



Building Resilient Communities for Sustainable Development

REQUEST FOR PROPOSAL

Reference No: RACIDA/720FDA20GR00029-2020/2021-007

Consultancy for Endline Evaluation of “Integrated emergency and early recovery response to support affected vulnerable communities in Mandera County of Kenya”

Rural Agency for Community Development and Assistance (RACIDA) in Partnership with Office of U.S. Foreign Disaster Assistance (OFDA)

Document Release Date: 9th August 2021

Deadline for Submission of Bids: 17th August 2020

Time: 5:00 PM EAT

Submission Method: Email

Disclaimer: RACIDA reserves the right to determine the structure of the process, number of short-listed participants, the right to withdraw from the proposal process, the right to change this timetable at any time without notice and reserves the right to withdraw this tender at any time, without prior notice and without liability to compensate and/or reimburse any party

Synopsis of the Request for Proposal (Individual Consultant / Registered firm)

Solicitation Reference No.	RACIDA/720FDA20GR00029-2020/2021-007
Title of Solicitation	Consultancy for Endline Evaluation of “Integrated emergency and early recovery response to support affected vulnerable communities in Mandera County of Kenya”
Issuing Office & Address	Rural Agency for Community Development Assistance Website: www.racida.org
Point of contact for clarifications, questions and ammendments	RACIDA General Procurement, Procurement@racida.org
Email Address for submission of Proposals/ Quotes	RACIDA General Procurement, Procurement@racida.org
Solicitation Issue Date	22 nd July 2021
Initial Deadline for Submission of Proposals	5 th August 5:00 PM East African Time
Readvertisement Solicientation Date	9 th August 2021
Deadline for Readversitement Submission of Proposals	17 th August 2021
Anticipated Award Type	Consultancy Agreement
Submission and Evaluation Criteria	<p>Bidder must provide the below listed information:</p> <p>Mandatory Eligibility Requirement</p> <ul style="list-style-type: none"> • Must be an Individual Consultant/ Registered Consultancy Firm • Must submit CV of Key Personnel • Must submit a certificate of Incorporation/ Business Registration • Must submit a certificate of Tax Compliance • Must Submit Business KRA PIN • The firm shall not be sanctioned or blacklisted by any government or institution <p>Technical Evaluation Criteria</p> <ol style="list-style-type: none"> i. Consultant Academic and Professional Qualification-20% ii. Consultant’s Prior Work Experience- 35% iii. Methodology/Approach- 35% iv. Language and analytical skills -10% <p>NB. The minimum technical score shall be 75%. Only the best candidate shall be engaged for financial negotiations.</p>

1. Background and Rationale

RACIDA in partnership with USAID's OFDA is implementing an integrated humanitarian response project that responds to heightened need stemming from the confluence of humanitarian drivers, namely: COVID-19, Drought, Desert Locusts, and other climate shocks. The project is informed by needs identified by RACIDA's Mandera County Drought Rapid Assessment, the priorities of the County Steering Group (CSG), County Government Authorities, and vulnerable communities in Mandera County. Communities targeted under this project are experiencing high rates of malnutrition among children under five, poor nutrition among Pregnant and Lactating Women (PLW), poor water quality and water access, poor hygiene practices and resources, and limited access to pasture and water for livestock. The project seeks to alleviate the impact of humanitarian disasters by increasing access to nutrition services in hard-to-reach areas in Mandera County (including improving the coverage of integrated management of acute malnutrition (IMAM) services), improving household Infant and Young Child Feeding Practices (IYCF), enabling improved household nutrition and hygiene practices, reducing the burden of livestock diseases, and improving access to emergency treated and protected water supply for human and livestock consumption.

To ensure that the project is well implemented, targeted, and measured, RACIDA has issued this Terms of Reference (ToR) to solicit proposals for an Endline Evaluation of the “**Integrated emergency and early recovery response to support affected vulnerable communities in Mandera County of Kenya**” project.

2. Endline Survey Objectives

- I. Establish Endline information against which the project log frame indicators at community level which will be used as a threshold for this project to assess progress, outcomes, and impact.
- II. To document the perception of RACIDA and the project from relevant stakeholders, including the following: Community members, project beneficiaries, government authorities, and coordination mechanisms.
- III. Produce an Endline Report that will be used to evaluate the impact of the project and to guide future project development, implementation and monitoring strategies.

2.1.1. Project Indicators

The Specific Project Indicators, which the consultant will be expected to contribute towards knowledge of are detailed below:

Output	Indicators
To reduce morbidity and mortality from acute malnutrition in Mandera County of Kenya.	1 Nutrition
	1.1 Infant and Young Child Feeding in Emergencies
	1.1.1 Proportion of infants 0-5 months of age who are fed exclusively with breast milk.
	1.1.1 (a) Proportion of male infants 0-5 months of age who are fed exclusively with breast milk
	1.1.1 (b) Proportion of female infants 0-5 months of age who are fed exclusively with breast milk
	1.1.2 Proportion of children 6-23 months of age who receive foods from 4 or more food groups.
	1.1.2 (a) Proportion of male children 6-23 months of age who receive foods from 4 or more food groups.
	1.1.2 (b) Proportion of female children 6-23 months of age who receive foods from 4 or more food groups.
	1.1.3 Number of people receiving behavior change interventions to improve infant and young child feeding practices.
	1.1.4(a) Number of Women receiving micronutrient supplements (Vitamin A).
	1.1.4 (b) Number of male children under 5 years receiving micronutrient supplements
	1.1.4 (c) Number of female children under 5 years receiving micronutrient supplements
	Proportion of children 12 -15 months of age who continued breastfeeding at 1 Year.
	1.2 Management of Acute Malnutrition
	1.2.1 Number of health care staff trained in the prevention and management of acute malnutrition.
	1.2.2 Number of health care staff trained in the prevention and management of acute malnutrition.
	1.2.3 Number of sites managing acute malnutrition
	1.2.4 Number of people admitted, rates of recovery, default, death, relapse, and average length of stay for people admitted to Management of Acute Malnutrition sites.
	Number admitted
	Rates of recovery
	Default rate
	Death rate
	Relapse rate
	Average length of stay
	1.2.5 Number of people screened for malnutrition by community outreach workers.
	1.2.5 (a) Number of male children screened for malnutrition by community outreach workers.
	1.2.5 (b) Number of female children screened for malnutrition by community outreach workers.
	Custom outcome indicator: Proportion of children aged 6-59 months with acute malnutrition based on weight for height < -2 Z scores.
	Proportion of male children aged 6-59 months with acute malnutrition based on weight for height < -2 Z scores.
	Proportion of female children aged 6-59 months with acute malnutrition based on weight for height < -2 Z scores.

Improved livestock health.	2. Agriculture and Food Security
	2 Livestock
	2.2.1 Number of people benefiting from livestock activities.
	2.2.2 Number of animals benefiting from livestock activities.
	2.2.3 Number of animals owned per individual.
Increase access to water for pastoralist communities in Mandera county	3 Water, Sanitation and Hygiene (WASH)
	3.1 Water supply
	3.1.1 Number of people directly utilizing improved water services provided with OFDA funding.
	3.1.2 Percent of water points developed, repaired, or rehabilitated with free residual chlorine (FRC) > 0.2mg/L.
	3.1.3 Percent of water user committees created and/or trained by the program that are active at least three (3) months after training.
	3.1.4 Percent of water points developed, repaired, or rehabilitated that are clean and protected from contamination
	Custom Indicator: Number of rehabilitated water sources through USAID/OFDA assistance that are operational at the end of the project period.
	3.2 Hygiene promotion
	3.2.1 Number of people receiving direct hygiene promotion (excluding mass media campaigns and without double-counting).
	3.2.2 Percentage of households targeted by the hygiene promotion program who store their water safely in clean containers.
	3.2.3 Percent of people targeted by the hygiene promotion program who know at least three (3) of the five (5) critical times to wash hands.
	3.2.3 (a) Percent of males targeted by the hygiene promotion program who know at least three (3) of the five (5) critical times to wash hands.
	3.2.3 (b) Percent of females targeted by the hygiene promotion program who know at least three (3) of the five (5) critical times to wash hands.
	Custom Indicator: Percentage of reduced cases of waterborne diseases in target communities.
Provide a safe, habitable and covered space to conflict returnee IDPs in Banissa.	4. Shelter and Settlements
	4.1 Emergency Shelter
	4.1.1 Total USD amount and percent of the approved project budget spent on goods and services produced in the host country economy.
	4.1.2 Number and percentage of households having received shelter assistance.
	4.1.3 Number of targeted households with access to shelter.
	Custom Indicator: Number of household individuals sleeping under the long-lasting treated mosquito net disaggregated by sex (male/female).

3. Key Survey Questions

- i. What is the state of water sources targeted through USAID OFDA assistance?
- ii. What percent of water points targeted for rehabilitating are clean and protected from contamination?
- iii. What percent of water points in target communities have free residual chlorine (FRC) levels of > 0.2 mg/L?
- iv. What percent of targeted community beneficiaries have access to improved water sources, as per USAID OFDA guidelines and definitions?
- v. What are the current hygiene practices embraced by the target community beneficiaries and what are the consequences/impacts of these practices on their health ?
- vi. What is the prevalence of water borne diseases in the target communities?
- vii. What is the current food security status of the targeted communities (using indicators of food security including household dietary diversity, dietary diversity of children 6 – 23 months, Food Consumption Score, Coping Strategy Index, household purchasing power, and others as deemed relevant by RACIDA and the Consultant).
- viii. What is the current status of malnutrition rates in the targeted communities, among children under five, PLW, and how best can they be addressed by the intervention?
- ix. What are the current IYCF practices that are used by caregivers in the target communities?
- x. What were the existing factors limiting access to health and nutrition services in the target communities and how were they addressed or not addressed by the intervention?
- xi. How did the intervention contribute to the status of livestock disease surveillance and vaccination efforts in Mandera County? How can the intervention be improved?
- xii. How have community livelihood assets been affected by ongoing disasters and how has the intervention contributed to the protection of livelihood assets?
- xiii. Are the target communities and other project stakeholders satisfied with how they were engaged by RACIDA?
- xiv. How does the community feel about the relevance of the interventions in each of the proposed sub sectors?
- xv. What is the appropriateness of cash assistance to improve access to water for livestock in the targeted communities?
- xvi. What were the channels that communities preferred for communication and feedback?

3.1. Endline Target Audience

The populations of interest for this endline study are people living within the areas targeted under this project, with special focus on children aged under 5 years, women of reproductive age, livestock owners, youth, IDPs, and people living with disabilities.

4. Methodology

4.1. Methods Overview

Methodology: The consultant is expected to utilize a mixed-methods approach using literature reviews of white and gray literature and secondary data from the ministry of health, quantitative data from the targeted villages, and qualitative data from relevant stakeholders in Mandera County.

Data Sources: Household surveys, key informant interviews, focus group discussions, observations, program records, nutrition and health data from Mandera County, and other sources as deemed relevant by RACIDA.

Location: The consultant will gather data from the field at household level, community level, and at county level.

4.2. Literature Review

The consultant will be required to conduct a thorough and robust review of existing literature (white and gray) relating to WASH, nutrition, and livestock. Additionally, the consultant will be expected to collect secondary data on malnutrition and health outcomes in Mandera County, with special emphasis on the targeted sub counties. The literature review will be presented as a stand-alone section of the final report and will inform the development and revision of the evaluation methodology.

4.3. Quantitative Data Collection

The core of the assessment will consist of a randomized quantitative survey. The survey will collect data food security, Nutrition (including anthropomorphic measurements of Children < 5 and PLW), WASH (Water Supply, Hygiene Promotion, and WASH NFI), Agriculture and Food Security (Livestock).

All data will be disaggregated by sex, age, and disability. The endline study will sample community members and other stakeholders from the project locations. The consultant is expected to propose quantitative methodology that is scientific, culturally appropriate, and will leverage both qualitative and quantitative data.

4.3.1. Household Questionnaire

The consultant will administer a household survey tool, which will include anthropomorphic measurements of malnutrition rates among children under five years of age in the surveyed household. The content and scope of the household survey tools will be determined on the basis of Consultant expertise, RACIDA priorities and knowledge, and Consultant-RACIDA engagement. The tools will be finalized by RACIDA.

4.3.2. Sampling Framework

A sample of respondents, stratified by gender, will be randomly selected in each target area for the quantitative survey. The sample will be statistically representative of the populations living in each target area based on the acceptable statistical sampling techniques. This should be in line with various contextual factors and proposed project site.

4.3.3. Sampling Approach

RACIDA expects the consultant to employ a sampling framework that utilizes a two-stage cluster sampling with probability proportionate to size (PPS) design. RACIDA suggests that the consultant use the latest version of the Emergency Nutrition Assessment (ENA) for Standardized Monitoring of Relief and Transitions (SMART) to determine sample size using village-disaggregated population data available from national and local authorities. The sample size should be disaggregated by village, children < 5, women and men, and any other demographic determined as necessary by RACIDA.

4.3.4. Survey Administration

The survey will be administered using ODK/Kobo Tool Box. A number of checks will be put in place to ensure the quality and accuracy of the data collected. These will include but are not limited to:

- A thorough testing process for the data collection tool in line with standard operating procedures for tool development and testing, involving multiple layers of testing to ensure that the tool functions fully.
- A pilot phase in the field during which the tool is thoroughly checked and tested prior to final use.
- Daily checks of data collected to ensure that it is comprehensive and does not contain any mistakes.
- Daily debriefs with data collection team to ensure that any problems encountered during data collection are identified and resolved.
- Regular spot checks on the field during data collection to ensure data collectors are properly administering survey questionnaire.
- A final, thorough, data cleaning process which will include verification of any potentially inaccurate data and revisits to the field if necessary. A log of data cleaning will be kept by the consultant and shared with RACIDA to ensure that all steps in the process can be replicated. .

4.4. Qualitative Data Collection

Qualitative data collection methods will include Focus Group Discussions (FGDs) and Key Informant Interviews (KIIs) with community members, leaders, RACIDA staff, ministry officials, community health workers, and other relevant partners deemed appropriate. Example FGD participants include members of target communities, including women, youth, men, elders, and the like, and KIIs may include Ministry of Health Officials in Mandera County. The consultant team is expected to propose KII and FGD participants on the basis of their knowledge and on guidance from RACIDA.

Qualitative data collection tools will be determined on the basis of Consultant expertise, RACIDA priorities and knowledge, and Consultant-RACIDA engagement, and the tools will be finalized by RACIDA.

4.4.1. Focus Group Discussions

The FGDs will have the following goals:

- Gather qualitative data to triangulate, explain, and expand upon the quantitative data gathered.
- Explore in more detail the challenges facing community members and the perceived gaps in food security, health, and nutrition, WASH, and Livestock.
- Identify specific barriers faced by different groups, i.e. women, youth, people living with disabilities (PLWD), children, IDPs, and the like in each target area in terms of accessing services, participating in the development of the local community, and understanding these barriers can be overcome for these specific groups.
- Other goals as determined by RACIDA and the Consultant.

Participants will be selected by data collectors in the field based on selection criteria for each sample group. Each focus group will consist of 8 – 10 participants. To account for the sensitive nature of information which might be discussed during the FGDs, female facilitators will be involved in conducting the female FGDs and male facilitators involved in male FGDs.

All participants must give written consent to participate in the FGD.

4.4.2. Key Informant Interview

KIIs will also be conducted as part of the qualitative data collection. Interviews in each target area will be expected and will be expected to include PLWDs. KII should be conducted using both closed questionnaires and open-ended questionnaires, depending on the Key Informant.

The interviews will have the following goals:

- Understand the current trends for food security, nutrition, WASH, and livestock and in the capacity of the communities to respond to, plan for, and implement mitigation measures in response to these trends.
- Understand the current management, planning, and implementation practices of mitigation mechanisms for food security, nutrition, and health.

5. Survey Quality and Ethical Standards

5.1. Ethical Standards

The consultant shall take all reasonable steps to ensure that the survey is designed and conducted to respect and protect the rights and welfare of the people and communities involved and to ensure that the survey is technically accurate and reliable, is conducted in a transparent and impartial manner, and contributes to organizational learning and accountability. Therefore, the survey team shall be required to adhere to the survey standards and applicable practices as recommended by IFRC.

- **Utility** – Surveys must be realistic, diplomatic, and managed in a sensible, cost-effective manner.
- **Ethics & Legality** - Surveys must be conducted in an ethical and legal manner, with particular regard for the welfare of those involved in and affected by the survey.
- **Transparency** – Survey activities should reflect an attitude of openness and transparency.
- **Accuracy** – Survey should be technically accurate, providing sufficient information about the data collection, analysis, and interpretation methods so that its worth or merit can be determined.
- **Participation** – Stakeholders should be consulted and meaningfully involved in the survey process when feasible and appropriate.
- **Collaboration** – Collaboration between key operating partners in the survey process improves the legitimacy and utility of the survey.

It is also expected that the survey will respect the seven fundamental principles of the Red Cross Red Crescent: 1) Humanity, 2) Impartiality, 3) Neutrality, 4) Independence, 5) Voluntary Service, 6) Unity, and 7) Universality

5.2. Future Use of the Data

All data collected will be sole property of RACIDA & USAID OFDA. The consultant must not use the data for their own research purposes, nor license the data to be used by others, without the written consent of RACIDA and USAID OFDA.

6. Obligations

6.1. Obligations of the Consultant

- Give leadership to the technical team throughout the assessment
- Inform the Program Manager, M&E Officer in a timely manner of the progress made and any challenges encountered.

- Conduct the consultancy as per agreements in TOR, and contract, and if modifications are necessary, bring to the attention of the Program Manager before making any changes.
- Report on a timely basis as per the ToR and the contract agreement
- Declare any possible conflict of interest before signing the contract.
- Participatory share draft report and discuss the feedback and general findings with RACIDA team.
- Cater for his/her transport to the site or within his/her bid can indicate RACIDA to provide i.e. transport to the communities and exclude costing on the same within the bid.
- Organize for his/her own accommodation and cater for other expenses they may likely to incur during the assignment.

6.2. Obligations of RACIDA

- Make sure the Consultant is provided with the necessary and required resources i.e. the project documents- proposal, reports and any other that the consultant may need.
- Give logistical information and attend to any concerns that may arise during the endline exercise Facilitate the work of the consultant in accessing beneficiaries and other local stakeholders
- Monitor the daily work of the consultant and bring to the attention of the consultant /RACIDA any concerns that may arise
- Provide technical oversight in the review of all deliverables
- Provide timely comments on the draft report

7. Qualifications and Experience of Consultant

The lead consultant must have a background and experience in Nutrition, Public Health, or related field. The lead consultant must have a degree in public health, nutrition, economics, econometrics, or related field and experience in Emergency Response and Recovery programming, with a broad understanding of WASH, Agriculture, Food Security, and Nutrition.

7.1. Key Selection Criteria

The independent consultant/consultancy firm must demonstrate experience and expertise as follows:

- Master's Degree in Public Health, Nutrition, Health Economics, Public Policy, or another related field.
- Demonstrated experience in conducting high quality endlines or related projects in the past three years (sample reports are required during the bid analysis).
- Extensive hands-on experience in the sectors of Nutrition, Health, Food Security, WASH, Agriculture and Livelihoods.
- Experience working a resource-poor environment.
- Experience working in Kenya is preferred.
- Fluency in English is Mandatory.
- Knowledge and experience of emergency response and humanitarian response in East Africa is preferred.
- Strong interpersonal and communication skills.
- Previous experience working with USAID OFDA/OFDA projects either as a prime recipient, sub grant recipient, or consultant is preferred.

- The consultancy team must have a statistician able to analysis quantitative and qualitative data. It is preferred that this person have both professional and academic background in public health statistics and econometrics.

7.2. Application Evaluation Criteria

Evaluation Criteria	Sub criteria/Description	Score
Consultant Academic and Professional Qualification	Master's Degree in Public Health, Nutrition, Health Economics, Public Policy, or another related field.	20%
Consultant Prior Work Experience	<p>Detailed and specific experience in undertaking similar roles highlighting;</p> <ol style="list-style-type: none"> 1. Proven consultancy experience with endline assessments for emergency response programming, with sectoral experience in nutrition, wash, food security and livelihoods. 2. Demonstrated experience in conducting high quality endlines for related project in the past three years (sample reports are required during the bid analysis). 3. Extensive hands-on experience in the sectors of Health, Nutrition, and Food Security. 4. Sectoral experience and contextual knowledge of Mandera County, Kenya, as well as demonstrable experience conducting field assessments or working in the Northern Counties of Kenya. 5. Experience of working in a resource poor environment. 6. Experience working in Kenya. 7. Knowledge and experience of emergency response and humanitarian response in East Africa is an asset. 8. The consultancy team must have a statistician able to analysis quantitative and qualitative data. It is preferred that this person have both professional and academic background in public health statistics and econometrics. 9. Experience with Emergency Response and Recovery programming with a broad understanding of Nutrition, Food Security, and Public Health in the context of emergencies. <p><i>Bidder must attach detailed CV</i></p>	35%
Methodology/Approach	<p>Understanding of the terms of reference that includes:</p> <ol style="list-style-type: none"> 1. Outline of methodology and approach of implementing this assignment. 2. Proposed assignment plan that includes clear timelines for the assignment that demonstrates the understanding of the assignment expectation. 3. Firm Experience Sample work done: Citation (web link) of at least of 3 knowledge products developed and disseminated 4. Detailed budget breakdown based on expected daily rates and initial work plan. 	35%

Language analytical skills and	<p>Demonstrated capacity for high-level analysis and report writing, includes:</p> <ul style="list-style-type: none"> • Strong analytical and information presentation skills • Fluency in English is mandatory. • Organizing and facilitating the conduct of capacity building activities. • Mentoring and coaching colleagues at work. • Reviewing, updating and developing strategic plans, fundraising strategies, monitoring and evaluation policies, systems and tools, advocacy strategies, and action plans. • Developing concept notes and project proposals. • Networking and partnership building. • Ability to transfer skills and knowledge through formal or informal training and skills sharing. • Developed analytical skills. • Excellent interpersonal and communication skills, including the ability to communicate and work with a wide range of stakeholders in a participatory, respectful, collaborative manner, and to enhance effective work relationships. • Commitment to team building and a consensus-led approach to work. 	10%
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7.3. Application Requirements

Application materials should include the following:

- A Technical Proposal detailing the consultant's understanding of the task, proposed methodologies, expected activities and deliverables, proposed workplan, and the composition of the consultancy team to be engaged. The outline of the Technical Proposal is outlined in 7.3.1 and the team composition requirements are outlined in 7.3.2.
- A Financial Proposal detailing the costs that the consultant expects to be required to complete the assignment. The consultant is expected to account for all logistics and travel costs associated with the assignment.
- Detailed CVs of all professional staff who will work on the consultancy team.
- Must submit a certificate of Incorporation/ Business Registration
- Must submit a certificate of Tax Compliance
- Must Submit Business KRA PIN
- At least three professional reference from previous clients and full contact details of the referees.

7.3.1. Technical Proposal Format

- 1) Introduction: description of the firm, the firm's qualifications and statutory compliance. (1 page)
- 2) Background: Understanding of the project, context and requirements for services, Key questions (2 pages)
- 3) Proposed methodology - Indicate methods to be used for each indicator and highlight any areas where indicators may need adjustment. The targeted respondents should be indicated for each indicator. Proposed detailed questions should be indicated. Detailed sampling procedure needs to be indicated. (5 pages)
- 4) Firms experience in undertaking assignments of similar nature and experience from the geographical area for other major clients (Table with: Name of organization, name of assignment, duration of assignment (Dates)) reference person contacts. (2 pages)
- 5) Proposed team composition (As per 7.3.2). (1 page)

6) Work plan (Gantt chart of activity and week of implementation). (1 page)

7.3.2. Proposed Team Composition Format

- Name of Team Member
- Qualifications
- Years of Experience Related to Consultancy
- # of Days to be Engaged
- Roles(s) under this assignment

7.4. Submission of the Proposal

- Proposals **MUST** be submitted **via email** to RACIDA General Procurement: Procurement@racida.org on or before the deadline indicated on the synopsis of the RFP
- The Technical Proposal **must** conform to the proposed outline provided in 7.3.1. The proposed Team Composition should conform to 7.3.2.
- Bidders' submissions of technical and financial proposal should be submitted via email with the subject line "*Technical and Financial Proposal for Tender No. RACIDA/720FDA20GR00029-2020/2021-007*"
- All bidders **must** use the RFP reference number in the subject line of their email submission.
- Technical proposal and financial proposal shall be submitted as separate attachment.
- Neither technical nor financial proposals should exceed 10MB. The proposal with any subsequent modifications and counterproposals, if applicable, shall become an integral part of any resulting contract.
- Proposal must be written and submitted in English.

7.5. Duration of the Consultancy

The endline will be conducted over 16 billable days from contract signing to delivery of the final report.

7.6. Deliverables

The following deliverables are expected from the consultant:

Inception report, detailing the endline survey design, sampling methodology and framework, survey tools, and agreed upon budget and workplan.

Draft endline report that will contain the following elements:

1. Table of contents
2. Executive Summary
3. Objectives of the Endline, Methodology, and any challenges encountered in the field.
4. A presentation of the findings and the analysis.
5. Conclusions
6. Recommendations with clear guidelines on how they can be implemented.
7. Report Annexes:
 - Copies of original and cleaned data sets (with a codebook for both quantitative and qualitative data), including original field notes for KIIs and FGDs, as well as recorded audio material, if available, should be submitted with the draft report.
 - Hard and Digital Copies of Signed Consent provided by respondents.
 - A power point presentation highlighting key findings from the endline, presented at a feedback meeting to be held after completing the draft report.

- Final Endline Survey Report – submitted as one digital copy and least 2 bounded, signed hard copies submitted to RACIDA by the agreed submission deadline.

7.7. Corruption or Fraudulent Practices

RACIDA requires that Bidders observe the highest standards of ethics during the procurement process and execution of contracts. A tenderer shall sign a declaration that he has not and will not be involved in corrupt or fraudulent practices.

RACIDA will reject a proposal for award if it determines that the tenderer recommended for the award has engaged in corrupt or fraudulent practices in competing for the contract or completing any contract awarded.

A tenderer who is found to have indulged in corrupt or fraudulent practices risks being debarred from participating.

Please report any malpractices to complaints@racida.org.