



Terms of Reference

External Mid-term Evaluation

“Mobile health care for conflict-affected Syrian refugees and host Lebanese communities in Akkar, Baalbek and Nabatieh, Lebanon”

Project Period:	01.01.2019 to 31.12.2020 2020 (24 months)
Implementing Partner:	Lebanese Association of the Order of Malta (LAKM)
Project Volume:	2.889.000 Euro
Donor(s):	German Federal Foreign Office (GFFO)

I. Introduction and Context

Malteser International (MI) responds to the humanitarian crisis created by the conflict inside Syria since 2012. Programs are implemented in Kilis, Gaziantep, Reyhanli and Istanbul/Turkey, Aleppo Region/North Syria and North Lebanon, Bekaa Valley and South of Lebanon as well as in North Iraq.

In Lebanon, Malteser International supported its partner organization “The Lebanese Association of the Knights of Malta (LAKM)” by providing medical drugs, food and hygiene-kits for Syrian refugees in the Socio-Medical Centres of LAKM in 2012 and 2013. Starting from 2014, LAKM with the support of Malteser International operates three medical mobile units (MMU) in North Lebanon (Akkar), in Ras Baalbek and in the South of Lebanon (Yaroun) founded by the German Federal Foreign Office (AA) and further provides primary health care to Syrian refugees and the needy Lebanese population through an extended PHC in Deir el Ahmar, founded by the Ministry of the Federal Ministry for Economic Cooperation and Development (BMZ). LAKM operates in the region for over 50 years with many local programs and a backbone network of nine socio-PHC spread all over the country.

The genesis of the consultancy assignment refers to an ongoing AA-funded project which is being implemented by LAKM with the support, technical advice and monitoring of the Country Coordinator located in Beirut, Lebanon. The present project is running since January 2019 and has a duration of 24 months. A continuation of the project activities after December 2020 for further 24 months and possibly extended services is intended.

The present AA project defines its objectives as follows:



Project Goal

Syrian refugees and vulnerable Lebanese have improved access to appropriate primary and secondary health care services through 3 Mobile Medical Units (MMU) and a referral system to local PHC, hospitals and laboratories in the area. Promotions, FGDs and awareness raising sessions to track needs, monitor outcomes and satisfaction to improve overall health status.

Sub-goals

1. Municipalities and relevant stakeholders support the project and context-based health care services
2. Three Mobile Medical Units, back-up vehicles and their hubs are fully equipped and staffed, and provide health care for Syrian refugees and vulnerable Lebanese in Akkar, Baalbek and Nabatieh.
3. The beneficiaries have increased awareness and knowledge regarding health-related topics. The Social workers encourage the beneficiaries to voice their feedback in FGD and anonymous surveys.
4. Increased access to quality further specialized treatment and secondary level specialized health care in the reference PHCs and Hospitals in all three areas is ensured.
5. Competence of the project partner in the field of humanitarian aid and corresponding technical standards by trainings, coordination with agency and other NGO and capacity building in strengthened

II. Objectives of the mid-term evaluation

The main objective of the external mid-term evaluation is to review the program implementation and achievements against proposed objectives and planned measures of the AA (GFFO) project proposal, mirroring narrative, logframe and budget.

The objective of the learning exercise is to directly communicate the findings of the evaluation and transform the collected information into recommendations for improved programming and implementation and ultimately, to demonstrate accountability to donors and beneficiaries.

Key observations on the strengths and weaknesses of the project design, implementation processes, monitoring tools, cooperation with local stakeholders, good practices and lessons learnt as well as cross-cutting issues shall additionally be taken into account. Also, recommendations for further development of the project design and respective capacities to extend services shall be evaluated.

The evaluation will focus on:

Relevance/appropriateness/ impact

- a) Is the project design and implementation appropriate to meet the most urgent needs and priorities, especially concerning health, of the target groups? Which parts of the project have been most relevant and why?



- b) What mechanisms are in place to assure that the beneficiaries are kept informed and involved in discussion and feedback concerning project activities? To what extent is the project accountable to its beneficiaries (complaint mechanism etc.)?
- c) Has the project design and implementation been coherent with policies of the respective humanitarian system (cluster etc.) and donors as well as funding priorities?
- d) How did activities contribute to the overall objective?

Effectiveness

- a) To what extent have the anticipated results been achieved? What were the major factors influencing the achievement or non-achievement?
- b) To what extent have the activities been timely?
- c) Do the project outputs have an appropriate level of technical quality?
- d) To what extent does the program follow international norms for quality, including the minimum Sphere standards?
- e) Which project activities have had the greatest positive effect and which had the least effects? Are there any activities that should have been included in the action but were not?

Efficiency

Were the funds appropriately used and in the most cost-effective way?

Cross-cutting themes

To what extent have the cross cutting themes gender, age, inclusion and protection been considered during project design and implementation?

Connectedness

Does the project take the longer-term perspective and the interconnectedness of problems into account? How does the project encourage the transition to early recovery/LRRD interventions?

Coordination

Has the project maintained an adequate level of coordination and communication with different stakeholder groups during its implementation?

Conclusions and Recommendations

- a) Main conclusions drawn from analysis with evidence provided during field visits and observations.
- b) A set of recommendations linked to the conclusions that provide guidance to Malteser International for future interventions in Lebanon in the project-related sector (continuation of the project).

Operational capacity and quality of partnership with the local partner organization

- a) Does the local partner organization have sufficient operational capacity? How have local capacities been strengthened?



III. Methodology

The evaluation will be conducted in three steps. The first intervention shall include desk review of all relevant available project related documents, proposal and reports. The second intervention will be a field based participatory evaluation where the evaluator will address main questions via individual and group interviews with project staff and beneficiaries. The third step will be the facilitation of an intense debriefing session with the presentation of the first findings from the evaluation.

IV. Planning

The mid-term evaluation is planned to take place as early as feasible, preferably in the month of June 2020.

Draft work plan (to be discussed):

Preparation/Briefing and reviewing of documents	1 days
Field visit	4 days
LAKM HQ visit	3 days
Final report	2 days
Total	10 days

MI and LAKM will facilitate all local travels in the region. Malteser International together with LAKM will be responsible to organize appointments with stakeholders on the spot. LAKM will facilitate translation if required.

The evaluator shall be present in Lebanon and will be responsible to arrange for travel to Beirut and for all necessary equipment (e.g. computer) as well as for communication costs and relevant insurances. Accommodation in Beirut and the field can be facilitated upon written request.

VI. Deliverables

All documents and data acquired during interviews are confidential and solely used for the purpose of the evaluation. Interview partners will not be quoted in the report without their permission.

The draft and final report as well as all material linked to the evaluation (produced by the evaluators or MI/LAKM itself) is confidential and remains at all times in the property of Malteser International.

- 1) Inception Report: Planning of the evaluation in form of an inception report based on the analysis of the project documentation in alignment with the Malteser International HQ based Program Manager and the Country Coordinator based in Beirut.
- 2) Debriefing: A note (2 pages) with the principal results of the evaluation and recommendations is prepared and presented to (1) LAKM in form of a debriefing as well as (2) the Mal-



Malteser International HQ based Program Manager and the Country Coordinator based in Beirut.

- 3) Final Report: A draft final report (English, electronic version, max. 20 pages) including the findings of the evaluation and the recommendations will be sent to Malteser International within ten days following the field trip latest for potential comments. The report (electronic version) will be finalised and sent to Malteser International HQ latest ten days upon receipt of potential comments and questions.

The results of the evaluation will be presented in a written report in English. The report shall cover the above described topics and will include practical recommendations. The structure of the report is recommended as follows:

1. Title Page
2. Index
3. List of Abbreviations and Acronyms
4. Map of project / programme area
5. Executive Summary
6. Introduction
7. Background
8. Evaluation Methods and Limitations
9. Analysis, findings and conclusions
10. Recommendations
11. Lessons Learnt
12. Annexes

VII. Expertise of the evaluator(s)

The evaluation can be carried out by a single experienced evaluator or a team with proven expertise in the areas of intervention. The evaluator is required to have

- Proven evaluation experience of humanitarian projects required, preferably in a related field (Health)
- A minimum of five years of experience with humanitarian and/or developmental projects
- Experience in the context of the Middle East, preferably with Lebanon and with the Syrian crisis
- Excellent written and spoken English; knowledge of French/Arabic would be an asset
- Postgraduate university degree or equivalent in the wider field of Health would be an added value
- AOB: The evaluator shall be currently present in Lebanon.

VIII. Requirements for the presentation of offers

The offer will be a compilation of the following documents:



**Malteser
International**

Order of Malta Worldwide Relief

1. Technical offer including description of methodology and work plan
2. Financial offer including costs for travel, accommodation, per diem etc.
3. Information on previous experience, including CV and references
4. Information on availability for the assignment

Expression of Interest:

Offers shall be presented per email to Malteser International.

Contact person: Theresa Tesan theresa.tesan@malteser-international.org until 24 May 2020.