**Terms of Reference (ToR) for Design and Development of Nutrition and Hygiene IEC Messages**

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# Proposed Timeline

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| **Line** | **Item** | **Date** |
| 1 | TOR published | July 15, 2021 |
| 2 | Closing date for clarifications | July 29, 2021, 04:00 PM GMT +3 East African Time |
| 3 | Closing date and time for receipt of Bid | August 04, 2021, 04:00 PM GMT +3 East African Time |
| 4 | Bid Opening Location | Addis Ababa, GOAL Ethiopia Head Office |
| 5 | Bid Opening Date and time | August 05, 2021, 09:00 AM GMT +3 East African Time |

# Background

Despite reductions in recent years, malnutrition remains one of Ethiopia’s biggest development challenges. Undernutrition is a key contributor to under 5 mortality and has long-term negative effects on people’s lives and the human capital upon which the economy relies. A severely wasted child is nine times more likely to die than a well-nourished child and contributes to 25% of illnesses suffered by children under five[[1]](#footnote-1). Stunted children are at higher risk of repeating school grades and dropping out[[2]](#footnote-2) . Total loss of productivity due to undernutrition is estimated at 16.5% of the country’s GDP[[3]](#footnote-3) . In 2019, the chronic malnutrition rate (stunting) among children under five in Ethiopia is estimated to be 37%. The acute malnutrition rate (wasting) is 7% at national level, however in lowland areas such as Somali, wasting rates are as high as 21%.

In Ethiopia, almost all mothers breastfeed, however only 59% of children are exclusively breastfed for the first six months as recommended by WHO and UNICEF[[4]](#footnote-4). Early initiation of breastfeeding is at 73% while continued breastfeeding rates for children 12-17 months and 18-23 months are at 85% and 76% respectively. Fourteen percent of 6 to 23 months old Ethiopian children had an adequately diverse diet in which they had been given foods from the appropriate number of food groups, and 45% had been fed the minimum number of times appropriate for their age[[5]](#footnote-5).

The Knowledge, Attitude, Practice and Belief (KAPB) baseline assessment conducted by RIPA in September 2020, revealed low prevalence of nutrition and hygiene practices in RIPA targeted areas. Only 55.6% of children under six months of age were exclusively breastfed, 3.1 % of children 6-23 months are receiving a minimum acceptable diet, only 7.5% of women of reproductive age are consuming a diet of minimum divert.

Acknowledging that the root causes of malnutrition and barriers to positive behaviors vary according to location, a formative study was conducted for those behaviors which are identified as low prevalent on the baseline KAPB survey, in order to explore barriers and facilitators to optimal infant and young child feeding practices, identify a range of improved feeding practices that would be acceptable to mothers/caretakers of infants and young children, improved maternal nutrition and hygiene practices and design SBCC strategy. Main objective of the SBCC strategy is to influence prioritized women and child nutrition and hygiene behaviors which can be sustained during times of shock or stress and thus mitigate the effect of disasters.

Following the completion of the formative study, a Social and Behavior Change Communication (SBCC) strategy was developed.

This ToR is therefore to procure a consultancy service for design, development and production of IEC/BCC materials based on the identified barriers and SBCC strategy.

**RIPA Project**

Resilience in Pastoral Area (RIPA) is a five-year initiative (2020 – 2024), implemented by PCI, iDE and GOAL, targeting pastoral and agro pastoral communities in Borena, Guji, S. Omo, Filtu/Dawa Zones. The purpose of RIPA is to improve resilience through improved food security and inclusive economic growth, it is supported by USAID in Ethiopia.

The programme has five components, each led by a consortium member, improved nutritional status of women and children is one of the components which focus on nutrition and hygiene behavior change and nutrition-sensitive market actions. This will contribute to improved nutritional outcomes especially for women and children.

# Objective of the consultancy

**General Objective**

To design, develop and adopt a context specific IEC messages focusing on maternal and child nutrition and hygiene behavior, which is provoking enough to induce personal reflections and assist the audience develop positive behavior.

**Specific Objectives**

* Design and develop context specific nutrition and hygiene messages which can be transmitted through local radios and televisions,
* Develop songs and role play scripts which can be used during community meetings and school events to sensitize the community towards improved nutrition and hygiene behavior.

# Deliverables

## 3.1 Consultant Deliverables

* Review the barrier analysis report and Social and Behavior Change Communication (SBCC) strategy which is developed by RIPA and design the messages based on identified barriers.
* In close consultation with the FMoH and respective regional health bureaus and GOAL technical team, develop a context specific messages which can be transmitted through local radios and televisions (one nutrition and one hygiene, two to three related key messages can be combined),
* Develop role play scripts (two for nutrition and two for hygiene) and songs (two for nutrition and two for hygiene) with key nutrition and hygiene message, which can be used during community conversation and school events,
* Design and develop key nutrition and hygiene IEC messages which can be used in posters and banners,
* Organize a consultative workshop to review the developed messages with relevant federal and regional health bureau representative and GOAL team. And consider comments and inputs provided during consultative workshop and develop a final nutrition and hygiene message in English.
* Prepare the final key nutrition and hygiene messages in Oromifa, Hammer,Dasenech, Gnagatom and Somali languages and contexts.
* Conduct audience testing of the developed key nutrition and hygiene messages together with target population and incorporate findings from the pre-test and prepare the final key messages and BCC tools (Poster and Banner)
* Submit the endorsed, recorded (TV/radio) messages, Songs and role play scripts, BCC tools (1banner and 1 poster for agreed nutrition and hygiene behavior in the stated local language) to GOAL.

## 3.2 GOAL/RIPA Deliverables

* Share barrier analysis report, SBCC strategy and other relevant documents to the consultant.
* Discuss with the consultant and decide on key behaviors that can be addressed through arts (song and role play) and those addressed through TV/Radio broadcasts and posters,
* Involve in the consultative workshops and provide inputs,
* GOAL will furnish letters of support from the government body whenever needed.

# Qualifications of Successful Candidate

* Firm with multidisciplinary team members; nutritionist, SBCC expert, creative personnel concerned with design and formulation of BCC message, script writer and production team,
* At least 7 years of proven experience in design, development and production of nutrition and hygiene BCC messages,
* A team leader with relevant academic qualification as per the job assigned.
* Understands the project location and the context and similar local level work experience.
* Strong inter-personal, teamwork and organizational skills
* Solid understanding of and documented work experience in individual and social behavior change communication.
* Good facilitating, negotiating, communication and advocacy skills.

# Assumption and requirements

* The consultant will have access to the targeted community for designing the messages and conducting pre-test.
* GOAL will provide relevant security and safeguarding/protection briefings. Security concerns could impact the timing and scope of the assignment. It is important for the consultant to remain flexible.

# Duration and Condition of Consultancy

The total duration of the consultancy will be 45 working days. The consultant will be expected to prepare an inception report within 5 days after signing of the contract: covering methodology and work plan for review and approval by GOAL.

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| --- | --- |
| **Task** | **Approximate number of working days\*** |
| Submit inception report covering methodology and work plan for review and approval | 5 days |
| Develop and submit role play scripts, songs with key nutrition and hygiene message and IEC messages which can be used in posters and banners | 8 days |
| Develop and submit context specific messages with ideas on how radio/TV messages will be recorded and broadcasted | 5 days |
|  |
| Organize a consultative workshop to review the developed messages with relevant federal and regional health bureau representative and RIPA team | 1 day |  |
| Field work to develop context specific messages and record radio and TV messages | 10 days |  |
| Conduct audience testing of the developed key nutrition and hygiene messages together with target population and incorporate findings from the pre-test and prepare the final key messages and BCC tools | 5 days |  |
| Organize final consultative workshop | 1 day |  |
| Submit translated, endorsed, recorded (TV/radio) messages, Songs and role play scripts, BCC tools in each language. | 10 days |  |
| **Total** | **45 days** |  |

# Bidding Requirement

The deadline for submission of the technical and financial proposal and accompanying documents is **August 02 ,2021 to** [tender@et.goal.ie](mailto:tender@et.goal.ie%20%20)  or Hand delivered to:

GOAL Ethiopia, Procurement team, Head Office, Addis Ababa, Yeka Sub City, Woreda 9, House No. 508, Next Compound to Kotebe Health Centre, PO Box 5504, Tell 011-647-8116/17, hours of business 8:00AM up to 4:30 Pm working days.

### Essential Criteria:

* Technical proposal including detailed tasks, recommended methodology summary and your relevant experience, how you meet the profile required, details of time required, and cost break down for each activity (maximum 8 pages)
* Provide at least 3 recommendation letters on development of BCC materials and experience in similar field.
* CVs of key personnel involved in undertaking the activity.
* Renewed business license

### Award Criteria:

* Capacity to design, develop and produce BCC materials proven through experience of conducting same activity,
* Proposed methodology realistic and relevant to the objective of the assignment,
* Number of days proposed to fulfil the assignment,
* Price

# Key Notes

* The consultant should be able to demonstrate that they can carry out the work as stated in the TOR in Ethiopia.
* The consultant should be conversant with Ethiopia taxation laws.

For any clarifications, please send it through [clarifications@et.goal.ie](mailto:clarifications@et.goal.ie)

1. UNICEF: https://www.unicef.org/nutrition/index\_sam.html [↑](#footnote-ref-1)
2. UNOCHA: https://reliefweb.int/sites/reliefweb.int/files/resources/FINAL%20Ethiopia%20%20COHA%20Summary%20Report%20June%2028.pdf [↑](#footnote-ref-2)
3. WFP Cost of Hunger in Africa Stud: A Regional Look at the Price of child undernutrition in Africa [↑](#footnote-ref-3)
4. Mini EDHS 2019 [↑](#footnote-ref-4)
5. EDHS 2016 [↑](#footnote-ref-5)