



VICTORIA FRIENDLY MONTESSORI



BASELINE SURVEY

Terms of Reference-ToR

ABSTRACT

Victoria Friendly Montessori (VFM) has operated in Rusinga West for over a decade, delivering integrated community development services that have significantly improved the well-being of local households.

As VFM prepares to expand its interventions to additional parts of Rusinga Island, there is a need for a comprehensive understanding

of the current socio-economic and service delivery landscape across the wider region.

This expansion requires a **baseline survey** that will generate reliable, context-specific data to inform program planning, guide strategic decision-making, and ensure that future interventions are responsive to the needs and priorities of the broader Rusinga community. The findings will establish clear benchmarks for measuring progress and impact as VFM scales the Rusinga Integrated



Development
Initiative
(RIDI) beyond
its current
geographic
footprint.
VFM Kenya

Contents

1. Background.....	2
2. Objective of the Assignment.....	3
2.1 Education Indicators for Baseline Assessment.....	3
2.2 Health Indicators for Baseline Assessment.....	3
2.3 Nutrition Indicators for Baseline Assessment.....	4
2.4 Food Security Indicators for Baseline Assessment.....	4
2.5 Disability Inclusion Indicators for Baseline Assessment.....	5
2.6 Household Economic Strengthening Indicators for Baseline Assessment.....	5
2.7 Social Services Indicators for Baseline Assessment.....	6
2.8 Water Access Indicators for Baseline Assessment.....	6
2.9 Youth Empowerment Indicators for Baseline Assessment.....	7
3.0 Scope of Work.....	7
4. Deliverables.....	8
5. Timeline.....	9
6. Consultant Qualifications.....	9
7. Application Process.....	9

Terms of Reference (ToR)

Consultancy for Baseline Survey

Project: Rusinga Development Initiative (RDI)

Client: Victoria Friendly Montessori (VFM Kenya)

Location: Rusinga Island, Homa Bay County

Date: April 14, 2026

1. Background

The **Rusinga Integrated Development Initiative (RIDI)**, implemented by **Victoria Friendly Montessori**, is a comprehensive and holistic community development program designed to significantly enhance the quality of life for residents of Rusinga Island. RIDI brings together a coordinated package of interventions across **education, health, nutrition, food security, disability inclusion, household economic strengthening, youth empowerment, social services, and water access**, recognizing that sustainable development requires an integrated, multi-sectoral approach. Through this initiative, Victoria Friendly Montessori seeks to address both immediate community needs and the structural barriers that limit long-term well-being, resilience, and opportunity.

To support effective planning and implementation, the **baseline survey** will generate a robust body of evidence that captures the community's current conditions across all program domains. Establishing these baseline measurements is essential for understanding the starting point from which progress will be assessed and for determining the magnitude of change attributable to RIDI interventions over time. The data collected will form the foundation for a comprehensive monitoring and evaluation framework.

Specifically, the baseline findings will:

- i. **Guide program design**, ensuring that interventions are grounded in accurate, context-specific evidence and are responsive to the priorities, challenges, and aspirations of the community.
- ii. **Inform adaptive management**, enabling the program team to identify gaps, risks, and opportunities early, and to refine implementation strategies for greater effectiveness and impact.
- iii. **Strengthen accountability to stakeholders**, including community members, partners, donors, and local authorities, through transparent, data-driven reporting on progress, outcomes, and lessons learned.

2. Objective of the Assignment

The primary objective of this consultancy is to **conduct a baseline survey** to assess the status of key development indicators in the target community. Specifically, the consultant will evaluate:

2.1 Education Indicators for Baseline Assessment

The baseline consultant will be responsible for collecting, analyzing, and reporting on key education indicators to establish the starting point for project monitoring and evaluation. Specifically, the consultant will assess:

- i. **Access to education:** Measure enrollment rates (disaggregated by gender, age, and disability), availability of schools within reasonable distance, teacher-student ratios, and equity of access across vulnerable groups.
- ii. **Quality of education:** Evaluate infrastructure adequacy (classrooms, sanitation facilities, electricity, ICT resources), availability of teaching and learning materials, teacher qualifications, and service delivery standards.
- iii. **Retention rates:** Assess attendance consistency, dropout rates, and progression within grades, with attention to factors influencing student persistence.
- iv. **Transition rates:** Document movement of learners from one level of education to the next (e.g., primary to secondary, secondary to tertiary), including completion rates and barriers to transition.

2.2 Health Indicators for Baseline Assessment

The baseline consultant will be responsible for collecting, analyzing, and reporting on key health indicators to establish the starting point for project monitoring and evaluation. Specifically, the consultant will assess:

- i. **Access to health services:** Availability and accessibility of health facilities, coverage of essential services, health workforce density, and equity of access across gender, age, and vulnerable groups.
- ii. **Quality of health services:** Adequacy of infrastructure (clinics, hospitals, sanitation, water supply, medical equipment), availability of essential medicines and supplies, staff qualifications, and patient satisfaction.
- iii. **Utilization rates:** Frequency of service use (outpatient visits, maternal and child health services, immunization uptake), barriers to utilization, and patterns of health-seeking behavior.
- iv. **Health outcomes:** Key indicators such as maternal mortality, child mortality, disease prevalence/incidence, nutrition status, and other relevant morbidity/mortality measures.

- v. Continuity of care: Retention in treatment programs (e.g., HIV, TB, chronic diseases), follow-up adherence, and referral systems between levels of care.

2.3 Nutrition Indicators for Baseline Assessment

The baseline consultant will be responsible for collecting, analyzing, and reporting on key nutrition indicators to establish the starting point for project monitoring and evaluation. Specifically, the consultant will assess:

- i. **Access to nutrition services:** Availability and accessibility of nutrition programs (growth monitoring, supplementation, counseling), coverage of community-based nutrition services, and equity of access across vulnerable groups.
- ii. **Dietary diversity:** Household and individual dietary diversity scores, frequency of consumption of nutrient-rich foods, and seasonal variations in food availability.
- iii. **Nutritional status:** Anthropometric measures (stunting, wasting, underweight, overweight/obesity), micronutrient deficiencies (e.g., anemia, vitamin A), and breastfeeding practices.
- iv. **Infant and young child feeding:** Exclusive breastfeeding rates, timely introduction of complementary foods, minimum acceptable diet, and continued breastfeeding practices.

2.4 Food Security Indicators for Baseline Assessment

The baseline consultant will be responsible for collecting, analyzing, and reporting on key food security indicators to establish the starting point for project monitoring and evaluation. Specifically, the consultant will assess:

- i. Availability of food: Local production levels, market supply, seasonal variations, and reliance on imports or external sources.
- ii. Access to food: Household purchasing power, income sources, food prices, and physical access to markets, with attention to vulnerable populations.
- iii. Utilization of food: Dietary diversity, food preparation practices, safe water availability, and household knowledge of nutrition and hygiene.
- iv. Stability of food systems: Resilience to shocks (climate change, conflict, economic crises), coping strategies during shortages, and sustainability of food supply chains.
- v. Household food security status: Measured through tools such as the Household Food Insecurity Access Scale (HFIAS), Food Consumption Score (FCS), or Coping Strategies Index (CSI).

2.5 Disability Inclusion Indicators for Baseline Assessment

The baseline consultant will specifically.

- i. Access to services: Availability and accessibility of education, health, nutrition, and livelihood services for persons with disabilities; physical accessibility of facilities (ramps, signage, assistive technologies); and inclusiveness of program design.
- ii. Support systems: Availability of social protection, community-based rehabilitation, assistive devices, caregiver support, and specialized services tailored to persons with disabilities.
- iii. Participation and inclusion: Representation of persons with disabilities in community decision-making, school enrollment, employment opportunities, and civic engagement.
- iv. Barriers and discrimination: Identification of social, cultural, and institutional barriers that limit participation, including stigma, policy gaps, and lack of awareness.

2.6 Household Economic Strengthening Indicators for Baseline Assessment

The baseline consultant will be responsible for collecting, analyzing, and reporting on key household economic strengthening indicators to establish the starting point for project monitoring and evaluation. Specifically, the consultant will assess:

- i. Income levels: Household income sources, average monthly/annual earnings, wage versus non-wage income, and disparities across gender and socio-economic groups.
- ii. Livelihood diversification: Range of livelihood activities (agriculture, trade, wage labor, small enterprises), degree of dependence on single versus multiple income streams, and seasonal variations in livelihoods.
- iii. Financial resilience: Household savings, access to credit and financial services, participation in savings groups or cooperatives, ability to cope with economic shocks, and reliance on social safety nets.
- iv. Asset ownership: Ownership of productive assets (land, livestock, tools, equipment), housing quality, and access to technology that supports income generation.
- v. Employment and labor: Employment rates, underemployment, informal versus formal sector participation, and youth/women's engagement in economic activities.

2.7 Social Services Indicators for Baseline Assessment

The baseline consultant will be responsible for collecting, analyzing, and reporting on key social services indicators to establish the starting point for project monitoring and evaluation. Specifically, the consultant will assess:

- i. Coverage of welfare services: Availability and reach of social protection programs (cash transfers, food aid, disability grants, elderly support), and equity of access across vulnerable groups.

- ii. Community support services: Presence and effectiveness of community-based organizations, psychosocial support, youth and women's groups, and services for marginalized populations.
- iii. Quality of services: Adequacy of infrastructure, staffing, service delivery standards, responsiveness to community needs, and satisfaction levels among beneficiaries.
- iv. Child protection: Systems and mechanisms for preventing and responding to child abuse, neglect, exploitation, and violence; availability of child-friendly services; and community awareness of child rights.
- v. Inclusiveness: Extent to which social services address the needs of persons with disabilities, women, children, and other vulnerable groups.

2.8 Water Access Indicators for Baseline Assessment

The baseline consultant will be responsible for collecting, analyzing, and reporting on key water access indicators to establish the starting point for project monitoring and evaluation. Specifically, the consultant will assess:

- i. Availability of clean water: Proportion of households with access to improved water sources (piped water, boreholes, protected wells), distance to water points, and time spent collecting water.
- ii. Reliability of supply: Consistency of water availability throughout the year, frequency of interruptions, seasonal variations, and resilience of supply systems.
- iii. Quality of water: Safety of drinking water (microbiological and chemical contamination), household water treatment practices, and community perceptions of water quality.
- iv. Waste management practices: Household and community-level waste disposal methods, sanitation coverage, drainage systems, and management of solid and liquid waste to prevent contamination of water sources.
- v. Equity of access: Differences in access and reliability across gender, age, disability, and socio-economic groups.

2.9 Youth Empowerment Indicators for Baseline Assessment

The baseline consultant will be responsible for collecting, analyzing, and reporting on key youth empowerment indicators to establish the starting point for project monitoring and evaluation. Specifically, the consultant will assess:

- i. Skills training: Availability and uptake of vocational training, entrepreneurship programs, digital literacy, and other capacity-building initiatives targeting youth.
- ii. Employability: Employment rates among youth, access to internships/apprenticeships, alignment of skills with labor market demand, and barriers to youth employment.

- iii. Participation in community development: Involvement of youth in civic engagement, leadership roles, volunteerism, and decision-making processes within community structures.
- iv. Access to support services: Availability of mentorship, counseling, financial literacy programs, and youth-friendly spaces that foster empowerment.
- v. Barriers to empowerment: Identification of social, cultural, and economic challenges limiting youth participation, including gender disparities and exclusion of marginalized groups.

3.0 Scope of Work

The consultant will undertake the following tasks:

- **Survey Design:** Develop robust tools (questionnaires, FGDs, KIIs) tailored to diverse community groups. Pilot and refine instruments to ensure validity and reliability. The youth project should be treated as a special project.
- **Data Collection:** Conduct household surveys, FGDs, and KIIs across a representative sample of the Kamasengre community. Ensure gender and age inclusivity.
- **Data Analysis:** Apply both qualitative and quantitative methods to generate actionable insights. Use statistical software to ensure rigor and accuracy.
- **Reporting:** Produce a comprehensive baseline report with findings, conclusions, and recommendations. Present results to stakeholders in a validation workshop.

4. Deliverables

Consultant Deliverables

The consultant will provide the following outputs:

- a) Inception Report: A detailed document outlining the proposed methodology, data collection tools, sampling strategy, and work plan, to be submitted at the start of the assignment.
- b) Survey Tools and Questionnaires: Draft instruments for data collection, refined and finalized after piloting to ensure validity and reliability.
- c) Draft Baseline Report: A comprehensive report presenting preliminary findings, submitted for stakeholder review and feedback.
- d) Final Baseline Report: A polished report incorporating stakeholder inputs, including clear benchmarks and recommendations for monitoring and evaluation.
- e) Stakeholder Presentation: A concise presentation summarizing key findings, trends, and recommendations, delivered to project stakeholders.

- f) Youth Empowerment Project Report: A separate, focused report highlighting youth-specific findings, including skills training, employability, and participation in community development.

5. Timeline

The assignment is expected to be completed within **three (4) weeks** from the contract start date.

6. Consultant Qualifications

The consultant should demonstrate:

- i. Minimum 5 years' experience in baseline surveys or impact assessments.
- ii. Proven expertise in multi-sector development projects.
- iii. Strong skills in data collection, statistical analysis, and report writing.
- iv. Excellent communication and facilitation skills for engaging diverse stakeholders.

7. Application Process

Interested consultants should submit applications by April 30, 2026 to:

- i. tomkiboka1@gmail.com
- ii. CC: philiponger9@gmail.com

Applications must include:

- i. Detailed CV highlighting relevant experience.
- ii. Technical proposal outlining approach and methodology.
- iii. Financial proposal with itemized budget.