

TERMS OF REFERENCE FOR MCDP QUALITATIVE EVALUATION

Project / Program: The First 1000 Most Critical Days Project, Mollahat, Bagerhat.

Consultant Name: Consultant to be hired as per Save the Children policy

Location: Mollahat, Bagerhat

Duration: Maximum 30 working days.

Reporting To: Kazi Eliza Islam, Programme Adviser, Signature Programme

BACKGROUND

Country nutrition context: Despite significant improvement in country's health and nutritional situation during the last few decades, Bangladesh still has one of the highest global prevalence of child malnutrition. According to the latest BDHS 2011 41% children under two years of age suffer from chronic malnutrition in Bangladesh. The short-term and long-term effects of stunting (a form of chronic malnutrition) on child growth and development are well established and acknowledged by the nutrition community in country and abroad. Along with these lifelong effects and persistently high rates of malnutrition, cost Bangladesh an estimated US\$1 billion a year in lost economic productivity¹. The first 1000 Most Critical Days project is an effort to prevent the adverse effects of stunting among children under 2 and thus help them to grow and in reaching their full potential.

Project brief: The 1000 Most Critical Days (MCDP) Project aims to reduce incidence of "Stunting" among children under two years of age in Mollahat upazilla of Bagerhat district, which will be achieved through a coherent set of nutrition specific and nutrition sensitive interventions. Save the Children Bangladesh (SCiBD) is implementing MCDP in collaboration with 3 technical partners (iDE, WorldFish, and HKI) and one implementing partner (CODEC) in 7 unions of Mollahat upazila of Bagerhat district since September 2013..

The goal of the project is to reduce stunting among children under two years of age by achieving 5 inter-related objectives: (1) improving local level nutrition governance (2) enhancing climate resilient and asset base livelihood options for targeted households (3) increasing year-round production and consumption of nutritious food (4) increasing health and nutrition related knowledge, skills and practice (5) enhancing access to and utilization of health and nutritional services. Please see annex for the list of major activities under each objectives.

The project targets pregnant and lactating women with children under two as direct beneficiaries and covers a total of 2500 poor and moderate poor households.

¹ State of Food Insecurity in the World, 2012 (FAO) www.fao.org/docrep/016/i3027e/i3027e03.pdf

Since the inception the project has completed the selection of all beneficiary households using pre-defined criteria of poor and moderate poor, and has formed a total of 115 women groups, which are used as common platforms to deliver all the project activities.

Save the Children and relevant partner staff have received Training of Trainers (ToT) on a range of technical areas that includes: Basic health and Nutrition, Hygiene and sanitation, Selection of Income generating activities (IGA) for poor and moderate poor households, Market analysis and business development, Homestead production of nutritious food that include horticulture and aquaculture, Gender relations in the perspective of nutrition. While SCiBD conducted nutrition ToT, relevant technical partners provided training on other areas. A strong partnership has also been established with key government stakeholders and related frontline workers from the Department of Health (DGHS) and Department of Agriculture (DAE) at upazilla and union level. Many of them played critical roles in providing ToT to MCDP staff members as well as beneficiaries training.

Series of courtyard sessions and home visits/individual counseling for promoting health and nutrition behavior has been completed for all selected pregnant and lactating mothers. IGA selection for all extreme poor households have been completed as start up grant (asset transfer) has been distributed among all 1250 extreme poor households to launch income generating activities (both on farm and off farm) and/or small businesses as per selected IGA. All households (both extreme poor and moderate poor) received training on horticulture and aquaculture and all of them received critical inputs (seeds, seedlings, fingerlings and fertilizer) for homestead production of winter and summer seasons. Beneficiary households also received training on individual business plan with guidance and technical support from iDE and the partner CODEC. . A comprehensive gender module has been implemented in selected unions as pilot to promote gender awareness and equity among beneficiaries households.

The project also delivered comprehensive BCC to promote maternal and child health and nutrition behavior and practices using court yard session, mass media and other innovative communication methods and the whole families (adolescents, newlywed, mothers in law, fathers). The program also sensitized and mobilized local actors of ward/Union Parishad (UP) to make nutrition as a common agenda through activation of the standing committee at the union level and to create an enabling environment at the community/union level to take the case forward. The project supported and encouraged the targeted households to take initiatives to secure nutritious food intake through year round production of vegetables, fruits, fish & eggs etc for the consumption of the beneficiary households. They were linked with the local level input seller& service providers. Because of the intensive program activities at the ward level of each union of the Mollahat upazila, the project established link with government health, nutrition and agriculture extension workers to deliver training and services for the beneficiaries. The project also trained 115 lead farmers and established demonstration plots to

promote production of nutritious food items utilizing the available ponds and homestead land owned by the poor extreme poor or moderate poor households These land or ponds were used to demonstrate advanced technologies for horticulture, aquaculture and homestead gardening

Evaluation purpose

The overall purpose of the qualitative evaluation is to systematically identify, analyse, document and learn from successes/best practices as well as challenges related to program operations, implementation and coordination. The qualitative evaluation will also focus on identifying issues related to effectiveness, impact sustainability and scalability of selected program interventions beyond the duration and geographical boundary of MCDP.

1. The first area of learning is around the effectiveness of 3 selected program areas of interventions (Lead farmers approach, Market linkages, and Nurturing Connections) and approaches to address underlying causes of chronic under nutrition in Mollahat upazilla of Bagerhat district. Some of the common questions for each of these interventions would be around:
 - I. Operational challenges and opportunities particularly related to coordination and coherence that the project encountered in implementing these interventions and approaches in that particular context.
 - II. Who participated in these interventions, who did not and why? What could have been done differently to enhance participation of targeted stakeholders in these interventions?
 - III. To what extent these interventions has achieved their respective objectives and contributed in overcoming systemic/structural barriers to nutrition. What are the potentials of sustaining these interventions (particularly Lead farmers' approach and market linkage) and their effects on improving nutrition in the project areas beyond the project period?
 - IV. What are the issues or potentials of scaling up these interventions outside the project geographical areas?

Please note that a complete list of evaluation questions will be developed in consultation with respective technical partner during the design phase of the evaluation. Save the Children International and all 3 technical partners (iDE, WorldFish, and HKI) will also be involved in reviewing and approving evaluation design including tools and methods developed/proposed by the consultant.

2. The second area of inquiry is around engagement of external stakeholders in various project activities. There were three main audiences for this a) local government actors (UP chairmen, members including standing committees b) gov't service providers from MoHFW, DAE, and DoF at upazilla and district level c) Children/adolescents groups in targeted communities. For each group we are interested in their level and quality of participation along with identifying barriers and facilitating factors for their engagement in MCDP. The evaluation would also like to explore their contribution to the nutrition related activities that sit outside the MCDP activities. Each group had a different roll in MCDP and were engaged in different ways so to improve nutritional situation of their village/communities, hence conclusions may be group specific or general. A secondary question for each group is how accountability for improved nutrition was understood and operationalized by each of these groups and how each group was able to hold the relevant service providers/duty bearers to account. Some Key questions would be:

- i. To what extent local government actors were engaged in promoting gender equality and nutrition related activities (beyond MCDP) in the project areas
- ii. To what extent government service providers/front line workers were engaged in delivering nutrition related services (both specific and sensitive) to poor and extreme poor families in the project area.
- iii. What are some of the major barriers or motivating factors for govt service providers and local government actors that enhance or prevent their engagement in nutrition related activities
- iv. Were local government actors able to mobilise fund locally and/or get support from central government to address the resources gaps that limited their ability to delivery services
- v. To what extent children/adolescents were engaged in promoting nutrition in their community
- vi. To what extent children were able to participate in and influence local government decisions making process related to nutrition.

Note: The pilot work with children's participation was not across the whole project areas so this work would be limited to the specific unions where this was piloted.

STUDY SITE AND SAMPLE DESIGN

The study will be conducted in Mollahat upazila of Bagerhat district covering all 7 unions. The consultant will submit a detail evaluation design including tools and methods that will be used to collect and analyse information required to answer the research questions. The design must include qualitative tools and methods to collect and analyse information from the representatives of the targeted 2,500 households and the range of stakeholders including government service providers, local govt actors and children/adolescents who were engaged with the project in one way or either. Methodology must be appropriate to capture the learning from the process of implementation as well as measure the changes in key outcomes as described above.

SCOPE OF WORK

The consulting agency/individual consultant will accomplish the following task under this contract:

- Develop a comprehensive study protocol with detail methodology that should include sampling techniques, sample size, tools and methods for qualitative data collection and analysis.
- Hire and train enumerators/facilitators if required
- Data collection, quality control and supervision
- Data management (sorting, ranking, editing, cleaning) and analysis
- Produce preliminary findings
- Submit draft reports
- Final report with full analysis and recommendations

DELIVERABLES

- Proposed methodology document outlining study design data collection tools which shall be submitted within five days after acceptance of the methodology for review and approval by Save the Children.
- Draft study report as per the timeline mentioned in the work plan
- Presentation of the key findings to the stakeholders (project team)
- The final report which shall be submitted within 7 working days after the stakeholders' workshop and shall incorporate Save the Children and Stakeholders' input.
- Raw data, and transcriptions.

TIMELINE

Between 1 June 2015 to 5 July 2015. Please submit a detailed action plan.

BUDGET

Please attach a detailed budget with remuneration and field work expenses in Bangladeshi Taka.

MODE OF PAYMENT

All payments related to consultancy fees will be made through account payee cheque as per Save the Children policy. Payment will be made in 2 installments; first installment (30%) upon finalizing the design and tools and submission of the draft plan, second and final installment (70%) will be made upon satisfactory completion of the whole task and approval of all deliverables. *Income tax at source, VAT will be deducted as per government's policy at the time of payment.*

SKILLS AND QUALIFICATIONS REQUIRED

- The team leader/lead researcher should be educated to Masters degree level in a social science, public health or other relevant subject with proven experiences in qualitative research.
- Significant experience of collecting and analyzing and interpreting qualitative information to generate knowledge and learnings.
- Able to provide evidence of producing high quality assessment/evaluation reports in English
- Ability to work and deliver outputs within tight timeframes
- Experience of working within a diverse team, remaining self-motivated, using initiative and responding appropriately to constructive feedback

TECHNICAL EVALUATION CRITERIA

Sl.	Criteria	Assigned Score
i	Demonstrate understanding of objectives and completeness of the assignment	15
ii	Methodology and implementation plan a. Details and quality of methodology proposed for the assignment; and b. Details implementation plan indicating time frame	35
iii	Proposed Team (detailed description of the proposed team: CVs [not more than 3-page for each CV] of the proposed Team Leader and other key team members)	25
iv	Organization a. Profile [including administrative and logistics facilities available], experience in similar assignment in last 10-year, client list, management control system; b. Exposure in working with Save the Children and c. Additional resources/logistics which can be made available to conduct the survey	25
	Total Points: 100 (Pass Marks 65 Points)	100

EVALUATION OF FINANCIAL PROPOSAL

A financial proposal should be included containing Summary of Costs, Breakdown of Staff Remuneration, Travel and DSAs, miscellaneous, overhead costs (if any) and other costs.

COMBINED EVALUATION

The Proposals will be ranked according to their combined technical and financial scores using the weights (T = the weight given to the Technical Proposal; P = the weight given to the Financial Proposal; T + P = 1). The organizations achieving the highest combined technical and financial score will be invited for negotiation under.

Technical Pass Marks: 65 Points

Technical weight (T): 80%

Financial Weight (P): 20%