



Terms of Reference

Endline Survey 'Gender-responsive nutrition support and enabling nutrition environment for the most vulnerable women, men, boys and girls in South Sudan and Sudan'.

Locations: Rubkona, Mayom and Abiemnom Counties, Unity State, Ruweng Administrative, South Sudan.

September 2023

Donor: Global Affairs Canada (GAC)



1. Project Description

Gender-responsive nutrition support and enabling nutrition environment for the most vulnerable women, men, boys and girls in South Sudan and Sudan, is a one and half year project funded by Global Affairs Canada (GAC) aimed at saving lives, alleviating suffering, and maintaining human dignity through gender-responsive nutrition interventions for crisis-affected women, men, boys and girls in Sudan and South Sudan. Life-saving nutrition services through the community management of acute malnutrition (CMAM) approach are core to the project's design, the components of CMAM being community outreach and mobilization; management of SAM without medical complications through outpatient therapeutic programs (OTP); inpatient management of SAM with medical complications at stabilization center's (SC); and outpatient targeted supplementary feeding programs (TSFP) to manage MAM. The project teams will work through community-based approaches to raise awareness of good nutrition practices (particularly infant and young child feeding (MIYCN)) and early referral to nutrition services, given their importance for prevention of malnutrition, and reducing risk of associated mortality and adverse developmental outcomes. As critical, basic health and WASH assistance play a vital role in prevention of acute malnutrition and deterioration of nutritional status, nutrition activities will be complemented by primary health care services with clear nutrition outcomes, and provision of safe water, basic hygiene items and hygiene promotion campaigns. Based on plans agreed with health authorities and the Nutrition, Health, and WASH Clusters. CARE's intervention will reach 418,660 individuals (M: 54,287, W: 130,194, B: 113,578, G: 120, 601).

The project has three immediate outcomes;

1. Increased and more equitable access to gender-responsive nutrition services for children under 5 and PLW/G
2. Increased and more equitable knowledge of community nutrition practices, especially infant and young child feeding (IYCF), among caregivers, community members, and nutrition/health workers in South Sudan
3. Increased and more equitable access to critical basic health and WASH services in communities targeted with nutrition programming (especially children under 5 and PLW/G) to reduce risk, and support successful treatment, of malnutrition in South Sudan

2. Endline Survey purpose

The endline survey is commissioned to assess project performance against intended objectives, contribute to internal learning, document impact, and contribute to CARE's future programming around nutrition and gender.

3. Specific Objectives of the study

Specifically, the endline survey will accomplish the following specific objectives:

- To assess the extent to which the project has contributed towards improving the lives of the communities in which it was implemented through measuring project indicators and comparing baseline and endline data as per the following project outcomes;
 - **Immediate Outcome 1** – Increased and more equitable access to gender responsive nutrition services for children under 5 and PLW/G
 - **Immediate Outcome 2** – Increased and more equitable knowledge of community nutrition practices, especially infant and young child feeding (IYCF), among caregivers, community members and MoH nutrition/health workers

- **Immediate Outcome 3** – Increased and more equitable access to critical basic health and WASH services in communities targeted with nutrition programming (especially children under 5 and PLW/G) to reduce risk of, and support successful treatment of, malnutrition.
- To identify and document the intended and unintended outcomes, best practices, lessons learned as well as challenges that arose from project implementation.

4. Evaluation questions

Relevance

- To what extent did the project achieve its overall outcomes?
- Were the inputs and strategies identified realistic, appropriate, and adequate to achieve the results?
- Was the project relevant to the identified needs?

Effectiveness

- How effective were the strategies and tools used in the implementation of the project?
- How effective has the project been in responding to the needs of the beneficiaries?
- What are the hygiene practices for people living in the project's targeted communities?
- What are the access levels of people living in the project's targeted areas regarding personal and communal hygiene and sanitation practices?
- How satisfied are people living in the project's targeted areas with the adequacy and inclusiveness of humanitarian assistance they receive?
- What is the % of people living in the project's targeted communities who demonstrate increased knowledge of nutrition practices.

Efficiency

- Were the resources effectively utilized?
- Are there more efficient ways and means of delivering more and better results (outputs and outcomes) with the available inputs?

Impact

- Identify and analyze the significant changes that the project has brought in the project participants' lives. What real difference has the intervention brought in the lives of the beneficiaries?
- Assess the progress towards the actual project outcomes (ultimate, intermediate, and immediate)?

Sustainability

- To what extent are the benefits of the projects likely to be sustained after the completion of this project?
- Describe key factors that will require attention in order to improve prospects of sustainability of project outcomes and the potential for replication of the approach?

Lessons learned and recommendations

- What are the main lessons learned for each of the intermediary outcome areas?
- What are the main recommendations that can guide the development of future programming and donor policies focusing on resilience to economic or conflict-induced shocks?

5. Methodology

The End line will take a mixed-methods (qualitative and quantitative data collection and analysis) approach. The methods should be consistent with the purpose, objectives and principles and be the most appropriate to answering the questions. This should be specific and as detailed as possible regarding existing information sources, data collection instruments, protocols and procedures. The consultant will be responsible for defining and carrying out the overall approach. This will include specification of the techniques for data collection and analysis, structured field visits and interactions with project participants and the team. The consultant must ensure the meaningful and safe participation of women and girls in the endline data collection and analysis. Tools, methodology and findings should be reviewed and validated by CARE MEAL team.

6. Data Collection

The consultant will develop data collection tools such as: questionnaires, FGD, KII guides, and observation tools to capture data from the respondents above. Enumerators will be recruited and trained by facilitators to collect data during household surveys, FGDs and KIIs. Cognizant of the changing context, data will be captured electronically to expedite the data collection process, minimize data entry errors, and improve overall data quality. The COVID-19 pandemic may greatly impede grouped face to face data collection. Hence, the consultant is expected to design a safety protocol for achieving data collection cognizant of Government of South Sudan COVID-19 country SOPs. The consultant will also be required to describe a plan for COVID-19 data collection plan in the event that face to face or group interaction is not possible.

7. Data Analysis

The consultant should adopt an iterative data analysis approach. This approach allows for prompt data validation as enumerators collect data. Hence, the consultant will develop a data analysis plan. Analysis should integrate findings from the different sources of data. The consultant should corroborate, and triangulate data from different primary data sources. Depending on access to the country and within the country, the consultant should factor in remote analysis and presentation of findings and sharing of documents in collaborative forums. A complete set of tools and procedures for summarizing and analyzing qualitative data needs to be made available.

8. Data sources

- Pregnant and lactating women mothers
- Care givers of children under 5
- Other project participants
- Government line ministries
- Community leaders
- Local government leaders

9. Key endline responsibilities

6.1 Consultant responsibilities

This assignment should be completed within a maximum of 45 days from inception. Hence, the consultant will be required to conduct several key actions:

- Conduct a desk study of topics that are central to the project design, including, but not limited to gender dynamics in South Sudan, attitudes about GBV and harmful traditional practices, women's empowerment, the landscape of women's organizations in South Sudan, agricultural practices, market linkages, positive practices supporting women in leadership, etc. The project will supply documents for the review but expect the consultant to consult additional secondary sources.
- Conduct pretesting of data collection tools
- Train enumerator to use tools and collect data
- Maintain data quality before, during and after data collection
 - Before data collection: Pilot testing the data, collection tool will be required in order to verify the reliability and validity of the tool. This includes for both face to face and remote approaches.
 - During field data collection: For household surveys, data entry will be on the spot using an electronic questionnaire (deployed in the Kobo collect application). Monitoring enumerators for accuracy in doing the interview and in capturing data will be necessary. Checking through all completed responses (daily) to ensure any mistakes or inconsistencies are corrected on time will add value to the quality of data.
 - Data analysis: Perform iterative data analysis which involves continuously analyzing key variables as part of data quality checks using various methods such as: frequencies or cross-tabulations or any forms of regressions
- Conduct a validation workshop with community members to inform the compilation of the draft report.

6.2 CARE's Responsibilities

During the assignment. The following shall be CARE's responsibilities:

- Provide technical oversight to the execution of the assignment to ensure quality of products including approvals of the deliverables.
- Share all necessary documents (including baseline and mid-term project assessments) to the Consultant to finalize the methodology and data collection tools
- Provide input for study methodology, data collection tools and the report.
- Provide technical oversight to the execution of the assignment to ensure quality of products including approvals of the deliverables
- Guidance and coordination throughout all the phases of endline keeping communication with external Consultant throughout all phases

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- Provide technical oversight to the execution of the assignment to ensure quality of products including approvals of the deliverables
- Guidance and coordination throughout all the phases of End Line, keeping communication with external Consultant throughout all phases
- Closely follow up the data collection process, ensuring quality control, daily debriefing, meeting the timelines set for interview completion

10. Endline Products/Deliverables

The endline assessment process will result in several key deliverables:

- An inception report clearly outlining the approach, indicators, methodology and tools
- Finalized survey tools and inclusive and gender sensitive sampling design
- Draft Endline report for comments and refinement
- Supporting files, original and cleaned datasets, statistical output files, photos, etc.
- A comprehensive final endline report in electronic MS Word and PDF versions based on the template structure in annex below. (Not more than 40 pages)
- Fact sheet or abstract and power point presentations to be used for dissemination of results to stakeholders
- Compilation of lessons learned through the entire endline process to be shared with the project team to be used for reflection, growth and consideration for future project and organizational studies.
- presentation of the findings to key project and senior technical staff.

11. Management of the Consultant

The Consultant will work under the direction of the GAC Food Crisis Project manager and the MEAL Coordinator. There will be routine check-ins to ensure the process is achieving optimal results.

12. Consultant Competency

A minimum of 5 years or more experience, with the following expertise, experiences, and competency

- Proven experience analyzing and understanding of gender dynamics in fragile states.
- At least a master's degree qualification in any of the following areas: nutrition, public health, social sciences, development studies, research or similar qualifications
- Experience undertaking similar studies in South Sudan
- Demonstrated experience with food security and livelihoods
- Experience leading endline assessments, feasibility studies or evaluations for GAC
- Experience collecting data from women, households, farmers, vendors and local leaders
- Excellent analytical, interpersonal, communication and reporting skills

- Knowledge and experience in gender and women’s rights issues
- Excellent command of written and spoken English

13. Logistics

Air tickets, airport pickup and drop off, ground transport and accommodation while in field locations will be the responsibility of the consultant. CARE may facilitate accommodation for the consultant while in the field where possible but not including payment of any associated costs.

14. Evaluation and Award of Consultancy

CARE South Sudan will evaluate the proposals and award the assignment based on the technical and financial criteria. CARE reserves the right to accept or reject any proposal received without giving reasons and is not bound to accept the lowest, the highest or any bidder. Only the successful applicant will be contacted.

The evaluation criteria associated with this TOR is split between technical and financial as follows:

70 % -Technical (technical score will be done by program team)

30 % -Financial (Financial score will be done by procurement)

15. Technical Evaluation Criteria

Technical Criteria	Description
General understanding of the TOR.	Does the proposal demonstrate a clear understanding of the TOR? Does the consultant make an effort to interpret the objectives?
Methodology	To what extent is the methodology clear and detailed? Is the sampling method and sample size computation scientifically acceptable? Are all the relevant methods of data collection included in the proposal?
Team composition	Does the consultant (or proposed team) have the necessary competencies and experiences as described in the TOR to undertake this study?
Experience	Experience of conducting baseline and evaluation surveys in South Sudan, preferably within proposed geographical area has competitive advantage. Experience with similar assignments with INGOs/ other organization
Work plan	Is an action plan part of the proposal? Is it reasonable or realistic? Does it meet the expected deadlines? Is it flexible to accommodate any changes without compromising the deadline and quality of products
Budget	To what extent is the presented budget reasonable. Is the budget clearly aligned with the planned amount?

16. Payment Terms and Conditions

Payment will be effected as follows; the whole payment (100%) will be done at once, upon completion and approval of the final report. Additional information on payment terms and conditions will be included in the contract.

17. Additional Information

- Consultants shall abide to WHO and Government of South Sudan COVID-19 SOPs.
- Consultants shall abide to GAC beneficiary data privacy/management policies
- Do No Harm and ethical standards to be maintained throughout the study

18. Appendix: Endline Report Template

The CARE MEAL Coordinator will discuss the content and length of the final report with the successful consultant. However, below is a suggested outline for the report.

- a. Cover page (1 page)
- b. Table of Contents (1 page)
- c. Acknowledgements (1 page)
- d. Glossary (1 page)
- e. Description of Project (1 - 2pages)
- f. Executive summary (2 Pages)
- g. Endline introduction/Background (max 2 pages)
- h. Limitations of the study
- i. Methodology (max 1 pages)
- j. Findings (max 10 pages)
- k. Summary table of indicator endline results.
- l. Conclusion and recommendations (max 3 pages)
- m. Lessons learnt from the endline process (max 1 pages)
- n. Appendices (to include copies of all tools, list of enumerators, survey timeline including all KII and FGD participants and discussion transcripts (as many pages as necessary- please reference the annexes in the report, but include them in a zip file as separate documents

19. All Applicants Should Include the Following:

Technical and financial proposals, which should include:

- Brief explanation about the lead and associate consultants with particular emphasis on previous experience in this kind of work
- Copies of reports of previous work conducted including reference contacts
- A written submission on an understanding of TOR, methodology / approach the consultant will use; time and time-bound activity schedule, financial issues (budget, number of people he/she will hire, costs per activity line – people, logistics etc.)
- Organizational (if it is a company applying) or personal capacity statement (if it is an individual that will hire data collectors)
- Resume and 3 references.

20. Submission.

Interested **consultants/consultancy firms** should submit applications by email to ssd.procurement@care.org.

The deadline for submission of technical and financial proposals is 1200 noon, CAT, **5 September 2023**.

Note: Only local consultants/consultancy firms based in South Sudan are eligible to submit proposals.

Financial proposal can be submitted as per Table 1 below.

Table 1.

S. No.	Description	Unit	Quantity	Rate	Total	Remarks
1	Professional fees	Days				20% government tax will be deducted from the total consultancy fee
1.2	Less 20 % tax					
A	Net professional fees					
2	Logistics cost breakdown					
2.1	Field trip by road/flight (Juba-Rubkona-Juba)	Trip				This will be the responsibility of consultant/consultancy firm
2.2	Field trip by road/flight (Juba-Mankien-Juba)	Trip				This will be the responsibility of consultant/consultancy firm
2.3	Field trip by road/flight (Juba-Abiemnom-Juba)	Trip				This will be the responsibility of consultant/consultancy firm
2.4	local transport in Rubkona, Juba, Mankien, and Abiemnom	lumpsum				This will be the responsibility of consultant/consultancy firm
2.5	Accommodation in Rubkona	Night				This will be the responsibility of consultant/consultancy firm
2.6	Accommodation in Mankien	Night				This will be the responsibility of consultant/consultancy firm
2.7	Accommodation in Abiemnom	Night				This will be the responsibility of consultant/consultancy firm
B	Total logistics cost					
A+B	Grand total					