



Request for Concept Notes Evaluations of BHA's COVID-19 Response

Overview

USAID and <u>LASER PULSE¹</u> (Long-term Assistance and Services for Research Partners for University-Led Solutions Engine), hereafter referred to as LASER, seek **six-page Concept Notes (CNs) of main content** from multidisciplinary teams of researchers and practitioners to conduct two evaluations of the Bureau for Humanitarian Assistance (BHA) COVID-19 response - one focusing on overall performance and a second on the performance of key topical areas.

This request for (CNs) is administered by the LASER PULSE consortium led by Purdue University and funded through USAID's Innovation, Technology, and Research Hub. The project period is 24 months (**September 1, 2022, to August 31, 2024**) with a total funding amount of up to US \$1.1 million. The Concept Note must be **no more than six (6) typed pages long main document**, written in English, with narrative portions prepared in MS Word or Open Office format, using Times New Roman font, size 11, or similar typeset in single line spacing. For details, please see **Section 3** below.

Summary

The purpose of these evaluations is to improve USAID's and humanitarian actors' understanding of the performance of the BHA-funded response to COVID-19 in the humanitarian space. In addition, the evaluations will help to identify detailed and targeted future recommendations and learnings from BHA's COVID-19 response and contribute to improved BHA future programming in outbreak response in humanitarian contexts.

¹ LASER PULSE is a five-year USAID-funded consortium that supports the research-to-translational value chain through a global network of universities, government agencies, non-governmental organizations, and the private sector for research-driven, practical solutions to critical development challenges in USAID interest countries (UIC). LASER supports the discovery and uptake of research-sourced, evidence-based solutions to development challenges spanning all USAID technical sectors and global geographic regions.

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1. BACKGROUND

1.1. Problem Statement

In response to the 2020 COVID-19 global pandemic, the United States Congress passed the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (Public Law 116-123) on March 6, 2020, that included \$300 million in supplemental International Disaster Assistance (IDA) funds and the Coronavirus Aid, Relief, and Economic Security (CARES) Act on March 21, 2020, that included an additional \$258 million in supplemental IDA. As part of the continued response to the pandemic in 2021, the United States Congress passed the American Rescue Plan (ARP) Act. The ARP appropriated both supplemental Economic Support Fund (ESF) funding and Title II (TII) funding to support continued international disaster relief, rehabilitation, and reconstruction, for health activities, and to meet emergency food security needs related to the COVID-19 pandemic in FY2021-FY2022 USAID/BHA programmed nearly \$1.3 billion in ESF and \$800 million in Title II, hereafter referred to jointly as the FY21 COVID-19 Supplemental, which is the focus of the requested evaluations. In order to meet the requirements consistent with the COVID-19 Supplemental, BHA developed the Strategic Framework for USAID's Bureau for Humanitarian Assistance. This document outlines BHA's strategic approach to and parameters for use of COVID-19 supplemental funding allocated in FY 2021 through the ESF and TII accounts and is in support of the United States COVID-19 Global Response and Recovery Framework.

BHA's COVID-19 \$1.3 billion in ESF funding was used to support 163 awards across 46 countries². These awards supported 14 sectors of programming across the following: Health (68), WASH (65), Protection (59), Food Assistance (53), Nutrition (47), HCIMA (31), Agriculture (29), ERMS (24), MPCA (23), S&S (15), Logistics (7), HPSAA (3), DRR (2), Natural Hazards and Technological Risks (1), including multi-sectoral awards. More information on the sector activities and the sub-sectors of programming can be found in BHA's Emergency Application Guidelines³. While BHA sectors of health and WASH were the most commonly supported sectors, the Food Assistance sector received the most funding (Figure 1). BHA's COVID-19 response included support across BHA's three geographic offices and global awards (Table 1). BHA's \$800 million in Title II programming supported food security interventions.⁴

As a result, BHA seeks to evaluate and record the program⁵ performance of BHA's FY21 COVID-19 response portfolio as well as evaluate specific technical or sectoral aspects of BHA's COVID-19 response across FY2020-FY2022. The purpose of these evaluations is to improve USAID's and humanitarian actor's understanding of the performance of the BHA-funded response to COVID-19 in the humanitarian space and to identify detailed and targeted future recommendations and learning from BHA's COVID-19 response, contributing to improved BHA's future programming in outbreak response in humanitarian contexts. BHA expects the

² All awards including ESF funds. Awards could commingle funds from International Disaster Assistance (IDA) funds and ESF funds, so funding for individual awards may not be wholly ESF funds.

³ https://www.usaid.gov/bha-guidelines

⁴Details on the number and sectors of awards supported will be provided at a later date. Food security interventions can include food assistance, as well as complementary activities like WASH and nutrition.

⁵ For the purposes of this evaluation, BHA uses the "program" and "programming" to refer to the set of interventions across the various sectors covered under the COVID-19 Supplemental funding

response to be assessed through two distinct yet related evaluations:

- 1. A portfolio-level evaluation of BHA's COVID-19 ESF Response (not an award-level evaluation).
- 2. An evaluation focusing on issues related to key technical themes or sectors.

These two activities will be referred to as FY21 COVID-19 Supplemental Performance Evaluation and COVID-19 Thematic Evaluation for clarity throughout this document.

	Office of Asia, Latin America, and the Caribbean	Office of Middle East, North Africa, and Europe	Office of Africa	Global Awards
Number of countries	14	9	23	N/A
Number of Awards	40	32	80	13
Funding Level	\$335,785,752	\$417,367,194	\$678,137,238	\$95,532,082

Table 1: Breakdown of COVID-19 ESF Awards by the geographic office.

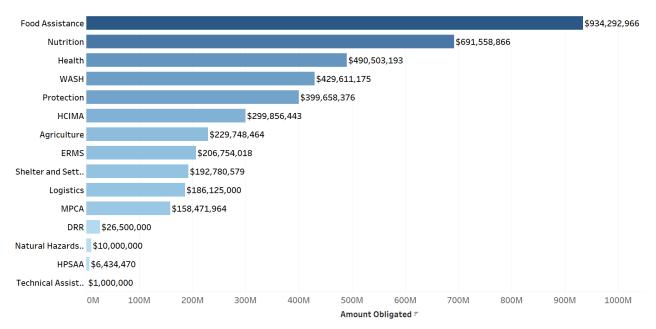


Figure 1: Total funding amount of COVID-19 ESF awards by BHA sector, including ESF and IDA commingled funds.

1.2. Evaluation Objectives

The general objective is to evaluate and record the performance of BHA's FY21 COVID-19 Supplemental response portfolio (*Performance Evaluation*) as well as evaluate specific technical or sectoral aspects of BHA's COVID-19 response (*Thematic Evaluation*) across FY2020-FY2022. The specific objectives of these evaluations are presented in sections 1.2.1 and 1.2.2 below.

1.2.1. Specific objective of the COVID-19 thematic evaluation

The specific objective of the COVID-19 thematic evaluation is to evaluate sector and intervention-specific successes, lessons learned, and recommendations from BHA's COVID-19 response to contribute to improved BHA future programming.

A. Scope of the COVID-19 Thematic Evaluation

The Thematic Evaluation will be a targeted evaluation focusing in-depth on specific sectors or cross-sector themes/topics to examine more closely the efficiency, quality, and/or effectiveness of COVID-19 supplemental assistance across the breadth of the ESF funding as it pertains to the selected sectors. These analyses will complement (and build on early findings from) other COVID-19-related reporting documents and evaluations, concentrating on specific technical areas. It is expected that key areas of focus will include: health, water, sanitation, and hygiene (WASH), protection programming, and cross-cutting themes around safe and accountable programming and inclusion. This activity will allow BHA to evaluate specific aspects of its COVID-19 response and answer research questions generated by technical and geographic specialists working on the COVID-19 response. It is anticipated that the COVID-19 Thematic Evaluation will evaluate a maximum of two themes/topics that can be either distinct or integrated activities. The exact themes/topics of focus will be determined during the co-creation process from the key areas of focus above. Applicants are encouraged to include a proposed selection process for the specific themes or topics. The evaluation should consider potential cross-sector themes including integration of multisectoral programming, remote management and technical supervision of implementing partners, successes, and challenges of specific interventions, and targeting of programming in humanitarian settings.

The Thematic Evaluation may consider all ARP-funded COVID-19 supplemental awards made between March 13, 2020, and September 30, 2022.

B. Illustrative evaluation questions for the COVID-19 Thematic Evaluation

The illustrative evaluation questions for the COVID-19 Thematic Evaluation are included below grouped by thematic area. It is expected that during the co-creation process, these will be further culled and refined to identify only a subset of key research questions that will be selected in collaboration with BHA and the evaluation team.

• Safe and Accountable Programming:

• What was done to ensure that interventions did not contribute to or increase any tensions or create any violence or backlash within households, between family members and/or community members, and between host and IDP communities?

• Gender, Age, and Social Inclusion:

- What are the best practices for integrating gender, disability, and youth inclusion within the context of COVID 19? What challenges emerged?
- In what specific ways were gender, disability, and youth included in COVID-19 programming?
- In what ways have child protection, GBV, or psychosocial support programs been adapted within the context of COVID-19? What has worked well? What challenges emerged?
- What programming models and activities worked to provide psychosocial support to frontline health and protection workers responding to an outbreak in humanitarian settings?
- How has remote programming been used to meet the needs of women, girls, and other vulnerable populations within the context of COVID-19? What has worked well and what challenges emerged?
- What are the characteristics of successful integrated emergency health/protection programming in an outbreak context?

• WASH:

- How were programs/approaches adapted based on COVID-19 epidemiological trends or key learning? What enabled or prevented adaptations, including BHA technical guidance or award policies?
- How did COVID-19 influence WASH's long-term behavior changes as compared to the norm pre-COVID?
- To what extent was joint health and WASH programming for COVID-19 effective for both prevention and treatment?
- What COVID-19 prevention practices were easy and what were hard to adapt for communities and why?
- What Non-Food Items (NFI) were useful and were not useful for COVID-19 prevention?

• Health:

- Where did the health sector funding go, and for what specific interventions? How many of our BHA COVID-19 programs were actually targeted toward populations in humanitarian settings / experiencing ongoing humanitarian needs unrelated to COVID-19 vs. how many of our BHA COVID-19 programs responded in areas where cases were identified, regardless of humanitarian need?
- How well did BHA programming maintain essential reproductive, maternal, newborn, and child health services? What specific services are most impacted and require additional support? What additional outreach strategies have been used to proactively address lower utilization and fear of visiting health facilities?
- BHA strongly encouraged partners to use integrated programming and tried to ensure a multi-sectoral response through close coordination with WASH and protection. If and how did this play out in programming on the ground?

- Are there any model approaches at the primary health care level that have been well suited (with modest resources) to timely and effective screening, isolation, and care or referral?
- How did the perception of risk affect COVID-19 programming, and what strategies did partners use in their programming to ensure that communities understood the risks associated with COVID-19 transmission and took the appropriate preventative measures?

1.2.2. Specific objective of the COVID-19 performance evaluation

The specific objective of the COVID-19 performance evaluation is to evaluate the overall performance of activities funded through BHA's FY-21 ESF COVID-19 supplemental assistance and progress toward the achievement of BHA's Objectives. This includes documenting successes, lessons learned, shortcomings, and unintended consequences.

A. Scope of the COVID-19 performance evaluation

The FY21-FY22 COVID-19 Performance Evaluation will determine the effectiveness and relevance of the BHA-funded response as implemented within the U.S. Government (USG) response and highlight key findings, high-level conclusions, and priority recommendations that can be applied in future programming. It will provide all stakeholders with information for future global responses, infectious disease responses and epidemics, and potentially meaningful lessons for programming for future funding to address COVID-19 needs. The evaluation, while global, should provide meaningful recommendations that can be applied locally across the three BHA regions: Africa (OA); Asia, Latin America, and the Caribbean (ALAC); the Middle East and North Africa, and Europe (MENAE). It is expected that the FY21 COVID-19 Performance Evaluation will build on and incorporate findings from the COVID-19 Thematic Evaluation.

The FY21 COVID-19 Performance Evaluation will consider all ARP-funded COVID-19 supplemental global awards and awards across all geographic regions (ALAC, MENAE, OA) and all sectors of programming. It will include all COVID-19 ESF awards made between October 1, 2020, and September 30, 2022. The evaluation will focus on FY21 COVID-19 Supplemental awards used to address humanitarian needs in countries with existing Disaster Declarations (DDs), countries that issued new DDs as a result of humanitarian needs exacerbated or generated by COVID-19, and in settings where BHA provided refugee food assistance. The evaluation will focus primarily on Objectives 1-3 as stated in BHA's Strategic Framework; however, evaluation of Objectives 4 and 5 can also be considered.

The stated objectives of BHA's COVID-19 Response as articulated in the Bureau for Humanitarian Assistance (BHA) Programming of the FY2021 COVID-19 Supplemental Strategic Framework were:

1. **Support and Strengthen the Public Health Response:** Mitigate and respond to the public health impacts⁶ of the COVID-19 pandemic in humanitarian settings⁷, to reduce morbidity and mortality and the transmission of the disease.

⁶ This will primarily include the health, nutrition, and WASH sectors.

⁷ Humanitarian settings: where BHA is supporting an ongoing humanitarian response and there is a FY 2021 Disaster Declaration (DD) in place, a new DD is issued, or BHA is providing refugee food assistance.

- 2. **Prevent Famine and Mitigate Severe Food Insecurity:** Alleviate severe food security impacts of the COVID-19 pandemic in humanitarian settings by investing in emergency food assistance and livelihoods interventions.
- 3. **Provide Protection:** Address the exacerbated protection challenges caused by COVID-19 and the gendered impacts of the pandemic on populations experiencing a humanitarian crisis.
- 4. **Strengthen Humanitarian Operations and Coordination**: Support global, regional, and country-based operations capacity, common services, and information management as a key part of the support of the ongoing humanitarian response to COVID-19 and its impacts.
- 5. Improve and Strengthen Humanitarian Architecture to support the scale-up of Infectious Disease Response Capacity: Mitigate current, future, or recurring waves of COVID-19 transmission and build infectious disease/outbreak and pandemic readiness within the humanitarian ecosystem.

B. Illustrative evaluation questions for the COVID-19 performance evaluation

BHA has identified four evaluation criteria relating to the overall effectiveness, relevance, efficiency, and coordination capacity of new awards created with the COVID-19 Supplemental funding. In assessing these criteria below, the evaluation team should actively integrate gender and other factors into the evaluation plan and proposed methodology. The exact evaluation questions will be condensed and refined through the co-creation process and the proposed methodology should be in line with the final research questions.

i. To evaluate the effectiveness of implementing partner performance:

- 1. To what extent did implementing partner awards contribute to BHA's Objectives including ensuring the continuity of ongoing humanitarian assistance awards? Why or why not?
- 2. To what extent did implementing partners achieve the expected results articulated in their COVID-19 supplemental awards? What were the successes and challenges to delivering food assistance, health, WASH, livelihoods, and protection interventions?

ii. To evaluate the relevance of assistance to beneficiaries

- 1. How were vulnerable groups (women, girls, child-headed households, older persons, persons with disabilities, etc.) specifically targeted by COVID-19 Supplemental awards? How and to what extent were members of affected communities, especially women, youth, older persons, and persons with disabilities consulted and engaged directly in the design, implementation, and monitoring of activities? How do beneficiaries perceive the utility and efficacy of the programming at the household or community level?
- 2. How was the design of interventions informed by a sound analysis of the COVID-19 context among target populations, the effects of mitigation measures on other aspects of well-being, and resilience capacities? Was a coherence analysis done to determine how the intervention layers on other support measures?
- 3. Were partners able to be flexible in programming to ensure that approaches were appropriate in a rapidly changing environment and as new information became available?

iii. To evaluate the efficiency of the type and delivery of assistance

1. What were the key barriers (e.g., administrative and other programming delays) to partners' capacities to respond/act in a timely manner?

iv. To evaluate the coordination capacity of implementing partners

- 1. To what extent did partners effectively coordinate their COVID-19 response activities with other actors operating in the same environment/context for a streamlined approach to the pandemic? What practices led to or hindered success?
- 2. What local, regional, and global coordination efforts or activities facilitated useful and meaningful coordination that led to the reduction of duplication or complementary activity planning?

1.3. Evaluation Methods and Data Sources

The exact methods to be used in both evaluation activities will be determined through the co-creation process and development of the Inception Report and Evaluation Plan deliverables, however, applicants should propose potential methods that would be the best place to answer evaluation questions. The evaluations should employ mixed-methods approaches that will include secondary data review of partner reports and primary data collection from partner organizations, beneficiaries, and other key stakeholders. The evaluation should include how vulnerable and marginalized groups (i.e. women, older persons, and Persons with Disabilities (PWDs)) will be strategically included in qualitative and quantitative data collection methods, and how quantitative data will be disaggregated by sex, age, and other characteristics as feasible. Given the nature of the response, across multiple sectors, countries, COVID-19 Supplemental awardees, it is not expected the activities will review each award in depth. The evaluation methodology should identify a proposed sampling strategy, including the criteria it will use to select a subset of awards that is representative of the total sample. BHA encourages the inclusion of innovative and creative methods and approaches that will allow for the evaluation of a complex multi-sectoral global response.

BHA expects the following data to be available for every non-governmental organization (NGO) award included as part of standard reporting:

- Semi-annual, annual, and final narrative reports
- Indicator data for standard BHA program monitoring indicators including baseline, the life of award target, semi-annual, annual, and final results, as applicable (based on length of award)

In addition, Third Party Monitoring (TPM) monthly monitoring reports and site visit reports may be available (in countries where BHA funds TPMs). For Public International Organization (PIO) awards, annual reports for each PIO program are anticipated, and PIOs may also be included in TPM reports. Program monitoring and reporting data is stored internally with USAID and will be shared by BHA with the evaluation team once the evaluation commences.

The evaluator may include the following illustrative quantitative and qualitative methods, however, should propose to BHA specific methods that will best address the evaluation questions and objectives.

1.3.1. Quantitative Methods

A. Quantitative Activity Monitoring Data Analysis

The evaluation team will have access to implementing partners' semi-annual, annual, and where available, final reporting data which will include output and outcome data in line with BHA's standard indicators found in <u>Annex B to BHA's Emergency Application Guidelines</u>. The evaluation will analyze the indicator data that were gathered and reported to USAID/BHA by implementing partners as part of the award - descriptive statistics to see, e.g., the average number of people served; changes in food consumption score (FCS) from baseline to endline, etc., along with relevant disaggregates by sex, age, and other characteristics as available. BHA will provide all available relevant data to the evaluation team.

B. Primary data collection

The evaluation may consider additional surveys or quantitative data collection with a representative sample of implementing partners, or beneficiaries if feasible or propose other methods, to assist in answering the evaluation questions. As standard indicator reporting data from BHA's Public International Organization (PIO) partners is limited, the evaluation should consider adjusting PIO data collection methods accordingly. The exact parameters of the survey design will be determined during the evaluation design phase and the evaluator should propose sample designs that are rigorous and representative.

1.3.2. Qualitative Methods

A. Key Informant Interviews and/or group discussions with:

- i. USAID/BHA staff involved in program strategy and management (such as activity managers, Agreement Officer's Representatives (AORs), technical focal points, risk mitigation advisors, etc.)
- ii. Implementing partner staff
- iii. Field-based coordination actors (such as cluster coordinators, and USAID Mission staff);
- iv. Beneficiary or recipient communities; and other relevant stakeholders.

Interviews with BHA staff, implementing partner staff, and participant communities will be required to gain a detailed understanding of institutional aspects of implementation, bottlenecks, and programmatic challenges from obligation through implementation. BHA activity manager(s) will coordinate closely with the evaluation team to engage internal and external stakeholders.

- **B.** Desk Review: Qualitative review of available partner semi-annual and monthly narrative reports, BHA technical guidance and strategic planning documents, photographs, and other pertinent materials concerning planning and performance of COVID-19 supplemental awards including semi-annual, annual, and final narrative reports, USAID COVID-19 Response Plans, Third Party Monitoring (TPM) monthly monitoring reports (in countries where BHA funds TPMs).
- **C. Observation/Site visits**: Pending COVID-19 travel restrictions and access constraints, the evaluation team should consider observing activities and/or interviewing beneficiaries on the ground who received assistance via COVID-19 supplemental awards. Remote methods for

observations and site visits including phone or video interviews, photos, and other technology will be considered in lieu of in-person visits where access is not possible.

D. Other Proposed Qualitative Methods. Evaluators should propose a qualitative evaluation method to develop an understanding of the efficiency, relevance, coordination, and effectiveness of services provided by BHA's programs.

1.4. Evaluation Approach

These evaluations will be designed with extensive consultation between BHA and the implementer during the co-creation process. BHA's monitoring and evaluation (M&E) advisors, sectoral and technical specialists, and award activity managers will all be involved in the co-creation process, and working closely with the implementer to refine the evaluation is expected to be a core part of these evaluations. The COVID-19 Thematic Evaluation, in particular, will have close engagement with relevant specialists from BHA (e.g. Protection specialists for protection-focused questions). BHA's implementing partners may also be consulted to understand the response, provide contextual information and provide inputs for the evaluation. The selected evaluation team will assess the evaluation questions and incorporate feedback from key stakeholders into the design and methodology as part of the co-creation process. Draft and final versions of specific deliverables will be shared with BHA leadership for feedback and review.

BHA Staff Engagement

The BHA/M&E team will provide contact information for key points of contact (both internal and external to BHA) and will conduct the initial introductions but requires the Evaluation Team to request and communicate with additional relevant contacts during fieldwork. The Evaluation Team must schedule interviews or other modes of data collection with all key stakeholders. The Evaluation Team is also responsible for making its own meeting and logistical arrangements. The BHA/M&E team will provide all available secondary documentation to the Evaluation Team at the onset of the award or as made available. The BHA/M&E team will work closely with the Evaluation team to determine the exact locations of any field-based data collection with the understanding that this may need to shift depending on accessibility at any given time.

1.5. Evaluation Audience

The evaluation results are intended to be useful, relevant, and accessible for BHA leadership and staff to inform programming decisions now or in the future. The final deliverables that result from the evaluation should be disseminated across the Bureau. The broader humanitarian community is the secondary audience and to that end, an abbreviated report should be shared with the public.

1.6. Evaluation Timeline

BHA expects an overlap in the implementation of the COVID Thematic evaluation and the FY21-22 Performance evaluation. Preliminary findings from the COVID Thematic evaluation should be used to inform the FY21-22 Performance evaluation. It is expected that the co-creation process, planning, the implementation of the Thematic and Performance Evaluation, and dissemination and sharing of results fall in the 24-month period of performance.

2. SPECIFIC DELIVERABLES

Table two presents the thematic and performance evaluations deliverables and prospective deadlines.

Deliverable	Prospective Deadline (to be adjusted during the evaluation co-creation)	
Project and Evaluation Planning		
In-briefings with USAID staff and IPs (if relevant)	Within one week of the award	
Inception report, including work plan/timeline	1 month after award	
Thematic Evaluation		
Evaluation Plan	3 months prior to data collection	
Data collection tools	2 months prior to data collection	
Written summary and presentation of interim findings for BHA staff	1 month after completion of data collection	
Evaluation Report(s) ⁸ First draft Final 	2 months after completion of data collection	
Briefer or abbreviated report with infographic highlighting key findings	2 months after completion of data collection	
Evaluation Findings Presentation for BHA	Within in 1 month after submission of final report	
Evaluation Finding Presentation/ webinar for Humanitarian Stakeholders	1 month after submission of final report	
Performance Evaluation	·	
Evaluation Plan	3 months prior to data collection	
Data collection tools	2 months prior to data collection	
Written summary and presentation of interim findings for BHA staff	1 month after completion of data collection	
Evaluation Report • First draft • Final	2 months after completion of data collection	
Abbreviated report highlighting key findings	2 months after completing of data collection	
Evaluation Report Presentation	Within 1 month after completion of report	
Evaluation Findings Presentation/webinar for Humanitarian Stakeholders	1 month after submission of final impact evaluation report	

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⁸ If two Thematic Evaluations are planned, the deliverables can be combined in a singular set of deliverables or presented as standalone documents.

3. REQUEST FOR CONCEPT NOTES

USAID and LASER seek concept notes (CNs) from multidisciplinary teams of researchers to undertake the COVID-19 evaluation work described in the previous sections. The teams should pay attention to **qualifications**, **expertise**, and **experience** in areas and roles identified in the eligibility section below.

Please note: Implementers of FY20 or FY21 COVID-19 Supplemental awards may be eligible to participate in carrying out this evaluation. However, a conflict of interest mitigation plan must be included in the concept note describing how the evaluation team and process would be separated from any elements of the organization involved in the implementation of FY21 COVID-19 Supplemental activities.

3.1. Qualifications/expertise desired

- Experience in leading evaluations, in particular, large scale evaluations of regional or global programs or portfolios
- Experience in evaluation in the humanitarian sector highly desired, and in applying evaluation methods to non-permissive environments
- Humanitarian assistance sectoral expertise in the following areas: health, WASH, protection, accessible and accountable programming, food security
- The research team is encouraged to be gender-inclusive.
- Successful applicant teams should also indicate any familiarity with:
 - i. Do No Harm approaches
 - ii. Coordination with the <u>UN Cluster approach</u> through the Interagency Standing Committee (IASC)
 - iii. Sphere standards

3.2. LASER Requirements

- The full team must register on the LASER PULSE Network using the following link https://laserpulse.org/join-lp-network/
- The research team must complete the following LASER's online training before submitting a CN:
 - <u>Gender Analysis in Research and Application (</u>30-45 min)
 - Introduction to Embedded Research Translation (60-90 min)

<u>Note</u>: only registered members have access to the training. The training can be accessed at this link <u>https://stemedhub.org/groups/laserpulse/courses</u>.

3.3. Required Documents for Submission

3.3.1. Concept note narrative

The concept note must be **no more than six (6) typed pages long**, written in English, with narrative portions prepared in MS Word or Open Office format, using Times New Roman font, size 11, or similar typeset in single line spacing, and must include the following sections:

A. **Team details:** Full name, position, affiliation, and contact information of Team Leader and all collaborators on the research team. Provide a description of the role of each proposed team member.

B. Capacity Statement:

- a. A brief description of the team's related prior research (cite prior published work) and expertise in areas of relevance to this project scope.
- b. A summary of how the researchers will conduct the work detailed in this call for CNs document. The summary should link the researchers' expertise to the proposed plan of activities
- C. **Illustrative Work Plan**, in Gantt Chart format and accompanying narrative. Though research will be co-designed with USAID and LASER, the applicants are expected to have sufficient experience to propose an illustrative Work Plan, with activities and timelines, and a cost for the activity of the work, as described in Section 2 (Specific Deliverables).

3.3.2. Detailed activity budget

Applicants must submit a detailed activity budget for a maximum of \$1.15 million for all activities described in this call for CNs, including direct and indirect costs broken down by institution in case of teams from multiple institutions using the provided template. The final budgets will be decided after the teams are selected and the project plan is finalized. Budget pages do not count towards the 6-page CN limit.

3.3.3. Full CVs

Applicants must submit full and updated Curriculum Vitaes (CVs) of the research team. Each CV must be limited to 2 pages, including academic record and most recent list of publications (2000 and later). The CV pages do not count towards the CN page limit (applicants can use the suggested 2-page CV template in Annex I).

3.3.4. Sample program evaluation or research piece

Applicants must submit one sample recent program evaluation or research piece on a topic related to this project. This document does not count towards the 6-page CN limit.

3.4. Concept Note Submission and Questions

Applicants must combine all the application documents listed in 3.3.1, 3.3.2, and 3.3.3 into one PDF file and email it to Pamela McClure at <u>awardsmanager@laserpulse.org</u> by **5:00 pm EDT**, **June 10, 2022.** Applicants can submit the sample program evaluation or research piece as a separate document.

Prospective applicants will have one week from the date of the release of this call for CN to submit any questions concerning the CN. Questions should be sent to Leulsegged Kasa at <u>lmekonen@purdue.edu</u>. Questions should be received no later than **5:00 pm EDT**, **May 31**, **2022**.

4. CONCEPT NOTES EVALUATION PROCESS AND CRITERIA

4.1. Concept note evaluation process

The submitted CNs will be evaluated by a committee of peer reviewers, jointly selected by USAID and LASER, based on the criteria listed in Table 3.

Adjectival Rating	Descriptive Statement
Excellent (5)	Outstanding Concept Note (CN) in all aspects. The CN fully meets all capacities and requirements, and convincingly demonstrates that it will address all aspects of the CN criteria. Weaknesses, if any, can be easily addressed.
Very Good (4)	CN fully meets all capacities and requirements, and demonstrates that it will likely address all aspects of the CN criteria. Weaknesses, if any, can be easily addressed.
Good (3)	CN meets all capacities and requirements and demonstrates that it will meet the CN criteria, but shows some weaknesses, yet the positives of the CN outweigh the negatives.
Fair (2)	CN does not meet all aspects of the CN capacities and requirements nor is evidence presented indicating the likelihood of successfully meeting the CN criteria. Significant weaknesses are demonstrated and clearly outweigh any strengths presented.
Poor (1)	CN does not meet the CN capacities and requirements and indicates a strong likelihood of failure to address all aspects of the criteria and the information presented.

Table 3. LASER Rating Definition for Application Evaluation Criteria.

4.2. Selection of concept notes

The evaluation committee will recommend three (3) highly ranked CNs to LASER and USAID, based on the evaluation criteria stated in Table 2. USAID will provide the final review and selection of the winning CN. **The Finalist team will be notified by the end of July 2022,** and invited to an orientation session hosted by LASER. The co-creation among the research team, LASER, and USAID will commence after the orientation meeting to develop an in-depth program description for this activity.

Annex I: Sample CV Template for Applicants (Maximum of 2 pages) NAME:

POSITION:

PROJECT ROLE & KEY QUALIFICATION:

EDUCATION:

PROFESSIONAL EXPERIENCE:

INTERNATIONAL EXPERIENCE (selected highlights):

LANGUAGES:

LEADERSHIP ACTIVITIES (selected):

SELECTED RECENT PUBLICATIONS (not more than 10):