TERMS OF REFERENCE
Programme Evaluation Consultancy: Just Play Knowledge Attitudes Practices (KAP) and Baseline Study

Individual/Institutional Consultancy to conduct a formative study on Health-WASH-DRR-Gender-Disability-Protection-Lifeskills norms and practices in eight (8) Pacific Island Countries (PICs) – Fiji, French Polynesia, Kiribati, New Caledonia, Samoa, Solomon Islands, Tonga and Vanuatu.

Programme Area and Specific Project Output: Develop a knowledge, attitudes and practices (KAP) measurements framework and toolkit to enhance regional programming capacity, determine a programming baseline and inform programming and advocacy components, for Sport for Development interventions related to KAP in eight (8) key areas of health, water sanitation and hygiene (WASH), gender equality, social inclusion, emergency preparedness/disaster risk reduction (DRR), protection (including safeguarding in sport), wellness (mental health and wellbeing) and lifeskills for children, adolescents, schools and communities in eight (8) PICs – Fiji, French Polynesia, Kiribati, New Caledonia, Samoa, Solomon Islands, Tonga and Vanuatu.

Outcomes of KAP Study:
1) Development of an integrated and versatile monitoring toolkit to support regional programming teams to collect KAP data inputs remotely;
2) Baseline against which programme outcomes can be measured and evaluated across programme countries in the Pacific; and
3) Recommendations to inform the development of programming and monitoring components and an advocacy campaign focusing on WASH, to be designed and delivered throughout the region.

Background and Justification
Oceania Football Confederation (OFC) is focusing on Sport for Development as one critical area of intervention as part of its overall strategy to reduce vulnerability and address social issues affecting children and young people in the Pacific region. By integrating messages into sport and play activities, OFC seeks to reduce exposure to risk factors among children and adolescents in 13 countries (American Samoa, Cook Islands, Fiji, Kiribati, French Polynesia, New Caledonia, New Zealand, Papua New Guinea, Samoa, Solomon Islands, Tonga, Tuvalu and Vanuatu).

OFC recognises that children who have a positive experience in sport early on in life are more likely to participate in sport and physical activity throughout their lives. OFC also acknowledges that, as a platform, sport helps children and young people to develop lifeskills applicable both on and off the field of play.

Working with key delivery partners, such as the Australian and New Zealand Governments, Football Federation Australia, the UEFA Foundation for Children and UNICEF, OFC uses sport as a programming platform to build confidence in children and young people, creating access to quality sport interventions, educational platforms, advocacy campaigns and public dialogue through active participation. Globally, Sport for Development programmes have
been recognized as a key contributor, to the achievement of the Sustainable Development Goals (SDGs), as well as regional and national development priorities.

Therefore since 2009, OFC has implemented a community engagement Sport for Development Programme called Just Play. The purpose is to improve the lives of children and adolescents aged 6-18-years in 13 PICs and territories through football. Through active participation in a series of interactive sessions with integrated social messages aligned to the four key programming pillars, Just Play supports children to develop healthy lifestyle habits (health and wellness), encourage gender equality, promote social inclusion and child protection, insist on sport for all, and become confident in their abilities.

Following an independent review of the Just Play Programme in 2018, one of the recommendations included the development of a Social and Behavioural Change Communication strategy, that reflected children/adolescent’s KAP towards programme thematic areas. As a result, OFC seeks to carry out a formative study on KAP of Just Play and non-Just Play audiences in the eight (8) key areas of the expanded programme of health, water sanitation and hygiene (WASH), gender equality, social inclusion, emergency preparedness, protection (including safeguarding in sport), wellness (mental health and wellbeing) and lifeskills. Results of the study, will allow the Just Play Programme to more strategically focus interventions and shape the development of advocacy, communications and programming materials and resources, based on captured baseline data.

OFC is seeking an experienced consultant(s), to design and lead the delivery of the study in eight (8) PICs (Fiji, French Polynesia, Kiribati, New Caledonia, Samoa, Solomon Islands, Tonga and Vanuatu). In light of the current COVID-19 pandemic, we recognize traditional implementation of a KAP study is not feasible and are therefore looking for consultant(s) that can facilitate the development of an integrated and versatile toolkit to support Just Play regional programming teams to collect KAP data remotely to inform the delivery of the study. We see the current situation as an opportunity to enhance our regional capacity, expand the scope of the study and to test the use of electronic platforms that can be used to collect the necessary data and enhance regular programme monitoring and data collection methods.

The overall purpose of the formative study is to:

1. Develop an integrated and versatile KAP data inputs remotely;
2. Inform a baseline on the KAP of Just Play and non-Just Play audiences\(^1\) in relation to the 8 key areas of health, water sanitation and hygiene (WASH), gender equality, social inclusion, emergency preparedness/disaster risk reduction (DRR), protection (including safeguarding in sport), wellness (mental health and wellbeing) and lifeskills;
3. Inform the development of session messages for the redesign of the Just Play 13-18-year Programme; and
4. Inform the development of an awareness raising campaign on WASH to be delivered across the Pacific region.

Findings of the formative study should include disaggregated data for urban/rural areas, Melanesian, Polynesian and Micronesian countries, genders, different age groups, disability etc.

\(^1\) Just Play and non-Just Play audiences should include, but not be limited to children aged 6-12-years, adolescents 13-18-years, teachers, principals, community volunteer/community members and parents.
Objectives
The main objectives of the study in 8 PICs (Fiji, French Polynesia, Kiribati, New Caledonia, Samoa, Solomon Islands, Tonga and Vanuatu) are to:

1. Evaluate the current level of KAP of Just Play and non-Just Play audiences in relation to the eight (8) key areas of health, water sanitation and hygiene (WASH), gender equality, social inclusion, emergency preparedness, protection (including safeguarding in sport), wellness (mental health and wellbeing) and lifeskills;
2. Identify personal, external and environmental factors that influence KAP of Just Play and non-Just Play audiences in relation to the 8 programmatic areas;
3. Examine practices, beliefs, social norms, social pressures, support system and barriers for Just Play and non-Just Play audiences;
4. Identify the main individual and social behaviour change communication channels through which Just Play and non-Just Play audiences receive information on the 8 programmatic areas;
5. Validate newly revised Just Play 6-12-year and 13-18-year Programme session themes and provide any recommended modifications;
6. Review and support the strengthening of existing Just Play 6-12-year and 13-18-year Programme monitoring questionnaires; and
7. Identify critical messages and develop a campaign strategy to inform the development and delivery of an awareness raising campaign on WASH.

Scope of Work/ Work Assignments
The study aims to provide insights into the social and behavioural determinants associated with the eight (8) key areas of health, water sanitation and hygiene (WASH), gender equality, social inclusion, emergency preparedness, protection (including safeguarding in sport), wellness (mental health and wellbeing) and lifeskills and to determine the level of KAP of the broad audience base. An existing table can be found in the annex that will need to be reviewed.

The consultant(s) will develop the research methodology. It is recommended that the Socio-Ecologic Model (SEM) is applied by the researchers to provide a comprehensive picture of the participant groups at different levels (micro, meso, macro) and their power of influence on the development of positive behaviours practices linked to the key areas outlined above. In collaboration with the Just Play Programming teams, the consultant will identify children, adolescents, parents, teachers, principals, schools, communities and stakeholders in the eight (8) PICs (Fiji, French Polynesia, Kiribati, New Caledonia, Samoa, Solomon Islands, Tonga and Vanuatu), representing both urban and outer islands settings, to include in the study.

To allow for an in-depth causal analysis, the research questions should examine the immediate, underlying and structural or normative causes that could influence Just Play and non-Just Play target groups to adopt/develop positive attitudes, behaviours and practices associated with the eight (8) key areas of health, water sanitation and hygiene (WASH), gender equality, social inclusion, emergency preparedness, protection (including safeguarding in sport), wellness (mental health and wellbeing) and lifeskills. The key questions to consider include:

1. What are the key determinants of behaviour related to the development of positive practices associated with the eight (8) key areas of health, water sanitation and hygiene (WASH), gender equality, social inclusion, emergency preparedness,
protection (including safeguarding in sport), wellness (mental health and wellbeing) and lifeskills?

2. What are the existing roles and behaviours of Just Play and non-Just Play target groups related to these key areas?

3. Are there differences in behaviours/practices of children, adolescents, parents, teachers, principals, the broader community? Are the difference linked to age, gender, or other factors?

4. What facilities resources are available locally – to support the development of positive behaviours and practices linked to the key areas? What resources are lacking – challenging the development of positive behaviours/practices?

5. What are the current practices related to the key areas? What myths, stereotypes and misconceptions exist?

6. What are the perceived social norms and beliefs influencing the key areas?

7. What are the main sources of information for individuals and families to learn about/obtain information on the key areas?

8. What changes can we realistically expect in KAP from this type of programme? For example, awareness raising changes K (knowledge) and a little A (attitudes), but not so much P (practices). This will help to formulate and frame future performance of the programme and the evaluation.

Methodology

It is expected that a mixed method design will be adopted (qualitative and quantitative) that will include multiple approaches (e.g. barrier analysis, focus group discussions, individual interviews, key informant interviews, observation study, market survey, seasonal food calendar) to examine practices, beliefs and social norms as well as perceived barriers and facilitators/motivators for the key areas within the local context.

The consultant(s) are expected to develop work plans, research protocol, data collection instruments and consent forms (translation will be conducted in-country) to respond to the research questions. At minimum the consultant(s) is (are) expected to take into consideration the below:

1. Literature review
   - Review available literature\(^2\) for 8 target PICs (Fiji, French Polynesia, Kiribati, New Caledonia, Samoa, Solomon Islands, Tonga and Vanuatu) with special focus on 8 key areas of health, water sanitation and hygiene (WASH), gender equality, social inclusion, emergency preparedness, protection (including safeguarding in sport), wellness (mental health and wellbeing) and lifeskills to examine practices, social-norms, beliefs and factors influencing behaviours, as well as relevant channels for individual and social behavior change, and identified barriers.
   - Identify gaps in information based on the data from the desk review.

2. Design research methodology:
   - It is expected that multiple approaches will be adopted (e.g. barrier analysis, observations, focus group discussions, individual interviews, key informant interviews, observation study, market survey, development of toolkit) to examine practices, beliefs and social norms as well as perceived barriers and facilitators/motivators for optimal feeding and hygiene practices within the local context. The consultants are expected to:

\(^2\) Including but not limited to: Demographic Health Surveys Kiribati (1985, 2009); Solomon Islands (2007, 2015); Vanuatu (2007; 2013); HIES; Formative research on EPI communication strategy for Solomon Islands; Formative Research on MCH communication strategy for Vanuatu
• Develop additional research questions based on the gaps identified to examine the factors that influence health, water sanitation and hygiene (WASH), gender equality, social inclusion, emergency preparedness, protection (including safeguarding in sport), wellness (mental health and wellbeing) and lifeskills behaviours;
• Select appropriate research methods that are the ‘best fit’ to answer the questions;
• Identify appropriate sampling method including sample size, sites and target groups for the identified research methods;
• Develop assessment tools, guides and toolkit - with Just Play Steering Group and partners, pre-test data collection forms and tools, revise and finalize the KAP study tools; and
• Facilitate ethics approval in close consultation with Just Play and national partners in the target country.

3. Participation of key stakeholders
• Facilitate the development of content required to carry out consultation meetings in collaboration with national partners in target countries among health, education, WASH, protection, disaster risk reduction and relevant stakeholders for review and approval of research protocol including ethical considerations, KAP study tools and implementation plans;
• Ensure cultural requirements/protocols are observed and facilitate the engagement of translators/transcribers where required;
• Facilitate communication with government counterparts and ensure approval protocols for research process at a national level has been observed; and
• Plan for the study including human resources and logistics in consultation with the OFC and Just Play country teams.

4. Development of Toolkit and Training
• Development of an integrated and versatile toolkit to support regional programming teams to collect KAP data inputs remotely;
• Develop training manuals and guides;
• Train Just Play country teams on the research protocol and data collection and plan for and facilitate pilot testing;
• Delivery of remote training to Just Play country teams to support and facilitate data collection processes; and
• Conduct monitoring and provide supportive supervision.

5. Data collection, Analysis and Reporting
• Facilitate and supervise data collection;
• Conduct data analyses (i.e. market survey, field data collection to facilitate barrier analysis and other relevant approaches);
• Protect data storage according to good practices ensuring confidentiality and anonymity of the study respondents;
• Draft preliminary and final reports with key findings, discussion and recommendations;
• The report should include a thorough participant analysis based on the SEM providing clear information about behaviours and main influencers at different levels at with different power of influence, as well as an in-depth causal analysis which relates Just Play and non-Just Play behaviours, as well as influencers’ behaviours to perceptions, beliefs and norms; and
• The report should present data with relevant tables, graphs and quotations to illustrate key data and core messages along with specific recommendations that
could inform the design of a communication strategy and key interventions for individual and social behaviour change.

The research protocol should adhere to the principles of human rights and a gender-sensitive approach. The consultant(s) are expected to identify all relevant ethical issues from the proposed methodology, propose mitigation measures and seek ethical clearance as appropriate.

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**Work Schedule**

The consultancy is expected to begin mid-September 2020, with the desk review and toolkit to be completed by January 2021. Data collection is expected to commence in October and carry through to December, with the final report completed no later than 20 June 2021.

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**Payment Schedule**

Payment is based on deliverables outlined in the Deliverables/End Product section detailed below.

The consultant(s) will be responsible for arranging his/her/their own travel. Reimbursements will be made upon submission of the receipts.

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**Deliverables/End Products**

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| Deliverable 1 | - Detailed workplan with timelines (activities with timelines e.g. Gantt chart), proposed methodology including data sources and data collection tools to address the key research questions.  
- Finalized research protocol, data collection instruments and consent forms in English and local languages.  
- Draft literature review and information gaps.  
- Ethics approval obtained. |
| Deliverable 2 | - Toolkit, guides, tools and resources, link to existing monitoring and evaluation systems and frameworks.  
- Training materials, tools and proposed method of delivery.  
- Training of Just Play country teams to support data collection. |
| Deliverable 3 | - Data collection including transcriptions/translations.  
- Preliminary report with key findings and specific recommendations to inform the design of a communication strategy for individual and social behaviour change.  
- Presentations (PowerPoint) on key findings and recommendations. |
| Deliverable 4 | - Final Report submitted to OFC (after review and feedback by partners and OFC).  
- All raw data collected by the end of full consultancy – with all products submitted to OFC in electronic and hard copies. |
Supervisor Name and Type of Supervision that will be provided:
The consultant(s) will work under the overall supervision of the OFC Social Responsibility Programme Manager.

Technical direction and quality assurance will be provided by the OFC Social Responsibility Department in partnership with GHD on behalf of the Australian and New Zealand Governments and UNICEF Pacific.

Just Play Programme Managers in football Member Associations will coordinate and supervise in-country components and facilitate operational support as required in Fiji, French Polynesia, New Caledonia, Samoa, Solomon Islands, Tonga and Vanuatu, while UNICEF WASH team in Kiribati will supervise in-country components and facilitate operational support as required.

The consultants will work closely with the OFC, Ministries of Education, Sport, Health, GHD, the New Zealand Government and UNICEF for review and approval of the research protocol, planning and implementation of the KAP study and dissemination of the key findings and recommendations.

The study protocols including methodology and the study report for each country will be reviewed by the OFC, GHD, the New Zealand Government and UNICEF Pacific (including programme specialists where appropriate and as required) for quality assurance and approval.

Consultant’s Work Plan and Official Travel Involved:
No travel is anticipated as part of this consultancy, however, should travel be required, the consultant(s) is (are) required to make his/her own return travel arrangements required to facilitate the effective delivery of the consultancy on the most direct route and economical class. Travel costs will be reimbursed to the consultant(s) upon submission of invoice and travel documents for any pre-approved travel.

The consultant(s) is also required to organize his/her own visa as required to facilitate the delivery of the consultancy components – OFC/football Member Association will provide a support letter to assist with visa approval.

Consultant’s Workplace:
The Consultants is required to work from their existing home base. The consultant will maintain regular contact/communication (once per week) with the technical supervisor for technical support and for providing weekly updates by email, skype or telephone as required.
Qualifications or Specialized Knowledge/Experience Required:

Qualifications
Consultant(s): Advanced degree in health, social sciences and/or any other relevant field.

Experience
- At least 7-years of recent documented work experience in conducting knowledge, attitude and practice studies and related field research including quantitative and qualitative studies (e.g. barrier analyses for behaviour change/focus group discussions/key informant interviews/observation studies) with focus on the Sport for Development, social development, health, education, child protection and behavior change
- Demonstrated, documented and recent work experience in formative, anthropological or operational research, data management and analyses (published materials, tools, reports etc.)
- Documented work experience in Sport for Development
- Strong understanding of and documented work experience in individual and social behaviour change techniques and strategies and community platforms for Sport for Development delivery
- Equipment, tools and facilities to implement the study (software programmes and equipment for transcription, data analyses)
- Familiarity with information technology, including proficiency in word processing, spreadsheets, and presentation software
- Previous working experience in the Pacific and with Sport for Development and child/adolescent programmes
- Proven analytical and report writing skills
- Experience working with the Australian/New Zealand Governments, UNICEF, UN and government
- Knowledge of the Pacific region required
- Demonstrated analytical skills, strong interview and report writing skills
- Excellent communication, coordination and team working skills
- Strong inter-personal, teamwork and organizational skills

Languages
- Fluency in written and spoken English required. Fluency in French an asset.

Competencies
- Good research, facilitation, negotiation, communication and advocacy skills

Call for Proposals
To apply for this consultancy, interested consultant/agencies should submit expressions of interest together with:

1. A cover letter, no longer than two pages and a curriculum vitae showing how the consultant/agency has/have the skills, qualifications and experience to carry out the study;
2. A technical proposal, no longer than four pages, highlighting:
   a. The methodology that the consultant/agency will use;
   b. Work plan which outlines the time frame, risks and highlights key milestones; and
   c. A financial proposal/budget inclusive of all fees and costs to undertake the review.
### Annex: Just Play’s Eight Key Areas

| **Health** | • Importance of making healthy food choices and eating healthy, local foods;  
| | • Importance of water and the role it plays in promoting physical health and wellbeing;  
| | • Understanding the importance of sport and physical activity in relation to overall physical health and wellbeing;  
| | • Influences that determine attitudes and practices related to overall physical health and wellbeing; and  
| | • Identification of information dissemination patterns, channels and methods particular to Just Play and non-Just Play audiences.  

| **Water, Sanitation and Hygiene** | • Why it is important to wash hands with water and soap regularly? (clean hands save lives/germs kills)  
| | • When to wash hands (critical times – after using toilet, playing sports, before dinner (eating and cooking)  
| | • Do people know how to wash their hands? (steps to handwashing)  
| | • What makes people wash their hands? (is it the facility -type or location, is it a sign that is posted inside the toilet, is it a message from teachers, is it seeing others do it)  
| | • Where do people learn (or have seen messages) about handwashing with water and soap (radio, TV, newspapers)  
| | • Do girls engage in sports and physical activities when they have their period, why/not?  
| | • Do children share water bottles with each other?  
| | • Importance of personal hygiene and its links to health and wellbeing;  
| | • using toilets when defecating,  
| | • What are the health benefits of using toilets and what are the health consequences of not using toilets.  
| | • Preferences of using, not using toilets, and open defecating.  
| | • What is your ideal toilet? And why?  
| | • Importance and understanding of handwashing, critical handwashing times and handwashing steps;  
| | • Understand of the importance of ensuring that water is safe to drink, comes from a safe source and is a precious resource in the Pacific;  
| | • Importance of maintaining clean and safe toilets and school environments and the impacts these have on behaviours, attitudes and practices;  
| | • Importance and understanding of open defecation, how it is discussed, addressed and viewed;  
| | • Understanding of puberty, its impacts on boys and girls, and how this affects/influences engagement with WASH behaviours and practices;  
| | • Understanding of menstrual health and hygiene, how it is viewed, addressed, cultural implications and this affects/influences engagement with WASH behaviours and practices for both boys and girls; and  
| | • Identification of information dissemination patterns, channels and methods particular to Just Play and non-Just Play audiences.  

| Child Protection/ Safeguarding | • Understanding and awareness of personal identity, value and self-worth;  
• Understanding and awareness of cultural identity – meaning, importance, value;  
• Understanding and awareness of safe places in the community;  
• Understanding and awareness of trusted persons;  
• Understanding and awareness of ways to protect themselves and their friends/family;  
• Understanding of how to care for themselves and others; and  
• Identification of information dissemination patterns, channels and methods particular to Just Play and non-Just Play audiences. |
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| Emergency Preparedness/ Disaster Risk Reduction | • Understanding and awareness of different types of natural disasters;  
• Understanding and importance of preparing for an emergency;  
• Understanding and identification of safe places before, during and after emergencies;  
• Identification and importance of assembly points;  
• Identification and understanding of community safe zones;  
• Understanding and awareness of how to prepare an evacuation kit;  
• Awareness and identification of personal contact information;  
• Understanding and awareness of how to make the family garden more disaster ready; and  
• Identification of information dissemination patterns, channels and methods particular to Just Play and non-Just Play audiences. |
| Wellness | • Importance of maintaining overall mental health and wellness;  
• Understanding the importance of mental health in relation to overall physical, emotional and spiritual wellbeing;  
• Influences that determine attitudes and practices related to overall physical, emotional and spiritual wellbeing; and  
• Identification of information dissemination patterns, channels and methods particular to Just Play and non-Just Play audiences. |
| Lifeskills | • Understanding how to apply lifeskills (fairplay, teamwork, winning/loosing, etc.) to life situations;  
• Ability to transfer learnings from sporting context to real life situations;  
• Identification of information dissemination patterns, channels and methods particular to Just Play and non-Just Play audiences. |
| Gender Equality | • Importance of encouraging and promoting gender equality and inclusion;  
• Understanding and ability to demonstrate and practice respect towards opposite gender;  
• Understanding and ability to include the opposite gender in activities both within and outside of sport  
• Interpretation of gender myths and stereotypes;  
• Recognition and understanding that traditional gender activities/roles are inter-changeable between boys and girls/men and women; and  
• Identification of information dissemination patterns, channels and methods particular to Just Play and non-Just Play audiences. |
| Social Inclusion | • Importance of encouraging active participation and engagement in sport for all;  
• Understanding that everyone has different abilities and that individual strengths are other weaknesses and vice versa;  
• Understanding and ability to demonstrate and practice respect towards persons with disabilities;  
• Understanding and ability to include the persons with disabilities in activities both within and outside of sport  
• Identification of information dissemination patterns, channels and methods particular to Just Play and non-Just Play audiences. |