



## TERMS OF REFERENCE

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### **Integrated Health Improvement Project in Magwi phase III End-line Evaluation Consultancy 8<sup>th</sup> April-1<sup>st</sup> May 2024**

#### **1.0 Summary - Summary of the key elements of the evaluation**

- 1.1 Purpose:** The purpose is to assess the project's progress and achievements against its set goal and outcomes and to make an analysis of factors contributing to achievement/non achievement of results, and to provide lessons learnt lessons for longer term planning and organizational learning. The evaluation will assess the project's relevance, coherence, effectiveness, efficiency, impact, and sustainability.
- 1.2 Audience:** *users of the evaluation (SSRC, Swiss RC, MFA, RCRC Movement, and other national and international stakeholders).*
- 1.3 Commissioner(s)<sup>1</sup>:** This external evaluation is commissioned by the South Sudan Red Cross (SSRC) and Swiss Red Cross in compliance with SSRC's PMER Framework, Swiss RC Monitoring, Evaluation and Learning Framework and the International Federation of Red Cross and Red Crescent (IFRC) Framework for Evaluation.
- 1.4 Consultant Reports to:** South Sudan Red Cross PMER Coordinator.
- 1.5 Duration of evaluation:** *The working time in days is a maximum of 30 days out of which the field trip part is 7-10 days.*
- 1.6 Time frame:** *Estimated timeframe the evaluation team/consultant will be engaged for is 30 days (April).*
- 1.7 Location:** Magwi County Eastern Equatoria State, South Sudan.

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<sup>1</sup> Commissioner organizes, finances, selects and contracts the evaluation team.



## **2.0 Background**

### **2.1 Organizational Background**

South Sudan Red Cross (SSRC) is one of the 191 National Societies worldwide and was founded on the eve of South Sudan independence in 2011. The SSRC is a volunteer-based humanitarian society and works as auxiliary to public authorities in the humanitarian field. Based on the Statutes of the International Red Cross and Red Crescent Movement, the SSRC was established through an Act of Parliament on 9th March 2012. SSRC was formally recognised by the International Committee of the Red Cross (ICRC) on 18 June 2013 and in November 2013, it was admitted into the International Federation of Red Cross and Red Crescent Societies. SSRC's headquarters is based in Juba with a total of (21) branches and a growing network of units (102) across the country. There are currently over 250 SSRC staff members and approximately 18,000 volunteers across the country.

The Society's work is guided by the Seven Fundamental Principles (humanity, impartiality, neutrality, independence, voluntary service, unity and universality) and by the IFRC Strategy 2030 and South Sudan Red Cross Strategic plan 2022-2026, which voices SSRC's collective vision and determination to move forward in tackling the major challenges that confront humanity in the present decade. All SSRC staff MUST abide by and work in accordance with the Red Cross and Red Crescent Principles.

### **2.2 The history of the co-operation between the partners**

SSRC has a long history of successful partnership with the SRC. The cooperation between SSRC and SRC is well established and built on mutual trust and understanding. SRC is also working with the Torit Branch in one other project (BDRFA); the cooperation is very well established and built on mutual trust and understanding. The project registered a lot of success and significant changes during the project implementation as the beneficiaries were put at the centre of the implementation process and the fact that the community-based volunteers were recruited and trained to carry on awareness in the community in local languages made Behaviour Change Communication easy. Based on the feed-back of communities and local authorities the approaches and strategies the project applied are highly appreciated. In addition, the needs and demands for community-based interventions in the areas of health, WASH and psychosocial support and SGBV are still huge, making the planned follow-up project even more viable and wanted.



### **2.3 Project Description Information**

This Integrated Health Improvement project is the third phase of the Integrated Health Improvement intervention of South Sudan Red Cross (SSRC) in Magwi County. During the second phase, which ended in November 2020, stakeholder consultative meetings with the County Health Department, County WASH Department and Department of Protection, and feedback sessions in the project communities came to the conclusion that the project activities led to significant improvements in behaviour patterns and applied practices in the communities. Therefore, community leaders asked SSRC to extend the project for another three years and expand the project area in order to reach more communities and realize more sustainable impact since change is a gradual process.

The project with funding from the Swiss Red Cross (SRC) implementation started from 1st December 2020 and will end on 30th June 2024 with the objective of improving the health status of 70,000 vulnerable persons in four payams of Magwi County, namely Magwi Central, Pajok, Nimule, and Pageri and specifically looking into the following outcomes: As part of the planning process for the next phase (IV), there is the need to measure the performance of the current project phase through project evaluation.

Outcome 1: Access to health is increased.

The project addresses immediate health risks and key health determinants through a needs-based approach. Interventions include the dissemination of key messages at community and household level on preventive health and good nutrition, the facilitation, formation, and training of community and school entities. On the other hand, intervention under this outcome promote awareness raising on the topics of PSS and SGBV and provide means to practically support the victims.

Outcome 2: Access to safe water, sanitation and hygiene is improved

The project supports the construction and rehabilitation of water and sanitation infrastructure, including trainings of water management committees and hand pump mechanics. SSRC staff and volunteers as well as community members, e.g. teachers and leaders, are trained to sensitize communities on sanitation and hygiene. The following outputs and activities contribute to increased numbers of households and individuals using improved water source and sanitation facilities, equipped with water and soap.

Outcome 3: SSRC's organizational and program management capacity enhanced for effective and efficient response.

The aim is to deliver quality programming and to enhance the response to potential emergency situations. The project approaches capacity building in a holistic way by combining capacity building initiatives with the sister project in Magwi, and where feasible, beyond, in order to strengthen the National Society as a whole and make a wider roll out of trainings and capacity building initiatives to other branches and projects possible. For this – in line with the SSRC



Strategic Plan 2018 – 2021, the SSRC National Society Development (NSD) Framework, Branch Development Plans and the SMCC approach in-country – the support of other Movement Partners is sought so that resources can be combined, and the effect multiplied. The SRC funded and planned Branch Development project also covers Torit Branch with activities that are meant to strengthen the branch’s capacities in terms of management, communication, and recruitment, retention and management of volunteers and members.

### **3. Purpose, Scope and Objectives of the Evaluation**

#### **3.1 Evaluation Purpose**

The project indicators (logframe indicators) will be measured in an endline survey before the project evaluation. They will be compared with the baseline survey. The purpose of this evaluation is to analyse factors contributing to achievement/non achievement of its results and to provide lessons learnt for longer term planning and organizational learning. The focus will be on enablers and barriers and on the DAC criteria.

#### **3.2 Evaluation Scope**

- The evaluation covers the whole-time span of the project which is December 2020 – June 2024.
- Geographical coverage – the evaluation will take place at SSRC HQ and Torit branch and at field level in the payams covered by the project in Magwi county.
- Target groups include staff, volunteers, community groups (mothers to mothers groups, water management committees and community health groups) community leaders, school clubs and stakeholders at the national, state and county levels.

#### **3.3 Evaluation Objectives**

This end line evaluation exercise will seek to achieve the following objectives:

- To assess the relevance, coherence, effectiveness, efficiency, potential impact of interventions as well as, the sustainability of the results.
- To assess the level of completeness and timeliness of all project deliverables as per the approved work plan and to assess the level of contribution of the outputs towards the achievement of the project goal, objectives, outcome and impact.
- To highlight lessons learned from the project and make practical recommendations for improvement of future strategies and projects.



- To assess the level of SSRC collaboration and coordination with county, state and national stakeholders in the planning and implementation of the project.
- To determine the extent to which the project addressed the crossing cutting issues of community engagement and accountability (CEA), gender equality, disability inclusion and climate change related outcomes during project implementation and to provide recommendations on how to improve these issues in the future.

### **3.4. Evaluation Criteria**

The basic evaluation criteria of the OECD/DAC will be used in the final evaluation: (1) Relevance, 2) Coherence, (3) Effectiveness, (4) Efficiency, (5) Impact, (6) Sustainability. Additional evaluation criteria from the IFRC Evaluation Framework can be used as appropriate: Adherence to Fundamental Principles and Code of Conduct, Coverage, Connectedness.

## **4.0 Evaluation Methodology**

The evaluation will mainly employ qualitative approach (to speak to the evaluation criteria). It will be conducted by an external consultant who will be expected to come up with a detailed methodology, taking into consideration the local context. The consultant will develop appropriate tools and suggest an appropriate sampling methodology and sample size. Data collection methods will include a desk review (relevant context, project, and partnership documents) and primary data collection through observations, focus group discussions and key informant interviews. For key information interviews, key stakeholders (village chiefs, County Health workers, chairwomen of mother's groups, school headmasters, other stakeholders) will be identified. It is recommended that an evaluation to understand effectiveness and impact of the work done by the volunteers – testing their knowledge first before the evaluation starts, is conducted. The consultant will elaborate their understanding of the terms of reference, proposed methodology, sample size and proposed tools in an inception report which will be discussed and approved by the SSRC PMER Unit and technical project team before the start of the survey. The evaluation will use the following literature for reference and to inform the evaluation process further:

- Project documents- proposal, log frame, M&E plan, risk management plan, sustainability plan
- Existing project reports, monitoring reports
- Project review report and its recommendations



- Related NS documents such as strategic plan, thematic policies and strategies
- Related partners, county and national government documents

## 5.0 Evaluation Quality & Ethical Standards

The consultant shall take all reasonable steps to ensure that the evaluation is designed and conducted to respect and protect the rights and welfare of the people and communities involved and to ensure that the evaluation is technically accurate and reliable, is conducted in a transparent and impartial manner, and contributes to organizational learning and accountability. Therefore, the evaluation team shall be required to adhere to the evaluation standards and applicable practices as recommended by SSRC and International Federation of Red Cross and Red Crescent Societies which include:

- Utility: Evaluation must be useful and used.
- Feasibility: Evaluation must be realistic, diplomatic, and managed in a sensible, cost effective manner.
- Ethics & Legality: Evaluation must be conducted in an ethical and legal manner, with particular regard for the welfare of those involved in and affected by the evaluation.
- Impartiality & Independence: Evaluation should be impartial, providing a comprehensive and unbiased assessment that considers the views of all stakeholders.
- Transparency: Evaluation activities should reflect an attitude of openness and transparency.
- Accuracy: Evaluation should be technical accurate, providing sufficient information about the data collection, analysis, and interpretation methods so that its worth or merit can be determined.
- Participation: Stakeholders should be consulted and meaningfully involved in the evaluation process when feasible and appropriate.
- Collaboration: Collaboration between key operating partners in the survey process improves the legitimacy and utility of the evaluation.

It is also expected that the evaluation will respect the seven Fundamental Principles of the Red Cross and Red Crescent: 1) humanity, 2) impartiality, 3) neutrality, 4) independence, 5) voluntary service, 6) unity, and 7) universality. Further information can be obtained about these principles at: [www.ifrc.org/what/values/principles/index.asp](http://www.ifrc.org/what/values/principles/index.asp)



## 6.0 Key Deliverables

The consultant will be responsible for the following deliverables:

- Inception report - demonstrating understanding of the TOR, detailing the end term evaluation design, sampling methodology & sample frame, evaluation tools, budget and work plan and the evaluation team and their relevant qualifications. The inception report will be reviewed and approved by SSRC before allowing any evaluation activities. The consultant may be called upon to make a presentation of their inception report.
- Enumerator's training – In case of need for enumerators, the Consultant will be responsible to train them and test the tools agreed. Refinement will be checked after field testing.
- Evaluation execution - according to the agreed sample size and area, beneficiary/ community, and stakeholder coverage. The data collection to be done in three different locations simultaneously.
- Copies of original and cleaned data sets with codebook- The raw data, the database which has been cleaned (quantitative, including original field notes for in-depth interviews and focus group discussions, as well as recorded audio material), should be submitted together with the report. A simple inventory of material handed over will be part of the record. SSRC will have sole ownership of all final data and any findings shall only be shared or reproduced with the permission of SSRC.
- First draft evaluation report (25 pages) - the report should meet the survey objectives put in this TOR following the outline below:
  - Table of contents
  - Clear executive summary with among others major findings of the evaluation and summary of conclusions and recommendations, dashboard of findings including summary of end-line indicators values. (2 pages)
  - Introduction and Background (3 pages)
  - The objectives of the evaluation, methodology and any challenges encountered in the field. (5 pages)
  - A presentation of the findings and the analysis (12 pages)
  - Conclusions (1 page)
  - Recommendations with clear guidelines of how they can be implemented. (2 pages)
  - Report annexes.
- Produce final report based on comments provided by SSRC and Swiss RC on the draft report.
- Produce a summary of preliminary findings in a power point presentation format and present during the planning workshop in Torit)



## **6.1 Data Disclosure**

- The Consultant should deliver, at minimum, all files including: quantitative data sets (raw and refined products), transcripts of qualitative data and others in an easy to read format, and maintain naming conventions and labelling for the use of the project/ program/ initiative and key stakeholders.
- Data must be disaggregated by gender, age and disability (using Washington Group of questions) and other relevant diversity and vulnerabilities ( e.g. displacements), etc.
- Datasets must be anonymized with all identifying information removed. Each individual or household should be assigned a unique identifier. Datasets which have been anonymized will be accompanied by a password protected identifier key document to ensure that we are able to return to households or individuals for follow up.
- All data is confidential and the Consultant is not allowed to share data, findings, reports etc of this evaluation, except with the written approval of SSRC.

## **7.0 Administrative Arrangements**

### **SSRC Responsibility:**

- Supervise the work of the Consultant under the responsibility of the SSRC PMER Coordinator and project team. All communications should be addressed to the SSRC PMER Coordinator.
- Ensure the ethics and transparency are upheld during the evaluation, especially the seven fundamental principles.
- Responsible for organizing meetings with the different stakeholders and communities during the survey.
- Consult local authorities for acceptance of the Consultant in the communities.
- All necessary documents will be provided in soft copy by SSRC on time
- Responsibility for some providing comments on draft documents on time.
- Plan, coordinate and support the necessary logistics to aid data collection
- Fund the evaluation

### **Consultant Responsibility:**

- Ensure the actual evaluation is conducted as per the TOR.
- Ensure that the agreed time schedule of the evaluation is adhered to.





- Design a methodology for the collection of quantitative and qualitative data for the evaluation.
- Organize and facilitate training workshop for data collectors (the consultant will hire and pay the data collectors) and other evaluation team members on evaluation implementation, including the evaluation protocol and tools to be used and pilot testing of the tools.
- Gender balance of data collectors has to be ensured by the consultant.
- Ensure the evaluation is conducted in a gender and disability sensitive way, ensuring that all voices, including those of the most vulnerable are heard and captured in an equal way.
- Develop the data entry template and ensures evaluation team are trained adequately to assure data quality.
- Collect and analyse available secondary data to augment the evaluation findings.
- Based upon a reading of the programme documents, propose any additional topics or issues for analysis in the evaluation.
- Conduct comparative analysis of the evaluation data with the midterm and baseline findings.
- Share key findings and insights from the evaluation with relevant staff through consultations.
- Responsible for his or her stationaries and other items needed for the evaluation
- International and national flights/travel will be at the Consultant's responsibility. SSRC will facilitate travels in the field location.
- Consultancy fee is expected to cover the Consultant's transport, subsistence needs (food, accommodation, and security) while in the project location SSRC will provide transport without costing local transport in their budget.
- Collect and hand over documentaries and videos and document lessons learnt form the project to SSRC. All collected data, including fotos, videos and audios are property of SSRC and cannot be shared or published without explicit permission of SSRC

### **Tentative Work Plan:**

The entire duration for this evaluation will be spread over the period **8<sup>th</sup> April -1<sup>st</sup> May 2024**. Within this timeframe the consultant will take **24 days** as outlined below. The consultant will develop a detailed workplan (Gantt chart) detailing each phase of the evaluation, specific activities for each phase and the time/dates allocated for each activity.



No.	Deliverable	Who	Duration (timeframe)	No of Consultancy days
1.	Preparation of inception report after first meeting with project staff/ SSRC PMER Unit (Coordinator and team)	Consultant	TBD	2 days
2.	Submission and review/revision of inception report	Consultant	TBD	1 days
3.	Preparation of draft data collection tools/questionnaires for feedback	Consultant	TBD	1 days
4.	Preparation of final data collection tools/questionnaires	Consultant	TBD	1 day
5.	Data collection exercise including training of data collectors	Consultant	TBD	5 days
6.	Data analysis	Consultant	TBD	5 days
7.	Presentation of preliminary findings to guide the planning workshop	Consultant	TBD	1 day
8.	Prepare draft evaluation report- includes: -Compilation of draft report -Submission of draft report -Presentation of findings to the client	Consultant	TBD	4 days
9.	Clients review and comments on draft report	SSRC & SRC	TBD	0 days
10.	Preparation of final report – includes: -Collation of stakeholder comments -Submission of full final report Finalize evaluation report	Consultant	TBD	4 days
	Total Consultancy Days			24 days

### **Consultant's Budget:**

N o.	Description	Unity Type	Quantity	Unit Cost US\$	Frequency	Total Cost US\$
1.	Consultancy cost <sup>2</sup>					
2.	Travel					

<sup>2</sup> Clearly itemized consultancy cost showing the level of effort in days for each member of the consultancy team



3.	Subsistence( food and accommodation)					
4.	Stationery					
5	Contingency cost					
<b>Total</b>						

## 8.0 Qualification Requirements

### Education:

- The lead consultant must have at a minimum, Masters’ degree in one or more of following areas: Public Health (MSPH, MPH), Epidemiology, Demography, social development/ social sciences or any other relevant related field. He or she must have significant experience in conducting similar studies.
- The lead consultant must put together a multi-skilled team to cover the thematic scope of the project. The team members must have at a minimum a bachelor’s degree in the above stated areas. The team must have a statistician able to analyse quantitative and qualitative data.

Team members with knowledge of local languages in Magwi are critical to the success of this evaluation – most activities and people to be interviewed in communities speak and understand the local languages, translations are not reliable.

### Work Experience:

- Over 5 years proven/demonstrable experience in undertaking similar assignments and familiar with South Sudan context, particularly in community health and health system strengthening, and community resilience building.
- Proven knowledge and practical experience in quantitative and qualitative research.

### Technical Competencies:

- Excellent knowledge and skills in humanitarian programing and standards including core humanitarian standards;
- Knowledge of health in emergency programming and community health;
- Comprehensive knowledge about participatory data collection methodology and digital/mobile phone data collection methods;



- Knowledge and understanding of community involvement in programming and planning;
- Knowledge and understanding of gender equality and disability inclusion issues
- Excellent organizing, facilitating, presentation, interpersonal communication and report writing skills.
- The lead consultant must have strong analytical skills and ability to clearly synthesize and present findings, draw practical conclusions, make recommendations and to prepare well-written reports
- High level of professionalism and an ability to work independently under tight deadlines.
- Availability for the entire period of the assignment.

### **Payment Modalities:**

The Consultant will have to provide the following documents before payment is effected, and it should be noted that the down payment will be 30% after submission and approval of inception report and 70% after completion of the work and submission and approval of final report.

- Inception report -30%
- Final report for the evaluation/ survey-70%

NB: The contents of the report will be analyzed, and final payment will only be made upon agreement of the final report by South Sudan Red Cross (SSRC) and Swiss Red Cross (SRC).

### **SUBMISSION DEADLINE:**

Interested applicants/ firms are expected to submit **hard copies (hand delivered)** of their detailed CVs showing previous similar experiences and references and a detailed technical narrative and financial proposal of not more than 15 pages (excluding annexes) illustrating their competencies and clearly articulating the strategies they would use, to **the SSRC offices, Tongpiny Area, Ministries Block, Juba, South Sudan**. Soft copies of application are acceptable and should be sent to [vacancy@ssdredcross.org](mailto:vacancy@ssdredcross.org) or [tender@ssdredcross.org](mailto:tender@ssdredcross.org). Please include the name and telephone number of the contact person for the application

### **Suggested Application Format**

- 1) **Introduction:** description of the firm, the firm's qualifications, and statutory compliance (max 1 page)
- 2) **Background:** Understanding of the project, context, and requirements for services (max 2 pages)



- 3) **Proposed methodology** - Indicate methods to be used for each indicator and highlight any areas where indicators may need adjustment. The targeted respondents should be indicated for each indicator. Proposed detailed questions should be indicated. Detailed sampling procedure needs to be indicated. (Max 8 pages).
- 4) **Firms experience** in undertaking assignments of similar from similar context and for specified clients (include a table with: Name of organization, name of assignment, duration of assignment (Dates), reference person contacts (Max 1 pages). Provide as an attachment a report of a previous similar evaluation.
- 5) **Proposed team** composition and their experience profile and the assigned roles in the evaluation (max 1 page)
- 6) **Work plan** (Gantt chart of activity and week of implementation)-1 page.
- 7) **Budget** – itemized detailed budget for the assignment (max 1 page)

Deadline for expression of interest is on **5<sup>th</sup> April 2024**.

