Habitat for Humanity® Nepal

Terms of Reference (ToR)

Midline Survey

(Short-Term Consultancy Services)

Project: Integrated WASH management support for Vulnerable Communities in Chinnamasta, Saptari District, Nepal

Duration: 58 days

Date of Publication: 15 Sep 2026

Deadline: 29 Sep 2026

Nature of assignment	**Midline Survey** of Integrated WASH management support for Vulnerable Communities in Chinnamasta, Saptari District, Nepal
Location	Kathmandu, Nepal
Published Date	15 Sep 2026
End date of application submission	29 Sep 2026

1. About Habitat for Humanity Nepal

Habitat for Humanity Nepal (Habitat Nepal) is an international non-governmental organization that is driven by the vision that everyone deserves a decent place to live. Our partnership with communities, governments, private sector including entrepreneurs and financial institutions, youth networks, and academia, allows us to serve low-income families by improving habitability, tenure security, access to basic services and affordability of housing solutions. Our integrated programming serves to benefit 3 million people over the next three years, through direct and incremental construction, affordable housing finance, affordable construction technologies and services, and evidence-based policy advocacy for housing adequacy as a fundamental right. Responding to the root causes of inequity in the housing ecosystem, Habitat Nepal leads with a systems-strengthening approach, facilitating development of inclusive housing markets, removing key policy barriers and empowering communities through people-centered approaches, for a stronger and more equitable housing ecosystem.

2. Project Background

Habitat for Humanity International Nepal (Habitat Nepal) has been implementing the "**Integrated WASH Management Support for Vulnerable Communities in Chhinnamasta, Saptari District, Nepal" project**. The project is funded by the Korea International Cooperation Agency (KOICA) through Habitat for Humanity International Korea and is implemented by Habitat for Humanity International Nepal in partnership with Save the Saptari (StS) in Chhinnamasta Rural Municipality. The project has a duration of 2.5 years, from July 2025 to December 2027.

Goal/Impact

The SAFAI project aims to reduce fecal-oral and waterborne diseases among Dalit communities in Chhinnamasta Rural Municipality, Saptari, Nepal, by strengthening local government systems, improving WASH infrastructure, and raising awareness among community members.

Outcome

The project will work closely with the local government to establish and strengthen mechanisms for the delivery of WASH-related services and activities, with the aim of sustaining project results and improving the health and well-being of marginalized communities in the long term.

2.1. Working Approaches

The project achieves its goals through three core interlinked pillars:

Infrastructure-led WASH Solutions: Installing flood-resilient deep tube wells, water tanks, distributing household-level Bio-sand Filters, and constructing climate-resilient, GESI-sensitive household toilets and private bathing spaces.

Community-led Behavior & Governance: Forming of village, ward, and municipality-level WASH Management Committees to strengthen the government WASH system and engage community members in cleaning and maintaining shared space, thereby reducing their exposure to health risk and hazard. And mobilizing local Youth Volunteers to deliver iterative, demonstration-based health and sanitation hygiene education.

System Strengthening & Market Integration: Building the technical capacity of municipal health posts and centers, training local masons and entrepreneurs to offer low-cost, ecological sanitation options, and advocating for local government budget allocation to ensure long-term sustainability of WASH services.

3. Conceptual Framework: Means-End Logical Relationship

A critical conceptual focus of the SAFAI Midline Evaluation is the rigid separation and causal validation of the project's hierarchy of objectives. This evaluation must reject simple descriptive reporting of isolated outputs and instead evaluate the causal, interlinked progression from outputs to outcome, and ultimately to the impact level.

The causal links are established as follows:

- **The Ultimate Goal (Impact Level):** Reducing fecal-oral, waterborne, and vector-borne diseases (morbidity of diarrhea, typhoid, dysentery, scabies) among the target Dalit and marginalized populations, thereby reducing household medical expenditures, recovering productive working days, and alleviating poverty.
- **The Intermediate Outcome (Behavioral & Environmental Level):** The sustained practice of positive WASH behaviors (regular toilet use, proper fecal containment, boiling and filtering water, consistent handwashing with soap at critical times, hygienic disposal of menstrual waste) and the presence of functional, safely managed infrastructure.
- **The Direct Output (Enabling Level):** The physical construction of facilities (toilets, tube wells, bathing rooms, piped water distribution), distribution of bio-sand filters, community cleaning activities, testing of water sample and the delivery of interactive WASH training sessions to youth, communities, and municipality staff.

Therefore, the midline evaluation must analyze the **multivariable correlation** between these levels. The evaluation must answer the core question: To what extent has the provision of WASH infrastructure (Output) successfully enabled and translated into sustained behavior change (Outcome), and has this behavior change directly caused a reduction in waterborne disease incidence and medical debt (Impact)?

4. Objectives

The main objectives of the assignment are;

a. To **determine the midline values of the project outcome and impact indicators** and compare them with the baseline values, as defined in the Project Logical Framework and MEAL Plan. The findings will provide a basis for monitoring and evaluating the progress, effectiveness, lessons and achievements of project interventions and for measuring changes between the baseline, midline, and endline surveys.
b. To **assess the knowledge, attitudes, and practices (KAP) Progression:** Synthesize qualitative and quantitative data to evaluate shifts in community knowledge, cultural attitudes, and daily practices regarding safe water storage, ecological sanitation, GESI-sensitive personal hygiene, and menstrual hygiene management (MHM).
c. **Evaluate local WASH Governance and Exit Strategies:** Analyze the technical, financial, and operational capacity of Municipal and Village/Ward-level WASH Management Committees, specifically tracking the institutionalization of local government budget commitments and sustainability mechanisms.
d. **Capture and Evaluate Beneficiary Feedback on Project Interventions:** Gather qualitative and quantitative feedback from households that received integrated physical interventions to systematically measure user satisfaction, household ownership, and perceived improvements in safety, dignity, and GESI inclusion.
e. **Deliver Actionable, Evidence-Based Recommendations for Mid-Course Correction and Future Programming:** Identify operational bottlenecks, community priorities, and institutional gaps, and formulate concrete and recommendations for mid-course correction during the remaining project period, as well as for the design and planning of potential follow-on programming for 2028-2030. Recommendations should include concrete behavioral motivation strategies (e.g., RANAS/SBC models), priorities, approaches, areas for improvement, and appropriate exit roadmap to support the sustainability and transition of project interventions.
f. **Access the Status of Inclusivity: A**ssess the extent to which the project has promoted equitable and accessible WASH services, including the participation and decision-making of marginalized communities including Dalit community, women and the persons with disabilities.

5. Scope of Work

The selected consultant/consultancy firm will review and update the KAP survey tools used during the baseline survey based on the project's outcome and impact indicators, identify potential wash related indicators and complete tasks as mentioned in the objectives.

5.1. Quantitative Questionnaire Refinement & Standardization

The consultant must review, refine, and standardize the 2025 Baseline Questionnaire to comparison (Compatibility) and rigorous data capture, the following standards apply:

- **Incorporate Project Filter & Exposure Identifiers:** Insert explicit filter questions to segment households into (a) direct project beneficiaries (by year of intervention), (b) community exposure groups, and (c) unexposed/extended comparison groups. This is mandatory to support Difference-in-Differences (DiD) and cross-cohort comparisons between treatment and control areas.
- **Deploy Structured Observation Checklists:** Complement subjective, self-reported practices with structured, mandatory visual verification by enumerators (e.g., visual presence of water/soap at the handwashing station, clean handpump platforms, functional drainage, used and clean toilet pans, functional toilet pit, presence of doors/locks/latching in private bathing spaces).
- **Maintain Consistent Likert & Binary Scales:** Ensure all core KAP cognitive and attitudinal questions retain their original Likert scale structures to allow statistically valid paired t-tests, chi-square tests, and regression analyses across timelines.

5.2. Qualitative Research Design (FGD & KII)

Qualitative research must go beyond unstructured narratives and target key institutional, community, and household stakeholders to cross-examine and triangulate quantitative findings.

5.3. Qualitative Survey Sampling and Topics Specification

The consultant must execute qualitative data collection in strict accordance with the minimum sampling requirements, target groups, and core inquiry areas detailed below:

Target Stakeholder Group	Methodology & Sample Size	Core Areas of Inquiry
Local Government Authorities	KII Min. 6 Interviews with Chairperson, Vice Chairperson, Chief of health department/WASH Focal Person, Planning officer, Chief of Administration, Ward 3 and Ward 7 Chairpersons, Head of district WASH committee etc.	-Municipality/Ward-level WASH budget allocation, utilization, and expenditure status -Current status and progress of the WASH policies/plan, guideline, standards operating procedure. -Government plans for financial and technical support for operation and maintenance (O&M) after project completion, including budget allocation and responsible entities. - Community participation in WASH planning and prioritization process.

Target Stakeholder Group	Methodology & Sample Size	Core Areas of Inquiry
Health Posts / Private hospital/clinic WASH Focal Persons	KII Min. 5 Interviews - Health Post and center In-charge-3 - Representative of private hospital/clinic-2	-Monthly trends in waterborne and WASH-related diseases among health-post patients, including diarrhea, dysentery, and relevant skin diseases -Changes in waterborne disease trends between the pre-project and post-project periods -Perceived effectiveness and impact of community health and hygiene education -Current status of integrated sanitation program implementation and perceived community satisfaction
Social Mobilizer	KII Social Mobilizer-3	- Effectiveness of wash center, regular monitoring visit, people's perception on wash program, sustainability of wash center etc - Awareness and engagement of local government representatives and relevant stakeholders on inclusive and sustainable wash.
Entrepreneur	KII Bio sand filter entrepreneur-1	– Purpose of biosand filter production business, trend of bio-sand filter sales, people's awareness and use of biosand filter, sustainability of biosand filter business, willingness to continue business
Focus Group Discussion (FGD): Each FGD will comprise approximately 8-12 participants and will ensure meaningful representation of women, marginalized groups, and persons with disabilities, where relevant.		
WASH Management Committees	FGD: Min. 6 Groups - 15 Village committee representatives-4 - 7 Ward committee representatives -2	-Perceived changes in the living environment -Usability and satisfaction with the use and maintenance of project-supported toilets, drinking-water pumps, and bio-sand filters

Target Stakeholder Group	Methodology & Sample Size	Core Areas of Inquiry
Community people (Dalit, Women, etc)	FGD Min. 05 Groups Participants of WASH training sessions-2 (1 only for women), Benefitted households from construction work-1, unexposed community people-2	-Perceived improvements in safety and privacy resulting from the introduction of women-friendly water pumps -Community ownership of self-led activities (e.g., community cleaning and waste collection) and key challenges - Community participation in WASH planning and prioritization process. - Functionality of wash committee- regular meeting, monitoring, coordination and communication with WWASHMC, wash related issues identification, plannig and recommendation. - (Youth Volunteer) Challenges encountered during youth volunteer training
Youth Volunteer	FGD Min. 1 Groups (5 men and 5 women)	

6. Methodology

To guarantee high precision and replicate the baseline statistical boundaries, the midline survey will employ a mixed-method social research design with a stratified random sampling approach covering all 7 wards of Chhinnamasta Rural Municipality (Total Universe: 6,380 households, 29,835 population).

6.1. Stratified Quantitative Sampling Structure

The universe population will be strictly stratified into two main cohorts:

- **Stratum A: Core Program Clusters (15 Target cluster):** Composed of Dalit, Muslim, and Janajati households (Universe: 2,184 households). To achieve a 5% margin of error and a 95% confidence level, a minimum of **327 sample households** must be selected. These must be divided proportionately: 201 Dalit households (62%), 24 Muslim households (7%), and 102 Terai/Madheshi other caste group households (31%).
- **Stratum B: Extended Community Comparison Group:** Composed of families from remaining communities in the municipality (Universe: 4,196 households). To achieve a 5% margin of error and a 95% confidence level, a minimum of **353 sample households** must be selected, divided proportionately: 23 Dalit households (7%), 37 Muslim households (10%), 268 Madheshi other caste group households (76%), 22 Madheshi Brahmin/Rajput/Kayasth households (6%), and 33 Madheshi Janajati households (1%).

Total Quantitative Sample: The consultant will survey a total of **680 households** (representing 10.66% of the entire municipality's household universe).

6.2. Methodological Context: Why Randomized Sampling and Denominator Alignment Matter

The midline evaluation must strictly replicate the stratified random sampling design (N=680) established during the 2025 Baseline survey to ensure scientific rigor and compatibility. Restricting the survey sample strictly to the 390 direct physical infrastructure beneficiary households is methodologically incorrect and introduces severe selection bias. By maintaining an RM-wide randomized sample across both Core and Extended strata, the study preserves a valid control/comparison group, which is essential for measuring overall community-level behavior change and isolating the true impact of the project's interventions.

To evaluate outcomes specifically among direct physical beneficiaries within this randomized sample, the household survey (HHs) must incorporate screener/filter questions (e.g., verifying whether the household received a dual-ring toilet, a handpump with a raised platform, or a bio-sand filter since 2025). This allows the data analyst to cleanly segment 'direct beneficiaries' from 'comparison/non-beneficiary groups' within the same statistically valid N=680 dataset.

6.3. The Two-Track Evaluation Strategy: Resolving the Baseline Mismatch

Due to the administrative and statistical divergence between the PDM's planned baseline figures (based on Year 1 pilot data) and the actual 2025 Baseline Survey findings, the evaluation will utilize a **Two-Track Comparison Strategy:**

- **Track A (Baseline -> Midline -> Endline):** For reliable, macro-level indicators where the 2025 survey yielded clean, comparable statistical values (such as diarrhea morbidity at 17.9%, handwashing with soap at 31%, or basic toilet ownership), the midline will directly measure and track the progress from the baseline.
- **Track B (Midline -> Endline):** For newly introduced behavioral indicators, user satisfaction, housing dignity, and specific beneficiary feedback metrics (which had no clean baseline equivalent), the Midline (2026) will serve as the **true clean baseline.** Progress for these indicators will be measured systematically through the final Phase and evaluated during the Endline Survey (2027). This preserves M&E integrity and eliminates administrative distortion.

7. Evaluation Framework and Methodological Guidance

To ensure the midline evaluation provides reliable and KOICA-compliant data, the consultant must apply a structured **WASH Evaluation Framework**. The framework defines the core performance indicators and their logical relationships across the project results chain, from inputs and physical outputs to behavioral outcomes and longer-term health and socioeconomic impacts.

7.1. The Logical Evaluation Chain

The **WASH Logical Evaluation Chain** establishes the causal pathway through which project inputs and activities are expected to contribute to physical outputs, medium-term behavioral outcomes, and ultimately longer-term health and socioeconomic impacts.

- **Inputs & Outputs:** The survey must monitor physical access, verifying whether household toilets are built resiliently (e.g., dual septage rings), whether handpumps have raised platforms and proper drainage, and if bio-sand filters are functional and actively utilized.
- **Outcomes:** The survey must measure the exact adoption of WASH behaviors using rigorous household-level verification and triangulation. It ensures that 'access' translates into consistent and hygienic 'practice'.
- **Impacts:** The survey must cross-reference infrastructure access and behavioral changes with morbidity reduction (incidence of diarrhea and typhoid) and economic recovery (medical expenses saved and recovery of lost working days).

7.2. Multi-Dimensional Composite Indicators & Coding Instructions

To prevent data over-reporting and ensure statistical rigor, the midline survey must measure the project's core outcomes using multi-dimensional composite variables (AND Logic). Bidders must demonstrate in their technical proposals how they will code and program the raw data to measure the project's two core composite outcome indicators. **Simple summation or separate averages of individual survey questions are strictly prohibited.** A household or individual shall only be counted as achieving the outcome if all defined criteria are simultaneously satisfied within the same household ID.

Outcome Indicator 1: Number of females using safely managed sanitation facilities

Indicator Name: Cumulative number of females using safely managed sanitation facilities (Baseline: 146, Yr2 Target: 682, Yr3 Target: 1,096). This indicator measures access to safe, private, and dignified sanitation for women and girls. During KoboToolbox statistical coding and analysis, a female household member is counted under this indicator **ONLY when all three of the following conditions are simultaneously met (Condition A and B and C):**

- **Condition A: Exclusive & Managed Access (HHS Q D1 & D2):** The household has access to a private toilet, or a private toilet shared only with identified neighboring families (not a general open public latrine).
- **Condition B: Safely Managed Containment (HHS Q D5):** The toilet is connected to a functional septic tank (double-ring leaching pits) that prevents environmental leaching and fecal contamination.
- **Condition C: Dignity, Privacy & Safety (Observation Q D18 & HHS Q E6):** The toilet structure has four stable walls (brick/block or plastered bamboo), a secure ceiling/CGI roof, a solid door, and a functional door latch inside to guarantee complete physical safety and privacy for female users.

Outcome Indicator 2: Number of people practicing WASH behaviors

Indicator Name: Cumulative number of people practicing WASH behaviors (Baseline: 0, Yr2 Target: 1,067, Yr3 Target: 1,892). This indicator verifies complete household-level WASH behavior adoption. To be recorded as 'practicing WASH behaviors', **all three of the following hygiene behaviors must be verified simultaneously (Condition X AND Y AND Z) for the household:**

- **Condition X: Safe Water Quality & Handling (HHS Q C1, C3, C5):** The household utilizes a tested tube well/handpump AND treats drinking water using a functional bio-sand filter (BSF) or boiling, AND stores drinking waer in a covered, clean container.
- **Condition Y: Absolute Open Defecation Free Adherence (HHS Q D3):** All household members consistently use the toilet facility, with zero reported or observed instances of open defecation (e.g., in nearby bamboo groves or fields).
- **Condition Z: Verified Handwashing Practice (HHS Q H8, H10):** Household members report washing hands at critical times (after defecation, before eating, and before cooking), and the enumerator physically observes the presence of both soap and water at the designated handwashing area.

7.3. Methodological Reconcile Guidance Note

During evaluation and reporting, the consultant must address the conceptual difference between the KOICA PDM contract targets and the 2025 baseline survey findings as follows:

- **Double-Baseline Reporting:** In the final midline report, the evaluator must report progress against BOTH the administrative PDM baseline (e.g., 146 females for Outcome 1) and the actual statistical baseline (20.8% for Outcome 1). This ensures contractual compliance with KOICA while presenting a scientifically honest evaluation of project progression.
- **Re-evaluating the '0' Baselines:** While the official PDM baseline for Output 1.2 and Output 1.3 is '0', the 2025 baseline survey discovered minor existing interventions (such as 144 individuals with historical hygiene training or handpumps installed by the Municipality). The midline survey must clearly isolate our project's direct interventions from these municipal/external activities to avoid attribution errors.
- **Accounting for GESI-sensitive Vulnerabilities:** The midline data must be cross-analyzed with GESI metrics from the 2025 Baseline Survey, notably that Tarai Dalit groups (Musahar, Khatwe, Chamar) represent 44.3% of the target group and 7% of families have members with physical disabilities. The evaluator must check if these marginalized groups are receiving equal access to safely managed toilets (Target: 170 in Year 2).

8. Key Deliverables and Timeline

The key deliverables for the consultancy are:

a. Inception Report outlining the study design, methodology, sampling approach, detailed work plan, quality assurance measures, ethical considerations, and data analysis plan.

b. Review and/or update survey tools for qualitative and quantitative data collection (KAP questionnaire, FGD guide, KII guide with observation checklist and digital survey tools).
c. Conduct midline survey (household questionnaire, FGD, KII).
d. Analyze baseline and midline survey datasets as per the outcome and impact indicators and provide in MS Excel sheet.
e. Draft midline report comparing with both baseline and midline quantitative survey findings (analyzed tables and graphs) and comparison of findings from FGDs and KIIs.
f. Presentation on findings after submission of draft report. Separate FGDs and KIIs finding reports.
g. Final midline report addressing comments and suggestions received.

8.1. Indicative Workplan & Timeline

The midline assignment must be completed within 58 working days over a period of 3 months:

SN	Activities	Output	Day required	Method
1	Coordination and planning meetings with Habitat Nepal to understand ToR better	Inception report with final methodology and work plan	3	Meeting with Habitat Nepal
2	Desk review of relevant research, reports, and other documentations	Consolidated findings from desk reviews	5	Desk review
3	Tool review/update and development	Final tools developed on paper and Kobo formats	7	Meetings with Habitat Nepal, desk review, Kobo programming
4	Data collection training, pilot testing and tool finalization	Enumerators trained	5	Theory and practical training, pilot testing
6	Field data collection	Raw data gathered	10	In-person
7	Data cleaning	Raw data cleaned and verified for accuracy	3	Data cleaning
8	Data analysis and processing	Raw data analysis, topline information identified	7	Data analysis and processing using Excel or other analysis programs

SN	Activities	Output	Day required	Method
9	Presentation of preliminary finding	Topline findings shared and verified, feedback on findings gathered to inform final analysis	2	Meeting with Habitat Nepal, partners, selected respondents from the community and other stakeholders
10	Preparation of draft report	Draft report completed	7	Report writing
11	Presentation of draft report for feedback	Draft report shared and feedback gathered to inform final analysis	2	Meeting with Habitat Nepal/Korea and partners if applicable
12	Finalization of draft report with report brief/summary	Final report with report brief/summary completed	5	Report writing
13	Submission of final report	Final report submitted	2	Report submission

Total Required Working Days: 58 Days

9. Qualifications, Skills, and Experience

Habitat Nepal is looking for a consultant firm having the following qualifications:

- **Technical Expertise**: Demonstrated institutional capacity and a minimum of 5–7 years of relevant experience in the fields of community WASH, public health, health and nutrition, education, livelihoods, and social development.
- **Evaluation & Research Experience:** Proven competency in designing and implementing baseline, midline, and endline evaluations, including the development of appropriate methodologies, data collection tools, analytical approaches, and reporting frameworks to assess WASH-related outcomes and impacts.
- **Nepal Context & Sectoral Knowledge:** Proven knowledge and experience of health and nutrition, education, livelihood, and social development policies, practices, and government and non-government structures in Nepal.
- **Statistical & Methodological Competency:** Proven competency in advanced quantitative and statistical analysis, including, as relevant, chi-square tests, regression analysis, difference-in-differences analysis, and composite variable/index construction and coding, as well as systematic integration and analysis of qualitative and quantitative data.
- **Research Tools & Data Collection Methods:** Proven competency in developing and applying research tools and methods, including literature reviews, household-level surveys, focus group discussions (FGDs), and key informant interviews (KIIs) with diverse

respondent groups, including women, community members, and government and non-government stakeholders.

- **Data Management & Research Ethics:** Demonstrated experience in ethical data collection and research practices, including data recording, quality assurance, processing, cleaning, management, and analysis.
- **Digital & Statistical Software:** Excellent computer skills with high proficiency in Microsoft Word and Excel, and demonstrated practical experience using digital data collection and information management platforms such as KoboToolbox and ODK, and statistical/data analysis software such as SPSS and R.
- **Team Coordination:** Proven experience in coordinating effectively with multidisciplinary and diverse teams, including government, non-government, community, and other relevant stakeholders.
- **Language & Communication Skills:** Professional fluency in spoken and written English and Nepali, with strong report writing, communication, and interpersonal skills. High-level English writing skills are mandatory.
- **Interpersonal & Reporting Skills:** Excellent communication, writing, analytical, presentation, and interpersonal skills, with the ability to communicate findings clearly, concisely, and with impact.

10. Evaluation Criteria

70% weightage is assigned to the technical proposal and 30% to the financial proposal. Technical proposals securing less than 50 out of the total possible 70 will be disqualified. The proposal that scores the highest based on the sum of technical and financial proposal scores will be selected.

11. Coordination and supervision

Under the supervision of MEAL Manager, the consultant will work closely with Habitat Nepal and Habitat Korea project lead and MEAL team. The consultants will be required to undergo a session on Habitat's Safeguarding policies as part of the onboarding process.

12. Support from Habitat Nepal

Habitat Nepal will provide following documents and support to the consultant to complete the midline survey:

- WASH Projects' documents, logical frameworks and MEAL plans
- Baseline survey report and database
- Project's progress report- annual and semi-annual
- List of individual household data of Chhinnamasta rural municipality and project cluster data for the sampling purpose
- Organize meetings at various phases of the study, including meetings with partners, government institutions, and Habitat Nepal staffs
- Review survey tools and draft report and provide input

13. Mode of Payment

Payment will be made against the agreed consultancy contract value according to the following schedule;

- 40% upon submission and acceptance of the inception report and finalized methodology/tools
- 40% upon submission and acceptance of the draft final report and
- 20% upon submission and approval of the final report and all agreed deliverables.

14. Ethical Standards

In accordance with its foundational mission principles, Habitat for Humanity Nepal is committed to the highest ethical standards and opposes all forms of discrimination, exploitation, and abuse. We intend to create and maintain a work and living environment that is safe, productive, and respectful for our colleagues and for all we serve. We require that all staff and representatives (consultants, contractors, vendors/suppliers, interns, volunteers, agents, and implementing partner organizations) take seriously their ethical responsibilities to Safeguarding (Child and Adult), Prevention of Sexual Exploitation, Abuse and Harassment (PSEAH) to our intended beneficiaries, their communities (especially children), and all those with whom we work. Abiding with the organization, the consultancy service has responsibilities to maintain an environment that prevents harassment, sexual exploitation, and abuse, safeguards the rights.

The consultant will ensure that all data collection follows appropriate research ethics and safeguarding standards. Participation will be voluntary and based on informed consent. Respondents will be informed of the purpose of the study, their right to decline participation or withdraw, and how their information will be used. Personal identifiers will be minimized, securely stored, and accessible only to authorized personnel. Particular attention will be given to the safety, privacy, dignity, and inclusion of women, children, persons with disabilities, and other potentially vulnerable participants.

Interview and data collection protocol:

The household interviews will primarily be conducted through face-to-face interviews at the respondents' households or another mutually agreed, safe, and private location. Where face-to-face interviews are not feasible due to exceptional circumstances, an alternative modality (such as telephone or other remote interview) may be used with prior approval from Habitat for Humanity Nepal and where it is appropriate to the study design. Interviews must be conducted using a pre-tested and approved structured questionnaire by trained enumerators. Enumerators will introduce themselves, explain the purpose of the survey, confirm eligibility, obtain informed consent before commencing the interview, and conduct the interview in a respectful, culturally appropriate, and non-judgmental manner.

Interviews will, as far as practicable, be conducted in a private setting to protect respondents' confidentiality and to minimize the influence of other household members or community representatives on responses. Respondents will not be required to disclose their name or

other directly identifying information unless necessary for the approved research purpose. Interviews with women, persons with disabilities, or other potentially vulnerable participants will be arranged in a manner that respects their privacy, dignity, safety, and communication needs. No interview will be conducted in circumstances where the participant may feel threatened, pressured, or unable to provide free and informed responses.

15. Copyright and Ownership

All reports, datasets, tools, analysis files, photographs, and other materials developed specifically under this consultancy will become the property of Habitat for Humanity Nepal, unless otherwise agreed in writing. Habitat Nepal will retain the right to use, reproduce, adapt, and share such materials with relevant partners, local government authorities, and other stakeholders, subject to applicable confidentiality and data-protection requirements. All documents, reports, datasets, tools, questionnaires, analysis files, photographs, presentations, and other materials developed specifically under this consultancy shall become the property of Habitat for Humanity Nepal upon completion and/or payment for the relevant deliverables, unless otherwise agreed in writing. Habitat for Humanity Nepal shall retain the exclusive right to use, reproduce, modify, adapt, publish, distribute, and share such materials, in whole or in part, with relevant Local Governments, partners, donors, and other stakeholders in Nepal and internationally, subject to applicable confidentiality, safeguarding, intellectual property, and data-protection requirements.

The consultant shall not publish, reproduce, distribute, or otherwise use the study findings, datasets, photographs, tools, or other consultancy deliverables for purposes outside this assignment without prior written approval from Habitat for Humanity Nepal. Any pre-existing intellectual property, proprietary tools, methodologies, templates, or materials belonging to the consultant or third parties shall remain on the property of their respective owners. Where such materials are incorporated into the consultancy deliverables, the consultant shall ensure that Habitat for Humanity Nepal has the necessary rights or licenses to use them for the intended purposes of the assignment. Ownership and use of personal data and information collected from respondents shall be governed by the applicable data protection, confidentiality, safeguarding, and ethical requirements. Raw datasets containing personally identifiable information shall not be shared with external parties without appropriate authorization and safeguards.

16. Application Requirements

- A Technical Proposal detailing the interpretation of the TOR and work schedule. The technical proposal should at a minimum include the following information in your interpretation of the TOR:
  - Detailed work plan and methodology.
  - Key deliverables
  - A capability statement demonstrating how applicants meet the required qualifications and competencies, along with one sample from previous work similar to this assignment.

  - Two reference details from former clients.
- A copy of organization/institution registration certificate.
- A copy of the latest tax clearance certificate.
- PAN/VAT registration document and the number.
- Copies of Curriculum Vitae (CV) of the key team members (as an annex).
- **Signed and stamped copy of financial proposal in a separate envelope** with details of all relevant costs including but not limited to fees, travel, transport, accommodation and all applicable taxes.
- The entire proposal should be a maximum of seven (7) pages. Proposals not meeting this requirement will not be considered.
- Confidentiality of Information: All documents and data collected will be treated as confidential and used solely to facilitate analysis.

17. Instructions to Submit the Proposal

Interested national reputed and qualified organizations/firms should submit their technical and financial proposal including testimonials/certificates in the form of hardcopies in a **separate sealed/closed envelope.**

Please write **"Midline Survey of Integrated WASH management support for Vulnerable Communities in Chinnamasta, Saptari District, Nepal"** on the envelope.

Please send the sealed proposal to Administration Department at Habitat for Humanity Nepal, House No. 126, New Colony Marg, Dhobighat, Lalitpur, Nepal. Contact: +977 1 5421182, 5454976

For any queries contact the following email address **np.info@habitatnepal.org**

Application deadline: 29 September 2026

Habitat for Humanity® Nepal

#126 New Colony, Dhobighat, Lalitpur

Phone: +977 1 5421182, 5454976

Email: np.info@habitatnepal.org

Website: habitatnepal.org