

## Terms of References

### Baseline Assessment of Integrated Early Childhood Development Programme

#### Summary

<b>Title</b>	<b>Baseline Assessment of Integrated Early Childhood Development Programme</b>
<b>Purpose</b>	<b>Assess the IECD programme’s current situation</b> in a qualitative and quantitative manner, and establish the current operational framework situation for IECD development in Viet Nam and benchmark indicators based on the Programme Theory of Change. The baseline will then inform the scoping paper and form the platform for the summative evaluation of the IECD Programme; and  <b>Formulate a draft Monitoring and Evaluation plan</b> for the IECD Programme.
<b>Location</b>	Ha Noi, Dien Bien, Gia Lai and Kon Tum province, Viet Nam
<b>Duration</b>	Jan – April 2018
<b>Start Date</b>	1 January 2018
<b>Reporting to</b>	Chief of PME and Chief of CSD, UNICEF Viet Nam

#### Background: Integrated Early Childhood Development (IECD) Programme

Early childhood, from conception to the first eight years is the period when the brain develops most rapidly and most dependently on both enriching and adverse environments. Early years of childhood form the basis of intelligence, personality, social behavior, and capacity to learn and nurture oneself as an adult. Many children do not reach their full human potential because of their families’ income status, geographic location, ethnicity, disability, religion or sexual orientation. They do not receive adequate nutrition, care and opportunities to learn. These children and their families can be helped. It is their right to develop as well as to survive.

UNICEF globally calls for greater integration and synergy across sectors to support integrated programming for children at different stages of the life cycle. The current UNICEF Strategic Plan recognises specifically the critical importance of the early years on the basis of the latest evidence on the science of brain development: *“New scientific research on brain development has brought fresh evidence of the critical importance of early childhood development for future learning achievements, health outcomes and productivity, and the cumulative nature of deficits”*. An integrated approach to early childhood development (IECD) is not only a global but a national priority in Viet Nam as set forth in the Law on Children 2016. IECD will help the country to achieve high quality of human capital from early years of human life, a pre-requisite for sustainable development. The newly endorsed Law on Children 2016 introduces a number of improvements as compared to the Law on Protection, Care and Education of Children, 2004. Holistic childhood development is articulated in almost key chapters on specific child rights and state duties. However, holistic early childhood development and

rights to early childhood development are not adequately stipulated with legally binding duties and measures for enforcement. The Ministry of Labour, Invalids and Social Affairs is responsible for coordinating sectoral policies and programmes among concerned ministries and agencies on childhood care and development which implicitly includes holistic early childhood development. However, there is no coherent, comprehensive Early Childhood Development policy, nor an effective coordination mechanism on ECD<sup>1</sup> while it is recognized an on-going policy initiative about the establishment of Viet Nam Committee on Children with political support from the highest level in the Government. Recent economic progress has improved the well-being of millions of Vietnamese children, but not all have benefited equally from such prosperity. There is equity in access to pre-school by gender and ethnicity, but it does not necessarily translate into improved learning outcomes for all children. According to the data published by the General Statistics Office (GSO) and UNICEF in 2014, 96.8 % of children in Grade 1 of primary school attended pre-school the previous year. There was no disparity found between boys and girls, urban/rural or Kinh/Hoa and ethnic minority pupils to access pre-school education. However, fewer children from the Mekong River Delta attended pre-school compared to other regions (10 per cent gap). Furthermore, although equity is apparent in access, there are striking disparities in terms of learning outcomes between Kinh and ethnic minorities. While there are vertical interventions in health, nutrition, reproductive health, and education, little has been done to horizontally integrate services for early childhood development, especially for children from 0 to 3 years old, and particularly at the household level<sup>2</sup>. Even within ministries there is fragmentation between agencies with low incentives for integration. While life cycle is an integral part of the social protection system in Viet Nam, the youngest population – especially under 3's – do not benefit from the schemes except for the health insurance. Parenting education is supposedly delivered through child-care centres, crèches and kindergarten and also as components within health and nutrition programmes. However, there is little documentation as to the curricula (content), delivery mechanisms (frequency, dosage and intensity) and impact of interventions. Existing parenting materials, especially for children from 0 to 3, mostly focus on health and nutrition, disregarding child development. The rate of exclusive breastfeeding has, after years of stagnation, increased from 17 per cent (in 2010) to 24 per cent (in 2014). However, breastfeeding as a practice is still low and boys are more likely to be exclusively breastfed than girls<sup>3</sup>. Progress has been slowest in reducing malnutrition (stunting), which partly reflects the fact that maternal nutrition remains a problem not addressed adequately in the National Nutrition Strategy. Stunting continues to affect approximately one fourth of the under 5 population (24.6 per cent). The rates are highest in the Central Highlands (34 per cent) and other disadvantaged regions where ethnic minority people live (27.3 per cent in the Central coastal region and 30.3 % in the North West)<sup>4</sup>.

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<sup>1</sup> Asian Development Bank (2006). Recommendations for Early Childhood Development in Viet Nam. Period 2006-2010 and the vision toward 2020.

<sup>2</sup> Ibid.

<sup>3</sup> General Statistics Office. 2014. Viet Nam Multiple Indicator Cluster Survey.

<sup>4</sup> National Institute of Nutrition. 2015. National Nutrition Surveillance.

Analysis of the Early Child Development Index (ECDI) of 2014<sup>5</sup> which is used to determine if children are developmentally on track in four domains: literacy and numeracy, physical, socio-emotional and learning shows disparities. 29.4 per cent children were on track in the literacy-numeracy domain, more in the physical (96.5 %), learning (94.2 %) and social-emotional (91.2 %) domains. However, in each individual domain the higher score was associated with children living in richest households, with children attending an early childhood education programme and older children.

It is well recognized that there are severe short-term and long term effects of violence against children. Most immediately, consequences include physical injury, delayed physical growth, damage to the brain, and cognitive and language deficits, with such consequences often being interrelated. In the short term, there are significant impacts on a child's development and adjustment as well as relationships with parents, other adults, and peers – problems such as aggression, withdrawal, isolation and even self-harm. Unfortunately, in Viet Nam, violence-discipline is widely practiced by parents with 68.4 per cent of children aged 1-14 years were subjected to at least one form of psychological or physical punishment by household members<sup>6</sup>. This proves that young children even at the age of 1, could suffer from violence-discipline. More specifically children from 5 to 9 years of age were subjected to physical punishment more than the older and younger children<sup>7</sup>. In addition, a small-scale assessment indicated that 12 percent of families are neglecting their children<sup>8</sup>.

### **IECD Programme**

To address the identified issues in early childhood development among children aged 0 to 8, UNICEF Viet Nam's Country Programme 2017-2021 is designed to, among others, strengthen the enabling legal and policy environment for IECD at the national level and strengthen the local capacities to develop an IECD model to be implemented in selected districts and communes of three provinces: Gia Lai, Kon Tum, and Dien Bien. It is expected that the IECD model will generate further evidence and policy options to scale-up IECD nationally.

At the UNICEF Country Programme (CPD) level, UNICEF and the Government of Viet Nam aim to achieve:

CPD Outcome 3: By 2021 in selected areas of the three provinces, all children and their families, especially the most vulnerable, utilize inclusive and quality IECD services.

CPD Outcome 3 indicators:

- Percentage of children aged 6 to 23 months who receive a minimum acceptable diet.
- Percentage of mothers receiving post-natal care within two days of delivery.
- Proportion of the population having an improved sanitation facility.

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<sup>5</sup> General Statistics Office. 2014. Viet Nam Multiple Indicator Cluster Survey.

<sup>6</sup> Ibid.

<sup>7</sup> Drivers of Violence against children in Viet Nam, UNICEF and UNFPA

<sup>8</sup> Ibid.

- Attendance rate in early childhood education programme.
- Number of communes with functioning IECD services.

CPD Output 1: Enhanced local capacity to develop and operationalise IECD centered, equitable and inclusive high impact child survival and development packages in focus provinces.

CPD Output 2: Strengthened capacity of education service providers in focus provinces to deliver quality early learning and school readiness programmes for children under 4 years.

CPD Output 3: Enhanced local capacity in focus provinces to develop and operationalize local child protection systems and services, including positive parenting, non-violent discipline.

At the project level, UNICEF will implement the Integrated Early Childhood Development (IECD) programme in collaboration with the Government of Viet Nam to achieve:

**National level** - MOLISA Project's Specific Objective: Improved national capacity to legislate, monitor and oversee child rights related laws, policies and programmes.

Indicator relevant to IECD: Availability of a national policy on integrated early childhood development by 2018.

**Local level** - Through the three Provincial Projects with Gia Lai, Kon Tum, and Dien Bien, **27 communes of 9 districts** in the three provinces are to achieve

**Provincial Project's long term objective:**

By 2021, all targeted children (0-8 years old) and their family members especially those of the most vulnerable groups in the target communes utilize inclusive and quality IECD services to fulfil children's rights to survival, development, education and protection.

**Provincial Project's Long-term Indicators:**

1. Percentage of children aged 0-3 years in project locations received **age-appropriate nutrition and early stimulation/learning** from parents/child caregivers
2. Percentage of children **aged 36-59 months** in the project locations who are attending an early childhood education project
3. Percentage of parents/primary caregivers of children aged 0-8 years in project the project locations who **practise non-violent discipline and responsive parenting**
4. Percentage of children aged 36-59 months in project locations on-track in at least three of four developmental domains (MICS IECD Index: Literacy-numeracy, physical, social-emotional and learning)

**Provincial Project's Immediate objectives:**

1. By 2021, parents, caregivers, and community members in programme communes have the knowledge, skills and supportive norms to access available IECD services and practice behaviours that support healthy IECD

Indicators:

- Percentage of parents and caregivers of children aged 0-8 years who believed that responsive and non-violent parenting is the best for their children.
  - Percentage of boys and girls aged 6-8 years who know where to report violent incidents involving themselves and other children.
  - Percentage of parents and caregivers of children aged 0-8 years who recognize the benefits of all areas of IECD, and know where to seek help if they need supports.
  - Percentage of parents, caregivers of children aged 0-8 years **who wanted** to participate in IECD parenting/counseling platforms at grassroots level.
2. Improved capacity of service providers from related sectors in providing IECD services at all platforms

Indicators:

- Percentage of local service providers including health workers, teachers and ECE care givers in the project locations able to perform IYCF counseling and early stimulation exercises.
  - Number of child protection workers at commune level who could provide case management in line with national standards.
  - Percentage of parents/child caregivers who have positive feedback/comments on IECD services.
3. Accessible minimum IECD services in place with acceptable quality for parents, caregivers and children in targeted areas

Indicators:

- Percentage of ECE centres, including family-based child care groups in project locations which have minimum IECD equipment and early learning/stimulation services for young children.
  - Number of commune healthcare centres in the project locations have IYCF counseling, micro-nutrient supplementations services integrated with early stimulation services for young children.
  - Number of social work service centres applying **national standards**<sup>99</sup> established and functioning at provincial and district levels.
  - Percentage of communes in the project location covered by m-IECD module (including CP, Nutrition, Education contents) to fast-track progress of respective IECD interventions.
  - Proportion of pre-schools/IECD centres with WASH facilities meeting national/JMP standards.
4. An enabling environment created and maintained for implementation of IECD interventions in the province

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<sup>99</sup> National standards include parenting education services

Indicators:

- Availability of co-ordination committee and mechanism on IECD at provincial, project districts and communes.
- Availability of Provincial IECD Action Plan 2018-2021 with **budget allocation** for implementation.
- Existence of a monitoring system for tracking the progress of the IECD models implementation.

The IECD programme will be evaluated against the indicators of CPD Outcome 3 and Provincial Project's long-term objectives through specific evaluation criteria in 2022. To measure the contribution and the extent of attribution of the programme to the CPD Outcome 3 and provincial projects' long-term objectives, the evaluation will conduct a baseline assessment and a mid-term evaluation. This assignment will also deliver a draft M&E framework which will include an overall evaluation framework covering:

1. The baseline assessment
2. A mid-term evaluation and
3. A summative evaluation.

The evaluation of the IECD programme is expected to gather evidence on the programme performance to measure to what extent it achieves the CPD programme's and project's outcomes on IECD, thus measure the extent that the rights to ECD among children in targeted locations, especially the most marginalized and vulnerable children, are fulfilled. The evaluation results are expected to contribute to policy making in the field of early childhood development and delivering equitable results for children in Viet Nam.

The consultant team will be guided and supported by UNICEF local researchers and UNICEF staff during the assignment process.

### **Justification**

As this is a major complex programme involving many sectors and stakeholders, the evaluation and the programme monitoring will be possible and effective only with a clear understanding and analysis of its current situation in quantitative and qualitative manner. This includes data and information on the current results of the programme targeted indicators, the situation of the institutional capacity and the policy environments of the targeted sectors, the situation of finances of the sectors, the key stakeholders, government's plans for the sectors, and situation and data of targeted provinces.

There is thus a need for a team of consultants led by an international expert who is knowledgeable about IECD working with local experts who is knowledgeable about Vietnam's context and stakeholders.

### **Purpose, Objectives and scope of work**

#### Purpose:

This assignment will establish a shared understanding on where the IECD Programme is at the outset of its implementation. This is done through a baseline assessment which will be important for the summative evaluation of the IECD Programme at its completion. It will also provide a draft monitoring and evaluation for the Programme. A draft scoping paper for the summative evaluation is part of the M&E framework.

### Objectives:

The overall objective of the Baseline assessment is to:

- **Assess the IECD programme's current situation** in a qualitative and quantitative manner, and establish the current operational framework situation for IECD development in Viet Nam and benchmark indicators based on the Programme Theory of Change. The baseline will then inform the scoping paper and form the platform for the summative evaluation of the IECD Programme; and
- **Formulate a draft Monitoring and Evaluation plan** for the IECD Programme

### Key scope of works:

Baseline assessment: It is intended that the baseline assessment will provide:

- a) Baseline value for all indicators as benchmarks for performance evaluation based on the Programme TOC.
- b) An updated IECD situation analysis of Viet Nam based on the ECD areas focused in the IECD programme, including the legal/regulatory framework and policy environments, institutional set-up, financial situation of sector(s); the public perception and capacity, *at both national and subnational levels*, using the existing reports done by others and additional interviews.
- d) Information that will assist in identifying relevant policies, guidelines and frameworks for supporting project implementation and advocacy.
- e) Information that could help elaborate IECD interventions which will be planned in each component of the IECD model.

The Multi-year Monitoring and Evaluation Framework: will specify indicators (including performance ones), baselines, targets, data collection methods and MoVs, geographical scope and hypothesis and risks. It should also define roles and responsibilities and indicate who is responsible to collect, analyse and use the data. This M&E framework should outline frequency and costs.

### **Key tasks**

#### Baseline assessment

The consultant team (an international team leader with a local team of researchers) will lead the baseline assessment in consultation with UNICEF Viet Nam. The assessment will

cover both national and subnational levels (the programme provinces). It will ensure a coverage of all the sectors/areas with the programme activities including education, health, child protection etc. and will be guided by the Programme TOC and results framework.

The key tasks are:

- Develop a baseline methodology for the assessment
- Conduct a desk review of key relevant documents and understanding the IECD programme design and contextual framework of Viet Nam relevant to ECD.
- Design tools/questionnaire and methodology for data collection of both qualitative and quantitative data. The baseline tool should be able to capture county and community levels data per the selected indicators. (please see Annex 2 as guidance/suggestions)
- At national level, review the existence of certain number of IECD supportive policies and coordination and collaboration/integration between sectors. Assess the current situation of ECD in Viet Nam (via reviewing existing docs by MOLISA and others)
- Conduct an analysis of stakeholders working on ECD in Vietnam covering issues such as their roles and responsibilities, capacity, financial capacity, institutional set-up and policy environment for their operation. Hold discussions with relevant stakeholders to understand the beneficiaries and the programme owners
- Gather evidence and provide analysis on public interest, attitude and practices towards IECD in Vietnam
- Collect data on the costs and financing of key ECD services by sector in Viet Nam

#### M&E Framework:

- Develop a draft M&E framework based on the data collected and the baseline analysis. It will specify indicators (including performance ones), baselines, targets, data collection methods and MoVs, geographical scope and hypothesis and risks. It should also define roles and responsibilities and indicate who is responsible to collect, analyse and use the data. This M&E framework should outline frequency and costs.
- Consult with UNICEF and key stakeholders during the finalization
- Provide a draft scoping paper for the summative evaluation after consultation with UNICEF and key stakeholders

#### **Methodology, timetable and deliverables**

Methodology: The consultant team will develop and propose their own methodology for this assignment. Please see Annex 1 on some guidance and suggestions on methodology and scope.



Timetable:

#	Task	Duration
<b>1</b>	<b>Inception Phase (1)</b>	
1.1	Research on the programme interventions.	15 working days
1.2	Desk review, interview with UNICEF and stakeholders, qualitative contextual analysis	
1.3	Develop baseline data collection method and tools.	
1.4	Field test the data collection tools.	
1.5	Submit the inception report including a preliminary qualitative report with an executive summary.	
1.6	Make a presentation to UNICEF and partners.	
1.7	Revise the inception report, based on audit trail	
<b>2</b>	<b>Data Collection and Analysis Phase (2)</b>	
2.1	Conduct field work to target locations to collect data.	15 working days
2.2	Submit a summary of the field visits.	
2.3	Conduct field visit debrief meeting.	
2.5.	Prepare data analysis and findings.	
2.6	Summarize initial findings from the field visits.	
2.7	Conduct a workshop with stakeholders on emerging findings	
2.8	Submit the first M&E framework	
<b>3</b>	<b>Report Writing &amp; Presentation (3)</b>	
4.1	Produce a baseline assessment report.	20 working days
4.2	Conduct a consultation with stakeholders on the findings and tentative conclusions and recommendations	
4.3	Submit draft final report, based on audit trail	
4.4	Submit a final draft M&E framework, based on the baseline assessment findings and consultation	
4.5	A draft scoping paper for the summative evaluation	

<b>Deliverables (a concrete timeline to be agreed later)</b>	
<i>(Reports and key deliverables must be in English and Vietnamese)</i>	
<b>1</b>	<b>Inception Report</b>
The inception report will summarise findings from interviews with UNICEF and stakeholders, and the review of the programme documents. The report must present a detailed baseline methodology and the timeframe for each proposed data collection method. The report should include a qualitative contextual analysis on IECD in Vietnam. The draft report will be reviewed by UNICEF Viet Nam PME and the detailed list of comments, if any, will be shared with the evaluation team in 7 days. The baseline assessment team is expected to respond to the comments and revise the report in 7 days. Depending on the quality of the report, the baseline assessment team may be required revise it more than once until it meets the UNICEF standards.	
<b>2</b>	<b>Data collection tools</b>
<b>3</b>	<b>Summary of Initial Findings from the Field Visits</b>
<b>4</b>	<b>Copies of micro dataset and data analysis files</b>
<b>5</b>	<b>Baseline Assessment Report (no longer than 60 pages is recommended)</b>
<b>6</b>	<b>Presentation of Findings</b>
<b>7.</b>	<b>Draft M&amp;E framework for the programme which includes a draft scoping paper for the summative evaluation</b>

### Quality assurance

UNICEF Viet Nam, Planning, Monitoring and Evaluation Section will co-lead the baseline assessment together with CSD Chief, and will ensure the quality of the deliverables. PME Section will be responsible to ensuring that the data collection is conducted per quality standards, norms and ethical procedures of UNICEF. There may be a need to establish a joint Government -UNICEF technical working for baseline and end line survey with participation of government experts having ECD related research back ground. This group will provide technical review of the survey method and tools.

### Ethical procedures

Researchers are required to receive consent from participants before involving them in the data collection process and respect their right to provide information in confidence. Researchers must inform participants about the scope and limits of confidentiality, and ensure that their information cannot be found by anyone. It is mandatory to prepare risk management plans to minimize potential harm to participants.

### Profile of Candidates

The team should be composed of one International Team Leader and sufficient numbers of local team members for successful implementation of the assignment.

1. Team Leader will be in charge of leading the entire process through working with team members. The Team Leader will be responsible for timely and quality deliverables, and must have:
  - a. Advanced degree in education, nutrition, sociology, and other social science related field.
  - b. At least ten years' experience in leading the design and conduct of complex development research projects and assessment;
  - c. Experience in early childhood development and conducting research in the East Asian continent, preferably in Viet Nam;
  - d. Familiarity with the work of UNICEF and/or other similar organizations working on early childhood development;
  - e. Good understanding of human rights, equity and gender based approaches to programming;
  - f. Demonstrated ability to deliver high-quality written work in the English language, and to engage effectively with stakeholders at all levels.
  
2. Team Members will contribute to baseline assessment through data collection and analysis. They will be responsible for timely and accurate delivery of results through conducting key informant interviews and focus group discussions, surveys and field visits, and provide inputs to the production of inception and final reports. Team members must have:
  - a. Master's or bachelor's degree in sociology, education, nutrition, anthropology, social work and other social science related field;
  - b. At least 3-5 years of work experience in the field of social development and research;
  - c. Strong quantitative and qualitative analysis skills;
  - d. Very strong written and spoken communication and facilitation skills;
  - e. Experience of working directly with children and commitment to meaningful child participation;
  - f. Experience of using participatory techniques in data collection and child-friendly participatory techniques (preferred);
  - g. Gender balanced;
  - h. Mix of international-national;
  - i. Fluency in English is essential;
  - j. Fluency in Vietnamese language is essential.

### **Evaluation of Bids**

The proposals will be assessed by an UNICEF technical panel, using the below set of criteria. Applications will be evaluated technically and financial based on how well the proposal meets the requirements of the Terms of Reference using the guidelines detailed in the tables below:

<b>Technical criteria (70%)</b>
A Strong team with international and local experiences in baseline assessment and results framework development
Previous proven experience working on statistics, social research, context analysis, stakeholder analysis or related field assignments
Strong experience working on early childhood development and children related issues in Viet Nam and in the region
Previous experience in processing and synthesizing complex information into key messages and writing high quality publications
Previous proven experience in development and editing of UN and/or UNICEF fund-raising documents
Good representational and liaison skills; ability to meet deadlines and excellent English writing and communication skills.
<b>Financial criteria (30%)</b>

**Ratio for Technical and Financial proposals: 70:30**

### Detail Scoring for Technical proposals evaluation

Technical criteria	Weight
<b>Overall proposal</b>	35
Understanding of the TOR requirements and sound methodology	
<b>Expertise/skills:</b>	
Relevance of experience in the field of IECD	15
Relevance of experience in data, surveys, research, review, evaluation	15
Intensive knowledge about Vietnam's policy environment and context	10
Relevant experience working with UNICEF	10
Communication skills in written and verbal forms	15
<b>Total Score</b>	<b>100</b>

Only Technical proposals that pass **70** out of 100 scores will be shortlisted as technically qualified and evaluated financially.

### Payment Schedule

Payment for the assignment will be made based on achievement of the following deliverables based on the schedule below:

1. Completion of Phase 1: 25%
2. Completion of Phase 2: 45%
3. Completion of Phase 3: 30%

## Annex 1- The Baseline Scope and Sampling Approach

The geographical scope of the baseline includes Dien Bien, Gia Lai and Kon Tum. The information will be collected in a way that will enable monitoring and evaluation of the Programme in 27 communes of 9 districts of these three provinces. The table below represents the names of the districts and communes:

Provinces	Districts	Communes
<b>1. Dien Bien</b>	Dien Bien Dong	Hang Lia
		Pu Nhi
		Chieng So
	Tuan Giao	Muong Thin
		Muong Mun
		Na Tong
	Tua Chua	Ta phin
		Sin Chai
		Ta Sin Thang
<b>2. Gia Lai</b>	KBang	Lo Ku
		Son Lang
		Kong Long
	Krong Pa	Chu Drang
		Chu Gu
		La Mlah
	Mang Tang	Ayun
		Dak Troi
		Kong Chieng
<b>3. Kon Tum</b>	Tumorong	Dakna
		Mangri
		Dak Ro Ong
	Daklei	Dak Pek
		Daklei town

		Dak Kroong
	Kon-Ray	Dak Rve town
		Tan Lap
		Dak To Re

The baseline assessment will cover the programme interventions that do not have baseline data and assess the pre-intervention situation through the lenses of equity human rights. In doing so, the assessment will deliver an analysis on how UNICEF can best address the rights of children in their early childhood stage for promoting their potentials and facilitating a smooth and successful transition into adolescent hood and adulthood.

#### *Sampling approach*

Service providers, parents/caregivers and children of the ages from 0 to 8 years will be the unit of the analysis. Purposive and random sampling methods are the preferred approach in determining sample sizes of the target groups for qualitative and quantitative assessments. The sample sizes must be determined with proper effect size and enough statistical power. The suggested confidence level is 95 % with 5% standard deviation and margin of error.

#### **Baseline methods and data collection tools**

The baseline assessment methods must be based on primary data collection using participatory, gender, equity and human rights approaches. The baseline data must be collected primarily through surveys, especially on indicators that will be measured quantitatively; focus group discussions and interviews for in-depth qualitative assessment of the situation of children and their families in terms of their knowledge and access to ECD.

Data collection tools must be culturally appropriate and include:

1. KAP questionnaire
2. Quantitative survey on the indicators' percentage rates and numbers
3. Qualitative information via FGD and interview protocols

The baseline of the following indicators must be collected:

1. Percentage of children aged 6 to 23 months who receive a minimum acceptable diet.
2. Percentage of mothers receiving post-natal care within two days of delivery.
3. Proportion of the population having an improved sanitation facility.
4. Attendance rate in early childhood education programme.
5. Number of communes with functioning IECD services.
6. Existence of integrated early stimulation, protection and nutrition intervention packages targeting 0 to 35 months old children
7. National monitoring systems reporting on equity of access to WASH services available

8. Proportion of health and nutrition workers trained in vitamin A supplementation as defined by national standards
9. Number of communities in the project locations certified ODF as a result of UNICEF and partner support in IECD provinces
10. Percentage of local service providers at grass root levels in the project locations (commune and villages) are able to perform IYCF counselling
11. Percentage of parents/child care givers and commune people in the project locations having Positive feedback/ comments to on IECD services
12. Existence of at least one m-IECD module (Child Protection-Nutrition-Education-WASH) applied mobile technology to fast track the progress of respective IECD interventions in the project locations
13. Number of ECD facilitators/teachers who received training with funding provided by UNICEF
14. Number of children benefiting from early childhood education through alternative approaches (such as home based provision of ECD, accelerated school readiness models, parent education, among others) with support from UNICEF
15. Number of child protection workers in UNICEF-supported communes who provide case management in line with national standards
16. Improved capacity of service providers from related sectors in providing IECD services at all platform
17. Accessible minimum IECD services in place with acceptable quality for parents, caregivers and children in targeted areas
18. An enabling environment created and maintained for implementation of IECD interventions in the province
19. Percentage of children aged 0-3 years in project locations received age-appropriate nutrition and early stimulation/learning from parents/child caregivers
20. Percentage of children aged 36-59 months in the project locations who are attending an early childhood education
21. Percentage of parents/primary caregivers of children aged 0-8 years in project the project locations who practise non-violent discipline and responsive parenting
22. Percentage of children aged 36-59 months in project locations on-track in at least three of four developmental domains (MICS IECD Index: Literacy-numeracy, physical, social-emotional and learning)
23. Percentage of parents and caregivers of children aged 0-8 years who believed that responsive and none violence parenting is the best for their children.
24. Percentage of boys and girls aged 6-8 years who know where to report violent incidents involving themselves and other children.
25. Percentage of parents and caregivers of children aged 0-8 years who recognize the benefits of all areas of IECD, and know where to seek help if they need supports.
26. Percentage of parents, caregivers of children aged 0-8 years who wanted to participate in IECD parenting/couselling platforms at grassroots level.

27. Percentage of local service providers including health workers teachers and ECE care givers in the project locations able to perform IYCF counselling and early stimulation exercises.
28. Number of child protection workers at commune level who could provide case management in line with national standards.
29. Percentage of parents/child caregivers who have positive feedback/comments on IECD services.
30. Percentage of ECE centres, including family-based child care groups in project locations which have minimum IECD equipment and early learning/stimulation services for young children.
31. Number of commune healthcare centres in the project locations have IYCF counselling, micro-nutrient supplementations services integrated with early stimulation services for young children.
32. Number of social work service centres applying national standards<sup>10</sup> established and functioning at provincial and district levels.
33. Percentage of communes in the project location covered by m-IECD module (including CP, Nutrition, Education contents) to fast-track progress of respective IECD interventions.
34. Proportion of pre-schools/IECD centres with WASH facilities meeting national/JMP standards.
35. Availability of co-ordination committee and mechanism on IECD at provincial, project districts and communes.
36. Availability of Provincial IECD Action Plan 2018-2021 with budget allocation for implementation.
37. Existence of a monitoring system for tracking the progress of the IECD models implementation.

### **Data Analysis**

The data analysis which is based on the baseline value of the above indicators must present a qualitative and quantitative picture of the situation of the target groups, with specific focus on:

- The situation of children, especially those in the three provinces and the most vulnerable ones, and their access to early childhood development services
- Existence of ECD services by life-cycle approach:
  - First 1000 days;
  - 36 – 59 months;
  - 5 – 8 years
- The extent to which existing ECD services are integrated:

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<sup>10</sup> National standards include parenting education services



- The comprehensiveness of the services: infant stimulation, parental education and early education at homes and centres, health and nutrition education and care, sanitation, juridical protection against abuse, exploitation, and violence, cash transfer (poverty reduction).
- The continuity of care in the services: from prenatal period to preschool ages reflecting a smooth transition between age groups and between developmental periods.
- The cultural appropriateness of the ECD services.
- Existing services for children in special needs (orphans, children with disabilities, children with HIV/AIDS).
- Capacity and knowledge of families in delivering nurturing care
  - Parental education and infant stimulation at homes and centres
  - Parental knowledge of health, nutrition, hygiene, education and care, including discipline
- Capacity of service providers in providing ECD services that are integrated to children
- Attendance rate of children aged 36-59 months in the early childhood education schools/programmes;
- The discipline styles of parents/caregivers and level of violence in the households with children the ages of 0-8 years;
- Existence of child protection services and their approach in protecting children from violence and case management procedures;
- Level of literacy, social, emotional and physical learning of children aged 36-59 months;
- Availability of budget, presence and functioning level of national coordination mechanisms and monitoring systems in ECD.

Data must be disaggregated by gender, location, ethnicity, income, language and ages of respondents.

#### **Key Questions for the Baseline Assessment:**

1. What are existing ECD services to children and their families in the target locations?
2. What is the level of the ECD service providers' capacity?
3. What is the level of accessibility of ECD services to children and their families?
4. To what extent do the service providers of different sectors coordinate with each other in delivering ECD services to children and their families? How do the most vulnerable and marginalized children benefit from these services?
5. What is the current nutritional status of children aged 0-3? What is the level of their access to age-appropriate nutrition in their families and at relevant centres? What is the extent of their parents'/caregivers' knowledge of early learning and infant stimulation?
6. Are there any available ECD centres/programmes for children? What is the attendance rate of children in ECD centres?

7. What is the level of violence in disciplining children in households? What child protection services exist to prevent violence, protect children and raise awareness on violence among the population in the target locations?
8. What is the level of literacy, socio-emotional and physical learning among of children aged 36 -59 months?
9. How are existing ECD services contributing to interpersonal relations between individuals in the community and intergroup relations especially groups having tension in the community (horizontal social cohesion)?
10. How are existing ECD services contributing to relations between individuals/groups and their authorities/governing institutions (vertical social cohesion)?
11. What is the amount of communal/district/provincial budget and percentage of it out of total to ECD services?
12. What coordination mechanisms and monitoring systems in ECD exist and how do they function?

## **Annex 2 – IECD Programme Outcome and Output Indicators**

### **Country Programme Level**

UNICEF Country Programme Outcome 3: By 2021 in selected areas of the three provinces, all children and their families, especially the most vulnerable, utilize inclusive and quality IECD services.

UNICEF CPD Outcome 3 indicators:

- Percentage of children aged 6 to 23 months who receive a minimum acceptable diet.
- Percentage of mothers receiving post-natal care within two days of delivery.
- Proportion of the population having an improved sanitation facility.
- Attendance rate in early childhood education programme.
- Number of communes with functioning IECD services.

CPD Output 3.1: Enhanced local capacity to develop and operationalise IECD centered, equitable and inclusive high impact child survival and development packages in focus provinces.

CPD Output 3.2: Strengthened capacity of education service providers in focus provinces to deliver quality early learning and school readiness programmes for children under 4 years.

CPD Output 3.3: Enhanced local capacity in focus provinces to develop and operationalize local child protection systems and services, including positive parenting, non-violent discipline.

### **Project Level**

**National level** - MOLISA Project's Specific Objective: Improved national capacity to legislate, monitor and oversee child rights related laws, policies and programmes.

Indicator relevant to IECD: Availability of a national policy on integrated early childhood development by 2018.

**Local level** - Provincial Projects with Gia Lai, Kon Tum, and Dien Bien implementing in 27 communes of 9 districts.

Provincial Project's long term objective: By 2021, all targeted children (0-8 years old) and their family members especially those of the most vulnerable groups in the target communes utilize inclusive and quality IECD services to fulfil children's rights to survival, development, education and protection.

Provincial Project's Long-term Indicators:

1. Percentage of children aged 0-3 years in project locations received age-appropriate nutrition and early stimulation/learning from parents/child caregivers
2. Percentage of children aged 36-59 months in the project locations who are attending an early childhood education project

3. Percentage of parents/primary caregivers of children aged 0-8 years in project the project locations who practise non-violent discipline and responsive parenting
4. Percentage of children aged 36-59 months in project locations on-track in at least three of four developmental domains (MICS IECD Index: Literacy-numeracy, physical, social-emotional and learning)

Provincial Project's Immediate objectives:

1. By 2021, parents, caregivers, and community members in programme communes have the knowledge, skills and supportive norms to access available IECD services and practice behaviours that support healthy IECD

Indicators:

- Percentage of parents and caregivers of children aged 0-8 years who believed that responsive and none violence parenting is the best for their children.
  - Percentage of boys and girls aged 6-8 years who know where to report violent incidents involving themselves and other children.
  - Percentage of parents and caregivers of children aged 0-8 years who recognize the benefits of all areas of IECD, and know where to seek help if they need supports.
  - Percentage of parents, caregivers of children aged 0-8 years who wanted to participate in IECD parenting/couselling platforms at grassroots level.
2. Improved capacity of service providers from related sectors in providing IECD services at all platforms

Indicators:

- Percentage of local service providers including health workers teachers and ECE care givers in the project locatons able to perform IYCF counselling and early stimulation exercises.
  - Number of child protection workers at commune level who could provide case management in line with national standards.
  - Percentage of parents/child caregivers who have positive feedback/comments on IECD services.
3. Accessible minimum IECD services in place with acceptable quality for parents, caregivers and children in targeted areas

Indicators:

- Percentage of ECE centres, including family-based child care groups in project locations which have minimum IECD equipment and early learning/stimulation services for young children.
- Number of commune healthcare centres in the project locations have IYCF counselling, micro-nutrient supplementations services integrated with early stimulation services for young children.

- Number of social work service centres applying national standards<sup>111</sup> established and functioning at provincial and district levels.
  - Percentage of communes in the project location covered by m-IECD module (including CP, Nutrition, Education contents) to fast-track progress of respective IECD interventions.
  - Proportion of pre-schools/IECD centres with WASH facilities meeting national/JMP standards.
4. An enabling environment created and maintained for implementation of IECD interventions in the province

Indicators:

- Availability of co-ordination committee and mechanism on IECD at provincial, project districts and communes.
- Availability of Provincial IECD Action Plan 2018-2021 with budget allocation for implementation.
- Existence of a monitoring system for tracking the progress of the IECD models implementation.

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<sup>1111</sup> National standards include parenting education services