



SITUATIONAL ANALYSIS & NEEDS ASSESSMENT

Guide Notes & ToR Template

Upon approval of the Concept Note, a partner can start the situation analysis and project assessment. Situational Analysis is a process that progressively focuses your understanding of the community in relation to the local problem you are choosing to address.¹

Project Needs Assessment is a process used by organizations to determine priorities, make community improvements, or allocate resources. It involves determining the needs, or gaps, between where the community envisions itself in the future and the community's current state (*adapted definition from Study.com*)

The template below is for Terms of reference with guidance notes on how to draft the ToR as well as how to conduct the situational analysis and project assessment. Sample assessment tools and techniques are included as an Annex to this guidance document.

SITUATIONAL ANALYSIS AND NEEDS ASSESSMENT DETAILS

Project Name	Women Health and System Strengthening (WHaSS) Project
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ORGANISATIONAL PROFILE

Brief description of the organization(s) involved in this project, including partnerships (e.g. ADRA Australia)

The Adventist Development and Relief Agency (ADRA) is a global humanitarian organization with a mission to work with people in poverty and distress to create just and positive change. ADRA Nepal belongs to the worldwide ADRA network, comprised of 118 supporting and implementing country offices. ADRA's five core sectors include Health and Nutrition; Food Security; Economic Growth; Education; and Emergency Management. ADRA has developed strong health expertise with a specific focus on community, front-line health facilities, and resources. Locally, ADRA convenes relevant stakeholders for participatory action in sustainable health promotion and health service programs that are community-driven, household-center, and evidence-based. ADRA has been active in Nepal since 1987 and is currently implementing Health projects/Programs in 21 districts (152 municipalities (>300 Health Facilities)). ADRA's health footprint encompasses the following sub-sectors: maternal, newborn, and child health, Family Planning/Reproductive Health, mental health & gender-based Violence (GBV), non-communicable diseases, health systems strengthening, and emergencies. Most significant partners for ADRA's health programming include ministries of health, UN entities, international donors, ADRA Networks, and the private sector.

The Women's Health Project was initiated in July 2018, with planning to be concluded in June 2021. However, due to the immense need for, community awareness, and capacity building, health systems strengthening, service delivery, advocacy, and demand generation that continues to exist in the country and the constraints posed against the full-fledged implementation of the project by the COVID-19 pandemic, it has been extended for additional two years.

The Project is a collaborative action between Open Heart International (OHI), and Adventist Development and Relief Agency (ADRA) Australia and their in-country partners to leverage Australian NGO Cooperation Program (ANCP) funds with the goal of improving the health of women and adolescent girls, enabling them to lead productive lives in their families and the wider community.

¹ GrassrootCollective.com

PROJECT INFORMATION

The information should include the overall goal (aim) of the project, project objectives, expected outcomes or results and a summary of participants.

The project aims to improve the health of women and adolescent girls impacted by pelvic organ prolapse (POP) and Cervical Cancer (CC) in four districts of Nepal through strengthened health systems. It facilitates clinical capacity development and non-surgical interventions, community education, and behaviour change interventions, especially targeting women of disadvantaged and marginalized communities.

Outcome 1: Health service and clinical support system strengthened at appropriate levels of health facilities in the project implementation area to ensure enabling environment of responsive care for marginalized and vulnerable women and adolescent girls.

Outcome 2: Enhanced access and utilization of effective and safe women's health-related preventive and curative services.

Outcome 3: Community understanding of Pelvic Organ Prolapse (POP) and Cervical Cancer (CC) prevention, behavior change, and health services strengthened to reduce the risk of POP and CC is increased.

Outputs:

1.1 Medical and nursing staff received training and capacity building in key competency areas as per National Standard Guidelines on POP and CC screening including health sector response to Gender-based Violence (GBV).

1.2 Health Facilities are supplemented with essential equipment, surgical facilities, and tools upgraded as per National Standard Guidelines.

2.1 Women are provided with regular screening and conservative management services for POP, CC, and GBV response.

2.2 Women undergoing surgery for POP and/or Higher Centre Treatment of CC are supplemented with pre- and post-treatment assistance and referral linkages.

3.1 Targeted information dissemination conducted to increase demand and utilization of women's health services.

3.2 Key community stakeholder groups mobilized to support the advocacies and awareness campaigns.

3.3 Community-wide awareness campaigns and events conducted to create a positive environment for women's health.

Summary of Beneficiaries:

The following are the key categories and composition of beneficiaries in the project:

Primary Beneficiaries:

- At least 6284 women and adolescent girls from marginalized and disadvantaged communities of Sarlahi, Rautahat, Udaypur, and Sunsari districts, living with women's health issues but have not received screening or management response due to access, availability, and affordability related barriers.
- At least 80 Government of Nepal medical and other health personnel as recipients of capacity building and service upgradation interventions to enable them in providing appropriate and relevant women's health services as per National Guidelines including Scheer Memorial Adventist Hospital/Government Referral Hospitals' medical and nursing staff.
- At least 2693 community members and stakeholders directly participating/engaging in women's health-related education and behavior change initiatives.

Secondary Beneficiaries:

- Direct family members of women treated with POP (mainly Uterine Prolapse)
- Community members aware through widespread dissemination of information on women's health issues through mass media/IEC campaigns.

OBJECTIVES OF THIS ASSESSMENT

The objective of the project assessment is to gather information as the basis of the design of the project. The objective drives the work plan and methodology of the assessment therefore it is important that the objective is as detailed and specific as possible. For e.g., if the project is geared towards focusing on disability inclusion, a specific objective on disability situational analysis must be included which could include specifics such as geographical scope and ethnicity.

The women health project is coming to close and aims to scale up and mainstream earlier achievements through gap analysis and priority setting that includes practical list of key actions/approaches engaging women, girls, stakeholders, and community. Thus, a need assessment is planned, and the results will be used to inform the activities of the next phase of the programme planned from July 2023.

The main objective of the assignment is to conduct a needs and feasibility assessment defining and analyzing the needs of the target groups, the stakeholders involved, the activities planned, the prerequisites necessary for a successful project implementation, and the potential risks to the action.

Specific Objectives

- To obtain baseline information on the socio-economic situation of the beneficiaries in the target area.
- To determine the prevalence of Pelvic organ, prolapse (POP) and Cervical Cancer and their associated risk factors among women in the target area.
- To explain the root causes and drivers of the major gaps found out and how they affect specific groups of vulnerable and excluded women and youths, particularly girls.
- To assess current technical capacities and basic characteristics of the health facilities (All levels) in the target area, including needs of infrastructure, medical equipment, supplies and human resources that are essential in providing effective services to target beneficiaries.
- Adequacy/appropriateness of the package of services at health facilities that fulfils the needs of women and girls including client's satisfaction.
- To develop strategies suitable to the people, need for the improvement of their overall health status and level of participation to be expected from local civil society, selected communities, and local Government.

The results of the need assessment will also be triangulated with previous evaluations, project progress reports and literature reviews and utilized findings to develop and design the project for future implementation, including additional components if deemed necessary and justified for efficacy and effectiveness.

METHODOLOGY AND APPROACH

In most cases, the organization determines the methodology and approach of the assessment (e.g. – participatory, online/offsite, full secondary and literature review only and others). This section should mention that the consultant is required to indicate the sampling methods, data collection and analysis to be used. This also mentions the critical documents to be reviewed (like proposals and reports) and other reports by other partners, and the government.

The study will adopt a mixed-method cross-sectional design. This will draw from existing data and records as well undertake primary data collection. Both qualitative and quantitative approaches will be adopted to get valid and reliable information from the service providers, service users and non-users using sampling techniques to select respondents. The gathering of primary data will also be face to face interviews with key internal and external stakeholders. The key informant interviews will be carried out with Family Welfare Division (FWD)-1, National Health Education Information and Communication Center (NHEICC)-1, Management Division (MD)-1, National Health Training Center (NHTC)-1, Ministry of Social Development-2, Provincial Health Directorate-2, Health Offices-4, Municipal authority (Health Section)-

4, Health Facilities-20, implementing partner/local NGOs-8 and Media-4. A total 32 KIIs will be carried out in 3 districts of Madhesh (Siraha, Mahottari and Dhanusha) and 1 district in Province 1 (Morang) and selected Municipality/Rural Municipality. Similarly, 12 FGDs will be carried out, 3 in each district with service users and non-users and FCHVs. Research agencies/individual consultants are required to submit a detailed methodology based on these Terms of Reference. However, the selected agency/consultant will need to work closely with ADRA in agreeing and finalizing full details of the study design, methods, and tools.

This will also include:

Desk review of existing nationally and internationally available data and evidence on selected topics published in studies, research, and survey reports.

Desk review of data, programme reports, and analysis generated by ADRA

Comparative analysis of social policy, government strategies and budget allocation and analysis of public expenditure documents.

The analysis must fully consider, and articulate disparities related to gender, socio-economic status, geographic location (national/ provincial perspectives) and when possible, ethnicity. The analysis should look across all women rights and identify where there are deprivations.

INDICATIVE TIMEFRAME

The timeframe must include header activities and their corresponding timeframe or days of work. Example below:

Activity	Dates	Number of Days	Person/s Involved
Draft a Workplan and detailed assessment tools	18-20 Oct	2	Consultant, M&E Manager Project manager
Conduct a Literature review	21 – 23 Oct	2	Consultant
Conduct field study	23 -30 Oct	7	Consultant, M&E Manager Project manager
Analyze data and draft a report	31-01 Nov	2	Consultant
Submit a draft report	02 - 05 Nov	3	Consultant
Presentation	06 Nov	1	Consultant
Submit a final report	10 Oct	4	Consultant
Total number of days		20	

EXPECTED DELIVERABLES

Details of required reporting and attachments are mentioned in this section for example

- *Draft report (subject to review and comments)*
- *Presentation (half a day) – feedback meeting*
- *Final report (after revisions) electronic or hard copy depending on the organization*
- *Case stories, photos, maps and others*

Standard report format (example) which can also be used for baseline, midterm review and evaluation.

1. *Table of contents*
2. *Executive Summary – with a summary (bulleted) of major findings, conclusions, and recommendations to be highlighted in the design*
3. *Introduction/context*
4. *Objectives of the study*
5. *Methodologies and Approach*
6. *Limitations of the study*
7. *Presentation of findings and analysis addressing Key Assessment Questions in the ToR*

8. Conclusions
9. Recommendations with clear guidelines on how this can be captured in the design
10. Annexes – photos, maps, workplan and other important documents

ETHICAL GUIDELINES

This section must mention ethical, safeguarding and protection guidelines of the organization including that of the partners.

Example:

It is expected that the Consultants 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/guardians' consent should be sought.

Compliance with ADRA's values and ethical standards, including child protection and adult Safeguarding.

Confidentiality: Utmost confidentiality must be exercised in respect of the identities of participants and all data collected.

Integrity/honesty: Evaluators display honesty and integrity in their own behavior 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, program participants and other stakeholders. It's expected that the Consultants will receive informed consent from 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 because of their responses.

Responsibilities for general and public welfare: The Consultant should consider 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.

COMPETENCY REQUIREMENTS

The requirements for specific consultants and the competency should be detailed in this section. This ToR is usually attached with the job vacancy announcement.

The following qualifications and experience are required to conduct the need assessment:

- The consultant should hold a PhD or post-graduate degree in Public Health (economics/ Social Science/ demography/ statistics) and have relevant experience in qualitative and quantitative research with recent experience in conducting assessment related to Reproductive Health.

- A team member with excellent experience in undertaking in depth interviews, focus-group discussions, and other participatory data collection methods; and transcribing.
- A team member with experience in conducting data processing and analysis.
- Familiarity with the programmes of FWD, especially RH delivery system in Nepal.
- Ability to independently liaise with relevant organizations and stakeholders
- Excellent skills and experiences/evidence of producing analytical reports in English language
- Follow and agree to abide by ADRA's, rules and policies, including Safeguarding/Child Protection Policy, Child Protection Code of Conduct, anti-corruption, and fraud policy etc.
- Focus on program learning and improvement when presenting findings and recommendations.
- Engage openly with the local community, listen to, and synthesize varied perspectives.
- Ensure children, youth, women, girls, and people with disability participate in the evaluation process.
- Cross-cultural sensitivity.
- Experience and skills in participatory processes, rural and social development, and cross cutting such as gender and disability inclusion.
- Commitment to accomplish work by given deadlines.

ADDITIONAL RESOURCES AND GUIDE NOTES

A Situational Analysis and Assessment can be done externally through a consultant or internally by the project team. There are available resources that can be used for this.

In conducting Situation Analysis, secondary data and other studies are helpful. There are tools to further analyze environmental issues for example or disability, inclusion, vulnerability, and others.

[Here](#) is a resource on situational analysis.

Other resources for Project Assessment that can be used are:

- Participatory Assessment Tools by World Bank are linked [here](#) and the FAO tools can be found [here](#)
- Appreciative Inquiry (which is the foundation of the Values-Based Approach). Materials can be found in this [link](#).

For further support (or if the links didn't work from your end) please contact your ADRA Australia Project Manager for copies of the resources.

SUBMISSION OF TECHNICAL AND FINANCIAL PROPOSITION:

The potential and interested evaluator (firms/consultants) must submit technical and financial proposal sharing their keen to conduct evaluation in project implementation areas in the below email address with the subject line “**Application for Situation analysis and Need Assessment WHaSS-II project**”. The deadline for the submission of technical and financial proposition is **16th October 2022**.

- Technical proposal detailing methodologies and plan for evaluation
- Curriculum Vitae of key personnel of the team.
- Financial proposal – including daily rate and all costs in relation to travel, accommodation and other expenses related to evaluation
- An example/sample of a relevant piece of written work
- Cover letter expressing interest and potentiality for evaluation.
- Company legal documents i.e. registration, VAT/PAN, Tax Clearance etc.