

TERMS OF REFERENCE Baseline Evaluation

Project “Sports Spaces for Mental Health” for the period from 2025 to 2027

Location: Lai Chau and Tuyen Quang provinces

Duration: Dec 2025 – Mar 2026

1. About Plan International Vietnam

Plan International is an independent development and humanitarian organization that advances children's rights and equality for girls. We believe in the power and potential of every child but know this is often suppressed by poverty, violence, exclusion, and discrimination. And it is girls who are most affected. Working together with children, young people, supporters, and partners, we strive for a just world, tackling the root causes of the challenges girls and vulnerable children face. We support children's rights from birth until they reach adulthood, and we enable children to prepare for and respond to crises and adversity. We drive changes in practice and policy at local, national, and global levels using our reach, experience, and knowledge. For over 85 years, we have rallied other determined optimists to transform the lives of all children in more than 80 countries. We won't stop until we are all equal.

Plan International has been working in northern and central Vietnam since 1993. Our work supports marginalised children and youth, especially adolescent girls, to start life and grow up physically and mentally healthy and as adolescents so they are leading the way to shape their own future. We believe girls have the power to change the world. Our ambition is to work alongside them and together take action so that 2 million girls in Vietnam can learn, lead, decide and thrive by 2027.

2. Project Background and Objectives

2.1 Rationale of project:

Plan International Vietnam (PIV)'s Sport Spaces Model (SSM) uses team sports to engage parents to reduce violence and conflict, strengthen family functioning and improve youth mental health among ethnic minority youth aged 11-15 years and their parents in two Northern mountainous provinces, Lai Chau and Tuyen Quang. Unlike standard sports-based interventions that focus solely on youth, SSM engages youth and their parents, first as separate groups in Sport Club sessions, then together, through school and community sports events, to practice learned skills on mental health literacy, positive discipline, parenting skills and strengthen parent-child relationships. The initiative is co-led by students, teachers, and the Youth Union, with strategic support from the Departments of Education and Training (DoET) in each participating province, aiming for long-term sustainability and integration into national school health programs.

2.2 The overall goal of project:

Through the operation of an equitable, safe, and inclusive sports space, the project aims to enhance physical health, social connection, and the relationship between children, teachers, and parents in preventing factors that directly impact children's mental and physical health.

2.3 Project's outcome:

The project aims to achieve the following objectives:

- 1) **Adapt SSM:** Building on positive pilot outcomes (improved student-parent connectedness, reduced gender-based violence, and increased youth confidence), Grand Challenges Canada / Grands Défis Canada (“GCC”) funding will enhance SSM with family functioning strategies and mental health content tailored for ethnic minority communities. Parenting Clubs at the commune level will be integrated to boost parenting knowledge, mental health literacy, and promote positive parenting practices.

- 2) **Strengthen Evidence Generation:** GCC funding will support the implementation of the adapted SSM in two provinces with predominantly ethnic minority populations. Standardized evaluation tools will measure family connectedness and youth mental health outcomes, such as self-esteem and wellbeing, to generate credible evidence for policy advocacy and future scaling.
- 3) **Test Scaling and Sustainability Pathways Through Existing Structures and Local Actors:** With GCC's support, Plan International Vietnam will explore long-term scaling by strengthening national partnerships with the Ministry of Education and Training (MoET) and their line agencies at provinces and the Youth Union. SSM will be aligned with partner priorities on youth mental health, encouraging ownership in adaptation, replication, and coordination at schools and communes to support future integration into national frameworks.

2.4 Project implementation period: 01/10/2025-31/01/2027

2.5 Project target group:

This baseline survey will cover representations of project stakeholders, policy makers, government authorities, teachers, community members, women and men, children and adolescents in Lai Chau and Tuyen Quang provinces, including:

- 6,000 Adolescents aged 11-15, particularly girls and vulnerable groups (representation of different ethnic groups, people with disabilities...);
- 5,700 Parents/ caregivers who are both project participants in their role as duty bearers;
- 280 Education authorities, school managers and teachers/ physical education teachers will work as the primary duty bearers as they are working with students;
- 150 members of Youth Union and local authorities.

2.6 Geographical area for interventions:

- 3 communes: Khong Lao, Sin Suoi Ho, Dao San in Lai Chau province
- 3 communes: Yen Minh, Meo Vac, Khau Vai in Tuyen Quang province

2.7 Donors: This project is supported by Being – an international mental health initiative hosted by Grand Challenges Canada and funded in part by the Government of Canada, Fondation Botnar, and The UK's Department of Health and Social Care using UK aid through the National Institute for Health and Care Research (NIHR) and Plan International Canada.

3. Purpose of the Baseline

3.1 Purpose:

The purpose of the assignment is to carry out a study to measure the status of project indicators at the beginning of the project (*please refer to the list of project indicators given in Appendix 1*). The information on the indicators will later be used to measure and monitor the project progress against the set indicators over the course of the project implementation.

The baseline will, in addition to collecting data to measure the indicators, seek to answer the following questions:

- 1) What is the current status and extent of knowledge and attitudes regarding mental health among students, teachers, and parents/caregivers in the targeted area?
- 2) What is the prevalence and nature of barriers, specifically those related to academic pressure, GBV including domestic violence and parent-child connection that affect the well-being of ethnic minority (EM) children in the targeted areas?
- 3) What is the current level of capacity and engagement of local actors (teachers, school leaders, and Youth Union members) to implement Sport Spaces Model?
- 4) What are determinants influencing the engagement of government agencies and private sector to scale up the SSM?

3.2 Scope of work:

The consultant(s) are expected to conduct work as follows:

- In consultations with PIV, contribute to the finalization of a MERL framework, including standardized tools to track mental health outcomes
- Find the baseline values for project indicators
- Analyse current situations of children and project participant's MH and sports spaces
 - KAP of adolescents, parents/caregivers, teachers/ school leaders and members of Youth Union on MH
 - Current status of sports spaces for MH at schools and communities
- Conduct consultation on SSM with stakeholders:
 - Stakeholder mapping to identify key actors to engage in the project cycle (from model adaptation to scaling up)
 - Challenges and opportunities for Government agencies, schools and private sector to establish and scale-up the SSM
- Assess specific needs and priorities of relevant stakeholders related to expected outcomes of this project
- Cross-cutting issues: gender-transformative approach, child-friendly feedback mechanism.

4 Users of the Baseline

The intended users of this report are project donors, Plan International, project stakeholders (DOET, Youth Union), and relevant partners.

Dissemination of findings:

Findings of the baseline survey will be disseminated to the donors, the project stakeholders and beneficiaries in order to get their feedback/comments. Dissemination activities will be logistically organized by PIV through project's workshops/meetings among project partners, stakeholders and beneficiaries. The consultants will be invited to participate and give presentations online.

5 Methodology

It is expected that the consultant(s) will develop a detailed methodology for data collection, data management and analysis in their proposal. This methodology should be in direct response to the project indicators and other baseline research questions regarding the project context. The baseline report should include an intersectional analysis of findings (particularly around disability and ethnicity) and include data disaggregated by gender, age, ethnicity, and disability to capture differential impacts and inform targeted interventions.

This methodology will be further unpacked in the Inception Report by the consultant(s) once the baseline is underway.

5.1 Methods for Data Collection and Analysis

The consultant(s) will be responsible for describing the overall baseline evaluation design, data sources to be used (including sampling), methodology and data collection tools that are best suited to the assignment and local context. The methodology must include clear data validation steps to ensure the accuracy and reliability of all collected baseline data. The consultant(s) should employ data triangulation, utilizing multiple independent sources (e.g., surveys, focus groups, and secondary data) to cross-verify findings and enhance the credibility of the final report.

The consultant(s) are recommended to use different data collecting methods, such as:

- Desk review (external literature, key project documents): review the relevant documents, including the project proposal, resources and results framework, documentation, reports, and other relevant research.
- Direct observation

- Key informant interviews
- Questionnaires
- Focus group discussions

The survey design and methodology will be discussed and agreed with PIV project team and with the implementing partners (Project Management Boards, DoETs, Youth Unions) at the beginning of the consultancy. The consultants/ experts are also expected to provide friendly and simple methods so that youth and adolescents, vulnerable people can participate. Child participation methods are required to guide and support youth and adolescents during the survey.

5.2 Sample

The consultant(s) will propose an appropriate sampling methodology and size that is statistically valid and cost-effective, based on information provided by the project team to ensure that necessary information can be collected. All data, qualitative and quantitative collected through the study must be disaggregated by sex. Both the sample size and tools will be discussed and agreed with PIV project team before the commencement.

The consultant(s) are expected to develop and suggest a sampling strategy including a description of:

- Sample size (or expectations of the consultant(s) in calculating it).
- Necessary respondents' disaggregation
- Number and type of locations
- Sampling approach

Sample size submitted to PIV should follow table format below:

Indicator	Data collection by consultant	Data collection methods	Tool		Sample			Notes
			Existent	To be developed by the consultant(s)	Stakeholder	Location	Minimum number	
	Yes	Questionnaires		x	- With men, women (Parents, teachers) - With adolescent girls and boys - With people with disabilities (if any)	1-2 Project schools at 2 communes Lai Chau province & schools at 2 communes in Tuyen Quang province	-Students: 362 -Parents: 360 -Teachers: 233 -Local authorities: 125	- 3 new communes (former 4 communes) in Tuyen Quang - 3 new communes (former 5 communes) in Lai Chau
	Yes	FGDs		x	- With adolescent girls - With adolescent boys - With people with disabilities - Teachers	1-2 Project schools at 2 communes Lai Chau province & schools at 2 communes in Tuyen Quang province	-2FGDs/ school (for male and female groups) -1FGD teacher/school	
	Yes	KII with partners & stakeholders		x	Leaders of project partners & government agencies	Lai Chau & Tuyen Quang provinces	1 leader/ school, 1 DOET representative, 1 YU representative	DoET & Youth Union
	Yes	Case studies		x	- With men, women - With adolescent girls and boys - With people with disabilities (if any)	Lai Chau & Tuyen Quang provinces	03-04 case studies	

6 Ethics and Child Protection

PIV is committed to ensuring that the rights of those participating in data collection or analysis are respected and protected, in accordance with Ethical MERL Framework and our Global Policy on Safeguarding Children and Young People. All applicants should include details in their proposal on how they will ensure ethics and child protection in the data collection process. Specifically, the consultant(s) shall explain how appropriate, safe, non-discriminatory participation of all stakeholders will be ensured and how special attention will be paid to the needs of children and other vulnerable groups. The consultant(s) shall also explain how confidentiality and anonymity of participants will be guaranteed.

A risk assessment will be conducted by the PIV's safeguarding focal points and the consultant team before implementing the baseline survey to mitigate foreseen risks for children, youths and participants in the survey.

Note: Before implementing data collection, the consultant must get Ethics Approval by a recognized university or a national ethics committee or PLAN-Ethics Review Team. Feedback from ERT will be provided within 3-4 weeks' timeframe from submission. For sensitive applications initial feedback may take longer, and there may be multiple rounds of feedback (with adequate time needed to action and review feedback/ revisions).

Level of Contact with Children:

High level: *Interaction with children in consultations are required. The consultant must comply with Plan's child protection policy and standards throughout the research process*

7 Key Deliverables

The consultant(s) are expected to provide the following key deliverables:

- a. Inception Report (in English) including:
 - an updated timeline;
 - detailed methodology, including draft sampling methodology and size;
 - draft data collection tools;
 - ethical considerations;
 - consent forms for any primary data collection;
 - (draft) methods for data analysis;
 - brief justification of the methods and techniques used (including relevant underlying values and assumptions/ theories) with a justification of the selections made (e.g. of persons interviewed).
- b. An orientation session organised for local enumerators
- c. Draft Baseline Report including an Indicator Tracking Table with baseline data inserted
- d. Final Baseline Report (including Executive Summary) in English and Vietnamese
- e. Final Sampling methodology (including unit of sampling and sampling frame) and size
- f. Final Data Collection Tools
- g. Cleaned Data (including data files (e.g. Excel, SPSS), transcripts of qualitative data, syntax/ code books etc.)
- h. Completed Consent Forms (including for children and their caregivers and adults)
- i. Other Communication Products for Dissemination

8 Timeline and Estimated Working Days

The consultancy is estimated to be undertaken within 42 days from December 2025 and to be completed by March 2026.

A detailed timeline will be worked out jointly with the consultants after recruitment but a preliminary timeline for the key deliverables is:

Task/ Deliverable	Deadline	Estimated No. of working days
Tendering	4-17/12/2025	N/A
Background Checks and Contracting	18-24/12/2025	N/A
Inception Workshop	25-26/12/2025	0.5 day
Submission of Inception report	04/01/2026	04 days
Preparations for Data Collection (testing of tools, training of enumerators, ethical approval for data collection)	15/01/2026	4.5 days
Data Collection	16/01-05/02/2026	16 days
Data Entry, Cleaning, and Analysis	05/02-25/02/2026 (including Lunar New Year break from 14-22/2/2026)	05 days
Submission of Draft Report in Vietnamese	28/02/2026	06 days
Presentation of the findings	Mar 2026 - TBD	01 day
Validation of findings with PIV	01-10/03/2026	02 days
Submission of Draft Report in English	11/03-14/03/2026	01 day
Validation of findings with key stakeholders and respondents, including CNO	15-25/03/2026	2 days
Submission of Final Reports and Other Deliverables to PIV	30/03/2026	N/A

9 Budget

The consultants are required to propose a detailed budget for this consultancy together with the technical proposal, and submit to PIV for review and approval. The budget should include number of working days and daily rate in VND for the lead consultant(s) and in-country team members. The consultancy fee does not include traveling, field work and logistic costs that will be paid for directly by PIV.

Table of Payment Schedule:

Milestone	Amount to be Paid (%)
Submission of Inception Report to PIV and upon Plan Vietnam's approval	30
Submission of final reports and remaining key deliverables (mentioned in Section 7) to PIV and upon Plan Vietnam's approval	70

The baseline survey must be designed to be cost-efficient by minimizing resource expenditure while still ensuring the high quality and rigor of data.

10 Management

Consultant(s) will conduct the baseline evaluation based on the workplan and methodology agreed with Plan International Vietnam.

Project Coordinator in PIV Country Office will be the focal person to coordinate the consultant hire, work plan, methodology and review reports to ensure the report meets criteria.

Provincial Program Managers (PPMs) at Tuyen Quang and Lai Chau Program Units are focal persons and responsible to coordinate and arrange the field work, meetings, invite key relevant stakeholders for interviews, FGDs ... during field data collection as well as input comment during finalization of the reports.

11 Qualifications and Experience of the Consultants

PIV is looking for a consultant (or a group of consultants) with strong records in conducting evaluation related to community development and empowerment, participatory development and methodologies, gender-based violence, mental health, youth activism, particularly in Vietnamese and mountainous, ethnic minority

community's context. The consultants/ experts will need respect and credibility within the field, excellent knowledge of monitoring and evaluation in theory and practice, and a good understanding of policy work.

Required Competencies:

- Demonstrable experience (5 to 10 years) in designing and conducting quantitative and qualitative research/evaluation of complex programs and ability to conduct high quality research, meet deadlines and respond to requests and feedback provided timely and appropriately.
- Demonstrable expertise (5 to 10 years) on community development and empowerment, child protection, children's mental health, gender equality and GBV with gender sensitizing.
- Strong analytical skills and previous experience in data entry using statistical analysis software.
- Experience in undertaking participatory research and consultations.
- Knowledge of Vietnam governance and cultural context.
- Knowledge of women's and children's and adolescent rights: previous experience conducting research with children and vulnerable groups would be considered an asset.
- Excellent and demonstrated understanding of Child Protection and ethical issues in research.
- Excellent written and verbal communication and reporting skills in English.

12 Contact

Consultant(s) who are interested in taking this consultancy, please submit the proposal package in English via email to: van.phamthihong@plan-international.org or

Please send your application to Plan International Viet Nam, referencing Baseline for "Sports Spaces for Mental Health" project in the subject line, and including support documents as outlined to:

- Plan International Vietnam
Address: 6th Floor, Capital Building, Lane 36, Giang Van Minh str., Kim Ma Ward, Ba Dinh Dist., HN

The deadline for submitting the proposal package will be **no later than 23:59' on 17th December 2025**.

13 Applications

Interested applicants should provide a proposal covering the following aspects:

- Detailed response to the TOR
- Proposed methodology
- Ethics and child safeguarding approaches, including any identified risks and associated mitigation strategies
- Proposed timelines
- Recent consultants' CVs
- Two examples of previous work (summary or partial work will be accepted)
- Detailed budget estimation, including daily fee rates, expenses, taxes, etc.

We appreciate your interest. Please note that only selected applicants will be invited to the interview stage.

APPENDIX 1: List of Indicators

- **Outcome 1:** Adapt the Sport Spaces Model (SSM) for ethnic minority contexts and strengthened parent engagement
 - **VNM-LDI-O.001.001** Level of engagement of local authorities (educational/youth union leaders, local government leaders) to adapt and implement the Sport Spaces Model to promote MH outcomes for children
 - Suggestion: of schools and communes implementing or replicating the adapted Sport Spaces Model under DoET leadership"
 - **VNM-LDI-O.001.002** % of teachers who demonstrate improved capacity on mental health literacy, positive discipline, and inclusive sport facilitation and are able to implement the Sport Spaces Model
 - **VNM-LDI-O.001.003** % of parents and teachers who understand the importance of child mental health
 - **VNM-LDI-O.001.004** # of Sport Spaces Model materials and activities adapted to ethnic minority contexts
- **Outcome 2:** Implement the adapted SSM in Ha Giang and Lai Chau provinces to generate evidence regarding its effectiveness of fostering positive relationships between young people and their parents / caregivers
 - **VNM-LDI-O.002.001** % of students who report improved self-esteem and well-being
 - **VNM-LDI-O.002.002** % of EM students who report increase feelings of connectedness with parents
 - **VNM-LDI-O.002.003** % of EM students who report increase feelings of connectedness with their peers
 - **VNM-LDI-O.002.004** % of parents/caregivers (disaggregated by gender) that state to practice positive disciplining behaviors towards their children (KAP Survey: Mental Health Literacy & Positive Discipline)
- **Outcome 3:** Identify and test pathways to scale and sustainability for continued implementation of the SSM through existing structures and local actors
 - **VNM-LDI-O.003.001** Level of engagement of local authorities and actors (educational/youth union leaders, local government leaders) to develop an action plan for model scale-up
 - Suggestion: # of evidence of established coordination between local authorities, educational/youth union leaders, schools to sustain and scale-up sport space model. (Evidence: MoU, action plan, working group, memo, meeting...)"
 - **VNM-LDI-O.003.002** # of stakeholders that recognized successes of the model for replication
 - Suggestion: % of local stakeholders (education, Youth Union, commune authorities) reporting that the SSM is a feasible and effective model for improving children's mental health (MH) and social connection."
 - **VNM-LDI-O.003.003** # schools integrating sport space model components into existing plans, programs or budgets