

## Terms of Reference

### Consultancies for Development of a Mortality Survey and Surveillance Toolkit(s)

#### EXECUTIVE SUMMARY

The consultant will draft a comprehensive toolkit for implementing mortality surveys and surveillance methods in humanitarian settings that is designed to be used “off-the-shelf” for humanitarian actors, with a focus on applicability for national actors. The toolkit should include templates for concept notes, protocols, data collection and analysis tools, training materials, and reporting templates. The consultant is expected to work closely with the Technical Advisory Group of the STC Mortality Initiative and incorporate technical feedback received, as well as non-technical feedbacks for strategic alignment with the initiatives Strategic Advisory Group (SAG), and operational and use case alignment with the National Advisory Group (NAG).

#### BACKGROUND ON THE SAVE THE CHILDREN MORTALITY INITIATIVE

The Mortality Estimation and Surveillance Initiative aims to strengthen the effectiveness of humanitarian public health programming by increasing the timely collection, use, and uptake of mortality estimation data amongst humanitarian public health actors to improve outcomes and save lives. The Initiative is coordinated by Save the Children (SC), in partnership with IMPACT Initiatives and Evidence for Change (E4C). The Initiative’s governance will consist of operational national and international NGOs, academia, donors and UN agencies to ensure global coordination and technical quality. Accurate mortality data is critical to understanding the scale and severity of humanitarian crises, guiding evidence-based response, informing life-saving programming and ensuring the most effective allocation of scarce resources. Without mortality data, the effectiveness of humanitarian programming cannot be fully understood or measured. Despite this, mortality estimation is often underused due to a lack of feasible tools, limited technical capacity, and insufficient operational support.

Over the 24-month period, the Initiative will develop and pilot a practical, context-appropriate mortality survey and surveillance toolkit, to support health actors to implement and use mortality data to improve their programs. We will also implement a Localization and National Engagement Strategy to ensure tools are grounded in end-user needs and foster greater local ownership, as well as develop a Roadmap (Strategic Framework) outlining the long-term vision for the Initiative.

Beyond the implementation period, the Initiative aims to institutionalize mortality estimation in humanitarian practice in the long term, scaling technical support, and diversifying its funding for sustained impact. The overall objective is to ensure that timely, accurate mortality data becomes a routine part of humanitarian decision-making, ultimately leading to more effective, targeted, and cost-effective responses.

#### OBJECTIVES AND ACTIVITIES

Save the Children/IMPACT will contract a consultant to complete a Mortality Survey and Surveillance Toolkit, which is intended to be hosted on the Mortality Estimation Initiative platform as a global good for any stakeholder needing to access or utilize them. In the development of this toolkit, it is expected to be aligned with the strategic, operational, and technical aims of this initiative and therefore final outputs will require validation from the various governance structures of the initiative, including the Strategic Advisory Group (SAG), National Advisory Group (NAG), and Technical Advisory Group (TAG). The consultant will be expected to work through the TAG Task Team structures and report to the TAG regularly on its progress. Through the Task Team, the consultant may make use and coordinate other technical volunteers or expertise that may be available to them to complete the work. The design approach of the toolkit should focus on simplicity and operational relevancy for mortality estimation, with a focus on utilization in low-resource settings where possible and production of reliable and timely information for decision making for operational actors. The toolkit may rely on other external resources as needed. The core deliverables are expected to be

delivered in four main stages with the completeness of deliverables evaluated by IMPACT Initiatives prior to approving payments. General technical expectations are described below:

**Stage 1 – Initial Consultations and Toolkit Outline:** This initial stage should involve holding initial consultations with key members of the SAG, NAG, and TAG to gather design considerations, mapping pre-existing resources, and then finalizing an outline of the needed materials.

- **Deliverable #1 – Finalized Toolkit Outline.** This outline should layout all planned components of the toolkit and describe how it will incorporate key design considerations from initial consultations. This document is not intended to describe the decision-making process of when to select surveys or surveillance methods, but once a selection has been made this is intended to focus on how to implement those methods. Final content to be agreed upon with the TAG co-chairs.
- **Deliverable #2 – First draft technical guidance document outline.** This outline should layout the main sections and content of the technical guidance document to be developed, as agreed upon with the TAG co-chairs and wider TAG. The document should be at minimum including comprehensive outline of surveys and surveillance methodologies, planning, contextualizing tools, sampling, minimum standards for cleaning and processing, analysis and interpretation, reporting and dissemination, etc. Final content to be agreed upon with the TAG co-chairs.
- **Deadline:** 10.04.2026

**Stage 2 – Draft Toolkit Package #1:** This second stage should involve creating first drafts of the main technical guidance document.

- **Deliverable #2 – First draft of technical guidance document.** This is intended to be the core technical reference used for designing, planning, implementing, analyzing, interpreting, and reporting on mortality survey or surveillance data in this toolkit.
- **Deliverable #3 – Draft concept note and technical protocol documents.** This is intended to be template resources for adaption for the end user to mobilize resources and design their surveys or surveillance activities.
- **Deliverable #4 – Draft data collection tools.** These are the core data collection tools with the core and supplemental indicators and questions available for the mortality survey and surveillance toolkit. To be prepared in both paper format and XLSFORM format.
- **Deliverable #5 – Draft analysis resources.** These are the core resources for end users to clean, process, and produce analyses from their mortality survey and surveillance data. Two versions of resources should exist: one based on Excel, and one based on the statistical software R. Resources based on R should be user friendly and incorporate basic user interfaces to facilitate the processing and analysis of mortality survey and surveillance data.
- **Deadline:** 24.05.2026

**Stage 3 – Draft Toolkit Package #2**

- **Deliverable #6 – Second draft technical guidance document.** A second version of the technical guidance document should be prepared for an additional round of review by the Initiative governance structures.
- **Deliverable #7 – Draft Reporting Templates.** These are the core recommended reporting templates for the reporting of mortality survey and surveillance results, including templates for preliminary powerpoints, short form technical reports, and factsheets.
- **Deliverable #8 – Draft Survey/Surveillance Manager Training Materials.** These are the higher level set of training materials on the methodology, design and contextualization, analysis and reporting for the mortality survey and surveillance toolkit. For program managers or survey/surveillance managers. This should minimally include a training outline, powerpoint slides, and associated resources.
- **Deliverable #9 – Draft Enumerator Training Materials.** These are the set of training materials for enumerators implementing mortality surveys and surveillance using this toolkit. This should minimally

include a training outline, powerpoint slides, and associated resources.

- **Deadline:** 26.07.2026

Stage 4 – Final Toolkit Package

- **Deliverable #10: Final Toolkit Package.** This should be the final package of all toolkit materials to be validated by the SAG, NAG, and TAG. This version of the toolkit will be later piloted by the initiative and may undergo further revisions after piloting.

The resulting toolkit and associated resources are intended to be a public good and are developed on behalf of the Mortality Estimation Initiative led by Save the Children, IMPACT and E4C. All products will be licensed under Creative Commons and made available for users via a website created by the Mortality Estimation Initiative.

RESPONSIBILITY

As the primary agency contracting the consultant, STC/IMPACT has accountability for the administration of the consultant’s work including handling contracts, invoices, payments, etc. Deliverables will be validated by IMPACT prior to official payments at the various stages of completion.

The consultant is expected to lead on the direct implementation of toolkit development with oversight and guidance from the co-chairs of the Technical Advisory Group (Save the Children and IMPACT Initiatives) to ensure the final deliverables will be aligned with the needs of the initiative. At the direction of the co-chairs, the consultant’s will be expected to coordinate the design of their work with (a) the Strategic Advisory Group (SAG) and National Advisory Group (NAG), and Technical Advisory Group (TAG) to ensure strategic, operational and technical considerations are met. As needed, the consultants may be also requested to coordinate with other members or consultants working within the TAG to harmonize approaches across toolkits where needed being developed (e.g. surveillance toolkit and surveys toolkit, interpretation, etc.).

The TAG works with a Task Team structure, where discrete workstreams are completed by small teams and reported back to the wider TAG for review and feedback. The consultant would be expected to take a lead in coordinating the Mortality Surveys and Surveillance Toolkit task team, which on a voluntary basis may have additional expertise or volunteers involved to complete work in a timely fashion.

The below table summarizes general expected roles and responsibilities for the consultant, co-chairs, and other stakeholders:

	<b>Responsible</b>	<b>Accountable</b>	<b>Consulted</b>	<b>Informed</b>
<b>Stage 1</b>				
<i>Initial Consultations</i>	Consultant	TAG Co-Chairs	SAG, NAG, TAG	Donor
<i>Drafting Toolkit Outline</i>	Consultant	TAG Co-Chairs	SAG, NAG, TAG	Donor
<i>Drafting Technical Guidance Outline</i>	Consultant	TAG Co-Chairs	SAG, NAG, TAG	Donor
<b>Stage 2</b>				
<i>Coordinating Task Team Meetings</i>	Consultant	Consultant	TAG Co-Chairs	Donor
<i>Drafting 1<sup>st</sup> version Guidance</i>	Consultant	TAG Co-Chairs	SAG, NAG, TAG	Donor
<i>Drafting concept note and protocol templates</i>	Consultant	TAG Co-Chairs	SAG, NAG, TAG	Donor
<i>Drafting 1<sup>st</sup> version Data Collection Tools</i>	Consultant	TAG Co-Chairs	NAG, TAG	Donor
<i>Drafting 1<sup>st</sup> version Excel Analysis Resources</i>	Consultant	TAG Co-Chairs	NAG, TAG	Donor
<i>Drafting first version R Analysis Resources</i>	Consultant	TAG Co-Chairs	NAG, TAG	Donor
<b>Stage 3</b>				

<i>Drafting 2<sup>nd</sup> version Guidance</i>	Consultant	TAG Co-Chairs	SAG, NAG, TAG	Donor
<i>Draft Reporting Templates</i>	Consultant	TAG Co-Chairs	SAG, NAG, TAG	Donor
<i>Draft Survey/ Surveillance Manager Materials</i>	Consultant	TAG Co-Chairs	SAG, NAG, TAG	Donor
<i>Draft Enumerator Training Materials</i>	Consultant	TAG Co-Chairs	SAG, NAG, TAG	Donor
<b>Stage 4</b>				
<i>Final Toolkit</i>	Consultant	TAG Co-Chairs	SAG, NAG, TAG	Donor

EXPECTED TIMELINE

The toolkit deliverables are expected to be reviewed and validated by approximately mid-September. Expected deliverables should be completed by the indicative deadlines. Delays should be communicated and agreed with the TAG co-chairs.

Task		2026						
		March	April	May	June	July	August	September
Stage 1	<i>Recruitment of Consultant</i>	X						
	<i>Initial Consultations</i>	X	X					
	<i>Draft Toolkit and Technical Guidance Outlines</i>	X	X					
Stage 2-4	<i>Drafting Survey/Surveillance Toolkit Materials</i>	X	X	X	X	X	X	
	<i>SAG, NAG, TAG Review</i>			X		X		
	<i>SAG, NAG, TAG Validation</i>							X
	<i>Final Toolkit Completed</i>							X

EXPECTED OUTPUTS

Stage	Deliverables/Outputs	Deadline (indicative)
1	<b>Deliverable #1 – Finalized Toolkit Outline.</b>	10.04.2026
	<b>Deliverable #2 – First draft technical guidance document outline.</b>	
2	<b>Deliverable #3 – First draft of technical guidance document.</b>	24.05.2026
	<b>Deliverable #4 – Draft concept note and technical protocol documents.</b>	
	<b>Deliverable #5 – Draft data collection tools.</b>	
	<b>Deliverable #6 – Draft analysis resources.</b>	
3	<b>Deliverable #7 – Second draft technical guidance document.</b>	26.07.2026
	<b>Deliverable #8 – Draft Reporting Templates.</b>	
	<b>Deliverable #9 – Draft Survey/Surveillance Manager Training Materials</b>	
	<b>Deliverable #10 – Draft Enumerator Training Materials.</b>	
4	<b>Deliverable #11: Final Toolkit Package.</b>	15.09.2026

## REQUIRED QUALIFICATIONS AND EXPERIENCE

- Advanced degree (Master's or PhD) in relevant field public health, epidemiology, statistics, or related subjects is **required**.
- At least 5+ years conducting humanitarian public health surveys or surveillance in humanitarian settings, with a focus on mortality estimation is **required**
- Willingness and ability to engage with a variety of global and national stakeholders to account for varying technical, strategic, and operational feedback and perspectives on toolkit materials is **required**.
- Experience in working with sampling and analysis of complex survey data is **strongly preferred**.
- Familiarity with R, Python, or other statistical software is considered a **strong asset**.
- Familiarity and/or experience working with XLSFORMS with ODK, Kobo, or similar electronic data collection platforms is a **strong asset**
- Strong understanding of how data/information flows and is utilized in humanitarian contexts is **strongly preferred**
- **Strong preference** for a candidate who is a self-starter and take initiative to move the work forward in a process-oriented manner.
- Fluency in English **required**, competency in French a **strong asset**.

## ADDITIONAL DETAILS

### Insurance coverage:

- The consultant(s) must be able to work as an independent consultant in their country of base. A proof of registration as consultant is to be submitted to IMPACT Initiatives prior to contracting.
- In the framework of field missions, the consultant(s) will provide to IMPACT Initiatives a proof of health and repatriation insurance prior to their travel. Related costs will have to be discussed with IMPACT ahead of any deployment and shall not be charged in addition to the agreed fee.

### Taxation:

- Please note that the consultancy firm will have to comply with all government rules and will be responsible for government taxes.

### Data protection

- Data associated with the project will be stored on IMPACT's central OneDrive / Sharepoint, and accessed through the consultant's own laptop. Access to the central One Drive / Sharepoint and Office 365 will be granted to the consultant for the duration of their contract. No project-related documentation will be stored on personal computers.