

**Sanitation for Millions
Terms of References (ToRs) for**

**Pre and Post Knowledge, Attitude & Practice (KAP)
Study**

Region	Balochistan
Project Name	Sanitation for Millions (phase 4, 2021-2022)
Beneficiary	twenty-two Government owned Schools, Five Madaris, Two Hospitals (DHQ, THQ), DEWATS and DEO Female Office
Implementing Organizations	Balochistan Rural Support Program
Duration	Total 60 days assignment (30 days for pre KAP and 30 Days for Post KAP survey as mentioned in the table below)

1. Introduction

Balochistan Rural Support Program (BRSP) is the largest Rural Support Program in Balochistan. It is one of the ten Rural Support Programs (RSPs) in Pakistan, and is a member of the Rural Support Programs Network (RSPN). BRSP emerged from Pak-German Self-Help project, which was initiated in 1983 with the collaboration of GTZ and Government of Pakistan.

BRSP is an autonomous and not-for-profit organization endeavoring for improving the living conditions of poor for the last two decades in the rural areas of Balochistan. BRSP's history goes back to the "Pak-German self-help Project" which was initiated in 1983, which was a collaborative effort of federal Republic of Germany and Government of Pakistan. The project was implemented by the Local Government Department with the technical support of GTZ (German Agency for Technical Co-operation).

In the year 1991, the successful manifestation of IRD programs at a limited scale, paved the way for the transformation of the project into the Balochistan Rural Support Program (BRSP). The organization was registered under Section 42 of the Companies Ordinance (1984) as a non-profit organization dedicated to the cause of rural development in the province.

Social mobilization is the bedrock of all BRSP development initiatives. BRSP organizes and builds the capacities of communities at the grassroots level to pursue their own development agenda through integrated sectorial need-based interventions. BRSP has supported to foster more than 30,528 Community Organizations (COs), 5,356 village-based organizations (VOs) and 200 Local Support Organizations (LSOs). With proactive participation of these institutions, BRSP has successfully completed various projects including community physical infrastructure, health, education, water, sanitation, livelihoods and human resource development projects contributing towards improvement in the quality of life of rural poor.

1.1 Context and need for GIZ School WASH Project intervention

Drinking water supply and sanitation facilities across Balochistan are inadequate. The persistent drought has severely affected the water table. According to the 2010 Multiple Indicator Cluster Survey (MICS) Balochistan report, only 53.35 percent population has access to piped drinking water, (urban:73.70 percent and rural: 20.40 percent). The sanitation situation requires major improvements as it is estimated that only 42.8 percent of the population practice safe disposal of excreta (i.e. Urban: 62.70 percent and rural: 22.90 percent), whereas 80 percent of the poorest households still practice open defecation (MICS 2010).

In context of the Millennium Development Goals (MDGs), Pakistan overall made an acceptable progress against the goal to improve access to safe drinking water (89 percent achieved against the target of 93 percent) while it did not achieve its goal of improving access to sanitation (72 percent was achieved against the target of 90 percent). Balochistan did not achieve the overall targets, since the goal of improving access to water was only achieved up to 73.7 percent and the goal of improving access to sanitation was only achieved up to 61.4 percent. (Pakistan MDG Report, 2013).

Quetta city

Quetta, the capital city of Balochistan, was established as a military garrison by the British Empire. It was planned to accommodate 100,000 people. Today, almost 140 years after its establishment, Quetta is now home to approximately 3 million people, including many Afghan refugees as the city is closely located near the Afghan border. Accommodating 30 times more people than its capacity has put a substantial stress on the available facilities and basic services. Besides being the capital, it is also the only metropolitan city of Balochistan. Thus, people from all 31 districts of the province live in Quetta because it is the only city where living standards are comparatively better than other districts.

Quetta city faces many problems; however, the most acute issue is related to water shortage. Due to a lack of planning and unchecked increases in the number of tube wells, the water table in Quetta has lowered. The Water and Sanitation Authority (WASA)- the body which supplies water to the city - is unable to supply water to all neighborhoods within the city. A majority of the residents therefore rely on water tankers for their daily water supply. Besides the pressing water supply issues, Quetta is also one of the most polluted cities of Pakistan due to improper planning, unchecked urbanization and mismanagement. Garbage is not collected and is dumped in the streets creating health hazards for communities. The sanitation systems are underdeveloped and, in the occasion, there is rain, the roads are often flooded which in combination with the garbage causes severe health hazards.

WASH Facilities in Schools

The quality of education and the condition of schools in District Quetta is considerably better compared to other districts of Balochistan. However, the overall quality of education and the conditions of the schools are grave compared to other parts of Pakistan. The limited number of schools and poor condition or non-availability of WASH facilities negatively impacts the enrolment and retention rates. As per the Balochistan Education Management Information System (BEMIS), 21 percent of the Girls Primary Schools do not have a boundary wall, 86 percent do not have access to water, 41 percent do not have toilets and 70 percent do not have electricity. The following table demonstrates the availability of facilities in primary, middle and high schools in Quetta:

Keeping the scenario in view, BRSP sought out the financial support from German Federal ministry of economic development and corporation twenty-one government owned school, 5 Madaris, two hospitals, two higher educational institutes and one female EDO office to improve the water, sanitation and hygiene facilities in Two Districts Quetta and Pishin. Project titled” Improved Inclusive Water Sanitation and Hygiene (WASH) Services in Public Institutions District Quetta and Pishin

Objectives of the Project

Project aim is Sustainable access to safe hygiene facilities and sanitation in government-owned schools, Health facilities, higher education institutes and general community. This project will be first phase and cover direct 18049 students and teachers of government schools, 1381 Students and teachers of Madaris, 288,175 Health facility staff and patients, 51,000 of DEWAT's in (BMC, UOB) and 900 beneficiaries of EDO female office provide them

with all basic facilities of water supply, sanitation and hygiene in all premises of the target schools, health facilities, higher educational institutes

The project has following key results to achieve over the period of 9 months starting 1st August, 2021 and 30th April, 2022

Result 1: Measures to provide sustainable access to safe sanitation and to improve the hygiene situation in public institutions have been implemented.

Result 2: Measures for improving access to sanitation and hygiene at household level have been implemented.

Result 3: Capacities and employability of experts from public and private service providers in the area of sanitation are improved.

2. Purpose

A pre and Post KAP study planned to carry out of the project baseline of knowledge, attitude and practice status with regard to handling and use of Water, Sanitation and Hygiene (WASH) facilities.

The findings and recommendations of this study shall inform the project regarding overall current status enable team for selecting indicators in the communities of project areas in two districts, district Quetta and Pishin of Balochistan

The study will also explore trends through in-depth analysis and will provide recommendations on the understanding, practices a long-term behavioral change of communities regarding water quality handling, sanitation use and adoption of improved hygiene principles during implementation process.

3. Objectives of the Assignment

Following are the key objectives of this study:

3.1. To assess the existing and post situation level of the targeted schools, higher education institutes, Health facilities and catchment communities against the set indicators in log frame

a. Water: Importance preferences, satisfaction from current practices and issues and diseases they face

b. Sanitation: Importance, preferences, satisfaction from current practices, benefits/ hazards, school functions involved in provision of sanitation services

c. Hygiene: Importance, preferences, satisfaction from current practices, benefits/ hazards, schools, Madaris, higher education institutes functions promoting hygiene, (particularly focusing hand washing at critical times and latrine use)

3.2. To find out existing attitude of the targeted communities against the WASH

a. Water: Importance, preferences, satisfaction from current practices, benefits and issues against the set indicators

b. Sanitation: Importance, preferences, satisfaction from current practices, benefits and issues against the set indicators.

c. Hygiene: Importance, preferences, satisfaction from current practices, benefits and issues regarding hygiene

3.3. To find out existing practices against practices among target communities and towards following aspects of use of WASH services

a. Water: Quality, safety, use, benefits and issues at rise

b. Sanitation: Use, cleanliness of facility (wherever apply), benefits/ hazards, maintaining hygiene of disposal, accessing mechanisms for sanitation

c. Hygiene: Hand washing with soap (or any agent), personal hygiene, menstrual hygiene management, domestic hygiene, environmental hygiene, food hygiene, frequency, benefits/ hazards

3.4. To identify the change in socio-cultural barriers that are observed in pre and post KAP study undermining WASH interventions in the project areas. In addition, consultant will also collect basic information on MHM from the school Head Mistresses.

4. Scope of work

This project is being implemented in targeted schools and HCFs of district Quetta and Pishin.

Institutions	Total Institutions	Total Students	Male	Female	Total Staff	Total Beneficiaries
Schools	22	17,095	11484	5611	954	18,049
Madaris	5	1,340	1340	0	41	1,381
Hospitals (DHQ & THQ)	2		141,120	146,880	175	288,175
DEWATs (UOB & BMC)	2	50000	26000	24000	1000	51,000
DEO Office Female	1		630	270		900
Total	32	68,435	180,574	176,761	2,170	359,505

4.1 Study Report

The consultant will be responsible for writing the study report based on analysis of the data. The report will document findings and provide current status against pre- and post-project scenario and against set indicators for KAP survey and he will also guide technically BRSP WASH team for further important data will be incorporated with consent. He would clearly define Questionnaire, methodology, sampling procedures, data collection tools and organization of survey. The report is expected to come up with specific and candid analysis of knowledge, attitudes and practices regarding WASH in schools, Health facilities, higher education institutes and adjacent community.

Consultant will share the first draft of the report with BRSP team right after ten days of the field work completion in a debriefing meeting. BRSP team will provide feedback on the first draft and second drafts of the report. The final copy of the report will be shared by consultant within agreed time after incorporating feedback from BRSP. The feedback can be provided on the final draft in case relevant manager does not find incorporation of feedback, already provided, adequate. Moreover, Consultant will be responsible to share data of the survey in hard and soft copies along with prescribed tools and database with BRSP team, the same exercise will be carried out for the post- KAP.

4.2 Deliverables

1. Study project document showing consultant's understanding of the task and including methodology, sample, tools etc.
2. Post field work, a preliminary briefing on the initial findings from the field and presentation of main findings to the Program Team in BRSP office Quetta

3. First draft of the report
4. Second draft of the report
5. Final draft of the report in both soft and hard copy.
6. One additional draft of the report can be asked in case quality of incorporation of feedback on first draft is not up to the mark.

4.3 Reporting Lines

In all matters in relation to the study, the consultant will report to the Manager PMER and Project Manager WASH

4.4 Format of the study

- Following is the proposed broader outline of the study:
- Executive summary
- Introduction (context, project description)
- Literature review
- Study methodology
- Findings and analysis
- Recommendations
- Lessons learnt
- Survey limitations
- References
- Annexes

5. Required expertise

The potential consultant/ firm to be leading and conducting the Pre and Post KAP study are required to have following qualifications:

- Master's degree in development studies, social sciences or related fields preferably in hygiene, health and environment with demonstrated subject knowledge in WASH and community mobilization
- A minimum of five (5) years relevant experience in designing, executing and reporting social surveys particularly have led/ conducted KAP surveys, baselines and evaluations of multi-year projects (samples can be requested)
- Good knowledge and experience in survey design and use of data analysis packages like SPSS along with excellent knowledge in MS Word and MS Excel
- Experience in the use of participatory appraisal techniques in data collection;
- Excellent analytical, research, writing and communication skills in English and Urdu

6. Intellectual Property Rights

All documentation related to the assignment like raw data (in the form of filled questionnaires) and processed data shall remain the sole and exclusive property of BRSP.

7. Timeframe

It is expected that the study will take approximately 30 working days as detailed by the timetable below:

Activity	Time (working days)
Literature Review (includes review of main document, project plans and relevant academic literature)	3 days

Project Document (Consultant to update BRSP on proposed design, methodology and field work of the study before start of the assignment)	2 day
Field work and data collection <ul style="list-style-type: none"> • Training of field teams • Deployment of teams for field work • Data collection 	10 days
Report <ul style="list-style-type: none"> • First draft report in a debriefing meeting • Second draft report with feedback incorporated • Final report 	<ul style="list-style-type: none"> • 10 days after field work • 3 days after feedback on 1st draft is received • 1 day after feedback on 2nd draft is received

*Note: Total pre- and post-survey duration will be 60 days and as mentioned in the table 30 days will be for pre KAP survey in the start of the project similarly 30 days will be utilized for organizing post KAP survey in the completion of the project.

8. Payment timelines for Pre KAP-Study

- a. First tranche 30% at the inception of study
- b. Final tranche 20% at the production of final draft after incorporating the feedback from donor or BRSP management of the study.

9. Payment timelines for Post KAP-Study

- a. First tranche 30% at the inception of study
- b. Final tranche 20% at the production of final draft after incorporating the feedback from donor or BRSP management of the study

10. Proposal submission process

BRSP asks reputable concerned professional Survey Expert related to WASH (Male/Female), who possess enormous experiences and understanding of water sanitation and hygiene WASH mainly in the humanitarian and development context.

Interested consultants must send their technical & financial proposals along with CVs related to WASH pre and post KAP Survey by not later than 31th August, 2021.

Admin Section (Procurement Unit)

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