

# Terms of Reference for Baseline Survey

**Rowangchhari Area Program**  
**World Vision Bangladesh**  
**Program #: 07416**

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## 1.0 Introductions and Background:

World Vision is an international Christian Humanitarian relief and development Organization serving children, their families and communities to alleviate poverty from the world, primarily through Programme of transformational development, emergency relief and promotion of justice. The vision of World Vision is “Our vision for every child, life in all its fullness; our prayer for every heart, the will to make it so”.

World Vision has working in Bangladesh since 1972 in greater Mymensingh district from a small coordination office at Birisiri under Durgapur Upazila. It played a significant role to re-build the war-torn country the war aftermath. In late nineties, World Vision adopted a new development approach, called “Area Development Program (ADP) that are long term (10-15 years) to address the needs of people at macro-level that would bring about transformation, impact, sustainability and self-reliance in communities especially in the areas where World Vision serves. Now World Vision’s program and activities are spread across 28 administrative districts in Bangladesh. World Vision works through long-term sustainable community development programs and immediate disaster relief assistance in 80 locations at sub-districts, impacting the lives of around 5 million people with various services (Source: <https://www.wvi.org/bangladesh>)

Rowangchhari Upazila is a Hilly Rural Upazila of 442.88 square kilometres located in between 22°03' and 22°20' north latitudes and 92°14' and 92°30' east longitudes. The driving distance from the capital city Dhaka to Rowangchhari Upazila is about 340 km and distance from Chattogram ACO (Bandarban District Headquarter) is about 21 km (driving distance). It is one of the least populated Upazila/ sub-districts under Bandarban Hill District of Bangladesh and home to Bengali and 08 ethnic communities like as Marma, Tanchangya, Bawm, Chakma, Tripura, Khumi, Khiyang and Mro. Furthermore, the Upazila is geographically distinct from most part of plain land of the Bangladesh, characterized by very steep, rugged mountainous, deep jungle, remote communication system and scattered villages. The rural community in Rowangchhari is divided into small villages based on minority groups. Quality service delivery is affected by the rural nature of the Upazila. Civil Society Government and local government organisations are addressing child well-being. Political leaders, rich and educated persons, union chairpersons, Headman, Karbari, and Local government have structures to resolve conflicts. Faith Based Organizations (FBO) play an important role in the community, and people are obedient to religious leaders. In this area, people live in one place altogether like slums and their cultivable lands which is known as “JHUM” are far from their village.

World Vision Bangladesh initially started its operation at Rowangchhari sub-district named as Rowangchhari AP since October 01, FY’2023. The program impact areas are the four most vulnerable locations (Unions) namely Rowangchhari Sadar Union, Alekhong Union, Nowapatang Union and Tarachha Union of Rowangchhari sub-district, Bandarban District under Chittagong Division. The area has 6330 HHs with a population of 28,394. Rowangchhari AP implementing the Health and Nutrition TP, Livelihoods TP & Community Engagement & Sponsorship Plan (CESP) in the AP working area. The AP continuing implementation of its Technical Programs (TPs) and CESP to ensure the well-being of the children, especially the most vulnerable.

The programme will contribute to achieve National and CHT governmental strategies, policies or development priorities. The proposed programme of AP will be aligned with the SDGs and government's 8th-5th years plan. Bangladesh Government is intervening different development programs towards to achieve the SDG goal. Therefore, this programme will contribute to achieve national and divisional strategies, policies or development priorities for the inhabitants of Bangladesh. The issues that included in WVB Strategy contribute to 09 SDGs. The proposed AP's activities will contribute more or less to the following 08 SDGs out of 17. Goal 01: No Poverty, Goal 02: Zero Hunger, Goal 03: Good Health and Well-being, Goal 05: Gender Equality, Goal 06: Clean Water and Sanitation, Goal 08: Decent Work and Economic Growth and Goal 16: Peace, Justice and Strong Institutions. Goal 17: Partnership for the Goals.

The status of health, nutrition and WASH is among children under 5 years of age in Rowangchhari Upazila, Stunting (height for age) rate is 46% and Underweight (weight for age) is 41% as per MICS 12-13. Using status of sanitary latrines in Rowangchhari; at Households level is 33% (MICS-12-13) and more than 90% of the population uses open and unhygienic latrines. At least 4 times ANC (Ante Natal care) visit found only 7%, where national level is 47% (BDHS-2017). On the other hand, institutional delivery is average 30% but access is difficult such as only 10% to 20% for remote areas. Besides, postnatal health check-up is only 2% in Bandarban district. (MICS12-13). On the other hand, infant mortality rate is 27 per 1,000 live births, which is apparently satisfactory, but the actual rate would be higher than the Health Bulletin suggests. (Health Bulletin 2016). Using safe drinking water by households is - 33% (MICS-12-13). In the area, Less than 20% population uses water source from the deep tube wells, ring wells and jhiri and 80% people lives in rivers, streams, canals and river water by drinking, which is often remains contaminated. Using safe drinking water by households is - 33% (MICS-12-13). In the area, Less than 20% population uses water source from the deep tube wells, ring wells and jhiri and 80% people lives in rivers, streams, canals and river water by drinking, which is often remains contaminated.

The most common livelihoods in this area are Jhum cultivation (traditional cultivation in the hilly land), fruit gardening (mango, banana, papaya, pineapple, cashew nut, coffee), livestock rearing (cattle, goat, sheep, pig, beef fattening and poultry), vegetables (beans and cucumber), spices (turmeric, ginger, onion and garlic) very few small businesses and motor driving. Poverty rate of HHs of this Upazila is 54.1%. (BBS 2016). 94% HHs are poor and ultra-poor and only 4.67% are middle and 1.05% are rich. (MV Mapping 2023). 60% of the people are engaged in small scale crop production as well as rearing ducks, goats, sheep and pigs in small farms. Average monthly income of poor family is BDT 3000.00 to BDT 5000.00.

Regarding Child Protection, data shows that 96% children are affected by child violence and abuse. Birth registration rate is only 13.2% and child marriage status is 16.3%. The reason behind these numbers is that they don't know about their children rights and if they know, they don't want the children to know. So, children have no knowledge of child protection. Nowadays, government and NGOs are trying to support in child protection issues and providing them awareness messages, but the coverage is very low in this area. (AP Assessment Report 2022).

Through TPs, WV Bangladesh aims to achieve sustainable well-being of 14.4 million most vulnerable children by addressing the causes and effects of poverty, inequality and injustice in the country. In WVB 5-years (FY2021-FY25) revised Country Strategy; four

(4) ministry or strategic objectives were formulated to contribute to the well-being of children, including: M01: Improve health and nutrition status of mothers and children; M02: Improve access to and quality of education; M03: Ensure children are protected and cared for; and M04: Increase community resilience. There are 02 Technical Programs i.e. Health & Nutrition, Livelihoods including Community Engagement and Sponsorship Plan (CESP) have been designed, and these projects are now implementing in the targeted communities. For better understanding about the technical programs and CESP, following short description:

- 1) **Health and Nutrition Technical Program:** Aiming to "Improve the health and nutritional status of children by FY2024" the Health and Nutrition TP implementing planned interventions aligning with core project models i.e. PD Health & TTC and contributory model as ManCare, IWASH and COH to address & increase nutritional status of children of aged 0-59 months, increase access to health care services and improve community based Inclusive WASH practices.
- 2) **Livelihoods Technical Program:** Livelihoods Technical Project focus on specific interventions/models to address the stated issue and causes of targeted Households in the communities. Through this TP, UPG, BSL, FMNR, Celebrating Family (CF), MenCare, CBDRM, CVA core and enabling project model adopted which will contribute to address extreme vulnerable and extreme poor households resulting enhance food security and social protection services through capacity building awareness raising and emergency support for UPG HHs, increase opportunity for creating diversified income sources, increase social integration on gender equitable relations in families and community. increase sustainable livelihood options for the marginal poor and increase opportunity to create enabling environment that influence economic and social actions.
- 3) **Community Engagement and Sponsorship Plan:** CESP developed and implementing which aiming to empower communities to take ownership for ensuring child wellbeing, where community based organizations and duty bearers (VDS, child & youth forum) will develop shared plan, implement, monitor and review their development efforts in collaboration with WVB and other actors (local government, CSOs and other stakeholders), community partners will utilize child sponsorship to care for and protect children and enable girls and boys, families, communities and sponsors to have life enriching experiences and children are protected from Gender Based Violence in the community.

## 1.2 Rationale for Conducting Baseline Survey:

Rowangchhari AP developed its Area Program plan aligning with LEAP3 Cycle 2. The AP adopted Health and Nutrition Technical Program, Livelihoods Technical Program and Community Engagement and Sponsorship Plan. Each Technical Program is accompanied with log frames; detailed implementation plans by annual, M&E plans and performance indicators tracking tables.

As the Baseline survey provides a starting point from which a comparison can be made; and ideally, a baseline is conducted prior to the beginning of the program interventions and becomes the point of comparison for monitoring and evaluation data; and the

baseline survey focuses on the outcomes of Technical Programs and CESP; and LEAP specifically emphasizes to conduct a baseline within first year of implementation period. So, World Vision authority has decided to conduct Baseline survey for the Rowangchhari Area Program.

The Baseline Survey processes will be started from January 2024 and to be completed by March 2024 (including SO feedback and final report). World Vision Bangladesh PQA team will conduct the Baseline Survey of Rowangchhari AP including analyse quantitative and qualitative data and prepare the Baseline Survey report.

### **1.3 Objectives of the Baseline Survey:**

The overall objective of the baseline survey is to assess the baseline situation of all Technical Program and CESP included in AP focussing primarily at outcome levels. The study will conduct in a collaboration of world vision Bangladesh and consulting firm. The specific objectives are as follows:

- To assess existing social<sup>1</sup>, economic<sup>2</sup>, demographic<sup>3</sup>, health<sup>4</sup>, environmental<sup>5</sup> conditions of the community people, especially the women and children for assisting planning, implementing and monitoring & evaluation of the Technical Program and CESP.
- To establish a sound, quantitative and qualitative base information by assessing the levels of awareness, knowledge, attitude and practices of the above-mentioned targeted population on selected topics as per logical frame on Goal & Outcome indicators.
- To use baseline data in measuring the changes over time and enabling comparison both at national and AP levels. The phase evaluation report will judge progress largely by using these baseline indicators and information.
- Set benchmarks of indicators that WVB designed in LEAP3 Cycle 2 and produce grant proposals using the update data.

### **1.4 Description of Technical Programs Being Baseline:**

**Technical Program wise goal, outcome with indicators and major interventions are given below:**

Technical projects and social context of the program area have been described in the Area Program Plan. Log-frames, M&E plans and detailed implementation plans (DIP) of individual projects by year and for the entire phase which have incorporated clearly in Area Program plan. These documents will help to execute the study process. Rowangchhari AP is consisting with Health and Nutrition TP, Livelihoods TP and CESP. Listed indicators under Technical Projects to be broadly considered during Baseline. In addition to this, WVB will have the opportunity to include reliable indicators if required. Technical Program/Project wise Goal and Outcome indicators attach below;

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<sup>1</sup> Social condition refers to issues like poverty, standard of living, health, gender equality, safety, well-being, and education of the community etc.

<sup>2</sup> Economic condition refers to financial status, ownership of assets, income, production, new modern technologies, labour and employment etc.

<sup>3</sup> Demographic condition refers to status with dynamic of population characteristics i.e. age, sex, occupation, education, status in household, status in community etc.

<sup>4</sup> Health condition refers to issues related to health care and prevention services etc.

<sup>5</sup> Environmental status deals with land, trees, water, air, climate and minerals etc.

## **2.0 Baseline Target Audiences:**

There are several stakeholders/partners/program participants of both direct and indirect in nature. The direct stakeholders/partners are Registered/Sponsored children, VDS members, child forum members, teachers, leaders and child protection subcommittee members. The indirect partners/program participants include parents of registered/sponsored children family member, community facilitators etc.

### **The direct stakeholders/partners/beneficiaries are:**

- Children 0-17 years
- Parents and caregivers
- Sponsored and non-sponsored children and their family members
- Members of some committees like VDSs etc.
- Youths
- Other community mothers and adolescents
- Indigenous children and adults
- Child Forum and VDSs
- Farmers/Producers
- Social, religious and community leaders
- Para Karbari and Headman
- GoB & NGO representatives

### **The indirect stakeholders/partners/beneficiaries are:**

- Non-registered/sponsored children of the community
- Family members of pregnant and lactating mothers and adolescents,

All the stakeholders would be considered for HH survey, FGD, Document review, KII, SWOT. The baseline result would be shared with VDS, child forum and other stakeholders before finalization of the baseline report. The SO and/or donors will also be informed the baseline results before finalizing, so that their comments or suggestions can be incorporated.

## **2.2 Target Population:**

Target population is determined based on the demand of the indicators:

- Children 0-<5 years, 6-18 years
- Mother/Caregiver of the 0 to <5 yrs. Children
- Parents/Caregivers
- Adolescents (10 to 19 aged)
- Youth group (15-24 years)
- Community leaders/influential, etc.

In all aspects gender disaggregation and other vulnerability like persons with disability data will collect and analyse.

### **HH & Population Information:**

Name of Union & PFA	Total HHs	Total Population	Children (0-5)	Children (6 to 11)	Children (12 to 14)	Children (15 to 17)	Adults
Rowangchhari Sadar Union (PFA-1)	1994	9322	1032	890	804	954	5642
Alekhong Union (PFA-2)	1248	5356	618	542	304	284	3608
Nowapatang Union (PFA-3)	1243	5144	470	489	339	319	3527
Tarachha Union (PFA-4)	1845	8572	1146	1044	639	660	5083
<b>Grand Total</b>	<b>6330</b>	<b>28394</b>	<b>3266</b>	<b>2965</b>	<b>2086</b>	<b>2217</b>	<b>17860</b>

### 3.0 Baseline Survey Methodology:

The baseline survey should follow both the quantitative (questionnaire) and qualitative (FGD, KII, document review) methods for data/information collection. In the past, WV had used two-stage cluster sampling design for the baseline surveys of AP due to its principle of simplicity, low cost and comfort of operation. Besides, the well-known Demographic and Health Survey (DHS) in Bangladesh and elsewhere to draw a nationally representative sample, and by UNICEF follow similar methodology for its Multiple Indicator Cluster Survey. Details are as follows

#### 3.1 Sampling Strategy:

- The ultimate focus area is AP and primary sampling unit (cluster) is village/ward and then household/individual. Therefore, sampling should consider as strata.

#### 3.2 Sample sizes Estimation

For the quantitative survey sample size is estimated using the following formula:

$$n \geq DEFT \frac{[Z_{\alpha/2}\sqrt{2P(1-P)} + Z_{\beta}\sqrt{P_2(1-P_2)} + P_1(1-P_1)]^2}{(P_2 - P_1)^2}$$

- Where,
- n = Desired sample size,
- DEFT: Design Effect,
- $Z_{\alpha/2}$ : assume 2-sided test with  $\alpha = 0.05$ ;  $Z = 1.96$ ,
- $Z_{\beta}$ : assume power of 80%;  $Z = 0.84$ ,
- $P_1$ : expected proportion for baseline survey or in a survey particular survey domain,
- $P_2$ : expected proportion for follow-up survey or in a survey particular survey domain,
- $P$ :  $(P_1+P_2)/2$

The above calculation shows the AP wise total desired sample (n) by selecting various indicators from all TPs. In the table the estimated sample size varies from **580 to 639 Households**. AP collected data related to these indicators will be weighted for its representativeness at the analysis stage.

The sample size of this integrated baseline survey was estimated considering the design effect=1.5, power=80%, Type-1 error=5%, and proportion of expected changes from baseline to end line=8-10% considering of indicator's which should not be lower than the prevailing  $P_1$  (one shows the same) proportion including non-response rate=10%. Design effect considered 1.5 because WVB usually use design effect 1.5 during baseline and most of the national survey conducted by Government and other INGOs considered design effect 1.5 for study; geographical context and population characteristics in Bangladesh are more or less similar.

Consider the above situations, the estimated sample size for this baseline survey should be minimum **660 for Health & Nutrition TP, Livelihoods TP and CESP.**

The **qualitative** part of this survey will include selected adequate number of samples in AP area for conducting FGD as per indicator's demand.

### 3.3 Sampling Technique

As the quantitative study design considered Multi- stages cluster sampling technique and the respondents of the quantitative part of this baseline survey will be in different categories like adult HH member, mother/ caregiver of 3-5 years children, Youth, Adolescents, etc. sampling frame of respondent for special category is not possible to prepare again due to resource constraints. It may be challenging to fulfil the category wise respondent quota in different (village/ward) of AP area. Alternatively, WVB will follow 30-Cluster Sampling Technique where 30-cluster village/ward will be selected using Probability Proportionate in Size (PPS) procedure. Step to determination of first and subsequent within the AP working area will be as follows:

- Determine the sampling interval (total cumulative households / 30 clusters)
- Select a random number between 0 and the sampling interval using random number table (if the interval is 3 digits, choose 3 digit using random table/ a ten taka note)
- The selected random number identifies the first village or cluster to be surveyed
- Sampling interval plus the random number will be the second cluster
- Sampling interval plus second cluster number will be the third cluster, thus continue until 30 clusters. See attached example:

After selection of 30 clusters, HH selection process from each cluster will be as follows:

- Sketch a detail map of the area (primary sampling unit) with showing the external boundaries or natural geographic division such as rivers, forested area, streets block of housing etc.
- Divide the area into geographic clusters.
- The size of the cluster will have based upon the number of households to be surveyed. i.e. number of cluster = Total number of households in the village / 100-120 HH.
- Each cluster should contain approximately the same number of households (e.g. 100 to 120 for each segment)
- Cluster will be determined using a random sampling method like lottery.
- Go to the selected cluster and do list of all HHs of the cluster using the attached tool

- Divide the total HHs of the list (of the selected cluster) with # of sample you want to interview. Example: 100 HH in the cluster and want to interview 22 HHs. So,  $100/22=4.54$  round interval among HHs is four. As per sample, data will collect from 22 HHs for three TPs and CESP.
- Select one HHs within 1-4 by using lottery or a ten-taka note (say last digit of the note and select the first sample HHs).
- Attached log-sheet to count # of sample already interviewed and how many remains against each indicator of the TPs and CESP.

Household level data collection will start through interviewing adult respondents like Mother/Caregiver of Children. Two enumerators (one male and one female) will go at each cluster and complete 22 HH's interview. Each pair will complete one cluster 1<sup>st</sup> and then go to another cluster and thus data collection from 30 cluster will complete.

#### 4.0 Expected output from the Baseline survey team:

WVB will form a Baseline survey team with the internal technical expertise (PQ & TP Technical) to accomplish the entire Baseline survey process including report producing.

#### The Survey team will ensure the following tasks:

- Review the project log-frame and related documents.
- Ensure that both the quantitative & qualitative indicators for baseline.
- Design Survey methodology, data collection technique, sample size and appropriate tools in line with project data collection requirements
- Finalizing the tools both in English language and translate into Bangla version (quantitative & qualitative) after pre-testing at field level and share the field test result with NO/ACO before finalizing the survey tools.
- Organize at least 4 (four) days comprehensive training sessions including field practice to orient the data collection team members/supervisors on tools and survey methodologies.
- Develop database in SPSS (for quantitative part)
- Design dummy tables, graphs and summary formats for report writing
- Use both quantitative data analysis using statistical techniques and qualitative data analysis in calculating benchmark at outcome level indicators.
- Arrange sharing sessions/dialogue for presentation of survey findings to AP/ACO/NO staffs and others partners for feedback
- Follow up data collection and provide on the spot guidance to the team during field survey
- Conduct participatory sessions for qualitative information
- Prepare report through analyzing quantitative and qualitative data
- Share the draft report for feedback
- Submit the (revised) final report

#### 5.0 Roles Clarification

The study will conduct in a collaboration of world vision Bangladesh and consulting firm, the below table clarify the role and responsibility of WVB and consulting firms.

SL	Roles	Responsibility
1.	Finalizing the ToR	World Vision Bangladesh

2.	Circulation for consulting firm selection and technical and financial scoring for hiring	World Vision Bangladesh
3.	Design an appropriate survey methodology which include sampling method, sample size, sampling plan having discussions	World Vision Bangladesh and Consultant
4.	Tools Development Review and Finalization	World Vision Bangladesh and Consultant
5.	Employ the service of data collectors with sound knowledge and adequate experience in the methods of data collection (With good ration of male, female and conversant with different language dialect).	World Vision Bangladesh
6.	Develop/finalize required data collection tools (both for quantitative and qualitative);	Consultant
7.	Develop and update application/database for the survey using suitable platform (For Quantitative data collection used online tab based platform i.e. modern ICT technologies using mobile/tablet based platform like ODK)	Consultant
8.	Provide orientation to the concerned staffs/enumerators before starting of survey each time and ensure their clear understanding on the particularities of the assignment.	World Vision Bangladesh and Consultant
9.	Qualitative and Quantitative Data Collection and Data Cleaning	World Vision Bangladesh
10.	Data Analysis, and Reporting	Consultant
11.	Review and provide feedback on baseline narrative report	World Vision Bangladesh
12.	Feedback incorporating and finalizing the report	Consultant

### 5.1 Activity Schedule:

Detail activity schedule in the following matrix.

SL	Activity Type	W1	W2	W3	W4	W5	W6	W7	W8	W9	W10	W11	W12
1	Preparation & planning												
2	Consultant Hiring												
3	Data collection tool development (qualitative & Qualitative)												
4	Deploy Data Enumerators												
5	Orientation for Data Enumerator												
6	Data collection (quantitative)												
7	Data collection (Qualitative)												
8	Data cleaning, data processing & Analysis												
9	Draft report preparation & submission												
10	Feedback addressing & Final report submission												

### 5.2 Timeframe:

The whole process of Baseline Survey will be completed by a period of 90 days (Calendar Days) i.e. January 01, 2024 to March 25, 2024.

Activities
Quantitative & qualitative tool develop
Deploy Data Enumerators
Orientation for Data Enumerators
Data collection (Quantitative & Qualitative Tools)

Analysis and Reporting
Draft Report preparation
Feedback sharing from SO
Feedback incorporation as per feedback of SO
Final Report submission

### 5.3 Tentative Report Outline:

- Coverage page
- Table of content
- Acronym
- Acknowledgement
- Executive summary
- Introduction
- Background
- Objectives and methodology
- Key findings (quantitative & qualitative)
- Observations and Findings (Detailed Narrative)
- Identified benchmarks by outcomes, outputs and indicators and compare with District and National data.
- Programming Opportunities/recommendation
- Limitations of the survey
- Recommendation
- Conclusion
- Others if any
- Annexure including table presentation of all quantitative data collected and summary of qualitative data by project, data collection tools, Location/Country Map.

### 6. Technical Proposal Evaluation Criteria

The proposal will be reviewed by the evaluation committee and will be evaluated in line with the guidelines of World Vision Bangladesh. The evaluation committee will evaluate the proposals based on their responsiveness to Terms of Reference, applying the evaluation criteria and point system specified herein. Each responsive proposal will be given score. Proposal(s) will be rejected at this stage if it does not respond to important aspects of the Terms of Reference or if it fails to achieve the minimum technical score indicated below. The technical part of the proposals will be evaluated on the basis as detailed below

Evaluation criteria	Weighted score
Understanding the TOR	20
Relevant Experience of the Firm	20
Team Profile including Strength of consultants (CV of the Team Lead and Associates)	20
Understanding on methodology and prescribed tools	20
Sample report of previous work	20

Pass Mark - 60 in technical proposal

## 7.0 Payment Terms

Payment shall be made after submission of the final report and accepted by World Vision Bangladesh. VAT and TAX shall be deducted as per Govt. rules and regulations. Quoted price should be including VAT and TAX.

## 8.0 Conclusion

This baseline survey data will portray the context of Rowangchhari AP working area where WVB intends to work. Hence, it will possible to use the data for target settings to improve the context as necessary. At the same time AP will set target as per present status of the TPs & CESP indicators and landscape analysis. This baseline survey data will also indicate the recommendations. AP will consider those during set the target of TPs & CESP for its running Phase. Apart from these, considering the target AP will conduct outcome level monitoring in each year to see the progress. Based on the monitoring findings, AP will have the scope to revise output level target in each year. Moreover, the baseline data will also help to develop PNS/Grants project proposal that would be authentic to donor.

## 9.0 Contact Person:

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