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Terms of Reference for the development of market-based sanitation training materials and coaching services in Rwanda.

Terms of Reference (ToR) for:

1. Refinement and/or development of market-based sanitation and hygiene (MBSH) training materials and field tools for demand activation and sales agents.
2. Advisory and coaching services on human-centered sales and marketing related to sanitation and hygiene.

Estimated level of effort (LoE) and timeline: estimated 40 days of full-time LoE (level of effort), distributed across three phases: Phase 1 (January 2023-February); Phase 2 (support with March 2023 MBS training facilitation); Phase 3 (advisory and coaching services; March-Sept 2023). The consultant is free to revise and/or propose a relevant number of days/LoE for each Phase that will achieve the intended outcomes and outputs.

Location of Consultancy: Remote and/or Kigali, Rwanda (with potential for travel within Rwanda, as needed)

1. Background and Objectives of Consultancy

Founded in 1945, CARE is a leading humanitarian organization fighting global poverty. We seek a world of hope, tolerance, and social justice, where poverty has been overcome and people live in dignity and security; and we work around the globe to save lives, defeat poverty and achieve social justice. CARE International aims to be a global force and a partner of choice within a worldwide movement dedicated to ending poverty.

In 2021, a consortium led by Water for People and other organizations including IRC, VEI, CARE, and a local partner African Evangelistic Enterprise (AEE) in Rwanda secured USAID funds to finance a five-year Water, Sanitation, and Hygiene (WASH) activity named *Isoko y'Ubuzima*. The activity, which will run from July 2021 to July 2026, is being implemented in 10 districts (Kirehe, Ngoma, Kayonza, Rwamagana, Nyagatare, Ruhango, Nyanza, Nyamagabe, Ngororero, and Nyabihu). The overall goal of the *Isoko y'Ubuzima* activity is to improve access to and use of safe, sustainable drinking water, sanitation, and hygiene services. This will be achieved through three interrelated and mutually reinforcing strategic objectives (SOs):

- SO1: Improving decentralized WASH governance
- SO2: Improving rural drinking water services
- SO3: Improving rural sanitation and hygiene services and products.

CARE and AEE are leading the implementation of SO3 through three intermediate results (IRs):

- IR3.1: Increased consumer knowledge of improved sanitation solutions
- IR3.2: Increased availability of affordable & equitable sanitation products & services
- IR3.3: Increased demand for sanitation & hygiene products & services

Some key SO3 targets are the following:

- *increase access to improved sanitation and hygiene services for 100,000 people (20,000 households).*
- *1,200 community groups mobilized to purchase sanitation and hygiene services and products*
- *1,000 women and girl entrepreneurs engaged in sanitation and hygiene businesses.*
- *10 districts have sanitation and hygiene financial and loan products rolled out and scaled.*

Under SO3, CARE leads efforts to create a scalable market-based sanitation and hygiene (MBSH) network of producers, importers, small businesses, individual entrepreneurs, and sales and marketing agents. Practically, this is done through layering and coordination of (1) existing and ongoing social and behavior change (SBC) and demand creation agents (e.g. community health workers, community hygiene clubs facilitators); (2) District-level sanitation centers (DSCs) and newly created 'sanitation showrooms' as physical storefronts who sell sanitation, handwashing, personal hygiene, and household products; (3) leveraging village savings & lending facilitators ('VAs') as last-mile sales and entrepreneurial networks. In addition, CARE intends to challenge and address gender and social norms that can hinder or delay access to basic sanitation and handwashing services for all.

To inform this vision and strategy, CARE led two foundational activities in year 1: (1) development of an initial 'Sanitation & Hygiene Demand Creation Strategy' that was informed by a sanitation marketing/MBS evidence and lessons learned and a prioritized list of knowledge/evidence gaps, and (2) development and completion of a GESI-mainstreamed sanitation marketing and financing mechanism assessment.

The findings from the assessments focused on consumer insights from 6 districts (573 respondents; 72 FGDs) on:

- access to improved sanitation along four phases of demand (little demand; demand generation; demand activation; demand fulfillment)
- effective behavioral drivers,
- satisfaction and dissatisfaction with current sanitation facilities and services,
- consumer preferences for sanitation and hygiene products,
- willingness to pay and purchasing power,
- supply chain analysis for sanitation and hygiene products;

- accessibility, availability, and perceptions of formal and informal financial services and
- gender, equity, inclusion, and disability-related challenges to sanitation and hygiene.

These assessments are informing an overall ‘go-to-market’ strategy (under draft) for sanitation and hygiene products, services, and financing under the Isoko y’Ubuzima project, which will be implemented and scaled over the life of the activity. To effectively roll out this strategy, CARE, AEE, and our field agents (e.g. sales and marketing agents; demand creators) **need training materials and field SBC and marketing tools related to human-centered sales as well as field coaching and advisory services** to ensure scaling of SO3 activities is impactful and sustainable.

It is against the above background that CARE International in Rwanda is soliciting a qualified consultant(s) to support MBS advisory and coaching services, as well as the development and/or finalization of these materials, including a variety of MBS training materials and field tools based on existing materials. These will be primarily used by SBC agents and sales agents during a variety of hygiene demand creation and/or sales sessions—to be used at the household and community level (i.e. direct business-to-consumer sales) by district sanitation centers (DSCs), showrooms, and village-level sales agents.

We are soliciting the support of the consultant to:

1. **SBC and demand creation training manual** : (i.e., demand-creators; Hygiene Focal Points HFPs; Based on the findings from the year 1 assessment and their global expertise, the consultant will adapt Isuku Iwacu project *sanitation guide for CHC facilitators to align with* the Isoko y’Ubuzima SBC and demand creation strategy and market-based sanitation goals and insights.
2. **Sight Seller for demand creation/SBC and sales agents**: Isoko y’Ubuzima has created a draft sight seller based on findings from the year 1 assessments. The consultant will adapt, refine, and professionalize this sight seller for direct use by field agents.
3. **Training manual for sales agents**: (i.e., Village Agents, showroom operators) Based on the above sight seller, the consultant will adapt the training manual and guidance to more fully consider the human-centered design approach /decision Intelligence selling approach.
4. **Data collection tools and guidance on data analysis to inform demand and sales efforts**: Tools and guidance will build on existing data collection tools and processes with DSCs (e.g. sales record books) and the overall Isoko y’Ubuzima project. Tools should be practical and field oriented.
5. **Product and service marketing materials and other visual supports** that can be used by marketing and sales agents: This will be done in concert with CARE and a local graphic design firm to be hired by AEE
6. **Translation of developed training materials**
7. **Facilitate training of master trainers**: The team of master trainers has received 2 rounds of training focusing on explaining project goals and a General introduction to the market-based sanitation approach and human-centered design approach. The consultant will provide comprehensive training on human-centered sales to master trainers, and project

staff will roll out the training at the sector level to SBC agents and sales agents. CARE will facilitate issuing certificates to Master Trainers.

8. **Presentation of the materials to CARE and Ministry of Health:** CARE will host the review meeting with SBC TWC Rwanda Health Communication centers. However, The consultant shall be available for consultation during the review process. And prepare all necessary materials that will be used in the meeting.
9. **Pretest the materials:** at the community level with SBC agents and sales agents
10. **Ongoing Follow up support and coaching:** Isoko y’Ubuzima has the team that facilitates the implementation of the strategic objective 3: Component lead, Technical advisor (SBC Technical Advisor, finance inclusion technical advisor, GESI Technical advisor, Inclusive governance advisor) sanitation specialist, private sector advisor and Quality Assurance specialist. The consultant will provide coaching and post-training follow-up for engagement and follow-up on MBS efforts, results, and challenges.

2. The scope and objectives of the work on the development of training materials

The primary objective of this exercise is to develop a variety of training materials and field tools for SBC and sales agents for MBSH efforts under Isoko y’Ubuzima based on already existing materials elaborated in the table below:

Table 1: Details of the assignment/work on existing materials

Training manual 1: Social Behavior Change & demand-creation training manual			
1	Existing materials	Description of current training material or field tool available	Description of expected support to develop, revise, or adapt the tool
	Isoku lwacu project training manual: <i>sanitation guide for CHC facilitators</i>	<p>The overall aim of the training guide was to equip ‘Trainers of Trainers (ToT), CHC facilitators and other peer-educators with appropriate knowledge and skills to conduct a peer education, training, and mobilization activities towards increasing demand for sanitation and hygiene products and services at household and village levels. The training manual is 43 pages with 7 modules each module with 2 sessions.</p> <p>This training guide has seven modules for a two-day training workshop for ‘Master Trainers’ (Programme in Annex) and two-day training workshop for ‘CHC facilitators and other peer-education trainers’. With easy-to-follow instructions for the facilitator, it provides the steps to follow while facilitating the session and each step has an approximate time to help the facilitators with time management.</p>	<p>Adapt the training module :</p> <ul style="list-style-type: none"> - To reflect MBS model (showing clearly demand creation roles, Supply side roles and financing mechanisms linkage) - To reflect the shift from traditional messaging to guidance/Facilitate the participants to take informed decision - Review and propose a session on facilitation skills aligned with this approach - Revise GESI session considering finds from the inclusive assessment of sanitation, hygiene and financial mechanism. - The guide will include also content on money management especially on saving and loan financial products - Adapt both English version and Kinyarwanda version - Suggest design layers - Revise and draw new art work (Images) as necessary

		<p>Module 1 presents different affordable and improved latrine options for households which are in line with the ones described in the National Sanitation Policy of 2016.</p> <p>Module 2 is about the usage and maintenance of improved latrine options across the sanitation value chain (safe emptying, transport, treatment, disposal and re-use). Module 3 deals with hand washing facilities and practices. Module 4 presents various financial and non-financial instruments available for the construction of affordable and improved latrine options. Module 5 describes strategies to increase women’s decision-making power at a household level in terms of access to affordable improved latrines and hand washing facilities. Module 6 is designed to strengthen facilitation skills of CHCs members and other peer educators to better understand their roles and necessary competences. Last but not least, Module 7 deals with M&E tools and action plans.</p>	<ul style="list-style-type: none"> - Align the content with SBC and demand creation strategy messages and channels - Develop a simple as annex pocketbook for SBC summarizing key messages and steps to facilitate session.
2	Training manual 2: Sales agent training manual		
	<p>Revise MBS sight seller for sales agents to customer guide and translate the document in Kinyarwanda version.</p>	<p>Sight seller is an illustrated flip book that demand activation agents should use to guide their conversations with households and groups</p> <ul style="list-style-type: none"> - The sight seller guides the sales and SBC agents through the four steps of human centered sales for sanitation and hygiene products and services available through Rwanda’s ‘District Sanitation Centers’ and the Isoko y’Ubuzima sales and entrepreneur networks - The sight seller is the field guide that goes along with the ‘Demand Activation’ training session - The sight seller content will include the guide of business owners/entrepreneurs on how to increase sales 	<ul style="list-style-type: none"> - Isoko y’Ubuzima is leveraging the Human Centered Design (approach to create the demand for sanitation and hygiene products - The sight seller should be not too long to allow the sales agent to listen more to customer. - The sight seller will lead the conversation of 25-40 mins between sales agent and customer - Need clear visual and simple narrative to guide the conversation - There is need to adapt some images where necessary - The consultant must ensure that the language and image used in the documents are gender and social inclusion-sensitive sensitive.
3	Data collection tools		
	<p>Data collection tools and guidance on data analysis to inform demand and sales efforts:</p>	<ul style="list-style-type: none"> - Project data collection tools 	<ul style="list-style-type: none"> - Data collection tools and guidance on data analysis to inform demand and sales efforts: Tools and guidance will build on existing data collection tools and processes with DSCs (e.g. sales record books) and the overall Isoko y’Ubuzima project.

			Tools should be practical and field oriented.
4	Promotion materials		
	Products and service marketing materials and other visual supports	- Project's existing photos and other visual	- The communication materials can be used by marketing and sales agents: This will be done in concert with CARE and a local graphic design firm

3. Location of Consultancy

Kigali, Rwanda (with potential for travel within 10 districts of Rwanda, as needed) and/or abroad working remotely

4. Estimated time

LoE for consultancy is estimated at 40 days of full-time LoE, distributed across three phases: Phase 1 (mid- December 15th, 2022 – 30th January 2023); Phase 2 (support with March 2023 MBS training facilitation); Phase 3 (advisory and coaching services; Feb-Sept 2023). The consultant is free to revise and/or propose a relevant number of days/LoE for each Phase that will achieve the intended outcomes and outputs.

5. Methodology

It is expected that the consultant will employ relevant methodology based on global best practices related to MBS and human-centered sales to inform the expected products and activities. The consultant will be expected to draw heavily on the Isoko y’Ubuzima year 1 assessment findings, syntheses documents, existing training materials, project documents, and insights from the project team. Any additional primary data collection is expected to be minimal and will need to be discussed with CARE. The consultant is free to use a methodology he/she proposes based on experience. In consultation with the CARE technical advisors team based in Rwanda and USA, the consultant will design an appropriate and comprehensive work plan to complete the task. The content of the training materials must be GESI sensitive and informed by Isoko y’Ubuzima’s main guiding document for SBC and demand creation strategy and the Isoko y’Ubuzima GESI guidelines. It is envisioned that CARE will engage RBC, under the RHCC division, with the support of Isoko y’Ubuzima project team. The developed training manual will go through a validation process, pre-test and address the comments provided. Some current modules (Sight seller) are in English, but they need to be translated into the Kinyarwanda version.

6. Tasks and Responsibilities

CARE:

1. Ensure that all necessary project-related documentation is availed to the Consultant, including: existing final year 1 reports and results; draft MBS strategy and synthesis of

results; draft messaging on behavioral motivators; draft sight seller; and the inclusive sanitation and hygiene marketing and financing mechanisms assessment report.

2. Facilitate initial contact of the consultant with different stakeholders where necessary
3. Review training materials adapted by the consultants and provide feedback
4. Overall quality control and technical review of the report and final signing off (including participation in the consultation session with the consultant during the development of the communication materials)
5. Provide any other technical or operational support to the consultant as needed
6. CARE will facilitate the consultants to issue the certificate to the participants

Consultant support:

1. Carry out a desk review of relevant project documents (e.g., project proposal and year 1 reporting, MBS assessment reports, draft messaging on behavioral drivers, draft MBS strategy, draft sight seller, GESI guidelines) and conduct initial interviews with the SO3 team to ensure work and learnings to date are incorporated into consultant(s) methodology.
2. Develop a work grant chart on how to develop training materials elaborated in table 1.
3. Develop and submit the first draft for all training and field support tools noted in the table 1 and present it to CARE. The manual should be comprehensive and provide adequate knowledge to equip SBC agents and guide the conversation between sales agents and customers.
4. Post-training performance competency evaluation.
5. Integrate all the comments and inputs from different reviewers
6. Submit the final training manuals to CARE, and CARE will have sole ownership of the materials until they are handed over to the government

7. Deliverables

The consultant will be expected to submit the following deliverables to CARE:

- **Inception report:** building from Table 2 above that outlines the delivery of each item and deliverable and the associated responsibilities across the consultant and CARE. The inception report or a comprehensive work Gantt chart and methodology shall be submitted to CARE within 5 working days after the contract's signature and before the assignment's commencement. This deliverable includes:
 - **a Kick-off meeting** (in-person and/or remote) to review the timeline, deliverables, and budget, and to understand what is working or not within the adaptation needed and available materials.
 - **A Roles and responsibilities table (building from Table 2 above)** that outlines the timelines for delivery of each deliverable, and the associated responsibilities across the consultant and CARE.
 - **A basic outline for each of the assigned outputs/products**

- **Draft products/documents:** The drafts shall be submitted for review and approval by CARE team. Present the first draft to CARE and Isoko y'Ubuzima SMT the draft documents and a validation workshop (PowerPoint presentation to be prepared) for Isoko y'Ubuzima partner and USAID to discuss the adapted training manual.
- Conduct a pre-test of the developed modules
- Facilitate the training manual of master trainers and hygiene sales agents that will include post-training performance competency evaluation and a training report
- Final submission of all developed materials
- Ongoing advisory and coaching support to field staff

8. Reporting and work relationship:

The consultant will be supervised by the Isoko y'ubuzima SBC technical advisor. He or she is also expected to work closely with the project team, including the Quality assurance specialist, GESI Advisor, private sector advisor, financial inclusion advisor, sanitation officer, component lead, and WASH STA lead from CARE USA.

9. Consultant application requirements

Interested candidates must meet the following criteria:

Requirements:

- Lead consultant should hold a graduate degree or other qualifications in International Development, Public health, marketing, and sales-related field.
- Expertise in Market Based Sanitation and human-centered sales approach would be an added advantage
- At least 2 years of experience developing training materials and field tools for WASH SBC, ideally for MBS and human-centered sales efforts.
- Strong proficiency in English and Kinyarwanda,
- Previous experience developing sales and marketing models (or similar context) is highly desirable.
- Cultural and GESI sensitivity and strong interpersonal skills are essential.
- Demonstrated facilitation and training skills preferred
- Management, planning, coordination, organisation, and facilitation skills
- Flexibility and complete availability for the whole duration of the evaluation contract
- Excellent interpersonal and communication skills
- Spoken and written fluency in English & Kinyarwanda is a requirement.
- Flexibility, tenacity, and a results-oriented approach are essential for success.

Desirable:

- Previous experience with integrated learning in USAID projects will be an advantage.
- Familiarity with a Human centered sales approach

10. How to apply

The application file should contain the following documents:

- Detailed Curriculum Vitae of the proposed team or firms who are proposing to carry out the work (if a team is envisaged, ensure the repartition of roles is clearly explained);
- A technical offer, a proposal with a clear timeframe and a description of the proposed methodology for each specific objective of these TORs, and detailing how the deliverables will be achieved;
- A financial offer detailing the various costs associated with the delivery of the above services per each category i.e. development and/or adaptation of each material or tool; training and coaching services. Itemized daily rates for each consultant type are required. Financial offer shall be submitted in PDF format and must be a separate document from the technical offer;
- Evidence of the consultant's experience in a similar assignment: Copies of similar assignments (with evidence for good completion of the previous similar assignments);
- Consultant firm profile; VAT registration certificate; RRA tax clearance certificate; RSSB tax clearance certificate (when applicable).

Interested consultants or consultancy firms are requested to submit electronically their offers not later than December 30th,2022 at 5:30 pm local time to the following e-mail address: rwa.procurement@care.org, with mention of **"Application: for development of market - based sanitation training materials and coaching services in Rwanda"**

Kigali, December 8th,2022


Procurement Unit