

ANNEX A - TERMS OF REFERENCE

PROJECT TITLE: UNHCR – UNICEF Study on access to social protection and healthcare of stateless children

COUNTRY OF ASSIGNMENT: Thailand

1) GENERAL BACKGROUND

Social Protection is a human right. Fundamental international human rights instruments have recognized the need for social protection. Most notably, Article 22 of the Universal Declaration of Human Rights of 1948 states that “everyone, as a member of society, has the right to social security”. Article 9 of the 1966 International Covenant on Economic, Social and Cultural Rights also refers to “the right of everyone to social security, including social insurance”. Social protection refers to the set of policies and programs aimed at preventing or protecting all people against poverty, vulnerability, and social exclusion throughout their life cycles, with a particular emphasis towards vulnerable groups. Social protection can be provided in cash or in-kind, through non-contributory schemes providing universal, categorical, or poverty-targeted benefits (such as social assistance), contributory schemes with social insurance being the most common form, and by building human capital, productive assets, and access to jobs.¹

Similarly, the “right to health” has been recognized as a basic human rights principle for decades, particularly after the adoption of the Universal Declaration of Human Rights in 1948.

Thailand continues to take positive steps to identify and address challenges faced by stateless persons in accessing some of their basic rights. For instance, on 22 September 2020 the Thai Cabinet approved the inclusion of the first group of over 3,000 individual students who have been screened and hold an eligible ID number in the National Healthcare Fund for Persons with Legal Status Problems. This has allowed these students to access government health facilities, by supporting the cost of health services they could not otherwise afford. Following the latest developments, on March 30, 2021, the Cabinet approved, in principle, for the Ministry of Public Health, in cooperation with, the Ministry of Education to expedite the implementation of the provision of basic public health rights to persons with legal status problems and provision of additional rights² while in 2022, the Public Health Minister led nine governmental and non-governmental organisations to sign a Memorandum of Understanding (MoU) in an attempt to deliver free healthcare services to stateless people.³ Moreover, on 27 December 2022 the Thai Cabinet endorsed a resolution to facilitate migrant and stateless children access to health care services. To implement such Cabinet Resolution, the National Health Commission has formed a committee to look at access to health services for migrant and stateless children. In the UN Sustainable Development Cooperation Framework 2022-2026 underscoring the joint commitment, between Thailand and the UN, to its priorities and cooperation results, it addresses stateless persons as a “Leave No One Behind” target and health care as a key development objective. In addition, during the Global Refugee Forum in December 2023, Thailand pledged to develop health coverage schemes that respond to the needs of stateless persons and other defined groups⁴.

¹ https://www.un.org/sites/un2.un.org/files/2021/04/a-tb_on_social_protection.pdf

² https://resolution.soc.go.th/PDF_UPLOAD/2564/P_403494_9.pdf

³ <https://eng.nhso.go.th/view/1/DescriptionNews/Healthcare-rights-of-stateless-people-/158/EN-US>

⁴ <https://www.thaigov.go.th/news/contents/details/75998>

Nevertheless, despite positive developments by the Royal Thai Government, both legal and practical gaps regarding access to social protection and healthcare for stateless children still exist. Furthermore, there have not been any specific studies on access to health care and social protection for stateless persons, representing a significant gap in understanding on access to basic rights for what is a population at risk of being left behind.

In light of the abovementioned challenges and the lack of focused data and evidence available on the access to social protection and healthcare of stateless children, a study is warranted.

2) OBJECTIVES

- 2.1 To assess and address gaps in the existing law, policies and underlying procedures related to access to social protection and healthcare;
- 2.2 To assess the situation on the ground in selected areas where stateless children have resided and experienced issues related to access to social protection and healthcare;
- 2.3 To conduct a comprehensive report based on information gathered from stateless children, government service providers, NGOs and other relevant actors from different areas across Thailand on administrative challenges and gaps on access to social protection and healthcare of stateless children with proposed recommendations.

3) SCOPE OF WORK

The objective of this assignment is to carry out the research and facilitate the process of collecting inputs from multiple stakeholders, through a desk review (with reference to international experience and good practices), a survey of a representative sample of stateless children and families, and consultations, with the objective of generating a report with concrete and actionable recommendations. The service provider would need to adapt or develop a research methodology, collect, and analyze data and information, as well as prepare a final comprehensive report.

4) IMPLEMENTATION SCHEDULE, PLACE OF DELIVERY & INSTALLATION

the estimated duration of 8.5 months after the contract starting date.

5) FINAL PRODUCTS

1. Collect and analyze data and prepare a comprehensive Desk Review

The service provider is required to undertake a desk review on social protection and healthcare legislation, policy, procedures and existing studies on access to social protection and healthcare for stateless children in Thailand.

Expected deliverables:

- Desk-based research to map laws, policies, standards and existing studies social protection and healthcare for stateless children to identify the critical barriers they face and existing knowledge gaps around the experiences of stateless children.

2. Consultations with relevant stakeholders.

In consultation with the focal points of both agencies (UNHCR and UNICEF),

- Identify and propose a suitable sample of stateless persons⁵ (including their parents and caregivers) and stakeholders (e.g. RTG officials and local government officials, civil society organizations, academia, healthcare providers, other relevant service providers and UN agencies) with whom to conduct interviews and consultations;
- design survey questions to guide interviews, facilitate the consultations, document inputs and contributions, and summarize the gathered data and information; and
- conduct interviews and consultations with stateless children, parents, caregivers, education providers and other relevant service providers as well as field studies (the targeted provinces).

Expected deliverables:

- A list of stakeholders planned for consultations and interviews including expected dates of such consultations and interviews;
- A list of questions to guide interviews and facilitate the consultations;
- Summary of key findings from the interviews and consultations with stateless persons and other stakeholders;
- A report which provides an overview of the current situation - including challenges and successes - faced by stateless children in accessing social protection and healthcare and the related uniqueness of the statelessness experience, as well as recommendations with respect to how identified gaps can be addressed.

3. Final Report

A final report shall be prepared by the service provider building on the findings of the desk review, input from interviews and consultations with stateless persons and stakeholders, and analysis of the gathered information. The final report should present the key findings concerning access to social protection and healthcare (including, *inter alia*, Universal Health Coverage) for stateless persons in Thailand. The report should clearly identify any gaps related to accessing social protection and the healthcare and the extent to which the stateless population is affected. Further, it should provide clear and targeted recommendations as to how such gaps might be addressed to make social protection and healthcare more inclusive in Thailand for stateless children.

Regular consultations with UNHCR will be important throughout all phases of the preparation and validation of the final report, including during the development of the report outline, the analytical framework used to assess the collected inputs and contributions from stakeholders, complemented by actionable recommendations in the short and medium term. The report produced in English and Thai languages, shall contain, no more than, 5 pages of Executive Summary and shall be cleared by UNHCR and UNICEF via a Steering Committee established to oversee the research.

The service provider is expected to present findings and participate at a workshop with relevant RTG officials and other concerned actors to discuss findings and follow up.

⁵ Note that the focus should be on registered stateless persons, while the study can also consider the specific situation of those that are not registered but appear to be at risk of statelessness.

**UNHCR**United Nations High Commissioner for Refugees
Haut Commissariat des Nations Unies pour les réfugiés

Deliverables/Outputs	Target Due Dates	Review and Approvals Required (Indicate designation of person who will review output and confirm acceptance)
1. Desk-based research of laws, policies, procedures and existing studies on social protection and healthcare for stateless children	1 month after a contract starting date	UNHCR and UNICEF
2. A list of stakeholders planned for consultations and interviews including expected dates of such consultations and interviews; A list of questions to guide interviews and facilitate the consultations; and Summary of key findings from the interviews and consultations with stateless persons and other stakeholders.	3 months after a contract starting date	UNHCR and UNICEF
3. Draft report of the situation faced by stateless persons in accessing social protection and healthcare and recommendations with respect to how identified gaps can be addressed.	5 months after a contract starting date	UNHCR and UNICEF
4. Validation meeting and presentation of findings (PPT shall be a part of this deliverable) in the form of a consultative meeting with relevant government agencies and other concerned actors.	6 months after a contract starting date	UNHCR and UNICEF
5. Final report: This shall be based on the reviewed draft report and take into consideration relevant observations from the consultative meeting with stakeholders.	8 months after a contract starting date	UNHCR and UNICEF

All the deliverables are expected to be conducted in English and Thai languages and submitted to UNHCR and UNICEF for review and comment. The individual consultant/service provider is expected to present the report in Bangkok in person. The presentation of the report may involve inviting key actors including government officials, as determined by UNHCR and UNICEF

5) TEAM COMPOSITION, DEGREE OF EXPERTISE AND QUALIFICATIONS

Criteria of a Service Provider:

- Pre-qualification criteria, namely, profile of the Service Provider, Valid tax registration or certification of foundation/university registration (in the case of Foundation or University), acceptance on UNHCR General Conditions of Contract, commitment to UN Supplier Code of Conduct, being registered under the e-Government Procurement of the Comptroller General's Department (proof of registration).

Technical Criteria Experience (70 marks)

- Understanding the requirements of services, proposed approach (30 marks)
- Quality Assurance plan (5 marks)
- Methodology and Outputs (15 marks)
- Experience and capacity to provide the required services (10 marks)
- Sample of previous work with the subject matter and/or with an international organization (10 marks)

Experiences & Qualifications of the team leader (15 marks)

- Education: Master's degree in the fields of Social Sciences, Health economics, Law, Human Rights, Public Policy or other similar fields;
- Experience: At least three years of professional experience in conducting and coordinating research related to statelessness, human rights, public policy and access to rights of marginalized population;
- Knowledge of statelessness, law on social protection and healthcare and access to such rights in Thailand;
- Knowledge of the SDGs, UN Sustainable Development Cooperation Framework for Thailand;
- Strong analytical skills, including ability to collect data and information from various sources;
- Ability to travel to the remote areas within Thailand; and
- Languages: Excellent written and oral communication and presentation skills in English and Thai.

Experience & Qualifications of the team members (15 marks)⁷

- Education: Bachelor's degree in the field of Social Sciences, Economics, Law, Human Rights, Public Policy or other fields;
- Experience: At least one year of professional experience in conducting and coordinating research. In the case where a team member has less than one year of experience in conducting and coordinating research, he or she shall hold, at least, a Master's degree in a related field;
- Analytical skills, including ability to collect data and information from various sources;
- Ability to travel to the remote areas within Thailand; and

⁷ Note that the number of team members is open for bidders to consider as deemed appropriate.

- Languages: Excellent written and oral communication in English and Thai.

6) PAYMENT TERMS & MILESTONES

Deliverable	Description	Timeline	Payment
1.	Desk-based research of laws, policies, procedures and existing studies on social protection and healthcare for stateless children	15 days after a reception and acceptance of each deliverable	20%
2.	2.1 A list of stakeholders planned for consultations and interviews including expected dates of such consultations and interviews; 2.2 A list of questions to guide interviews and facilitate the consultations; and 2.3 Summary of key findings from the interviews and consultations with stateless persons and other stakeholders.		20%
3.	Draft report of the situation faced by stateless persons in accessing social protection and healthcare and recommendations with respect to how identified gaps can be addressed.		20%
4.	Presentation of findings (PPT shall be a part of this deliverable) in the form of a consultative meeting with relevant government agencies and other concerned actors.		20%
5.	Final report: This shall be based on the reviewed draft report and take into consideration relevant observations from the consultative meeting with stakeholders.		20%



UNHCR

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7) PROVISION OF MONITORING AND PROGRESS CONTROLS

The service provider should report on progress of the project monthly to the UNHCR Stateless focal points.

8) ETHICAL GUIDELINES

The service provider should adhere to international best practices for conducting research, including the following standards:

1. Ensuring that all respondents understand the purpose of the study and how the findings will be used;
2. Obtaining informed consent from respondents and notifying them of their rights to confidentiality;
3. Notifying participants that they are free to stop the interview at any time;
4. Maintaining the anonymity of respondents during the collection and analysis of data; and
5. Being sensitive to cultural norms during interactions with respondents and their family members.

9) Intellectual Property Rights

The information collected, and the resulting findings shall be the property of UNHCR and shall not be disclosed/ revealed to any third party without express permission of UNHCR. The service provider shall not either during the term or after termination of the assignment, disclose any proprietary or confidential information related to the evaluation without prior written consent. Proprietary interests on all materials and documents prepared by the service provider under the assignment shall become and remain properties of UNHCR.

Data collected for the study is the property of UNHCR. Any intentional fabrication of data would be considered as fraudulence and UNHCR holds the rights to act against that.