

Terms of Reference (ToR) on

Endline Evaluation

for the Project Titled 'Access to Rehabilitation, Psycho-Social
Support, and Resilient Livelihood for Rohingya Crisis'

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1. Background and Rationale

The Centre for Disability in Development (CDD) has been working towards an inclusive society for persons with disabilities in Bangladesh since 1996. The vision of CDD is “An inclusive world where all persons with disabilities live with dignity”; and its mission is “To contribute in creating a sustainable inclusive environment where persons with disabilities are meaningfully participating in the mainstream development process, on an equal basis with others”.

In 2017, A large influx of Rohingya refugees fled across the border into Bangladesh seeking safety and protection following the massive genocide and widespread violence in Myanmar’s Rakhaine State. Since then, Bangladesh has been hosting one of the largest refugee populations in the world. According to the operational data portal of UNHCR (2026), 1,170,978 Rohingya people are residing in various camps across Cox’s Bazar district, receiving humanitarian assistance and protection support from the Government of Bangladesh and international & National partners.¹

CDD has been implemented development and humanitarian response projects with the support of CBM Global Disability Inclusion since 2017. At present, CDD is implementing a 24-month-long development project titled “Access to Rehabilitation, Psycho-Social Support, and Resilient Livelihood for Rohingya Crisis”, supported by the New Zealand Ministry of Foreign Affairs and Trade (MFAT) and in collaboration with CBM Global Disability Inclusion. The overall objective of the project is to ensure the well-being of Rohingya refugees through inclusive rehabilitation, psychosocial support, and flood resilience livelihood; and the specific objectives of the project is to strengthen Self Help Groups (SHG) and Disability Support Committees (DSC) through capacity building on Disability Inclusion and disaster resilience livelihood. The major components of the project are – health services (Rehabilitation, eye and ear care), disability mainstreaming, inclusive mental health and psychosocial (MHPSS) support and inclusive flood response. The duration of the project is from January 2025 to December 2026.

As per the project design and requirements, CDD is planning to conduct an Endline Project Evaluation to assess the relevance, effectiveness, efficiency, impact and sustainability of the project based on the project outline and defined milestones. The evaluation will be completed by December 2026.

2. Purpose/Objectives

The purpose of the project evaluation is to assess the effectiveness and relevance of the project interventions and activities, as well as the efficiency, impact and sustainability. Its aim is to analyze the overall outcomes in key results or success of the project implementation. The evaluation will encompass a holistic understanding of how project activities and interventions lead to achieving project

¹ UNHCR (2026). *Operational Data Portal*. <https://data.unhcr.org/en/country/bgd>

goals. The study will also help to determine how disability inclusion activities may continue after the project's conclusion.

The specific objectives of the mentioned evaluation are as follows –

- To assess the overall performance, effectiveness, efficiency, relevance, impact and sustainability of the project based on the Twin-track Approach of CBM Disability Inclusion² and the DAC evaluation criteria of the Organisation for Economic Co-operation and Development (OECD)³.
- To evaluate the results that lead to the overall project goal.
- To identify the key impact areas of the project interventions and activities.
- To provide strategic and localized recommendations to strengthen future implementation and initiatives.
- To assess the lessons learned and best practices to inform future program design that can be incorporated into standard operational procedures of future programs.
- To identify the changes, gaps, good practices, lessons learned and present and future requirements of persons with disabilities for mainstreaming, as well as leaving behind people in line with the evaluation process and IASC's humanitarian guideline for persons with disabilities⁴.
- To collect stories of change and impact to support communications and illustration of project effectiveness.
- To develop a project design for 2027 and beyond, informed by evaluation findings, lessons learned and evidence-based recommendations to strengthen relevance, effectiveness, sustainability and impact of future projects.

3. Scope

The evaluation needs to be conducted within the sampling target areas of Rohingya camps (FDMN) specified as Camp 8E, Camp 8W; and 2 unions (host) included Rajapalong and Ratnapalong unions at Ukhiya upazila in Cox's Bazar District. The evaluation team will collect primary data from project participants (Persons with Disabilities and their household members), Self-Help Group (SHG) members, Disability Support Committee (DSC) Members, community leaders, civil society personnel, public representatives, government officials, national and international NGO officials using qualitative and quantitative evaluation/research methodology. The data collection tools and techniques are survey, key informant interview (KII), focus group discussion (FGD), observation, lesson learning workshop and case study. The quantitative data collection tool will be a survey questionnaire and the qualitative data collection checklist will be semi-structured. The collected data will be analyzed using statistical tools and interpretation

² CBM Global Disability Inclusion (2020). *Twin Track Approach*. <https://hhot.cbm.org/en/card/twin-track-approach>

³ OECD (2019). *Evaluation Criteria: Adapted Definitions and Principles for Use*. [https://one.oecd.org/document/DCD/DAC\(2019\)58/FINAL/en/pdf](https://one.oecd.org/document/DCD/DAC(2019)58/FINAL/en/pdf)

⁴ IASC (July 2019). *Guidelines: Inclusion of Persons with Disabilities in Humanitarian Action*. <https://surl.li/fjvpuh>

methodology, and the report will be generated in English and shared with CDD and CBMG for further strategic decisions. The team will carry out the following activities during the evaluation process –

- Literature review from secondary sources relevant to the project outline.
- Define the study methodology with data collection and analysis tools and techniques for the standard evaluation process.
- Develop an evaluation questionnaire and checklist, and organize an orientation workshop on data collection tools including data entry, data cleaning, data coding and analysis. Field test should be conducted before finalizing the data collection tools. Data collection tools will be in both Bangla and English.
- Preserve and deliver the project data, including raw and clean data, in soft copy.
- Prepare and submit a draft and report
- Incorporate feedback and finalize the report.

The program team and donor officials will review the draft report and the Consultant/Evaluator will incorporate necessary feedback after submitting the draft report, and then submit the final report.

4. Methodology

The endline evaluation will adopt a mixed-methods design integrating both quantitative and qualitative approaches. This enables comprehensive measurement of changes, triangulation of findings and a deeper understanding of project results. The evaluation team will collect data and information from secondary sources using desk and literature review for designing the evaluation process. The key stakeholders of the evaluation process are – different kind of Persons with disabilities including underrepresented groups and their household members, Self-Help Group (SHG) members, Organization of Persons with Disability (OPD) members, Disability Support Committee (DSC) Members, community leaders, civil society personnel, public representatives, government officials, and national and international NGO officials who are working for persons with disability inclusion. The endline evaluation will be conducted using both qualitative and quantitative study methodologies. The key tools and techniques of the study methodology are as below:

- **Social Survey:** Quantitative data will be collected using survey methods following closed-ended and open-ended questionnaires. Simple random sampling will be introduced with a statistical formula for selecting survey participants from the project area who get service under the mentioned project and represent the community. The survey participants will be segregated based on age, gender and types of persons with disability status-related criteria. The sample size will be selected using random sampling based on statistical standards (the Margin of error 10% and confidence level 90%).

- **Focus Group Discussion (FGD):** FGDs will be conducted with the project participants to determine the effectiveness, impact and sustainability of the project. A semi-structured checklist should be developed as discussion topics. Standard procedures should be maintained during the discussions, analysis and reporting. The evaluation team will also ensure the participation of people of all ages, genders, and people with disabilities in every discussion.
- **Key Informant Interview (KII):** The evaluation team will conduct key informant interview with those who have firsthand knowledge of the project's activities, interventions and persons with disabilities' inclusion in project areas. The respondents of the KII are Self-Help Group (SHG) members, Disability Support Committee (DSC) Members, community leaders, civil society personnel, public representatives, government officials, national and international NGO officials and activists.
- **Observation:** The evaluator and the team will observe the community people, especially project participants, related to output, outcome and impact of project interventions and activities. The consultant/Evaluation will adopt the observation method conducting the endline evaluation.
- **Lesson Learning Workshop:** A lesson learning workshop will be organized with the project stakeholders, consisting of a total of 10 participants, including 5 project participants, to validate the evaluation findings. The evaluation team will develop an outline of the lesson learning workshop during the inception phase of the evaluation.

5. Deliverables

The deliverables/report are as follows:

- Plan of outcome of the endline evaluation with methodology, including suggested sample size and key questionnaire and discussion checklist.
- Endline evaluation report in English:
 - 1 executive summary (1 page)
 - 1 narrative report (max 10 pages): Which will also cover-
- Evaluation against the project's logical framework and indicators
- Evaluation criteria (effectiveness, efficiency, relevance, impact, sustainability, coherence, connectedness).
- Learning and recommendation framework for future programming.
- Explicit reference to data sources, baseline data, and triangulation methods.
- Ownership and use of findings (who will use results, how will learning be shared?)
- Conclusion and recommendations including (potentially) for next phase of MFAT/CBMNZ investment and support into 2027 and beyond (3 pages)
- Four (04) case stories of key interventions from the project (As annexure)
- On-site lesson learning cum validation Workshop and workshop report (3 pages)

(A half-day-long workshop will be conducted in Ukhiya with 14 participants including 1-2 participants from each intervention category considering different types of disabilities and relevant key stakeholders. The workshop will be organized at a standard venue, ensuring all necessary logistical arrangements, including the venue, materials, and refreshments. The session will be facilitated by the Evaluation/ Consultant Team, and conveyance support for the project participant representatives will be covered under this activity. All workshop-related costs will be borne by the consultant team.)

- Qualitative and quantitative data, and case stories will be submitted as an annexure of the report.
- The evaluation report should be written in Verdana font and the font size is 11.

6. Timeframe and Duration

The duration of the evaluation, including the timeline of every phase, is as follows

Phase	Tasks	Responsible	Days No.	Dateline
Phase 1: Inception Report	Develop methodology including sampling, questionnaire, checklist, ethical considerations and Evaluation procedures standard.	Evaluation TEAM	03	10 th to 12 th Nov 2026
Phase 2: Review and feedback	CDD and CBM officials review the inception report	CDD and CBM Officials	03	15 th to 17 th Nov 2026
Phase 3: Data Collection	Field data collection, cleaning, and analysis	Evaluation TEAM	5	16 th to 22 th Nov 2026
Phase 4: Reporting	Report writing and sharing the 1 st Draft Report with CDD	Evaluation TEAM	3	By 25 th Nov 2026
Phase 5: Reporting	Validation Workshop	Evaluation TEAM	1	By 29 th Nov 2026
Phase 5: Reporting	Share report incorporating potential design for MFAT/CBMNZ phase 8 (2 nd draft)	Evaluation TEAM	3	By 2 nd Dec 2026
Phase 6: Reporting	Feedback (from CBMG international colleagues) incorporated into the report	CBM Officials	8	By 10 th Dec 2026
Phase 7: Reporting	Share final report	Evaluation TEAM	3	By 15 th Dec 2026

7. Limitations

The endline evaluation may need to change during the period given the potential for political unrest. The survey team may face challenges in communicating with individuals with speech and hearing impairments and involving individuals with severe disabilities in the assessment process.

8. Team Composition and Qualification

A multidisciplinary team with relevant expertise and local contextual knowledge in humanitarian and Rohingya response project evaluation will be deployed to ensure the quality, integrity and inclusiveness of the endline evaluation process. The following personnel will be involved:

Required Lead Consultant/Evaluator Profile

- Comprehensive knowledge and experience in development and humanitarian project evaluation with practical experience of at least 5 years.
- The consultant must have experience in Disability Inclusion & Gender Inclusion-related project evaluation and understanding.
- Understanding of baseline, midline, endline evaluation, quantitative and qualitative research methodology and tools, statistical analysis with relevant software as well as disability inclusion.
- The Consultant/Expert should have all legal papers, e.g., valid trade license, latest audit report, TIN/BIN etc.
- Proven experience in advanced computer skills (SPSS, STATA, Microsoft Office and Power BI), Excellent writing skills and Fluency in English required.

Lead Data Enumerator (1 person):

- A graduate (preferably in Social Sciences, Development Studies, or a related field). Person with disability will get priority.
- At least 2–3 years of experience in Monitoring, Evaluation, Accountability, and Learning (MEAL) or related data collection roles.
- Responsible for field team coordination, quality assurance, troubleshooting, and ensuring timely completion of household surveys.

Enumerators (8–10 persons):

- Proficient in local languages (Bangla, Chittagonian, and preferably Rohingya dialect).
- Persons with disabilities should be given priority, and gender balance should be maintained in the enumerator team.
- Prior experience in qualitative and quantitative data collection within humanitarian or development settings, especially in Rohingya camps or host communities.
- Trained in gender-sensitive and inclusive interviewing techniques.
- Responsible for conducting household surveys with accuracy, empathy, and adherence to ethical standards.

FGD Facilitators (2–4 persons):

- Skilled in qualitative research methodologies, ethnography, community facilitation, and participatory engagement.
- One male and one female facilitator per FGD group is preferred to ensure gender balance and culturally appropriate interactions.
- Capable of leading discussions that allow diverse voices to emerge while capturing meaningful insights.

Note Takers / Transcribers:

- Responsible for documenting key discussion points, quotes, and non-verbal observations during FGDs.
- Must be detail-oriented, discreet, and capable of transcribing in Bangla or Rohingya, with English translation where needed

9. Ethical Considerations

The End Line Evaluation will be conducted with a strong emphasis on ethical research standards to protect the dignity, rights, and safety of all participants. The evaluation team/consultant will follow the standard ethical considerations of CDD and CBM. The following principles and safeguards must be strictly upheld throughout the process:

Compliance with Safeguarding and PSEAH policies:

The consultant will ensure that all evaluation activities involving children and adults-at-risk are conducted in accordance with CDD's safeguarding policy. Ethical considerations, appropriate safeguarding measures and safe communication practices must be integrated throughout the entire evaluation process to protect the safety, dignity, rights and well-being of all participants.

Informed Consent:

Study participants should be informed consent before captured photographs, videographs and conducting interviews. Participants with disabilities will provide informed consent through their legal guardian based on CDD's prescribed forms following CDD 'Safeguarding Children and Adults-at-risk Policy'. The Consultant/s must sign the 'CDD Safeguarding-PSEAH Declaration of Consent' and abide by the terms and conditions thereof during the agreement.

Data Protection Standard:

The Consultant or Study team will keep all evaluation-related data and will not disclose it to any person or organization except CDD and CBM. They will also ensure that no data is uploaded to any artificial intelligence website or media for any purpose including analysis. Citations have to be provided using secondary data sources and included as footnotes or in a bibliography following American Psychological Association (APA) Style.

Gender and Disability Inclusion:

Special measures will be taken to ensure the meaningful participation of women, persons with disabilities, and other marginalized groups. These measures include

forming gender-balanced enumerator teams, applying culturally appropriate engagement methods and using accessible tools or locations for FGDs and interviews. The rights of persons with disabilities must be respected and proper etiquette must be maintained at all times.

Respect and Cultural Sensitivity:

All interactions with community members must be conducted respectfully, using appropriate language and behaviour that aligns with local customs and sensitivities, particularly in Rohingya contexts.

Safeguarding:

Child and adult-at-risk safeguarding aspects and ethics will be considered in evaluation questions, methodologies and during the entire evaluation process (where children and vulnerable adults are involved)

Ethics during Analysis:

The Consultant/Evaluation Team will analyze taking into account the ethical issues involved after collecting data. They will consider the data's quality and integrity, its purpose, and its sharing methods. Only data that is going to be used will be collected, and it should be of the highest possible quality—through good practice in recording, transcription, and translation. It will be shared in a way that promotes fairness and social justice and enables others to use it.

Intellectual Property:

All intellectual property of the evaluation shall belong to CDD and CBMG.

10. Location of the Evaluation

The study area will be Camp 8E, Camp 8W, and Rajapalong and Ratnapalong Unions in Ukhiya Upazila, Cox's Bazar District (Host Community and Rohingya Community).

11. Payment Terms and Conditions

Payment to the External Evaluator/Consultant Team will be made based on the satisfactory completion of deliverables, as outlined in this ToR. The payment structure and conditions are as follows:

a. Payment schedule

As relevant, specify invoicing/payment moments, possibly against specific deliverables within the period of the Consultancy

- 1st Payment: 30% of the contract value will be paid when the contract is signed and upon submission of the inception report with the outline of the evaluation methodology.
- 2nd Payment: 30% of the contract value will be paid based on submission and acceptance of the draft evaluation report
- Final Payment: 40% of the contract value will be paid based on the submission and acceptance of the final evaluation report.
- Total amount includes all costs for conducting the evaluation, consolidated consultant fee, transport cost (local/international), logistics,

accommodation, food, venue & other related costs of validation workshop and visa fee (if required).

- The payment will be made through an account payee cheque/ EFT transfer. (Bank name, Account name, number, type, routing number, and branch name are required for EFT transfer).
- VAT and TAX will be deducted at source as per applicable Bangladesh government rules. VAT Registration Certificate, TIN or BIN and Trade License (if applicable) must be submitted before the agreement is signed

b. Termination Clause:

If the consultant/Evaluator fails to deliver within the agreed timeframe or does not meet the required quality standards, CDD reserves the right to withhold payment or terminate the contract.

12. Application Procedure

Interested firms/individual consultant should submit their Expression of Interest (EoI) by **03 November 2026** through the email: **hr.cox.cdd@gmail.com**. In the subject line, please mention **Endline Project Evaluation**.

The application should include:

1. Technical proposal which contains a cover letter, curriculum vitae, etc.
2. Financial proposal
3. Required documents: Valid Trade license, TIN Certificate with Proof of up-to-date income tax filing, BIN Certificate, VAT Registration (if available), Bank solvency Certificate, previous working experience with photocopy of work orders, and profile of the business organization.

13. Contact Address

Centre for Disability in Development (CDD)

Program Office: Mohila College Road, Ukhiya, Cox's Bazar,

Email: irrp.cdd@gmail.com

Head Office: A-18/6, Genda, Savar, Dhaka-1340,