

## CALL FOR APPLICATIONS

### Evaluation of the MSF Day Care Centre in Athens

APPLICATION DEADLINE: 16<sup>th</sup> July 2023

**Médecins Sans Frontières/Doctors Without Borders** (MSF) is an international medical humanitarian organisation providing quality medical care to people in crises around the world, regardless of religion, ethnic background, or political views. Our fundamental principles are neutrality, impartiality, independence, medical ethics, bearing witness, and accountability.

The **Vienna Evaluation Unit**, based in Austria, is one of three MSF units tasked with managing and guiding the evaluation of MSF projects. For more information see <http://evaluation.msf.org/>

Subject/Mission	The Day Care Centre in Athens provides humanitarian assistance to asylum seekers and migrants
Expected start	July, 2023
Duration	Final deliverables to be submitted by end of September 2023
Application Requirements	<ol style="list-style-type: none"> <li>1) A proposal containing an initial version of evaluation matrix and the expected budget<sup>1</sup> (total estimated workload: 60 consultancy days)</li> <li>2) A cover letter highlighting applicants' experience with similar past assignments (max 1 page)</li> <li>3) CV(s)</li> </ol> <p>Applications should be sent to <a href="mailto:veuapplication@vienna.msf.org">veuapplication@vienna.msf.org</a></p>
Deadline to apply	16 <sup>th</sup> July 2023

<sup>1</sup> Please specify the gross amounts and applicable VAT/tax rates (or indicate if a VAT exception applies) in the budget proposal. Please note that MSF Austria is not part of the EU's Reverse Charge VAT mechanism. Do not include field data collection/travel costs, as they will be calculated separately based on MSF policies.

## CONTEXT

MSF has been providing medical and humanitarian assistance to asylum seekers and migrants in Greece since 1996. In 2015, MSF expanded their activities to respond to the massive influx of asylum seekers on the islands and the mainland from Turkey. OCG operates since 2016 a Day Care Centre (DCC) in Athens which currently offers a comprehensive package of medical services: SRH, NCD, Mental Health, HP and Socio - Legal support ensuring a multidisciplinary approach; all activities supported by a large team of cultural mediators facilitating referrals to NHS.

The DCC project reoriented its strategy, to increase the number of patients, as well as to revive the links with the communities and target population in the urban areas. Two strong outreach activities were introduced (mobile clinic in 4 urban areas and medical services in 5 camps in the region of Athens). To address the existing lack of shelter specifically for survivors of sexual violence and SRH related activities (ToP, small surgery, etc), a short-term accommodation activity was put in place to support access to healthcare and follow-up. Finally, a cohort of 'complex cases' was built to respond to the needs of patients with extreme medical needs who fall out of MSF admission criteria in the DCC. Renewed advocacy ambitions were set to address exclusion to healthcare.

- A new application was launched for the registration of asylum claims in the mainland. An email address is necessary to log in and submit the application, and to receive appointments. This online system is not functioning well, creating additional barriers and delays in the registration of people, including the most vulnerable ones.
- Confronted with a decreasing number of patients, as well as with a deterioration of the medical, social, and legal environment for our target population, the decision was taken to widen the admission criteria. Before restricted to people without a security number, the project started to also provide medical care to patients with a valid security number (PAAYPA).
- Furthermore, the urban outreach activity was introduced, aiming at increasing proximity to the target population and at providing a broader entry door for everyone in medical need (PHC). A short-term accommodation scheme for post-surgical and SGBV and SAC cases has also been made available.
- The Covid-19 project closed in June 2022, following the gradual phasing down of the pandemic as well as the lift of the restriction measures in March 2022. Vaccination activities were integrated into DCC project for a few months and then completely stopped (see capitalization report).

## EVALUATION PURPOSE, OBJECTIVES, AND GENERAL CRITERIA

**PURPOSE:** To learn from the achievements, challenges, and limitations of the current project intervention in order to inform the strategic orientations for the next project's cycle. Findings and recommendations will be used by the medical and operational management team (including cell, mission, and project levels).

Knowing that migration will continue increasing over the coming years/decades; this project offers a good learning opportunity to capitalize on experiences and highlight learning opportunities for future willingness of MSF to open similar projects in an urban setting.

The project, opened end 2016, exists in a rather atypical context for MSF: an urban setting in a developed EU country with an existing national health system from which are systematically excluded in different ways those that are most vulnerable (undocumented, administrative barriers). Working in the EU brings along a much higher financial cost and newer challenges when it comes to establishing operations in an environment where MSF is not used to intervene (EU, developed country). Integration into the national health system and decision-making regarding working inside structures alongside governmental actors (camps) brings forth questions regarding the balance of where MSF duties start and end. The target population of the project is large and very diverse. The addition of the socio-legal support is an absolute necessity for granting/facilitating access to health care in this context as the barriers to access are usually social determinants. This strong socio-legal component is rather innovative for MSF. The medical activities that were implemented focus on specific pillars in health care (NCD, MH, SRH, outreach). The advocacy component is quite a strong component addressing identified violations and barriers in access to health care.

Below is the **General Criteria** for the evaluation that serve as guidance for the evaluator's proposal.

Criteria	Definitions	Possible evaluation questions
Relevance & Appropriateness	The extent to which humanitarian activities are tailored to local needs, increasing ownership, accountability, and cost effectiveness	1) <i>Are the activities still relevant in the evolution of the context?</i>
Efficiency	Measures the outputs – qualitative and quantitative – in relation to the inputs	2) <i>How cost-effective is the program in terms of the qualitative and quantitative outputs achieved as a result of the inputs?</i> 3) <i>Are the resources allocated to the project (finances - HR) adequate/ appropriate/ balanced to meet the specific objectives? (synthesis-volume-means)</i>
Effectiveness	The extent to which the intervention achieves its purpose, or whether this can be expected to happen on the basis of outputs	4) <i>What are the limitations/opportunities inherent in the approach?</i> 5) <i>What can be done to make the intervention more effective?</i>
Impact	The wider effect of the project on individuals, gender and age-groups, communities and institutions	6) <i>What is the impact on effectively accessing health care for the different targeted communities?</i> - <i>In relation with the other actors/stakeholders of the civil society existing in the specific setting?</i> - <i>In terms of policy identification of gaps and addressing needed changes?</i>
Co-ordination	The extent to which the interventions of different actors are harmonised with each other, promote synergy, avoid gaps, duplication, and resource conflicts	7) <i>To what extent is the co-ordination with external actors enabling the project to obtain the objectives for medical and advocacy activities?</i>

## Evaluator's requirements

The evaluation team should collectively have the following qualifications, experience and competencies:

### Essential:

- Track record evaluating complex organisational set ups and new ways of working
- Experience of evaluating humanitarian projects in Urban settings
- Strategic outlook and thinking
- Ability to undertake cost analysis
- High level of cultural competency
- Excellent analytical and writing skills in English

### Desirable:

- Experience of working with MSF
- Knowledge of MSF's operations
- Experience in Design Thinking approaches