



Consultant Position Description

Tanzania - focus groups on vaccine hesitancy and social behavior change

ABOUT CCIH

Christian Connections for International Health (CCIH) is a global network of Christian organizations, individuals and affiliates committed to advancing health and wholeness from a Christian perspective. Motivated by our faith and our values, CCIH envisions a world where all have access to quality healthcare and prevention services. CCIH members work in over 90 countries and include non-governmental organizations, church networks, Christian Health Associations, volunteer and product donation agencies, and other support organizations. CCIH works with Protestant, Catholic, and non-denominational organizations as well as interfaith networks. CCIH shares information and provides a forum for networking, advocacy, capacity building and fellowship to an ever-increasing spectrum of organizations and individuals. CCIH also carries out grants and programs by working through its members in low- and middle-income countries. CCIH is a nonprofit (501c3) organization established in 1987 and headquartered in the Washington, DC area. CCIH is financed by membership dues and a variety of grants.

DESCRIPTION OF CONSULTING SERVICES REQUIRED

This consultancy is part of the USAID-funded MOMENTUM Country and Global Leadership program. CCIH is a subrecipient under Jhpiego in this program.

Immunization coverage has stagnated at 85% over the last decade. To break through the stagnation in coverage, programs must prioritize reaching the unreached by working in an integrated manner with new partners. To increase immunization coverage, service delivery should be tailored to serve the most disadvantaged communities.

Local and national faith communities are an important group of non-state actors who offer unique opportunities for partnership on raising demand and addressing hesitancy. These are also highly influential in promoting good health, including vaccination. Religious leaders influence and shape community attitudes, beliefs, and actions; but little is known about their current beliefs, positions, and capacity to spread relevant, accurate information about vaccines generally and COVID-19 vaccines specifically. Moreover, faith-based health services provide a substantial share of health services, but we do not know their capacity limitations to scale immunizations for the general population.

This project is part of CCIH's work with the USAID-funded Momentum Country & Global Leadership program, and will identify and begin to address concerns among religious leaders and faith-based health

services around vaccination. The current program includes 4 phases. In Year 2 (Oct 2020 - Sept 2021), this program completed phase 1, a global landscape analysis (literature review and KIIs) producing an evidence [summary of findings](#) and [highlighting actionable recommendations for engaging faith leaders in immunization](#). Phase 2 assessed the role that faith leaders could play in addressing vaccine hesitancy in four countries: Ghana, Uganda, Sierra Leone, and Indonesia. [The report and policy brief](#) identified 15 “promising practices.”

In Year 3, Momentum Country and Global Leadership will build on the work of Phases 1 and 2 by creating a toolkit for up to six of the 15 promising practices identified. Content for the toolkit will be influenced by feedback from country stakeholders in two countries who will discuss social and behavior change (SBC) messages around six promising practices. The stakeholders will meet in one to two virtual sessions. The resulting messages will address three of the promising practices, such as theological/scriptural background, guidance for meetings with men, and how to create social media messages. The toolkit will also provide simple one-page guides for three other procedural “promising practices.” The consultant will test messages through focus groups in Tanzania. The SBC activities will help raise awareness, reduce misinformation, and address barriers that prevent faith communities in particular from accessing vaccines.

The objective of this consultancy is to facilitate 2-3 focus groups in Tanzania to test the toolkit for faith leaders/communities and ministries of health for addressing immunization myths and misconceptions.

DELIVERABLES

1. List of invitees for 2-3 Focus Group discussions that will test a toolkit for faith leaders/communities and ministries of health for addressing immunization myths and misconceptions.
2. Detailed notes from 2-3 completed Focus Group discussions.
3. Analysis report with results from the 2-3 Focus Group discussions.
4. Budget actuals with receipts for transport and PD expenses to focus group participants.

TERMS AND PAYMENT

This project is expected to start May 6, 2022 and be complete by August 30, 2022

Payment is Fixed Price.

Payment schedule: Based on deliverables

Consultant must submit invoices for payment.

CCIH offers a Total Financial Contribution of up to \$5,300, split among milestone deliverables of which \$4,500 is for the consultant fee and \$800 for travel & material expense fee paid based upon approval of the receipts provided. Any reasonable expenses shall be approved by CCIH and must comply with US Government regulations

CCIH shall make payments based on agreed discrete milestones

MILESTONE AND PAYMENT SCHEDULE

#	Milestone	Deliverable	Deadline

1	Prepare for Focus Group Discussion	<ul style="list-style-type: none"> List of invitees for focus group discussions Location reserved 	May 6, 2022
2	Facilitate 2-3 Focus Group discussions	<ul style="list-style-type: none"> Detailed notes and attendee list from focus group sessions 	July 22, 2022
3	Analyze results of the Focus Group discussions	<ul style="list-style-type: none"> Analysis report re: suggested changes to the toolkit contents based on focus group feedback 	July 29, 2022
4	Reimbursement for focus group expenses	<ul style="list-style-type: none"> Budget actuals with receipts for transport and PD expenses to focus group participants 	August 4, 2022

REQUIREMENTS

- Degree in international development or public health or related field
- Experience with social behavior change communication
- Experience in immunization
- Ability to work in faith-based settings, with Christian and other religious leaders
- Use of own computer, internet access
- Ability to meet remotely with team via Zoom or Google Meet
- Willingness to use CCIH project management software as needed

TO APPLY:

Submit a cover letter including how you found out about the position and your preparation and qualification for the work, your resume, and a 1-page writing sample to jobs@ccih.org. Incomplete applications will not be considered.

While mission concurrence has been submitted and is expected soon, we are waiting on final approval and therefore this consultancy is being posted, but will not officially be hired until mission concurrence is final.

You will receive notification of receipt of your application. CCIH will only contact applicants after that who we are considering for the position. You will not be notified if CCIH does not move you to the next steps of the process. Thank you for considering working with our team.