

## TERMS OF REFERENCE

### Consultancy to Conduct a Formative Research on Knowledge, Attitudes and Behaviours (KAP) among families, professionals and decision makers towards Children with Disabilities in the province of Kon Tum and develop a Communication for Development (C4D) plan

#### Summary

<b>Title</b>	<b>Consultancy to conduct a research on Knowledge, Attitude, Behaviours (KAP) and barriers to change of families, professionals and decision makers towards children with disabilities and development of a C4D plan in Kon Tum Province</b>
<b>Purpose</b>	To provide technical consultancy in carrying out a formative study related to children with disabilities
<b>Location</b>	Viet Nam, Kon Tum Province
<b>Duration</b>	November, 2018-January, 2019
<b>Start Date</b>	Immediately after signing of contract
<b>Reporting to</b>	Communication for Development Officer/Chief of Communications

#### Background

In 2014 UNICEF Viet Nam actively engaged in advocating the Government of Viet Nam about the ratification of the Convention on the Rights of People with Disabilities (CRPD) through provision of technical advisory and evidence generation to inform the process. Upon ratification, the country office capitalized on the CRPD to catalyse further work on children with disabilities including generating information and using research findings to inform policy advocacy on inclusive service provision and social inclusion of the children with disabilities and also addressing stigma and discrimination that are barriers to fulfilment of their rights.

According to information gathered in the 2009 UNICEF study *Research Report on Children with Disabilities and their families in Da Nang: Knowledge - Attitudes – Practices*<sup>1</sup>, while over 90 per cent of 150 study participants said that they respected children with disabilities and their families, and believed that disability could happen to anyone, 60 per cent considered boys and girls with disabilities to be a burden on their families and society, and thought that the majority of children with disabilities lived in poor families. Eighty-five per cent of them believed that children with disabilities depended on others most of the time, and 73 per cent thought that they were treated well by Vietnamese society. Financial constraints and lack of knowledge about the needs of children with disabilities were claimed to be the key obstacles hindering community support. Furthermore, lack of knowledge regarding the rights of people with disability and their capacity as well as their needs is a key issue, not only with the general population but also with health and education professionals, making issues of prevention, identification and early intervention critical in Viet Nam.

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<sup>1</sup> UNICEF (2009) *Research Report on Children with Disabilities and their families in Da Nang, Knowledge - Attitudes – Practices*

Individual perceptions (and misconceptions) regarding impairments, guide general judgement towards the abilities of children with disabilities and children with multiple impairments or intellectual disabilities are more likely to be discriminated against. While data shows limited understanding of rights of children with disabilities, current social practices tend to hide, pity or stigmatize children with disabilities.

Information gathered through research and studies confirm that the general perceptions of children with disabilities in Viet Nam are based on lack of information on children's rights and lack of reliable information about disabilities. Children with disabilities are largely seen as objects of charity, unable to participate fully in life with their abilities. At the same time, many professionals including those in service provision are of the opinion that persons with disabilities themselves are lacking the type of information that will allow them to become independent and self-advocates. Through discussions with professionals, it became evident that professionals are well-intended, and most seemed willing to consider ways in which they can engage in, and support, the participation of children with disabilities in their areas on intervention.

Disability is different but also all of us are different: we have different eye colour, different cultures and traditions... all people are different and we should respect these differences. We should not think of normalizing them and bringing them to our standards, we have to create an enabling environment for everybody to feel equally important. We should shift the medical/rehabilitation model. For example, if someone has only one leg, you can have prosthesis to help him to function properly, but you cannot bring him to the norms, there is the need to create an environment that is enabling him to function. This should be the key message to deliver to the society to change their mentality and attitude.

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A more recent (2011) MoLISA & UNICEF qualitative study *Children with Disability in An Giang and Dong Nai, Knowledge – Attitude – Practice*<sup>2</sup> corroborated the above findings with regards to the lack of knowledge about disabilities. This lack of knowledge was reflected in the practices of health and rehabilitation professionals, as well as education professionals with issues related to early identification and intervention persisting, as well as lack of understanding as to the right to education of children with disabilities. In addition, the study found a consistent lack of coordination among service providers, and insufficient oversight of rights' compliance.

While some information is available with regards to the knowledge, attitudes and perceptions of the public in general vis-à-vis children with disabilities, it is also important to investigate how these are reflected in professional roles, particularly of those professionals who are most directly in contact with children with disabilities and their families<sup>3</sup>.

UNICEF Vietnam has adopted a multi-sectoral, rights-based approach towards implementation of children with disabilities-related strategies and programs, guided by both the Convention on the Rights of the Child (CRC) and the CRPD. The findings of the proposed study should be considered within the social model of disability within the broader context towards a social inclusion model for persons with disabilities. The social model, which is often contrasted to the medical model which sees disabilities as synonymous with impairment.

Under the context of the REAP II grant made available to Viet Nam and as part of the work plan designed to utilize the funding, a study to gather information on the knowledge, attitudes and practices (KAP) of the professional service providers, families and local policy makers is planned for conduction in the province of Kon Tum in order to inform interventions in the areas of communication for development to reduce stigma and discrimination against people with disabilities and particularly children with disabilities and promote social inclusion in all aspects of their lives. Based on the recommendations of

<sup>2</sup> Ministry of Labour, Invalids and Social Affairs & UNICEF (2011) Qualitative Research Children With Disability in An Giang and Dong Nai, Knowledge – Attitude – Practice

<sup>3</sup> Situation analysis for REAP II grant, UNICEF Vietnam (2016)

the study, a communication plan will be developed and disseminated to local government counterparts for implementation.

The consultancy is envisaged to carry out the KAP study and deliver a C4D framework with a focus on three key groups of participants: (1) service providers/professionals across the sectors of Education, Health and Child Protection and transportation; (2) families of the children with disabilities and families without children with disabilities; and (3) local authorities who are policy makers on issues related to people with disabilities and children with disabilities. The study is expected to be both a quantitative and qualitative research.

### Purpose of the TOR

The overall purpose of the TOR is to recruit a research institution or an individual consultant/a team of consultants who are capable of carrying out the study under the technical management of C4D team and in close consultation with programmatic technical experts. The consultancy is planned to take place in November 2018 to January 2019.

### Objectives

**Overall objective:** to contribute to promoting social inclusion of children with disability in the province.

**Specific objectives:**

- To measure the perceptions and current knowledge, attitudes and practices (KAP) of three key groups of participants towards children with disabilities and their families: (1) service providers/professionals across the sectors of Education, Health and Child Protection; (2) families of the children with disabilities and families without children with disabilities; and (3) local authorities who are policy makers.
- Formulate/develop a Communication for Development (C4D) framework (or strategies and a plan of actions?) to change individual behaviors and generate social change for implementation across sectors in Kon Tum as a result of the recommendations of the study.

### Methodology and Scope

The study design will consist of two components: **(1) a KAP study** that employs a mixed approach of quantitative and qualitative methods as necessary to meet the information needs that explore not only the current KAP but also the ***barriers against social inclusion of children with disabilities***; and **(2) a C4D plan** that informs communication interventions across key sectors. A human rights-based approach should be adopted across all aspects of the research. This approach should incorporate the following:

- 1) Participatory assessment: respect different views of stakeholders and right holders, including children and their parents.
- 2) Non-discrimination: reflect the exclusion-discrimination of children with disabilities across ages, gender and types of disabilities.
- 3) Gender/Age: male and female, adults' and children's points of view.

The children with disabilities (and their families) participating in the study should include to the extent of: *children with hearing impairment, children with visual impairment, children with mobility impairment, children with intellectual disability and children with multiple disabilities.*

**Location:** The study is envisaged to cover two phases (KAP component) and take place in **at least 05 districts** of the province of Kon Tum.

### The KAP component:

**The quantitative phase – Community Survey:** The main objective of this phase is to measure and analyze the perceptions and KAP of the community (including the mentioned target participant groups) of Kon Tum towards children with disabilities and their families. A random sampling method is employed to ensure the representativeness of the province for each key target group.

- Familiarity with the problems met by children with disabilities and their families, their needs and expectations.
- Support to facilitate the integration of children with disabilities into the community
- How they see the activities of the Government and other development organizations in their community.
- The use of communication channels and media habits.

**The qualitative phase – Ethnography, Focus group discussions and Face-to-face interviews:** The main focus of this phase is to deepen the understanding of the prevailing knowledge, attitudes and practices of the local professionals as service providers working across the sectors, local authorities and community networks as key stakeholders towards children with disabilities and their families, of the social and cultural factors, practices and norms that could favor or hinder social inclusion and integration of children with disabilities into the society and their community.

At the same time, the qualitative part of the study will look into the social and physical factors, the self-efficacy that could favor or hinder children with disabilities and their families in the access to social services and social integration and inclusion.

A purposive sampling method is employed to understand insights of identified attitudes and practices of each key target group.

Also, it will look at the knowledge of children with disability and their care givers of the existing policies and programmes for them and in order to design communication outreach interventions to raise demand and effectively disseminate policies and programmes for this target group.

**Ethnography:** A certain number of children and their families are selected for the ethnographical interventions in at least 03 districts of the province of Kon Tum.

**Focus group discussions:** the discussions aim at families (parents) of children with disabilities and their children; professionals as service providers working in the sectors of health, child protection and education and transportation and other stakeholders such as the mass organizations (Women's Union and Youth Union) as community networks; and local authorities and policy makers.

For quantitative assessment, face-to-face interviews with selected participants of the mentioned target participant groups are required with a gender-balance approach. These stakeholder-45-minute interviews should include the professionals (service providers), mass organizations as community networks, and local authorities of the sectors of health; education and training; labor, invalids and social affairs, transportation and the local coordinating committees on disability. Focus group discussions should also be designed for this purpose.

**The C4D plan:** Based on the findings of the formative research, the selected institution/consultant(s) are expected to develop a C4D plan and relevant behavioural monitoring indicators. The C4D plan should propose interventions required among service providers, family members, community support including teachers, outreach workers and local leaders and enabling environment that needs to be advocated for to ensure integration and social inclusion of children with disabilities.

### Specific Tasks and Deliverables:

No	Activities and Tasks	Expected Deliverables	Timeframe (indicative)
1	Develop and finalize the research design and data collection plan including detailed methodology, sampling and participant selection upon agreement with UNICEF and relevant counterparts.	Inception report agreed that outlines the overall design for undertaking the assessment and plan for finalizing the report.  <b>(Deliverable 1)</b>	3 working days
2	Develop and pre-test tools: questionnaire and discussion guide of key informant interviews and focus group discussion.	Questionnaires and Qualitative tools finalized.  <b>(Deliverable 2)</b>	5 days (including pre-testing time)
3	Collect quantitative and qualitative data in 05 districts of the province of Kon Tum.	Primary data collected  <b>(Deliverable 3)</b>	15 days
4	Data analysis and produce draft report in English and Vietnamese.	Data analysis and draft report  <b>(Deliverable 4)</b>	10 days
5	Develop exploratory strategic communication for development (C4D) plan <ul style="list-style-type: none"> <li>Based on the formative research to develop C4D plan and relevant behavioural monitoring indicators indicators. The C4D plan propose interventions required among service providers, family members, community support including teachers, outreach workers and local leaders and enabling environment that needs to be advocated for to ensure integration and social inclusion are promoted and sustained.</li> <li>Share draft C4D plan and relevant indicators for comments and revision.</li> <li>Develop final C4D plan in English and Vietnamese.</li> </ul>	An evidence-based C4D plan is developed in both languages.  Formative research findings and the plan are disseminated for feedback to Government counterparts including sector partners and related development agencies.  <b>(Deliverable 5)</b>	8 days
6	Conduct a consultation workshop with local stakeholders to gather inputs in finalizing the study and the C4D plan.	A report of the workshop with specific inputs to be included for report and the C4D plan finalization is made available in both languages. <b>(Deliverable 6)</b>	1 day

7	Finalize the report in English and Vietnamese and supporting documents (abstract, executive summary, power-point presentation, etc.) and the C4D plan in both languages.	Revisions to the draft report and deliver Final Report and the final C4D plan in both languages. <b>(Deliverable 7)</b>	5 days
	<b>TOTAL</b>		47 days
<b>Payment schedule</b>			
	<b>First payment of 30%</b>	<b>Upon completion of Deliverable 4</b>	
	<b>Second payment of 40%</b>	<b>Upon completion of Deliverable 5</b>	
	<b>Final payment of 30%</b>	<b>Upon completion of Deliverable 7</b>	

#### Criteria for assessment:

Technical Criteria	Technical Sub-criteria	Maximum Points
<b>Overall Response</b>	Completeness of response	2
	Overall concord between TOR/RFP requirements and proposal, including technical, company/individual profile and financial proposal	3
<b>Maximum Points for overall response</b>		<b>5</b>
<b>Track records and Experience</b>	Reputation of Organization and Staff (Competence / Reliability – For Institution)	5
	Range and depth of experience for academic studies and researches (For Individual)	
	Litigation and Arbitration history (For Institution) Proven track records with samples of projects and studies (For Individual)	10
	Quality assurance procedures	5
	Range and depth of experience with similar projects	5
<b>Maximum Points for Track records and Experience</b>		<b>25</b>
<b>Proposed Methodology and Approach</b>	Understanding of the TOR and its objectives as reflected in the overall proposal	5
	Research design as per TOR objectives	15
	Innovative approaches proposed	10
	Clarity demonstrated between research findings and implications for C4D plan	10
<b>Maximum Points for Proposed Methodology and Approach</b>		<b>40</b>
<b>TOTAL Maximum</b>		<b>70</b>

#### Weighted ratio between the technical and the price criteria: (70:30)

The ratio between the technical and the financial proposal for this task is 70:30 respectively. Only those proposals that score 50 points on the technical proposal will be shortlisted.

#### Submission

Interested institutions, foundations, research centres and individual consultants are requested to submit a 5-7 page proposal outlining the proposed research ideas and describing the comparative advantage of the institution/consultant(s) to undertake the formative research assignment. Other documents would need to supplement the proposal as per UNICEF's procurement policy for institutional and individual services.