

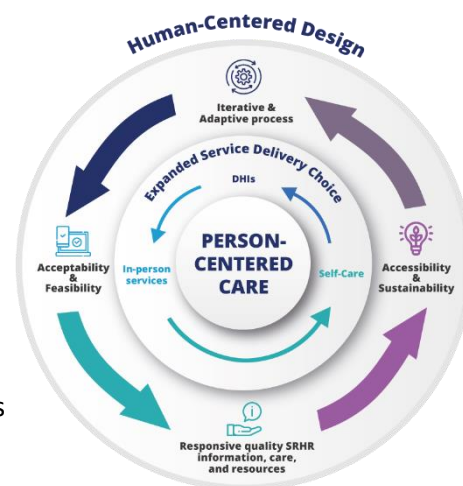
Terms of Reference
Consultancy to support the development of IPPF’s DHI framework while leveraging Member Associations (MAs) expertise and innovations

1. Background

Digital health interventions (DHIs) are defined as health services delivered electronically through formal or informal care. DHIs can range from electronic medical records used by providers to mobile health employed by clients. In 2021, IPPF commissioned a DHI landscaping study to map Member Associations (MAs) experiences with DHI. The study concluded that many MAs had extensive experience with the delivery of on-demand information and services through different DHI channels including telemedicine. The 2021 IPPF Annual Performance Statistics ¹found that 66 MAs reported providing some of their services through DHI channels. These services amounted to an estimated 4.2 million services (1.8% of IPPF total services in 2021). Two-thirds of these services were related to contraception, as well as STIs (9%), gynaecology (6%) and abortion (5%).

In 2022, IPPF published an International Medical Advisory Panel (IMAP) statement on DHI for SRH². The statement outlined a conceptual framing of person-centred DHI based on human-centred design principles while emphasising the organisation’s commitment to expanding service delivery options.

In addition, IPPF’s Client Centred Clinical Guidelines (CCCGs) ³ expanded on the model of care where people are empowered to make informed decisions while being provided with a variety of options to care including digital health interventions, support for self-care and other innovative models of healthcare delivery in addition to the formal health system (i.e. facility-based care) and widening access to the marginalized and excluded communities.



Building on this experience, IPPF’s 2023-2028 Strategy⁴ first pillar focuses on building a person-centred care model that seeks to expand choice, widen access and advance digital and self-care. As IPPF commits to expand the reach of DHIs to clients, we need to take stock of the innovations, learnings, opportunities and challenges based on the IPPF Member Associations’ (MA) experiences in with DHI for a variety of SRHR issues including abortion, contraception, HIV/STIs, Comprehensive Sexuality Education (CSE), and Gender and Inclusion.

2. Responsibilities, Deliverables and timeline

Purpose: The purpose of this consultancy is to support the development of a consolidated DHI framework leveraging MAs expertise in consultation with leading partners and experts in the field. The consultant will also provide recommended actions and processes to IPPF to facilitate the

¹ <https://www.ippf.org/resource/2021-annual-performance-report> D

² [IMAP Statement on DHI for SRHR | IPPF](https://www.ippf.org/resource/imap-statement-on-dhi-for-srhr)

³ <https://www.ippf.org/cccg>

⁴ <https://www.ippf.org/resource/2023-2028-strategy>

development, implementation and the sustainable resourcing of DHIs while upholding IPPF's commitment to quality of care, do no harm and widening access.

Key tasks

- Review existing internal and external papers and materials on DHI for SRHR, meet with stakeholders (IPPF secretariat, MAs and partners). One or two field visits to IPPF MAs may also be required to review current practices and reflect in the development of a consolidated DHI framework and recommendations to IPPF.
- Analyse how IPPF's existing use of DHI compare to the sector's best practices and identify existing gaps and opportunities.
- Based on the desk review, consultations and field visits, provide clear recommended actions and processes for IPPF leadership for meeting the 2028 strategy commitments for DHI.
- Identify the skillsets needed to lead the implementation of the framework and criteria for selecting MAs and/or collaborative partner to lead DHI capacity- sharing for the federation.

Deliverables:

- A comprehensive DHI framework for IPPF based on the 2023-2028 strategy commitments, IPPF documents on person-centred and rights-based approach to DHIs through a range of service delivery models, MAs case studies and reports.
- A set of recommended actions and processes for IPPF leadership with clear roles and responsibilities to ensure the realisation of the 2028 DHI commitments.
- A capability/capacity statement to identify the needed skills and capacities that a Member Association and/or collaborative partner should have to lead the federation's DHI capacity-sharing and peer learning.

Timeline: The work will take approximately three to four months, starting in August/September.

4. Qualifications, experience, skills and languages

- A first level university degree in Public Health, Digital Health or a health-related topic
- Minimum of 5-10 years of experience in digital health space.
- At least 2 years' experience managing multi stakeholders SRHR projects.
- Effective interpersonal, management and communications skills to manage interactions with stakeholders, including government officials, regional/local authorities, experts and NGOs/communities.
- In depth knowledge of digital health topics, terminology and SRH indicators.
- Expertise in writing and developing thematic frameworks and guidelines.
- Awareness of and sensitivity to the multi-cultural and diverse environment in which IPPF operates.
- Understanding of and a commitment to safeguarding including child protection, in a local and international context.
- This consultancy is Home based and the consultant would be expected to travel 1-2 Member Associations in addition to relevant federation meetings when required.
- Supportive of a woman's right to choose and to have access to safe abortion services, in accordance with Schedule 9 Part 3 of the Equality Act 2010.

5. How to apply:

To apply, please submit the following:

- CV
- A cover letter that directly addresses the TOR
- Fees / daily rate
- Availability

Please send the application to Nihal Said at: nsaid@ippf.org