

TERMS OF REFERENCE (TOR) FOR THE BASELINE EVALUATION FOR OFDA FUNDED INTEGRATED LIFESAVING ASSISTANCE FOR DROUGHT AND CONFLICT-AFFECTED POPULATIONS IN SOMALIA

Introduction

Save the Children (SC) has worked in Somalia/Somaliland since 1951 and has provided emergency assistance since 1970 whenever there has been need. In 2016, SCI directly reached 600,936 children. Each year about 650,000 people benefit from our longer term development work in Health, Nutrition, Water, Sanitation & Hygiene (WASH), Education, Food Security and Livelihoods (FSL), Child Protection and Child Rights Governance.

With support from USAID/OFDA, SC will implement a one-year program targeting 95,000+ including 55,000+ internally displaced people (IDP) in AWDAL (Somaliland), BARI and NUGAL (Puntland), and BAY (South Central Somalia). SC will implement an integrated approach; health and nutrition sites, WASH, protection, agriculture & livelihoods services targeting the most affected populations within; Lughaya, Zeila (Awdal), Iskushban, Qardho, Banderbelya (Bari), Dangaroyo (Nugal), Baidoa (Bay). Further live saving health, nutrition and WASH services will also target the most vulnerable within Dinsoor and Bardale (Bay) and Borama (Awdal).

Project Objectives

The main objective of the program is to save lives, alleviate suffering and maintain human dignity in communities experiencing humanitarian crisis or that are food insecure.

The program has the following sector specific objectives;

- ✓ Health: Increased access to primary healthcare for affected families
- ✓ Nutrition: Increased access to interventions aimed at preventing, identifying and treating acute malnutrition among children and PLW
- ✓ WASH: Targeted children and families affected by drought have improved access to safe and adequate water and sanitation services and hygiene messages to reduce the risk of disease transmission
- ✓ Agriculture and Food Security: Protect productive assets among drought affected host and IDP communities.
- ✓ Economic Recovery and market systems: Restore productive assets and livelihood opportunities among drought affected resident and IDP communities
- ✓ Protection: Increased protection of children from harm, violence, exploitation and abuse

Geographical Coverage and targets

SC will implement an integrated approach; health and nutrition sites, WASH, protection, agriculture & livelihoods services targeting the most affected populations within; Lughaya, Zeila (Awdal), Iskushban, Qardho, Banderbelya (Bari), Dangaroyo (Nugal), Baidoa (Bay). Further live saving health, nutrition and WASH services will also target the most vulnerable within Dinsoor and Bardale (Bay) and Borama (Awdal). In Bari, Nugaal and Awdal SC is also implementing FFP program.

Table: Beneficiary breakdown by location

Region	District	Nutrition		Health		Protection		FSL		WASH		Total	
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male
Bay	Dinsoor	2,169	764	5,160	5,370	0	0	0	0	1440	960	8,769	7,094
	Bardale	2,706	947	2,154	2,242	0	0	0	0	2000	1333	6,860	4,522
	Baidoa/ Baidoa IDPs	23,240	9,668	7,306	7,604	2648	2647	588	1368	10283	6855	44,065	28,142
Bari	Qardho	5,632	1,670	4,827	5,024	4321	4294	1620	1080	1490	1432	17,890	13,500
	Iskushban	5,286	1,567	5,865	6,105	0	0	0	0	2086	2004	13,237	9,676
	BunderBeila	3,950	1,172	5,738	5,972	2881	2863	0	0	2384	2291	14,953	12,298
Nugaal	Dangoroyo	2,617	784	3,412	3,552	4361	4116	2160	1440	3973	3818	16,524	13,710
Awdal	Lughaya	1,717	552	4,998	5,201	844	656	9777	9777	5218	3779	22,554	19,965
	Zeylac	2,610	837	4,324	4,500	717	579	6522	6522	4531	3281	18,704	15,719
	Borama	2,321	746	2,289	2,383	0	0	0	0	2792	2021	7,402	5,150
TOTALS		52,249	18,707	46,073	47,953	15772	15155	20667	20187	36197	27774	170,958	129,776

2. Purpose of the Baseline Survey

The main purpose of the baseline survey is to establish the benchmarks as per the program logical frame indicators which will provide pre-intervention situation that will eventually be used for tracking and assess project performance and progress. In addition, baseline will collect and estimates indicators for FFP program which overlaps in some areas with OFDA programs to provide benchmarks for future comparison of effectiveness of the two programs integration or overlap.

3. Scope of Assignment

The consultant (s) will design and conduct the baseline survey and set out the benchmarks according to programme indicators taking into account regional variations and integration with FFP. The consultant will also present the findings to SC, Program Director OFDA/FFP, technical team and other stakeholders. The consultant shall have to carry out the following and other specific activities during the baseline survey process:

- √ Review of key documents that include the proposal documents, Project proposal, MEAL plan and work plan.
- √ Design of baseline survey
 - Produce an inception report with a detailed work plan and methodology to be used with respect to the quantitative household survey, provide a description of how data will be collected including the sampling frame, data sources, analysis plan and drafts of data collection tools such as questionnaires
 - Develop an implementation plan for qualitative data collection including tool such as Key Informant Interview guides
 - Collaborate with SC on putting the baseline survey tool on tablets
- √ Conduct training of enumerators and supervisors
- √ Conduct field data collection
- √ Discussion with SC on initial results report on baseline survey
- √ Conduct final presentation in collaboration with SC.

4. Baseline Methodology

Detailed design of the baseline methodology will be done by the consultant. The design should take into account that not all activities will be implemented in all locations though each location will receive at least two thematic interventions. Mostly quantitative method will be employed during the baseline survey through a household questionnaire to collect data that would provide indicator benchmarks for the project. Quantitative method will be mostly employed during the baseline survey through a household questionnaire to collect data from caregivers or household heads or observations at the household. The consultant will also conduct desk reviews and key informants to collect institutional based indicators like health facilities and public places. Few focus groups discussion to compliment the findings of the quantitative survey will be encouraged to provide more information on underlying issues that program team can later utilize in implementing interventions. Due to community sensitivity on issues related to hygiene and infant young feeding practices (IYFP), the consultant will be encouraged to recruit mostly female enumerators from Somalia who can better gather this information from mostly anticipated women respondents.

5. Program Indicators to be assessed

The program intends to assess the following principal indicators from OFDA;

1. Percentage of pregnant women who have attended at least two comprehensive antenatal clinics
2. Percentage of newborns that received postnatal care within three days after delivery
3. Percentage of births assisted by a skilled attendant at birth
4. Percentage of pregnant women in their third trimester who received a clean delivery kit
5. Percentage of CHWs conducting public health surveillance
6. Percentage of community members who can recall target health education messages

7. Proportion of infants 0-5 months of age who are fed exclusively with breast milk
8. Proportion of children 6-23 months of age who receive foods from 4 or more food groups
9. Average liters/person/day collected from all sources for drinking, cooking, and hygiene
10. Average number of users per functioning toilet
11. Percent of households targeted by latrine construction/promotion program whose latrines are completed and clean
12. Percent of people targeted by the hygiene promotion program who report using a latrine the last time they defecated
13. Percent of people targeted by the hygiene promotion program who know at least three (3) of the five (5) critical times to wash hands
14. Percentage of beneficiaries reporting net income from their livelihood

In addition, the consultant shall assess the following indicators from FFP program.

1. Prevalence of households with moderate or severe hunger (Household Hunger Scale - HHS)
2. Food Consumption Score (FCS)-% of household with acceptable FCS
3. Reduced Coping Strategies Index
4. Percentage of pregnant and lactating women that can name at least 3 promoted nutrition practices

2. Evaluation Process

The baseline will be carried out in conformity with the standard operating guidelines in the MEAL approach for SC. The baseline assessment will use mostly quantitative method though some qualitative information is still expected to be collected to explain some indicator estimates. The applicants are therefore expected to elaborate on the baseline methodology that they will follow in their technical proposal.

2.1 Baseline Inception Report

The successful Consultant will prepare a Baseline Inception Report that will describe understanding of the Terms of References, detailed methodology and work plan. The inception report will include the indicator matrix which will detail how all project indicators shall be assessed, specifying the tools to be used. The report will be approved by Save the Children and will act as a key guiding document to the conduct of the baseline survey.

2.2 Work plan

The consultant will prepare a plan that will operationalize and direct how the whole exercise will be carried out. SC Somalia staff will be involved in providing input into design and review of tools, workshop agenda, and the report. The work plan will clearly describe the timing for;

- a. The development of baseline tools
- b. Baseline design workshop with stakeholders
- c. Recruitment and training of research assistants including pretesting
- d. Fieldwork (data collection and analysis)
- e. Report writing and dissemination of results.

2.3 Geographical and beneficiary targeting

The exercise will be carried out in AWDAL (Somaliland), BARI and NUGAL (Puntland), and BAY (South Central Somalia). The program is targeting 95,000+ including 55,000+ internally displaced people from the areas. A detailed breakdown of specific activities by area will be provided to the consultants shortlisted for inception report submission.

3.1 Expertise of the consultants

The following are minimum requirements for the team/consultant to be considered for carrying out the assignment

1. Relevant Masters level education experience and training in Development Studies, Social Sciences, Agro-economics, Public Health, and/or related fields. A team with a combination of at least two of the fields will have an added advantage.
2. At least 5 years' experience in conducting similar work. SC-Somalia is interested to verify related assignments conducted in the past 2 years.
3. Considerable track record and proven experience in quantitative and qualitative methods.

3.2 Team members' other responsibilities

The members shall be responsible for the following:

- Adhering to all terms/conditions stipulated in their contracts including SC child safeguarding policy.
- Obtaining their health insurance
- Adhering to the agreed time-frames with regard to all activities outlined in the timeline
- Consultant's own laptops/computers to be used during the assignment

3.3 Deliverables

The potential consultant will be expected to complete the assignment in 30 working days (including development of study protocol and implementation plan/timeline, literature review, inception report, development and pre-testing of data collection tools/instruments, training of assessment team, data collection, analysis, validation and report writing).

The consultants will be responsible for the following deliverables:

Output	Due Date
Technical and Financial Proposal	12 th Oct, 2018
Inception report with tools	22 nd Oct, 2018
Electronic files with all raw data sets	23 rd November, 2018
Draft report	23 rd November, 2018
Two printed and two electronic copies of the final reports in English	30 th Nov, 2018
Presentation for the results of baseline to stakeholders	30 th Nov, 2018

3.4 SC Somalia Responsibilities

The SC Somalia will be responsible for the following:

- Ensure effective coordination of the baseline logistics to support the consultants in undertaking their assignment.
- Approve inception report
- Providing input into the tools developed, and baseline design.
- Provide consultants with literature review materials/necessary documentations.
- Link consultants to relevant stakeholders
- Reviewing analysis of the data collected prior to the documentation of the final report
- Review draft report
- Approve and signoff final report draft

4.0 Ownership of Research Data/Findings

All data collected and report findings for this study shall remain the property of the SC Somalia.

5.0 Budget and Payment Schedule:

The consultant is expected to provide a detailed budget for carrying out the study in US Dollars including consultancy fees.

S.N.	Deliverable	Specifications	Payment	Remarks
1	Approved Work plan	4 Hard copies	10% Professional Fees	Catering for training of

	(including study tools).	and a soft copy	100% Operational Costs	research team, data collection, analysis and reporting
2	Draft Report and Liquidation of Operational Costs	Soft copy & Presentation of results to SC Program Director OFDA/FFP	40% Professional Fees	
3	Final Report	4 Hard copies plus a soft copy	50% Professional Fees	Final payment to the contract upon production of satisfactory report as required by Save the Children.

6.0 Plan for dissemination and learning

SC-Somalia will organize meetings with various stakeholders at community and district levels to provide feedback on/disseminate findings from the baseline. This will also provide an opportunity for the stakeholders to identify and agree on targets adjustment and policy issues to be taken forward based on findings from the assessment. The consultant (s) shall present the findings and SC shall lead the discussion on joint planning.

7.0 Award Criteria

The following award criteria will be used during the evaluation of the proposals: -

Description	Possible Score
Compliance with Consultancy requirement - Provision of required information & documents; responsiveness to ToR's	10
Consultant Experience - Qualifications and general experience of the firm/team - Proven specific experience in performing similar assignments especially in Somalia in the past three years with reputable organizations.	15 15
Adequacy of Work Plan & Methodology - Methodology and techniques to be applied well stipulated - Clear description of tasks in their Scope of Work	30 10
Bidder's Price Quotation (MK)	20
Total Score	100

8.0 Mode of Submission

Save the Children invites technical and financial proposals from qualified consultants. Applications Interested candidates should present an application, as follows:

- A Technical application detailing: - Understanding of the ToRs, methodology, CVs of the Team Leaders and technical reference of previous similar works
- A Financial proposal with a detailed budget taking considering the details in the ToR and timelines therein.
- Application Submission via email to: somalia.procurement@savethechildren.org indicating "OFDA funded Integrated Lifesaving Assistance for Drought and Conflict-Affected Populations in Somalia" as the subject. Deadline for submission is 15th October, 2018.