**Terms for Engagement**

**Designing and implementation support of SBCC strategy, including material and activity development**

**About the Organization:**

Save the Children is an international organization working for children’s rights in 120 countries. In India, it is working across 13 states to ensure that every child has a happy and healthy childhood. Save the Children is determined to build a world in which every child attains the right to survival, protection, development and participation.

**About The Stop Diarrhoea Initiative:**

The Stop Diarrhoea Initiative is a flagship programme of the organization with a focus on 9 districts in 4 states, West Bengal, Uttar Pradesh, Uttarakhand and Delhi. The Initiative aims at

* At least a 50 % reduction in the prevalence of diarrhoea amongst children under five by the end of the programme
* At least a 50% reduction in the incidence of acute diarrhoea among children under five by the end of the programme from three to four episodes to less than two per year
* An estimated 80% reduction in diarrhoea Case Fatality Rate (CFR) in clinics in under five deaths by the end of the programme
* 13 % across intervention reduction in diarrhoea related deaths amongst children under five by the end of the programme

**About the WHO-Unicef 7 point plan of Diarrhoea Prevention and Treatment:**

**Background:**

In 2009, WHO-UNICEF proposed a 7-point plan for comprehensive diarrhoea prevention to address high child deaths due to diarrhoea. The plan consists of two treatment and five prevention strategies. The treatment strategies consist of fluid replacement using standard low-osmolar oral rehydration salts and zinc supplements (MNT). The prevention strategies include rotavirus and measles immunisation; promotion of early and exclusive breastfeeding and vitamin A supplementation; promotion of hand washing with soap; improvement of water quantity and quality, including treatment and safe storage of household water; and promotion of community wide sanitation.

Towards achieving the above stated objectives, adopting the WHO 7-point plan to educate community members has become imperative.

**SDI Intervention:**

The Stop Diarrhoea Initiative will implement the 7 point plan of diarrhoea treatment and control in the project locations while supplementing the Government health policies.

In line the Save the Children’s theory of change, the programme will:

* test the effectiveness and efficacy of the WHO/UNICEF 7 point plan;
* collate evidence to demonstrate proof of concept and value for money; and
* advocate to the Government, and its partners to replicate and scale up the approach nationally.

**SBCC Engagement:**

A large component of the programme success depends on the strategies employed for ushering in behavior change. We are focusing on **participation of communities** through organised structures such as Community Sanitation Committees, the VHSNCs, Mothers groups and the Children’s health and hygiene committees (CHHCs). While the direct beneficiaries of the SDI are children, indirect beneficiaries and the bridges to change are mothers, caregivers, fathers, other family members and community structures that are key influencing factors on decision making about care seeking.

We have carried out Formative Research for understanding behavioral patterns and cultural / social norms that surround, influence and support positive behavior change around the main components of the WHO-UNICEF 7 point plan for diarrhoea control. The content for the main messages for our beneficiaries have been chalked out.

**Objectives of the Consultancy:**

We are now looking for a creative agency

1. To develop the SBCC strategy with suggested activities from SC technical staff.
2. To develop the key messages and ensure they are pre-tested with a range of project participants within our target areas.
3. Develop IEC materials for decided mediums of usage (Broadcast, radio, AV, print keeping in focus the media preferences of the beneficiaries) which will lead into the roll out of the SBCC strategy.
4. Develop metrics to measure impact and effectiveness of SBCC intervention packages.

**Key Deliverables:**

The key deliverables of the engagement will be

1. Develop the SBCC Framework, taking into account the recommendations from various pieces of research that have undertaken in the first year of the SDI programme and other relevant studies, which are no more than 10 year old.
2. Develop and translate key messages that will be disseminated in our areas of intervention taking into account the messages developed under the same programme in Nigeria.
3. Pre-test messages and key intervention concepts with a range of project participants within our target areas for feasibility, acceptability and comprehension.
4. Conduct a review of available materials related to raising awareness on diarrhoea prevention and control for children under 5 years, which include communications materials on childhood illness developed by the government, development partners, and agencies in the 4 States.
5. After reviewing project documents, available materials, and the results of the design workshop / pieces of research the consultant will work closely with the project team and UK based technical advisor to develop the following deliverables on the 7-point plan. Deliverables include but are not limited to:

* A comprehensive message matrix translated into key languages with messages for adults and children;
* Mother’s group **checklist** of key practices across 7PP (photocopies)
* Series of short films on 7 point plan to play on tablet and projector for larger groups
* Booklet of interactive games, role plays, skits for women’s groups
* Posters for key messages
* IPC guide for the CHVs including the do’s and don’ts
* Situational cards to be used with various age groups in group interactions

1. Pre-test all the materials developed and the usage through the suggested modes of communication
2. Develop the activity plan according to medium and mode preferences of the beneficiaries in the intervention areas
3. Final production of materials after results from pre-test have been incorporated
4. Dissemination of the materials according to the detailed implementation and usage plan

**Skills and competencies required**

* Expert knowledge and practical experience in behavior change communication in developing countries, preferably in India
* At least 10 years of practical experience in communications using graphic design
* Experience designing educational, training of trainers, and behavior change materials for audiences with low levels of literacy
* Experience conducting focus groups to pre-test and adapt materials
* Experience of coordinating diverse teams and communicating with individuals/groups at all levels
* Experience working in urban and rural communities, preferably in Delhi, Uttarakhand, Uttar Pradesh, and Kolkata
* Experience of developing materials in regional languages (Hindi and Begali language skills are essential)
* Displays cultural, gender, religion, race, caste, nationality, age sensitivity.

**Duration of consultancy**

This engagement is expected to be completed within 2 months from the date of signing of the contract.

**Reference Materials** –consultant should review before further data collection

- Stop Diarrhoea Project proposal

- SC KABP Report

- Baseline report

- SBCC messaging matrix

**Timeline and Payment schedule:**

On Signing of the contract 30% of total contract value

On sharing of first draft of IEC materials 40% of total contract value

After Final dissemination of materials 30% of contract value