

Terms of reference (TOR) for Nutrition Cross sectional study in Kayin State, Myanmar

PRESENTATION OF PREMIERE URGENCE INTERNATIONALE

1. PREMIÈRE URGENCE INTERNATIONALE'S MISSION

Première Urgence Internationale is a non-profit, apolitical and secular international solidarity non-governmental organisation whose aim is to defend fundamental human rights as defined in the Universal Declaration of Human Rights in 1948.

Our aim: to enable communities to recover their independence and dignity. Our teams are mobilized to meet the fundamental needs of civilian victims who are endangered, marginalized or excluded by the effects of natural disasters, wars, or economic collapse. We work in complementary fields such as health, food security, nutrition, infrastructure renovation and construction, access to water, hygiene and sanitation, economic recovery, education and protection.

Première Urgence International's strategy is to develop an integrated approach of crisis management based on our technical, medical and non-medical expertise. Première Urgence International's activities span from emergency to post-crisis/development support and our programs are designed and developed in strong partnership with national/regional authorities, communities and the civil society.

2. PREMIÈRE URGENCE INTERNATIONALE'S VALUE

Première Urgence Internationale is a non-governmental, non-profit organization working in the field of international solidarity. It is a non-religious and apolitical organization with the objective to provide direct assistance and to contribute to the empowerment of the populations. Bringing a close attention to those who do not have access to humanitarian aid, Première Urgence Internationale provides them with aid regarding the following principles: Humanity, Impartiality, Independence, Accountability, Adaptability, Transparency, Cooperation and Partnership, Involvement, Dialog, Initiative and Trust.

BRIEF INTRODUCTION

PUI is implementing and integrated health and nutrition program in the state of Kayin, serving into 60 villages with mobile clinic and community out-reach services. The main purpose of this consultancy is to conduct one baseline study based on SMART methodology, covering the 60 villages in Kayin State, to determine the prevalence of acute malnutrition of children aged 6-59 months, crude mortality and minimum acceptable diet. The Program is now in the inception phase where PUI is organizing the baseline data that will be used to update the log frame targets

PROJECT CODE/ BUDGET LINE 24027-1 ECHO/040208



PAYMENT

Payment will be made upon submission of deliverables based on contractual agreement.

LOGISTIC SUPPORT

Provided by PUI: Operational logistic support i.e. recruitment of the enumerators, mobility support to the enumerators and supervisors, identification of village guide (if needed), procurement and supply of Cross-sectional study items (Weight scales, MUAC tapes, program stationary etc.), linkages and approval from local authorities. PUI will support consultant's field movement for enumerators training, pilot testing of tools and monitoring of data collection and provide assistance to him/her to find suitable accommodation. Consultant will be responsible to cover for his/her accommodation and meal expenses during the time of field visits.

Provided by the consultant: Technical support for designing the study, protocols, developing a sampling framework, development of tools, training of enumerators, standardization test, pilot testing, supervising data collection, data analysis, report writing (words, PPT and infographics).

Given the visa restrictions in Myanmar, the visa request process will be handled by the consultant team. It has been observed that for the following countries usually have an easier access: Australia, Austria, Belgium, Bulgaria, Brazil, Brunei, Cambodia, Canada, China, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, India, Indonesia, Ireland, Israel, Italy, Japan, Korea (DPR), Korea (Republic), Laos, Latvia, Lithuania, Luxembourg, Malaysia, Malta, Norway, Nepal, Netherlands, New Zealand, Poland, Philippines, Portugal, Romania, Russian Federation, Slovakia, South Africa, Spain, Slovenia, Singapore, Sweden, Switzerland, Thailand, Ukraine, United Kingdom, United States of America, and Vietnam

STUDY CONTEXT & EXPECTATIONS

1. Background

Project activities under ECHO project require to establish a baseline for the KPI and contracted indicators and to measure our progress against the activities. To do so we required the expert services to collect the vital information with the technical background of conducting such studies by following SMART methodology.

2. Purpose of the expert support

The main purpose of this consultancy is to conduct one baseline study based on SMART methodology, covering the 60 villages in Kayin State, to determine the prevalence of acute malnutrition of children aged 6-59 months, crude mortality and minimum acceptable diet. Consultant will undertake the following task

• Designing the study



- Develop protocols
- Developing a sampling framework
- Development of tools
- Training of enumerators
- Standardization test
- Pilot testing and fine tuning of tools if needed
- Calibration of study tools
- Supervising data collection (HH selection list)
- Data cleaning and analysis
- Report writing (Executive summary, detailed report, PPT and infographics)

3. Essential and Desirable Experience/Qualifications

a. Qualifications of the Expert

The consultant should hold an advanced university degree in Nutrition, Public Health, Epidemiology, Biostatistics, Social Sciences or related discipline with the relevant technical knowledge in research Methodology, Research Methods etc.

Technical competence:

- The consultant must have proven experience in managing population based social studies, with emphasis on nutritional cross-sectional studies / SMART methodologies. Must know EPI info and ENA for SMART and all relevant computer applications in general.
- Consultant should have experience of developing real time-based data collection tools in the popular packages i.e. ODK, Kobo, UNO etc
- Demonstrated skills at gathering and analyzing non-anthropometric data
- Excellent reporting and presentation skills.
- Excellent knowledge of and experience with humanitarian guidelines and principles.
- Fluency in written and verbal English is required, and other local languages spoken in the working area is an advantage.

b. Desirable:

Extensive experience (3-5 years) in coordinating and managing nutrition cross sectional study is required. Minimum experience of having led Methodology; proven team leading and managerial experience, knowledge of working with conflict-affected populations and experience in managing studies in fragile contexts will be considered a plus. Individuals from the countries that are approved for Myanmar business e visa are encouraged to apply for the consultancy.

4. <u>Objectives and Specific Tasks to be undertaken by the expert</u> <u>Specific objective(s)</u>



- To estimate the prevalence of acute malnutrition among children aged 6-59 months and PLW of the targeted children.
- To estimate the prevalence of children minimum acceptable diet (WHO, IYCF standard indicator).
- To estimate the Crude Mortality rate (number of deaths/10000) with a focus on maternal deaths

5. <u>Scope of work</u>

Describe the stages and flow of work to be undertaken by expert or consultant

Activities	Duration	Timeframe
Recruitment of the consultant / team	15 days	20 th Feb – 7 th
		Mar
Presentation of detailed workplan from the consultant	5 days	7 th – 14 th Mar
Field mission	20 days	22 nd April –
		20 th May
Report writing	10 days	21 st May – 2
		June
Feedback from PUI	3 days	3 rd June – 6 th
		June
Final validation	7 days	9 th June – 17 th
		June
Total	60 days	

6. Geographical scope

60 Rural villages of Hlaingbwe, Myawaddy, and Kawkareik township of Kayin State of Myanmar face significant challenges due to their remote location and limited accessibility. Poor infrastructure, security concerns, check points and communication difficulties hinder humanitarian efforts and development initiatives. For robust analysis it is crucial to have provision for enough reserve clusters and to develop tools and methodology to monitor data quality.

7. Expected Deliverables

Deliverable	Timeframe	%
Cross sectional study protocol (tools in real time-based	One week after the signing of the consultancy	
data collection platform, Sampling frame, study clusters		
and reserve clusters, Seasonal calendar etc) outlining		10
Cross sectional study design and indicators, along with a		
detailed workplan.		



Final Cross sectional study report (in accordance with stated requirements)	Within two weeks after preliminary presentation/submission	30
Final data collection tools	One week after the signing of the consultancy	10
Preliminary findings/report and submitted to PUI	1 week after completion of data	30
Presentation of the key findings and recommendations to PUI	1 week after feedback on draft report is received from PUI	10

The final SMART methodology based Cross sectional study report should be structured as follows:

- Executive summary: Analysis of nutrition anthropometric indicators assessed among children 6-59 months and the report will also include analysis of key variables of interest.
- Introduction: Geographic description of the Cross-sectional study areas, season, description of the population, and Objectives of Study.
- Methodology: Full study design, sampling and data quality control and plausibility checks.
- **Result 1**: Point GAM and SAM (6-59 months and PLW) estimates according to WHZ and/or oedema and low MUAC with 95% confidence interval. All other non-anthropometric indicators must be reported with 95% confidence intervals.
- **Result 2**: Crude mortality rate with 95% confidence interval with 95% confidence intervals
- **Result 3:** Children aged 6-23 months who receive a minimum acceptable diet (%)
- Discussions including the interpretation of the results
- Conclusions and recommendations
- Annexes: Maps, tools used, plausibility check, results of the standardisation test (full list provided in standard PUI report format

Training Report – results of standardisation test	Upon completion of the	
indicating all enumerators are trained to the necessary	training	10
standard.	training	

8. <u>Budget</u>

The consultancy shall not exceed 15,000 EUR

9. Lines of Communication

- Line manager of the Final Evaluation during the work Health Coordinator
- Technical support/liaising with –MEAL Coordinator and Health Coordinator
- In the field while collecting data Field coordinator and field staff



• Final approval of the work/payment – Head of Mission

10. Copyright and Intellectual Property Rights

In consideration of the fees paid, the consultant expressly assigns to Première Urgence Internationale any copyright arising from the works he produces while executing this contract. The consultant may not use, reproduce, or otherwise disseminate or authorize others to use, reproduce or disseminate such works without prior consent from Première Urgence Internationale.

11. Timeframe

Total number of working days should be considered in reference to timeline stated under Scope of work session. Consultant/team can propose the timeframe according to the actual workplan.

Activities	Duration	Timeframe
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		20 th May
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		June
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		17 th June
Total	60 days	

12. Conclusion

We need to publish this TOR on national level and international level websites to invite the qualifies consultants. Relief web, Impact poll, Devex are the suggested sites for the publication of the TOR.

13. Applications:

All applicants must meet the minimum requirements described above. Only short-listed candidates will be contacted.

Each application should include the following:

• Cover letter with the applicant's current contact information including how the candidate's previous experience matches the consultancy objectives as well as their interest in the position



- Financial proposal/detailed budget of the project and technical proposal on how they intend to carry out the assignment. The consultant's photographic/videographic equipment should be detailed here.
- CV of consultant and professional references or letter of recommendation
- Samples of recent similar assignments: online portfolios and links to publish work

14. Deadline for submission:

Documents must be submitted by email to <u>log.co@premiere-urgence-mmr.org</u>; <u>dep.log.co@premiere-urgence-mmr.org</u>, with a CC to <u>log.off@premiere-urgence-mmr.org</u>; <u>proc.off@premiere-urgence-mmr.org</u>

Closing date for applications: 20th February 2025