



UNITED NATIONS CHILDREN'S FUND JOB PROFILE

I. Post Information

Job Title: Programme Specialist (Cholera Response Coordination)
Job Level: P3
Supervisor Title/ Level: Chief of Field Operations and Emergencies
Organizational Unit: Programme
Post Location: Maputo, Mozambique
Position type: Temporary Appointment
Duration: 364 days

II. Strategic context and purpose for the job

Strategic context:

Cholera is endemic in Mozambique and outbreaks have been reported in the country nearly every year during the summer rainy season (October to April), mainly in Nampula, Cabo Delgado, Sofala and Tete provinces. In 2022, the country reported a total of 3,511 cases and 21 deaths, corresponding to a case fatality rate (CFR) of 0.6%, and 4,894 cases and 20 deaths, (CFR 0.4%) in 2021. These outbreaks have been relatively small and localized.

However, the current outbreak starting in September 2022 escalated quickly in 2023 following Cyclone Freddy 1 and 2, that caused floods, population displacement, and interruption of water supplies, hygiene, and sanitation services. This outbreak has affected a wider geographical scope and continues to report higher case numbers than in previous years. Moreover, some affected districts had not reported cholera cases for more than five years and as a result many health workers do not have response capacity. Considering these factors, the current outbreak was categorized by WHO as a multi-region Grade 3 Public Health Emergency, requiring a major response.

Since the first cholera case was reported in September 2022, in Niassa province, a cumulative total of 31,349 cases and 138 deaths, (corresponding to CFR 0.4%) have been reported as of 28 May. This prolonged outbreak, in 11 provinces including the capital city of Maputo, indicates sustained disease transmission. The most affected provinces are Zambezia (which witnessed a large spike in cases after Cyclone Freddy), Sofala and Niassa. Since the peak in epidemiological week 12, the weekly number of cases has continued to decrease in the past weeks as the rainy season is coming to an end. However, 39 districts remain active with most new cases being reported in Sofala, Zambezia, Cabo Delgado and Nampula. The outbreak continues to spread to new areas, including in Cabo Delgado which has an ongoing humanitarian crisis. Moreover, an estimated 30% of cases are children under-five, which is concerning given their greater risk of dehydration due to acute watery diarrhea (AWD) that can be fatal more so if they are malnourished.

A combination of factors contributes to spread of cholera in the country: inadequate WASH conditions (low levels of access to safe drinking water, sanitation, and hygiene facilities), compounded by weak health system, weak surveillance with late and underreporting, lack of essential cholera commodities, including global shortages of the oral cholera vaccine (OCV), overstretched health workforce who are also responding to multiple disease emergencies (cVDPV2, WPV1, Mpox, COVID-19), and high cross-border movements with countries experiencing cholera outbreaks. There are high levels of cholera misinformation that have led to people's continued use of untreated water even when they have access to potable sources. Mistrust towards government interventions have caused incidences of persecution and aggression against health workers and local leaders viewed as supporting cholera interventions.

UNICEF Mozambique is committed to supporting the Government of Mozambique through an integrated and equitable multisectoral approach to cholera preparedness and response including through our leadership roles in the WASH, Education, Nutrition and Child Protection clusters.

In WASH, UNICEF strengthens hygiene knowledge and practice, and access to safe water, including in healthcare facilities, schools, and communities to break the chains of transmission. In Health, UNICEF focuses focus on preventing cholera deaths, both in facilities and communities; and ensuring continuity of essential health services during cholera outbreaks through capacity building of healthcare workers, raising communities' knowledge of home and community management of diarrhea with oral rehydration salts (ORS), strengthening cholera referral pathways, procurement and delivery of Oral Cholera Vaccines (OCV), and procurement of other essential cholera supplies. This entails prepositioning and replenishing essential cholera supplies and mobilizing further investments for supplies and technical support to the national response. UNICEF also engages at-risk communities in awareness-raising, readiness, and response activities through innovative approaches, such as the "case area targeted intervention" (CATI) approach or cholera response teams (CRT). Finally, UNICEF works in partnership with the Ministry of Health (MoH) and WHO to support disease surveillance, particularly at the community level.

As outlined above, significant challenges remain in controlling and containing the current cholera outbreak. Similar or worse trends are to be expected in coming years if no investments are made for cholera preparedness, response, and resilience. Prevailing the poor WASH conditions, where majority of the population live, the country's vulnerability to climate change and extreme weather events, and the fragile health system, including weak surveillance systems, place Mozambique in a particularly vulnerable situation. High cross-border movement and continued cross-border spread of cholera in the Southern Africa region compounds this vulnerability.

Lessons learned from the response to the current outbreak have highlighted the importance of being prepared to respond early and quickly on the onset of a cholera outbreak to stop disease transmission chain and preventable deaths. As the 2022-2023 rainy season has ended, UNICEF has an opportunity to engage in preparedness and prepositioning for the 2023-2024 season, in the midst of ongoing response activities.

For this purpose, UNICEF Mozambique is seeking a suitable candidate for the Temporary Appointment (TA) position of Programme Specialist (Cholera Emergency Response Coordination) not only to coordinate the country office response internally across sectors, but also to facilitate the work of different partners to ensure complementarity of their actions. He/she will be responsible for monitoring surveillance data produced by the Ministry of Health, WHO and partners, deploying rapid response teams to investigate and initiate response, promoting emergency response actions and plan for early recovery, prevention, preparedness, and risk reduction, as well as supporting implementation of the national cholera outbreak response plan.

III. Key functions, accountabilities and related duties/tasks:

Under the overall guidance and supervision of the Chief of Field Operations and Emergencies (P5), and in close collaboration with the Head of Sections (HoS) for Health, Social and Behavioural Change (SBC) and WASH, the incumbent will be responsible for UNICEF Mozambique's cholera response portfolio, as follows:

Cholera response preparedness and coordination

1. Lead UNICEF's cholera preparedness activities internally, liaising with the Ministry of Health and other relevant sector/clusters such as Health, WASH and Risk Communication and Community Engagement (RCCE) coordination mechanisms. Priorities should be in line with the Global Cholera Strategic Preparedness, Readiness and Response Plan (SPRRP) 2023-2024¹.
2. Document and manage knowledge of UNICEF Mozambique's response to cholera outbreaks, highlighting best practices and lessons learned to inform future responses.
3. Collaborate with other UNICEF sectors, particularly Health, WASH and SBC, Supply and HR to ensure integration of activities for the cholera emergency response and ensure needs are identified and met. This entails (1) strengthening/facilitating an internal cholera task force comprised of Emergency, Health, SBC, WASH, Supply and HR staff, (2) managing internal and external cholera preparedness and response meetings, developing the agenda, presentations, scheduling, and sharing minutes/action points, (3) acting as a resource person in capacity building initiatives to enhance the capacity of stakeholders to respond to cholera outbreaks.
4. Liaise with international and national partners, health and WASH cluster/sector and RCCE global and regional coordination platforms supporting the Government of Mozambique with emergency preparedness and response to cholera outbreaks.
5. Provide technical support to UNICEF and partners including the development/sharing of protocols, guidelines and training materials for surveillance, early warning and alert systems, case management, establishment of cholera treatment facilities (CTCs/CTUs and ORPs), community-based interventions, communications, social mobilization, as well as forecasting, procuring and distribution of supplies.
6. Map out available resources for the cholera response and identify gaps/needs across sectors (health, education, social protection etc.); building on existing efforts by country stakeholders and partners to track deployment/administration of supplies, availability of financial resources (current/on the pipeline), human capacity etc.

During low transmission months (June-September)

7. During the winter months (June-September), liaise with WHO and the Ministry of Health to keep informed about surveillance data updates/dashboards and, where applicable, support surveillance with a focus on community structures in the main hotspots (active surveillance and early warning).
8. Provide technical support to planning and preparedness actions, as well as support verification of cholera/AWD reports and rumors. This entails to represent UNICEF in rapid needs assessments for cholera with WHO and other response partners.
9. Contribute to the development of contingency or humanitarian programme documents (C/HPD) or embedding contingency response elements in existing PDs, that enable the cholera response activities to respond in a timely matter.
10. Assess supply gaps in the main active/expected hotspot areas and coordinate the pre-positioning of cholera supplies from all programme sections (health, SBC and WASH) with the support of the Supply section.
11. Assess training needs in collaboration with Health, SBC and WASH sections and plan for refresher sessions about cholera outbreak management for partners and UNICEF staff.

¹ [Global strategic preparedness, readiness, and response plan for cholera \(who.int\)](https://www.who.int/publications/m/item/global-strategic-preparedness-readiness-and-response-plan-for-cholera)

On the onset of the outbreak

12. Liaise with MoH, WHO, and other relevant partners to verify alerts about suspected cases or AWD cases where laboratory test results are not yet reported.
13. Activate the internal Cholera Task Force and establish regular meetings or briefings with the team to discuss preparedness/response actions.
14. Coordinate the deployment of UNICEF staff or partners as per identified immediate needs.
15. Update the UNICEF Mozambique cholera emergency response plan, including financial needs, supply requirements and staffing requirements (internal redeployment, external support, etc.).
16. Provide technical support for the risk assessment and deployment of oral cholera vaccines (OCV) in close collaboration with WHO, CDC and other technical agencies.

During and after the cholera response

17. Participate actively in the national outbreak task force (in Portuguese) and contribute to decision-making processes.
18. Coordinate and monitor the cholera response of implementing partners, ensure promptness and completeness of actions/approach and recommend/follow up on corrective actions when needed.
19. Provide technical support to the development of concept notes and proposals for cholera preparedness and response activities.
20. Share regular situation reports and summary of trends analysis with the Chief of Field Operations and Emergency and Country Office Emergency Management Team.
21. Provide inputs to all cholera response reports for management, donors, budget reviews, programme analysis, and annual reports.
22. Oversee project supply chain in coordination with UNICEF supply and operations staff to provide diarrheal disease essential drugs and materials to government and NGO partners.
23. Participate in cholera monitoring and evaluation exercises, as well as in health, WASH and SBC sectoral reviews, as applicable. Identify, capture, synthesize, and share lessons learned for knowledge development and to build the capacity of country stakeholders and partners.
24. Advocate for and organize in collaboration with MoH and WHO an after-action review (AAR) exercise once the cholera outbreak is officially declared closed with the Eastern and Southern Africa Office (ESARO) support.

IV. Impact of Results

The effective technical and operational support provided by the Programme Specialist (Cholera Response Coordination) to the office and partners contributes to the successful planning and execution of the UNICEF emergency response plan that in turn result in improved delivery of country programmes and national programmes, towards more results for children. Working in partnership with the MoH, WHO and other partners the Programme Specialist provides leadership and direction for UNICEF's cholera response. This contributes to the predictability and accountability of humanitarian action, in line with the aims of UNICEF's Core Commitments to Children and UNICEF's 2022-2026 country programme. The coordinator ensures that the response is well-coordinated, strategic, adequate, coherent, effective and improves preparedness among at-risk/affected communities.

V. Values and Competencies and level of proficiency required

i) Core Values

- Care
- Respect
- Integrity
- Trust
- Accountability
- Sustainability

ii) Core Competencies

- Demonstrates Self Awareness and Ethical Awareness (1)
- Works Collaboratively with others (1)
- Builds and Maintains Partnerships (1)
- Innovates and Embraces Change (1)
- Thinks and Acts Strategically (1)
- Drive to achieve impactful results (1)
- Manages ambiguity and complexity (1)

VI. Recruitment Qualifications

Education	Advanced university degree (Masters) in Public Health, Health or WASH Science Behaviour Change or another relevant field.
Experience	<ul style="list-style-type: none">• At least 5 years of professional work experience at national and international levels in outbreak response, public health and other health, WASH and other development relevant programs.• Demonstrated experience in providing technical assistance to governments on the implementation of cholera outbreak responses.• Demonstrated experience in leading multidisciplinary teams and playing facilitating/coordination roles in a complex/multi-cultural context.• Familiarity with the UN system and international response to cholera outbreak (Global Task Force to Control Cholera) is an asset.• Knowledge of different aspects of the cholera outbreak preparedness and response in Mozambique (WHO guidance, international standards, national policies and strategies).• Excellent writing skills and demonstrable experience in qualitative and quantitative epidemiological data analysis, program monitoring and reporting.
Language	Fluency in English is required. Intermediate or higher levels of Portuguese/Spanish/Latin language is required.