

TERMS OF REFERENCE

FRAMEWORK AGREEMENT FOR THIRD-PARTY MONITORING AND FINAL EVALUATION SERVICES FOR CARE NORTH-WEST SYRIA RESPONSE

OCTOBER 2023

INTRODUCTION AND BACKGROUND:

CARE International in Türkiye (CARE) is providing assistance to refugees living inside Türkiye and cross-border humanitarian assistance to people affected by the Syrian 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 the capacity development of (future) Syrian civil society actors. CARE's response in North-west Syria (Idlib and Aleppo governorates) 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, and 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 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 (TPM) services and conducting a final evaluation, through which real-time monitoring and verification can be conducted, strengthening CARE's quality controls of the implemented programs.

Under the G-Mofa grant, CARE will provide a coordinated, life-saving, To address emergency and urgent needs of vulnerable populations in Northwest Syria, through coordinated multi-sector rapid response, winterization, food security, WASH, health and protection support in Idlib and Aleppo governorates.

The Project goal is to further alleviate human suffering, reduce negative coping strategies, improve protection and health outcomes, and enhance resilience among conflict-affected households (HHs) across NWS building on the current SYR 07/21 action funded by German Ministry of Foreign Affairs (MoFA). Interventions were selected based on beneficiaries' feedback, market analysis by CARE and its partners, and CARE's previous experience in utilizing the most appropriate modality. CARE will implement this action both in partnership with 2 local NGOs "Partners", and directly through its Area Office in NWS, and engage the community at each step of implementation and provide strong complaint mechanisms.

Through this action, CARE aims to intervene and provide much-needed support and services in NWS through health, protection, winterization support, food security, WASH, shelter and settlements and livelihoods and economic recovery sectors; targeting both internally displaced persons (IDPs) and host communities, with a special focus on women and girls, women-headed households and people with disabilities (PWDs).

SCOPE OF WORK

This TOR sets out the criteria for procuring third-party monitoring (TPM) services, as outlined in **Annex 1**, and final evaluation services, as detailed in **Annex 2**, for a humanitarian grant provided by the German Ministry of Foreign Affairs (MoFA) in northwest Syria. The purpose of this engagement is to ensure effective and unbiased monitoring and evaluation of project activities, outcomes, and impacts, thus enhancing transparency, accountability, and the overall quality of the project implementation.

PROGRAM GOAL, OBJECTIVE AND OUTPUTS:

Project Goal (Outcome):

To address emergency and urgent needs of vulnerable populations in Northwest Syria, through coordinated multi-sector rapid response, winterization, food security, WASH, shelter, health and protection support in Idleb and Aleppo governorates.

Specific Indicators:

- Percentage of beneficiaries satisfied with the quality of services provided at the AMAL Hospital and PHC center (Output1) and (Output2)
- Percentage of targeted survivors who report increased access to SRH /Protection Services (Case management) (Output 3)
- Percentage of beneficiaries who express satisfaction with the delivered aid in terms of relevance, timeliness and accountability (Output4 and Output5)
- Percentage of Reduced Coping Strategies Index (rCSI)
- Percentage of households with a poor, borderline, adequate FCS
- Percentage of people with improved access to WASH services as a result of rehabilitation, operational, and emergency interventions (disaggregated by sex, age and PWD).

Project Outputs:

- **Output 1:** HEALTH (SRH, nutrition, pediatric, PHC, Adolescent Mothers Against All Odds (AMAL)): Vulnerable individuals in/around A'zaz have access to health (SRH, Nutrition, Pediatric, Primary Health Care) services supported with trainings & community-based awareness raising (47,127 individuals)

- **Output 2: HEALTH (medical emergency):** The population across Idlib governorate and Western Rural Aleppo and Idlib disposes of an improved access to the medical emergency referral service system (6,190 individuals)
- **Output 3: PROTECTION:** Survivors of GBV and individuals at risk of GBV have increased access to safe and confidential GBV services through AMAL Hospital, PHC Centre, WGSS and outreach (3,275 individuals)
- **Output 4: WINTERIZATION:** Vulnerable women, men, girls, and boys affected by acute emergencies have access to winterization items and emergency support that addresses their most pressing needs including NFI and HKs in-kind through a strong, coordinated rapid response mechanism by receiving winterization vouchers (7,716 HHs, 38,580 Individuals) (6,716 winter vouchers + 1,000 in-kind)
- **Output 5: FOOD SECURITY:** Vulnerable women, men, girls, and boys affected by acute emergencies are provided with multi-rounds of voucher assistance to meet their essential food needs (4,300 HHs, 21,500 individuals)
- **Output 6: WASH:** Vulnerable women, men, girls, and boys affected by the crisis in NWS have improved access to safe and sufficient WASH services including access to safe drinking water, sanitation infrastructure and maintenance, solid waste management and increased knowledge and improved behaviors related to hygiene and Cholera (17,161 HHs, 85,805 individuals)
- **Output 7: SHELTER & SETTLEMENTS:** Vulnerable women, men, girls, and boys living in IDP sites have improved, safer and more accessible site conditions (4,300 HHs, 21,500 individuals)

CARE is seeking a firm with an established presence in Idlib and Aleppo governorates, capable of promptly deploying field teams to provide services from December 2023 to April 2024. These services include **Third-Party Monitoring** and conducting the **Final Evaluation** for the program activities funded by German Mofa under the grant DEB07. TPM and Final Evaluation will be managed separately from a financial perspective, and payment will be made upon the delivery of each respective service.

ETHICAL CONSIDERATIONS

The precarious security situation and challenges of accessibility should not hinder the full consideration of the ethical principles of such a study. Therefore, it is the responsibility of the contracted third-party monitor to make sure all respondents and stakeholders participating in the monitoring activities do so voluntarily. Therefore, the Selected TPM company is requested to commit to the following principles:

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

- c. **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.
- d. **Age, gender, and diversity:** The study will be gender sensitive and provide analysis from gender, age, diversity, location, displacement status and health conditions approaches, as applicable and relevant.
- e. **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.
- f. **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.
- g. **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.
- h. **Safe referrals:** The enumerator's 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.
- i. **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.
- j. **Conflict sensitivity:** The partner should consider the dynamics of the conflict to avoid further harm, particularly in relation to gender and social norms.
- k. **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 research activities. The partner should not use the data for their own research purposes, and not license the data to be used by others, without the written consent of CARE.
- l. **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-centered approach. We make it 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 regulations regarding confidentiality, ethics, and procedures of CARE are not followed.

CONTRACT MANAGEMENT

The PQ MEL Unit from CARE Türkiye will be responsible for managing the procured services and coordinating between CARE Türkiye, the Partners, and the winning company of this assignment. Also, the PQ MEL Unit will oversee, support, and provide continuous feedback to the selected company. Further details of roles and responsibilities will be defined in the inception report.

LOGISTICS AND SUPPORT: CARE Türkiye will support the work through the following contributions:

- Compilation of background documentation and relevant data sets;
- CARE will be providing the contact lists for internal interviewees, cooperation on planning, and help with sampling/ beneficiary lists as needed. The contracted firm will be responsible for managing all the field arrangements.
- Weekly / Bi-weekly catch up meetings with the PQ MEL Unit and reflection meetings with Director of PQ and Program Managers.
- At appropriate junctures, technical MEL advisory from CARE.

PROPOSAL DETAILS, SELECTION CRITERIA, AND SUBMISSION: Parties are requested to submit the following documentation to CARE International in Turkey (email address below) **no later than 14 of Nov 2023:**

- Technical proposal including proposed methodology and approach per requested service TPM and Final evaluation (maximum 10 pages Max per service).
- Short biography of key personnel on the proposed monitoring and evaluation team (maximum 2 pages) in addition to specifying their role in this assignment
- Example of a final evaluation report (multi-sectoral and covering Northern Syria with for a similar sized project) and the reference letter
- Example of a TPM report (multi-sectoral and covering Northern Syria for a similar sized project) and the reference letter
- Reference list of previous organizations the company worked with
- Cost proposal for direct and indirect costs as per CARE budget template (with breakdown for indirect cost)

The following criteria is required for the firms to be selected:

- Relevant skills and previous research, monitoring & evaluation experience in Northern Syria.
- Previous experience in conducting TPM in Northern Syria
- Previous experience in conducting Evaluation in Northern Syria

- Proven track record of five years of work in Northern Syria
- Gender-balanced evaluation team **with significant relevant technical experience** (both operational & research-based) in WASH, protection, and Emergency Response, evaluation team profiles/CVs.
- Evidence of strong monitoring evaluative capacity, historically and for this particular contract
- Appropriateness of proposed methodology for each assignment and its correspondence to this ToR
- Attention is given to gender considerations and the specific needs of women, men, boys, and girls and the use of gender-sensitive language
- Existence of PSHEA and Child Safeguarding policy and procedures. (Availability of key documentation: e.g code of conducts)
- Access to project implementation areas and ability to gain permissions.
- Value for money and demonstrated cost-effectiveness in the cost proposal.
- Arabic fluency in the team and being able to develop guidance and training in Arabic on the tools and methodology for data collection.

TIME FRAME The total assignment period is estimated at 5 months between December 2023 and end April 2024 in order to finalize all the field work and contract deliverables listed above:

- TPM service estimated **Start date:** 1st of December 2023 - **End date** 28th of February 2024
- Final Evaluation **Start date:** 1st February 2024 - **End date** 30th of April 2024

Exact timeframes will be discussed between the evaluation team and CARE and reflected on the evaluation work plan. The Final project evaluation report in addition to the rest of the contract deliverables have to be shared with CARE Turkey before the 30th of April 2024 no data collection beyond the 31st of March 2024.

Applications may be submitted electronically CARE to **no later than by 14th of November 2023 to:** Tur.xbtender@care.org **Please add all relevant documents as attachments to your electronic application.**