

ANNEX 2 - REAL TIME EVALUATION TOR

Terms of Reference Real Time Evaluation of CARE International's Response to the Darfur Crisis (ver. May 15, 2004)

I. Introduction

Approximately 100,000 Sudanese refugees have flowed into eastern Chad over the past few months. Following an assessment undertaken with support from CARE Canada, CARE France was invited by UNHCR to take on refugee camp management responsibilities.

CARE-USA is leading an operation on the Sudanese side of the border and expects to become the main operational manager for the common logistics NFI operations for all of Darfur as well as a key implementation partner of WFP. The budget for Non-Food Item assistance alone for 6 months is expected to be around US\$15 million, with an operational budget of some US\$3.5 million⁷.

A breakthrough in peace talks with Chad was achieved in early March, resulting in a humanitarian ceasefire for 45 days and raising hopes for a substantial improvement in the situation (and eventual voluntary return).

II. Context of the Review

CARE France felt it timely to conduct a review of operations, management and coordination of the emergency response in Chad with a view to a) informing the current response, and b) provide valuable institutional learning. Particular features that make the RTE study strategic include:

- a) **Chad represents a small-scale yet complex emergency** that has regional implications. The involvement of CARE on the Sudanese side of the border should be a strength, provided there is a coordinated and coherent approach on both sides;
- b) To help inform CARE International during the process of developing a protocol for responding to different types of emergencies, **this study would assess the decision-making process regarding roles and responsibilities;**
- c) **The review would provide a better understanding of the experience of smaller CARE members leading an emergency response**, a chance to analyze the strengths and challenges of such an approach.
- d) **Role of the CI Secretariat and effectiveness of support** it has provided to CARE France and CARE Chad.

CARE Sudan also recognized the usefulness of increasing the scope of this RTE to include operations on the Sudanese side of the border to provide a more comprehensive perspective.

⁷ CARE Sitrep dated April 9, 2004

II. RTE Objectives and Purposes

The objectives of this Real Time Evaluation would be to assess the:

- a) Relevance, connectedness and structure of the various CARE members involved in the response, SWARMU, ERWG, relevant Country Offices in supporting attainment of emergency programme objectives;
- b) Effectiveness (including timeliness) and efficiency of the mode of implementation, and the appropriateness and application of operational guidelines and policies; and,
- c) Positioning of CARE in terms of advocacy;

The purposes of the evaluation are to provide:

- a) Identify examples of good practice;
- b) Provide timely recommendations for improving programme performance and accountability in the context of a smaller-scale operation where CERT deployment is only small-scale; and
- c) Make recommendations for improving management and coordination.

IV. Tentative Schedule

A RTE normally would consist of two to three phases. However, in this case it is envisaged that the initial phase will be limited only to telephone interviews. As demonstrated during the RTE of the Iraq crisis, lack of a field visit by evaluator(s) is(are) bound to result in substantial gaps. However, given the relatively small amount of resources currently available, this RTE will begin modestly. A field visit and reinforcement of the team during a second phase can subsequently be programmed provided additional resources in future,

- CARE-USA HQ & telephone interviews mid-late April 2004
- Draft Bulletin No. 1 (baseline) mid May 2004
- Final Bulletin No. 1 (baseline) late May 2004
- Stakeholder review of recommendations early June 2004
(Which will include a determination of how and when RTE second phase would take place)

Notes on Methodology

- a) **Approach:** methodology will be built around interviews with the relevant CARE staff, and key external stakeholders (e.g. UNHCR Head of Operations in Chad) along with a review of project documents.
- b) **Confidentiality of information** - all documents and data collected from interviews will be treated as confidential and used solely to facilitate analysis. Interviewees will not be quoted in the reports without their express permission.
- c) **Conclusions and recommendations:** conclusions and recommendations will be concise and practical in nature (no more than 8-12 pages plus annexes), emphasizing both immediate feedback to operational managers and lessons for future emergency responses. Interviewees will be given an opportunity to comment on the draft reports prior to posting on CARE

intranet sites. While the RTE Team will retain responsibility for drafting and editing the report, the CARE members leading the emergency response have the option of making a written response, which will be attached as an annex to the final report.

- d) **RTE Team Members:** the RTE will be led by Jock M. Baker in his capacity as CARE International's Coordinator for Quality, Accountability & Standards, with support from his assistant, Grace Chikoto, and – resources permitting – a consultant. The team will operate under the overall supervision of the CI Secretary General.