

INVITATION TO BID FOR CONSULTANCY

Save the Children International (SCI) Somalia program hereby invites interested consultants to bid for the consultancy assignment detailed below.

I	Title of Consultancy	End-line evaluation for Improving access and utilization of lifesaving integrated Health and Nutrition services for most vulnerable IDPs and host communities in Hiran Region, Somalia.		
2	SCI Contracting Office	Save the Children Somalia (Hirshabelle Office)		
3	Period of Consultancy	The Assignment will be 40 days including travels		
4	Consultant type required	Individual or Firm.		
5	Responsibility for Logistics arrangements and Costs	Save the Children will pay the consultant fee and operation cost in a lump sum in line with the financial proposal submitted by consultant and will not reimburse other expenses or incurred during the assignment that means the consultants will cover their own logistical arrangements and costs; including food, accommodation, and local transport, and all cost associated with data collection work and whole activities. Payments will be released in 3 instalments (30% after inception report approval,30% after submitted draft report with desires standard and 40% after final report get approved,		
6	Taxation Provisions	Consultant shall be responsible for all Taxes arising from the consultancy in line with the local Tax regulations applicable at the SCI contracting office named above		
7	Travel requirements	The consultant will cover his travel costs (tickets) and arrange local travel to field sites and accommodation.		
8	Security requirements	If the consultant is a foreigner, he/she will comply with the standard of Save the Children Security procedures, including the completion of SCI online security training prior to travel to Somalia.		
9	Qualification and Experience	 The following are the minimum requirements for the Consultant/Firm to be considered for carrying out the assignment. Should have minimum bachelor's degree in social science or equivalent experience in Child survival (Health, Nutrition) related fields. At least 5 years of experience in conducting similar work (experience in evaluating projects is mandatory). SC-Somalia is interested to verify related assignments conducted in the past 2 years. The technical consultant should have full access to the areas to be assessed. And consultant firms should be registered in the Southern state regions of Somalia. Fluency in English (both written and spoken). The consultants should have report writing and data analysis skills. Technical team who are visiting the field for purpose of data collection and data collectors themselves should be Somali natives and familiar with the context and fluent in the Somali language. 		



		 Female enumerators must be included in the assessment team to ensure appropriate consultations with female community members during survey and FGD data collection. Considerable track record and proven experience in in conducting quantitative and qualitative methods.
10	Evaluation Criteria	 The consultant must meet the above required qualifications and experience. ✓ Technical proposal on how the assignment will be conducted including methodologies, number of enumerators (m/f), data analyses, and interpretation, reports, and detailed work plan (30%) ✓ Prior experience in conducting qualitative and quantitative studies in social science or development studies; specifically experience and skills in evaluating health programs. (20%) ✓ Detailed financial proposal with budget breakdown. (20%). ✓ Updated Company or Individual Profiles (15%)
		 ✓ Two samples of previous relevant reports relevant. (15%) Overall rating out of 100% Note: For the technical analysis, a company must score 80% and above to be considered in the financial analysis.



| | BACKGROUND

Save the Children (SC) has been operating in Somalia for more than 70 years and is widely recognized as a national leader in humanitarian and development programming in various sectors including Health, Nutrition, WASH, Food Security and Livelihoods, Education, and Child protection. We have a strong presence in the Health and Nutrition sectors, supporting a significant number of health and nutrition facilities, mobile health units, and Integrated Community Case Management sites across the country, including the Hiiran region where we have 17 sites. We (SC) operate in 17 out of the 18 regions of Somalia/Somaliland, with 14 field offices and a team of over 600 dedicated staff. Our extensive operational presence enables us to promptly initiate and sustain project activities. In Hiiran, we have established a field office in Beledweyne since 1992, with a team of 46 staff led by the Field Manager, supported by additional staff in Bulaburte and Mataba districts. Throughout the years, SC has been at the forefront of responding to various crises in Somalia, including droughts, flooding, locust infestation, COVID-19, and conflicts resulting in mass displacement. We have been implementing life-saving humanitarian interventions from the early stages of these crises and have demonstrated our ability to scale up our response effectively.

Similarly, WARDI operates in six regions of Somalia and is particularly well-established in the Hiiran region. We have developed long-standing, trusted relationships with key stakeholders, including the communities we serve, Ministry of Health authorities, various international and national NGOs, and UN agencies. This is evident through our role as the Chair of the Region Health Cluster and our involvement as a focal point for the Cold Chain and the WASH Supply Hub.

Since March2023 Save the Children (SC) and WARDI Relief and Development Initiatives have been collaborating on an integrated health and nutrition program in seven facilities across the Hiran region, specifically in Beledweyne, Mataban, and Mahas Districts. The program aims to provide comprehensive health and nutrition support to newly displaced individuals or those living in hard-to-reach or operation priority areas. This aligns with the First Line Integrated Response Framework that has been endorsed by the Somalia Humanitarian Country Team and other coordination mechanisms. The program's objective is to prevent or reduce loss of lives by offering immediate lifesaving assistance until more sustainable interventions can be implemented.

The proposed activities have been implemented in close coordination with other actors working on integrated health and nutrition interventions in the target region. These efforts have been supported by donors such as FCDO, BHA, UNICEF, WFP, OCHA, GMI, and FFO. Additionally, we will continue to leverage the Health Systems Strengthening (HSS) interventions supported by the World Bank's Damal Caafimad project. This will involve closely collaborating with the Hirshabelle State Ministry of Health to decentralize service provision and introduce the Essential Package of Health Services in rural areas. By strengthening the overall health system and establishing services in previously underserved districts, we aim to reduce the burden on the facilities supported by our project.

Furthermore, through this ECHO-funded initiative, SC and WARDI are expanding the integration of referral linkages across health and nutrition programs. This will contribute to the operationalization of the district-level health system. To ensure continuity of care for children aged 6-23 months and pregnant and lactating women who are not malnourished, we have established links with the blanket supplementary feeding program supported by WFP. By effectively coordinating and collaborating with various stakeholders and leveraging existing programs and resources, we aim to provide comprehensive and sustainable health and nutrition support to the communities in need.

Save the Children aims to conduct an external end-line evaluation for the project titled "Improving Access and Utilization of Lifesaving Integrated Health and Nutrition Services for the Most Vulnerable Internally Displaced Persons (IDPs) and Host Communities in Hiiran Region, Somalia." To effectively document project outcomes and develop recommendations for enhancing similar future implementations, we seek to employ the services of a skilled and reputable independent consultant.

Project Locations

Save the Children continued support 7 health sites in three districts (4 mobile team sites, 2 fixed OTP sites and one Stabilization Center) . the project also supports 20 ICCM for Beledweyne and Mahas (10 per district).

S/No	State	District	Location	Facility Type
1	Hirshabelle	Beledweyne	Hillaac- fixed facility	OTP
	Hirshabelle	Beledweyne	Tulo Hiran-mobile team	OTP
2				
	Hirshabelle	Beledweyne	Ferfer -Mobile team	OTP
3		,		
4	Hirshabelle	Mahas	Gobo- Mobile	OTP
	Hirshabelle	Mahas		OTP
5	Hirshabelle	Mataban	Jeexdin- Mobile	OTP
6	Hirshabelle	Mataban	Hararyaale- Fixed facility	OTP
7	Hirshabelle	Mahas	Mahas Hospital	SC
	Hirshabelle	Beledweyne	10 team per district	ICCM
8		and Mahas		

GENERAL OBJECTIVE OF THE EVALUATION

The purpose of this evaluation is to assess how the project contributed to address outstood gaps regarding access to health and nutrition service in target areas and document learnings to inform future similar programming. The project will be evaluated using OECD DAC criteria which assesses the relevance, effectiveness, efficiency, sustainability, impact, well-coordinated, and gender-sensitivity and disability inclusiveness of the project).

SPECIFIC OBJECTIVE

- ✓ Conducting household survey to assess the access the target people in the target communities to health and nutrition services.
- ✓ Conducting comprehensive desk and literature review to inform primary data collection.
- ✓ Conduct FGDs and KII with project key stakeholders including MtMSG/FtFSG, facilities in charge, health staff, community leaders, government officials, and SCI Staff. Triangulate qualitative information with quantitative data to ensure accuracy.
- ✓ Identify key intended and unintended outcomes and impact level results (both positive and negative) that this project has contributed to and assess to what extent the integration approaches have been successful in creating the intended outcomes and impact outlined in the program documentation.
- ✓ To provide recommendations based on the findings for future use and improvement actions.
- ✓ To evaluate the relevance, effectiveness, efficiency, impact, sustainability, coherence, scalability/replicability, and gender sensitivity and disability inclusiveness of the project.



METHODOLOGY

The final evaluation will utilize a mixed-method approach, combining both qualitative and quantitative data collection methods to gather both secondary and primary data/information which will allow for an examination of both the intended and unintended outcomes of the project.

To begin, the consultant will conduct a thorough review of project documents and available raw data, including baseline, Client satisfaction Survey, project quarterly and interim reports, activity reports, project routine data (IPTT).

In terms of qualitative data collection, the consultant will employ household survey methods using established data collection tools and stratified sampling techniques. In addition, a participatory approach will be utilized to ensure a positive learning process. The consultant will also conduct focus group discussions and key informant interviews, employing purposive and quota sampling procedures. The respondent FGD will be the caregivers, other informative members in the community and community, while KII will be collected from community leader and health worker including facility in charge.

Throughout the evaluation process, the consultant will work closely with the Save the Children technical team, seeking their advice and following their directions. As Save the Children is a child-sensitive organization, it is required to ensure consultation with girls and boys, utilizing child-friendly and gender-sensitive methodologies. Special attention will be given to ensuring the participation of individuals with disabilities, both adults and children. All participation will be voluntary, meaningful, safe, and inclusive.

It is crucial that the consultant fully understood the nature of the assignment and develops detailed data collection methodology and tools that aligns with the project objectives and result framework. The consultant should articulate and justify their chosen methodology, explaining why it is preferred.

Gender, age, and disability disaggregation will be applied during the data analysis process using the Washington Group short set questionnaire.

Evaluation Criteria

The following key questions will guide the endline evaluation's assessment of the project against the DAC Criteria for Evaluating Development Assistance.

- **Effectiveness:** The extent to which the project attained its outcomes.
 - To what extent were the outcomes achieved? To what extent did the project its targets achievement?
 - What were the major factors influencing the achievement or non-achievement of the outcomes?
- **Efficiency:** The extent to which the project used the least costly resources possible in order to achieve desired results, considering inputs in relation to outputs.
 - Challenges in project implementation including managerial, organizational and any other unforeseen factors?
 - To what extent did the project collaborate with state level partners and stakeholders to achieve results in an efficient manner?
- **Impact:** The positive and negative changes produced by the project, directly or indirectly, intended or unintended.



- What has happened as a result of the project either intended or unintended, positive or negative?
- **Relevance:** The extent to which the project was suited to the priorities of the target beneficiary group(s), stakeholders, and to the donor.
 - Was the project relevant to the needs of the beneficiaries, as identified at the project inception/design stage?
- **Sustainability:** The extent to which the benefits (outcomes) of the project are likely to continue after donor funding has been withdrawn.
 - What is the likelihood of the continuation and sustainability of the project outcomes and benefits after completion of the project?
 - What commitments (financial, human resources, etc.) have been made by stakeholders to maintain or improve results?
 - How will improvements in stakeholder knowledge, attitudes, capacities, etc. contribute to maintaining results?
 - To what extent is support available from the external environment to maintain or improve results?

CONSULTANT ROLE AND EXPECTING DELIVERABLES.

The consultant is expected to perform through 3 phases –inception, data collection process, data analysis and report writing, and dissemination. Some key activities during these phases include an, training data collectors (including refresher training on PSEA, CSG and GE/GBV), document review, data collection, analysis/interpretation, report writing, and presentation to key stakeholders. The evaluation will have the following key phases:

Phase I - Desk study: Review of documentation and elaboration of field Study

The lead consultant/evaluation team will review relevant documents of the project including the project log frame, baseline data, client satisfaction survey reports, MEAL plan, project reports, and monitoring reports including IPTT. Based on this review, they will produce an inception report which will include an elaborate plan of the evaluation that will include but not be limited to the study, methodology, and sampling strategy of the data collection plans, etc. The data collection will only proceed to the next stage upon approval of the inception report. An appropriate inception report format will be provided to the selected consultant.

REFERENCE MATERIALS

- ✓ Project narrative proposal and milestone targets
- ✓ Project monitoring and evaluation plan
- ✓ Monthly and quarterly/interim Reports
- ✓ Project MEAL reports (IPTT)
- √ Project narrative reports
- ✓ Client satisfaction survey reports

Phase II: Field Data Collection

This phase of the evaluation will seek to collect primary data on the key evaluation questions explained under the evaluation criteria. The consultant will use the agreed plan, methodology, tools, and sampling strategies from Phase I to conduct the fieldwork.



Phase III - Data analysis and production of evaluation report

The team will draw out key issues in relation to survey questions and produce a comprehensive report. As a minimum, the evaluation process will include the following key steps:

- ✓ Review relevant literature related to the project (list of reference materials provided below) and draft an inception report before the survey exercise in the field.
- ✓ Application of appropriate data collection tools (e.g. questionnaire, checklist, etc.) for interviews and focus group discussion.
- ✓ Data analysis and assessment report writing, and
- ✓ Presentation of key evaluation findings
- ✓ Datasets, FGD and KII transcripts, photos, GPS, and case studies.

REPORTING

The consultant will maintain daily contact with the SCI team assigned to manage the monitoring activities. The collected data will be analyzed on daily basis by the consultant and given feedback to the teams. A final report with the main text of a maximum of **40** pages excluding the cover page, table of contents, abbreviations, and annexes. The draft report should be delivered in a soft copy in English. References should be fully cited after all important facts and figures. List of people interviewed or consulted.

Provide a complete set of raw and cleaned data in SPSS and EXCEL, including complete codebooks for quantitative files generated and analyzed for the report. The qualitative data, includes the audio recording files, original transcripts, and translated transcripts of the full verbatim.

Note that summary transcriptions or translations will not be acceptable.

TIME FRAME

The consultancy work will last approximately **40** days including induction and travel days. The days will start by the date the contract is signed.

TERMS AND CONDITIONS

Consultancy fee: The consultant will come up with his/her own rate which will be subject to negotiation within the bounds of donor requirements and set standards of SC in Somalia the consultant is expected to estimate all relevant costs for the exercise, including costs for data collectors, vehicle rent, venue, stationary, standardization test and accommodation while undertaking activities related to this assignment.

CODE OF CONDUCT

Save the Children's work is based on deeply held values and principles of child safeguarding, and it is essential that our commitment to children's rights and humanitarian principles is supported and demonstrated by all members of staff and other people working for and with Save the Children. Save the Children's Code of Conduct sets out the standards to which all staff members must adhere, and the consultant is bound to sign and abide by the Save the Children's Code of Conduct.

A contract will be signed by the consultant before the commencement of the action. The contract will detail terms and conditions of service, aspects of inputs, and deliverables. The Consultant will be expected to treat as private and confidential any information disclosed to her/him or with which she/he may come into contact during her/his service. The Consultant will not, therefore, disclose the same or any particulars thereof to any third party or publish it in any paper without the prior written consent of Save the Children. Any sensitive information (particularly concerning individual children) should be treated as confidential.

An agreement with a consultant will be rendered void if Save the Children discovers any corrupt activities have taken place either during the sourcing, preparation, and implementation of the consultancy agreement.



✓ ETHICS AND CHILD SAFEGUARDING

The consultant is obliged to conduct the research in an ethical manner making sure children are always safe. The consultant should seek the views of various stakeholders, including children. Efforts. The consultant must respect the rights and dignity of participants as well as comply with relevant ethical standards and SC's Child Safeguarding Policy and Code of Conduct. The research must ensure voluntary, safe, and non-discriminatory participation and a process of free and un-coerced consent. Informed consent of each person (including children) participating in data collection should be documented.

A contract will be signed by the consultant before the commencement of the action. The contract will detail terms and conditions of service, aspects of inputs, and deliverables.

Intellectual property rights:

All data that will be collected should be considered as SCI properties and can't be used for other purposes. All products developed under this consultancy belong to the project exclusively. **Under no circumstances will the consultant use the information of this survey for publication or dissemination without official prior permission (in writing) from Save the Children.**

Supplier Sustainability Policy and the included mandatory policies: Click Here to Access

HOW TO APPLY:

Applications can be submitted by either:

Electronic Submission via ProSave (Recommended)

> Submit your response in accordance with the guidance provided in the below document:



 Bidders are encouraged to apply via Ariba system. Please request the Ariba link via email sending your company profile and Business registration certificate/CV. Please address your request to apply via ProSave to css.logistics@savethechildren.org,

Electronic Submission via Protected Email box (Optional).

- Email should be addressed to <u>southcentral.supplychain@savethechildren.org</u>
- Note this is a sealed tender box which will not be opened until the tender has closed. Therefore, do not send tender related questions to this email address as they will not be answered.
- The subject of the email should be "PR419204- End-line evaluation for Improving access and utilization of lifesaving integrated Health and Nutrition services for most vulnerable IDPs and host communities in Hiran Region, Somalia"
- 'Bidder Name', 'Date''.
- All attached documents should be clearly labelled so it is clear to understand what each file relates to.
- Emails should not exceed 15mb if the file sizes are large, please split the submission into two emails. Do not copy other SCI email addresses into the email when you submit it as this will invalidate your bid.

Your bid must be received, no later than 6th February 2024.

Bids must remain valid and open for consideration for a period of no less than 60 days