



Terms of Reference for a Study on the Coverage, Effects and Impacts of Seasonal Malaria Chemoprevention (SMC) and Mass Treatment Campaigns for Neglected Tropical Diseases (MT/NTD) in the Health Districts covered by the Malaria and Neglected Tropical Diseases (SM/NTD) Project in Burkina Faso, Mali and Niger.

I. BACKGROUND AND RATIONALE

The World Bank in collaboration with ECOWAS has launched a regional project, as part of its priority development interventions to fight extreme poverty and promote shared prosperity, called the “Sahel Malaria and Neglected Tropical Diseases (SM/NTD) Project”. This project, with an estimated overall cost of US\$ 121 million over 5 years, aims to increase access to and use of harmonised community-based services for the prevention and treatment of malaria and selected neglected tropical diseases in cross-border areas of recipient countries. It covers three ECOWAS countries (Burkina Faso, Mali and Niger), 57 health districts including twenty (20) in Burkina Faso, nineteen (19) in Mali and seventeen (18) in Niger.

The project is divided into three components, namely:

- Component 1: Improved regional collaboration for better results among participating countries;
- Component 2 : Support the coordinated implementation of strategic and technical interventions;
- Component 3: Strengthen institutional capacity to coordinate and monitor implementation.

The project has been implemented in collaboration with the WHO / AFRO, which is responsible for technical support to the three countries and CAMEG-Burkina Faso in charge of bulk SP/QA Procurement for the three project countries.

WAHO provides regional project coordination through components 1 and 3. It supports countries for the implementation of component 2, which comprises of five sub-components: (i) IEC/BCC interventions (ii) Seasonal Malaria Chemo-Prevention (SMC), (iii) mass distribution of drugs for selected neglected tropical diseases (Preventive Chemotherapy (PCT) NTD)), namely Schistosomiasis, Bilharziasis, Trachoma, Lymphatic Filariasis and Geo-helminths, (vi) community-based diagnosis and treatment of malaria and (v) surgical management of reversible consequences of NTDs such as trichiasis and hydroceles.

Specifically component 2 aims to: (i) reduce malaria morbidity and mortality mainly among children aged 3-59 months years old through SMC, and home-based management of malaria (PECADOM), (ii) reduce the prevalence of neglected tropical diseases especially schistosomiasis and STH among 5-14 years school-aged children, youth and adults living in rural areas, including endemic border areas with limited access to health services, and (iii) improve people’s health status through the management of reversible complications of NTDs such as trichiasis and hydroceles.

In 2020, the last year of project implementation, activities were impacted by the restriction of movement taken at country level to curtail the spread of the Covid-19 pandemic. The requisitioning of project staff and vehicles in some cases at country and WAHO levels and the temporary closure of offices led to the suspension of most of the activities planned in the first half of the year. Most of the activities had to be rescheduled for the second half of the year. This is the case for the activities of mass distribution of drugs against NTDs which exceptionally will be combined with SMC this year.

The evaluation of the effects and impacts of the project interventions relate to the activities of Component 2. The objective of this evaluation is to ascertain the coverages, effects and impacts of SMC and MDA/NTD, review the results and make recommendations. The peculiar situation of the COVID-19

pandemic will be taken into account in order to ascertain its direct impact on the preparation, organization, compliance and coverage of this year's SMC and MDA.

WAHO intends to use the services of a qualified research institution to conduct this study.

1. OBJECTIVE OF THE CONSULTING SERVICE :

a. Overall Objective

The study mainly aims to evaluate the coverages, effects and impacts of the SMC and MDA/NTD campaigns in the Health Districts covered by the SM/NTD project.

b. Specific Objectives

- Ascertain SMC treatment coverage for children aged 03-59 months per Health District (HD) at the end of each year;
- Ascertain the coverage of preventive chemotherapy achieved by MDA/NTD campaigns to eligible populations per HD, disaggregated for onchocerciasis, schistosomiasis, geo-helminthiases, lymphatic filariasis and trachoma at the end of each year;
- To measure the impact of SMC on the incidence of simple and severe malaria cases, deaths and anemia due to malaria in children aged 3-59 months among the population and health facilities in the targeted district.
- Review the impact of the pandemic and related restrictive measures on the preparation, implementation of campaigns, compliance with SMC and MDA/NTD in 2020;
- Measure the impact of MDA /NTD campaigns on the prevalence of follicular trachoma (FT) among <5 years children, LF, geo-helminthiases and Bilharziasis by Health District, each year.

2. STUDY COVERAGE

The survey will be conducted in health districts targeted by the SM/NTD Project in Burkina Faso, Mali and Niger and, if necessary, in the HD outside the SM/NTD project area in the 3 countries for control groups.

3. STUDY POPULATIONS

As far it relates to the SMC, the target population for the survey is children aged 03-59 months.

For NTDs, the target population of the survey is under 5 year children, school-age children (05-14 years) and adults (15 years and older).

4. STUDY PERIOD

The study will cover the 2017, 2018 and 2019 SMC and MT/NTD campaigns. It is planned to be carried out at the end of the seasonal malaria chemo-prevention campaigns that run from July to October, or even November and December each year.

5. TYPE OF STUDY

This is a quantitative study on intervention target populations (SMC and MDA). Preferably a household survey and a Case-Control study. The cases here are the beneficiaries of SMC and MDA treatments in the project intervention health districts, while the control groups are people of the same age living in the health districts that are not covered by the project interventions, or by other similar interventions financed by other projects or the Government.

6. METHODOLOGY

It will be defined in the research protocol to be submitted to WAHO, then to the Scientific Committee and the Ethics Committee.

7. MAIN TASKS OF THE RESEARCH INSTITUTION

The main tasks to be carried out by the research institution are:

- Develop and submit for validation a detailed technical and financial proposal for the consultancy;
- The technical proposal shall include, in particular, a detailed research protocol containing, the following information among others:
 - Understanding the consultancy;
 - Study materials and methods, including: (i) the type of study, (ii) the sampling method, (iii) the sample sizes to be surveyed, (iv) variables, (v) data collection, processing and analysis methods including statistical tests and causality criteria, (vi) the duration of the various phases of the study, and (vii) data collection tools.
 - The consultancy execution chronogram;
 - Ethical rules to be complied with during the survey;
- Submit the protocol for study and validation by the scientific and ethics committees of the countries concerned;
- Finalize the protocol and data collection tools in accordance with the recommendations of the scientific and ethics committees;
- Conduct the survey in accordance with the terms of the contract;
- Prepare and submit an interim report on the study results to WAHO on an agreed date;
- Prepare and co-facilitate with the WAHO Team a workshop to present the preliminary results of the study;
- Finalize the survey report and submit it to WAHO within the agreed time frame;
- Write and submit to WAHO a scientific paper on the results of the study and an advocacy policy brief to the relevant authorities for the implementation of the recommendations from the study.

8. DELIVERABLES

The mission consultants will submit the following deliverables to WAHO:

- The Consultancy's detailed technical and financial proposal;
- Finalized and validated research protocol, including informed data collection tools;
- Validated survey report;
- The electronic database of the survey, including tables, graphs and maps produced following the analyses;
- The Policy- brief for advocacy with partners to take into account the results of the survey in the strategic and operational planning of the following project phases;
- The article presenting the results of the survey to be published in a high-impact scientific journal.

NB: The various outputs or results flowing from the study shall remain the exclusive property of the West African Health Organisation.

9. REQUIRED QUALIFICATIONS/EXPERTISE

The study will be conducted by a recognised research institution with a good reputation. This institution must demonstrate a good knowledge of malaria prevention strategy and mass treatment of neglected tropical diseases, expertise and proven research experience in the field of malaria and neglected tropical diseases. Proven experience in carrying out impact/effect studies in these or similar fields, and in publishing the results in renowned international scientific journals.

The research institution must have or be able to mobilise the appropriate relevant resource persons for the satisfactory execution of the mission:

The institution should assemble a multidisciplinary team of key experts such as:

- Epidemiologists with several years of experience in conducting impact studies ;
- infectious specialists
- Biologists;
- Biostatisticians ;
- Database manager

10. CONSULTING PERIOD

The consultancy period is two (02) months from the date the contract is signed.