

## Government of Rajasthan

Rajasthan Health Systems Development Project  
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F. 7 ( )CAEI / RHSDP / 2008/3232  
Credit No 3867/IN

Dated :02.06.08

### Expression Of Interest

1. The Government of Rajasthan has received a credit from International Development Association towards Health Systems Development Project. Part of the proceeds of the credit will be applied to payment for eligible consultants under the contracts for which this invitation for bid is issued.
2. The Project Director of the RHSDP invites "Expression of Interest" from eligible IEC agencies/ organizations to develop and implement an effective communication strategy in selected facilities of 6 tribal and 3 desert districts of Rajasthan under RHSDP.
3. The agency/organization must have proven experience and capabilities in carrying out such IEC activities in the selected areas. Weightage will be given to those with such work experience in the health sector. The agency should have proven working experience in this area at least three years. Agency would be selected following the Quality Based Selection (QBS) process as per the World Bank guidelines.
4. Interested agencies are required to submit their profile, giving the following details :-
  - a. Name, address, Fax No. and e-mail address of the agency.
  - b. Names and short CVs of the chief functionary and principal staff members.
  - c. Geographical area of working.
  - d. Registration status and structure of the agency.
  - e. Financial status of last three years.
  - f. List of similar assignments undertaken (completed & ongoing) in the related field in the past three years.
5. Interested agencies/organizations that meet the above mentioned criteria can download the detail Terms of Reference from website <http://rajswasthya.nic.in> and <http://www.rajasthan.gov.in> and for further query contact during office hours at the address given below.
6. The letter of "Expression of Interest" should reach the office of the Project Director, RHSDP in the address given below on or before 1700 hours of June 30<sup>th</sup>, 2008, under sealed cover.

**-sd-**  
**Project Director**  
**RHSDP. Jaipur (Raj.)**

**Agency to Support Community-based Information Education Communication  
(IEC)  
Terms of Reference**

**Background**

As part of **Component III: Innovations to Enhance Access and Equity to Disadvantaged Sections** of the Rajasthan Health Systems Development Project (RHSDP), a series of activities had been included in project design. These were aimed at: (i) increasing the health care seeking behavior of underserved populations, particularly tribals, through appropriate behavior change communication; (ii) reducing the geographical and financial barriers to health care by strengthening existing GOR exemption programs in the health sector and by piloting community-based risk-pooling initiatives targeted at vulnerable populations; and (iii) initiating public-private partnerships through contracting of NGOs for clinical and non-clinical services, piloting innovations for involving informal health care providers in delivery of an “essential package” of services, and piloting franchising and voucher initiatives with for-profit private providers.

IEC under the project has been two-pronged: (i) within health facilities; and (ii) within communities. As part of project IEC, the Citizens’ Charter as well as the prices and availability of drugs in the pharmacy have been posted in most facilities. There are plans for introducing signage within facilities to assist patients to find their way around. The concern is that all the printed materials should be in a language and format that is accessible to the patients, many of whom are poor and illiterate. Community based IEC has focused largely on the Village Contact Drive and Ante-Natal Care campaign, the impact of which was assessed during interactions with the community in village Dhanpur of Chittorgarh district and in the vicinity of CHC Osian of Jodhpur district respectively. After careful review, it was agreed that these initiatives are no longer a priority, since there are now additional community-based workers such as the ASHA and GNM under the NRHM who can be entrusted with community-mobilization. The key message that now needs to be communicated by RHSDP is the availability of free services for the BPL. It has been agreed that IEC activities will need to be revised to rely less on print media and more on interactive folk media, such as street plays, music performances and other more accessible formats.

The project has now been under implementation for 3 years, and as part of the agreements reached during the Mid-Term Review (MTR), it was agreed that the Information, Education and Communication (IEC) component under the project would be strengthened by bringing on board an appropriate NGO at the field level to support community-based IEC activities. The Project Management Unit (PMU) will contract an NGO well-versed in such media to facilitate the development and dissemination of appropriate messages; as well as recruit short-term IEC consultants for a period of six months in the 9 priority districts to train handhold district-level staff and facilitate management of IEC activities.

**Objectives of the Consultancy**

The consultant agency would be brought on board to develop and implement an effective communications strategy which fulfills the following objectives:

- (a) Assist PMU to finalize the IEC plan to be implemented over one year of the remaining project life in 9 identified priority districts;

(b) assist in the process of attitudinal change at all levels, particularly on health seeking behavior by reviewing and fine-tuning available messages to minimize barriers to accessing primary & secondary healthcare.

(c) Design new messages appropriate to communication vehicle and (in consultation/coordination with the PMU) build a repertoire of communication materials—audio-visual, scripts for plays, jingles, themes and messaging for puppet/magic shows etc, ensure transcription into local languages to facilitate enhanced utilization of FOC services by BPL and poor;

(b) promote access to information and enhance collective knowledge by networking with appropriate local NGOs, agencies and performing artistes;

(c) provide supportive material for training and orientation of the 9 local consultants in the IEC plan as well as for the orientation of local groups;

(d) develop linkages with the monitoring and evaluation mechanism and address the issues/problems highlighted by the monitoring process, such as intensifying IEC activities in districts/facilities which show poor utilization of OPD services by BPL/tribal;

(e) increase awareness of the services provided under the project in tribal areas, and facilitate the implementation of IEC strategy for tribal districts.

### **Scope of the Consultancy**

The selected agency would work with the PMU to manage IEC activities at the community level, by sub-contracting NGOs/groups that are well-versed in folk media. The agency would develop, in conjunction with the PMU team, a communications strategy, based upon decisions made with regard to: (a) identification of target groups; (b) selection of messages; and (c) selection of media. In order to facilitate the implementation of an effective IEC strategy, the selected agency would need to undertake the following tasks:

(i) Identification of NGOs and other agencies in the concerned districts involved in developing and disseminating communications materials.

(ii) Details of their past experience in working with the target groups involved in the project.

(iii) Development of a profile of the materials developed by the respective NGOs and agencies in the following areas:

(a) increasing awareness of health programs intended for the poor;

(b) increasing awareness of interventions under Component III and the TDP of RHSDP;

(c) encouraging appropriate health seeking behavior; and

(d) addressing social and other issues that act as barriers to accessing health services by the poor.

(iv) Assessment of the costs, for each type of communications agency, of developing the specific messages/scripts and pretesting them (for example, folk theater, or magic shows, or other types of media). The proposal provided by the agency would need to estimate the total cost of IEC activities, as separate from the fee that they would charge for their management and organizational services. The total budget would need to fit within the overall envelope available for IEC activities within the project.

(v) Assessment of the capacity of the communications agency to provide support to the communications strategy planned under the project.

## Timeframe

The agency would be hired for a period of a year, renewable to the end of the project, based on performance. **Performance would be judged on the basis of:**

- (i) whether the agency performed its management role satisfactorily, and was able to work according to the agreed media plan;
- (ii) whether DPCs are able to report that the agency's role has been satisfactory, and they have been able to coordinate and plan activities with them in a satisfactory manner; and
- (iii) exit interviews (to be planned) demonstrate that the media selected by the agency have been engaging and successful in communicating the desired messages.

## Deliverables

The selected agency will be closely monitored by the CAEI cell of the PMU, and by the DPC of the concerned districts. They will be expected to:

Activity	Timeline
Develop a roster of appropriate media agencies to involve in community-based IEC activities.	1 month
Develop, in consultation with the PMU, appropriate messages/scripts to be disseminated through appropriate media, and a media plan.	2 months
Provide hand-holding support to the troupes/individuals selected to provide IEC inputs and ensure that their performances are held to the highest standards in terms of accuracy of messaging.	On-going
Coordinate with PMU on schedules of camps/follow-up camps to ensure that adequate pre-camp and during-camp IEC has been organized.	On-going
Provide a district-based consultant to work closely with the DPC in 9 selected districts on all of the above for a period of 6 months.	1 month
Support consultant to gather periodic feedback from beneficiaries at health facilities and camps regarding messaging (content and delivery), message recall, correctness of message etc to fine-tune message delivery.	On-going
Constantly update the media and messages to ensure that they are addressing the needs of the project as indicated by the MIS as well as observations in the field.	On-going
Develop monitoring formats activity wise for field NGOs in consultation with PMU.	3 months
IEC agency/ organization will responsible to monitor the performance of field NGOs	ongoing

## **Services & Facilities provided by the Client**

- All necessary information regarding the project objectives, activities to date, and evaluations if any.
- Details of venues of camps and other special events for which IEC needs to be planned.
- Guidance and close monitoring of the development of messages and choice of media.
- Instructions to facility in-charges and other field level staff to cooperate and provide necessary information to consultant.
- Facilitation during field visits and other meetings.

## **Skill set expected with contracted agency**

The selected agency should:

- Registered under the societies registration act/ charitable trust act/ section 25 of Indian company act.
- Have minimum 3 years proven experience of having implemented IEC field activities in Rajasthan health sector, preferably in remote areas and with marginalized population.
- Have completed projects in health sector with contract value of at least 5 lacs per year for each of the past 3 years.
- Registered in Rajasthan state and have an office address and bank account and accounts audited regularly ( audit report of last 3 years).
- Have atleast 2-3 full time staff members and organization head /secretary has never been convicted by the court of law.
- Not be blacklisted by NABARD/CAPART or any other government department.
- Have extensive experience in developing, implementing and managing IEC activities at the community level. This will be ascertained by the PMU through a site visit to areas where the NGO has been active for a period of time and informal interviews with beneficiaries.
- Necessary staff and skills required to scale up IEC activities to the levels envisaged under the project.