Government of the People's Republic of Bangladesh Local Government Division Department of Public Health Engineering

Terms of Reference For

Consultancy Services for Capacity Builiding and Awareness Programme
Under

Inclusive and Integrated Sanitation and Hygiene Project in 10 Priority Towns in Bangladesh (GoB-IsDB)

Package No.: SER-04 (NCB, QCBS)

September 2023

Terms of Reference

for

Consultancy Services for Capacity Development and Awareness programme

1. Project Background

Bangladesh experienced faster urbanization than most countries in South Asia between 2000 and 2010. As of 2019, about 37.4% of the total population are urban, out of which about 55% are slum population (World Bank, 2020) living in extremely poor conditions. Urban poor populations, particularly women and children, are at higher risk of water-borne diseases attributed to unsafe drinking water and poor sanitation and hygiene conditions in slums and informal settlements. The unsafe disposal of feacal sludge, solid waste, and wastewater has been causing environmental pollution and exacerbating the health problems in the slums and informal settlements. Considering these facts, the Government of Bangladesh has prioritized urban sanitation, including FSM interventions, as one of the key development priorities and approved the Institutional and Regulatory Framework (IRF) for Fecal Sludge Management (FSM) in 2017. A "National Action Plan" for implementation of the IRF-FSM has been developed that specifies the roles and responsibilities of stakeholders at different levels (e.g., national/local) with an objective of rapid implementation of IRF for effective implementation of FSM by 2030. Under this directive, "Citywide Inclusive Sanitation (CWIS)-FSM Support Cell" has been recently set up within the Department of Public Health Engineering (DPHE), to support and facilitate the overall planning, development, implementation, practice, and monitoring and evaluation of FSM and Solid Waste Management adopting the CWIS approach.

The Government of Bangladesh with technical and financial support from The Bill and Melinda Gates Foundation (BMGF), initiated a Technical Project Proposal (TPP) named "Feasibility for Implementation of Solid Waste and Faecal Sludge Management System in 53 district Paurashavas and 8 City Corporations". The Department of Public Health Engineering (DPHE) was the implementing agency of the TPP and had engaged several consultants & experts to carry out a feasibility study for establishing IT & GIS Based Smart Solid Waste and Faecal Sludge Management Systems and solutions in 53 District Level Paurashavas and 8 City Corporations. The study results provided a strong basis and relevant information for preparing investment projects by the Government and Development Partners.

The ten cities have been selected based on some criteria such as high percentage of the urban poor population, availability of land from the municipalities, low baseline coverage of sanitation services, no potential investments from other MDB and IFI funded projects, and special vulnerabilities of the areas – flooding, cyclone, river erosion, drought and representation of towns from every geographical area. The project has been designed to support the Government of Bangladesh in scaling up the implementation of FSM and solid waste management guided by the CWIS approach in Urban Poor communities and to promote hygiene behaviors in preventing water-borne diseases.

1.1. Overall objective of the Project:

The project's overall objective is to ensure good quality lives and livelihoods through safe, adequate, equitable, sustainable sanitation, hygiene facilities, and services, with a special focus on the urban poor women and children, guided by City-wide Inclusive Sanitation (CWIS) approach.

1.2. Specific Objectives:

- To improve the public and environmental health by reducing water and land pollution as well as water borne diseases through risk-informed sanitation infrastructure and services, occupational safety, community engagement and climate change mitigation.
- To ensure universal access to sanitation services, especially for the poor & marginalized communities by promoting safe, innovative, inclusive, efficient and

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climate & disaster- resilient sanitation, hygiene infrastructures and services at the city level.

- To institutionalize the livelihood opportunities for the informal sanitation workers and private sector through viable business models and capacity development including gender equity, and economic and social inclusion.
- To strengthen governance accountability systems through development of municipal level CWIS framework and guidelines.

1.3. The specific project outputs relevant to capacity building and awareness raising:

- Build capacity of local Governmet (LGI) staff, community leaders, womens' groups, private sanitation workers and cooperative staff on sanitation business, financing and entrepreneurship through skill based raining, also ensuring women and youth engagements.
- Create at least five (5) viable business models for service delivery including cooperatives of sanitation workers
- Develop a National guidelines for developing climate change resilient sanitation infrastructure designs.
- Esablish smart systems for managing services, operations, and M&E including Integrated Information Management System in 10 Project cities
- Design awareness campaign at natinal, city and community level through conducting a Formative study/Consumer Need assessment and KAP assessment.
- Develop and promote IEC/BCC packages (TVC, community Radio programme, script, cultural
 activities, poster, Bill board etc.) including risk communication and community engagement
 materials for sensitizing communities and promoting safe practices.
- Organise national level campaign launching and Implement awaress raising activities at 10 cities and community(108 wards)level.

1.4. Major expected outcomes related to capacity building and awareness raising

- Enhanced capacity of all relevant stakeholders to ensure sustainable sanitation services
- Improved risk preparedness and capacities of LGIs and vulnerable communities to reduce risks, respond and mitigate risks related to WASH;
- Increased participation of women in the LGi staff, cooperatives and sanitation decision
 making platforms and reduced burden on women by improving sanitation services and access
 to them.
- · Implemented the FSM-IRF at the city level;
- Developed successful entreprenuers, cooperatives from LICs/sanitation workers community
 that supported with efficient sanitation service delivery at last mile for LICs thus promoting
 good quality lives and livelihoods;
- Improved health and environmental outcomes at the city level particularly in LIC areas and slums.

2. Objective of the Assignment

According to the agreement signed between GoB and IsDB for Project No. BGD: 1066, Department of Public Health Engineering (DPHE), the Executing Agency of the Project shall deploy capacity and awareness building consultancy firm/NGO for the smooth implementation of the project.

The primary objectives of the consulting services are to assist the DPHE, PMU and the Pourashavas in implementing the capacity building and awareness related components in 10 participating Pourashavas under the GOB-IsDB project. Overall, the Consultant will be required to prepare complete sets of capacity building packages, organize trainings at different levels, conduct consumers KAP assessment/Formative study, design awareness campaign at different level, develop IEC-BCC materials and related documents for the 10 Pourashavas to carryout the whole awareness programme. The scope of services and key

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deliverables of this consultancy services are presented in the following sections. The location of the projects is as follows:

SL	Division	Paurashava/ City Corporation	SL	Division	Paurashava
1	Dhalso	Narsingdi	6		Pabna
2	Dhaka	Shariatpur	7	Rajshahi	Natore
3	Mymensingh	Jamalpur	8		Sirajganj
4	Cumilla	Cumilla City Corporation	9	Khulna	Bagerhat
5		Lashmipur	10	Barisal	Patuakhali

3. Scope of work

3.1. Scope of the services for Capacity building

The CWIS-FSM Support Cell, DPHE is working collaborately with ITN-BUET for developing capacity of the municipality and the DPHE. The Bill & Melinda Gates Foundation is providing support in establishing ITN-BUET as capacity building hub. Moreover, Global Water and Sanitation Center (GWSC), AIT is working in coordination with the CWIS-FSM Support Cell to strengthen project deliverables. In a notion to build up a CWIS model town, GWSC is working with us to demonstrate Integrated Management Information Service (IMIS) in Lakhsmipur Municipality of the project. The capacity development initiative with the ITN-BUET also linked with such CWIS model town and the engaged consuting firm/NGO will work together with ITN-BUET, GWSC and the CWIS-FSM Support Cell as appropriately to deliver the outcome.

The capacity building and awareness building sub-components will be implemented by the national Human Resource Development (HRD) Consultants and facilitators/trainers as part of the Capacity Building Consultancy Package. The consultant/s will primarily be responsible for developing the capacity building and awareness programmes strategy, different relevant training modules and implementing training courses at the DPHE and Pourashava level. There will be a team comprising of HRD consultant, Training Consultant/Specialist, Social Behaviour Change Communication expert, Social development & Gender expert, Technical and DRR-CC expert, MIS expert, Marketing expert & Public Relation Officer and three facilitators /trainers who will be working with DPHE headquarter HRD center to develop capacity building packages towards extending support at Pourashava/city level capacity building and implement awareness raising activities for the 30 months.

The expert team will assist to establish the standard modules for DPHE Training Center based training courses for sector partners, city level officials as well as sanitation and waste workers. In addition, the consultants will undertake the following:

- Training Needs Assessment
- Develop Capacity building Strategy, covering:
 - o issues consistent with the SDP, NSWSS 2014, IRF-FSM, National Action plan for implementation of IRF-FSM in Pourashava/City Corporations, other acts, policies and strategies along with the relevant documents of SDG-6 for Capacity Building Program;
 - o PIU level of the project
 - appropriate institutions to deliver training like DPHE HRD Center, PS, ITN-BUET, NGOs and others
- For DPHE Training Center based training, develop curriculumand training modules, course design, training materials, 2-year training program. The consultants will assist in developing the new training materials and will review & revise the existing training materials related to urban sanitation, FSM, SWM and CWIS
- Develop pool of the trainers and implement the Trainer's training program
- Implement Training Program at central and city level

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 Review the existing relevant modules of CWIS and recommend to further improvement and make those contextuals for the project.

A Central Resource Pool will be formed along with selected sector partners and HRD, DPHE to conduct DPHE Training Center based training for city-based resource pool. The city-based resource pool consisting of 50 members (5 members from each city) will be formed to carry out the training for other city level officials and sanitation and waste workers. During this period the consultants/expert team will alternatively conduct training for national resource pool as well as city resource pool. The stated training areas shall be further firmed up based on findings of the TNA survey. The expert team at central level and resource pool at city level will provide Training of Trainers (TOT) and relevant trainings courses as well as monitor progress..

3.2. Scope of the Service for Awareness raising:

This Contract Service will comprise of a consumer awareness program and sanitation awareness program.

3.2.1. Consumer Needs Assessment

The Consumer Need assessment Program will focus on increasing awareness and promoting health benefits in both FSM solid waste management. 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. Specific tasks will include:

a. Community and Consumer Assessment

- (i) Review previous assessments as per the enhanced feasibility report (supported by BMGF) for each town.
- (ii) Conduct sample surveys and focus group discussions of representative community groups, to understand the general perceptions around technology options, health benefits, satisfactions, expectations and tariffs regarding the solid waste and FSM services.
- (iii) Assess community perceptions on their affordability andwillingness to pay for the solid waste and FSM services.
- (iv) Identify the primary impediments/constraints to payment of appropriate tariffs for SW and FSM.
- (v) Perform Knowledge, Attitude and Perception (KAP) survey to identify major gaps, challenges and opportunities related to sanitation at the community level.
- (vi) Assess which media (TV, radio, cinema, print, community meetings, posters, etc.) would be most effective in reaching out to the Pourashava populations.

b. Development of the IEC Campaign

- (i) Carefully study the proposed project intervention, and the data on community perceptions, to identify the key messages (the fact that new investments will significantly improve sanitation quality, health benefits, the importance of setting sustainable tariffs, 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 a campaign.

- (iv) Based on the assessment findings, develop draft materials such as print advertisements (Flash card, Flip Chart, Information Booklet, Brochures, Posters and other visual/ print materials), cinema advertisements, TV/radio advertisements, short plays/speeches, posters, etc. to convey such messages to specific target audiences.
- (v) Test the messages with focus groups to assess their effectiveness, and revise contents, scripts and formats as necessary.

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

c. Implementation of the IEC Campaign

Identify local newspapers, radio stations, cinema's 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.

3.2.2. Sanitation (including Interated waste management-IWM) 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 but not limited to (i) KAP assessment, (ii) development of the appropriate awareness campaign and related materials, collaborating with other agencies in the sector and necessary, (iii) development of sanitation safety plan for all the 10 municipalities and (iv) implementation of the campaign at the Pourashava level.

a. KAP Assessment

Conduct sample surveys and focus group discussions of representative community groups, to understand the general perceptions about health, hygiene and sanitation as well as IWM

(ii) Assess community perceptions on the need for improvements in sanitation hardware, and the need for change in sanitation attitudes and practices.

- (iii) Identify and differences in the attitudes/needs of males versus females, and also of
- (iv) Assess the primary hardships associated with poor sanitation and hygiene practices in representative communities.

(v) Identify the primary impediments to changing hygiene and sanitation behavior.

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

b. Development of the IEC Campaign

Identify the key messages on sanitation and hygiene that need to be communicated to the public.

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 (Flash card, Flip Chart, Information Booklet, Brochures, Posters and other visual/ print materials), cinema advertisements, TV/radio advertisements, short plays/speeches, posters, etc. to convey such messages to specific target audiences.

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.

c. Implementation of the IEC Campaign

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- (i) Identify local newspapers, radio stations, cinema's schools, 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, Pourashava, and local NGOs/CBOs.
- (vi) Monitor and document changes in people's perceptions on sanitation/ hygiene as the campaign progresses, over the project duration.

Following are the list of proposed training modules, strategy and guidelines, BCC materials will be developed over the project period within the first 12 months after inception (6 months). Additional documents may be developed based on the findings from the assessment studies.

- Development of CWIS-FSM Capacity Building-CB Strategy in line with the NAP for IRF-FSM approved by LGD, MoLGRD&C
- Gender mainstreaming in sustainable FSM services including Sanitation value chain for sanitation workers and LGI committee
- · Basics of applying DRR/CC lens in WASH and FSM/Sanitation value chain
- Development of training module on Basics of WASH for Sanitation and waste workers
- IEC-BCC and FSM awareness campaign design including Risk Communication and community Engagement (RCCE) strategy
- #of IEC/BCC materials development for awareness raising campaign at city and community level.
- Development of training module for training of engineers on detailed design, construction and O&M aspects of FSM& SWM infrastructures and equipment
- Development of training module on 'OHS & Operations' for manual, mechanical emptiers & FSTP operators
- Develop a Training manual on O&M of FSTP operators
- Develop a Training manual on field-based waste water quality surveillance
- Training module development at city level on inspection of existing containments and illegal connections
- CWIS guidelines on Financial management for City authority
- Development training module on Integrated Information Management System and reporting mechanisms at city level inclusion on SADDD data

Following training courses and awareness raising interventions will be designed by the expert team and conducted by the training experts over the project period till by 24 months.

Developing, validation, implementation and quality control of Capacity Building Packages All of the deliverables i.e. training modules, strategy, guidelines within Capacity Building package would be reviewed, validated and approved by a central quality control team including CFSC-HRD, DPHE. This capacity building package will be implemented by respective department from DPHE, relevant coordination and quality control support would be maintained from CFSC and its capacity building wings will be engaged to maintain the harmony throughout the country.

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Inception activities

- Sensitization workshop
- Coordination workshop
- Formation of Resource pool at city level and national level with sector partners (NGOs, University, private sector etc.)

ToT courses for Resource Pool

- FSM & CWIS planning and implementation
- Gender mainstreaming in sustainable FSM services including Sanitation value chain for sanitation workers and LGI committee
- Basics of applying DRR/CC lens in WASH and FSM/Sanitation value chain
- IPC and OHS for Sanitation and waste workers
- SWM at city level
- FSM awareness campaign design including Risk Communication and community Engagement (RCCE)

Training for other stakeholders (City level officials and others)

- Training on CWIS-FSM for city level officials with equal focus on gender and DRR/CC lens
- Training of engineers on detailed design, construction and O&M aspects of FSM & SWM infrastructures and equipment
- Training on O & M of FSTP and SW treatment systems for Cities relevant staff/plant operators/caretakers
- Training in Financial management for City authority
- Training on Integrated Information Management System and reporting at city level) inclusion on SADDD data
- Training on FSM awareness campaign for standing committee members
- Refreshers course for LGI staff and others

Training for Sanitation and Waste workers

- · Training on Basics of WASH, IPC and OHS for Sanitation workers
- · Training on OHS & operations for manual and mechanical pit emptiers
- Training at city level on O & M of vacuum tankers, garbage trucks and other equipment for concerned drivers, operators, private/0commercial/business actor for FSM and SWM
- · Refreshers event of Sanitation and Waste workers

Local Masons Training containment improvement

Training on IMIS and sanitation data management

Training on development of sanitation business plan and pro-poor financing

Training and refresher trainings on BCC campaigns to the community mobilizers and female community health volunteers

Enumerators training on survey and data collection

Preparation of Report:

- · Prepare Inception, Monthly, Quarterly, Project Completion Reports,
- Prepare and submit Environmental, social and gender monitoring reports as per action plans.

3.2.3. Capacity Building and Awareness Raising activities under the project

Sl.no	1 st year Activities	Qty	Remarks
1	Sensitization workshop for Mayors, Panel Mayors and Senior Officials – 1 day (50 persons @2 events = 100 persons)-Dhaka based	2	
2	Development of CB packages		
2.1	Capacity Building Package finalisation workshop @ National Level-1 day(40-50 persons)-Dhaka based	1	
3	Course for Resource Pool		
3.1	ToT on 'FSM & CWIS Planning & Implementation' for city level resource pools – 3 days training + 1 day =4 days ToT (25 persons @2 events = 50 persons), Dhaka Based	2	1:
3.2	A combined ToT on FSM services for sanitation workers and LGI committee including Gender, DRR/CC, and RCCE-3 days (25 persons@2 events=50 persons), Dhaka based	2	
4	Training for City Officials	office	
4.1	Training on 'FSM & CWIS Planning & Implementation' for city level officials delivered by city resource pools – 3 days (25 persons per city @10 events = 250 persons), Locally @ city based	10	
4.2	Training on 'OHS & Operations' for manual pit emptiers - 1 day (25 persons @20 events = 500 persons)-Locally, city based	20	
4.3	Exposure visit for Mayors, Panel Mayors and Senior Officials - 1 day (25 persons @2 events = 50 persons), evidence based city	2	
	2 nd year activities		
5	Capacity building finalization workshop		
5.1	Capacity Building Package finalisation workshop @ National Level-1 day, 40-50 Persons, Dhaka Based	1	
5	Training for city Officials		

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6.1	Refreshers Training on CWIS Planning & Implementation' for city officials – 3 days (25 persons @2 events = 50 persons)-locally, City based	2	
6.2	Training on 'OHS & Operations' for manual pit emptiers - 1 day (25 persons @20 events = 500 persons)-Locally, city based	20	A MODE
6.3	Training at city level on O&M of vacuum tankers, garbage trucks and other equipment for concerned drivers/helpers/operators and local mechanics – 1 day (20 persons @10 events = 200 persons), Locally, city based	10	
6.4	Horizontal learning workshop-1day City mayor and officials 5 from each city 50 person-outside Dhaka	1	
6.5	Foreign Exposure visit for Mayors, DPHE, Ministry Officials- 5 day (30 persons @3 events = 30 persons), evidence based city	LS	
	3 rd Year activities		
7	Capacity Building Training		
7.1.	Orientation on City officials on financial management of FSM services-2 day@1 event for 25 persons ,Dhaka based	1	
7.2.	Horizontal learning sharing workshop-outside Dhaka, City mayor and officials 5 from each city 50 person-within 10 cities.	1	
8	Awareness Raising components	100	
	2 nd year activities		
8.1	National level Launching of FSM campaign using IEC BCC materials	1	1900 1900
8.2	Orientation of city level resource pool on use and implementation of 'Handbook for Awareness Raising on FSM' – 2 days (30 persons @2 events = 60 persons)-Dhaka based	2	
8.3	Orientation of 'Handbook for Awareness Raising on FSM' to different committee of Paurashava includingWARSAN committee- 2days (30 persons@10eents=300 persons) City Based	10	
8.4	Implementation city wise awareness campaign at community level on CWIS @10 cities following the	5	



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	'Handbook for Awareness Raising on FSM', @ city based following different national days		el (Ja., Coloriani)
	3rd Year activities		
8.5	Implementation city wise awareness campaign at community level on CWIS @10 cities following the 'Handbook for Awareness Raising on FSM', @ city based following different national days	5	produced produced by the second country of t
8.6	National learning sharing workshop	1	

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4. Team Composition &Qualification Requirements for the Experts

4.1 Description of the main terms and conditions of appointment

i. Team Leader/ Institutional Development Specialist (1X30=30 person-months):

The Institutional Development consultant will have experience as the Team Leader for the package that shall consist of multi-disciplinary team members. For the position, he/she is required to have a Master degree in Social Science /Economics/Management/Bachelor degree in Engg (civil/ water resource) with special training/certificate in HRD/HRM/Capacity raising in urban development, WASH and urban sanitation context, preferably in developing countries. He/she will be required to possess a minimum 20 years' total experience including 15 years' specific experience in capacity building/ institutional development, HRM and performance improvement of service-oriented government/semi govt/local government institutions, particularly in the south and south-east Asian regions. Working as Team Leader as past experience is highly recommended. The incumbent may be a national or expatriate consultant but should have proven track record of international experience in relevant field. The experiences on FSM, SWM and CWIS would be highly preferable.

The TL will have to lead a multi-disciplinary team of consultants; hence work experience in multi-cultural and multi-disciplinary environment will be a pre-requisite for selection to the position. He/she will have to fast-acclimatize with the assignment situation, requirements and environment and be very closely familiar with the pertinent aspects of the undertaking.

As a Team Leader/Institutional Development Specialist for an inclusive and integrated sanitation and hygiene project in urban Bangladesh, his/her roles and responsibilities would include:

1. Project Planning and Management:

- Develop a comprehensive project plan, including goals, objectives, timelines, and budget allocation.
- Coordinate and manage project activities, ensuring they are implemented effectively and efficiently.
- Monitor progress, identify potential issues, and take corrective actions as necessary.
- Collaborate with relevant stakeholders, such as government agencies, NGOs, and community representatives, to ensure project alignment and cooperation.

2. Team Management:

- Lead a team of professionals and provide guidance and support to achieve project objectives.
- Delegate tasks, assign responsibilities, and ensure effective communication among team members.
- Conduct regular team meetings to review progress, address challenges, and foster a
 positive work environment.
- Provide training and capacity-building opportunities to enhance the skills and knowledge of team members.

3. Institutional Development:

- Conduct assessments to identify gaps and challenges in existing institutional frameworks related to sanitation and hygiene in urban areas.
- Develop strategies and action plans to strengthen institutions, policies, and regulations for inclusive and integrated sanitation and hygiene services.
- Foster partnerships with relevant stakeholders to promote institutional cooperation and coordination.
- Provide technical assistance and guidance to institutions for effective implementation of sanitation and hygiene projects.
- 4. Stakeholder Engagement and Community Participation:

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- Engage with key stakeholders, including government agencies, NGOs, community leaders, and residents, to create awareness and garner support for the project.
- Facilitate participatory processes to involve the community in decision-making, planning, and implementation of sanitation and hygiene initiatives.
- Promote inclusivity by considering the needs and perspectives of marginalized groups, such as women, children, and people with disabilities.
- 5. Monitoring, Evaluation, and Reporting:
 - Develop and implement a robust monitoring and evaluation framework to track project progress and outcomes.
 - Collect and analyze data to measure the impact and effectiveness of sanitation and hygiene interventions.
 - Prepare regular progress reports, documenting achievements, challenges, and lessons learned.
 - Provide timely reports to project stakeholders, including donors, government agencies, and implementing partners.
- 6. Knowledge Sharing and Capacity Building:
 - Facilitate knowledge exchange and learning among project stakeholders, sharing best practices and lessons learned.
 - Organize workshops, training sessions, and awareness campaigns to build the capacity of relevant stakeholders on sanitation and hygiene issues.
 - Contribute to the broader sectoral knowledge base through research, publications, and participation in conferences or seminars.
- 7. Quality Assurance and Compliance:
 - Ensure project activities adhere to relevant quality standards, guidelines, and regulations.
 - Conduct regular quality checks and inspections to ensure the delivery of high-quality sanitation and hygiene services.
 - Monitor compliance with environmental and social safeguards, promoting sustainable and inclusive practices.
- 8. Risk Management:
 - Identify potential risks and develop risk mitigation strategies.
 - Monitor and assess risks throughout the project lifecycle, taking appropriate actions to minimize their impact.
 - Maintain contingency plans to address unforeseen circumstances or emergencies.

In addition to above, the job shall as well include writing specific reports as and when necessary and assisting the PD on any other areas as would be required from time to time.

ii. HRD & Training Specialist (1X24 = 24 person-months)

The position of HRD & Training Specialist will require a Bachelor Degree in Social science/management/engg. (civil/ water.resource)/urban planning. topped up by MBA (majoring in HRD/HRM/Finance)/Masters of equivalent in personnel management or HRM/HRD/Finance. Other requirements include 15 Years total work experience with at least 10 years in the specific training/skill or capacity development areas with proven track record in TNA. Design of sanitation training modules, imparting training involving govt./semi govt./local govt. entities International experience/exposure shall be an added advantage. Relevant work experience in South and South East Asian regions is also a preferred requirement.

As an HRD/Training Specialist for an inclusive and integrated sanitation and hygiene project in urban Bangladesh, his/her roles and responsibilities would include:

- 1. Training Needs Assessment (TNA):
 - Design TNA in consultation with DPHE project team and relevant stakeholders

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- Conduct a thorough assessment of the training needs within the project, considering the knowledge, skills, and competencies required for effective implementation of sanitation and hygiene initiatives.
- Identify gaps in knowledge and skills among project staff, government officials, community leaders, and other relevant stakeholders.
- Collaborate with project managers and other stakeholders to define training objectives and priorities based on the identified needs.

2. Training Program Development:

- Review existing training materials and modules and suggest the list of existing materials that can be used and that should be revised
- Design and develop training programs and materials that address the identified training needs.
- Create comprehensive training curricula, lesson plans, and training modules to enhance the capacities of project staff and stakeholders.
- Incorporate adult learning principles and participatory approaches into training methodologies to ensure effective learning outcomes.
- Integrate gender and social inclusion perspectives into training content and delivery to promote equality and non-discrimination.

3. Training Delivery:

- Facilitate training sessions and workshops, delivering the training programs developed.
- Utilize a variety of training methods, including presentations, group discussions, case studies, role-plays, and hands-on exercises, to engage participants and enhance learning.
- Provide technical guidance and support during training sessions, addressing participants' questions and concerns.
- Foster an inclusive and participatory learning environment that encourages active participation and knowledge sharing among participants.
- · Prepare training reports

4. Capacity Building:

- Assess the capacity development needs of project staff, government agencies, community organizations, and other stakeholders.
- Design and implement capacity-building initiatives to enhance the skills, knowledge, and performance of individuals and organizations involved in the project.
- Provide mentoring, coaching, and on-the-job training to support the application of new skills and knowledge in practical contexts.
- Collaborate with relevant institutions and training providers to offer specialized training programs that address specific technical areas related to sanitation and hygiene.

5. Monitoring and Evaluation:

- Develop monitoring and evaluation mechanisms to assess the effectiveness and impact of training interventions.
- Collect and analyze data on training outcomes, participant feedback, and performance improvement to measure the success of training programs.
- Make recommendations for adjustments and improvements to training approaches based on evaluation findings.
- Regularly report on training activities, outcomes, and lessons learned to project managers and stakeholders.

Stakeholder Engagement:

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- Collaborate with project managers, government agencies, NGOs, and community representatives to ensure training programs align with project objectives and priorities.
- Engage with stakeholders to understand their training needs and tailor capacitybuilding initiatives accordingly.
- Foster partnerships and collaboration with relevant training institutions, organizations, and experts to leverage resources and expertise.
- 7. Knowledge Management and Documentation:
 - Document best practices, lessons learned, and success stories related to training and capacity building.
 - · Create training materials, guidelines, and manuals for future reference and replication.
 - Share knowledge and experiences within the organization and with external stakeholders through reports, presentations, and other communication channels.
 - Contribute to the development of knowledge products, such as training manuals, toolkits, and guidelines, to support capacity-building efforts in the sanitation and hygiene sector.
- 8. Continuous Learning and Professional Development:
 - Stay updated on the latest trends, research, and innovations in the sanitation and hygiene field, particularly in the context of urban Bangladesh.
 - · Participate in relevant workshops, conferences, and training programs to enhance professional knowledge and skills.
 - Continuously seek opportunities for personal growth and improvement to enhance effectiveness as an HRD/Training Specialist.

In addition to above, the job shall as well include writing specific reports as and when necessary and assisting the PD and TL on any other areas as would be required from time to time.

iii. Social Behaviour Change Communication SBCC Specialist (1X18=18 person-months)

The position for the Social Behaviour Change Communication SBCC Specialist will require a Master Degree in Social Science/ Gender studies/ MDS or related subjects from recognized university. Minimum 10 years of professional experience, at least 7 years of which are required to be specifically in the BCC/SBCC materials development in WASH sector.

As a Social Behavior Change Communication (SBCC) Specialist for an inclusive and integrated sanitation and hygiene project in urban Bangladesh, his/her roles and responsibilities would include:

- 1. Strategy Development:
 - Develop an SBCC strategy and action plan aligned with project objectives and priorities.
 - · Conduct formative research to understand social and behavior change determinants related to sanitation and hygiene practices in urban areas.
 - Identify target audiences, define desired behavioral outcomes, and design evidencebased communication interventions.
- 2. Communication Material Development:
 - · Develop and adapt communication materials, including posters, brochures, leaflets, audiovisuals, and digital content, to effectively promote desired behaviors.
 - Ensure communication materials are culturally appropriate, gender-sensitive, and accessible to diverse target audiences.
 - Collaborate with graphic designers, content developers, and translators to create visually appealing and engaging communication materials.
- 3. Message Development:
 - Craft compelling and persuasive messages that effectively communicate key hygiene and sanitation behaviors.

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- Tailor messages to different target audiences, considering their socio-cultural context, literacy levels, and communication preferences.
- Utilize behavior change theories and models to guide message development and increase the likelihood of behavior adoption.

4. Community Engagement:

- Conduct community assessments and engage with community leaders, influencers, and local organizations to understand community dynamics, social norms, and barriers to behavior change.
- Facilitate participatory processes to involve communities in the design, implementation, and evaluation of SBCC activities.
- Organize community meetings, focus group discussions, and interactive sessions to promote dialogue and ownership of behavior change initiatives.

5. Training and Capacity Building:

- Conduct training sessions for project staff, community volunteers, and other stakeholders on SBCC principles, techniques, and methodologies.
- Build the capacity of project staff and partners to implement SBCC activities effectively.
- Provide technical guidance and support to ensure the accurate delivery and dissemination of SBCC messages.

6. Media and Communication Channels:

- Identify appropriate media and communication channels to reach target audiences
 effectively, such as radio, television, print media, social media, and community-based
 channels.
- Collaborate with media outlets and platforms to disseminate SBCC messages and promote behavior change.
- Develop partnerships with local influencers, celebrities, and media personalities to amplify the reach and impact of SBCC campaigns.

7. Monitoring and Evaluation:

- Develop monitoring and evaluation frameworks to assess the effectiveness and impact of SBCC interventions.
- Monitor and analyze data on communication activities, message uptake, and behavior change outcomes.
- Use qualitative and quantitative methods to evaluate the reach, effectiveness, and sustainability of SBCC efforts.
- Utilize evaluation findings to refine and improve SBCC strategies and interventions.

8. Advocacy and Partnerships:

- Advocate for the integration of SBCC approaches into policies, programs, and initiatives related to sanitation and hygiene.
- Collaborate with government agencies, NGOs, community-based organizations, and other stakeholders to ensure coordination and synergy in SBCC efforts.
- Build strategic partnerships with relevant institutions, academia, and research
 organizations to leverage expertise and resources for SBCC initiatives.

9. Knowledge Management and Documentation:

- Document best practices, lessons learned, and success stories related to SBCC interventions.
- Develop and share knowledge products, including toolkits, guidelines, and case studies, to support SBCC efforts in the sanitation and hygiene sector.
- Contribute to the broader knowledge base through research, publications, and participation in conferences or seminars.

10. Ethical Considerations:

- Ensure that all SBCC activities adhere to ethical guidelines, respecting the dignity, privacy, and cultural values of the target audience.
- Obtain informed consent when collecting data or using images and stories of individuals.

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 Promote inclusivity and address gender and social inequalities in SBCC messaging and activities.

iv. Social Development and Gender Expert(1X18=18 person-months)

The position for the Social Development and Gender Expert will require a

- Master Degree in any discipline of Social science/Sociology/Gender studies/Social Welfare, coupled with a Masters in any of the above areas;
- At least 15 years of professional experiences and 10 years experience in community development, gender issues in WASH sector and social mobilization aspects of rural/semi-urban areas regarding the community need assessment, organizing the community, carrying out focus group discussions, rapid appraisals and relevant motivational aspects of rural communities, especially for water supply and sanitation are a requirement;

As a Social Development and Gender Expert for an inclusive and integrated sanitation and hygiene project in urban Bangladesh, his/her roles and responsibilities would include:

1. Gender Mainstreaming:

- Ensure the integration of gender considerations throughout all project activities, policies, and strategies.
- Conduct gender assessments to identify gender-specific needs, challenges, and opportunities related to sanitation and hygiene.
- Promote gender equality and women's empowerment in decision-making processes, resource allocation, and participation in project activities.
- Develop and implement gender-responsive approaches that address the specific needs and priorities of women, girls, and other marginalized groups.

2. Social Inclusion:

- Advocate for the inclusion of marginalized and vulnerable groups, such as people
 with disabilities, elderly individuals, and ethnic minorities, in sanitation and hygiene
 interventions.
- Conduct social assessments to understand the social dynamics, power relations, and barriers to inclusion in the project context.
- Design and implement strategies to ensure the meaningful participation and representation of marginalized groups in project activities.
- Promote inclusive practices that consider the specific needs, perspectives, and capacities of different social groups.

3. Community Engagement and Participation:

- Facilitate community engagement processes that foster active participation, ownership, and decision-making in sanitation and hygiene initiatives.
- Organize community consultations, focus group discussions, and participatory workshops to elicit community perspectives, priorities, and feedback.
- Ensure the involvement of women, youth, and marginalized groups in community dialogues and decision-making processes.
- Foster partnerships and collaboration with community-based organizations and local leaders to support community-led initiatives.

4. Capacity Building and Empowerment:

- Assess the capacity development needs of project staff, government agencies, community organizations, and other stakeholders in social development and gender mainstreaming.
- Develop and implement capacity-building initiatives to enhance knowledge, skills, and attitudes related to social development and gender equality.
- Provide training and mentorship to project staff and partners on gender-responsive approaches, social inclusion, and community empowerment.

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 Promote the agency, voice, and leadership of women and marginalized groups through targeted capacity-building efforts.

5. Policy and Institutional Support:

 Provide technical guidance and support to relevant government agencies and institutions in integrating social development and gender perspectives into policies, regulations, and guidelines.

Collaborate with stakeholders to advocate for the adoption and implementation of gender-responsive and socially inclusive approaches in the sanitation and hygiene

sector.

 Support the development and strengthening of institutional mechanisms for gender mainstreaming and social inclusion within project implementation structures.

6. Gender Analysis and Monitoring:

 Conduct gender analysis and monitoring to track the differential impacts of the project on women, men, girls, and boys.

Collect sex-disaggregated data and gender-specific indicators to measure progress

and outcomes related to gender equality and social inclusion.

 Analyze data and provide recommendations to address gender gaps and promote more equitable outcomes.

 Ensure that project monitoring and evaluation frameworks include gender-sensitive indicators and tools.

7. Knowledge Sharing and Learning:

 Document and share best practices, lessons learned, and case studies related to social development and gender equality in sanitation and hygiene projects.

 Contribute to the broader knowledge base through research, publications, and participation in conferences or seminars.

 Facilitate knowledge exchange and learning among project stakeholders, promoting cross-learning and the replication of successful approaches.

8. Advocacy and Networking:

 Advocate for gender-responsive and socially inclusive sanitation and hygiene policies, programs, and practices at the local, national, and international levels.

 Build partnerships and networks with government agencies, NGOs, academia, and civil society organizations working on social development and gender equality.

 Collaborate with relevant stakeholders to leverage resources, expertise, and knowledge for advancing social development and gender equality goals.

v. DRR-CC and Technical Expert(1X18=18 person-months)

The position for the DRR-CC and Technical Expert will require a Bachelor Degree in Civil Engineering and masters in DRR-CC especially in WASH. Minimum 10 years of professional experience and 5 years WASH sector experience/exposure shall be an added advantage.

As a Disaster Risk Reduction and Climate Change (DRR-CC) & Technical Expert for an inclusive and integrated sanitation and hygiene project in urban Bangladesh, his/her roles and responsibilities would include:

1. DRR-CC Integration:

 Ensure the integration of DRR and climate change considerations into the project's sanitation and hygiene interventions.

Conduct risk assessments to identify hazards, vulnerabilities, and risks associated with sanitation and hygiene practices in urban areas.

 Develop strategies and measures to mitigate risks and enhance the resilience of sanitation and hygiene infrastructure and systems.

 Advocate for the adoption of climate-resilient and environmentally sustainable approaches in sanitation and hygiene interventions.

2. Technical Expertise:

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- Provide technical guidance and support in the design, construction, and maintenance of sanitation and hygiene infrastructure, such as water supply systems, wastewater treatment facilities, and solid waste management systems.
- Ensure compliance with technical standards, regulations, and guidelines in the planning and implementation of sanitation and hygiene projects.
- Conduct technical assessments and feasibility studies to determine appropriate sanitation and hygiene solutions for urban contexts.
- Stay updated on the latest technological advancements, innovations, and best practices in the sanitation and hygiene sector.

3. Capacity Building:

- Assess the capacity development needs of project staff, government agencies, and implementing partners in DRR-CC and technical aspects of sanitation and hygiene.
- Develop and deliver capacity-building initiatives, training programs, and workshops to enhance technical skills and knowledge.
- Provide on-the-job training and mentoring to project staff and partners to ensure the effective implementation and maintenance of sanitation and hygiene infrastructure.

4. Stakeholder Engagement and Coordination:

- Engage with relevant government agencies, NGOs, community organizations, and technical experts to foster collaboration and coordination in DRR-CC and technical aspects of sanitation and hygiene.
- Participate in technical working groups, forums, and coordination meetings to share expertise, align strategies, and advocate for technical standards and best practices.
- Facilitate stakeholder consultations and community engagement processes to ensure the participation and inclusion of relevant stakeholders in decision-making and project implementation.

5. Monitoring, Evaluation, and Quality Assurance:

- Develop and implement monitoring and evaluation frameworks to assess the performance, functionality, and sustainability of sanitation and hygiene infrastructure.
- Conduct regular technical inspections and quality checks to ensure compliance with technical specifications and standards.
- Collect and analyze data on the performance and functionality of sanitation and hygiene systems, identifying areas for improvement and corrective actions.
- Monitor and evaluate the effectiveness of DRR-CC interventions, capturing lessons learned and best practices for future projects.

Research and Innovation:

- Stay abreast of the latest research, trends, and innovations in the fields of DRR-CC and sanitation and hygiene.
- Contribute to research initiatives, knowledge generation, and innovation in the sanitation and hygiene sector.
- Collaborate with research institutions, academia, and technical experts to explore and pilot test innovative approaches and technologies.

7. Reporting and Documentation:

- Prepare technical reports, feasibility studies, and documentation on DRR-CC and technical aspects of the project.
- Document best practices, lessons learned, and case studies related to DRR-CC and technical aspects of sanitation and hygiene interventions.
- Contribute to the development of knowledge products, guidelines, and manuals to support future DRR-CC and technical initiatives.

Environmental and Social Safeguards:

- Ensure compliance with environmental and social safeguards in the planning and implementation of sanitation and hygiene projects.
- Assess and mitigate potential environmental and social risks and impacts associated with project activities.

卷图 & 如料 红 19 Promote sustainable practices, environmental protection, and social inclusion in sanitation and hygiene interventions.

vi. MIS Specialist (1X18 = 18 person-months)

Required qualification for MSc in MIS/CIS or MSC (Comp Science). On top of this, the position will need a Minimum 5 years' professional experience including 3 years' proven track record in the design and development of MIS for govt./semi govt./local govt./large commercial entities including website and server management. International experience/exposure will be an added advantage.

As a Management Information System (MIS) Specialist for an inclusive and integrated sanitation and hygiene project in urban Bangladesh, his/her roles and responsibilities would include:

1. System Development and Implementation:

 Design and develop a robust MIS for the project, including data collection, management, and reporting systems.

 Collaborate with project stakeholders to identify data needs, indicators, and reporting requirements.

Implement the MIS, ensuring data integrity, accuracy, and security.

Customize the MIS to meet the specific monitoring and reporting needs of the project.

2. Data Collection and Management:

 Establish data collection mechanisms and tools to capture relevant information on project activities, outputs, and outcomes.

• Ensure the timely and accurate collection, entry, and storage of project data.

- Conduct regular data quality assessments and audits to identify and rectify data inconsistencies and errors.
- Develop protocols and standard operating procedures for data management, including data validation and cleaning processes.

3. Data Analysis and Reporting:

Analyze project data to generate meaningful insights and trends.

- Prepare regular reports, dashboards, and visualizations to present project progress, performance, and outcomes.
- Provide data-driven recommendations for decision-making and course corrections.

Respond to ad-hoc data requests and queries from project stakeholders.

4. Capacity Building and Training:

- Assess the capacity development needs of project staff and stakeholders in MIS utilization and data management.
- Develop and deliver training programs and workshops to build the capacity of staff in data collection, entry, analysis, and reporting.
- Provide ongoing technical support and guidance to ensure effective utilization of the MIS.

5. Monitoring and Evaluation Support:

- Support the monitoring and evaluation team in data collection, analysis, and reporting for project monitoring and evaluation activities.
- Collaborate with the monitoring and evaluation team to align MIS data requirements with monitoring and evaluation frameworks.
- Assist in the development of monitoring and evaluation plans and tools to track project progress and outcomes.

6. System Maintenance and Upgrades:

 Ensure the smooth functioning and maintenance of the MIS, including regular backups and security measures.

Troubleshoot technical issues and provide timely resolutions.

 Stay updated on emerging technologies and trends in MIS to recommend system upgrades and enhancements.

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7. Data Privacy and Confidentiality:

- Ensure compliance with data privacy and protection policies and regulations.
- Establish protocols for data anonymization, confidentiality, and data sharing agreements.
- Implement security measures to safeguard sensitive project data.

8. Documentation and Knowledge Management:

Document MIS procedures, protocols, and guidelines.

- Maintain documentation related to data collection instruments, data dictionaries, and metadata.
- Contribute to the development of knowledge products and lessons learned related to MIS implementation and data management.

9. Collaboration and Coordination:

- Collaborate with project stakeholders, including project managers, technical experts, and implementing partners, to ensure the effective utilization of the MIS for project management and reporting.
- Coordinate with external agencies, government entities, and partners to exchange relevant data and information.

vii. Trainers (2X18=36 person-months)

The position shall require a Bachelor Degree in Social science/management/)/urban planning/. Masters of equivalent in personnel management or HRM/HRD/Finance. 10 Years total work experience with at least 5 years in the specific training/skill or capacity development areas with proven track record in facilitation. Design of training modules, imparting training involving govt./semi govt./local govt. entities International experience/exposure shall be an added advantage.

The roles and responsibilities of a Trainer for an inclusive and integrated sanitation and hygiene project in urban Bangladesh can include the following:

1. Training Program Development:

- Design and develop training programs that align with the project's objectives and priorities.
- Conduct a comprehensive training needs assessment to identify the knowledge and skill gaps of project staff, government officials, community members, and other stakeholders.
- Create training materials, curricula, and lesson plans that address the identified training needs.

2. Training Delivery:

- Facilitate training sessions and workshops, delivering the training programs developed.
- Utilize appropriate training methodologies, techniques, and adult learning principles to engage participants and enhance learning outcomes.
- Adapt training delivery methods to suit the diverse needs and preferences of the target audience.
- Ensure a participatory and interactive learning environment that encourages active engagement and knowledge sharing.

3. Capacity Building:

- Enhance the knowledge, skills, and competencies of project staff, government officials, community leaders, and other stakeholders in the field of sanitation and hygiene.
- Provide training and mentorship to improve technical expertise in areas such as water supply, sanitation facilities, waste management, and behavior change communication.
- Support the development of practical skills for implementing and managing sanitation and hygiene projects effectively.

- Foster a culture of continuous learning and professional development among project stakeholders.
- 4. Training Evaluation and Monitoring:
 - Develop evaluation mechanisms to assess the effectiveness and impact of training programs.
 - Collect and analyze feedback from participants to gauge their learning experience and satisfaction.
 - Monitor the application of acquired knowledge and skills in practical contexts.
 - Use evaluation findings to identify areas for improvement and refine future training programs.
- 5. Stakeholder Engagement:
 - Collaborate with project managers, government agencies, NGOs, and community representatives to ensure training programs align with project objectives and priorities.
 - Engage with stakeholders to understand their training needs and tailor capacitybuilding initiatives accordingly.
 - Foster partnerships and cooperation with relevant institutions, organizations, and experts to leverage resources and expertise for training programs.
- 6. Documentation and Knowledge Sharing:
 - Document training materials, guidelines, and manuals for future reference and replication.
 - Share best practices, lessons learned, and success stories related to training and capacity building.
 - Contribute to the development of knowledge products, such as training manuals, toolkits, and guidelines, to support capacity-building efforts in the sanitation and hygiene sector.
- 7. Cultural Sensitivity and Inclusivity:
 - Consider the cultural, social, and gender-specific aspects when designing and delivering training programs.
 - Promote inclusivity and ensure the participation of marginalized groups, such as women, children, and people with disabilities.
 - Foster a respectful and inclusive learning environment that values diversity and respects local customs and practices.
- 8. Collaboration and Networking:
 - Collaborate with other trainers, subject matter experts, and institutions to share resources, exchange knowledge, and promote cross-learning.
 - Participate in relevant workshops, conferences, and training programs to stay updated on emerging trends, technologies, and methodologies in sanitation and hygiene.

viii. Marketing Expert and Public Relation Officer- (1X18= 18 person-months)

The position shall require a Master Degree/ MBA with major in Marketing or any other relevant subject. Minimum 07 years experience in Marketing, Social Mobilization, SBCC, community awareness, Public relation, media engagement and/or relevant field.

As a Marketing Expert and Public Relations Officer for an inclusive and integrated sanitation and hygiene project in urban Bangladesh, his/her roles and responsibilities would include:

- 1. Marketing Strategy Development:
 - Develop a marketing strategy to promote the project's sanitation and hygiene initiatives in urban areas.
 - Identify target audiences and segments based on demographic, behavioral, and psychographic factors.
 - Conduct market research and analysis to understand consumer preferences, needs, and perceptions related to sanitation and hygiene.

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- Conduct study on private sector engagement at the local level and develop a a viable strategy for effective mobilization of private sector.
- Develop key messages and value propositions that effectively communicate the benefits and importance of sanitation and hygiene practices.

2. Branding and Communication:

- Develop and maintain a strong project brand identity that resonates with the target audience.
- Create visually appealing and impactful communication materials, including brochures, posters, videos, and social media content, to promote sanitation and hygiene behaviors.
- Ensure consistent messaging and branding across all project communication channels and materials.
- Leverage storytelling and compelling narratives to engage and inspire stakeholders towards adopting positive sanitation and hygiene practices.

3. Public Relations and Media Engagement:

- Establish and maintain positive relationships with media outlets, journalists, and influencers to generate media coverage and visibility for the project.
- Draft press releases, media kits, and media advisories to disseminate project updates and achievements.
- Coordinate media interviews, press conferences, and media events to raise awareness about the project's sanitation and hygiene initiatives.
- Monitor media coverage and respond to media inquiries in a timely and professional manner.

4. Stakeholder Engagement and Partnerships:

- Engage with relevant stakeholders, including government agencies, NGOs, community organizations, and private sector entities, to foster partnerships and collaboration in promoting sanitation and hygiene behaviors.
- Organize stakeholder meetings, workshops, and events to share project updates, gather feedback, and build consensus.
- Collaborate with influencers, celebrities, and community leaders to amplify project messages and engage target audiences effectively.
- Foster strong relationships with local communities and community-based organizations to promote ownership and sustainability of sanitation and hygiene initiatives.

5. Behavior Change Communication:

- Collaborate with behavior change communication specialists to integrate marketing and communication approaches into behavior change campaigns.
- Develop innovative and engaging communication strategies, including social marketing campaigns, to drive behavior change towards improved sanitation and hygiene practices.
- Utilize targeted messaging, storytelling, and persuasive techniques to motivate and inspire behavior change among the target audience.

6. Events and Campaign Management:

- Plan, organize, and execute promotional events, campaigns, and awareness drives to raise awareness about the importance of sanitation and hygiene.
- Coordinate with event management agencies, vendors, and partners to ensure smooth execution of events and campaigns.
- Utilize social media platforms, websites, and other digital channels to promote and publicize events and campaigns.

7. Monitoring and Evaluation:

- Develop metrics and indicators to measure the effectiveness and impact of marketing and communication activities.
- Monitor and analyze data on audience engagement, reach, and behavior change outcomes.

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Conduct surveys, focus groups, and interviews to gather feedback and assess the effectiveness of marketing and communication strategies.

Use evaluation findings to refine and improve marketing and communication approaches.

8. Reporting and Documentation:

Prepare regular reports on marketing and communication activities, including metrics, achievements, and challenges.

Document best practices, lessons learned, and success stories related to marketing and

communication efforts.

Contribute to knowledge products and publications to share insights and experiences in marketing sanitation and hygiene initiatives.

ix) Enumerators: (10X6months)=60 person months

the roles and responsibilities of an Enumerator for an inclusive and integrated sanitation and hygiene project in urban Bangladesh in bullet point format:

Conduct surveys and interviews to collect relevant data on sanitation and hygiene practices.

Follow standardized data collection protocols and tools provided by the project.

Ensure accurate and consistent data collection through careful observation and effective

Respect privacy and confidentiality while collecting sensitive information.

- Visit designated locations within urban areas to conduct data collection activities.
- Schedule appointments and coordinate with respondents for interviews or surveys.
- Review collected data to identify errors, inconsistencies, or missing information.
- Cross-check responses for internal consistency and validity.
- Establish rapport and communicate effectively with respondents.
- Maintain accurate records of data collection activities.

Organize and file collected data securely.

- Follow project guidelines, protocols, and ethical standards.
- Obtain informed consent from respondents prior to data collection.
- Collaborate with the project team and attend project meetings or training sessions.

Demonstrate flexibility and adaptability in the field.

- Provide regular updates and reports on data collection progress to supervisors.
- Educational qualificaton: Minimum Diploma in Statistics/Applied Statistics/Civil/Environmental Eng
- Experience: 1-2 years' experience in relevantwork is essential

4.2 Duration, Personnel, Person-months and Reporting

The Project will be implemented over a period of 30 months and will require inputs from a team of expert consultants. About 240 person-months of local consultants are required consisting of professionals with expertise in management, training, management information systems, and water supply financial systems. In addition to the various manuals and materials required, the consultant will prepare brief quarterly progress reports and the project completion report for the institutional development component of the Project (also see section on Reporting, letter in the document). The matrix below reiterates the length of the input, qualification, and specific experience against individual consultants (also spelled out in the subsequent section along with job requirements).

4.3. Consultancy Professional Staff, Person Months and Qualifications
NGO/ Consultant firm must have the following expert in permanent position in their firm. The qualification and experience required for various professional experts for the IEC contract service will be as follows:

Qualification and Experience of Key Staff are shown below:

Si Ni Co	r Position	Position Nr Perso n m Minimum qualification Itancy Services for Capacity Building		Specific experience	
Lis	st of Key-Experts	от Сара	icity Bu	liding	
1	Team Leader- Institutional Development Specialist	1	30	Masters in Social Science /Economics/Management/Bachelor Degree in (civil/ water resource) Eng with special training /certificate in HRD/HRM/Capacity raising in urban development context, preferably in developing countries.	capacity building/Institutional development HRM performance improvement of service-oriented govt./semi govt./local government institutions. particularly in the south and south-east Asian regions. Working as Team Leader as past experience is highly recommended.
2	HRD/Training Specialist for module development	1	24	Bachelor Degree in Social science/management/engineeri ng/urban planning, topped up by MBA (majoring in HRD/HRM) / Masters or equivalent in Personnel management	at least 12 years in HRD/HRM areas, both professional as well as in research, involving govt/semi govt/local govt entities spanning capacity/skill development parameters. Relevant work
3	Social Behaviour Change Communication SBCC specialist	1	18	Master Degree in Social science/Gender studies/MDS	Minimum 10 years of professional experience, at least 7 years of which are required to be specifically in the BCC/SBCC materials development in WASH sector. International experience/exposure shall be an added advantage
1	Social Development and Gender Expert	1	18	Master Degree in Social science/Gender studies/MDS	Minimum 15 years of professional experience, at least 10 years of which are required to be specifically in the assessment, of social and gender issues in WASH sector. International experience/exposure shall be an added advantage







<u>Sl</u> Vr	Position	<u>Nr</u>	Perso n Mont hs	Minimum qualification	Specific experience		
5	DRR-CC and Technical Expert	1	18	Civil Engineering and	Minimum 10 years of professional experience and 5 years WASH sector experience/exposure shall be an added advantage		
ist	of Non-key experts				Minimum 5 years' professional		
6	MIS Specialist	1	18		experience including 3 years' proven track record in the design and development of MIS for govt./semi govt./local govt./large commercial entities including website and server management. International experience/exposure will be an added advantage		
7	Trainers	2	36	Bachelor Degree in Social science/management/e ng/urban planning/Masters of equivalent in personnel management or HRM/HRD/Finance.	10 Years total work experience with at least 5 years in the specific training/skill or capacity development areas with proven track record in facilitation. Design of training modules, imparting training involving govt./semi govt./local govt. entities International experience/exposure shall be an added advantage.		
-	onsultancy Services fo	r Awa	reness F	Building Programs	, besides a superior		
C	onsultancy Services to	1					
8	Marketing Expert and Public Relation Officer	1	18	Master Degree/ MBA with major in Marketing or any other relevant subject. Age should be less than 60 years.	Minimum 10 years experience in Marketing, Social Mobilization and/or relevant field		
9	Enumerator	10	60	a). Minimum Diploma in Statistics/Applied Statistics/Civil/Environn ental Eng	in relevantwork is essential		
4419	Total	19	9 24	0			

The Client envisages professional staff inputs as per the table above, which are indicative and the consultants are free to propose their own staffing plan and inputs, including the non-key staffs, based on their own assessment of the needs of the assignment as described in the TOR.



5. Reporting Requirements and Time Schedule for Deliverables

The total duration of the Consultancy services will be 30 months. The tentative schedule for the

Consultant's assignment is given below:

SL No	Name of Report	Schedule of delivery
Desig	gn Phase:	
1	Inception report Inception Report including detailed work plan comprising of details of team mobilization, community coordinators, Gantt chart showing detailed activity plan on scope of each (4 hard copies + MS Word +PDF soft copies)	At the end of 2 weeks from the date of commencement of service.
2	Baseline Report on Sanitation Operators, Workers and Private Sector service provider in sanitation value-chain Capacity and Training Need Assessment report Community / Consumes Need / KAP assessment report	At the end of 6 months after inception
3	Development of Capacity building packages and design awareness programme at different level based on TNA and KAP assessment survey Report Draft IEC-BCC materials packages	At the end of 8 months after inception report
4	Implement of Capacity building programmes and awareness raising programme and develop monthly progress report. Prepare and submit a success story of Capacity Building under LLF 10 Towns Project	From 9 months to 30 months
5	Submit Draft and final completion report of capacity building and awareness programme	After 30 months from the date of commencement of service.

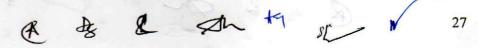
Note: The Project Director can change the time schedule for deliverables. Apart from all others, the consultants shall help the PD office by preparing special reports that may be felt necessary by the management.

6. Duties and responsibilities

a. Responsibilities of DPHE and counterpart personal:

DPHE shall provide support and facilities as described below.

- Providing office space in DPHE Dhaka Office. If DPHE can't provide an office at the DPHE head office, then the consultant firm/NGO would arrange an office in their interest.
- At pauroshava or municipality level, DPHE shall ensure provision of office space for the consultants within the pauroshava or municipalities offices or PIU.
- Providing all data, if available, and access to the project information that may be necessary for the Consultants to carry out their assignments, and facilitate field visits, access to beneficiaries, contractors, consultants, and Government line department ministries;
- Facilities in the collection of all associated data and information in possession with various GoB offices both in the field and in Dhaka;
- Providing all support in connection with field activities such as field survey, primary/secondary data collection, setting up field offices, etc., to the consultants;
- Depute DPHE personnel who would work in close support with the consultant team to facilitate
 the completion of the Project; DPHE would depute five personnel, including PD and DPD,
 from its establishments. Besides, six personnel, including Assistant Engineers and Sub-



Assistant Engineers, would be outsourced. 2 Individual consultants for financial and procurement and one firm or NGO for capacity and awareness building would work closely with PMU.

- Providing all support to the consultants to hold seminar/interaction meetings with the stakeholders in the field so that the Project could be a participatory one;
- Providing support in identifying the "Right of Way" for the Consultants for survey purposes;
- For collecting secondary data from different departments or agencies, DPHE will assist in seeking permission or requesting through an application. Besides, during the survey and investigation period, the staff Consultant may need ID cards or any form of legal document from DPHE to visit various sites. DPHE will arrange to provide such ID cards/legal documents as and when required;
- DPHE will make available the following counterpart staff at the field level for the entire duration of the Project.

District Executive Engineer on 25% time allocation : 10

DPHE Assistant Engineer (Field) on 50% time allocation : 10

Sub-Assistant Engineers (Field) on 50% time allocation : 10

 DPHE will also make all relevant reports, documents, maps, photography, and survey information available to the consultants on an 'at cost basis'.

b. Responsibilities of the Consultants

Responsibilities of the Consultants include the followings, but not limited to;

 The consultants shall have regular meetings with the DPHE staff to discuss technical and project management issues. Any unresolved technical issues or otherwise should be taken up with Project Director of the project for his intervention and support.

 The consultants shall carry out the services as detailed in the "Scope of Work" in the best interest of DPHE for the successful realization of the project with reasonable care, skill, and diligence with sound technical, administrative, and financial practices. They shall be responsible to the DPHE for discharging responsibilities.

 The consultant shall keep in contact with the local municipality in liaison with DPHE to know their projects and plans in the WASH sector to avoid duplications and disorder in the study and development plan.

 Computers, printers, or other major equipment & data, if purchased under the contract and used by the Consultants, shall be delivered to the office of the project Director, DPHE, at the end of the project.

 The consultants shall indicate in their financial proposal the number and person-month requirement of additional counterpart personnel and the detailed requirement of office space, machinery, equipment, and supplies. The consultant will be attached to the Project Management Unit (PMU) according to a schedule and arrangements to be decided at the time of consultancy contract negotiations.

7. Assignment duration and required person-month

The duration of service will be 30 months or the completion of the project, which will be happened later. The proposed study will be for 240 person-months of local professional inputsThe estimated staffing requirements are as shown below:

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S/N	Consultants	No. of professiona														G	ant	t Cl	ıar	t												÷	
	lie - P	ls					200		R.				De	sign	1 &	Im	ple	mei	nta	tion	Ph	ase	_										
		A PRINCE	Total	1	2	3	4	5	6	7	8	9	1 0			1 3						_	_	2	2	2	2	2	2	2	2 8	2	3
1	Team Leader/ Institutional Development Specialist	1	30												-						0		Ü	•	2	3	4	0	0		8	9	0
2	HRD / Training Specialist for module Development	1	24														IX.			1039	100										530		
3	Social Behaviour Change Communication SBCC Specialist	1	18																HONO						7								
4	Socia Development and Gender Expert	1	18							311/20																							
5	DRR-CC and Technical Expert	1	18			7															2 HE												
6	MIS Specialist	1	18		SHOUTH HOT															12												-	
7	Trainers	2	36																	385									Alema y		1630	100	1000
8	Marketing Expert & Public Relation Officer	1	18																										701				
9	Enumerator	10	60		Agent						and the			2531	100	1664	000	-	+	-	- 10		4	100		156					(0: 1)	BU E	
	Total	19	240			1	angara l	ME U/				1		-				1			_							1					

Note: Gray color indicates the <u>tentative</u> working man month. Consultant firm/Agency will give prior letter to PD before engaging any consultants.

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8. Schedule of payment

Payment shall be made to the firm/NGO(s) following the provision hereto.

- All payments shall be made from the office of the Project Director, DPHE.
- No payment for disproportionate progress/achievement of the target.
- A proportionate penalty shall be imposed for delay of service delivery.
- Payment shall be output based in case of (like design, supervision, etc.) as follows;

Sl.no	Heads	Payment mode					
1	Inception report Inception Report including detailed work plan comprising of details of team mobilization, community coordinators, Gantt chart showing detailed activity plan on scope of each (4 hard copies + MS Word +PDF soft copies)	10% of the contract amount will be paid to the consultant/NGO At the end of 2 weeks from the date of commencement of service.					
2	Capacity and Training Need Assessment report Community /Consumes Need /KAP assessment report	25% of the contract amount will be paid to the consultant/NGO at the end of 6 months after inception					
3	Development of Capacity building packages and design awareness programme at different level based on TNA and KAP assessment survey Report Draft IEC-BCC materials packages	10% of the contract amount will be paid to the consultant/NGO at the end of 8 months after inception report					
4	Implement of Capacity building programmes and awareness raising programme and develop monthly progress report.	From 9 months to 30 months 35% the contract amount on quarterly basis based on proportional progress of contraction works. Number of quarterly payment may be increased/ decreased based on project completion time.					
5	Submit Draft and final completion report of capacity building and awareness programme	20% of the service fee will be paid					

Income Tax and VAT will be deducted at source from the payment as per the rules of the Government of Bangladesh.

9. Ownership of Documents

DPHE shall be the owner of all the software (all format), design, reports, modules, manuals, and other documents prepared and procured under the project.

· After completion of the project, all documents/results/tools & equipment and all necessary software should be handed over to DPHE before final payment.

• The consulting firm/NGOs shall accommodate the latest version of all the computer software/programs and shall provide the latest version while transferring database/tools/software to DPHE.

RR & M Win

(Dilruba Farzana)
Executive Engineer
SIR Division
Department of Public Health
Engineering
And
Member Secretary, ToR Committee

(Dalila Afroza)
Executive Engineer
Design Division
Department of Public Health
Engineering
And
Member, ToR Committee

(Md. Shafikul Alam)
Executive Engineer
Ground Water Division
Department of Public Health
Engineering
And
Member,ToR Committee

(A.H.M Khalegur Rahman)

Executive Engineer
Arsenic Management Division
Department of Public Health
Engineering
And
Member, ToR Committee

(S.M Shamim Ahmed)
Project Director
Inclusive and
Integrated Sanitation and
Hygiene Project
in 10 Priority Towns in
Bangladesh.(GoB-IsDB)
Department of Public Health
Engineering
And
Member, ToR Committee

(Mohammad Anwar Eusuf)
Superintending Engineer
Planning Circle
Department of Public Health
Engineering
And
Member, ToR Committee

8/10/2021

(Md. Saifur Pahrnan)
Superintending Engineer
Ground Water Circle
Department of Public Health
Engineering
And

Convenor, ToR Committee

(MD. SARWAR HOSSAIN

Chief Engineer
Department of Public Health Engineering
Govt, of Bangladesh, Dhaka.