# Overview

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| Application deadline | Sep 20, 2024 |
| Contract start and end date | As soon as possible |
| Duration | October 1st – 30th, 2024 |
| Program sector(s) | Climate Change |
| Project/Program name | The Khoua Food Security Project in Phongsaly Province (KFSP) |
| Type of consultancy | External End-of-Project Evaluation |
| Project/Program location | Khoua District, Phongsaly Province, Lao PDR |
| Consultant location | In-country would be preferred |
| Funded by | The Deitrich W. Botsiber Foundation |

# Background

CARE is a humanitarian non-governmental organization committed to working with poor women, men, boys, girls, communities, and institutions to have a significant impact on the underlying causes of poverty. CARE seeks to contribute to economic and social transformation, unleashing the power of the most vulnerable women and girls.

CARE International in Lao PDR (CARE Laos) began its operations in 1992 and has worked since then to improve the lives of vulnerable groups in both rural and urban areas, particularly the ethnic communities. CARE Laos works in partnership with community members, government bodies, local civil society organizations, and the private sector. Currently, CARE Laos implements projects in four provinces: Vientiane Capital, Luangprabang, Champasack, Phongsaly, and Sekong.

CARE's "Marginalized Women and Girls" program empowers women and girls to exercise their rights, lead and make decisions, and benefit from socio-economic justice. CARE's two main program areas in Lao are women's health and economic empowerment and resilience. Our health programs empower women and girls to exercise their rights to reproductive, maternal, and child nutritional health for greater control over their bodies and to live a life free from violence. Our economic empowerment and resilience programs give women and girls greater access to and control over economic opportunities, resilient resources, and dignified work by promoting gender equality and fighting gender-based violence and climate risk. CARE has extensive experience and expertise in both areas and will continue to pursue evidence-based practices to deliver long-lasting solutions effectively and sustainably.

# Introduction

Phongsaly province, situated in Lao PDR, stands out as one of the most impoverished provinces, facing challenges in accessing reliable water sources throughout the year. This scarcity contributes to unsanitary practices like open defecation, resulting in adverse health outcomes. Additionally, the limited availability of nutritious food disproportionately affects target community members and children under five years old. The primary aim of the project is to support five vulnerable ethnic communities in the Khoua district of Phongsaly province, spanning from January 10th, 2022, to January 9th, 2025. The project known as “The Khoua Food Security Project in Phongsaly Province (KFSP)”, is a collaborative effort between Phongsaly Provincial Agriculture and Forestry under the Ministry of Agriculture and Forestry; and CARE International in Lao PDR, is being generously supported by the Botstiber Foundation with a total budget of 320,419 USD. The primary of objective of the evaluation is

* To access the implementation progress in each project impact, outcome, and outline towards achieving the planned results.

The project has three specific objectives (outcomes) to be measure for the end of evaluation as follows:

* **Specific Objective 1:** Year-round in-village access to sufficient clean water enabled and an increase in latrine coverage achieved.
  + 1.1 At least 80% of households in 5 target villages have sufficient year-round in-village access to clean water.
  + 1.2 At least 80% of women and girls reported that they reduced hours spent on water collection throughout the year.
  + 1.3 100% of target villages participate in the activity relevant to the elimination of open defecation.
* **Specific Objective 2:** Household food production increased through investment in home gardens and other food production systems.
  + 2.1 80% of households participating in the project supported activities to increase food supply.
  + 2.2 80% of participating households reporting increase in own produced food supply (by food type) of at least 20% by end of project
* **Specific Objective 3:** Household incomes are increased through improvements to livestock production systems.
  + 3.1 At least 30 households with established livestock forage plots.
  + 3.2 At least 50% of households (15 households) with livestock forage plots have sold at least one fattened cattle by the end of project.
  + 3.3 Fattened cattle gain price margin of at least USD 200 as compared to un-fattened by end of project.
  + 3.4 5 animal health providers established, operating, and generating income from services.

Note: The Logical Framework will be provided for the consultant during the evaluation.

* To access the project is implemented effectively and efficiently as outlined in the MoU by using OECD DAC criteria (relevance, coherence, effectiveness, efficiency, impact, and sustainability) and household survey questionnaires. Following are the guiding questions for each DAC:
* Relevance: Is the intervention doing the right things?
* Coherence: Who well does the intervention fit?
* Efficiency: How well are resources (human, financial, time) used?
* Effectiveness: Is the intervention achieving its objectives?
* Impact: What difference is the intervention making?
* Sustainability: Will the benefits last?
* Also, to recommend project strategic, programmatic, and management for project adaptation in the remaining parts of the project. The consultant will measure the CARE System Impact at Scale; scale deep (impacting cultural roots), scale out (impacting greater numbers), and scale up (impact laws and policy) as well as to assess the progress of project reach to climate justice impact area under CARE's Global Indicators for Measuring Change, and to identify the challenge, best practices, lessons learned and recommendations to improve the project or modification for the remaining project period based on project's Theory of Change and Logical Framework. The baseline Mid-Term Review (MTR) results will be compared with this final evaluation.

Additionally, the baseline survey will also include CARE’s Global Indicators for Measuring Change as following under the climate justice impact areas.

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| --- | --- |
| **Indicator #** | **Indicator name** |
| CG Indicator 28 | # and % of people of all genders (disaggregated female and male) that have used their increased capacities for resilience and adaptation to the effects of climate change. [linked to SDG indicator 13.1] |
| CG Indicator 28.1 | (Climate-resilient livelihoods)  # and % of people of all genders(disaggregated female and male) that have applied at least 3 practices to protect their livelihoods from negative impacts of climate related shocks and stresses. |
| CG Indicator 28.2 | (Climate information)  # and % of people of all genders(disaggregated female and male) that have applied climate knowledge and information services to inform their adaptation strategies. |
| CG Indicator 28.3 | (Financial services)  # and % of people of all genders(disaggregated female and male) that have used formal and informal financial services in ways that actively support climate resilience. |
| CG Indicator 28.4 | (Climate Resilient Housing)  # and % of people of all genders (disaggregated female and male) that took at least 3 steps to protect their housing and direct surroundings from the negative impacts of climate related shocks and stresses. |
| CG Indicator 28.6 | (Formal/informal decision-making)  # and % of people of all genders (disaggregated female and male) who have actively participated in formal and informal climate-relevant decision-making spaces. |
| CG Indicator 28.7 | (Household decision-making)  # and % of people of all genders (disaggregated female and male) who have actively participated in climate-relevant decision-making at household level. |

# Evaluation target group

Different data collect methods will be used for the final evaluation to capture the performance, perspectives, outcomes of the beneficiaries and stakeholders. Household Survey (HHS) will be conducted with households in 4 villages – Kobo toolbox data collection tool will be used to collect this data. Note: Actual number of these target groups will be terminated later between the consultant and the project team. Focus Group Discussion (FGD) method will be used to collect data with the village authorities (village chief, LWU members, agricultural and livestock groups), and representing women and men in the villages -this data collection is qualitative, thus paper-based form with leading questions will be developed and used during the discussion. Key informant Interview (KII) will be used to discuss with an authority from each village, authorities from the district (Khoua District of Agriculture and Forestry Office – DAFO, Khoua District Office of Lao Front for National Development - DLFND, Khoua District of Natural Resource and Environment – DONRE, Khoau Lao Women’s Union – DLWU, and Khoua District Office of Planning and Investment – DOPI). Authority from provincial such as Phongsaly PAFO, POFA, PONRE, PLFND, and POPI). CARE Laos who will be expected to be interviewed such as KSFP project staff, provincial project manager (PM), Program Director, Finance Director, and Climate Change Technical Coordinator, and MILKA Advisor.

# Scope

The evaluation will cover 80% OR 4 out 5 villages in the total project villages in Khoua District, Phongsaly Province. The consultant should ensure that the sampling village is based on the criteria of diversity, distance, as well as economic background. The following are the suggested procedures for the consultant for this evaluation.

It is expected all relevant sections of the report highlighted the project results targeting the poorest of the poor households. Where possible, relevant case studies indicating changes/impact on these families/households as part of their engagement in the different interventions are also provided in the report.

**Phase One:**

* Review all documents related to this project and select indicators and CARE's related documents: CARE Laos policies and tools such as CARE 2030 Vision, CARE Climate Justice Strategy, CARE Right to Health Strategy, CARE Gender Equality Strategy, CARE International in Lao PDR - Climate Change Adaptation Strategy, CARE International in Lao PDR - Gender Equality and Women’s Voice Strategy, CARE International in Lao PDR - Health Strategy, MoU, KSFP baseline, MTR, and annual narrative reports, as well as KSFP Budget report and planning.

**Phase Two:**

* Develop study design and sampling methodology.
* Present inception report along with data collection tools
* Provide data collection tool training to enumerators, and pilot and translate data collection tools into Laos (if the tools are in English).
* Lead the data collection process in the field with multiple target groups along with the enumerators to ensure the data is collected effectively manner.

**Phase Three:**

* Overseeing cleaning and validation of quantitative and qualitative data
* Conducting all data analysis
* Present the evaluation result through a data validation workshop
* Prepare draft report and take feedback for finalization and presenting the key findings.
* Provide a one-page summary of the report after the final report is submitted.

# Approach and Methodology

The final evaluation will take a mixed-method approach and will process with:

1. A mix of quantitative and qualitative instruments and methods will be used.
2. A participatory approach should be adopted to capture the perspectives of key stakeholders and project participants/beneficiaries.
3. The methodology will be gender and target-group (ethnicity) sensitive.
4. Sampling will be discussed and decided together with CARE. The final evaluation will not cover all five target villages (only 4 villages), but the sampling will be purposeful and represent local diversity (i.e. distance to roads, gender, ethnicity, type of production, access to land).
5. Train staff as enumerators of data collection, especially project staff, and government partners who are invited to join the process of the evaluation.
6. Present findings to relevant partners/stakeholders/CARE Staff
7. All project target groups of beneficiaries should be included during the data collection process.
8. The data collection should be disaggregated by age and gender and any other relevant diversity criteria in line with the project’s Theory of Change and MEAL standard.
9. All raw data (including data entry forms, database of entered data, graphics, and analysis for each village) shall be made available to CARE Staff and submitted with the final evaluation.

# Roles and Responsibility

## Team Members and Roles

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| --- | --- | --- |
| Phase | Responsible Person | Primary Tasks |
| Planning | MILKA Advisor, Climate Change team, and PSL Provincial Manager and Coordinators | Lead in the facilitation evaluation process and managing the external consultant by collaborating with CARE Donor (the Botsiber Foundation), and government partners. |
| External Consultant | * Led in designing the necessary methodology and tool for evaluation by collaborating with CARE Laos’ program team and CARE team. * Lead in providing the training to the data collection team on methodology and tools to be used in the evaluation. * Ensure the appropriate team composition by collaborating with the CARE team regarding ethnic groups. * Lead in writing the inception report. |
| Data Collection | MILKA Advisor & PSL Provincial Manager & Coordinators | * Lead in facilitating the logistics and making an appointment with the selected target groups mentioned above. * Provide relevant information and data as requested. |
| Consultant | * Lead in collecting the data following the data collection plan. |
| Data Analysis | External Consultant | * Lead in cleaning the data and data processing/translation if required. * Lead in analyzing the day following the objective and requirement from the final evaluation ToR. * Cross-check all data to ensure that collected data meets the needs of the final evaluation objectives and requirements. |
| Reporting | External Consultant | * Debriefing for the community representative and government partners at the district level. * Debriefing for the program team from CARE Laos, donor, and relevant Partners. * Provide a one-page evaluation summary for CARE |

# Deliverables

Below are summaries of key deliverables:

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| Deliverable | Description | By when |
| Inception report | Including the methodology, sampling, tools, and the guiding principles of the evaluation and data analysis plan. | W2 Oct, 2024 |
| Data collection | Conduct data collection for the end of project evaluation in four (4) villages in Khoua District, Phongsaly Province. | W3-4 Oct, 2024 |
| Draft final evaluation report (max 30 pages, annexes excluded) | Included:   1. Cover Page 2. Table of Contents 3. Acknowledgments 4. Abbreviations 5. Executive Summary 6. Brief Project Overview 7. Methodology  * Brief Final Evaluation Design * Sampling strategy * Data analysis plan  1. Key limitation and ethical Considerations to Final Evaluation 2. Results, analysis, and discussion (for final evaluation specifically including a log frame showing final evaluation status for selected indicators). 3. Conclusion and recommendations 4. References with proper citation 5. Appendices or Annexes 6. Photos are CARE property and will be annexed to the final report together with consent forms.   (Please refer to CARE Evaluation template) | W1 Nov, 2024 |
| Indicator summary table | Update the indicator in the log frame (compared Baseline, MTR and Final Evaluation) | W2 Nov, 2024 |
| PowerPoint presentation (debriefing) | Includes the methodology, sampling, tools, key findings, imitations, and recommendations from the final evaluation study | W2 Nov, 2024 |
| Cleaned qualitative and quantitative data sets. | The consultant should deliver, at minimum, all files including quantitative data sets (raw and refined products), transcripts of qualitative data, and others in an easy-to-read format and maintain naming conventions and labeling for the use of the project/program/initiative and key stakeholders. | W3 Nov, 2024 |
| Completion of the approved final report | Following the feedback on the draft report – submit the final version along with one page evaluation summary and materials to CARE | W3 Nov, 2024 |

## Timeframe

Fieldwork for the final evaluation is expected to start as soon as possible: ideally in W3-4 of October 2024. The final report is expected to be submitted by no later than W3 of November 2024.

The following table shows the anticipated work schedule:

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| --- | --- | --- | --- | --- |
|  | **Item** | **Specific Task** | **Days** | **Tentative dates** |
| **1** | Pre-field activities | Project literature review - CARE to support with documents (will be provided by CARE) | 1 | W2 October, 2024 |
| Design methodology and plan data collection.  Develop final evaluation study tools. | 2 | W2 October, 2024 |
| Inception report | 1 | W2 October, 2024 |
|  |  | **Sub-total** | **4** |  |
| **2** | Field activities | Travel to Khou District, Phongsaly Province | - | W3 October, 2024 |
|  |  | Training on data collection and preparing the document | 2 | W3 October, 2024 |
|  |  | Data collection in 4 villages in Khoua District, | 4 | W4 October, 2024 |
|  |  | Consultant travel to VTE | - | W4 October, 2024 |
|  |  | **Sub-total** | **6** |  |
| **3** | Report writing | Prepare the draft Report | 3 | W1 November, 2024 |
| Prepare presentation for CARE senior program team and donor & relevant partners | 1 | W2 November, 2024 |
| Finalize the report (considering comments from CARE) and submit the finalized report along with a 1-page summary of the evaluation to CARE. | 2 | W3 November, 2024 |
|  |  | **Sub-total** | **6** |  |
|  |  | **Grant Total** | **16** |  |

NOTE: CARE in Laos will cover the consultant's transportation and accommodation during data collection in Phongsaly, except perdiem and travel insurance.

# Selection Criteria

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| --- | --- | --- |
| 1 | Experience | * At least 5 years experience in the fields of climate change, agriculture and food security programming, gender, and women's empowerment in Lao PDR or southeast Asia * Demonstrated strong social research and reporting skills, including experience conducting quantitative and qualitative research. * Demonstrated successful experience in conducting project final evaluation studies, especially development projects. * Demonstrated good understanding of gender issues, and women's empowerment in Laos. * Relevant technical experience (e.g. climate change, agricultural and food security, gender mainstreaming, ethnicity, Social Behavioural Change and Communication, rural livelihoods, institutional development, etc.) is preferred. |
| 2 | Qualification | * Relevant postgraduate qualifications. |
| 3 | Technical skills | * Research, survey (e.g. PRA/PLA), stakeholder interviews (ranging from field level to national level stakeholders), report writing, and presentation. * Ability to work autonomously and demonstrated skills in leading final evaluation projects. |
| 4 | Language | * Excellent command of English (writing and speaking). * Experience in Lao PDR and Lao language skills are desirable. |
| 5 | References | * A minimum of two referee contacts who have managed the proposed consultant previously. |

As a matter of course, all consultants are subject to the following policies:

• CARE Lao Child Protection Policy.

• Terrorist Check Safety and Security Management Plan.

• CARE Code of Conduct.

# How to apply

If you are interested in this role, please submit your (1) CV, (2) cover letter, (3) two references, (4) proposed final evaluation study plan, and (5) cost quotation (daily rate) to: [Lao.contracts@care.org](mailto:Lao.contracts@care.org) by **20th September, 2024**, **please include the text: “Application for KSFP Final Project Evaluation Consultancy”** in the subject of your email.

For specific technical and more information, please contact Mr. Chasy Somwhang at [chasy.somwhang@care.org](mailto:chasy.somwhang@care.org). Mobile: +85620 9928 2552