

Mercy Corps Indonesia
Managing Risk Through Economic Development (MRED)
Program
Scope Of Work

Name of Activity	Baseline M-RED Phase III
Project name:	M-RED Phase III
Location:	Sigi Regency: <ul style="list-style-type: none">• Kulawi Subdistrict consists of 6 villages: Salua, Namo, Bolapapu, Mataue, Boladangko, and Toro.• South Dolo Subdistrict consists of 7 villages: Sambo, Wisolo, Balongga, Walatana, and Bangga
Implementation Period:	July – August 2025

Background Issue:

Mercy Corps Indonesia is implementing a **Managing Risk through economic development (M-RED)** program in the subdistricts of Dolo Selatan and Kulawi in Sigi Regency. The program aims to improve community knowledge and capacity in disaster risk reduction (DRR) and livelihood resilience. Following the earthquake, tsunami, and liquefaction that struck Central Sulawesi Province on September 28, 2018, Sigi Regency was significantly affected. According to data released by the National Disaster Management Agency (BNPB), the natural disaster claimed 2,113 lives and caused material losses estimated at Rp. 13.82 trillion. The situation was exacerbated by a flash flood disaster on April 28, 2019, in Sigi District. The flood further worsened the lives of the community, with damage or loss of housing and 70% of productive land (7,909 hectares) damaged due to the flood disaster. The aforementioned events were influenced by the lack of community knowledge regarding disaster risk reduction, market access and information, networks, and product chains, thereby further worsening the economic conditions of the community, particularly in the agricultural sector.

Mercy Corps Indonesia, through its Managing Risk Through Economic Development (M-RED) program, has implemented initiatives to enhance community preparedness and livelihoods in the face of disasters and climate risks across 13 villages spread across Sigi District, comprising two sub-districts: Kulawi and Dolo Selatan. The M-RED program has been running for five years across two phases since 2020–2024. Mercy Corps Indonesia has been mandated to continue the M-RED program in the previous intervention area by proceeding to Phase III, which will take place from April 2025 to March 2028.

Objectives of Baseline Assessment:

Mercy Corps is seeking a qualified service provider or local consultant to conduct a Baseline Assessment for the M-RED programme. The assessment will establish a comprehensive understanding of the status of households, communities, and key Disaster Risk Reduction (DRR) stakeholders in the target areas, in alignment with the program's objectives. It will also provide baseline values for key program indicators (refer to Table 1), forming the foundation for monitoring progress toward building disaster-ready communities.

The baseline data will inform annual tracking and the endline evaluation, allowing measurement of program effectiveness over time. It will also support the refinement of life-of-program (LOP) targets, definitions of indicators, and the design and prioritization of activities.

Specifically, the main objectives of the baseline assessment are to:

- Identify GESI specific ,capacities and challenges for DRR.
- Assess exposure to hazards and disaster risks at both the community and household levels and quantifying the percentage of households affected by disasters annually.
- Evaluate existing capacities of households and communities relevant to disaster preparedness and response.
- Determine baseline values for key indicators, as outlined in the project log frame, with appropriate disaggregation (e.g., by sex, age, location), to enable comparison over the life of the program.

Table 1: Baseline indicators

Level	Performance Indicator	Source of Data
Goal	Indicator 0.1: % of communities that show decrease in average community level Local Disaster Index Scores.	Community Level
Goal	Indicator 0.2: Average household score on coping strategy Index (Only to be used in case of Post Disaster Survey)	HH level
Goal	Indicator 0.3: Average household score on Locus of Control	HH level
Outcome	Indicator 1.1: % of communities with an appropriately skilled and knowledgeable DRR leadership group is recognized as such by the community and relevant authorities (where appropriate) (MACP Indicator 1)	HH level + community level
Outcome	Indicator 1.2: % of communities with Disaster Risk Reduction leadership group whose current membership reflects key socio-demographics of the community (in terms of gender, age, ethnicity, disability, livelihood groups, and others as pertinent to context). (MACP Indicator 2)	Community Level
Outcome	Indicator 1.3 : % of communities with DRR leadership group meets regularly with consistent attendance, makes decisions, and implements them without requiring the presence of or prompts from the partner/grantee. ((MACP Indicator 3)	Community Level

Outcome	Indicator 1.4: % of community members in target communities reporting improved awareness, knowledge and response capacity to take action before, during and after disasters	HH level
Outcome	Indicator 1.5: % of community members who hold gender equitable attitudes	HH level
Outcome	Indicator 2.1: % of communities that complete at least 75% of the action in their disaster preparedness / disaster risk reduction plan, and review and update the plan regularly (MACP Indicator 4)	Community Level
Outcome	Indicator 2.2: % of communities where over 76% of at-risk households in the community are implementing disaster risk reduction measures promoted by the project. (MACP Indicator 5)	HH level + community level
Outcome	Indicator 2.3: % of communities whose risk-management plan receives support/ resources from the local/regional/ national authorities (MACP Indicator 8)	Community Level
Outcome	Indicator 2.4: % of communities in which all socio-demographic groups feel the disaster preparedness / disaster risk reduction plan and EW system meet their priority needs, and contribute to improving them (MACP Indicator 7)	HH level + community level
Outcome	Indicator 3.1 : % of communities in which members obtain, communicate and act upon EW information in a timely way and improve the system to reflect lessons learned in drills/actual events (MACP Indicator 6)	HH level + community level
Outcome	Indicator 3.2: % of communities where Promising practices and other learning (Best practices, tools, and experience on DRR in this project) are identified, systematized, and disseminated to local actors (local governmental and nongovernmental actors) (MACP Indicator 9)	HH level + community level
Outcome	Indicator 3.3: % of communities which observe Uptake/take-up in non-target communities applying project approach/activities (MACP Indicator 10)	HH level + community level
Objective	Indicator 1.1.2: % of community groups that report meaningful participation or leadership level of community group participation spectrum in decision-making bodies at community level (Disaggregated by PWD, and Women)	Community Level
Objective	Indicator 3.7.2: # of targeted local government institutions reporting improved capacity for Disaster Risk management	Stakeholder Level

Methodology:

The program will follow a mixed method of data collection with different participants to fit the context and provide representative sampling of the population as a whole.

Quantitative study design:

Household Surveys: Conduct household surveys to gather data at the individual and household levels. Train enumerators thoroughly to ensure consistency and reliability in data collection.

The study will use household survey methods for its quantitative data collection. A standardized questionnaire will be used to a randomly selected, statistically significant sample of individuals or households within the target population. The questionnaire will be developed in collaboration with the program team and the MEL team, based on the research objectives and desired outcomes with sector specific adaptations. The survey will collect data on various aspects, such as engagement, knowledge, attitude, and practices, as well as well-being outcomes.

Mixed Study Design:

Community-Level Consultations: Engage with community members through community consultations with representative groups of the community members. This helps in understanding the broader community impact and gathering qualitative insights.

The study will use Disaster Readiness Measurement toolkit with structured survey questionnaire as well as collect some qualitative notes.

Stakeholder Key Informant Interviews (KIIs): Identify key stakeholders and conduct semi-structured interviews to gather in-depth insights. This includes relevant government stakeholders from the District, Sub-District, and Village Level.

The study will use structured survey questionnaires as well as collect some qualitative notes.

- **Household Level**
 - o The programs intends to conduct a panel study across households comparing the baseline and endline data.
 - o Program would like to see Population based multi cluster sampling by addressing the design affect produced by multi cluster sampling and for further accuracy apply the population sample weighting.
- **Community Level**
 - o The program has conducted community consultation using DRM toolkit across all the working communities of the program.
 - o ID: 13 Village 44 Hamlet (Dusun)
- **Stakeholder Level**
 - o The program will conduct Key Informant Interview with relevant DRR stakeholders in Sigi District

Data Collection Tools and Training:

Consultant will lead the data collection process with technical support from the M-RED MEL Officer, Regional MERL Advisor support from Program Manager, other thematic team leads.

Household Level:

The household survey will involve interviewing selected heads of household.

- Baseline data collection teams will use android smartphones operating ONA, etc software to digitally capture household data. For the survey questionnaire, the survey questionnaire will be developed based on the indicators' definition in project MEAL/PMP plan. The tool will be shared for review and finalized after incorporating feedback from team members. As such, edits will be made to the English version and the English version tools will be finalized before they are translated into Bahasa Indonesia. Upon translation, the forms will be created in ONA, or other software and then the program team will test them using simulated interviews. Finally, it will be updated prior to data collection.

- The data will be collected by consultants and enumerator recruited by consultants, as well as training for the baseline survey.
- Safeguarding and CARM training to data enumerators understanding ethical considerations and do no harm as well as integrating Mercy corps core values.
- Target Population The total population size communities in 13 Villages in 2 Sub-districts (South Dolo and Kulawi) 5166 Hh. Number of sampled households will be proportionately allocated by the total Hh, a representative sample can be proposed at the discretion of the consultant

Sampling Method

The proposed sampling method for the baseline is probability-systematic (random)

- The consultant should also clearly describe the process and other relevant parameters.
- The programs intends to conduct a panel study across households comparing the baseline and endline data.
- Program would like to see Population based multi cluster sampling by addressing the design affect produced by multi cluster sampling and for further accuracy apply the population sample weighting.

Community Level: do it Analyze base on data collected.

Stakeholder Level:

The Stakeholder KII with DRR focal person of local government.

- Design and develop a semi-structured KII questionnaire tailored to DRR focal persons and relevant other stakeholders.
- Ensure the tool captures relevant insights on local DRR strategies, challenges, capacities, and coordination mechanisms.
- Aligning the tool with M-RED program objectives and contextual realities.

Data Management and Analysis Procedures:

Data collected via smartphones will be downloaded directly from cloud-based server, into Microsoft Excel. Data will be analyzed by the MEL focal point or external consultant using pivot tables, according to the analysis plan outlined in the project's MEAL/PMP plan.

1. **Quantitative Analysis:** Using statistical software like excel, spss to analyze quantitative data from household survey and community consultation. Compare baseline data with baseline data to measure changes and assess the impact of the intervention. Data cleaning will involve outlier checks and cross-verification with control questions to ensure accuracy.
2. **Qualitative Analysis:** Analyze qualitative data from community consultations and KIIs to identify key themes and insights. This helps in understanding the context and nuances of the project.

Consultant activities

By working with the program's MEL team, the service provider will be responsible for all activities required to successfully conduct the assessment, including (but not limited to) carry out primary data collection, translation, cleaning, storing and analysis of the data, as well as reporting and presenting the findings. The service provider will also be required to conduct desk review and key informant interviews with relevant stakeholders. The scope of the consultant assignment includes (but not limited to) the following activities:

1. Conduct a desk review of secondary data and program documents (e.g., program descriptions, logical frameworks, and indicator plans) and internal/external reports to identify gaps and key areas requiring further exploration.

2. Develop an Inception report outlining the methodology for the assessment, including the sampling plan, data collection methods, and analysis plan. The consultant should ensure alignment with best practices, data protection and quality requirements, do no harm, and outline foreseen limitations and risks.
3. Carry out the assessment that will include (but not limited to) the following activities:
 - Survey and Data Collection: Conduct surveys and interviews to collect baseline data.
 - Data Analysis and Reporting: Analyze collected data and prepare reports detailing baseline indicators and other contextual and programmatic information.
4. Develop a preliminary findings presentation and present it to the program team; following which a draft report will be prepared for inputs and feedback.
5. Incorporating the feedback received, prepare a comprehensive baseline assessment report (Annex 2) with detailed findings, stakeholder insights, and any recommendations identified during the assessment.
6. Carry out a presentation of the final baseline assessment report to stakeholders.

Methodology Limitations

Some Not present or refused to be interviewed, as the household member may not have been available at the time. These households will be replaced by other households listed in the sampling framework. Additional households will be drawn from a 15% contingency buffer to account for non-response. While all surveyed households are randomly selected.

The result of the baseline study will depend on the accuracy of information provided by households. Respondents sometimes, especially in area targeted by program, could provide incorrect information as they expect to be enrolled in these program. However, the Baseline team will make sure to have to control questions to confirm the accuracy of information provided.

Consultant Deliverables

Deliverables should be in both English and Bahasa Indonesia (the inception, preliminary/draft reports). Consultant is responsible for all the quality control measures and follows code of conduct during the survey.

Expected deliverables for the assessments are as follows:

- a) Inception Report (assessment design) in English
- b) Finalized assessment tools
- c) Training of data collectors/facilitators
- d) All data files (raw data, clean data, data analysis files(any format depending on software used))
- e) Preliminary results summary in English and Indonesia
- f) Draft reports in English (based on feedback provided from initial version with preliminary results)
- g) Results presentation and sharing with the program team.
- h) Final report narrative and summary in presentation format in English. The contents, structure and format of the report should be finalized in close consultation with the Program Manager, Program Coordinator, MEL Officer, and Regional MERL Advisors.
- i) Dissemination of the findings with program team.
- j) Final report in English and Bahasa.
- k)

The following layout (and maximum page length) is suggested for the baseline report:

- Title page – 1 page

- Acronyms and abbreviations – 1 page
- Table of contents, including a list of annexes – 1 page
- Executive summary – 2-3 page
- Introduction: program background & context, description of the program, theory of change, and results framework – 1 page
- Baseline overview: Purpose, objectives – 1 page
- Methodology: data sources/tools, sampling, analysis – 1 page
- Findings: summary tables of results for key indicators along with narrative explanation/interpretation (including from sharing event), Summary of trends of factors contributing or constraining from community preparedness across the thirteen Desas. - ~10-15 pages
- Recommendations: based on the baseline findings (including from reflection event) – 1 page
- Limitations: 1 page
- Annexes: SOW, survey tools, Photos etc.

The details activities include the following outputs, timeframe, and payment terms:

	Output	Timeperiod	Payments (% IDR)
Contract Signing & Negotiation		1-3 day	30%
Preparation: a) Development of Baseline Survey b) Review of MRED Program documents c) Development of tools for baseline survey of program participants and stakeholders. d) Recruitment and training of enumerators e) Testing of data collection tools for baseline survey	- Baseline survey plan - Data collection tools using tablets and ODK*	10 day	
f) Sending invitations and scheduling surveys and interviews			
Data Collection and Cleaning: - Conducting a Baseline Survey - Conducting Interviews	- Data Household Baseline Survey - Data from interviews with stakeholders	15 day	30%
- Data analysis and preparation of baseline survey reports - Preparation of presentations - Archiving of raw data: audio recordings, KII/FGD notes & transcripts (optional)	- 1 st draft of baseline survey report - 1 st draft of final HH report & presentation - Raw data archived	7 day	
Baseline Survey workshop: - Presentation of results - Gathering feedback for validation of results	- Feedback & findings on the first draft	2 day	
1. Final revision of baseline survey report 2. Presentation	- Baseline Survey Report - Presentation - Final Report	2 day	

Submission of Baseline Survey Report	- Baseline Survey Report (Indonesia and English)	1 day	40%
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REFERENCE DOCUMENTS

The following documents should be referred to during the Baseline:

- Logframe
- Result Framework
- MEAL/PMP Plan
- Two Pager of program (fact sheet)
- MC resilience framework
- Questionnaire
- GEDSI Assessment SOW
- Link to the consent form

Annex:

Project Details:

Program overview

a. Program Goal and Outcomes

The purpose of the project, M-RED V, is to reduce vulnerability to climate shocks and support disaster-prone communities in creating a self-sustaining culture of readiness and recovery by fostering an enabling environment supported by locally led initiative and multi-sector partnerships. M-RED Phase V is designed following our theory of change and outcomes to measure the progress and impact of the program.

Theory of Change:

If communities are empowered to manage risks through inclusive, participatory approaches that integrate disaster preparedness, risk-sensitive livelihoods, nature-based solutions, and well-targeted and functional technologies, and partnerships are built with government, private sector, and other stakeholders to co-design and implement resilience strategies, THEN communities will become more resilient to the climate shocks and disasters.

We believe that an inclusive participation approach ensures that diverse needs and voices are heard; sustainable livelihoods reduce vulnerability; and evidence-based decision-making enables rapid and effective responses, ultimately leading to long-term well-being and security.

Outcomes:

- Outcome 1: By 2028, vulnerable communities will enhance risk awareness and skills of DRR measures and risk sensitive livelihoods to take effective actions to reduce disaster impacts

- Outcome 2: By 2028, vulnerable communities will establish functional preparedness mechanisms, access resources for DRR measures, improve disaster and climate risk-sensitive livelihoods, and take effective actions to reduce disaster impacts.
- Outcome 3: By 2028 government agencies and private sector actors will support the vulnerable communities to have enhanced and sustained Disaster Ready capacities and adopt improved disaster risk reduction strategies into their planning.

M-RED V will measure the following targets in each objective to evaluate our progress. The specific figures will be determined once we conduct our baseline assessment at the initiation of M-RED V:

- **Objective 1:** Vulnerable communities have inclusive and accountable groups leading disaster risk reduction and management activities and are better prepared to respond to disasters.
- **Objective 2:** Vulnerable communities conduct participatory multi-hazard assessment and develop community-level action plans for reducing vulnerability and building capacity.
- **Objective 3:** Vulnerable communities will have improved awareness and knowledge of prevailing disaster risks to take safe action in the face of disasters.
- **Objective 4:** Vulnerable communities will have established or improved functional disaster preparedness and response mechanisms.
- **Objective 5:** Vulnerable communities will benefit from DRR mitigation measures.
- **Objective 6:** Vulnerable communities will adopt disaster and climate risk-sensitive livelihoods.
- **Objective 7:** Government disaster management institutions have improved capacity to anticipate, prepare for, and respond to natural disasters and climate change-induced disasters.
- **Objective 8:** EWS is established in targeted Vulnerable community and is connected with government-supported end-to-end system.
- **Objective 9:** Nexus value chains and market systems are created and/or improved.
- **Objective 10:** Knowledge products are created and documented from research, innovation, and best practices to contribute to influence sustainability, replication, and scale.

b. Targeted participants

M-RED focuses on reaching all households of the working communities through its activities while specifically prioritizing targeting of at-risk households as defined through the participatory assessment. While in general we prioritize at-risk households, for each activity program teams develop their own set of criteria as well to select the participants. Since the program works to build the capacity of disaster-impacted communities and is given limited resources, we will target the participants that are most at risk, i.e. most exposed and vulnerable to hazards, and most lacking in capacities to prepare for them. M-RED employing the system approach to community Disaster Readiness, the

stakeholders who support to create those enabling environment for the community to be disaster ready are also the targeted participants of this project.

c. Program approach

Our priority approaches from M-RED IV have proven effective in advancing learning impact and contributing to more transformative approaches to DRR and climate adaptation. M-RED will prioritize process-oriented and evidence-based program decision making and implementation. Recognizing how these approaches positively reinforce one another, we propose continuing to prioritize locally led initiatives, early-warning systems/ early action, and transformation.

M-RED focuses on creating a culture of inclusion for all people that protects, enables, and elevates diverse community members and groups while also promoting meaningful participation and accountability to the participants and stakeholders we work for and with. M-RED focuses on reaching all households of the working communities through its activities while specifically prioritizing targeting of at-risk households as defined through the participatory assessment while ensuring representation all diverse groups within program activities including the representation of relevant stakeholder. Since the program works to build the capacity of disaster-impacted communities and given limited resources, we will target the participants that are most at risk, i.e. most exposed and vulnerable to hazards, and most lacking in capacities to prepare for them.

- Locally led initiatives
- Early-warning systems/early action
- Transformation

Locally-led: Critical to the program's success is its responsiveness to communities' needs and aspirations, fostering sustainability and local ownership through flexible programming, adaptable financing, investment in local skills and capacities, and leveraging partnerships.

AA/EWS: AA supports reducing the risks, allowing more time for people to get prepared for the shock to come. AA includes integrating forecast information into EWS of the priority hazards and strengthening preparedness and response mechanisms to support communities and institutions' resilience. M-RED is working on building evidence for AA through pilots, engaging with government and other stakeholders in establishing and testing AA mechanisms.

Transformation: Intentionally integrated and multi-layered, M-RED aims to achieve transformational change through its nexus approach and based on the following principles: 1) being locally led, responding to local aspirations and needs, and enhancing good governance and leadership; 2) fostering gender equality and social inclusion; and 3) continuously improving through learning and adaptation. Transformation for M-RED takes multiple forms and spans across levels: individuals, communities, systems.

List of Stakeholders M-RED plans to work with:

- 1. BPBD include Pusdalops
 - 2. Badan Perencanaan Pengembangan Riset dan Inovasi Daerah (BAPPERIDA)
 - 3. Pemberdayaan Masyarakat dan Desa (PMD)
 - 4. Dinas Sosial (DINSOS)
 - 5. Dinas Kesehatan (DINKES)
 - 6. Dinas Lingkungan Hidup (DLH)
 - 7. Komunikasi dan Informatika (KOMINFO)
 - 8. DinasTanamanPangandanHortikultura (DISTANHORBUN)
 - 9. Head of Sub-District South Dolo and Kulawi
 - 10 Head of Villages (13 Vilages)
 - 11. Private Sector (3 Market Actor)

Qualification Consultant

The required qualifications and experience are as follows:

- Minimum 5 (five) years' experience conducting and leading survey research and assessments, both quantitative and qualitative.
- Demonstrated experience in training and managing data collectors
- Experience with work in DRR and economic development or related sectors
- Experience in Monitoring and Evaluation (preferably in DRR or related sectors)
- excellent written and oral communication skills in English, including report writing and editing
- Understanding the context of the Disaster Risk Reduction program in Indonesia, specifically in the Disaster Risk Management framework

Taxes, Addendum/Termination, and Dispute Resolution

- All tax costs in this activity will be the responsibility of the consultant and tax deductions will be made in accordance with applicable Indonesian law.
- The work agreement contract agreed upon by both parties may be terminated in the event of a breach or matters that are contrary to applicable Indonesian law. An addendum to the contract agreement will be available if necessary.
- In the event of a dispute in the implementation of this activity, the Mercy Corps Indonesia management team will discuss and resolve the dispute.

Procedure Application

The submitted proposal must include a complete description of the scope of work, methodology, activity details, schedule, research team members, and budget details. Please submit your proposal and resume in English to: procurement_mred@id.mercycorps.org by July 13, 2025. Only selected candidates will be contacted. Applications received after the deadline will not be considered.