

Terms of Reference

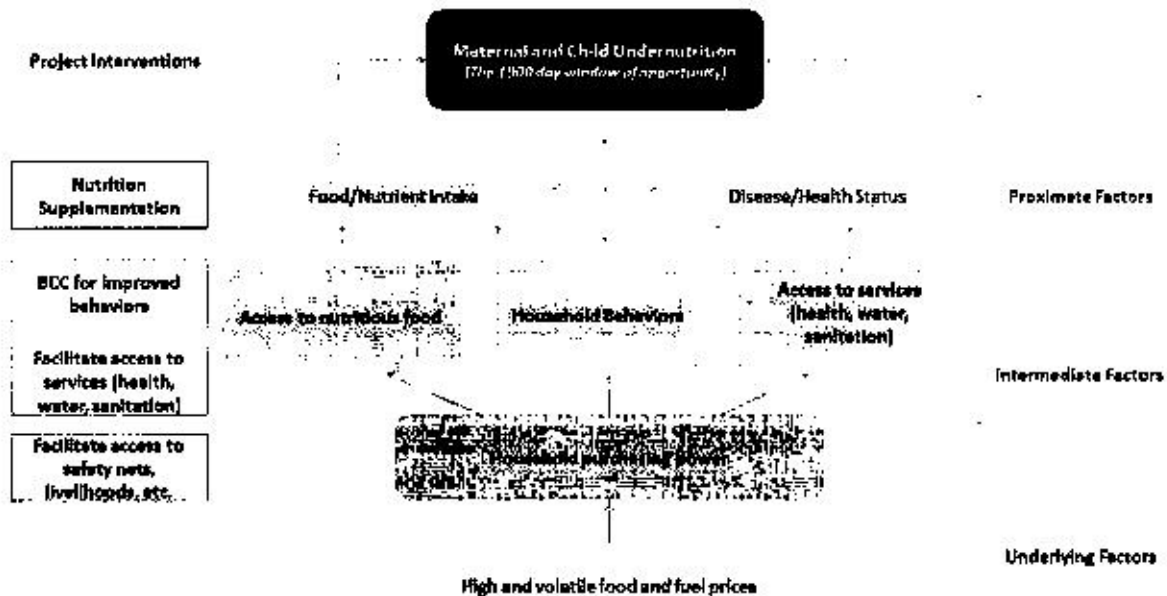
KARNATAKA MULTI-SECTORAL NUTRITION PILOT PROJECT

I. BACKGROUND

The Karnataka State Rural Livelihoods Promotion Society (KSRLPS), under the aegis of the Karnataka Nutrition Mission, with support from the World Bank and the Japan Social Development Fund (JSDF) is implementing a Multi-Sectoral Nutrition Pilot Project in two backward taluks of Karnataka, namely Devadurga in Raichur District and Chincholi in Gulbarga District. The pilot are designed based on previous pilots implemented in Gubbi, Shikaripura and Bellary Rural taluks of Tumkur, Shimoga and Bellary Districts by the Karnataka Nutrition Mission.

The pilot aims at improving nutrition outcomes in children 0-3 years of age, adopting a life cycle approach, focusing on adolescent girls, pregnant and lactating women and children 0-3 years of age (Fig 1). It focuses on the proximate determinants of nutrition by providing daily nutrition food supplements to under-nourished children, adolescent girls and pregnant and lactating women on the one hand; and places an equally strong focus on intermediate determinants of nutrition by implementing an intensive behaviour change communication strategy to improve household behaviours and access to services on the other hand.

Fig 1: Project interventions targeted at different levels of the nutrition causal chain



Adapted from World Bank (2011) "South Asia Regional Assistance Strategy for Nutrition"


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II. Brief Description of the Project:

The **overall goal** of the pilot is: To reduce malnutrition in the pilot blocks in the shortest possible time by introducing the inter-sectoral, inter-generational approach and bringing about behavioural change. Special emphasis will be placed on 0-3 years children keeping in view the special significance of this period in their process of development. Adolescent girls between the ages 11-18 as well as Pregnant and Lactating mothers would also be targeted.

The **primary objective** of the pilot is to increase utilization of nutrition-improving services by children under-three years of age, adolescent girls and pregnant and nursing women from poor households in the target areas, increase awareness about appropriate health and nutrition behaviours.


Component-Increase consumption of nutritious foods and improve household nutrition-related knowledge and behaviours:

This component will deliver direct support to under-three children, adolescent girls and pregnant/lactating women from poor and vulnerable households in the form of locally-sourced nutrition supplements coupled with support to encourage household behaviours with a large impact on nutrition, notably breastfeeding, complementary feeding and hygiene practices. The high-energy nutrition supplement will be locally produced using local farm produce such as millet (ragi), chickpeas (gram), cane sugar (jaggery) and groundnuts. Nutrition volunteers engaged under the project in each village will implement the program at the village level with the support of grassroots groups, including women's self-help groups and village health and sanitation committees. These groups will help the nutrition volunteers identify and provide support to women and children facing food insecurity and malnutrition. Capacity building support will also be provided to women's self-help groups.

The following **Key Results** will be expected from the project:

- a) Increase in targeted under-three children, adolescent girls and pregnant and nursing mothers who receive nutritious supplementary foods produced and supplied by the project;
- b) Increase in targeted pregnant and lactating women who practice core child nutrition and health care behaviours (specifically initiation of breastfeeding within an hour of birth, exclusive breastfeeding, immunization, timely and adequate complementary feeding after 6 months which includes breastfeeding and feeding with 3+ food groups a minimum number of times per day, diarrhoea management and hand-washing); and
- c) Increase in targeted households who utilize other social sector programs with a potential impact on nutrition (specifically ICDS, health services, and water and sanitation services)

A rigorous independent evaluation will also measure **key nutrition outcomes** of underweight and anaemia in the target groups


21/06/2017

III. INTRODUCTION- INNOVATIVE PROJECTS:

One of the Innovative Projects proposed within the JSDF/World Bank assisted Karnataka Multi-Sectoral Nutrition Pilot Project is conduct a Feasibility Study of Introducing Low Cost EDF in the market through the Private Sector.

One of the major causes of undernutrition and calorie-protein-micronutrient deficiency among large sections of our population, especially the poorest 30-40 percent, is that **there is presently a complete vacuum in the market for low cost, fortified energy foods for BPL families.**


The daily diets of the poorest families are meagre, and can at best qualify as subsistence diets. For lack of money and knowledge, the families are not able to provide nutrition required for healthy growth of children and adolescents during rapid growth periods, for women during pregnancy and lactation, for all age groups of both genders during or after illness, and complementary food for infants after 6 months of age.

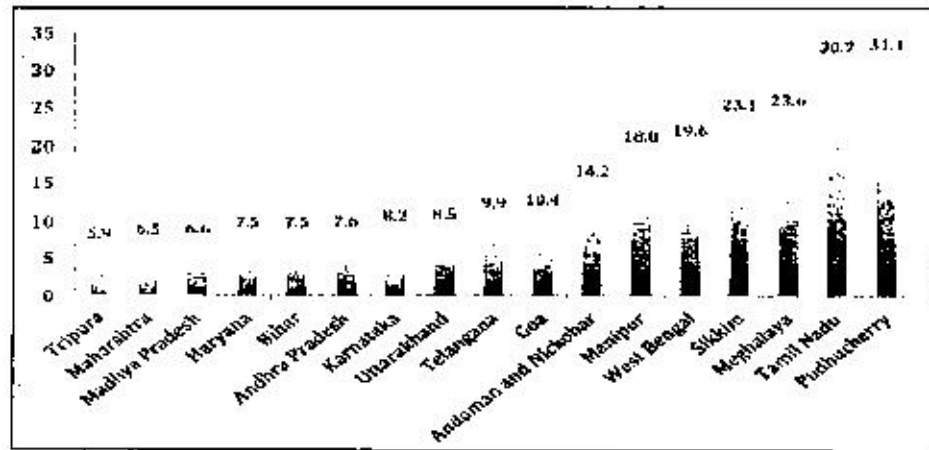
At the macro level, even though the per capita income has more than quadrupled in the last decade, all NNMB Reports, the last being NNMB Technical Report No. 26, 2012,¹ continuously show a large dietary deficit in terms of protein, calorie and micronutrients among more than 50% of our population of both sexes and all age groups, despite the ICDS and MDM having been in operation for the last four and two decades respectively.

Nearly 50 per cent of adolescent girls aged 15-19 in India are underweight, with a body mass index of less than 18.5, as per the UNICEF Report 2011

What is most worrisome is that early data emerging from the NFHS- 4 Factsheets (2015-16) covering 17 States, informs us that the percentage of children from 6-23 months receiving an adequate diet ranges from a meagre 5.9% to 31.1%. This is a serious issue which is the source of under-nutrition in the life cycle of our population.

¹Report of the Third Survey: "Diet and Nutritional Status of Rural Population, Prevalence of Hypertension and Diabetes among Adults and Infants and Young Child Feeding Practices" (2011-12)
http://nnmbindia.org/1_NNMB_Third_Repeat_Rural_Survey___Technic_Report_26.pdf 3rd Repeat Survey, 2011-12


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Reports from the field in the Chincholi and Devadurga Projects clearly indicate that all cases of severely malnourished children are from households where both parents are engaged in construction or agricultural labour. The infants are left under the care of elder siblings or grandparents, and apart from some rotī, rice and dal, which an infant certainly cannot eat, there is no food in the house. And in the market, there is nothing for them, except wafers and biscuits.

There is a move in the Ministry of Women and Child Development, Govt. of India, to introduce the system of cash transfers in lieu of supplementary food under the ICDS. In such a situation where cash transfers are made for purchase of energy dense food for infants, adolescents and pregnant and nursing women, and there is no appropriate product in the market, the entire objective of the cash transfer will be lost.

In these circumstances, it is timely and appropriate to engage with the food processing private sector as custodian of the food industry and pharmaceutical sector. They are already providing several varieties of expensive protein and energy dense foods for children and adults of the more affluent classes. However, for BPL populations of all age groups and both genders, there is presently a huge market vacuum for low-cost energy foods. Unfortunately, this vacuum has been filled up by junk foods and tobacco based products that are marketed aggressively. Evidence from rural areas also reveals that the poor are forced to purchase expensive energy foods, the only ones available in the market, when they are faced with a serious health emergency or when acute malnutrition becomes life threatening, sometimes spending their entire week's wages for purchasing these products.

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IV. OBJECTIVE AND SCOPE OF WORK:


The objective of this consultancy is to conduct a detailed study of the need and do an assessment of demand, the market entry strategy, and the investment feasibility, to address the vacuum in the market for low cost, fortified energy foods for BPL families, which is confirmed by empirical evidence emerging from the field, especially in respect of chronically undernourished and wasted children under 3 years.

The study will be done by engaging the services of a sector specialized food and agribusiness consulting agency. The consulting agency as part of its engagement delivery will also recommend a road map for motivating and facilitating through innovative partnerships with the private sector, the setting up of viable units for production of low cost high energy dense food for children, adolescents, women during pregnancy and lactation, for all age groups of both genders during or after illness, and complementary food for infants after 6 months of age.

Though the target population is numerically large enough for the enterprise to be commercially viable, the Consultant would do a statistical study of the numbers of expected consumers, to draw conclusions on the need and demand assessment, capture the buying behavior, the cash availability and the appropriate distribution and marketing strategies to make it a viable and feasible investible business proposition.

The Consultant will recommend the most effective and appropriate rural distribution & marketing strategies for the new product, after studying how the private sector has succeeded in penetrating rural markets with their products, such as toiletries and cosmetics, (that were never earlier used by the poor), junk food items, such as wafers and chips, that are now being used as food substitutes for children, worsening their nutritional status.

The recent amendment to Schedule VII of the Companies Act 2013 includes, 'eradicating hunger, poverty and malnutrition, promoting preventive health care and sanitation and making available safe drinking water' as areas of Corporate Social Responsibility. The study would recommend how this provision can be leveraged towards its objective.


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V. TASKS TO BE CARRIED OUT BY THE CONSULTANT:

- To conduct a need and demand assessment for low cost energy food for infants, women, adolescents, the elderly and sick among BPL families, urban and rural.
- To study the present availability of low cost energy food for infants, women, adolescents, the elderly and sick among BPL families, urban and rural and access by them to the same.
- To examine the correlation between high incidences of underweight, stunting and wasting among children, low body mass index and stunting amongst adolescents, and lack of low cost Energy Dense Food in the market.
- To estimate the size of market for low cost EDF.
- Identify and list the most popular demands from the people for low cost EDF composition.
- Explain why in spite of a large potential market, which would make it a viable business proposition, there is still no initiative from the private food industry sector to have entered the market for low cost Energy Dense Food.
- Propose sound business models in this regard.
- Recommend most effective and appropriate rural distribution and marketing strategies for the new products comprising the low cost EDF.
- Assess the feasibility of investment to manufacture, distribute and market the low cost EDF.

VI. LIST OF KEY PROFESSIONAL POSITIONS:


The key technical and operational skills required for the consultancy include the following:

- Team Leader
- Food Supply Chain & Operations Expert
- Sales, Marketing & Distribution Expert
- Market Research Expert
- Investment Analyst

(a) Team Leader: A professional with industry experience in food & agribusiness with functional expertise in food supply chain, distribution, marketing & sales.

Essential qualifications:

- Post Graduate Diploma in Management (Agri Business Management) – PGDM (ABM) /Food Technology from a recognized University in India or abroad, with sound nutrition knowledge
- 15 years food & agribusiness industry experience, of which at least 3 years should be working in a mid to senior management position
- Expertise in food supply chain with relevant experience of conducting investment feasibility studies in the food sector

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- Experience in conducting market research in food & agribusiness sector.
- Demonstrated drive for results and management for the delivery of results.
- Experience in documentation
- Excellent communication skills in English – verbal as well as written

(b) Food Supply Chain & Operations Expert: A professional with industry experience in managing food supply chain & operations.

Essential qualifications:

- Post Graduate Diploma in Management (Agri Business Management) – PGDM (ABM) /Food Technology /Supply Chain Management from a recognized University in India or abroad, with sound knowledge of Nutritional Sciences
- Experience in food & agri industry with at least 3- 5 years of experience handling supply chain and operations.
- Good understanding of food supply chain and operations with relevant experience of conducting investment feasibility studies for the food industry private sector.
- Good analytical skills with documentation and written communication skills in English.
- Ability to work in a team, and willingness to travel extensively.

(c) Sales, Marketing & Distribution Expert: A professional with food & agri industry experience in Sales, Marketing & Distribution.

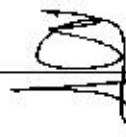
Essential qualifications:

- Post Graduate Diploma in Management (Agri Business Management) – PGDM (ABM) /Food Technology /Supply Chain Management from a recognized University in India or abroad.
- Experience in food & agri industry with at least 5 years of experience handling sales, marketing & distribution for food industry private sector players.
- Good understanding of sales, marketing & distribution with relevant experience of conducting investment feasibility studies in the food sector.
- Good analytical skills with documentation and written communication skills in English.
- Ability to work in a team, and willingness to travel extensively..

(d) Market Research Expert: A professional with previous market research experience in food sector.

Essential qualifications:

- Post Graduate Diploma in Market Research from a recognized University in India or abroad.
- Experience in market research with at least 5 years of experience preferably having exposure of handling market research in the food & agri sector.
- Good understanding of market research in the food & agri sector and in conducting feasibility studies.
- Good computer skills and excellent documentation and written communication skills in English.
- Ability to work in a team, and willingness to travel extensively.


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(e) Investment Analyst: A professional with previous experience in conducting investment and feasibility studies.

Essential qualifications:


- Chartered Accountant with experience of at least 10 years in conducting investment feasibility of projects.
- Good understanding of food and agri sector with experience of handling investment feasibility projects in the food & agri sector.
- Good computer skills and excellent documentation and written communication skills in English.
- Ability to work in a team, and willingness to travel extensively.

VII. REPORTING AND PAYMENT ARRANGEMENTS:

Sl. No.	Deliverable	Periodic	PaymentSchedule
1.	On signing of Contract		25%
2.	Inception report consisting of the following a) A frame work. b) Final sampling plan c) Geographical coverage d) Methodology e) Preparation of questionnaires for study and field testing	by the end of 3 rd month from signing the contract	50%
3.	Progress report	by the end of the 6 th month from signing the contract	15 %
4.	Consolidated/Comprehensive Final Report at the end of Project	End of the Project (within end of the 8 th month)	10%

The consultant will report to the Principal Secretary, Department of Rural Development and Panchayath Raj, Government of Karnataka and will work in close collaboration with Advisor, Karnataka Nutrition Mission and Mission Director, Karnataka State Rural Livelihood Promotion Society in the implementation of its tasks.


VI. Period of Assignment: 8 months from the date of contract.


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VII. Review Committee to Monitor Consultant's Work

Principal Secretary, Department of Rural Development and Panchayath Raj and Advisor, KCNM will constitute a Committee and review the Consultant's work. The Committee will consist of Secretary, Women and Child Department or nominee, Secretary, Health and Family Welfare or nominee, Secretary, Food Processing or nominee, Mission Director, KSRLPS and representative of FICCI, Karnataka.

Payment to the agency will be made upon submission and acceptance of satisfactory reports/deliverables as stated in Para VII and as per conditions laid down in the contract.


01/06/2017