



South Sudan
Red Cross



TERMS OF REFERENCE FOR WILLINGNESS TO PAY CONSULTANCY

Date of Release	5 th July 2022
Deadline for clarifications	10 th July 2022
Deadline for submission	13 th July 2022

1. SUMMARY

SSRC is seeking to hire an independent Consultancy firm to conduct a willingness to pay survey for household latrines in the Aweil Centre, Aweil Municipality. The purpose of the study is to:

- Establish baseline sanitation and hygiene practices among rural populations including behaviors related to:
 - a) Ending Open Defecation (OD),
 - b) Constructing and/or building improved latrines,
 - c) Using latrines,
 - d) Maintaining latrines,
 - e) Safe disposal of children's feces,
 - f) Hand washing with soap.
- Identify the key factors that influence these practices,
- Assess the main benefits sought from sanitation facilities.
- Identify the barriers to adopting improved sanitation,
- Gauge households' ability and willingness to either build sanitation and hygiene facilities or pay for them to be built.
- Provide data that can assist in developing local sanitation markets.

Insights from the consumer survey will assist SSRC and its partners to develop an evidence-based marketing and communication strategy aimed at improving sanitation at large scale and strengthen a sustainable/commercial market for sanitation and hygiene products aimed at low-income households.

2. BACKGROUND

SSRC with funding from the Austrian Red Cross is implementing a sanitation improvement Project in Aweil Centre, Aweil branch in eight selected villages within Aweil Municipality. The main objective of the intervention is to increase sanitary latrine coverage in South Sudan, especially in the flood prone communities. This is expected to be achieved through adopting designs that are resistant to floods and collapsible soils. Sanitation artisans inclusive of technicians with construction background shall be trained on these designs and shall demonstrate these designs among the communities to contribute to knowledge transfer. In order to address the challenge of access to materials, sanitation marketing through the sanitation artisan group and SSRC Branch shall be applied to ensure continued

assessment to materials and skilled labour for construction of structurally sound latrines shall be established within the community using a smart subsidy approach as enshrined in the national guide for CLTS implementation in South Sudan. To do this, a smart subsidy CLTC approach shall be employed and this will be followed up with a willingness to pay study among the communities to get their view on the preferred designs and their ability to afford and consultations shall as well be done with the relevant line ministries to obtain their approval of the designs. In addition, the project will also provide seed grants for the village development Group (The main idea of the Village Development group is to solve a village level problem with minimum external help or in other words creating a village level revolving fund to solve social issues like sanitation) approach through which profits made will support the community in terms of affordability of sanitation facilities. This intervention shall contribute to showcasing best practices to addressing sanitation in post conflict situations and flood prone settings

3. THE ASSIGNMENT AND OBJECTIVES

To better understand the issues of use and maintenance, as well as to continue and improve programmatic efforts to scale coverage, SSRC seeks a research firm to design and carry out a consumer research study among rural populations in Aweil Municipality.

The goals of the study are to:



- Establish baseline sanitation and hygiene practices among rural populations including behaviors related to:
 - a) Ending Open Defecation (OD),
 - b) Constructing and/or building improved latrines,
 - c) Using latrines,
 - d) Maintaining latrines,
 - e) Practicing hand washing with soap (HWWS), and safe disposal of children’s feces,
- Identify the key factors (or determinants) that influence these practices,
- Assess the main benefits sought from sanitation and hygiene facilities,
- Identify the barriers to adopting improved sanitation and hygiene,
- Gauge households’ ability and willingness to either build sanitation and hygiene facilities or pay for them to be built.
- Provide data that can assist in developing local sanitation and hygiene markets.

Findings from the consumer research will assist SSRC and its partners in developing an evidence-based behavior change program (including a marketing campaign and communications strategy) aimed at improving sanitation and hygiene practices at large scale and strengthen a sustainable/commercial market for sanitation and hygiene products aimed at low-income households.

4. SCOPE OF WORK

The selected contractor will perform the following tasks:

- Design the study by drafting and finalizing a sound research protocol (including the sampling frame and sampling strategy).
- Draft research instruments and revise based on client comments
- Pre-test the instruments, sharing and documenting findings.
- Implement and supervise data collection activities in relevant villages to ensure timing is respected and quality standards are met.
- Capture and code data, using agreed upon quality control measures.
- Analyze data, preparing agreed upon tables and analyses.
- Summarize top line findings and present to client and relevant partners and stakeholders (up to 2 presentations).
- Draft final report and finalize based on client’s comments, meeting international quality standards to enable extensive distribution (up to 5 iterations).

5. METHODS



The methodology (protocol) for the study will be developed by the selected firm at the outset of the work and will be presented in detail in the inception report (see annex 2 for a detailed list of research questions/areas). The study must employ both qualitative and quantitative data collection methodologies, including focus group discussions and household interviews. The chosen methodologies should be appropriate for rural areas as well as for illiterate low-income populations and should take into account that sanitation and hygiene practices are often a culturally-sensitive topic.

6. DELIVERABLES

All deliverables submitted to client shall be submitted in English in electronic form where feasible, or in hardcopy as necessary or required. Deliverables will be considered drafts upon initial receipt. Drafts will be reviewed and comments provided within 2 weeks of receipt, unless otherwise specified. The selected contractor shall appropriately address the client's concerns and provide final deliverables within one week of receiving client's response. All reports and datasets will be shared with relevant stakeholders.

Deliverables include:

- i) Inception report and presentation. An inception report with oral presentation to client including:
 - Research objectives
 - Research questions
 - Methods for data collection and justification
 - Sampling strategy
 - Key implementation challenges and risks
 - Additional program design considerations
 - Implementation work plan and time table
 - Draft survey instruments
 - Final report outline, including dummy analysis tables

Note that research protocol and survey instruments will need to be approved by client before going to the fieldwork stage.

- ii) Oral presentations of top line findings. This report must be presented to client, partners and stakeholders in English. Findings to be included in top line presentations will be agreed upon ahead of time with client.

It is anticipated that the top line presentation will focus on the findings from the qualitative portion of the study so that marketing and communication strategy development can begin and feedback provided to finalize the quantitative research instruments.



Participation in a workshop with a communication firm (to be contracted separately), partners, and stakeholders aimed at identifying key insights from research findings should also be planned and budgeted.

iii) Final report English. The final report will include detailed results from data analysis and key recommendations to inform the communication campaign and marketing strategy. The final report will include the following chapters:

- Executive Summary (English and English,
- Background,
- Research Objectives and Questions,
- Methods,
- Possible Limitation to Interpretation of Data,
- Main Results/Findings,
- Conclusions and Recommendations,
- References,
- Appendices and/or Annexes and Public Use Data File.

The report will be in the official language in South Sudan (English)

In addition, the final report will be made available in two copies and will include:

- Clean and fully referenced electronic data sets for the quantitative position in an agreed format with copies of the original data collection forms in English;
- Basic transcripts of all interviews and focus group discussions in an electronic format in English
- All outputs will be presented in both electronic form (programs to be agreed with client) and paper copies.

7. ACCEPTANCE CRITERIA / PERFORMANCE REQUIREMENT

The deliverables will be evaluated according to the following criteria

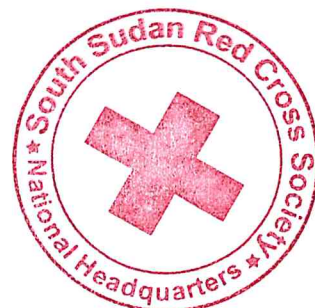
- Thoroughness and timeliness of all the elements identified in the scope of work and tasks (and annexes), per the documented final agreement between the selected firm and client. A detailed timeline for task completion and deliverables will be established when the contractor begins the work.

- Quality and clarity of the analysis and work produced. More specifically, quality and clarity will be assessed against the following:
 - ability of client stakeholders to understand and apply the work produced
 - Extent to which deliverables conform to the instructions and standards outlined in the scope of work and the relevant annexes,
 - Depth and quality of analysis and effort,
 - Quality and extent of communication between client and the selected contractor while the work was undertaken,
 - Any other criteria agreed upon between the two parties at the start of the work period.

8. SPECIFIC RESPONSIBILITIES FOR THE SELECTED CONTRACTOR

The selected contractor will be responsible for the following:

- Designing, implementing, and managing the study



- Developing and pre-testing survey instruments before the field work
- Logistics arrangements and expenses, i.e., transportation, accommodation, allowances, communications, and stationery
- Recruiting, training and supervising a suitable team of field workers, including interviewers and field supervisors.
- Developing an appropriate database for data entry
- Ensuring quality of field work/data collection and data entry
- Analyzing the data (including multivariate analyses such as regressions and factor analysis).

Client will be closely involved in reviewing, advising, and providing technical recommendations to the firm at the following key stages of the assignment:

- developing and finalizing study designs;
- training of field workers during piloting of instruments;
- fine tuning and finalizing of proposal;
- monitoring the quality control system to evaluate progress;
- developing dummy tables to guide analyses;
- First draft of final report
- Final report.

The research protocol should NOT be of the standard type of surveys developed previously by the contractor for fast-moving consumer goods. In order to address this concern, the following conditions will be imposed as part of this contract:

1. During the development of survey instruments, the contractor will carry out exploratory research, using focus group discussions to develop survey instruments and establish appropriate codes for the survey questions related to motivations, constraints, toilet types and preferred features among others. Scales for behavioral determinants need to be pre-tested in a focus group and then tested on a sample of 100 to 150 (depending on how large the questionnaire sample size is) to test their validity and reliability.



2. Client expects to be deeply involved in the household research protocol and instrument development, discussions of potential implications of findings, and other key elements of this study. Therefore, the selected contractor will be required to work closely with client to ensure the researcher(s) understand the survey goals before starting the research outlined in this scope of work. Throughout the project, the selected contractor will keep close communication with the designated client advisor on a regular basis to discuss process and findings, including those of the pre-test.

3. Client requests that the contractor develop an analytical framework of the study prior to finalizing the survey instruments. This analytical framework will include dummy analysis tables for client to review and approve. This will clearly help client to identify the type of data the contractor will be responsible for collecting and providing.

9. MANAGEMENT AND LOGISTICAL SUPPORT

The selected contractor will report to the Aweil Head of Branch on a day to day basis, the contractor will report to the PMER Coordinator who will confer with other technical specialists as needed.

The contractor is expected to have or arrange for all the logistical means required to carry out the survey.

Upon award of the contract, a detailed timeline and reporting schedule will be determined between the contractor and client.

10. FIRM QUALIFICATIONS

The selected firm will be a professional market research center or firm with a track record of at least five years of relevant studies in South Sudan or the Easter African Region. The selected contractor's team will need to demonstrate their experience both in quantitative and qualitative research techniques, particularly as applied to rural populations.

Experience working with ethnically diverse and illiterate populations and managing large rural population-based studies is essential.

Client requests that special attention be given to:

- The development of a detailed work plan including quick mobilization and transportation into the field of field staff,
- A system for the management and quality assurance of the study,
- Complete CVs of the proposed staffing for key personnel and qualitative field staff.



11. STAFFING

The study team composition and qualifications should be as follows:

- Key personnel may only be replaced over the life of the contract with written permission of client. Each of the key personnel should have a Masters degree. Please provide CVs for the proposed key personnel.
- Principal investigator and research project coordinator who will be the primary person responsible for the technical work and will manage the design and implementation process.
- Statistician with a track record on quantitative surveys and analysis and proficient in multivariate analysis and in manipulating large data sets. Knowledge of English is essential.
- Social scientist with a track record in using qualitative methods and data analysis and knowledge of English.
- Qualitative field staff should have at least two years' experience of field work and be fluent in relevant language(s). All qualitative field staff should have at least a college degree and have significant experience with in-depth interviews and focus group discussions.

NOTE: Client's experience with consumer research firms in other countries suggests that assignment of high quality, experienced interviewers to this field staff position (not just to the senior posts that analyze the transcripts) results in the best qualitative data. Please provide CVs for the proposed qualitative field staff.

- Quantitative interviewers (survey enumerators) should have at least one year of experience of field work and fluent in relevant language(s). Field supervisors must have at least two years of relevant experience. All quantitative field staff should have at least a high school diploma.
- Additional staffing requirements will be left to the contractor to determine based on the methodology and approach proposed. For example, the contractor may wish to engage a sanitation specialist to provide additional technical support as appropriate.

All proposed staff must work directly on the study.

12. TYPE OF CONTRACT



This will be a lump sum contract payable as follows:

- 100% on acceptance of the final report.



13. Bid Submission Instructions

- The **Deadline for Receipt of Bids** is: before **2:00 PM 13th July 2022 Central Africa Time Zone (UTC+2)**. Bids submitted after the deadline will not be accepted.
- The Bid shall be submitted by hand or by courier. The Bidder is solely responsible, and the Owner disclaims all liability, for Bids that are late as a result of the courier. Bids submitted through other means such as telex, telegraph, facsimile, e-mail or regular mail shall not be accepted.
- The Donor may extend the Deadline for Receipt of Submission of Bids by issuing an Addendum, in which case all rights and obligations of the Donor and the Bidders previously subject to the original deadline will then be subject to the new deadline.
- Incomplete, vague, late or conditional Bids will not be accepted. Notwithstanding this, the Owner and Donor reserve complete discretion.
- The Complete Bid envelope should be labelled with the following information

Company Name: _____

Contact Person and Phone Number: _____

Address: _____

BID SUBMISSION SSRC/AB/2022/007

Attention: Tender Committee

South Sudan Red Cross Headquarters Juba,

Plot 4, Block Ministries, Munuki Area

Juba, South Sudan **WARNING – DO NOT OPEN PRIOR TO**

2:00 13th July 2022

Central Africa Time Zone (UTC+2)



ANNEX 1: DEFINITION OF IMPROVED SANITATION

A hygienic facility is defined as any excreta disposal facility that does not contaminate water bodies, prevents the direct contact between human beings and excreta, confines excreta in ways that makes it inaccessible to flies and other vectors and prevents emission of foul odors. The joint Monitoring Program for the Millennium Development Goals, led by WHO/UNICEF, defines *improved sanitation* as follows: connections to a public sewer, connection to a septic system, pour-flush latrine, simple pit latrine, or ventilated improved pit. Excreta disposal systems are considered adequate if they are private and separate human excreta from human beings. Not improved systems include: service or bucket latrines where excreta are removed manually, public and shared latrines, and latrines with an open pit.

Basic sanitation facility refers to a facility that:

- Allows for the safe disposal of feces into a pit or other receptacle where it may be safely stored, composted or removed and disposed of safely elsewhere.
- Offers privacy for the user
- Is safe for the user to use: for example, not in a dangerous state, liable to imminent collapse or dangerously unimproved
- Has a latrine pit or receptacle that is functional, i.e. not full or overflowing
- Is more than 10 meters away from a ground water source or surface water source.

An improved sanitation facility means a latrine that has in addition to the above

- An impermeable floor and a tight fitting lid to the latrine, or
- In the case of ecological sanitation (ecosan) where no lid is needed, regular addition of soil, ash and other organic material to cover feces.
- A form of ventilation for the pit without allowing insect vectors into the pit and emission of foul odors from the pit

In the case of a water sealed toilet, improved facility is one that

- Allows for the safe disposal of feces into either a cesspit, leaching pit, septic tank or working sewer
- Offers privacy to the user
- Is safe for the user to use, for example not in a dangerous state, liable to imminent collapse or dangerously unimproved
- The cesspit, septic tank or sewer should be functional i.e. not full or overflowing in the case of the cesspit or septic tank, or blocked in the case of the sewer
- Has a continuous supply of water

ANNEX 2: ADDITIONAL GUIDANCE FOR RESEARCH DESIGN OF CONSUMER RESEARCH

Research areas/questions

Key research illustrative areas of interest for this particular study are as follows (this list will be finalized once the selected contractor commences work). Certain areas may be prioritized for the qualitative phase to allow for top line results to be fed more rapidly into the communication strategy development.

- a) **Household characteristics**, including socio-demographics such as household expenditure level, asset list, ethnic, religious and education parameters; type of sanitation facility and year of acquisition.



b) Sanitation practices (and some key hygiene and water storage practices) and preferences and willingness to pay/affordability:

- What is the current sanitation behavior (open defecation, sharing, etc.)?
- Level of satisfaction with current practice or facility and main reasons for Satisfaction/dissatisfaction
- What could be changed to improve level of satisfaction (e.g., ease of cleaning, smell, etc.)?
- What features/benefits make sanitation products desirable to the respondent (benefits sought)? What are they willing to pay for these benefits (benefits ladder)?
- Are they willing to build structures for the perceived benefits of sanitation?
- Are they willing to borrow money to upgrade their facility and how/where can they do so? What is affordable?

c) Behavioral determinants: The survey will measure behavioral determinants of demand associated with each phase of the “sanitation ladder” (particularly open defecation and use of improved sanitation)¹. Specifically the following factors will be examined:

- The role of social norms (e.g., acceptability of open defecation and of women being seen using toilets)
- Competing priorities within the household: how do households prioritize expenses and what is sanitation competing with (e.g., a radio, a cell phone, goat)
- Roles and decision-making within the household for household improvements and investments
- Previous experience in using toilets and awareness of options
- Self-confidence (self-efficacy) in having the necessary skills to build a latrine
- Ease of access to supplies or suppliers required to build a latrine
- Social (e.g., status), emotional (e.g., pride) or physical (e.g., comfort) drivers associated with sanitation

d) Adoption stage: This research area uses an established series of questions to determine at what stage the household is with respect to adoption² of sanitation (preference, intention and choice framework),

e) Communication channels:

- Ownership and access to radio (including via cell phone) and television media
- Listenership/viewership patterns (preferred channels and times)
- Most common and trusted sources of health-related and sanitation information
- Involvement in or exposure to grass roots/community associations

Respondent Selection

1. Primary respondents: In the quantitative portion, the selected contractor should interview the person in each household who is responsible for decisions about building or improving housing-related facilities, but most critically, for sanitation. (Normally the male householder head)

2. Secondary respondents: Mothers in the majority of households participate in household investment decisions and should be included in gender-specific focus group discussions

¹Bidders should consult *Introducing SaniFOAM: A Framework to Analyze Sanitation Behaviors to Design Effective Sanitation Programs*, available on wsp.org

