Terms of Reference (ToR) for Developing the Model to Supporting Children and Youth with Intellectual Disabilities/ rare Impairments."

1. Background and Context

Hope and Homes for Children (HHC) is an international NGO committed to ensuring that all children grow up in a safe, loving, and supportive families, with the goal of ending all form of institutionalization. HHC's mission is to eliminate institutional care globally, empowering families to nurture their children in stable environments while working with stakeholders to remove barriers to the full participation of all children, particularly children and youth with disabilities (CYWDs).

In Rwanda, HHC has partnered with the Government and other stakeholders since 2002 to advance family care and deinstitutionalization. Its programmes have supported the transition of children from residential care to families, strengthened community-based support systems, and contributed to the closure of 16 residential care institutions, including four serving children with disabilities.

Despite progress in childcare reform and deinstitutionalisation, children and youth with intellectual disabilities and rare impairments continue to face stigma, discrimination, limited access to specialised services, and heightened risks of exclusion and institutionalisation. Families often require tailored support to access appropriate care, rehabilitation, protection, education, and inclusion opportunities for meaningful participation within their communities.

To address these challenges, HHC Rwanda, with support from the European Union (EU) and in partnership with Ubumwe Community Center (UCC) and Wikwiheba Mwana (WM), implemented the "Twubake Umuryango Twita ku Bana Bafite Ubumuga" project in Musanze, Gatsibo, and Rubavu districts. The project implemented an integrated package of support through four complementary approaches: ACTIVE Family Support (AFS), Inclusive Day-Care Hubs, Community Capacity Building, and Partner Institutional Strengthening.

These approaches have generated valuable experience, adaptations, and learning on supporting children and youth with rare impairments and intellectual disabilities and their families. There is now a need to consolidate this experience into a **comprehensive, evidence-based, practical, and context-responsive model** that can guide consistent and sustainable support. The model will bring together key elements including adapted assessment, individualised support pathways, caregiver strengthening, referral mechanisms, assistive device provision, and community-based inclusion.

This consultancy will develop, validate, and document The Model of Supporting Children and Youth with Intellectual Disabilities/rare impairments, drawing on HHC Rwanda's experience, evidence, lessons learned, and good practices. The model will provide a practical and context-responsive framework to strengthen the quality and consistency of support to children with disabilities and their families, while informing future programming, replication, and scale-up.

2. Rationale for the Assignment (Why)

HHC Rwanda is commissioning this assignment to:

- Systematize three years of practice-based evidence and lessons learned into a coherent, replicable model of support for children and youth with intellectual disabilities /rare impairments and their parents.
- Consolidate institutional learning and preserve knowledge beyond the lifespan of the current EU-funded project.

- Provide an evidence-informed resource for engagement with government institutions, including the National Council for Persons with Disabilities (NCPD), National Child Development Agency (NCDA) and other stakeholders working on disability inclusion and childcare reform.
- Support future adaptation, replication, and scaling of effective approaches by HHC Rwanda, its partners, and other organizations.
- Fulfil a planned and budgeted project activity under the EU-funded programme, ensuring accountability for the effective use of project resources.

3. Objectives of the Assignment

Overall Objective

To develop and document **"The Model of Supporting Children and Youth with Intellectual Disabilities/rare Impairments"** as an evidence-based, practical, and adaptable framework that captures HHC Rwanda's experience, approaches, tools, and lessons learned in supporting children with disabilities and their families.

Specific Objectives

The consultant will:

1. Review and synthesize HHC Rwanda's existing approaches, including ACTIVE Family Support (AFS), Inclusive Day-Care Hubs, and community capacity strengthening, as applied to children and youth with rare impairments and intellectual disabilities.
2. Document the adaptations, tools, processes, and practices developed to identify, assess, and support children and their caregivers.
3. Capture evidence of outcomes, implementation lessons, and promising practices through analysis of project data, case studies, and consultations with children, caregivers, staff, partners, and community structures.
4. Produce comprehensive model document describing the intervention framework, implementation framework, implementation process, service pathways, tools, and practical examples.
5. Support validation and dissemination of the model among HHC Rwanda, partners, government stakeholders, donors, and relevant civil society actors.

4. Scope of Work

The consultant is expected to undertake the following tasks:

1. **Review and map the existing intervention approaches**
   - Conduct a desk review of relevant project documents, including the project logframe, ACTIVE Family Support (AFS) orientation materials, monitoring and progress reports, case studies, partner assessments, and other relevant programme documents.
   - Map the key components of the model, showing the relationship between family-level, community-level, and service-level interventions, including how different approaches contribute to supporting children and youth with rare impairments and intellectual disabilities.
2. **Collect qualitative evidence and implementation experiences**
   - Conduct key informant interviews (KIIs) with HHC Rwanda technical, programme, and MERL staff involved in the implementation of the intervention.
   - Conduct field visits to Musanze, Gatsibo, and Rubavu districts to engage caregivers, Inshuti z'Umuryango (IZU) volunteers, local leaders, and staff from UCC and WM.
   - Facilitate focus group discussions (FGDs) with caregivers and peer support groups to capture experiences, outcomes, challenges, and lessons learned.

- Consult, where feasible, with relevant government institutions (e.g., NCDA, NCPD, and district authorities) to ensure alignment with national childcare reform and disability inclusion priorities.

3. **Develop the intervention model**
   - Synthesize evidence, lessons learned, and implementation experiences into a comprehensive model document.
   - Develop a clear description of the intervention framework, including the rationale, target population, guiding principles, model components, implementation pathways, adapted tools, roles of stakeholders, and monitoring considerations.
   - Incorporate illustrative case studies demonstrating how the approach has supported children with rare impairments and intellectual disabilities and their families.
4. **Validate and finalize the model**
   - Present the draft model document to HHC Rwanda, implementing partners, and relevant stakeholders for review and validation.
   - Incorporate feedback from the validation process and finalize the model document in a format suitable for publication, dissemination, and future use.

5. Methodology

The consultant is expected to apply a participatory, mixed-methods approach that combines document review, qualitative inquiry, stakeholder engagement, and validation processes. The methodology should be consistent with HHC Rwanda's child safeguarding standards, disability-inclusive approaches, and ethical research principles.
The methodology should include, but not be limited to, the following:

- **Document review and evidence synthesis:** Review relevant programme documents, monitoring data, case studies, tools, and learning materials to identify existing approaches, adaptations, results, and lessons learned.
- **Qualitative data collection:** Conduct key informant interviews (KIIs), focus group discussions (FGDs), and case study documentation with relevant stakeholders, including HHC staff, partners, caregivers, community structures, and, where appropriate, children and youth with disabilities.
- **Meaningful and safe participation:** Apply the principle of **"Nothing About Us Without Us"** by ensuring meaningful involvement of children and youth with disabilities and their caregivers, using child-friendly and disability-inclusive approaches where direct participation is appropriate and safe.
- **Triangulation and analysis:** Triangulate findings from different sources, including project documentation, programme teams, partners, caregivers, community structures, and government stakeholders, to ensure credibility and completeness of the model.
- **Validation and reflection:** Facilitate opportunities for HHC Rwanda, partners, and relevant stakeholders to review, validate, and provide feedback on the draft model.
- **Ethical and safeguarding compliance:** Ensure full adherence to informed consent, child assent (where applicable), confidentiality, data protection requirements, safeguarding procedures, and the **Do No Harm** principle throughout all stages of data collection and documentation.

HOPE AND HOMES FOR CHILDREN

6. Expected Deliverables & Indicative Timeline (September-November 2026)

#	Deliverable	Indicative Timing	Validated By
1	**Inception Report and Work Plan**, including proposed methodology, data collection tools, stakeholder mapping, ethical considerations, and detailed implementation schedule.	First Week after contract signing	Executive Director
2	**Desk Review and Evidence Synthesis Report**, summarizing findings from the review of the AFS model, project logframe, monitoring data, reports, case studies, tools, and relevant programme documents.	Third week	MERL Manager
3	**Field Data Collection Summary**, documenting completed KIIs, FGDs, consultations, and case study collection from Musanze, Gatsibo, and Rubavu districts, including key emerging findings.	Early October 2026	MERL Manager
4	**Draft Model of Supporting Children and Youth with Rare Impairments and Intellectual Disabilities**, including the intervention framework, model components, implementation pathways, adapted tools, service approaches, lessons learned, and illustrative case studies.	Mid-October 2026	HHC Team
	Model Review Meeting/Technical Review Session with HHC technical team"		HHC team
5	**Validation Workshop Report**, including stakeholder feedback, key recommendations, and agreed revisions to strengthen the model.	Late October 2026	HHC, UCC, WM, and relevant stakeholders
6	**Final Model Document — "The Model of Supporting Children and Youth with Rare Impairments and Intellectual Disabilities"**, incorporating validation feedback and formatted for publication and dissemination.	Early November 2026	Executive Director
7	**Dissemination Package**, including a summary brief, presentation materials, and proposed dissemination approach for engagement with government, donors, partners, and other stakeholders.	November 2026	Communication and Advocacy

Note: *Exact dates will be finalized in the signed contract and inception note; the schedule above is indicative for planning and budgeting purposes.*

7. Duration and Level of Effort

The assignment is expected to be implemented over approximately 12 weeks (September–November 2026). The level of effort (consultancy working days) will be agreed between HHC Rwanda and the selected consultant during contract negotiations and reflected in the signed consultancy contract.

HOPE AND HOMES FOR CHILDREN

8. Management, Reporting & Ownership

- The assignment will be overseen by HHC Rwanda's Executive Director, with day-to-day coordination managed by the MERL Manager as a focal person in close collaboration with the Programme Team.
- The consultant will maintain professional independence in analysis while working closely with HHC Rwanda's technical and implementing teams.
- The consultant will work closely with HHC Rwanda's Programme Team and other relevant technical staff and will engage implementing partners and stakeholders as required throughout the assignment.
- The consultant will submit all deliverables to the MERL Manager for review and coordination of the validation process. Final approval of key deliverables will be provided by HHC Rwanda in accordance with its internal review procedures.
- While working collaboratively with HHC Rwanda and its partners (UCC and WM), the consultant will maintain professional independence and objectivity in conducting the analysis and documenting findings.
- All data, information, tools, reports, drafts, and the final model document produced under this assignment, together with all associated intellectual property rights, shall remain the exclusive property of HHC Rwanda. The consultant shall not publish, reproduce, or share any materials or findings without prior written authorization from HHC Rwanda.
- The consultant shall maintain strict confidentiality regarding all information obtained during the assignment, particularly information relating to children, families, caregivers, and partner organizations, and shall comply with HHC Rwanda's data protection and child safeguarding policies.

9. Consultant Qualifications & Requirements

The consultant (or consultancy team, where applicable) should possess the following qualifications and experience:

- An advanced university degree (Master's or equivalent) in Social Work, Disability Studies, Public Health, Development Studies, Social Sciences, Child Protection, or another relevant discipline.
- Demonstrated experience in developing, documenting, or systematizing intervention models, technical guidelines, operational manuals, or other knowledge products, preferably in child protection, disability inclusion, family strengthening, or community-based programmes.
- Demonstrated knowledge of disability inclusion, family-based care, child protection systems, and community-based approaches. Experience working with children and youth with disabilities, particularly those with intellectual disabilities or rare impairments, is highly desirable.
- Experience working in Rwanda or in a comparable context, with a good understanding of national child protection and disability inclusion policies and systems.
- Familiarity with participatory, child-friendly, and disability-inclusive approaches, including ethical engagement with children, caregivers, and vulnerable populations.
- Excellent analytical, report writing, and documentation skills, with the ability to produce high-quality, evidence-based knowledge products in English.
- Excellent written and spoken English. Working knowledge of Kinyarwanda, or the ability to work effectively with a qualified interpreter or local research assistant, is an asset.
- Strong facilitation, communication, and stakeholder engagement skills, including experience facilitating consultations and validation workshops with government, civil society, and community stakeholders.
- Ability to work independently while collaborating effectively with multidisciplinary teams and meeting agreed timelines.

- Previous successful experience working with HHC Rwanda, particularly in project evaluation or related learning assignments, will be considered a strong added advantage, given the value of familiarity with HHC's programme approaches, operational context, and ways of working.

10. Ethical Considerations & Safeguarding

The consultant shall adhere to the highest ethical and professional standards throughout the assignment and comply with HHC Rwanda's safeguarding and data protection requirements. Specifically, the consultant shall:

- Comply with HHC Rwanda's Child Safeguarding Policy, Code of Conduct, and all relevant organizational policies throughout the assignment.
- Obtain informed consent from all adult participants and child-friendly informed assent from children, where appropriate, in addition to consent from their parent, caregiver, or legal guardian.
- Ensure that participation is voluntary and that participants understand the purpose of the assignment, how information will be used, and their right to decline or withdraw at any stage without adverse consequences.
- Protect the privacy and confidentiality of all participants through secure data collection, storage, and management practices, including the anonymization of case studies and any personally identifiable information.
- Apply the principles of **"Do No Harm"**, disability inclusion, dignity, respect, and non-discrimination in all interactions with children, caregivers, and other stakeholders.
- Immediately report any safeguarding concerns or child protection issues identified during the assignment through HHC Rwanda's established safeguarding and referral procedures.

11. Application Process

Interested individual consultants or consultancy firms are invited to submit the following application package:

- **Technical Proposal**, including:
  - An understanding of the assignment and its objectives;
  - The proposed methodology and approach;
  - A detailed work plan and indicative timeline;
  - A description of the consultant's relevant experience and approach to stakeholder engagement.
- **Financial Proposal**, providing an itemized budget that clearly distinguishes:
  - Professional fees (daily rate and estimated level of effort); and
  - Operational costs (e.g., travel, accommodation, communication, and other reimbursable expenses, where applicable).
- **Curriculum Vitae (CV)** of the proposed consultant(s), highlighting relevant qualifications and experience.
- **Evidence of Previous Work**, including at least **two** examples of comparable knowledge products (e.g., intervention models, technical guidelines, operational manuals, or technical reports) developed by the consultant.
- **References**, including the names and contact details of at least **two** referees from similar assignments undertaken within the last five years.

Applications should be submitted electronically to info@hhcrwanda.org, with a copy to cmukantaganda@hhcrwanda.org, no later than September 10, 2026.
Only shortlisted consultants will be contacted for further assessment or interviews.

Approved By:

VIDIVI KARANGWA Immaculée
Executive Director, Hope and Homes for Children Rwanda