

**BROKOPONDO HEALTH BASELINE  
STUDY\_2022  
ROSEBEL COMMUNITIES OF INTEREST**

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## BACKGROUND INFORMATION

Primary care is considered the backbone of the health system worldwide. The health and well-being of human beings is of paramount importance. Rosebel Gold Mines N.V. (RGM) operates a large-scale gold mining operation in the district Brokopondo, Suriname. Since the start of its mining activities in 2003, the below mentioned communities were identified as the RGM Communities of Interest (COIs). As part of the Corporate Social Responsibility, community investment was carried out in the field of education, Capacity strengthening, infrastructure, income generating and health.

<b>BROKOPONDO</b>	<b>PIKIN-SARAMACCA</b>
<ol style="list-style-type: none"><li>1. BALINGSOELA</li><li>2. BROWNSWEG</li><li>3. KLAASKREEK</li><li>4. NIEUW KOFFIEKAMP</li><li>5. MARCHALLKREEK</li><li>6. KWAKOEGRON</li><li>7. NIEUW LOMBE</li></ol>	<ol style="list-style-type: none"><li>8. THE PIKIN SARAMACCA COI CONSISTING OF<ul style="list-style-type: none"><li>- BILAWATRA</li><li>- MISALIBI</li><li>- BALENG</li><li>- NIEUW JAKOBKONDRE</li></ul></li></ol>

Public health in rural areas has its limitations. Shortage on medical equipment and medicines can be evident and also limitation in other resources to provide optimal care. The leading organization providing healthcare in the interior of Suriname is the “*Medische Zending*” (MZ). This organization, primarily financed through international donation and government subsidies, is responsible for health care. The significant financial situation Suriname is facing, has its impact on the quality of health care in the interior related to the health condition of the communities.

Since health situation of rural communities is pivotal to their development, RGM, as part of their CSR program, will contribute on sustaining the communities’ health situation, by conducting a health baseline study in its COIs. This study will provide information on the health situation condition of the eight (8) Communities of Interest. The focus will be on Non Communicable Diseases (NCD) and Communicable Diseases (CDs). The results of the study will be utilized to strengthen the health infrastructure in the communities through project implementation.

## **PURPOSE & EXPECTED RESULTS**

### **2.1 Purpose**

For the execution of this health baseline study, RGM is seeking a consultant that will conduct the assessment and generate health data that can be used to facilitate quality assessment and improvement efforts within the health structure of the communities in the Brokopondo and Pikin-Saramacca area. To be more specific, the study needs to provide information on equipment needed to help maintain the communities' health by the Medical Mission, information on the communities' health situation through the medical mission in the communities. Since the medical Mission already has a health database of the communities mentioned before, the consultant will work closely with the Medical Mission to collect the data from the Medical Missions in the communities.

The collected data will include at a minimum the below information:

1. Demographical information of the communities. The data should be provided in paraphrase and map and/ or graphs.
2. Health characteristics of the Communities of Interest.
  - a. Health infrastructure of the Medical Mission centres in terms of medical equipment and/or materials needed at the centres.
  - b. Health awareness data, more specifically the understanding and having knowledge about health, healthcare and its' services, health needs diseases and preventive measures.
  - c. Community health profile, including but not limited to the life expectancy of the community residents, strengths & weaknesses, needs & problems, all in relation to health care.

### **2.2 Results to be achieved within the baseline study**

1. Overseeing data collection requiring:
  - a. Identify existing community health problems
  - b. Collect demographical data from the medical mission from each of the communities.
2. Get additional input from relevant stakeholders (predefined) on health issue.
3. Information on the effects of mercury use by the small scale mining activities on the communities' health situation. The information on the SSMS' use of the medical mission center and their food, especially fish and meat origin.

4. The collected data (also see 2.1) should be put in SPSS/ Excel spreadsheet for further analysis.

## **ASSUMPTIONS & RISKS**

### **3.1 Underlying assumption**

Sensitivity to cultural, gender, religion, race and age should be taken into account during data collection. Respect should be given to the tradition and culture of the communities.

### **3.2 Risks**

Baseline study not able to be executed within the set timeline – weather may affect the accessibility of the road to the communities. As mentioned above, due to the sensitivity of certain subjects, information provided can be limited.

## **SCOPE OF SERVICES**

### **4.1 Description of the assignment**

The consultant shall work in close collaboration with the Medical Mission to compile the necessary information. Assignment will include the following:

- The full coordination of the data collection in the field;
- Check of completed questionnaires;
- Data collection at the Medical Mission including assessment on Medical Mission equipment.
- Write a final field report. The collected data should include at a minimum the below information but not limited.
  - Communities' demographical data, from each community.
  - Community health profile (different non communicable and communicable diseases, the number of clients having chronicle diseases, number of times they visit the doctor, etc.)
  - SSM use of the medical center, number of time they visit the medical center, source of meat and fish, etc.)

- Overview of medical equipment needed at the different medical centers.
- Recommend what kind of projects/ awareness activity should be implemented according to the results.

## **4.2 Responsible department**

Responsible department: Community Relations Department

Responsible Person: Tinza Pansa – Community Relations Officer

## **4.3 Location**

The data will primarily be collected at the Medical Mission clinics in the district of Brokopondo and the Pikin-Saramacca community – the eight (8) Communities of Interests.

## **4.4 Start date & period of implementation**

The proposed duration of the work will be for a period of three (3) months, starting from November 14th, 2022 till February 02nd, 2023.

- Submission of Expression Of Interest (EOI) no later than September 30th, 2022.
- Detailed work plan/ technical proposal with a budget submitted by October 12th, 2022
- Data collection to be completed by December 13th, 2022.
- Draft field report with summary and analyses of all field observations captured during fieldwork and collected data, due by January 13th, 2023.
- SPSS/Excel data spreadsheet to be submitted by January 20th, 2023.
- Presentation of the results, January 25th, 2023.
- Final field report, February 02nd, 2023.

## **REQUIREMENTS**

### **5.1 Key experts**

General experience with fieldwork coordination pertaining data collection. Specific requirements:

- Minimum two (2) year of experience in working within the communities in the hinterland/ Rural areas.
- Minimum two (2) year of experience in working with community stakeholder's e.g. traditional authority, health related fields, etc.
- Minimum Bachelors level in Public Health study, or equivalent.

- Solution-oriented way of thinking.
- Fluent in Sranan Tongo, Saamaka or Okanisi.
- Good reporting skills in Dutch, and English.
- Knowledge of the culture and tradition of the communities will be a pre.

## **5.2 Facilities to be provided by the Contractor**

The Contractor shall ensure sufficient food and administrative provisions to perform responsibilities.

## **5.3 Reporting requirements**

Refer to section 4.4.

## **5.4 Submission and approval of reports**

The report referred to the above must be submitted to the RGM, the CRD department who is responsible for approving the reports. The consultant should produce an intermediate report for comments from the RGM team.

## **5.5 Monitoring & evaluation**

RGM will maintain overall coordination on the progress of this field data collection for the Health baseline study.

- RGM will inform the community of this upcoming activity in order to support the consultant in their villages.
- During the field study, RGM-CRs' appointed Officer (see contact below) will constantly in contact with the consultant to get daily progress information.
- Progress of the field study - in case of calamities during the fieldwork, the consultant should immediately report this to RGM-CRD.

## **BUDGET ESTIMATE**

The consultant to provide an overview of the cost for this study with a clear timeline of the activities.

### **Information details**

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