

## Terms of Reference

<b>Team:</b>	Information Systems and Data Management
<b>Unit:</b>	Information Systems and Analytics (ISA)
<b>Department:</b>	Health Emergency Information and Risk Assessment (HIM)
<b>Start Date:</b>	As soon as possible
<b>Duration:</b>	11 months. Up to 11 additional months subject to funding and performance.

Contact persons:

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### 1. Purpose

The *Information Systems and Data Management* team is seeking to continue improving existing sources and adding additional sources for the early detection and verification of potential health threats and risks in the context of the Epidemic Intelligence from Open Sources (EIOS) Initiative to support expansion to and adoption within WHO, Member States and other organisations. The ongoing need for this role has been clearly identified by multiple teams within WHO and externally in support of COVID-19 monitoring and response activities and beyond.

### 2. Background

The WHO Health Emergencies Programme (WHE) is mandated to enhance WHO's capacity for the rapid detection, assessment and follow up of all public health threats and risks. This provides the opportunity to establish a framework that facilitates the implementation of a common approach to public health intelligence and event management across all levels of the organization.

The EIOS initiative is a network of organizations with one common goal: to minimise the impact of emerging threats and risks to human health through quality and timely intelligence at the member state, regional and global levels. In doing so, it helps strengthen capacity for early detection and evidence-based decision making, aligning with IHR event-based surveillance capacity requirements. The EIOS Initiative is being led by headquarters, in collaboration with various stakeholders.

The EIOS system uses a broad range of publicly available information, including electronic media, specialised news aggregators, social media, subscriptions to specialised relevant networks and official websites, to help analysts quickly identify potential or existing health risks. The quality of these sources directly affects the content of the system and determines the value of the information to analysts; the better and more reliable the sources, the more confidence analysts can have in its value. The scope of the sources – both in terms of content and geographic coverage - also affects the relevance of the system to the user communities, who have repeatedly voiced their need for **local** content that captures culturally and nationally relevant information. This gap in the system must be addressed to ensure relevance to and acceptance and adoption by the public health intelligence community of practice under the EIOS initiative.

Much work has been done to expand and refine sources in the EIOS system since early 2020, catering to the growing EIOS community. This work must be maintained and continued: over half a dozen new Member States joined the EIOS initiative over the past year, with each requiring reviews, updates, and additions to the publicly available information sources in the system. Over a dozen additional Member States are planned for EIOS expansion in 2021-22, also necessitating the ongoing review and addition of information sources. The work to be carried out under this contract has the aim to improve and broaden the sources feeding into the EIOS system, increasing its capacity for early detection and enhancing the ability to detect and verify information, especially in vulnerable areas that are not otherwise captured.

### 3. Deliverables

#### Output 1

Clean up, improvement and expansion of sources in the EIOS system and updates to the underlying editor

##### Deliverables

- 1.1 Assess and remove non-functional, outdated and irrelevant sources
- 1.2 Support replacement of sources where required / appropriate
- 1.3 Collect and document needs for additional sources from stakeholders
- 1.4 Identify and document additional sources where needed
- 1.5 Prioritise newly identified sources
- 1.6 Integrate and maintain new sources into the EIOS system
- 1.7 Review, update and contribute to improvement of geographic identification of sources and content where possible
- 1.8 Work with the Joint Research Centre (JRC) on improvements to the source editor as appropriate
- 1.9 Maintain a log/document of all changes and activities

#### Output 2

Integration of Radio content as a source in the EIOS system

##### Deliverables

- 2.1 Definition of project scope and timelines
- 2.2 Evaluation and selection of radio sources for testing
- 2.3 Integration of selected radio sources based on outcome of 2.2
- 2.4 Maintain a log/document of activities

#### Output 3

Evaluation of social media platforms and content for public health intelligence

##### Deliverables

- 3.1 Support the team Epidemiologist who is leading on the social media evaluation
- 3.2 Liaise as required with stakeholders and participate in social media working group meetings
- 3.3 Contribute to the evaluation process, including liaising with stakeholders and vendors as required, documenting findings and making recommendations
- 3.4 Co-author the evaluation report

The consultant will also be expected to participate in team meetings and activities, such as contributing to the quarterly updates, newsletter and reports on the activities within the scope of this consultancy.

### 4. Technical Supervision

The consultant will work collaboratively with the team, reporting to the medical officer/technical coordinator under the overarching supervision of the Team Lead.

### 5. Specific requirements

#### Qualifications:

- **Required:** University degree in epidemiology, public health, international health, health promotion, health policy, communications, public or international relations, statistics, computer science or other field.
- **Desirable:** Advanced university degree in epidemiology, public health, international health, or related field

#### Experience:

- **Required:** At least 5 years of experience in public health with a solid and demonstrable understanding of public health surveillance.
- **Desirable:** Experience with the EIOS system and its functionality; a good understanding of open source intelligence and information feeds; experience contributing to the technical enhancement of surveillance and/or other public health tools.

**Skills / Technical skills and knowledge:**

- Demonstrated ability to interact in complex situations involving technical, cultural and political elements
- Sound analytical and organizational skills
- Demonstrated knowledge of public health surveillance issues in international context.

**Language requirements:**

- **Required:** English Expert level (Read - Write – Speak)
- Intermediate knowledge of another UN language would be an asset.

**6. Place of assignment**

The work is expected to be carried out remotely. However the consultant is expected to liaise closely with the *Information Systems and Data Management* team in Geneva and other stakeholders, which will require the consultant to be reachable during normal business hours Geneva time.

**7. Medical clearance**

The selected Consultant will be expected to provide a medical certificate of fitness for work.

**8. Travel**

The consultant may be required to travel to meetings with stakeholders and collaborators.

*All **travel arrangements** will be made by WHO – WHO will not be responsible for tickets purchased by the Consultant without the express, prior authorization of WHO. While on mission under the terms of this consultancy, the Consultant will receive a **subsistence allowance**.*

*Visa requirements: it is the consultant's responsibility to fulfil **visa requirements** and ask for visa support letter(s) if needed.*

***Consultants working in Switzerland are subject to Swiss law and must abide by Swiss legislation, including social security and taxation legislation. It is the consultant's responsibility to review and abide by the conditions and obligations for consultants based in Switzerland.***

**9. Application**

Please submit your CV in Stellis format (<http://www.who.int/careers/en>), along with a cover letter and references to [kodamaa@who.int](mailto:kodamaa@who.int). If you have previously worked at WHO, please attach your evaluation form.