

Consultant for Baseline Survey

Project: “New Integrated Development and Essential Action - Phase 2 (NEW IDEA 2) for Ethnic Minority Communities in Lai Chau and Tuyen Quang provinces”

TOR for baseline survey

1. Background:

Church World Service (CWS) is an American NGO, which began its work in Vietnam in 1954. Since then, CWS Vietnam has supported Vietnam continuously with projects primarily focusing on improving health services, access to water and sanitation, nutrition for children, education for ethnic minorities and disaster relief.

In 2017, CWS Vietnam and its project partners in Than Uyen district (Lai Chau province) and Chiem Hoa district (Tuyen Quang province) will begin the project “New Integrated Development and Essential Action – Phase 2 (NEW IDEA 2) for Ethnic Minority Communities in Lai Chau and Tuyen Quang provinces”. The project is funded by the Evangelical Lutheran Church in America (ELCA) and lasts for two years, 2017-2018. Under this project, many activities mainly focusing on capacity building, development and promotion of a safe and child-friendly learning environment, raising awareness of local people, education and promotion of health and hygiene behaviors, etc in ethnic minority communities in Than Uyen and Chiem Hoa districts will be implemented to achieve the following objectives and expected outcomes (results) of the project:

The NEW IDEA project objectives

1. Education: encourage and support quality, safe and student-friendly learning environments in schools
2. Health: enable and support quality, safe and patient-friendly health environments and practices;
3. Hygiene/Sanitation: help families and communities develop more sanitary/ hygienic environments.

Expected/planned outcomes (results)

Outcome 1: Teaching and learning improves

- Teachers and local education officials have increased access to information, expanded knowledge and improved skills.
- Schools are physically improved to foster safe and student-friendly learning environments in classrooms, libraries and boarding facilities.
- After-class activities complement children’s in-school learning.

Outcome 2: Basic health care improves

- Commune and village health care workers have increased access to information, expanded knowledge and improved skills for quality and patient-friendly care, especially for children.
- Clinics are supported with basic medical supplies, infection control / prevention education and measures.
- Women of childbearing age, pregnant women, new mothers and < 5 children are better cared for by Government health care workers in clinics and through outreach.

Outcome 3: Sanitation and hygiene improve

- People have increased access to information, expanded knowledge about safe water, sanitary latrines, garbage separation and waste management.
- Families, and some schools, have technical and material support to build clean, safe latrines, and to manage garbage: organic and inorganic.

- Communities have technical and material support to better manage garbage as well.

2. The baseline survey:

2.1 Purpose and specific objectives:

The baseline survey is necessarily conducted to collect and analyze data and information on current situation at this early stage of the project. The findings from survey will be used to measure the progress, achievement and impact of the project.

The specific purposes of the baseline survey include:

- To help identify a clear baseline picture of learning environment at schools in project communes; opinions and expectations of local people (education officials, school teachers, students, students' parents) toward a quality, safe and student-friendly learning environments in schools; the current situation (capacity, quality of and access to) of the learning environment for ethnic minority children, especially for girls and disabled children;
- To help identify a clear baseline picture of the healthcare service in project communes; opinions and expectations of local people (health workers, villagers) towards a quality, safe and patient-friendly health environments and practices; the current situation (capacity, quality of and access to) of the health services for ethnic minority people, especially children as well as sanitation and hygiene situation and practices of local people in project communes;
- To review and recommend with baseline situation for each project indicator to facilitate monitoring and evaluation of the project objectives and outcomes;

2.2 Expected outcome:

- Proposal paper with detailed methodology, field survey plan and data collection tools (questionnaires, interview guidelines, etc...);
- The final baseline report in Vietnamese and its translation into English that should include a table of appropriate indicators with baseline information recommended for monitoring and evaluation of project objectives and outcomes, and also stories from individuals, clinics and schools that may likely get involved, participated or benefited from the project.

2.3 Methodology:

The baseline survey will use both qualitative and quantitative tools to collect data and information from a variety of sources including local authority, related agencies, project beneficiaries; field observations; the project documents and other reports. This information should be gathered and reported using methods that provide accurate, representative and appropriately detailed information. Conclusions and recommendations must relate clearly and directly to the data and analysis presented in the body of the reports.

At all times the consultant team including a team leader and his/her team member(s) are expected to collaborate with CWS staff and project partners in Than Uyen and Chiem Hoa districts, either during the field survey or in the office. All survey forms, data collection and analysis, draft and final reports should be in consultation with CWS.

2.4 Work locations and timeline:

The consultant service is expected to be implemented within the period from September to November, 2017. As such, the field survey, of about 8-10 days including travel time, is expected to be carried out in project communes in Than Uyen and Chiem Hoa districts during September for the final report to be available by November 15th, 2017.

3. Professional requirements for consultant:

It is anticipated that a baseline team consisting of a leading consultant (Vietnamese) and his/her team members is needed. The team members will report directly to the leading consultant.

The below are professional requirements for the baseline consultant team:

- Experience in development project baseline, evaluation and analysis.
- Knowledge and practical experience in health and hygiene education and/or rural water and sanitation baseline surveys and analysis, as well as in raising people's awareness and behaviors in issues related to health and hygiene promotion.
- Knowledge and practical experience in basic education and in raising people's awareness and behaviors in issues related to gender, child rights and protection, child health and nutrition, child sexual abuse and trafficking, as well as disabled children.
- Good understanding and working experiences with ethnic minority populations, particularly those in the north-west of Vietnam
- Fluent written Vietnamese and English skills

The following experience and skills are seen as advantages:

- Good understanding of issues including gender, disability, health and nutrition, environmental sanitation.
- Experience in the child-friendly school library, the child-centered teaching methodology, the safe and child-friendly learning environment.
- Experience in IEC and in KAP survey methodology.
- Good communication, facilitation, analytical and writing skills.

Interested candidates please send an application letter and detailed CVs of all team members to cws@cws.org.vn no later than September 10th 2017.