

## TERMS OF REFERENCE

### Consultancy to conduct a survey on needs of older persons and develop policy recommendations for meeting individual needs of older persons and responsive & effective adaptation to rapid population ageing in Viet Nam

<b>Hiring office:</b>	Population and Development Team, UNITED NATIONS POPULATION FUND (UNFPA)
<b>Purpose of consultancy:</b>	<p><b>1) <u>Background</u></b></p> <ul style="list-style-type: none"><li>● Viet Nam started the ageing period in 2011, with 10.1% of the population aged 60 and over. In 2023, the number reached 14.3%. It is projected that Vietnam will enter the aged population (20% of 60+) by 2036, transitioning from an “ageing” to an “aged” society (GSO, 2020, Viet Nam Population Projection 2019-2069, P.31). By 2061, the proportion of people aged 60+ will occupy 30% of the total population (equivalent to 31.777 million OP aged 60+), Viet Nam will become a super-aged society (UN Population Division Department of Economic and Social Affairs).</li><li>● According to the recent analysis, poor health and disability are among the most common issues facing the older persons in Viet Nam. Nearly 45% of older persons have at least one difficulty in activities relating to daily living, and most of them (90%) want to receive care at home. The policy mapping report also shows that over 60% of the elderly have chronic diseases and are in need of long-term care services and long-life medical treatment. The need for comprehensive care and support among older people is increasing in terms of infrastructure and human resources (social workers, medical workers and care givers).</li><li>● In Viet Nam, almost all older persons (99.91%) live in family/home, and long-term care activities are primarily provided by family members. Only a very small number of older persons (0.083%) are cared for in institutions. The community-based health care system is very poor and highly fragmented. A few care models are currently being piloted in selected communities, but the coverage is very modest (just below 7% of villages in Viet Nam after 8 years of implementation).</li><li>● To support Viet Nam to enhance its <i>integrated and coherent social protection system, applying life-cycle and gender transformative approaches for ageing and meeting the individual needs of OP and more responsive &amp; effective adaptation to rapid population ageing</i>, UNFPA (United Nations Population Fund) has been working with MOLISA/DSA on revision of Law on the Elderly; with MOH/VNAE to develop a “master-plan on development and improvement of community based health care worker network and health care facilities for older persons to 2030 and vision to 2045”; with Central Youth Union (YU) to develop “a set of training materials on preparing Young People for Healthy Ageing”; with HAIV to promote “integrated and inclusive social protection and care for older persons (OP) in responding to population ageing” in communities; and with UN agencies to “Introduce and localize foresight and anticipatory governance curating a care economy for older persons in Viet Nam”.</li></ul>

	<ul style="list-style-type: none"> <li>● In order to provide the policy makers and experts with evidence-based data and information on the current situation and individual needs of OP, in response to the request of Viet Nam Association for the Elderly (VNAE), and in line with the VNM10AGE output: <i>Population ageing &amp; Social protection</i> of the approved 2024 UNFPA workplan, UNFPA is committed to provide technical assistance conduct an assessment on the needs of older persons and develop policy recommendations for meeting their individual needs and facilitate responsive &amp; effective adaptation to rapid population ageing in Viet Nam (hereinafter is called “assessment”. A consultant team of two members are needed to carry out this assignment:</li> </ul> <p><b>Purpose:</b></p> <p>To provide policy makers with solid data and evidence on the current situation with a focus on individual needs of older persons for protection, care and support/nursing as well as recommendations on how to better address those needs and promote their roles in families, communities and society. The collected data, insights and information will be used as technical inputs and evidence to inform the implementation results and improvement of (i) the Law on the Elderly, (ii) the Party Directive No. 59/CT-TU on Elderly Care and development of (iii) the National Strategy on Older Persons, toward more effective and responsive adaptation to rapid population ageing in Vietnam.</p>
<p><b>Scope of work:</b></p> <p><i>(Description of services, activities, or outputs)</i></p>	<p>Working under the overall guidance and stewardship of the UNFPA Representative and Population &amp; Development Team Leader, and the direct supervision and coordination of the Program Analyst on Inclusive Growth &amp; Social Protection and technical officer from VNAE, the selected consultant team is requested to fulfil the purpose of this consultancy by completing - <i>but not limited to</i>, the following <b>tasks and expected outputs and final products</b>:</p> <p><b>I. Expected outputs and final products:</b></p> <p><b>1. Expected outputs:</b></p> <ul style="list-style-type: none"> <li>● Action-plan for implementation of this consultancy (<i>Output 1.1</i>).</li> <li>● Report on desk-review of current research reports and legal framework (<i>Output 1.2</i>).</li> <li>● Survey tools/questionnaires (both virtually and in-person focused group discussions) (<i>Output 1.3</i>).</li> <li>● Answered questionnaires, focused discussion minutes/records (raw data), and collected data/information from field survey (clean data) (<i>Output 1.4</i>).</li> <li>● Draft report on survey (<i>Output 1.5</i>).</li> <li>● Summary presentation(s) on key findings on survey (<i>Output 1.6</i>).</li> </ul> <p><b>2. Final product:</b></p> <ul style="list-style-type: none"> <li>● Final consolidated/synthesis report on the assessment, including a summary of key findings and recommendations (<i>Output 2.1</i>).</li> </ul> <p><b>II. Tasks and outputs</b></p> <p><b>Task 1:</b> Review a list of selected documents which will be suggested by UNFPA and VNAE and consult with relevant agencies (especially VNAE, MOLISA and UNFPA),</p>

research and develop an **action-plan** for implementation of this consultancy. The action-plan should propose the surveyed locations, surveyed methodologies (hybrid survey, both virtually by using digital and social media platforms and in person focused group discussion is encouraged), quantity of samples, etc. Discuss and consult with VNAE and UNFPA to get agreement on the action-plan before implementation (*output 1.1*).

**Task 2:** Conduct the desk review on related research reports, especially using results of the pre-work report which has been supported by UNFPA under a separate TORs on “*Introducing and localizing Foresight and Anticipatory Governance on Curating a Care Economy for Older Persons in Viet Nam*”, to consolidate a report on current situation of OP in terms of care, protection and roles and identify gaps, research questions that need to be answered by field survey/assessment (*Output 1.2*).

**Task 3:** Develop tools to collect voice/data/information about the current situation and the changes that both the future OP and current OP would like to see in the coming 10-20 years to meet the individual needs of OP for better protection, care/nursing; based on their current situation as well as what could have been done better to promote their roles of OP in the society, communities and at homes (*Output 1.3*).

The set of structured questionnaires and guiding questions (which can be built up/inherited from the questions for focused group discussions under a separate TORs on “*Introducing and localizing Foresight and Anticipatory Governance on Curating a Care Economy for Older Persons in Viet Nam*”) for focused group discussion are required to deep dive into the following (*but not limited to*) areas:

- 1) General information: Full name (maybe optional), sex, aged groups (40 – 49; 50 - 59; 60 -69; and over 70), education, self-assessment of health status, employment/work (paid and unpaid), income sources, social participation, disability status (if any), LGBT+, etc.
- 2) Protection: OP rights and current level of benefits: self-assessment of their current situation and changes that they would like to see in 10-20 years to come in terms of protection support (for example: their perception about vulnerabilities and risks to abuse/exploitation, how OP are protected; any preventive measures exist, their awareness about entitlement/benefit packages/social policies, whether OP has rights/options to enjoy healthy and happy life, whether OP are benefiting from eligible social policies; how OP access and assess social policies,...), etc.
- 3) Care: self-assessment of their current situation and changes that they would like to see in 10-20 years to come in terms of access to and quality of basic services (food, clothes, housing, transportation, health care and social activities); whether OP have options/choices to live as they wish, etc.
- 4) Roles: What roles do they play now in family/community? Whether OP participate in labour market or social work/activities; whether OP can access to economic/financial resources (loan), capacity building activities; what obstacles OP are facing in participating in these activities, in what ways these roles can be further promoted, etc.

	<p><b>Task 4:</b> Hybrid survey methods can be used: (i) Coordinate with VNAE and local authorities to conduct the virtual survey of at least 1,000 OP (both at home and in ISHCs) in three regions (North, South and Centre), preferably 330 samples per region. The field survey tools should be done through local intergenerational self-help clubs (ISHC) virtually via digital and/or social media platforms (google survey, zalo, etc); and (ii) Conduct two focused group discussions (FGD)/in-depth interviews in person with at least 40 OP in two selected provinces (of Yen Bai and Thai Binh<sup>1</sup>), preferably one group of 20 OP and the other group of 20 further OP per each province. Collect the questionnaires which are answered by OP; consolidate data/information from virtual survey tools and FGD events and clean the collected data (<i>Output 1.4</i>).</p> <p><b>Task 5:</b> Based on the collected data and information, research, analyse and draft the consolidated report on assessment (<i>Output 1.5</i>).</p> <p><b>Task 6:</b> Based on the draft assessment report, coordinate, consult with the relevant stakeholders, participate in at least 02 half-day technical meetings and three consultation workshops (to be organized by UNFPA and VNAE in Ha Noi), present the key findings of the survey/assessment, consolidate comments for finalizing the assessment report that satisfies the purpose of this consultancy as mentioned above (<i>Outputs: 1.6</i>).</p> <p><b>Notes:</b> VNAE will be responsible for sharing the draft assessment report to the surveyed ISHCs and surveyed provinces for their review, comments and validation of the collected data.</p> <p><b>Task 7:</b> Finalize the assessment report upon collected comments and hand over it to VNAE and UNFPA for endorsement and use (<i>Output 2.1</i>).</p>
<p><b>Duration and working schedule:</b></p>	<p><b>1) Composition of the team and task division</b></p> <p>It is expected that the consultancy team will consist of a team leader (TL) and a team member (TM). Each person is <b>not only responsible for</b> directly completing the assigned tasks with associated outputs, <b>but also</b> supporting the other team member to successfully complete the whole assignment. <u>Below are key divisions of tasks:</u></p> <ul style="list-style-type: none"> <li>(i) The team leader (TL) is responsible for overall management, coordination of the whole team and with related stakeholders and completion of this assignment; and directly in-charge of delivering the outputs: <b>1.1, 1.3, 1.5 and 2.1</b> and coordinate and support the team member to finalize other outputs;</li> <li>(ii) The team member (TM) is directly in charge of delivering the outputs: <b>1.2, 1.4 and 1.6</b>; and under overall management/leadership, coordination of the team leader - support the TL to successfully finalize his/her outputs and completion of the consolidated/synthesis assessment report.</li> </ul> <p><b>2) Tasks, outputs and estimated working days and timeframe</b></p>

<sup>1</sup> Yen Bai and Thai Binh are proposed by VNAE to conduct the FGD because Yen Bai is a mountainous province and Thai Binh has the highest proportion of OP nationwide. The other provinces will be surveyed virtually.

	<p>The total estimated working days for the consultancy will be <b>55 working days</b> as a maximum for two consultants, of which <b>30 days</b> for the team leader and <b>25 days</b> for team member during the period from tentatively <b>25 September to 30 December 2024</b>:</p>																																									
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<p><b>Place where services are to be delivered:</b></p>	<p>Home-based and in-person FGD venues, workshop/meeting venues when needed</p>																																									
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<p><b>Monitoring and progress control, including reporting requirements, periodicity format and deadline:</b></p>	<ul style="list-style-type: none"> <li>• The selected consultants will work closely and report progress on the outputs and products covered in these TORs to UNFPA and VNAE to ensure the outputs and products delivered meet the requirements of the TORs.</li> <li>• UNFPA is responsible for signing contracts with selected consultants, managing the progress and quality of consultants' activities; Review and pay according to request/approval of VNAE.</li> <li>• Consultants will send a payment request clearly stating the actual number of working days (not exceeding the number of working days specified in the expected working day table and/or regulations).</li> <li>• UNFPA and VNAE will manage and facilitate the progress and quality of the assignment and approve consultant deliverables to support UNFPA's approval and payment process.</li> </ul>																																									

<p><b>Supervisory arrangements:</b></p>	<ul style="list-style-type: none"> <li>UNFPA will monitor and evaluate the performance of consultants. The consultants will work closely with UNFPA and VNAE under the overall guidance of the P&amp;D Team Leader and under overall coordination and management of Programme Officer.</li> <li>UNFPA Program Associate will provide necessary support during the implementation of these ICCs with regard to logistics, contractual procedures and financial issues.</li> </ul>
<p><b>Expected travel:</b></p>	<p>Participate in at least 02 technical meetings and 02 consultation workshops in Ha Noi as mentioned in details in Task 1.6) to be organized by UNFPA and VNAE in November and December 2024.</p> <p>The consultant team is also required to travel to provinces of Yen Bai and Thai Binh to conduct at least two FGD with 20 older persons each province. The travel costs for the consultants outside Ha Noi and for FDG are included in the consultancy fee.</p>
<p><b>Requirements for expertise, qualifications and capacity, including language requirements:</b></p>	<p><b>1. Team leader (TL)</b></p> <ul style="list-style-type: none"> <li>At least a master's degree in social science, economics, law or related fields.</li> <li>At least 10 years of experience in developing programs/projects on social protection and/or population ageing in Viet Nam. Proven experience being a research team leader.</li> <li>At least 10 years of research experience in the fields of social protection and/or care services for older persons. Experience in working/researching on ISHC is an advantage.</li> <li>Have rich experience working with the elderly related government agencies (MOLISA, VNAE), UN agencies/UNFPA and other related development partners.</li> <li>Be good at English proven by published articles/reports in English.</li> </ul> <p><b>2. Team member (TM)</b></p> <ul style="list-style-type: none"> <li>At least an undergraduate's degree in social science, public health, social work or related fields.</li> <li>At least 05 years of experience in developing programs/projects on social protection and/or population ageing in Viet Nam.</li> <li>At least 05 years of research experience in the fields of social protection and/or care services for older persons. Experience in working/researching on ISHC and/or field survey is an advantage.</li> <li>Have rich experience working with the elderly related government agencies (MOLISA, VNAE), UN agencies/UNFPA and other related development partners.</li> <li>Be good at English proven by published articles/reports in English.</li> </ul> <p><b>Notes:</b></p> <ul style="list-style-type: none"> <li>It is estimated that the team leader (TL) will be paid at VNM4 (equivalent to 200 USD/day) and team member (TM) will be paid at VNM3 (equivalent to 185 USD/day) following the rates in the UN-EU cost norms).</li> <li>The total number of working days and rates includes all survey costs, such as travel, allowances for 40 interviewees in FGD in Yen Bai and Thai Binh and 1,000 surveyed samples (answering questions as regulated by Government).</li> </ul>

<p><b>Inputs/ services to be provided by UNFPA or implementing partner (e.g support services, office space, equipment), if applicable:</b></p>	<p><b><u>UNFPA will:</u></b></p> <ul style="list-style-type: none"> <li>● Develop ICCs for signed with the selected national consultants. Honorariums will be applied using the UN-EU cost norms as stated under “Notes” above, considering the qualification of the selected consultant as well as the requirement of this technical service.</li> <li>● Provide necessary background documents relating to this TORs.</li> <li>● Monitor the progress and quality of the consultancy assignment.</li> <li>● Provide comments on documents required to be submitted for inputs by the selected consultants under this consultancy contract.</li> <li>● Facilitate and/or participate in technical meetings with relevant partners/ individuals when needed.</li> </ul> <p><b><u>VNAE will:</u></b></p> <ul style="list-style-type: none"> <li>● Cooperate with UNFPA in facilitating the progress and quality management of the assignment and endorsing the consultants’ outputs to facilitate UNFPA’s approval and payment process.</li> <li>● Coordinate the selected consultants with the surveyed ISHC and local authorities in order to conduct the survey (virtually) and in-depth interviews/FGD in Yen Bai and Thai Binh as required.</li> <li>● Provide necessary background documents relating to this TORs, especially documents on legal framework and data on OP, including all related documents/reports to this assignment.</li> <li>● Provide comments on documents required to be submitted for inputs by the selected consultant team under this TORs.</li> <li>● Support to collect administrative reports and data, organize technical meetings, consultation workshops when requested.</li> <li>● Participate in technical consultations/meetings with relevant partners/ individuals when needed.</li> </ul>
<p><b>Other relevant information or special conditions, if any:</b></p>	<ul style="list-style-type: none"> <li>● The selected consultants will be responsible for and comply with all requests of confidential data utilization;</li> <li>● Interested consultants are requested to register into the UNFPA global consultant roster: <a href="http://www.unfpa.org/unfpa-consultant-roster">http://www.unfpa.org/unfpa-consultant-roster</a>; send the completed and signed P11 form and the updated CV and all related education degrees/certificates.</li> <li>● Before signing the ICC, the consultant shall complete the following on-line training courses and submit the certificates to UNFPA: <ol style="list-style-type: none"> <li>1. BSAFE, Link: <a href="https://training.dss.un.org/course/category/6">https://training.dss.un.org/course/category/6</a></li> <li>2. Fraud and Corruption Awareness and Prevention Link: <a href="https://extranet.unfpa.org/Apps/Antifraud/English/story_html5.html">https://extranet.unfpa.org/Apps/Antifraud/English/story_html5.html</a></li> <li>3. PSEA (Prevention of Sexual Exploitation and Abuse) Link: <a href="https://extranet.unfpa.org/Apps/PSEA2017/story_html5.html?lms=1">https://extranet.unfpa.org/Apps/PSEA2017/story_html5.html?lms=1</a></li> </ol> </li> </ul>

	<ul style="list-style-type: none"> <li>● An individual consultant contract (ICC) will be signed with each selected consultant and will cover all the costs related to the implementation of the ICC.</li> <li>● Due to travel involved, the selected consultant has to submit a Health Statement duly certified ‘fits for work and travel’ by designated physician/doctor.</li> <li>● The consultancy payment will be output-based and made <b>at two instalments</b> upon the satisfactory submission of the deliverables, the submission of the consultant’s certification for payment (UNFPA form), and other supporting documents (if any) that is certified for the quality by UNFPA. <ul style="list-style-type: none"> <li>○ The first instalment of 30% of the maximum consultancy fee will be paid upon the successful submission and acceptance of both UNFPA and VNAE of outputs: 1.1; 1.2 and 1.3 as stated in Section “Deliverables” along with required documents, no later than Oct. 15, 2024.</li> <li>○ The final instalment of the remaining of the maximum consultancy fee will be disbursed once the consultants complete and submit the remaining outputs, which are then accepted by both UNFPA and VNAE, no later than Dec 25, 2024.</li> <li>○ All payments will be made in Viet Nam Dong calculated using the prevailing UN exchange rate at the time of contract signature.</li> </ul> </li> <li>● The final payment of the consultancy fee will be reduced by 10% if the submission of the final products is delayed by more than 20 days without advance notice properly communicated to the UNFPA responsible programme Officer.</li> <li>● COA: VNM10AGE-MAPLANUDSA- FPA90-64000-PU0074-71305.</li> </ul>
<p><b>Notice</b></p>	<p>There are no application, processing or other fees at any stage of the application process. UNFPA does not request or screen for information related to HIV or AIDS and does not discriminate based on HIV/AIDS status.</p>