

Terms of reference for a consultant to support the process of sanitation and hygiene roadmap In Timor-Leste

Localisation	Dili and other places, Timor Leste	
Duration	6 months	
Consultancy period	From :15/02/2026	To :15/08/2026
Supervisor	Bruno Le Bansais	

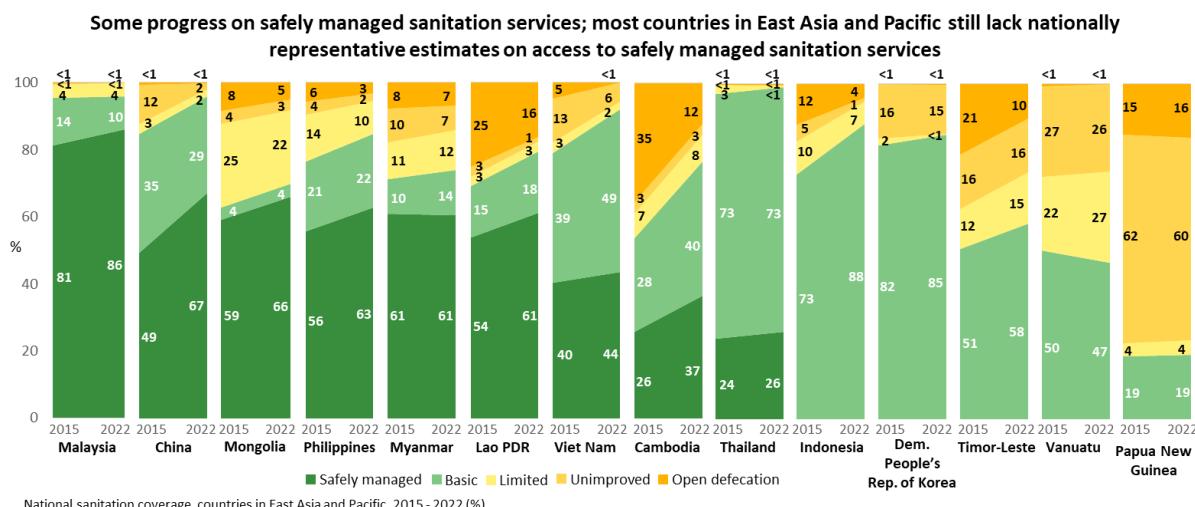
Deadline for submission is February 12th 2026

BACKGROUND AND PURPOSE OF CONSULTANCY

Context

Timor-Leste, with a population estimated at 1.3 million in 2020, is one of the youngest nations in the world. Just over 20 years after achieving independence, and despite significant investment from both National Government and donors, Timor-Leste still faces major public health challenges, notably poor hygiene and sanitation. Since 2000, the MoH has worked with development partners to improve the sanitation and hygiene situation in Timor-Leste. Yet respiratory and diarrhoeal diseases remain the leading causes of infant mortality, both of which are strongly linked to inadequate sanitation and hygiene. Diarrhoea alone is responsible for more than 380 child deaths per year in Timor-Leste, and research suggests that insufficient access to improved sanitation and low availability of hand-washing facilities are significantly associated with stunting.

The World Health Organization (WHO) and UNICEF Joint Monitoring Programme (JMP) estimates that 10% of Timor-Leste's population still practices open defecation (OD) and 42% of the population lack access to basic sanitation. The country is not on track to achieve the SDG targets of universal access to at least basic or safely managed sanitation services for all; the rate of expanded access to basic sanitation services would need to increase 5x to achieve the target. The National Basic Sanitation Policy (NBSP) was ratified in 2012. Because this was prior to the adoption of the Sustainable Development Goals, the policy does not explicitly target the SDG aspiration of safely managed sanitation.



The NBSP included CLTS-style principles and methodologies. Over the eight years since the NBSP was adopted, most development partners and donors in the sanitation sector have used CLTS-style programming (or versions of it, most notably PAKSI6 – the version of CLTS tailored to the Timor-Leste context and culture) in their programming, led by the Ministry of Health. The CLTS/PAKSI approach in Timor-Leste was evaluated in 2021. The evaluation found that the implementation of CLTS-style programming has been a relevant and appropriate response to issues of OD and poor hand hygiene and resulted in a significant decrease in open defecation. The whole-of-sector approach to using the PAKSI model and the introduction of institutional triggering has resulted in efficient, effective and sustainable change at the household level.

But longer-term sustainability and progress from ODF to safely managed sanitation and the achievement of the Government's vision of 'hygienic sucos' will require consistent public reinforcement of desired social norms. Reaching all households to eliminate open defecation and use at least basic sanitation services may require financing or subsidies, whilst still creating desired changes in social norms. It also requires strengthening the enabling environment, market strengthening, and specific measures to reach last-mile households; measures to address slippage; ensure the use and maintenance of sanitation and handwashing facilities at household, institutions, and public places; ensure sanitation coverage in institutions and public places; and ultimately ensure households progressively move up the sanitation ladder from unimproved to safely managed sanitation services, including effective management of faecal sludge. In summary, there is a need to:

- Reach last-mile households to eliminate open defecation and expand coverage of at least basic services
- Sustain ODF status
- Move up the sanitation ladder towards safely managed sanitation services
- Ensure safely throughout the entire sanitation service chain
- Ensure sanitation services are climate resilient

Considering this situation, UNICEF, in coordination with the Government of Timor Leste, has taken the initiative to support the development of a roadmap for sanitation and hygiene. In that purpose, UNICEF receives technical support from IVL, the Swedish Environmental Research Institute. IVL is an independent research institute that conducts research and consultancy assignments on environmental and sustainability issues¹.

¹ For more details on our organisation visit [Sustainable research and consultancy - IVL.se](https://www.ivl.se/english/ivl.html), <https://www.ivl.se/english/ivl.html>

The development of the national sanitation and hygiene roadmap for Timor-Leste was initiated under a first phase of consultancy support. During this initial phase, a national consultant, working under the supervision of the designated supervisor, supported the early stages of the roadmap process, including the preparation of an inception report and desk review, initial stakeholder engagement, and a stakeholder analysis.

Due to availability constraints, the consultant engaged during this first phase is not in a position to continue through the full duration of the roadmap development process. As a result, the present consultancy constitutes a second phase of support, building on the analytical foundations and preparatory work already completed.

IVL Swedish Environmental Research Institute, which will be responsible for the overall implementation of the sanitation roadmap, is therefore seeking qualified local consultants to collaborate in this process. All relevant outputs produced during the first phase of the assignment will be made available to the selected consultant. The role of this consultancy is not to restart the process, but to continue, complete, and consolidate the roadmap, including strategic prioritisation, validation, costing, and finalisation, under the guidance of the supervisor and in close coordination with national stakeholders.

Objective

The purpose of the consultancy is to support the development a Roadmap, under the direction of the Government, for Timor-Leste to achieve sanitation for all and safely managed sanitation in line with the SDGs. The Roadmap should include a clear action plan for implementation and consider the implementation approaches needed to strengthen the enabling environment for sanitation service delivery, increase the demand for safe sanitation services, and ensure that the supply of desirable services is available at an affordable price to people.

PREVIOUS STEPS UNDERTAKEN IN THE ROADMAP PROCESS

The development of the National Sanitation and Hygiene Roadmap for Timor-Leste has been initiated through a first phase of consultancy support, implemented under the supervision of IVL. This initial phase was designed to establish a solid analytical, institutional, and contextual foundation on which the roadmap could be developed in a structured and evidence-based manner.

Step 1: Inception report and stakeholder mobilization

The first step of the roadmap process focused on establishing a shared understanding of the purpose, scope, and objectives of the National Sanitation and Hygiene Roadmap, while mobilising key stakeholders from the outset. An inception report was prepared to define the overall approach,

methodology, and sequencing of activities, and to clarify how the roadmap would align with national policies and international commitments, including SDG 6.2.

As part of this inception phase, a mini-workshop brought together representatives from key ministries, municipal authorities, development partners, and civil society organisations. It provided a structured space for dialogue to collectively define the objectives of the roadmap, discuss expectations regarding its scope and level of ambition, and identify priority thematic areas to be addressed.

The outcomes of this initial stakeholder engagement were used to refine the inception report and to confirm the roadmap's focus on eliminating open defecation, sustaining ODF achievements, progressing towards safely managed sanitation, strengthening the enabling environment, and integrating climate resilience and equity considerations. This early mobilisation laid the groundwork for subsequent analytical work and more in-depth consultations in later steps.

Step 2: Desk Review

Following the inception phase, a comprehensive desk review was undertaken to consolidate existing data, evidence, and policy frameworks relevant to sanitation and hygiene in Timor-Leste. This review synthesises national and international data sources, including the 2022 Population and Housing Census, WHO/UNICEF Joint Monitoring Programme estimates, and key sector assessments and evaluations conducted by government and development partners.

The desk review examines sanitation and hygiene service levels, with particular attention to disparities between urban and rural areas, the persistence of open defecation in certain municipalities, and the predominance of on-site sanitation systems with limited progress toward safely managed services. It also reviews hygiene practices, sanitation conditions in schools, health care facilities, and public spaces, and the institutional, policy, and regulatory frameworks governing the sector.

Cross-cutting issues such as governance and coordination challenges, financing constraints, environmental pressures, and climate-related risks to sanitation infrastructure are integrated throughout the analysis. The review further explores linkages between sanitation, water resources management, public health, and other sectors including education, agriculture, and tourism.

This desk review provides the analytical foundation for the roadmap and allows for the **identification of key knowledge gaps and priority issues**, which in turn inform the scope, geographical focus, and methodological approach of subsequent field-based data collection under Step 3.

NEXT STEPS AND INVOLVEMENT OF THE CONSULTANT

The present consultancy will build on the work completed during the first phase of the sanitation and hygiene roadmap process. In particular, the inception activities, stakeholder mobilisation outcomes, and the draft desk review constitute the analytical foundation of the roadmap and will be provided to the consultant as inputs.

The consultant's mandate begins with the continuation of subnational data collection and extends through stakeholder validation, participatory roadmap drafting, and support to finalisation and endorsement of the sanitation and hygiene roadmap. The consultant will work under the guidance of the supervisor from IVL and in close coordination with national stakeholders.

Step 2 (continuation): Desk review:

Due to time and availability constraints, the step 2 (Desk review) could not be completed in full. The documentation has been gathered, 2 interviews with key stakeholders could be completed, and a draft report is available. However, this draft is not complete and 2 additional interviews should be completed.

As part of this assignment, the consultant will conduct the two remaining interviews and provide a final version of the desk review document.

IVL will provide the consultant with documentation and material gathered throughout the process, with the draft desk review document, and will facilitate the collaboration with UNICEF country office in Timor who will, in turn, facilitate the coordination of interviews.

Deliverable (Step 2), expected March 1st 2026:

Reports from the 2 remaining interviews
Final desk review document

Step 3: Subnational Data Collection and Site Visits

Building on the analytical findings of the desk review, the next step of the roadmap process will focus on subnational data collection and site visits to ground the analysis in the operational realities of sanitation and hygiene service delivery across Timor-Leste. This step aims to address priority knowledge gaps identified through the desk review and early consultations, and to ensure that the roadmap is informed by conditions on the ground across different contexts.

Subnational data collection will be undertaken across three distinct contexts: rural areas, Dili, and small towns. For each context, a targeted sample of locations and stakeholders will be defined. In rural municipalities, activities will include interviews and group discussions with municipal

authorities, suco and aldeia representatives, community leaders, women's groups, mothers' support groups, local NGOs, implementing partners, and front-line service providers. In Dili, consultations will focus on municipal institutions, urban service providers and utilities, regulators, NGOs, civil society organisations, and representative user groups. In small towns, consultations will involve municipal authorities, town-level service providers, private operators, NGOs, and community representatives.

Across all contexts, the consultant will propose relevant interviewees, conduct structured interviews and focus group discussions, and carry out rapid assessments. Particular attention will be given to the sustainability of ODF outcomes, the climate resilience of sanitation services, faecal sludge management arrangements, and key institutional and service delivery constraints. Where feasible, data collection will also include interviews with a school director and the head of a health care facility in each setting. Particular attention will be given to operation and maintenance arrangements, exposure to climate risks, and the inclusion of vulnerable groups.

The scope of this phase includes the full design, implementation, and documentation of subnational data collection activities and site visits.

Findings from this step will be consolidated with the existing analytical work and will directly inform stakeholder validation and the subsequent development of the sanitation and hygiene roadmap.

IVL will provide the consultant with guidance and support on how to select the locations, prepare the interviews and focus groups, and on the structure of the report from this step. UNICEF CO could help with some contacts and by sharing their knowledge of the context. The consultant will be mostly autonomous in terms of logistics.

Deliverable (Step 3), expected April 15th 2026:

Synthesis of subnational data collection and site visit findings organised by context and key thematic issues (about 20 pages).

Step 4: Joint Assessment Presentation and Stakeholder Validation

Building on the completed desk review and the results of subnational data collection, the consultant will support a joint presentation of findings to key stakeholders in a half-day validation meeting. The objective of this step is to reach shared agreement on the baseline sanitation and hygiene situation and to collectively identify and prioritise the main sector challenges.

The consultant will support structured discussions to:

1. validate the assessment narrative
2. confirm and prioritise key challenges and bottlenecks
3. test assumptions and strategic directions, and

4. agree on the design of the participatory roadmap drafting workshop, including participant selection, stakeholder groupings and a draft agenda.

IVL and the consultant will be jointly responsible for preparing the materials (ppt presentations). The consultant will be responsible for translating it into Tetum and will facilitate the discussions on-site. IVL will provide overall facilitation remotely. The consultant will also support stakeholder mobilization in collaboration with UNICEF: it might be necessary to coordinate with some stakeholders in advance to ensure their understanding of the process and their active participation to this validation

Deliverable (Step 4), expected April 30th 2026:

Assessment presentation materials, documentation of the validation meeting, agreed design and agenda for the roadmap drafting workshop.

Step 5: Participatory Roadmap Drafting Workshop

IVL will be responsible for the overall preparation and facilitation of the participatory roadmap drafting workshop. This includes the development of workshop materials, the design of the facilitation approach, and the overall conduct of the workshop. The supervisor from IVL, and possibly other experts from IVL, will facilitate the workshop on-site.

The consultant will play a supporting role in this step. This will include reviewing the draft workshop materials prepared by IVL, translating selected materials into Tetum (such as baseline summaries, issue briefs, or guiding questions), and, where relevant, proposing limited additions or clarifications based on knowledge gained through subnational data collection. During the workshop, the consultant will support documentation of discussions and decisions, as agreed with the supervisor and IVL.

Deliverable (Step 5), expected May 31st 2026, depending on workshop's dates:

Reviewed and translated workshop materials (as relevant), documented record of workshop discussions and agreed decisions, workshop attendance and facilitation, workshop report.

Step 6: Finalisation and Endorsement

Following the participatory workshop, IVL will lead the consolidation and drafting of the sanitation and hygiene roadmap document. The consultant will support this process by reviewing draft versions of the roadmap, providing written comments and suggested revisions, and verifying consistency with workshop outputs and validated priorities.

The consultant may also support preparation of materials for formal validation and endorsement by relevant government bodies, as needed, and contribute to clarifying next steps, including the outline of a subsequent implementation and financing strategy.

Deliverable (Step 6), expected July 31st 2026

Reviewed and commented draft sanitation and hygiene roadmap, and support materials for validation and endorsement.

Time allocation

The table below provides an indicative allocation of working days per step. The actual distribution of time for Step 3 will depend on the number, location, and type of sites to be visited, as well as logistical constraints and stakeholder availability. A detailed workplan will be agreed upon at the start of the consultancy, in coordination with the supervisor.

Step	Description	Indicative Time Allocation
Step 2 (Cont.)	Finalisation of the desk review though interviews and completion of the existing draft	5 days for onboarding and introduction to the project, completion of 2 interviews and finalisation of desk review document
Step 3	Subnational data collection and site visits across rural areas, Dili, and small towns, including preparation, travel, interviews, group discussions, documentation, and synthesis of findings.	3 days for preparation of data collection (concept, structure of interviews) 25 days , potentially adjusted depending on: – number of sites visited – mix of rural, urban (Dili), and small-town contexts – number and type of stakeholder consultations
Step 4	Assessment presentation and stakeholder validation, including preparation of materials, participation in $\frac{1}{2}$ day validation meeting, documentation of outcomes	4 days
Step 5	Support to the participatory roadmap drafting workshop (review of materials prepared by IVL, translation of selected documents into Tetum, limited technical inputs, documentation of debates, report)	8 days
Step 6	Review of draft roadmap, written comments, and support to validation and endorsement processes.	5 days
Total		50 days , subject to adjustment

The level of effort for Step 3 will be confirmed once the sampling approach, number of sites, and logistical arrangements are agreed upon. The consultant is expected to remain flexible to accommodate adjustments within the overall timeframe of the consultancy.

CONDITIONS OF CONSULTANCY

Organisation of consultancy

Under the supervision of the designated supervisor within IVL, the consultant will provide support to the WASH-Ser process.

The consultant will have to share with his or her supervisor (IVL) and the various partners that he or she will designate, information on the level of progress, the problems encountered and the decisions to be made throughout the service. To the extent possible, UNICEF will assist the consultant in overcoming potential barriers encountered and facilitate access to data.

Payment

The payments for the consultation will be made on the basis of the financial proposal of the consultancy which will have been previously discussed and accepted by IVL. Payments will be made in USD to the consultant's bank account upon approval of deliverables:

Payment Nº	Step	Deliverables	Payment
Payment 1	Step 2: (continuation) desk review	<ul style="list-style-type: none"> • Documentation of interviews • Final desk review document 	5 working days
Payment 2	Step 3: Subnational data collection and site visits	<ul style="list-style-type: none"> • Documentation of interviews, consultations, and site visits • Consolidated synthesis of field findings 	3 working days (fixed) for preparation and design of data collection activities + 25 working days (variable) depending on number and type of sites visited + Payment of cost involved by trips, based on receipts and prior agreement (see below)
Payment 3	Step 4: Joint assessment presentation and stakeholder validation	<ul style="list-style-type: none"> • Assessment presentation materials • Documentation of the validation meeting • Agreed design and agenda for the roadmap drafting workshop 	4 working days
Payment 4	Step 5: Support to participatory roadmap drafting workshop	<ul style="list-style-type: none"> • Reviewed workshop materials prepared by IVL • Translation of selected materials into Tetum • Limited technical inputs, as agreed • Documented record of workshop discussions and decisions • Workshop attendance and facilitation • Workshop report 	8 working days

Payment Nº	Step	Deliverables	Payment
Payment 5	Step 6: Finalisation and endorsement	<ul style="list-style-type: none"> • Written review and comments on draft roadmap • Suggested revisions and consistency checks • Support materials for validation and endorsement, as required 	5 working days
	Total (indicative)		50 working days

Payment will take into account the delivery of the expected products previously validated by the supervisor as satisfactory and upon presentation of an invoice stamped and duly approved by the consultant's supervisor.

The consultant shall submit a financial proposal indicating a total contract price. This price shall be inclusive of all applicable taxes, duties, fees, and costs, including but not limited to any charges related to invoicing, payments, and bank transfers. IVL shall not be responsible for any additional payments or charges beyond the agreed total contract price. All payments by IVL under this assignment shall be deemed to cover the consultant's full and final remuneration.

General conditions: procedures and logistics

The consultant will be placed under the supervision of Bruno Le Bansais, Programme Officer in IVL's WASH Governance Group, who will act as the supervisor for his consultancy.

The consultant will be based in Dili. The consultant will use his/her own means (computer, telephone, transports). The assignment may involve trips outside of Dili that will be discussed and arranged in advance. Any cost involved by these trips will be compensated based on actual expenses and with prior agreement of the supervisor.

APPLICATION

Expected skills, education and experience

Qualifications

- Degree in Development Studies, Public Health, Public Administration, Engineering or any other specialist field related to sanitation is required. An advanced degree or other post graduate qualification will be an added advantage.

- Language: Fluency in English (verbal and written) and Tetum language (verbal and written) is required

Experience

- At least 5 years of experience working in water and sanitation service delivery, public health, or utility management in Timor-Leste
- Experience in conducting structured interviews and focus groups
- Experience in facilitating trainings or workshops
- Experience working with UNICEF, or with other organisations and other assignments, would be an advantage.

Content of the proposal

As part of his/her proposal, the consultant will have to include:

- A cover letter describing how their profile and experience make them suitable candidates for this consultation **of a maximum of 1 page**
- A financial proposal. The financial proposal must indicate an all-inclusive lump sum remuneration consisting of fees. It must not include any logistical or other costs, that will be included later as reimbursable expenses.
- His/her CV **(4 pages maximum)**
- Examples of studies or references similar to the consultancy that is the subject of this call, demonstrating the capacity of the consultant
- A document indicating the consultant's ability to sign contracts and submit invoices as a consultant within the meaning of the law of his country of residence (registration as a company, VAT certificate, or other).

Evaluation criteria

CRITERIA		NOTE
Administrative Evaluation (Eliminatory)		
Administrative compliance of the application		Yes/no
Technical evaluation (70 points)		
2.1	✓ Degree in Development Studies, Public Health, Public Administration, Engineering or any other specialist field related to sanitation is required. An advanced degree or other post graduate qualification will be an added advantage.	10
2.2	✓ At least 5 years of experience working in water and sanitation service delivery, public health, or utility management	15
2.3	✓ Fluency in English (verbal and written)	4
2.4	✓ Fluency in Tetum (verbal and written)	4
2.5	✓ Specific experience in sanitation	6
2.6	✓ Specific experience in hygiene	6
2.7	✓ Experience in conducting structured interviews or focus groups	20
2.8	✓ Experience in facilitating training or workshops	5
2.9	✓ Experience working with UNICEF or partners	2
3	Financial evaluation (30 points).	
	Note calculated on the basis of the budget proposed in the financial offer: $30 * \frac{\text{Value of the lowest financial proposal received from all applicants with a technical note above 45}}{\text{Value of the financial proposal of the applicant}}$	30

Any application with a technical score under 45 will not be taken into consideration. The award will be made according to the final grade received. In the event of a tie in the scores, the tender with the best technical quality will be received.

How to apply

Interested candidates must send their CV as well as a technical and financial proposal in accordance with the description included in the paragraph "Content of the proposal". This set of documents should be sent, ideally in PDF format, with an email attached to bruno.lebansais@ivl.se.

Deadline for submission is February 12th 2026