

# UNICEF GEORGIA

## TERMS OF REFERENCES

### FOR ENHANCING THE CAPACITY OF THE PARENTAL ORGANIZATIONS FOR ADVOCACY AND ORGANIZATION OF CONSULTATION PROCESS ON THE TRANSFORMATION OF THE DISABILITY STATUS DETERMINATION SYSTEM

**Start date:** February 2021

**End date:** October 2021

#### 1. BACKGROUND

The Convention on the Rights of Persons with Disabilities (CRPD) together with the Convention on the Rights of the Child (CRC), the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and other international instruments is the foundation upon which UNICEF bases its efforts to uphold the civil, cultural, economic, political, and social rights of all girls, boys and women in the world, with particular focus on the most disadvantaged. UNICEF's conception of "disability" is grounded in the CRPD: that the barriers posed to persons with impairments are to be found not in their own conditions but in a society that does not take their rights and needs into consideration. Therefore, improving the lives and respecting the rights of people with disabilities requires transforming systems and structures (health, education, protection and justice) for all, so that all in society are treated equally.

A right-based approach is a guiding principle for UNICEF which is rooted in the CRPD<sup>1</sup>. The CRPD is a paradigm shift promoting a biopsychosocial model of disability, where persons with disabilities are viewed as right holders who actively participate in the decision-making process affecting their lives. This approach is a substantially different viewpoint on disability, where persons with disabilities (PWDs) cannot be considered as mere objects of medical treatment and protection but should be empowered to claim and realize their rights. The societal barriers are viewed as the main hindrance for PWDs to fully enjoy their human rights.

The 2030 Sustainable Development Agenda marks a historic moment that calls for definitive actions to address and overcome barriers that impede children and adolescents with disabilities from accessing their rights.

PWDs remain one of the marginalized groups in Georgia who face discrimination in forms of negative attitudes<sup>2</sup> and have limited access to healthcare, education and other social services, hence they do not enjoy their human rights fully and on an equal basis with others.

The Government of Georgia ratified the CRPD in 2013 and took commitment to harmonize its national policy and normative frameworks with the convention entailing a conceptual shift understating disability on a policy level. The CRPD puts an emphasis on the person-environmental interaction and defines disability not solely as a problem that resides in the individual, but as a health experience that occurs in the context. The importance of the biopsychosocial model of

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<sup>1</sup> <https://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>

<sup>2</sup> A UNICEF study conducted in 2013 indicates that 40% of Georgian public stigmatize disability

disability assessment and status determination system is further stipulated in the newly adopted Law on the Rights of Persons with Disabilities in Georgia. The law states that by January 1 2023, an implementation plan of the new disability status determination system based on biopsychosocial model should be adopted.

### ***1.1. Transformation of the disability status determination system***

In order to fulfil the requirements of the CRPD and the Law on the Rights of Persons with Disabilities in Georgia, the Ministry of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs (MoIDPOTLHSA) together with UNICEF and the Georgian Association of Social Workers (GASW) initiated transforming the disability status determination system based on the biopsychosocial model. The new model of disability assessment has been piloted in Adjara Region from April 2019 to April 2020. UNICEF continues to support the Government in transforming the Disability Assessment and Status Determination System under the Joint SDG programme “*Transforming Social Protection for Persons with Disabilities in Georgia*” which mainly puts an emphasis on:

- Targeted pilot of the biopsychosocial model of Disability Assessment and Status Determination System in selected health facilities;
- Institutionalization/embodiment of supervision and monitoring functions of the proposed model of disability assessment and status determination system;
- Creation of sustainable mechanisms for education and training of new specialists introduced by the proposed model;
- Formulation of data collection and analysis systems based on the biopsychosocial model;
- Participation and inclusion of the disability community in the expansion and rollout of the biopsychosocial model.

### **1.2. DPO AND PARENTAL ORGANIZATIONS ENVIRONMENT**

In Georgia, households with children are poorer than those without children, and the higher the number of children in the household, the greater the poverty risk. Also, the presence of a person with disability significantly increases the likelihood of falling into poverty. In the case of child disability, usually one parent (mostly the mother) remains home to care for the child with severe disability, thus giving up employment opportunities. Availability of need-based services for children and flexible employment policy for their parents would significantly promote social inclusion and well-being of children with disabilities (CWDs) and their families.

Georgian parents lack information, resources and support to identify the signs of disability at an early stage and then acquire skills essential for addressing the special needs of their children. The lack of support often leads to an overprotective attitude, which further limits the opportunities for communication and independent life skills development for their children. Many parents have out-of-pocket expenses to get examination, treatment and regular medicines for their children that are not covered by the universal healthcare policy.

Disabled persons’ organizations (DPOs), parents’ organizations, and human rights defenders play a major role in monitoring the implementation of the CRPD, service delivery and awareness raising. In total there are 55 organizations working on different aspects of the rights of PwDs, the majority of which are located in Tbilisi. The activities of these organizations vary from awareness raising to access to justice, accessibility and provision of different services, monitoring of the

CRPD implementation and so forth. These organizations are financed by state programmes or different donor organizations, including UN Agencies, as well as private sector. The capacities of these organizations vary with lower capacities in the regions. Therefore, working with them and strengthening their capacity is crucial for improved service delivery and better protection of the rights of PwDs.

There are several parents' organizations (Georgian Down Syndrome Association, Movement for Change, Families Against Discrimination, Association for Supporting Children with Speech and Hearing Impairments, etc.) which are quite effective in empowering other parents to advocate for the rights of their children in Tbilisi and several regions. However, their resources are very limited and they are not able to cover all regions. Therefore, parents of CwDs in remote areas have less support and resources. While there are a number of women's organizations working on gender equality and women's empowerment in Georgia both a national and local levels, they lack the capacity to meaningfully integrate disability issues in their advocacy work.

## **2. MAIN OBJECTIVE OF THE ASSIGNMENT**

UNICEF seeks to contract a local organization, or group of organisations to organize consultations with children and adults with disability, parental organizations and disabled persons' organizations on the biopsychosocial disability status determination model rollout process and strengthen parental organization capacity for advocacy.

## **3. MAIN PRINCIPLES**

- ✓ A human rights-based approach recognises people with disabilities as key actors in their own development, instead of passive recipients of benefits. It acknowledges the systematic exclusion of people with disabilities from development initiatives and seeks to address these gaps.
- ✓ Equity approach. A commitment to equity requires recognition that children with disabilities from marginalised groups face a double jeopardy. The disadvantages are not simply cumulative: disabilities magnify the difficulties children already encounter and, at the same time, are often used as justification for continued discrimination against them.
- ✓ Inclusive development is when all groups of people contribute to creating opportunities, share the benefits of development and participate in decision-making.
- ✓ The social and human rights model of disability. The social model of disability focuses on the high barriers created by the environment (rather than by bodily impairment), including in physical, information and communication contexts, the attitudes and prejudices of society, policies and practices of governments, and the often exclusionary structures of health, welfare, education and other systems. "Disability" is viewed as a socially created construct, not an attribute of an individual. The Convention on the Rights of Persons with Disabilities has further developed the social model recognizing that individuals' impairments – not only environmental aspects - also must be taken into consideration and addressed through a human rights framework. The CRPD propounds the social and human rights model of disability.
- Transparent and informative – participants must be provided with full, accessible, diversity-sensitive and age-appropriate information about their right to express their views freely;

- Voluntary – participants should not be forced into expressing views against their wishes and they should be informed that they can cease involvement at any stage.
- Respectful – Participants’ views have to be treated with respect and they should be provided with opportunities to initiate ideas and activities;
- Child-friendly - Adequate time and resources should be available to ensure that children are adequately prepared and have the confidence and opportunity to contribute their views;
- Gender sensitive - Must be inclusive and encourage opportunities for both men and women, girls and boys, to be involved.

While planning consultations be guided by the following documents:

- Committee on the Rights of Persons with Disabilities, General comment No. 7 (2018) on the participation of persons with disabilities, including children with disabilities, through their representative organizations, in the implementation and monitoring of the Convention<sup>3</sup>
- TAKE US SERIOUSLY! Engaging Children with Disabilities in Decisions Affecting their Lives<sup>4</sup>

### 3. TASKS

The assignment consists of two parts: 1. Disability community involvement in the roll out processes of the biopsychosocial disability status determination system transformation and 2. Strengthening the capacity of parent associations and DPOs for advocacy.

The selected contractor should:

3.1 Ensure the disability community participation in the roll out processes of the biopsychosocial model of the disability status determination system

- Develop a participation and consultation concept;
- Prepare and organize thematic events and meetings (individual and group) that need to address children, adults and parents of children with disabilities (develop a methodology, identify participants, facilitate the events, develop reports).
- Prepare information materials on the pilot model for the purposes of the consultation process.
- Participate in relevant meetings and presentations with stakeholders to review and discuss project related issues

The consultation process should include, but not be limited to, the following topics: 1) case management procedure/business process within the proposed model; 2) disability assessment instruments; 3) findings and recommendations based on the previous pilot; 4) expansion and rolling out of the biopsychosocial model - expected changes and next steps; 5) revision of the disability entitlements.

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<sup>3</sup><http://docstore.ohchr.org/SelfServices/FilesHandler.ashx?enc=6QkG1d%2FPPrICAqhKb7yhsnbHatvuFkZ%2Bt93Y3D%2Baa2pjFYzWLBu0vA%2BBBr7QovZhbuyqzjDN0plweYI46WXrJJ6aB3Mx4y%2FspT%2BQrY5K2mKse5zjo%2BfvBDVu%2B42R9iK1p>

<sup>4</sup>[https://www.unicef.org/disabilities/files/Take\\_Us\\_Seriously.pdf](https://www.unicef.org/disabilities/files/Take_Us_Seriously.pdf)

The events will be organized in close partnership with MoIDPOTLHSA, they will provide feedback on agenda, participants, as well as participate in the meetings.

Process should include an approximately equal number of men and women, girls and boys. It should also aim to cover the diversity of the disability community in the country and include persons and children with variety of functional limitations. The involvement of the participants from different regions of Georgia should be considered.

At least one event should be organized for consultation with children. The contractor will adapt the methodology to ensure a child-friendly environment and approach.

The consultation should consider the sensitivity of the subjects, its potential to traumatize or revive past traumas for participants. The organization should develop a procedure for preventing and reacting in such cases, psychological support and referral.

### 3.2 Strengthen the capacity of the parental organizations of parents of children with disabilities in advocacy:

- Conduct rapid assessment of parental organizations capacity (knowledge, skills, resources, positioning);
- Development of a capacity enhancement concept (defining objectives, methods, activities, expected results and timeline);
- Organize capacity building activities (such as training, coaching, development of advocacy papers and materials, etc.) for at least 40 participants;
- Support the participants in development of advocacy plans for 2022 with clear objectives and activities, support them in preparatory activities and development of advocacy materials.

## 4. DELIVERABLES

- Participation and consultation concept and methodology.
- Consultation report.
- Rapid assessment of the capacity of the parental organizations.
- Capacity enhancement concept and materials.
- Capacity enhancement report.

## 5. PAYMENT MODALITY

Payments to the contracted organization will be made in accordance to a pre-determined schedule developed before signing the contract in proportion to the work to be performed. Each payment will be based on a submission of a deliverable for the work already completed.

## 6. TIMEFRAME

The assignment is expected to be carried within 9 months from February 2021 to October 2021.

## 7. SELECTION AND EVALUATION PROCESS

Evaluation Criteria: The Evaluation ratio between the technical and financial proposal is 70:30.

Technical Proposal: 70

- Overall correspondence between ToR requirements and proposal (specific tasks, deliverables) - 15
- Experience of the entity in similar assignments (disability inclusion, organization of consultative processes, enhancing capacity of grassroot organizations) - 30
- Qualifications and expertise of proposed experts – 25 points.  
Total - 70

Only proposals which receive a minimum of 70% (42 points) will be considered further.

Price Proposal: 30

The price proposals in GEL should include detailed breakdown of all listed tasks and deliverables.

The total amount of points allocated for the price component is 30. The maximum number of points will be allotted to the lowest price proposal that is opened and compared among those invited bidders who obtain the threshold points in the evaluation of the technical component. All other price proposals will receive points in inverse proportion to the lowest price, e.g.:

Score for price proposal X = (Max. score for price proposal) \* (Price of lowest priced proposal) / (Price of proposal X)

Total Technical and Price 100 Pts

UNICEF will award the Institutional Contract to the entity, whose response is of high quality, clear and meets the project goals.

The final evaluation of the proposal shall have two components # the technical evaluation score and financial evaluation score. For the overall proposal evaluation, the following formula will be applied, whereby the technical proposal has a weight of 0.7 and the price proposal has a weight of 0.3.

The final score is a calculation based on the following formula:

$SC_{com} = 100 * (0.7 * TP_{com} / TP_{max} + 0.3 * FP_{min} / FP_{com})$ , where:

SCcom # final score of the company (it is between 0 and 100)

TPmax # maximum technical score (<=70)

TPcom# technical proposal score of the respective company  
FPmin# minimum financial score (<=30)

FPcom# financial proposal score of the respective company.

**8. DOCUMENTS TO BE SUBMITTED:**

- Company's profile.
- Project proposal with description of the proposed work plan and timeline.
- CVs of suggested experts.
- Information regarding organization's bank account issued by Bank (stamped).
- filled VMIP Vendor Registration form (template is attached).
- Financial proposal.

Detailed information on application documents and procedure is provided in the Instructions to Proposers.