

Consultancy Terms of Reference:

Develop strategies to improve a coordinated and integrated response to cholera and AWD outbreaks within humanitarian crises

This consultancy is requested by:

Unit:	Global Health Cluster
Department:	Emergency Operations

1. Purpose of the Consultancy

The purpose of this consultancy is to improve the integrated response to cholera and AWD outbreaks within humanitarian crises. The final output of this project, *a joint operational framework*, is intended primarily to be an operational guidance for health and WASH coordinators in cluster or cluster like coordination platforms. The framework will provide coordinators at the national or sub-national level with the tools and guidance for *leading an integrated approach for preparedness and response of cholera outbreaks*. The secondary audience of this framework is for implementing health and WASH organizations and other humanitarian stakeholders (e.g. Humanitarian Coordinators, Humanitarian Country Teams, OCHA), who are working in cholera response and will benefit from a clearer understanding of the ways that inter-sector activities should be undertaken between sectors.

2. Background

Cholera and acute water diarrhoea (AWD) outbreaks remain a major public health threat during complex humanitarian crises and in the aftermath of major natural disasters. Many of the most severe outbreaks of the last decade (Haiti, Somalia, South Sudan, Ethiopia, Sudan, and Yemen) have largely occurred within protracted and complex humanitarian crisis, often in countries with weakened public health systems and lack of national capacity to respond.

In these contexts, humanitarian coordination under the IASC Cluster approach plays a significant role in supporting existing public health capacity of the host governments to assess, plan and coordinate the preparedness and response measures for cholera and AWD. In these cases, the Health Cluster and WASH Cluster are mandated to support the coordination for public health responses, including cholera responses.

Existing guidance on how to lead and coordinate a cholera response largely comes from the UNICEF/WHO Cholera Toolkit (2012), which is intended for a wide range of stakeholders and with more focus given to technical aspects for WASH and Health actors. Despite the roll-out and use of this toolkit, there is wide recognition that the existing inter-sectoral capacity for leading a coordinated response needs to be strengthened to more rapidly and efficiently prevent and contain cholera outbreaks in future humanitarian crises.

Ensuring the cluster approach remains “fit for purpose” for public health response to cholera outbreaks is therefore critical and requires a **new joint operating framework** between Health and WASH, setting clear guidelines and actions for an integrated approach to coordination. To achieve this, the Global Health and WASH Clusters recently completed a global analysis of the existing barriers and gaps in cholera response coordination. This Phase-1 work generated a

high level of interest and dialogue amongst key stakeholders and has provided a series of recommendations to inform Phase-2 work, on the design of a new set of operational guidance materials for national Health and WASH Clusters to deploy for field use.

3. Planned timelines (subject to confirmation)

The project will be undertaken from September to December 2019.

4. Work to be performed (approx. 42 days)

The main objective of this consultancy is to develop a *joint operational framework* (JOF) for integrated Health and WASH approach to cholera preparedness and response based on the key outcomes and recommendations from the Phase -1 global analysis report. The work will be undertaken in close collaboration with the Global Health & WASH Cluster Coordinators; country-level Health and WASH cluster coordinator; Health & WASH cluster partners and senior technical and operational staff from respective WHO and UNICEF Emergencies Programmes at HQ and Regional level.

Activities include:

1. Review recommendations for the Phase 1 global analysis report and outcomes from related discussions and categorization work performed by WHO / UNICEF technical focal points. **(approx. 7 days)**
2. Develop a draft version of a joint operational framework that addresses the key recommendations. The framework should be structured around the Humanitarian Program Cycle but remain focused on guidance that is practical for use in operational settings. It is envisaged that the overall (JOF) will comprise of a series of flow charts and scorecards to describe and monitor the necessary key actions, highlighting specific areas that support an integrated and coordinated response; including individual but linked frameworks on (i) essential foundational recommendations; (ii) preparedness and (iii) response **(approx. 20 days)**
3. On completion of a working draft of the joint operational framework, facilitate a series of webinar workshops convened by the Global Health and WASH Clusters involving key stakeholders (coordinators from WASH and Health Clusters, health and WASH organizations) to review the draft framework and provide input on making. **(approx. 3 days prep; 2 days of webinars)**
4. Complete final framework document and any supporting materials. Liaise directly with design consultant hired by GHC to agree content layout **(8-10 days)**

<p>Output Joint operational framework for Health and WASH clusters for the coordination and integration of cholera and other AWDs preparedness and response activities.</p>
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5. Planned timelines (subject to confirmation)

Start date: 1 October 2019

End date: 31 December 2019

6. Technical Supervision

The selected Consultant will work on the supervision of:

Responsible Officer:	Linda Doull; GHC Coordinator	Email:	doulll@who.int
Manager:	Linda Doull; GHC Coordinator	Email:	doulll@who.int

7. Specific requirements

Experience required (minimum 10 years):

Experience in Cluster Coordination at national and global level

Experience in inter-cluster coordination

Experience in outbreak preparedness and response.

Experience in data analysis and reporting

Experience in report writing

- Skills / Technical skills and knowledge:

- In-depth knowledge of the IASC Protocols and the Cluster Approach.
- Survey design
- Data management and analysis
- Strong analytical skills and capacities;
- Strong verbal and written communication skills;
- Strong facilitation
- Ability to independently plan and execute assigned tasks and duties.
- Desirable: strong understanding information technology

- Language requirements:

English.

Knowledge of French an advantage.

8. Place of assignment

The work will be conducted remotely, and the consultant will travel to Geneva, Switzerland at the start of the consultancy and periodically throughout for meeting with the Global Health and WASH Cluster Coordinators, to prepare for and facilitate the workshop with stakeholders and the end of the work.

9. Medical clearance

The selected Consultant will be expected to provide a medical certificate of fitness for work.

10. Travel

While on mission under the terms of the consultancy, the Consultant will receive travel and subsistence allowance in line with the standard WHO allowances. *All **travel arrangements** will be made by WHO – WHO will not be responsible for tickets purchased by the Consultant without the express, prior authorization of WHO. While on mission under the terms of this consultancy, the Consultant will receive **subsistence allowance**.*

*Visas requirements: it is the consultant's responsibility to fulfil visa **requirements** and ask for visa support letter(s) if needed.*

11. How to apply

Please send your CV and cover letter of application to: fitzpatricke@who.int

by **23.59 (Geneva time) 25 September 2019.**