**Study / Research Terms of Reference**

1. **Presentation of the mission**

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| --- | --- |
| **Title of the study/research:** | DRR Outcomes Measurement Research |
| **Programme:** | Global |
| **Objective of the mission:** | Assessing the added value of DRR projects and whether (or not) beneficiaries of DRR projects could better absorb, adapt, and respond to a disaster. |
| **Duration of the mission:** | Desk work: between October and Dec 2023  Field work: 2 weeks TBD between Nov 2023 and Mai 2024 |
| **Location of the mission:** | To be defined - Southeast Asia, Madagascar or Mozambique or any other area where DRR projects were/are implemented that could be confronted with a violent climatic event between October 2023 and Mai 2024. |
| **ToR last updated:** | 14/09/2023 |
| **Author of ToR:** | Valentina Evangelisti |

1. **Presentation of the context**

**2.1 - Context**

Humanity & Inclusion is an independent and impartial aid organization working in situations of poverty and exclusion, conflict and disaster. HI projects aim to focus on the ‘most vulnerable’; including people and groups discriminated against or those at high risk of discrimination.

HI has been active in the field of Disaster Risk Reduction (DRR) for over twenty years, implementing and promoting inclusive approaches that ensure protection of groups most excluded and most affected by disasters, such as persons with disabilities, older people, women, children, and indigenous populations. Together with local partners, HI develop risk reduction and disaster preparedness strategies and actions that address and lessen the differentiated impact of disasters on the most vulnerable groups and individuals. The increased frequency and intensity of disaster events due to climate change is posing unprecedented threats to poor communities and most vulnerable groups, calling for greater investments in DRR and innovative approaches in order to anticipate and prevent disasters and humanitarian crisis.

To monitor the outcomes of its actions and to encourage greater DRR investments, HI aims at creating more evidence about DRR added value in strengthening resilient capacities, and finally reducing humanitarian needs.

1. **Presentation of the study/research**

**3.1 - Why this study/research?**

**To better monitor and document progress made through its DRR and CCA interventions,** HI aims to highlight changes in local humanitarian response actors, communities, and households as a result of its DRR and CCA work in communities that are subsequently affected by a disaster.

HI wants to know how it could **assess the extent to which investments in DRR had helped beneficiaries to increase their capacities to withstand the consequences of a hazard event**, and whether they were less affected than others who had not participated in a DRR project.

This first step of research, focusing on the added value of DRR interventions, will also feed into HI broader understanding of how DRR and CCA interventions can contribute to creating a facilitating environment for communities’ resilience. Which itself contributes to HI monitoring and evaluation work looking more broadly at programs’ capacity to contribute to an enabling environment for the most vulnerable population.

**3.2- Study/Research objectives**

* **Overall objectives of the study/ research**

The overall objective of this study is to measure the contribution to change (outcomes) of Humanity & Inclusion’s DRR interventions by measuring whether (or not) beneficiaries of DRR projects could better absorb, adapt, and respond to a disaster.

* **Specific objectives**

The DRR study aims to provide answers to the following questions:

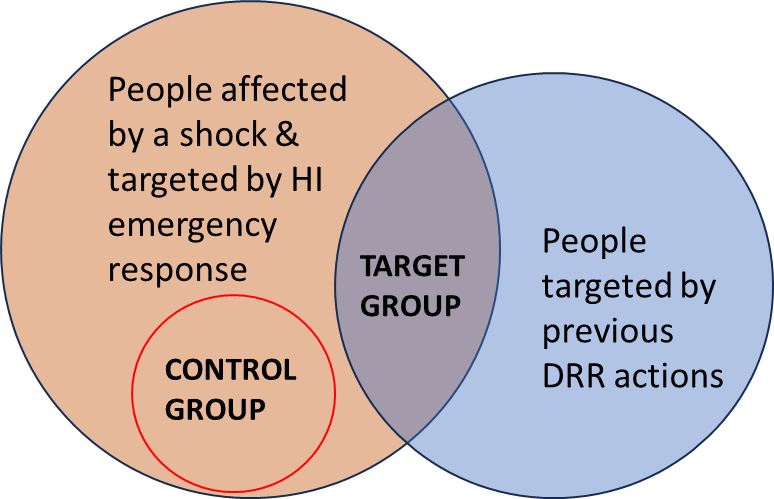
1. To what extent and how DRR interventions have helped people located in affected area to better anticipate and prepare, respond to, cope with and recover from a shock?
2. To what extent DRR interventions (and, if so, communities’ increased capacity to anticipate, prepare, respond, cope and recover from a shock) have contributed to reducing their humanitarian needs, when they are affected by a disaster?
3. To what extent have the intervention contributed to a quicker and more effective response by HI, local partners, NGOs and institutions?

**3.3- Location**

The location for the study will be linked to a DRR intervention in the past two years plus the occurrence of a disaster. We are currently considering the possibility that Southeast Asia, Madagascar or Mozambique - which are areas in which HI's DRR teams have worked and/or are currently working - could be confronted with a violent climatic event, either in October - November 2023, or in May - June 2024.

**3.4- Target Population**

The target population for this study is a sample of the people affected by a shock (including women, men, boys and girls, with and without disabilities), having received HI emergency humanitarian aid, and who have been previously involved in HI DRR / CCA interventions in the same area. A control group could be envisaged, which will include beneficiaries of the humanitarian response not having benefitted from DRR/CCA projects in the past.



**3.5 - Methodology**

**Key criteria to be considered for the study’s methodology:**

1. **Applicability to a diverse range of context and type of shocks**: We aim the methodology to be applied (although with adaptations) in a different type of settings including fragile and conflict-affected context. The methodology should be suited to be applied in both slow-onset and rapid onset shocks.
2. **Applicability to a short time frame in coherence to the scope** of the present study (small to middle scale evaluation exercise, with max 2 weeks of duration, taking place between 2 and 6 months after a shock/disaster hit areas where DRR work have been previously conducted.
3. **Focus to assess contribution, rather than attribution**: by “contribution” we describe the relative importance of a DRR interventions to changes in people’s lives. This is distinct from a focus on ‘attribution’, which seeks to establish what specific changes have resulted from an intervention. This is because the activities of an individual intervention, and the effects of those activities, will not normally occur in isolation but rather as part of a multi-layered, complex actions by both local and external actors. Thus, it is more realistic to consider ‘contribution’ to outcomes or, as some authors prefer, ‘contributory impact’. Thus, we aim the study to provide evidence and a line of reasoning from which we can draw a plausible conclusion that, within some level of confidence, the DRR intervention has made a significant contribution to the documented results.
4. **Potential to assess DRR contribution to absorptive, adaptive and transformative resilience capacities[[1]](#footnote-2)** at multiple levelsin particular related to DRR contribution to communities' capacities to anticipate and prepare, respond to, cope with and recover from a shock. (This will help link the DRR Outcomes Measurement to the following research steps looking at the facilitating environment).
5. **Potential to assess DRR impacts (contribution)** to a quicker and more effective humanitarian response at different levels: communities, local partners, local or international NGOs and local institutions. Over time and with regular implementation of these assessments, this could also support building evidence on how DRR interventions are strengthening not only communities’ capacities and leadership but also HI’s partners and local institutions’ effectiveness and leadership in humanitarian responses.
6. **Methodological approach aligned with Inclusion and Gender sensitive M&E and with Disability Gender and Age policy in HI.** We aim that the study will integrate disability-gender-age-sensitive approach to outcomes measurement, mainly by ensuring that the methodological approach ensures that marginalized voices are heard in the process. In this sense, the proposed methodology should allow to assess differentiated (level of) outcomes by handicap, gender, age and specific vulnerable groups within the community.

**Methodological elements to be considered:**

**Desk Review**: review all documents provided and search online for complementary information, with an aim to:

1. Understand the Theory of Change for the DRR action.
2. Examine and consider the volume of people affected by the shock, compared to those in the target group and control group.
3. Determine criteria for differences among the individuals targeted by the study. Apart from age and gender, is there anything else that might differentiate the disaster impacts, such as proximity to coast or epicenter, access to services, cultural/ethnic differences, higher/lower income, etc.? Take into consideration all these aspects.

**Qualitative Data Collection and Analysis:**

Qualitative data collection should be at the base of the process, given the time constrain of the evaluation (with max 2 weeks of duration, taking place between 2 and 6 months after a shock/disaster hit areas where DRR work have been previously conducted). This could potentially include key informant interviews, focus group discussions, interviews with different profiles of people.

A high level of detail is expected on how the proposed methodology will make the link between the situation/actions of the various target actors and the HI DRR intervention, both in terms of data collection and analysis. Thus, approach as Outcomes Mapping (OM) or Qualitative Impact Protocol (QuIP) could be considered.

As the feasibility of setting up a control group is not yet certain, another option must be proposed (either a methodology without a control group, or a methodology with a control group plus a plan B if this is not possible).

The need for interpreting/translation must be taken into account.

**Which outcomes to assess?**

Some core outcomes:

1. Risk understanding by community membres
2. Coordination and communication on DRM between communities and local actors
3. Implementation and activation of contingency planning at appropriate levels, according to the DRR project target (community, municipality, other)
4. Timeliness and reach of EW communications.
5. Leaders and community members act on EW communications.
6. Protection of vulnerable groups in DRM actions
7. Protection of human lives in/following a hazard event
8. Protection of personal/economic assets in/following a hazard event

Sectoral/Optional outcomes, depending on the type of programming prior to event:

* Livelihoods adapted to withstand shocks/stresses.
* Food available and accessible from local sources
* People are protected from disaster-related diseases.
* Housing/shelter is hazard-resistant.

1. **Ethics**

Please refer to the Handicap International guidance note “Studies and research at Handicap International: Promoting ethical data management”[[2]](#footnote-3). The methodology must respect the eight recommendations promoted by the organization:

* Guarantee the security of subjects, partners and teams
* Ensure a person or community-centered approach
* Obtain subjects’ free and informed consent
* Ensure referral mechanisms are in place.
* Ensure the security of personal and/or sensitive data at all stages of the activity.
* Plan and guarantee the use and sharing of information.
* Ensure the expertise of the teams involved and the scientific validity of the activity.
* Obtain authorization from the relevant authorities and organize an external review of the proposed study/research

**4.1- Specific study constraints**

As this is a post-disaster evaluation, the location of the study will be only known once the shock has hit (and the feasibility criteria have been checked (i.e. previous HI DRR programming in the area). The location of the field mission will be communicated one month before the mission, in the “best” case scenario.

The teams on site may therefore have little time to prepare for the arrival of the researchers. Researchers are therefore asked to be as autonomous as possible (and to take this into account in their technical and financial proposals), and must ensure, as far as possible, that all their contacts are available during the assignment.

1. **Presentation of the mission**

**5.1- Overall objective of the expert mission**

The experts will ensure the study design (protocol), the data collection and analysis, a study report, as well as a short version (easy-to-read) dedicated to disseminating the results.

**5.2- Expected results of the mission**

1. **A written protocol is set down.**

Based upon the technical proposal, and in collaboration with Humanity and Inclusion’s reference person, a protocol is drafted. This document provides the key elements of the study’s implementation and contains, a minima: an introduction specifying the study/research context, providing a brief situational analysis, and describing the study/research’s value; presentation of the objectives (general & specific), with target population, location; presentation of the methodological framework: study design, selection of participants, data collection, data processing, data analysis, quality monitoring mechanisms; responsibilities of the expert; timeline; budget; ethical considerations.

1. **The contribution of DRR approaches on population’s capacity to anticipate, prepare, respond, cope and recover from a shock is analyzed, including its links with the three resilience capacities, and especially the differentiated contribution according to vulnerability factors.**

Data collection tools are created. Focus groups / interviews are organized with relevant persons. All collected data is compared and confronted, analyzed and interpreted in the light of the political, social and cultural context.

1. **The reproductible methodology is set down in a final report, as well as the findings.**

**5.3 – Deliverables**

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| --- | --- | --- | --- | --- | --- |
|  | **Deliverables** | **Recipients** | **Dissemination** | **Delivery deadlines** | |
| **Technical Documents relative to study/research implementation** | | | | |
| 1- | Final Protocol | HI | Internal | Beginning of mission | |
| 2- | Final data collection tool | HI | Internal | End of mission | |
| 3- | Transcribed material | HI | Internal | End of mission | |
| 4- | Database | HI | Internal | End of mission | |
|  | | | | |
| **Reports/Dissemination** | | | | |
| 5- | 1 Short post field mission report | HI | Internal | After field mission | |
| 6- | 1 Final scientific report | HI, Donors, Partners | External | End of mission | |
|  | | | | |
| **Workshops/Meetings** | | | | |
| 7- | 1 Meeting to present the methodology and data collection tools | HI | Internal | Before field mission | |
| 8- | 1 Workshop to discuss findings | HI, Partners | TBD | End of mission | |

The consultant accepts that Humanity and Inclusion may reproduce the methodological proposal and use the tools developed for data collection in other contexts or projects.

**5.4 - Timeline**

The literature review, secondary data collection and preparation of all methodological material shall start as soon as possible and should be concluded by December 2023. The field mission will be planned according to the different rain/cyclone seasons expected in Southeast Asia, Madagascar or Mozambique.

The final report shall be handed over 1 month after the field mission.

**5.5 - Mechanisms for communication and monitoring between the consultant and Handicap International**

The main interlocutors for this study will be Valentina Evangelisti, DRR/CCA Global Technical Specialist (HI HQ) and Lise Archambaud, Outcomes, and Impact Specialist (MEAL unit, HI HQ). The schedule of meetings will be decided at the start of the study, according to the needs of the study and so that regular information can be passed on to Valentina and Lise. The contact person in the country of the study will depend on the area finally chosen.

1. **Requested profile.**

**6.1 - Requested profile.**

This call is addressed to individuals or small teams, with an expertise in qualitative research and DRR.

Please note that the ability to travel under short notice is key to deliver the study.

**6.2 – Expertise.**

Mandatory :

* Demonstrated experience of conducting systematic review of literature
* Demonstrated experience in humanitarian sector, context and programming, especially working experience in post-disaster context
* Demonstrated experience of conducting field research and/or evaluations in Disaster Risk Reduction and/or Resilience interventions, local humanitarian leadership and community-level disaster
* Knowledge and experience in implementing inclusive disability-gender-age approaches to evaluations and/or research
* Strong expertise in implementing qualitative research
* Strong skills in analyzing large amounts of qualitative data/information and drawing conclusions based on clearly analyzed information and present it in a concise and clear manner.
* Ability to engage with a wide range of actors including multilateral, bilateral and NGO practitioners, academia and research bodies that generate knowledge in the field of humanitarian response, DRR/R and local humanitarian leadership.
* French and English are required

1. **Application process**

Applications must include:

**For to the consultant:**

* A curriculum vitae (experience in the areas mentioned above, list of key publications)
* References

**For the technical proposal:**

* A methodological proposal to conduct this study/research, including, as minimum:
* Understanding of the study’s issues and of the terms of reference; presentation of the methodological framework (study design, selection of participants, data collection, data processing, data analysis, quality monitoring mechanisms); ethical considerations
* A timeline, clearly detailing the study/research’s implementation (desk review, preparation, data collection, analysis, reporting included)
* A financial proposal including, as minimum, details of the study/research’s consultancy fees and operational costs (travel, accommodation, investigator per diems, translator pay, software, etc.).

Please, send all required documents **before the 15th of October COB** to the following address:

[v.evangelisti@hi.org](mailto:v.evangelisti@hi.org) ; [l.archambaud@hi.org](mailto:l.archambaud@hi.org)

Please note that examples of previous similar research (report, publications) will be ask once the applications have been shortlisted.

1. Most organizations define Resilience through these three capacities. Few examples can be found here: [oxfam resilience capacities;](https://oxfamilibrary.openrepository.com/bitstream/handle/10546/620178/gd-resilience-capacities-absorb-adapt-transform-250117-en.pdf;jsessionid=C0E146F3BA5AB84D774A9437E0DD15EA?sequence=4) [social protection resilience capacities;](https://socialprotection.org/learn/glossary/resilience-capacities) [manuel USAID](https://www.fsnnetwork.org/sites/default/files/Methodology_Guide_Nov2018508.pdf) [↑](#footnote-ref-2)
2. Handicap International. 2015. Studies and research at Handicap International: Promoting ethical data management.

   Available here: <http://www.hiproweb.org/uploads/tx_hidrtdocs/EthicalDataManagementGN_04.pdf> [↑](#footnote-ref-3)