

## **TERMS OF REFERENCE**

**Job Title:** National consultant: Health Systems expert for a study on Rabies Pre- and Post-Exposure Prophylaxis (PrEP and PEP) as part of a Case study on human rabies prevention in Bac Giang province of Viet Nam, and recommendations to ensure achievement of the targets in the National Rabies Strategy 2017-2021 from provincial to local levels

**Duty Station:** Hanoi and site visit or visits to Bac Giang

**Duration:** July 2018 – September 2018

**Reporting:** National Project Director, SCOH2 project

### **1) General Background**

Viet Nam is located in a relatively high-risk region for emerging infectious diseases (EIDs), including zoonotic diseases arising from the interaction of humans, livestock, wild animals and ecosystems. Addressing risky practices related to bio-security of livestock and wildlife farming, trade and consumption will require a long-term effort.

Over the past several years, the Government of Viet Nam (GoVN) has been progressively strengthening the application of a One Health approach to zoonotic emerging infectious diseases (EIDs). Current national efforts are set out in the Viet Nam One Health Strategic Plan for Zoonotic Diseases (OHSP), 2016-2020, which sets out a five-year plan for reducing the health and other impacts of zoonotic diseases. The OHSP addresses seven key focus areas, including One Health capacity building, and the application of One Health approaches for managing human disease emergencies of animal origin, zoonotic agents with pandemic potential that are yet to emerge, zoonotic influenza viruses with pandemic potential, rabies, antimicrobial resistance (AMR), and other priority zoonotic diseases. The OHSP is available here: <http://onehealth.org.vn/documents/the-viet-nam-ohsp-2016-2020-final/203.html>.

Rabies is an important zoonotic disease that is endemic in the majority of ASEAN countries, including Viet Nam, with 74 human cases detected in Viet Nam in 2017.<sup>1</sup> Rabies has been identified as a priority zoonosis in Viet Nam,<sup>2</sup> and provides an important example of spill over at the animal-human interface. Most human cases in Viet Nam occur as a result of contact with rabid dogs. As noted in the OHSP, rabies “is highly suited to a One Health approach, and provides a practical opportunity to develop effective inter-sectoral coordination and collaboration in Viet Nam.”<sup>3</sup>

Viet Nam is committed to elimination of rabies in line with the ASEAN Rabies Elimination Strategy (ARES).<sup>4</sup> Viet Nam’s National Programme for Rabies Control and Elimination

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<sup>1</sup> Ministry of Health, Viet Nam

<sup>2</sup> Circular No. 16/2013/TTLT-BYT-BNN dated 27 May 2013

<sup>3</sup> Viet Nam One Health Strategic Plan for Zoonotic Diseases (OHSP), 2016-2020, p78

<sup>4</sup> The ASEAN Rabies Elimination Strategy (ARES) was jointly endorsed by the 36th ASEAN Ministerial Meeting on Agriculture and Forestry and the 12 ASEAN Health Ministers Meeting respectively held in September 2014. Viet Nam is a lead country for the ARES.

during the period from 2017-2021 was officially approved in February 2017.<sup>5</sup> This plan adopts a One Health approach and covers all pillars of disease control for MARD and MOH and other involved partners, and is in line with the ARES as well as with the global directions on rabies control and elimination adopted by WHO, FAO, OIE and the Global Alliance for Rabies Control (GARC).

Elimination of human rabies cases in Viet Nam and the broader region depends on control of rabies in dogs, coupled with universal post-exposure prophylaxis (PEP) in humans exposed to potentially rabid animals. The national programme sets the overall goal of controlling rabies in domestic dogs and humans by 2021, with the aim of eliminating rabies. It includes the following specific objectives for the human health sector:

- Reducing the number of provinces with a high incidence of rabies in humans by 60%.
- Reducing the number of human deaths due to rabies by 60% in 2021 compared to the average number of cases during the period from 2011 to 2015.

Reporting on the results of rabies prevention and control in the human health sector for 2017 shows significant differences between provinces in the number of reported human cases of rabies, even in areas within one region of the country that would seem to have similar levels of risk based on the reported incidence of canine rabies.<sup>6</sup> The OHSP highlights the need for strengthening the administration of post-exposure prophylaxis (PEP) for all humans bitten by a dog (or other mammal) that could have rabies, through the introduction of district treatment centres to all high-risk areas to reduce the need for travel for those requiring PEP. It also notes the need for pre-exposure prophylaxis (PrEP) for high risk groups including dog vaccinators, dog handlers and where necessary children in high risk areas, through identification of high risk groups and implementation of a vaccination program. In order to achieve the targets of the national programme, further understanding and efforts are expected to be needed on both PEP and PrEP from the provincial to local levels.

The second phase of the Strengthening capacity for the implementation of One Health in Viet Nam project (SCOH2), implemented by the Ministry of Agriculture and Rural Development (MARD) in cooperation with the Ministry of Health (MOH), with funding from USAID via UNDP, supports the Viet Nam One Health Partnership for Zoonoses (OHP) and its Secretariat located within MARD. A key activity of the SCOH2 project is to commission research to support One Health policy-making in Viet Nam. The topics for this research are identified by the OHP Secretariat under the guidance of key technical agencies within MARD and MOH as well as other national and international experts within the project's Technical Advisory Committee (TAC).

In order to support the development of clear information and recommendations to national policy makers and other key stakeholders on the status of One Health capacity building, collaboration and efforts on key zoonotic diseases and AMR at the provincial and lower levels, the SCOH2 will commission a series of studies on one selected province, contributing to building up a provincial profile on selected key One Health issues as a basis for identifying recommendations for strengthening One Health capacity and efforts at the provincial level.

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<sup>5</sup> Government of Viet Nam (2017) Viet Nam's National Programme for Rabies Control and Elimination, 2017-2021, issued by the Prime Minister according to Decision No. 193/Q -TTg dated 13 February 2017.

<sup>6</sup> Ministry of Health (draft) Report on the Rabies situation in 2017 (forthcoming). MARD Department of Animal Health (DAH), Báo cáo H i ngh s k t ch ng trình qu c gia kh ng ch và ti n l i lo i tr B nh d i giai o n 2017-2021, n m 2017 (Report on the Conference on the Preliminary Results during 2017 of the National Programme for Rabies Control and Elimination, 2017-2021), Hanoi, 19 January 2018.

This series will include the following study: *Case study on human rabies prevention in Bac Giang province of Viet Nam, and recommendations to ensure achievement of the targets in the National Rabies Strategy 2017-2021 from provincial to local levels.*

Drawing on both qualitative and quantitative data, the study will describe the situation of canine and human rabies in the province, identify the key barriers to meeting the national targets for human rabies prevention, and propose recommendations to address these barriers and meet the national targets. Key questions to be answered by the study include:

- What is the profile of canine and human rabies in the province?
- What factors that affect the situation of human rabies in the province?
- What is the status of inter-sectoral coordination and plans on rabies prevention, control and elimination in the province, from the human health perspective?
- What is the status of surveillance and reporting of human rabies?
- What laboratory capacity is available to the human health sector?
- What is the status of key prevention and management issues, including public awareness raising, capacity and implementation of PrEP and PEP, etc.
- How is the epidemiology of canine and human rabies analyzed within the province by the human health sector? How are dog bite cases and suspected and confirmed rabies cases investigated and managed? How are lessons from this applied to overall control efforts within the province?
- What are the key barriers to meeting the targets in the national rabies strategy under the responsibility of the human health sector?
- What are key recommendations for strengthening rabies policies, resources and actions at all levels in Viet Nam based on the lessons from this province?

These terms of reference are for selection of a National Consultant as Health Systems Expert (hereinafter referred to as ‘the Contractor’) to carry out a study on the role of the health system in delivering both PrEP and PEP, as a basis to identify relevant information to address key research questions of the case study, including the formulation of recommendations to address barriers and meet the targets for the health sector set out in the national programme.

Separate National Consultants will be mobilized by the project as (i) Lead Researcher and Human Rabies to lead the design and implementation of the overall case study, including field research with veterinary authorities and related stakeholders at the provincial, district and commune levels, and to prepare the overall case study report, incorporating the inputs from the other consultants, and (ii) a Social Research Expert (hereinafter referred to as ‘the Contractor’) to carry out a KAP study with local authorities and community members in identified high-risk areas (selected districts).

The Contractor will contribute to the design of the detailed contents and methodology of the study and the collection and desk review of related reports, will carry out the study on the role of the health system in delivering both PrEP and PEP in Bac Giang, and will contribute to the drafting of preparation of the draft report, presentation of findings, and completion and submission of the final study report.

## **2) Objective of the assignment**

The objective of the assignment is to contribute expertise and specific outputs, focused on a study on the role of the health system in delivering both PrEP and PEP, contributing to an

overall case study on a case study on human rabies prevention in Bac Giang province of Viet Nam, and recommendations to ensure achievement of the targets in the National Rabies Strategy 2017-2021 from provincial to local levels. The study report will incorporate the results of desk review of available materials as well as fieldwork undertaken directly in Bac Giang and addressing comments from provincial, national and international stakeholders.

### **3) Scope of work**

The following are the key tasks expected of the selected Contractor under this assignment:

1. Based on the initial consultations, contribute key inputs to the preparation of an inception report and detailed work plan for the preparation of the provincial profile, including the design of the proposed detailed study contents and methodology. The plan should be tailored to the specific study locations and should be sent to the SCOH2 project and UNDP for review. Once finalized, it should be sent to Bac Giang province well in advance of the field work.
2. Contribute key inputs to the collection and desk review of related information and studies, including meetings and follow up with related national and international organizations, projects and programmes in Hanoi to collect information and documents.
3. Develop and test the proposed interview and survey tools and questionnaires for the conduct of the study on the role of the health system in delivering both PrEP and PEP, and revise the tools based on the results of field testing and comments from the SCOH2 project and UNDP.
4. Carry out the study on the role of the health system in delivering both PrEP and PEP, which is expected to include:
  - a. Structured interviews and questionnaires with relevant officials (People's committee representatives, district and commune health centres, etc.) and related sectors at the district and commune levels (selected districts and communes).
  - b. Structured interviews, questionnaires and discussion groups with identified high-risk groups (based on their demand, concerns and interests to receive PrEP) and with dog bite victims (PEP users).
5. Collate and analyze the qualitative and quantitative data that was collected during the desk review and the study on the role of the health system in delivering both PrEP and PEP.
6. Contribute to the presentation of the draft study findings to a workshop of key stakeholders. This workshop will be organized by the SCOH2 project, either in Hanoi or the study province.
7. Taking into account feedback from the Project and related stakeholders both directly and at the workshop, contribute to the preparation of the full draft report, including drafting of the section on the study on the role of the health system in delivering both PrEP and PEP and related recommendations. Provide comments on the other sections of the report.
8. Taking into account feedback from the Project and related stakeholders, contribute to the preparation of the final report, including revision of the section on the study on the

role of the health system in delivering both PrEP and PEP and related recommendations, and comments on the other sections of the report.

#### **4) Duration of assignment, duty station and expected places of travel**

The duration of the assignment is 25 work days during the period from July 2018 to September 2018.

This service is home-based, in Hanoi with site visits to Bac Giang province, and some visits to the SCOH2 Office, MARD, UNDP office or other locations within Hanoi which will be agreed upon in advance. The Contractor is expected to spend at least 8 working days for 2 missions to Bac Giang province.

The bidder must include travel costs including travel to the field locations in their financial proposal.

#### **5) Final Products**

The Contractor is responsible for the following outputs, to be delivered in English and Vietnamese.

- The section of the inception report detailing the approach, methodology and work-plan in implementing the study, and comments on other sections of the inception report.
- Written comments on the list of proposed specific study locations (districts/communes) with a clear rationale.
- Survey and interview questions, checklists and other tools for implementing the study on the role of the health system in delivering both PrEP and PEP.
- Contributions to the overall study report, including drafting and final versions of the section on the study on the role of the health system in delivering both PrEP and PEP and related recommendations, and written comments on the other sections of the draft and final overall report.
- Excel spreadsheets containing data and analysis of the results from the field work.
- Relevant supporting documents including list of workshop participants, introduction letters, copies of presentations, etc. and written notes and comments of consultation meetings and consultations with the project, the consultation workshop, and meetings with study stakeholders; photos taken and data collected during the site visits.
- List of references outlining information collected and analyzed during the desk review and field work.

#### **6) Tentative Implementation Plan:**

The Contractor will be expected to undertake the following tasks and deliver the required outputs (in English and Vietnamese) as specified. Below is the suggested timeline for key outputs.

<b>Task Assigned/Output</b>	<b>Deadline</b>
1. Contributions to the inception report and detailed work plan, including design of the proposed detailed study contents and methodology for the KAP study	08 July 2018

2. Collection and desk review of related information and studies	15 July 2018
3. Prepare, test and finalize the interview and survey tools and questionnaires for the KAP study	20 July 2018
4. Carry out the study activities in the field	10 August 2018
5. Collate and analyze the qualitative and quantitative data	20 August 2018
6. Slides on the preliminary findings from the KAP study and related recommendations, for inclusion in the overall presentation of draft study findings	30 August 2018
7. Report on the KAP study and comments on the full draft Case Study report	13 September 2018
8. Report on the KAP study and comments on the full draft Case Study report	28 September 2018

### 7) Provision of monitoring and progress control

- The Contractor will work closely with and under the guidance of the SCOH2 PMU (OHP Secretariat), including overall reporting to the NPD and day-to-day reporting to the Secretariat Manager.
- The Contractor will respond timely (within 24 hours, preferably) to technical requirements and other communications from the NPD and the Secretariat Manager.
- The deliverables shall be submitted to the SCOH2 PMU (OHP Secretariat) for review and approval. All deliverables are subject to technical clearance and approval from the NPD, the International Partnership Advisor, and the UNDP Programme Officer for the SCOH2 project.

### 8) Qualification and work experience

The Contractor should have extensive experience in conducting research in relevant areas in Viet Nam.

The requirements for the Contractor are as follows:

- Postgraduate degree in a relevant area. The academic requirements can be lowered/waived if possessing greater experience in this area.
- At least 10 years of experience in field studies in health systems assessment or relevant sectors.
- At least 10 years of direct experience related to rabies. Experience with integrated approaches to public health and One Health will be preferred.
- Strong analytical skills.
- Strong communication and writing skills in English and Vietnamese.
- Flexibility to operate in various cultural settings and with a variety of stakeholders.
- Proven excellent skills in the development of UN reports

Se	Criteria	Score
1	Postgraduate degree in a relevant area. The academic requirements can be lowered/waived if possessing greater experience in this area	150
2	At least 10 years of experience in field studies in health systems assessment or relevant sectors	150
3	At least 10 years of direct experience related to rabies. Experience with integrated approaches to public health and One Health will be preferred.	200

4	Strong analytical skills	200
5	Strong communication and writing skills in English and Vietnamese	100
6	Flexibility to operate in various cultural settings and with a variety of stakeholders	100
7	Proven excellent skills in the development of UN reports	100
		1,000

### **9) Quality review and payment terms**

Payments are based upon output, i.e. upon delivery of the services specified in the TOR. The Contractor shall receive payment in instalments as follows:

- First payment of 10% of the contract value will be paid upon submission and acceptance of the inception report and list of recommended study locations;
- Second payment of 20% of the contract value will be paid upon submission and acceptance of the study tools;
- Third payment of 40% of the contract value will be paid upon submission and acceptance of the preliminary findings and the draft report;
- Last payment of 30% will be paid upon submission and approval of all products under the contract.

### **10) Administrative support and reference documents**

Administrative support will be provided by the OHP Secretariat in its capacity as the PMU for the SCOH2 Project. Copies of relevant documents and reports will be made available to the Contractor upon commencement of the assignment. The PMU will facilitate logistical arrangements for meetings with key stakeholders in Hanoi, and for the arrangement of the workshop to present the preliminary study findings. The PMU will support the provision of official letters to key stakeholders at the provincial level to request their agreement and support to the study and the visits to the field locations.

### **11) Consultant presence required on duty station**

NONE       PARTIAL       INTERMITTENT       FULL-TIME