

TERMS OF REFERENCE

Lead Consultant for Vitamin A Supplementation Post-Event Coverage Survey

TANZANIA

MAY 2022

CONSULTANCY: For supporting the Situational Analysis of Vitamin A Supplementation program in Tanzania

Co-founded in 1915 by Helen Keller, Helen Keller International is dedicated to saving and improving the sight and lives of the worlds vulnerable. We combat the causes and consequences of blindness, poor health, and malnutrition with more than 120 programs in 20 African and Asian countries, as well as in the United States. Renowned for our reliability, efficiency, and high level of technical expertise, Helen Keller International promotes the development of large-scale, sustainable solutions to some of the most pressing issues in public health.

Background and Context

Helen Keller International supports the supplementation with high dose of Vitamin A of up to 40 million children every year in 13 countries of sub-Saharan Africa. HKI supports delivery of vitamin A twice a year to at least 80% of children aged 6 to 59 months in countries with high under five mortality and high rates of vitamin A deficiency. Studies have shown that Vitamin A supplementation (VAS) can contribute to a reduction of U5M by up to 24%.

In these countries, VAS is delivered to children twice a year through multiple delivery mechanisms. Some countries are organizing mass distribution campaigns where teams of distributors visit every household to give the vitamin A to children. Others have integrated VAS into their facility-based delivery systems alongside with routine immunization or growth monitoring. A third group of countries are using a hybrid system that comprises of campaigns and facility-based delivery. Finally, some countries are transitioning from one approach to another.

In Tanzania children aged 6-59 months are supplemented by VAS twice a year during Child Health and Nutrition Months (CHNM) happening every June and December. During those specific events a comprehensive package of services beyond VAS is provided to children including immunization, provision of deworming tablets, growth monitoring, and nutrition counselling and education to caregivers. VAS is delivered by health workers in all health facilities in the country and through mobile services in hard-to-reach areas. VAS data is collected by health providers in the health management information system (HMIS) tools including tally sheets that feeds into the national DHIS2 database. Although the data collection systems are well institutionalized, the routine VAS data quality remained inadequate. While most of regions indicates high coverage (of more than 90%) of VAS during CHNM months, other sources including national surveys data, or any post event coverage surveys (PECs) data shows low coverage. The national nutrition survey (TNNS, 2018) revealed that only 3 regions out of 26 including Mtwara, Iringa and Njombe had VAS coverage of 80% and above while the corresponding data from CHNM revealed all the regions were above 80%.

To better understand the situation including funding gap, supply chain, information system, coverage and identify potential areas of support, Helen Keller International is recruiting a consultant to support a coverage survey.

The Consultant will work in close collaboration with the Helen Keller International team, the Ministry of Health, Tanzania Food and Nutrition Centre and other VAS implementing partners.

I. CONSULTANCY SCOPE OF WORK

1. General Objective

The consultant is expected to provide leadership to conduct a situational analysis of the VAS

program coupled with a coverage survey in a sample of three regions of Tanzania.

2. Specific objectives

- Conduct a comprehensive review of available documentation on the process of implementation of VAS in Tanzania that will inform the:
- Finalization of the study protocol and data collection tools for the survey (e.g. questionnaire, interview guide, data analysis framework) for ethical clearance. At all times liase with Helen Keller Intl technical staff for their feedback
- Ensure the collection of qualitative and quantitative data and information in accordance with the validated questionnaires and interview guide
- Perform data analysis with STATA software following the analysis framework validated by Helen Keller Intl
- Draft a draft report of the study
- Provide leadership in validation workshop of the study report and dissemination
- Finalize the study report and related recommendations for future VAS activities.

II. Consultancy outcomes

The main activities of the Consultancy, their timeframe and expected deliverables are defined as follows:

PREPARATION PHASE	Number of days
Activity 1: Finalize the protocol and data collection tools	
<ul style="list-style-type: none"> ➤ Contribute to the development of the study protocol and the adaptation of data collection tools, as necessary ➤ Contribute to the cluster sampling (enumeration area), the provision of maps and GPS coordinates of selected clusters, the total number of clusters per stratum, the total number of households per cluster in collaboration with relevant staff from Ministry of Health and National Bureau of Statistics. ➤ Submit the protocol to the national ethics committee <p><u>Deliverables : lot 1</u></p> <ol style="list-style-type: none"> 1) Final survey protocol validated by the ethics committee 2) Final questionnaires, interview and focus group guides on Word and Excel xls form 3) Detailed timeline of all survey activities 4) List of clusters sampled for data collection 5) List of documentation reviewed for situational analysis 6) Maps and GPS coordinates of the sampling clusters 7) Detailed Excel table summarizing total number of clusters per stratum, total number of households per cluster, probability of selection of each cluster 8) Develop a plan for data quality control and processes 9) The Ethics Committee approval 	08
Data Collection	
Activity 2: Training of Field Staff	
<ul style="list-style-type: none"> ▪ Develop training materials (power point presentation and role-play scenarios) for quantitative and qualitative data collection teams 	06

- Train enumerators, team leaders and supervisors in the appropriate administration of quantitative and qualitative questionnaires
- Organize the pilot survey (site identification, deployment of collection agents, pre-testing of questionnaires)
- Propose a deployment plan for the teams (enumerators, team leaders, supervisors) according to the clusters drawn
- Establish a progression path for each team
- Revise and finalize the questionnaire based on the results of the pilot survey.

Deliverables: lot 2

- 1) Finalized training tools
- 2) Training report including the list of people trained, training materials
- 3) Team deployment plan / Selection and allocation of interviewers, team leaders and team supervisors, with detailed timeline with teams per location
- 4) Detailed plan for conducting the survey including identification of survey sites, assignment of teams (supervisors, team leaders and enumerators) to the field with the itinerary and schedule for each
- 5) Detailed plan for conducting the situational analysis
- 6) Finalize questionnaires and guides (interviews and focus groups)
- 7) Quantitative and qualitative data analysis plan.

Activity 3 : Implement quantitative and qualitative data collection

- Develop the supervision grid with quality indicators during data collection
- Ensure quality supervision and monitoring of all stages of data collection
- Ensure that enumerators, team leaders and supervisors strictly follow the instructions provided during training
- Ensure that enumerators survey the sampled clusters strictly according to the methodology provided. No ad-hoc replacement clusters will be allowed. In case of a problem, the interviewer must immediately contact the supervisory team and wait for guidance from them
- Ensure daily synchronization of the data collected between the interviewers, team leaders, supervisors, and the consultant

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Deliverables: lot 3

- 1) Supervision and reporting templates for teams and supervisors
- 2) Summary of daily monitoring reports of the data collected
- 3) Data collection report with details of sites covered, problems encountered, and proposed solutions, including basic statistics of data captured
- 4) Daily raw database (of survey data) and a record of all documentation for literature review (electronic copies) and qualitative data

Activity 4 Management, quality control, processing of data and information collected to refine the evaluation analysis.

- Organize and implement data quality control measures during collection to ensure the quality of information collected during the conduct of surveys
- Ensure the security of all data in electronic and hard copy formats
- Maintain strict anonymity of data to protect survey respondents and to comply with ethical standards. Data should never be used to identify respondents except for follow-up purposes

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<ul style="list-style-type: none"> Conduct regular checks of electronically entered data to proactively identify and correct any errors Clear the data and information collected to refine the analysis of the survey Develop do files for data analysis according to the analysis plan <p>Deliverables : lot 4</p> <ol style="list-style-type: none"> 1) Data processing and quality brief summary report 2) Provide a raw data base of all the qualitative files in both audio recordings and transcribed notes 3) Provide a raw database, as well as a cleaned and complete database in STATA and Excel format, depending on the sample of respondents 4) Provide the do files used to perform the analysis (STATA .do files or similar); this facilitates verification (or redoing it if necessary) later 	
Activity 5: Analyze study data and information	
<ul style="list-style-type: none"> Conduct data analysis based on study objectives and key indicators of the vitamin A supplementation program <p>Deliverables : lot 5</p> <ul style="list-style-type: none"> Data analysis report, including charts and tables of key findings 	03
Activity 6: Develop a draft of the study report and participate in validation workshop	
<ul style="list-style-type: none"> Propose a draft report of the situational analysis of the vitamin A supplementation program coupled with a coverage survey Identify areas for improvement in the VAS delivery and coverage, make actionable recommendations and effective strategies to strengthen administering the vitamin A and other services provided during VAS, and indicators to measure improvement in VAS delivery. Prepare a power point presentation of the report <p>Deliverables : lot 6</p> <ul style="list-style-type: none"> Draft study report including strategy recommendations Presentation of the report on power point during validation workshop 	05
Activity 7: Finalize the study report	
<p>Deliverables: lot 8</p> <ul style="list-style-type: none"> Final study report Final PPT An article for publication in accordance with the report 	05

III. PAYMENT SCHEDULE

Payments will be made upon receipt and validation of the required deliverables. The contract will be closed upon payment of the last invoice. The selected consultant or firm will be expected to begin activities upon signing the contract without a start-up advance.

The following payment schedule will be proposed.

DELIVERABLES AND PAYMENT SCHEDULE	% PAYEMENT
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After delivery of Lot 1 deliverables	30
After delivery of deliverables for Lots 2, 3 and 4	40
After delivery of deliverables for lots 5, 6, and 7	30
TOTAL	100

IV. DURATION OF THE CONSULTANCY

The proposed consultancy has a duration of **45 working days**

V. CONSULTANT QUALIFICATIONS :

The selected lead consultant or team of consultants must have the following qualifications:

- Master degree in public health, nutrition or related fields
- Good knowledge of the country's health system.
- Demonstrated experience in organizing and conducting large-scale household and community surveys in the country, knowledge of local formalities and customs in the implementation of household surveys, document reviews, quantitative and qualitative.
- CV of the lead consultant (at least 10 years' experience in the field of study).
- Demonstrated ability and experience in planning and organizing survey logistics.
- Good network of researchers/research assistants, interviewers and supervisors.
- Strong demonstrated ability in data management.
- Good knowledge of STATA, ONA, ODK or similar software.
- In-depth analytical and synthesis skills.
- Strong writing skills.

VI. CONSULTANCY APPLICATION

To be considered eligible by the selection committee, the submission file must include

- Sample of previous related work, brief description of motivation and detailed curricula vitae of the lead Consultant.

VII. How to Apply

Interested consultant should submit their application to TZ.Recruitment@hki.org no later than 13th June 2022 indicating as a subject "**CONSULTANCY: For supporting the Situational Analysis of Vitamin A Supplementation program in Tanzania. Recruitment will continue until the position is filled.**"

In the spirit of our namesake, Helen Keller is dedicated to building an inclusive workforce where diversity of all types is fully valued.

All qualified applicants will receive consideration for employment without regard to ethnicity, race, color, religion, sex, national origin, age, disability, or any other characteristic that has no bearing on the ability to perform the required job duties.

We are committed to providing reasonable accommodation to individuals with disabilities.

If you are a qualified individual with a disability and need to request an accommodation during the application or interview process, please contact us at the email above or Tel: 0222600605

HELEN KELLER INTL

- DOES NOT CHARGE A FEE AT ANY STAGE OF THE RECRUITMENT PROCESS (APPLICATION, TEST, INTERVIEW MEETING, PROCESSING, OR TRAINING).
- DOES NOT ASK FOR INFORMATION ON APPLICANTS' BANK ACCOUNTS.
- DOES NOT RECRUIT THROUGH ANY RECRUITMENT AGENCY.