TERMS OF REFERENCE

Multi sectorial Need Assessment

EXECUTIVE SUMMARY

Type of assessment	Need Assessment
Location of the assessment	Kirkuk, Diyala, and Sulaimanyah governorates.
Overall objectives of the assessment	Identify priority areas for HI's future interventions by assessing the needs, capacities, and vulnerabilities of target communities, while evaluating the feasibility and potential for implementing effective programs.
Dates of data collection	19 Oct, 05 Nov 2024
Expected date for final report	30 Nov 2024

Context

In Iraq, Humanity & Inclusion (HI) has been at the forefront of efforts to mitigate the devastating impacts of explosive ordnance through its comprehensive Armed Violence Reduction (AVR) program. This program currently focuses on four key pillars:

1. Explosive Ordnance Risk Education (EORE): Educating vulnerable communities about the risks posed by explosive ordnance to prevent accidents and save lives.
2. Clearance (Land Release): Facilitating the safe removal of explosive remnants of war (ERW) to ensure land can be safely reclaimed for productive civilian use.
3. Victim Assistance (VA): Providing essential rehabilitation and reintegration services to individuals impacted by explosive devices, empowering them to regain autonomy.
4. Conflict Sensitivity: Designing and implementing all interventions in a way that remains sensitive to the local socio-political context, minimizing the risk of exacerbating tensions or conflict.

Building on the success of these ongoing efforts, HI aims to broaden the scope of its AVR program by introducing new initiatives focused on Health, Economic Inclusion and Inclusive Education. These additional components will enhance the program's holistic approach, addressing the broader developmental needs of affected communities while continuing to reduce the threat of explosive ordnance.

Following the renewal of HI's GFFO-funded mine action project for 2024-2026, the organization is committed to scaling up its operations in Iraq. Initial feasibility assessments have been carried out to explore the expansion of clearance activities, with Salah al-Din Governorate emerging as a priority location due to its severe explosive ordnance contamination and limited presence of

other clearance operators. Salah al-Din also faces significant unmet needs across other sectors, making it an ideal target for a multi-dimensional intervention.

In parallel, HI's operational strategy outlines plans to expand into Kirkuk, Diyala, and Sulaymaniyah, targeting these areas with a comprehensive program that integrates AVR, Health, and Advocacy initiatives. Additionally, we are actively exploring potential opportunities for Inclusive Education (IE) and Economic Inclusion (EI) in these regions. Before launching these expanded operations, a multi-sectoral needs assessment will be conducted to ensure that the specific needs and priorities of the communities in these governorates are thoroughly understood and addressed. This assessment will guide HI's strategy, ensuring that our interventions are contextually relevant and effectively support IE and EI goals, thereby maximizing the program's impact on the ground.

By interlinking its AVR activities with economic inclusion, education, and health interventions, HI aims to provide a more comprehensive, needs-driven response, ultimately fostering long-term resilience and sustainable community development in Iraq.

OBJECTIVES OF THE ASSESSMENT

The primary objective of this multi-sectorial needs assessment is to gather in-depth data across the governorates of Salah al-Din, Diyala, Kirkuk, Sulaymaniyah, Basrah, and Anbar to inform Humanity & Inclusion's (HI) strategic expansion of its programs. This assessment will guide the future direction of HI's interventions by identifying priority areas for AVR, health (including Rehab and MHPSS), and advocacy initiatives. It will assess the needs, capacities, and vulnerabilities of the affected communities, ensuring that HI's expanded approach is well-targeted and impactful.

The specific objectives of the assessment are as follows:

Governorate Profiling:

1. Feasibility: Evaluate whether it's practical to extend HI's Armed Violence Reduction (AVR) program and add health services (MHPSS and rehabilitation), advocacy, and opportunities for Inclusive Education (IE) and Economic Inclusion (EI) in the target governorates. This will involve checking if the locations are accessible, suitable, and able to meet community needs effectively.
2. Demographics: Analyze the demographic makeup of each governorate, with particular attention to vulnerable groups such as women, persons with disabilities, and marginalized communities.
3. Infrastructure: Evaluate the availability and condition of critical infrastructure, such as health facilities, MHPSS services, educational institutions, and other essential services.

Extent of Explosive Ordnance Contamination and Related Needs:

1. Clearance and EORE: Assess the scale and nature of explosive ordnance contamination in each governorate, as well as the need for clearance and risk education interventions.
2. Victim Assistance: Identify the needs of survivors of explosive ordnance incidents and evaluate the support required for their rehabilitation and reintegration, including MHPSS services.
3. Community Impact: Analyze how EO contamination affects community access to services, infrastructure, and social cohesion.
4. Health and Rehabilitation: Explore opportunities to expand health interventions, including rehabilitation services for persons with disabilities and MHPSS support for affected individuals and communities.
5. Advocacy Needs: Examine the advocacy requirements to ensure that the voices of marginalized and affected communities are effectively represented and addressed.

Conflict Sensitivity and Social Cohesion:

1. Conflict Dynamics: Identify the underlying conflict drivers in the target areas and assess how HI's expanded AVR, health, and advocacy programs can be implemented without aggravating tensions.
2. Gender and Diversity: Consider gender and diversity dimensions to ensure that interventions, particularly health, rehabilitation, and advocacy, are culturally sensitive and responsive to the local context.
3. Local Capacity: Evaluate the capacity of local actors and systems to support the planned interventions, and identify strategies to build resilience and address gaps in service provision.

By interlinking AVR, health, and advocacy efforts, this assessment will ensure that HI's interventions address not only the immediate threats posed by explosive ordnance but also the long-term recovery and empowerment of affected communities. The data collected will guide HI's strategic decisions, ensuring that its expanded programs are aligned with community needs, responsive to the local context, and capable of fostering sustainable change, additionally, the findings will be shared with key stakeholders, including the Area-Based Coordination group, to inform broader humanitarian priorities and collective responses across Iraq.

INFORMATION TO COLLECT

The below table summarizes all specific information to be collect during the assessment.

Theme	Questions
Main characteristics of the target population	Number of inhabitants (disaggregated per age and gender and disability if available)
	Average number of persons per household
	Main religion/religious groups
	Ethnicities
	Languages spoken
	Social groups
Economic, geographic, and social characteristics of the population	Main livelihood/activity sectors
	Biggest cities/main economic hubs
	Literacy Rate
	% of Persons with Disabilities (disaggregate per type of disability if available)
	Social barriers to accessing services and infrastructure
	Accessibility (identification of non-accessible areas)
	What are the main sources of income in the selected locations, and how have they been impacted by EO contamination?
	What is the employment rate, and how stable is employment in the selected locations?
	What opportunities exist for economic development and inclusion, particularly for women, persons with disabilities, and other marginalized groups?
Health, Rehabilitation, and MHPSS Needs	What specific healthcare services (including MHPSS and rehabilitation) are available?
	What are the barriers to accessing healthcare, MHPSS, and rehabilitation services?
	How many individuals in the community need MHPSS and rehabilitation services?
	Are there sufficient healthcare/MHPSS providers to support the planned interventions?
Feasibility of Expansion	Are the pre-selected locations sufficiently safe and accessible for the intervention?

	Are there other actors working on clearance in the pre-selected locations?
	What type of contamination can be found in the pre-selected locations, and on what type of terrain?
	What are the technical requirements and equipment needed for clearance in the pre-selected locations?
	Is landownership or land use a potential obstacle for clearance activities?
Conflict Analysis	What are the main causes and consequences of conflict inside the pre-selected locations?
	What are the main sources of tension (dividers) for the communities in the pre-selected locations?
	What mechanisms exist to solve internal conflicts (connectors) in the pre-selected locations?
	Are the pre-selected locations suitable for intervention considering the armed groups and conflict context?
	Would the intervention potentially increase tension in the pre-selected locations?
Inclusive Governance	What is the level of community participation in decision-making processes?
	Are there mechanisms in place to ensure inclusive governance, especially for women and persons with disabilities?
	How effective are local governance structures in addressing community needs?
	What are the challenges in implementing inclusive governance in the selected locations?
Inclusive Education	How many children of school-going age are currently out of school, and why?
	What barriers exist for children with and without disabilities in accessing education?
	Are there sufficient educational facilities and resources to support inclusive education?
	What opportunities exist to improve access to education for marginalized groups (e.g., girls, children with disabilities)?

Advocacy for Affected Populations	What are the key advocacy issues related to healthcare, inclusion, and rights of persons with disabilities and EO victims?
Service Mapping	Have other actors implemented clearance, EORE, Victims assistance, cash for access, health, MHPSS, livelihood, inclusive education, inclusive education, or youth targeted programs or related activities in the selected locations?
	What kind of health facilities and MHPSS services are available in the selected locations?
	Are there qualified people able to provide rehabilitation services or MHPSS?
	What local organizations exist in the community that could support the implementation of activities in the selected locations?
	What capacity-building opportunities exist for local actors in healthcare, MHPSS, or advocacy roles?
Communication Modalities	What is the preferred modality for receiving information among community members in the selected locations?
	Do community members have access to equipment and internet connections required for communication via phone or online?
Victim Assistance	Is information collected from EO victims by the government to assess their needs?
	Does the government ensure EO victims receive needed services through a referral mechanism?
Clearance Needs Assessment	How are households in the selected locations impacted by explosive ordnance contamination?
	Is EO contamination preventing access to basic services such as education, health, water, electricity, main roads, etc.?
	Is EO contamination preventing IDPs from returning to the selected locations?
Explosive Ordnance Risk Education (EORE) Needs Assessment	Have community members received EORE messages in the past, and do they think it would be beneficial in the future?

	How many EO-related accidents have occurred in the past three years, and what were the victims doing at the time?
	Which groups are most at risk of EO accidents and why?
	How aware are community members of existing EO contamination and safe behaviors to avoid EO risks?
	Are there local organizations, authorities, teachers, or leaders trained as EORE providers, and are they active?

Data Collection Methodology:

The consultant will lead the development and refinement of primary data collection tools, ensuring they are aligned with the assessment's objectives and effectively address the thematic areas identified. The consultant should design separate tools for individual surveys, key informant interviews (KIIs), and focus group discussions (FGDs), based on the thematic questions outlined in the "Information Collection" section.

A mixed-methods approach will be used in the data collection phase, combining qualitative and quantitative techniques to ensure comprehensive and accurate findings. **The primary data collection tools should be designed to:**

➢ Address the objectives of the assessment, ensuring all key areas are covered.
➢ Facilitate the triangulation of findings, allowing for validation and cross-verification of information from different sources.

The methodologies for primary data collection will include:
1. **Individual Surveys:** Quantitative data collected at the household or individual level, focusing on demographics, economic conditions, and social characteristics of the population.

One questionnaire will be administered to a sample of the targeted population, consisting of a 95% confidence interval and a 10% margin of error. the MEAL unit aiming to select 390 individuals to be surveyed, proportionally divided per the number of targeted locations.

Type of data collection	Location	Sample size
HH Assessment	Sulaymaniyah	130
	Kirkuk	130
	Diyala	130

2. **Key Informant Interviews (KIIs):** In-depth interviews with key stakeholders, such as local leaders, service providers, and experts, to gather qualitative insights on governance, service access, conflict dynamics, and other critical issues.

Location	Type of key informant	Number	Total per 3 governorates
Per governorate	Community leader	10	30
	Education facility	6	18
	Health Facility	6	18
	Other actors/ authority	8	24

3. **Focus Group Discussions (FGDs):** Group discussions with targeted community groups (e.g., women, persons with disabilities, teachers, healthcare workers) to gain a deeper understanding of community perspectives, needs, and experiences.

Location	FGD type	Number of participants	Number of FGDs
Per Governorate	Male and Female community members/ leaders	8-12 per FGD	3
	Healthcare Workers including facilities visitors	8-12 per FGD	3
	Education Staff including teachers, parents with their children	8-12 per FGD	3

All tools must be tailored to effectively capture data on governance, education, economic development, and health (including MHPSS and rehabilitation). The consultant is responsible for ensuring the tools and techniques used are appropriate for the local context and culturally sensitive.

Actors Involved in the Needs Assessment:

The following actors will be involved in the coordination, execution, and oversight of this needs assessment:

1. HI Program Team: The program team will provide necessary support and inputs throughout the assessment process.
2. HI Technical Team (Coordination and Regional Level): Technical experts from the coordination and regional levels will provide oversight and technical guidance to ensure that the assessment aligns with Humanity & Inclusion's standards and objectives.
3. Relevant Key Government Agencies: The Directorate of Health (DoH) from Kirkuk, Diyala and Sulaimanyah governorates, as well as the Iraqi Mine Action Agency (DMA) and IKMAA, will collaborate to provide relevant information and facilitate the assessment.
4. Local Partners and I/NGOs: Organizations of Persons with Disabilities (OPDs), along with relevant international and national organizations (I/NGOs) operating in the selected areas, could be engaged, these partners can contribute their expertise, local knowledge, and networks to ensure comprehensive coverage and inclusion of diverse perspectives in the assessment.

Management and Coordination:

This needs assessment will be coordinated by the HI Coordination Office in Erbil. The lead focal point will be the MEAL Manager, supported by an Assessment Committee composed of country Manager and Operation manager Managers, technical staff, and MEAL staff from HI.

The consultant and their team will engage with a variety of external stakeholders, including targeted populations, community leaders/representatives, donors, local authorities, other NGO actors in the field, cluster representatives, and other relevant stakeholders.

Deliverables

The consultant will be responsible for delivering the following key outputs throughout the needs assessment process:

1. Data Collection:

The consultant will lead and oversee the data collection phase, ensuring the proper use of tools designed for individual surveys, key informant interviews (KIIs), and focus group discussions (FGDs), as outlined in the methodology section. Data collection must be comprehensive and aligned with the thematic questions to capture the full scope of the assessment across target populations and areas.

2. Data Extraction and Pre-Analysis:

After the data collection phase, the consultant will conduct a thorough extraction of both quantitative and qualitative data. The data extraction process should involve:

- Quantitative Data: Compiling and organizing numerical data from individual surveys into a structured database, ensuring all relevant demographic, economic, and social indicators are accurately captured.
- Qualitative Data: Systematically organizing responses from KIIs and FGDs into themes based on the assessment's objectives and thematic areas, ensuring consistency in how responses are categorized.

The consultant will clean and verify the extracted data, addressing any inconsistencies or gaps. This pre-analysis step will ensure that the data is ready for in-depth analysis and that the insights drawn are based on reliable and complete information.

3. Analysis and Report of Findings

The consultant will conduct a comprehensive analysis of the extracted data, synthesizing quantitative and qualitative findings. The final report will include:

- A detailed analysis of the needs identified across thematic areas such as governance, education, health (including MHPSS and rehabilitation), economic development, and clearance needs.
- A breakdown of key trends and challenges faced by the target populations.
- Actionable recommendations for HI's future programming, based on the assessment's findings and aligned with the needs of the affected communities.

4. Preliminary Findings Presentation

The consultant will present the preliminary findings to HI and other relevant stakeholders. This presentation will cover key insights, emerging trends, and potential recommendations for future programming. Feedback received during this presentation will be incorporated into the final report, ensuring that all perspectives are considered before finalizing the recommendations.

Means

Expertise Sought from the Consultant:

The consultant(s) should possess the following expertise and qualifications:

1. A relevant degree or equivalent experience related to conducting needs assessments or similar research.
2. Previous experience in conducting needs assessments or research in the Middle East.
3. Knowledge of multi-sectorial and integrated approaches to projects/programming.
4. Extensive field experience in assessing humanitarian or development projects of similar themes.
5. Strong experience in the coordination, design, implementation, and evaluation of programs.
6. Ability to independently access and travel to project locations within Federal Iraq.
7. Familiarity with Core Humanitarian Standards.
8. Proficient statistical and analytical skills for both qualitative and quantitative data analysis.
9. Excellent communication skills, including experience in facilitating workshops and focus groups.
10. Proven ability to write clear, concise, and actionable reports (examples of previous work may be requested).
11. Fluency in English is required; knowledge of Arabic or Kurdish is an asset.
12. Understanding of donor requirements and priorities.
13. Strong organizational skills, including the ability to manage time and resources effectively and work within tight deadlines.

Budget Allocated to the Needs Assessment

The consultant(s) must submit a detailed budget proposal, including:

1. The daily rate for each consultant.
2. A breakdown of the time allocation for each consultant team member and the various stages of the assessment.
3. Ancillary costs (services, additional documentation).
4. Total cost of the needs assessment, including transportation (international and local), logistics, and translation services.
5. Proposed payment modalities, with an outline of expected payment schedules.

Required Documentation and Resources from the Consultant(s)

The consultant(s) are required to provide the following:

1. Proof of legal and valid registration in Iraq.
2. Evidence that government taxes have been paid.
3. The consultant(s) are responsible for personal, life, travel, and health insurance for themselves and their team(s) during the assessment.
4. Proof of social security contributions.
5. A tax certificate from the consultant's tax office or equivalent.
6. The consultant(s) must also supply any necessary materials for the assessment, including their own laptops and relevant equipment.

Submission of Applications

1. The technical proposal should include:
2. Profile(s) and CV(s) of the consultant(s) and the proposed team, with clear delineation of roles and responsibilities.
3. At least one example of previous needs assessment or similar studies, with references.
4. A complete list of all previous assessments or evaluations conducted, including titles and dates.
5. A proposed methodology covering all aspects of the needs assessment, aligned with HI's Quality Framework and utilizing a participatory, mixed-method approach.
6. A tentative timeline with clear milestones for each phase of the assessment.

Submit your application, including all administrative and technical annexes, to r.iwan@hi.org by 03-Oct-2024. Please indicate in the email subject: "Needs Assessment Services – HI– Iraq."

Financial Proposal

The financial proposal should be outlined in both USD and Iraqi dinars (IQD) and must include:

Total cost.

1. Daily rate per contributor.
2. Any additional costs (services and documentation).
3. Transportation costs (international and local).
4. Logistics costs.
5. Translation costs.
6. Proposed payment schedule.
7. Schedule of Payment

HI suggests the following payment schedule, unless otherwise agreed upon:

1. 40% upon contract signature.
2. 60% upon approval and validation of the final needs assessment report, including the executive summary.

All payments will be made upon receipt of the invoice and signature of the selected consultant(s), via bank transfer or cheque in USD/EUROS or IQD, in compliance with in-country fiscal regulations and subject to fulfillment of deliverables.