

TERMS OF REFERENCE

Inclusive Multi-Purpose Cash Assistance (MPCA) to conflict-affected populations in Ukraine

Ukraine crisis: Context of intervention

In 2021, Russia began amassing troops and military equipment near the border with Ukraine. In December, Russia presented detailed security demands to the West, including that NATO ceases all military activity in eastern Europe and never accepts Ukraine nor other former Soviet nations as members. Political negotiations failed to find a diplomatic solution and violence escalated in eastern Ukraine in mid-February 2022, further aggravated by Russian President

Putin's official recognition of the independence of Donetsk and Luhansk. What followed was 'the worst scenario possible', with Russia launching a full-scale military operation on 24

February through aerial, ground and sea incursions leading to multiple active fronts of conflict. Heavy fighting and shelling continue across several towns and cities in Ukraine, with increasing human cost and humanitarian consequences.

As of 20 May 2022, official data report more than 6 million refugees and more than 8 million internally displaced persons, with an estimated 12 million people remaining stranded or trapped in areas of Ukraine where they cannot reach safety. The updated Ukraine Flash Appeal and Refugee Response Plan 2022, published on 25 April 2022, revised the estimation of people who will need humanitarian assistance in the months ahead to 24 million people, 8 million more than was estimated less than two months ago. This includes 15.7 million people inside Ukraine, whose access to vital necessities has been curtailed due to massive destruction of civilian infrastructure, the consequent displacement and dramatic loss of jobs and livelihoods. IOM also estimates that 2.8 million people have returned to their homes following earlier displacement, with an average length of displacement of 30 days. These returns may be both temporary or permanent. Moreover, 15 per cent of current IDPs plan to return to their homes in the next two weeks, mainly heading to Kyiv and the northern parts of the country.



The number of civilian casualties continues to mount. Between 24 February and 20 May, OHCHR reports more than 8,000 civilian casualties including over 4,200 killed, a figure that is likely much higher as civilian deaths and injuries continue to be verified. Most of these casualties were caused by the use of explosive weapons with a wide impact area, including shelling from heavy artillery and multiple launch rocket systems as well as air strikes. The escalating insecurity has created new fronts of conflict, affecting a vast area of Donetsk and Luhansk, as well as multiple new locations referred to as 'newly impacted areas'. Whilst negotiations have so far reached a dead end, civilians continue to pay the heavy price and to bear the brunt of conflict. Until the beginning of April, Russia's invasion continued to progress on three fronts - north, east, and south, with military targets in western Ukraine having seen an increase in attacks in recent weeks. Whilst Russian forces have since withdrawn from north and northeast Ukraine, including Kyiv, and announced a change in their military strategy with a refocus on Eastern and Southern Ukraine, the situation remains highly volatile. Damage and destruction to civilian infrastructure in areas of active fighting and those affected by airstrikes and shelling continue to impede people's access to water, food, healthcare and other basic services. This is also impacting the humanitarian community's ability to scale-up the response inside Ukraine, on the background of huge protection challenges.

HI in Ukraine:

HI is re-opening a two-country program covering Ukraine and Moldova, adapting modalities of intervention to the various and diverging contexts of implementation. In Ukraine, HI aims at intervening in the West and East of the country from:

- a West/Centre operational hub in Chernivtsi and Vinnytsia, with localities of intervention also including Lviv and Uzhhorod; and
- an East operational hub in Dnipro, covering other areas of intervention closer to the frontline including but not limited to Kharkiv.

Aligning itself with the priorities of the Ukraine Flash Appeal, HI pillars of interventions are as follows:

- Health: HI aims to improve access to quality physical & functional rehabilitation and mental health and psychosocial services (MHPSS) for conflict-affected vulnerable population. To this extent, HI will conduct health service provision to persons with injuries or disabilities while also strengthening the capacity of



existing health structures.

- Protection: HI will ensure that vulnerable populations have access to tailored protection services (i.e. identification; orientation/information; direct service provision and/or referrals to multisector services for vulnerable IDPs and members of the host community). Moreover, recent and ongoing attacks having dangerously exacerbated Explosive Ordnance (EO) contamination in Ukraine, HI will conduct a multi-pronged approach to EO risk education and conflict preparedness and protection, adaptable to the evolution of the conflict and humanitarian. In addition, HI will not only ensure that persons with disabilities are receiving tailored services throughout its intervention, but will also foster a disability- inclusive humanitarian response.
- Basic needs: To respond to the most acute needs for displaced households hosted by the local population or living in collective centres / other structures, HI will ensure they have access to sufficient and appropriate hygiene and Non-Food Items (NFI), including tailored items responding to the specific needs of infants, elderly people and persons with disabilities. To this extend, HI will tailor its intervention modalities to household needs whilst considering local market capacities in various geographical areas. In line with Inter-Agency Cluster recommendations, HI will prioritise multi-purpose cash transfers where possible, to ensure full coverage of basic needs and uphold the dignity and preferences of affected populations.

Humanitarian-to-humanitarian logistics: HI will propose to emergency stakeholders mutualized storage and transportation to ensure the delivery of emergency in-kinds as close as possible to the most affected populations, with a focus on tempered temperature and last-kilometre transportation.

HI will target vulnerable populations including but not limited to displaced persons, returnees, people with disabilities, older people and people with injuries, noting three main tendencies in terms of populations in need:

- Those who were able to flee and are now displaced either outside of the country or within the country
- Those who did not move and stayed in besieged areas / areas under intense conflict, where needs are more acute
- Those who are returning to their homes following earlier displacement, either



temporarily or permanently.

HI will work using various modalities of intervention both through direct and indirect service provision with a focus on capacity building activities and support to local service providers including health facilities, local civil society actors, disabled people organizations, collective centres, transit centres and other institutions / structures

Background:

Humanity & Inclusion (HI) is embarking on a new project aimed at providing multi-purpose cash assistance (MPCA) in Ukraine to ensure that internally displaced people (IDPs) have access to basic needs such as food, shelter/non-food items, water, sanitation, hygiene and other necessities. Even before the February 2022, evidence showed that conflict-affected people identified cash as a preferred modality of assistance. Since 2015, MPCA has been and continues to address the immediate multiple needs of affected population in Ukraine, while upholding their dignity and preferences. The Ukraine Cash Working Group (CWG) has a Minimum Expenditure Basket (MEB) which determines a household's requirement to meet its basic needs and average cost. Following the escalation, the CWG revised the MPCA transfer value from 70 to 100 percent of the estimated income gap, which amounts to UAH2,220 (\$74) per person per month.¹

HI's approach to MPCA is aligned with the CWG's standards and guidelines particularly on the IASC guidelines on inclusion of persons with disabilities in humanitarian action. However, limited evidence exists on whether the approach to MPCA is inclusive (meaning promoting non-discriminatory access to and needs-based use of all sub-groups among affected populations), particularly within the framework of a "No Regrets"² policy to cash-based programming. HI's MPCA project not only aims to provide cash assistance, but also seeks to share findings and pilot specific action around MPCA that is inclusive of all sub-groups' needs and provided without any barriers: specific risks and barriers for older persons and persons with disabilities are identified and addressed in program design. Therefore, the project aims to address this gap in MPCA response by piloting an inclusive approach to cash assistance.

Today there is no accurate data on persons with disabilities and older person's prevalence and needs. Taking global estimates, it is estimated that at least 15% of the Ukrainian population are persons with disabilities and 30% of the Ukrainian population are persons with different levels of disabilities and/or are older persons. According to



the 2018 national statistics 2.7 million people with disabilities are living in Ukraine including 160,000 children with disabilities. However, it is likely that these numbers are under-estimated and are anticipated to be closer to 6.6 million according to global estimates³ In addition, there are over 10 million older persons in Ukraine, many of whom have not been able to flee the hostilities due to reduced mobility and financial means.⁴ Persons with disabilities and older persons face significant barriers and specific risks in humanitarian situations, including in accessing humanitarian aid and assistance, compounded with pre-existing vulnerabilities and barriers in fulfilling basic and specific requirements due to the lack of inclusive policies and programs. Therefore, it is imperative that the HI s MPCA approach is based on robust analysis of the risk/barriers and needs of persons with disabilities, their households and family members and existing gaps in humanitarian MPCA policies, strategies and programs. Therefore, it is imperative that the inclusion of these populations is addressed through an inclusive MPCA approach.

Since pre-crisis data does not reveal quality data on persons with disabilities needs and barriers and humanitarian data efforts are not meaningfully engaging persons with disabilities HI plans to directly engage with persons with disabilities among affected communities, consult relevant government ministries and service providers and local organizations who work closely with groups at risk such as networks and Organizations of Persons with Disabilities (OPDs), organizations of older persons (OPA), the Ministry of Social Policy, Health, and Education departments. To implement an inclusive MPCA approach HI will work with partners to adapt inclusive data collection practices and adapted programming through household targeting, modality adaptations, inclusive referral pathways to other sectors to provide them with additional support.

¹ Ukraine Cash Work Group Factsheet, March 2022

² Ukraine CWG, launched a “no regrets” approach to get money to people quickly

³ Global Protection Cluster, Protection of persons with disabilities in Ukraine, March 2022

⁴ Ukraine Flash Appeal, Revision April 2022

HI will pilot this approach based on risks and vulnerabilities of households with persons with disabilities and older persons, including additional costs for coverage of those needs through inclusive data collection practices and adapted household targeting (making sure that 15-20% of the targets are either persons with disabilities or in the aging criteria), modality adaptations, and inclusive referral pathways to other sub-sectors of the proposed project to provide them with additional support. There is an evidence gap as to what is the range of extra costs incurred for persons with disabilities and how humanitarian agencies can best address this gap without causing community or political tensions or additional stigmatization and risk. Minimum Expenditure Basket (MEB) calculations on which most humanitarian agencies base their cash transfer value do not systematically consider the specific extra costs that persons with disabilities and their families have. These extra costs can include direct expenditures for accessible transportation, assistive devices, medical supplies and services; and indirect expenditures such as loss of or lower earnings.⁵Inclusive MPC means applying a disability, age, gender approach across all steps of the MPCA intervention and responding directly to basic and specific needs faced by certain households within the program. It might require adapting the vulnerability criteria, modalities of distribution, amount distributed to certain households based on specific MEB costs and access barriers, or supporting accompanied referrals to cover specific needs. The pilot inclusive MPC approach, implemented by HI in a first phase, will be reviewed midterm with a lessons learned exercise informing the roll out of the second phase of the project, to ensure that the response is adapted to the evolution of the Ukrainian context. This will be complemented with monitoring of the most urgent needs and adequate referrals to health and protection actors.

Finally, HI will map, assess, and identify existing social protection programs and what methods are currently used and what existed before the war (ex. Disability card system, free access to services, etc.). Cash has been used in Ukraine's social and protection and safety net programming for many years and HI can draw from this experience to establish, adapt and scale up inclusive MPCA that is complementary to Ukraine's social protection schemes. Thus, HI will align its MPCA strategy and humanitarian assistance with Ukraine's existing social protection systems as part of its exit and sustainability strategies

⁵ Disability Inclusive Cash Assistance Report, CBM Global Disability Inclusion, 2021

.Objectives of Consultancy:

1. To assess, analyze and measure the **disability extra cost** and what this means to humanitarian response. This includes providing the calculation method and calculation of the transfer value amount. In addition, this aspect of the consultancy should include an initial assessment to determine what services are already in place and if the national social protection scheme includes the requirements of persons with disabilities.
2. To assess, analyze, and identify linkages and coordination of inclusive MPCA to existing Ukraine **social protection programs⁶ through a shock responsive** social protection lens. Prior to identifying linkages, the consultant is expected to conduct an in-depth mapping and analysis of the current social protection system, including other initiatives.
3. In collaboration with OPD networks, **develop plans and messaging** to share externally the data and findings on gaps in policies, inter-agency coordination gaps and recommendations in order to promote inclusive approaches.

Proposed Methodology:

The Consultant will:

1. **Conduct a desk review** of relevant literature to date on inclusive MPCA in humanitarian settings and on current/former social protection systems in place, especially linked to disability/functional limitations.
2. **Develop research and facilitation tools** in consultation with HI and its partners, including developing and refining approach and developing tools to prompt reflection.
3. **Facilitate workshops with various stakeholders such as sector clusters, OPDs, etc.** to prompt critical and strategic reflection on inclusive MPCA project design and impact, while providing suggestions for areas of further thought as well as learning.
4. **Conduct field visits to of project sites** to gain an understanding of the context, programming, particularly to question assumptions made and validate.
5. A **final report** will draw together conclusions, reflecting an analysis of the outcomes of the pilot. It should set out recommendations for inclusive MPCA programming particularly on disability cost and recommendations on cash transfer value amount. The report should also include an executive summary highlighting



key findings that is suitable for public release.

6. **Present key findings and facilitate action planning.** The consultant will prepare and present key findings to HI and its partners on the key findings and recommendations, and facilitate action planning as appropriate.

⁶ Note: The Ukraine CWG is establishing a Social Protection Task Team, consultation and collaboration with this TT is essential

Consultant Deliverables:

- An **inception document** detailing methodology, tools and assessment plans
- A **written report** that includes findings, analyses and recommendations. Please read below the guidelines for reporting.
- Facilitate a **workshop** with consortium partners to present and analyze findings and review lessons learned from pilot

Reporting:

In accordance with agreed standards, the consultant will prepare a final report of up to a maximum of 30 pages (excluding appendices), clearly setting out recommendations arising from the consultation process. This report will be prepared in English, submitted in both hard and soft form. The contents of the report will include, at a minimum:

- Executive Summary (max 4 pages), covering background; brief overview of aims; brief summary of methodologies used; key findings; conclusions and recommendations
- Context & Introduction
- Methodology
- Limitations
- Findings
- Conclusions
- Recommendations

Consultant Profile and Expertise:

- Proven successful experience as a consultant conducting analysis and research on MPCA or general cash-based programming in humanitarian settings
- Strong experience working on disability inclusive humanitarian action, ideally in cash assistance programs in challenging humanitarian environments
- Strong experience with shock responsive social protection programming
- Strong facilitation skills and experience guiding learning processes
- Demonstrated skills and experience in designing and engaging in disability and gender sensitive qualitative data collection research and analyzing qualitative data
- Minimum of five years of field experience.
- Knowledge of complexities of working in emergency context, including understanding of the context in Ukraine
- Excellent participatory facilitation, communication and writing skills



- Excellent written and spoken English and knowledge of Ukraine language an asset
- Ability to travel to project sites

Details of Consultancy:

- Expected start date: End of September/early October 2022

Submission of Expression of Interest (EOI):

Prospective consultants are requested to submit technical and financial proposals using the following format:

- Profile of the consultant / consultancy firm
- Understanding and interpretation of the Terms of Reference
- Approach and methodology:
If more than one consultant will be involved, provide information on responsibilities and expected roles of each consultant. If the lead consultant is planning to recruit national consultants in Ukraine to support, please state this and provide details (costs, expertise required)
- Draft Work plan
- Proposed budget
- Annexes: CVs of all proposed evaluation team members (including detailed work experience and education) and references

Deadline for submission: 31, August 2022s

Please submit EOIs via email with the subject line, “Ukraine MPCA Consultant” to:

- Madeline Sahagun, Global Food Security Specialist m.sahagun@hi.org
- Aurelie Webster, Emergency Operations Officer a.webster@hi.org