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1. BACKGROUND INFORMATION

1.1. Partner country

Sudan

1.2. Contracting authority

AICS - Italian Agency for Development Cooperation
Khartoum Office

1.3. Country background

The Republic of Sudan, the third-largest African country with an area of 1,882 million km², is a multiracial, multicultural country of 18 regions and more than 180 locations. The population is about 40 million inhabitants, of which about 70% live in rural areas and 8% are nomads. There are around 2.2 million IDPs, and refugees from surrounding countries are around 2 million. The population is growing fast (the population's growth rate is 2.8%, the fertility rate is 5.2) and families are made up of 5 to 6 members. Children under the age of 5 represent 15.2% of the total population, while those under the age of 18 account for approximately 50.6% (MICS 2014). About 46.5% of the population lives below the poverty line, earning less than \$ 1 a day, 8% live in extreme poverty. The disparities between rural, semi-rural, and urban areas are evident, with a poverty rate of 67.4% in semi-rural areas and 64.8% in rural areas, decreasing in urban areas. The country is severely affected by poverty and inequalities: according to the 2009 NBHS data, there are about 15 million poor people in the country with marked regional disparities, between urban and rural areas and between nomadic and permanent populations.

Half of Sudan's population is made up of children; approximately 15 million Sudanese are under the age of 18. In this context, several activities that aim at ensuring the well-being of children, particularly in the domains of health; education, and growth, have been implemented. However, the various implemented programs so far have not been executed on a sector basis whereas the issues of development, welfare, and integrated child protection issues necessitate putting in place a holistic approach that responds to the physical, psychological, social, and cognitive needs of children

The child protection sector in Sudan is regulated by the Constitutional Charter for the Transitional Period of 2019 and the Child Act of 2010. Despite the efforts of the Sudanese authorities in applying these principles and ensuring such protection to minors, the poorest population and certain categories of extremely vulnerable children remain excluded. These include (i) the orphan children, abandoned because born within pre-marital or extra-marital relations; (ii) the street children coming from poor families in the suburbs; (iii) children who come in contact with the justice system, both as victims and as offenders; (iv) children on the move.

1.4. Current situation in the sector

Despite positive changes over the last years, Sudan still facing a certain number of challenges for child protection. UNICEF – Sudan reported in 2022, that more than 33 percent of children under five are not registered at birth in Sudan, a situation that has improved only slightly since 2010. Children who do not have birth certificates face difficulties registering for school, retracing family if separated, assessing if they are in contact with the law, and determining their age for marriage. There are large disparities in birth certificates between states (30.9 percent in Central Darfur in comparison to 98.3 percent in Northern Darfur).

Abandonment of children born out of wedlock represents another significant challenge, with three-fourths of babies surrendered daily to the country's only residential care facility. In 2009 in Khartoum, about half of abandoned babies died before they could receive treatment while most of the survivors were taken into care by the Islamic adoption system.

The Child Law 2010 explicitly states the state's responsibility on protecting children without parental care come. The law also defines a package of legislative measures to protect and promote the rights of these children. Many active sectoral entities participate, such as social protection, Child welfare councils (CCWs), the Family and Child Protection Unit (FCPU), the judiciary, the public prosecution, the civil registry, and the health system, in addition to the voluntary organizations working in the field with their various roles.

Since the issuance of the 2010 Child Law and the National Policy for the Care and Protection of Children without Parental Care in 2011, this has become a legislative, legal, institutional, and strategic framework for children in such circumstances.

The Sudan Protection system evaluation was conducted in 2020 by the Federal Ministry of Social Development. The evaluation showed seven states have orphanages for a child, while 14 states depend on the foster family system, noting that these states, some of them, about 4 states have orphanages, also have a foster family system, and there are orphanages in these states with Children under 4 years old, while there is one state with children over 4 years old, which is Khartoum State, and there is at least one orphanage that was closed on one occasion. As for the budget of these orphanages and from they are obtained.

The situation of abandonment of children with disabilities is difficult to be analyzed because of the lack of exact and updated data. Access to a foster family system that is disability-sensitive offer vital advantages in terms of the efficiency of child protection services.

These are not, therefore, residual, small-scale problems that can be dealt with by national child protection systems (formal and informal) alone. It is also likely that these systems underestimate the scale of the problem. The sensitivity of these issues, and the fact that many of them have unarticulated and felt coordination structures, means they are highly likely to be underreported.

1.5. Related programmes and other donor activities

The promotion and protection of the rights of orphans with disabilities in Khartoum State. Through supporting the Sudanese institutions' work to improve the quality of life and to foster the social inclusion of orphans with disabilities. The AID 10583 project is part of the general framework of the AICS Child protection and disability in Khartoum.

The Child-Centred approach it makes necessary for the intervention to focus primarily on the children themselves and the social activity, methods of welfare, or the established educational system. At a second level, children with disabilities who are excluded from the social environment as a result of socio- economic and cultural conditions that prevent them equal access to rights, goods and services such as education, health services. That means promoting the mainstreaming disability approach in strategies and systems and make an integral value for full enjoyment of rights and the equal access to goods and services by child with disabilities.

The intervention in the orphanages represents an intervention that is aimed at implementing the UN-CRPD principles on the ground of civil society, starting from the needs of one of the most vulnerable groups: orphans with disabilities are subject to multiple discrimination since they are discriminated as orphans and as disabled. The initiative is aimed at improving the living conditions and at promoting the social inclusion of children with disability in the three orphanages above mentioned, through the development of their intellectual, psychological, and relational abilities.

2. OBJECTIVES & EXPECTED OUTPUTS

2.1. Overall objective

The intervention is part of the AID 10583 project " promotion and protection of the rights of orphans with disabilities in Khartoum State ", which has as its general objective:

" Promoting the full enjoyment of rights and the equal access to goods and services by persons with disabilities, in line with the International and European standard (UN Convention on the Rights of Persons with Disabilities and European Disability Strategy 2010-2020). "

In the context of this program, which in its conception aims to Support the Sudanese institutions' work to improve the quality of life and foster the social inclusion of orphans with disabilities in Khartoum State, and strength the capacity of local counterparts to promote and protect the rights of children with disabilities.

Based on the AICS program aims to promote the social inclusion of children, and persons with disabilities, by promoting equal access to goods and services and by increasing their resilience through the social inclusion approach.

2.2. Specific objective(s)

To strengthen, preventive and appropriate alternative care, foster family system as bedrock of child protection and care systems that fulfil children's rights. Expected outputs to be achieved by the contractor.

The expected outputs of this contract are as follows:

- Strengthened a foster family system that is disability-sensitive offer vital advantages in terms of efficiency of social protection interventions
- Improved and re-shaping social protection system through a capacity building of CSO's to support foster family Mechanism and particularly children with disabilities.

3. ASSUMPTIONS & RISKS

3.1. Assumptions underlying the project

The contractor is strongly encouraged to involve local organizations actively operating in the Childcare field in the framework of his contract.

The local childcare operators must participate in the initiative, as well as local communities and relevant community leaders.

3.2 Risks

Main risks include the following:

- The country's political and economic situation will have to be stable for the project to be finalized. Furthermore, there must be opportunities for movement and the safety of national and international personnel must be guaranteed.
- Another element of risk is represented by the evolution of the current COVID-19 epidemic which could lead to limitations of travel and the timely execution of the project.

4. SCOPE OF THE WORK

4.1. General

In terms of protecting abandoned child, there are limited services in the Sudan that have been specifically set up to support abandoned child. However, there are a small number of NGOs prevention services that work to address a range of risk factors and help families and children in need (e.g.: mother-baby units and child health residential facilities).

This action was designed to strengthen the institutional capacity of NGOs to address childcare and protection issues and strive to support foster family mechanisms. This could be a result of the many services available within Sudan that help foster families cope with the integrated child and overcome their difficulties, therefore reducing the risk of the abandoned child. There are several services that can be provided to help protecting the abandoned child. These include:

- Social assistance
- Day-care facilities
- Mother-baby units
- Counselling services for the mother and/or the whole family
- Financial support
- Programs that focus on high-risk families and child identity
- Parent raining module
- Social workers in maternity units
- Training of hospital staff to be able to recognize and manage high-risk situations

The implementation and success of this initiative rest on collective and collaborative action among NGOs compiles a knowledge base on child's human rights to be made available to all stakeholders to use and reproduce for years to come.

The institutions which will benefit greatly from the technical and material support provided by the action and the knowledge and skills created will be the nucleus of growth and sustainability in lasting institutions to be passed to child protection actors. It also establishes links and collaboration between international, and local NGOs and the community and closes the gap between them.

4.2. Description of the assignment

The entrusted body will be responsible for the project activities, in continuous coordination with the local Ministries of Social Development -Khartoum State. Ownership of the principles of the action and the implementation of community

actions is by the local NGO which ensures its viability and sustainability within the community.

This activity is contributing to strengthening the capacity of local NGOs or protecting orphan children, abandoned because born within pre-marital or extra-marital relations and developing child protective services for children who are at risk or are experiencing physical, sexual, or emotional abuse, or emotional or physical neglect. The focus will be on building the capacity of CSO's and improvement the services delivery to support foster family Mechanism.

4.3. Geographical area to be covered

- City of Khartoum, Khartoum State.

4.4. Target groups

Local communities. The orphan children, abandoned child, children without parental care and foster family at State level (Khartoum State).

- orphan children concerned, with reference to:
 - abandoned child.
 - abandoned child with disability
 - children without parental care
- childcare operators and orphanage staff including social workers, Midwives. And Medical assistants.
- Foster families and mothers

Specific work

Among the activities of the initiative, beyond Institutional Care Approach in line with the UNCRC, for promoting family strengthening and family-based care programs the selected body must implement the following activities:

- Design and develop alternative care services to match needs of children;
- Enhance the capacity of childcare professionals in new system and embed the principles of necessity and suitability.
- Set up Transition from reliance on institutions to family and community care;
- Support children's transition, prepare families, and support the transition of resources from institutions to family and community-based care.

4.5. Project management

Responsible body for financing

The Italian Agency for Development Cooperation (AICS) in the framework of the AID 10583 project " *The promotion and protection of the rights of orphans with disabilities in Khartoum State* "; represented by the AICS Director in Sudan Dr. Michele Morana, and the project manager of the AID 10583 project.

Management structure

The responsibility for project management will be delegated to the Implementing Body, while the approval of the reports and the modification of the terms of reference is the responsibility of AICS Khartoum (AID 10583 project).

5. LOGISTICS AND TIMING

5.1. Location

All project phases are to be executed within boundary of the city of Khartoum - Khartoum State.

5.2. Start date & period of implementation of tasks

The intended start date is coincident with the signature of the contract; the period of implementation of the contract will be 9 (nine) months from that date. Please see Articles 19.1

and 19.2 of the special conditions for the actual start date and period of implementation. No-cost extensions could be issued subject to agreement between the parties.

6. REQUIREMENTS

6.1. Staff

The project may be coordinated by an expert specifically selected by the Implementing body on the basis of the following requirements:

- professional figure, with previous professional experience of not less than 3 years.
- proven management and coordination skills.

The coordinator will be responsible for:

- the start-up and supervision of activities;
- the relationship with local partners;
- the management of project personnel;
- the preparation of reports to be submitted to the donor;
- financial and administrative reporting.

Note that civil servants and other staff of the public administration of the partner country, or of international/regional organisations based in the country, shall only be approved to work as experts if well justified. The justification should be submitted with the tender and shall include information on the added value the expert will bring as well as proof that the expert is seconded or on personal leave.

Key experts

Key experts are not required. The proposal should consist in well-defined technical outputs. The contractor should have appropriate internal capacities and suitable staff to deliver the expected results.

Other experts, support staff & backstopping

The selected implementing body will be able to make use of local professional staff to adequately develop project activities and for translations.

Curricula for experts other than "key experts" should not be presented in the offer, but the tenderer will have to demonstrate in his offer that he has access to the experts with the required profiles. The contractor will select and hire other experts as needed. The selection procedures used by the contractor to select these other experts are transparent and based on predefined criteria, including professional qualifications, language skills and work experience.

The costs for backstopping and support staff, as needed, are considered to be included in the tenderer's financial offer.

6.2. Facilities to be provided by the contractor

The selected body ensures that the project experts and staff will be adequately supported and equipped in the fulfilment of their work duties. In particular, it must ensure that there is sufficient administrative and secretarial management to allow experts and staff to focus on their responsibilities. It must also ensure that funds are made available to the assets, to support their work under the contract and ensure that employees are paid regularly and in a timely manner.

6.3. Equipment

No equipment should be purchased on behalf of AICS. Any equipment related to this contract must be acquired in the partner country (Sudan) and must be purchased through a separate bidding process. Otherwise, the purchase in a country other than Sudan must be adequately justified.

7. REPORTS

7.1. Reporting requirements

The contractor will submit the following reports in English in one original and one copy:

- **Inception report** of maximum 4 pages to be produced within 2 (two) months from the start of implementation describing the initial findings, progress in collecting data, any difficulties encountered or expected in addition to the work programme and staff travel. The

contractor should proceed with the work unless the contracting authority sends comments on the inception report;

- **Interim Report** of maximum 12 pages to be produced after 3 (three) months from the start of implementation, outlining a comprehensive update on the status of implementation of the activities. The contractor should proceed with his/her work unless the contracting authority sends comments on the interim report.
- **Interim Report II** of maximum 12 pages to be produced after 6 (six) months from the start of implementation, outlining a comprehensive update on the status of implementation of the activities. The contractor should proceed with his/her work unless the contracting authority sends comments on the interim II report.
- **Final report** of maximum 30 pages (main text, excluding annexes). This report shall be submitted no later than 30 days after the end of the period of implementation of tasks.

7.2. Submission and approval of reports

The report referred to above must be submitted to the project manager indicated by AICS in the contract. The project manager is responsible for approving the reports.

8. MONITORING AND EVALUATION

8.1. Definition of indicators

- Number of integrated children
- Number of beneficiaries reached.
- Number of capacity building activities performed;