

Terms of Reference:

External Consultant to Conduct Participatory Disability Inclusion and Gender Equality Contextual Analysis for Interplast Australia and New Zealand and the Royal Australasian College of Surgeons

Summary

Project Name	Disability Inclusion and Gender Equality Contextual Analysis
Location	Vanuatu
Consultancy Type	Data collection
Consultancy Dates	To be completed between September 2021 and December 2021

Background

Interplast Australia and New Zealand (Interplast) sends teams of volunteer plastic and reconstructive surgeons, anaesthetists, nurses and allied health professionals to provide life-changing surgery and medical training in 17 countries across the Asia Pacific region. The Royal Australasian College of Surgeons (RACS) operates using a similar model, sending volunteer medical teams from a range of different surgical and non-surgical specialties to 11 Pacific Island Countries to assist in complex medical case management and provide training, mentoring and education to Pacific Island clinicians. This is an activity under the Pacific Islands Program (PIP), which is managed by the RACS Global Health Team on behalf of the Australian government.

We do this in partnership with local organisations, including hospitals, universities and local NGOs. The objective of these activities is to provide surgical and medical services to those who could not otherwise afford or access these, and by building the capacity of local medical systems (including rehabilitation services) through our training and mentoring programs. Interplast and RACS are accredited NGOs with the Department of Foreign Affairs and Trade (DFAT), registered by the Australian Charities and Not for Profit Commission and are signatories to the Australian Council for International Development (ACFID) Code of Conduct.

As international development agencies, Interplast and RACS respect, protect and promote human rights for all, regardless of race, religion, ethnicity, indigeneity, disability, age, displacement, caste, gender, gender identity, sexuality, sexual orientation, poverty, class, or socio-economic status.

Interplast in collaboration with RACS are seeking to conduct a disability inclusion and gender equality contextual analysis gain an in depth understanding of the barriers experienced by people with disabilities, women, girls, men and boys in accessing surgical and medical services, allied health and other health services to identify opportunities to overcome the barriers to ensure that the services become more inclusive and accessible for all people.

The disability and gender contextual analysis will be comprised of several components including: a desk top review of secondary data; and collection of primary data through targeted interviews and focus groups. The secondary data will be collected separately as part of a desk top review by Interplast and be made available to the consultant to inform the analysis of the primary data. The data will then be analysed with key barriers and enablers identified.

Primary and secondary data collected will serve as baseline data to monitor changes and will help to inform Interplast's Disability Inclusion and Gender Equality Strategy, and the activities delivered by Interplast in each country setting.

Purpose

This consultancy agreement covers the primary data collection through interviews, focus groups and surveys by a local consultant in Vanuatu. Interplast and RACS intend that the contextual analysis will provide them with:

1. A better understanding of how having a disability and gender impacts people's ability to access specialist health care (including care provided by visiting teams) in each country (so that they can then better deliver their programs to make them more accessible).
2. A better understanding of the knowledge, attitudes and skills of their local implementing partners when it comes to disability inclusion and gender equality.
3. A better understanding of the local context of employment for people with disabilities, and women, particularly in the health sector, and what Interplast could be doing to support people with disabilities and women to participate in their training programs.
4. An understanding of what is already happening in each country, regarding disability inclusion, gender equality and the health sector particularly, and where Interplast and RACS could collaborate with like-minded organisations, or expand their networks to support inclusion and equality in their programs.

Scope

Location

The interviews and focus groups will be required to be completed in Port Vila and Luganville.

Stakeholders

The consultants will liaise with Interplast office staff, Interplast and RACS local partners, local disabled persons organisations, local gender organisations and interviewees.

Limitations

This primary data collection project has several limitations;

- Sample size and community access: weather and geographical limitations will affect the access to some communities. Close communications toward confirming interview and focus group dates will be vital, along with flexibility.
- Timing: the data collection will need to be organised in collaboration with Interplast and interviewees
- COVID-19: where face to face interviews pose risk of transmitting COVID-19, alternative interview methods may be required to be adopted which may include interviews conducted over the phone or Zoom.

Deliverables

The consultant/s will:

- Work with Interplast to identify potential interviewees to participate in the surveys, interviews and focus groups and ensure any ethics processes and requirements in country are addressed prior to commencement
- Obtain informed consent from all interviewees, utilising Interplast's processes to do so

- Use existing knowledge in gender equality and disability inclusion to facilitate surveys, interviews and focus groups in country with identified key informants and organisations including:
 - Past patients from Interplast plastic and reconstructive surgical and allied health programs and RACS surgical programs (10 past patients in total, including a mix of women and men, parents of girls and boys, and people with a range of disabilities of different ages)
 - Local personnel (10 local personnel in total including Interplast and RACS local partners including surgeons, anaesthetists, nurses, allied health and HR staff)
 - Representatives from government or Ministry of Health (minimum of 1 representative)
 - Disabled persons organisations and gender focused organisations (minimum of 1 DPO and 1 gender focused organisation)
- Records and collate the data collected from interviews and focus groups and provide in English to Interplast
- Where possible, analyse data using appropriate qualitative analysis approaches, to describe barriers to participation for people with disabilities, and women and girls, and men and boys; the knowledge, attitudes and practices of health workers with regards to disability and gender. This will be done depending on the level of skill and experience of the consultant. If the consultant requires support with this, Interplast may be able to support via Zoom
- Identify examples of good practices and opportunities for further improvement
- Prepare report for Interplast using report headings and guidelines listed in Appendix 1
- Report back all findings and data to Interplast
- The Consultants will work with Interplast and RACS in defining the scope of the data collection and the design process to ensure appropriate sample size, time frame and stakeholder management plan.

Interplast will:

- Identify questions for the surveys, interviews and focus groups and provide questions to the consultant to contribute to and ensure understanding of the questions so they can be accurately translated
- provide survey instruments and data collection formats required, such as surveys set up in survey monkey
- provide the desktop analysis completed by Interplast
- support in identifying and connecting the consultants with the local partner hospitals to conduct interviews with medical and HR personnel
- Work with the consultant to identify suitable interviewees from the community/past-patient cohorts

Principles of Consultancy

The following approaches must be upheld throughout:

- Do no harm: the process must identify strategies to ensure there are no negative effects caused to participants. The consultant must agree to be bound by appropriate policies including the Interplast Prevention of Sexual Exploitation, Abuse and Harassment (PSEAH) policy, sign a Child Protection code of conduct, and complete an international police check and counter-terrorism checks. Appropriate processes to ensure informed consent for participants have been developed by Interplast and RACS, and the consultant must ensure these processes are followed.

- Inclusive: the process must effectively identify and address through appropriate strategies to overcome barriers that may prevent the participation of people affected by marginalisation in particular people with disabilities, women and girls, and others who experience vulnerability on the basis of their gender or gender identity, sexuality, indigeneity, race or ethnicity or any other factor. Considerations should include accessible venue in central location, provision of sign language interpretation as required, accessible transportation etc.
- Strengths-Based: the process should identify the assets, resources, relationships and knowledge that exist within current and target communities and health services that can be built upon and harnessed through the project.
- The Consultancy Overview Proposal must demonstrate understanding of barriers to access and inclusion for children and adults with disabilities and for women and girls.

Management

The consultant will be managed on a day to day basis by the Interplast Coordinator – International Programs with oversight from Interplast Director – International Programs.

The Interplast Coordinator – International Programs will be responsible for:

- Preparing a contract for signature by the consultant
- Negotiating key steps, timetable and logistics for the work with the consultant
- Collaborating with the consultant on design and detailed requirements
- Providing support and advice to the consultant, including access to resources, research and materials held by Interplast that are relevant to the consultancy

Logistics and timeframe / Timing and Duration

Interplast anticipates the number of working days for this project to be 10 days, however acknowledges that the work days may be spread out over a 60 day period.

Subject to discussion and availability of the successful consultant, the following is provided as an indicative timeline:

September 2021 - Consultant engaged

September/October 2021 – Interviews and focus groups conducted. All data reported back to Interplast.

Please note that the proposed timeline can be negotiated up until December 2021.

Criteria and Budget

Interplast will select the Consultant based on the following considerations:

- Language: a preference for a consultant with Bislama and English language competency is desired. A sign interpreter can be made available as required.
- Insurance: the consultant should be covered by the appropriate insurances: a policy of professional indemnity insurance with respect to legal liability arising from a breach of professional duty, and public liability insurance. If the consultant is not covered by these insurances but wishes to be considered for this consultancy, please contact Interplast to discuss further.
- Appropriate skill set, credentials and experience to be able to deliver the project, including prior knowledge of disability inclusion and gender equality.
- Demonstrated experience conducting participatory research or evaluation processes
- A consultant from a DPO and/or women's organisation would be well regarded, or willingness to work in partnership with DPOs/ women's organisation

- The consultant would be required to work closely with a DPO and women's organisation throughout the project, to ensure perspectives of women and people with disability are embedded at all points of the project. Costs associated with this will be negotiated and built into the project budget
- The Consultant must have the legal right to work in Vanuatu
- The consultancy is open to Vanuatu Nationals or International candidates who speak Bislama and English (noting that Interplast will not be covering any travel or logistic costs for candidates travelling from outside Vanuatu).
- Budget, noting that Interplast's budget sits within the \$1500-2000AUD range.
- Methodology and ideas for the project, including how to organize and format the overall data collection and analysis.
- The selected consultant must be willing to adhere to safeguarding processes and successfully undergo an international police check and terrorism check (costs covered by the program)

How to Apply

Please note, the deadline has been extended. Qualified candidates are requested to submit the following via email to lindsay.morton@interplast.org.au by **Sunday 5 September** or as soon as possible

- CV
- Overview of your intended approach and proposed format for the mapping including how you would manage the process if COVID-19 makes conducting face to face interviews not feasible (max. 2 page)
- Fee per day, and expected number of days (including any reasonable expenses i.e. travel or phone call costs)

Appendix 1: Framework for Consultant Report

While Interplast is happy for the consultant to use their own reporting template, the following provides guidance as to what Interplast would expect to see included in the report

1. Background

a. Purpose of the project – Interplast, in partnership with the Royal Australasian College of Surgeons (RACS) is conducting a disability inclusion and gender equality contextual analysis in (Country) to gain an in depth understanding of the barriers experienced by people with disability, women, girls, men and boys in accessing surgery, plastic and reconstructive surgery, allied health and other health services to identify opportunities to overcome the barriers to ensure that surgery including plastic and reconstructive surgery becomes more inclusive and accessible for all people.

b. Brief situational analysis & local context

2. Methods

a. Description of methods used, including dates, participants, sources of secondary data

b. What strategies were taken to ensure a diverse audience was reached and informed consent was provided by all participants

c. What protocols were in place to ensure do no harm requirements were met, and child protection and PSEAH obligations were met

3. Findings

a. Summary of secondary data analysis

b. Summary from primary data collection – organised by questions asked/ key themes identified

4. Challenges of this research

a. Analysis of why some (if any) questions were not possible/difficult to find responses to

b. Feedback from primary and secondary data sources

5. Recommendations to Interplast and RACS

a. how can findings be used to improve Interplast and RACS program delivery

b. how to improve this data collection approach in other countries, or for future research in this country

c. Any other insights from undertaking this process, with the consultant's local knowledge, which would be useful for Interplast and RACS to consider

6. Appendices

a. All secondary data obtained (reports, other documents etc)

b. Results of all surveys, focus group notes, interview responses – with dates, times and participant information (e.g. age and sex)