

# **TERMS OF REFERENCE**

**Doctors without Borders/Médecins Sans Frontières (MSF)** is an international medical humanitarian organization determined to bring quality medical care to people in crises around the world, when and where they need regardless of religion, ethnical background, or political view. Our fundamental principles are neutrality, impartiality, independence, medical ethics, bearing witness and accountability.

The Stockholm Evaluation Unit (SEU), based in Sweden, is one of three MSF units tasked to manage and guide evaluations of MSF's operational projects. For more information see: <a href="mailto:evaluation.msf.org">evaluation.msf.org</a>.

Evaluation on Reconstructive Surgery in Conflict Settings		
STARTING DATE:	If possible, from October 2021, but later date negotiable	
DURATION:	Final report to be submitted within <u>four to five months after start.</u>	
REQUIREMENTS:	Interested applicants should submit:  1) A proposal describing how to carry out this evaluation (including budget in a separate file),  2) a CV, and  3) a written sample from previous work	
DEADLINE:	By 23:59 on Sunday 26th September 2021	
APPLY TO:	evaluations@stockholm.msf.org with subject line "RECON"	
OTHER:	<ul> <li>We recognize that finding candidates who meet all the requirements stated below under profile can be challenging, and therefore we encourage applications from individuals and teams who would be willing to be matched with others.</li> <li>As such, we particularly encourage medical surgeons with relevant surgical and contextual (conflict) experience who would be willing to work in a team, to apply.</li> <li>Careful attention should be paid to the skills set requirements that we are seeking for this consultancy in the profile section at the end of this document. If you have queries regarding the requirements, please do not hesitate to contact us via the email address above.</li> </ul>	



# **INTRODUCTION**

Médecins Sans Frontières (MSF) is an international independent medical humanitarian organization delivering emergency aid to people affected by armed conflict, epidemics, natural climate disasters and exclusion from healthcare. Medical operations are implemented by five operational centres in Brussels, Amsterdam, Barcelona, Geneva, and Paris. Since its establishment in 2010, the Stockholm Evaluation Unit (SEU) has facilitated more than one hundred evaluations and reviews commissioned by the Operational Centre in Brussels (OCB).

The MSF movement currently implements as well as supports the implementation of humanitarian medical assistance activities across the Middle East, with four programs offering reconstructive surgery in conflict settings in Yemen, Iraq, Jordan, and Palestine. Two of these programs are implemented by the OCB – Mosul and Gaza – and are the subject of the proposed evaluation. MSF-OCB further carries out operational research (OR) on key topics, such as ongoing research on Antibiotic Resistance (ABR), including an operational research training course for practitioners in the programmes on the topic in Lebanon under the name "ABR Sort-it".

## BACKGROUND

#### Mosul

In 2014, IS and affiliated armed groups besieged Mosul, Iraq's second largest city located in the northern governate of Nineveh, leading to an *en masse* exodus of Mosul's many minority populations. In 2019, the Iraqi government retook control of the governate from IS-control in a second conflict. The city has since then been undergoing reconstruction to rebuild many of the buildings and infrastructures, including hospitals and primary healthcare centres, that were partially or completely, destroyed. Two of three government-run hospitals with surgical departments were entirely damaged, and one badly damaged.

The reoccurring local conflict in Mosul gives periodic rise to an increase in the number of orthopedic and plastic surgery cases linked to violent conflict-related trauma, as well as an increase in the prevalence of conflict-related mental health conditions in the population that need addressing. When the situation is stable and conflict is low, resources from the project are channeled into treating even non-conflict linked trauma surgeries as well as other activities, such as a recent covid intervention. The public health system in Mosul remains chronically underfunded, understaffed and underequipped to respond to the more complex post-conflict healthcare needs of Mosul's inhabitants. This is compounded by the unregulated widespread use of antibiotics in Iraq, which makes treatment of post-operative infection a challenge.



The MSF-OCB Mosul program objectives is to provide access to free surgical care, Sexual Reproductive Health (SRH) services and Mental Health and Psychosocial Support (MHPSS) services in order to reduce morbidity and mortality rates. These services are offered to people living in Mosul who have been injured by violent and/or accidental trauma; have lost sufficient access to SHR services and/or suffer from post-conflict mental conditions. The MSF program started in 2019 during the second period of conflict, providing an orthopaedic hospital and services to the general population. With the arrival of the covid pandemic, surgical operations for care of conflict-related trauma were completely halted between April and November of 2020, with no patients being admitted for surgical care.

#### Gaza

Gaza is a protracted crisis which is frequently affected by periodic conflict. MSF OCB set up operations in Gaza during April 2018, including reconstructive surgery for conflict-related trauma, following the March of the Right to Return in March of the same year. MSF currently runs the surgical unit in a hospital run by a local organization, The Union. With two operation theatres and up to 23 beds the unit saw an influx of patients needing reconstructive limb surgery or follow-up reconstructive surgery for conflict-related trauma wounds throughout 2018 and 2019. By December 2019, when the pandemic covid hit, the influx of patients for surgery decreased. In June of 2020, the admission criteria for surgical care were expanded to include paediatric care (from 5 years old) as well as non-conflict trauma surgery.

The OCB MSF Gaza program objectives is that the Gaza paediatric and adult population with traumatic and post-traumatic pathologies, and anomalies make use of the free, quality, and multi-disciplinary MSF surgical program in Al Awda Hospital.

# REASON FOR EVALUATION / RATIONALE

The MSF movement currently operates four programs in the Middle East with a reconstructive surgery component. This type of medical activity is relatively new to MSF OCB, which means there is an organizational desire to increase knowledge on this topic.

As OCB currently operate two reconstructive surgery projects in two protracted crisis settings the evaluation will be an opportunity to gain insight and potentially cross-fertilize the existing projects.

## OVERALL OBJECTIVE AND INTENDED USE

**Overall objective.** The overall objective of the evaluation is to assess the relevance, appropriateness, effectiveness, efficiency, and impact of MSF OCB's reconstructive surgery project



interventions in Mosul and Gaza. The objective is to understand where we stand on delivering our project objectives.

**Intended use.** The evaluation is aimed primarily at informing MSF OCB discussions about the project's main orientations for the next few years, including potential necessary adaptations in Mosul and Gaza respectively.

# SPECIFIC OBJECTIVES

The specific objectives of the evaluation are based on the international OECD-DAC criteria.

#### **APPROPRIATENESS**

EQ1. To what extent are the projects culturally, medically, and contextually appropriate in Gaza respectively Mosul?

- In what ways is the project design and implementation appropriate in Gaza respectively Mosul?
- Were appropriate and timely adaptations made in response to changes in the context in Gaza respectively Mosul?

#### **RELEVANCE**

EQ2. To what extent are the project approaches relevant in Gaza respectively Mosul?

- In what ways has the start-up phase been contextually relevant?
- In what ways has the re-orientation of project activities been relevant?
- To what extent has the change in admission criteria been relevant?

#### **EFFECTIVENESS**

## EQ3. To what extent are the projects effective?

- To what extent are the project activities attaining their expected results?
- What are the main enabling factors and barriers to reaching results in each project site?
- Do project activities adhere to Quality standards (internal and external)?
- In what ways does capacity at HQ and project level contribute to reaching results?

## **EFFICIENCY**

#### EQ4. To what extent are the projects efficient?

- Do the MSF projects in Mosul respectively Gaza utilize monetary, human and material resources satisfactorily to achieve project results?
- In which possible ways can the projects improve the reorientation of use of resources when needed?



#### **IMPACT**

### EQ5. In what ways have the projects impacted the quality of life of patients?

Does our project presence in Gaza respectively Mosul have any unforeseen positive or negative impact?

## **EXPECTED DELIVERABLES**

### 1. Inception Report

As per SEU standards, after conducting initial document review and preliminary interviews. It will include a detailed evaluation proposal, including methodology.

## 2. Draft Evaluation Report

As per SEU standards. It will answer to the evaluation questions and will include conclusions, lessons learned and recommendations.

#### 3. Working Session

With the attendance of commissioner and consultation group members. As part of the report writing process, the evaluator will present the findings, collect attendances' feedbacks and will facilitate discussion on lessons learned.

#### 4. Workshop

Capacity-building workshop in M&E for medical staff.

## 5. Final Evaluation Report

After addressing feedbacks received during the working session and written inputs.

## 6. Internal Presentation of Evaluation findings

Other dissemination deliverables to be defined in a separate dissemination plan.

## TOOLS AND METHODOLOGY PROPOSED

In addition to the initial evaluation proposal submitted as a part of the application (see requirement chapter), a detailed evaluation protocol should be prepared by the evaluators during the inception phase. It will include a detailed explanation of proposed methods and its justification based on validated theory/ies. It will be reviewed and validated as a part of the inception phase in coordination with the SEU.



# RECOMMENDED DOCUMENTATION

- Project documents (project proposals, logistical frameworks, situational reports, annual reports, field visit reports)
- Documentation regarding the ongoing operational research initiatives in the project
- National and regional documentation
- External literature and documentation of similar experiences

## PRACTICAL IMPLEMENTATION OF THE EVALUATION

Number of evaluators	Open
Timing of the evaluation	Dependent on consultancy start date

# PROFILE/REQUIREMENTS FOR EVALUATOR(S)

The successful evaluator/evaluation team<sup>1</sup> will have **specific skills sets in three areas**: reconstructive surgery in conflict settings; humanitarian programmatic experience, and evaluation experience. We therefore welcome applications from consultancy teams with two or more of these skills sets, as well as from individuals with one or more of these skills sets who are open to potentially being matched to form a team.

- Skills set one: Medical competency
  - Essential requirement: medical surgeon with experience of working in a reconstructive surgery programme in a conflict, post-conflict and/or protracted crisis setting.
  - Desirable, but not essential: experience of managing reconstructive surgery programming in a conflict, post-conflict and/or protracted crisis setting.
- Skills set two: Humanitarian Programming
  - Essential requirement: experience of managing projects and/or programmes in medical humanitarian programming.
  - Desirable, but not essential: experience of working in humanitarian programming in the Middle East.
- Skills set three: Evaluation competency
  - Essential requirement: Experienced in conducting complex programmatic evaluations within Public Health, medical interventions, medical assistance etc.
- Desirable:
  - Good understanding of MSF operations.

<sup>&</sup>lt;sup>1</sup> If we receive applications from individuals who we think can be matched to form a team, we will propose this.



- o Experience/understanding of Iraq and/or Palestine contexts.
- Fluency in Arabic.

## APPLICATION PROCESS

The application should consist of a technical proposal, a budget proposal, CV, and a previous work sample. The proposal should include a reflection on how adherence to ethical standards for evaluations will be considered throughout the evaluation. In addition, the evaluator/s should consider and address the sensitivity of the topic at hand in the methodology as well as be reflected in the team set-up. Offers should include a separate quotation for the complete services, stated in Euros (EUR). The budget should present consultancy fee according to the number of expected working days over the entire period, both in totality and as a daily fee. Travel costs, if any, do not need to be included as the SEU will arrange and cover these. Do note that MSF does *not* pay any per diem.

Applications will be evaluated on the basis of whether the submitted proposal captures an understanding of the main deliverables as per this ToR, a methodology relevant to achieving the results foreseen, and the overall capacity of the evaluator(s) to carry out the work (i.e. inclusion of proposed evaluators' CVs, reference to previous work, certification et cetera).

Interested teams or individuals should apply to evaluations@stockholm.msf.org referencing RECON no later than 23:59hrs CET on September 26, 2021. We would appreciate the necessary documents being submitted as separate attachments (proposal, budget, CV, work sample and such). Please include your contact details in your CV.