



Project Assessment Terms Of Reference [TOR]

Consultancy Title:	Health Economist
Type of Contract:	Short Term Contract
Expected Start Date:	25th-March 2021
End Date:	25th-April 2021
Districts of Operation:	Mayuge
Duration of assignment:	30 days

Title of Grant Project: Strengthening Uganda's Civil Society Advocacy Responses to the long-term health and social sector governance problems and structural weaknesses exposed by COVID-19 Pandemic

Introduction and background:

Reach A Hand Uganda (RAHU) is a youth centered organisation focusing on youth empowerment programs with emphasis on Livelihoods & Skills Development, Behavior Change Communication, Sexual Reproductive Health & Rights, and HIV/AIDS awareness and prevention. RAHU is part of a consortium of nine seasoned advocacy partners that form the Open Society Initiative for Eastern Africa (OSIEA) that have shared goals and objectives realizing human rights and social justice in health for the most vulnerable people.

RAHU under the project:

RAHU will contribute by generating evidence at the grassroots through research and the collective feedback of its youth champions and relevant community stakeholders. This evidence will be amplified at the national level via a multi-participant dialogue aimed at scrutinizing the accountability processes of duty bearers. Specific asks towards organizing for the realization of rights particularly Sexual Reproductive Health Rights (SRHR) will be made to the duty bearers. These calls to action will be reinforced by a digital advocacy campaign that will further create awareness and heighten involvement of rights holders in accountability processes.

Research justification and purpose

It has been noted that during the COVID 19 pandemic, there has been limited access to SRHR services for the vulnerable groups (young persons with disabilities, young rural people, teenage mothers, young persons in slum areas, mountainous areas, young persons living positively with HIV/AIDS), key populations and young people i.e. 10-24. The COVID 19 response in the country led to a national lock down which involved imposing strict curfews and restrictions on movement and closure of borders affecting access to SRHR information and services prompting the questions; *How were the vulnerable groups able to access SRHR information in order to make informed decisions on their health? How were the young people and vulnerable population able to access SRHR services to avoid unwanted pregnancies and not be a statistical contribution to the high teenage pregnancies in the country? How have the changes in the district at the origin of COVID 19 responses such as imposing strict curfews and restrictions on movement and closure of borders contributed to Young people and vulnerable population?*

Based on such observations, it is imperative to conduct a research study that will identify the impact of COVID 19 response to access of SRHR services and information for the young people and with a key emphasis on the vulnerable population of young people.

Objectives of the study:

- To examine the effect of COVID 19 in the access of the SRHR services among young people 10-24 and vulnerable populations
- To identify the impact of the national response to COVID-19 on access to SRHRs for young people.
- To establish the role of the District and community leaders in the access of SRHR services during the COVID 19 Pandemic.
- To assess the effects of the pandemic on the households of young people 10-24.

Scope of Work and Expected Outputs

This study will be conducted in Mayuge District in 2 Sub Counties i.e. 1 where we had interventions during the partial lockdown and the other where we did not. This study is expected to be concluded within 30 days. The focus will be on how households were affected by the COVID19 pandemic in the access of the SRHR services.

Evaluation questions include;

1. What is the percentage of the young people and vulnerable groups affected by COVID 19 in the access of SRHR services?
2. What is the percentage of households affected by COVID 19 in the access of SRHR?
3. To what extent did the District and community leaders contribute to the access of SRHR services during the COVID 19 Pandemic?

Research Plan and suggested methods

The research will include the following phases:

A. Inception plan: Based on literature reviews, preparatory meetings, discussion with stakeholders etc, the research team will prepare a methodological proposal inclusive of;

1. Introduction
 - Research background
 - Brief literature review
 - Conceptual framework of COVID 19 in relation to access to SRHR services and Information
 - Research themes and questions
2. Research design and methodology
 - Selection of target areas for case studies in Mayuge district
 - Qualitative approaches and methods
 - Questions for focus groups or key informants
 - Informant selection
 - Quantitative and qualitative data collection methods
 - Questionnaires & guidelines
3. Data gathering processing and analysis
4. Risks and limitations, ethical approach and informed consent
5. Detailed work plan and Research Team composition and responsibilities

This phase will be completed by the approval of the Inception report by the Monitoring, Evaluation and Learning (MEL) department.

B. Fieldwork: This will be carried out in the different sub counties selected by the research team in collaboration with the Monitoring, Evaluation and Learning (MEL) department at RAHU.

C. Report Drafting: The report should follow recommendations detailed in the ToR and a first draft should be sent for review to the MEL department as per the timing breakdown approved. The final report based on the recommendations and inputs will be sent for final review and approval before the final document is produced.

Suggested Methodologies

- Documents and records (Desk review, literature review), Interviews (In depth interviews, focus group discussions), Observations, case studies, surveys.
- Primary data collection based on quantitative and qualitative research methods adapted to Young people and key population (group discussions, life stories, testimonies,) in selected target areas, with an intersectional focus on ethnicity, class, cultural factors or other factors relevant for the analysis; data should include direct testimonies and stories as well as other knowledge management products.

DELIVERABLES / FINAL REPORT

The overall objective of the research team will be to deliver a high quality and publishable report among other deliverables including:

- A detailed research report not exceeding 50 pages; appendices can be added in annex. The report should include an executive summary of 3 to 5 pages.
- Synthesis notes of the major findings per sub county shared with the RAHU team. Each should not exceed 15 pages,
- PowerPoint Presentations (PPT) to present the main findings, conclusions and recommendations of the research report that can be used in different public arenas .

Proposed Time Table

Dates to be fixed with selected research lead		
Planning meeting	Meeting with the Health economist at Reach A Hand Uganda for formal introductions.	1 day
Preparation of the inception report	Desk study, literature review, research hypothesis draft, first stakeholders contacts, identification of target areas for case studies, methodology outline, matrix and questions drafting, timetable and work plan	7 days
Field Work	Target area 1-Training of research assistants and pretest Target area 2 – Field work + Production of Sub county 1 Synthesis Note Target area 3 – Field work + Production of Sub county 2 Synthesis Note	14 days
First Draft	Elaboration and delivery of the 1st draft	3 days
Final Report	Incorporation of comments received and additions suggested from the review committee and production of the final research report	5 days
Total Days for Research		30 days

Minimum Requirements.

- Past experiences on similar assignments in the SRHR field.
- Good understanding of the subject of economics and the health-care industry
- Excellent research skills and ability to analyze findings to make appropriate use
- Clear understanding of the country's health economy
- Abreast with the national economic policies and its impact on the health-care sector
- Fluent verbal and written communication skills
- Possess strong leadership and management skills
- Strong orientation to team work and ability to meet deadlines.
- Experience in successful implementation of plans and achievement of objectives
- Ability to handle pressure, complex situations and problem solving capacity
- Ability to think analytically and strategically

Education and Experience

The health economist should at least hold a master's degree in health economics, health policy, or the related branch of study with over two years of work experience. A doctoral degree (PhD) in one of these subjects will have an added advantage

SUBMISSION OF TECHNICAL PROPOSALS

Submission of tenders should be made by email to the address indicated below, by specifying on the Cover page with the research title.

The tender proposals should include at least the following:

A. Preliminary research framework based on the ToR, inclusive of:

1. A theoretical framework suggesting hypotheses of COVID-19 response greatly impacting the household costs of young people and vulnerable groups accessing SRHR services
2. Suggested criteria and relevant questions for testing the research hypotheses
3. A logframe or matrix that operationalize these questions
4. Information on the collection methodology

B) A timeframe for the research with clear details concerning the work to be executed, and specifying interim deliverables

C) A detailed budget

D) Research team description: composition, leadership and curriculum of all members

E) An example of research report produced by the research team or research lead (or valid hyper links to online published papers, reports) Place and deadline for submission of tenders:

Interested candidates should send a cover letter and detailed curriculum vitae to info@reachahand.org cc: hr@reachahand.org by 22nd March 2021 with the subject: [First Name]: Health Economist Consultant Application.