



## TERMS OF REFERENCE

**Project:** *EMWE*

**Position Title:** Evaluator or Consultant team

**Place of Assignment:** Vietnam – Ha Noi, Dien Bien and Bac Kan provinces

**Reporting to:** Nguyen Tri Dzung and Le Xuan Hieu

**Duration:** April – June 2017

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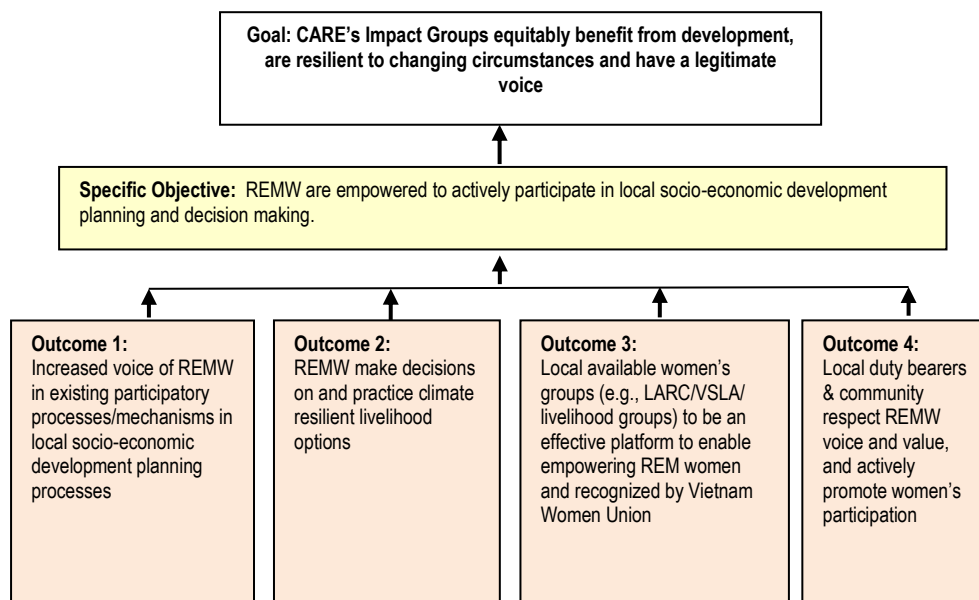
### 1. Background

**CARE Vietnam** (CVN) is the representative of CARE International in Vietnam. CVN operates under the lead membership of CARE Australia. The laws and regulations of the Government of Vietnam apply to all staff, contractors and consultants. Within CVN, the Country Director has overall management authority as the representative of the lead member and of CARE International.

In adopting CARE International's program approach, CVN has shifted the focus of our work from changes at the sectoral or geographical levels, to that of **impacts** for particularly marginalised and vulnerable groups of people – our program **Impact Groups**. CARE recognises that the key to achieving equitable development outcomes lies in shifting deeply rooted, structural **underlying causes of poverty**, which contribute to exclusion and vulnerability of particular groups in society. Two programs have been designed by CVN to date. One focuses on significant and lasting change for **Remote Ethnic Minority Women** - who are land poor, have weak resilience to hazards and shocks, and in particular women; and the other focuses on **Socially Marginalized People**. The Ethnic Minority Women's Empowerment (EMWE) project is part of the Remote Ethnic Minority Women program.

Jointly with implementing partners, CARE Vietnam has been implementing the EMWE project in two communes of Dien Bien province (Pa Khoang and Muong Phang) and two communes in Bac Kan province (Phuc Loc and Banh Trach) from 2013-2017. This project is funded by the Australian Government's Australia-NGO Cooperation Platform (ANCP). EMWE works with remote ethnic and marginalised women (REMW) through their membership in women's groups (e.g. Livelihoods and Rights Clubs – LARCs) so they may equitably benefit from development, be resilient to changing circumstances and have a legitimate voice at all levels. The project achieves this by working with the People's Committees and People's Councils at the commune level in the project provinces of Dien Bien and Bac Kan in order to strengthen feedback mechanisms between REMW and local authorities. EMWE also involves Vietnam Women's Union (VWU), the agricultural promotion department, and Rural Development (DARD) for the implementation of livelihood models. The overall objective of EMWE is that REMW are empowered to actively participate in local socio-economic development planning (SEDP) and decision-making processes.

The project intervention logic is described as below:



## 2. Rationale and purpose

The main purpose of the evaluation is to assess the effectiveness, relevance, efficiency, sustainability and impact of the EMWE project. It will generate lessons learnt and recommendations for future projects targeting EM women, and programming under CARE's REMWE program more broadly. The primary audience will be CARE staff (in Vietnam and Australia), the donor, and project partners.

An external evaluator (individual or evaluation team) is required to undertake the evaluation to ensure an independent, objective assessment of the project's achievements.

## 3. Key Evaluation Questions

The evaluation will answer the following questions:

1. How **relevant**<sup>1</sup> were the project strategies and approaches in achieving the expected outcomes of the EMWE project?

### Sub questions

- 1.1 To what extent is EMWE aligned with relevant country/local policies and strategies?
- 1.2 What is the relevance of the different project strategies and methodologies?

2. How **effective**<sup>2</sup> were project strategies and approaches in achieving the expected outcomes of the EMWE project?

### Sub questions

- 2.1 What results have been achieved vs project targets in the logframe?
- 2.2 To what extent were project strategies effective in achieving results against the four Outcome areas?
- 2.3 To what extent has the project changed the gender and power relationships in the target communities?
- 2.4 How effective was the project in integrating various project strategies, including gender (against the CARE Gender Equality Framework), disability and climate resilience?

<sup>1</sup> Relevance – “The extent to which the objectives of a development intervention are consistent with beneficiaries’ requirement, country needs, global priorities and partners’ and donors’ policies”.

<sup>2</sup> Effectiveness – “The extent to which the development intervention’s objectives were achieved, or are expected to be achieved, taking into account their relative importance”.

### 3. How **sustainable**<sup>3</sup> and enduring are the outcomes of the EMWE project likely to be?

#### Sub questions

- 3.1 If changes have occurred in the project's four Outcome areas, how likely is it that they will be sustainable? Which project initiatives are most likely to sustain?
- 3.2 To what extent do LARC members, implementing partners and local authorities have sufficient knowledge, motivation and skills to continue project initiatives after closure?
- 3.3 What factors will impact project sustainability and how are these factors addressed?

#### 4. Evaluation scope, approach and methods

The focus of the evaluation will be on the four years of the EMWE project, initiated in 2013. As the project's logframe was updated in baseline survey in May 2015 and then MTR in 2016, this latest version should be used.

In terms of documenting results, the evaluation will mainly focus on the outcome level and will reflect on strategic choices made in operationalizing the project at both community and organizational levels by partners and CARE. The evaluation will be informed by primary research conducted with EMWE participants, partners, and CARE staff; and will draw on project documentation, especially the baseline survey, gender analysis, annual reports, project reflections, and mid-term review.

Field work should assess key activities and interventions under EMWE in the three target locations – Bac Kan, Dien Bien and Ha Noi (with Central Women Union) – to capture findings on the strategies and approaches used by the project.

The evaluation methodology will be presented to the CARE evaluation team before commencing work. It is expected that the evaluation will include both quantitative and qualitative approaches, including (but not limited to): 1) The collection of endline data for comparison against the project baseline assessment; 2) Findings against the evaluation questions reference with DAC criteria; and 3) Case studies highlighting key project outcomes, including Most Significant Change stories and/or case studies of advocacy achievements.

The evaluator should conduct the evaluation with careful consideration of the utility of the evaluation and bearing in mind the following principles:

- ✓ Ethical research principles;
- ✓ Judgments should be made relative to context (the evaluation will draw conclusions and identify trends taking into consideration the role of and interplay with context);
- ✓ Strong utility focus (user engagement) in planning and implementation of evaluation (respecting time constraints);
- ✓ Using/building on previous studies and evaluation;
- ✓ Attention to equality and rights in all aspects of the evaluation.

#### 5. Schedule, budget, logistics

The evaluation work is expected to commence in **early April 2017** and the Final Evaluation Report shall be submitted by the **start of June 2017**.

It is expected that the consultancy will amount to 24 working days.

| Step | Contents  | Remarks                        | # days |
|------|---|--------------------------------|--------|
| 1    | Finalise consultant contracts, update TOR (if necessary), action plan and timeline based on discussion with consultants | To be prepared by CARE Vietnam | -      |

<sup>3</sup> Sustainability – “The continuation of benefits from a development intervention after major development assistance has been completed. Probability of long-term benefits. The resilience to risk of the net benefit flows over time.”

|                   |  |  |           |
|-------------------|--|--|-----------|
| 2                 | Evaluator undertakes document review   |  | 1         |
| 3                 | Development of evaluation protocol (inception report), methodology and tool by consultants   | Methodology, plan and tools to be agreed with CARE before commencing the field work                    | 2         |
| 4                 | Meeting with CVN staff to present evaluation tool and planning for field work  |  | 0.5       |
| 4                 | Commence evaluation in Vietnam including:<br>- Field work in Dien Bien (4 days)<br>- Field work in Bac Kan (4 days)<br>- Meeting with relevant agencies in Hanoi (1 day) | Detailed itinerary to be prepared by CARE Vietnam and agreed with consultant prior to evaluation start | 10        |
| 5                 | Briefing of key findings with the program staff/senior management and key partners for discussion and validation   | Evaluator to share key findings and recommendations  | 0.5       |
| 6                 | Evaluator analyses data, writes and submits 1 <sup>st</sup> draft report.  | To CARE Vietnam  | 8         |
| 7                 | Review and comment on draft report   | By CARE Australia and CARE Vietnam   | -         |
| 8                 | Finalize report and submission   | To CARE Vietnam  | 2         |
| <b>Total days</b> |  |  | <b>24</b> |

Please note that timeframes for individual steps to be agreed in consultation with the consultant.

## 6. Key deliverables, responsibilities and reporting arrangements

Key deliverables of the evaluation consultancy:

- Evaluation protocol (inception report), methodology and tools;
- An evaluation debriefing on the key findings to be presented to CARE and partners in Hanoi;
- A number of case studies (maximum 2-3) highlighting project outcomes in terms on individual changes or advocacy achievements (both positive and negative);
- An evaluation report in English (drafts and one final version), including an executive summary, and with consistency between findings, conclusions, lessons and recommendations (max. 25 pages excluding annexes), approved by CARE Australia and CARE Vietnam
- Electronic copies of survey findings, notes from meetings, key informant interviews and focus group discussions.

Responsibility for the content and presentation of the findings and recommendations of the evaluation rests with the evaluation consultant. Findings and recommendations expressed in the evaluation report will not necessarily correspond to the views of CARE (or other stakeholders). It is the responsibility of the evaluators to ensure that there is a clear link between findings, conclusions, lessons learned and recommendations and in general to ensure that the evaluation is based on solid evidence (and/or indicate solidity of evidence for the various judgments made).

The evaluation will be supervised by Nguyen Tri Dzung (REMWE Program Team Leader). Other key focal points inside CARE Vietnam will be Le Xuan Hieu, CARE in Vietnam's Portfolio Manager, Nguyen Ngoc Trieu (M&E Advisor) and Elizabeth Cowan (Country Programs/Gender Advisor).

The EMWE team will be responsible for providing all logistics and support during the field work, including translation service (as required).

CARE Vietnam and CARE Australia will review the draft evaluation report, with CARE Vietnam providing ultimate sign-off in light with CA's endorsement. Payment will be made on acceptance of final outputs by CARE Vietnam.

## 7. Team composition and selection criteria

The evaluator can be a Vietnam national or international professional/team of professionals with relevant education and working experience.

Required attributes:

- a. Proven capacity and extensive experience in management and conduct of evaluations, including strong analytical skills and experience from evaluating women empowerment as well as women economic empowerment programs
- b. In-depth awareness of ethnic minority women and culture
- c. Demonstrated written communication skills including ability to communicate complex concepts in plain English and develop relevant, useful recommendations

Preferred attributes:

- d. Strong understanding of program approaches as well as the relationships between NGOs, Government authorities and donors
- e. Experience with the Vietnamese development context
- f. Experience in analysing partnerships and capacity development

## 8. Contact, application and required documents

Enquiries about this consultancy can be sent to Le Xuan Hieu, Portfolio Manager. [LeXuan.Hieu@careint.org](mailto:LeXuan.Hieu@careint.org)

Interested candidates should send the following documents and clearly stating the position title to email: [procurement3@care.org.vn](mailto:procurement3@care.org.vn) by the closing date of ...January 2017.

1. Your CV
2. A list of relevant past work
3. At least one written example of a past evaluation
4. Draft conceptual framework for the evaluation including description of methodology and tools
5. Financial proposal with daily rate for the consultancy

Only short-listed applicants meeting the requirements stated above will be contacted for interview. Please no telephone contact after submitting the application.

## 9. Child protection

CARE International in Vietnam is committed to protecting the rights of children in all areas we work around the world. Applicants are advised that CARE International in Vietnam reserves the right to screen candidates to ensure a child-safe environment. Further information can be found in the CVN child protection policy.

## 10. Signatories

*Prepared by:*

*Recommended by:*

*Endorsed by:*

*Approved by:*

Le Xuan Hieu

Nguyen Ngoc Trieu

Nguyen Tri Dzung

Le Kim Dung

## ANNEXES

### 1. **CARE Australia Evaluation Policy**

[https://www.care.org.au/wp-content/uploads/2015/03/Policy\\_CARE\\_Australia\\_Evaluation\\_Policy.doc](https://www.care.org.au/wp-content/uploads/2015/03/Policy_CARE_Australia_Evaluation_Policy.doc)

### 2. **Suggested Evaluation Report Outline**

The following is *a tentative outline* of the final evaluation report (maximum 25 pages):

1. Executive summary highlighting main findings and recommendations
2. Introduction
3. Project background
4. Evaluation objective(s)
5. Evaluation methodology including limitations
6. Findings against evaluation questions
7. Lessons learned (both positive and negative) and/or good practice
8. Recommendations and conclusion
9. Annexes: All evaluation tools, evaluation schedule, and other supporting documents (e.g. photos, documentation, and case studies/most significant change stories)