**TERMS OF REFERENCE FOR Baseline Study for social change project in White Nile in Sudan**

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| **Organization** | Plan International Sudan |
| **Project title** | “Yes, we can raise girls free from FGM and CEFM in our communities” |
| **Location** | White Nile State |
| **Project Duration** | 1st July 2020 to 30st June 2023 |
| **Task Type** | Baseline survey  |
| **Task duration**  | 50 days after signing the contract  |
| **Local Partners engages in the project** | **Authorities:**National Council of Child Welfare (NCCW) and State Council of Child Welfare, State Ministry of Health and social development **Civil Society Organization – CSOs:**1. CAFA Organization.
2. CBOs
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1. **Introduction to Plan International Sudan**

Plan International is an independent development and humanitarian organization that advances children's rights and equality for girls. In Sudan, Plan International has been working for more than 40 years, building powerful partnerships with and for children in over 300 communities in White Nile, Kassala, North Kordofan and North Darfur. In South Kordofan, Gedarif, East and West Darfur, projects are implemented through partner organizations.

Plan International Sudan is implementing its new Country Strategy which covers the five-year period from June 2018 to May 2022. The strategy will guide Plan’s work for the 5 years in line with the government of Sudan’s development, the Sustainable Development Goals, and the child rights agenda with specific focus on the rights of girls and excluded groups. Our overarching ***goal*** is to ensure that “Vulnerable children and youth are able to realize their full potential within protective and resilient communities which respect and promote girls’ equality”. This will be achieved through five strategic

1. Vulnerable Children 6-14 years particularly girls and young women complete quality gender responsive and inclusive formal and non-formal basic education to succeed in life.
2. Vulnerable Young people particularly young women (15-35 years old) are able to decide on their lives and lead in economic, social and civic life of their communities.
3. Vulnerable children particularly girls and young women live in communities free from all forms of violence, traditional harmful practices and gender discrimination and are able to take decisions on their lives.
4. Vulnerable children particularly girls 0- 5 years grow up equally valued and cared for to thrive in communities and societies that respect child rights and equality.
5. Vulnerable children, especially girls, live in resilient communities and have free and safe access to life-saving services during and after natural disasters and conflicts.

The objectives are utilizing the community and individual level mobilization to promote the attitudinal and behavioral changes which are required to support transformational change for the improvement in the child rights and gender equality situation in Sudan.

We aim to strengthen the capacity of communities, children and youth to lead their own development, and to this end we will support civil society and local organizations to monitor and support the implementation of policies and laws that create a conducive environment for the attainment of child rights, particularly those that pertain to girls and young women.

1. **Background and overview of the project**

Sudan has a population of over 41 million as per 2009 projection, with a prominent youth bulge - 50 percent of this total are children under the age of 18 and 62% are below the age of 25. The population is primarily Muslim with a small Christian minority and smaller numbers who follow more traditional beliefs. Despite significant levels of urbanization, the population is predominantly rural (33.2 percent urban and 66.8 percent rural). The interwoven web of challenges coupled with historically built patriarchal societal system in Sudan, where culture, religion, tribal affiliation, geography and politics have contributed to a male dominated hierarchy at family, community and public levels that translates into poor outcomes in particular for women and girls. On the individual and family level, based on national surveys cited by UNICEF (2018), the main concerns in Sudan related to girls and women is the lack of protection and the exposure to sexual and gender-based violence such as child and early forced marriage, disregard for female bodily integrity and female genital mutilation.

Child early and forced marriage (CEFM) is usually defined as marriage before the age of 18. Sudan has a high prevalence of child marriage, with 40 percent of women in the 20-24 age group reporting being married before the age of 18, and 15 percent of girls who married before the age of 15 (UNICEF Sudan, 2017). About 40 percent of married women aged 15-19 are married to a man that is at least 10 years older. The practice is slightly more common in rural than in urban areas and varies considerably across the states (Thiam, 2016). In White Nile, the percentage of women age 20-49 years who first married or entered a marital union before their 18th birthday are 37 percent.

Multiple above cited factors interact to place a child at risk of marriage. Parents encourage the marriage of their daughters while they are still children in hopes that the marriage will benefit them both financially and socially, while also relieving financial burdens on the family. Strong correlations between a woman’s age at marriage and the level of education she achieves, the age at which she gives birth to her first child and the age of her husband has been well documented. Interestingly, a study conducted by UNICEF SCO on child marriage in 2012, showed that many girls were forced by their families, parents or siblings to marry at young age because it’s “sutra” (a protection) for them or a perception that children of young mothers will be healthier (UNICEF Sudan, 2012). CEFM thus also means that these girls risk falling pregnant early, raising children while being children themselves. Indeed, 23 percent of women are reported to have given live birth before the age of 18. Marriage as early as by 13-15 years is reported to be common in rural and poor communities and is also linked to limited access to education.

Similarly, although the data available indicate that practices of female genital mutilation (FGM) affecting the bodily integrity of girls have been slowly decreasing, FGM continues to be widely practiced in Sudan. Although variations by state must be noted, at the national level 86.6 percent of women in the reproductive age have undergone a form of FGM. It has been reported that 31.5 percent of girls aged 0-14 years are already mutilated. Similarly, to CEFM, FGM is reported to be perceived as a practice that links a girl’s sexual activity before marriage with spoiling the family “honor”. Consequently, FGM is a cruel and painful way of controlling girl’s sexuality and is believed to reduce a girl’s sexuality and reduce the likelihood of having sexual affairs prior to marriage. Evidence shows that the practice tends to be a cause of chronic infections; severe pain during urination, menstruation, sexual intercourse, problems of childbirth that may lead to child deaths; psychological trauma; and in some cases, even death. (WHO, 2017). The FGM practice in White Nile state 93.7%.

On the community and civil society level, the difficulties and hardship encountered by girls and young women are compounded by inadequate access to service, as well as the absence of coordinated civil society advocacy for women` and girls` rights. More project information is in the proposal document which will be given to selected firm during desk review.

**Project overall goal**:

To ensure that Vulnerable girls and young women in 21 Sponsorship communities in WN exercise their right to live free from FGM/C, CEFM and traditional harmful practices with support of CBOs, community & religious leaders and peer groups.

**Project Purpose:**

To ensure that communities, CBOs and civil society adopt positive social norms and laws to protect children's rights with a particular focus on tackling FGM, CEFM and building change in attitudes and behaviors on gender equality and girls and women’s human rights in White Nile.

**The below table show result frame work of the intervention:**

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| **Intervention Logic** | **Measurable Indicators of Achievement[[1]](#footnote-1)**  | **Target[[2]](#footnote-2)**  | **Sources of Verification**  |
| **Overall goal/objective:** Vulnerable girls (10-17) and young women (18-24) in targeted 21 Sponsorship communities in White Nile - WN exercise their right to live free from Gender Based Violence - GBV (i.e. FGM/C, CEFM and traditional harmful practices)  | % of targeted adolescents and youth who demonstrate increased knowledge and skills on prevention of FGM & CEFM (M/F/age/disability).% of targeted parents/caregivers who demonstrate increased knowledge, skills and improved practices on GBV affecting girls (M/F/age/disability)% of parents who do not intend to practice FGM and not to marry their daughter before the age of 18 | 60%60%40% | Pre/post-assessmentPre/post-assessmentFinal evaluation reports  |
| **Outcome 1: At risk Girls age (10-17) and young women (18-24) increase capacities, skills and opportunities/spaces** **to participate and have information that help them to determine their own futures choices.** |
| **Output 1.1:**Three (3) local advocacy platform/spaces established and functional where girls age (10-17) and young women age (18-24) access accurate information on GBV and gender equality issues within targeted communities in WN  | # of advocacy forums established and functional (at least 2 out of 3)% of vulnerable target girls age (10-17) and young women (18-24) access to established advocacy centers (20% of M/F/age/disability) | 3 forums457 children  | Project reports- PhotosRegistrations forms, attendance sheets |
| **Output 1.2:** Girls & young women capacitated on how to speak out as equal partners on ending FGM and CEFM by the end of the project.  | % of targeted girls age (10-17) and young women (18-24) who are aware of negative impact of FGM & harmful practices on girls, intimate partner violence, and areas to access required support and services (at least 80% attendance benchmark) (M/F/age/disability) | 150 girls  | Registrations forms, attendance sheets  |
| **Output 1.3:** Adolescent girls at risk of CEFM access to quality and safe education opportunities through placement in vocational training centres and schemes that are valued & supported within the communities. | # of adolescent girls age (14-17) and youth age (19-24) who gained the desired knowledge on entrepreneurial skills.# of trained adolescents girls received start-up kits and linked with available marker opportunities  | 150 girls150 girls | Registrations forms, attendance sheets Vocational training reportsDelivery and handover reports  |
| **Outcome 2: Policy makers, Religion/traditional leaders, Midwives and CBOs actively protect girls from FGM and CEFM due to positive roles performed on implementation of laws by the end of the project** |
| **Output 2.1:** Policy makers, traditional, religious leaders, midwives take concrete actions to end FGM and CEFM affecting girls in 21 targeted sponsorship communities in WN by the end of the project. | # traditional/religious leaders and midwives identified, supported and trained on the negative impact of FGM and CEFM on girls’ rights.# of public events organized to ban and stop FGM and CEFM free communities  | 50 people5 community | Attendance recordsAttendance signed for public declaration Photo documentation |
| **Output 2.2:** parents and community members including (girls, and boys) are aware of negative impact of social norms that harms girls in 21 targeted sponsorship communities in WN. | # of people reached by awareness sessions on the negative impact of FGM and CEFM % of community members who can recite at least 3 negative impact of both FGM and CFEM | 70% of target community 60%  |  |
| **Output 2.3** CBOs activities sub-granted so they coordinate efforts and mobilized communities to end FGM and CEFM in targeted communities  | # of CBO identified, trained and sub-granted to conduct activities aimed for gender transformation to end FGM & CEFM practice on girls in targeted communities.# of CBOs who promoted social protection /inclusion services in targeted communities  | 3 CBOs3 CBOs | CBO identification and selection reportCBO proposals & implementation reports  |

1. **Target groups**

**Rights holders:**

The project will target direct 878 target girls and 271direct target boys aged 9-18 years old. The project activities at community level will take an inclusive approach and aim to raise awareness and engage community children and youth at large. A set of selection criteria will be developed to form the basis for the identification of participants in Girls’ Clubs in targeted communities with peer mentorship along with facilitation of advocacy spaces for girls and young women to discuss and challenges negative social norms affect their live-in line with the project's gender transformative approach which focus on addressing gender norms, strengthening girls' and young women's agency, advancing girls' and women's condition and position, working with boys and men to embrace gender equality, responding to the needs and interest of girls and boys in all their diversity, and fostering an environment that enables gender equality and girls' rights. The project will target 666 young men and 469 young women as well as 1,135 adults.

**Duty bearers:**

The primary duty bearers of the project include community, state and national level decision-makers all of which are responsible for the fulfillment of children's and girls' rights. The project will train, bring together and advocate legislators as well as ministries across sectors at state and national level to promote the establishment of systems and laws capable of protecting, preventing and responding to CP issues with a particular focus on CEFM and FGM.

**The secondary duty bearers** of the project include targeted actors with a potential to influence the formulation and implementation of decisions. Community actors engaged in developing integrated action plans constitute one key target group of the project. The composition and structure of such actors can differ somewhat from community to community. CSOs and CBOs – with particular focus on women and youth-led CSOs and CBOs – will be strengthened with a view to increase their capability of mainstreaming gender equality, CEFM and FGM into services (vis-à-vis the beneficiaries) as well as to develop knowledge, information and evidence that can feed into state and national-level policy dialogues (vis-à-vis primary duty bearers). Providing input to integrated community action plans and forming the basis of the social accountability mechanisms, the girl Clubs will be supported. Finally, community members at large, including e.g. caregivers, will take part in awareness activities and the development of community action plans to combat CEFM and FGM.

1. **Overview of the Baseline survey:**

**Objective of the baseline survey**

The objectives of the baseline survey are as follows:

1. To establishes a fixed baseline data or starting points against which project outcomes and progress will be measured throughout the result framework.
2. To give provide root causes and drivers of CEFM and FGM in the targeted communities as well as any gender discrimination and exclusions exist and suggest positive initiatives to address the challenges
3. Assess existence and capacities of CBOs and CSO working in the of child and women right in the targeted areas for potential support and coordination.

**Scope of the Study**

The Study shall cover 21 communities stated in the proposal document in all three localities in White Nile state where the project will be implemented; where Plan International has sponsorship operations. The data collection should be obtained from girls and boys age 12-18 years (in school and out of school) as well as youth 19-14 years; Parents, school teacher, midwives, community leaders and local community structures; relevant duty bearers and local government and relevant CSOs working gender equality and women empowerments issues in the area.

**Approach and Methodology**

The consultant must outline clearly how respondents will be invited and selected, to demonstrate the quality and representativeness of the data. The expectation is that this assignment will involve multi-site data collection activities, exercise cultural sensitivity, and apply both quantitative and qualitative methods for data collection. The consultant must demonstrate capacity to use participatory tools including but not limited to desk review, in-depth interviews, key informant interviews, focus group discussion, and participatory rural appraisal with CSOs, government stakeholders and other project beneficiaries (including children and youth groups).

Plan International is committed to ensuring that the rights of those participating in data collection or analysis are respected and protected, in accordance with Ethical MERL Framework and our Global Policy on Safeguarding Children and Young People.

The researchers (s) are encouraged to present a baseline framework and plan and as well define the baseline methodology and survey methods to be used. These should be rigorous yet at all times proportionate and appropriate to the context of the project intervention. Participatory methodologies are preferred. Sources of data should be properly documented and data disaggregated by sex, age and disability during collection and analysis. The consultant should clearly state appropriate analytical tools for both qualitative-quantitative. Plan International Sudan retains intellectual property rights to the data, materials, and deliverables produced under this assignment and the consultant will do everything necessary to give effect to this assignment.

**Timelines**

During the whole period of the assignment, follow up meetings will be held between the consultant firm and Plan International Sudan focal points to tackle any field problems anticipated in order addressed it beforehand. The baseline survey and mapping exercise expected to be conduct within 50 days including final report writing; but the consultant shall provide clear detailed workplan to undertake this baseline based on below tentative.

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| **Issue**  | **Timeframe**  |
| An inception report highlighting operational methodology and detailed work plan  | 5 days after contract signature. |
| Data collection and field work  | 15 days after inception report approval |
| First draft report with two rounds of feedbacks  | 10 days completing the field work |
| Power point presentation on methodology, key results and recommendation of the baseline survey for validation workshop | 10 days after receiving all feedback responses  |
| validation workshop | 1 days after agreement on the PPT shared  |
| Final comprehensive baseline assessment report  | 6 day from validation workshop with incorporation of all feedbacks |
| A summary report (4-5 pages) hard & soft copy both in Arabic and English. | 3 days after submission of final comprehensive report  |
| Total  | 50 days  |

**Plan International Sudan provisions to the consultant:**

* Provision of project documents (the Proposal, result framework, and risk assessment).
* Provide linkages to relevant resources and information available.
* Facilitate the approval of the survey with local authorities in the three states.
* Conduct start-up meeting with the survey team before the mission to the fields.
* Provide financial support to the consultant on time based on signed contract agreement.
* Ensure the consultant and the working team understand the safeguarding policy and code of conduct.
* Ensure consent forms are available and used by the working teams.

**Intended Users of the Baseline Study Report**

The primary user of the report will be Plan International, the implementing partners. Secondary; the Swedish International Development Agency (SIDA) as the donor of this project. Thirdly, relevant government line ministries like the State Council of Child Welfare (NCCW) and Ministry of Social Welfare as well as another sister organization.

1. **Deliverables and Outputs:**

Below are the expected deliverables by the consultant based on close consultation with the Project Manager:

* An inception report highlighting operational methodology and detailed work plan (indicating process, timelines and data gathering instruments (survey questionnaires, etc.) as well as the budget to be reviewed and approved by Plan International Sudan in dialogue with Plan international Sweden.
* Conduct a desk review of key relevant documents and literature (both internal and external) to have clear understanding of the project activities design and contextual framework,
* A draft report in English with two rounds of feedbacks from Plan, should be expected. Please refer to (Annex 1) for the structure of the baseline report.
* Final comprehensive baseline assessment report submitted in electronic version incorporating the main benchmarks, recommendations and finding on existing programs
* Ensure systematic baseline database produced and delivered with final report along with recommendation of targets for performance evaluation.
* Power point presentation of the methodology, key results/findings and recommendation of the baseline survey (to be presented in a validation workshop with key stakeholders).
* A summary report (4-5 pages) hard & soft copy both in Arabic and English.
* Design tools/questionnaire, sampling and methodology for data collection of both qualitative and quantitative data and ensure translation into Arabic languages.
* Convey training to data collectors with close monitoring and supervision to ensure quality data collection process at field level.
* Carry out and administer data collection and analysis for reporting
* Provide final version of data collection tools
1. **Expertise and Experience of the Consultant**

The consultancy team should be a multi-disciplinary to ensure covering the following skills:

* Track-record of previous high-quality assessments and mappings experience, including using participatory approaches particular in the areas of protection and social norms.
* Proven ability and outstanding experience to manage in-depth qualitative assessment by handing an example of qualitative assessment undertaken earlier.
* Familiar with participatory approaches and having strong participatory methodology and experience,
* Experience in carrying out research with children and adolescents will be an advantage,
* Have a minimum of a BSC degree in the fields of Social Sciences or any other related fields,
* Know how to undertake desk reviews, as well as rapid assessments, qualitative and quantitative data collection & or evaluations,
* Technical competence in child protection and community development**,**
* Has good understanding of international and national child protection instruments,
* Have solid understanding of the situation of the country, local context and the ongoing changes.
* Aware of gender equality, gender transformations and responsive programming
* Excellent communication skills (written and oral) in English and Arabic/local language.
* Strong programmatic understanding particularly monitoring and evaluation skills, statistics, including experience developing indicators and carrying out baselines.
* Proven ability to publish concise, focused, and easily understandable research/studies and assessment reports.
1. **Application Process & Requirements**

Interested Consultant must submit the following documents:

1. **Cover Letter,**
2. **CV of the firm and the survey team members** involved in the survey process with reference details to previous clients and the team/individuals involved in this work with their CVs
3. **Sample of previous work** in similar consultancy work (assessment/survey/baseline assessment). It can be a part of the CV.
4. Share a copy of the firm registration certificate
5. **Technical proposal** to conduct the baseline survey based on the project background, project logic and results framework: The detailed technical proposal should:
* show a thorough understanding of this term of reference,
* plan for the baseline information to be collected (detailed timeframe, including dates for submission of first draft and final report),
* proposed methodologies appropriate given the objective of the assessment,
* include a description of how to approach the data gathering methods and how to approach sampling,
* demonstrate how to collect and manage the quantitative and qualitative information.
* demonstrate approaches that will be used to ensure child protection and ethics and principles will be applied throughout the design and data collection phases of the study, and how targeted people will be included.
1. **Tentative financial proposal (budget) containing:**
* consultancy fees/costs,
* field data collection expenses broken down by team members, number of days, fees per team member according to the level of involvement and number of days required from each,
* travel, communication (internet, mobile credit) and administrative expenses,
* any other related costs and required for the proper conduction of the survey,
* Plan will cover the cost of meeting for presentation and validation of the results.
* In case of institution paying VAT you should include it in financial budget.

**Applications**

If you have experience of working in a similar capacity, meet the above profile and want to make an active and lasting contribution to protection of children in Sudan, please submit your proposal including your financial proposal and documents in a sealed envelope on or **before 4:30 pm of Monday October 5th, 2020** to operations Department at: Plan International Sudan, The Nile Tower, Fourth Floor/ Block 10, Building #20, Street 63/, Alimtedad, East Khartoum/ The envelop must be marked with the title of the assignment. So, you can submit your detailed proposal to Ahmed Mohamed Ibrahim – Procurement Specialist via his email Ahmed.Ibrahim@plan-international.org​ with copy to Osman Adam Abdelkarim, Program Lead – Child Protection in his email: osman.abdelkarim@plan-international.org. Kindly note that the closing date of submission above and please.

1. **Ethical Considerations**
* The study objectives should be clearly explained to all the respondents of the study before gathering data from them.
* No one will be forced to provide information for the study.
* The Study team will be abstained from collecting data from those who will deny or show any kind of disinterest in providing information.
* As a minimum, the interviewer should sign that consent has been provided before collecting data and oral/verbal consent of the respondents would be considered.
* The study team will be highly committed to the respondents to keep the privacy of their information and source of data and put heartiest endeavor to be unbiased in collecting data.
* The study report will not reveal the identity of the respondents.
* The collection and analysis should be in line with the Framework for ethical Monitoring, Evaluation, Research and learning (MERL) guidelines.
1. **Safeguarding Children and Young People Policy (SCYPP)**

The firm/individual shall sign and comply with Plan’s Safeguarding children and Young People Policy of and any violation /deviation in complying with Plan’s SCYPP will not only result-in termination of the agreement but also Plan will initiate appropriate action in order to make good the damages/losses caused due to non-compliance to the policy.

1. **Bindings**

All documents, papers and data produced during the assessment are to be treated as Plan’s property and restricted for public use. The contracted agency/consultant will submit all original documents, materials and data to Plan International Sudan in the Country office.

1. **Disclaimer**

Plan International Sudan reserves the right to accept or reject any or all proposals without assigning any reason what so ever.

**Annexes to be given to successful candidate:**

1. Baseline Report Contents – for follow it during reporting
2. Plan International’s Safeguarding Children and Youth People Policy – for adherence
3. Plan International’s Research Policy and Standards – as guidance

Plan international ethics for monitoring evaluation and research to be read and signed before starting the field work.

1. *Indicators will be disaggregated by age, gender, and other diversity considerations.* [↑](#footnote-ref-1)
2. *Target numbers will be disaggregated by age, gender, and other diversity considerations.* [↑](#footnote-ref-2)