

INVITATION TO BID FOR CONSULTANCY

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

1	Title of Consultancy	Consultancy for Sustaining Life-Saving Integrated Community Health & Nutrition Interventions in and Hiran (Global Malnutrition Initiative)
2	SCI Contracting Office	Save the Children Somalia Office
3	Period of Consultancy	The Assignment will be 30 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 in a lump sum and will not reimburse any incurred costs during the assignment. The consultant 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
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	<p>The following are the minimum requirements for the Consultant/Firm to be considered for carrying out the assignment.</p> <ul style="list-style-type: none"> – Should have minimum bachelor’s degree in computer science, surveying, urban planning, GIS and statistics, social science, public health, Nutrition. – Knowledge & experience in humanitarian context and willing to work/travel in/to remote areas. – 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 experience in remote sensing and GIS for mapping and map reading, handling of GPS assessment tools. – The technical consultant has full access to the areas to be assessed including villages in Beletweine, Buloburte, Mahas and Mataban districts. – Fluency in English (both written and spoken). – The consultants should have report writing and data analysis skills.

		<ul style="list-style-type: none"> – Technical/Data collection team who are visiting the field for the purpose of data collection should be Somali natives and familiar with the context and fluent in the Somali language. – Considerable track record and proven experience in quantitative and qualitative methods.
10	Evaluation Criteria	<p>The consultant must meet the above-required qualifications and experience.</p> <ul style="list-style-type: none"> – Valid certificate of registration from Federal government of somalia Ministry of Commerce – Valid Tax compliance certificate from Federal government of somalia Ministry of Finance – Technical proposal on how the assignment will be conducted including methodologies, data analyses, and interpretation, reports, and detailed work plan, including software to be used for analysis (30%) – Prior experience in conducting assessment and evaluation on integrated community-based health and nutrition interventions is requirement (30%) – Detailed and reasonable financial proposal with budget breakdown. (10%). – Updated Company & Individual Profiles and in line with above mention requirements. (10%) – Copies of previous reports that are relevant to this assignment is also required. (20%) <p>Overall rating out of 100%</p> <p>Note: For the technical analysis, a company must score 80% and above to be considered in the final analysis.</p>
	Application Procedure	<ul style="list-style-type: none"> • Interested consultant (s) who meet the consultancy requirements are requested to submit their bid and each application package should include the above required minimum requirements. <p>Applications can be submitted by either:</p> <p>Electronic Submission via ProSave (Recommended)</p> <ul style="list-style-type: none"> ➤ Submit your response in accordance with the guidance provided in the below document: <div data-bbox="669 1522 727 1585" data-label="Image"> </div> <p>Bidding on a Sourcing Event.pptx</p> <ul style="list-style-type: none"> • 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 Ariba link request to css.logistics@savethechildren.org <p>Electronic Submission via Protected Email box (Optional)</p> <ul style="list-style-type: none"> • Email should be addressed to southcentral.supplychain@savethechildren.org • 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.

	<ul style="list-style-type: none"> • The subject of the email should be the same as the consultancy title. • 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. <p>Applicants should also indicate the date they are available to start working on the consultancy</p> <p>All applications MUST be submitted on or before the closing date below to be considered for the assignment.</p> <p>Only shortlisted Candidates will be contacted.</p>
<p>Closing date for Applications</p>	<p>Interested consultants shall submit their applications through the above procedures on or before 2nd October 2024.</p>
<p>✓ BACKGROUND</p> <ul style="list-style-type: none"> ○ Global Malnutrition Initiative <p>According to a Food Security and Nutrition Analysis Unit - Somalia (FSNAU) report, an estimated 1.7 million children aged 6–59 months are expected to suffer from acute malnutrition and be in urgent need of nutrition services from January- December 2024. The total number of Severe Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM) cases are estimated at 430,000 and 1.23 million respectively. 64% of the acute malnutrition burden is concentrated in South Somalia. The project’s operational area included Beledweyne district, which was affected by torrential rains and flooding. These severe weather conditions negatively impacted on the routine operations of the project areas. However, drawing on its experience with floods, Save the Children International (SCI) was able to manage the situation. This included relocating to a mobile outreach approach to reach the displaced people in the affected areas. In Marodijeex there was drought and food insecurity that caused a humanitarian crisis. The Somalia Humanitarian Response Plan (HRP) 2024 highlights the dire situation with 6.9 million people requiring aid, exacerbated by recent floods from El Niño affecting 2.4 million and leading to an Acute Watery Diarrhoea (AWD)/Cholera outbreak. Women and girls are disproportionately affected due to their domestic roles and limited access to Sexual and Reproductive Health (SRH) and Gender-Based Violence (GBV) services, contributing to high maternal and infant mortality rates. Anticipating the upcoming Gu floods, forecasted to be above-average impact, the Somalia humanitarian community was urged to strengthen readiness and Anticipatory Action. The government declared a state of emergency, seeking international assistance, and initiatives like positioning boats were underway to aid transportation of essential supplies, particularly prioritizing the safety of women and girls.</p> <p>The Malnutrition Initiative program aims to improve the nutritional status of children under 5 in Hiran regions (Beledweyne and Mataban) and Marodijeex regions (Gabiley and Farewayne) of Somalia and Somaliland, which goes beyond the emergency treatment phase of provision of treatment to acutely malnourished individuals. It combines emergency aid provision with innovation and evidence based longer-term development goals to address some of the underlying causes of malnutrition. It builds on lessons and outcomes of the Nutrition Causal Analysis (NCA) to</p>	

build on longer term initiatives to address some of the underlying causes of malnutrition by linking and integrating with other long-term projects running in the target areas and other regions. The project supported the procurement of medical and non-medical items to improve the health and well-being of children under five years old. This was done through the iCCM (Integrated Community Case Management) supplies program. The nutrition supplies were contributed by the World Food Programme (WFP) and the United Nations Children's Fund (UNICEF) through a GIK (Gifts-in-Kind) supplies agreement, involving Program Documents (PDs) and Field Level Agreement (FLA).

Save the Children partnered with the ministries of health in Somaliland and Hirshabelle in the implementation of GMI project particularly the iCCM plus implementation in 37 sites in Somaliland and 5 sites in Beletweyn district. Some of the services includes community engagement, capacity building of community-level female health workers, district-level supervisors and distribution of Ready to Use Therapeutic Food (RUTF) and medical treatment for children under five years with simplified IMAM protocol. The prototype in Hiran was successfully completed in May 2024 and the plan to scale up to other areas through full scale research is currently being discussed with the support of Save the Children UK.

○ **PROJECT LOCATIONS**

Save the Children continued support of the health and nutrition facilities across different districts in Bay region including Beletweine, Mataban, Mahas and Bulaburte as shown below:

Region	District	Village/Camp	Sector	Supported Structures	GPS Coordinates
Hiiran	Beletweyne	Illinguud	H&N	ICCM Site	
		Buulohubeey	H&N	ICCM Site	
		Burqaniinyo	H&N	ICCM Site	
		Laabka	H&N	ICCM Site	
		Qarsnooni	H&N	ICCM Site	
		Hiran-Bile	H&N	ICCM Site	
		Shiniile	H&N	ICCM Site	
		Qooqane	H&N	ICCM Site	
		Xeyndaabta	H&N	ICCM Site	
		Nimcaan	H&N	ICCM Site	
		Doolagaal	H&N	ICCM Site	
		Leebow	H&N	ICCM Site	
		Baaslaawe	H&N	ICCM Site	
		Mareergaabta	H&N	ICCM Site	
		Garaash	H&N	ICCM Site	
		Helikeliyo	H&N	ICCM Site	
		Ilkacadde	H&N	ICCM Site	
		Warqumayo	H&N	ICCM Site	
		Haracady	H&N	ICCM Site	
		Baladu Nur	H&N	ICCM Site	
Warxunshe	H&N	ICCM Site			

		Dabeyl	H&N	ICCM Site	
		Lug bari	H&N	ICCM Site	
		Bulokahin	H&N	ICCM Site	
		Gasle	H&N	ICCM Site	
		Luqdhare	H&N	ICCM Site	
		Macruf	H&N	ICCM Site	
		Tawakal	H&N	ICCM Site	
		Baladusalam	H&N	ICCM Site	
		Doongudle	H&N	ICCM Site	
		Jerrey east	H&N	ICCM Site	
		Darasalan	H&N	ICCM Site	
		Tulo-raxo	H&N	ICCM Site	
		Jerrey west	H&N	ICCM Site	
		Qoydo	H&N	ICCM Site	
	Bulaburte	Qansaxle	H&N	ICCM Site	
		Bulodacar	H&N	ICCM Site	
		Galmadobe	H&N	ICCM Site	
		Hagar	H&N	ICCM Site	
		Dabadhere	H&N	ICCM Site	
	Mahas	Galcad	H&N	ICCM Site	
		Butale	H&N	ICCM Site	
		Kharfo	H&N	ICCM Site	
		Suubo	H&N	ICCM Site	
		Sulmo	H&N	ICCM Site	
		Dhageti	H&N	ICCM Site	
		Ganuribad	H&N	ICCM Site	
		Habiino	H&N	ICCM Site	
		Ina-baal	H&N	ICCM Site	
	Jujule	H&N	ICCM Site		
	Mataban	Qodqod	H&N	ICCM Site	
		Ceynle	H&N	ICCM Site	
		Maxamud kari	H&N	ICCM Site	
		Cali Goomeey	H&N	ICCM Site	
		Bacdahoose	H&N	ICCM Site	
		Dhugeyle	H&N	ICCM Site	
		Ilgulle	H&N	ICCM Site	
		Yibirsuge	H&N	ICCM Site	
		Xaajihabaabis	H&N	ICCM Site	
		Dogobleey	H&N	ICCM Site	
		Ceeldhine	H&N	ICCM Site	
		Xawaadleey	H&N	ICCM Site	
		Libihiran	H&N	ICCM Site	
		Mirdacay	H&N	ICCM Site	
		Dayaxwareer	H&N	ICCM Site	
		Guunyaale	H&N	ICCM Site	
		Lamo	H&N	ICCM Site	
	Seikh madoobe	H&N	ICCM Site		

		Qolofeey	H&N	ICCM Site	
		Saanaan	H&N	ICCM Site	

✓ **GENERAL OBJECTIVE**

The purpose of the consultancy service is to assess the functionality of the existing ICCM sites in Hiran region, map ICCM sites by recording the distance between the ICCM sites and their respective fixed facilities using GIS, the consultant will further assess the capacity of the female health workers.

○ **Specific Objectives**

- ✓ Assess overall functionality and staff attendance/punctuality of the project-supported ICCM services.
- ✓ To assess the overall functionality of ICCM services and evaluate FHWs presence and punctuality, with a focus on Female Health Workers (FHWs).
- ✓ To map all ICCM sites in Beletweine, Mahas, Bulo Burte and Mataban districts, of Hiran region, identifying challenges in accessing services and community movement patterns.
- ✓ To record GPS coordinates for each ICCM site and Map out In Google earth, for FHW's home, and key community locations (village market or centre).
- ✓ To assess the distances between ICCM sites and the link facility that FHW refer children with danger signs if any.
- ✓ The distances between FHW's home and both the nearest and farthest households in the village.
- ✓ To estimate the population size in ICCM-targeted locations and evaluate the impact of community movements, particularly for those near rivers affected by flooding.
- ✓ To ensure data consistency by cross-checking beneficiary registers with reporting and documentation templates.
- ✓ To cross check how FHW is measuring under five children by using MUAC
- ✓ To evaluate the supply chain process from Save the Children stores to the end-user, documenting delivery frequency, conditions, and storage of supplies, as well as the management of expired supplies.
- ✓ To check health education registers that FHW using and check if sessions are similar or different
- ✓ To assess the capacity and performance of FHWs delivering ICCM services and identify any gaps in training.
- ✓ To evaluate the accessibility of ICCM sites, considering the walking time for FHWs to reach the nearest and farthest households.
- ✓ To assess the effectiveness of the referral system within ICCM services and verify

the existence and functionality of referral centres.

- ✓ To gather information on community relocation patterns, especially for populations near rivers that move due to flooding.
- ✓ To compile a comprehensive report detailing the current implementation status of ICCM services, including mapping results and key findings.
- ✓ To propose actionable recommendations for improving current ICCM projects and informing the design of future interventions.

✓ **SCOPE OF WORK**

The consultant will specifically provide feedback on the following areas of implementation:

✓ **Desk review to understand the existing sites:**

- ✓ To review the list of the existing sites to understand the targeting locations.
- ✓ To review the list of the female health workers in the ICCM sites and their attendance records.
- ✓ Hold interviews with beneficiaries to document the services received by the beneficiaries and their satisfaction with the SCI services.
- ✓ Review the registers and other data collection tools and reporting template to cross check other reporting templates with data consistency.
- ✓ Determine how the targeted communities, i.e., boys, girls, women, men, marginalized groups, and persons with disabilities have benefited from the health and nutrition interventions in their respective communities.
- ✓ Determine and assess whether our programmes are integrated or standalone ones and cross-check if there is linkage between different thematic areas that the GMI is supporting.
- ✓ cross check how FHW is measuring under five children by using MUAC
- ✓ To assess the distances between ICCM sites and the link facility that FHW refer children with danger signs if any.

✓ **Quality of program:**

- ✓ Assess the capacity of the health female workers who are providing the ICCM services
- ✓ Assess the quality of the data by cross checking the registers and other reporting template in the ICCM sites with the SCI database data for consistency.
- ✓ Assess the attendance records for the health workers.
- ✓ Assess the existence of the referral systems and review the referral records
- ✓ Assess the nearby referral centers to the ICCM sites.
- ✓ Assess Supply availability of the facilities and shocks, in case there are missing items, please include the reports including the duration of the depletion.

✓ **METHODOLOGY**

✓

#	METHOD	DESCRIPTION
1.	Document Review	– The consultant will systematically review existing documents, reports, beneficiary registers, summary reports

		<p>and findings, and incorporate and triangulate this information with primary data.</p> <ul style="list-style-type: none"> – Review the capacity building records for the female health workers – To check the referral systems and referral records. – Review the attendance records for the ICCM health workers.
2.	Site Mapping	<ul style="list-style-type: none"> – The consultant will map the ICCM sites, Populations size, village names, distance between the sites, number of female health workers per site and their contact information.
3.	Link Referral Facilities	<ul style="list-style-type: none"> – To identify the number of existing link referral nearby facilities, record of referral slips and referral documentation.
4.	Key Informant Interview (KII):	<ul style="list-style-type: none"> – The consultant will conduct KIIs with Save the Children and staff, ICCM site supervisors, community/camp leaders, and community leaders. – The consultant will develop guidelines for KIIs to assess the capacity of the ICCM female health workers, capacity building sessions they have received and document the existing gaps – The consultant will conduct KIIs to document concerns and inputs on how essentials drugs are consumed and managed.
5.	Photos:	<ul style="list-style-type: none"> – The consultant will observe the visibility status of the facilities and potential information centers of the target communities, collect action photos, and then attach them to the narrate findings.
6.	GPS records	<ul style="list-style-type: none"> – The consultant to record the GPS coordinates for the all the ICCM sites in Hiran (One GPS from FHW's house and one from the village market or center of the village)

✓ **CONSULTANT ROLE AND EXPECTED DELIVERABLES.**

The consultant is expected to perform through 3 phases –inception, data collection process, reporting, and dissemination. Some key activities during these phases include an adaptation of some pre-developed tools and the development of some extra research tools, training data collectors, 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 from section below (Reference material). Based on this review, they will produce an inception report which will include an elaborate plan of the assessment that will include but not limited to study, methodology, and sampling strategy of the data collection plans etc. The assessment 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 MEAL plan
- ✓ Monthly and Quarterly Reports
- ✓ Project MEAL reports (IPTT)
- ✓ Project narrative reports
- ✓ Project targeting locations

Phase II: Field Data Collection: This phase of the evaluation will seek to collect primary data on the key questions explained under the scope of work criteria. The consultant will use the agreed plan, methodology, tools, and sampling strategies from Phase 1 to conduct the fieldwork.

Phase III – Data analysis and production of evaluation report: The team will draw out key issues in relation to evaluation questions and produce a comprehensive report.

As a minimum, the evaluation process will include the following key steps:

- ✓ Review of relevant literature related to the project (list of reference materials provided below) and draft an inception report before the evaluation exercise in the field.
- ✓ Application of appropriate data collection tools (e.g. questionnaire, checklist, etc.) for interviews.
- ✓ Data analysis and mapping Report writing, and
- ✓ Presentation of key assessment findings
- ✓ Dataset (in both original and analysed versions), 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 a daily basis by the consultant and given feedback to the teams. A final report with main text of a maximum of 60 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. The report should be structured as follows:

- ✓ Front page with the title of the report, project and SC CO name, date, and authors of the report
- ✓ Table of contents
- ✓ List of abbreviations used.
- ✓ Executive summary (1.5-3 pages) that presents the key points of the different sections.
- ✓ Brief background and description of the project
- ✓ Objectives and the intended use of the evaluation
- ✓ Methodology and limitations of the evaluation
- ✓ Findings, including a table presenting the progress of the project objectives and results and their respective indicators against the baseline data.
- ✓ Conclusions & Recommendations

- ✓ Challenges, lessons learned, and suggested actions for the way forward with timelines and responsibility.
- ✓ Annexes
- ✓ Tools used - all
- ✓ Datasets – both raw and cleaned version
- ✓ Survey schedule
- ✓ List of people interviewed or consulted.
- ✓ Bibliography of the documents reviewed.
- ✓ Terms of Reference for the evaluation
- ✓ Photos
- ✓ GPS coordinates for the ICCM sites.

Provide a complete set of raw and cleaned data, including complete codebooks for quantitative files generated and analyzed for the report. For the qualitative data, this 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 30 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 should be made to make the research process child-centered and sensitive to gender and inclusion. 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 uncoerced 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, guided by the rules of the grant contract between BHA and Save the Children. 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.

✓ **Application Procedure and Requirement**

Candidates interested in the position are expected to provide the following documentation:

- ✓ A technical proposal with a detailed response to the TOR, with a specific focus on the scope of work, methodology, and timelines, and how the participation of children and persons and children with disabilities in the evaluation will be ensured.
- ✓ Initial work plan and an indication of availability.
- ✓ A financial proposal detailing the daily rate expected including accommodation, transportation, stationery, data collectors, research assistance, and all other cost related to this assignment. (Operational and consultancy fees).
- ✓ Company profile (if firm), CVs of the technical lead (in both scenarios) including a minimum of 3 professional references.
- ✓ At least two previously conducted similar studies.