

TERMS OF REFERENCE

Final project evaluation

Project title

**Integrated Humanitarian Response for Conflict Affected Ukrainians
and Third Country Nationals in Ukraine, Poland, Romania, and
Moldova**

Kyiv, 01/10/2025

Diakonie Katastrophenhilfe is looking for a consultancy/ evaluation team to carry out a Final project evaluation of the project *Integrated Humanitarian Response for Conflict Affected Ukrainians and Third Country Nationals in Ukraine, Poland, Romania, and Moldova*. These ToR provide a comprehensive overview of the scope of work, coverage and deliverables for the final project evaluation. The project evaluation is foreseen to take place between October 2025 and February 2026. **Diakonie Katastrophenhilfe is looking for a consultant company/ evaluation team that is able to conduct such a scope of work.**

I. HUMANITARIAN CONTEXT in the project areas

Over 8 million persons had to leave Ukraine since February 2022. Diakonie Katastrophenhilfe therefore expanded its Ukraine programme to **neighbouring countries** such as Poland, Romania and Moldova. In view of the ongoing humanitarian crisis, the partner organisations have been increasingly active in the field of humanitarian assistance since February 2022 and have been able to gain further experience, in particular in the light of a new security situation. In order to strengthen the capacities further, a comprehensive technical and operational support mechanism has been established by Diakonie Katastrophenhilfe. This involves an intensive on-site presence of Diakonie Katastrophenhilfe experts in the respective countries and continuous administrative support and programmatic support, particularly in the areas of CVA, MHPSS, Protection, Safeguarding and Accountability.

II. INTRODUCTION

1.1 The organisation

Diakonie Katastrophenhilfe is the humanitarian assistance agency of the Protestant Churches in Germany with headquarters in Berlin, which renders humanitarian aid in 39 countries across the world. DKH supports people who are affected by natural disasters, war and displacement and who are not able to cope on their own in the emergency situation they find themselves in. DKH's work is guided by the Humanitarian Principles and the Core Humanitarian Standards (CHS). DKH focuses on locally-led responses by working through a global network of partner organisations.

Fostering localised humanitarian action and an equal partnership approach lies at the very core of DKH work. The assistance DKH provides is designed to suit the local conditions and is integrated in the economic, social, and political context of a specific country or region.

In Eastern Europe, DKH anchors on building and enhancing local capacity in conformity with the "Grand Bargain" adopted by the Humanitarian Summit 2016 in Istanbul. DKH collaborates with local, faith-based, civil, national and international partner organisations to provide emergency aid, relief, recovery, transitional development assistance and disaster risk reduction. DKH has an office in Kyiv (est. in 2023) and collaborates with a dozen of local and international NGOs in delivering humanitarian aid in Ukraine and neighbouring countries.

1.2 The project

The Project *Integrated Humanitarian Response for Conflict Affected Ukrainians and Third Country Nationals in Ukraine, Poland, Romania, and Moldova* is a three-year multimillion humanitarian assistance Project that started in July 2023. It has been implemented by Diakonie

Katastrophenhilfe (DKH) in collaboration with six local and one international NGOs. It was designed by DKH Berlin Office in late 2022-early 2023 as a one-year 10 million Euro humanitarian assistance project to be jointly funded by the GFFO and DKH. Later, GFFO agreed to expand project implementation period and increase its funding level. The project will to be completed by July 2026.

From the start of the project until early 2025, DKH worked with six local (3 in Ukraine and 3 outside) and one international NGO to implement the project in Ukraine, Poland, Romania, and Moldova. However, at the beginning of 2025, the strategic focus shifted towards localising activities and broader involvement of Ukrainian organisations. This decision was driven by both a shift in humanitarian needs, which are now primarily concentrated in Ukraine, and the strengthening of local partners' capacity to effectively implement programs. As a result, cooperation with two partners in Poland and one in Romania was discontinued, and today the project is being implemented by six organizations from Ukraine and one partner from Moldova. The regional structure of Diakonie Katastrophenhilfe plays a leading role in the project, namely, provides support to partners in UKR, POL, ROM and MDA, coordinates the project, and consolidates reporting, in full compliance with donor requirements. In turn, each partner organization is responsible for implementation, local coordination (through cluster meetings and other coordination forums), and real-time monitoring of project progress and risks.

The project is multi-sectorial but focuses primarily on basic needs, food security, protection (incl. mine action, GBV, MHPSS and legal assistance), shelter and non food items as well as WASH. . Capacity sharing is mainstreamed across the project.

In Ukraine, Diakonie Katastrophenhilfe collaborates with its sister ACT Alliance organisation DanChurchAid (DCA), which in turn closely collaborates with the local partner EAST SOS. The close cooperation between DCA and EAST SOS as part of this project has several objectives: On the one hand, the reach of EAST SOS is to be used to spread the risk education and safe messaging component as far as possible. Furthermore, the capacity of our national partner EAST SOS in the area of Explosive Ordnance Risk Education (EORE) / safe messaging is to be expanded and strengthened. Another partner in Ukraine, Child Wellbeing Fund (CWBF), is responsible for acute humanitarian needs of the target group and the corresponding priorities of this project component.

The **Child Wellbeing Fund (CWBF)**, as the main partner of the GFFO and DKH project, is implementing a large-scale voucher project combining psychosocial support and food security assistance to meet the acute needs of IDPs and conflict-affected populations in Ukraine. **CWBF** mostly focuses on voucher assistance to IDPs in Kyiv and Kyiv region. Another local partner **EAST SOS** works in the east and south of the country (details below). **EAST SOS** provides food and hygiene items to conflict-affected people and IDPs near and in conflict areas, especially in the so-called "buffer zone", and actively provides psychosocial support and evacuation of the most vulnerable people with limited mobility. At the same time, humanitarian needs in the areas of food security, MHPSS and winterization assistance are being addressed. The third partner in Ukraine, **DanChurchAid (DCA)**, focuses on the vast amount of Explosive Ordnance (EO) contamination by anti-personnel and anti-tank landmines across the country. The **DCA** is working to raise awareness of the dangers of explosive ordnance and how to behave safely to protect yourself and your family.

The well-established cooperation of our foreign partners (Diakonie Katastrophenhilfe (DP) in Poland, Federation of European Social Employers (FONSS) in Romania and Alliance of Active NGOs in the field of Child and Family Social Protection (APSCF) in Moldova) with local authorities and other agencies provided DKH in Ukraine with a good background for cooperation in the field of social and emergency situations. For example, in Poland, Diakonie Poland (DP) and Nomada provided funding for a migration policy development process involving key actors in the city and various experts on the topic.

NOMADA worked to support emergency apartment accommodations. It also uses a referral mechanism to other centers, institutions or shelters and works closely with local authorities. The **Nomada Association (POL)** focused on counseling migrants and refugees, implemented

measures on shelter (repair and shelter provision) and protection (counseling, legal advice, cash for protection, training on migration law and anti-discrimination).

Cooperation with **Diakonia Poland** has been ongoing since 2010 and focused on providing housing (refugee housing repairs) and supporting basic needs through the CVA (Cash Voucher and Winterization Assistance) program, which helped refugees from Ukraine in Poland. To increase efficiency, **DP** has partnered with Habitat Poland to synchronize data via the UN RAIS database, reducing duplicate entries. Over 60% of registered refugees from Ukraine in Poland are located in five destination regions, and assistance was provided in these regions accordingly.

FONSS (ROM) contributed to the effectiveness of integrated interventions at the local level, especially in activities related to school inclusion, inclusion of adults in the labour market and access to public services in Romania.

As mentioned above, cooperation with **APSCF**, based in Moldova, was continued. The organization continued their coordination with local authorities and other humanitarian organizations. Currently, **APSCF** oversees the activities of its 62 members and brings together members working in similar areas to enhance coordination and avoid duplication. While at the beginning of the emergency, **APSCF**'s focus was on meeting the basic needs of refugees, now this focus has shifted to protecting the most vulnerable and at-risk groups, the integration of children into the education system, and the socio-economic integration of adults. **APSCF** implements projects under their refugee response program focusing on Protection, MHPSS and Livelihoods.

As mentioned above, as a result of the end of the contract with **FONSS**, **NOMADA** and **Diakonia Poland** and the localization of the program, the focus of activities was changed from Poland and Romania to Ukraine and Moldova. This, in turn, contributed to the reorientation of the main activities and the change of priorities, according to which it was decided that activities in Romania and Poland (3 partners) were ended, and to further localize the project in Ukraine. As a result, the implementation is now carried out by Ukrainian organizations, including **Caritas Donetsk**, **Vilnyi Vybir** and **PARD**, whose involvement reflects the strategic focus on strengthening local capacity and responding to the current needs inside Ukraine.

The activities of all new partners include the provision of psychosocial support services, informal education (including preparation for school) to children from IDP and DLC families, taking into account age and gender characteristics. All 3 partners aim to support refugee children with psychological and social support, contribute to their rapid recovery, with the strategic goal of promoting the development of a healthy society.

1.3 Project details

The Project has a joint Logical Framework (Logframe) that is mandatory for DKH and its Partners. The Logframe sets out four joint outcomes linked to 13 outputs and 39 activities. Indicators are formulated at both outcome and output levels – there are eight outcome-level performance indicators and 26 output-level performance indicators. DKH Partners submit online progress reports on a monthly basis and more detailed online reports in ActivityInfo on a quarterly basis.

The project's outcomes are defined as follows:

- Outcome 1. Essential survival needs of most vulnerable conflict affected people are met through shelter and basic needs assistance. (Indicator: % of surveyed targeted households satisfied with the shelter or basic needs assistant they received)
- Outcome 2. Children, women and other vulnerable persons have improved protection status through mental health and psychosocial support, child protection, access to specialized protection services and humanitarian mine action. (Indicator: % of surveyed persons benefiting from structured interventions report the protection

services helped them solve their problems or reduce their protection risks and vulnerabilities)

- Outcome 3. Socioeconomic integration of refugees is fostered through facilitating access to livelihoods and skills development opportunities. (Indicator: % of surveyed households reporting the support provided has improved their socioeconomic integration in the country)
- Outcome 4. Local and national actors responding to the Ukraine crisis are technically equipped to conduct effective, accountable and principled humanitarian action. (Indicator: % of surveyed participants reporting increased professional knowledge through the capacity sharing activities)

The detailed Logframe will be shared with the evaluation team once contracted.

The table below provides a general overview of the interventions under this project, as well as its actors and sector activities across the region.

Regions and Country (annex)										
Country	Province / District	Food Security	Livelihood	MHP SS	Shelter	Mine Action	Protection	Basic Needs	Capacity Strengthening	Partner
Ukraine	Kyiv and Kyiv Oblasts	X	X	X						CWBF
Ukraine	Oblasts: Kharkiv, Donetsk, Zaporizhzhia, Cherson, Cherkasy, Chernivtsi, Khmelnytskyi, Vinnytsia, Ternopil, Ivano-Frankivsk, Lviv, Zakarpattia, Kropyvnytskyi (Kirovohrad)				X	X	X			EAST SOS
Ukraine	Oblasts: Kyiv, Mykolaiv, Dnipro, Kharkiv					X				DCA
Moldova	National Coverage (online and offline activities) including: ● North (Drochi, Briceni, ...)		X				X		X	APSCF

	<ul style="list-style-type: none"> Edinet district s), Centre (Orhei, Strase ni, Unghe ni, Hinces ti district s) South (Stefan Voda, Cause ni district s) 									
Organizations that have joined the project since March 2025										
<i>Ukraine</i>	<i>Oblasts: Dnipro</i>	X		X						<i>Caritas Donetsk</i>
<i>Ukraine</i>	<i>Oblasts: Vinnytsia</i>			X						<i>PARD</i>
<i>Ukraine</i>	<i>Oblasts: Kyiv, Kyiv, Ivano-Frankivsk, Lviv</i>			X						<i>Vilnyi Vybiri</i>
Organizations that have terminated cooperation with DKH since March 2025										
<i>Poland</i>	<i>Wroclaw, Lower Silesia</i>			X	X		X		X	<i>Nomada</i>
<i>Poland</i>	<i>Country-wide</i>		X		X			X		<i>Diakonie Poland</i>
<i>Romania</i>	<i>North Eastern Region, Counties: Iasi, Suceava, Bacau, Eastern Region, County Galati, Bucharest municipality</i>		X		X		X	X	X	<i>FONSS</i>

In countries where project activities have already been completed, a final evaluation should be conducted to document and analyze key achievements, results, and impacts, as well as to identify challenges and the overall effectiveness of interventions. For countries and partners where activities are still ongoing, a formative evaluation should be conducted, focusing on analyzing progress made, assessing the quality and effectiveness of current processes, and formulating specific recommendations that will be used to improve the design of future project phases.

III. OBJECTIVES OF THE FINAL PROJECT EVALUATION

4.2 Final project evaluation (FPE)

4.2.1 Overall objectives of the FPE and geographical scope (Ukraine, Romania, Poland and Moldova)

The final evaluation will be conducted towards the end of the project implementation period in all target countries. It will assess all project components and activities implemented up to the time of the evaluation, covering the entire duration of implementation to date.

The main purpose of this final evaluation is to assess the programmatic progress and performance of the above-described intervention from the point of view of relevance, coherence, effectiveness, organizational efficiency and sustainability. The evaluation will address key questions based on the results and evidence available at the time of the assessment. Its findings will contribute to learning and support future programming and decision-making, especially in the countries where a potential future project will be implemented (Ukraine and Moldova). The FPE should therefore draft forward-looking recommendations to form the design of the next phase.

The overall objective of the FPE is

- i. To demonstrate how the project achieved its intended outcomes and determine what changes it brought to the targeted households and communities
- ii. To look at the relevance, effectiveness, efficiency, and appropriateness of the intervention in comparison to performance and progress indicators and assess whether access, safe and dignified humanitarian assistance through avoidance of causing harm, preventive and minimization of unintended negative effects was provided by all project partners.
- iii. To establish how well protection, gender and inclusion were mainstreamed and if the project substantially contributed to locally-led humanitarian responses
- iv. To identify key lessons learned, conclusions and related recommendations to inform decision makers on how to improve current and future interventions
- v. To identify strategies for replication and up-scaling of the project's best practices identified during the project implementation
- vi. To provide effective recommendations on the activities of DKH and its partners in the humanitarian response and the quality of coordination between them in Ukraine, Poland, Romania and Moldova (distinguishing between completed and ongoing projects)

The final evaluation should result in a comparative summary report containing conclusions for all countries, supplemented by clear sections devoted to individual countries to ensure a clear distinction between retrospective and prospective analysis.

The report should also include a special section with forward-looking recommendations, in particular to inform the design of a follow-up project. This also means using different analytical approaches depending on the status of program implementation in each country.

4.2.2 Key evaluation questions:

The FPE must follow the DAC evaluation criteria, with the detailed list of guiding questions. The focus and structure of these questions may be adjusted in the course of the evaluation upon agreement of both parties. For countries where the program ended early, the evaluation will concentrate on assessing relevance, effectiveness, efficiency, sustainability, and drawing key lessons from the completed implementation. For countries where the program is still ongoing, the evaluation will focus on progress achieved to date, identifying enabling and constraining factors, and formulating forward-looking recommendations to strengthen current implementation and inform the design of the next phase. The detailed list of questions is defined below.

Relevance

- To what extent are the chosen assistance modalities appropriate to meet the needs of different groups of project beneficiaries in different geographical areas (countries and their regions)? Especially with the MHPSS component (baseline/endline assessments or validated mental-health scales).
- How effectively have protection, gender, and inclusion principles been integrated across all project components to ensure meaningful access, safety, and dignity for diverse groups (women, men, children, persons with disabilities, minorities)? Which specific barriers remain, and what targeted adjustments are recommended?
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- How have the risks and assumptions made at project design evolved and how have they impacted the project implementation and progress towards achievement of the objectives?
- Identify potential links for a Nexus Chapeau approach, exploring existing leads for integrating social cohesion components in the current project

Appropriateness

- Are there appropriate, functioning systems of accountability (participation, information sharing, feedback and complaints) that beneficiaries are using and are feedback and complaints from beneficiaries received used to shape the response?
- Is new learning being captured and acted upon during implementation? If yes, how and what? If no, why not?
- Were markets able to deliver affordable food and other essential items?
- Were markets safely accessible to all beneficiary groups?

Effectiveness

- How strong is the perceived link between the evaluated Project activities and any significant improvements (if occurred) in protection (including, where appropriate, safety, living conditions, and livelihood) of aid beneficiaries?
- To what extent has the program activities contributed to the reduction of trauma-related symptoms (e.g., anxiety, dissociation, PTSD) and improvement of overall psychological well-being of the vulnerable beneficiaries?
- Was the collaboration between DKH and the project partners designed in a complementary and synergetic way? Based on the findings of this evaluation: what recommendations for the set-up of the next project consortia should be taken into consideration?
- To which extent are protection, gender and inclusion principles incorporated in all project activities and promoting meaningful access, safety and dignity in humanitarian aid and what can be improved?
- What are the strengths and successes in project implementation (management, staff, coordination, mutual learning and capacity strengthening and reporting)?
- What are the weaknesses and challenges in project implementation (management,

staff capacity, project set up, coordination and reporting)?

Efficiency

- Which of the project's proposed solutions demonstrated the highest cost-effectiveness—measured by cost per key output or outcome compared to sector or country benchmarks—and showed credible signs of financial, institutional, and community sustainability beyond the project period? What contextual factors (e.g., local ownership, maintenance capacity, policy alignment) contributed to these results?
- What is the cost of one key result or outcome (e.g., one beneficiary receiving psychosocial support), and how does this compare to sector or national benchmarks? What factors, such as partnership models or delivery mechanisms, have had the greatest impact on the cost-effectiveness achieved to date?

Impact

- What was the immediate and long-term impact of the project interventions on the well-being, security, social cohesion, and self-reliance of beneficiaries? How are these changes perceived by the beneficiaries themselves?
- Are there unintended positive and/or negative effects which have occurred by implementing the project?
- In what ways has the project contributed to sustained improvements in mental health and psychosocial well-being of the target population, including any unexpected positive or negative outcomes (use participatory methods such as outcome harvesting or most-significant-change to identify these effects)?
- What specific changes were observed (e.g., reduced symptoms of distress, increased coping mechanisms, improved social functioning)?

Sustainability and connectedness

- How has the project contributed to the resilience of beneficiaries?
- Do “best practices” emerge from the activities, which of them can be used as a continuation of future projects?
- What existing data on social cohesion has been taken into account or collected as part of the project, and how can it be used to ensure long-term programmatic coherence in line with Nexus Chapeau goals? Are there any pre-conditions for further integration of these results into the broader Nexus approach (humanitarian - development - peacebuilding)?

4.2.3 Data Protection and Ethics

All evaluations must be credible and free from bias; they must respect dignity and diversity and protect stakeholders' rights and interests. Evaluators must ensure confidentiality and informant anonymity, adhering to professional standards, ethical guidelines, and moral principles in line with the 'do no harm' principle. The approach of framework contractors to observe these obligations must be explicitly addressed in the specific Organisation and Methodology, and implemented by the evaluation team throughout the evaluation, including during dissemination of results.

All data collection must be conducted in accordance with the requirements for obtaining informed consent, ensuring confidentiality, and ensuring the safety and privacy of participants. Evaluators must comply with the GDPR and relevant data protection laws in all countries of operation.

4.2.4 Deliverables and Schedule

- **Inception report** that sets out the conceptual framework to be used in the evaluation, stating the key questions for the FPE and methodology to assess them (incl. an

evaluation matrix), including information on data sources and collection and if applicable, sampling, and key indicators. The inception report will also include a timeline for the FPE and drafts of data collection instruments.

- **Presentation of first draft:** presentation of the first draft report, debriefing meeting with Diakonie Katastrophenhilfe and partners to discuss and give feedback on the draft report.
- **End of project evaluation report** taking feedback of Diakonie Katastrophenhilfe and partners into consideration. Their report shall not exceed 30 pages (excluding annexes).

Content:

- Executive Summary
- Introduction
- Methodology, including sampling and limitations
- Analysis and findings of the evaluation (structured by country, regions, type of activities).
- Conclusions for each of the end of project evaluation objectives
- Recommendations for future projects
- Annexes:
- ToR
- Relevant maps and photographs of the evaluation areas where necessary
- Bibliography of consulted secondary sources
- Finalized data collection tools
- List of interviewees with accompanying informed consent forms
- electronic copy of all data collection tools and the raw data set shall be provided

Electronic copy of all data collection tools and the raw data set shall be provided, if applicable.

4.2.5 Proposed Activities Scheduling:

This is a tentative time schedule for the EPE that will be fine-tuned in the course of project implementation and based on the proposed methodology.

Activity/ Milestone	Due Date
Drafting of inception report with evaluation matrix and instruments	01.11.2025
Refinement of data collection instruments and preparation of data collection	20.11.2025
Data Collection	01.12.2025
Debrief	15.02.2026
Data cleaning and analysis	25.02.2026
Preparation of draft report	15.03.2026
Presentation and discussion of draft results and recommendations to/ with Diakonie Katastrophenhilfe and partners	31.03.2026
Finalisation of report	05.04.2026

IV. METHODOLOGY and evaluation APPROACH

The consultant will develop the evaluation methodology. The proposed methodology shall be laid out in the offer submitted and will be refined in the inception report of the FPE respectively. The expectation is that a participatory approach is applied in which key project staffs, beneficiaries and stakeholders have a chance to meaningfully participate in the evaluation

process. It is expected that a diverse set of methods, including quantitative and qualitative methods, will be deployed and information is triangulated.

Possible data sources include, but are not limited to: (a) Project plans, outputs, and reports, (b) relevant cluster guidance, (c) DKH Partner internal policies and procedures, (d) key informant interviews, (e) focus group discussions (FGDs), (f) survey(s) of Project stakeholders and beneficiaries, and (g) visits to DKH Partners and Project implementation sites.

The sites to be visited will be selected jointly by DKH and its partner organisations. This is to ensure a convincing assessment of project sites accessibility, cost effectiveness, and ability to mobilize respondents within the respective data collection periods.

The evaluation shall explicitly address gender and aspects of inclusiveness in the FPE. Take note that gender inclusion is not limited to responses in questionnaires but taking in consideration the likelihood of specific concerns, participation, and needs.

Depending on the methodology, we assume that the total number of working days required to perform the FPE will be between 35 and 40.

V. TERMS AND CONDITIONS

5.1 Evaluation Management and Logistics:

DKH Ukraine will appoint the Evaluation Contact Person (ECP) to oversee the evaluation and inform key Project stakeholders about it, share with them the Evaluation TOR and the final ER. To facilitate evaluation planning, within one working day of the contract effective date the ECP will (1) make available to the Contractor Project Work Plan and Monitoring, Evaluation, Accountability, & Learning (MEAL) Plan, (2) provide (or give access to) the Activity Performance (Monthly) Reports and Project Quarterly Reports, (3) provide (or give access to) templates (means of verification) used by DKH Partners.

As warranted, the Contractor will receive additional Project-related documentation.

To keep DKH Ukraine informed about the evaluation status, the Contractor will submit electronic versions of the Evaluation Work Plan (EWP) to the ECP within five working days following the contract signing. The plan will highlight all evaluation milestones and include a preliminary list of interviewees and survey participants, a schedule of meetings, visits, and FGDs, draft evaluation questionnaires and surveys, and, if appropriate, an updated explanation of the evaluation methodology.

The Contractor will update the EWP (the list of interviewees and survey participants, the schedule of meetings, visits, surveys, and focus group discussions, etc.) and submit the updated versions to the COR on a biweekly basis. The Contractor will discuss any deviations from the EWP with the ECP and seek DKH Ukraine's concurrence with the proposed EWP amendments if those amendments are significant, as determined by the ECP.

The ET will conduct weekly evaluation briefings for the ECP and other relevant DKH Ukraine personnel in order to keep them informed of the progress of the evaluation and any issues that may arise.

The Contractor will be responsible for all logistical support of the evaluation, including translation/interpretation, transportation, accommodation, meeting/visit arrangements, and office space, equipment, and supplies. The Contractor must not expect any substantial involvement of DKH Ukraine's staff in either planning or conducting the evaluation. Upon request, DKH Ukraine will provide the Contractor with introductory letters to facilitate meeting arrangements. DKH Ukraine requests that any forthcoming Ukrainian, Polish, Romanian, and Moldovan holidays be considered in scheduling evaluation meetings, surveys, and visits in Ukraine, Poland, Romania, and Moldova.

5.2 Security, Access, and Contingency Planning

For the final project evaluation, the evaluation team shall integrate comprehensive security and access considerations into all phases of data collection and fieldwork. Key requirements include:

- **Context-Specific Risk Assessment:** Conduct and document an updated analysis of security threats and access constraints linked to conflict dynamics, cross-border movements, and local sensitivities relevant at the end of the project period.
- **Security Protocols:** Apply clear procedures for staff movement, communication, and emergency response, fully aligned with the organization's safety policies and current local regulations.
- **Access Management:** Coordinate with local authorities, community leaders, and partner organizations to secure safe and ethical access to affected populations, ensuring the confidentiality and dignity of participants.
- **Contingency Measures:** Maintain alternative data-collection approaches (e.g., remote interviews, digital surveys, secondary data review) and flexible scheduling to address sudden restrictions, security incidents, or natural hazards that may arise during the closing phase.
- **Duty of Care:** Ensure all team members receive updated security briefings, appropriate training, and necessary protective equipment prior to and throughout the evaluation.

The evaluator is responsible for integrating these measures into the final evaluation methodology, work plan, and budget, and for continuously monitoring and responding to evolving security dynamics until completion of the assignment.

5.3 Remuneration and Contract:

- Remuneration modalities: 50% before starting the work and 50% after receiving a final report.
- A contract will be signed between DKH Ukraine and the service provider which will detail additional terms and conditions of service, aspects on inputs and deliverables including Diakonie Katastrophenhilfe Code of Conduct, to which the service provider is to abide.

5.4 Selection process and criteria

A selection committee composed by staff of Diakonie Katastrophenhilfe will review the offers.

Diakonie Katastrophenhilfe reserves the right to conduct interviews in order to reach a decision. Furthermore, Diakonie Katastrophenhilfe reserves the right to award the contract at the time of submission of the offer. Only complete offers will be considered. The evaluation award will be granted to the most economical offer, based on the following award criteria and weighting:

Award criteria	Weight of award criteria in %
Quality of the technical proposal, with a special focus on understanding the ToR and proposed methodology	40 %
Qualifications of the evaluators	30 %
Price	30%

VI. Key QUALIFICATIONS of the evaluation team_____

The evaluation team (or Evaluator) shall be composed of experts with the below essential and desirable profiles and qualifications. The team of experts should be gender-balanced to enable

complete coverage of the different aspects of the consultancy as set out in these terms of reference, including cross-cutting issues.

Essential

- Solid experience in working with humanitarian sectoral and complex programs relating to emergency and development projects, preferably a minimum of 10 years
- Demonstrable experience in conducting complex evaluations of humanitarian programs responding to major disasters such as conflict
- Sound understanding of SPHERE standards, Core Humanitarian Standards, familiarity with key cash transfer guidelines and MEAL framework best practices and approaches
- Proven ability to provide strategic recommendations to key stakeholders (e.g. beneficiaries, local authorities, and partners);
- Proven experience with participatory evaluation and qualitative and quantitative methods (mixed-method design, triangulation);
- Excellent English is mandatory. Ukrainian is a plus. Please also mention your level of knowledge (if any) in speaking/ writing and reading in other languages of the project countries (Polish, Romanian, Russian);
- Availability and ability to work independently and on a flexible schedule
- Awareness of gender-based violence, knowledge and understanding of child protection principles and approaches
- Experience in Mental health, psychosocial support, protection is preferred.
- Experience in cross border/ multicountry programs

Desirable:

- Experience working for German NGOs or experience of evaluating projects funded by German Federal Foreign Office (GFFO)
- Ability to work in a fast-changed environment

VII. HOW TO APPLY

To participate in the tender process, complete offers must be submitted to the email address below by **13.11.2025**, and consist of the following documents:

- A **technical proposal**, which lays out the evaluation design, specifying methods and instruments to be used to answer the evaluation questions and demonstrating the comprehension of the ToR (max. 10 pages).
- A **financial proposal**. Outlining all fees and costs in EUR. All costs including VAT must be set out in the financial proposal (max. 3 pages).
- **Sound CVs of all participating evaluator(s)** with career details and experience relevant to the assignment.

Please send your offer containing all above-mentioned documents in English language via Email to:

Maryna Vorzheva, Procurement Officer
maryna.vorzheva@diakonie-katastrophenhilfe.de

Please see below a proposal of expected functions within the proposed team separated into core team members and support functions. For daily rates, all overhead/management costs

are to be included. The tenderer is expected to propose their own team composition, separated in core functions and support functions, based on the services requested above.

Positions
Core functions (=core team members)
Senior Advisor / Team Leader
Field coordinator
Experienced data collector
Support functions (=none-core team members)
Security Officer(s)
Admin and finance officer (s)

The maximum expected travels are:

- 3 international travels (expected business trips to Romania - 2 days, 3 days in Moldova, 4 days in Poland)
- approximately 50 national travels

These figures are estimates. For comparability reasons, all tenderers shall offer the maximum estimated values. Tenderers shall only indicate travel costs (see categories below), the travel days have to be covered under the working days above. At minimum, the following travel cost categories have to be considered:

Travel cost category	Nr. People	Nr. Days/per person
Accommodation	X	X
Meal Lump Sums	X	X
Transportation	X	X
Security costs	X	X