

## DRAFT TERMS OF REFERENCE FOR BCO IA C3

### 1. Background

In its initial terms of reference for the BCO Impact Assessment, the BCO Alliance noted the following challenge:

*One of the assumptions underlying much of the work of the BCO member organisations is that it is important for poor and marginalised people to have a stronger "voice" at local, national and global levels, and to be able to participate more effectively in development-related activities and debates – economic, social and political. The assumption is that such voice and participation contributes to effective development and poverty reduction. However, documented learning and concrete evidence to support this assumption is rare.*

The BCO Impact Assessment was designed by the BCO Alliance, with funding from DFID, to establish where the experience of BCO Alliance partners can contribute to addressing this challenge, and to offer such evidence as it could provide. It was structured around three components:

- Component 1 – a scoping study ('short-term analysis') of 'existing evaluative material' produced within the BCO Alliance.
- Component 2 – a series of independent evaluation and impact assessment activities to be undertaken by BCO partners, either individually or in groups.
- Component 3 – a joint initiative by BCO partners and the commissioned Impact Assessment study team to address the questions raised by the challenge described above.

An Impact Assessment study team (IA study team) was commissioned by the BCO Alliance to undertake Components 1 and 3 of the Impact Assessment. Component 2 is to be undertaken by BCO partners, individually or collectively. The BCO Alliance is to be responsible for any advocacy outputs that may arise from the Impact Assessment.

### 2. Component 3

The purpose of Component 3 was described in the initial terms of reference as:

*A joint initiative involving all BCO partners that addresses the ... question: "How do communications for development contribute to poverty reduction through strengthening the voices, capacities, communications and networking of the poor and the marginalised, and enable them to influence decisions that affect their lives?"*

This question is referred to hereafter as "the core BCO question".

These initial terms of reference prescribed that Component 3:

*should be a substantial and rigorous study with the active involvement of the partners in framing the research, supporting the data gathering, advising on the analysis and being consulted in the drafting of the final report.*

The full commitment of BCO partners is therefore essential to the success of the Component. It is not an exercise to be undertaken by the IA study team alone.

The initial terms of reference also noted that:

*Impact is very context specific and this will limit the learning that can be gained from a global study. It would have to focus on certain elements of strengthening voice. The study should aim to identify key factors and mechanisms, for example the relationship between audience and different tools, or media types.*

The purpose and structure of Component 3 were discussed by BCO partners with the IA study team during a workshop held in South Africa in December 2006, in light of the Component 1 report. The following terms of reference, and associated work programme have been drawn up in light of that discussion.

### **3. Purpose:**

The objectives of Component 3 are as follows:

External objectives:

- a. to contribute to the overall evidence base concerning ICD;
- b. to enable BCO partners to present this evidence within ongoing debate about the efficacy of ICD to a range of target audiences.

Internal objectives:

- c. to contribute to BCO partners' understanding of the impact of their work;
- d. to identify and share lessons that can be learnt from partners' experience; and
- e. to improve the monitoring, evaluation and impact assessment capacity of BCO partners for the future.

### **4. Methodology:**

The BCO Alliance has selected as the methodology for Component 3 an investigation of evidence (from global and BCO sources) relating to three hypotheses, as follows:

1. *"Informed, inclusive and participatory communications reshape policy agendas and improve the delivery of services critical to people's lives." (This hypothesis will be considered with specific reference to the health sector.)*
2. *"Information and communication resources and capabilities among the poor and marginalised deepen democracy and enhance democratic institutions."*
3. *"ICTs help to make markets work for the poor."*

The purpose of investigating these hypotheses is:

- a. to identify and assess evidence from within the experience of BCO partners, including experience funded by BCO, which addresses and questions the validity of the hypothesis concerned;
- b. to contribute analysis of such evidence to the overall evidence base available for understanding the hypotheses; and
- c. to facilitate development of tools and other resources which will improve the capacity of BCO partners to undertake evaluation and impact assessment in these areas in future.

## **5. Limits to the methodology:**

It should be noted that BCO experience alone can offer only partial, limited evidence regarding these hypotheses. Impact assessment, in particular, requires significant time to have elapsed between interventions and their assessment taking place. The evidence base for Component 3 therefore needs to draw on BCO experiences which have significant longevity.

In addition, the time and resources available to the IA study team are insufficient for a comprehensive study of the external evidence available for each hypothesis. The Component will therefore build explicitly on selected experiences of BCO partners, which will be reviewed in partnership with those BCO partners responsible for the work under review.

## **6. Work to be undertaken by the IA study team**

During Component 3, the IA study team will work with BCO partners to:

- a. develop research questions for the investigation of the hypotheses;
- b. develop a research matrix outlining the available evidence base for investigation of the hypotheses;
- c. conduct a series of one-day impact assessment workshops, up to one per BCO partner, as described in the attached work programme (these will normally be held before the end of March 2007);
- d. select up to six specific and precisely defined BCO partner experiences, *i.e.* clearly defined programmes, projects or clusters of projects (two per

- hypothesis), which are most likely to make a significant contribution to knowledge concerning the hypotheses;
- e. review these specific experiences in conjunction with BCO partners, in sufficient detail to elucidate such impact as can be determined, within the limits of time available to the IA team and BCO partner personnel concerned;
  - f. contextualise this evidence and the hypotheses, through desk research, discussion with selected specialists and reference to other BCO experience;
  - g. assess and report on:
    - i. the extent to which conclusions can be drawn from this evidence concerning the hypothesis and the core BCO question (see above);
    - ii. the conclusions which can be so drawn;
    - iii. evidence concerning factors which appear to increase or decrease the likelihood of impact;
    - iv. questions raised by the evidence which need further enquiry;
  - h. present the findings of Component 3 in two outputs as described below, and at a Component 3 closing workshop to be organised by the BCO facilitator.

## **7. Outputs to be developed by the IA study team**

The following outputs will result from the work set out above:

Output 1: an impact assessment report, which presents the evidence and lessons learnt. It is expected that this report will be between 25,000 and 35,000 words in length.

Output 2: a set of recommended evaluation and impact assessment tools which BCO partners can use to enhance their future approach to and capacity for evaluation and impact assessment.

These outputs will be produced by the end of September 2007, unless a later date is agreed with the BCO Alliance in order to facilitate integration of work by BCO partners (which may or may not be work within Component 2).

The following subsidiary outputs will be generated as a result of the work described in the previous section:

- research questions;
- research matrix;
- reports of impact assessment workshops held in partnership with individual BCO partners.

Four progress reports will be submitted to BCO, at the end of February, April, June and August 2007.

## **8. Cooperation between BCO partners and the IA study team:**

As envisaged in the initial terms of reference, close cooperation between BCO partners and the IA study team will be essential to maximise the scope, scale and value of the findings resulting from Component 3. Integration between Component 2 and Component 3 activities will also have a major impact on these outcomes. The quality of outcomes of Component 3 will depend substantially on the quality of this cooperation and the extent of this integration.

BCO partners will clarify the amount of BCO partner person-time which each agency commits to work with the IA study team on the work described in section 6, either before or during the workshops described in 6)c) have taken place. The work and outputs described in sections 6 and 7 and in the associated work programme may need to be reduced if BCO partners are unable to commit sufficient time and resources to work with the IA study team.

## **9. Work which is not to be undertaken by the IA study team:**

The IA study is not responsible, within this contract, for undertaking:

- research, analysis and other work which requires time beyond that set out in the contracted work programme;
- any work which forms part of Component 2 of the Impact Assessment;
- any work which would normally be undertaken by the BCO Alliance or BCO partners;
- the preparation of any advocacy or promotional material, or of any outputs not described in section 7 above;
- any logistical arrangements for impact assessment workshops, the Component 3 closure workshop or other meetings that may be required;
- any other work which is not described in section 6 above.

The BCO Alliance or individual BCO partners may reach separate agreements with the IA study team or its individual members to work with them on Component 2 activities or other work which is included in the list of points within this section. However, no such work will form part of these terms of reference, its associated work programme or the Impact Assessment study contract.