

# Agreement for Performance of Work

# **Terms of Reference**

# COVID-19 and the impact of behavioural and social science insights: a collection of case studies

This Agreement for Performance of Work (APW) is requested by:

Initiator:	Dr João Rangel de Almeida	Reg.#:	
Unit:	CRR	Cluster / Dpt.:	WHE/CRS

#### 1. Purpose of the APW

This document sets out proposed terms of reference for developing a collection of case studies on **COVID-19** and the impact of behavioural and social science insights. This collection aims to inform several goals:

- Contribute to the upcoming World Bank/WHO publication titled Behavioural Science Around the World (Volume III)
- Establish a body of best practices to be shared with the Member States and health emergency management partners
- Frame future technical products led by the Community Readiness and Resilience Unit and/or Behavioural Insights Unit

The collection development will be conducted in two phases. Phase 1 includes the production of a case study collection methodology protocol, mapping case studies sources, establishing case studies selection criteria, and creating a list of case studies to be completed in phase 2. **This APW covers phase 1 exclusively**.

#### 2. Background

Since early 2020 the COVID-19 pandemic has affected communities in an unprecedented way. The integration of behavioural and social science has allowed the calibration, adaptation, and localisation of public health and social measures across efforts to respond to the outbreak worldwide. Now is the right time to capture the successes and challenges encountered by Ministries of Health and their partners in this process.

Documenting practical examples of integrated behavioural and social science initiatives will help others replicate these, both in the current pandemic and in future emergencies. Identifying challenges and constraints can guide WHO and the Member States on what they need to improve the utilisation of behavioural and social science tools and maximise their impact. Ultimately, WHO wishes to catalyse and contribute to building the knowledge base about behavioural and social science integration in health emergency programming.

#### 3. Objectives

The collection of illustrative, exploratory, and descriptive case studies aims to document best practices and exemplify examples where the systematic application of behavioural and social science insights across the health emergency cycle has contributed to increasing the efficiency and effectiveness of efforts to control outbreaks.

The collection is expected to offer regional diversity and to cover areas such as epidemic alert and response, risk mapping and vulnerability assessment, community and home care, case management, surveillance; infection prevention and control; risk communication and community engagement, public health and social measures, etc.

Cases will provide insight into research uptake and evidence translation into practical public health programmes.

We expect cases to be used as teaching material in current tertiary education and MOOCs produced by WHO and partners.

#### **4.** Planned timelines (subject to confirmation):

Start date: as soon as possible End date: 31.12.2022

## 5. Requirements - Work to be performed:

Cases studies development are expected to follow a robust methodological approach and share an established reporting standard.

Case studies should be produced based on multiple possible primary and secondary sources:

- Semi-structured interviews with case study stakeholders
- Documents such as letters, newspaper articles, administrative records
- Blogs, social media posts, YouTube content
- Participant observation

Case studies should have no more than 3,000 words (excluding references) and be organised within a consistent structure. When possible, case studies should be accompanied by photography or any other relevant visual material. Case studies will be written in English.

#### 6. Outputs

Output 1 Methodological framework and case study selection criteria report

Output 2 Map case studies sourcing report – for example, existing surveys, WHO Regional and Country Offices, WHO COVID-19 Social Science Working Group, WHO Technical Advisory Group on Behavioural Insights and Science for Health, Collective Service for Risk Communication and Community Engagement, covid- 19 Act A Community and CSO representatives, established social science networks such as SONAR-Global or SSHAP, etc

Output 3: Selection of final case studies report (up to 10)

Output 4: Preliminary case studies data collection

#### 7. Reporting requirements

Weekly reporting calls to monitor progress will be organised with the successful external contractor

## 8. Communications

The successful external contractor should ensure that one representative has regular communication with the technical officer, above and beyond reporting requirements, to ensure that work is progressing as anticipated, and to solve issues which may emerge as the review unfolds.

#### 9. Activity Coordination & Reporting:

Technical Officer:	Dr João Rangel de Almeida Community Readiness and Resilience Unit Country Readiness Strengthening WHO World Health Emergencies Program	Email:	jrangel@who.int
For the purpose of:	Technical supervision and instructions - Reporting		
Administrative Officer:	Eva Corona Mudasia	Email:	mudasiae@who.int
For the purpose of:	Contractual and financial management of the contract		

#### 10. Performance monitoring:

The selected contractor will be evaluated on:

- Their capacity to deliver products of an optimal technical quality within the agreed timelines;
- Their service orientation and responsiveness to WHO's needs and expectations.

#### 11. Characteristics of the Provider / Specific Requirements:

#### Qualifications required

Essential: Team members should have at least a master's degree in health or social sciences or equivalent.

Desirable: Content knowledge about communities and community-centred approaches in the context of health emergencies

# Experience required

Essential: the provider must have experience developing case studies of complex topics and adequate knowledge of global health and health emergencies

Desirable: Peer-reviewed publications

#### 12. Language requirements

- English (Proficiency level): mandatory requirement.
- Proficient languages skills to collect a diverse set of global case studies

#### 13. Place of assignment: no preference

#### 14. Qualified candidates are requested to submit:

- Cover letter/application
- A technical proposal with proposed methodology/approach to managing the project, showing understanding of tasks
- Financial quote in USD per deliverable, also stating the timeframe for completion of deliverable
- Curriculum vitae of team members
- Examples of previous, relevant work related to the deliverables

#### 15. Evaluation criteria:

- the extent to which WHO's requirements and expectations have been satisfactorily addressed;
- the quality of the overall proposal;
- the appropriateness of the proposed approach; and

• the qualifications and competence of the team

#### 16. Additional Information:

# Questions during the preparation of the proposal

- a. Prospective bidders requiring any clarification on technical, contractual or commercial matters may notify WHO via e-mail (<u>mudasiae@who.int</u> and/or <u>jrangel@who.int</u>) no later than 20 October, CoB, Geneva time.
- b. Deadline for proposal submission: 28 October 2022, CoB, Geneva time.
- c. **Email address for submission of proposal:** Final duly completed technical and financial proposals should be submitted in electronic format by e-mail to: <a href="mailto:mudasiae@who.int">mudasiae@who.int</a> and/or to Dr João Rangel de Almeida at <a href="mailto:jrangel@who.int">jrangel@who.int</a>