from 30% to 50% of the contract value as decided jointly by the Contract Supervisor and Operations Manager.

¹ UNICEF is not covering any travel-related insurance (whether for health, third-party liability, accident or otherwise) nor does it provide any insurance coverage for this consultancy. The consultant is solely and fully responsibly for (and UNICEF will not be liable for) (a) any insurance coverage which may be necessary or desirable for the purposes of travel and (b) any and all liability, costs, expenses and claims arising out of or related to consultancy travel. Consultant must travel on UNICEF-approved airlines.

Quality Assurance:

Quality assurance reviews are undertaken to assess and ensure the methodological soundness, compliance with research standards, appropriate research capacity, and ultimately the validity of the findings and the written quality of the documents. The feedback from national and external reviewers will include a recommendation on whether the product is meeting the minimum technical standards or whether it should be revised or rejected.

UNICEF Cos can use external QA (LTAs) in all cases where they have not established an alternative quality assurance process adherent to all internal technical quality requirements listed above. The quality assurance is recommended for all three outputs of the survey (ToRs, Research Protocol and Draft Final Report) and Draft Final Reports.

Reference Groups (RG) are established at the start of the Survey if convened by the RSE-SC Chair and is normally composed of 8-12 members including key partners, relevant CO staff, and other internal UNICEF colleagues (RO and HQ). The members review and provide comments on the ToR, inception report, draft report(s) and the final report prior to its approval, suggest steps for improvement or other actions, and recommend relevant clearance/approvals.

Ethical reviews are undertaken to ensure that measures are in place to guarantee the dignity, rights and well-being of research participants and the safety of participants and researchers. Reflection on ethical considerations supports the purpose of RSEs, which is to generate and use evidence to promote the realization of children's rights, equity and social justice. The survey is involving primary data collection from human subjects and blood tests is meeting of the UPES criteria and must go through a relevant external ethical review board or panel. Compliance with the provisions of the UPES (as well as UPQAR) may be subject to audit.

Reporting requirements

All documents to be submitted during the assignment in English/Russian in e-copies and validated with national team of experts.

Performance Indicators

Evaluation of performance will be based on the following indicators:

- Quality of work (timely submission of the relevant documents to UNICEF);
- Quantity of work (completing the assignments as indicated in parts 2 and 3);
- In addition, such indicators as work relations, responsibility and communication will be taken into account during the evaluation of the consultant's work;

Work conditions and Payment Schedule linked to deliverables

The payment will be linked to the deliverables upon satisfactory completion and acceptance by UNICEF.

1 st payment to be paid upon completion of the deliverable No. 1,2 (12 working days and travel related costs).	November 1, 2022
2 nd payment to be paid upon completion of the deliverable No. 3,4 (12 working days).	January 31, 2023
Final payment to be paid by the upon completion of the deliverables No. 5-7 (14 working days).	July 30, 2023

Submission of applications

- The submissions should contain two separate proposals: Technical Proposal and Financial Proposal. Interested individuals are kindly requested to apply and upload the required documents accordingly.

Assessment Criteria

A two-stage procedure shall be utilized in evaluating proposals, with evaluation of the technical proposal being completed prior to any price proposal being compared. Applications shall therefore contain the following required documentation:

Technical Proposal

Each proposal will be assessed first on its technical merits and subsequently on its price. In making the final decision, UNICEF considers both technical and financial aspects to ensure best value for money. The Evaluation Team first reviews the technical aspects of the offer, followed by review of the financial offers of the technically compliant vendors. The proposal obtaining the highest overall score after adding the scores for the technical and financial proposals together, that offers the best value for money will be recommended for award of the contract.

The technical proposal should include:

- A cover letter describing suitability vis-à-vis the requirements of this ToR;
- A summary of experience in similar assignments;
- Links to/attachments of examples of similar work;
- Proposed workplan against deliverables
- CV
- References

The technical proposal should address all aspects of the above terms of reference. It will be evaluated against the pre-established technical evaluation criteria. No financial information should be contained in the technical proposal.

Please make sure to provide sufficient information/substantiating documentation to address all technical evaluation criteria. The assessed technical score must be equal to or exceed 70 of the

total 100 points allocated to the technical evaluation in order to be considered technically compliant and for consideration in the financial evaluation.

Technical Criteria	Criteria Technical Sub-Criteria	Maximum Points 70
Overall Response.	Completeness of proposal Understanding of objectives and how they propose to perform the tasks in order to meet the objectives and requirements of the ToR	15
Range and depth of individual experience with similar projects	Previous experience of work in ECARO region Samples of previous work Relevant experience and qualifications for the assignment	20
Proposed Methodology and Approach	Description of methodology and timeline Description of approach to ensure quality of services, absence of conflict of interest and respect of ethical standards	35

The minimum passing technical score is 50

Financial Proposal

The financial proposal shall indicate total budget estimated in USD. Payments will be based on outputs, i.e. upon delivery of the services specified in the TOR.

Items	Unit	Unit cost	Quantity	Total
Consultant International fee	Daily fee		38	
Travel/in-country visit cost (including one international and in-country return ticket, 10 days in Ashgabat and 4 days in velayats)				
Total				

Evaluation criteria

The ratio between the technical and the financial criteria established in the RFPS depends on the relative importance of one component to the other 70/30 (technical/financial). Sum of technical and financial must always equal 100 points.

<p>Minimum Qualifications required:</p> <p><input type="checkbox"/> Bachelors <input checked="" type="checkbox"/> Masters <input type="checkbox"/> PhD <input type="checkbox"/> Other</p> <p>Enter Disciplines: Public health, nutrition.</p>	<p>Knowledge/Expertise/Skills required:</p> <ul style="list-style-type: none"> • Proven experience and knowledge in development of public nutrition policies; technical capacity building, especially related to maternal and child nutrition and micronutrient deficiency interventions; • Proven experience to design and conduct large-scale nutrition research on the results of implementation on nutrition interventions to i.e.: effective coverage; impact of nutrition interventions etc. • Advanced university degree in Public Health, Epidemiology, nutrition related laboratory test or related discipline; • A minimum of 5 years relevant professional experience, in public health surveillance and research, (preferably) including experience in Europe and Central Asia; • Demonstrated experience of developing tools and guidance, capacity building and mentoring of professional staff • Excellent analytical, writing, communication and facilitation skills; • Proven ability to manage multi-sector projects; • Fluency in English and strong writing skills in English. Knowledge of Russian is an advantage;
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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.