

## Instruction and Template for PROPOSAL Submission

# **Assignment Title: Conducting Final and Mid-term Evaluation of Sponsorship Program**

< Procurement Ref. No.: PR271111>
Date of Proposal Submission: <>

This instruction & template for proposal development consists of the following sections:

- 1. **Section A**: Instruction for Proposal Development
- 2. **Section B**: Proposal Development Form

## **Section A:** Instruction for Proposal Development

Please READ and FOLLOW the instructions before completing the proposal form.

- 1. A proposal will not be considered for review if:
  - It is received after the deadline.
  - It is not sealed properly (N/A in case of email proposals)
  - There are any missing documents mentioned in the ToR.
  - Information submitted by the company is found to be false.
  - It is incomplete.
- 2. A proposal should have three (3) separate envelops (N/A in case of email proposals):
  - 1st for all the supporting documents as per ToR;
  - 2<sup>nd</sup> for technical proposal
  - 3<sup>rd</sup> for financial proposal

Each of the above envelopes should be sealed, and properly labelled respectively as "supporting documents," "technical proposal" and "financial proposal." Each page of the proposal should be stamped and signed. All these three (3) envelopes then should be kept in **another envelop sealed with wax** (laha chhap).

3. Only shortlisted firms will be contacted by Save the Children at each stage of the selection process. A 45-minute presentation/ interview session will be run for final award decision.

#### Section B: Proposal Development Form

i.	Organization Informa	tion (NA in case of individual consultant)
		on :
	Address	•
	Phone number	·
	E-mail	
II.	Details of contact per Name Position Phone Number E-mail	Son :

III. Major topics and sub-topics for proposal development

1. Organization Background (NA in case of individual consultant)



	Please write about your firm.
evalua	Please list below relevant experience of your <u>firm</u> on Midterm and or Endline ation of integrated project and & large-scale research in Education, Health-Nutrition & Child y theme.
Pover	Does your <u>team leader</u> have experience in Education, Health-Nutrition & Child ty theme for data collection, qualitative and quantitative survey, and research? If yes, e list below.
Midline	Does your <u>firm or team leader</u> have experience in Madhesh Province in e/Endline evaluation & large-scale research in Education, Health Nutrition & Child ty theme & its subtheme as mentioned in TOR.
CV of evalua	st Experience of team leader & proposed human resource (must attach individual's proposed team). Proposed team members experience in leading Midline/Endline ation & large-scale research related to Education, Health Nutrition & Child Poverty & subtheme will be highly appreciated.
	••••••
	st experience of your <u>firm or team leader</u> on <b>Research &amp; Evaluation of integrated</b> -thematic projects) project.
	· · · · · · · · · · · · · · · · · · ·



1.7 What is your Understanding of the ToR?
1.10 Please mention the Proposed Methodology & Sampling technics to conduct this assignment:
1.11 Please explain "Quality Assurance Mechanism, Monitoring & Supervision plan" for this assignment:
assignment:
assignment:
assignment:
assignment:
assignment:
assignment:
assignment:
assignment:
assignment:
1.12 Does your firm have sustainability plan in place, in term of environmental, economical & social aspect? E.g CSR fund etc.
1.12 Does your firm have sustainability plan in place, in term of environmental, economical & social aspect? E.g CSR fund etc.
1.12 Does your firm have sustainability plan in place, in term of environmental, economical & social aspect? E.g CSR fund etc.
1.12 Does your firm have sustainability plan in place, in term of environmental, economical & social aspect? E.g CSR fund etc.
1.12 Does your firm have sustainability plan in place, in term of environmental, economical & social aspect? E.g CSR fund etc.
1.12 Does your firm have sustainability plan in place, in term of environmental, economical & social aspect? E.g CSR fund etc.



	Full Name (Avoid abbreviations)	Date of birth (dd/mm/yyyy in AD)	Designation (for this assignment)	Academic Qualification
	Deliverables with time	eline (in table format)		
• • •				
•••				
•••				
•••				
•••				
	Proposed Budget witl	n clear breakdowns (r	nust be inclusive of T	DS/VAT)
•••				
• • •				
• • •				
•••				
•••				
	imum Requirements:  1) Firm Registration & 2) VAT Registration C 3) Tax Clearance Cert 4) CV of proposed Tea 5) Attach at least two leader.	ertificate ificate 078/79	arch on similar fields	conducted by tea
	<ol> <li>Firm Registration &amp;</li> <li>VAT Registration C</li> <li>Tax Clearance Cert</li> <li>CV of proposed Tea</li> <li>Attach at least two leader.</li> </ol>	ertificate ificate 078/79 am members		conducted by tea
	<ol> <li>Firm Registration &amp;</li> <li>VAT Registration C</li> <li>Tax Clearance Cert</li> <li>CV of proposed Teat</li> <li>Attach at least two leader.</li> </ol>	ertificate ificate 078/79 am members reports of past resea	( <mark>T</mark>	

Contact

<Prabin.chaudhary@savethechildren.org>.

person

this

study

is

study.

the

.....

Prabin

Chaudhary



## Who can I contact if I have a question or comment about this document?

Please contact the Procurement Coordinator at <a href="mailto:dhirendra.joshi@savethechildren.org">dhirendra.joshi@savethechildren.org</a> <044-550720, Ext. 159> as well as Project Focal Point at <a href="mailto:prabin.chaudhary@savethechildren.org">prabin.chaudhary@savethechildren.org</a>

## **TERMS OF REFERENCE**

For

## **Conducting Final and Mid-term Evaluation of Sponsorship (Sammunnati) Program**

Final Evaluation for Saptari District (Impact Area-1)

Mid-term Evaluation for Sarlahi and Mahottari Districts (Impact Area-2)

**March 2023** 

Save the Children Nepal



## **TABLE OF CONTENTS**

Tab	ole o	f Contents	2
1.	Pro	oject Summary	4
2.		roduction	
3.		ckground and Context	
4.	Sco	ppe of Study	9
4	.1	Purpose, Objectives and Scope	9
4	.2	Intended Audience and Use of the Study	
4	.3	Key Study Questions	11
5.	Stu	ıdy Methodology	14
5	5.1	Study Design	14
5	5.2	Sampling	15
5	5.3	Data Sources and Data Collection Methods / Tools	15
5	.4	Ethical Considerations	15
6.	Exp	pected Deliverables	16
7.	Re	porting and Governance	18
8.	Stu	ıdy Management	18
9.	Stu	ıdy Team and Selection Criteria	19
10.	Sch	nedule of Payment	20
11.	HC	OW TO APPLY	20
12.	An	nexes	20



## Abbreviation:

Short	Long
SCN	Save the children Nepal
MNCH	Maternal Neonatal and Child health
ECCD	Early childhood care and development
BE	Basic Education
AD	Adolescent development
CSSP	Child sensitive social protection
CLS	Child sensitive livelihood
СР	Child protection
FSL	Food security and livelihood
GESI	Gender and Social Inclusion
VIAP	Vision for impact area presence plan
BuP	Building up program phase
QIP	Quality implementation phase
IAPP	Impact area presence plan
PWV	Parenting without Violence
VDC	Village development Committee
CC	Child club
WCRC	Ward child right committee
SHN	School health and nutrition
ASRH	Adolescent sexual reproductive health
StS	Save the Saptari
CFWA	Community family welfare association
RYC	Ratauli Yuwa Club
RRPK	Rastriya Rojagar Prabardhan Kendra
RWUA	Rural women upliftment centre
RF	Result framework
OPMIS	Online program management information system



## **Project Summary**

Town of avaluation	The second secon
Type of evaluation	There are two independent evaluation, I) Final evaluation for
	Saptari and II) Mid term evaluation for Sarlahi & Mahottari
Name of the project	Sponsorship (Nepali name SAMUNNATI) Program
Project Start and End	I) 2014 to 2023 in Saptari and II) 2019-2023 in Sarlahi &
dates	Mahottari
Project duration	10 years in Saptari and 5 years in Sarlahi and Mahottari
Project locations:	Saptari district (Surunga Municipality, Khadak Municipality,
	Rajbiraj Municipality, Chhinnamasta Rural Municipality, Tilathi
	Koiladi Municipality and Bisanpur Rural Municipality)
	Sarlahi (Ishwarpur M, Godaita M, Balara M and Haripur M) and
	Mahottari (Jaleshwar M, Bardibas M, Gaushala M and Pipra RM)
Thematic areas	Education, Health & Nutrition and Child Poverty
Sub themes	MNH, ECCD, BE, SHN, ASRH, ASST, CP, GESI and CSL
Donor	SCI and Multiple donor
Estimated beneficiaries	Direct (Children-171246, Adult 37352) and Indirect (Children
	148202, Adult 88992) reach as of 2022.
Overall objective of the	Overall Sponsorship Program Goal: All children in the impact
project	area are healthy and educated and become nurturing caregivers
	and positive contributors to society.



#### 1. INTRODUCTION

Save the Children (SC) Nepal has been working in Nepal for more than four decades and has significantly contributed to enhance children's quality of life from different perspectives with special focus to ensuring and promoting the child rights. Save the Children in Nepal is basically guided by the vision to create a world in which every child attains the right to survival, protection, development, and participation. It has been emphasizing to improving children's well-being by adopting right based.

## Impact Area I (Sapatri)

The Samunnati Program is being implemented in 6 out of 18 Rural/Municipalities in Saptari district, with two in the northern part and four in the southern part. The selection of these Rural/Municipalities was done in collaboration with government stakeholders based on factors such as the level of impact of inequality and discrimination on the communities.

Save the Children (SC) Nepal has selected Saptari district in the Central Terai as its impact area I. The selection of the district for Samunnati is based on assessment of the six major indicators: low HDI (this reflects a number of indicators on health, education and economics), gender inequalities, levels of women empowerment, proportion of the population under 18, level of child deprivation, and high rate of malnutrition.

The Samunnati program was launched in 2014 with a baseline study conducted in the same year. A midterm survey was conducted in 2018 as part of the IAPP (Impact Area Presence Plan). The IAPP outlines the program management cycle which is divided into three phases. The first phase is the "program phase-in" in 2014 and the implementation period, also known as the start-up phase, which takes place from 2014 to 2018. The second phase is the Quality Implementation Phase (QIP) from 2019 to 2023, followed by the final phase, the Ownership Transition and Phase Over, which takes place from 2024 to 2026. The Samunnati Program is funded by Save the Children US and its member countries and its ultimate goal is to ensure that all children in the impact area are healthy, educated, and become positive contributors to society.

The overall objectives of this final evaluation are to measure the progress of project as per QIP phase to recommend sponsorship team on learning and way forward for phase over and ownership transition phase.

#### Impact Area II (Sarlahi and Mahottari)

The Samunnati Program is implementing its impact area II in two districts: Sarlahi and Mahottari. Out of the total 35 rural/municipalities in these two districts, 8 have been selected for the program, with 4 in each district. The selection was made in consultation with government stakeholders and based on various parameters such as reaching communities most affected by inequalities and discrimination.

The Samunnati program was launched in 2017 in the Sarahi and Mahottari regions and a baseline study was conducted in 2018. The program officially began in 2019 as part of the Vision for Impact Area Presence (VIAP) program management cycle. The program will run in three phases: the building phase from 2019 to 2023, the quality implementation phase from 2024 to 2028, and the ownership transition and phase over from 2029 to 2032. The program is managed



and funded by Save the Children US with the "All children in the impact area are healthy and educated and become nurturing caregivers and positive contributors to society."

The overall objectives of this midterm is to measure the progress of project as per Building up Program (BuP) phase to recommend sponsorship team on learning and way forward for QIP phase.

#### BACKGROUND AND CONTEXT

Sponsorship program was implemented in Nepal since 1981 from Gorkha and followed by Siraha in 1991, Nuwakot in 1993, Kailali and Kanchanpur in 1995. It was further extended to Kapilvastu and Pyuthan in 2009. By 2014, the program expanded in Saptari and in 2018 it was introduced in Sarlahi and Mahottari as a new impact area. 2020 onwards, the program coverage was centralized in eastern region on Nepal (Madhesh Pradesh) in Saptari, Sarlahi and Mahottari. During early years of Sponsorship program in Nepal, the health, education, childcare, infrastructure development and income generation activities were launched. At the beginning, the program was directly implementing by SC team which is by now implementing through local NGOs and government agencies to ensure the sustainability and ownership of program.

Sponsorship program has a child-centric approach through five core programs namely Early Childhood Care and Development (ECCD), Basic Education (BE), School Health and Nutrition (SHN), Adolescent Development (AD), and lastly added Maternal-Newborn Health (MNH), in Saptari. There is a non-core program in operation in Nepal as form of Child poverty (Food security and Livelihood-FSL, Child Sensitive Social Protection-CSSP) which focuses on income generation of destitute families contributing to children's brighter future.

Long Term Goal: Young adults who grew up in the impact area during the sponsorship program are educated, thriving, healthy, nurturing, and contributors to society and families, communities, and government systems have been strengthened such that results are sustained for current and future children in the impact area.

Integrated Strategic Objectives: Sponsorship program works across socio ecological model (i.e. with individual children, family, community and other structures/institutions.) The integrated strategic objective of the program has been designed accordingly.

- Individual level objective: All children in the impact area are healthy, educated, empowered, and protected.
- Family level objective: All families in the impact area aware of and practicing healthy and educational supportive behaviours.
- Community level Objective: Community leaders and organizations in the impact area are supportive of health and educational services for children.
- Structure level objective: Institutions, systems, and policies are supportive and sustain health and educational services in the impact area. The baseline study was conducted to collect data for the program indicators stated in the result framework (RF) which set the baseline values of those indicators which had benchmark to assess to what extent the



program to achieve the objectives and results. The indicators were collected primarily through sample survey method and observation of different structures (Health Facilities, Schools, ECCD spaces) using semi-structured and structured checklists.

In 2019, Sponsorship is given local name as SAMUNNATI. In order to address the different issues/problems and needs of children and families, Nepal sponsorship program covers the following core and non-core programs in Saptari impact area.

## Impact area I (Saptari)

The Samunnati Program implemented through two local partners NGOs i.e. Sabal Nepal and Save the Saptari. The Partners are implementing all activities of Six outcomes. The interventions were started in Tilathi koiladi Rural Municipality, Bishnupur Rural Municipality, Chhinnamasta Rural Municipality, Rajbiraj Municipality (ward 1, 5, 14, 15 and 16), Surunga Municipality and Khadak Municipality from 2014, and expansion was made in 2016 and 2018 in same Rural/Municipalities' wards. During that period, the administrative local unit was in the VDC format in 2014 program started from 16 VDCs, in 2016 implemented in additional 14 VDCs and in 2018 program expand in additional 19 VDCs. Furthermore, 2018 onward the program VDCs were merged in the six Rural/Municipalities.

The Nepal Sponsorship Program has final evaluation scheduled for the second quarter of 2023 in Saptari Impact Area. The final evaluation will assess and evaluate the programs in Saptari and will produce recommendations to design the program's ownership and transition phase. Sponsorship in Nepal started with Early Childhood Care and Development (ECCD), Basic Education (BE), School Health and Nutrition (SHN), and Adolescent Development (AD) and added Maternal Newborn Health (MNCH) in 2019 and Food security and livelihood-FSL as a non-core. Nepal has four cross-cutting areas named Child Protection (CP), Child Rights Government (CRG), Inclusion and Community Mobilization (CM) along with 5 core components. Saptari program has midterm data against 60 result level indicators. The table below describes about the sponsorship program cycle.

	Implementation Phase			Program Cycle Steps					
Impact Area Name	Start- up phase	Quality Impleme ntation with Partners	Ownership Transition and Phase over	Impact Area Presen ce Plan (IAPP)	Situatio nal Analysis	Program Design	Baselin e	Mid- term & Lessons Learned	Final/E ndline & Lessons Learned
Saptari	2014 - 2018	2019- 2023	2024-2026	2015	2014	2014	2014	2018	2023

The Sponsorship Program addresses gender issues in schools and communities through various interventions such as PWV (Positive Women and Youth Values) sessions, LS4S (Life skills for success), girls-friendly toilets in schools, and gender-related teacher training. The program also



includes complementary projects aimed at ending gender discrimination in the sponsorship area.

Baseline, mid-term, and action research studies were conducted to evaluate the effectiveness of the program. Complementary projects also conducted research on topics such as gender and girls' education, menstrual health management in adolescents, women and girls' meaningful participation in community structures, and entrepreneurship pathways.

## Impact area II (Sarlahi and Mahottari)

The Samunnati program is being implemented through four local NGOs, which include Rastriya Rojgar Prabardhan Kendra (RRPK), Rural Women Upliftment Centre (RWUA) in Sarlahi, Community Family Welfare Association (CFWA), and Ratauli Yuwa Club (RYC) in Mahottari. These partners are responsible for carrying out all the activities related to the six outcomes of the program. The program was started in 2019 in Jaleshwor, Bardibas of Mahottari and Godaita and Ishwarpur of Sarlahi, and in 2021, it was expanded to Pipra RM, Gaushala of Mahottari, and Balara and Haripur in Sarlahi.

The Nepal Sponsorship Program has a plan for a midterm evaluation in 2023, which will take place during the first quarter of the year. The evaluation will focus on the programs implemented in Sarlahi and Mahottari and will aim to produce recommendations for the future design of the program in the QIP phase.

The sponsorship program in Nepal started with five main components, which are Maternal Newborn Health, Early Childhood Care and Development, Basic Education, School Health and Nutrition, and Adolescent Development and Child sensitive livelihood. In addition to these components, there are four cross-cutting issues in the program, which are Child Protection, Child Rights Government, Inclusion, and Community Mobilization.

The baseline data for the Sarlahi and Mahottari program has been collected against 81 result-level indicators. The overall goal of the sponsorship program is to improve the lives of children and their communities in Nepal.

	Implementation Phase			Program Cycle Steps					
Impact Area Name	Buildi ng up Progr ams	Quality Implemen tation with Partners	Owner ship Transit ion and Phase over	VIAP Finali zed	Situati onal Analys is	Prog ram Desi gn	Basel ine	Midt erm & Lesso ns Learn ed	Final/En dline & Lessons Learned
IA 2, Mahot tari and Sarlahi	2019- 2023	2024- 2028	2029- 2032	2018	2018	2018	2018	2023	2028

The Samunnati project has implemented several initiatives aimed at addressing gender issues in schools and communities. One of these initiatives is the PWV session, which is designed to



create a safe and inclusive environment for girls and women by promoting positive values and behaviours. This session encourages girls to assert their rights and promotes gender equality through interactive activities and discussions.

Another initiative under Samunnati is the Life Skills for Success, which aims to equip girls and women with the necessary life skills to achieve success in their personal and professional lives. This activity includes five major domain - social skills, higher order thinking skills, self-control, positive self-concept and proper communication as guided by the LS4S toolkit.

In order to ensure that girls have access to clean and safe toilets, Samunnati has also implemented the Girls-Friendly Toilet in Schools project. This project aims to provide separate and clean toilets for girls in schools, ensuring that they are not subjected to the shame and stigma of using shared toilets.

To ensure that teachers are equipped to address gender issues in their classrooms, Samunnati has incorporated gender curriculum into their teachers' training program. Teachers are trained on the importance of gender equality, the promotion of positive values, and the need to address gender-based violence in schools.

Alongside Samunnati, complementary projects have also been implemented in the same impact area. These projects include the CPCS (Child Protection in Community and School), GBV (Gender-Based Violence), CSSP project in Mahottari and the Ending Discriminatory Gender Norms in Sponsorship Area (Gender Centric Sponsorship Complementary Project). All these projects aim to address various gender-related issues and promote gender equality (Dalit focused program, disability inclusion).

The NETRITWA (Leadership Incubation Lab to Address Violence against Women and Girls) project is another complementary project aimed at empowering women and girls to become leaders in their communities and address the issue of violence against women and girls.

To ensure the effectiveness of these interventions, Samunnati and its complementary projects have conducted baseline and action research studies in the areas of gender and girls' education, menstrual hygiene management in adolescents, meaningful participation of women and girls in community structures, and entrepreneurship. These studies provide valuable insights and recommendations for further interventions to address gender-related issues in the future.

## 3. SCOPE OF STUDY

## 3.1 Purpose, Objectives and Scope

This study aims to conduct the Final evaluation of the Sponsorship program in Saptari and Midterm evaluation of the sponsorship program in Sarlahi & Mahottari. The first evaluation component (Final evaluation) will support to plan for phase over planning process/ownership transition of community structures and evaluate the QIP phase progress and learning for Saptari, and the second component (midterm evaluation) will support to build new phase (QIP) programming and evaluate the current phase progress and learning for Sarlahi & Mahottari.

For the Final/End line evaluation: (Sapatri IA1)



## Purpose:

The purpose of final evaluation is to determine the effectiveness, impact, and outcomes of a program or project. This evaluation assesses the achievements of the project in relation to its objectives and goals and determines whether it has met its intended targets.

The objectives of final evaluation are to:

- Assess the performance of the program in relation to its goals and outcome/sub outcome.
- Measure the impact of the program or project on the target population.
- To understand the mechanisms that worked and those that did not work and why.
- To assess the contribution of the project to the development of the wider community or sector.
- To determine the sustainability of the project outcomes and impact.
- To identify any changes in the project environment or context that have impacted the project outcomes and impact.
- To assess the effectiveness of interventions.
- To identify positive and negative, primary, and secondary long-term effects, directly or indirectly, intended or unintended attributed to the programme.
- To determine the level of stakeholder (children, students, adolescents, young adults, parents, teachers, school officials, and government officials etc.) satisfaction.
- To identify key lessons, good practices, issues, challenges and make recommendation for implementation of future program interventions.
- To understand if the project is addressing need of children those impacted by inequality and discrimination.

## Scope:

The final evaluation will take into consideration the sponsorship logical framework and OECD/DAC criteria, which comprises results indicator of project and five dimension of DAC criteria. The evaluation will also focus on several study areas, including cost effectiveness, adaptation and scalability, gender and inclusiveness, sustainability, nutrition, and MEAL as well as for programme development purposes. The final evaluation will be carried out in six working Municipalities of Saptari district of Madhesh Province.

## For the mid term (Sarlahi & Mahottari IA2)

#### Purpose:

The purpose of mid-term evaluation is to assess the progress of a project or program and determine if it is on track to meet its goals and objectives. This evaluation provides valuable insights into the strengths and weaknesses of the project and helps identify areas for improvement.

Objectives: The objectives of mid-term evaluation are:

- To determine the effectiveness of the sponsorship program in achieving its goals and objectives.
- To evaluate the implementation of the project and assess its progress.
- To assess the satisfaction and experience of program beneficiaries.
- To assess the achievement of intended and unintended outcomes (both positive and negative)
- To evaluate the level of community engagement during implementation.



- To identify any significant challenges or obstacles encountered during implementation and how they were addressed.
- To determine if the project is still relevant and meeting the needs of its target audience.
- To provide feedback to project staff and stakeholders on the effectiveness of their efforts.
- Explore community people (and other stakeholders) perspective regarding program intervention for improving existing program as well design next 5-year plan
- What does the sustainability of the program look like? Will the benefit last?
- To understand if the project is addressing need of children those impacted by inequality and discrimination.

## Scope:

The mid-term evaluation is an important aspect of monitoring the progress and effectiveness of the sponsorship program in Sarlahi and Mahottari district. The evaluation process assesses the quality and impact of the project outcomes and outputs, ensuring that they align with the project goals and objectives. Additionally, the effectiveness of the project management and resource utilization are also evaluated to identify any areas for improvement. The midterm evaluation will be carried out in eight working Municipalities of Sarlahi and Mahottari district of Madhesh Province. Finally, the evaluation will provide feedback to project staff and stakeholders, allowing them to enhance their performance and ultimately improve the project's overall success.

The study team will be required to undertake consultation with the SC MEAL team at the commencement of the project to further refine the Study questions.

## 3.2 Intended Audience and Use of the Study

Primary intended audience of the study are the sponsorship offices in SCI, local governments structural units, partners organizations.

Stakeholder	Further information				
Project donor	Save the Children International				
Primary implementing organisation	Save the Children Nepal Country Office				
Implementing partners	Sabal Nepal and Save the Saptari				
Government stakeholders	HFs, ECCDs, School, and Municipal and provincial offices.				
Community groups	CCs, CCNs, WCRCs, Farmers groups.				
Beneficiaries	Children, Youths, and adults involved in the program.				
International development/humanitarian research community	Save the Children International, Save the Children US, Save the Children member countries.				

## 3.3 Key Study Questions

The key study questions are as below for the final and midterm evaluation.



Criteria	Key Study Questions			_	
Cinteria	ney study Questions	Formative	Outcome	Impact (for final evaluation	Economic
Accountability	How has the program approached accountability to children and the wider community?		Х	Х	
Safe programming	<ul> <li>Has the program been designed, planned, implemented and monitored to ensure it is safe for children and adults?</li> <li>How has the program assessed the risks for children and do these risks still exist to date? Have they been reduced, controlled, and managed by the minimising actions? Are there new risks?</li> </ul>		Х		
Coherence*	<ul> <li>Does the intervention support beneficial synergies and linkages with other interventions carried out by Save the Children in the community?</li> <li>Is the intervention reliable with the interventions of other actors in the same context, such as supporting complementarity, harmonization, and co-ordination with government and other relevant service providers?</li> </ul>	X	Х	X	
Cost effectiveness	Has the intervention been cost- effective (compared to similar interventions elsewhere or compared to alternative approaches)?				Х
Effectiveness*	<ul> <li>Did the program/project achieve its intended outcomes?</li> <li>Are there any differences in outcomes achieved by different groups?</li> <li>Were there any unintended outcomes?</li> <li>Are the objectives of the program being achieved?</li> </ul>		X	X	



	How big is the effectiveness or impact of the project compared to the objectives planned?			
Efficiency*	<ul> <li>Were objectives achieved on time?</li> <li>Were activities cost-efficient? (What was the cost of delivering outputs? How were cost drivers managed?)</li> <li>Was the programme implemented in the most efficient way compared to alternatives?</li> </ul>	X		X
Impact*	<ul> <li>Does the program contribute to reaching higher level objectives (preferably, overall objective)? Why/why not?</li> <li>What is the effect of the programme in proportion to the overall situation of the target group?</li> <li>What are the intended or unintended effects of the programme, either positive or negative, direct or indirect?</li> </ul>		X	
Relevance*	<ul> <li>Are we doing the right thing? Does the intervention respond to clearly identified needs and priorities of the project participants? Was the intervention appropriately adapted to the local context and target population?</li> <li>How was learning and evidence was used throughout the program cycle to adapt and ensure the project remained relevant?</li> <li>How important is the relevance or significance of the intervention regarding local and national requirements and priorities?</li> </ul>	X	X	
Replicability and scale	Is there evidence that the program will reach greater numbers of beneficiaries through the implementation of an approach at scale?	X	X	X
Satisfaction and experience	How satisfied were the program beneficiaries?	Х		



	Did program beneficiaries feel the services they received were acceptable, appropriate, and suited to their needs?				
Sustainability*	<ul> <li>Are the positive effects or impacts sustainable?</li> <li>How is the sustainability or permanence of the intervention and its effects to be assessed?</li> </ul>		X	X	X
Gender sensitivity	<ul> <li>How has the program considered gender sensitivity both in the design and its implementation of activities?</li> <li>Has the program incorporated different needs and accessibility of boys and girls, men and women?</li> <li>Has the program outcomes or results been equally represented?</li> <li>What are the gender gaps that the program addressed and what remaining aspects need to be considered further?</li> </ul>	X	X	X	

## \*OECD DAC Criteria

## 4. STUDY METHODOLOGY

(Note: Study methodology will be similar for both final and midterm evaluations as it will be looking at the same indicator)

## 4.1 Study Design

The final and midterm evaluation will use a non-experimental and mixed-methods approach. It will use both qualitative and quantitative data collection, use both purposeful and random sampling.

The data will be collected through surveys, focus group discussions, and key informant interviews with project beneficiaries, partners, and stakeholders. The data will be analysed using appropriate statistical techniques and qualitative analysis methods. Quantitative study design will be applied for the individual/population in the mean of cross-sectional and qualitatively, health facilities, ECCDs, Farmer groups, schools, CCs WCRCs and MFIs will be assessed. Quantitative data set of all the indicators (of the past years) will be provided by Save the children to the consultant. Additionally, collection of data related to certain selected performance indicator will also be the responsibility of the consultant. Thereafter, the consultant will be responsible for data analysis and interpretation. Similarly, the responsibility to collect all the qualitative information will be of the consultant. The design will be reviewed after submission of proposal by consultancy firm. The consultant team can propose the design which best work for the program.



## 4.2 Sampling

The consultant is expected to collect information from sample population for qualitative as well as quantitative components of the evaluation. During the respondent selection for data collection in field, the consultant team will involve all relevant respondent as per their characteristics, gender, vulnerability, and disability status in survey, KII, FGD and IDI. The sample includes households, community structures (such as schools, child clubs, health facilities, and ECCD centers) in six rural/municipal areas in Saptari and eight rural/municipality from Sarlahi and Mahottari . Based on project theme and key evaluation question, different individuals and groups will be involved in evaluation process like school children, child club members, head teachers, health service providers, ECCD facilitators, farmers, entrepreneurs, and parents. The evaluation team will use purposive sampling procedures for qualitative and random sampling procedure for quantitative to ensure representativeness and accuracy of the results. As mentioned, few identified performance indicators will be used to determine the sample size for the quantitative survey, based on different age groups. For the majority of the indicators, data will be provided by Save the Children to the consultant for analysis.

## 4.3 Data Sources and Data Collection Methods / Tools

The primary data collected during the study must be designed so that disaggregation can be ensured by gender, age, disability, location, and vulnerability status. To ensure this, Save the Children will provide guidance and support to the study team in terms of using appropriate tools and classification schemes that can capture this minimum dataset.

In addition to the primary data, there are existing Save the Children data sources that the study team can utilize in their evaluation. These sources include sponsorship annual plans and reports, baseline and progress reports/ data sets, research and assessment reports, and other data collection tools such as caregiver surveys, adolescent surveys, school surveys, and community-based surveys.

To support the data collection process, Save the Children can also assist in sourcing enumerators who can assist with collecting primary data from various sources. The study team is also encouraged to seek out additional SC data sources that can add value to the study, such as OPMIS data and government thematic data. To ensure data triangulation, the team should clearly outline how they plan to utilize multiple sources of data to verify and validate findings.

Finally, a range of project documentation will be made available to the study team that provides information about the design, implementation, and operation of the Program. This documentation will be useful in gaining a better understanding of the context and background of the Program and can help inform the study's findings.

The study team is required to adhere to the <u>Save the Children Child Safeguarding; Protection from Sexual Exploitation and Abuse; Anti-Harassment, Intimidation and Bullying;</u> and Data Protection and Privacy policies throughout all evaluation activities.

## 4.4 Ethical Considerations

It is expected that the study will be:

Child participatory. Where appropriate and safe, children should be supported to participate in the evaluation process beyond simply being respondents. Opportunities for collaborative participation could include involving children in determining success criteria against which the project could be evaluated, supporting children to collect some of the data required for the evaluation themselves, or involving children in the validation of findings.



Any child participation, whether consultative, collaborative or child-led, must abide by the <u>9</u> Basic Requirements for meaningful and ethical child participation.

- Inclusive. Ensure that children from different ethnic, social and religious backgrounds have the chance to participate, as well as children with disabilities and children who may be excluded or discriminated against in their community.
- **Ethical**: The study must be guided by the following ethical considerations:
  - Safeguarding demonstrating the highest standards of behavior towards children and adults.
  - o Sensitive to child rights, gender, inclusion, and cultural contexts.
  - Openness of information given, to the highest possible degree to all involved parties.
  - Confidentiality and data protection measures will be put in place to protect the identity of all participants and any other information that may put them or others at risk.<sup>1</sup>
  - o Public access to the results when there are not special considerations against this.
  - o Broad participation the relevant parties should be involved where possible.
  - Reliability and independence the study should be conducted so that findings and conclusions are correct and trustworthy.

#### It is expected that:

- Data collection methods will be age and gender appropriate.
- Study activities will provide a safe, creative space where children feel that their thoughts and ideas are important.
- A risk assessment will be conducted that includes any risks related to children, young people's, or adult's participation.
- A referral mechanism will be in place in case any child safeguarding or protection issues arise.
- Informed consent will be used where possible.

The study team will be required to obtain approval from Nepal Health Research Council (NHRC) and Save the Children will provide assistance with this process. The rights and welfare of human participants, especially children, are paramount in evidence generation processes.

#### 5. EXPECTED DELIVERABLES

The study deliverables and tentative timeline are outlined below. The study team lead, and SC MEAL Manager at CO, Research Coordinator at CO and sponsorship MEAL Coordinator at EFO will agree on final milestones and deadlines at the inception phase.

## **Deliverables and Tentative Timeline**

Deliverable / Milestones	Timeline

<sup>&</sup>lt;sup>1</sup> If any Consultancy Service Provider, Freelancer or Contingent worker will have direct contact with children and/or vulnerable adults and/or beneficiaries and/or have access to any sensitive data on safeguarding and/or children and/or beneficiaries, it is the responsibility of the person receiving the consulting service to contact the local HR team and child safeguarding focal point to ensure vetting checks and onboarding are conducted in line with statutory requirements, local policies and best practices guidance.



The study team is contracted and commences work	1 May 2023
Initial meeting with research/consultancy firm	3 May 2023
<ul> <li>The study team will submit an inception report in line with the provided template, including:</li> <li>study objectives, scope, and key study questions</li> <li>description of the methodology, including design, data collection methods, sampling strategy, data sources, and study matrix against the key study questions</li> <li>data analysis and reporting plan</li> <li>caveats and limitations of study</li> <li>risks and mitigation plan</li> <li>ethical considerations including details on consent</li> <li>stakeholder and children communication and engagement plan</li> <li>key deliverables, responsibilities, and timelines</li> <li>resource requirements</li> <li>data collection tools (in line with the study matrix)</li> <li>Once the report is finalised and accepted, the evaluator/researcher study team must submit a request for any change in strategy or approach to the study manager or the steering committee.</li> </ul>	13 May 2023
Finalize data collection tools	20 May 2023
<ul> <li>Ethics submission (if applicable):</li> <li>Submit application to Nepal Health research Council (NHRC) for ethical approval:</li> <li>study protocols (participant recruitment, data security and storage, consent, and confidentiality etc.)</li> <li>considerations for consulting with children and other vulnerable groups (if applicable)</li> <li>participant information statement and consent forms</li> </ul>	21 May 2023
<ul> <li>Filed level data collection start from 5<sup>th</sup> June and will be completed by end of June 2023</li> </ul>	21-Jun - 15 Jul 2023
Validation worksop with beneficiaries and stakeholders	25 Jul 2023
Share preliminary findings with SC team	30 Jul 2023
Share draft reports with SC team	5 Aug 2023
Final Study Report incorporating feedback from SC team	15 Aug 2023
<ul> <li>Knowledge translation materials:</li> <li>PowerPoint presentation of Study findings</li> <li>Evidence to Action Brief** (Summary of evaluation)</li> </ul>	15 Aug 2023

<sup>\*</sup>All reports are to use the Save the Children Final Study Report template. Separate report require for the Final & Mid-term evaluation.

Please also refer to Save the Children technical writing guide.

<sup>\*\*</sup> The Evidence to Action Brief is a 2-4 pages summary of the full report and will be created using the Save the Children Management Response template.



All documents are to be produced in MS Word format and provided electronically by email to the SC Evaluation Project Manager. Copies of all PowerPoint presentations used to facilitate briefings for the project should also be provided to Save the Children in editable digital format.

## 6. REPORTING AND GOVERNANCE

The study team (Consultancy) will provide reporting against the agreed action plan. The following regular reporting and quality review processes will also be used:

- Dedicated study team is must for each evaluation study (1 team for midterm and 1 team for final evaluation)
- A written Progress Report by email to the Save the Children MEAL team every week documenting progress, any emerging issues to be resolved and planned activities for the next month.

## 7. STUDY MANAGEMENT

Study Tentative Timeline, with key deliverables in bold. The final timeline and deliverables will be agreed upon the inception phase.

What	Who is responsible	By when	Who else is involved
Study quotation submissions due	Consultancy/research firms	9 April 2023	
Quotation review and selection of study team	SC team (supply chain and MEAL)	24 April 2023	
Initial meeting with research/consultancy firms	Study team	26 April 2023	
Inception report	Study team	1 May 2023	
Finalize Data collection tools	Study team	7 May 2023	MEAL team and Technical Manager Technical Advisor
Ethics submission to SCUS and	MEAL team	8 May 2023	MEAL team
NHRC	Study team		
Receive ethic approval by SC US and NHRC	SC US team	4 June 2023	
Data collection	Study team	5-30 June 2023	MEAL team
Validation of study findings	Study team	10 July 2023	
Share preliminary findings	Study team	15 July 2023	
First draft of the evaluation reports	Study team	20 July 2023	



Final evaluation report of both final and midterm evaluation and submission of dataset	Study team	30July 2023	
Knowledge translation materials (brief summary)	Study team	30 July 2023	MEAL, TMs and Tas
Project team meeting to develop Study Response Plan	SC team	10 Aug 2023	MEAL, TMs and Tas
Study final report (together with response plan) posted on OneNet and reviewed (see page 1 above for platform links)	SC team	15 Aug 2023	MEAL, TMs and Tas

#### 8. STUDY TEAM AND SELECTION CRITERIA

Interested consultants will be required to submit an Expression of Interest in line with the provided template, which should demonstrate adherence to the following requirements.

## **Understanding of Requirements and Experience**

To be considered, the study team members together must have demonstrated skills, expertise, and experience in:

- Dedicated team for the both study.
- Designing and conducting outcome evaluations using non-experimental design.
- Conducting studies in the field of Education, Health and Nutrition and child poverty, particularly in relation to MNH, ECCD, BE, SHN, ASRH, ASST and FSL.
- Leading socio-economic research, evaluations or consultancy work in Nepal and Madhesh Pradesh that is sensitive to the local context and culture, particularly in child rights, gender equality, ethnicity, religion, and minority groups and/or other factors.
- Conducting ethical and inclusive studies involving children and child participatory techniques.
- Conducting ethical and inclusive studies involving marginalised, deprived and/or vulnerable groups in culturally appropriate and sensitive ways.
- Managing and coordinating a range of government, non-government, community groups and academic stakeholders.
- Sound and proven experience in conducting evaluations based on OECD-DAC evaluation criteria, particularly utilisation and learning focused evaluations.
- Extensive experience of theories of change and how they can be used to carry out evaluations.
- Strong written and verbal skills in communicating technical and/ or complex findings to non-specialist audiences (especially report writing and presentation skills).
- A track record of open, collaborative working with INGOs.

#### There is a high expectation that:

 Members (or a proportion) of the study team have a track record of previously working together with I/NGOs.



- A team leader will be appointed who has the seniority and experience in leading complex study projects, and who has the ability and standing to lead a team toward a common goal.
- The team has the ability to commit to the terms of the project and have adequate and available skilled resources to dedicate to this study over the period.
- The team has a strong track record of working flexibly to accommodate changes as the project is implemented.

## **Financial Proposal**

Save the Children seeks value for money in its work. This does not necessarily mean "lowest cost", but quality of the service and reasonableness of the proposed costs. Proposals shall include personnel allocation (role / number of days / daily rates / taxes), as well as any other applicable costs.

#### 9. SCHEDULE OF PAYMENT

The following payments will be made to the consultant using and agreed mode of payment:

- Upon approval of inception report and tools: [20%]
- Upon submission of First Draft study Report: [30%]
- Upon approval of final study report: [50%]

## 10. HOW TO APPLY

If interested in applying for this study, please refer to the <u>Consultant EOI Form</u> and drop it at <u>procurementefo.nepal@savethechildren.org</u>

Contact person for this study is Prabin Chaudhary <a href="mailto:prabin.chaudhary@savethechildren.org">prabin.chaudhary@savethechildren.org</a>>
<a href="mailto:The last date of proposal submission">The last date of proposal submission is 9th April 2023</a>.

## Annexes

**Annex 1: Project Logframe** 

[insert content]

## Annex 2: List of project documents to be consulted

- Situation analysis report
- Baseline report
- Mid term report
- Building of Plan phase (BuP)planning document
- Quality Implementation Plan (QIP) document
- Vision for impact area presence plan



## **Annex 4: SCI Evaluation Report Quality Scoring**

(Note: Each evaluation report will be reviewed by using SCI evaluation quality scoring tool, thus consultant should follow below mentioned criteria while preparing report)

Category	Evaluation Quality Criteria (used for internal scoring after completion)
	1. Does the evaluation report clearly identify the evaluation's purpose
	(including its key objectives, questions, and criteria) as set out in the
	evaluation's Terms of Reference (ToR)?
	2. Are the data collection and analysis methods a clearly justified approach to
	addressing the evaluation's purpose and questions? (Do they provide valid,
	reliable and ethical data?)
	3. Is the methodology suitably tailored to the context and population groups to
	which the evaluation questions relate (e.g. re gender, disability, socio-economic
ds	status, geographic location, cultural context, ethnicity)?
th	4. Is the size and composition of the sample in proportion to the conclusions
<b>√</b> e	sought by the evaluation?
<u> </u>	5. Does the evaluation build on what is already known, for example existing
a	tried and tested frameworks and tools, existing data/evidence, and previous
ign	lessons learned?
es	6. Are the methods used to collect and analyse data and any limitations of the
O,	quality of the data and collection methodology explained and justified?
Purpose, Design and Methods	7. Has any personal and professional influence or potential bias among those
<u>r</u>	collecting or analysing data been recorded and addressed or mitigated
- ፈ	ethically?
	8. If evaluating impact, is a point of comparison used to show that change has
	happened (e.g. a baseline, a counterfactual, comparison with a similar group)?
	9. Is the explanation of how (e.g. theory of change, logframe, activities) the
	intervention contributes to change explored?
	10. Is the data well triangulated, such as by using different data collection
	methods, types of data and stakeholder perspectives?
	11. Are alternative factors (e.g. the contribution of other actors) considered to
	explain the observed result alongside an intervention's contribution?
	12. Are unintended and unexpected changes (positive or negative) identified
	and explained?
	13. Are the perspectives of children & communities included in the evidence,
	including the most deprived and marginalised? Note: For evaluations focused
	on young children, caregiver perspectives are adequate instead.
w	14. Are the findings disaggregated according to sex, disability, and other
n gg	relevant social differences?
n <del>di</del>	15. Is there a clear logical link between the data that was collected and
這	analysed, and the conclusions and recommendations presented?
p <u>u</u>	16. Are conflicting findings and divergent perspectives presented and
<u>.s</u>	explained in the analysis and conclusions?
<mark>/</mark> s	17. Are the findings and conclusions of the assessment shared with and
na	validated by a range of key stakeholders (e.g. communities, partners, Save the
Com muni catio Analysis and Findings n and	Children staff)?
Com muni catio n and	18. Is the analysis and interpretation of the data well communicated through
U E ö c I	accessible language and helpful visuals (diagrams, graphs, tables as needed)?



- 19. Are references, annexes and links included that provide additional relevant data, analysis or references (including key documents and which individuals/stakeholders were involved)?
- 20. Is there a clear plan for how to use the results, including recommendations that are 'SMART' (Specific, Measurable, Achievable, Relevant, Timebound) and directed toward the appropriate 'end users', a dissemination plan, and specific actions for implementing these recommendations?

ToR prepared by:	Prabin Chaudhary and reviewed by Matrika Sharma & MEAL team
ToR approved by:	Prakash Acharya
Date of sign off:	17/03/2023