



TERMS OF REFERENCE

Consultant for SROLANH Assessment

1. Background

ADRA Cambodia is conducting an assessment to inform the design of the Sustainable Resilience for Lifestyle Adaptation and NCD Health (SROLANH) Project in Bakan and Kravanh districts, Pursat Province, Cambodia. This initiative aims to address the increasing burden of Non-Communicable Diseases (NCDs) through preventive health interventions, capacity-building of healthcare workers, and community engagement. The assessment will provide essential data and analysis to refine the project's strategies and ensure alignment with national health priorities, including Cambodia's Strategic Plan for the Prevention and Control of NCDs (2022–2030).

2. Objectives of this assessment

ADRA Cambodia seeks to engage a qualified consultant to:

1. Conduct a comprehensive situation and GEDSI analysis to understand the socio-economic, gender, disability, and social inclusion factors affecting NCD prevalence and healthcare access in Bakan and Kravanh districts. The assessment will identify systemic barriers to healthcare and inform targeted interventions. The tools for this analysis will be provided by ADRA and can be modified as necessary.
2. Evaluate the capacity of the local health system and community structures to prevent and manage NCDs. This will include an assessment of Village Health Support Groups (VHSGs), health centers, and existing community-based interventions, as well as the identification of key challenges and opportunities for strengthening the health system.
3. Provide evidence-based recommendations for project design that ensure the integration of effective NCD prevention strategies, GEDSI principles, Value based approach and sustainable interventions. This will include identifying high-impact strategies for behavior change, health promotion, and system strengthening.

3. Scope and Focus

The consultant will conduct an in-depth assessment covering the following:

- Situation analysis, including socio-economic, health, and environmental factors affecting NCD prevention.
- GEDSI analysis, focusing on gender, disability, and social inclusion considerations in healthcare access and NCD management.

- NCD prevalence and risk factors in the target districts.
- Health-seeking behaviors and knowledge gaps among the community.
- Capacity and resources of local health workers, including VHSGs and health center staff.
- Community values, perceptions and barriers to adopting healthier lifestyle behaviors.
- Effectiveness of existing health programs and policies in addressing NCDs.
- Identification of potential interventions to strengthen health system resilience.

The assessment will be guided by the following key evaluation questions:

- To what extent are the objectives of the proposed project aligned with the needs of the community?
- Are the interventions appropriate and responsive to the socio-economic and health context of Bakan and Kravanh districts?
- How effectively have existing NCD prevention efforts been implemented in the target areas?
- What have been the key enablers and barriers in accessing NCD prevention and healthcare services?
- How efficiently are resources (human, financial, and material) being utilized to address NCDs in the target communities?
- What lessons can be learned to improve cost-effectiveness and efficiency of interventions?
- What measurable changes in NCD prevalence and health behaviors have been observed in the community?
- What has been the impact of health system strengthening efforts on service accessibility and quality?
- To what extent are NCD prevention efforts embedded within local health structures?
- What mechanisms are in place to ensure sustainability of project interventions beyond external funding?

The Values Based approach questions and guide is attached document to this ToR.

4. Methodology and Approach

The recommended methodology and tools are (but not limited to):

The consultant is expected to use a participatory approach and a combination of qualitative and quantitative methods, ensuring that data collection is robust and contextually relevant. The process will include:

Quantitative Methods:

- Household Surveys: Structured surveys will be conducted to assess baseline data on NCD prevalence, health behaviors, and accessibility of healthcare services.
- Secondary Data Review: Government health statistics, previous evaluations, and reports from other development actors will be analyzed to contextualize findings.

Qualitative Methods:

- Key Informant Interviews (KIIs): Interviews will be conducted with key stakeholders, including health officials, VHSGs, community leaders, and program implementers to gain insights into the health system's capacity and community needs.
- Focus Group Discussions (FGDs): Discussions will be held with various community groups, including men, women, youth, and persons with disabilities, to understand lived experiences, cultural factors, and barriers to healthcare access.
- Observational Field Visits: Direct observation at healthcare facilities and community sites will provide contextual insights into service delivery, infrastructure, and program implementation.

GEDSI and Situation Analysis:

- GEDSI Analysis Tools: ADRA will provide structured tools to assess gender, disability, and social inclusion aspects of healthcare access and NCD interventions. The consultant will tailor these tools to suit the context.
- Community Mapping: Identifying key influencers, access points, and existing interventions related to NCD prevention within the districts.

5. Indicative Timeframe

Activity	Timeframe	Number of Days	Person/s involved
1. Inception Report	12 Feb	1	Consultant, PL, PC, MEAL, ADRA Australia
2. Assessment (Field study and data collection)	13-28 Feb	10	Consultant
3. Analyse data and draft report	3-7 March	5	Consultant
4. Submit draft report	10-12 March		Consultant-reviewed by PL, PC, MEAL, ADRA Australia
5. Presentation	13 March	0.5	Consultant, PL, PC, PM, MEAL, ADRA Australia
6. Revise final report	14 – 18 March	1	Consultant
7. Final report submission	20 March	0.5	Consultant
Total number of days		18	

7. Expected Deliverables

The consultant will be responsible for delivering the following outputs:

1. Inception Report detailing the methodology, work plan, and data collection tools.
2. Draft Assessment Report with preliminary findings, analysis, and recommendations.
3. Final Assessment Report incorporating feedback from ADRA Cambodia and ADRA Australia.

4. Presentation of Findings to key stakeholders, summarizing key insights and recommendations.

The report should be drafted using the following points:

- I. Table of Contents
- II. Executive Summary – with a brief summary of key findings and recommendations.
- III. Introduction/Context
- IV. Objectives of the Study
- V. Methodologies and Approach
- VI. Limitations of the Study
- VII. Presentation of Findings and Analysis addressing the objectives and Key Evaluation Questions in the ToR.
- VIII. Conclusions
- IX. Recommendations with clear guidelines on how these can be captured in the redesign or other projects.
- X. Annexes – including photos, maps, workplan, and other important documents.

The main report should not be over 25 pages. Other evidence should be added as Annex to the report.

8. Ethical Guidelines

It is expected that the Consultant will adhere to the following ethical guidelines and principles:

- **Informed consent:** All participants are expected to provide informed consent following standards and pre-agreed upon consent protocols. For example, if project beneficiaries are minors, parents/guardian's consent should be sought.

Compliance to ADRA's values and ethical standards, including child protection and adult safeguarding.

- **Confidentiality:** Utmost confidentiality must be exercised in respect of identities of participants and all data collected.
- **Integrity/honesty:** Evaluator to display honesty and integrity in their own behaviour and attempt to ensure the honesty and integrity of the entire evaluation process.

Respect for people: The Consultants respect the security, dignity and self-worth of respondents, programme participants and other stakeholders. It's expected that the Consultants will receive informed consent of the participants to ensure that they can decide in a conscious, deliberate way whether they want to participate or not. The Consultants will avoid exposing respondents to further harm as a result of the response.

Responsibilities for general and public welfare: The Consultant should take into account and be sensitive of the social, cultural and religious dynamics of the population. Consultants should take proactive efforts to create safe spaces for participants and vulnerable groups, especially women, to share information freely and safely without the presence of judgment, shame, or risk of harm. This may require women to question women, and men to question men, for example.

This study must utilize participatory, inclusive, face-to-face methodologies. Collecting firsthand input and experiences from community members is important.

The Consultants should take great care not to cause emotional/psychological harm during data collection as questions may relate to highly sensitive information. Issues of sensitivity may vary between communities, genders etc.

9. Competency Requirements

Consultant qualifications:

- Extensive experience in conducting assessments related to public health, NCDs, and community development.
- Strong expertise in mixed-methods research, including quantitative and qualitative data collection.
- Experience working with marginalized and vulnerable populations, particularly in Cambodia
- Familiarity with GEDSI principles and participatory evaluation methodologies.
- Strong analytical and report-writing skills in English.
- Previous experience working with international NGOs and familiarity with DFAT ANCP evaluation requirements.

Desirable to have:

- Experience and skills working with long-term projects.
- Experience and skills working with local staff to develop and conduct evaluations.
- Cross-cultural sensitivity.
- Knowledge and experience in relevant subject matters, e.g. livelihoods, market-based approach, agriculture, WASH, health, leadership.
- Experience and skills in learning-oriented data processing, information analysis, and report writing.
- Experience and skills in participatory processes, rural and social development, and cross-cutting issues such as gender and disability inclusion.
- Commitment to accomplish work by given deadlines.

10. Submission of Proposal

Interested consultants should submit a proposal including:

- A cover letter detailing relevant experience.
- A detailed technical proposal outlining the methodology and work plan.
- A financial proposal with a breakdown of costs.
- CVs of the lead consultant and key team members.
- At least two references from previous assessments.

Deadline for Applications: February 6, 2025