Terms of Reference

Third Party Monitoring

CARE Turkey – North West Syria

January 2022

## Introduction

* 1. Background

CARE International in Turkey (CARE) is providing assistance to refugees living inside Turkey and cross-border humanitarian assistance to people affected by the Syria crisis. For the implementation of its cross-border programs, CARE works through direct implementation and with Syrian partner organizations. This combination of implementation modalities allows CARE both to access hard-to-reach and relatively underserved areas, and to contribute to capacity development of (future) Syrian civil society actors. CARE’s response in Northern Syria is mainly focused on Emergency Response, Livelihoods and Economic Recovery, Protection and Sexual Reproductive Health, WASH and Shelter. CARE ensures gender responsive approaches are being streamlined into all programs across all sectors. CARE develops tailored Monitoring, Evaluation, Accountability & Learning (MEAL) plans for all its programs and with each of its implementing partners. Through these plans, CARE and its partners agree on the appropriate tools, mechanisms and approaches to ensure progress is tracked, challenges are identified in a timely manner and that accountability, both to donors and to affected communities, is ensured. An important component of these MEAL plans is the practice of contracting third-party monitoring service providers, through which real-time monitoring and verification can be conducted strengthening CARE’s quality controls of the implemented programs.

## Purpose:

CARE Turkey is seeking third party monitoring firms to be added in the approved vendor list in order to provide a variety of monitoring services of its activities implemented in Northwest Syria. The field activities are being implemented direct as well as with partners in the following sectors: Livelihoods and Economic Recovery, Emergency Response (Rapid Response Mechanism), Protection, Sexual Reproductive Health, WASH and Shelter) across locations in Idlib and Aleppo governorates.

## Objectives:

Goal: Produce credible and reliable findings about the quality of activities implemented by CARE and its partners.

Sub-objectives:

Assessment of whether the designed services (including supplies) match needs of the local population. Identification of service delivery gaps in terms of quantity and quality, and challenges faced.

The selected service provider will conduct different types of monitoring activities, including but not limited to:

1. Assessing proper implementation of planned beneficiary targeting strategies, beneficiary selection processes, registration and verification as per CARE procedures.
2. Assessing proper implementation of selected activities as per core humanitarian standards, CARE workplans, technical designs, SOPs, and any relevant guidance CARE is bound to/ is committed to follow
3. Conducting ad-hoc verification of specific activities as per CARE request
4. Conducting post-distribution/post activity monitoring exercises for selected activities
5. Providing programmatic and operational recommendations to improve CARE’s programming strategies, procedures, implementation practices and partnerships inside Syria. Situational Analysis of population and operational environment.

## **TPM Scope of Work:**

CARE is looking for identifying monitoring agencies to be added in the approved vendor list who can provide the below type of services in North West Syria:

* **Onsite monitoring:** which include registration and verification/redemption monitoring, distribution monitoring, site monitoring, on spot checks and other forms of onsite monitoring;
* **Service delivery verification and beneficiary verification for an agreed sample;**
* **Use of qualitative and quantitative methodologies to collect information including but not limited to:**
  + **Surveys**: including Post Distribution Monitoring, Post Activity Monitoring, Knowledge Attitudes and Practices Survey (KAP), Baseline/Endline surveys, and any other forms of M&E surveys with households/KIIs.
  + **Focused Group Discussions:** as needed for the relevant sector.

**CARE is primarily looking for service providers who already have presence and experience working in Idleb and Aleppo governorates and can quickly mobilize field teams to offer services under the scope of this TOR.**

As all of CARE’s programming activities are carried out in a high-risk and extremely fluid operating environment, CARE frequently has to adapt its programming to changing realities, which can affect the nature, timing and geographic location of these activities. Therefore, CARE expects a greater **flexibility** from third party monitors in adopting to changing scope of work during the assignment period.

At the end of full data collection, analysis will be followed by a comprehensive report and a debriefing session to CARE and implementing partners on an agreed schedule. Immediate updates on any red flag issues will be required by the third party monitoring service provider as per CARE’s red flag classification. Finally, we strongly welcome innovative approaches and visual appealing products to present data, findings and recommendations.

Whenever contracted, CARE will provide the third party monitoring company with the monitoring tools required to complete the monitoring visits. CARE might ask the third party monitoring company to support in tools revision and finalization. All tools and procedures for monitoring should be agreed with CARE before proceeding with monitoring activities.

.

**Note**: Vendors might be asked by CARE to conduct surveys and FGDs not only for monitoring purposes but for assessment or research purposes as well if needed.

* 1. Ethical Considerations

TPM companies included in CARE’s AVL are requested to commit to the below principles:

**Independence**: Measures will be put in place to prevent bias.

**Usefulness**: Findings will be articulated clearly and in a way that maximizes the potential for these findings to inform decision-making. The study will describe access to services and humanitarian services, control and decision-making power over resources and participation in the humanitarian response mainly.

**Representativeness**: The study will include a wide range of beneficiaries, including from different genders, age groups, ethnic groups and locations (e.g. urban and rural) as relevant to CARE’s programming.

**Age, gender and diversity**: The study will be gender sensitive and provide an analysis from gender, age, diversity, location, displacement status and health conditions approaches, as applicable and relevant.

**Participatory approach**: The study will adhere to the principles and practices of participatory and community-based approaches. Actions will be taken to ensure that participation in RGA by diverse women, men, girls, and boys – including persons with disabilities, older persons, youth, and LGBTI persons – is adequately captured.

**Confidentiality**: The study will be mindful of which individuals are used as information sources, ensuring the confidentiality of participants in the study, being sensitive to who might overhear interviews, and/or not visiting particularly insecure areas.

**Informed consent**: Enumerators will specifically ask respondents for their consent to use any information they provide. When interviewing children, parental consent will be sought after receiving the child’s assent depending on the age. A respondent can always decline to answer a specific question. Personal information will never be disclosed or transferred for purposes other than those for which it was originally collected and for which consent was explicitly given.

**Safe referrals**: The enumerators team will have referral information available for when immediate mitigation and remedial actions are needed. The partner will ensure that the research team is aware of the complaints and feedback mechanisms and able to share information on the different channels with the research participants.

**Integrity**: The enumerators will treat all informants, interviewees, and co-workers with decency and respect at all times, and carry out their assigned tasks with integrity. They will introduce themselves clearly and respectfully to assessment participants, and explain the goals and limitations of the RGA process, how the information will be used, and with whom it will be shared. All research team participants must be trained on PSHEA included in CARE’s training package prior to data collection in the field.

**Conflict sensitivity:** The partner should take into account dynamics of the conflict to avoid further harm particularly in relation to gender and social norms.

**Safeguard recorded information**: All data and information management activities will adhere to international standards of data protection as well as CARE and Government of Turkey data standards. Data collectors should comply with the ethics and visibility rules of CARE while implementing the research activities. The partner should not use the data for their own research purposes, not license the data to be used by others, without the written consent of CARE.

**Safeguarding and PSHEA:** CARE has a zero-tolerance approach toward sexual harassment, exploitation and abuse, and child abuse. We will carefully examine allegations and investigate, and take appropriate disciplinary action where this is needed, taking into consideration the rights and interests of the survivor, consistent with CARE’s survivor-centred approach. We make very clear that sexual harassment, exploitation and abuse, and child abuse in any form, perpetrated by our staff, partners or other related personnel, towards anyone, will not be tolerated.

CARE reserves the right to withhold the service if the rules and the regulations regarding confidentiality, ethics and procedures of CARE are not followed.

* 1. Data analysis and reporting:

The identified companies will be expected to meet as minimum the below requirements but more detailed criteria will be developed and agreed per each assignment:

1. All monitoring reports should contain sex and age disaggregated data per each activity and sex- and age-disaggregated data are analysed to understand the differential outcomes for women, men, girls and boys.
2. Monitoring reports must highlight the progress made by CARE/implementing partners in achieving the program objectives, and mainstreaming/integrating gender into the programs.
3. Provision of analysis of inclusion of people with disabilities.
4. Monthly and final reports should be disaggregated by implementing partner and data should be easily tracked per partner.
5. Monitoring report should raise all internal or external factors that affect/might affect CARE’s program.
6. Field monitors should provide specific attention to partner’s accountability mechanism at the field, results should be reflected in monitoring reports.
7. Key deliverables and activities

TPM vendors will be responsible for the following key activities and deliverables but those can be still amended as per the nature of the specific contract:

1. Inception report including top level information on data collection tools and sampling methodology per proposed monitoring activity, data protection protocol, and top-level work plan, and data quality insurance, and the analysis of the secondary data shared by CARE Etc...
2. Weekly updates email on the status/progress of each program monitoring activities.
3. Live work plan (online) per program for the contracted period with details of types of monitoring activities, samples (male/female) staff (male/female), locations and timeframe to complete each activity.
4. Relevant ‘flash reports’ communicating “Red flags” at a real-time frequency (max 24 hours) after data collection.
5. Monthly reports per partner highlighting the results of the monitoring activities performed during the period of the previous month including comprehensive analysis for the monitoring data, followed by debrief session for CARE and the implementing partner(s).
6. Final overall comprehensive monitoring reports (per partner) segregated by activity with consolidation of key findings and concrete, practical recommendations.
7. Final debriefs and presentation of key findings and recommendations came up for all the monitoring visits conducted.
8. Final data collection tools (in Arabic & English), raw data and field photos organized by program/MEAL activity.
9. Proposal details, selection criteria and submission

Parties are requested to submit the following documentation to CARE International in Turkey:

* Short biography of key personnel on the proposed monitoring team (maximum 3 pages)
* Examples of previous work (reports, tools)
* Clear breakdown of costs for each service: onsite monitoring, service delivery verification/beneficiary verification, surveys, FGDs, reporting, personnel, support costs, etc
* List of locations the company works in
* Reference list of previous organizations the company worked with

Applications will be assessed against the following selection criteria

* Relevant skills and previous research, monitoring & evaluation experience in Syria.
* Proven track-record in independent research and methodological rigor
* Ability to implement various quantitative and qualitative research methodologies
* Attention given to gender considerations, the specific needs of women, men, boys and girls, and the use of gender sensitive language
* Access to trained enumerator network inside Syria with relevant experience (particularly in the North) and gender balance teams to carry out third party monitoring activities at the field
* Good geographical coverage of areas where CARE implements programs
* Value for money and demonstrated cost effectiveness in the cost proposal
* Expertise with regard to (monitoring/evaluating) sectors CARE works in
* Well trained female and male staff with effective communication skills and protection expertise for leading FGDs and KIIs.