

## Terms of References (ToR)

### For

## Consultancy (International) for Technical Support for System-level Resilience Assessment, titled “Fostering Learning and Adaptation in Resilience building (FLAIRb) Phase II in S3X”

### Background:

#### A. Organization and Program Background

The United States Agency for International Development’s (USAID) five-year Food for Peace program, granted and implemented by CARE Bangladesh, named “SHOUHARDO III,” aims to improve gender equitable food security, nutrition, and resilience of vulnerable people in Bangladesh by 2020. The program is operating in 8 high-risk districts in the Char and Haor regions, 23 Upazilas, and 115 unions of Bangladesh. To sustain program outcomes and impact in line with the sustainability framework, an anticipated cost extension is under review, subject to award from FFP/USAID and subject to availability of resources. With the proposed cost extension, CARE will have the opportunity to implement the SHOUHARDO III Extension (S3X) in Bangladesh through to 2022 to align S3X with USAID’s critical goal of assisting Bangladesh on the journey to self-reliance. The program will achieve enduring change in its extension period for 168,521 Poor and Extremely Poor (PEP) households through programming that layers, sequences, and integrates technical interventions that meet the immediate needs of PEP communities, while also investing in social, economic, and institutional capital to build a foundation for future food security and resilience in target communities.

The program focuses on addressing the availability, access, utilization, and stability of food insecurity as well as the underlying causes that include social injustice and discrimination, lack of participation and voice, and heightened vulnerability to natural disasters and climate change. To achieve this goal, the following five purposes have been designed.

1. Increased equitable access to income for both women and men, and nutritious food for men, women, boys, and girls
2. Improved nutritional status of children under five years of age, pregnant and lactating women, and adolescent girls
3. Strengthened gender equitable ability of people, households, communities and systems to mitigate, adapt to, and recover from man-made and natural shocks
4. Increased women’s empowerment and gender equity at family and community level
5. Provision and utilization of public services (i.e. Local Elected Bodies & Nation Building Departments) for communities, especially for PEP, increased

#### *Overview of SHOUHARDO III M&E in Extension Phase*

Monitoring and evaluation (M&E) are priority areas for the S3X. CARE’s approach to M&E in the S3X phase emphasizes efficient generation and use of information to guide management and strategic decisions. This system will allow the program to accurately assess progress towards its goals and objectives, identify constraints, and adjust interventions as needed. CARE will emphasize data quality through staff capacity building and periodic data quality audits and encourage the use of data for organizational learning and decision-making at all program levels by all stakeholders. CARE’s M&E system for S3X is primarily built on the program’s Log Frame, Theory of Change (ToC), and Indicator Performance Tracking Table (IPTT). The necessary components for such an approach to succeed include: M&E plan with meaningful indicators, appropriate data collection tools, timeline for efficient data collection, and efficient feedback mechanism. However, the M&E system and process are adaptive in its design and functionality. This is to focus on essential requirements, ensuring cost effectiveness and effective resource use. Considering S3X strategy, outcomes, and activities, CARE has already begun to review and redesign the M&E system to capture

program progress and track outcomes. Based on the extension strategy and outcomes, a review is made with the finalized set of indicators and appropriate tools to measure program performance through the extension period. Program staff from CARE and its partners will be involved in implementing the M&E process, sharing findings and decision-making that may result in modifications to program activities and/or implementation strategies.

#### *Monitoring Responsive Service Delivery & Provisioning Model*

During the extension period, S3X activities would mainly focus on building linkages with producer groups and service providers (i.e. public services, private services, localized service providers, and local systems to scale up program activities/interventions). CARE expects that public services (e.g. agriculture/livestock, health, sanitation, infrastructure, DDR) and private services (e.g. markets for inputs, finance for business growth, vaccinators, and specialized input/output buyers/sellers) will be available in a sustained manner to program participants and their communities. In line with that, several training and linkage-building initiatives are planned to strengthen the capacity of service systems during S3X. Thus, the program will monitor and track the functionality of these service models during the extension period.

#### *Description of FLAIRb Phase I Study (Already Completed)*

To track resilience capacities building and wellbeing changes in 680 selected households, CARE has been collecting the panel data/longitudinal cohort data since July 2017 and had planned to end this study in July 2019. The methodology, survey design, instrument design, data management, analysis and learning publication was supported by TANGO. The integrated FLAIRb/longitudinal study was designed to measure the longitudinal effects on adoption of agriculture practices and productivity, women empowerment, and health and nutrition practices of SHOHARDO III beneficiaries. This longitudinal study also tracked changes in household resilience capacities and other adjustments made by households as they were exposed to shocks over the course of three years.

The core research objectives of the longitudinal study were:

1. To measure the longitudinal effects of the program interventions on increased agricultural production and better nutritional status adopting agriculture, livelihood and nutrition practices.
2. To increase understanding of which resilience capacities, in what form and where, have the greatest ability to help households mitigate shocks and stresses and achieve greater food security.
3. To determine if program interventions are effectively contributing to the resilience capacities and inform program decisions on how to adjust interventions accordingly.
4. To provide evidence that allows the program to test and review its theory of change and make adaptive management decisions within the program.

As the SHOUHARDO III project moves into the phase-out stage, the purpose of the FLAIRb data collection and analysis system will be to provide information to support adaptive management decisions, to track the stability and resilience of service delivery systems, and to uncover lessons learned and assess the project close-out strategy.

A proposed second component of FLAIRb phase II will focus on measuring systems-level resilience, particularly in the health, agriculture, and early warning service delivery systems and the provision of services by government agencies and market systems agents. This component will focus on assessing the extent to which project activities during the phase-out stage have strengthened a sustained improvement in systems-level services provided to SHOUHARDO III target populations and communities.

## Objectives:

### B. Assignment-Specific Objectives

Two objectives

1. Conduct two more rounds (December 2019 and July 2020) to test the impact of the programmatic changes on capacities developed and identify areas of remedy
2. Develop a system-level methodology to track the stability and resilience of the three service delivery systems developed by the program as part of its sustainability plan. The program envisions three rounds of data gathering (December 2019, December 2020, and December 2021)
  - Health (public and private service providers)
  - Agriculture (input and output markets and extension services)
  - Early Warning (provision of actionable and timely EW messages to flood prone communities)

Type of data collection and Report	FLAIRb (Phase one) Completed					Proposed/Extended Plan (Phase II in S3X)			Final Report and Documentation
	2017 - 2018		2018 - 2019		2019	2019-2020	2020 - 2021		2021
	Jun-Jul	Dec-Jan	Jun-Jul	Dec-Jan	Jun-Jul	Dec-Jan	Jun-Jul	Dec (20)-Jan (21)	Jan-Jun
HH-level qualitative and quantitative	X	X	X	X	X	X		X	<ul style="list-style-type: none"> <li>• Comprehensive report</li> <li>• Lesson learning</li> <li>• Research paper</li> </ul>
System level resilience – qualitative					X		X	X	
Report	X		X		X		X		

To address this general question, several specific research questions can be directly addressed with the addition of more data collection rounds going into the project phase-out. Specific hypotheses to assess include:

1. The systems-level resilience capacity components that are related to strengthened support from government and private sector (access to health, access to agriculture, access to early warning) will be increased in the later survey rounds, in part as a result of project activities to strengthen these systems-level factors.
2. Households with higher levels of transformative capacities that access systems-level components will have higher levels of household-level adaptive and absorptive capacities. This positive association between access to systems-level components and household-level resilience capacities is expected to be observed even in the later survey rounds, conducted during the project phase-out.
3. There will be sustained levels of both household- and system-level resilience capacities at either higher or similar levels for consequent data collection periods. Any variations should be explicable by factors outside the control of the program and beyond already established assumptions.

### Activities to accomplish for FLAIRb phase II in S3X Period

In order to address these reasons for organizing FLAIRb in S3X, the following specific activities are proposed to be carried out by the contractor:

- I. Two rounds of data collection that will be conducted during the project extension and change in implementation strategy from direct support to community groups, to greater emphasis on strengthening systems-level capacities supported by government and private-sector agents. These additional rounds will include qualitative components. The qualitative research will include additional questions for Focus Group Discussions (FGDs) and Key Informant Interviews (KII) relating to their perceptions of how systems-level capacities changed over the course of SHOUHARDO III intervention, why they have changed, and how these systems-level changes have influenced the resilience capacities of households.
- II. A new qualitative component focusing on collecting information about system-level performance and capacities will be added to FLAIRb S3X. This component will be conducted over a 6-month interval, in July 2020 and December 2020/January 2021. This component is likely to be primarily qualitative in nature, collecting information from key informants through semi-structured interviews. This component will need to be integrated with the household and community surveys. This component is designed to particularly address research question I above, “The systems-level resilience capacity components that are related to strengthened support from government and private sector.”
- III. Additional analysis will be conducted after the completion of the final round of FLAIRb S3X data collection. In addition to the general research questions outlined in the FLAIRb S3X protocol, the final analysis will also address the research issues and specific hypotheses described above. This analysis will utilize and integrate both quantitative and qualitative information collected during all rounds of FLAIRb S3X, including the two additional proposed rounds.

## **I. FLAIRb Phase II S3X Study Design**

### **A. Methodology**

The program is expecting the third-party contractor to come up with a mixed methodology study design comprising both quantitative and qualitative methods. The quantitative section should consist of a statistically representative sample size. The representation will be composed of a high-level of statistical test, i.e. significance level of t-test, f-test, p-value, etc.

### **B. Selection of government and private service delivery actors for the qualitative component**

During the phase-out stage, the program will facilitate the government and private sectors to take over support to the community groups. The SHOUHARDO III Program expects that program participants will benefit directly or indirectly from interventions to improve service provision by government departments as well as the private sector. In order to track system-level capacity, The FLAIRb S3X survey will conduct interviews or FGDs and KIIs with the representatives from each of these different types of service providers.

### **C. Selection of Sample Participants for Phase II**

As this is a panel design, the sampled households for Phase I will continue to serve as the sample for Phase II. See the FLAIRb I protocol for details on sampling design.

## II. Purpose and Objectives

The purpose of the FLAIRb phase II S3X system-level assessment data collection and analysis is to provide information to support adaptive management decisions, to uncover lessons learned about how the SHOUHARDO III implementation strategy helped to enhance resilience capacities, and to assess how the project close-out strategy will help to sustain the improvements in resilience made by the project.

In order to respond to this changing focus from supporting management decision-making to making final assessments about the effectiveness of the project implementation and phase-out strategies, SHOUHARDO III proposes to extend the data collection and conduct additional analysis of the FLAIRb S3X for two reasons.

**First**, additional rounds of data collection will provide a fuller picture of the long-term impacts of interventions on household resilience capacities and food security outcomes. We expect that some interventions may only exhibit results-level impacts with some time lag. For example, the expected accumulation of wealth (assets and savings) associated with higher and more diversified incomes or participation in VSLA groups may take several years to achieve measurable changes. Similarly, interventions designed to enhance the empowerment of women are likely to lead to outcome and impact level changes at the household level only after some extended interval of time.

The **second** reason to extend the FLAIRb process is to be able to more clearly assess the extent to which the phase-out strategy of the project (shifting from providing direct support to community-level groups to facilitating the government and other stakeholders in the private sector to take over the support to these groups) is achieving its goals. Adding two more rounds to the data collection process will permit a more in-depth analysis of the relationships between improvements in systems-level capacities and sustainable improvements in resilience capacities and outcomes of households.

The program envisions that a learning piece will be published from this work on two fronts.

- Academic peer reviewed paper linking system-level assessment and interventions to sustainability of outcomes in relation to resilience capacity.
- A practitioner's guide to implementing a FLAIRb longitudinal monitoring system to measure changes in resilience capacities of project participants associated with specific SHOUHARDO III project interventions that the participants are exposed to. This guide will describe the processes by which the FLAIRb system was developed and implemented under SHOUHARDO III. Based on the SHOUHARDO III experience, the guide will describe procedures for monitoring changes in household, community and systems level components of resilience of beneficiary households over time, and how project interventions have affected resilience capacities and outcomes. This guide will describe the procedures for establishing the system, guidance on setting up data collection process (both quantitative and qualitative), analysis, and utilization in adaptive management.

CARE Bangladesh will hire a local firm to conduct the data collection/field survey, and this field-level data collection will not be part of the consultancies.

## III. Data Treatment and Analysis Plan

The contractor must prepare a data treatment and analysis plan to address the following elements:

1. Indication of how the systematic data quality checks will be placed in the database, examine inconsistencies and edits (data cleaning, checking missing values and outliers, and fixing issues) planned to ensure logical consistency and coherence, as well as an indication of the software and data management will be done;
2. Sampling weights to be included on the data file. The formulae used to calculate the sampling weights should be included as part of a data dictionary document. Different sampling weights will need to be calculated for separate analysis of each component (in the sampling frame) and of the program-level aggregate. Note that a household non-response adjustment should be made to the sampling weights as part of the final weighting system and description on how the outliers would be addressed;
3. Indicator tabulation plan. Estimates should be produced for each stratum and for the overall level; indication of which sub-groups, if any, for which the contractor will produce estimators;
4. To understand factors that explain the variation in change in specific research areas, household hunger scale, household dietary diversity score, and minimum acceptable diet, multivariate analysis model must be specified and presented in the tabulation plan.
5. The contractor should specify all intended bivariate and multivariate analysis in the tabulation plan;
  - Thoughts on intended descriptive tables and cross-tabulation plan, correlation, regression analysis, weighting and various statistical tests like confidence interval, test of significance, p-value, standard deviation; dealing out-liars, etc.
6. Indication that confidence intervals associated with the indicators will be produced alongside the indicator estimates and that these will take into account the design effect associated with the complex sampling design. Additional statistical outputs are required for multivariate analysis, but should be provided in an appendix; and
7. Description of methods for comparing the final survey data with the baseline and round monitoring survey data, and tests to be used to detect a population-level difference at 95 percent level of significance.

## **IV. Data Management and Analysis**

### **A. Data Management and Analysis**

The local firm (to be hired by CARE) will collect data using Tab/handheld devices in the ODK or another appropriate online database program. The ODK dataset (XML format) needs to be converted into a STATA (Version 13.0) and SPSS (Version 20.0 or later) database for data management and analysis. Validated data will be accumulated in the main STATA/SPSS database. The consultant will download ODK data from the server and will convert into SPSS/STATA. The consultant will check data quality remotely every day and will share findings and updated dataset to SHOUHARDO M&E team for necessary actions.

An analysis plan that includes the definition of the research indicators and tabulation structures needs to be generated prior to the start of data analysis. The consultant should create SPSS/STATA command files to compute research indicators in accordance with the descriptions provided in the analysis plan.

### **B. Sampling Weights**

The indicators that are specific to an individual sampling frame do not need to be weighted, but the indicators that are derived from combined sampling frames will need to be adjusted with the sampling weights. The clusters are selected across the three sampling frames (strata), but the sample beneficiaries are selected from a cluster by stratifying in three groups. So, cluster design weights need to be used to adjust cluster design effect for the indicators that will be derived from the combined sampling frames.

Design weights are calculated based on the separate sampling probabilities for each sampling stage and for each cluster. The sampling weight is calculated with the design weight corrected for non-response for each of the selected clusters. Response rates are calculated at cluster level as ratios of the number of interviewed households over the number of eligible households. The overall household sampling weight is calculated by dividing the household design weight by the household response rate.

## V. Expected Deliverables & Frequency

Deliverable (FLAIRb Phase II)	Delivery Frequency/Timeline
<p><b><u>Round 1 and Round 2 (Dec 2019/Jan 2020 and July/August 2021)</u></b></p> <ul style="list-style-type: none"> <li>• Detailed and comprehensive analysis/tabulation with all higher-level statistical tests by program technical area (including bivariate/multivariate regression analysis)</li> <li>• Data base, syntax with all outputs (both in csv and SPSS format)</li> </ul> <p><b><u>Three round qualitative system-level resilience. July 2020, December 2020 and September 2021</u></b></p> <ul style="list-style-type: none"> <li>• Precise methodology and concept for measuring the resilience of health, agriculture, and early warning systems at inception of the consultancy</li> <li>• Appropriate tools for data gathering</li> <li>• For each round a precise report covering:               <ul style="list-style-type: none"> <li>○ Methodology</li> <li>○ Findings including comparisons with previous round(s) and triangulation with available relevant secondary data.</li> <li>○ Recommendations for programmatic actions</li> </ul> </li> </ul> <p>For each round as applicable the following are expected:</p> <ol style="list-style-type: none"> <li>1. A cleaned complete data in SPSS (.sav) format with definitions and associated codes (value labels) to CARE Bangladesh.</li> <li>2. Any syntax used to clean the data (.sps)</li> <li>3. Any syntax used for initial analysis</li> <li>4. Final analysis and complete written report with needed annexes and syntax</li> <li>5. Submit draft report, present findings, and collect feedback from the project team</li> <li>6. Submit final report after addressing all queries from project team</li> </ol> <p><i>(please see section 6 “Additional Requirements” to comply with FFP/USAID requirement)</i></p>	<p>March 2020 and March 2021</p> <p>September 2020, January 2021, and September 2021</p>
<ul style="list-style-type: none"> <li>• A practitioner’s guide to system level resilience measures and application in development program that covers the methodology, results and uses with SHOUHARDO III.</li> <li>• Academic peer reviewed paper linking system level assessment and interventions to sustainability of outcomes in relation to resilience capacity</li> </ul> <p><i>(please see section 6 “Additional Requirements” to comply with FFP/USAID requirement)</i></p>	<p>June 2021</p> <p>September 2021</p>

## VI. Additional Requirements

To comply with USAID's Open Data Policy, USAID/FFP will host the data to USAID's Open Data portal. To comply, the contractor must submit the following:

Raw and cleaned data set, data dictionary/codebook, edit rules, outputs and syntax for data analysis, including syntax for variable transformations.

### Deliverables

1. Raw data set in SPSS and CSV formats;
2. Edit rules for cleaning data;
3. Data dictionary/codebook;
4. Syntax for all data analysis and variable transformations;
5. Final data set that includes cleaned data, sampling weights at each stage, final sampling weights, and all derived indicators; and
6. Sampling weights used to tabulate the aggregate-level estimates for the USAID/FFP Standard Indicators
7. All Output files in SPSS (v2 0 or later)

## VII. Ownership

CARE will be the absolute owner of the developed tools and documents and will have copyright ownership. The contractor shall not replicate or reproduce or use any tools or documents developed or datasets used for this assignment without the prior consent of CARE.

## VIII. Contract Timeframe

Timeframe of the contract will be up to September 2022.

## IX. Timeline

Deliverable	Description	Timeline
Proposal Submission	CARE receive complete proposals from a qualified firm with CV of key personnel to be engaged	5 <sup>th</sup> December 2019
Proposal Review	Review team from CARE provides feedback on selected proposal	12 <sup>th</sup> December 2019
Contract Signing	Contract agreed and signed by both parties	19 <sup>th</sup> December 2019

## X. Financial Proposal

Consultant will submit a proposed timeline and financial proposal in response to this TOR, including: Summary of Costs, Breakdown of Staff Remuneration, Travel and DSAs, Miscellaneous, and any Overhead Costs. Total cost of the financial proposal will be considered.

## XI. Execution, Payments and Guiding Regulation

For each key activity and deliverable, the consultant firm will nominate an appropriate individual with a clear task order. This will be developed jointly with CARE around all the specific deliverables. For each

specific task, the following specifics are expected:

1. Details of activity and technical skills requirement
2. CV of appropriate person
3. Travel plan for the individual
4. Required reporting and documentation details for the task.
5. Other specific issues as will be highlighted during the Task Definition
6. Task specific budgets

Once agreed on the task order and a task-specific agreement is signed, the identified person will travel to Bangladesh and work with CARE staff.

Travel and lodging costs will be reimbursed on actuals, while meals and incidentals should be included in the final bill that will be reimbursed to contractor based on an agreed on daily rate in the task specific agreement.

All services and procurements under the agreement will be subject to USAID rules and regulations as applicable to US Based NGOs/Others and for cooperative agreements.

## **XII. Proposal Evaluation Criteria**

The proposal will be ranked according to score. Evaluation criteria and allocated points are below.

<b>Criteria</b>	<b>Marks</b>
Proposed methodology for carrying out the task	20
- Understanding on FFP/USAID program its M&E and reporting requirements - Knowledge of the conceptual framework of food security - Experience evaluating FFP/USAID's food security	15
Experience with design of Resilience Measurement tools and methodology and managing large-scale comprehensive resilience assessment/measurement study/survey	30
Expertise in developing sampling method according to USAID requirements, applying standard processes Experience in designing and managing large scale socio-economic and agriculture and nutrition, surveys for Title II development food assistance programs or similar scope and scale in Bangladesh	15
Quality/Qualifications/Experience of Proposed key staff	20

## **XIII. Point of Contact (POC)**

Once the contract is signed, the contact persons at CARE is Walter Mwasaa, Chief of Party, SHOUHARDO III, CARE Bangladesh. All queries should be directed to [BGDShouhardoInfo@care.org](mailto:BGDShouhardoInfo@care.org)

## **XIV. Managing Unexpected**

The contractor must keep in their prime consideration how to manage if any unexpected situation arises that may affect the assessment, such as strikes, political uprising, or natural disaster. They should keep options for contingency plan and alternatives without compromising the overall quality, purpose, and timeline.

## Specific Tasks, Outputs and Time Frame

Tasks	Outputs	No. Days/ Time Frame
Proposal Submission	CARE receive complete proposals from a qualified firm with CV of key personnel to be engaged	5 <sup>th</sup> December 2019
Proposal Review	Review team from CARE provides feedback on selected proposal	12 <sup>th</sup> December 2019
Contract Signing	Contract agreed and signed by both parties	19 <sup>th</sup> December 2019
<b><u>Round 1 and Round 2 (Dec 2019/Jan 2020 and July/August 2021)</u></b>	<ul style="list-style-type: none"> <li>Detailed and comprehensive analysis/tabulation with all higher-level statistical tests by program technical area (including bivariate/multivariate regression analysis)</li> <li>Data base, syntax with all outputs (both in csv and SPSS format)</li> </ul>	March 2020 and March 2021
<b><u>Three round qualitative system-level resilience. July 2020, December 2020 and September 2021</u></b>	<ul style="list-style-type: none"> <li>Precise methodology and concept for measuring the resilience of health, agriculture, and early warning systems at inception of the consultancy</li> <li>Appropriate tools for data gathering</li> <li>For each round a precise report covering: <ul style="list-style-type: none"> <li>Methodology</li> <li>Findings including comparisons with previous round(s) and triangulation with available relevant secondary data.</li> <li>Recommendations for programmatic actions</li> </ul> </li> </ul> <p>For each round as applicable the following are expected:</p> <ol style="list-style-type: none"> <li>A cleaned complete data in SPSS (.sav) format with definitions and associated codes (value labels) to CARE Bangladesh.</li> <li>Any syntax used to clean the data (.sps)</li> <li>Any syntax used for initial analysis</li> <li>Final analysis and complete written report with needed annexes and syntax</li> <li>Submit draft report, present findings, and collect feedback from the project team</li> <li>Submit final report after addressing all queries from project team</li> </ol>	September 2020, January 2021, and September 2021
	<ul style="list-style-type: none"> <li>A practitioner's guide to system level resilience measures and application in development program that covers the methodology, results and uses with SHOUHARDO III.</li> </ul>	June 2021
	<ul style="list-style-type: none"> <li>Academic peer reviewed paper linking system level assessment and interventions to sustainability of outcomes in relation to resilience capacity</li> </ul>	September 2021