

Terms of Reference: Baseline & Needs Assessment for In-Country Consultant Teams

Joining Forces for Child Protection in Emergencies (JF-CPIE) in South Sudan

1. About World Vision International.

1.1 World Vision International is a Christian humanitarian and development organisation dedicated to working with children, families, and their communities worldwide to reach their full potential by tackling the underlying causes of poverty and injustice. World Vision International has delivered relief, rehabilitation and development programmes in South Sudan since 1989.

About the Commissioning Office

World Vision serves through a mix of relief, recovery and resilience programmes in 8 states (Warrap, Upper Nile, Western Equatoria, Northern Bahr el Ghazal, Central Equatoria, Greater Bar El Ghazal, Lakes and Jonglei). World Vision partners with communities, government, other humanitarian NGOs and UN agencies to provide life-saving assistance to restore hope and dignity to the most vulnerable population.

Therefore, World Vision and Save the Children with funding from GFFO is intervening with the Joint Force for Child Protection in Emergence project to help in addressing the emergency situation in Jonglei, Central Equatoria and Western Equatoria.

2. Project Background

Joining Forces for Child Protection in Emergencies (JF-CPIE) is a multi-country project of more than 16 million euros funded by the German Federal Foreign Office (GFFO) implemented in 6 countries: Bangladesh, Burkina Faso, Central African Republic, Colombia, Ethiopia and South Sudan. The project commenced in July 2022 and has a total duration of 24 months. While in some areas the project is implemented directly by the consortium members and their implementing partners, in others it is implemented through or with their local partner organizations.

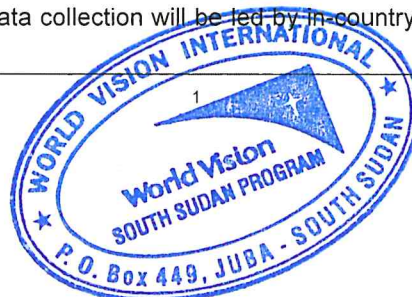
The project reunites the largest child rights organisations in South Sudan Save the Children and World Vision to improve the protection of vulnerable girls, boys, adolescent girls and adolescent boys (<18 years) living in refugee and IDP settings, as well as host communities through access to quality child protection prevention, mitigation, and response services & supports. Plan International Germany is the lead organization, responsible for the overall management of the project.

Location(s): The Baseline Survey and needs assessment will be carried out in Juba County (**Mangalla and Muniki Payams**) and Tumbura (**Tumbura Town and Source Yubu Payams**) of Central Equatoria and Western Equatoria State respectively

Further information will be shared according to the list of documents, in annex 2 to 8.

3. Purpose of the Baseline and Needs Assessment

The main purpose of this baseline study is to provide initial values for those project indicators whose reporting require a pre/post comparison. The baseline values constitute the initial values before the onset of project implementation (i.e., the pre-condition) whereas the endline will determine the final values after the completion of project implementation (i.e., the post-condition). It is for this reason that the baseline performs a pivotal role within the outcome evaluation of JF-CPIE. Within country, the implementation of the baseline data collection will be led by in-country consultants with support of the



program Quality department by the local MERL teams. Across countries, the baseline will be coordinated by the interim MERL team (IMT).

The needs assessment will assess how the humanitarian needs are expected to evolve over the course of the project. **The general objective is to confirm and update the needs analyses conducted during project inception, where required and adjust the measures where needed.**

Detailed objectives of the needs assessment:

1. To provide comprehensive understanding of the scale of the existing child protection needs of vulnerable children and adolescent girls and boys, their families, and communities in the targeted project locations.
2. To highlight the key priorities for response, including geographic, programmatic, and funding areas of priorities.
3. To guide how the response should be adapted, including what existing capacities the response should build upon.

Role and tasks of the international Consultant team (also denominated interim MERL team or IMT)

The ToRs of the IMT can be found in Annex 1.

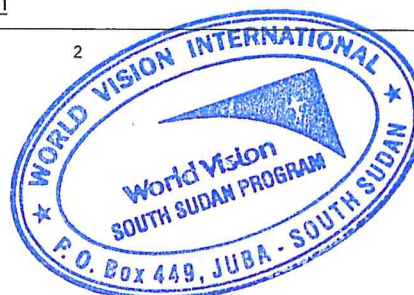
Baseline:

- The baseline process (incl. methodology, tools for data collection, data cleaning and analysis) needs to be **standardized across all 12 implementing partners**. The IMT will assume the role of the Global MERL coordinator to steer and guide the process in collaboration with the MERL staff / consultants at implementing partner level.
- The **baseline data to be collected will mainly be quantitative in nature whereas the needs assessment will rely on qualitative data-collection tools**. Both need to **follow a child-rights, gender, age and inclusion approach** (in consultation with the Gender and Inclusion specialists of Plan Germany and IP).
- The baseline will be **coordinated with the needs assessment** (as defined by the national project teams). The needs assessment will be designed and guided by the Consortium Lead's (World Vision Germany's) CPiE specialist (who is not part of the IMT) in close coordination with the IMT.

Needs Assessment

- A common and standardised approach and shared data collection tools will be implemented across all six country locations to facilitate a comparative analysis and the consolidation of a global needs analysis.
- Site locations will be identified and selected by in-country agency teams limited to Baseline sampling and operational reach of the IP.
- Standardised data collection tools will be combined with well-targeted registry space to fill in information concerning special target populations and country specific issues.
- Attention to gender and age inclusions are incorporated as general methodological concern and equal representation of children and young people with disabilities alongside their non-disabled peers in all activities and forums will be considered an essential practice.
- Creative, active, game-based, and interactive participatory methods and approaches will be implemented and applied when suitable.
- Data collectors in in-country teams will use these methods to better approach their work with children and improve their communication and discussion of information collected by the Child-focused Focus Group Discussions (FGD) prior and during their application.
- Key Informant Interviews (KII) with relevant stakeholders will complement children-focused methods and guide data collection with relevant adults (guardians and caregivers of the children including foster parents for unaccompanied children, CBCPNs, community leaders, religious, health workers, teachers).

Role and tasks of in-country consultant team



The national consultant will support World Vision South Sudan in completing a baseline survey as well as a needs assessment. The baseline on one hand aims to capture the initial status of the indicators and provides a basis for measuring indicator values as the project progresses. The baseline thus constitutes a key step in the overall evaluation JF-CPIE. It is the benchmark to which the midline and endline results collected after the first year of implementation and upon completion of the project will be compared. The baseline study also serves to validate indicators to ensure that they are suitable for measuring impacts and outcomes.

The needs assessment on the other hand aims to provide an update of World Vision South Sudan's child protection needs assessment. This provides important input into the programming of World Vision's activities in the context of the JF-CPIE project in South Sudan.

The methodology of both the baseline and needs assessment will follow a consolidated structure with the same set of standardized tools and key questions but allowing contextualization according to the specific local reality.

The implementing partners per country are responsible for the needs analysis in their project implementation areas and should consolidate their findings into a national needs analysis. The process will be guided and continuously supported by World Vision Germany's Child Protection Specialist and the Interim Global MERL team (IMT) who will monitor the data collection process, keep the overview and jointly consolidate the 6 country-level needs assessments into a global consolidated needs analysis. The IMT will consolidate baseline findings across countries into one global report. Country-specific baseline reports, should they be required, are responsibilities of in-country consultants.

The local consultant will work closely with the MERL team & Child Protection Specialist of the implementing partner and the global team to implement both baseline and needs assessment in South Sudan. Data collection is expected to last from mid-November until mid-December.

Role and tasks of consortium members

The consortium members should follow up on the quality of the produced baselines and needs assessments and their respective MERL & Child Protection Specialists should remain available and support the process accordingly.

3.1. Assessment of Baseline Values for Project Indicators

The baseline will provide initial values for the outcome indicators. Methodologically speaking, these outcome indicators require a pre/post comparison in the sense that project attainment will be gauged through comparing initial baseline values (i.e., the pre-condition) with endline values (i.e., the post-condition). The implementation of the baseline may also provide opportunity to reflect upon the adequacy of the indicator framework of the JF-CPIE. It is therefore expected that systematic feedback by programme staff and other stakeholders on the adequacy of the JF-CPIE logframe indicators will be collected as part of the baseline implementation.

3.2 Key Needs Assessment questions

The following questions guide the assessment in the various tools, including Focused Group Discussions (FGDs) and Key Informant Interviews (KII) with target participants in the needs assessment exercise (girls, boys, adolescent girls, and adolescent boys, caregivers, and relevant child protection actors) in the project locations.

- What are the key CP needs and risks faced by girls, boys, adolescent girls, and adolescent boys in the target project locations, taking into consideration age, gender, disability, and inclusion aspects in the project locations.
- What gaps exist in accessing child protection services for girls, boys, adolescent girls, and adolescent boys in the target project locations? Which child protection services are lacking in that area of operation?
- What community-based CP systems and structures exist in your location to protect and address child protection needs of boys & girls in the project location?

- What are the key gender-specific barriers facing boys and girls (including social, gender dynamics) and how can they be overcome? What are the **key gender norms** driving gendered barriers and access to services? How do gender norms differ for different groups of boys and girls, i.e. girls with disabilities, boys with disabilities, indigenous girls and boys etc. (intersectional approach).
- What are the current knowledge and capacities of caregivers and families in protecting children and adolescents from violence, abuse, neglect and exploitation?
- What capacities exist for stakeholders and local authorities to protect boys and girls?
- What are the unique CP needs within the specific child vulnerability categories, including girls with disabilities, child mothers, unaccompanied children, etc.?
- What are the solutions to address the specific CP needs that have been identified in the project locations?
- What are the existing child protection humanitarian coordination mechanisms in the targeted project locations? What capacity gaps exist in mainstreaming child protection in other sectors?
- What are the existing stakeholders on child protection and food security? What capacity or lack thereof exists to address child protection risks by food security partners?
- What actions, services and interventions should be prioritized to promote child protection?
- How can cash and voucher assistance (CVA) be safely used to support the protection of at-risk children and adolescent girls and boys?
- What services should be adapted to effectively respond to the existing needs?

4. Users of the Baseline and Needs Assessment

The baseline will be used by the project teams to measure and monitor the project progress against the set indicators over the course of the project implementation, especially in mid-lines, end-lines and final evaluations.

A detailed **dissemination plan** will be developed at the start of the baseline and needs assessment by the Consortium Members (for the global level) and by the implementing and local partners national level & local level, including possible products/outputs to meet the information needs of the different key users).

5. Methods for Data Collection and Analysis

Tasks of international Consultant team (IMT)

- Development of a **detailed methodology** for data collection (incl. sampling approach, data management, analysis and documentation. The inception report will consist of the protocols for implementing both baseline and needs assessment. The methodology needs to ensure ethics and child protection in the data collection process (see inception report). It should be in direct response to the project indicators and their interpretation and will be further unpacked in the Inception Report.
- **Design and development of the methods** (e.g., tablet-based household survey via Kobo-toolbox, focused group discussion, key informant interviews), **and tools** (e.g., questionnaires, key questions) **for data collection**. For this, existing and validated tools applied by the projects teams will be screened and collected (shared folder) to avoid double work. All tools will be developed in English.
- **Onboarding process** of and **continuous coordination** with and support of local consultants (incl. training of local consultants in tools).

Tasks / requirements of in-country consultant team

- Having **specific experience with Kobo toolbox** – collection, monitoring and analysis.
- **Recruitment of a team of enumerators** to carry out both the baseline and needs-assessment.
 - Baseline: familiar with tablet-based data collection
 - Needs assessment: Familiar with participative child-friendly qualitative data collection including FGD and KII.
- **Training up of enumerators on tools provided** for the baseline as well as needs assessment (enumerators need to be provided with tablets).
- **Ensure safe data collection and storage practices.**

- Implementation of the data-collection work plan.
- Quality Management:
 - Baseline: Ensuring that baseline data is uploaded into Kobo.
 - Needs assessment: Summarizing of the data collected for the needs assessment in close collaboration with the global lead on qualitative data methodologies.
- Responding to data-quality issues in close collaboration with the global MERL team.
- Production of reports at the country-level [OPTIONAL]*
- Collecting feedback by programme staff on the adequacy of the log frame indicators given JF-CPIE's activities and objectives.

*Each CP needs assessment conducted as part of the GFFO JF-CPIE global needs assessment should be accompanied by a final report. These final reports should be consolidated per World Vision and Save the Children South Sudan.

Note:

- Any changes in methodology need to be in line with World Vision South Sudan's MERL Standards and needs to be approved by a ethical review (see guidance, annex 16).
- The methods and tools for the baseline should be developed in such a way that they consistently can be used every time the indicator values are being assessed throughout the project duration, but specifically during mid-line and end-line assessments / evaluations.

5.1 Sample

Given the structure of JF-CPIE's beneficiary groups, baseline data collection will target internally displaced and well as households within host communities. The IMT has developed a sampling framework to be implemented by national consultants. It is expected that baseline data collection will take place approximately at all different locations and involve 385 [730/ 1115] households per implementing partner (2 per country). (See Annex 14, 15 for complete sampling methodology).

There are two baseline proposals that can be consulted with the World Vision based on budget. The **small-budget solution** implies an equal splitting of the sample size across the different beneficiary groups. In this context, the small-budget solution may imply that 143 households from the host community and 143 IDPs households will be surveyed. Within each beneficiary group, the sample size is rather small, which will certainly affect estimation of baseline (and endline) value for each outcome indicator. Thus, World Vision are strongly encouraged to explore possibilities to implement the big-budget solution. As per the **big-budget solution**, a country would then sample 385 households within each beneficiary group. The country within the previous example would thus randomly select 385 households from the host community and 385 refugee households will be surveyed. The total sample would thus be 730 households. An operational area of an IP that serves all three beneficiary groups (i.e., host communities, and internally displaced as well as refugee households) would thus survey 1115 households.

Needs Assessment Sampling

Community data collectors will randomly select households and Child Participants using a global systematic approach. This process will guide the collection of quantitative data collection and the selection of participants for qualitative tools. This sampling will be conducted in the communities/camps in each country locations in which existing agency networks are already in place.

Child-focused Focus Group Discussions (FGD) will be conducted with 5-7 child participants each time according to a combination of the following criteria:

- a) Age distribution and sex disaggregation
- b) Across geographical/demographical populations



This implementation should account for an inclusive integration of targeted populations while avoiding the stigmatisation of target support groups in the project. In total, each implementing partner should produce a minimum of 6 FGD for this project.

Key Informant Interviews (KII) with adults will be implemented with relevant stakeholders to complement children-focus methods and direct base indicators to specific issues of importance for the project. A standardised Child Protection KII tool will be implemented across the board and subject-specific Key Informants will be identified in each country. In total, 4 KII per implementing partner will be implemented according to the following criteria:

- a) CP KII with an informant specialised in sexual and gender-based violence
- b) CP KII with an informant specialised in armed groups and armed conflict violence
- c) CP KII with teachers, guardians, and caregivers of children (including foster parents for unaccompanied children)
- d) CP KII with relevant local or community authorities (health workers, community and religious leaders, etc.)

The implementation of these tools will be coordinated by in-country teams and Implementing Partners (IP) will work with the assistance of the IMT & GNO's CP specialist following standardised guidelines and ethics regulations. The data collection procedure will include on-going Data Quality Assurances and In-Field Data Management coordination to guarantee that data sources are both analytically comparable across Implementing Partners but also produce valuable insights to participant in-country agencies to aid their work amongst local communities and national regions.

5.2 Participant selection and recruitment

According to the sampling strategy the consultant(s) will give guidance on the selection and recruitment of participants in the field.

6. Ethics and Child Protection

World Vision South Sudan is committed to ensuring that the rights of those participating in data collection or analysis are respected and protected, in accordance with Ethical MERL Framework and our Child and Youth Safeguarding Policy (annex 16). All applicants should include details in their proposal on how they will ensure ethics and child protection in the data collection process. Specifically, the consultant(s) shall explain how appropriate, safe, non-discriminatory participation of all stakeholders will be ensured and how special attention will be paid to the needs of children and other vulnerable groups. The consultant(s) shall also explain how confidentiality and anonymity of participants will be guaranteed.

Furthermore, the consultant team is expected to complete a "Planning for Ethical MERL Checklist" to assess the level of risks to potential participants.

Given the context of the JF-CPIE initiative, an ethical approval is required for data collection. The consultant is expected to clarify the proceeding with the national projects' teams. No work will start without signature of World Vision's Child and Safeguarding Policy (annex 10) by all consultant(s).

7. Key Deliverables

International Consultant team

The key deliverables are as follows:

- **Inception report**, including
 - an updated timeline.
 - detailed methodology, including draft sampling methodology and size.
 - draft data collection tools.
 - ethical considerations.
 - consent forms for any primary data collection (agreed with each of the project teams)
 - (draft) methods for data analysis.



- **Global MERL framework** (including indicator matrix, data flow and indicator tracker).
- **Final Sampling methodology** (including unit of sampling and sampling frame) and size.
- **Final Data Collection Tools.**
- **Cleaned Data** (including data files (e.g. Excel, SPSS), transcripts, syntax/code books etc.)
- **Completed Consent Forms** (including for children and their caregivers and adults).
- **Draft & Final Baseline Report** including a global Indicator Tracking Table (ITT) with baseline data inserted and including an executive summary.
- Other **Communication Products** for Dissemination (if required).

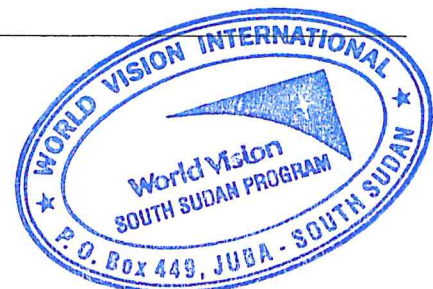
In country consultant team

Specific Deliverables:

- Development of an inception report, that operationalizes the global baseline and needs-assessment protocol in the context of South Sudan. The inception report will provide a translation of all tools and data-collection processes into LANGUAGE. The inception report will specify how the sampling framework provided by the global team will be implemented in South Sudan. Finally, the inception report will also provide a detailed work plan on how data collection for both exercises are carried out in Western Equatoria and Central Equatoria State .
- Completion of an onboarding guided by the global MERL team.
- Work Plan, which outlines the intended delivery of both the baseline and needs assessment.
- A pool of baseline as well as needs-assessment enumerators.
- Tablets/phones are provided by the consultant.
- Regular updates on completion of data collection as well as on responses to data quality issues highlighted by the global MERL team.
- Baseline report (local) based on the quantitative insights gathered through data collection.
- Needs assessment report based on the qualitative insights on potential child protection risks identified.

8. Process and Timeline

Date	Who?	What?
07/10	Interim MERL team	Finalization of indicator matrix: The project has already established outcome and output indicators. These indicators need to be operationalized through data-collection processes and tools to ensure baseline (and eventually midline and endline) can be carried out. The matrix will specify the operationalization of indicators.
18/11	Implementing Partners	Local consultants recruited: The Baseline and Need Assessment (BNA) will be carried out by local consultants or by the IP's MERL team. By this date, all IPs are required to have recruited consultants for the BNA processes. Global Consultant Team (GCT) and IMT can help with the recruitment of the consultants. It is recommended that consultants will be selected that can equip their field teams with tablets or equivalents.
21/11	JF Global Coordination Team / Interim MERL team	Ethics approval of BNA protocols and tools: In line with due diligence, all BNA tools and processes and tools will be reviewed to ensure ethical standards are met. Ethics review will be carried out by the consortium lead (Global Hub/Plan International). IPs need to indicate if additional ethics approval in country is required.
22/11	Interim MERL team	Sharing of the BNA protocol with country teams: Based on the indicator matrix, the IMT will develop the baseline process, including tools, sampling, questionnaires, training tools for enumerators. The quantitative data collection will be tablet-based (consultants of IPs need to provide them). The IMT will provide the data-collection



		software. The needs assessment will be qualitative in nature. The IMT will provide the guidelines.
24/11 – 28/11	World Vision/ Interim MERL Team / Global Project Manager	Country calls on BNA protocols: To ensure all in-country teams and consultants are familiar with the BNA protocols, there will be country calls to walks teams through the processes and tools. These calls also provide opportunities for in-country teams to flag up any area of support especially required.. During data collection the IMT will regularly check in with South Sudan Team.
30/11 – 16/12	World Vision/ Interim MERL Team	Quantitative and qualitative data collection (baseline): Data collection will be organized and carried out by local consultants. This also implies training of enumerators. The BNA frameworks and country calls earlier will ensure consultants are well familiar with the BNA processes and tools. All quantitative data (i.e., baseline) will be stored online and regularly accessed by the IMT for quality-assurance purposes. All qualitative data (i.e., needs assessment) will be prepared for analysis by local consultants in close collaboration with IMT.
23/12	Interim MERL Team	Country-specific raw data sets to country teams: Data collected across all countries will be stored globally. Then, they will be exported and shared with local teams for additional analysis by local consultants were requested. The national BNA reports will be developed by the national projects teams / implementing partners.
02/01 – 06/02/ 2023	Implementing Partners/ Interim MERL Team / Global Project Manager	Country-specific validation calls: Based on the baseline data collected, the IMT will perform the cross-country analysis. Key findings will be discussed and contextualized with local consultancy teams and the MERL teams of the IPs.
13/01/ 2023	Interim MERL Team	Final global report: Based on validation calls, the IMT will produce a draft global report summarizing the baseline results. Based on feedback by GPM, the IMT will then finalize the baseline report. Needs assessments are country specific and thus not form part of the baseline report. They will be combined into one overall report by the interim child protection specialist.

9. Payment Terms and Conditions

Payment will be affected as follows; First instalment (30%) of the total cost on submission and acceptance of inception report including 15% withholding Tax. Final payment (70%) upon completion and approval of the final report (including 15% Withholding Tax)

Additional information on payment terms and conditions will be included in the contract.

10. Admin/Finance Support:

- Logistical support (access to official facilities including internet, documentation—printing, photocopying of tools etc.) will be provided by World Vision
- The consultant will be responsible of any tax or other fees related.
- Please note that a partial payment hold-back will be in effect until a final report has been approved by World Vision

11. Baseline Timeline.

To be determined by the hired consultant

- WORLD VISION will provide accommodation for the consultant in the field.



- Logistical support (access to official facilities including internet, documentation, printing, photocopying of tools, mobile phones for data collection etc. shall be covered by WORLD VISION. Any cost needs to have prior approval from WORLD VISION.
- Meals and other incidentals will be responsibility of the consultant
- The consultant will conduct his/her work using his/her own computer.
- The movement of the consultant and team to and from the field will be facilitated by WORLD VISION.
- The cost related to travel from/ to field by the survey teams will be covered by WORLD VISION.

12. Required External Response to Terms of Reference

A technical and cost proposal based on this Terms of Reference (ToR) is requested from the consultant

or consulting firm. The proposal should contain:

1. Detailed plan of action for field work indicating staff-days required.
2. Detailed survey methodology.
3. Schedule of key activities preferably in a format such as a Gantt chart.
4. Detailed budget with justification. The external evaluation proposal should include
 - a reasonable, detailed budget to cover all costs associated with the evaluation.
5. Updated CV of consultant.
6. A profile of the consulting firm (including a sample report if possible)

13. Minimum Qualifications

At the minimum, the consultant/s must possess the following:

- Relevant Master's degree in Social Sciences, M/E or Any other relevant field or Bachelor's degree in the related field with significant experience in conducting similar studies.
 - Over 5 years' proven experience in undertaking similar studies and familiar with South Sudan context.
 - Have proven knowledge and practical experience in quantitative and qualitative research
 - Excellent organizing, facilitating, presentation, communication and report writing skills.
 - Experience working in emergency context. Experience working in South Sudan context is a plus.
- **14. Additional Information**
 - Consultants shall follow WVSS Code of conduct, PHSEA, Child Safeguarding practices and confidentiality when interviewing or photographing children. Consultants shall be required to sign and abide by WVSS Safeguarding Policy (which includes prevention of sexual exploitation and abuse, and behavior protocols)
 - Consultants shall abide by WHO and Government of South Sudan COVID-19 SOPs 1.
 - **15. Deadline for expression of interest is on 18th November 2022**

NB: Baseline survey and needs assessment tools will be provided to the successful candidate

Annex list:

- Annex 1: Terms of Reference International Consultant Team/Interim MERL Team (IMT)
- Annex 2: Full Proposal
- Annex 3: Logframe
- Annex 4: Time Schedule
- Annex 5: Maps Project Regions
- Annex 6: Needs Analysis
- Annex 7: Beneficiary Table
- Annex 8: Project Activities



- Annex 9: Ethical MERL Framework
- Annex 10: Global Policy: Safeguarding Children and Young People (include MER checklist?)
- Annex 11: Full report structure for Baseline
- Annex 12: Executive summary
- Annex 13: Introduction & background
- Annex 14: Baseline design / methodology
 - o Data sources
 - o Data collection methods (incl. gender & inclusion and child protection)
 - o Sampling
 - o Data analysis (incl. triangulation and gender / inclusion)
 - o Data quality assurance
- Annex 15: Needs Assessment Design/Methodology
 - o Data sources
 - o Data collection methodology
 - o Sampling
 - o Data
- Annex 16: Full report structure for Needs Assessment
- Annex 16: Ethics and Child Protection
- Annex 17: Findings
 - o according to indicators
 - o according to gender & inclusion, child rights
 - Conclusions
 - Recommendations
 - Annexes

A consultant will be selected in accordance with the procedures set out in World Vision International's procurement guidelines for selection of consultants. **Applications** are invited from those applicants who meet the requirements provided in the Terms of Reference.

All applications should be sent through email ONLY to sdno_scmquotations@wvi.org or drop your proposal to Tender box at Plot 1, Block 2BX, Hai Cinema, WVISS, (next to MTN Office)

Date: Expressions of interest for this consulting service received after 5:00 pm November 18, 2022 will be automatically rejected.

