

TERMS OF REFERENCE

Final Evaluation

Conducting period: 01 September to 29 January 2025

Project "Ethnic minority (EM) adolescents and young people aged 11-24 in Tuyen Quang province are protected from becoming victims of child early and forced marriage (CEFM)"

Location: 8 EM Semi-Boarding Lower Secondary Schools across 6 communes in Tuyen Quang Province: Bản Luốc, Chiến Phố, Pồ Lò, Tân Tiến, Tụ Nhân, Tả Nhiu, Nàn Ma và Năm Dẩn.

Project Duration: 01 April 2023 - 31 March 2027

1. About Plan International Vietnam

Plan International is a humanitarian and development organization focused on children, with a particular emphasis on achieving equality for girls. With over 80 years of experience, Plan International currently operates in more than 75 countries worldwide. Plan International began its work in Northern and Central Vietnam in 1993.

The mission of Plan International is to support children, young people, and especially adolescent girls to be born and grow up healthy both physically and mentally, and to be empowered to make informed decisions about their own futures. We believe that girls have the power to change the world. Therefore, Plan International's ambition is to work alongside girls to ensure that, by 2022, two million girls across Vietnam are able to learn, lead, decide, and thrive.

2. About the Project

According to a research report conducted by Plan International Vietnam in 2022, unintended pregnancy remains one of the main drivers of child marriage in Tuyen Quang Province. Child, Early, and Forced Marriage (CEFM) is a harmful practice, a form of gender-based violence, and a violation of children's rights and the rights of girls and women. CEFM among the ethnic minority (EM) groups is common, with prevalence rates as high as 59.7% among the H'Mong; and 37.8% among the Dzao, which are the two largest EM communities in Tuyen Quang province. CEFM is caused by many interrelated issues and involves diverse risk factors and therefore requires addressing multiple sectors. A situation analysis of adolescents and young people on the topic CEFM in Tuyen Quang demonstrates key issues as (1) Increase of unwanted pregnancies and high abortion rates; and (2) Increased number of cases of violence against children and young people, especially during the COVID-19 pandemic; Given that situation on CEFM of EM children and young people is complicated and requires multi-sectoral and diverse approaches, the main causes leading to key issues faced by EM children and young people are recognized below:

- (1) Lack of opportunities and resources for EM children, adolescents and young people to be active agents of change to address issues affecting them;
- (2) Gender norms and harmful practices on sexual reproductive health and rights (SRHR) and CEFM strongly remain in adolescents, young people, parents and teachers;
- (3) CEFM and school drop are perceived to affect each other;
- (4) Poor living conditions in boarding schools, including WASH systems in Tuyen Quang;
- (5) Weak incorporation of child protection mechanisms among schools and communities;

The project goal and its interventions aim at providing strong support for the local government's commitments and national programmes on CEFM and EM community strategic plans in the coming years. The government plans include the "Master Plan for Social-Economic Development of Ethnic Minority and Mountainous Regions

for the 2021-2023 period" approved by the Vietnamese Government, the "National Strategy for Gender Equality in 2021-2030" and the "National Action Plan on Reproductive and Sexual Healthcare for Adolescents and Young Adults in the Period 2020-2025". In Tuyen Quang, the provincial government aims to ensure the implementation of the general education programme (period 2022-2025) in which the province needs to invest in improving classrooms with a total of 2,952 rooms, including 386 rooms at secondary schools. Currently, the rate of improved classrooms in the province only reached 61.5%. Based on the social and economic conditions of Tuyen Quang, the local government deals with challenges to achieve the goal. The project prioritises addressing the main causes of issues of child protection, CEFM and SRHR at boarding schools and ethnic minority communities in Tuyen Quang province that contribute directly to the priorities of the local government.

Over a four-year period (01 April 2023 – 31 March 2027), with funding from UNIQLO's PEACE FOR ALL Fund, and through Plan International in collaboration with local authorities, the project is implemented in eight lower secondary ethnic minority boarding schools (including two inter-level semi-boarding schools for primary and lower secondary levels, Ta Nhiu and Tu Nhan) across six communes in Tuyen Quang Province.

After four years, the project aims to achieve the following results:

Please see *Appendix 1 – Logframe* and *Appendix 2* for Indicator Definition and required tools for each.

Objectives: Overall, the project supports ethnic minority (EM) adolescents and young people aged 11-24 years in Tuyen Quang province to be protected from becoming victims of CEFM. By the end of March 2027, the project has three specific objectives:

Specific Objective 1 (SO1): EM young people have increased capacity to be youth activists on shifting CEFM and SHRHR norms and harmful practices.

- **Result 1.1:** Adolescent girls and boys in 8 boarding schools have increased understanding about the risks of CEFM and knowledge on SRHR (through Comprehensive Sexual Education - CSE);
- **Result 1.2:** Young people in communities have sufficient knowledge and skills on child protection and SRHR;

SO2: The condition of boarding schools is improved to meet minimum child protection standards for adolescent girls and boys.

- **Result 2.1:** Dormitory facilities at boarding schools are improved to meet minimum child protection standards;
- **Result 2.2:** School counselling services in boarding schools are improved to provide SRHR for adolescent girls and boys;

SO3: Parents/caregivers, teachers and school staff have increased capacity to protect adolescent girls and boys

from CEFM.

- **Result 3.1:** Parents and caregivers have raised their awareness on SRHR and CEFM;
- **Result 3.2:** Teachers, school staff and healthcare workers are sensitised on child protection and SHRHR to accompany adolescents on ending CEFM;

SO4: A school and community child protection mechanism is developed / strengthened to tackle CEFM.

- **Result 4.1:** The child protection mechanism at schools is developed/ strengthened to prevent CEFM.
- **Result 4.2:** The cooperation between schools and communities is increased to respond to CEFM cases;

3. Purpose and Scope of the Endline Independent Evaluation

3.1 Purpose of the Endline Evaluation

The purpose of this independent endline evaluation is to systematically assess the extent to which the project has achieved its overall goal, specific objectives, and intended results as outlined in the project logframe (Appendix 1) by the end of the implementation period.

Particular emphasis will be placed on self-efficacy and confidence as key intermediate outcomes of the project, as these are critical drivers of behavioural change and prevention of Child, Early and Forced Marriage (CEFM).

Specifically, the evaluation aims to:

- Assess the effectiveness and results of project interventions in preventing Child, Early and Forced Marriage (CEFM) among ethnic minority adolescents and young people in the project area, and analyse associated changes in knowledge, attitudes, behaviours, capacities and practices related to Sexual and Reproductive Health and Rights (SRHR), child protection and CEFM, including improvements in self-efficacy, confidence and decision-making among adolescents, particularly girls;
- Examine the pathways through which Comprehensive Sexuality Education (CSE) and community-based interventions contribute to improved knowledge and awareness, which in turn enhance self-efficacy, confidence and decision-making capacity among adolescents, particularly girls, ultimately influencing behaviours related to the prevention of Child, Early and Forced Marriage (CEFM);
- Examine the relevance, coherence and quality of project design and implementation, and its contribution to child rights, gender equality, social inclusion and the empowerment of adolescents and young people, including psychosocial changes such as confidence, agency and informed decision-making.
- Identify and analyse the most significant changes experienced by beneficiaries using Most Significant Change (MSC), and use these findings to generate evidence, derive lessons learned, good practices, key challenges, and factors affecting project outcomes.
- Provide practical, evidence-based recommendations to inform future programming, policy dialogue, and scale-up or replication of similar interventions by Plan International Vietnam and partners.

The findings of the endline evaluation will be used for accountability to stakeholders, organisational learning, and strategic planning for future interventions on CEFM, SRHR and child protection in ethnic minority contexts.

3.2 Scope of Work

Across all areas, the evaluation will place particular emphasis on changes in self-efficacy, confidence and decision-making among adolescents, especially girls, and how these changes contribute to behavioural outcomes and the prevention of CEFM, including through the use of Most Significant Change (MSC) to capture meaningful beneficiary experiences.

Key areas	Specifications
1. Achievement of Project Results	<ul style="list-style-type: none"> • Assessment of progress and achievement against goal, outcomes and outputs, as defined in the project logframe (Appendix 1); • Analysis of intended and unintended outcomes for different target groups, including girls, boys, youth, parents/caregivers, teachers and service providers.
2. Changes in Knowledge, Attitudes	<ul style="list-style-type: none"> • Changes in knowledge, attitudes and behaviours of adolescents, young people, parents/caregivers, teachers and school staff regarding:

Key areas	Specifications
and self-efficacy/self-confidence of adolescents and young people	<ul style="list-style-type: none"> ○ SRHR; ○ CEFM and associated harmful practices; ○ Risks, forms and consequences of early and forced marriage. <ul style="list-style-type: none"> ● Assessment of the effectiveness of Comprehensive Sexuality Education (CSE) and community-based awareness interventions. ● Assessment of psychosocial changes, including confidence, agency and ability to make informed decisions among adolescent girls and boys;
3. Protection and Self-Protection Capacities	<ul style="list-style-type: none"> ● Assessment of self-protection capacities of girls, boys and vulnerable groups to prevent and respond to risks related to CEFM; ● Availability, accessibility and quality of child protection and SRHR support services, including referral pathways and counselling services in schools and communities.
4. Child Protection Mechanisms and Coordination	<ul style="list-style-type: none"> ● Effectiveness of school- and community-based child protection mechanisms in preventing, detecting and responding to CEFM cases; ● Quality of coordination and collaboration between schools, communities, local authorities and service providers at district and provincial levels.
5. Youth Engagement and Social Norm Change	<ul style="list-style-type: none"> ● Assessment of youth-led initiatives in challenging harmful gender and social norms related to CEFM and SRHR; ● Identification of enabling and hindering factors affecting adolescent and youth participation as agents of change.
6. Relevance, Sustainability and Institutional Capacity	<ul style="list-style-type: none"> ● Relevance of project interventions to the needs and priorities of ethnic minority adolescents and communities; ● Sustainability of results, including institutional ownership, capacity of schools and local authorities, and integration with government policies and programmes.
7. Cross-cutting Issues	<ul style="list-style-type: none"> ● Integration and outcomes related to: <ul style="list-style-type: none"> ○ Child rights-based approach; ○ Gender equality and social inclusion (GESI); ○ Participation and safeguarding of children and adolescents.
8. Lessons Learned and Recommendations	<ul style="list-style-type: none"> ● Key lessons learned from project implementation; ● Actionable recommendations to improve future programming, partnerships, policy engagement and scaling-up of effective approaches.

3.3 Project coverage.

Please see the *Appendix 3 – Brief of Project Infrastructure and Material Support for Target Schools*.

Target Schools:

New communes	Communes before the merger (project area)	Former districts	Target schools: 8 secondary semi-boarding schools
Hoàng Su Phi	Vinh Quang town, Bản Luốc , Tụ Nhân , Đản Văn communes	Hoàng Su Phi	1. Tụ Nhân Secondary Semi-boarding school 2. Bản Luốc Secondary Semi-boarding school 3. Chiến Phố Secondary Semi-boarding school 4. Tân Tiến Secondary Semi-boarding school 5. Phố Lò Secondary Semi-boarding school
Tân Tiến	Tân Tiến , Bản Nhùng, Túng Sán communes		
Bản Máy	Chiến Phố , Bản Phùng, Bản Máy communes		
Thàng Tín	Phố Lò , Thèn Chu Phìn, Thàng Tín communes		
Pà Vầy Sù	Cốc Pài town, Nàn Ma , Bản Ngò, Pà Vầy Sù communes	Xin Mần	6. Nàn Ma Secondary Semi-boarding school 7. Nám Dẩn Secondary Semi-boarding school 8. Tả Nhiu Secondary and Primary Semi-boarding school
Nám Dẩn	Nám Dẩn , Tả Nhiu , Chế Là communes		

Target Groups

- Students in secondary semi-boarding schools (girls and boys)
- Parents/caregivers (clubs) and community members (village heads, Youth Union and Women's Union at village level) in villages where students from the project schools are enrolled.
- School leaders, teachers to deliver CSE lessons (as homeroom teachers) and school staff/teachers in charge of school counselling role.
- Local authorities: Plan-supported Project Management Board at commune level; communal Child Protection Body.
- Youth groups: School-based Champions of Change (COC), Youth Economic Empowerment (YEE), Youth Union members.
- Ethnic minority adolescents and young people (11–24 years old)

Below are the number of project participants who are directly benefited from project interventions:

Targeted secondary school boarding name	Commune	Students		Teachers		Member of School Parenting Clubs	Core members of Youth & Women union	Commune Officials
		Girl	Boy	Fem.	Male			
Ta Nhiu (I&II)	Nam Dan	146	145	21	16	30	60	2
Nam Dan		151	136	6	12	30		
Nan Ma	Pa Vay Su	164	156	7	12	30	30	2
Chien Pho	Ban May	162	164	14	8	30	30	2
Po Lo	Thang Tin	128	146	13	11	30	30	2
Tan Tien	Tan Tien	107	119	31	22	30	30	2
Ban Luoc	Hoang Su Phi	135	155	20	15	30	60	2
Tu Nhan (I&II)		73	107	15	25	30		
Total		1,066	1,128	127	121	240	240	12

Key Intervention Areas:

<p>1. Empowering Ethnic Minority Adolescents and Young People as Agents of Change <i>(Linked to SO1, Results 1.1 & 1.2)</i></p>	<ul style="list-style-type: none"> • Delivering Comprehensive Sexuality Education (CSE) in boarding schools through training of trainers and teachers, provision of CSE materials, and structured classroom lessons to improve adolescents’ knowledge of SRHR and risks of CEFM. • Strengthening adolescents’ decision-making and self-efficacy by equipping girls and boys with knowledge, life skills and confidence to make informed SRHR decisions and support delayed marriage. • Building youth leadership and activism capacities through communication, leadership and advocacy trainings for members of COC and Youth Economic Empowerment clubs. • Supporting youth-led awareness-raising and norm-change initiatives at school and community levels, including campaigns and events promoting SRHR and ending CEFM. • Amplifying youth voices and positive social norms through community outreach, district-level events and (where feasible) social media and online campaigns led by youth activists.
<p>2. Improving Boarding School Conditions to Meet Minimum Child Protection Standards <i>(Linked to SO2, Results 2.1 & 2.2)</i></p>	<ul style="list-style-type: none"> • Upgrading and constructing boarding school infrastructure (dormitories, classrooms, toilets, water and sanitation facilities) to ensure safety, privacy, gender separation and compliance with minimum child protection standards. • Improving basic boarding facilities such as lighting, ventilation, doors, windows and hygiene systems to reduce risks and create a safe living environment for girls and boys. • Establishing and equipping child-friendly, gender-responsive school counselling rooms as safe spaces for adolescents to access SRHR information and support. • Providing essential equipment and learning materials to enhance the quality and accessibility of school-based counselling and SRHR services. • Strengthening the capacity of school counsellors and relevant staff through specialised training on adolescent SRHR, child-friendly counselling, disability inclusion and CEFM prevention
<p>3. Strengthening Capacities of Parents, Caregivers and Education & Health Professionals <i>(Linked to SO3, Results 3.1 & 3.2)</i></p>	<ul style="list-style-type: none"> • Raising parents’ and caregivers’ awareness on SRHR and CEFM through parenting clubs, community discussions and tailored communication materials to improve understanding of child protection risks, violence and harmful practices related to early marriage. • Shifting social and family norms on CEFM by promoting positive attitudes toward delayed marriage, adolescents’ right to make informed decisions about marriage, and non-violent, supportive parenting practices. • Strengthening community-based communication and outreach via trained local facilitators, parenting clubs and collaboration with provincial and district mass media to amplify key messages on SRHR and ending CEFM.

	<ul style="list-style-type: none"> • Building capacities of teachers, school staff and healthcare workers through school-based orientation seminars on child protection, SRHR and gender-responsive approaches to accompany adolescents in preventing CEFM. • Promoting good practices and proactive support from schools through cross-learning and experience-sharing among teachers and school management to encourage delayed marriage and protection of girls and boys.
<p>4. Developing and Strengthening School and Community Child Protection Mechanisms (Linked to SO4, Results 4.1 & 4.2)</p>	<ul style="list-style-type: none"> • Developing and/or strengthening child protection mechanisms in schools to prevent, detect and respond to cases of CEFM; • Improving coordination and cooperation between schools and communities, including referral pathways and response mechanisms for CEFM cases; • Supporting functional linkages between schools, community structures and local authorities to ensure timely and effective protection responses for children and adolescents.

4. Users of the Final Evaluation

The primary users of the **Final Evaluation** include **Plan International Japan, Plan International Vietnam (PIV), relevant project stakeholders, and partners** at provincial, district and community levels.

The evaluation findings will be used to:

- Assess the **overall achievements and results** of the project by the end of the implementation period;
- Support **accountability** to the donor, partners and beneficiaries;
- Inform **organisational learning**, future programme design and potential scale-up or replication of effective approaches on CEFM prevention.

Dissemination of Findings

The findings of the Final Evaluation will be disseminated to the donor, project stakeholders and beneficiaries to ensure transparency, learning and collective reflection on project results and lessons learned.

Dissemination activities will be logistically coordinated by Plan International Vietnam, including a final evaluation dissemination workshop with project partners, stakeholders and beneficiaries.

At the end of the assignment, the external consultant(s), in collaboration with PIV, are expected to **present and facilitate discussion on the key findings, conclusions and recommendations** of the Final Evaluation during the dissemination workshop.

5. Methodology

5.1 Methods for Data Collection and Analysis

The external consultant(s) will be responsible for designing and implementing an appropriate and robust Final Evaluation methodology to assess the project’s overall performance, results and outcomes by the end of the implementation period. The consultant(s) are expected to clearly describe the **evaluation design, data sources, sampling approach, data collection tools and analytical methods**, ensuring methodological rigor and consistency with the project’s **baseline, mid-term review and monitoring framework**, where relevant, to enable comparison of changes over time.

A mixed-methods approach is required, with data collection tools designed to assess changes in self-efficacy, confidence and decision-making capacity among adolescents, particularly girls. This should include both perception-based survey questions and qualitative methods (e.g. FGDs, KIIs and MSC stories) to capture how adolescents experience changes in their ability to make informed decisions related to SRHR, express their views, and refuse or delay early marriage:

- **Desk review** of key project documents and external literature, including the project proposal, logframe, baseline and midline data, quarterly progress reports with yearly indicator tracking, and other relevant documents;
- **Direct observation** of selected project sites and facilities (e.g. schools, boarding facilities, counselling spaces), where feasible;
- **Key informant interviews (KIIs)** with students, parents, teachers, implementing partners, local authorities, project staff and other relevant stakeholders;
- **Questionnaire surveys** with selected target groups, including adolescents and young people, parents/caregivers and teachers, as appropriate;
- **Focus group discussions (FGDs)** with adolescents, youth, parents/caregivers, teachers and other relevant stakeholders, as appropriate.
- Collection and analysis of Most Significant Change (MSC) stories: In addition to FGDs and KIIs, the evaluation must apply qualitative approaches such as the Most Significant Change (MSC) methodology to capture deeper, beneficiary-centered narratives of change, particularly among girls and female youth.
- The MSC process should include systematic collection, selection and analysis of stories to identify the most significant changes and their implications. This approach will provide powerful qualitative evidence to support evidence-based reporting and communication of project results, particularly for external stakeholders.

Please note that the consultant(s) are required to **clearly specify, for each proposed method and indicator**, the following elements:

- **Who will be responsible for data collection**, including clarification on whether data will be collected directly by the consultant(s), trained local enumerators or other designated personnel (please note that Plan staff will not be allowed involved in the field data collection);
- **The number of data collectors/enumerators will be needed**, their roles and required qualifications;
- **The expected number of respondents and enumerators** for each indicator and data collection method;
- **How data collection responsibilities and processes align with the indicator definitions and data requirements.**

The proposed methodology, including roles, responsibilities and sample size assumptions, must **strictly follow and be presented in line with the 5 detailed sheets provided in Annex 4 – Endline Master Plan** ensuring clarity, transparency and feasibility of data collection and analysis.

The Final Evaluation design, methodology and tools will be discussed and agreed with the Plan International Vietnam (PIV) M&E team, project team and implementing partners at the inception stage of the consultancy.

The consultant(s) are required to apply child-friendly, gender-responsive and inclusive methods, ensuring the safe, meaningful and ethical participation of adolescents, young people and vulnerable groups, in line with Plan International’s safeguarding and ethical standards.

5.2 Sampling

Please complete the Template of Annex 4 – Endline Master Plan which includes details of sampling, field working schedule and attached it to the technical proposal.

The consultant(s) will be responsible for proposing an appropriate and feasible sampling strategy that is statistically valid, methodologically sound and cost-effective, based on information provided by the project team and the evaluation objectives.

All qualitative and quantitative data collected through the Final Evaluation must be **disaggregated by sex, age, ethnicity, boarding or non-boarding** which criteria are applied only for students, and other relevant characteristics where applicable.

The sampling strategy should include a clear description of:

- **Sample size** and the rationale or approach used for determining it;
- **Disaggregation requirements** for respondents (e.g. adolescents, youth, parents/caregivers, teachers, service providers);
- **Number and type of locations** to be included in the evaluation;
- **Sampling approach**, including selection criteria and methods for different respondent groups.

The proposed sampling strategy and data collection tools will be **reviewed and agreed with the PIV project team** prior to the commencement of data collection.

* Sample size submitted to PIV should follow table format below:

Data collection methods	Sample	Total
Questionnaires	With men, women With adolescent girls and boys With people/children with disabilities	
FGDs	With adolescent girls With adolescent boys With parents and caregivers (people with disabilities included if possible) Local government staff, school teachers, school counsellors and members of community-based child protection mechanisms	
KII with students, teachers, parents/caregivers and other	Students Teachers	

relevant stakeholders	Parents/Caregivers Leaders of project partners or/and government agencies	
MSC or impact stories: A selection of stories of significant change from adolescent girls and boys, with a focus on capturing transformational changes in self-confidence, decision-making and life choices related to CEFM.	The number of stories will be proposed by the consultant based on the evaluation design and methodology. A dedicated section on Most Significant Change (MSC), including the application of MSC methodology (collection, selection and analysis); a set of beneficiary stories demonstrating significant changes with a strong focus on capturing changes in self-efficacy, confidence and decision-making among adolescent girls; analysis of key patterns of change related to self-efficacy and decision-making related to SRHR and prevention of CEFM; documentation of selection criteria; and integration of findings to support evidence-based reporting and communication of project results to key stakeholders.	

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 safeguarding focal points and the consultant team before implementing the baseline survey to mitigate foreseen risks for children, youths and participants in the survey.

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.*

Note: Before implementing data collection, the consultants must get Ethics Approval by a recognised university or a national ethics committee or PLAN-Ethics Review Team (Feedback from Plan-ERT will be provided around 3 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).

7. Key Deliverables

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

Key Deliverables	
1.	Inception Endline Report (Data collection tools, All filled information Annex 3) in English; adapting the tools in Vietnamese
2.	Ethics Approval Certificate
3.	Revised Inception Report in English (final tools, schedules...)
4.	Draft Final Endline Report in English (including executive summary, an Indicator Tracking Table with endline data inserted)
5.	Final Endline Report in English and Vietnamese, including: <ul style="list-style-type: none"> a. Strategic communication output as Impact Story: A dedicated section on Most Significant Change (MSC), including the application of MSC methodology (collection, selection and analysis); a set of beneficiary stories demonstrating significant changes with a strong focus on capturing changes in self-efficacy, confidence and decision-making among adolescent girls; analysis of key patterns of change related to self-efficacy and decision-making related to SRHR and prevention of CEFM; documentation of selection criteria; and integration of findings to support evidence-based reporting and communication of project results to key stakeholders. b. Final Sampling methodology (including unit of sampling and sampling frame) and size c. Final Data Collection Tools d. Cleaned Data (including data files (e.g. Excel, SPSS), transcripts of qualitative data, syntax/ code books etc.) e. Completed Consent Forms (including for children and their caregivers and adults)
6.	Final Endline Report (including Executive Summary) in English and Vietnamese
7.	Presentation and dissemination workshop materials in English and Vietnamese

8. Tentative Timeline and Estimated working days

Note: The total consultancy person-days are fixed at **23** and do not vary with the number of consultant(s); the team should allocate time internally.

	Key Tasks	Deadline	Estimated working days
1.	TOR and Consultancy announcement	15 June 2026	
2.	(*) Submission of Technical and Financial Proposal with attached templated as per required (in English)	10am 10th July	
3.	Contract	10 th August	
4.	Consultant(s) compulsorily participate the safeguarding section by PIV	A two-hour session (11 th -14 th) August	
5.	Inception Report Submission	31 st August	
6.	Feedback + Revised Tool & Ethical Application	25 th September	2.5
7.	Ethical Approval	30 th October	
8.	Field final evaluation, including Toolkit coaching for local numerators (for consultant: online or in person)	05 days within 1 st – 8 th November	5

	Key Tasks	Deadline	Estimated working days
9.	Data process and analysis + Full Draft Report in English	30 th November	8
10.	PIV give feedback for Full Draft Report	5 th December	
11.	Revised Report	15 th December	4
12.	PIV give feedback for Revised Report	25 th December	
13.	Final Report	5 January 2027	3
14.	Consultant to do online presentation on results of Final Evaluation	1 session within 6 th – 15 th January 2026	0.5
15.	Liquidation and Contract Closure	29th January 2027	
	Total working days		23

9. Budget

Consultants are required to submit a technical proposal together with a detailed financial proposal, including Personal Income Tax (PIT), for PIV’s review and approval. The budget must specify the number of working days and the daily rate for each consultant. Costs related to obtaining ethics approval must also be included in the financial proposal. The consultancy fee excludes travel and fieldwork logistics, which will be covered directly by Plan International Vietnam.

10. Management

The Consultant will conduct the Final 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 Partnership Manager (PPM) at Ha Giang Program Units is the 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/expert with strong records in conducting evaluation related to SRHR, participatory development and methodologies, asset-based community development, gender expertise, child marriage prevention, youth activism, particularly in Vietnamese and mountainous, ethnic minority community's context. The consultant/ expert 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.

The consultant(s) must demonstrate the following qualifications and competencies:

1. Professional Expertise and Evaluation Experience

- Demonstrated and solid experience in designing and conducting independent endline evaluations for development projects, particularly multi-stakeholder and community-based interventions.
- Proven ability to assess project performance against goals, outcomes and outputs, using logframe-based evaluation frameworks.
- Experience in analysing both intended and unintended results for different target groups.
- Prior experience working with baseline, midline and endline data, with the capacity to compare changes over time and assess contribution to outcomes.

2. Thematic Expertise

- Strong and proven expertise in at least two of the following thematic areas:
 - Child, Early and Forced Marriage (CEFM);
 - Sexual and Reproductive Health and Rights (SRHR);
 - Child protection, particularly within school-based and community-based systems;
 - Adolescent and youth empowerment, including youth-led initiatives and social norm change;
 - Gender Equality and Social Inclusion (GESI) and Child Rights-Based Approach (CRBA).
- Practical understanding of socio-cultural, gender and protection issues affecting ethnic minority adolescents and young people, especially in remote and northern mountainous contexts.

3. Methodological and Technical Capacity

- Strong technical expertise in applying **mixed-methods evaluation approaches**, integrating both quantitative and qualitative research methods.
- Demonstrated ability to design and implement Desk reviews; Quantitative surveys using structured questionnaires; Qualitative methods including Key Informant Interviews (KIIs), Focus Group Discussions (FGDs) and direct observation.
- Proven capacity to:
 - Develop statistically sound, methodologically robust and feasible sampling strategies;
 - Design and adapt data collection tools in line with project indicators and evaluation objectives;
 - Analyse and triangulate quantitative and qualitative data;
 - Disaggregate data by sex, age, ethnicity, boarding/non-boarding status (for students) and other relevant characteristics.
- Experience in managing, training and supervising local enumerators, ensuring data quality and consistency, while fully complying with the requirement that Plan staff are not involved in field data collection.
- Familiarity with indicator tracking tables and evaluation against logframes, including alignment with project monitoring systems.

4. Ethics, Safeguarding and Child Protection

- Proven experience working directly with **children and adolescents**, including evaluations requiring a **high level of interaction with children**.

- Strong knowledge of and commitment to:
 - Ethical research principles;
 - Child safeguarding and protection standards;
 - Child-friendly, gender-responsive and inclusive evaluation methodologies.
- Demonstrated experience in:
 - Designing and implementing safe, ethical and non-discriminatory data collection processes;
 - Ensuring informed consent and assent, confidentiality, anonymity and the meaningful participation of children and other vulnerable groups.
- Proven capacity to prepare and obtain **Ethical Approval** from recognised universities, national ethics committees or INGO ethics review mechanisms, and to respond to multiple rounds of ethical review where required.
- Ability to conduct and apply safeguarding risk assessments prior to and during field data collection.

5. Reporting, Analysis and Communication Skills

- Strong analytical and writing skills, with demonstrated experience in producing **high-quality evaluation reports in English and Vietnamese**, including: Executive summaries; Findings and analysis; Evidence-based conclusions and practical, actionable recommendations.
- Proven ability to deliver all required evaluation outputs, including:
 - Indicator Tracking Tables with endline data;
 - Cleaned quantitative datasets (e.g. Excel, SPSS);
 - Qualitative transcripts, codebooks and syntax files;
 - Completed consent and assent forms for children and adults.
- Strong presentation and facilitation skills, with experience in presenting evaluation findings and facilitating discussion with project participants, government authorities and community stakeholders.

6. Organisational and Coordination Capacity

- Demonstrated experience working with **international NGOs**, donors and government counterparts at provincial, district and community levels.
- Strong planning, coordination and time-management skills to deliver all required outputs **within a fixed number of consultancy person-days** and agreed timelines.
- Ability to work closely and collaboratively with Plan International Vietnam's M&E team, project team and implementing partners, while maintaining **independence, objectivity and professional integrity** throughout the evaluation process.

APPENDIXES:

Appendix 1 – Logframe.

Appendix 2 – Indicator Definition and Required Tools for each.

Appendix 3 – Project Participants and Selected locations for Baseline and Mid-term Review.

Appendix 4 – Endline Master Plan

