## Request for Proposal (RfP) for Engagement of Consultant

Jayaprakash Institute of Social Change (JPISC) invites Request for Proposal (RfP) for developing a Resource Directory for a project titled 'Mitigating the impact of Covid-19 through community resilience and improved access to treatment in Five Districts in West Bengal'

#### **TERMS OF REFERENCE**

Resource Directory (RD) on mental health problems of children and adolescents in schools and community settings in Five Districts namely, Paschim Bardhaman, Purba Bardhaman, Birbhum, Paschim Medinipur and North 24 Parganas in West Bengal.

District	Panchyats/Municipalities
Paschim Medinipur	Kharagpur and Midnapur Municipality
Paschim Bardhaman	Asansol Municipal Corporation and Jamuria Block
PurbaBardhaman	Katwa-I and Ketugram-II Blocks
North 24 Parganas	Madhyamgram Municipality
Birbhum	Suri-I and II Blocks

**Duration of the Study**: 30 days

## Presence of Jayaprakash Institute of Social Change (JPISC)

Founded in 1973, the non-governmental organization *Jayaprakash Institute of Social Change* (JPISC) operates as a leading social research institute in eastern and northeastern India. JPISC offers degree programs in social work, psychological counseling, and child protection affilitiated to Vidyasagar University, which are accredited by UGC. JPISC is active in the areas of child protection, mental and physical health, gender issues, and livelihood security, and thus contributes to shaping the policy framework. To this end, JPISC works with a wide range of relevant actors at different levels.

# **Background:**

The deadly disease COVID-19 has affected the world in numerous ways. Since its arrival and outbreak in India more than two years ago, the conditions of day-to-day life have been deteriorating for the majority of the Indian population, particularly the most vulnerable and marginalized groups. The implications of the disease can be visualized in terms of physical and mental health, the unaffordability and inaccessibility of proper treatment, the continuous decline of the economy with rising poverty and unemployment. The disease had a serious economic impact on India's population. Numerous people have lost their work and income, while facing ongoing food insecurity and inadequate health service provision. The trauma and brutality experienced by the migrant population during their long walks returning to their hometowns, is going to stay with them for a substantial period of time shattering their mental health. The COVID-19 pandemic brought a complex array of challenges with mental health repercussions for nearly everyone, in particular children and adolescents. Grief, fear, uncertainty, social isolation, increased screen time, and parental fatigue have negatively affected the mental health of children. The planned project therefore envisages building resilient and adaptable service delivery systems that will be able to withstand crises, which engulf the entire society, but especially underserved and marginalised communities.

#### **Project Objectives**

- 1. Improvement of the capacity of 25,000 people in the target location to mitigate the negative effects of Covid-19 through community resilience building.
- 2. Improvement of the social and economic life situations of 3,000 vulnerable families (due to Covid-19 and other health challenges) through access and usage of healthcare services, social protection and livelihoods schemes of the government

3. Improvement of physical, social and psychological well-being of 20,000 schoolchildren and adolescents in 100 schools in five districts who have been affected by Covid-19.

## Target group

The direct target group includes the vulnerable communities in slum areas, close to market places, bus stations, and railway platforms, daily wage labourers and homeless people, children who lost their parents due to COVID-19, children who face or witness abuse, as well as families in need of psychosocial support. The project's direct target group also includes people who will be linked to social protection services of the government, e.g. food security, health insurance, social security benefits, and disability and other pension. The project also targets school children whose learning was seriously disrupted because of no access to internet-based learning during the lockdown periods. The project also intends to build capacities of the frontline workers e.g. ASHA workers, AWWs, Childline team members, schoolteachers, local media persons and members of PRIs and Municipalities.

## Objectives for the RD

The broad objective of the assignment is to prepare a RD containing all services/schemes run by the Govt and private organisations in Howrah district relevant to address the mental health needs of children which will help devising appropriate treatment plan and referrals.

One of the major components of the project is Capacity Building of the stakeholders such as school teachers, parents, guardians, mental health service providers, communities, Municipal Councillors, Political leaders, CSOs etc with a focus on mental health issues for the children and understanding and responding to mental health needs of children. The capacity building will be complemented with development of a RD with repository of information about various support services e.g. treatment facilities available, counselling services, psycho education, legal aid, residential care, alternative care, information about the statutory bodies under juvenile justice system, resources available at Howrah district to link the children suffering from psychological distress with these services. This RD is intended to equip the frontline social workers to provide appropriate referrals. It is a convergent platform that has relevant information pertaining to allied departments. The users of this app are primarily the schools administration, front-line caregivers of NGOs, mental health service providers, the families with mentally ill children and the community at large.

## Scope of work under the assignment

- Reviewing the information: Reviewing the existing resource directories of services available for the mentally ill persons.
- Validation of Data and cross-checking: Validation of the collected data for example, all defunct schemes will be excluded and any new schemes will be included.
- Sourcing of Data: Information related to mental health care services provided by the government and private organizations, institutional and day care facilities, child guidance clinics, if any, services under District Mental Health Programme (DMHP), child welfare committees, juvenile justice boards, district child protection officers in the districts of Howrah.
- A format will be designed comprising information about name of the institutions, category of resources, type of entity, postal address, telephone no, mail id and key services etc.
- Updating the existing information and adding new resources pertaining to health care facilities at the district and block level, health insurance schemes and social protection services with eligibility, target group, sources of the services, mental health services and the service providers, shelter, livelihood, legal aid and other convergent programmes which are useful for care, protection, treatment and rehabilitation of the children with psychological and emotional problems and linking vulnerable families with such services.

Addition of important HELPLINE numbers.

#### Methodology of collecting information:

- Review and validate the existing Resource Directories, if available.
- Data will be collected from various secondary sources such as reports/documents, websites, online portals and resource directories developed by other organisations
- Coordinate with Govt departments and other service providers for collection and validation of data.
- Apart from visiting the Govt departments for collecting information, information will be collected via office visits, mail, and telephonic conversation with various district level officials.
- Collation of information on various thematic areas.
- Sources of relevant documents shall be mentioned.
- Final validation of data and information in consultation with the JPISC child protection team and Donor

#### **Deliverables**

- Final draft on the Directory with validated information about on-going government schemes at the state, district and local levels with information about eligibility, target group, access mechanism etc relevant to mental health needs of children.
- Directory containing updated information pertaining to mental health, shelter for mentally challenged children, livelihood, legal aid and other convergent programmes which are useful for care and protection of children affected by psychological distress.
- A format comprising information at state, district, block and local level including statuary bodies, name of the institutions, category of resources, type of entity, postal address, telephone no, mail id and key services for treatment, counseling, institutional care, guidance clinic, health insurance, support services etc for the addressing the mental health needs of the children.

## Tasks and products of the Resource Directory:

It is anticipated that the consultancy period would be for a period of 30-35 days and it is expected that Consultant/Agency will complete all aspect of project within this period. It is recommended that the Consultant/Agency should provide a Gantt chart/timeline showing clearly the steps of preparing the Resource Directory and the time assigned to each step.

Activities	Time frame (Working Days)
a. Desk Review and Inception Report	3 days
b. Planning meeting and discussion	2 days
c. Data Collection	15 days
d. Preparation and Submission of draft report	5 days after completion of the Data Collection
e. Final Report	4 days after receiving the feedback from JPISC
f. Sharing of the report findings and recommendations with JPISC through a presentation	1 day

#### **Qualifications of the Consultant**

- Applicants may be individuals, groups of individuals with a designated team lead, or consultants.
  Applicants must have at a minimum the following qualifications:
- Candidates should have a Master's Degree in Social Work, Psychology, Sociology or significant professional qualification in the related fields.

- At least 10 years of experience of conducting study, survey or assessment particularly on the issues of children and young people
- Experience of working in child protection issues
- Experience of conducting research work with Government and INGOs
- Fluent speaking skill in Bengali and Hindi
- Good writing and speaking skill in English
- Strong facilitation skills and proven ability to lead participatory processes
- The consultant will work in collaboration with JPISC on the field, and finalize all tools to be used in the survey in consultation with JPISC and representatives of Donor.

#### **Application Procedures**

Please send proposal in not more than 2-3 pages in pdf version I) Request for Proposal (RfP) including methodology to be used for collecting data from different categories of stakeholders and collation of information on various themes. II) an updated CV of the Key Person(s) who will be engaged for the survey, III) a financial proposal detailing consultant (s) itemised fees, data collection and administrative costs on Consultant's / Agency's / Organization's letterhead (signed and scanned pdf version), IV) an example of similar studies carried out (if possible), V) contacts of 3 references (One must be current or most recent employer). Key persons proposed in the application can't be replaced while conducting the survey for the RD.

The subject line of the e-mail should read: 'Resource Directory for Mitigating the impact of Covid-19 through community resilience and improved access to treatment in Five Districts in West Bengal'

Last date for submission: 25th April, 2023. Send the proposal at jpisc1973@gmail.com

Recruitment procedure follows the JPISC's Child Safeguarding Policy, including reference checks. Only short-listed candidates will be contacted for an interview.