

Terms of Reference (ToR) for Capturing Lessons Learnt from the LEAP Project Implemented by Plan International Bangladesh

1. About Plan International

Founded over 85 years ago, Plan International is one of the oldest and largest children's development and humanitarian organizations in the world. Plan International plays an important role in mobilizing children, communities, and civil society organizations to claim the rights of children, especially girls and achieve agreed-upon local development priorities, towards a commitment to ensuring the well-being of children in support of the United Nations Convention on the Rights of the Child (UNCRC). Plan International works in fifty-two developing countries across Africa, Asia and South America, and twenty-one countries raise funds to support these efforts.

1.1 About Plan International Bangladesh

Plan's vision is of a world in which all children realize their full potential in societies that respect people's rights and dignity, with high-quality programs that deliver long-lasting benefits. Children are at the heart of everything we do.

Plan International has been operating in Bangladesh since 1993. Plan International Bangladesh's Country Strategy (2020-2030) is designed to empower adolescent girls and young women, to be heard, to live without fear of violence and to achieve their rights. In doing so, Plan International Bangladesh (PIB) will:

- empower children and young people as drivers of systemic change to gender norms and power relationships;
- promote an enabling environment for girls and young women to realize their sexual and reproductive health and rights and to live free from violence;
- raise public and private sector support for young women to access decent work opportunities in the twenty-first century labour market and have control over resources.

Plan International Bangladesh (PIB) has the country office in Dhaka, from where we are operating projects in Dhaka, Rangpur, Barisal and Chittagong divisions. Since 2017, we have a strong presence at Cox's Bazar district under Chittagong division. Along with our main office at Cox's Bazar, we have two more field offices i.e., Ukhiya and Teknaf. By following the global mandate on emergency response and Disaster Preparedness Process (DPP) 4¹, PIB supports both the Rohingya and host communities through humanitarian projects that provide lifesaving and resilience building assistance, while incorporating disaster risk management in its development work, to ensure protection of the most vulnerable groups, such as children, girls and young women, from the harmful impacts of conflicts, disasters and climate change. PIB also is attempting to strengthen its position within the climate resilience sphere, through a climate resilience model to contribute towards a long-term program that will provide durable solutions for girls, young women and youth in climate impacted areas, with a specific focus on their resilience and adaptive capacity building to the effects of climate change. Through this

1 Disaster Preparedness Plan (DPP) 4, Plan International Bangladesh, 2021.

initiative, PIB will also be a host to the global climate hub which will support the implementation of the model.

2. Details of the LEAP Project

LEAP (Lifting Healthy, Empowered and Protected Girls and Women in Cox's Bazar) is a 3-year (March 2022-March 2025) gender-transformative Government of Affairs Canada (GAC) project, that aligns with Feminist International Assistance Program's (FIAP) core action areas around the promotion of gender equality for women and girls and human dignity (health/SRHR). The project is being implemented in host communities (18 unions) in selected four sub-districts (upazilas of Cox's Bazaar, Ramu, Teknaf and Ukhiya) of Cox's Bazar District in Chittagong Division, south-eastern Bangladesh and three selected Rohingya camps. The host communities are in two Unions in Ukhiya, two unions in Teknaf, seven Unions in Ramu and seven Unions in Cox's Bazar Sadar sub-district. Along with the host communities, the project is working in 3 Rohingya camps (namely 1W, 3 and 4 of Ukhiya sub-district). LEAP has engaged with a variety of stakeholders to facilitate gender- and adolescent-responsive and inclusive (GARI), Sexual and Reproductive Health and Right (SRHR), Sexual and Gender Based Violence (SGBV) and Mental Health and Psychosocial Support (MHPSS) services by strengthening government health systems, including establishing/strengthening referral linkages (from community to health facilities and between different sectors) to bring transformative change among vulnerable adolescent girls and young women in host communities and camps. Plan International Bangladesh (PIB) is implementing this with 4 partners namely: HOPE Foundation for Women and Children of Bangladesh (HOPE), Partners in Health and Development (PHD), Samaj Kallyan O Unnayan Sangstha (SKUS), and Mukti Cox's Bazar.

2.1 Project's expected outcomes (Logic Model and performance measurement framework)

Ultimate Outcome

Advance the realization of sexual and reproductive health and rights (SRHR) and prevention of SGBV among diverse groups of adolescent girls and young women in Cox's Bazar host communities and refugee camps.

Intermediate Outcomes

Responding to this ultimate outcome, there are 3 intermediate outcomes

1100: Improved individual and collective agency and resilience of adolescent girls and young women to exercise their Sexual and Reproductive Health (SRH) and protection from SGBV.

1200: Strengthened health systems to provide gender- and adolescent- responsive and inclusive (GARI) SRH, SGBV and MHPSS services to adolescents and young people, particularly girls and young women.

1300: Enhanced capacity of local stakeholders to advocate for evidence-based and accountable GARI SRH and SGBV services and policies.

The project measurement framework that lists the indicators at these levels are as follows:

Outcome	Indicators	Baseline results
ULTIMATE OUTCOME INDICATOR: Advance the realization of sexual and reproductive health and rights (SRHR) and prevention of SGBV among diverse groups of adolescent girls and young women in Cox's Bazar host communities and refugee camps		
1000.1	Average score of the Woman and Girls Empowerment Index (WGEI)	AGYW (15-24): 38% AG 15-19: 33% YW 20-24: 43% Refugee AGYW (15-24): 32% Non refugee AGYW (15-24): 39%
INTERMEDIATE OUTCOME INDICATORS 1100: Improved individual and collective agency and resilience of adolescent girls and young women to exercise their Sexual and Reproductive Health (SRH) and protection from SGBV		
1100.1	% of adolescent girls and young women who state that they have a right to say no to sexual activity	AGYW (15-24): 50% AG 15-19: 45% YW 20-24: 55% Refugee AGYW (15-24): 50% Non refugee AGYW (15-24): 51%
1100.2	% Average level of adolescent girls and young women decision-making regarding SRH services, including use of modern methods of contraception	AGYW (15-24): 38% AG 15-19: 30% YW 20-24: 47% Currently married AGYW (15-24): 53% Currently unmarried AGYW (15-24): 29% Refugee AGYW (15-24): 29% Non refugee AGYW (15-24): 39%
1100.3	Extent to which adolescent girls and young women receive support from family members for the exercise of their SRHR	AGYW (15-24): 78% AG 15-19: 77% YW 20-24: 79% Refugee AGYW (15-24): 80% Non refugee AGYW (15-24): 77%
INTERMEDIATE OUTCOME INDICATORS 1200: Strengthened health systems to provide gender- and adolescent- responsive and inclusive (GARI) SRH, SGBV and MHPSS services to adolescents and young people, particularly girls and young women		
1200.1	1200.1 Level of gender responsiveness, adolescent friendliness and inclusion (GARI) of SRHR services in targeted health facilities	56.9%
1200.2	% health facilities operating referral pathways for survivors of GBV/SGBV	50%
1200.3	% of Health facilities that had at least 3 modern forms of contraception	77%

	during the 3 months before the assessment	
1200.4	% adolescent girls and young women reporting they have access to SRHR information and services	AGYW (15-24): 32% AG 15-19: 20% YW 20-24: 24% Refugee AGYW (15-24): 27% Non refugee AGYW (15-24): 37%
INTERMEDIATE OUTCOME INDICATORS 1300: Enhanced capacity of local stakeholders to advocate for evidence-based and accountable GARI SRH and SGBV services and policies		
1300	# (and description) of evidence-based WRO/YLO SRHR related advocacy asks "supported" by government policymakers	0
IMMEDIATE OUTCOME 1110 INDICATORS: Adolescent girls and young women are empowered with knowledge and skills to overcome social and structural barriers related to GE, SRHR, SGBV prevention and protection, MHPSS and autonomous decision-making capacities to make informed life choices.		
1110.1	% of adolescent girls and young women who perceive women/girls as equal to men/boys	AGYW (15-24): 54% AG 15-19: 53% YW 20-24: 55% Refugee AGYW (15-24): 37% Non refugee AGYW (15-24): 58%
1110.2	% Average level of knowledge among adolescent girls' young women about SRHR/SGBV prevention and protection	AGYW (15-24): 46% AG 15-19: 39% YW 20-24: 53% Refugee AGYW (15-24): 34% Non refugee AGYW (15-24): 49%
IMMEDIATE OUTCOME 1120 INDICATORS: Adolescent girls and women empowered through increased social capital to overcome gender, cultural and intersectional barriers to SRHR mental health, and SGBV		
1120.1	Average level of knowledge among adolescent boys' club members on GE, SRHR and SGBV (disaggregated by age, region)	46%
IMMEDIATE OUTCOME 1210 INDICATORS: Enhanced capacity of community and facility-based service providers and government decision makers to deliver gender and adolescent responsive integrated (GARI) SRH, SGBV and MHPSS services to adolescent girls and women		
1210.1	Average level of knowledge among community and facility-based service providers on GARI SRH, SGBV and MHPSS services	50%
IMMEDIATE OUTCOME 1220 INDICATORS: Improved availability of appropriately resourced facilities to provide GARI integrated SRH, SGBV and MHPSS services		

1220.1	Extent to which targeted health facilities meet service readiness standards for adolescent SRH (including FP) services	39%
IMMEDIATE OUTCOME 1310 INDICATORS: Enhanced capacity of women rights organizations (WROs) and youth led organization (YLOs) to conduct evidence based advocacy to improve SRHR, SGBV and mental health services		
1310.1	# of advocacy initiatives completed by WROs/YLOs	0
1310.2	# WROs/YLOs that have formed action plans	0
1320: Enhanced accountability, decision making and participation in community based structures		
1320.1	Degree to which government mechanisms (C&CFC) involve adolescent girls and young women in SRHR service planning, delivery, monitoring	BL score for this indicator based on 3 sub-components: I. Attendance female members in C&FMC meetings: Score of 3 (noted by 80% groups) which is High. II. Ability of female members to raise voice in C&FMC meetings/discussions: Medium score based on the average scores of the sub-components III. Female members influencing decisions: Score of medium
1320.2	# data sharing sessions held	0
1330 Communities in Cox's Bazar benefit from strengthened ISCG coordination mechanisms dedicated to humanitarian/development nexus interventions, by leveraging the experience and perspective of international and national NGOs		
1330.1	Progress made in resolving access issues identified by ISCG members	6 (a-f) access issues identified by ISCG members: a) supporting humanitarian workers to gain easy access to the camp sites for work b) Clarification of guidance from government authorities on involvement of volunteers from host communities to work in camp sites based on existing framework c) Work with RRRC to remove duplications in NGO approval forms d) Work with NGO Affairs Board to reduce the reporting burden upon NGOs by advocating for the need of a common format for reporting humanitarian work in camps e) Support organisations that report bottlenecks in registration process by NGOs f) Advocate for policy level change to extend the FD7 implementatin period

3. Details of this Assignment

3.1 Specific Objectives of the Assignment

PIB is looking for an experienced consultant to help support with the development of a process document to capture programmatic lessons learnt from the implementation of the LEAP project in Cox's Bazaar's host and camp settings.

Using primarily qualitative data collection techniques, this exploratory process documentation has the following **objectives**:

- consolidate and share learnings on the implementation of LEAP's SRHR programming in Cox's Bazaar's camp and non-camp settings; and
- support future business development of programming in similar contexts.

The results from this are expected to support endline results which will be focused on reporting against PMF outcome targets (in the 1100s, 1200s and 1300 outcome streams) during the final reporting to the donor.

There are also several **sub-objectives**² of the study, which have been identified under two broad heads of a) **targeted project outputs**; and b) **overall project design**. These are listed below:

A) Targeted Project Outputs

The study proposes to focus on **5 CORE INTERVENTIONS**³/**output streams**⁴ namely, adapted CoC (1111/1124), young married women's groups (1112), CHW household visits (1211), referral pathway strengthening (1222/1223), work with WROs/YLOs (1311/1312) and access work through ISCG (1331) to answer the following questions through discussions with partner staff, project participants as well as PIB staff:

- Were the select interventions implemented⁵ the same way in refugee/camp and non-refugee settings?
 - What adaptations were made, if any? Why were these adaptations important?
 - If no adaptations were made, why was that the case?
 - What other adaptations could have been made and why?

² These are listed as questions under each of the 2 heads. During the onboarding and inception phase of the project, detailed discussions will take place with the successful candidate on the scope to streamline this if required.

³ Considered core due to the heavy resources as well as their critical role towards contribution to PMF outcomes. Table-1 lists these outputs along with sampled groups.

⁴ Details of each intervention will be provided to the successful consultant at the time of onboarding

⁵ Implementation of interventions covers the following aspects: a) Training curriculum/key messages; b) Language adaptations, c) Training tools; d) Session planning; e) Mobilization of participants; f) Retention of participants; g) Monitoring of outputs. Table-2 provides more details on the probing questions per output. This will be further streamlined during the onboarding process.

- What can we learn from the implementation approaches in the camp and host settings?
- What kind of challenges were faced by implementors (from partner organisations) based on their experiences in the host community and camp settings?
- What feedback do the participants of the selected interventions have on these outputs?

Further details on the proposed sample have been provided under section 4 suggested along with probing questions.

B) Overall Programme Design

In addition to the discussions on targeted outputs, this process document will also **engage PIB staff** (namely, PIB Program Manager/M&E specialist/SRHR specialist/SGBV specialist responsible for various implementation of the project) **to reflect on the following four components**⁶ related to the appropriateness of the design of the LEAP:

Component 1: Reflections on the LM/PMF: did the LM/PMF fit with the context?

- Were the PMF indicators (under the existing 1100/1200/1300 outcome streams) for the project relevant for the context? If not, which ones need to be reviewed and why?
 - Were the PMF indicator definitions⁷ relevant for the project?
- What is the overall understanding of the donor's Gender Equality-03 coding⁸? Are you in agreement with the GAC GE-03⁹ coding done at proposal stage? In what ways, if any, did the GE-3 coding influence project implementation strategies? Were there any challenges? Is there a recommendation for future projects implemented in similar contexts?
- Going back to their experiences of implementing the LEAP project,
 - Which interventions (under 1100/1200/1300)¹⁰ could have been deprioritized or removed for this project? Why?
 - Were there any interventions (under 1100/1200/1300 outcomes) completely missing from the project that should have been incorporated to address the unique challenges of AGYW living in the context of LEAP? Why?
 - Which interventions (under 1100/1200/1300) needed to be prioritized more to better support the needs of AGYW in both host and refugee areas? Why? In

⁶ Each of the components have specific questions that serve as sub-objectives.

⁷ Indicator definitions are the variables/questions that go into defining how the indicator would be measured. In essence these are key messages that the project would like to disseminate to the direct reach, indirect reach, intermediaries. These are developed during the baseline tool development. Definitions of indicators would also be contextualized depending on the project's ToC, investment in activities as well as context. Therefore, they shouldn't be reproduced directly without understanding the local context. Training materials should be aligned to these definitions so target groups experience/report change across outcomes.

⁸ GE 3 definition: A gender equality specific and targeted project (GE 3) means that all the outcomes at all levels are exclusively focused on addressing gender inequalities to advance women's and girls' equal participation with men in decision-making; to support the full realization of women's and girls' human rights; and/or to reduce gender inequalities in access to and control over resources and benefits of development

⁹

¹⁰ The LEAP PMF will be shared with the consultant to understand these various streams.

comparison to others, were there specific interventions (under 1100/1200/1300), that were more impactful to host as opposed to refugee communities, and vice versa?

Component 2: Reflection on contextualization: Did the project adequately contextualize the interventions?

- To what extent and how were the following tools leveraged to influence overall project design and training materials for community-based interventions (like trainings with AGYW (CoC/YMWG), health service providers):
 - Host and refugee context analysis including risk assessment to understand the needs of the AGYW living in host and camp settings
 - Conflict sensitivity analysis

Component 3: Reflection of advocating LEAP's work in Cox's Bazaar

- How has LEAP contributed to the ongoing conversations on working with host and refugee communities in Cox's Bazaar through the ISCG, GBV and Health sub-sectors?

Component 4: Reflection on implementation agility

- Work planning:
 - Was there adequate time for:
 - development of training and other materials for project interventions;
 - review of training and other materials; and
 - conducting mandatory assessments such as baseline, endline, Gender Equality & Inclusion (GEI)& Child Protection (CP) assessments, Health facility assessment, etc.
- Reporting:
 - How useful were the baseline and GEI&CP assessment for program design keeping in mind the timing of the study's results/reports?
 - Did either of the reports provide useful information? Did it provide new information?
 - Were the reports too long?
 - Any alternate methodologies that could have been adopted for the GEI&CP assessment in the context of LEAP?
 - Was the M&E system appropriate for programming?

3.2 Specific Deliverables

The study will produce the following deliverables:

- Review of project documents and other necessary project relevant documents
- Preparing a brief inception report with finalised sample and scope and plans to undertake the exercise (not more than 4 pages)
- Review and translation of instruments provided by Plan
- Engage qualified data collection team and train them on quality control, data collection and ethical research

- Seeking any relevant permissions from government bodies like RRRC for data collection in camp communities
- Data management and analysis as per study themes in the sub-objectives
- Undertaking data collection as per the methodology with various groups. Note: Plan Bangladesh and its partners will work with the consultant to ensure mobilisation of the project participants as well as other groups.
- Analysis of data which will include transcriptions
- A comprehensive study report (not more than 10 pages excluding Annexes) in English detailing the findings, conclusions, and recommendations in line with the specific objectives of the study outlined in section 3.1 of this ToR.
- a study brief in PPT/PDF format based on the study's findings to be presented to relevant stakeholders
- Ensure all data including raw and analysed from all sources are maintained and submitted to Plan.
- Maintain proper communication with PIB focal person

Due to the evolving start-up phase of this project, the details of this ToR, including the study design and timeline, are subject to change (in consultation with the consultant) until the end of the start-up phase. Therefore, the methods and scope of the study as outlined in the final approved inception document will replace those described in these ToRs and the contract as the final agreement between PIB and the consultant.

4. Methodology, Data, and Ethical Guidelines

4.1 Methodology

The study will employ a qualitative approach to ensure a comprehensive and in-depth analysis of the study objective(s) through the following techniques:

- Key Informant Interviews (KII) and Focus Group Discussions (FGD) to capture qualitative insights and understand underlying factors.

4.2 Data Sources, Sample, and Probing Questions

The potential data sources for the targeted project outputs/core interventions including the primary sample distribution for this study are highlighted in Table-1:

Table 1: Primary Sample Distribution for each targetted output

Targeted outputs (CORE INTERVENTIONS)	INDICATIVE PRIMARY SAMPLE ¹¹			
	Interventions	Direct participants	Facilitators/Trainers	Partner staff
1111: Adolescent girls provided with Champions of Change inclusive training and mentoring on life skills, SRHR, GE&I, and SGBV	CoC graduates who are also members of GOL (10-19 yrs) Sample: 1 FGD in camps with 6 respondents per group	CoC female facilitators Sample: 1 from camp 1 from host	LEAP Partner staff responsible for implementing (for eg.PM): PHD, Mukti, SKUS	Sample: 1 group discussion with PIB staff (PM/SRHR Specialist/M&E)

¹¹ This is an indicative sample. During onboarding, detailed discussions between Plan and the consultant will be had to further streamline the sample if required.

	4 FGDs in host communities with 6 respondents per group Total=5 FGDs	Total: 2 KIIs	<u>Sample:</u>	
1112: Young Married Women Groups (YMWG) organized and trained on GE&I, SRHR, mental health, protection, and decision-making)	YMWG graduates (20-24 yrs.) <u>Sample:</u> 1 FGDs in camps with 6 respondents per group 2 FGDs in host communities with 6 respondents per group Total=3 FGDs	YMWG facilitators <u>Sample:</u> 1 from camp 1 from host Total: 2 KIIs	1 KII per partner staff Total 3 KIIs	Same as above
1121: Adolescent boys' groups organized and trained on Champions of Change including GE&I, SRHR, and SGBV	CoC graduates (10-19 yrs.) <u>Sample:</u> 1 FGDs in camps with 6 respondents per group 4 FGDs in host communities with 6 respondents per group Total=5 FGDs	CoC male facilitators <u>Sample:</u> 1 from camp 1 from host Total: 2 KIIs		Same as above
1211: Facility and community-based service providers trained on GARI trauma-informed service delivery and referral on SRH, SGBV and MHPSS services.	Trained Community health workers <u>Sample:</u> 2 from camp (1 male, 1 female) 2 from host (1 male and 1 female) Total: 4 KIIs	NA	1 KII with HOPE staff	Same as above
1222: SRH & SGBV referral pathways and reporting system established/strengthened & 1223: GBV survivors are provided with GARI and trauma-informed case	Case workers <u>Sample:</u> 1 KII with case worker from camp 1 KII with case workers from	NA	N/A	Same as above

management services including MHPSS ¹²	host Total: 2 KIIs			
1311: Local WROs identified, capacitated and linked with local YWGs and adolescent girls' groups for collective local action on GE, SGBV, SRHR, mental health and harmful traditional practices ¹³	WROs/YLOs ¹⁴ 2 KIIs with WROs and 2 YLOs	N/A	N/A	Same as above
1312: Youth-led organizations (YLO) with female leadership strengthened to deliver evidence-based local/national level advocacy on GE, SRHR and mental health				
1331: A humanitarian access coordination position is established for the working group	1 KII with the working group coordinator, 2-3 KII with other relevant staff from the humanitarian coordination group	N/A	N/A	Same as above

Table-2 (below), highlights the probing questions for each targeted output listed under Table 1-

Table 2: Probing questions for each targeted output

Output	Sub-questions
1111/1121: CoC and 1121: YMWG	To understand from graduates/participants <ul style="list-style-type: none"> a. How CoC/YMWG was implemented in the camp and host settings? What adaptations (if any were made)? b. Challenges of implementing CoC/YMWG in host and camp settings? To understand from implementers/partner staff: <ul style="list-style-type: none"> c. How CoC/YMWG was implemented in the camp and host settings? What adaptations (if any were made)? d. Challenges of implementing CoC/YMWG in host and camp settings?
1211: CHWs	To understand: <ul style="list-style-type: none"> a. How HH visits were strategized in camps versus hosts? Was there a

¹² This is a critical piece for LEAP owing to its nexus context. In addition, in the Y3 AWP several initiatives have been identified to strengthen this work. While camps have a standardised sub sector guideline that is used by case workers, there is none for host. LEAP will strengthen this by undertaking a service mapping

¹³ This is a priority piece for PIB as well as CNO. The work through these local organisations contributes to sustainability. In addition, CNO is also working on Feminist partnerships and towards that, this will be a value add to understand how processes can become empowering for these organisations.

¹⁴ This output is only applicable to host areas.

Output	Sub-questions
	<p>difference. If so, what was it and why?</p> <p>b. What were the challenges in implementation?</p> <p>c. How did the HH visit support in uptake of SRHR services?</p>
1222/1223: Case workers and government sector representatives	<p>To understand the contributions of LEAP towards supporting case workers in undertaking referral pathways;</p> <p>To understand from government sectoral leaders/representatives the current challenges of implementing referral pathways in various settings</p>
1311/1312: WROs/YLOs	<p>To seek feedback from WROs/YLOs</p> <p>a. Value addition of the LEAP program</p> <p>b. Future improvements to create equitable and empowering processes /relationships between Plan and local organizations (capacity building, financial, advocacy action planning</p>

The consultant/firm will also receive the following as part of the onboarding package:

- a. LEAP’s PMF and LM;
- b. An excel workbook with PMF indicator definitions;
- c. LEAP Y3 Annual report to donor;
- d. Plan International’s Safeguarding Manual;
- e. Baseline and GEI assessment report;
- f. Presentation on LEAP project progress till date (key challenges and progresses) on the CORE interventions covered in the scope;
- g. Any other secondary materials that may be important for probing/administering tools.

4.3 Data Quality Assurance and Limitations

The consultant is required to submit a quality assurance plan that sets out the systems and processes for ensuring the quality of all key deliverables from the start to end of this consultancy. This should include the proposed approaches to:

- Piloting of all tools in non-selected communities
- Training of enumerators, field supervisors, interviewers, and data entry teams including in safeguarding and research ethics.
- Logistical and management planning of the study
- Field work protocols and data verification, including back-checking and quality control by supervisors
- Data cleaning and editing before analysis

4.4 Ethics

Plan International is committed to ensuring that the rights of those participating in data collection or analysis are respected and protected, in accordance with the *Ethical MERL Framework* and

our *Child and Programme Participant Safeguarding Policy*. These documents can be found in the Annexes.

Appropriate, safe, non-discriminatory participation of all stakeholders will be ensured, and special attention will be paid to the needs of children and other vulnerable groups. The data collection methods will uphold the dignity, safety, privacy, and sensitivities for the girls and young women that they interact with. Confidentiality and anonymity of participants will be guaranteed as these personal identifiable data will not be published anywhere and will only be used to ensure data quality by persons who have received safeguarding and ethical standards orientation.

5. Timeframe and Responsibilities

The total duration of this study will be distributed as per the following table. (Assignment is expected to start from **May 2024**). These timelines are up for discussion and would be finalised during the consultant onboarding

Action	Deadline	Persons involved
TOR floated for consultant recruitment	March 24, 2024	PIB
Review of proposals	April 9, 2024	PIB
Interview with shortlisted candidates	April 18, 2024	PIB
Consultant/firm finalized	April 26, 2024	PIB
Consultant contracting process completed	April 30, 2024	PIB
Consultant onboarding	May 5, 2024	PIB and CNO
Inception report and first draft of tool	May 15, 2024	Consultant/firm
PIB review of draft tools	May 23, 2024	PIB and CNO
Submission of final tools	May 28, 2024	Consultant/firm
Data collection	May 30 to June 8, 2024	Consultant/firm
First draft of report	June 18, 2024	Consultant/firm
Review of first draft report	July 4, 2024	PIB and CNO
Final report	July 10, 2024	Consultant/firm
Final report review and finalization	July 15, 2024	PIB and CNO

6. Supervision/Management of Assignment

The consultant(s)/firm will be required to work closely with PIB, Plan International CNO, and PIB MERL team (as appropriate). The consultant(s)/firm will be directly accountable to the PIB focal

person. The consultant(s)/firm will keep the focal person continually informed on the progress of the assignment updates via email and other forms of communication.

7. Expected Competencies of Consultant/Firm

The consultant/firm should have the following competencies and expertise:

- Demonstrated experience of at least 10-15 years in conducting qualitative research, including designing interviews, and focus group discussions. Within this, interested consultants must demonstrate their prior experience of conducting process evaluations/assessments.
- The evaluation team must include people with professional background and demonstrated experience in conducting research and evaluation on GARI SRH, SGBV and MHPSS in humanitarian and development context, including experience conducting research with or about children (below age 18) or young people (18-24 years of age).
- Deep understanding and experience of working in Cox's Bazaar particularly of working with host and refugee communities. This includes understanding of the geographies, local dialects, challenges of collecting data in such contexts
- Proficiency in qualitative data collection, analysis (including use of software), and interpretation. Experience of collecting data from adolescents is non-negotiable.
- Ability to synthesise data from various sources and provide evidence-based recommendations for future programming.
- Experience in formulating learning questions and tools to elicit learning.
- Experience in advocating for and communicating research findings to stakeholders.
- Sensitivity to cultural nuances and the ability to adapt research methodologies to different socioeconomic and cultural contexts.
- Capability to engage with diverse communities and stakeholders, particularly vulnerable communities like adolescent girls and young women, in a safe, inclusive, age-appropriate, and gender-sensitive manner
- Strong organisational skills to manage the project timeline, coordinate data collection activities, and meet deadlines.
- Effective communication skills to maintain regular updates with project sponsors and stakeholders.
- Proficient in writing comprehensive research reports that present findings, conclusions, and recommendations in a clear and accessible manner.
- Ensure all aspects and processes of the lessons learnt study comply with international ethical standards on doing research with/about children (such as those outlined by <https://childethics.com/>) and clearly outline to Plan International how this will be done and how safeguarding risks to children and young people will be mitigated.
- Awareness of ethical guidelines and considerations related to human subject research, particularly when involving students and vulnerable populations.
- Ability to seek permissions from government bodies like RRRC for accessing camp communities
- Fluency in English and local language is a must
- No history of violation of child and girls' rights.

8. Application Process

The application should be submitted in two parts that include: a) technical and b) financial. The technical part of the proposal should not exceed 12 pages (excl. annexes) and will contain the following:

- Detailed methodology of the study.
- Proposed timelines as stated in the ToR.
- Account of relevant experience (consulting team profile). Applications should elaborate on the consultant's abilities to manage work within the tentative timelines shared in this ToR along with any challenges.
- Consulting team profile including CVs of the team leader and key members of the study team.
- Copy of VAT registration certificate (for consulting firm).
- Copy of valid TIN certificate and bank account detail.
- 2 examples of previous and relevant work (in the annex)
- Names and details of 3 references
- Ethics, safeguarding and GE&I approaches, including any identified risks and associated mitigation strategies should be included in the Annexes.

The consulting team profile should contain:

- The full names of all participating consultants and their roles, including technical expertise
- Physical address of the consultancy firm.
- Telephone number(s) of the firm (if applicable) and participating consultants
- Full name and contact information of the contact person within the consulting team
- Full names of Directors/Proprietors

The **financial proposal** should clearly identify, item wise summary of the cost for the assignment with a detailed breakdown. The budget should not contain income tax as a separate head; it can be blended with the other costs, as it will be deducted from the source. However, VAT can be mentioned in the budget as per government regulation. PIB will deduct VAT and Tax at source according to the Government of Bangladesh rules and deposit the said amount to the government treasury. The consultant/consulting firm is expected to provide a justified budget, which is consistent with the technical proposal, and should contain:

- Itemized consultancy fees/costs
- Itemized field data collection expenses
- Itemized administrative expenses
- Validity period of quotations

The application package that includes the technical and financial proposal should be submitted electronically to the email address: Planbd.consultant.hiring@plan-international.org with the title “**Capturing Lessons Learnt from the LEAP Project Implemented by Plan International Bangladesh**” by **20/04/2024**. Two separate folders, i.e., technical and financial, should be submitted into one zip folder with a cover letter. The proposals should be submitted in PDF format. Proposal submitted to any other email account except the one stated above or in any other form will not be considered. Submissions after the deadline will be treated as disqualified.

For any technical issue related to the project and study, please communicate to **Kamrul Hasan Shawon**. Email: kamrul.shawon@plan-international.org.

9. Payment Schedule

The payment for this assignment will be made in 3 (three) instalments, following the below schedule-

Instalments	Percentage	Timeline
First instalment	30	After receiving the inception report
Second instalment	30	After receiving the first draft report
Third instalment	40	After the acceptance of final report

10. Parameters for Selection

The following table outlines the selection criteria-

Criteria	Score
Relevant competency of team leader and team composition	35
Appropriate methodology to address study objectives	40
Amount of budget and justification	25

11. Penalty Clause

The consultant(s)/firm is expected to provide services within the agreed timeframe as well as submit the final report maintaining the quality as mentioned in Section 2.5 of this ToR. If the quality is not maintained as agreed, Plan International Bangladesh will deduct 5% of the total agreement amount. If for any reason, the consultant(s)/firm fails to deliver services within the stipulated time, the consultant(s)/firm needs to inform Plan International Bangladesh in time with a valid and acceptable explanation. Failing to do this may invoke a penalty clause at the rate of 1% for each day of delay.

12. Bindings

All documents, papers and data produced during the assignment are to be treated as Plan International Bangladesh's property and restricted for public use.

13. Risk Management

The programme staff and MERL staff will take all reasonable measures to mitigate any potential risk to the delivery of the required outputs of this assignment. A safeguarding risk assessment and mitigation plan will be developed, and approval will be taken from the relevant PIB official. Also, contingency plans will be put in place to mitigate any occurrence of each of the identified risks.

14. Safeguarding and Gender Equality & Inclusion Policy

Safeguarding Children & Programme Participants

Plan International takes seriously the commitment to promote safe practices and protect children, young people, and adults from harm, abuse, neglect and any form of exploitation as they come into contact with Plan International supported interventions, such as the "lessons learned" research. In addition, we will take positive action to prevent child abusers from becoming involved with Plan International in any way and take stringent measures against any Plan International Staff and/or Associate who abuses a child. Decisions and actions in response

to child protection and safeguarding concerns will be guided by the principle of ‘the best interests of the child.’

The research will involve conducting FDG with diverse children and adolescents exploring project-related topics such as GE, SRHR and SGBV prevention and protection. The study must, therefore, **ensure ethical, appropriate, safe (including trauma-informed), non-discriminatory participation; stressing young people’s views from diverse backgrounds with diverse identities are collected; a process of free and un-coerced consent and withdrawal; confidentiality and anonymity of participants.** Environments and working methods should be adapted to the capacities and experiences of diverse groups of adolescents. Time and resources should be made available to ensure that adolescents in all their diversity are adequately prepared and have the confidence and opportunity to contribute their views.

- The consultant(s)/firm acknowledges that it has received a copy of and has read and understood Plan’s Global Policy on Safeguarding Children and Programme Participants (henceforth referred to as ‘Safeguarding Policy’) as attached to this ToR. The consultant(s)/firm shall (and shall ensure that its employees, agents, sub-contractors and any other party engaged in the performance of services) at all times and in all circumstances abide by the Safeguarding Policy for the period of this agreement.

The consultant(s)/firm represents and warrants that neither the consultant nor any of its (firm) employees, agents, sub-contractors and any party involved or likely to be involved in the performance of the services is suspected of involvement or has been suspected of such involvement in an incident of abuse of a child or children and young people whether as described in the Safeguarding Policy or otherwise in such a way that compromised or compromises the safety of children and young people.

If at any time during the performance of this agreement, it comes to the attention of PIB (or any of its officers, employees, agents, sub-contractors or any other party engaged in the performance of services) that the consultant(s)/firm’s or any of its officers, employees, agents, sub-contractors or any other party engaged in the performance of services was or is suspected of involvement or has been suspected of such involvement in an incident of abuse of a child or children, whether as described in the Safeguarding Policy or otherwise in such a way that compromised or compromises the safety of children and program participants, the consultant(s)/firm shall:

- immediately cease from performing the Services and or remove any such officer, employee, agent, sub-contractor or other party engaged in the performance of Services from the provision of the Services or any aspect connected or related to the provision of the Services; and
- immediately report such incident or suspicion to PIB’s contact and in any event within 24 hours of such information coming to the attention of Plan International.

Any breach of this clause and or the Safeguarding Policy shall constitute a material breach and shall entitle Plan International (in its absolute discretion) to immediately terminate this agreement without notice and or take such other appropriate action as Plan International shall, in its absolute discretion, determine including requesting the removal from the provision of the services of any suspected officer, employee or other party of the consultant(s)/firm (if applicable); reporting any incident of abuse to the police or instituting legal proceedings for a claim for damages against the consultant(s)/firm.

Any violation/deviation in complying with the Safeguarding Policy, PSHEA Policy, Gender Equality & Inclusion Policy, or the conflict-of-interest policy will not only result in termination of

the agreement but also Plan International Bangladesh will initiate appropriate action in order to amend the damages/losses caused due to non-compliance of the policy.

Gender Equality & Inclusion

All parties agree to abide by the basic principles of gender equality and comply with the provisions of existing gender-related international and national conventions. Specifically, the parties shall ensure that no gender-based discriminations, bullying, and harassment such as sexual harassment takes place in the course and as part of this engagement (this includes, but is not limited to, physical, verbal, other forms analogous to the foregoing, the use of gender sensitive language in promotional materials, recordings and publications).

Importantly, parties behave in accordance, demonstrate compliance to, and support of prevailing policies and procedures related, be aware of the issues of harassment, bullying and discrimination and the forms it can take and of the damage it can do to individuals and to PIB. Parties also agree to report potential breaches, speak out and fully comply confidentially with any investigation and importantly contribute to building an environment advocating and promoting gender equality and free from harassment, bullying and discrimination. An orientation on PIB's gender equality principle shall be provided by PIB to the consultant(s)/firm as requested and/or as deemed necessary.

Plan International projects apply gender and inclusion sensitive approaches and explicitly aim for results that improve the rights of children and young people as well as gender equality. Thus, all of Plan International Bangladesh's assessments promote the equal participation of all age groups and especially of children, equal gender participation and inclusion of person with disabilities and all marginalized people.

Consultants are required to provide a statement within their proposal on how they will ensure ethics and safeguarding of adolescents as well as gender equality and inclusion in the different stages of the study – including data collection and analysis, visits and report writing, dissemination of results — in line with Plan International's Safeguarding Policy, PSHEA Policy, and GEI Policy. This must also consider any risks related to the evaluation and how these will be mitigated. Consideration must be given to:

- Safeguards to protect the confidentiality of those participating in the evaluation
- Data protection and secure maintenance procedures for personal information
- Caregivers' consent concerning data collection from adolescents and collation of data about adolescents
- Children's assent concerning data collection from children and collation of data about children
- Age-appropriate assent processes for those below the age of 18
- Prevention and mitigation of risks young participants may face as a result of participating in this study.
- Any GE&I related risks related to the evaluation and how these will be mitigated.

15. Disclaimer

Plan International Bangladesh reserves the right to accept or reject any or all proposals without assigning any reason whatsoever.

16. Annexes

Annex 1: Plan International Global Policy for Safeguarding Children and Young People



Annex 2: Ethical MERL Framework



Annex 3: Plan International Global PSHEA Policy



Annex 4: Plan International Global Policy on Gender Equality and Inclusion



Annex 2: Plan International Conflicts of Interest Policy



Endorsed by:

Tariq UI Hassan Khan
Head of MERL

Approved by:

Jolly Nur Haque
Director, Programme Development and Learning