





Terms of Reference (TOR)

Local consultancy for WASH and Health Endline Survey in Saravan and Oudomxay province

September 2024

1. Introduction

Plan Laos seeks a consultant to conduct design and analyze data collection for the Endline survey of Phase III and Phase II both of projects are Integrated Health, Nutrition and WASH (also known as the WASH Integrated Nutrition (WIN) project), projects are implementation in the same district but different villages in Saravan and Oudomxay provinces. Saravan district from Saravan province and Pakbeng district from Oudomxay province.

2. Background

The WIN project phase III has been implantation from July 22 and ending in June 2025 and Phase II was implementation from July 2019 end in June 2022, both of project are a direct response to the recognized negative long-term development implications of under-nutrition for individuals, households and communities, and the fact that Laos PDR records the highest rates of under-nutrition in Southeast Asia. The integration of Maternal Newborn and Child Health & Nutrition (MNCH-N) and WASH interventions aligns with global evidence that such combined investments are essential and more effective (and more cost effective) in achieving optimal nutritional outcomes than investment in one of these approaches alone.

Both of project was designed and intended outcomes were informed by a detailed situation analysis of the causes and determinants of poor nutrition in rural Laos, and through consultations with communities, civil society organizations and government stakeholders at the sub-national level. A comprehensive Theory of Change has been developed to support and guide the intervention package, and to demonstrate the logical relationship between the achievement of overarching goals and intended outcomes, and the delivery of outputs and activities. The overall goal of the project is: *Reduction in stunting of girls and boys aged 0-23 months and a progressive movement towards gender transformative MCH-WASH outcomes in 69 villages (70 communities) in Saravan and Oudomxay Provinces.* The three year third phase project (2023 to 2025) is funded by Plan International Australia (PIA) and DFAT's Australian NGO Cooperation Program (ANCP).

The Phase 3 of the WIN project is direct response to the negative long-term development implications of under-nutrition in Laos PDR. The project's main objective is to increase access to climate-resilient WASH and health services in order to improve the nutrition status of women, girls, and boys in targeted marginalised communities.

The project has three interrelated components as follows:

Component 1 – community mobilisation:

- Conduct Water Safety Planning (WSP) activities at the community level to support villages develop guidelines and regulations for water resources protection amidst climate change impacts
- Undertake community led total sanitation (CLTS) Plus sessions to promote five critical needs in the first 1,000 days: breastfeeding, nutrition, and hygiene practices; menstrual hygiene management; climate-resilient WASH and environmental behaviors; and gender equality
- Increase women's agency and raise men's awareness of gender equality through the implementation of Plan's Gender and WASH Monitoring Tool (GWMT).

Component 2 – improved services:

- Support sanitation suppliers to provide communities with access to quality, affordable, climate-resilient sanitation materials.
- Train and coach district and provincial supervisors on Puern Tae Clinical and undertake regular supportive supervision visits to health centres
- Construct and rehabilitate climate resilient community water supply systems.

The project involves Plan Laos working with municipal and district level government agencies to strengthen and support their capacity to monitor, plan and respond to community needs and demands for improved health and sanitation services, and to deliver the National Nutrition Strategy and Action Plan and Rural WASH Strategy. Key government partners form multi-disciplinary in districts and provincial level. Plan Laos provides training and mentoring to Health Teams at sub-national level, will enhance the knowledge of WASH team to be WASH and Health resilience in climate change.

Plan Laos, government stakeholders and health workers are providing technical and material support for communities, especially women of reproductive age (15-49 years), to implement their village plan and to develop positive individual and household health seeking practices and improved sanitation, hygiene, feeding, early stimulation practices and nutrition ahead of and during pregnancy, as well as immediately after delivery and in the early years of children's lives.

Refer to the project's ANCP Annual Development plan and Project Design Documents for further details (e.g. the project's targets, interventions, etc.)

3. Objective of the endline survey

The objective of the endline survey is to identify endline levels of the indicators (both quantitative and qualitative) identified in the Project results framework for the project to be able to measure against for determining Program outcomes. The qualitative parts of the survey also seek to gather information about the current knowledge, attitudes and practices (KAP) for nutrition, gender, disability and WASH (including menstruation) in order to gain a better nuanced understanding of power dynamics, social norms and sustainability factors within the project area, particularly with relation to those the project are seeking to contribute to shifting and compare the result from WIN phase 2 project location's result.

Additionally, the survey is also seeking effective interventions, impact and lesson learnt contribute to project results and achievement accessing Plan social media.

4. Scope of the Consultancy

For information, tasks of the local consultant/s are shown in the following list for information

- a. Briefing discussion and background reading (documents provided by Plan Laos).
- b. Review methodology design of endline survey
- c. Revise data collection tools¹ and develop/revise as needed –focus on WASH (and GESI) and climate change resilience in communities WASH
- d. Programming of the revised data collection tools in Kobo Toolbox
- e. Supervise testing of the tools and tool revisions as needed
- f. ToT to Plan core team at Vientiane capital for survey methodology and data collection tools
- g. Facilitate training to Saravan and Pakbeng enumerator team (government staffs) together with Plan staffs.
- h. Co-supervise data collection team in two target districts.
- i. Data management as data cleaning, analyzing and Data quality assurance during data collection (daily data quality check via distance support to filed data collection teams)
- j. Consolidating, cleaning and delivering endline data in tables
- k. Basic data analysis and documenting key findings and analysis points
- I. Debrief endline result
- m. Endline report (comparation baseline to endline data in narrative, PowerPoint presentation, and all data set)

5. Design methodology

The consultant will identify methodology for conducting the endline survey in 19 communities (7 in Pakbeng and 12 in Saravan) and 19 health centres (6 health centres in Pakbeng and 13 health centres in Saravan district) and should cover 20%-30% of target villages of WIN Phase II project.

The selected communities will be representative of rural or remote regions and different ethnic groups or clusters. The Household sampling will be based randomization by using listing focusing on the most marginalized households and include households with people with disabilities (PWD), female-headed households, poorest income households, and at least five HH with child under age 2 (CU2), and as many as possible with children age under 5 (CU5).

The Household (HH) and Health facility survey tools will be used in the project's Phase III endline survey of the project need to be further streamlined and simplified, with a focus on collecting sufficient data that is directly relevant to the indicators in the Project's results framework. The Household interview should only require 1 hour to administer and 1,5 hours per health facility.

Gender, disability, Child Protection and Ethics

The data collection process must take into account gender and disability inclusion, child protection and ethical standards in their data collection plans. This includes informed consent, length of surveys,

¹ Data collection tools mainly from the project's Phase III baseline survey in 2023: household survey, village head survey, health centre survey

questions and survey methods taking a 'do no harm' approach, capturing the voices of the most marginalised, not raising expectation during the survey, gender considerations in interviewer and interviewee, etc. Regarding disability, The Washington Group short set of Questions on functioning will be designed to identify people with disabilities.

6. Deliverables

The following table sets out the deliverables to be provided by the consultants:

- Full methodology design
- Full set of WASH (and climate change resilience) Endline data collection tools and revisions as needed (e.g. following field testing)
- Transfer data collection tools (English and Lao) in ODK/Kobo Toolbox format (and revisions as needed)
- Delivery of ToT for Core team of enumerator trainings (Lao) and report of training of enumerators (English)
- WASH and health analysis of data including meetings with Plan Laos WASH team and local consultant as needed.
- Soft copies of final versions of all data collection tools in English and Lao (the final survey forms deployed, in excel or word format)
- Debriefing with Plan Laos
- Final, clean tabulated dataset in Excel
- Debrief meeting the Plan Vientiane Office
- Full raw dataset and cleaned dataset and data analysis.
- Endline report with completed M&E project results framework.

7. Time frame (estimates)

Activity	Deliverables	Estimate Timeframe	Estimate
Consultative meeting – understanding	NA	6 Jan 25	1 day
of ToR and reporting requirements.			
Develop methodology design	Methodology design	7-8 Jan 25	2 days
(including incorporating feedback)			
Review data collection tools and	Full set of WASH (and climate	9-10 Jan 25	1.5 days
develop/revise as needed	change resilience's) baseline		
(including incorporating feedback)	data collection tools		
Data collection Trainings, field testing,	Data collection tool,	13-25 Jan 25	13 days
data collection including travelling	enumerator training material		
Data analysis and report writing draft	Full dataset, cleaned and	27-31 Jan 25	6.5 days
	syntax/tabulation sheet		
Debrief endline key finding	Key finding PowerPoint	14 Feb 25	0.5 day
presentation to Plan team	presentation.		
Final study report and submission of	Endline report with completed	5-6 March 25	2 days
data and analysis file.	M&E project results		
	framework and data set.		
		TOTAL	26.5 days

8. Qualifications and competencies

 Demonstrated previous experience in data management and data analysis for health or WASH sector surveys (baseline, endline or impact evaluation)

- Demonstrated previous experience in programming for digital data collection
- Demonstrated experience in data analysis for development programs
- Preferable to be highly proficient in written and spoken Lao and English (translation needs should be provided for in the application and budget)
- Experience in MNCH, Nutrition and WASH desirable
- Experience in gender equality and socially inclusive surveys desirable
- Strong ability to work collaboratively in a team (including good communication skills, openness, flexible, reliable and responsive)

9. Other requirements and expectations

This evaluation must take into account and abide by Plan International's Policies and Standards. This means, for example, ensuring that principles of gender equality, inclusion and non-discrimination are considered and acted upon throughout. Furthermore, the assessment is required to be conducted in-line with Plan International's Safeguarding and Child Protection Policy and internal guidelines on Child Protection and ethical standards in Monitoring, Evaluation and Research. These will be provided to the Consultants and must be signed before commencement of the Consultancy.

The consultant is also expected to lead and work collaboratively in a team demonstrating good communication skills, openness, flexibility, reliability and responsiveness.

No international travel for this consultancy. Any expenses incurred by the international consultant for this TOR and contract to be covered by the international consultant.

Refer to contract for this consultancy for invoicing acceptability and other contractual requirements.

10. Application Procedure

To apply, please submit the following documents in soft or hard copy:

- Covering letter detailing suitability for the consultancy, with reference to previous relevant experience and the competencies listed in Section 8 above
- The names and contact information of two referees who can be contacted regarding relevant previous experience
- Expected daily fee/detail budget proposal
- CVs

If you are applying as a team (group of consultants), describe the role, number of days and daily rate of each person, and the average daily cost of the team for 26.5 days, the consultancy service cost should be including of all costs relevant to government (VAT, Tax...), including daily allowances, accommodations and travel cost for consultant team.

Please note that other cost for endline including daily allowances for enumerators and cost of enumerator workshops, will be responsible by the Plan staffs.

Questions about the ToR or technical term should be directed to Bounyang.Latsamy@plan-international.org

Please submit your application via email to Laos.procurement@plan-international.org with cc: Maniphone.Phoutphong@plan-international.org no later than 13 December, 2024 (Lao time). Include the

text 'Local consultancy for WASH and Health Endline Survey in Saravan and Oudomxay province' in the subject line.

Proposals will be assessed on demonstrated experience of the applicants with respect to the selection criteria, and budget proposal.

We strongly encourage equally qualified female candidates to apply!

All applications received after the time of the deadline will not be accepted without exception and only shortlisted applicants will be contacted. Shortlisted applicants may be requested to participate in an inperson or online interview process.