Sustainable Undernutrition Reduction in Ethiopia (SURE) is the first government led program in Ethiopia which is being implemented by ministry of health and agriculture in collaboration. It is funded by Children Investment Fund Foundation (CIFF) through Federal Ministry of Health of Ethiopia. The SURE evaluation is led by Ethiopian Public Health Institute (EPHI) with technical support from London School of Hygiene and Tropical Medicine (LSHTM). SURE program is planned to cover 150 districts in 4 agrarian regions; Oromia, Tigray, Southern Nations, Nationalities, and People (SNNP) and Amhara. In Oromia, 75 woredas (districts) will receive SURE implementation and the remaining 75 districts which will receive SURE intervention are from Amhara, SNNP and Tigray regions. The SURE program roll out is being take place in three phase. The first 50 districts were covered in the first phase. The remaining districts will be covered by second and third phases. The timeframe for implementation of this program started in 2016 and goes to 2019 with possible extension to 2020. SURE aims to enhance Community Based Nutrition Program (CBN) by providing additional services to improve complementary feeding and dietary diversity, in turn to reduce stunting, through integrated services delivered by the health and agriculture extension platforms. This program evaluation is based on program impact pathways following social behavioural change communication (see annex 1).

The SURE evaluation focuses in the first phase 50 woredas of program implementation as stunting reduction requires long duration of intervention that are attributable by SURE intervention. From the first phase 50 woredas, 36 intervention woredas were randomly selected in addition to 36 comparison matched woredas, a total of 72 woredas were included for evaluation. As evaluation partners for SURE program, EPHI has conducted and will conduct various studies. The studies conducted so far as part of SURE evaluation includes formative and feasibility studies, baseline survey and part of process evaluation. EPHI will conduct further studies like process evaluation, cost effectiveness and end line survey. These all studies will help to evaluate the impact of SURE in
stunting reduction in intervention woredas in relation to comparison woredas at end of the program implementation. In general, the SURE evaluation is carried out to understand the mechanisms and the impact of SURE intervention in reducing stunting prevalence in intervention woredas. Therefore, the aim of this TOR is to hire a technical advisor who has previous experience in the areas of program evaluation and has capability to evaluate the cost effectiveness of SURE program implementation.

Cost-effectiveness analysis (CEA) provides one means by which decision makers may assess and potentially improve the performance of implementation for a given program. In our case, CEA will determine the average cost of the programme per case of stunting averted and per new case of minimum acceptable diet (MAD) achieved. In this regard, we want to identify and place dollars on the costs of a program and then relate these costs to specific measures of program effectiveness. The CEA findings will inform the program implementers (Federal Ministry of Health and Agriculture), the evaluators (EPHI and LSHTM) and the funder (CIFF) whether the program was effective in terms of cost or not and to make decision for further budget allocation.

2. Objectives

Overall objectives: to conduct cost effectiveness analysis and provide technical support for EPHI

Specific objectives
- Conduct cost effectiveness analysis with EPHI team for SURE program
- Assess potential scenarios and give feedback to improve the performance of SURE program implementation based on cost effectiveness analysis
- Investigate the best alternative activities, processes, or interventions that minimises resource use to achieve a desired result
- Provide technical support to EPHI staff in cost effectiveness analysis

3. Expectations

The technical advisor is expected to provide a significant contribution to SURE program implementation cost effectiveness analysis and support capacity building of EPHI. This includes:
- Develop cost effectiveness analysis protocol
- Develop economic evaluation guideline for nutrition program/interventions/technologies
- Build capacity of EPHI to support SURE program cost effectiveness analysis.
• Facilitate regional, national and international communication
• Support development of documentation and dissemination for continuous knowledge management plan

4. Scope of Work

The technical advisor will provide a short-term consultation support to EPHI SURE team from the office of EPHI for the duration of 6 months and complete all tasks necessary for successful completion of cost effectiveness analysis. The consultant will support to undertake the following specific tasks:

• Develop detailed work plan for cost effectiveness analysis and share with EPHI SURE team
• Develop proposal for cost effectiveness analysis
• Develop capacity building roadmap and data quality assessment module for cost effectiveness analysis.
• Plan and lead mentorship and training exercises targeting EPHI and field team members.
• Facilitate field testing exercises and technical workshops to refine data collection instruments/tools.
• Perform field visits with EPHI team for supervision and data review activities during the data collection period.
• Meet regularly with the EPHI evaluation team to assess progress on shared work plans and identify emerging needs for assistance.
• Provide support on systematic review to EPHI SURE team in relation to cost effectiveness analysis
• Support evaluation documentation and dissemination efforts including technical reports, presentations, briefs, etc. with EPHI team members
• Develop economic evaluation guideline for nutrition program/intervention/technologies.

5. Summary of responsibilities and deliverables

The technical consultant should take the following steps in Cost-Effectiveness Analysis (CEA).

A. Provide technical support and work in collaboration with EPHI team
B. Develop proposal for CEA
C. Prepare data collection tool
D. Train data collectors for field work
E. Present progress report when requested by the supervisors (evaluation team)
F. Set the framework for the analysis
G. Decide whose costs and benefits should be recognized
H. Identify and categorize costs and effectiveness
I. Project costs and effectiveness over the life of the program
J. Analyse data and write report
K. Perform sensitivity analysis
L. Develop economic evaluation guidelines
M. Submit final technical report to EPHI

<table>
<thead>
<tr>
<th><strong>Duty Station:</strong></th>
<th>The consultant will be based in EPHI, Addis Ababa with frequent field travel to 4 regions and woreda and Kebeles within the regions</th>
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<tbody>
<tr>
<td><strong>Travel:</strong></td>
<td>The consultant is expected to travel to Oromiya, SNNP, Tigray and Amhara regions for activities including field testing, supervision, and Routine Data Quality (RDQ) monitoring, mentorship, and review documents.</td>
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<tr>
<td><strong>Duration:</strong></td>
<td>6 months spread throughout the lifespan of the project as planned by the consultant with possible extension if extremely necessary</td>
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<tr>
<td><strong>Expected Start Date:</strong></td>
<td>Immediately after contract agreement</td>
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<tr>
<td><strong>Supervisor:</strong></td>
<td>SURE PI</td>
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6. Qualification of the applicant/consultant

The consultant will be selected following a recruitment process. The profile of the consultant is as below:

**Education:** PhD level qualification in health economics, economics, agricultural economics, public health and other related field of study

**Language Skills:** Fluency in written and spoken English

**Experience:**
- Minimum of seven years of work experience related to planning and conducting large-scale program evaluations and cost effectiveness analysis for public health and nutrition programs.
- Working knowledge of data analysis software package
- Working knowledge of at least one data capture package
- Excellent organizational and time management skills are required.
- Ability to work both independently and as a member of a team and to handle multiple priorities is required.
- Experience as a trainer and/or supervisor for quantitative and qualitative data collection, management, and/or analysis is preferred.
- Excellent analytical, writing, synthesis, communication and facilitation skills.
- Experience of working with partners at international, regional and national levels.
- Published at least 3 recent publications as first author on reputable journals in areas of economic evaluation.

7. How to apply

- Interested applicant is invited to submit his/her CV, cover letter and maximum of 3 pages concept notes explaining the cost-effectiveness analysis plan including approach to implement the TOR (assessment methodology, data collection instruments etc) by email to: evalhealth@ciff.org on or before 25th August 2017 with application for EPHI-01 – SURE program cost effectiveness analysis Technical Advisor as the subject.
Annex 1: Program impact pathways

Activities of the Intervention

1a, 1b. SURE training cascaded to health & agriculture extension workers

HEW/AEW visit households and facilitate HH plan of action

HEW counsels on IYCF

AEW advises on nutrition-related agriculture practices

HEW/AEW facilitate men’s and women’s groups

HEW/AEW retain knowledge and skills

NCT meets to support HEW/AEW work planning and supervision

NCT monitors programme outputs & reports to woreda

NCT’s coordinating with woredas to ensure supportive supervision of HEW/AEW

3. Kebele Nutrition Coordinators training and provision of TOR and planning and monitoring templates

Proximal outcomes (Knowledge)

Increased community support for adoption of practices

Increased gender awareness

Intermediate outcomes (Behaviours)

Mothers/ fathers acquire IYCF knowledge and skills

Mothers/ fathers support child practices

Mothers/ fathers adopt IYCF activities

Increased access to agriculture inputs

Health posts are available and accessible

Mothers/ fathers acquire nutritious foods for consumption

More mothers/ fathers prevent illness and treat sick children

Mothers/ fathers improve WASH behaviours

Longer term outcomes (Behaviours)

Mothers/ fathers increase own production of diverse foods

Mothers/ fathers adopt improved agriculture practices

Health post status

Impacts (Status)

Improved child nutritional status

Improved child health status

Improved child health status