

# Terms of Reference

## National Consultancy: Documentation of Human Centred Design Implementation Process in Cambodia

**Contract modality:** Consultant contract

**Section:** Health and Nutrition Section

**Duty station:** [Phnom Penh, Cambodia]  , home-based  , or hybrid

**Duration:** 100 days between June 2023 to April 2024

### 1. Background

While important strides have been made in routine childhood immunization in Cambodia over the past decade, data from the Health Information Management System (HMIS) and the Cambodia Demographic and Health Survey (CDHS) 2021-2022 results reveal that despite high national averages for routine immunization indicators in Cambodia over the past decade, there continues to be persistently missed children under 1 years old (8%) that do not receive any vaccines, referred to as Zero Dose (ZRD) Children. Data from the Ministry of Health also shows that the COVID-19 pandemic has contributed to an increase in the number of children who have not received their first dose of Diphtheria Pertussis and Tetanus vaccine (DPT1).

UNICEF Cambodia Country Office (CO) is working with the Cambodia National Immunization Programme (NIP) and partners to target demand generation activities for zero-dose and under-immunized communities in Cambodia, particularly among migrants, ethnic minorities, remote rural and the urban poor. One such activity is the implementation and evaluation of Human-Centred Design for Tailoring Immunization Programmes (HCD-TIP). HCD-TIP is a UNICEF/WHO approach to engage with communities to identify demand and access barriers to immunization and to work together with communities to co-design and implement solutions. This approach has been determined by Government and partners as critical to further improving immunization coverage and reaching missed populations including 'Zero Dose' children. HCD-TIP is one key activity of the GAVI HSS3 (2024-2028) portfolio, where UNICEF is the designated partner lead to support in this specialized areas. In May 2023, UNICEF and NIP will co-lead a national HCD-TIP workshop with participants from the provincial and district levels and will then support a second level of training for facility and community-based health workers. From there, health workers will work directly with community members to identify barriers and design and implement intervention ideas to increase uptake of immunization. Two 6-month cycles of HCD-TIP design and implementation will occur in selected zero-dose and under-vaccinated communities over one year.

### 2. Purpose

It is critical to document the implementation of new public health approaches so that lessons can be learned and shared within and across sites to improve programs and contribute to better health outcomes. Implementation research (IR) is one such method to systematically document, assess, and ultimately improve the implementation of programs. As the HCD-TIP approach is new to the Cambodia context, IR will help to better understand the strengths and challenges of HCD-TIP implementation at each level of the system, and to document community engagement and acceptability.

The purpose of the TOR is to use implementation research principles to understand how implementation of HCD-TIP training and rollout guides immunization demand intervention design and implementation in zero-dose and under-vaccinated communities in Cambodia.

The objectives of this consultancy include:

1. To document the adoption and adaptation of the HCD-TIP approach in the Cambodia context
2. To assess the conditions that strengthen or weaken the success of HCD-TIP implementation rollout (e.g., acceptability, feasibility, appropriateness, and sustainability) for intervention design and implementation,

3. To understand how and the extent that HCD-TIP contributes to the design and implementation of interventions to increase vaccination demand and uptake, and
4. To document and disseminate lessons learned, best practices and future recommendations related to HCD-TIP facilitated interventions at the community level.

### 3. Work Assignment

The consultant will work closely with the UNICEF CO and NIP, with guidance from the UNICEF East Asia & Pacific Regional Office (EAPRO), to:

1. Create/ adapt an IR plan for HCD-TIP implementation in Cambodia, aligning with research protocol developed by UNICEF Headquarters, UNICEF Office of Research – Innocenti, and US CDC; include information on requirements for ethical review processes
2. Prepare data collection tools including observation checklists, key informant interview guides, and quantitative surveys and other documents needed for submission to ethical review according to Cambodia requirements
3. Participate as an observer/note-taker in the national and subnational HCD-TIP workshops to document processes and experiences, including collection of evaluation data from workshop facilitators and trainees
  - Consolidate and synthesize findings from the HCD-TIP workshops into a training report, including overall implementation of the trainings, enabling or hindering factors during the workshops, participant evaluation findings, and recommendations for future trainings
4. Document two 6-month HCD-TIP cycles at the community level using multiple data collection activities (e.g., observation, key informant interviews, focus group discussions, surveys/exit-interviews), including the processes of community engagement, barrier identification, co-design of intervention ideas, implementation of interventions, and monitoring/evaluation of interventions
  - Consolidate and synthesize findings from each cycle of HCD-TIP rollout at the community level into a progress report, including community engagement and response to HCD-TIP rollout and a description of intervention implementation
5. Create a final IR report and summary PPT of HCD-TIP implementation in Cambodia, including lessons learned, best practices and recommendations for the future; assist UNICEF and NIP in the dissemination of results

### 4. 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):

### 5. Qualifications or Specialized Knowledge/Experience Required

Qualifications and Experience

- Master’s degree in related disciplines is required for specialists with proven experience of at least five years in public health and social development programmes. Experience in public health research and maternal and child health topic will be an added advantage.
- Experience in reviewing and summarizing health program and research documents.
- Experience in research and/or evaluation programmes/projects or implementation research, including qualitative research methods.
- Experience with routine immunization will be an advantage.
- Experience with community engagement, demand generation and social and behaviour change programing will be an advantage.

**Knowledge and Skills**

- Excellent communication, writing, analytical, inter-personal and facilitation skills.

**Competencies**

- Sensitivity to cultural diversity and teamwork.
- Proficiency in standard office ICT (information, communication, and technology) applications.

**Languages**

- Proficiency conversing and writing in English and Khmer.

**6. Location**

The incumbent will be based in Phnom Penh with approximately 45 days of travel to the HCD-TIP implementation sites in Cambodia. See Section 11 below for a list of implementation sites and travel.

**7. Duration**

Number of working days: 100 days over 11 months from June 2023 to April 2024.

**8. Deliverables**

<b><i>Deliverables and descriptions</i></b>	<b><i>Number of working days</i></b>	<b><i>Due date</i></b>
1. An IR plan for HCD-TIP implementation in Cambodia, including information processes for ethical review	10 days	June 30, 2023
2. Data collection tools (including observation checklists, key informant and focus group discussion interview guides, and quantitative surveys) and documents needed for ethical review process according to Cambodia requirements	10 days	June 30, 2023
3. A training report from the HCD-TIP workshops, including overall implementation of the trainings, enabling or hindering factors during the workshops, summary of participant evaluation, and recommendations for future trainings	9 days	July 31, 2023
4. A progress report of HCD-TIP Community Rollout Cycle 1, including a summary of community engagement and response and a description of intervention implementation	20 days	September 30, 2023
5. A progress report of HCD-TIP Community Rollout Cycle 2, including a summary of community engagement and response and a description of intervention implementation	21 days	December 31, 2023
6. A progress report of HCD-TIP Community Rollout Cycle 3, including a summary of community engagement and response and a description of intervention implementation	20 days	March 30, 2024
7. A final IR report and summary PPT of HCD-TIP implementation in Cambodia, including lessons learned, best practices and recommendations for the future and assist in the dissemination	10 days	April 30, 2024

**9. Reporting Requirements**

- Monthly meeting with Cambodia CO and e-mail summary of activities, progress and challenges; participate in UNICEF headquarters/Innocenti IR meetings to provide project updates, as needed
- IR Plan with a list of ethical review requirements for Cambodia (MS word and pdf version)
- Data collection tools for workshop and for community HCD-TIP rollout activities (e.g., observation checklist, interview guides, evaluation forms) and compilation of ethical review documents ready for submission (MS word and pdf version)
- Training report following national and subnational level workshops and orientation (MS word and pdf version)
- Progress Reports following HCD-TIP Cycle 1 and HCD-TIP Cycle 2, highlighting community engagement, interventions implemented, challenges, lessons learned, etc. (MS word and pdf version)
- Draft and final IR report (MS word and pdf version)
- PPT summary of final IR key findings and recommendations related to the training of HCD-TIP at each level and implementation of interventions at the community level

## **10. Payment Schedule linked to deliverables**

- 10% upon satisfactory completion of deliverables 1 & 2
- 15% upon satisfactory completion of deliverable 3
- 30% upon satisfactory completion of deliverable 4
- 30% upon satisfactory completion of deliverable 5
- 15% upon satisfactory completion of deliverable 6

## **11. Administrative Issues**

- In-country travel is expected as part of the assignment, up to nine (9) trips, 45 days outside of Phnom Penh for the purpose of documenting HCD-TIP workshops, orientations, and field visits for HCD-TIP community rollout in the following provinces: Siem Reap, Ratanakiri, Mondulakiri, Preah Vihear, Banteay Meanchey, Pursat, Stung Treng and Battambang.
- Consultants shall be required to include the cost of travel in the financial proposal. It is essential to clarify in the TOR that i) travel cost shall be calculated based on economy class travel, regardless of the length of travel, and ii) the financial proposal will include costs for in-country travel to be arranged directly and independently by the consultant.

## **12. Contract supervisor**

The consultant will work under direct supervision of the SBC Specialist, and under overall supervision and guidance of the Chief of Health and Nutrition.

## **13. Nature of 'Penalty Clause' to be Stipulated in Contract**

Unsatisfactory performance: In case of unsatisfactory performance the contract will be terminated by notification letter sent five (5) business days prior to the termination date in the case of contracts for a total period of less than two (2) months, and ten (10) business days prior to the termination date in the case of contracts for a longer period

Performance indicators: Consultants' performance will be evaluated against the following criteria: timeliness, quality, and relevance/feasibility of recommendations for UNICEF Cambodia.

## **14. Submission of applications**

Interested candidates are kindly requested to apply and upload the following documents:

- Letter of Interest (cover letter)
- CV or Resume
- Performance evaluation reports or references of similar consultancy assignments (if available)
- Financial proposal: All-inclusive lump-sum cost including:
  - Consultancy daily/monthly fee
  - International travel to/from Cambodia (if applicable). The travel cost shall be based on the most direct and economy fare
  - In-country travel for 45 days, per-diem to cover lodging, meals and any other cost associated to take over the full assignment
  - Medical insurance (health and accidental death, medical evacuation) for the entire duration of the contract.

## **15. Assessment Criteria**

A two-stage procedure shall be utilised in evaluating proposals, where the evaluation of the technical proposal will be completed prior to any price proposal being reviewed and compared. The Cumulative Analysis Method (weight combined score method) will be used for evaluation and selection in this process. The Contract shall be awarded to candidate obtaining the highest combined technical and financial scores, subject to the satisfactory result of the verification interview.

- a) Technical Qualification (max. 100 points): weight 70 %
  - Degree Education in public health/development study (30 points)
  - Knowledge of Social Behavioural Communication/Community Engagement (20 points)
  - Experience in research/evaluation/research implementation (30 points)
  - Quality of past work (e.g. understanding, methodology) (20 points)
  
- b) Financial Proposal (max. 100 points): weight 30 %

The maximum number of points shall be allotted to the lowest Financial Proposal that is opened /evaluated and compared among those technical qualified candidates who have attained a minimum 70 points score in the technical evaluation. Other Financial Proposals will receive points in inverse proportion to the lowest price.