“Clowning Connects Us – ClowNexus”
baseline evaluation:

Terms of Reference

1. Project Background

Summary of the project

“Clowning Connects Us – ClowNexus” is a three-year project co-funded by the European Union in the context of their programme Creative Europe. The project involves eight (8) European healthcare clowning organisations (RED NOSES Clowndoctors International and seven partners), with the aim of promoting and facilitating access to culture, cultural outputs and artistic activities for vulnerable groups and creating more expertise in the European healthcare clowning sector.

The project seeks to tackle a lack of interactive artistic performances developed with and for people with dementia and children with autism spectrum disorder (ASD) – both having difficulties to get full cultural rights and access to cultural participation. Co-creation methodologies are not in place for these target groups and require the sensitive involvement of related stakeholders like parents, families and caretakers.

The project will facilitate transnational artistic laboratories where clowning artists from different organisations will exchange on good practices and develop new methodologies to interact with people with dementia and children with ASD, based on state-of-the-art education and with the collaboration of international experts.
"Clowning Connects Us” foresees to implement a strong audience-focused approach and to include the target groups not only during the performances, but already during the creative process when developing the tailor-made artistic formats. Newly developed artistic formats and approaches will be tested with local health and social care partners in the countries where the partner organisations work.

The project aims to strengthen the know-how and capacity of organisations and artists working in the European healthcare clowning sector relating to:

- The development and testing of co-creation models between artists, audiences, their families, social experts and artists from other artistic fields;

- Collaborations, exchanges and strengthened networks of Healthcare Clowning Artists and Organisations on a European level;

- Strengthening the capacities of healthcare clowning organisations to employ Monitoring and Evaluation systems and tools measuring the impact of healthcare clowning interventions on audiences as well as the quality of the artistic content.

The innovative approach of ClowNexus is also achieved by accompanying self-assessment tools and the collection of data. As part of this project, a very practical M&E tool-kit will be developed and distributed among all of the partner organisations. The toolkit will benefit healthcare clowning organisations by providing simple tools to evaluate the impact of their activities on the wellbeing of audiences as well as the artistic quality of performances. The tool-kit will include self-assessment, an observation checklist, and guidelines on how to maximise the participation of audiences in the monitoring process.

The specially designed toolkit is aimed for cultural managers and artists who are new to formal measures of impact and quality. The toolkit will be trialled after each artistic laboratory, and cultural managers and artists will use the data generated for continuous learning. The data produced by the toolkit will also contribute to the final project evaluation, as a complement to the rest of the data collected by M&E experts.

Guidelines on how healthcare clowning organisations can include audiences in the development of formats, will influence the sector in their work with new and old audiences by putting into practice the systematic use of audience development strategies.

The project will contribute to the visibility and awareness raising of the added value of clowning for arts and inclusion, as well as for arts for health & wellbeing in general.
Implementing organisations

ClowNexus is a project led and coordinated by RED NOSES Clowndoctors International (RNI) and implemented with seven (7) more partner organisations based in Austria, Croatia, Spain, Finland, Hungary, Lithuania and the Netherlands. These organisations are: Verein Rote Nasen Clowndoctors in Austria; Crveni Nosevi Klaunovidoktori in Croatia; Pallapupas in Spain; Sairaalaklouvat ry in Finland; Piros Orr Bohodoktorok Alapítvány in Hungary; Raudonos Nosys Gydytojai klounai in Lithuania; and Stichting Cliniclowns Nederland in the Netherlands. The partners in this project are Healthcare Clowning Organisation specialising in clowning for vulnerable groups. As Healthcare Clowning Organisations, they use a cross-sectoral approach that strengthens the linkages between culture, health and social inclusion.

RNI, the lead partner, is an Austrian Non-Profit Organisation (NPO) that brings together artistic and scientific expertise in the interface of performing arts, healthcare, social and development work. As a headquarter, RNI currently coordinates activities of 11 organizations in Europe and the Middle East. RNI encourages the development of artistic formats and stimulates the exchange of approaches and know-how in the artistic field of healthcare clowning. It helps build capacity of national healthcare clown organisations by providing practical support in training, quality management, PR and fundraising. A great emphasis is placed on providing high quality artistic training to clowndoctor artists through the implementation of international workshops at its main training platform - the International School of Humour (ISH).

Six of the seven partner organisations will develop, actively test and implement the newly developed artistic formats and approaches in their programmes; whereas one organisation (Stichting Cliniclowns Nederland) will be in charge of organising and hosting the “Healthcare Clowning International Meeting” in 2021. The meeting will be a crucial component of the project, to exchange ideas and good practices outside of the project consortium on interacting via participatory artistic performances with children with ASD and elderly people with dementia, raise awareness on the importance of arts for wellbeing and to advocate for the right to access to artistic activities, especially for vulnerable groups.

Project objectives

1. Social inclusion

The developed performances will offer the audiences the possibility to actively enjoy artistic interventions that aim to have a positive effect on their life-quality, well-being and mental health. The artistic interactions will also positively affect the social inclusion of the target groups by providing them access to cultural activities and by connecting audiences, family members and caretakers through the creative interactions.
2. Capacity building of organisations and artists in the European Healthcare

The partners will develop and test methodologies on how to involve audiences, their families and social experts as early as possible in the development process of performances tailored to the needs of the audiences. To date, the partners lack tested and evaluated methods and systematic approaches on how to include the voices of audiences and their environments. This project will change this and produce findings, learnings and know-how, benefitting the wider healthcare clowning sector. Moreover, it will put a special emphasis on the on-going artistic education of the clown artists, and raise the know-how of cultural managers and artists in the set-up and implementation of audience development strategies.

3. Fostering transnational mobility and internationalisation of artists and cultural managers

“Clowning Connects Us” will offer 20-25 artists opportunities for transnational mobility by attending artistic laboratories in six different EU countries, connecting them with local audiences and exposing them to different cultural and linguistic settings.

4. The project will contribute to the visibility and awareness for arts for wellbeing in Europe

2. Evaluation scope

The Evaluation will provide a situational analysis at the start of the activities within six of the seven partner organisations of ClowNexus who will be implementing artistic activities¹. The six partners involved in this evaluation are: Verein Rote Nasen Clowndoctors in Austria; Pallapupas in Spain; Crveni Nosevi Klaunovidoktori in Croatia; Piros Orr Bohocdoktorok Alapitvany in Hungary; Raudonos Nosys Gydytojai klounai in Lithuania; and Sairaalaklovnit ry in Finland.

The evaluation will establish baseline values and targets for all indicators, disaggregated by gender. This will be guided by the Impact Table of the Application report for the project (see Annex 1), which describes the desired impact on a short, medium and long term, target groups and qualitative and quantitative indicators.

The baseline will also provide an analysis of the current state of the M&E of the artistic activities within the six partner organisations, identifying the gaps and providing input and recommendations on how to improve them. Furthermore, it will provide recommendations for

¹ Excluding Stichting CliniClowns Nederland, which will exclusively be in charge of organising and hosting the annual “Healthcare Clowning International Meeting” in 2021. Red Noses International has a coordinating role within the project, and will not implement artistic activities with the target groups.
the drafting of a comprehensive M&E toolkit for measuring the impact and quality of interactive healthcare clowning performances with vulnerable groups.

The baseline will lay the foundation for regular, ongoing monitoring activities. This will enable assessment of progress on implementation, assess any early signs of effectiveness and document any lessons learned. If appropriate and the needs arises, the baseline results will be used to inform revision of the project indicators and targets.

Finally, the baseline indicators will serve as benchmarks for assessing the impact of the project during the endline evaluation.

3. Evaluation Objectives

The objectives of the ClowNexus Evaluation are as follows:

A. Provide a situational analysis of the artistic programmes within six of the eight partner organisations of ClowNexus who will be implementing artistic activities within the project. The situational analysis will document what the conditions for implementation are at the baseline, taking into consideration the expected impact, target groups and indicators mentioned in the Impact Table (see Annex 1). Any key shortcomings or challenges will be identified.

B. Establish baseline values and information for regularly monitoring of the project, keeping in mind they will serve as benchmarks for the final evaluation.

C. Present an accurate and nuanced picture of the M&E tools and activities in place in the six implementing partners involved in the project.

D. Identify the gaps in the M&E activities of the six partner organisations and give recommendations for improvement.

E. Present recommendations for the drafting of a user-friendly “toolkit” of impact measurement tools for healthcare clowning organisations.

4. Uses of the Evaluation

The results of the baseline evaluation will be used to inform the partner organisations, the donor and the stakeholders on the current involvement of vulnerable groups in the development of artistic projects, and to justify the need for the ClowNexus project. Moreover, the results of the
evaluation will support RNI in setting-up a monitoring and evaluation system for the ClowNexus project, support the partners in its implementation and support the design of a user-friendly toolkit of impact measurement tools for healthcare clowning organisations.

5. Evaluation Questions

The baseline will establish values for each of the quantitative and qualitative indicators in the Table of Impact (annex A). More specific evaluation questions will be shared at a later date.

6. Approach and Methods

This evaluation involves vulnerable groups such as people with dementia and children with ASD. As such, it demands strict adherence to international ethical standards and to RED NOSES Safeguarding Policy. The evaluation team must take extra measures to ensure that they promote the wellbeing of everyone who is participating in, or affected by the research process. The dignity and autonomy of all those involved in the research process must be respected in all phases of design, implementation, and reporting.

As an international study, it is vital that the evaluation be conducted with a high level of cultural sensitivity and respect. In particular, the evaluation needs to make suitable plans for translations and interpreters for the data collection process, to ensure that participants are not excluded on the basis of language.

It is expected that the evaluation will apply a mixed-method approach using quantitative and qualitative data for data collection, analysis and interpretation. In addition, it should use existing information and data sources. All data, qualitative and quantitative, collected through the assessment must be disaggregated by location, age and sex. Concerning the quality of data and information, the evaluator or evaluation team should systematically check accuracy, consistency and validity of collected data and information and acknowledge any limitations/caveats in drawing conclusions using the data.

- Desk Review: Publically available information and data sources will be particularly important for assessing the situational analysis of the partner organisations, including their M&E activities and their efficiency (for example Project Applications, Final reports, Evaluation reports, Baselines, Needs Assessments, Endlines, Proposal LogFrames, etc.).

- Interviews and focus group discussions: Qualitative information gained through interviews and focus group discussions may be a helpful tool to assess the level of awareness of the stakeholders (the artists and the management team) regarding the
specific needs of vulnerable groups. These tools will also be helpful to understand the level of exchange and co-creation amongst artists, and between artists and audiences. At last, interviews may be useful to assess the effectiveness of the M&E process in place among the partner organisations, to identify the gaps and make recommendations accordingly.

- Surveys: Quantitative information relevant to both needs and impact questions may be collected through surveys.

7. Timeline

The project “Clowning Connects Us” will start on November 2, 2020.

The evaluation is scheduled to begin in October 2020 and to be completed within four months, so by the end of February 2021 at the latest.

This timeline is foreseen as follows:

<table>
<thead>
<tr>
<th>Month</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 2020</td>
<td>Inception phase</td>
</tr>
<tr>
<td>November 2020  – January 2021</td>
<td>Data collection</td>
</tr>
<tr>
<td>February 2021</td>
<td>Submission and presentation of final report</td>
</tr>
</tbody>
</table>

8. Management

The evaluation team leader will report to the Research and Evaluation division of RNI, which is based in Vienna, Austria. A minimum of four meetings with the team leader are foreseen, which can be done virtually or in person depending on the location of the team leader:

<table>
<thead>
<tr>
<th>Month</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 2020</td>
<td>Kick-Off</td>
</tr>
<tr>
<td>November 2020</td>
<td>Draft Inception Report Feedback</td>
</tr>
<tr>
<td>February 2021</td>
<td>Draft Evaluation Report Feedback</td>
</tr>
<tr>
<td>February 2021</td>
<td>Final Presentation and Overall Feedback</td>
</tr>
</tbody>
</table>

The evaluation team leader must be available for additional meetings as required, and for general communication throughout the evaluation process via email and Skype.
9. Deliverables

- Draft inception Report *(due end of October 2020)*
  - Overview of research methods
  - Data collection schedule
  - Location of site visits
  - All evaluation tools (interview questions, surveys) in English
- Final inception report *(due November 2020)*
  - Revisions and suggestions from RNI taken into account
- Draft evaluation report *(due end January 2021)*
  - Executive summary with key findings and recommendations
  - All evaluation questions answered
  - Inclusion of the most significant stakeholders
  - Inclusion of all project countries
  - Clear differentiation between findings, conclusions, and recommendations
  - Conclusions and recommendations based on findings
  - Information presented clearly and simply, avoiding unnecessary jargon
- Final evaluation report *(due February 2021)*
  - Revisions and suggestions from RNI taken into account
- Raw data *(due February 2021)*
  - All raw data collected as part of the evaluation (which will be the property of RNI)
- PowerPoint presentation of findings and recommendations *(due February 2021)*
  - Clear and visually engaging of key messages, suitable for a variety of stakeholders

10. Budget

A fixed budget of maximum 15,000 EUR (all taxes included) is available. This budget includes, for example, fees for all team members, translation costs, and any other incidental costs that may arise during any phase of the evaluation. In addition, an extra 1,000 EUR (all taxes included) is available for every trip to a partner office, for a maximum of 6,000 EUR (all taxes included) for six trips. This is a capped amount and will cover travel costs, accommodation costs, per diems etc. Any and all costs and expenses exceeding this amount and which might be incurred by the contractor(s) due, for example, to an event of force majeure or otherwise, are to be borne solely and exclusively by the contractor(s).
11. Evaluation Team

It is expected that a team will be needed to gather data in six countries in the timeline available.

We are looking for a team that meets the following criteria:

- Master’s Degree in a relevant field
- Experience in Monitoring & Evaluation of cultural projects
- Experience in conducting evaluations of artistic programmes (minimum 5 references)
- Experience conducting needs assessments
- Experience conducting research or other work with vulnerable groups, including children with disabilities
- Experience in quantitative and qualitative data collection and analysis (minimum 7 years)
- Experience or demonstrable interest in artistic interventions
- Excellent spoken and written English. Other languages spoken in the target countries are an asset

To apply, please send the following to smile@rednoses.eu by September 18, 2020:

1. A brief conceptual note of your understanding of this evaluation and your methodological approach
2. A reference list of relevant assignments
3. Your CV or the CVs of the experts proposed for this evaluation.
4. Information on costs charged in EUR (daily rates, travel and totals).

Applications will be considered on a rolling basis.
## Annex 1 – Table of Impact

<table>
<thead>
<tr>
<th>Short term impact</th>
<th>Target groups</th>
<th>Quantitative indicators</th>
<th>Qualitative indicators</th>
<th>Description/comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Artists have experience using co-creation models together with audiences and social experts for dementia and ASD</td>
<td>Artists, people with dementia, children with Autism Spectrum Disorder, Organisations providing care to persons with dementia or children with ASD</td>
<td>Two laboratories held in which artists employ co-creation models with audiences</td>
<td>People with dementia and children with Autism Spectrum Disorder participate substantially in the co-creation of the new artistic formats</td>
<td>Occurs during “Phase 2” of the artistic laboratories, in which artists and audiences meet to co-create artistic formats. The co-creation process includes assessment, reporting, artistic diaries, and exchange with international peers.</td>
</tr>
<tr>
<td>Improved access to interactive artistic performances for vulnerable groups</td>
<td>People with dementia and children with Autism Spectrum Disorder, Organisations providing care to persons with dementia or children with ASD</td>
<td>2742 performances delivered in 6 countries in geriatric institutions</td>
<td>Vulnerable groups have reduced barriers to their participation in artistic performances</td>
<td>The interactive artistic performances designed through co-creation models should be better able to accommodate the needs of people with dementia and children with ASD, leading to reduced exclusion of these groups from artistic experiences.</td>
</tr>
<tr>
<td>Increased awareness about specific needs of vulnerable groups</td>
<td>Cultural managers and artists, (cultural and social) policy makers in the EU</td>
<td>16 cultural managers and 23 artists can report on new needs they have learned of people with dementia and children with Autism Spectrum Disorder</td>
<td></td>
<td>The interactive artistic performances designed through co-creation models should be better able to accommodate the needs of people with dementia and children with ASD, leading to reduced exclusion of these groups from artistic experiences.</td>
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<tr>
<td>Increased international exchange of inspiring practices and co-creation between international artists</td>
<td>Healthcare Clowning Artists, and Artists from other Artistic fields</td>
<td>6 artistic laboratories held with international artists</td>
<td>Artists report feeling inspired through the international exchange</td>
<td></td>
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<tr>
<td>Availability of a specially designed toolkit for measuring the impact and quality of artistic activities</td>
<td>Cultural managers and artists, (cultural and social) policy makers in the EU</td>
<td>One new tool designed to measure the quality of different co-creation models distributed to artists and cultural managers in seven partner countries</td>
<td>The tools are easy to use without previous training or experience in monitoring and evaluation. The tools generate useful knowledge for cultural managers and artists.</td>
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<table>
<thead>
<tr>
<th>Medium term impact</th>
<th>Target groups</th>
<th>Quantitative indicators</th>
<th>Qualitative indicators</th>
<th>Description/comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Artists are able to create new artistic formats adjusted for target group needs</td>
<td>Artists</td>
<td>One new artistic format for elderly with dementia is created</td>
<td>The use of co-creation models make the resulting formats more sensitive to the</td>
<td>The formats created and the capacity built through the co-creation process will have an impact that extends beyond the life of the project.</td>
</tr>
<tr>
<td>Long term impact</td>
<td>Target groups</td>
<td>Quantitative indicators</td>
<td>Qualitative indicators</td>
<td>Description/comments</td>
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<tr>
<td>Improved well-being of vulnerable groups</td>
<td>People with dementia and children with Autism Spectrum Disorder</td>
<td>People with dementia and children with Autism Spectrum Disorder that have benefitted from the performances display improved well-being</td>
<td>Specific indicators of higher well-being include improved positive memories, improved self-image, improved attention and energy</td>
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<tr>
<td><strong>Co-creation models are recognised as effective and are being used by Healthcare Clowning organisations and other artists</strong></td>
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<tr>
<td><strong>Healthcare Clowning organisations and other artists</strong></td>
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<tr>
<td><strong>Cultural managers and artists create action plans to continue using co-creation models to create new artistic formats</strong></td>
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<td><strong>The evidence created and disseminated through the use of the toolkit will help to popularise the use of co-creation models in the healthcare clowning community</strong></td>
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<thead>
<tr>
<th><strong>M&amp;E tool-kits are recognised as effective and are being used in Healthcare Clowning organisations and other artists</strong></th>
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<tr>
<td><strong>Healthcare Clowning organisations and other artists</strong></td>
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<tr>
<td><strong>30 Healthcare Clowning organisations receive the M&amp;E toolkit</strong></td>
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<tr>
<td><strong>Cultural managers and artists report that they have adopted or plan to adopt the tools into their regular practice</strong></td>
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<td><strong>By pioneering more rigorous and easily scalable methods of quality and impact control, the project will help raise M&amp;E standards throughout the healthcare clowning community</strong></td>
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<tr>
<th><strong>Decision makers on the European level and locally recognise high need for arts for well-being, and recommend healthcare clowning as good and encouraged practise</strong></th>
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<tbody>
<tr>
<td><strong>Cultural and social decision makers on the European level and locally</strong></td>
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<tr>
<td><strong>Increased support for arts for well-being and healthcare clowning expressed by cultural and social decision makers</strong></td>
</tr>
<tr>
<td><strong>Cultural and social decision makers can be members of parliament, cultural ministries, etc.</strong></td>
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</tbody>
</table>