



**Ilifa Labantwana, UNICEF and the Child, Youth and School Health Directorate  
at The National Department of Health**

**Terms of Reference:**

**Side-by-Side Campaign Market Research Study**

**September 2021**

## 1. Project Background

The South African National Integrated Early Childhood Development (ECD) Policy (NIECDP) of 2015 assigns responsibility for the provision of a comprehensive package of Early Childhood Development (ECD) services for children aged zero - two years to the national and provincial departments of Health (Nation). Carefully aligned with this is the Global Nurturing Care Framework, which calls out for all levels of government and sectors – especially the health sector, whose services have extensive reach among pregnant women, families and young children, to address identified gaps in support for the youngest children complementing the education sector’s work to improve pre-primary education; work together with social protection and child protection, to ensure the material and social security of families and communities, protect young children from neglect, violence and abuse; and help to realize the rights of all children, especially the most vulnerable, and ensure that no child, anywhere, is left behind.

The NIECDP highlights linkages between the well-being of mothers and that of their infants, and the importance for young children of establishing secure and loving relationships with parents and other caregivers.

Building on the work done by child health and other development initiatives like MomConnect, #LovePlayTalk, and the redesign of the RTHB, and as part of implementing the National ECD policy mandates, the National Department of Health’s Child, Youth and School Health (CYSH) cluster, with the support of private partners, developed a multi-channel/multi-media ECD/under-five campaign, called Side-by-Side which aims to support parents and caregivers with relevant information and services during their child-rearing journey.

The design of Side-by-Side campaign incorporates behaviour change theory with communication best practice, while promoting systemic change in public health system thinking and practice, from a ‘survive’ approach, to ‘survive AND thrive’.

## 2. Side by Side Campaign Overview

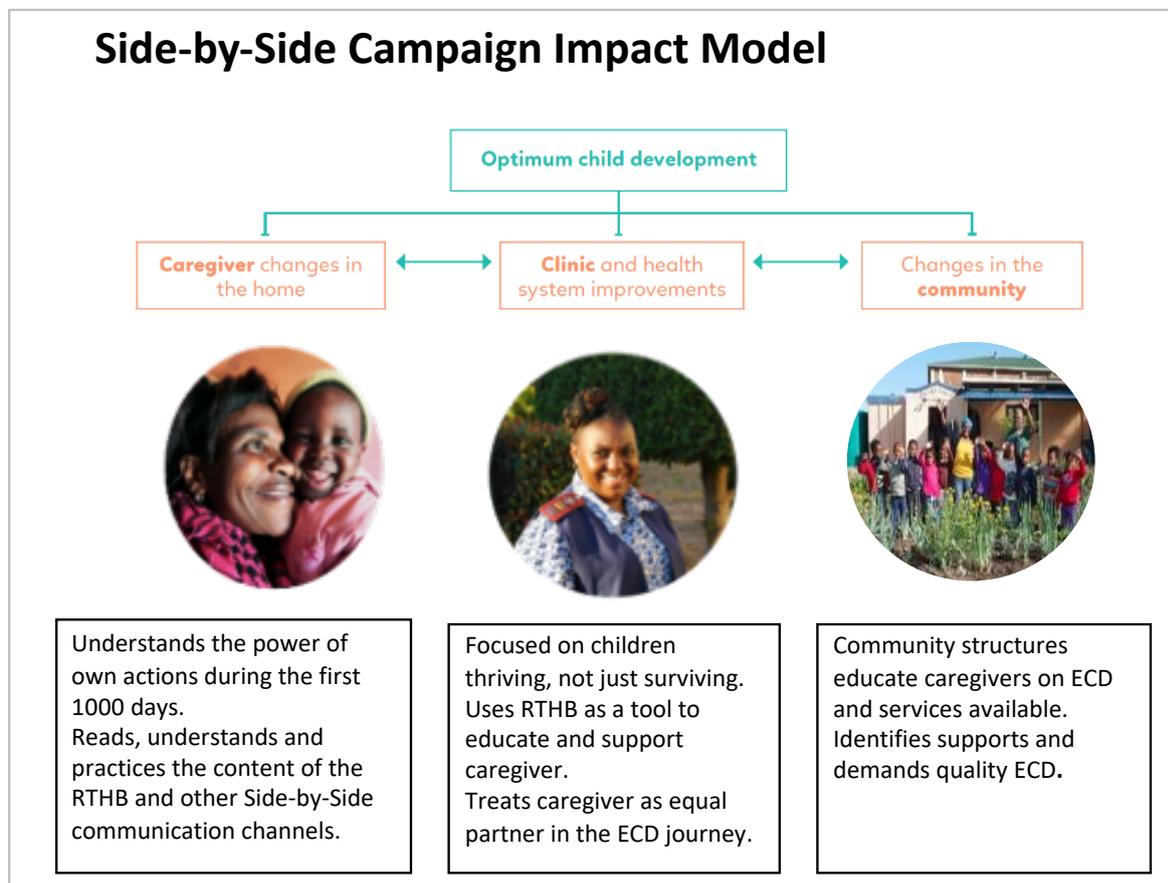
Side-by-Side is a national behaviour-change campaign, initiated by the National Department of Health with the technical support of Ilifa Labantwana (Ilifa). Its overarching goal is to ensure that all children (aged 0-5) receive nurturing care and protection to reach their full potential. With the right



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mix of nutrition, loving care, and support in their first few years of life, healthier children, perform better at school, have higher earning potential, and participate more fully in society.

The Side-by-Side campaign targets pregnant women, parents, and caregivers of young children who occupy the lower income segments of society, as well as healthcare workers. Side-by-Side conveys the concept of partnership and togetherness and speaks to the supportive and shared child-rearing journey that parents/ caregivers embark on with their children, as well as the relationship between healthcare workers and practitioners who support and advise the caregiver. Side-by-Side recognises that by taking an active role in the early childhood development process, parents/caregivers are able to ensure that their children have all the support they need to develop to their full potential.



The campaign employs a variety of communication tools to signal, promote, and support best practices in early childhood development (ECD). Leveraging on the primary health platform, mass communication and digital media technologies are used to reach the parents and caregivers of children under five with five main educational messages designed to prompt the parent/ caregiver to act.



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These are:

Theme	Message	Icon
Nutrition	<i>Your child needs to eat the right foods to be healthy and grow well. It starts with breastfeeding.</i>	
Love	<i>Ordinary loving things that you do such as holding, talking, playing and reading to your child are what helps them grow and develop. Monitoring of developmental delays.</i>	
Protection	<i>Your child can be protected from childhood disease and injury by being immunized and by taking precautions at home.</i>	
Healthcare	<i>Your child needs care when they are sick or injured to help them get better.</i>	
Extra care	<i>You or your child may need special care or support. Knowing what to do or where to go will help both of you.</i>	

The multi-channel campaign follows an integrated communication approach to create a seamless experience for Side-by-Side target audience with consistent messaging, communicated throughout different media and channels that are relevant and frequently consumed by them, thereby reinforcing the campaign's positioning and strategic objectives, of providing easy access to information on parenting and child health. Communication plays a key role in driving the campaign's objectives to increase awareness and uptake of relevant information, available services and improve demand for ECD services by providing utility to these targeted audiences (right message, right channel, right time) executed based on their unique media consumption insights.

This approach takes into consideration the demographic, economic, cultural landscape specific to the target audience, within their unique South African contexts, to craft a communication mix which includes below the line (BTL) channels such as printed posters and pamphlets and above the line channels (ATL) including local radio stations as well as appropriate social media platforms that are most popular among the campaign's target audience.

The main communication channels for the campaign are:

**The Road to Health booklet (RTHB):** At the centre of the Side-by-Side under five campaign, is the Road to Health Booklet (RtHB), revised and redesigned with the support of academics, multilateral and private foundation partners who have experience in ECD, child health and communications. The RtHB has been revised to make it more user-friendly and to maximize its potential as a tool for communication and behavioural change. The RtHB is given to all parents at the birth of each child; it serves as a health record and incorporates educational messages as informed by the five essential elements of nurturing care, namely health, nutrition, early learning, safety and security and responsive caregiving.

**Print:** a Caregiver support booklet (with all the new messages) available in 11 official South Africa languages; ECD posters in clinics and ECD centres; a breastfeeding FAQ booklet & breastfeeding in the workplace booklet;



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**Radio:** The Side-by-Side radio show, a partnership between NDOH, Ilifa and SABC Education, is broadcast on 11 public radio stations. It is 15-20 minutes in length. The first 7-10 minutes are a pre-recorded drama programme about a young mother and her parenting journey. Each drama episode contains early childhood development and/or health messages. The second 7-10 minutes is a live question and answer style programme where health and development messages from the drama episode are unpacked with an expert guest. Listeners can also call in with questions during this time. The Side-by-Side show also offers listeners an opportunity to win cash prizes by participating in knowledge test quizzes based on the drama show. The weekly public radio drama series, questions, and answers segment reach up to 5.4million people each week.

**Digital:** a Facebook page with over 25 000 actively engages followers; a RTHB App; animation videos for caregivers, campaign support videos for practitioners; campaign information banners. All Side-by-Side information is hosted on a website [www.sidebyside.co.za](http://www.sidebyside.co.za)

**Training:** Several training packages on the RTHB have been or are in the process of being developed. Short videos have also been produced to demonstrate various components of the RTHB. A training manual for nurses has been developed. DOH and partners are currently in the process of developing a training manual for community health workers, CD practitioners and care providers.

### 3. Side-by-Side Campaign Goal, Objectives & ToC

**Campaign goal:** Children receiving nurturing care and protection to enable them to reach their full health, educational, and earning potential- optimum child development

#### Side-by-Side Campaign Objectives

1. Improve primary caregiver's understanding of the full scope of care required for ECD.
2. Improve primary caregiver's understanding of their role in early childhood development care and education.
3. Shift healthcare workers focus from survive to thrive.
4. Increase utilisation of the new Road to health Booklet among primary caregivers and healthcare workers (HCWs)
5. Increase conversation and collaboration among HCWs and primary caregivers.
6. Mobilise communities to identify, support and demand quality ECD

#### Campaign Theory of Change

The Side-by-Side campaign's main goal is to ensure that children move from surviving to thriving through the adoption of best practices in the parenting journey. The diagram below highlights how the caregiver receives the messaging of the campaign and how her/his thinking, and behaviour is shifted as a result.



**CREATE AWARENESS AND SHIFT THINKING**

Radio  
In person  
Electronic/mobile  
Community  
Printed take home  
RTHB  
Materials in clinic

The caregiver is made aware that:

1. Her actions are central to child's development.
2. It starts earlier than she thinks.
3. She is not alone - health worker is side-by-side with a tool (RTHb).

She is moved to take conscious action to partake in her child's development.



**EDUCATE**

Radio  
In person  
Electronic/mobile  
Community  
Printed take home  
RTHB  
Materials in clinic

The caregiver is provided with practical and easy-to-understand information to assist her behaviour change around:

1. Providing good nutrition
2. Loving, playing and talking with child
3. Protecting child from injury and disease
4. Providing healthcare when child is sick or injured
5. Asking for extra care if you or child needs it



**ACTION: DESIRED BEHAVIOUR CHANGE TAKES PLACE**

**REWARD**

In person  
RTHB

The development milestones are met and recorded in the RTHb by the healthcare worker. She communicates them clearly to the caregiver, along with positive feedback. The caregiver's behaviour change is rewarded.



#### 4. Purpose of ToR

In view of the above, the NDOH, supported by Ilifa Labantwana and UNICEF require a service provider to carry out a Side-by-Side Market Research Study to learn from the experience of implementing the campaign from 2018 to 2020 towards creating a more effective and relevant campaign for 2021/22 onwards.

- The following are the objectives of the Market Research Study: To understand audience reception of Side-by-Side's communication tools, including accessibility, usability, trust, brand recognition and effectiveness.
- To examine Side-by-Side's progress in meeting its six campaign objectives, and to propose updated campaign objectives based on findings
- To explore the impact of Side-by-Side Campaign on how ECD is understood and practiced, in both homes and clinics in at least four provinces and four languages (Nguni, Sesotho, English and Afrikaans)
- To reach a collaborative understanding of how Side-by-Side's value and impact is understood and assessed — by NDoH, other relevant government departments, Ilifa Labantwana and the campaign's beneficiaries.
- To provide clear, actionable and feasible recommendations and priorities to improve effectiveness of the campaign.



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### 5. Scope of work and Expected Timeframes

It is expected that the service provider will demonstrate a robust understanding of the campaign itself and best-practice approaches to market research of similar multi-channel and multi-media campaigns. The service provider is also expected to demonstrate creativity and innovation when outlining their research methodology with very clear links to how their specific methodological choice will delivered the intended market research insights.

<b>Deliverable</b>	<b>Timeframe</b>	<b>Payment</b>
<b>Stage 1 – Planning and scoping:</b> Develop plan that includes: literature and documentation review, approach and methodology, audience segmentation analysis, list of people/organisations to be consulted, fieldwork and data collection plan and templates. All of the above should take multi-media/multi-channel campaign design into consideration.	10 days	20%
<b>Stage 2 – Fieldwork and research</b> Fieldwork progress report at midpoint (30 days) Final fieldwork report detailing samples, methodologies used, high-level findings or themes coming out of the fieldwork	60 days	40%
<b>Stage 3 – Report writing</b> Report that includes detailed analysis of fieldwork findings and clear recommendations to improve effectiveness of the campaign)	10 days	20%
<b>Stage 4 – Presentation and feedback</b> Service provider will be expected to present their findings to NDoH, Ilifa, UNICEF and other relevant partners (e.g. SABC Education) and facilitate a discussion/workshop on how the finds can be integrated into the campaign to improve effectiveness.	2 days	
<b>Stage 5 - Updating report and recommendations</b>	3 days	20%
<b>TOTAL</b>	<b>85 days</b>	<b>100%</b>

### 6. Contracting

Ilifa Labantwana, supported by the NDOH and UNICEF, will manage the contract. Extension of the final date will only be allowed under exceptional circumstances, and will only come into effect by written request and approval should there be cost implications.

The Project Steering Committee will only effect payment on each deliverable upon the satisfactory completion of the outputs, and on approval. Time needs to be allowed in-between deliverables to



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allow for consultation. It is possible that the Project Steering Committee can decide not to proceed with (a) stage(s) of the project should circumstances dictate this. The service provider is therefore not guaranteed that it will be required to conclude all phases. However, Ilifa Labantwana undertakes to notify the service provider after the conclusion of each stage, whether the relevant deliverable has been approved and if the service provider will be required to proceed with the next phase. If not, the service provider will be duly notified of the suspension or premature termination of its services. The service provider's contract will contain appropriate clauses to this effect. Alternatively, a service provide may be contracted to only complete a subset of the deliverables from the onset.

The service provider will be expected to have regular consultations with the Project Steering Committee as needed, either in person or telephonically. This includes an inception discussion to ensure that aspects of the work assignment are clearly understood.

There will be an initiation meeting to discuss and agree on matters pertinent to the implementation of this assignment.

### 7. Project Administration

This project will be managed and executed in collaboration with a **Project Steering Committee** made up of representatives from the following:

- National Department of Health (NDOH);
- Ilifa Labantwana;
- UNICEF;

The Project Steering Committee will meet at times as agreed to discuss and agree upon matters pertinent to the implementation of this assignment.

### 8. Competencies and Experience

The service provider will need to demonstrate the following:

- Demonstrated experience in similar market research projects of social and behaviour change campaigns, including experience doing similar work within the constraints brought on by COVID-19 (e.g. online/telephonic sampling, etc.)
- Sufficient knowledge of the health and early childhood development sectors;
- Extensive experience with qualitative and quantitative research methodologies;
- Stakeholder management and consultation skills, experience in liaising with government representatives, development partners and citizens on behaviour change issues;
- Excellent writing and presentation skills;
- Knowledge of at least three African languages.
- Ability to work legally in South Africa.



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### 9. Submission Process – Proposal and Budget

Qualified individual contractors/ consultants are invited to submit a well-developed proposal based on the criteria below that reflects an understanding of the assignment and capacity to execute the assignment within the required timelines.

The proposal shall include the following:

- Executive summary of proposal (150 words maximum)
- The contractor understands of the assignment, (what the contractor thinks the assignment entails). (300 words maximum)
- The methodologies that the contractor will follow in executing the assignment (500 words maximum).
- An indication of the intended timelines envisaged to complete each of the components of this assignment (within the timeframe provided in terms of these terms of reference) and an undertaking that the contractor will be able to complete the assignment within the timeframes required.
- Reference to similar work. Preferably final products that are available and accessible either through email or on website. In case of confidential work, indicate as such.
- References that can be contacted. Indicate the name of the person, telephone number, email address and short description of the work that contractor has done for this individual. (Two sentences maximum)
- An indication of possible risk factors associated with this assignment, based on the perception and experience of the contractor. Including reference to POPIA. (200-word maximum)

The budget needs to be submitted and must include the following:

- Proposed pricing in accordance with the TOR and in South African Rand.
- VAT needs to be indicated separately

All applications must be submitted to: [buhle@ilifalabantwana.co.za](mailto:buhle@ilifalabantwana.co.za)

The/Project Steering Committee will do the selection of the contractor in accordance with acceptable procedures and within one month after the closing of the bid. The proposed budget and timeline will be considered when selecting a final consultant.

The final shortlist of up to three service providers may be required to present to the Project Steering Committee.

### 10. Enquiries

Please direct any enquiries by email to Buhle Mabaso – [buhle@ilifalabantwana.co.za](mailto:buhle@ilifalabantwana.co.za)

Only written enquiries will be responded to.

Please refrain from sending any enquiries directly to individuals from Department of Health and the Project Steering Committee. Such enquiries will not be responded to and not be deemed valid.

Mark all enquiries in the email heading: **Side-by-Side Market Research Study**



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This will assist with the expeditious handling of enquiries.

Enquiries received less than 2 working days before the closing date may not be responded to due to high volumes.

Enquiries on the outcome of the bid will only be dealt with once the contracting is completed.