

# Terms of Reference for an evaluation of “UNICEF’s Emergency Psychosocial Support Response for Syrian Children in Jordan”



The services of a team of consultants is required to conduct an evaluation of UNICEF’s Psychosocial Support Response for Syrian and host communities children in Jordan and to look at the relevance, impact, efficiency, effectiveness, sustainability, alternative implementation, future strategy and lessons learnt. The exercise is meant to assess the impact of response on the psychosocial well-being of Syrian refugee children living in Jordan. The results from this assessment would be highly useful to redirect/adjust UNICEF’s on going psychosocial support response in Jordan.

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# UNICEF Jordan

## Terms of Reference

### Evaluation of “UNICEF’s Emergency Psychosocial Support Response in Jordan”

#### TABLE OF CONTENTS

1. PURPOSE .....	1
2. OBJECTIVES.....	2
3. CONTEXT.....	3
4. SCOPE OF THE EVALUATION .....	5
5. EVALUATION CRITERIA .....	6
5.1 RELEVANCE.....	6
5.2 EFFICIENCY .....	7
5.3 EFFECTIVENESS .....	7
5.4 IMPACT .....	7
5.5 SUSTAINABILITY.....	7
5.6 COVERAGE .....	8
5.7 COORDINATION.....	8
5.8 COHERENCE .....	8
5.9 PROTECTION.....	8
6. APPROACH AND METHODOLOGY .....	9
7. GOVERNANCE AND ACCOUNTABILITY.....	10
8. GUIDING PRINCIPLES AND VALUES.....	10
9. EVALUATION TEAM QUALIFICATIONS.....	10
10. DELIVERABLES AND SCHEDULE .....	11
11. BUDGET AND PAYMENTS .....	12
12. STRUCTURE OF PROPOSAL And SUBMISSION GUIDELINES .....	13

#### 1. PURPOSE

The main purpose of the evaluation is to assess the impact of psychosocial response, to understand the nature of the change that has taken place in the lives of children, and to determine its significance on the psychosocial well-being of those children. It will generate substantive evidence based knowledge on psychosocial support response by identifying good practices and lessons learned. The results from this assessment exercise will be highly useful to enable any adjustment/redirection that may be necessary for future UNICEF intervention as UNICEF and its partner both move into 2014.

## 2. OBJECTIVES

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The overall objective of this exercise is to determine the relevance, efficiency, effectiveness and impact of the psychosocial support interventions on well-being of Syrian refugee children in Jordan. The specific objectives of the exercise are;

- A. To assess **relevance** of PSS response from the point of view of children/families/communities etc.
- B. To assess the **efficiency** of the implementation process of the UNICEF's psychosocial support response in Jordan, and to assess the **cost** of the response per unit of aggregation as compared to the cost being incurred by other similar interventions which are not supported by UNICEF with in Jordan
- C. To assess the **effectiveness** of the implementation process of the UNICEF's psychosocial support response in Jordan and to see if the programme achieved planned outcomes and outputs with regard to children's psychosocial well-being
- D. To assess the real **impact** of the response on the psychosocial well-being of children, to determine how well the response addressed the priority problems of Syrian children, and also to assess the quality of the various services provided by all partners at the different levels of the IASC MHPSS pyramid.
- E. To assess the **sustainability** of the results of the response in the absence of ongoing UNICEF support, by identifying the degree to which the PSS response has built on existing local capacities and coping mechanism, and a potential exit strategy that builds on local resources and capacities. What has been the impact of the programme on local networks and community based groups? How many volunteers/ community members have been mobilized and trained.
- F. To assess the extent of **coverage** of psychosocial support interventions in relations to the presence of Syrian refugee children in different areas of Jordan – both in terms of geographic coverage, and numbers of children reached vs numbers of children in need.
- G. To assess the effectiveness of the **coordination** of all agencies providing psychosocial support interventions for children in Jordan (i.e. beyond only UNICEF partners but in the sector as a whole), both in camps and host communities.
- H. To assess the **quality** of UNICEF's psychosocial response, in relation to the Interagency Steering Committee (IASC) Guidelines on Mental Health and Psychosocial Support (MHPSS) and the CPWG Minimum Standards for Child Protection in Humanitarian Response, based on the Inter-agency Guide to the Evaluation of the Psychosocial Programming in Humanitarian Crises and other quality benchmarks including gender mainstreaming principles.
- I. To assess the **coherence** of psychosocial support intervention with the UNICEF Core Commitments for Children in Humanitarian Action, CPWG Minimum Standards for Child Protection in Humanitarian Response, Syrian Regional Response Plan, No Lost Generation Strategy, and UNICEF Jordan's Country Programme Document (2013-2017)
- J. To determine the extent to which UNICEF/partners PSS response is providing an entry point to overall protection interventions to address **CP&GBV** issues, as well as entry points for education and youth interventions. To determine the extent to which extent the programme built on existing resources and capacities of communities.
- K. To assess the **appropriateness and social acceptability** of the approach as implemented in Jordan and to determine beneficiary and stakeholder **perceptions** of the overall response, especially children, parents and communities.
- L. To document main lessons learnt and propose recommendations to deliver PSS services in a more effective and efficient way, in particular suggesting options for more

integrated programming (e.g. increased referrals to other CP response (as needed to address vulnerabilities and risks of violence, abuse, exploitation), schools, informal education and youth services, etc) and for further harmonization and capacity development of partners.

### 3. CONTEXT

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Since March 2011, political and civil unrest in Syria has resulted in over 120,000 deaths, of which nearly 11,000 are children, and over 2.2 million registered displacements into surrounding and nearby countries, of which nearly a million are children. Over 9.3 million Syrians remain in need and 6.5 million remain displaced inside Syria creating the potential for further outpourings of refugees into surrounding countries. As of beginning February 2014, 591,922 Syrians have been registered as refugee in Jordan with 52.53 per cent being children.<sup>1</sup> According to UNHCR registration data, more than 80% of all Syrian refugees in Jordan are living in host communities, with Amman and Irbid Governorates alone covering approximately 68% of the urban refugee population, while rest are in camps. Moreover, as a consequence of the increasing cost of housing and scarce livelihood opportunities, many families are moving to small villages in the outskirts of the big cities, to the poorest governorates such as Zarqa and Balqa, or to Palestinian camps in Irbid and Amman. In these areas services for Syrian refugees are dramatically lacking or completely absent which entails considerable psychosocial consequences for children and their families.

Irrespective of where Syrian refugees are living, their lives, especially those of children, are being shaped by violence, displacement, and a persistent lack of opportunities. The crisis is impacting children physically, psychologically, and socially.

Children affected by this emergency are showing many psychological symptoms, including withdrawal, anxiousness, fear, denial, anger, sadness, restlessness, and regression. They often experience sleeplessness, sadness, grief, shock, nightmares, and hyperactivity.<sup>2</sup> The prolonged displacement is severely impacting the psychosocial well-being, education, development and health of children. The number of children requiring support is increasing whilst parents and other caregivers who are also affected by the Syrian conflict are finding it difficult to support their children and seek the support they themselves need.

An assessment conducted by IMC-UNICEF in July 2013,<sup>3</sup> explored the impact of violence and displacement on conflict-affected adolescents in Za'atari refugee camp. The survey found that 76% of adolescents sampled were not in school, 32% lived in female headed households (FHH), and 3% were unaccompanied, all risk factors which could compound situations of psychosocial instability or vulnerability. The survey assessed locally-derived mental health problems, and found that of the local symptoms identified, children most often experienced *hazzon* (grief) and *khof* (fear), while they sometimes also experienced *ekte'ab* (depression), *tawattor* (tension), *asabi* (nervousness).<sup>4</sup> Adolescents in general, particularly girls, reported concerning symptoms of emotional problems and a significant number reported behavioural issues.

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<sup>1</sup> UNHCR Registration database: <http://data.unhcr.org/syrianrefugees/country.php?id=107#>

<sup>2</sup> IMC-UNICEF. Child Protection, Mental health and psychosocial assessment of Adolescent in Zaatari Camps. July 2013.

<sup>3</sup> A similar assessment was conducted in August 2012 by IMC-UNICEF in Zaatari as well,

<sup>4</sup> IMC-UNICEF. 2013. Assessment of Mental Health, PSS and Child protection issues in Zaatari. July 2013

When asked about problems faced due to the camp life or war, the vast majority of adolescents responded that they faced problems in dealing with camp life, which negatively contributed to their psychosocial wellbeing. They also reported regularly experiencing fear, whether from living in the camp, of the war, or due to other specific risks and fears. The top self-identified priorities of adolescents were fear, feeling sad, grief from loss or separation, and child abuse. The assessment found that a large portion of the sampled adolescents coped with these stresses through withdrawing and crying, both demonstrating the need for structured psychosocial activities to cultivate positive coping, and support to enable children and adolescents to enhance self-protective skills and strategies.<sup>5</sup>

As part of Syria Regional Response Plan (RRP) and UNICEF's Country Programme Action Plan, UNICEF Jordan Country Office has been working through its implementing partners to put in place age appropriate psychosocial support response targeting children and their families, both in camps and host communities, in order to strengthen their coping mechanisms and resiliency. The overall psychosocial support response is based on the Interagency Steering Committee (IASC) Guidelines on Mental Health and Psychosocial Support (MHPSS)<sup>6</sup>, UNICEF's Core Commitments for Children in Humanitarian Action<sup>7</sup> and CPWG Minimum Standards of Child Protection in Humanitarian Action.

The purpose of the psychosocial support response is to protect Syrian girls and boys from psychosocial distress, abuse, violence, exploitation and neglect, through community supported child friendly spaces and community based child protection mechanisms and processes. UNICEF and partners are working to provide structured activities that are carried out in a safe, child-friendly, inclusive and stimulating environment. All child protection interventions are integrating a psychosocial support response in order to ensure that Syrian children and their families have access to age appropriate psychosocial support.

The objective of the psychosocial support response is to work towards minimising risk factors and strengthening the protective environment by providing children and their family members with free, safe and confidential access to psychosocial support services through child and adolescent friendly spaces. UNICEF is supporting interventions to ensure that the following objectives are achieved for Syrian children and their families living in Jordan, namely;

- Normalising daily life and reconnecting children with their family members, friends and neighbours
- Fostering social connections and interactions, including in situations where children are separated from their family or community of origin
- Strengthening key child protection capacities (PSS, identification and referral of CP and GBV) in emergency-affected areas
- Establishing and enhancing well-functioning and effective coordination and referral mechanisms among national and international protection partners in emergency affected areas
- Providing psychosocial support to children and their family members

<sup>5</sup> Ibid.

<sup>6</sup> Interagency Steering Committee (IASC) Guidelines on Mental Health and Psychosocial Support (MHPSS): [http://www.who.int/mental\\_health/emergencies/guidelines\\_iasc\\_mental\\_health\\_psychosocial\\_june\\_2007.pdf](http://www.who.int/mental_health/emergencies/guidelines_iasc_mental_health_psychosocial_june_2007.pdf)

<sup>7</sup> UNICEF. Core Commitment for Children in Humanitarian Action. [http://www.unicef.org/publications/index\\_21835.html](http://www.unicef.org/publications/index_21835.html)

- Building on and encouraging children's and community's innate resilience to crisis
- Providing specialised and non-specialised psychosocial support children in need of such support

The IASC guidelines recognize that almost all war-affected and displaced children will need some sort of psychosocial support. While the majority of the children in such situations require non-specialised PSS, experience shows that a small number of children (5 to 10 per cent) require more focused, specialized support and approximately 3% of the children may suffer from severe mental disorders and require clinical intervention. The IASC guidelines recommend that these different support needs be provided in the context of the different, complementary layers of support. This approach considers children as active agents who engage with challenges related to their psychosocial well-being and make an effort to cope and adapt to manage those challenges. The response based on IASC guidelines reinforces social and environmental factors that help children regain healthy psychosocial development and resilience in the face of challenging circumstances. Material and social needs, along with safety and security, are key factors to ensure psychosocial well-being and are recognized as part of effective PSS.

UNICEF is supporting psychosocial support response targeting children and their families through a variety of partners who provide a layered response based on the IASC guidelines. The overall psychosocial support interventions cover preparedness, response and early recovery phases of the emergency. The response includes building capacities of the communities and frontline workers, provision of age appropriate services, integrating PSS in child protection intervention, and ensuring/supporting effective coordination in the sector. Services are offered to children and their families through a network of over 100 child and adolescent friendly spaces, with activities ranging from simple recreational activities, through playgrounds, to structured psychosocial support interventions aimed specifically at strengthening resiliency and coping mechanisms, to the provision of specialised PSS, and case management support for children who have suffered from psychological harm, including unaccompanied and separated children.

While keeping in mind the geopolitical situation in the region, it is likely that at a portion of the Syrian refugee population will continue to remain in Jordan for some time. While resources are anticipated to become increasingly scarce as the situation of displacement becomes protracted, it will be imperative to invest available resources into interventions which are effective in improving the psychosocial well-being of children and their families, and which build on local capacities and positive coping mechanisms in order to strengthen their sustainable in the longer term. Currently, UNICEF is helping children and their families to access psychosocial support services in camps and host communities through community supported child/adolescent friendly spaces and community based child protection committee in camps and host communities. Since the onset of Syrian crisis, UNICEF's psychosocial support response has reached close to 200,000 children and 90,000 members of their families. Moving into 2014, UNICEF will continue to support efforts aimed at improving psychosocial well-being of children and their families and to strengthen resiliency and coping mechanisms.

#### 4. SCOPE OF THE EVALUATION

The assessment will focus mainly on the interventions being directly implemented by UNICEF or by its implementing partners in four existing refugee camps (Zaatari, Cyber City, King Abdullah Park and EJC camps) and selected locations in seven governorates of Jordan. The overall PSS response for Syrian refugees in Jordan is being implemented through 50 child and adolescent friendly spaces and 11 recreational activity centres/playgrounds in camps, and 60 child and family protective places in host communities. On average, some 12,000 children, including Jordanian/Palestinian children, attend these safe spaces every week. Additionally, a specialised programme for more focused PSS is being implemented through case management services provided by three partners in camps and host communities.

The interventions by all partners of the UNICEF supported PSS response will be the target of this assessment. The team will be provided with a mapping of all UNICEF supported safe spaces for children and families. Additionally, the team will also receive copies of all the agreements, field visit reports, training manuals, results from pre and post questionnaires etc. While all stakeholder are important, special emphasis will be placed on ensuring that children (both boys and girls) who are direct beneficiaries of the interventions are heard, enabled to communicate their priorities and needs, and participate in the evaluation process. Other stakeholders whose participation will be important to assess the impact of the response include parents (both mothers and fathers) of those children who are participating on response activities. Local community leaders, frontline workers, volunteers working with the response, members of child protection committees, religious leaders, youth and social workers will also be consulted in assessing the impact of the response.

Further to assessing the real impact of the project, an identical control group of villages/area in host communities not benefitting from PSS support services will also be identified. The specific criteria of the control villages/area will be discussed at a later stage once villages/areas have been identified to serve this purpose. These control villages/areas should not be target villages/area of any other identical programme being supported by either UNICEF or any other international and national organisation.

## 5. EVALUATION CRITERIA

The evaluation criteria to be used will be the standards OECD-DAC covering relevance, efficiency, effectiveness, impact and sustainability. Additionally, specific gender equality, HRBAP, and humanitarian response standards and evaluation criteria which address coverage, coordination, coherence, appropriateness, quality and protection will also be used. The assessment should address some of the fundamental questions provided in the “Inter-agency Guide to the Evaluation of the Psychosocial Programming in Humanitarian Crises”<sup>8</sup> some of the key questions under each objective are below.<sup>9</sup> These are just the broad questions and a more detailed sub set of questions would be discussed at a later stage.

### 5.1 RELEVANCE

- Did the program articulate objectives related to changes in children’s well-being and lives, and that of their family and community?

<sup>8</sup> UNICEF. 2011. Inter-agency Guide to the Evaluation of the Psychosocial Programming in Humanitarian Crises

<sup>9</sup> The questions provided below are for guidance only and are not intended to be exhaustive. The questions could be replaced by the consultant while submitting the proposal to UNICEF.

- Were clear needs defined with respect to required ‘levels’ of psychosocial support?
- To what extent were potential beneficiaries involved in develop the programme?

## 5.2 EFFICIENCY

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- Did the actual or expected outcomes justify the costs incurred?
- Have the resources been spent as economically as possible?
- What was the cost of the response per child beneficiary by the end of 2013?
- Did the response activities overlap and duplicate with other similar interventions, either nationally-funded or donor-funded?

Page | 7

## 5.3 EFFECTIVENESS

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- What were the achievements in terms of improving psychosocial well-being of Syrian children, both planned and unplanned?
- Have stated program outcomes been achieved?
- What difference has come about for beneficiaries in terms of skills and knowledge, emotional well-being, and social well-being?
- What factors contributed to success or failure with regard to targeted changes?
- How extensive, effective, and efficient is the transfer of knowledge and intervention approaches to INGOs, NGOs and CBOs, government actors?
- To what extent has the NGO collaboration promoted good working relationships with the government local administration to collaborate on community development issues?
- Were the response M&E framework and processes adequate to measure response outputs, outcomes, and impact? Were expected results clearly stated and measurable through identifiable indicators?
- Was there consensus among UNICEF and its partner about response purpose and objectives? Did all stakeholders buy-in to the stated results?

## 5.4 IMPACT

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- Has the central goal of the project – the needs that provided the rationale for intervention – been met?
- What lasting changes – attributable to programming — can be identified in the lives of individuals, families, communities and the broader environment?
- Did any negative changes result from programming?

## 5.5 SUSTAINABILITY

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- To what degree did the response identify and build on existing national, local, civil society, government capacities and positive coping mechanisms?
- Is it likely that the response achievements will be sustained after the withdrawal of external support?
- How best to sustain the achievement of the response
- What new capacities within services or communities have been established or restored?
- Are these capacities being actively used in the psychosocial support and development of children?



- To what extent have the PSS response decision making bodies (government, civil society, development agencies) and implementing partners undertaken the necessary decisions and course of actions to ensure the sustainability of the PSS? To what extent have the systems been strengthened?
- Do the partners have sufficient financial capacity to keep up the benefits produced by the programme

## 5.6 COVERAGE

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- Has programming reached all geographical areas targeted?
- Have potentially vulnerable or marginalized children and communities been reached?
- Have the needs and capacities of different age groups been appropriately addressed?

## 5.7 COORDINATION

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- Have agencies worked well together towards the common goal of improved psychosocial well-being amongst children? What were the coordination mechanisms and did they help?
- Have agencies developed common strategies and approaches, based on existing minimum standards and guidelines?
- Have agencies effectively and jointly identified and addressed gaps in geographic or vulnerable/at risk group coverage?
- Have agencies developed effective referral mechanisms to other relevant sectors and services, both in child protection and beyond?

## 5.8 COHERENCE

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- How are the response purpose and overall objectives consistent with and supportive of child protection related Core Commitments for Children in Humanitarian Action, Syrian Regional Response Plan, No Lost Generation Strategy, IASC Guidelines on MHPSS, the Minimum Standards for Child Protection in Humanitarian Response, and UNICEF Jordan's Country Programme Document (2013-2017)?
- Were the interventions under the response age and gender appropriate?
- To what degree were the response interventions culturally and socially appropriate?
- What are the socio-cultural barriers to the approach adopted by UNICEF and its partner in delivering PSS, and how has UNICEF and partners worked to identify and address these barriers?

## 5.9 PROTECTION

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- Did the response contribute to protecting children, boys and girls of different ages, by strengthening the child protection mechanisms such as community based child protection structures, provision of services, community/social norms etc?
- To what extent have UNICEF and its partners integrated broader child protection and GBV issues into the design and implementation of its interventions?
- To what extent and how have UNICEF and partners contributed directly or indirectly towards identifying, highlighting and addressing other forms of violence, abuse and exploitation against children?

- How and to what extent have UNICEF and partners' interventions contributed to prevention and response to gender based violence and violence against children?
- How have UNICEF and partners ensured community ownership of the response?
- What has been the impact of placing community based child protection committees in the catchment area of each child and adolescent friendly spaces?
- What areas of stronger integration of CP, GBV, education and youth programming can be identified for future programming?

## 6. APPROACH AND METHODOLOGY

A specific and detailed assessment design should be presented to UNICEF by the team based on the following mixed methods of information gathering:

- a) Interviews with key informants
- b) Focus group discussions with children, boys and girls, of different ages
- c) Specific FGD with male and female parents/caretakers of children attending the response activities
- d) Structured and semi-structured interviews with relevant stakeholders
- e) Desk review of programme documentation, including financial records (both from partners and UNICEF)
- f) Participant observation
- g) Case-studies based on the most significant change technique

The list above is for reference only. However, the team is not supposed to create new tools and methods to access psychosocial well-being of children. *Methodologies and Tools for Measuring Psychosocial Wellbeing of Children in Humanitarian Contexts* (February 2014: Sarah Robinson, Janna Metzler and Alastair Ager) and *Interagency Psychosocial Evaluation Project* (UNICEF: 2011) from Palestine covered psychosocial well-being indicators which could easily be adjusted to the context.

The evaluation will cover all four existing refugees' camps and all seven northern and central governorates of Jordan where UNICEF has supported psychosocial support response in 2012 and 2013. UNICEF will provide a list of partners and a list of key informants once the evaluation process starts. Children, community members and professionals working in the field should be extensively consulted during the evaluation using different appropriate methods. Given the size of evaluation, a multi-disciplinary team of consultants will be best placed to conduct this exercise. The evaluation team should propose a design based tools and methods already available, while ensuring that this design suits the specific objectives of this context and evaluation.

Team will start with a review of UNICEF and its partners' relevant internal documents on the response, including but not limited to project proposal documents, quarterly reports submitted by partners to UNICEF, UNICEF weekly/bi-weekly sitreps, partners' own internal evaluation reports, and NGO/INGO partner and international literature related to PSS interventions and assessment. The team will be responsible for collecting data in the field with minimum involvement of partners or UNICEF's staff. However, UNICEF will facilitate the data collection and field work required for this exercise. While the assessment criteria have been set above, UNICEF would like the team to use the most significant change technique during all the methods adopted for the assessment.

## 7. GOVERNANCE AND ACCOUNTABILITY

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Consultants' team will report to UNICEF Chief of Child Protection (or OIC) at UNICEF Jordan Country Office as first line supervisor, and to the PM&E Chief as second line. The Chief of Child Protection with support from the UNICEF Child Protection in emergencies team will be responsible for the supervision of consultants. The team will work closely with the response partners and beneficiaries during the assessment. Consultants are expected to use their own laptops, printer, scanner etc. and arrange for insurance coverage for any eventuality throughout the entire duration of the consultancy. Consultants will be responsible for sending covering letters for data collection etc. UNICEF and its partners will provide specific information on the target communities and stakeholders and other such information, and support any coordination which might be necessary. UNICEF will not any make any local travel arrangements for the team. However, all expenses incurred on local official travel will be reimbursed upon actual invoices. All local travel should be discussed and approved by UNICEF in advance.

Page | 10

Comments on the inception and draft reports will be provided by UNICEF and its selected implementing partners. The results of the draft report will be shared with a committee specifically formed to advise on the evaluation process, which will consist of the Chief Child Protection Section (or OIC), the Child Protection Specialist on Child Protection in Emergencies (or OIC), the Chief of PM&E (or OIC), Regional Child Protection Advisor (or OIC), Deputy Representative (or OIC), lead consultant and two designated representatives from implementing partners one each from Save the Children International and International Medical Corps-UK. Any dispute on the process or disagreements on any other aspect of this assessment will also be solved by this committee.

## 8. GUIDING PRINCIPLES AND VALUES

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The individual consultants and team working on this project must demonstrate personal and professional integrity during the whole process of the evaluation. He/she/the team must respect the right of institutions and individuals to provide information in confidence and ensure that sensitive data cannot be traced to its source. Further, the team must respect ethics of research while working with children including using age appropriate consent forms, age appropriate data collection, and principle of do no harm. Furthermore, the team and its members must take care that those involved in the evaluation have an opportunity to examine the statements attributed to them. The evaluation process and consultants must be sensitive to beliefs, manners, and customs of the social and cultural environment in which they will work. Especially, the consultants must be sensitive to and address issues of protection, discrimination and gender inequality. Furthermore, the consultants are not expected to assess the personal performance of individuals, and must balance an assessment of management functions with due consideration of this principle. Finally, if the consultants or team uncover evidence of wrongdoing, such cases must be reported discreetly to the appropriate investigative body.

## 9. EVALUATION TEAM QUALIFICATIONS

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UNICEF is looking for an experienced multi-disciplinary team of consultants (both international and national) with experience in designing and conducting evaluation for psychosocial support responses in emergency contexts. Both institutions and individuals are eligible to apply for this. However, in case of a group of consultants who are not associated

with an institution, UNICEF would only sign the agreement with lead consultant. The team should have the following qualifications:

- a) All team members should have Master's degrees in Sociology, Anthropology, Social Sciences, statistics or a related field (CVs required)
- b) Each member should have around 7 to 10 years' experience in programme evaluation and must have completed at least two high quality programme evaluations in that period, at least two of them being related to psychosocial support response in emergencies and in gender mainstreaming in humanitarian contexts. Production of sample work is required.
- c) Extensive national and international experience in assessing child protection and psychosocial responses in emergencies
- d) Experience in the use of participatory appraisal techniques in data collection, sensitive to gender issues
- e) Strong familiarity with the international literature and issues related to MHPSS in humanitarian contexts
- f) Familiarity with the socio-cultural context of Middle East and the cultural, political and religious sensitivities relevant to the Syria crisis
- g) Excellent writing and communication skills in Arabic and English (Reference and production of sample work required), preferably be a native Arabic speaker with sufficient experience in conducting focus group discussions in all settings
- h) Significant professional experience working with Arabic speaking communities in North Africa and Middle East
- i) Solid background knowledge on UNICEF work in emergencies, especially related to child protection
- j) Expertise in results- and human rights based programme management

## 10. DELIVERABLES AND SCHEDULE

The outputs and reporting requirements will include the following;

- a) An inception report in English at the beginning of the assignment for review and approval by Steering Committee
- b) High quality evaluation report with an executive summary suitable for national and international circulation and reporting information of sufficient value for informed decision-making, learning, and accountability both in Arabic and English
- c) The report must include action-oriented recommendations, required adjustments, potential alternatives ways of implementation and lessons learnt from the project supported by facts from the field including 8 case studies not exceeding two pages each
- d) A maximum ten slide PowerPoint presentation with graphs highlighting the main points of the evaluation to be used to brief both government, non-governmental partners and donors in both Arabic and English
- e) The report should be in line with the UNICEF-Adapted UNEG Evaluation Reports Standards should be between 70 to 90 pages in length excluding an executive summary and all annexes
- f) Two hard copies of the final report in Arabic and English and an electronic version of the same in Microsoft Word in both languages. Final Arabic translation of the report must be of high quality and subject to clearance from by Steering Committee

The Evaluation report should systematically answer the key evaluation questions posed. It should fairly and clearly represent the views of the different actors/stakeholders. It should clearly give the conclusions and recommends in a way that is substantiated by evidence.

A tentative time frame for the evaluation is provided below. The evaluation is expected to be completed within **four months**.<sup>10</sup> This might be subject to change depending on the prevailing situation on ground at the time of the evaluation;

Activity	Duration	Date
Signature of contract	One day	June 01
Presenting to UNICEF a detailed Inception report describing the assessment design , including, detailed work plan, methodology, the outline of the final report in addition to the inception report in English	Two weeks	June 1 to 15
Preliminary discussions with Steering Committee on project approach, theories, and activities of the project	One week	June 16 to 23
Literature review	One week	June 23 to 31
Adopting tools and field work including FGDs, interviews etc	Four weeks	July 1 to 30
Data analysis and writing of first draft of the report in English	Two weeks	August 1 to 15
Comments and feed-back of first draft	One week	August 16 to 23
Incorporation of comments and produce second draft	One week	August 23 to 30
Comments and feedback on second draft in English	Three days	Sept 1 to 3
Preparation of third draft for validation in English and Arabic	Two weeks	Sept 4 to 19
Validation of the third draft, incorporation of validation comments and preparation and submission of final report in Arabic and English	One week including a daylong meeting of the Committee mentioned above	Sept 20 to 27
Preparation of the PowerPoint Presentation with graphs in Arabic and English	One day	Sept 28
Submission of the final reports with PowerPoint Presentation both in Arabic and English to UNICEF	One day	Sept 29

## 11. BUDGET AND PAYMENTS

All interested institutions or group of consultants are requested to include in their submission detailed costs including:

- a) Daily rate including hours per day

<sup>10</sup> Consultants and interested institutions should indicate the expected time to complete the assessment in their proposals.

- b) Expenses (please include all costs that are to be charged to UNICEF) to be agreed prior to commencing project
- c) Any additional requirements needed to complete project or that might have an impact on cost or delivery of products
- d) The consultants would be required to use their own computers, printers, photocopier etc.

Payment will be based on deliverables/outputs as follows:

- a) 30% upon clearance of an inception report by Steering Committee
- b) 70% upon clearance of final deliverables by Steering Committee as spelled out in the TOR

## 12. STRUCTURE OF PROPOSAL AND SUBMISSION GUIDELINES

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All request for proposal will be weighed according to the technical (60%) and financial considerations (40%). Further, the technical part of the proposal will be weighted based a scoring system with 60 points. Proposal scoring 70% will be cleared for technical part of the submission. It will cover the following;

1. Overall Response (12 points): General adherence to Terms of Reference and tender requirements
2. Key personnel and company (24 points): Team members meet academic requirements; team meets minimum years of experience requirement; team has previously conducted similar work; company is properly registered and/or has required certifications, memberships, etc.
3. Proposed methodology and approach (24 points): Deliverables are addressed as per TOR; methodology and tools proposed; proposed timelines are met

Only those financial proposals will be opened which have been technically accepted according to the above criteria. Financial proposal will be weighted based on the clarity and appropriateness.

Each RFP should include the following:

- a) Cover letter giving details of the applicants' suitability for the consultancy
- b) Technical proposal based on the above criteria
- c) Budget proposal as listed above under "budgets and payments"
- d) Curriculum vitae for all team members in English, AND filled in UN Personal History Form (P11) in MS Word format including detailed work experience, education/degrees and current contact information (download P11 [here](#))

All proposals should be sent to UNICEF MENARO Bids at [menarobids@unicef.org](mailto:menarobids@unicef.org) or hand delivered at: *UNICEF Jordan Country Office, 15 Abdulqader al Abdul Street, Tilla al Ali, Amman, 11811. Jordan.* Technical and Financial proposals should be submitted in two separate sealed envelopes. All submissions with complete set of documents should reach UNICEF Jordan no later than 23:59 hours (Amman time) on May 26, 2014. A selection committee will review all applications as they arrive. All proposals must meet the minimum requirements described above, and those unable to meet these requirements will not be considered.