

**Government of the People's Republic of Bangladesh**

**Local Government Division**

**Department of Public Health Engineering**

## **Terms of Reference**

For

**Consultancy Services for Awareness Raising Program**

Under

**Bangladesh City Inclusive Sanitation Project**

**In 25 Towns (GoB-AIIB)**

**Package No.: CIS-SER-05**

**(NCB, QCBS)**

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**For**  
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**Package No.: CIS-SER-05**

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## **1. Project Background**

Bangladesh has a high population density and has experienced rapid urbanization. The percentage of the population living in slums has increased, leading to poor sanitation conditions and a higher risk of water-borne diseases. While access to basic drinking water facilities is relatively good, the quality of drinking water is often poor due to contamination.

Most urban households in Bangladesh have access to toilets, but the functionality of on-site sanitation systems is a concern. Without proper management of fecal sludge, there have been cases of sludge management crises, impacting human and environmental health. Women and children in slums and informal settlements are particularly vulnerable to water-borne diseases caused by unsafe drinking water and poor sanitation and hygiene conditions.

To address these challenges, the Government of Bangladesh has prioritized urban sanitation and approved an Institutional and Regulatory Framework (IRF) for Fecal Sludge Management (FSM). A National Action Plan has been developed to implement the IRF and ensure effective FSM by 2030. The establishment of a Citywide Inclusive Sanitation (CWIS)-FSM support Cell aims to facilitate integrated sanitation management.

To tackle these issues at the city level, the Government of Bangladesh conducted a feasibility study project for implementing solid waste and fecal sludge management systems in 53 district level Pourashavas and 8 city Corporations. The project received technical and financial support from the Bill and Melinda Gates Foundation. The study provided a comprehensive analysis of the existing waste and fecal sludge management situation, including demand, viable technological solutions, and environmental considerations. The findings of the study are available on the open web link [www.sanboard.gov.bd](http://www.sanboard.gov.bd) and serve as a basis for future development projects and sustainable plans. The project focuses on 25 selected district towns that have high percentages of urban poor populations, low sanitation coverage, and potential investments. Its goal is to support the government in scaling up inclusive sanitation projects, including fecal sludge and bio-waste management, small-scale water supply, drainage, and sanitation components. The project aims to prioritize poor communities, promote hygiene behaviors, and prevent water-borne diseases.

## **2. Project objectives:**

This project aims to enhance environment, ensure good quality lives and livelihoods through implementing safe, sustainable sanitation infrastructures and waste management system including service facilities for reaching the targets of SDG The specific objectives are:

- Improving the coverage of safely managed sanitation using safe, sustainable sanitation technology in 25 Towns.
- Improving the life and livelihood of the people in the project area through establishing household, community, public toilets and containment system.
- To reach the targets of SDG 6.2 through implementing modern and innovative technology of integrated sanitation & bio-waste management system, transforming

waste to resources, including enhancement of capacity of the Municipalities and the overall environment.

- To strengthen governance accountability through development of municipal level CWIS framework and guidelines

### **3. Scope of the Service (Tentative):**

This Contract Service will comprise of a consumer awareness program on inclusive, integrated & sustainable sanitation management, waste management & water supply.

#### **3.1 Consumer Awareness Program**

The Consumer Awareness Program will focus on increasing awareness and promoting acceptance of the need for water metered connections and tariff restructuring. Activities will include (i) Community and Consumer Assessments, (ii) Development of a standardized information education, and communications campaign, and (iii) Implementation of the awareness campaign within each Pourashava. This Awareness Program will provide interventions that will lead to changes in the knowledge, attitude and practices (KAP) on hygiene and sanitation. Specific tasks will include:

##### **3.1.1 Community and Consumer Assessment**

Community, Consumer and Site Assessment requires to identify the priority beneficiaries and conduct dialogues and consultations with these beneficiaries to assess their needs and willingness to participate in the project and construct community water supply and sanitation facilities.

It will

(i) Conduct sample surveys and focus group discussions of representative community groups to understand the general perceptions around tariffs and water supply service quality.

The survey will also include the services and expectations of the citizens of the Pourashavas

(ii) Assess community perceptions on their need to pay for water supply services

(iii) Assess the primary hardships associated with water supply in representative communities

(iv) Identify the primary impediments/constraints to supporting an adjustment in tariff/service charge structure, if any

(v) Assess which media (TV, radio, drama, print, community/religious meetings, posters, etc) would be most effective in reaching out to the Pourashava populations.

##### **3.1.2 Development of the Awareness and IEC Campaign:**

(i) Carefully study the project intervention, and the data of the community perceptions, to identify the key messages (the fact that investments will significantly improve water quality/quantity, the importance of metering, the importance of setting sustainable tariffs, acceptable service charges, the citizens' right to hold the Pourashava accountable, etc) that need to be communicated to the public.

(ii) Identify which messages are best suited for each media type.

- (iii) Develop a comprehensive strategy, sequencing of messages, and timeline for carrying out such campaign
- (iv) Develop draft materials such as print advertisements, drama/short film advertisements, TV/radio advertisements, and short plays/speeches to convey such messages
- (v) Test the messages with focus groups to assess their effectiveness, and revise scripts and formats as necessary.
- (vi) Develop final IEC or other awareness building materials, in formats ready for dissemination/broadcast.

### **3.1.3 Implementation of the Awareness and IEC Campaign**

- (i) Identify local newspapers, radio stations, short films, dramas and other media that could be used as for dissemination of IEC campaign Negotiable agreements on airtime charges/schedules
- (ii) Identify local NGOs/CBOs that could potentially partner in disseminating the IEC materials at the Pourashava level:
- (iii) develop a structured plan for dissemination of the various materials in each Pourashava
- (iv) Implement the campaign in collaboration with the PIU, Pourashava, and local NGOs/CBOs
- (v) Monitor and document changes in people's perceptions as the campaign progresses, over the project duration

## **3.2 Sanitation and Waste Management Awareness Program**

The Sanitation Awareness Program will provide interventions that will lead to changes in the knowledge, attitude and practices (KAP) on hygiene and sanitation Activities will include (i) KAP assessment, (ii) development of the appropriate awareness campaign and related materials collaborating with other agencies in the sector and necessary, (iii) implementation of the campaign at the Pourashava level.

### **3.2.1 KAP Assessment**

- (i) Conduct sample surveys and focus group discussions of representative community groups to understand the general perceptions around health, hygiene, sanitation and municipal waste management
- (ii) Assess community perceptions on the need for improvements in sanitation and municipal waste management hardware, and the need for change in attitudes and practices.
- (iii) Identify and differences in the attitudes/needs of males versus females, and of children
- (iv) Assess the primary hardships associated with poor sanitation, hygiene and municipal waste management practices in representative communities
- (v) Identify the primary impediments to changing hygiene, sanitation and municipal solid waste and faecal sludge management behavior

(vi) Assess which media (TV, radio, drama, short film, print, community or religious meetings posters, schools, etc.) would be most effective in reaching out to the various sub-segments of the Pourashavas populations to be able to change KAP on hygiene and sanitation.

### **3.2.2 Development of the IEC Campaign**

(i) Identify the key messages on sanitation, hygiene and municipal waste management that need to be communicated to the public.

(ii) Identify which messages are best suited for each media type, and which segment of the population

(iii) Develop a comprehensive strategy, sequencing of messages, and timeline for carrying out an awareness campaign

(iv) Develop draft materials such as print advertisements, short films, advertisements, TV/radio advertisements, short plays/speeches, leaflets, stickers, posters, etc. to convey such messages to specific target audiences.

(v) Test the messages with focus groups to assess their effectiveness, and revise scripts and formats as necessary.

(vi) Develop final IEC materials, in formats ready for dissemination/broadcast.

### **3.2.3 Implementation of the IEC Campaign**

(i) Identify local newspapers, radio stations, drama in schools, cultural institutions and other media that could be used as for dissemination of IEC campaign.

(ii) Negotiate agreements on airtime charges/schedules, and potential timing of school-based activities.

(iii) Identify local NGOs/CBOs that could potentially partner in disseminating the IEC materials at the Pourashava level.

(iv) Develop a structured plan for dissemination of the various materials in each Pourashava.

(v) Implement the campaign in collaboration with the PIU, Pourashavas, and local NGOs/CBOs.

(vi) Monitor and document changes in people's perceptions on sanitation/ hygiene and municipal waste management as the campaign progresses, over the project duration.

Apart from these the consultancy service will include:

Community Mobilization including organizing and training the users of the communal WSS facilities and services, to enable users to operate and manage such facilities over the long term Also manage the contracting and construction of communal water points and latrines in collaborating with user groups.

#### **4. Coordinating Community-level Construction:**

By establishing a formal link between the User Groups and the PIU and assisting user groups to comply with all project procedures. Monitoring of the performance and progress of the User Associations to ensure sustainability beyond project duration.

#### **5. Deliverable**

The total duration of the services will be 9 (nine) months, and the consultant firm must provide a specific bar chart of service and delivery schedule with the effective time framework with 9 (nine) months. The firm must provide the following deliverables:

Social awareness and community development reports, the consultant shall submit 10 (ten) copies to DPHE of the following reports in English (Bengali where applicable) with soft & Hard copy. The following reports must be enclosed:

- Inception Report within 30 (thirty) days of signing the contract.
- An assessment report on the development works within 2 (two) months after the signing of the contract.
- Communication Module indicating and aligning with IEC materials within 3 (three) months of signing of contract.
- An interim report on the progress on implementation of the works after four (4) months from the date of signing of contract.
- The consultants will prepare brief monthly progress reports to be submitted to DPHE within 4 (four) days at the end of each month.
- At least 4 video documentaries on overall project, piped water supply, sanitation, Hygiene & Handwash, solid waste management & Faecal Sludge management within four (4) months of signing of contract.
- The awareness campaign should be 10 times a day in every week with a minimum duration of 15-30 seconds each (at least 6 (Six) TV spot) up to end of contract period or PPSF which comes first (if unless otherwise happens).
- The awareness campaign should be 10 times a day in every week with a minimum duration of 15-30 seconds each (at least 6 (Six) Radio spot) up to end of contract period or PPSF which comes first (if unless otherwise happens).
- IEC materials in Bengali and English version for awareness campaign for water supply, water meter billing, sanitation, hygiene, 5R concept including solid waste sorting, transporting and management, faecal sludge containment emptying transporting, treatment, safe disposal and the total management service value chain.
- The consultants will prepare brief monthly progress reports to be submitted to PMU within 4(four) days at the end of each month.
- Draft final report indicating the impact of the program on assessment within 8 (Eight) months.
- The consultants will also assist the PMU/ PD with the preparation of quarterly progress reports to be submitted to the Bank. Such reports shall span the progress of work significant issues, constraints and other relevant aspects, including financial statements and shall be prepared within two weeks of the end of each quarter.
- Apart from all others, the consultants shall help the PMU by preparing special reports that may be felt necessary by the management but cannot be identified now.
- Final Report within 1<sup>st</sup> week of 9<sup>th</sup> (Nine) month.

## 6. Ownership of Documents

- DPHE shall be the owner of all the Audio-Visual materials and other documents prepared under the project.
- After completion of the project all documents/results should be handed over to DPHE before final payment.
- The consulting firm shall accommodate the latest version of all the computer software/programs and shall provide the latest version while transferring database/tools/software to DPHE.

## 7. LOGISTICS:

- The Consultant shall ensure that all members of the CONSULTANT's team are equipped with adequate computing, all the necessary IT hardware, and ancillary equipment such as printers, document processing, electronic mail facilities, communication devices, and other equipment as needed (ex. photo or video documentation devices). If needed, the DPHE (PMU) will decide to partially accommodate the required consultant to facilitate the work.
- At the end of the consultancy services, all equipment and/or furniture purchased by the Consultant for the assignment shall be transferred to DPHE in good condition.

### Consultancy professional (key staff), person month and qualification

Sl no	Position	Nos	Person month	Minimum qualification	experience
1	Team leader (TL)	1	9	Master's degree in public health social Welfare/Sociology/Public Administration Management or any other relevant subject.	20 years total experience, including 12 years of specific experience in behavior change communication in WASH, CWIS, and waste management.
2	Coordinator & IEC Expert	1	9	Master's degree in journalism/ social Welfare/ Sociology/ Public Administration Management or any other relevant subject.	Minimum 15 years total experience, including 10 years of specific experience in Public Relations.
3	Marketing expert	1	9	Master's degree/ MBA with major in Marketing or any other relevant subject Age should be less than 60	Minimum 10 years' experience in Marketing, Social Mobilization and/or relevant field
4	Communication & Mobilization Expert	1	9	Master's degree in social Welfare/Sociology/Public Administration/ Management or any other relevant subject.	Minimum 15 years' experience in communication, dissemination, awareness campaign and/or relevant field including 5R concept.

Sl no	Position	Nos	Person month	Minimum qualification	experience
5	Gender Specialist	1	9	Master's degree in social Welfare/Sociology/Public Administration or any other relevant subject.	Minimum 15 years experience in communication, dissemination, awareness campaign and/or relevant field Minimum 5-year specific experience for implementing gender action plan, policies and strategies in LGIs
6	Films & Audio-Visual Expert.	1	5	Bachelor degree in Film making & Information Science /Sociology or any other relevant subject.	Minimum 10 years' experience in awareness campaign and/or relevant field Minimum 8-year specific experience in developing short films, documentaries on mentioned task.

## 8. Provisional Items & Support Staffs:

- a) Support Staffs (Project Assistant, Training Officer, Computer Operator, IEC Coordinator, Office Assistant Field Researchers/Mobilizer, Community Officer Graphics Designer, Script Writer, Video Editor, Camera Person, Assistant Director etc.
- b) NGO/ Local organization engagement
- c) Air Fare and travel expenses Vehicle rent
- d) Per Diem Domestic.
- e) Computer, laptop, printer and other Equipment
- f) Office operations
- g) Photocopier, Scanner. Telephone, Internet Modem and other necessary office equipment's including accessories.
- h) Project Completion Reports Pourashavas wise report, all deliverables in DVD including master copy and Copies
- i) Office Stationeries
- j) Office setup including Furniture, Recurring cost, Maintenance etc
- k) Dissemination program, workshop and meeting arrangement
- l) Miscellaneous.