Terms of Reference

RIPOSTE PROGRAMME

“Review of the RCRC Enhanced Vulnerability and Capacity Assessment (EVCA) approach to better integrate the epidemic risk”

Duration of the mission: 40 working days
1. SUMMARY

<table>
<thead>
<tr>
<th>Project</th>
<th>RIPOSTE Programme</th>
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<tbody>
<tr>
<td>Scope of the mission</td>
<td>The Vulnerability and Capacity Assessment is a participatory approach that uses a variety of participatory tools to understand to which extent the local population is exposed and able to withstand natural hazards. The EVCA process is a key part of disaster risk reduction programming and enables people to identify, understand and prioritize risks, as well as to design participatory responses that are appropriate to their realities. The purpose of this assignment is to review the IFRC’s Enhanced Vulnerability and Capacity Assessment (EVCA) tool and adapt it to systematically include the epidemic risk component.</td>
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<tr>
<td>Type of consultancy</td>
<td>Desk Study (remote) + travels</td>
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<td>FRC Focal point</td>
<td>Valentina Evangelisti, Disaster Risk Reduction Adviser</td>
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<tr>
<td>Starting date</td>
<td>6th of June</td>
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<td>Ending date</td>
<td>30th of September</td>
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<td>Deliverables deadline</td>
<td>30th September</td>
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<td>Overall Duration / #days</td>
<td>40 working days</td>
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1. CONTEXT

1.1 RIPOSTE Programme Overview

In recent years, the international community has been marked by the occurrence of widespread and frequent outbreaks of epidemics, driving the need for effective responses, but has also revealed the importance of the role played by communities at the heart of epidemic prevention, surveillance and response mechanisms. While humanitarian actors have focused on improving the clinical case management, there is still a gap in actions to prevent and control epidemics due to a lack of local capacity, weak coordination and an absence of efficient and adapted approaches to different epidemic risks.

Health systems and disaster risk management are interdependent; for example in the impact of disasters on people's health and well-being, the influence of climate change on people's health and propagation of disease, and the increased vulnerability of populations to complex interrelated natural, epidemiological, and conflict-related risks. Despite their interdependence, health and disaster risk management systems still operate in silos.

The RIPOSTE programme aims at strengthening the capacities of National Societies of the RCRC movement, institutional and civil society stakeholders facing epidemic risks. To this end, the intervention will consist on the one hand of improving the capacities of the various health and
disaster risk management actors in prevention, preparedness and response to epidemics. On the other hand, the intervention will also contribute to capacity building of National Societies of RCRC (through training, manuals, guides, revision of contingency plans) and to strengthen the resilience of vulnerable communities facing epidemic risks. The deliverables will be disseminated to all humanitarian actors in French and English. This work will enable strengthening the capacities of local actors as well as international organizations working on epidemics for the benefit of affected populations. In addition to the objective of capacity development and transferring skills, the RIPOSTE programme will also support the targeted NS in their efforts to become more autonomous and better prepared to respond to epidemics.

The aim of this programme is to standardize epidemic preparedness and response components by providing concrete tools that can be used by the humanitarian actors in the field and to facilitate the integration of the different approaches used in Disaster Risk Management (DRM) and epidemic response. Tools developed will be tested on the ground in the different targeted countries and contexts.

The programme intends to develop training, guides, approaches and guidelines, which will be tested in 3 sub-Saharan African countries (Guinea, Cameroon and DRC) and 2 regional intervention platforms of the FRC positioned in the Indian Ocean and the Caribbean (PIROI Plateforme d’Intervention Régionale Océan Indien and PIRAC Plateforme d’Intervention Régionale Amérique et Caraïbes). Due to its objective and its very global approach, all the tools developed during the programme activities will be widely disseminated to all the countries where the FRC is active in the world. The FRC will also pre-position response kits and materials that will be used widely to respond to all types of epidemics in all countries.

1.2 THE EVCA APPROACH

Participatory Capacity and Vulnerability Analysis is a well-known participatory approach used in the DRM sector. The approach may vary slightly from one organization to another, but always
aims to assess, together with communities, the risks faced by exposed groups, their capacities and vulnerabilities to these risks, and the opportunities and actions to reduce them.

This analysis enables people to identify and understand the risk(s) they feel should be addressed as a priority. This tool enables local priorities to be established and responses to be designed with the population in line with their contexts and available resources and their realities. It is the basis and first step in the implementation of community-based risk reduction programmes.

National Societies in the Red Cross Red Crescent (RCRC) movement use the Vulnerability Capacity Assessment (VCA) approach, which has been subsequently updated and improved in its more recent version called Enhanced Vulnerability Capacity Assessment (EVCA) https://www.ifrcvca.org/.

While EVCA is primarily aimed at natural hazards, it may also address other types of hazards, including epidemic hazards, which, since February 2020, have generated an increased interest in adopting a more preparedness and risk-reduction approach to epidemics.

As part of the RIPOSTE programme, which aims to systematize and standardize epidemic risk reduction and preparedness, and to integrate disaster risk management approaches with epidemic risk management, the EVCA approach will be reviewed, through an external consultancy with the aim of systematically including an epidemic component. A participatory approach, including IFRC and National Societies, will ensure that the new toolkit will correspond to the needs in the DRM sector and will be integrated into future projects.

The consultancy will take place at the global level, with the aim of developing a standardized EVCA tool, but it will also include opportunities to test the tool in ongoing programmes, i.e. in the Indian Ocean and in Cameroon.

2. OBJECTIVES, METHODOLOGY, EXPECTED OUTCOMES

2.1 Scope of the consultancy

The objective of the consultancy is to review the EVCA package to complement it with additional indications or exercises, to be used when an epidemic risk component is identified. A participatory approach, including the IFRC and the National Societies involved in EVCA work, will ensure that the toolkit review is pertinent for Epidemic and DRM work, and integrated into future projects.

The consultancy will take place at the global level and within a global framework, with the aim of developing complementary tools for the standardized EVCA, and will include a testing phase within ongoing programmes in Cameroon and the Comoros islands (Indian Ocean).
2.2 General Objective

The objective of the consultancy is to review the EVCA package and complement it, where needed, with additional indications or exercises, to be used when an epidemic risk component is identified.

2.3 Specific Objective

The specific objectives of this mission will be:

- To review the different steps of the EVCA and ensure that they are tailored to also help communities self-assess epidemic risk, in addition to natural related risks
- To tweak the tools and the facilitation guide, including specific information or questions at the different steps of the process, that will refer to epidemic risk
- To include, where needed, references to specific annexes and exercises that enable the capacity and risk assessment to get in to a more detailed analysis when the epidemic risks is mentioned by communities
- To test the reviewed EVCA in Comoros islands and Cameroon, in areas where natural hazard and epidemic risks coexist
- To disseminate the EVCA reviewed tools with stakeholders in the health and DRM sectors internal and external to the RCRC movement

*NOTE* As the EVCA is a community based multi-risk assessment of capacities and vulnerabilities, and its goal is not to assess specific sectoral needs in detail, the specific objective of this mission is not to necessarily add an additional assessment tool to the package but to make sure that the existing set of tools (and the facilitation methodology) is adapted to help communities self-assess epidemic risk together with others (and eventually facilitating additional exercises, such as community discussion, or redirecting to other specific epidemic assessment and preparedness actions).

2.4 Methodology

The methodology will include:

1. **An inception and consultation phase:**
   - **A desk review** of the EVCA documents, including annexes and tools, and other pertinent related tools and approaches that are linked to the EVCA process.
   - **A first consultation**, through Key Informant Interviews (KII) and Focus Group Discussions (FGD) with key stakeholders and EVCA practitioners in the RCRC EVCA working group to understand to which extent the EVCA is used in epidemic risk contexts, what are the gaps that can be filled, and which eventual adaptations have been made to the tool, if any;

2. **A development phase:**
   - This phase will consist in the review of the EVCA should take into account the following aspects (non exhaustive list):
     - How to consider epidemic risk when selecting the communities (i.e. specific diseases hot spot mapping, exposure to epidemics risk mapping)
     - How to encourage to evaluate epidemic risk, when identifying the main hazards through the standard tools such as: hazard brainstorming, historical profile, secondary/scientific data and direct observation; making sure the risks are not only the climate related ones
How to make sure epidemic risk is considered in the community’s analysis without biases or suggesting any specific risk (e.g. in the problem tree, and in general, considering the use of cascading risk, to include different types of risks, for example waterborne diseases after flood).

Assess which specific tools addressing epidemic/pandemic are missing in the ‘Go deeper’ section, where the EVCA redirect to a deeper analysis, using additional sectoral or issue-based assessment approaches.

Consider, if needed, which specific questions related to health and epidemics can be added to the ‘Resilience Star’ exercise (https://www.ifrcvca.org/resilience-star).

Where needed, complete with additional information the existing examples on epidemics in the Toolbox and guide (for example, Ebola or Dengue in the ‘Summarize Capacities’ section).

Review and evaluate whether the ‘risk planning’ and ‘contingency planning’ sections need to be complemented by additional resources related to public awareness, public health promotion, community risk communication, etc.

Develop a list with “Do and Don’t” when talking to communities about infectious diseases and epidemics, to make sure DRM and other non health staff involved in the facilitation, avoid creating stigma and/or rumor.

3. **A finalization and validation phase:** this will include
   - **two final consultation workshops to be organized** one per pilot country where the EVCA will be implemented (Comores and Cameroon), to collect feedback by EVCA practitioners in the field, on the **draft amended EVCA tools** (facilitator guide, training guide, EVCA tools, etc.)
   - **an internal workshop to present the amended draft** EVCA tools tool to the RIPOSTE team, EVCA WG of RCRC movement and IFRC for feedback;
   - **a global presentation of the new tool** for all HNS, PNS and IFRC colleagues to present the final products

**Expected outcomes and deliverables:**

1. A draft report with the conclusion on the gaps and the recommended amendments as well as a list (tracker document) of the proposed changes to the different tools
2. A Draft EVCA reviewed package including the amended guides and tools
3. An internal workshop to collect feedback and validate the suggested amendments with EVCA WG and Riposte programme Team
4. Two EVCA exercises at country level, with communities, using the amended tools including specific exercises (or, alternatively, a simulation with the SN team)
5. 2 EVCA short reports resuming the outcome of specific exercises and eventual recommendation for future use
6. A Webinar to present the finalized tools and products, with IFRC and other NS.

### 2. **SUBMISSION OF APPLICATIONS**

**Consultant(s) profile:**

- Expert in Disaster Risk Management or Risk Reduction
- Understanding of epidemics prevention preparedness and response is a key requirement
- Experience in community based epidemic preparedness/response is an asset
- Knowledge and previous experience in implementing community based DRR and in particular vulnerability and capacity assessments processes is a key requirement
- Familiarity with the IFRC EVCA tool is an asset
- Experience in DRR/humanitarian/development sector
- Experience in multicultural contexts,
- Fluent french and english, both oral and written
- Excellent writing skills both in french and english

**Administrative clauses:**

- The contractor must provide proof at the time of submission of the regularity of his economic activity (tax documents, registration, registration as a self-employed person – depending on the country of reference where the tenderer is established).
- The contractor must alone provide the means necessary for the performance of its service, whether material or human: plane tickets, computer, professional civil liability insurance.
- The contractor may delegate part of the mission, to another person of their choice within their teams, but they remain the sole hierarchical and disciplinary authority concerning their employees. The service provider must ensure security, and as such insure the consultants sent on mission.

**The offer should include:**

- The consultant must submit a technical and financial offer for his/her service
- The technical offer must include: the CV and/or Portfolio, the proposed methodology as well as an indicative timetable
- The budget must present all the costs relating to the completion of the different steps of the toolkit review, including the consultation workshops.
- The indicated price of the service must bear the words 'firm, global, lump sum and final'
- The offer should be addressed to:
  - Mikael Pozzoni (mikael.pozzoni@croix-rouge.fr)
  - Valentina Evangelisti (valentina.evangelisti@croix-rouge.fr)
- Deadline for submission of the offers: **28th of May**