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|  | **ANNEXE A:**  **TERMS OF REFERENCE** |  |

**1. Summary**

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| **Title** | Research on the baseline survey of the Bochaganj CHW project. |
| **Purpose** | To identify maternal-child health status of the Nafanagar and Ishania Union of Bochaganj Upazila;  To investigate health behaviour and perceptions about maternal-child health of ever-married women age 15-49, members of the household, members of the community;  To identify sustainability factors for Community Health Workers (CHWs)’s activity. |
| **Expected funding size** | 21,818 USD (Approx. 1,799,985 BDT) |
| **Location** | Nafanagar and Ishania Union, Bochaganj Upazila, Dinajpur, Bangaldesh |
| **Duration** | Six months |
| **Bidding notice releasing** | Thursday 2nd May, 2019 |
| **Bidding conference** | Thursday 9th May, 2019 |
| **Reporting to** | Mr Oh, Kyoung Kyun, Project Director |

**2. Research methodology**

The assessment will be conducted in Nafanagar and Ishania Union utilising the following quantitative methods. For sampling method, probability sampling and two-stage cluster sampling are recommended.

**2.1. Women survey:** A survey will be conducted both involving ever-married women age 15-49 and recently delivered women to identify the service utilisation status; awareness on the availability of services; accessibility and barriers to services (physical, economic, and social); feedback on the service quality, behaviour and knowledge about maternal-child health.

**2.2. Household survey:** A survey will be conducted involving family members of ever-married women to identify their role in affecting maternal-child health, behaviour and knowledge.

**2.3. Community survey:** A survey will be conducted involving community members of Nafanagar and Ishania Union to identify their role in affecting maternal-child health, behaviour and knowledge.

**2.4. CHW survey:** CHW will be asked about current responsibilities and duties involving maternal and neonatal health (MNH) services, motivation to work, knowledge of maternal-child care.

**3. Specific tasks**

1. Conduct a desk review of preceding studies and existing reports, and identify possible barriers and influencers for the uptake of MNH services.
2. Develop data collection and analysis tools for the quantitative assessment.
3. Get approval of Institutional Review Board (IRB).
4. Obtain signed consent forms.
5. Inform catchment communities on the purpose of the visit and obtain consensus.
6. Visit Nafanagar and Ishania Union and conduct the survey on women, household, community and CHW.
7. Transcribe and analyse data.
8. Draft a report on the results, incorporate inputs from Good Neighbors Bangladesh and stakeholders.

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| The assessment should also capture the following indicators:   * Maternal mortality of the target sites during the last year * Neonatal mortality of the target sites during the last year * % of women who received 4 or more antenatal care in their last pregnancy * % of women who received postnatal care within 48 hours after delivery * % of live birth who delivered at the health facilities during the last 5 years * Improvement rate of awareness of maternal health among community |

**4. Expected deliverables**

1. Inception report including the results of the desk review, detailed methodology on data collection and analysis, work plans and data collection/analysis tools. The report should also include discussions around ethical considerations surrounding the research and how these will be addressed. The report should be presented in a succinct manner and should be no more than 25 pages.
2. Data set in an electronic format (EXCEL and SPSS/STATA/SAS etc.)
3. Each of four consent forms and survey questionnaires which approved by IRB.
4. Draft study report summarizing the findings, analysis, and baseline values for the project indicators, and recommendations.
5. Dissemination meetings conducted.
6. Final report including findings, analysis and baseline values for the project indicators, incorporating inputs from Good Neighbors Bangladesh and partners.

**5. Expected timeline**

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| **Activity** | **May** | **Jun.** | **Jul.** | **Aug.** | **Sep.** | **Oct.** | **Nov.** |
| **Final Selection** |  |  |  |  |  |  |  |
| **Inception report** |  |  |  |  |  |  |  |
| **IRB approval** |  |  |  |  |  |  |  |
| **Conducting survey** |  |  |  |  |  |  |  |
| **Draft report** |  |  |  |  |  |  |  |
| **Dissemination meeting** |  |  |  |  |  |  |  |
| **Final report** |  |  |  |  |  |  |  |
| **Payment(%)** | **30%** | **30%** |  | **10%** |  |  | **30%** |

**6. General obligation**

* The employer organisation will not responsible for any costs or expenses incurred by bidders in connection with the preparation or delivery of bids.
* The employer organisation will offer the payment with the contractor’s outcome, and/or result.
* The contractor should be closely kept in touch in terms of academic research methodology, especially in dealing with research design, confounding variables, statistical assessment.
* The contractor should be responsible for carrying out M&E and academic research for the duration of the contract (Jun. 2019-Nov. 2019). If violate amid of the contract period, the contractor is subjected to be reimbursed.
* All intellectual properties, copyrights and any results will be possessed by the employer organisation. The contractor must be approved if it needs to use it. If violate it, it is subjected to be legally charged.
* The total amount of budget posted is inclusive. **No additional offer including VAT**.