Scope of Work for STRENGTHENING CAPACITY OF WOMEN RELIGIOUS IN EARLY CHILDHOOD DEVELOPMENT PROJECT (SCORE- ECD II) Final Evaluation

1.0: Background: CRS and Implementing Partners
Catholic Relief Services (CRS), the official international humanitarian agency of US Conference of Catholic Bishops (USCCB) was founded in 1943 and carries out the commitment of the Bishops of the United States to assist the poor and vulnerable overseas in over 100 countries around the world. CRS programs assist persons based on need, regardless of creed, ethnicity or nationality and works through local church and non-church partners to implement its programs. Our Catholic identity is at the heart of our mission and operations.

1 C. Project Background
As part of the agency Health Strategy, CRS invests in child health and wellbeing, benefiting children under the age of 24 months while prioritizing interventions in Early Childhood Development (ECD) and social service systems strengthening. CRS promotes a holistic approach to health—with a goal of not only saving lives but also optimizing children’s physical, emotional and cognitive development. Interventions are age appropriate and operate across multiple levels and actors facilitating multi-sectoral integration with agriculture, microfinance, education and health.

With support from Conrad and Hilton Foundation, SCORE-ECD Phase II project, implemented through Catholic Sister religious organizations towards achieving the goal of children under 2 years (CU2) in Kenya, Malawi and Zambia thrive in a sustainable culture of care and support. Phase II of the project leveraged learning from the first phase of SCORE-ECD and focus intervention approach in integrated ECD by using the Care Group’s model. It also focused on strengthening the technical and organization capacity of Sister institutions. Based on a theory of change that argues; IF mothers and caregivers are assisted to help their children under 2 attain age-appropriate developmental milestones, and IF Sister organizations build their capacity to sustain ECD programming at national and subnational levels THROUGH assuming greater ownership of ECD services THEN Children under 2 (CU2) in Kenya, Malawi and Zambia will thrive in sustainable culture of care and support; Figure 1 below depicts the project’s results framework.

2.0: SCORE ECD Project Goal and Strategic Objectives

**Goal: Children under 2 (CU2) in Kenya, Malawi and Zambia thrive in sustainable culture of care and support**

**SO1:** Children under 2 attain age-appropriate developmental milestones

- **IR 1.1:** Increased practice of key WASH and Infant and Young Child Feeding (IYCF) behaviors by
- **IR 1.2:** Increased adoption of key early stimulation and positive parenting behaviors by Pregnant and
- **IR 1.3:** Increased practice of key health care seeking behaviors by Pregnant and Lactating Women (PLW) and
- **IR 1.4:** Pregnant mothers and mothers of children under 2 demonstrate reduced levels of mental health conditions (stress, post-partum depression)

**SO2:** Sister organizations sustain ECD at national and subnational levels

- **IR 2.1:** Sisters deliver high quality ECD services
- **IR 2.2:** Sister organizations mobilize and efficiently manage human, financial, and material resources
- **IR 2.3:** Sister organizations network and advocate for high quality ECD policies and programs

**Crosscutting Theme:** Stronger sister organizations assume greater ownership
3.0: Purpose and Objectives of the Final Evaluation

SCORE ECD II project is phasing out by the end of September 2021. Therefore, the purpose of the final evaluation is to assess how successful the project was in implementing its strategic objectives indicated above.

The FE provides an opportunity for all project stakeholders to take stock of accomplishment to date and to listen to the beneficiaries at all levels, including mothers and caregivers, other community members and opinion leaders, health workers, health system administrators, local partners, other organizations, and donors.

The specific objectives of the final evaluation are:

- To what extent are Caregivers equipped with the capacity to enable children under two to attain age-appropriate developmental milestones?
- To what extent have congregations/associations increased their ECD technical capacity, organizational sustainability, and networking/advocacy to fulfill their ministry?
- To what extent have sister organizations assumed greater ownership of ECD services?

Time for conducting the final evaluation

The final evaluation will be done from July to September 2021. All the activities and procedures of the final evaluation will be conducted based on COVID-19 protocols.

Project locations and target participants for the final evaluation

Generally, the sisters work across the country in Kenya, Malawi and Zambia, in each of the three countries and for this reason, each country program in consultation with their respective association, will identify specific sisters from target congregations/association and stakeholders to be interviewed during the evaluation.

Intended use of final evaluation results

The primary users of the final evaluation and recommendations will be internal and external stakeholders (e.g. CRS, governments in Kenya, Malawi and Zambia, congregations/associations, national & international NGOs). The findings will be shared with Conrad N. Hilton Foundation and the results of the final evaluation will also inform future ECD project design.

4.0: Proposed Methodology - Approach and design of the final evaluation

The evaluation methodology will use mainly qualitative methods, such as, Focus Group Discussions (FGDs) Key Informant Interviews (KIIs) to solicit feedback from sister associations, congregations, health workers, community members, community leaders, caregivers, CHVs and CRS staff. Select field visit and observation sites (with range of ECD experiences) for each site that can be completed in a day. There will be a desk review of project documents and reports in support of the review. After collecting this data, a one-day learning event CRS and partners will be held at the country level to validate the findings.

Data management and analysis

The consultant will use MS office and qualitative data management packages like Nvivo v.10, to analysis the data. Any audio recordings, or transcriptions, of all interviews notes on coding and interpretation and notes on any theories built up or any other conclusions reached will be stored in accordance with the CRS Data Protection Policy at the conclusion of the exercise.
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5.0. SCORE –ECD Final Evaluation Plan: Methods to Evaluations Questions/Objectives

Methodology

The evaluation methodology consists of a mixed-methods approach using both quantitative and qualitative data. The approach comprises both a desk review of secondary data sources and the collection of qualitative data to complement existing data. The written design of the evaluation must be further defined and specified by the final evaluator (e.g., number of key informant interviews, focus groups discussions, observations, and locations) and must be shared with project stakeholders and implementing partners for comment before the evaluation commences. Catholic Relief Services – in Kenya, Malawi and Zambia will facilitate this sharing and feedback.

Secondary Data:

The final evaluator will review project reports (e.g., Detailed Implementation Plan; annual reports; Knowledge practice and coverage (KPC), HOCAI Assessment report, Research study report in Kenya, and baseline; and final survey and any monitoring reports) to assess the quality of quantitative and qualitative data and make assessments of project results in relation to the project design and targets set. The final evaluator should also review key Hilton strategic documents at the global and national levels relevant to the content of project. All relevant policy and strategy documents at the national level (e.g., MOH policies and strategies) are also crucial and should be used and referenced.

Qualitative Data:

In-depth qualitative interviews or focus group discussions may be conducted (depending on the feasibility due to COVID 19) with stakeholders, including project staff, MOH, Sister Congregations and Associations and community-based organizations, district health teams, community- and facility-based health workers, community members, community leaders, and mothers (exit interviews). If possible, the assessment will also include observations of activities supported by the project. This will involve site visits to one or more implementation areas. It is recommended that the final evaluator randomly select communities to visit from a list provided by Catholic Relief Services. However, purposive sampling may be warranted in addition to explore certain areas in more depth to investigate particular results (e.g., high or low performance or unexpected results).

Evaluation Questions

The final evaluator and the evaluation team will use existing data collected or compiled during the life of the project, as well as additional data collected during the evaluation to answer the following questions:

1. To what extent did the project accomplish and/or contribute to the results (goals/objectives) stated in the DIP?
   - What is the quality of evidence for project results?
   - How were results achieved? If the project improved coverage of high-impact interventions simultaneously, what types of integration enabled this? Specifically, refer to project strategies and approaches and construct a logic model describing inputs, process/activities, outputs, and outcomes. Describe the extent to which the project was implemented as planned, any changes to the planned implementation, and why those changes were made.

2. What were the key strategies and factors, including management and partnership issues that contributed to what worked or did not work?
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- What were the contextual factors such as socioeconomic factors, gender, demographic factors, environmental characteristics, baseline health conditions, health services characteristics, and so forth that affected implementation and outcomes?
- What capacities were built, and how?
- Were gender considerations incorporated into the project at the design phase or midway through the project? If so, how? Are there any specific gender-related outcomes? Are there any unintended consequences (positive and negative) related to gender?

3. Which elements of the project have been or are likely to be sustained or expanded? e.g., through institutionalization or policies

- Analyze the elements of scaling-up and types of scaling-up that have occurred or could likely occur (dissemination and advocacy, organizational process, costs and/resource mobilization, monitoring and evaluation using the Expand Net resource for reference).

See Table 1 Attachment (Questionnaires be developed as per the SO)

6.0: Evaluation Roles & Profiles

The final evaluation team will include only an internal consultant (he or she should be from the SCORE ECD countries) and the SCORE ECD Program team.

Roles of CRS and Resources:

- Provide SCORE ECD related documents
- Review interview guides and make suggestions for improvement.
- Select field visit and observation sites (with range of ECD experiences) and number of interviews or FGDs for each site that can be completed in a day.
- Coordinate all in-country logistics for the consultant including airport transfers if needed, local travel and accommodations. The country program managers assist with communication with implementing partners-congregations/associations.
- Ensure an independent local translator, where applicable.
- Pay the consultant
  - 33% of estimated total fees at the beginning of phase one of the deliverables July 1, 2021
  - 33% of estimated total fees upon receipt of phase two of the deliverables
  - 34% of estimated total fees upon receipt of phase three of the deliverables
- Review draft report and provide timely feedback to consultant
- Disseminate the outcomes of the report findings and recommendations with MoH and other country stakeholders
- Submit Final Evaluation Report to The Hilton Foundation

The Consultant’s responsibilities will include:

- Provide feedback to the Scope of Work for the final evaluation
- Read project documents before traveling to the field
- Developing the document review report, interview guide for focus group discussions (FGD) with Sisters on ECD interventions, organizational sustainability, network and advocacy, the interview

1See Table 1 in the document here: [http://heapol.oxfordjournals.org/content/20/suppl_1/i18.long](http://heapol.oxfordjournals.org/content/20/suppl_1/i18.long)

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guide for key informant interviews with master trainers, partners, caregivers/community health volunteers (CHVs) and national associations of the three countries.

- Conduct interviews and FGDs with sampled ECD master trainers, CHVs, caregivers, congregation and association focal point persons in the three countries and relevant stakeholders.
- Capture success stories for future replication and publication
- Gathering the data and analyzing the key informant interviews and the focus group discussion results of the three countries into a comprehensive final evaluation report.
- Draft a short PowerPoint presentation with preliminary findings to be validated by key stakeholders.
- Share draft Evaluation report for review before final report is made.

Report format

The final report is expected to not exceed 30 pages minus annexes and organized as follows:
I. Executive Summary
II. Introduction
III. Evaluation Methodology
IV. Key findings and conclusions
V. Recommendations for future directions
VI. Annexes:
   a. Success stories per country.
   b. Scope of Work
   c. Team Members
   d. List of Interviewees
   e. Methodology
   f. Data collection tools

Please note that the contents of the report will be analyzed, and final payment will only be made upon agreement on the Final Evaluation Report from the CRS Country Program Team, the SCORE ECD coordinator, Head of Programs and the STA & Foundation and Corporate Engagement Manager at CRS HQ.

Key Working Relationship

- The Consultant will coordinate with Head of Programs, SCORE Project Coordinator and the Program Managers of the three countries.

Supervision and Reporting

The Consultant will report directly to the SCORE ECD Project Coordinator and the three country program managers.
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Contact persons

SCORE Cross-Country Coordination

• The SCORE ECD Project Coordinator is the contact person for the consultant. The SCORE Coordinator completes all consultancy paperwork and payment, assists with field communication by accompanying the consultant, and arranges international travel.

CRS Zambia Contacts: Claire Mukumbuta, Sr. Astridah Banda
CRS Kenya Contacts: Tobias Opiyo, Sr. Joyce Nyagucha
CRS Malawi Contacts: Fidelis Mgowa, Sr. Rebecca Mathole
FE Coordinator Three Countries: Sr. Pauline Acayo
### Scope of Work for STRENGTHENING CAPACITY OF WOMEN RELIGIOUS IN EARLY CHILDHOOD DEVELOPMENT PROJECT (SCORE- ECD II)

#### Final Evaluation

7.0 Activities and due dates for the consultant

The final evaluation is scheduled to take place in from July-September 2021 with a suggested timeline of activities as follows:

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person responsible</th>
<th>Number of days</th>
<th>Deliverable</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Phase 1</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Review of SCORE documents – proposal, reports, case stories,</td>
<td>Consultant</td>
<td>7 working days</td>
<td>1-9, July</td>
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<tr>
<td>quantitative evaluation report, Document review/analysis report</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Development of interview questions &amp; tools</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Note: Consultant does this from home</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>Phase 2</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In Kenya</td>
<td>Consultant</td>
<td>1</td>
<td>12th July</td>
</tr>
<tr>
<td>Evaluation design workshop</td>
<td>Consultant &amp; SCORE Team involved in the evaluation</td>
<td>1</td>
<td>13th July</td>
</tr>
<tr>
<td>Data collection - planning and execution</td>
<td>Consultant &amp; evaluation team</td>
<td>5</td>
<td>14th -20th July</td>
</tr>
<tr>
<td>Synthesis</td>
<td>Consultant</td>
<td>2</td>
<td>21st -22nd July</td>
</tr>
<tr>
<td>Debriefing with CPs and key stakeholders /Kenya</td>
<td>Consultant</td>
<td>1</td>
<td>23rd July</td>
</tr>
<tr>
<td><strong>Travel to Malawi</strong></td>
<td>Consultant &amp; Sr. Pauline</td>
<td>1</td>
<td>24th July</td>
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<tr>
<td>Evaluation design workshop/Malawi</td>
<td>Consultant &amp; SCORE Team</td>
<td>1</td>
<td>26th July</td>
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<tr>
<td>Data collection - planning and execution/Malawi</td>
<td>Consultant &amp; SCORE ECD team</td>
<td>5</td>
<td>27th – 31st July</td>
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<tr>
<td>Synthesis</td>
<td>Consultant</td>
<td>2</td>
<td>1st -2nd August</td>
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<td>Debriefing with CPs and key stakeholders/Malawi</td>
<td>Consultant</td>
<td>1</td>
<td>3rd August</td>
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<tr>
<td><strong>Travel to Zambia</strong></td>
<td>Consultant &amp; Sr. Pauline</td>
<td>1</td>
<td>4th August</td>
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<tr>
<td>Evaluation design workshop/Zambia</td>
<td>Consultant &amp; SCORE Team</td>
<td>1</td>
<td>5th August</td>
</tr>
<tr>
<td>Data collection - planning and execution/Zambia</td>
<td>Consultant &amp; SCORE ECD team</td>
<td>5</td>
<td>6th – 11th August</td>
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<tr>
<td>Synthesis</td>
<td>Consultant</td>
<td>2</td>
<td>12th – 13th August</td>
</tr>
<tr>
<td>Debriefing with CPs and key stakeholders/Zambia</td>
<td>Consultant</td>
<td>1</td>
<td>16th August</td>
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<tr>
<td><strong>Travel from Zambia back home</strong></td>
<td>Consultant</td>
<td>1</td>
<td>17th August</td>
</tr>
<tr>
<td><strong>Phase 3</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Data analysis and draft Summative Evaluation report for review</td>
<td>Consultant</td>
<td>10 working days</td>
<td>18th August – 3rd Sept</td>
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Final Evaluation

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<thead>
<tr>
<th>Activities</th>
<th>Person responsible</th>
<th>Number of days</th>
<th>Deliverable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewers (CRS CP, Region and Headquarters)</td>
<td>Eunice / Elena / Selam/ Sr. P</td>
<td>N/A</td>
<td>6th – 10th September</td>
</tr>
<tr>
<td>Include comments and submit final report (soft copy).</td>
<td>Consultant</td>
<td>5</td>
<td>13th 17th Sept</td>
</tr>
<tr>
<td><strong>Total consultancy days</strong></td>
<td></td>
<td><strong>52 days</strong></td>
<td></td>
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</tbody>
</table>

**Deliverables**

**To be delivered at end of Phase 1 (9th July 2021)**
- Final key informant interview and focus group discussion guides
- Preliminary analysis of quantitative data
- Document review report

**To be delivered at end of Phase 2 (17th August 2021)**
- Qualitative data manifest all digital files
- Debriefing slides

**To be delivered at the end of Phase 3 (18th September 2021)**
- Final report
- PowerPoint slides of highlighted findings from final report including case stories on best practices at least 2 per CP.

**8.0 Expression of Interest**

Catholic Relief Services envisages the entire exercise lasting **NOT more than 52 working days**, which includes desk-review, preparation, implementation, report-writing and would like the assignment to commence on **July 1st, 2021**. Interested candidates are requested to submit their application detailing the following:

i) **A capability statement:** State the firm / organization or individual’s experience relevant to the assignment, curriculum vitae of key personnel, appropriate references and relevant testimonials Please state your availability on the relevant dates of the assignment.

ii) **Technical Proposal:** Provide an understanding and interpretation of the terms of reference, proposed time and activity schedule for the proposed activities.

iii) **Financial proposal:** Include all proposed costs in dollars (i.e., consultation fees per day, CRS will pay for the accommodation in Kenya, Malawi and Zambia as well as air tickets and internal travels besides CRS inputs mentioned above).

iv) At least three previous clients and their contacts to act as references

**9.0 Submission of Proposals**

The proposal and budget can be sent to the e-mail address below by **1st May 2021**.

Email: Crskenya-procurement@crs.org.

Subject line: RFP #SCORE ECD II
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11.0 Evaluation and Award of Consultancy

CRS will evaluate the proposals and award the assignment based on technical and financial feasibility. CRS reserves the right to accept or reject any proposal received without giving reasons and is not bound to accept the lowest, the highest or any bidder. Only the successful applicant will be contacted. CRS does not charge any fees from applicants for any recruitment. Further, CRS has not retained any agent in connection with this recruitment.

Final Evaluator Characteristics

The consultant will serve as the evaluation team leader and is welcome to propose additional evaluation team members to round out the evaluation team’s skill set in order to ensure adequate representation of evaluation, technical, geographic, cultural and language skills. Team members, their affiliations, and disclosure of conflicts of interest must be listed in an annex to the evaluation report. The consultant will coordinate closely with the Catholic Relief Services team regarding tool finalization, evaluation methodology, timeline, and draft report finalization.

Research Qualifications

Consultant

The consultant is expected to hold the following qualifications in order to be eligible for this position:

- PhD or a Master degree with over 5 years hands on experience in ECD or related programming from a recognized university in Early Childhood Development, public health, international development, or related social science.
- Sound knowledge of major development issues - child health, ECD, capacity strengthening and institutional capacity development.
- At least 5 years in early childhood development and experience in the formulation, monitoring and evaluation of similar projects.
- Practical experience and demonstrated success in undertaking similar exercises in the last 5 years. Sound Past performance reference from well recognized institutions is preferred.
- Demonstrated high level proficiency in designing and leading qualitative studies with great knowledge of the Ground Theory approaches.
- Computer proficiency with good knowledge of MS office and qualitative data management packages like Nvivo v.10, or Atlas.
- A demonstrated high level of professionalism and an ability to work independently and in high-pressure situations under tight deadlines.
- Excellent analytical and report writing skills coupled with strong interpersonal and communication skills.
- High proficiency in written and spoken English.
- Sound past performance reference from well recognized institutions.