

#### **Terms of Reference**

#### External Mid-term Evaluation

"Increase access to humanitarian life-saving health services for conflict affected internally displaced and host population in NW Syria, Turkey-Syria border region (Idleb region)" (P 2573)

Project Period: 01. April 2020 – 31. March 2022 (24 months)

Implementing Partner: Hand in Hand for Aid and Development (HIHFAD)

Project Volume: 4.338.326 EURO

Donor(s): German Federal Foreign Office (GFFO)

#### I. Introduction and Context

Malteser International (MI) responds to the humanitarian crisis created by the conflict inside Syria since 2012. Projects are implemented in Kilis and Gaziantep, Turkey, Aleppo Region/North Syria, Lebanon and in Iraq.

MI has been working formally with the partner organization Hand In Hand For Aid and Development (HIHFAD) since 2017 within the framework of jointly implemented projects. HIHFAD is a Syrian NGO registered in both Syria and Turkey for possible aid projects mainly in the health sector. Since its foundation in 2011, HIHFAD has implemented projects for Syrian IDPs and refugees in Turkey and for internally displaced persons within Syria. With over 900 employees, HIHFAD is currently operating: 3 Maternity and pediatric hospitals,1 surgical hospital,3 PHCs Level 3, 1 PHC level 2 and 1 mobile unit

In addition, 2 specialized Physiotherapy centers, 2 MHPSS (Mental Health and Psychosocial Support) Centers, 1 Tuberculosis Centre (the only one in all Idleb governorate), also HIHFAD is operating Supply Chain Management Project supported by WHO to distribute KITs and Essential Medicines to more than 100 facilities.

The project P 2573 subject of the mid-term evaluation contributes to the health care of the population in the North Aleppo and Idlib region by providing secondary health services through outpatient and inpatient services.

The two hospitals which are supported through this project are Atmeh charity hospital: Idleb governorate /Harem District /Dana sub district/Atmeh community and Al-Quds Hospital: Idleb governorate/Harem District/Dana sub district /Dana community.

Secondary health services are provided at Atmeh charity hospital, and Al-Quds Hospital. Its specialist departments include emergency care, internal medicine, surgery, ear, nose and throat,



neurology, dermatology, cardiology, gastroenterology, hematology, endocrinology, and urology. A laboratory and modern diagnostic imaging procedures are available.

The project defined its objective as follows:

Project Overall objective (impact): Reduce mortality and morbidity rates among internally displaced population and host com-munities in Dana sub-district, Harem district, Idleb governorate.

Project objective (outcome): Targeted internally displaced population in Idleb governorate- Dana district have improved access to quality primary and secondary healthcare services

In order to reach the above described objective the project focuses on three main areas of interventions:

Result 1: Increased access to trauma, surgical and inpatient services are available in two general hospitals

Result 2: Increased access to outpatient clinics services

Result 3: Increased access to referral capacity internal and external

## II. Objectives of the mid-term evaluation

The main objective of the external mid-term evaluation is to review the program implementation and achievements against proposed objectives and planned measures of the GFFO project proposal.

The objective of the learning exercise is to directly communicate the findings of the evaluation and transform the collected information into recommendations for improved programming and implementation and ultimately, to demonstrate accountability to beneficiaries, donors and other stakeholders.

Key observations on the strengths and weaknesses of the project design, implementation processes, monitoring tools, cooperation with local stakeholders, good practices and lessons learnt as well as cross-cutting issues shall additionally be taken into account.

The evaluation will focus on:

# Relevance/appropriateness/ impact

- a) Is the project design and implementation appropriate to meet the most urgent needs and priorities, especially concerning health, of the target groups? Which parts of the project have been most relevant and why?
- b) How far has the affected population been involved in the design and the implementation of the project?



- c) What mechanisms are in place to assure that the beneficiaries are kept informed and involved in discussion and feedback concerning project activities? To what extent is the project accountable to its beneficiaries (complaint mechanism etc.)?
- d) Has the project design and implementation been coherent with policies of the respective humanitarian system (cluster etc.) and donors as well as funding priorities?
- e) How did activities contribute to the overall objective "Contribution to the reduction of morbidity and mortality of the conflict-affected population in Northern Syria"?

#### Coverage

Does the project successfully reach out to addressing the needs of women, children, elderly, persons with disabilities and other vulnerable groups?

#### **Effectiveness**

- a) To what extent have the anticipated results been achieved? What were the major factors influencing the achievement or non-achievement?
- b) To what extent have the activities been timely?
- c) Do the project outputs have an appropriate level of technical quality?
- d) To what extent does the program follow international norms for quality, including the minimum Sphere standards?
- e) Which project activities have had the greatest positive effect and which had the least effects? Are there any activities that should have been included in the action but were not?
- f) Were the capacities of target populations strengthened through the intervention?
- g) Was the established monitoring system adequate to provide oversight and steer the implementation?

#### **Efficiency**

Were the funds appropriately used and in the most cost-effective way?

# **Cross-cutting themes**

To what extent have the cross cutting themes gender, age, inclusion and protection been considered during project design and implementation?

#### **Connectedness**

Does the project take the longer-term perspective and the interconnectedness of problems into account? How does the project encourage the transition to early recovery/LRRD interventions?

## Coordination

Has the project maintained an adequate level of coordination and communication with different stakeholder groups during its design and implementation?

#### **Conclusions and Recommendations**

- a) Main conclusions drawn from analysis with evidence provided during field visits and observations.
- b) A set of recommendations linked to the conclusions that provide guidance to Malteser International and partners for future interventions in the respective region and in project-related sectors.



# Where applicable: Operational capacity and quality of partnership with the local partner organization

- a) Does the local partner organization has sufficient operational capacity? How have local capacities been strengthened?
- b) How do both sides rate the quality of the partnership or provide recommendations for improvement?

### III. Methodology

The evaluation will be conducted in three steps. The first intervention shall include desk review of all relevant available project related documents, proposal and reports. The second intervention will be a field based participatory evaluation where the evaluator will address main questions via individual and group interviews with project staff, beneficiaries and other stakeholders relevant to the project. The third step will be the facilitation of an intense debriefing session with the presentation of the first findings from the evaluation.

#### IV. Planning

The mid-term evaluation is planned to take place as early as feasible, preferably in the month of May/June 2021.

#### Draft work plan (to be discussed):

Preparation/Briefing and reviewing of documents	2 days
Travel/return to/from project region	2 days
Visits, meetings, debriefing in Gaziantep	5 days
Final report	3 days
Total	12 days

Malteser International will facilitate all local travels in Gaziantep and the region. Malteser International together with HIHFAD will be responsible to organize appointments with stakeholders on the spot. Malteser International will facilitate translation into English if required.

The evaluator will be responsible to arrange for travel to Gaziantep and for all necessary equipment (e.g. computer) as well as for communication costs and relevant insurances. Accommodation in Gaziantep can be facilitated upon requested.

#### VI. Deliverables

All documents and data acquired during interviews are confidential and solely used for the purpose of the evaluation. Interview partners will not be quoted in the report without their permission.

The draft and final report as well as all material linked to the evaluation (produced by the evaluators or the organisation itself) is confidential and remains at all times in the property of Malteser International.



- 1) Inception Report: Planning of the evaluation in form of an inception report based on the analysis of the project documentation in alignment with the Malteser International HQ based Program Manager and the local team based in Gaziantep/Killis.
- 2) Debriefing: A note (2 pages) with the principal results of the evaluation and recommendations is prepared and presented to (1) HIHFAD in form of a debriefing as well as (2) the Malteser International HQ based Program Manager and the local team based in Gaziantep/Killis.
- 3) Final Report: A draft final report (English, electronic version) including the findings of the evaluation and the recommendations will be sent to Malteser International within ten days following the field trip latest for potential comments. The report (electronic version) will be finalised and sent to Malteser International HQ latest ten days upon receipt of potential comments and questions.

The results of the evaluation will be presented in a written report in English. The report shall cover the above described topics and will include practical recommendations. The structure of the report is recommended as follows:

Title Page
Index
List of Abbreviations and Acronyms
Map of project / programme area
Executive Summary
Introduction
Background
Evaluation Methods and Limitations
Analysis, findings and conclusions
Recommendations
Lessons Learnt
Annexes

## VII. Expertise of the evaluator(s)

The evaluation can be carried out by a single experienced evaluator or a team with proven expertise in the areas of intervention.

- Proven evaluation experience required, preferably in a related field (Health)
- Postgraduate university degree or equivalent in the wider field of Health would be an added value
- > A minimum of five years of experience with humanitarian and/or developmental proiects
- Experience in the context of the Middle East, preferably with the Syrian crisis
- Excellent written and spoken English; knowledge of Arabic and/or Turkish would be an asset



# VIII. Requirements for the presentation of offers

The offer will be a compilation of the following documents:

- 1. Technical offer including description of methodology and work plan
- 2. Financial offer including costs for travel, accommodation, per diem etc.
- 3. Information on previous experience, including CV and two examples of comparable pieces of work (or recent consultancy if no comparable work is available) and/or references
- 4. Information on availability for the assignment

# **Expression of Interest:**

Offers shall be presented per email to Malteser International.

Contact person: Katharina Schaufler, Katharina. Schaufler <a href="mailto:mailt