



USAID
FROM THE AMERICAN PEOPLE

END-OF-PROJECT REPORT

VIETNAM PERSONS WITH DISABILITIES SUPPORT PROGRAM (PDSP)



JANUARY 31, 2016

This publication was produced for review by the United States Agency for International Development. It was prepared by DAI.

CONTENTS

- ACRONYMS AND ABBREVIATIONSIII**
- I. EXECUTIVE SUMMARY 1**
- RESULTS.....2**
 - IR 1. A Work Force of Professional Social Workers and Case Managers Developed2
 - IR 2. Improved Access to and Quality of Specialized Services4
 - IR 3. Public Health Systems Strengthened.....5
 - Gender Issues.....6
 - Success Stories and Lessons Learned6
- II. KEY ACHIEVEMENTS (QUALITATIVE IMPACT).....9**
- MAIN ACTIVITIES AND ACCOMPLISHMENTS.....9**
 - Danang9
 - IR 1. A Work Force of Professional Social Workers and Case Managers Developed9
 - IR 2. Improved Access to and Quality of Specialized Services 10
 - IR 3. Public Health Systems Strengthened..... 12
 - IR 4. Expand Implementation to Other Provinces 14
- III. SUCCESS STORIES AND LESSONS LEARNED..... 19**
- IV. PROGRAM PROGRESS (QUANTITATIVE IMPACT).....25**
 - IR 1. A Work Force of Professional Social Workers and Case Managers Developed25
 - IR 2. Improved Access to and Quality of Specialized Services25
 - IR 3. Public Health Systems Strengthened.....27
- V. MONITORING29**
- VI. COMMUNICATIONS41**
- VII. ENVIRONMENTAL COMPLIANCE.....43**
- ANNEX 1: COMMUNICATION PRODUCTS45**
- ANNEX 2: FINAL RESULTS DOCUMENTS.....47**

TABLES AND FIGURES

TABLE

1	Number of PDSP Beneficiaries by Type of Disability Support Service and by Province (as of December 2015).....	31
2	Selected PDSP Indicators	38

FIGURE

1	Vietnam PDSP Programs	1
2	Vietnam PDSP Program Schedule.....	1
3	Case Management (CM) Model	2
4	PDSP Project Results as of December 2015, Compared to Three-Year Targets	29
5	Number of Service Providers Receiving PDSP-Supported Training, by Quarter and Gender (as of December 2015).....	30
6	Number of Beneficiaries Receiving PDSP Support Services by Quarter and Gender (no double counting; as of October 2015)	30
7	Number of PDSP Beneficiaries Who Received Any Type of Support by Province (as of December 2015).....	31

ACRONYMS AND ABBREVIATIONS

ACDC	Action to the Community Development Center
BDS	birth defects surveillance
BREC	Blue Ribbon Employer Council
CDC	Centers for Disease Control and Prevention
CM	case management
CSO	civil society organization
CWD	children with disabilities
DAVA	Danang Association for Victims of Agent Orange
DHIEC	Danang Health Information and Education Center
DHWC	Danang Hospital for Women and Children
DIS	Disability Information System
DOET	Department of Education and Training
DOH	Department of Health
DOLISA	Department of Labor, Invalids, and Social Affairs
DPO	disabled people's organization
DUMTP	Danang University of Medical Technology and Pharmacy
EMMP	environmental mitigation and monitoring plan
ERF	environmental review form
GBV	gender-based violence
GE	gender equality
HCMC	Ho Chi Minh City
IE	inclusive education
IR	intermediate result
IVWD	Inclusion of Vietnamese with Disabilities
M&E	monitoring and evaluation
MOET	Ministry of Education and Training
MOH	Ministry of Health
MOLISA	Ministry of Labor, Invalids, and Social Affairs
MOU	memorandum of understanding
NBS	newborn screening
NGO	nongovernmental organization
OPFP	Office for Population and Family Planning
OT	occupational therapy
PCC	preconception care
PDSP	Persons with Disabilities Support Program

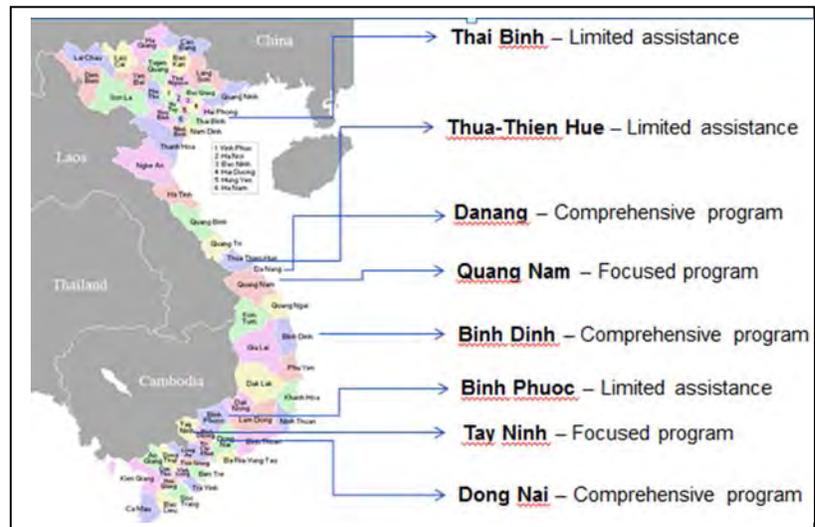
PT	physical therapy
PWD	persons with disabilities
SE	special education
ST	speech therapy
STW	School to Work
TA	technical assistance
TAMIS	Technical and Administrative Management Information System
TOT	training-of-trainers
VBPO	Vietnam Business Process Outsourcing
VPHA	Vietnam Public Health Association

I. EXECUTIVE SUMMARY

The USAID Program of Comprehensive and Integrated Support to Persons with Disabilities, also known as the Persons with Disabilities Support Program (PDSP), worked in partnership with the Government of Vietnam and many local partners from November 2012 to January 2016 to expand and improve the support services available to persons with disabilities (PWD) across eight provinces in Vietnam.

Figures 1 and 2 illustrate the types of programs PDSP carried out over three years and the schedule when they began. PDSP implementation took place mainly in Danang during Year 1, with some initial activities in Dong Nai—where the project initiated work under an existing Vietnam Assistance for the Handicapped memorandum of understanding (MOU). PDSP did not receive approval from the Danang People’s Committee until April 2013, but the project surpassed Year 1 targets due to strong collaboration and support from

FIGURE 1: VIETNAM PDSP PROGRAMS



Government of Vietnam implementing partners in the two provinces. From the start of Year 2, PDSP focused on setting up the case management (CM) system and accelerating direct assistance in Danang, and expansion to Dong Nai and Binh Dinh provinces. Support for the two new provinces followed recommendations of needs assessments conducted by the Vietnam Public Health Association (VPHA) earlier in the year. In addition to the usual Government of Vietnam partners (Department of Labor, Invalids, and Social Affairs [DOLISA], Department of Education and Training [DOET], Department of Health [DOH]) many new civil society organizations (CSOs), including universities, disability-related nongovernmental organizations (NGOs), and disabled people’s organizations (DPOs) were engaged in project implementation, which helped PDSP continue to exceed its targets in Year 2.

FIGURE 2: VIETNAM PDSP PROGRAM SCHEDULE

Province	Start-up of Activities
Danang	November 2012
Dong Nai	March 2013
Binh Dinh	May 2014
Tay Ninh	October 2014
Binh Phuoc	October 2014
Thai Binh	October 2014
Quang Nam	December 2014
Thua-Thien Hue	March 2015

Note: PDSP's cooperative agreement was modified by USAID in August 2014 to allow expansion to Tay Ninh, Binh Phuoc, Thai Binh, Quang Nam, and Thua-Thien Hue.

In Year 3, PDSP expanded to five new provinces—Tay Ninh, Binh Phuoc, Quang Nam, Hue, and Thai Binh—following a comprehensive needs assessment led by Lloyd Feinberg. At the same time, PDSP completed replication of the CM model in Binh Dinh and Dong Nai, and introduced it to Thai Binh and Binh Phuoc. The final year also saw many small grants issued to new partners in order to meet goals of direct assistance.

RESULTS

PDSP and its partners reached more than 12,800 PWD in both rural and urban areas of Vietnam through the expansion of a new, multi-sectoral CM system designed to deliver comprehensive services to improve access to health, education, and livelihood opportunities. The project also built the long-term capacity of more than 4,700 health providers, educators, employers, and social workers to adequately

address the needs of PWD in their communities. Further quantitative results are reported in Sections IV and V. Following is a summary of PDSP's main qualitative results by intermediate results (IRs).

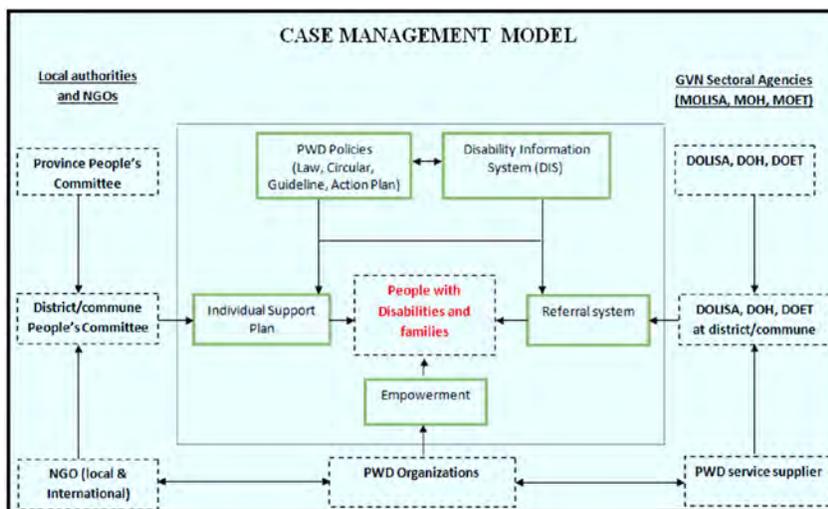
IR 1. A WORK FORCE OF PROFESSIONAL SOCIAL WORKERS AND CASE MANAGERS DEVELOPED

PDSP has achieved this IR, which focused on establishing a replicable CM model and a cadre of skilled social workers in order to improve services to PWD. While the CM model needs some more time to mature and be fully integrated in local service systems, a solid foundation has been built for an operational system of coordinated services and development of professional social work aligned with current Government of Vietnam strategy.

The Danang People's Committee has approved a plan to continue the CM model during 2016–2020 with its own funding, benefiting an estimated 1,600 persons per year. Dong Nai and Binh Dinh provinces, although having some hesitation at the beginning, have also highly appreciated the CM approach after seeing its results. The Ministry of Labor, Invalids, and Social Affairs (MOLISA), within both USAID-funded projects (PDSP and Inclusion of Vietnamese with Disabilities [IVWD]) has begun to adopt CM at the policy level, with a long-term vision. It has issued an important CM circular (Circular 01), developed a training curriculum for grassroots workers, and is working on a policy that will incorporate CM as one of the fee-based services paid for by Government of Vietnam funds for social protection beneficiaries.

After three years, 428 government staff were assigned by the Government of Vietnam as case managers and supervisors. This work force was intensively trained by PDSP in CM, social work with disabilities, needs assessment, referral, and other social work skills needed for disability services. They have also obtained substantial experience and improvement in social work and disability services through clinical practice while engaged in PDSP. Our internal evaluation showed that many case managers have confirmed that their training content was relevant and beneficial, and that they have applied what they learned in their daily work. The PDSP CM model has followed MOLISA's CM policy (Circular 01), thus enabling local partners to institutionalize the practice in their services. As Vietnam continues to implement national Program 32 in social work and Circular 07 (deploying social workers/collaborators at the community level), the case managers/social workers trained by PDSP will remain within local service

FIGURE 3: CASE MANAGEMENT (CM) MODEL



delivery systems. The model will serve as a solid foundation, a leading force for social work development in the project provinces.

These provinces will continue to benefit from the improved social work human resources that have been made possible by PDSP. A group of 10 master trainers for social work and CM has been developed through a series of training-of-trainers programs (TOT) attended by 27 social work lecturers/practitioners.



These master trainers, who are current university social work lecturers, are now considered the most highly qualified teachers in social work and CM with disabilities in Vietnam.

In addition in Danang, PDSP supported 15 social work lecturers from Dong A University and other education institutions to complete a “conversion” course recognized by the Government of Vietnam, and they now can teach basic social work for local social workers. The course was delivered by the University of Labor and Social Affairs and has been used in several other provinces.

Subsequently, Dong A University, as a partner of PDSP, has obtained a Government of Vietnam license (no. 40c/2011/CNDKBS-TCDN) to train up to 60 social workers per year. Danang DOLISA, in its effort to implement Program 32, can rely on these local trainers for training of community social workers/collaborators in the future.

Expansion of the Disability Information System (DIS) was a major accomplishment of PDSP. By the end of Year 3, the DIS had been introduced and become operational in seven of the eight provinces where PDSP worked: Danang, Binh Dinh, Dong Nai, Binh Phuoc, Tay Ninh, Thai Binh, and Quang Nam (PDSP did not plan to implement the DIS in Hue). There are now more than 270,000 records available in the system, and the number of records continues to grow as data is entered. This has laid a corner stone for establishing a national disability database in Vietnam, which USAID plans to support with the Government of Vietnam in the next five years.

CM has also been replicated, on a smaller scale, in Binh Phuoc and Thai Binh through the social work service centers. Other stakeholders, including the social work service centers and Danang Association for Victims of Agent Orange (DAVA) center, have adopted the CM process in services for their beneficiaries. Danang Government of Vietnam partners have included CM as part of their sustainability plan, which was approved by the People’s Committee in November 2015 and will be implemented with Government of Vietnam resources from 2016 to 2020. Dong Nai DOLISA has also adopted the CM approach, initially with training and partial application in an additional nine districts not covered by PDSP. PDSP was invited to share its CM system at several workshops organized by MOLISA, Ministry of Health (MOH), and other NGOs.

Over three years, a total of 4,262 cases were opened (2,108 in Danang, 976 in Binh Dinh, 1,071 in Dong Nai, 39 in Binh Phuoc, and 68 in Thai Binh). Around 80–85 percent of beneficiaries of the CM system have received some kind of assistance and services, from PDSP, local government, or community

support. As of November 2015, around 1,970 cases have been closed after needed supports were provided, followed by evaluations done by case managers.

IR 2. IMPROVED ACCESS TO AND QUALITY OF SPECIALIZED SERVICES

Medical rehabilitation. Thirteen rehabilitation units were established and equipped (five new units set up and eight existing units improved with additional equipment), resulting in improved access to services, especially in locations where there was no service prior to PDSP. For instance, a new rehabilitation unit at the Danang Hospital for Women and Children (DHWC) has provided early intervention/ therapy for 539 children/toddlers since its establishment. The new speech unit at Danang University of Medical Technology and Pharmacy (DUMTP) served 67 children with speech therapy (ST) needs on a regular basis, and the unit at the Sub-Association of Families with Autism regularly served 62 children.



The Binh Dinh Rehabilitation Hospital, one of the project’s partners, reported an increase of 15 percent in beneficiaries, and an increase of 35 percent in referrals since collaborating with PDSP. More than 20,000 children were screened for disabilities and those identified with disabilities have received early intervention support, including through referrals. Early screening and interventions have taken place mainly in Danang, Binh Dinh, Dong Nai, and Hue through PDSP grants to VietHealth, Quy Nhon University, and Song Pho Center. Capacity in these provinces has been substantially strengthened; local

partners can now deliver/manage most of the tasks in early disability screening and intervention by themselves. Human resource development resulted in improved capacity for more than 700 service providers, including doctors, nurses, and physical therapists. Twelve doctors received long-term training in rehabilitation orientation in Hanoi and 24 nurses received long-term training in rehabilitation transition in Danang. Many of them now can deliver specialized services they could not handle in the past, such as occupational and ST and interventions for children with developmental disabilities and autism. With such trained personnel, health facilities are allowed to deliver rehabilitation services, thus increasing people’s access to services that are paid by health insurance (which only pays for services provided by licensed/recognized practitioners).



Faculty at DUMTP, a rehabilitation training provider for the central region of Vietnam, are now capable of training in occupational therapy (OT) and ST. PDSP supported the university to train its faculty and strengthen its OT and ST curricula—which are now being taught to bachelor’s degree students. PDSP also supported many lecturers and practitioners to receive higher training in well-established faculties in Hue, Hanoi, and Ho Chi Minh City (HCMC), as well as hands-on training with international specialists over an extended period of time.

Education. Capacities in education services for children with disabilities (CWD), especially in Danang and Dong Nai, have also been improved. Seventy-six teachers have obtained a second bachelor's degree in special education (SE), and several hundred others received short training on inclusive education (IE) and teaching CWD. These helped address the shortage of trained staff, which is the most common excuse of the schools when rejecting CWD from entering schools. Danang DOET has issued a Directive (No. 3296/SDGDT/KHTC, dated October 14, 2014) increasing Government of Vietnam financial and material support for education of CWD.

PDSP also equipped 16 new IE resource rooms in Danang and Binh Dinh and upgraded 7 additional classrooms in Danang, as well as supporting daycare education programs for children in Dong Nai and Tay Ninh. These facilities will continue to benefit hundreds of children. PDSP worked with the Ministry of Education and Training (MOET)'s National Institute of Education Sciences to design a first monitoring and evaluation (M&E) toolkit for monitoring SE and IE, and an operational manual for resource room management, which were non-existent in Vietnam prior to PDSP, and can be replicated in other locations.



Employment. A total of 1,096 PWD were employed through the assistance of PDSP. PDSP's model of community-based vocational training and job placement resulted in sustainable employment for several hundred people. The model is highly appreciated by the local Government of Vietnam and stakeholders, and Danang DOLISA has adopted it in its new disability action plan to be funded by the government from 2016 onward. MOLISA has reflected this community-based model in its new policy for vocational training (NAPVT), which now allows government funding for on-the-job training and apprenticeship in private businesses. Prior to PDSP,

Danang DOLISA was unable to implement this type of vocational activity, because Government of Vietnam rules only allowed formal, class-based training. The PDSP model engaged case managers to look for employers for job/training opportunities or connect PWD to appropriate jobs available within communities. A number of businesses, including members of the Blue Ribbon Employer Council (BREC) such as Vietnam Business Process Outsourcing (VBPO) and Tam Thien, also participated in PDSP's employment initiative, as did the Danang DPO and DPOs in other provinces that worked under PDSP grants to create self-employment for their members.

IR 3. PUBLIC HEALTH SYSTEMS STRENGTHENED

PDSP's public health component started later than the other two IRs, because much of Year 1 was spent on arranging collaborative assessments with the Centers for Disease Control and Prevention (CDC) and awaiting assessment results. However, IR 3 accomplished all of its targets, and assisted Government of Vietnam partners to put in place needed capacities: A birth defects surveillance (BDS) pilot, a newborn screening (NBS) service, and preconception care (PCC) programs in Danang and Dong Nai. These services have benefited several thousand women, children, and health workers, and will benefit more people after PDSP ends. (Note: The cancer surveillance component was dropped as a result of



recommendations from all concerned parties.) PDSP's BDS support has resulted in 110 doctors,



midwives, and nurses trained and capable in birth defects identification. BDS has become an integral service of the DHWC and in two health districts in Danang where it was successfully linked with the CM system. In Cam Le, for example, babies born with birth defects were successfully referred by local case managers to appropriate treatment. NBS services—with a special focus on hearing loss and congenital heart diseases—are now available in Danang, with more than 50 nurses capable of counseling mothers of newborns. The number of mothers receiving counseling increased by almost 50 percent compared to rates before

PDSP. More than half of those counseled then paid to have their children screened. Thus, NBS is now running as a fee-based service, enhancing its sustainability. The DOH's sustainability plan has committed to continue the BDS and NBS services.

PCC services were developed in Danang, managed by 60 counselors, and expanded to five communes surrounding Bien Hoa airport in Dong Nai, managed by 107 counselors and communicators. Many of these staff have been trained to become trainers, and thus may continue to train and provide services in the future. The number of clients receiving PCC services increased by 56 percent in Danang and 300 percent in Dong Nai during the last two quarters of Year 3. These increases are the result of creative measures by local implementing partners. Dong Nai DOH collaborated with churches, private companies, and the office of marriage licensing to provide PCC information to young people. PCC was integrated in the Danang DOH's reproductive healthcare system and included in its FY 2016 work plan. Dong Nai DOH has also confirmed a plan to incorporate PCC in its annual health programs.



GENDER ISSUES

Gender equity has been a crosscutting issue incorporated in many PDSP activities, especially training and direct assistance. An external consultant was commissioned to conduct an assessment on gender issues among PWD, one of very few studies on the subject. She then worked with PDSP to develop training materials and delivered TOT, many of whom are PWD or disability-related advocates. Training on gender equity was incorporated in many different types of training for service providers and caregivers, and in counseling services. In terms of direct assistance, around 46 percent of PDSP beneficiaries were female (5,887), and 54 percent (6,930) male.

SUCCESS STORIES AND LESSONS LEARNED

Case management. The CM model is considered a success not only by PDSP, but also by Government of Vietnam partners, including MOLISA and partners in Danang, Binh Dinh, and Dong Nai that applied it and now have a strong belief it is the most effective approach in disability services, because it is individual-centered, comprehensive, and invites coordination across sectors.

Disability Information System. All Government of Vietnam partners involved in PDSP acknowledged that the DIS implemented by PDSP is very useful. They have used DIS data for beneficiary management, development of disability support plans, data reporting and analysis, and evaluation and monitoring.

Engaging CSOs. One of the project's best practices was the engagement with local civil society implementing partners through subgrants. This mechanism resulted in not only improved access to services and direct assistance for PWD, but also improved capacity of the local organizations themselves.

DPOs as implementing partners. DPOs in several provinces were engaged as implementing partners, not just recipients, by PDSP. This was considered an important change and noted by DPO leaders. DPOs have been effective in delivering direct assistance and building capacity for themselves.

MOUs with Government of Vietnam partners. One of the major challenges PDSP experienced was establishing MOUs with government partners and securing project approvals, which were needed before project implementation could begin. The process was complex and time-consuming, causing significant delays in project implementation.

Other success stories and lessons learned are found in Section III.

II. KEY ACHIEVEMENTS (QUALITATIVE IMPACT)

MAIN ACTIVITIES AND ACCOMPLISHMENTS

DANANG

IR 1. A WORK FORCE OF PROFESSIONAL SOCIAL WORKERS AND CASE MANAGERS DEVELOPED

After completing the training needs assessment for social work during Year1, PDSP focused on CM procedures, recruitment, and training for case managers who then conducted needs assessments and case openings. This took more time than expected, because case managers were already carrying a full load of other government work. During Year 2, the CM system became fully operational in Danang, with services being delivered through the system. The referral guidance developed and approved by the Danang People's Committee became part of the CM service process and was utilized in training of case managers. This year also noted CM expansion to Binh Dinh and Dong Nai.

The CM system was fully in place, serving several thousand people with disabilities in Danang, Binh Dinh, and Dong Nai, in Years 2 and 3. CM has been an effective platform for participation and coordination among DOLISA, DOET, and DOH, as well as the district and communal People's Committees, in efforts to improve services to PWD. In Danang, it involved 198 government staff representing the three sectors who were formally assigned by the Government of Vietnam as case managers and supervisors. PDSP provided several training courses for this group in social work and CM with PWD, referral, and other skills, as well as hands-on technical support during CM implementation. Case managers gained experience through actual practice under PDSP. They generated 257 services for beneficiaries through referrals to sources outside of PDSP.

Other evidence showing the Government of Vietnam's commitment to CM is that Danang DOLISA requested the City People's Committee to continue the CM team model and funding for 30 cases per commune per year, or about 1,600 cases for the whole city. In May 2015, knowing that PDSP would finish by the end of the year, DOLISA issued a memo (No. 1207/SLĐTBXH-BTXH) requesting local authorities to continue opening new cases to be supported by Government of Vietnam funding. Maintaining the case manager team, at least the DOLISA case manager, is likely feasible because DOLISA has plans to use this work force as the new social work collaborators deployed by Circular 07.

The Danang CM process, including forms for case opening, needs assessment, support planning, case evaluation, and case close-out, have been adopted following MOLISA's Circular 01. A cross-agency referral guideline has also been developed and approved by Danang Peoples' Committee (decision no. 2247/QĐ-UBND) as part of the CM system. This, together with MOLISA's Circular 01, will enable CM sustainability and institutionalization into the government social services delivery system. In addition, training materials, including CM for PWD, social work with disabilities, and supervision skills were developed with USAID support, endorsed by MOLISA, and used by PDSP. PDSP contributed to the development of the training material for supervisors.

Social worker development in Danang followed results of the training needs assessment conducted by PDSP, which involved 500 interviews by structured questionnaires and 40 in-depth interviews. Results were used for PDSP's training and DOLISA's planning for Program 32 (social work development plan). This plan was later approved and funded by the Danang Government of Vietnam in 2014. A group of 10 master trainers of social work/CM was developed out of the 27 participants in a series of four TOT courses. Many of these trainers, who were selected to lead training for case managers, are lecturers from national or regional social work faculties. They are therefore likely to continue future training on this subject matter. Another batch of 15 university lecturers in Danang was trained to become social work trainers through a six-month "conversion" course by the University of Social Affairs and Dong A University. Through PDSP's subgrant to Dong A University, 35 DOLISA staff completed a two-year intermediate course in social work. Together with case managers/supervisors who received short-course training from PDSP, they form a core staff to help Danang pursue a social work development agenda.

A hotline for counseling services has been set up and is operational at the Danang Social Work Service Center. The service has so far benefited 31 CWD and 600 caregivers through community talks. CM has been adopted at this center and at DAVA, which supports more than 100 children. In addition, PDSP supported the setup of social work service models in the Danang Rehabilitation Hospital and Danang Orthopedic and Rehabilitation Hospital. Six staff of these hospitals were sent twice for training in Cho Ray hospital in HCMC. PDSP also provided a subject matter expert trained in the United States to assist the hospitals. This effort was aligned with the strategy of the MOH, which has recently developed a circular to provide social work services in health institutions. Currently, there are social work services in just a handful of hospitals throughout Vietnam.

The DIS in Danang has been a major success and become a model for replication in six more provinces, including Quang Nam, Dong Nai, Binh Dinh, Thai Binh, Tay Ninh, and Binh Phuoc. Many case managers and local government employees have used the DIS for statistics, reporting, planning of services, and CM work. The DIS software was updated to incorporate new requirements, such as those in Circular 37 for disability classification and determination, and reporting under CM. Thanks to the update, DOLISA has been able to extract data and successfully proposed to the People's Committee to increase funding for social disability welfare. Currently, there are 152,000 records of PWD in the Danang DIS. Of these, around 10,000 people needed CM support.

IR 2. IMPROVED ACCESS TO AND QUALITY OF SPECIALIZED SERVICES

IR 2 called for improving capacity and access to medical, educational, and social services. The project provided many short- and long-term technical training sessions for concerned service providers, and helped set up new services that were not available in the past, such as OT, ST, and SE in resource rooms. As a result, availability of and access to social services have been improved noticeably. Below are some major results.

Medical/Rehabilitation Services

Support in this area followed a training needs assessment that was conducted at 13 major hospitals/health centers and DUMTP that involved interviews with 84 rehabilitation technicians and 14 doctors. PDSP focused support on technical training to improve services in ST, OT, and support of children with autism.

PDSP's assistance to DUMTP will have long-term impact, where a new curriculum in OT was introduced. The project's OT expert (an Australian volunteer working for PDSP for two years) helped improve the OT awareness and skills of practitioners when they provide rehabilitation services. Students will be doing more activities that involve problem solving and research skills and will have greater

understanding of the OT process, which should result in better outcomes for patients in the hospitals. The training targeted lecturers and clinicians in the hospitals where students have their clinical placement. This resulted in changing the thinking processes of the therapists and technicians. During training, the lecturers demonstrated their understanding of the information they learned by asking relevant questions about patients they are seeing. A new ST unit was also set up at the university. It has enabled lecturers and students to learn how to assess, treat, and manage clients and serves about eight children per day.

A group of 22 lecturers and clinicians in Danang were intensively trained in physical therapy (PT), OT, ST, and autism through several short- and long-term courses provided by visiting international and local experts. The Australian OT expert also provided hands-on training to this group twice a week over a 12-month period. In addition, several among them were supported for further training at higher institutions (four doctors completed rehabilitation doctor training at Hanoi Medical University; two lecturers completed a nine-month course at Hue Medical University; four lecturers completed an eight-month course on ST in HCMC; and six health workers graduated as rehabilitation technicians from a six-month course at DUMTP). These professionals are currently working at local health and education facilities, passing on what they have learned and continuing to serve people. The PDSP M&E team conducted a post-training assessment seven months after training and found that 72.7 percent of trainees gave correct answers and 81 percent applied the knowledge/skills to their current work.

Caregiver training was another major activity: 1,040 caregivers received training on various issues, including basic rehabilitation and OT at home, as well as care and communication techniques. This has contributed to improving opportunities for PWD to benefit from continuous care and sustainable support.

PDSP support in improving service facilities resulted in five new rehabilitation units set up, and three existing units improved with additional equipment. These in turn increased availability and access to services. For instance, 67 children received regular ST services at DUMTP, and 539 children received therapy at the DHWC since its establishment. These are new units that were set up with PDSP support.

One highlight was PDSP's support to the Sub-Association of Families with Autistic Children. A new therapy unit was set up and now serves 62 children on a regular basis. The facility has become a place for parents to gather, share experience, and network—helping them to build confidence and lessen pressure. Parents also received training and counseling from PDSP's local and international experts, who helped with needs assessments and intervention plans for future treatment. When PDSP support ended, parents started paying for the running costs of the unit, pointing toward sustainability.

Educational Services

PDSP support focused on improving service capacity and opportunities for out-of-school children to enter schools. PDSP support began with a comprehensive assessment on SE and IE, conducted by the Hanoi University of Education. As recommended by the assessment, a series of capacity-building training sessions was carried out. Most noteworthy was the project's support to 39 teachers to obtain a bachelor's degree in SE through the HCMC University of Education. Many short-term training sessions were also provided, including screening and early detection of disabilities, resource room operations, developing individual education plans, M&E of IE activities, learning progress assessment, adjusting curricula, and early interventions for children with behavioral disorders and autism, etc.

PDSP efforts have resulted in 242 CWD—who had never been to school before—enrolled in schools. Alternative education was made available for 140 children with severe disabilities, via private tutoring support at home and in resource rooms set up with PDSP assistance. Seven new classes were set up,

equipped to accommodate 77 new children. Moreover, some 1,058 other children received educational assistance such as scholarships, school supplies/materials, and meals. Danang DOET successfully advocated with the Danang People's Committee to hire additional teachers to meet the increased enrollment, and issued a directive that enables the use of government financial and material support for educating CWD. All these results were thanks to efforts by DOET staff, case managers, and PDSP staff.

In addition, with PDSP support, DOET developed and put in use important materials for educational services, including a toolkit for learning ability assessment; a manual for caretakers on supporting education of children; the M&E toolkit for IE; and the operations manual for resource room management. MOET, which assisted in developing these materials, has indicated interest in replicating PDSP's resource room experience and its operations manual in other sites.

Vocational Training, Employment, and Other Social Support

PDSP's community-based vocational training was seen as a successful model. It not only provided vocational skills and stable jobs for many beneficiaries, but also inspired DOLISA to continue the model with Government of Vietnam funding after PDSP ends. The model engaged case managers, who are local government staff, to identify and persuade small businesses to provide on-the-job training and then employ the graduates. As a result, more than 80 percent of trainees received jobs after graduation. PDSP's internal assessment showed that beneficiaries had sustainable jobs and reasonable pay. Because the work sites are within the community, transport for the new employees is easier, thus increasing retention rates.

Inclusive/mainstream employment was another priority. The project assisted employment service centers, DPOs, and other service providers to establish partnerships with larger companies and organizations, including BREC members such as VBPO, Tam Thien, Thanh Loc Minh, as well as the Blind Association, Red Cross, and Danang DPO. Each of these partners has offered training and jobs for 10–30 people. The Danang Employment Service Center, a PDSP partner, has sustained its vocational rehabilitation program and generated several jobs for PWD per month. Inclusive job fairs were organized as an integral part of regular DOLISA job promotion programs.

The self-employment initiative by Danang DPO created jobs for more than 100 members. This initiative will be sustained through the continued operation of a small revolving fund that supports small business initiatives by DPO members. Livelihood support, including small business and raising livestock, was also directly provided by PDSP and DOLISA, resulting in increased job opportunities and family income. Recipients of livestock support were guided to adopt environmental mitigation requirements for shelter and waste treatment before receiving any animals, and trained on how to raise livestock safely. This will result in a sustainable income source for these families. Many PWD also received training on soft skills, such as how to start and manage a small business, how to write a CV, and how to present at a job interview.

In addition, PDSP supported social activities, usually on occasions of national and international Disability Days, as ways to promote disability awareness, networking, and socialization for beneficiaries. These events varied from public meetings, employer recognition ceremonies, sports competitions, entertainment by PWD groups, and other social activities. They usually drew several hundred people with disabilities, caregivers, service providers, government officials, the media, and other disability advocates.

IR 3. PUBLIC HEALTH SYSTEMS STRENGTHENED

PDSP successfully helped strengthen three public health services in order to prevent or lessen the severity of disabilities in Danang and Dong Nai. They include:

- An NBS unit at DHWC.
- A BDS model at the above hospital and two districts in Danang.
- A PCC program of education and services to young people in Danang and Dong Nai.

Newborn screening. PDSP partnered with DHWC and the Danang Office of Population and Family Planning to set up a new NBS unit. The unit is now staffed with trained professionals, and has an improved capability in data collection and management. Following PDSP-supported training, the hospital noted an increase of 50 percent in postpartum women receiving NBS counseling (on the importance of screening for congenital heart disease, hearing loss, congenital hypothyroidism, G6PD inadequacy, and adrenal hyperplasia). Improved counseling resulted in an increase in babies screened, from 17 percent prior to PDSP to 60 percent at the end of PDSP. More importantly, treatment (e.g., for metabolic and hormonal diseases) has been made available in Danang so that clients no longer need to go to Hanoi or HCMC. At the end-of-project workshop, both partners acknowledged that the project created a firm foundation for Danang to expand NBS services to all of Danang's districts in the near future. DHWC management confirmed its plan to strengthen the model, with a focus on service quality assurance and improving capacity for screening of new diseases. The Danang Office of Population and Family Planning management confirmed its intent to sustain raising awareness for NBS and PCC as part of the routine Youth Union program funded by local government.

Birth defects surveillance. This program was the most challenging among PDSP's three public health tasks. After completing a needs assessment and further formative assessment in collaboration with the CDC, PDSP supported a pilot BDS program at DHWC and the two health districts of Cam Le and Hai Chau. More than 300 clinical health staff were trained on birth defects diagnosis, and 14 statistics staff trained on data management, who then developed and managed the services and information system. After 10 months, 42 babies born with external birth defects were diagnosed and entered into the BDS system; 3 babies with cleft lips and cleft palates received correctional surgery through referrals by case managers in Cam Le.

An independent assessment conducted in June 2015 found that the pilot system had been effectively established; case reporting, detection, and diagnosis had increased; and referral within the CM system occurred successfully in Cam Le District. The assessment team recommended improvements in the data collection forms, cleaning and coding of data, and software used for analysis. DOH has confirmed its intention to sustain the BDS program after the project ends, but expressed concern about its capacity to expand it to the whole city. In August 2015, DOH developed a sustainability plan that seeks government funds for the continuation of BDS work in Danang.

Preconception care (PCC). PCC services have been successfully established in Danang and Dong Nai. Six trainers and 80 reproductive health staff were trained in Danang, and a PCC training manual was developed. PCC exams and counseling services were made available at 23 health facilities. 14,000 women of reproductive age joined in community group talks, and 2,122 received services, 72 percent of them at district and commune levels. This showed that clients have trust in services at local facilities. To ensure PCC service quality, PDSP and local supervisors at higher levels conducted regular supervision visits to lower-level facilities.

DOH management acknowledged that the PCC project has been a timely intervention, addressing a gap in services in Danang. It has approved PCC services for the future and incorporated them into the reproductive healthcare program for 2016, to be expanded throughout Danang. Meanwhile, the Danang

Health Information and Education Center (DHIEC) confirmed that it would integrate PCC information and education activities into its routine annual program for health information and education to ensure sustainability. The DOH Director also confirmed his plan to continue to support PCC activities.

PDSP replicated PCC service delivery in Bien Hoa, Dong Nai, in June 2014 at the Reproductive Health Center, the General Hospital, the Bien Hoa District Health Center, and five commune health stations surrounding the airport. Over a 13-month period, a group of six trainers was established, who, using the training manual developed in Danang, trained 24 reproductive health staff for the program. PCC services were provided to 1,169 women of reproductive age; of this number, 60 percent received services at the five commune clinics. Service has increased 300 percent between the first and last quarter of 2015. To increase awareness in the community, the trained counselors integrated PCC information in the pre-marriage classes regularly organized by the Catholic Church, and persuaded companies to allow group talks for their workers. By the end of PDSP, 11,880 people received PCC information, 43 percent of them workers or students. DOH has confirmed that it will sustain PCC work after PDSP. The project recommended that Dong Nai should focus on strengthening supervision and planning, as well as coordination among services to ensure PCC service quality throughout the system.

IR 4. EXPAND IMPLEMENTATION TO OTHER PROVINCES

Dong Nai

Bien Hoa City and Vinh Cuu District were the first locations for PDSP's expansion in Vietnam, beginning at the end of 2013. Capacity building for service delivery and direct assistance for PWD beneficiaries were the priorities. An initial result was the provincial Disability Action Plan for the period 2013–2020 approved by the People's Committee in 2014. Since then, many disability activities, including DIS and CM training have been funded by this plan. During the first year of expansion, PDSP commissioned VPHA to conduct a rapid disability assessment in the province, and its findings were used for PDSP planning and support in subsequent years.

Case management system development was replicated in Dong Nai in Year 2, with 138 case managers and supervisors assigned and intensively trained on social work and CM for people with disabilities. This group then conducted assessments and opened case files for 1,071 persons. This exceeded PDSP's original target (of around 950) as case managers found more people needing CM assistance and decided to open cases themselves. Most beneficiaries under CM have received some kind of support, either from PDSP or community sources. DOLISA has further expanded CM to three more districts by training 200 DOLISA staff with its own funding.

In addition, expansion of the DIS to Dong Nai was a major success. DOH has cost-shared training and data collection in some districts. As a result, data collection and data entry have been completed for all districts, with 18,663 records in the system as of September 2015.

In regard to rehabilitation services, PDSP mainly focused on capacity building for service providers. Three doctors and 11 nurses were trained to become recognized rehabilitation practitioners through a six-month training program provided by medical universities in Danang and Hanoi. This helped improve the availability and access to rehabilitation services for PWD. In the past, many health facilities were rejected by health insurance for reimbursement of rehabilitation services due to the lack of practitioners with appropriate training. PDSP also supported many short-term training courses for doctors, technicians, and caregivers in basic PT, OT, and interventions for children with autism, and provided equipment for a rehabilitation unit in Vinh Cuu District Hospital.

In regard to education service, PDSP support resulted in 32 teachers graduating from the two-year bachelor's degree training in SE by HCMC University of Education. These teachers, from all districts of the province, will be a leading force to improve the quality of education for CWD. In addition, the School to Work (STW) model, which replicated U.S. experience, was a success worthy of expansion as noted in the USAID evaluation in 2015. The STW model was set up at Dong Nai School for Disabled Children as a way to prepare students for jobs after graduating. It was co-funded by PDSP and the Aspen Institute, with technical assistance (TA) from two American experts, who developed guidelines and trained responsible stakeholders. The school has appointed a staff to lead the service, including a partnership with employment service providers, employers, and children's families. As a result, dozens of graduating students and unemployed graduates have obtained gainful jobs. Many teachers and parents have been trained and changed their perceptions regarding employment preparation for CWD.

Educational interventions were also made available by other PDSP partners, including the Song Pho Applied Psychology Center and the Center for Disabled Children and Orphans. PDSP supported these entities to expand services by opening extra classes for children from poor families and children with severe disabilities, who, due to the family's financial shortage, had never benefited from interventions prior to PDSP.

These programs illustrated the successful partnerships between PDSP and private and public organizations, leading to increased services and capacity of service providers. They included the Blind Association, DONAVA, Phu Hoa Cooperative (owned and run by PWD), Vinh Cuu Farmer's Association, Employment Services Center, School for Disabled Children, Song Pho Center, and Center for Disabled Children and Orphans, as well as many employers. The collaboration with DONAVA, for example, has benefited 147 people; a daycare/education program by the Center for Disabled Children and Orphans benefited 39 children; and the Song Pho Center benefited 25 children with developmental disabilities. Many of these organizations have hired extra staff or sent staff to training in order to meet the increased needs. These organizations have confirmed their intention to continue services for PWD after the project ends.

Binh Dinh

PDSP activities did not begin in Binh Dinh until April 2014. The project agreed with local authorities to implement activities in the two districts of Hoai An and Phu Cat, with a focus on CM, capacity building for service providers, and direct assistance. Major results include 108 case managers and supervisors recruited and trained, and 976 beneficiaries who had cases opened and received support from PDSP and/or their communities. The majority needed livelihood support (716 people).

Significant improvements were noted in rehabilitation services in Binh Dinh. Two new rehabilitation units were set up and equipped, and three existing units improved with additional equipment. Thirteen health professionals (eight nurses and five doctors) were trained as rehabilitation practitioners (in six-month training in medical universities in Danang and Hanoi). In addition, several short training courses were organized for rehabilitation technicians and caregivers, resulting in 52 trained in autism, early disability detection, and intervention; 51 trained in OT; and 72 trained in basic PT and care skills. In partnership with PDSP, the Binh Dinh provincial Rehabilitation Hospital established a network of community rehabilitation workers in all 33 communes of the two districts. This network then provided services, in collaboration with PDSP, for more than 300 beneficiaries, each for a six-month treatment period. Many of the beneficiaries are CWD. The number of walk-in clients to this hospital (located in Phu Cat district, a project location) has increased as more people have learned about and gained trust in its

services, thanks to its work with PDSP in the community. Binh Dinh DOH was seen as an especially progressive partner. It took the lead in the DIS expansion, completing data collection and data entry for the whole province in just one quarter. The DIS was fully set up with 29,758 records in the system. DOH later used the DIS data for development of its provincial action plan on rehabilitation.

Education support accounted for the smallest portion of PDSP support in this province; 34 teachers and education officials were trained in IE and the resource room model in Danang and HCMC, and two IE resource rooms were set up in the two districts. DOET subsequently replicated PDSP's resource room model in Qui Nhon city, creating a provincial-level resource room. As a result, 62 children have benefited from services delivered through these resource rooms. PDSP engaged specialists from Thanh Tam School in Danang to provide ongoing TA for these resource rooms.

Partnerships with local organizations have also helped increase services. Collaboration through a subgrant with the Qui Nhon University's Center of Consultancy-Detection-Intervention for CWD resulted in early screening for 10,525 children. Of these, 262 had disabilities and 50 of them received early interventions. Subgrants also benefited beneficiaries and improved the capacity of a number of other organizations, including the Phu Cat Education Promotion Association and Hoai An Farmer's Union in livestock delivery, the Blind Association for IT/braille training, and the Nguyen Nga Center and Association for Support of Disabled and Orphans for leadership skills training, job creation, and small business start-up. Unfortunately, efforts with the Suc Song self-help group to promote formation of a provincial DPO were interrupted due to a death in Suc Song's leadership and hesitation by provincial leaders.

Quang Nam

PDSP's activities were implemented here for about 12 months, beginning in late December 2014, with a focus on direct assistance, DIS expansion, and capacity building for service providers. The DIS activity was particularly successful, with 35,045 records surveyed and entered in the system as of September 2015. Some districts have used the data for planning and working with new donors.

Partnerships through subgrants with local CSOs have resulted in assistance for several hundred beneficiaries and service providers. Collaboration with the provincial DPO led to the formation of seven communal DPOs and 80 members trained in business start-up, many of whom later received supports for livelihood development. Collaboration with the Kianh Foundation benefited 92 CWD in need of SE. Paddy's Jewel Center benefited five deaf children. Action to the Community Development Center (ACDC) helped four communal DPOs get established and trained many officials on disability rights. Children of Vietnam, Quang Nam Blind Association, and the War Legacy Project were also partners in PDSP's subgrant program for job training and capacity building training. In addition, a hotline for disability counseling was installed and is operational at the Social Work Service Center, where staff have been trained on how to operate the line, provide information, and practice CM.

Tay Ninh

PDSP began implementing activities in Tay Ninh in early 2015, initially through collaboration with MOLISA and MOH while project approval was pending. Later, PDSP worked directly with local partners. DIS data collection throughout the province was completed, but data entry was a bit slow. As of November 2015, a total of 13,600 cases had been entered in the system. In order to roll out the DIS, local government partners and PDSP trained 570 health staff in disability identification, data collection, and DIS operation.

A new intervention program for children with developmental disabilities was set up and benefits 22 children at the School for the Blind. This helped meet the demand of children who were denied admission by regular schools in the city. A subgrant with the provincial Association for Support of Disabled and Orphans provided livelihood support for 45 people, who received cows, equipment for fishing, and other livelihood support.

In collaboration with MOLISA and DOLISA, PDSP organized a series of training sessions on disability policies for more than 300 government officials throughout the province. This training, as suggested by participants, helped increase awareness about the rights and benefits of people with disabilities, as well as the roles of different stakeholders in regard to disability services.

Binh Phuoc

PDSP started implementation in this province in early 2015. The introduction of the DIS was especially successful, with 10,200 records entered as of November 2015. The DIS has built a foundation for future USAID support to this province.

In addition, a telephone hotline was set up and is operational at the Social Work Service Center; 47 staff and community collaborators were trained in CM, disability policies, counseling, and hotline operation. These service providers have applied CM to support 39 recipients of livelihood assistance.

A subgrant with the Association for Support of Disabled and Orphans of Binh Phuoc was also established to facilitate direct assistance to people with disabilities. Subgrant activities faced some delays at the beginning due to late approval by the People's Committee. However, it finally delivered livelihood support to 73 PWD and training in business startup for another 40 people.

Thai Binh

The introduction of the DIS system was also a highlight of results in Thai Binh. As of November 2015, more than 37,000 records had been collected and entered in the DIS, serving the needs of local governments. DOLISA has shared with PDSP that it has adopted strong measures to ensure that its local branches fully complete data collection, and use available data to design disability support plans; DOLISA will use the DIS to cross-check plans submitted by local branches.

As in other provinces, a telephone hotline was set up at the Social Work Service Center to meet client needs in counseling and information; 70 staff and community collaborators were trained on disability and social protection policies, hotline operations, and CM. These staff have been able to conduct assessments, open cases, and facilitate support to 68 PWD, who received direct assistance for livelihood development and rehabilitation. Operation of the hotline faced some delays due to a recent leadership change.

PDSP subgrants with DPOs and local NGOs were established for direct assistance and capacity building. They included subgrants with the Vietnam Blind Association, IDEA, PHAD, and the Disabled Youth Club of Thai Binh, resulting in direct assistance and capacity-building training for 581 beneficiaries. The Disabled Youth Club formed a mobilizing committee, a prerequisite for the formation of a provincial DPO.

Hue

Three subgrants were provided in Hue: One grant to the Hue DPO for organizational development and livelihood development; one to the Hue University Center of Social Sciences and Humanities for research and marketing for disability-related products from Aluoi district; and one to VietHealth for early detection and intervention of CWD.

III. SUCCESS STORIES AND LESSONS LEARNED

Case management. PDSP's CM initiative faced the challenges of a limited project timeframe and the need to assist the Government of Vietnam to start from scratch on all fronts—policies and procedures, and training of trainers, case managers, and service providers—while at the same time rolling out services and referrals. In order for PDSP's CM model to be fully integrated with local services, more time for practice and stronger Government of Vietnam commitment and resources will be needed, given the state of knowledge and social work development in Vietnam.

However, while the issue of CM sustainability is still a question for some parties, PDSP strongly believes the CM model is scalable and replicable. It has built a solid foundation that is aligned with Vietnam's strategy of social worker development (Program 32) as well as MOLISA's Circular 01 on CM for disability. One MOLISA official shared that, in its reform process, the agency is making a policy to incorporate CM as a must-have part of the social protection services paid for by the Government of Vietnam budget. Sustainability was also evidenced in Danang DOLISA's new five-year Disability Action Plan—which will continue the current CM network of three case managers, as well as funding for support to 30 cases per commune per year or 1,680 cases for the city. In addition, Danang's plan for Circular 07, to deploy social work collaborators at the community level, will also require this group to practice CM in disability services.

The CM model has been considered a success not only by PDSP, but also by Government of Vietnam partners, including MOLISA and other partners in Danang, Binh Dinh, and Dong Nai. This was confirmed at the PDSP close-out workshop in November 2015 where implementing partners from the eight provinces and USAID officials participated. Many government officials and employees who are case managers in the community shared that they initially had some hesitation about the CM approach, but now have a strong belief that CM is the most effective approach in disability services because it is individual-centered, comprehensive, and invites coordination across sectors. Government of Vietnam officials acknowledged that CM required extra effort from everyone; their staff had to work long hours, local authorities had to be involved in decision making and coordinating the three sectors etc., but the results have been rewarding. As a result, Government of Vietnam implementing partners have committed to sustain the CM model. Admitting the challenge of the lack of human and financial resources, they hope they can gradually institutionalize CM through the implementation of MOLISA Circular 01 and Circular 07, as well as other policies.

Disability Information System. All Government of Vietnam partners involved in PDSP acknowledged that the DIS implemented by PDSP has been very useful. They have used DIS data for beneficiary management, development of disability support plans, data reporting and analysis, and M&E. Some provinces, such as Danang, have even used DIS's advanced CM functions on a regular basis. Thai Binh DOLISA, the latest user, has been a particularly strong believer in the DIS. It has outperformed many others in six months of implementation, and doubled the target (with 34,000 cases surveyed and entered into DIS as of November 2015). Thai Binh DOLISA and its local network have been very active in surveying, data collection, and data entry, and matched PDSP with its own funding. They now

regularly use DIS as a tool for management, policy planning, and support delivery. They have committed to regularly update data from the DOLISA staff at commune and district levels.

Engaging CSOs. One of the project's best practices was the engagement with local civil society implementing partners. Over the project's life, some 48 disability-related organizations partnered with PDSP in project implementation through subgrants. This mechanism not only resulted in improved access to services and direct assistance for PWD, but also improved capacity of the local organizations themselves. Some of them, such as VietHealth and ACDC, later became direct partners of USAID in Vietnam. They have substantially complemented the government service system and offered more choices and sometimes better quality of services or services that were not available within the government system, such as interventions for children with autism.

MOUs with Government of Vietnam partners. One of major challenges PDSP experienced was establishing MOUs with government partners and securing project approvals, which were needed before project implementation could begin. The process was complex and time-consuming, taking about four months in Danang and more than six months in Binh Dinh, thus causing delays in project implementation. In some new provinces, PDSP had to work through the Ministry level (MOLISA and MOH) to facilitate implementation on the ground. This ongoing challenge means that implementing partners, as well as USAID, need to have sufficient advanced planning for expansion and flexibility in implementation mechanisms. Expansion plans should also be realistic within the context of a limited project timeframe and approval process delays. For instance, a full replication of CM in Binh Dinh later in the project (Year 3) put pressure on schedules for assessment, planning, and service delivery. Flexibility in implementation mechanisms was found necessary to ensure that the project could proceed in order to generate results, especially because targets and priorities changed several times. In some new provinces, PDSP lost a substantial amount of time due to such changes.

Capacity building and sustainability. PDSP's training needs assessments at the beginning of the project found serious shortages in professional capacity in rehabilitation, education, and social work services for disabilities. To address these challenges effectively and sustainably, PDSP placed emphasis on training of trainers, training of practitioners, and capacity building for institutions that can continue future training. While PDSP assisted Government of Vietnam partners to put in place basic foundations such as trainers, curriculum, properly trained staff (teachers, rehabilitation workers, social workers), and new facilities and equipment, these are not sufficient to meet the needs of the whole system or the whole population in project provinces. Therefore, continued support and commitment from the Government of Vietnam are critical, especially allocation of resources to maintain the system, staff, and models currently in place. Resources are also needed to expand training for more and new staff and to fully adopt national policies (such as Circular 01, Circular 07, etc.) in order to ensure that staff will remain, and integrate what they have learned in their day-to-day service.

Local policy important for sustainability. PDSP has successfully supported local Government of Vietnam partners to put in place local-level policies that are important for the sustainability and enhancement of service accessibility. These included the provincial disability plan in Danang and Dong Nai, which have already enabled funding for disability activities and also established the framework for future work. Policies for Circular 07 (deploying communal social work collaborators), the referral mechanism, and CM plans have been important for the sustainability of social work services and the CM model.

Community-based vocational training a successful model. The Government of Vietnam’s previous regulations on financing vocational training for PWD, which favor formal, classroom-based programs, have hindered local efforts to meet people’s diverse needs and local realities. They have prevented local service providers from using Government of Vietnam funding available for skills training and jobs for PWD. PDSP introduced a community-based training model following CM practices and responsive to the needs of each individual. This resulted in a high job placement rate (over 80 percent) and retention. DOLISA Danang has adopted this successful model and made it part of its action plan for 2016–2020 to be financed by the Government of Vietnam. A good sign was that MOLISA has also recently changed the above policy—as a result of USAID’s IVWD advocacy. This allowed the apprenticeship or informal on-the-job training for individuals that can take place at private and public companies and facilities.

DPO as implementing partner, not merely recipient. DPOs in several provinces have been engaged as implementing partners by PDSP. This was considered an important change as observed by one of the DPO leaders, that DPOs have grown from being merely a recipient in the past to being implementing partners and owners under PDSP. DPOs have been effective not only in delivering direct assistance, but also in capacity building for themselves. Quang Nam and Danang DPOs have extended their networks at the district and commune levels, with 18 new sub-DPOs established. DPOs’ close involvement in project activities helped improve their capacity in organization management, program implementation, budget management, and improvement of awareness of government stakeholders. The Danang DPO has become a member of the provincial disability coordination committee, in which it can participate and provide inputs like Government of Vietnam members, thus having a say in the decision-making process on issues concerning themselves. In addition, PDSP’s support of small revolving funds for livelihood development managed by DPOs in several sites has been an effective and sustainable support. DPOs have successfully maintained the funds and continue to extend them to assist many more members. They believe the number of beneficiaries will continue to grow. This can become an effective peer-lending program similar to the popular model that is currently available in many countries.

Social work service in health institutions, a promising beginning. PDSP had some initial success in setting up a social work service model in two rehabilitation hospitals in Danang, where leaders committed to and formally set up staff units to lead the model. However, the model is still in its infancy stage and faces many challenges, because social work service in health settings is new in Vietnam, as is the social work profession as a whole in Vietnam. There are some strong practices in HCMC and Hanoi from which Danang can learn, but each has its own approach and purpose, strengths, and weaknesses. The model in Danang needs continued technical support and commitment from hospital leadership and colleagues. It also needs creativity and flexibility of the staff, most of whom have many existing responsibilities, in order to adopt a model that requires multidisciplinary and cross-departmental supports. Another challenge is timing. As PDSP was closing out, it was unable to continue TA until the model is well rooted. PDSP left behind guidelines developed by a local expert, who has connected the hospitals to many service providers in the community. It is hoped that the hospitals will continue to benefit from this support network.

Sustainability of BDS. Initial support provided by USAID PDSP and its U.S. partner, CDC, for establishing a BDS system in Danang has strengthened the DOH’s capacity to identify, classify, and register information about birth defects in their localities. An assessment of the pilot conducted by an independent consultant in late June 2015 concluded that more technical support is necessary, especially in the BDS information system. Improvements are needed in the data collection forms, cleaning and coding

of data, and software used for analysis and application of the BDS system for program planning and prevention strategies. The assessment confirmed, however, that BDS referrals were very successfully implemented and recommended that the model should be replicated in other districts.

At the end-of-project workshop in June 2015, DOH confirmed its intention to sustain the BDS system. Without continued USAID or other external support, however, sustainability will be challenging because DOH needs technical and financial assistance for the information system and referrals. These include support for ongoing data collection, data quality assurance and reporting, and policy reform. In August 2015, the PDSP team provided technical support for DOH to develop a sustainability plan to be included in the overall Danang sustainability plan being drafted jointly by DOLISA, DOH, and DOET. Hopefully, Danang Government will support the continuation of BDS work through this plan.

Sustainability of NBS. Thanks to PDSP support, a well-functioning NBS center capable in data collection and management, with software linking with the districts, will help DHWC sustain NBS services in a systematic way. The impacts of PDSP support include not only a significant increase in the number of babies screened for five diseases (congenital heart disease, hearing loss, congenital hypothyroidism, G6PD inadequacy, and adrenal hyperplasia), but also in making treatment services available so that affected babies no longer need to be transferred to Hanoi or HCMC. At the end-of-project workshop, the partners (DHWC and Office for Population and Family Planning [OPFP]) have acknowledged the project results and considered them as a firm foundation for Danang to build on for expanding NBS work in the future. DHWC management committed to strengthen the model, with a focus on service quality assurance by developing and applying quality indicators for NBS services, strengthening the online software, and expanding the number of diseases for NBS. OPFP management confirmed to sustain raising awareness for NBS and PCC by integrating these into the Youth Union routine program, which is funded by local government.

Sustainability of PCC. A system for PCC service delivery has been established and is well-functioning in Danang. Reproductive healthcare management has acknowledged that PDSP's PCC project has been a timely intervention in Danang that successfully addressed a public health programming gap through both supply and demand initiatives. Through outreach, more people, including young couples, realized the importance of PCC and sought PCC services at 23 health facilities where PCC counseling had been expanded and improved. The plan for reproductive healthcare for 2016 approved by the Director of the Danang Reproductive Health Care Center includes a PCC component, which will be expanded throughout Danang. At the end-of-project workshop, the Director of DHIEC confirmed to integrate PCC information and education activities into their routine annual program for health information and education, to ensure sustainability. The DOH Director also confirmed the plan for PCC sustainability and assigned the management of two agencies to be responsible for sustainability planning and execution after PDSP ends.

In Dong Nai, the DOH now has in hand a system for PCC service provision and toolkits for training and supervision for service quality. Dong Nai project managers were especially innovative in finding ways to attract more clients, including integrating PCC information into pre-marriage classes organized by the Catholic Church, outreach to workers at large businesses, and information from local marriage certificate-issuing offices. With strong DOH leadership plus high commitment and technical capacity of trained staff, especially at the five commune health stations around the airport, we believe PCC work would be sustainable. However, we would propose the Dong Nai Reproductive Health Care Center to focus on strengthening supervision by improving supportive supervision skills and planning, as well as coordination to ensure PCC service quality throughout the system.

Environmental compliance requirements take time. As detailed further in Section VII, the PDSP team spent a great deal of time learning about and then satisfying USAID’s requirements for environmental compliance, related to the project’s home improvements and livestock procurement activities. The team received different guidance from different USAID environment officers, but ultimately was required to complete an environmental review form (ERF) and often an environmental mitigation and monitoring plan (EMMP) for *every individual* beneficiary household receiving a small home improvement or a few animals as livelihood support. Compiling and monitoring the EMMPs, with attendant documentation (e.g., photographs), required an enormous investment of time from both project staff and counterparts. By the end of the project, following the visit of USAID’s Asia Bureau Environment Officer, USAID and project staff agreed that in the future where such small individual projects are involved (a few animals, some simple home repairs), individual ERFs should not be required, but could be grouped together for submission to and approval by USAID in a more streamlined process.

IV. PROGRAM PROGRESS (QUANTITATIVE IMPACT)

IR 1. A WORK FORCE OF PROFESSIONAL SOCIAL WORKERS AND CASE MANAGERS DEVELOPED

- 428 government staff in PDSP project locations have been assigned by the Government of Vietnam to work as case managers and CM supervisors, and intensively trained on CM, social work with disabilities, and other social work skills to improve capacity to serve PWD.
- In Danang, 198 case managers trained by PDSP opened cases for 2,108 beneficiaries; 82 percent of these received some kind of assistance from PDSP and through referrals (2,280 assistance by PDSP and 257 by referral). By the end of November 2015, case managers had completed case close-out for 523 cases.
- In Binh Dinh, 148 case managers and supervisors were recruited and trained, who then conducted assessments and opened cases for 997 PWD; 81 percent of these cases received assistance. As of November 2015, 596 cases had been closed and the remaining cases are active under local government management.
- In Dong Nai, 1,071 cases were opened, with 85 percent of the cases supported with assistance. By the end of November 2015, 843 cases were closed after successful support, while 228 cases remained active. Among the active cases, 152 cases or 14.2 percent have not yet received assistance.
- The reasons for beneficiaries under the CM system not yet receiving assistance are several: Support sources have not been identified, there are complicated health or medical issues that are beyond local and PDSP capacities, or the needs were not covered under PDSP (for instance, PDSP did not support home improvements in project sites other than Danang).

IR 2. IMPROVED ACCESS TO AND QUALITY OF SPECIALIZED SERVICES

Direct Assistance

- 12,817 PWD in eight provinces received assistance from PDSP (including support for participation in education, advocacy, and social events) as of November 2015. Beneficiaries in Danang accounted for 43 percent, whereas Dong Nai and Binh Dinh accounted for 21 percent and 22 percent respectively. Of this total, 11,374 persons received direct assistance (excluding education/social events participation), which exceeded PDSP's target for direct assistance by 42 percent (target: 8,000, actual: 11,374). Direct assistance included a wide range of support and services, from clinical examinations, rehabilitation therapy, and assistive devices to vocational training, jobs and small business start-up, and support for educational activities or interventions.

Other important results include:

- 296 CWD received early interventions at specialized service providers.
- More than 600 children received PT, OT, and ST in Danang.

- 242 children who had never been to school before were supported to enroll in schools.
- 1,058 children received educational support, including scholarships, school fees (in private education setting), meals, and school supplies.
- 352 people received vocational training and a job after training.
- 744 people received support for self-employment and small business start-up.
- 398 families received support for livestock raising.
- 198 people were supported for business start-up and self-employment through DPO's revolving fund.

Capacity Building

- PDSP provided technical training and other capacity-building support for 4,700 providers who serve PWD. This result is double PDSP's target of 2,718 service providers. Support came in the form of long-term training (from six months to two years/bachelor's degree), diploma courses/certificate courses, TOT, and short courses (a series of three-day courses), as well as hands-on coaching. Among the most important accomplishments were the long-term training for health professionals to become recognized rehabilitation practitioners and for teachers to obtain a bachelor's degree in SE. Details on major achievements are discussed below.

Health/Medical Services

- 229 communal leaders and employees responsible for disability classification and determination were trained. As provided by Circular 37 of the disability law, they helped Danang to quickly complete the city-wide classification and determination program, which led to increases in the budget for disability security allowance as approved by Danang Government of Vietnam.
- 700 health staff, including doctors, physical therapists, community health workers, and health case managers received training on various rehabilitation subjects, with a focus on OT and autism, early detection/intervention, home-based care and rehabilitation therapy, and daily living activities.
- 12 doctors received long-term orientation training to become rehabilitation doctors at Hanoi Medical University.
- 24 nurses and other health staff received long-term training to become recognized rehabilitation technicians at DUMTP.
- 22 lecturers and clinicians attended twice-a-week, hands-on training in OT with PDSP's Australian OT specialist for a period of more than 12 months.
- 13 new rehabilitation units were set up and equipped (7 in Danang, 5 in Binh Dinh, and 1 in Dong Nai).
- Around 900 caregivers received hands-on training (in small groups and individual sessions) on activities for daily living, fine and gross motor skills, caring for CWD, and communication skills for children with autism and those hard-of-hearing.

Education Services

- 76 teachers in Danang and Dong Nai were supported to obtain a second bachelor's degree in SE through a two-year program delivered by HCMC University of Education.

- 608 teachers of kindergarten and primary schools received various short training courses in early disability screening and detection, assessment skills, development of individual education plans, curriculum adaptation, disability management in secondary schools, resource room operation, and M&E in IE. Danang DOET acknowledged that PDSP's training of many of its kindergarten teachers in early disability detection has helped its efforts at early detection and intervention at school.
- 106 parents were trained on how to assist disabled children's learning at home.
- 16 resource rooms for IE have been established in Danang and Binh Dinh. Teachers and managers of these rooms have been trained.
- 7 new classes were created, equipped, and staffed with teachers in order to accommodate an additional 77 children newly enrolled in Danang.

IR 3. PUBLIC HEALTH SYSTEMS STRENGTHENED

Major results include:

- 1,161 babies received screening for hearing loss.
- 2,242 babies were screened for congenital heart problems.
- 124 babies were diagnosed and monitored for hormonal and metabolic disturbances, and 603 babies for congenital heart diseases by a doctor trained by PDSP.
- 2,341 pregnant women received birth defects counseling.
- 12,404 women received NBS counseling after giving birth.
- 2,122 women received exams and counseling on PCC.
- 13,985 women of reproductive age participated in communication and education programs on PCC.
- 8 health staff were trained to conduct screening for hearing loss, congenital heart diseases, and hormonal and metabolic disturbances.
- 120 staff were trained on counseling for newly married couples.
- 13 staff were trained on managing NBS and newborn data management.
- 36 master trainers/educators were trained on PCC.

V. MONITORING

The following charts summarize PDSP's key results.

FIGURE 4: PDSP PROJECT RESULTS AS OF DECEMBER 2015, COMPARED TO THREE-YEAR TARGETS

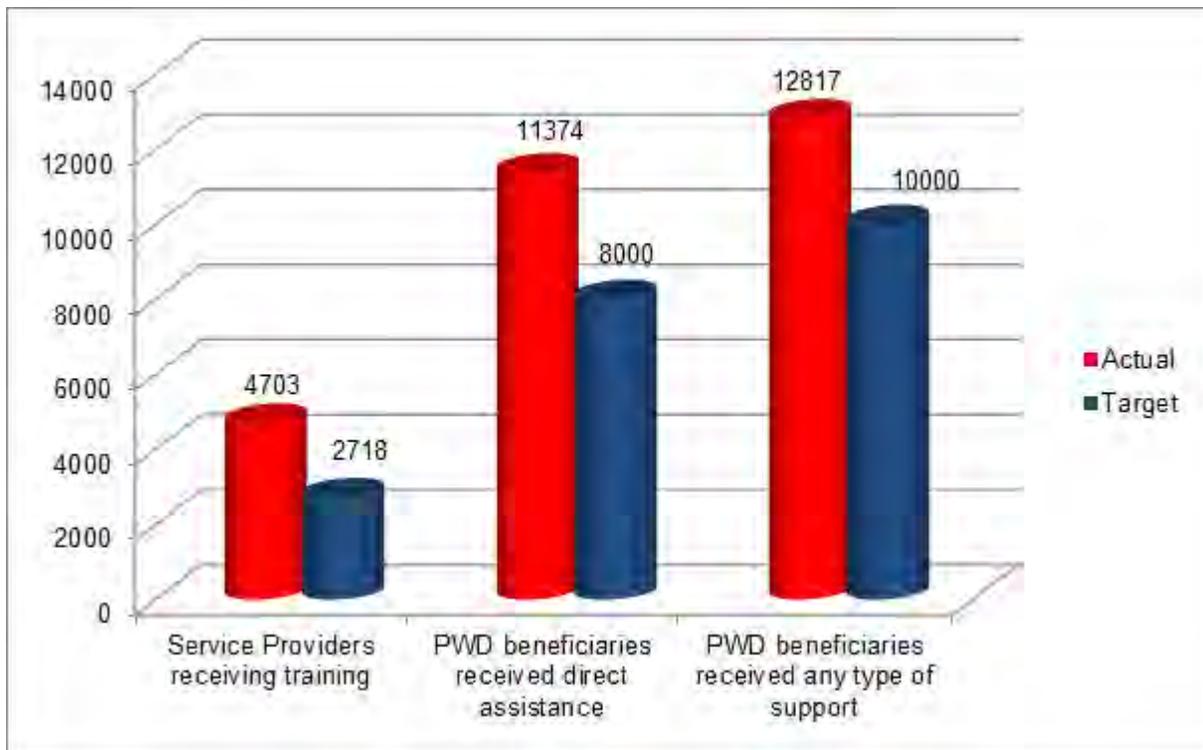


FIGURE 5: NUMBER OF SERVICE PROVIDERS RECEIVING PDSP-SUPPORTED TRAINING, BY QUARTER AND GENDER (AS OF DECEMBER 2015)



FIGURE 6: NUMBER OF BENEFICIARIES RECEIVING PDSP SUPPORT SERVICES BY QUARTER AND GENDER (NO DOUBLE COUNTING; AS OF OCTOBER 2015)

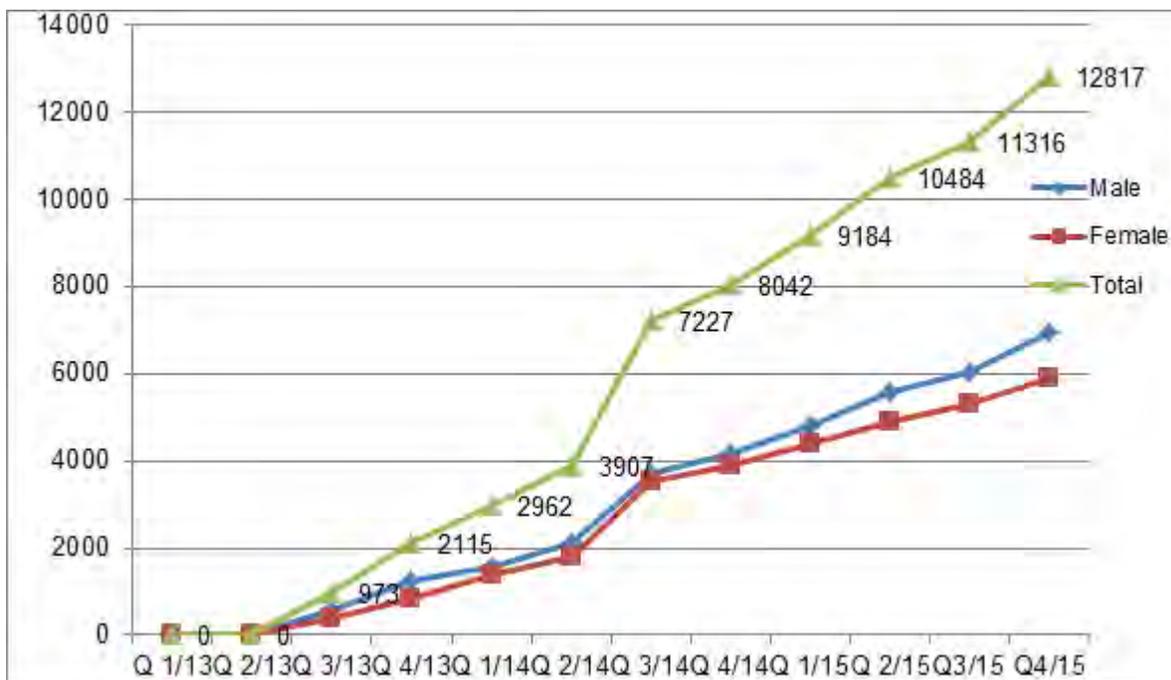


FIGURE 7: NUMBER OF PDSP BENEFICIARIES WHO RECEIVED ANY TYPE OF SUPPORT BY PROVINCE (AS OF DECEMBER 2015)

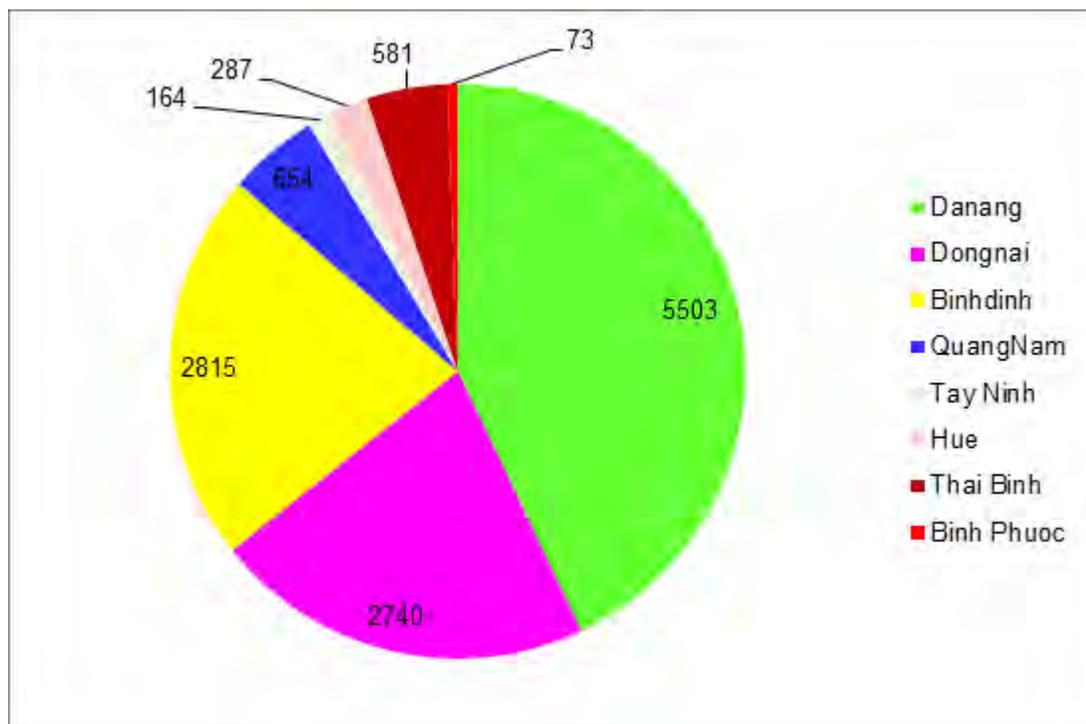


TABLE 1: NUMBER OF PDSP BENEFICIARIES BY TYPE OF DISABILITY SUPPORT SERVICE AND BY PROVINCE (AS OF DECEMBER 2015)

Types of PDSP Support Services	Number	Da Nang	Dong Nai	Binh Dinh	Quang Nam	Tay Ninh	Hue	Thai Binh	Binh Phuoc
Clinical exam	3,875	1,366	650	1,749	68	0	42	0	0
Physical therapy and clinical exam	809	419	14	331	15	0	30	0	0
Speech therapy	346	246	0	0	100	0	0	0	0
Wheelchairs	722	175	417	0	65	65	0	0	0
Walking stick for blind	547	154	317	0	76	0	0	0	0
Hearing aids and clinical exam	328	65	173	48	8	34	0	0	0
Prostheses/orthoses and clinical exam	477	185	56	100	136	0	0	0	0
Corrective surgery and clinical exam	38	14	7	17	0	0	0	0	0
Early intervention	296	226	0	50	20	0	0	0	0
Special/inclusive education for CWD	242	179	43	0	0	20	0	0	0
Scholarship for CWD	1,058	755	225	56	22	0	0	0	0
Vocational training and counselling	300	157	32	0	0	0	0	111	0
Revolving fund/loan	338	63	13	205	12	0	26	19	0

Types of PDSP Support Services	Number	Da Nang	Dong Nai	Binh Dinh	Quang Nam	Tay Ninh	Hue	Thai Binh	Binh Phuoc
Job/vocational training and livelihood support	1,262	531	327	111	67	45	39	69	73
Capacity building and social participation	583	240	239	0	65	0	39	0	0
Monthly allowance from government	79	64	15	0	0	0	0	0	0
Home improvement	87	87	0	0	0	0	0	0	0
Social participation	1,430	577	212	148	0	0	111	382	0
Total	12,817	5,503	2,740	2,815	654	164	287	581	73

Development of PDSP's M&E Plans

PDSP's M&E staff worked with the M&E Advisor (Dr. Thomas Kane) to design and develop the M&E plan each year for submission to and approval from USAID. The M&E system was developed and incorporated into the project's Technical and Administrative Management Information System (TAMIS) to keep track of two USAID standard indicators—the number of service providers trained who serve vulnerable persons and the number of PWD benefiting from U.S. Government-supported social services. In TAMIS, each service provider and PWD beneficiary has their own code to prevent double counting. All data collected for M&E purposes were verified and then entered into this system, following a strict protocol for ensuring confidentiality and integrity of the data. The PDSP M&E officer and PDSP M&E data entry assistant were the only ones in the project authorized to enter, edit, store, analyze, or retrieve the data for project reports and presentations.

Disability Needs Assessments in Dong Nai and Binh Dinh

In 2013, PDSP staff worked with the VPHA to conduct disability assessments in Dong Nai and Binh Dinh. These comprehensive assessments included extensive secondary data collection from DOLISA, DOH, DOET, and DPOs in these provinces, and from individual and group interviews with target groups of service providers, PWDs, and other stakeholders. The complete reports for each assessment were finished in November 2013, including a description of the methodology, results, conclusions, and recommendations for the PDSP and provincial disability support programs in these two provinces.

Disability Assessment in Other Provinces (Quang Nam, Tay Ninh, Binh Phuoc, Quang Tri, and Thai Binh)

In August–September 2013, PDSP conducted an assessment to examine options for increasing the project's coverage by exploring needs and possibilities in new provinces. A team led by Lloyd Feinberg, an independent consultant with experience in design and evaluation of post-conflict disability and rehabilitation programs, and composed of staff from PDSP and USAID, conducted the assessment in two phases. Phase 1 included a detailed literature review and consultations with practitioners and researchers knowledgeable about disability issues in Vietnam. The objective of Phase 1 was to select a group of candidate provinces for field visits during Phase 2. The Phase 2 field assessment included meetings with USAID, other donors, service providers, and other stakeholders in Hanoi, followed by meetings with Government of Vietnam officials, service providers, NGOs, and families and PWD in the five provinces that were identified in Phase 1: Quang Nam, Quang Tri, Binh Phuoc, Tay Ninh, and Thai Binh.

These assessments reviewed the situation of PWD, assessing the gaps in service provided to PWD and the capacity for addressing the gaps in these provinces. Based on the findings and recommendations from the reports, PDSP developed work plans to address disability needs for local PWD in these provinces.

Program Mid-Term Review

During July 2014, PDSP staff worked with the M&E Advisor and DAI headquarters staff (Walter Weaver and Brian Oh) to conduct a mid-term review of PDSP performance. The mid-term review helped to review program progress and quality of technical implementation, collaboration with Government of Vietnam partners, and finance, contracting, and operations procedures.

USAID Disability Evaluation

PDSP staff worked with MSI (Management Systems International) and MDRI (Mekong Development Research Institute)—the USAID Mission’s evaluation contractors—to prepare and make arrangements for the Mission’s disability program evaluation in Danang and other provinces in March, 2015. This evaluation aimed to document the general impact and key contributions of USAID’s disability programs over the past decade in building awareness, the enabling environment, and institutional capacity and operations, identifying current opportunities and gaps in disability programming to serve as a base of understanding for the ongoing work of the Government of Vietnam, program implementers, DPOs, and other stakeholders. The findings and recommendations of this evaluation were shared with local government partners and grantees at the PDSP final event.

PWD Satisfaction Scorecard

PDSP provided a variety of disability support services in the social, health, and education domains to PWD. To monitor improvements in client satisfaction and quality of service provision over time, PDSP developed a brief survey by which PWD could score their satisfaction with services received. PDSP conducted the PWD scorecard survey every year in the same way at the International Disability Day Event on December 3 to obtain direct feedback from PDSP beneficiaries.

In December 2013, PDSP worked with the Danang DPO to roll out the scorecard among 200 PWD who had received health or social support services for their disability. The data collectors for this mini-survey, selected from district DPO staff and trained by PDSP staff, conducted the individual interviews with PWD with different types of disabilities participating in the International Disability Day events. PWD receiving disability assistance were asked about the disability services they had received, whether they were satisfied with those services, and if not, why they were not satisfied. The survey also asked if they feel that the quality of disability support services has improved during the previous 12 months, and to rate the level of perceived quality of services between 1 (worst quality) and 5 (highest quality). Most of the survey participants (93 percent) said they were satisfied with the services they received during the last 12 months.

In 2014, PDSP implemented the scorecard again among 250 PWD at Danang’s International Disability Day event (December 3, 2014). In this second scorecard survey, 98 percent of the survey participants said that they were satisfied with the services they received during the last 12 months.

The scorecard data were entered into the PDSP M&E database and analyzed using standard statistical software, and then reported to the PDSP Chief of Party, team leaders, and local implementing partners. This information provided ongoing feedback to PDSP and its implementing partners on comprehensiveness of the disability support services being provided from the PWD beneficiary perspective, helping to identify additional service needs or problems in service quality.

Quality Assurance and PDSP Service Follow-Up

PDSP staff worked with local partners and service providers to conduct follow-up visits to assess the quality of the disability services PDSP supported for PWD. These follow-up visits focused on some particular disability services such as hearing aids, wheelchairs, prostheses, corrective surgeries, and vocational training. Follow-up visits were made on a schedule depending on the complexity of the procedure and the recommendation of the service providers. During these visits, at least 10 percent of the beneficiaries were selected randomly for follow-up. The monitoring team (partner technical staff and PDSP staff) made the visits, including direct clinical observations of the patient's condition, assessment of his/her satisfaction, and complaints about the services they received.

Hearing aids. In June 2014 and July 2015, among more than 70 hearing aid recipients in Danang, PDSP staff randomly selected and interviewed 8 recipients who received this service from the Quang Duc company. Among these 8 cases, none complained about the service quality and the technical staff reported a good hearing test result for all clients except one, whose device required a minor repair. This technical problem then was successfully fixed by the technical staff from Quang Duc company.

Wheelchairs. In April 2014, PDSP staff worked with Duc Cuong wheelchair service provider to conduct a quality assurance check for 10 percent of PDSP beneficiaries who received wheelchairs in June and December of the previous year. Among 9 cases visited, three (33 percent) who received a wheelchair in June reported problems with the hand brake, saddle, or plastic inner wheel. PDSP worked with Duc Cuong company to address this issue. Based on the findings and recommendations from this exercise, however, PDSP decided to stop contracting with Duc Cuong and selected other and better wheelchair service providers—PhaNa and Kien Tuong companies.

In September 2015, PDSP staff worked with DOLISA in Quang Nam province to conduct another follow-up check for PDSP beneficiaries who received wheelchairs in June. Among 72 wheelchair recipients, 12 were randomly selected by gender, age, and geographic characteristics for interviews. The results showed that among 12 cases visited, none complained about the wheelchair quality; all of them were satisfied and expressed their appreciation of the wheelchairs' quality.

Prostheses. PDSP coordinated with the Orthopedic and Rehabilitation Hospital to conduct follow-up visits to PWD beneficiaries who received prostheses and other assistive devices from the hospital during the year. These visits were made to the community by the P&O technician from the P&O workshop, along with PDSP staff and the district supervisors. During these visits, the hospital and PDSP staff checked the performance of the devices and the patient's adjustment to and satisfaction with them. The results of two follow-up visits PDSP staff conducted in Danang in December 2014 and Quang Nam in September 2015 are described below.

In Danang, among 66 prosthesis recipients visited, most (91 percent) were satisfied with the services they received. Only 6 (9 percent) had complaints about the device quality and these complaints were minor such as feeling "pressure" at the device's contact point (one case), the joint of the devices was loose or tight (four cases), and the sticking plaster on the top of the device was not adhesive (one case). All the clients with these complaints were invited to the hospital for adjustments and these problems were fixed successfully.

In Quang Nam, PDSP sent out invitations to more than 140 prosthesis recipients and about two-thirds of them (81) came for the follow-up visit. Most of them (97 percent) had no complaints and were satisfied with the device quality. Only two cases (3 percent) complained about their artificial limbs for below-knee amputation. One complained that the device was rather loose, and it was fixed in the field by the hospital

technician. Another reported that the device was quite high and did not fit with his limb; the hospital staff had to bring it back to the hospital where it was successfully fixed and given back to the client three days later. Some other minor problems were also found and fixed in the field such as tightening the screw to adjust the foot position, replacing the sticking plaster on the top of devices, and providing more socks for the socket.

Corrective surgeries. During September 2015, PDSP staff collaborated with Danang Rehabilitation Hospital to conduct clinical follow-up for all 15 PWD who received corrective surgery during the year under the PDSP grant with Danang DOH. The clinical follow-up by the hospital found that the health problems of these patients were corrected and significantly improved; all of them were satisfied with their improved health outcomes after surgery except one case who complained about the service—a female with club foot in Hoa Vang who received surgery in June at the Danang Orthopedic Hospital. Her club foot was functionally corrected, and there have been no problems since she was discharged from the hospital but she feels some pain when walking now. She was admitted to the hospital for PT and further follow-up.

Vocational training and jobs. In March and April of 2015, the M&E team worked with Danang DOLISA to conduct an evaluation field trip for the community-based vocational training program that was initiated by this local partner. At least two beneficiaries per district, one male and one female, with different types of vocational training, were randomly selected for interviews among nearly 100 PWD who participated in the training. PDSP staff conducted direct interviews with each visited case, focusing on service satisfaction and the obstacles/challenges during the vocational training program.

The findings showed that only one case dropped out the program since it started in August 2014. Among the beneficiaries visited, none had any substantial complaint about the training program. This community-based model was described as suitable for PWD, because the training emphasizes practical skills development and the jobs are in demand. These include photo editor, electrician, hair stylist/barber, motorbike repairman, tailor, and handicrafts maker, which do not require the people enrolled in the program to have a high education background or extensive work experience.

Training Follow-Up

PDSP staff worked with local consultants to conduct three small follow-up assessments of PDSP-supported training: CM training for case managers in Danang in March 2014, autism training for doctors and physical therapists in Danang in December 2013, and training on OT for children for doctors and physical therapists in Danang in February 2015. The purpose of these small studies was to assess the retention of knowledge by the trainees and its continued utilization to provide disability support services in their current work. The trainees were administered the same questionnaire that was used for their initial training pre-test and post-test.

The assessment findings showed that the knowledge retention six months after training was 90 percent, 72.7 percent, and 97 percent, and the percentage of PDSP trainees who reported continuing to apply the knowledge/skills learned to their current work was 93 percent, 81 percent, and 63 percent for CM, autism, and OT training respectively. OT was a new area in Danang; most of the hospitals in the city have not established an OT unit. This explains the lower percentage of PDSP trainees who applied the knowledge in OT they learned into their daily work at the hospital.

Case Studies

The M&E team worked with PDSP technical teams and the Senior M&E Advisor to prepare eight case studies that highlight significant achievements, potential impacts, and lessons learned under PDSP's three program components. Below is the list of the case studies, which have been shared in previous reports to USAID:

- Development of an integrated and effective disability CM and referral system for PWD in Danang.
- Economic empowerment of PWD through vocational training, employment, and livelihoods in Danang.
- Expanding rehabilitation services for CWD in Danang; establishment of a rehabilitation department at DHWC.
- Building capacity of medical rehabilitation staff and facilities in Danang through improved professional education in medical rehabilitation.
- Improving education opportunities for CWD in Danang through strengthened and expanded SE and IE programs.
- Establishment of an NBS management center at the DHWC for early detection and treatment of infants' diseases and conditions.
- Implementing sustainable PCC services in Danang to improve maternal, fetal, and infant health.
- Piloting a BDS system for infants in Danang's Cam Le District.

Gender Equality (GE) and Gender-Based Violence (GBV) Against PWD

During the summer of 2013, PDSP staff worked with a national gender consultant to conduct a study of GE and GBV issues affecting people with disabilities. Both qualitative and quantitative methodologies were used in this study. More than 200 male and female PWD age 15–60, 60 government service providers, and 23 parent/caregivers were randomly selected for interviews and group discussions in two districts of Danang (Hoa Vang and Thanh Khe).

The findings of the study revealed that PWD were subjected to acts of stigmatization, discrimination, and violence from various quarters, including family members, acquaintances, and strangers. Regarding sexual violence, there were a significant number of cases of sexual harassment, sexual abuse, or rape against women with disabilities. Victims of these acts of sexual violence were mainly women and girls with mental deficiencies who lived in the countryside.

There was a strong tendency of both male and female respondents (PWD and service providers) to report that issues of GBV were a private matter to be handled by the family and PWD tended not to seek outside support or public intervention for sexual violence.

The full final study report was submitted to USAID. The study results were used to develop GBV training modules and information/education/communication materials for local case managers/social workers, and then training on GE and GBV against PWD was conducted for more than 400 case managers/social workers in Danang, Dong Nai, and Binh Dinh.

Additionally, the M&E team worked with the Danang DPO to provide gender training and deliver educational materials on GE and GBV against PWD for more than 200 PWD who participated in events on Vietnam Disability Day in April 2015.

Public Health Assessment

An independent assessment of Danang’s pilot BDS program found it had succeeded on both objectives—establishing and operating a BDS information system and referring birth defects to treatment. Key findings of the assessment include: 1) established surveillance system; 2) increase in case reporting thanks to training for physicians, nurses, and midwives leading to increased detection and diagnosis; 3) increase in staff’s capability in diagnosis and provision of advice/education to parents on birth defects; 4) ability to collect, manage, and provide data; and 5) effectiveness of three case managers in the community in referral of birth defects to treatment services.

The assessment also recommended areas for improvement: 1) improve clarity of data collection forms; 2) improve consistency/cleaning of data, coding, and entering data; and 3) use Epi-Info or Epi-Data software instead of Excel. The assessment team also gave key recommendations for next steps: 1) continue to use the “referral system” and make it a model for other districts; 2) involve private hospitals in hospital-based surveillance; and 3) prolong project support for three to five years to achieve stability of the system.

Data Quality Assessment

On August 24–25, 2015, USAID’s M&E team conducted a data quality assessment for all seven key indicators that the project regularly reported on and updated into the USAID AIDTracker system. The team checked and verified all data available in the M&E system, including in TAMIS and the filing system. At the wrap-up meeting, the team concluded that PDSP’s M&E data are of good quality and had no concerns about data accuracy, consistency, and reliability.

PDSP Key Indicator Targets and Results

Table 2 presents results for the seven indicators on which PDSP regularly reported in USAID’s AidTracker system. A summary of results for all of PDSP’s indicators is included in Annex 2.

TABLE 2: SELECTED PDSP INDICATORS

Standard Indicators				2013 Results		2014 Results		2015 Results	
1. Number of people benefiting from U.S. Government-supported social services				2,115		5,927		4,775	
				M	W	M	W	M	W
				1,252 (59%)	863 (41%)	2,892 (48%)	3,035 (52%)	2,786 (58%)	1,989 (42%)
Target Set for 3 years: 10,000		Deviation Type		Date of Last DQA (8/2015)					
<p>The target for the whole project life is 10,000 and the 3-year result is 12,817 (128%). Of these, 55% is male and 45% is female.</p> <p>Explanation: PDSP expanded its implementation to other provinces so the direct assistance to PWD was higher than anticipated.</p>									
2. Number of service providers trained who serve vulnerable persons				663		2,156		1,884	
				M	W	M	W	M	W
				323 (49%)	340 (51%)	1,083 (51%)	1,073 (49%)	825 (43%)	1059 (57%)
Target set for 3 years: 2,718		Deviation Type		Date of Last DQA (8/2015)					
<p>The target set for the whole project life is 2,718 and the 3-year result is 4,703 (269%). Of these, 47% is male and 52% is female.</p> <p>Explanation: PDSP expanded to other provinces and the DIS was also replicated in other provinces (Quang Nam, Thai Binh, Binh Phuoc, and Tay Ninh), so PDSP provided many DIS training sessions and other technical training for local service providers accordingly to support program implementation there.</p>									
Gender Indicator (GNDR-6)				2013 Results		2014 Results		2015 Results	
3. Number of people receiving U.S. Government-funded GBV awareness training				0		211		446	
				M	W	M	W	M	W
				0 0%	0 0%	82 39%	129 61%	171 38%	275 62%
Target Set for 3 years: 489		Deviation Type		Date of Last DQA (08/2015)					
<p>The target set for the whole project life is 489 and the 3-year result is 657 (134%). GBV awareness training was expanded to case managers in Dong Nai and Binh Dinh provinces.</p>									
4. Number of U.S. Government-assisted organizations or service delivery systems that serve vulnerable populations strengthened				2013 Results		2014 Results		2015 Results	
				NA		29		30	
Target set for 3 years: 34		Deviation Type		Date of Last DQA (08/2015)					
<p>Explanation: The target for the whole project life is 34 and the 3-year result is 59 (173%). Due to project expansion in new provinces, including Quang Nam, Hue, Thai Binh, Binh Phuoc, and Tay Ninh in the third year, PDSP provided capacity building for more organizations than anticipated.</p>									
5. Number of additional PWD currently employed (including self-employed) with PDSP support.				15		248		833	
				M	W	M	W	M	W
				8 53%	7 47%	152 61%	96 39%	377 55%	301 45%
Target set for 3 years: 781		Deviation Type		Date of Last DQA (08/2015)					

Standard Indicators				2013 Results	2014 Results	2015 Results
<p>The target set for the whole project life is 781 and the 3-year result is 1,096 (140%). Of these, 55% is male and 45% is female.</p> <p>Explanation: The number of PWD who were newly employed is higher than anticipated due to more livestock and other livelihood support provided to this vulnerable group in the expanded provinces.</p>						
6. Number of new Government of Vietnam policies/plans developed to support disability programs				0	2	3
Target set for 3 years: 3		Deviation Type		Date of Last DQA (08/2015)		
<p>Explanation: The target set for the whole project life is 3 and the 3-year result is 5 (166%). PDSP successfully advocated to Danang government to issue five policies/guidelines to support improved services for PWD: Two Decisions from the city People's Committee regarding the approval for the city disability action plan for 2014 and 2015; one Decision from the city People's Committee dated April 22, 2015 on referral guidelines for disability services for PWD; one guideline from DOLISA on CM implementation in all 7 districts; and one guideline from Danang DOET dated October 17, 2015 on educational support for CWD at school.</p>						
7. Level of satisfaction among PWD beneficiaries receiving social services in targeted program areas				NA	93%	98%
Target Set in FY 2014 and 2015 is 90% and 95%		Deviation Type		Date of Last DQA (08/2015)		
<p>Explanation: The targets set for this indicator in 2014 and 2015 were 90% and 95%, and the results were 95% and 98% in 2014 and 2015 respectively. The Client Satisfaction Scorecard Survey was conducted during the International Disability Day Event in Danang on December 3.</p>						

VI. COMMUNICATIONS

Over the life of the project, PDSP submitted more than 50 communication products to USAID. Annex 1 contains a list and brief description of each product. These include 15 Highlights (photos with captions), 12 Updates (one-page activity summaries), 7 Success Stories (longer descriptions following the USAID Success Story template), 10 Small Grants Highlights, and 7 other products, including a Final Results Booklet (in both English and Vietnamese). The Small Grants Highlights and Final Results Booklet, both attached in Annex 2, were distributed at the project's Final Event in Hoi An.

The Small Grants Highlights document included brief summaries and photographs from the work of the following: Quy Nhon University; Quang Nam DPO; Center for Children with Hearing and Vision Impairments in Tay Ninh; Nguyen Nga Center in Binh Dinh; Inclusive Development Action (IDEA); Institute of Population, Health, and Development (PHAD); Danang DPO; DAVA; ACDC; and Sustainable Health Development Center (Viethealth).

VII. ENVIRONMENTAL COMPLIANCE

Two of the project's activities—livelihood support in the form of livestock and small home improvement construction for PWD—required PDSP to follow USAID environmental compliance procedures.

Livestock for livelihood support. The project was unable to respond to requests for this common and preferred type of livelihood assistance for poor rural families until July 2014, when USAID approved an Agricultural Commodity Waiver to allow PDSP to procure livestock as part of its livelihood development program. The project's initial environmental examination also required modification before being allowed to move forward. In August 2014, USAID amended the project's initial environmental examination to include additional guidance for PDSP's home improvement and livestock work. With these changes in place, PDSP next needed to satisfy USAID's environmental compliance requirements for providing livestock.

The first step required was to develop a checklist of standards of accepted practice that livestock recipients need to satisfy before they could receive animals from the project. Following approval of the checklist by USAID, the PDSP team visited each potential recipient, applying the checklist and identifying the environmental risks that needed to be addressed. A significant amount of time was required to conduct these assessments and then develop the ERFs and EMMPs required if there was a moderate or unknown risk identified. PDSP submitted the first batch of livestock ERFs to USAID in January 2015 and received the Mission's approval to proceed.

The project eventually provided livestock to nearly 400 PWD in six provinces (Danang, Dong Nai, Binh Dinh, Binh Phuoc, Tay Ninh, and Hue). In Danang, the procurement of animals was carried out through PDSP's subgrant to DOLISA, while in the other provinces it was done through subgrants to local NGOs. In each province, the procurement and delivery of animals was preceded by training of the beneficiaries in animal husbandry and environmental risks and compliance. Following the training, the beneficiaries were required to make necessary improvements in their houses before receiving the animals. These included upgrading of a cow shed or chicken pen, and construction of the waste disposal pits and disinfection hole that are required by the EMMP. The EMMPs were monitored by local disability case managers or subgrantees and reported to PDSP.

Home improvements. After a number of delays related to consideration of different mechanisms for delivering small home improvements to selected PWD in Danang, PDSP awarded a contract to East Meets West Foundation in 2015 to manage the process. EMW in turn held a competitive bidding process and selected a local construction company to implement the work. Eventually, 84 beneficiaries in Danang, primarily in Hoa Vang district, received home improvements such as new roofs and ceilings, toilets, and improvements to kitchens and water supplies. These small construction activities were completed during July–October. The EMMP prepared for each house and approved by USAID were monitored by the engineer hired by DAI to do the initial designs of the improvements and results were reported to PDSP.

USAID visited twice during the project's final months to review the environmental compliance-monitoring activities for both home improvements and livestock. The project's AOR, Van Le, and

colleague Le Nguyen visited in late August. Dr. Van made recommendations for some small additions to the improvements in several of the houses (hand rail, expansion of door to toilet for better accessibility), but expressed her satisfaction with the work overall. Because none of the houses visited involved asbestos removal, PDSP later sent her photographs illustrating how some old asbestos roofing from one house was safely removed by the construction contractor.

In mid-October Dr. William Gibson, the Asia Bureau Environment Officer, visited the project for a day and was taken to visit houses in Hoa Vang district where PDSP had provided home improvements and livestock as livelihood assistance. He reviewed the EMMPs that had been monitored for both home improvements and livestock recipients, as well as the training manuals that had been distributed to the latter. He also inspected the disinfection trays and waste pits that had been built by two livestock recipients (cow and chickens). Dr. Gibson said he was impressed with the work that had been done by both the project and the recipients of the assistance and that he thought we had exceeded the environmental compliance requirements.

ANNEX 1: COMMUNICATION PRODUCTS

Type	Title	Visibility
Fact Sheet	Disability Support Program Fact Sheet	USAID Vietnam website
Highlights	Greater Mobility for the Visually Impaired—Jan 2014	USAID Vietnam Facebook
	Scorecards for Better Service Delivery—Feb 2014	USAID Vietnam Facebook
	Improving Professional Education in Rehabilitation Therapy –March 2014	Submitted to USAID Vietnam
	Addressing the Needs of Women with Disabilities in Vietnam—March 2014	USAID Vietnam Facebook
	Vocational training (baking) at Thanh Tam School—March 2014	DAI Global Facebook
	Celebrating (Vocational Training on) Vietnam Disability Day – April 2014	USAID Vietnam Facebook page; DAI Global Facebook page
	Congressional Delegation Visit to Danang—April 2014	DAI Global Facebook page;
	Equipping of resource rooms for inclusive education in Danang—May 2014	Submitted to USAID Vietnam
	Vocational training at LED Binh Ming—June 2014	Submitted to USAID Vietnam
	Special Education BA training in Dong Nai and Danang—July 2014	Submitted to USAID Vietnam
	International Disability Day—December 2014	Submitted to USAID Vietnam
	Vietnam Disability Day—April 2015	Submitted to USAID Vietnam
	Assistive Devices to Quang Nam—July 2015	Submitted to USAID Vietnam
	Home Improvements—September 2015	Submitted to USAID Vietnam
	Livestock Support—September 2015	Submitted to USAID Vietnam
Updates	DPO grant--April 2013	Submitted to USAID Vietnam
	Direct assistance--July 2013	Submitted to USAID Vietnam
	Beneficiary Update--Aug 2013	Submitted to USAID Vietnam
	Assistance to Danang Blind--Sept 2013	Submitted to USAID Vietnam
	Beneficiary Update, Year 1--Oct 2013	Submitted to USAID Vietnam
	December 2013—Disability Day	USAID Vietnam website
	School-to-Work Program in Dong Nai—Feb 2014	Submitted to USAID Vietnam
	Beneficiary Update—April 2014	USAID Vietnam website
	Expansion of case management activities in Binh Dinh—June 2014	Submitted to USAID Vietnam
	Beneficiary Update—September 2014	USAID Vietnam website
	Beneficiary Update—March 2015	USAID Vietnam website
Disability Information System—August 2015	Submitted to USAID Vietnam	
Success Stories	Revolving Grant Funds Creates Better Opportunities for People with Disabilities in Danang—Dec 2013	Submitted to USAID Vietnam
	Disabled People’s Organization Creates Opportunities for Jobs—Nov 2013	Submitted to USAID
	Personalized Support Ignites Opportunities for Persons with Disabilities—Jan 2014	USAID website; USAID Vietnam Facebook page

Type	Title	Visibility
	Phu Hoa Cooperative Expands Stable Employment for Persons with Disabilities in Southern Vietnam—July 2014	Submitted to USAID
	Finding Jobs, Fulfilling Lives—Jan 2015	Submitted to USAID
	No Child Left Behind—March 2015	Posted on USAID <i>Transforming Lives</i> website.
	Restoring Hope and Confidence through Community-based Vocational Training for Persons with Disabilities—June 2015	Posted on USAID/W website and USAID/Vietnam Facebook page
Other	Project Direct Assistance Snapshot—April 2014	Submitted to USAID Vietnam
	Project Year One Brief—Feb 2014	USAID Vietnam website
	USAID DSP – Looking Ahead—April 2014	Submitted to USAID Vietnam
	Video on vocational training at Tam Thien Sewing Company—June 2014	Posted on USAID Vietnam website
	Project Year Two Brief—Dec 2014 (English and Vietnamese)	Submitted to USAID Vietnam
	Project Final Results Booklet—Nov 2015 (English and Vietnamese)	Distributed to USAID and participants at Final Event
	10 Small Grants Highlights—Nov 2015	Distributed to USAID and participants at Final Event

ANNEX 2: FINAL RESULTS DOCUMENTS

(In the Word document, access these files by double-clicking the icon. In the PDF document, the files are attached after the indicator table.)



Final Event--Final Booklet.pdf



Final Event--Final Booklet VN.pdf



Final Event--Small Grants Highlights.pdf



Final Event--Small Grants Highlights Viet

THE UPDATED INDICATORS IN THE MONITORING & EVALUATION PLAN (DECEMBER, 2015)

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project life targets	Achievement To Date	Percent of Project 3-Year Target Achieved to Date
Objective Indicators						
1. Number of PWDs receiving comprehensive disability support services through ISP/CM referral system (annually)	Measures the extent to which PWDs are being reached and provided with comprehensive disability support services through the ISP/CM and referral system. PWDs visited by the joint team and received at least two services per year. The activities under IR 1 contribute to this objective level indicator	Number Disaggregated by commune, district, gender of CWD/PWD, and type of disability, and type of services received (general categories)	ISP/CM records; DIS data; and CWD/PWD service support records of different departments (DOH, DOLISA, DOET), Data from TAMIS	Total: 1,500 Year 1: 0 Year 2: 0 Year 3: 1,500	Total: 1,142 Year 1: 0 Year 2: 237 Year 3: 905	76 %
2. Number of additional CWDs (ages 5-17) that are currently enrolled in school with PDSP support (annually)	Measures the participation of CWDs in the educational system through IE, SE, or normal classroom instruction programs. The activities under Sub IR 2.2 contribute to this objective level indicator	Number and percent Disaggregated by commune, district, gender of CWD in and out of school, age group (5-9, 10-17), type of disability, and type of education program	Baseline 2011 Danang Disability Survey; annual ISP/CM records, DIS; and DOET baseline data, monthly PWD beneficiary reports, Data from TAMIS	Total: 285 Year 1: 0 Year 2: 135 Year 3: 150	Total: 242 Year 1: 40 Year 2: 156 Year 3: 46	85 % Danang: 186 Dong Nai: 36 Tay Ninh: 20
3. Number of additional PWDs currently employed (including self-employed) with PDSP support (annually)	Measures the extent to which DSP support for VT and employment service programs for PWDs is improving the labor force participation of PWDs. The activities under Sub IR 2.3 contribute to this objective level indicator.	Number and percent Disaggregated by commune, district, gender of PWD, age group of PWD (18-30, 31—60), type of disability and work sector)	Baseline 2011 Danang Disability Survey; DOLISA baseline data; Monthly PWD beneficiary reports .	Total: 781 Year 1: 50 Year 2: 379 Year 3: 352	Total: 1,096 Year 1: 15 Year 2: 248 Year 3: 833	140 %
4. Number of PWDs	Basic measurement of	Number and Percent	2011 Danang	Total: 8,000	Total: 8,560	

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project life targets	Achievement To Date	Percent of Project 3-Year Target Achieved to Date
who receive any type of direct assistance for disability services by PDSP supports (Annually)	availability and use of disability support services in Danang by PDSP intervention. The activities under IR 1 and IR 2 contribute to this objective level indicator.	(Disaggregated by commune, district, gender, age groups (0-17, 18+), type of disability, and type of support received)	Disability Survey. Monthly PWD beneficiary reports, Data from TAMIS	Total: 8,000 Year 1: 1,275 Year 2: 4,139 Year 3: 2,586	Total: 11,387 Year 1: 1,532 Year 2: 5,078 Year 3: 4,777	142 % Danang: 4,926 Dong Nai: 2,528 Binh Dinh: 2,667 Quang Nam: 654 Tay Ninh: 164 Hue: 176 Thai Binh: 199 Binh Phuoc: 73
5. Number of DPOs and parents association whose capacity has been strengthened with PDSP support (annually)	Capacity strengthening to be measured by groups participation in training in financial and organizational management, advocacy, PWDs rights; vocational training provision, referral-making, etc. and participation in Danang disability planning and implementation activities with other stakeholders. The activities under IR 2 contribute to this objective level indicator.	Number (Disaggregated by district, type of group strengthened (i.e., DPO and parent/caregiver groups) and type of capacity building received)	PDSP project M&E reports, PDSP training records	Project life Target: 11 Da Nang: 7 district DPOs, 1 Parent Association, Dong Nai: 1 DPO, 1 Parent Association Binh Dinh: 1 DPO	Achievement: 12 PDSP supported capacity building for 7 district DPOs & 1 Autism Parent Association in Danang, 1 DPO in Binh dinh, 1 DPO in Quang Nam, 1 DPO in Hue and 1 DPO in Thai Binh	109 %
6. Number of new GVN policies/plans developed to support disability programs in Danang (Annually)	A measure of the extent to which the government is taking concrete action to support disability programs and PWDs rights, through support by the USAID-funded PDSP The activities under IR 1, 2 and 3	Number (Disaggregated by general categories (policy/plan/ budget)	PDSP project M&E reports; reviews of government policies, documents, and planning meetings for disability support program; records of DSP technical support to GVN departments (DOLISA, DOH, DOET)	Total: 3 Year 1: 0 Year 2: 2 Year 3: 1	Total 5: 1. Da nang DOLISA's guideline for DIS and CM system. 2. Decision issued by Danang People's Committee on approval of Disability Action Plan 2014 3. Decision issued by Danang	166 % Already met the project life target

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project life targets	Achievement To Date	Percent of Project 3-Year Target Achieved to Date
	contribute to this objective level indicator.				People's Committee on approval of Disability Action Plan 2015 4..DOET guideline on educational supports for CWDs. 5. Decision issued by the city People's Committee in 2015 on referral guideline for PWDs	
7. Percent of PWDs reporting satisfaction with the quality of disability services they receive (Annually)	An effort to get a client/beneficiary scorecard on perceived quality and improvements in disability support services over the course of the PDSP project. The activities under IR 1 & 2 contribute to this objective level indicator.	Percent (Disaggregated by district, gender of PWD; and type of disability)	Baseline (Year 1) and Follow-up (Year 2 and Year 3) stratified surveys (minimal sample size)	Year 1: NA Year 2: 90% Year 3: 95%	Year 1: NA Year 2: 93% Year 3: 98%	103 % The summary report is attached
8. Number of service providers of all types who have received training from PDSP (with PDSP support) (Quarterly)	A measure of the aggregate reach of PDSP supported training and capacity building activities for disability support service providers. The activities under IR 1, 2 & 3 contribute to this objective level indicator.	Number (Disaggregated by gender, district, and type of training received)	PDSP project training records for all groups receiving DSP-supported training : DOLISA, DOH and DOET, NGOs, DPOs,, VT/ Employment agencies, Data from TAMIS	Total project life: 2,718 Year 1: 518 Year 2: 1,500 Year 3: 700	Total for project life is 2,718 and the updated is 4,703 Year 1: 663 Year 2: 2,156 Year 3: 1,884	173 % PDSP already reached 3 year target
9. Number of PWDs who receive any type of disability service by PDSP support (Quarterly)	Basic measurement of availability and use of disability support services in Danang by	Number (Disaggregated by commune, district, gender, age groups (0-17, 18+), type of	PDSP M&E report; monthly PWD beneficiary report, Data from TAMIS	Total project life: 10,000 individuals Year 1: 1,747 Year 2: 5,317	The accumulative achievement is 12,817 Year 1: 2,115 Year 2: 5,927	128 % Danang: 5,503 Dong Nai: 2,740

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project life targets	Achievement To Date	Percent of Project 3-Year Target Achieved to Date
	PDSP intervention. The activities under IR 1 & 2 contribute to this objective level indicator.	disability, and type of support received)		Year 3: 2,936	Year 3: 4,775	Binh Dinh: 2,815 Quang Nam: 654 Tay Ninh: 164 Hue: 287 Thai Binh: 581 Binh Phuoc: 73
10. Number of target population receiving USG-funded Gender-Based Violence awareness training (Annually)	An indicator of the impact of gender-based violence awareness issues included in PDSP-supported disability trainings. The activities under IR 1 & 2 contribute to this objective level indicator.	Number (Disaggregated by gender, district, target group (i.e., PWDs, service providers, and/or government disability program managers)	PDSP M&E report, PDSP service provider beneficiary report for all groups receiving GBV training, Data from TAMIS	Total project life: 489 Year 1: 0 Year 2: 289 Year 3: 200	The updated result is 657 Year 1: 0 Year 2: 211 Year 3: 446	134 %
11. Percent improvement in knowledge of key concepts and topics of training on social work/case management for case managers, inclusive education for teachers, rehabilitation medicine for doctors and PTs, and PWD daily care for care givers (Annually)	Basic measurement of knowledge improvement of participants after training. The activities under IR 2 contribute to this objective level indicator.	Percent (Disaggregated by district, gender; and type of service providers)	Data Source: Pre-training/Post-training test of knowledge of key concepts and topics of training.	90%	Percentage of knowledge for following specific trainings: case management for case managers/supervisors (68% - 93%), Autism spectrum (64% - 82%), early detection for case managers (32%-96%). The average score for post-test is 90.3%	100%
12. Percent of follow-up sample of trainees on case management/social work, inclusive	Measurement of PDSP trainees' knowledge retained six months after PDSP training. The activities under IR 2	Percent (Disaggregated by district, gender; and type of service	Follow-up survey for a random sub-sample of trainees, using same questionnaire as in	Year 1 & 2: NA Year 3: 70%	90% for case management training, 72.7% for autism training and	122 %

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project life targets	Achievement To Date	Percent of Project 3-Year Target Achieved to Date
education and medical rehabilitation who retain knowledge of key concepts and topics of training after six months following the training (Annually)	contribute to this objective level indicator.	providers)	the pre-training post training test, with additional follow-up questions		97% Occupational Therapy training (Attached are summary reports for these training follow up assessments). The average % for knowledge retention is 86 %	
13. Percent of PDSP trainees on case management/social work, inclusive education and medical rehabilitation currently using the information and/or skills learned in the training in their current job (six months after the training was completed) (Annually)	Measurement of PDSP trainees' use of knowledge & skills that they learned from PDSP in their current job. The activities under IR 2 contribute to this objective level indicator.	Percent (Disaggregated by district, gender; and type of service providers)	Follow-up survey for a random sub-sample of trainees, using same questionnaire as in the pre-training post training test, with additional follow-up questions and observe their skills/actual performance.	Year 1 & 2: NA Year 3: 80%	93% for case management trainees, 81 % for autism training and 63% for Occupational Therapy training. The average percentage of current use of the knowledge is 79%	99 %
14. Number of disability services for PWDs as a result of case management and referral system (Annually)	Measures the numbers of services PWDs receive through the case management and referral mechanism. The activities under IR 1 & 2 contribute to this objective level indicator.	Number	PDSP M&E report; monthly ISP/CM report,	Total project life: 2,300 Year 1: 0 Year 2: 300 Year 3: 2,000	Total: 2,311 Year 1: 0 Year 2: 554 Year 3: 1,757	101 %
15. Number of USG assisted organizations or service delivery systems strengthened who serve vulnerable populations (Annually)	This indicator measures the number of local organizations whose capacity or service delivery will be strengthened by PDSP support. The organizational capacity is	Number (Disaggregated by type of organization)	PDSP records	Total: 34 Year 1: NA Year 2: 29 Year 3: 5	Total: 59 Year 1: NA Year 2: 29 Year 3: 30	173 %

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project life targets	Achievement To Date	Percent of Project 3-Year Target Achieved to Date
	defined in terms of the quantity and quality of support services they deliver to persons with disabilities. The activities under IR 1, 2 & 3 contribute to this objective level indicator.					

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
IR 1: Effective disability case management/social work and a comprehensive referral system implemented in Danang using an approach that is sustainable and replicable to other hot spots.						
Sub IR 1.1 A force of professional social workers and case managers developed						
1.1.1 Number of communal workers and district supervisors who successfully complete disability social work/case management/CBR training and refresher training supported by PDSP (Annually)	Communal CMs and district, city CM supervisors are social workers, health workers and school teachers are an important segment of the disability support workforce. Supporting the development of DOLISA social workers and the social work capacity skills in DOH and DOET inclusive education and special education staff and teachers contributes to the development of a comprehensive integrated support and referral system for PWDs and their families and caregivers.	Number <i>Disaggregated by city/province, district, commune, gender of trainee; and department/organizational affiliation of Trainee (e.g., DOLISA, DOH, DOET, NGO)</i>	PWD service provider beneficiary report, Data from TAMIS	Life of Project Total: 339 Year 1: 189 (Danang) Year 2: 100 (Bien Hoa) Year 3: 50 (Phu Cat)	The updated achievement is 426 Year 1: 189 in Danang. Year 2&3: 132 in Dong Nai and 105 in Binh Dinh	125 % PDSP already reached 3 year target
1.1.2 Number of trainers certified as Master trainers on SW and CM with PWDs through TOT, who are SW lecturers and SW professionals at local institutions (Annually)	Training of trainers on social work, case management with disability and referral system	Number count <i>Disaggregated by city/province, gender of trainee; and University /organizational affiliation of Trainee</i>	Project training reports, reports from DOLISA, ULISA, PWD service provider beneficiary report	Life of Project Total: 15 Year 1: 15 Year 2: 15 Year 3: 0	Total: 24 Year 1: 24 Year 2: 24 Year 3: 0	160 % The target achieved and activities were completed in year 2.
1.1.3 Number of communes having	Measures the geographic coverage of	Number count	Project training reports and	Project life total: 75	The updated achievement is 131,	

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
communal workers trained in SW and CM in field of disability, and CBR skills. (Annually)	CM work capacity for disability support services	<i>Disaggregated by city/province</i>	DOLISA District Social Work Service Center data, PDSP service provider beneficiary report	Danang: 56 Dong Nai: 10 Binh Dinh: 9	including 56/56 (all 7 districts of Da Nang), 42/42 (in Bien Hoa and Vinh Cuu district of Dong Nai), 33/33 (in two districts of Phu cat and Hoai An, Binh Dinh province)	174 % PDSP already reached 3 year target
1.1.4 Local capacity for training commune and district disability SWs/CMs established at a local certificate-granting institution that is supported by local government	Measures the institutionalization of comprehensive disability support program	Number count <i>Disaggregated by city/province</i>	Program record, certificate-granting program in SW/CM training established at local university	Life of project Target: 1	1 (Dong A University)	100 % PDSP already reached 3 year target
Sub IR 1.2 A multidisciplinary referral system developed and functioning						
1.2.1 Number of Districts with teams of trained CM supervisors for a multidisciplinary disability referral system (Annually)	Measures the geographic coverage of CM supervisors capacity for disability support services across districts and demonstrates interaction with the city-level Social Work Service Center and service providers.	Number	Project training reports and DOLISA District Social Work Service Center data.	Life of project target: 9 7 in Danang, 1 in Binh Dinh, 1 in Dong Nai,	The actual achievement: 12 7 in Danang 2 districts and 1 city (Bien Hoa) in Dong Nai province 2 in Binh Dinh	133 % PDSP reached 3 years target. Dong Nai authority also implemented this system by their own budget in three additional districts (Xuan Loc, Trang Bom and Xuan Loc)
1.2.2 Number of Referrals made where PWDs referred acting on the referral by the case	Measures the numbers of referrals that are made for any type of disability support services, and the	Number <i>Disaggregated by district, commune,</i>	Project training reports, DOLISA District Social Work Service Center data, service	Total: 3,228 Year 1: 0 Year 2: 228 Year 3: 3,000	Total: 3,111 Year 1: 0 Year 2: 554 Year 3: 2,557	96 %

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
managers (Quarterly)	number of clients who act on the referrals and then receive the referred services	<i>type of referral, gender of referred client</i>	delivery site data, monthly PWD beneficiary report, Data from TAMIS			
Sub IR 1.3. Supporting policies for case management and referral developed and promoted						
IR 2: Improved quality and access of specialized services for PWD						
Sub IR 2.1 Specialized quality medical rehabilitation services are available and accessible to PWD						
2.1.1 Number of medical doctors receiving advanced training at district and city levels (and refresher training) (Annually)	Measures number of doctors with improved skills in providing services to PWD.	Number <i>Disaggregated by district, gender of doctor</i>	PDSP service provider beneficiary report, Data from TAMIS	Life of Project Target: 24 total doctors Year 1: 24 Year 2: 24 Year 3: 0	Total: 30 Year 1: 24 Year 2: 30 Year 3: 30	125 % PDSP already met 3 year target
2.1.2 Number of physical therapists (PTs) at district and city levels receiving advanced training and refresher training. (Annually)	Measures number of PTs with improved skill sets to conduct therapy to PWD.	Number <i>Disaggregated by district, gender of PT</i>	PDSP service provider beneficiary report, Data from TAMIS	Life of Project Target: 40 PTs Year 1: 40 Year 2: 40 Year 3: 40	Total : 41 PTs Year 1: 40 Year 2: 41 Year 3: 41	102 % PDSP already met 3 years target
2.1.3 Number of CM/SW receiving basic CBR training (and refresher training) (Annually)	Measures number of CM/SW with improved skill sets to conduct basic rehab services.	Number <i>Disaggregated by district, commune, gender of worker, type of worker</i>	PDSP service provider beneficiary report, Data from TAMIS	See IR.1	See IR.1	100 %
2.1.4 Number of medical rehabilitation doctors and senior PTs receiving TOT training	Measures number of doctors and senior PTs certified as Master Trainers.	Number <i>Disaggregated by district, gender of doctor or senior PT</i>	PDSP service provider beneficiary report, Data from TAMIS (Technical Administration Management	Life of Project Total: 15 Year 1: 0 Year 2: 15 Year 3: 15	Total: 19 Year 1: 0 Year 2: 15 Year 3: 19	127 % PDSP already met 3 year target by

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
(Annually)			System)			end of year 2 (15 PTs and doctors).
2.1.5 Number of selective caregivers/parents provided training in basic therapy (Annually)	Measures number of caregivers or parents able to provide basic PT to PWD in household.	Number <i>Disaggregated by caregiver gender, type of training, district, commune</i>	PDSP service provider beneficiary report, Data from TAMIS (Technical Administration Management System)	Life of Project Total: 820 caregivers Year 1: 70 Year 2: 750 Year 3: 0	The actual number is 1,040 Year 1: 50 Year 2: 450 Year 3: 540	126 %
2.1.6 Number of doctors, PTs and nurses trained at commune/ward health clinics in early detection and intervention (Annually)	Measures number of health professionals trained at 56 commune/ward health clinics in early detection and intervention	Number <i>Disaggregated by gender, commune, ward, professional position</i>	PDSP service provider beneficiary report, Data from TAMIS	Life of Project Total: 159 Year 1: 0 Year 2: 59 Year 3: 100	Total: 167 Year 1: 0 Year 2: 59 Year 3: 108	105 % PDSP already met 3 year target.
2.1.7 Number of clinical examination provided for diagnosis confirmation with PDSP support (Annually)	Measures the number of PWDs identified in the 2010/2011 Danang Disability Survey receiving confirmation of diagnosis. Survey identified 5,530 needing confirmation.	Number <i>Disaggregated by type of disability, gender of PWD, and age category (adult PWD or CWD <18)</i>	PDSP PWD beneficiary report, Data from TAMIS (Technical Administration Management System)	Life of Project Target: 650 PWD Year 1: 300 Year 2: 300 Year 3: 50	Total: 3,875 PWD Year 1: 464 Year 2: 2,537 Year 3: 874	596 % PDSP already reached over 3 years target. Danang: 1,366 Dong Nai: 650 Binh Dinh: 1,749 Quang Nam: 68 Hue: 42
2.1.8 Number of PWDs receiving PDSP support for physical therapy	Number of PWDs receiving PT with project support. 3,897 PWDs identified in the 2010/2011 Danang Disability Survey as	Number <i>Disaggregated by type of disability, gender of PWD, and</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management	Life of Project Target: 450 PWD Year 1: 0 Year 2: 300 Year 3: 150	Total: 809 Year 1: 170 Year 2: 455 Year 3: 184	179 %

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
(Annually)	needing PT.	<i>age category (adult PWD or CWD <18), district, commune</i>	System)			
2.1.9 Number of PWDs with speech disability receiving speech therapy (Annually)	Number of PWDs receiving speech therapy with project support. 3,029 PWDs identified in the 2010/2011 Danang Disability Survey as needing speech therapy	Number <i>Disaggregated by gender of PWD, and age category (adult PWD or CWD <18), district, commune</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System)	Life of Project Target:175 PWDs Year 1: 0 Year 2: 100 Year 3: 75	Total: 346 PWDs Year 1: 0 Year 2: 115 Year 3: 231	197 % (246 in Danang and 100 in Quang Nam)
2.1.10 Number of PWDs with hearing disabilities and in need of hearing aids who receive them with PDSP project support (Quarterly)	Number of PWDs receiving hearing aids with project support. 2,772 PWDs identified in the 2010/2011 Danang Disability Survey as hearing aids.	Number <i>Disaggregated by gender of PWD, and age category (adult PWD or CWD <18), district, commune</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System)	Life of project target is 125 PWDs Year 1: 50 Year 2: 75 Year 3: 0	Total: 328 Year 1: 17 Year 2: 148 Year 3: 163	262 % PDSP already met 3 year target. Danang: 65 Dong Nai: 173 Binh Dinh: 48 Quang Nam: 8 Tay Ninh: 34
2.1.11 Number of PWDs in need of corrective surgery (e.g., mobility & cleft lip palate) who receive surgeries with PDSP project support (Annually)	Number of PWDs receiving corrective surgery with project support. 404 PWDs identified in the 2010/2011 Danang Disability Survey as requiring some sort of corrective surgery	Number <i>Disaggregated by gender of PWD, and age category (adult PWD or CWD <18), district, commune, type of surgery</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System)	Life of Project Target: 50 PWDs Year 1: 0 Year 2: 50 Year 3: 0	Total: 38 Year 1: 7 Year 2: 3 Year 3: 28	76 % Danang: 14 Dong Nai: 7 Binh dinh: 17
2.1.12 Number of assistive devices provided to PWDs in need of such devices (might exclude eyewear) with PDSP project support	Number of PWDs receiving assistive devices with project support. 5,000 PWDs identified in the 2010/2011 Danang Disability Survey as	Number <i>Disaggregated by gender of PWD, and age category (adult PWD or CWD <18), district, commune,</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System)	Life of Project Target: 270 PWDs Year 1: 120 Year 2: 150 Year 3: 0	Total: 1,024 PWDs Year 1: 237 Year 2: 748 Year 3: 39	379 % PDSP reached over 3 years target. Danang: 339

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
(Quarterly)	requiring some sort of assistive device (might exclude eyewear).	<i>type of device</i>				Dong Nai: 373 Binh dinh: 100 Quang Nam: 212
Sub IR 2.2 Increased school enrollment of children with disabilities in Danang by 20 percent						
2.2.1 Number of children with disabilities enrolled in school (See indicator 2 in the objective/impact indicator) (Annually)	Measures the number increase from baseline of CWD school enrollment and impact of DSP Project on lives of PWD.	Number and Percent; Percentage points increase <i>Disaggregated by commune, district, gender, , age group (5-9; 10-17), type of disability</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System).	Total: 285 Year 1: 0 Year 2: 135 Year 3: 150	Total: 242 Year 1: 40 Year 2: 156 Year 3: 46	85 % Danang: 186 Dong Nai: 36 Tay Ninh: 20
2.2.2 Number of additional resource rooms set up for inclusive education at selective schools in 7 districts of Danang city with PDSP support (Annually)	Targets based on setting up 2 IE rooms for each of the six urban districts, and 3 IE resource rooms in selected schools with DSP project support)	Number <i>Disaggregated by commune and district</i>	Project records, DOET data	Life of Project Target: 15 resource rooms Year 1: 5 Year 2: 10 Year 3: 0	Total: 16 Year 1: 0 Year 2: 5 Year 3: 11	106 % Da nang: 13 Binh dinh: 3
2.2.3 Number of teachers trained and receiving refresher training in inclusive education with PDSP support. (Annually)	Measures training received by teachers in inclusive education and special education Priority given to the 101 elementary schools.	Number <i>Disaggregated by teacher gender, commune, district</i>	PDSP service provider beneficiary report, data from TAMIS (Technical Administration Management System)	Life of Project Target: 260 Year 1: 100 Year 2: 80 Year 3: 80	Life of Project Target: 320 Year 1: 116 Year 2: 124 Year 3: 80	123 % The project already met 3 year target
2.2.4 Number of school teachers trained in early detection and intervention with PDSP support	Measures number of teachers trained in early detection and intervention (and receive refresher training)	Number <i>Disaggregated by gender, commune, district</i>	PDSP PWD service provider beneficiary report, data from TAMIS (Technical Administration Management	Life of Project Target: 245 teachers Year 1: 35 Year 2: 210	Total: 271 teachers Year 1: 61 Year 2: 210 Year 3: 0	110 % The project already met 3 year target

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
(Annually)			System)	Year 3: 0		
2.2.5 Number of CWD who receive early intervention with project support (Annually)	Number of children receiving early intervention based on 2% estimate of children from VNAH's experience from Cam Le District 2011 pilot study	Number <i>Disaggregated by gender, commune, district, type of disability</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System).	Life of Project Target: 175 CWDs Year 1: 0 Year 2: 100 Year 3: 75	Total 296 CWDs Year 1: 0 Year 2: 24 Year 3: 272	169 % Danang: 126 Dong Nai: 50 Quang Nam: 20
2.2.6 Number of CWD who receive educational support by PDSP (Annually)	Measures number of CWD benefiting from educational support by the project intervention..	Number Disaggregated by gender, commune, district, type of disability	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System).	Life of Project Target: 525 CWDs Year 1: 300 Year 2: 150 Year 3: 75	Total: 1,058 Year 1: 451 Year 2: 120 Year 3: 487	201 % The project already met the Project life target Danang: 755 Dong Nai: 225 Binh Dinh: 56 Quang Nam: 22
Sub IR 2.3 Employment rate among PWD increased by 20 percent from baseline						
2.3.1 Number of additional adult PWDs receiving employment, including self- employment, with project support (See the objective indicator Number 3) (Annually)	Measures the number of PWD in need of employment support as obtaining some employment. Number of PWDs in need identified by Danang Disability Survey as needing support: 1,304	Number and Percent <i>Disaggregated by gender of PWD, type of employment, commune, district</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System).	Total: 781 Year 1: 50 Year 2: 379 Year 3: 352	Total: 1,096 Year 1: 15 Year 2: 248 Year 3: 833	140 %
2.3.2 Number of PWDs receiving Vocational training (Annually)	Measures number of PWD benefiting from vocational training. Disability Survey indicated that 572 PWD in need of this type of training.	Number <i>Disaggregated by gender of PWD, district, commune</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System).	Life of Project Total: 195 PWD Year 1: 25 Year 2: 100 Year 3: 70	Total: 300 PWD Year 1: 20 Year 2: 200 Year 3: 80	153 % The project already met the project life target

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
2.3.3 Number of eligible PWDs receiving Preferential Loan with PDSP support (Annually)	Measures number of PWD receiving loans. Disability Survey indicated that 1,600 PWD in need of this type of training.	Number <i>Disaggregated by gender of PWD, district, commune</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System).	Life of Project Target: 110 Year 1: 10 Year 2: 50 Year 3: 50	Total: 338 Year 1: 35 Year 2: 32 Year 3: 271	307 %
Sub IR 2.4 Improved housing						
2.4.1 Number of PWD households receiving home improvement, accessibility, WC facilities and water supply and sanitation with PDSP project support.	Measures number of PWD households needing home improvement receiving improvements with project support. 963 households identified in Disability Survey	Number <i>Disaggregated by gender of PWD, district, commune</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System).	Life of Project Target: 84 households Year 1: 0 Year 2: 0 Year 3: 84	Total: 87 Year 1: 0 Year 2: 0 Year 3: 87	103 %
Sub IR 2.5 Supportive policies in place and promoted						
2.5.1 Number of PWDs indirectly benefiting from DSP support of DPOs/public events (Annually)	Measure the number of PWDs who participate in the social event such as advocacy, sport events, disability day events, disability forum with government	Number <i>Disaggregated by gender, DPO name, type of support received through the DSP supported DPO</i>	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System).	Total: 672 Year 1: 472 Year 2: 150 Year 3: 50	Total: 1,430 Year 1: 583 Year 2: 265 Year 3: 582	212 % The project already met 3 year target. Danang: 577 Dong Nai: 212 Binh Dinh: 148 Hue: 111 Thai Binh: 382
2.5.2 Number of government sponsored disability program meetings at the City-wide and district-level that formally include DPO and/or PWD self-help groups in Da Nang and other provinces	Measures willingness of City and district officials to include participation of DPOs and self-help groups as full members of committees or working groups	Number <i>Disaggregated by district, city, type of activity</i>	Project data and grantee reports (DPOs, DOLISA).	Total: 20 Year 1: 2 Year 2: 6 Year 3: 12	Total: 17 Year 1: 2 in Dong Nai Year 2: 3 in Danang Year 3: 11 in Dong Nai & 1 in Da Nang	85 %

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
(Annually)						
2.5.3 Number of directives, disability action plans, decisions or policy guidelines developed by People's Committee of Danang that involves DPOs/PWDs in design, planning. (Annually)	Measures willingness of City and district officials to include participation of DPOs and self-help groups as full members of committees or working groups	Number	Official government records of disability meetings and directives, policies, action plans made. PDSP project records	Total: 3 Year 1: 0 Year 2: 2 Year 3: 1	Total 5: - One DOLISA's guideline for DIS and case management system. - Two Decisions issued by Danang People's Committee on the approval of Da Nang disability action plan in 2014 and 2015. - One DOET guideline on educational supports for children with disabilities. One guideline for referral services for PWDs issued by the City People's Committee.	160 % The project already met 3 year target.
IR 3: Improved relevant public health services (population-based birth defects surveillance, post-natal newborn screening, pre-pregnancy services and cancer surveillance)						
Sub IR 3.1 Birth defects surveillance (Da Nang)						
3.1.1 Number of doctors and nurses/midwives in commune/ward health clinics and in /district/city health clinics trained in birth defect identification (Quarterly)	Measures number of health professionals trained in birth defect identification in commune/wards health clinics and in district health centers, and city hospitals.	Number <i>Disaggregated by gender, commune, ward, district, city professional position</i>	PDSP project, DOH records	Total: 310 Year 1&2: 0 Year 3: 310 (110 doctors & 200 nurses/midwives)	Total: 306 Year 1&2: 0 Year 3: (86 doctors and 220 nurse/midwives)	99 %
3.1.2 Number of birth	Directly measures the	Number	PDSP project, DOH	Total: 40	Year 3: 42	105 %

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
defects identified. (Quarterly)	performance of the birth defect surveillance system in the pilot district	<i>Disaggregated by gender, commune, ward, district</i>	records	Year 1&2: 0 Year 3: 40		
3.1.3 Percentage of cases with BD information correctly completed in the baby's medical record, including the new separate BD form (Annually)	Measures the performance of the birth defect surveillance system in the pilot district	Percentage	PDSP project, DOH records	Year 3: 80%	95%	118 %
3.1.4 Number of birth defect cases that are double counted. (Annually)	Measure the performance and the correction of the data recording, reporting and management for this system	Number and Percent of all BDSS birth defect cases identified as double counted <i>Disaggregated by gender, commune, ward, district</i>	PDSP project, DOH records	Year 3: Goal of having less than 10% of cases double counted by end of project, and 0% once BDSS is fully computerized with software to catch and correct double entries immediately	38/42 cases	The activity just recently started and the number is too small for calculating %
3.1.5 Percentage of babies with BDs referred to treatment/follow up services by Cam Le case management system among the total BD cases detected in Cam Le (Annually)	Measures the effective integration of birth defect system into the referral/case management system in Cam Le	Percentage <i>Disaggregated by gender, commune, ward in Cam Le district</i>	PDSP project, DOH records	Year 3: 100%	(3 babies detected and referred to treatment) 100%	100 %
Sub IR 3.2 Newborn screening (Da Nang)						
3.2.1 Number of	Measures the number of	Number	PDSP project, DOH	Total: 800	Total: 1,161	145 %

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
babies screened for hearing loss conducted by trained staff supported by PDSP. (Quarterly)	newborn screening babies supported by PDSP training program	<i>Disaggregated by gender, commune, ward, district</i>	records	Year 1&2: 0 Year 3: 800	Year 1&2: 0 Year 3: 1,161	
3.2.2 Number of babies/infants diagnosed for heart diseases conducted by trained staff supported by PDSP. (Quarterly)	Measures the number of newborn screening babies supported by PDSP training program	Number <i>Disaggregated by gender, commune, ward, district</i>	PDSP project, DOH records	Total: 480 Year 1&2: 0 Year 3: 480	Total: 603 Year 1&2: 0 Year 3: 603	125 %
3.2.3 Number of babies diagnosed/ treated for metabolism and hormonal diseases conducted by trained staff supported by PDSP. (Quarterly)	Measures the number of newborn screening babies supported by PDSP training program	Number <i>Disaggregated by gender, commune, ward, district</i>	PDSP project, DOH records	Total: 70 Year 1: 0 Year 2: 0 Year 3: 70	Total: 124 Year 1: 0 Year 2: 0 Year 3: 124	177 %
3.2.4 Number of women at antenatal unit of Children and Obstetric hospital receiving counseling on NBS conducted by trained staff supported by PDSP. (Quarterly)	Measures the number of reproductive age women who receive NBS counselling at the hospital	Number <i>Disaggregated by commune, ward, district</i>	PDSP project, DOH records	Total: 1,840 Year 1: 0 Year2: 800 Year 3: 1,040	Total: 2,341 Year 1: 0 Year2: 158 Year 3: 2,183	127 %
3.2.5 Number of women at postnatal unit of Children and Obstetric hospital receiving counseling on NBS conducted by trained staff	Measures the number of reproductive age women who receive NBS counselling at the hospital	Number <i>Disaggregated by, commune, ward, district</i>	PDSP project, DOH records	Total: 10,400 Year 1: 0 Year2: 800 Year 3: 9,600	Total: 12,404 Year 1: 0 Year2: 1,329 Year 3: 11,075	119 %

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
supported by PDSP. (Quarterly)						
3.2.6 Number of people who attended pre-marriage counseling club to receive information on NBS and PCC through talks/events. (Quarterly)	Measures the number of reproductive age female and male who receive NBS counselling in community	Number <i>Disaggregated by gender, commune, ward, district</i>	PDSP project, DOH records	Total: 2,500 Year 1: 0 Year 2: 760 Year 3: 1,740	Total: 5,400 Year 1: 0 Year 2: 1,091 Year 3: 4,309	216 %
3.2.7 Percentage of trained counselors observed who provide correct information (Quarterly)	Measures the performance of counselors who provide information on NBS with PDSP support	<i>Percentage</i>	PDSP project, DOH records	Year2: 70% Year 3: 70%	Year 2: 25 % Year 3: 84 %	120 %
3.2.8 Percentage of trained counselors observed who demonstrate good counseling skills (Quarterly)	Measures the performance of counsellors who demonstrate the good skills in communication with PDSP support	<i>Percentage</i>	PDSP project, DOH records	Year2: 70% Year 3: 70%	Year2: 25% Year 3: 68%	97 %
Sub IR 3.3 Pre-pregnancy (preconception) services (Da Nang)						
3.3.1 Number of nurse/doctor at commune or ward/district/city health clinics trained (and receive refresher trainings) in pre-pregnancy health counseling for women supported by PDSP (Annually)	Measures number of health workers trained in pre-pregnancy counseling for adolescents and women in prevention of birth defects.	Number <i>Disaggregated by commune or ward, gender of nurse or health worker</i>	PDSP project, DOH records	Total: 86 Year 1: 0 Year 2: 6 (ToT) Year 3: 80	Total: 130 Year 1: 0 Year 2: 6 (ToT) + 44 health educators Year 3: 80	151 %
3.3.2 Number of	Assumes strategy and	Number	PDSP project, DOH	Total: 2,500	Total: 2,122	85 %

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
women (including adolescent females) who receive pre-pregnancy counseling at service delivery point. (Quarterly)	action plan for providing pre-pregnancy counseling services for prevention of birth defects and other disabilities in Danang is developed by key stakeholders, following international best practices and including provisions high quality training in counseling and key messages	<i>Disaggregated by commune or ward, district, age group (Under age 20, ages 20 and over)</i>	records	Year 1: 0 Year 2: 150 Year 3: 2,340	Year 1: 0 Year 2: 232 Year 3: 1,890	
3.3.3 Number of women who received information from "group talks" at community in Da Nang	Measures the number of women including adolescent females who receive the communication program on Pre Conception Care	Number <i>Disaggregated by commune or ward, district, age group (Under age 20, ages 20 and over)</i>	PDSP project, DOH records	Total: 12,540 Year 1: 0 Year 2: 8,700 Year 3: 3,840	Total: 13,985 Year 1: 0 Year 2: 8,700 Year 3: 5,285	111 %
Sub IR 3.4 Cancer surveillance and prevention: this component was canceled						
IR 4: Expand implementation of the Program of Comprehensive and Integrated Support to People with Disabilities to selected areas.						
Sub IR 4.1 Assessments in Bien Hoa and Phu Cat for Expanded PWD Services						
4.1.1 Disability assessment tool, and assessment training and implementation plan finalized (Annually)	Measures assessment completion assessment and of implementation plan	Number <i>Disaggregated by geography</i>	PDSP project reports	Life of project target: 2 assessments and 2 PDSP Action Plans Year 1 : 2 Year 2 : 2 Year 3: 0	Two assessments and 2 PDSP Action Plans developed and completed	100 % The project already met 3 year target.
4.1.2 Baseline PWD assessments conducted in hot spots, resulting in comparable baseline	Measures assessment completion assessment and of implementation plan	Number <i>Disaggregated by geography</i>	PDSP project reports	Life of project target: 2 assessments and 2 PDSP Action Plans Year 1 : 2	Two assessments and 2 PDSP Action Plans developed and completed	100 % The project already met 3 year target.

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
indicators on disability prevalence, services, needs, and institutional and CBR support capacity in hot spots (Annually)				Year 2 : 2 Year 3: 0		
Sub IR 4.2 Direct Assistance Provided to PWDs in Dong Nai, Binh Dinh and other provinces						
Dong Nai (Bien Hoa city and Vinh Cuu district)						
4.2.1 Number of PWDs provided direct assistance support by PDSP in Dong Nai (Quarterly)	PWD identified in need of direct assistance by DOLISA/UNICEF 2011 survey	Number Disaggregated by gender, age group, type of disability and type of assistance needed and provided with DSP support	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System).	Total : 2,000 PWD individuals	Total: 2,528 Year 1 : 378 Year 2 : 1,514 Year 3: 636	126 %
4.2.2 Number of communes/wards with PWD social work, case management, and CBR activities supported by PDSP (Annually)	Measures the geographic coverage of CM work capacity for disability support services	Number <i>Disaggregated by city/province</i>	Project records	Dong Nai: 10	The updated achievement is 42/42 (in Bien Hoa and Vinh Cuu district of Dong Nai)	420 %
4.2.3 Number of SWs, case managers, CBR workers trained in Dong Nai (Annually)	Communal CMs and district, city CM supervisors are social workers, health workers and school teachers are an important segment of the disability support workforce.	Number <i>Disaggregated by city/province, district, commune, gender of trainee; and department/ organizational affiliation of Trainee (e.g., DOLISA,DOH, DOET, NGO)</i>	Monthly PDSP service provider beneficiary report, data from TAMIS	Life of Project Total: 100	The updated achievement Year 2&3: 132 in Dong Nai	132 %

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
4.2.4 Number of rehabilitation units at commune health clinic in Bien Hoa City and Vinh Cuu District provided equipment support by PDSP (Annually)	Measures the number of rehab clinics in Dong Nai receive rehab equipment form PDSP support	Number Disaggregated by type of support provided for each clinic	PDSP project records	Project life target was 2 Year 1: 0 Year 2: 2 Year3: 0	Total: 2 Year 1: 0 Year 2: 2 Year3: 0	100 % PDSP met the target by the end of year 2).
Binh Dinh (Phu Cat and Hoai An District)						
4.2.5 Number of social workers, case managers and CBR workers trained with DSP support (Phu Cat and Hoai An district) (Quarterly)	Communal CMs and district, city CM supervisors are social workers, health workers and school teachers are an important segment of the disability support workforce.	Number Disaggregated by type of provider trained	Monthly PDSP service provider beneficiary report, data from TAMIS	Total: 50 Year 1: NA Year 2 and 3: 50 (Phu Cat)	The updated achievement is 105 in Binh Dinh	210 %
4.2.6 Number of PWDs in Phu Cat and Hoai An receiving direct assistance from PDSP (Annually)	Measure the number of PWDs who receive PDSP support services that include a variety of services in social, health and education such as educational support, school enrollment for CWDs, assistive devices, livelihood/job, vocational training ...	Number Disaggregated by gender, age group, type of disability and type of direct assistance received by PWDs with DSP support	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System).	Total project target: 1,200 individuals	Total: 2,815 Year 1: 0 Year 2: 2,085 Year 3: 730	234 %
Other provinces (Tay Ninh, Quang Nam, Thai Binh, Binh Phuoc and Hue)						
4.2.7 Number of PWDs in other provinces receiving direct assistance from PDSP	Measure the number of PWDs who receive PDSP support services that include a variety of services in social, health	Number Disaggregated by gender, age group, type of disability and type of direct	PDSP PWD beneficiary report, data from TAMIS (Technical Administration	Total project life: 800 individuals	Total: 1,266 Year 1: NA Year 2: NA Year 3: 654 in Quang Nam	158 %

Indicator/ Frequency of Reporting	Description	Unit of Measure/ Disaggregation	Data Source/ Collection Method	Project Life Targets	Achievement to date	Notes & Difference between updated achievement and project life target
(Annually)	and education such as educational support, school enrollment for CWDs, assistive devices, livelihood/job, vocational training ...	assistance received by PWDs with DSP support	Management System).		164 in Tay Ninh 176 in Thua Thien Hue 199 in Thai Binh 73 in Binh Phuoc	
4.2.8 Number of PWDs in other provinces participating in the public events with PDSP support	Measure the number of PWDs who participate in the social event such as advocacy, sport events, disability day events, disability forum with government	Number	PDSP PWD beneficiary report, data from TAMIS (Technical Administration Management System).	Total project target: 200 individuals	Total: 0 Year 1: NA Year 2: NA Year 3: 493 (111 in Hue and 382 in Thai Binh)	246 %
Note: Depending on which activities are rolled out, based on needs of Dong Nai,, Binh Dinh and other provinces, indicators from Objectives 1–3 will be used to measure progress						



USAID
FROM THE AMERICAN PEOPLE



EXPANDING OPPORTUNITIES FOR PERSONS WITH DISABILITIES IN VIETNAM

USAID Persons with Disabilities Support Program

2012-2015

OVERVIEW



The USAID Program of Comprehensive and Integrated Support to Persons with Disabilities, also known as the Persons with Disabilities Support Program (PDSP), has worked in partnership with the Government of Vietnam and local partners over the past three years in order to expand and improve the support services available to persons with disabilities across eight provinces in Vietnam.

USAID PDSP and its partners have reached more than 12,600 persons with disabilities in both rural

and urban areas of Vietnam through the expansion of a new, multi-sectoral case management system designed to deliver comprehensive services to improve access to health, education and livelihood opportunities.

The project has also built the long-term capacity of more than 4,700 health providers, educators, employers and social workers to adequately address the needs of persons with disabilities in their communities.

This booklet captures some highlights of the work of USAID PDSP and its partners over the past three years improving opportunities for persons with disabilities in Vietnam to lead more independent and fulfilling lives.

The booklet first presents an overview of the project and its accomplishments. It then proceeds to share further details under the main components of the program:

- Improving and expanding case management for persons with disabilities
- Improving and expanding special and inclusive education for children with disabilities
- Expanding employment opportunities and vocational training for persons with disabilities

- Improving public health programs to prevent or reduce the severity of disabilities

The accomplishments of this program would not have been possible without the partnership and hard work of our government partners—the Department of Labor, Invalids and Social Affairs (**DOLISA**), the Department of Education and Training (**DOET**) and the Department of Health (**DOH**)—and non-government partners, as well as our dedicated project team.

Thank you and we hope to cross paths with you again in the future.

Mark Rasmuson
Chief of Party

Toan Bui
Deputy Chief of Party

This publication was produced by DAI and VNAH for the USAID Persons with Disabilities Support Program in Vietnam. The contents of this publication do not necessarily reflect the views of USAID or the U.S. Government.

PARTNERS & GRANTEEES

DANANG

Danang DPO and 7 district DPOs
University of Medical Technology and Pharmacy (DUMTP)
Hospital for Women and Children
Orthopedic and Rehabilitation Hospital
Rehabilitation Hospital/Sanitarium
District Health Centers in all 7 districts
Office of Population and Family Planning
Center for Health Communication and Education
Center for Reproductive Health
Dong A University
Danang Medical Association
Danang Association for Victims of Agent Orange (DAVA)
Association of Parents of Autistic Children
Association for Support to Disabled and Orphan (ASDHO)
Central Deaf Service
Vietnam Business Process Outsourcing (VBPO)
Freewheeling Life Coffee Shop
Tran Quoc Aloe Incense Making Group
Tam Thien Sewing Company
Thanh Ngoc Minh Embroidery Company
Red Cross Vocational Training Center
LED Binh Minh Ltd
Nguyen Dinh Chieu Special School
Tuong Lai Special School
Thanh Tam Special School
Social Work Service Center
Employment Service Center

BINH DINH

Quy Nhon University
Binh Dinh Blind Association
Nguyen Nga Center
Binh Dinh Red Cross Association
Farmers Association of Hoai An District
Phu Cat Study Promotion Association
Binh Dinh Provincial Association for Persons with Disability and Orphans
Hoai An District Health Center
Hy Vong Special School
Orthopedic and Rehabilitation Hospital
Binh Dinh Rehabilitation Hospital

DONG NAI

Dong Nai Association of Victims of Agent Orange/Dioxin (DONAVA)
Vinh Cuu Farmer's Association
Phu Hoa PWD Cooperative
School for Children with Disabilities
Center for Orphans and CWDs
Provincial Blind Association
Song Pho Center for Applied Psychology
Provincial Reproductive Health Center
Office of Population and Family Planning
Vinh Cuu District Health Center

QUANG NAM

Quang Nam Blind Association
Quang Nam DPO
Paddy's Jewel Center for Deaf and Hard of Hearing Children in Hoi An
Kianh Foundation

TAY NINH

Provincial Rehabilitation Hospital
 Association for Disabled & Orphans
 Center for Children with Hearing and
 Vision Impairment

BINH PHUOC

Binh Phuoc Association for Support to
 Disabled and Orphans
 Social Work Service Center

THUA-THIEN HUE

Hue DPO
 Centre for Social Sciences and Hu-
 manities (CSSH)
 Hue Central Hospital
 Hue Genetics Counseling Center

THAI BINH

Thai Binh Disabled Youth Association
 Thai Binh Blind Association
 Social Work Service Center

NATIONAL & INTERNATIONAL PARTNERS

MOLISA
 National Coordination Council on
 Disabilities
 Vietnam Public Health Association
 (VPHA)
 Vietnam Blind Association
 Institute of Population, Health and
 Development (PHAD)
 VietHealth
 Action to the Community Develop-
 ment Center (ACDC)
 Inclusive Development Action (IDEA)
 Children of Vietnam
 War Legacy Project
 University of Labor and Social Affairs
 Hanoi University of Education
 HCMC University of Education
 HCMC Orthopedic and Rehabilitation
 Hospital
 Hanoi Medical University
 Hanoi School of Public Health
 Vietnam Chamber of Commerce and
 Industries (VCCI)
 National Cancer Institute

This is a comprehensive list of partners and grantees **in addition to** the project's partnership with provincial Departments of Labor, Invalids and Social Affairs (**DOLISA**), Departments of Education and Training (**DOET**) and Departments of Health (**DOH**).

ACTIVITY MAP



THAI BINH: Limited assistance (DIS system development; disability policy training; disability hotline established; grants to local NGOs)

THUA THIEN-HUE: Limited assistance (grants to local NGOs to strengthen disability early detection and livelihoods)

DANANG: Comprehensive program of assistance (case management system; health care and medical devices; education and vocational training; employment opportunities and livelihoods assistance; housing improvements; public health system strengthening)

QUANG NAM: Focused program of assistance (expansion of DPO networks; expansion of DIS; legal and business start-up training for persons with disabilities; hotline established)

BINH DINH: Comprehensive program of assistance (case management training and system start-up in 2 districts; livestock and other livelihood support; corrective surgeries; rehab equipment)

BINH PHUOC: Limited assistance (DIS system development; disability policy training; hotline established; grants to local NGOs)

TAY NINH: Focused program of assistance (DIS development; policy training; small grants to local NGOs for direct assistance)

DONG NAI: Comprehensive program of assistance (case management system development in 2 districts; school-to-work program at School for Disabled; teacher training in inclusive education; livestock and other livelihoods development)

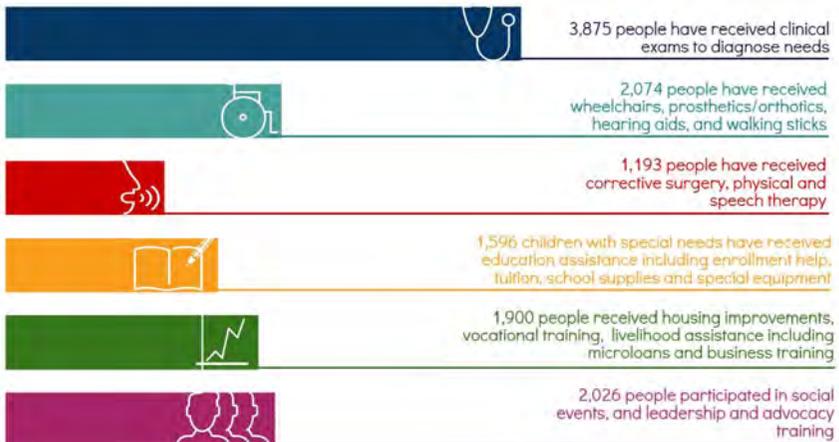
OVERVIEW

A LOOK AT THE NUMBERS: ASSISTANCE AND CAPACITY BUILDING

USAID PDSP has two primary components — a capacity building component for service providers and an assistance component to support service provision to persons with disabilities.

Presented here are some visuals illustrating the cumulative accomplishments of the program in both its service provision and capacity building.

Over 12,600 persons with disabilities in Vietnam reached:

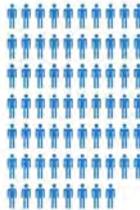


OVERVIEW

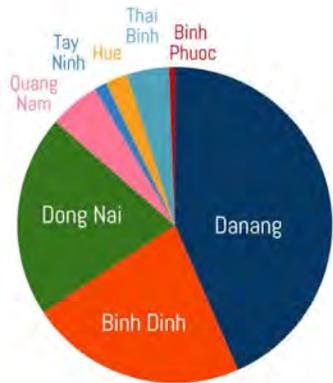
The program has provided direct assistance to...



5,834
women



6,830
men



People who have received assistance from USAID PDSP are located in Danang, Binh Dinh, Dong Nai, Quang Nam, Tay Ninh, Hue, Thai Binh and Binh Phuoc.

USAID PDSP has provided assistance (see opposite page) to over 12,000 persons with disabilities in Vietnam, surpassing its target of 10,000 people.

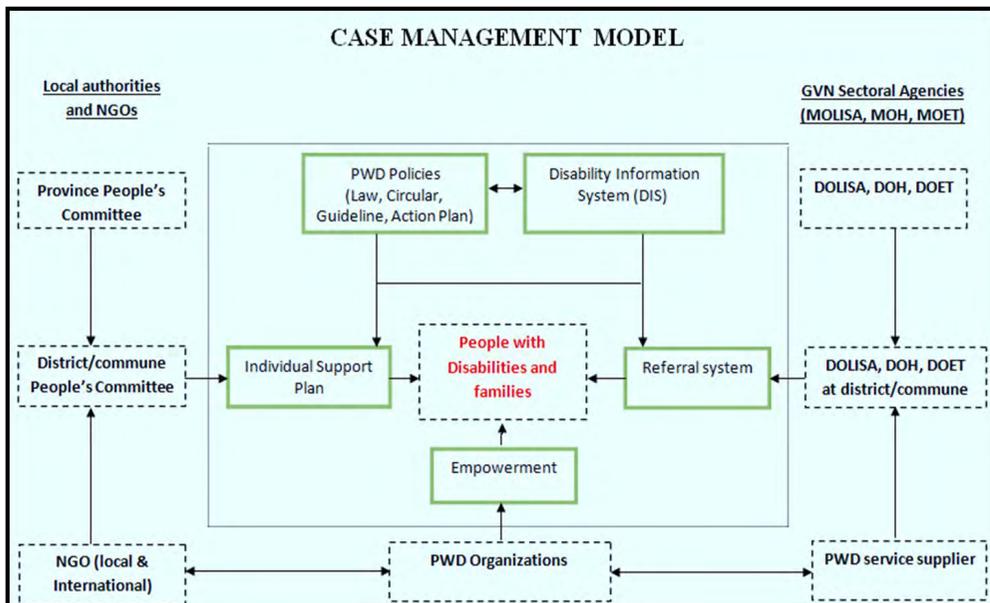
Target: 10,000 PWD
Reached: 12,664 PWD

The project has also provided training and other capacity building support to over 4,700 individuals and organizations that provide key services to persons with disabilities in their communities.

Target: 2,700 service providers
Trained: 4,700 service providers

CASE MANAGEMENT

PILOTING A SUCCESSFUL COMPREHENSIVE CASE MANAGEMENT SYSTEM FOR PERSONS WITH DISABILITIES



- A multidisciplinary case management system for PWDs has been adopted by Danang in all 7 districts, by Dong Nai in Bien Hoa city and one rural district, and by Binh Dinh in 2 rural districts.
- The CM system follows and is supported by MOLISA's

national Case Management Circular.

- It has received strong support from People's Committees at province, district, and commune levels.

BUILDING A SOLID FOUNDATION FOR CONTINUED PROFESSIONAL DEVELOPMENT IN CASE MANAGEMENT AND SERVICE TO PERSONS WITH DISABILITIES

- 10 social work master trainers trained (selected from among national university lecturers)
- 428 case managers and supervisors in Danang, Dong Nai, and Binh Dinh received training in social work, case management, referral, supervision, and gender equity/gender-based violence
- Limited case management capacity building also been extended to Quang Nam, Tay Ninh, Binh Phuoc, and Thai Binh.
- Social work training program established at Danang's Dong A university
- 15 social work lecturers at Dong A and other colleges trained by ULSA to teach social work and case management.



Counseling persons with disabilities on combatting gender-based violence was included in case management training workshops.

EXPANDING THE DISABILITY INFORMATION SYSTEM (DIS)



The Disability Information System (DIS) is one of the keys to successful continuation of case management and referral.

The DIS employs customizable, open-source software to enable case managers to collect data and issue comprehensive reports on service delivery to beneficiaries.

USAID PDSP has supported the establishment and use of the DIS in Binh Dinh, Dong Nai, Quang Nam, Thai Binh, Binh Phuoc, and Tay Ninh.

The DIS now contains over 270,000 personal data profiles of beneficiaries.

IMPROVING QUANTITY & QUALITY OF REHABILITATION SERVICES



Ann Maree Chapman, an Australian OT expert working with PDSP, trains rehabilitation technicians at the DOH on OT for the upper limb

PDSP provided extensive capacity building and infrastructure support for rehabilitation facilities and staff in Danang and other provinces.

- New curriculum at Danang University of Medical Technology and Pharmacy on Occupational Therapy (OT)
- New speech therapy unit established at Danang UMPT
- 12 doctors received long-term training in rehabilitation orientation in Hanoi
- 24 nurses received long-term training in rehabilitation transition in Danang
- 13 rehabilitation facilities developed or upgraded in Danang, Dong Nai and Binh Dinh
- Training for more than 700 service providers on occupational therapy, speech therapy, home-based rehab services, basic rehab techniques, and early detection of disabilities

ESTABLISHING NEW PEDIATRIC REHAB UNIT AT DANANG HWC

USAID PDSP provided equipment for physical, occupational and speech therapies to the Danang Hospital for Women and Children (HWC) to establish a new pediatric rehabilitation unit.

Additionally, the project supported one HWC physician to attend a six-month course on rehabilitation at the Hanoi Medical School and one nurse to participate in a six-month rehabilitation transition course at Danang UMPT.

As a result, HWC now provides speech therapy as well as early detection and intervention services, allowing children with rehabilitation needs to get specialized care at earlier stages in their physical and mental development.

The number of children receiving rehabilitation services and the types of services received at HWC following USAID PDSP support have increased significantly.



New pediatric rehab unit at Danang Hospital for Women and Children



Child receiving physical therapy

EXPANDING AND IMPROVING SPECIAL (SE) & INCLUSIVE EDUCATION (IE)

Main accomplishments include:

- 242 out-of-school children with disabilities enrolled
- 76 teachers obtained second B.A. degree in special education through HCMC University of Education
- 608 teachers received short course training on IE for children with disabilities
- 106 parents trained in skills to support their children's learning at home
- 1,058 children with disabilities received scholarships to cover uniforms and other supplies
- 24,000 leaflets distributed on rights of persons with disabilities and peer support
- 7 new classrooms upgraded to accommodate 77 previously out-of-school children in two special schools

RESOURCE ROOMS FOR SUPPLEMENTAL LEARNING



USAID PDSP supported the establishment of 13 resource rooms in primary schools with books, supplies, software and equipment to supplement learning for children with special needs.

Thus far, over 130 children with special needs have received one-on-one support at the established resource rooms.

NO CHILD LEFT BEHIND: IMPROVING INCLUSIVE EDUCATION OPPORTUNITIES FOR YOUTH IN VIETNAM

When Tho Nguyen was born ten years ago in Ngu Hanh Son District of Danang, doctors diagnosed him with cerebral palsy - a non-life threatening but permanent condition which can be challenging to manage. Multiple trips to the hospital in Tho's early years strained his family's already troublesome financial situation, making it difficult for his family to consider enrolling Tho in a local school for special needs students when he reached primary school age. Although Tho's physical and motor skills development had progressed through physical therapy, his parents did not think Tho could benefit from schooling due to his condition.

In June 2014, USAID PDSP worked with commune leadership and case managers from Danang's Department of Education to convince Tho's par-

ents to try enrolling him in nearby Pham Hong Thai primary school. The project covered Tho's school fees, meal allowance, uniforms, school bag and other school supplies. In addition, teachers trained by PDSP on inclusive education created a tailored individual education plan for Tho to support a positive learning environment for Tho. The new resource room the project also helped establish at the school has educational aids, toys, and special textbooks for Tho and other students with special needs to get supplementary tutoring outside class.

After a semester at Pham Hong Thai primary school, Tho has made significant progress, passing his first semester's tests on par with his peers.



Tho, second from right, playing with his new schoolmates.

“Tho has made a lot of progress. We are very proud of him. We thank PDSP for enabling us to reach more children with disabilities in the community.”

Ms. Minh, Vice Principal of Pham Hong Thai School

INCREASING EMPLOYMENT OPPORTUNITIES FOR PWDS



Tran Song The received training at an electrical repair shop

A total of 1096 persons with disabilities were employed through the assistance of USAID PDSP. This included:

- 352 persons with disabilities who were provided with vocational training that subsequently led to their employment, and
- 744 people who received support from PDSP for self-employment, including live-stock and small business groups



Dinh Thi Hong Thy received training at DAVA in professional sewing

In addition, 150 people were trained in life-job skills that will support their workplace integration.

An effective model used by USAID PDSP was *community-based vocational training* in which small businesses, such as electrical repair, provided on-the-job training to PWDs with the intention to hire them at the end of the training period.

VOCATIONAL TRAINING TO STRENGTHEN MARKETABLE SKILLS IN DANANG



This young woman was trained to assemble LED lights by the LED Binh Minh Company

USAID PDSP provided a range of vocational training opportunities to over 250 youth in Danang in partnership with:

- Vietnam Business Process Outsourcing (VBPO)
- Thanh Tam Vocational Training Center
- Tam Thien Sewing Company
- Thanh Ngoc Minh Embroidery Company
- Red Cross Vocational Training Center
- LED Binh Minh Company

These youth, who have physical or learning disabilities, received specialized training in tailoring, embroidery, baking, carpentry, massage therapy, data management and graphic design.

202 completed vocational training and received jobs,.

SUPPORTING SELF-EMPLOYMENT THROUGH LIVELIHOOD ASSISTANCE



Che Mau Nhan was one of the recipients of a cow in Danang's Hoa Vang district

- 744 people received livelihood support from PDSP for self-employment, including livestock and small business groups
- 398 households are generating income from raising cows, pigs, goats, and chickens supplied by USAID PDSP
- 198 people launched or expanded a small businesses using training and small amounts of capital from a grant provided by PDSP to the Disabled Persons Organization (DPO)

HOME IMPROVEMENTS MAKE A DIFFERENCE



Before and after Lai and her husband received assistance from PDSP

USAID PDSP helped 84 persons with disabilities make improvements to their homes, such as new roofs, toilets and kitchens.

These improvements aimed to not only improve the living conditions, but also to make the homes safer and easier to navigate for persons with disabilities.

Pictured above is one example of *before* and *after* photos. USAID PDSP supported Lai and her husband to construct a new home next to her husband's family home, where previously they lived under a blue plastic tarp.

OTHER ASSISTANCE

SUPPORTING THE HEARING IMPAIRED



USAID PDSP conducted hearing assessments and hearing aid check-ups for hearing impaired people, and provided their caregivers with communication skills training.

To date, the project has provided nearly 350 with hearing aids - allowing students to better hear their teachers, allowing parents to hear their children and allowing the employed to continue performing their jobs.

GREATER MOBILITY FOR VISUALLY IMPAIRED



USAID PDSP worked with the Danang Blind Association to provide walking sticks and navigation training to 300 people with visual impairments in Dong Nai province.

Walking sticks allow visually impaired people to move more safely and confidently in their homes, schools and workplaces.

MEETING THE NEED FOR ASSISTIVE DEVICES

USAID PDSP and DOLISA have provided wheelchairs, prosthetic and orthotic devices and hearing aids to 1,527 people in Danang, Thai Binh, Quang Nam and other provinces. Many of these devices—particularly prosthetic / orthotic devices—require custom fitting, making them prohibitively expensive for many people in Vietnam who need them.



HELPING CHILDREN WITH AUTISM

PDSP helped establish a therapy unit at the Association of Parents of Autistic Children in Danang, which serves 65 children with developmental disabilities on a regular basis. Three autism experts completed a comprehensive assessment of the children, including development of cognition, communication, behavior and language. This activity informed an intervention plan for each child.



STRENGTHENING DISABLED PERSONS ORGANIZATIONS



The Danang DPO organized this business start-up training for its members with a grant from PDSP and technical support from VCCI

USAID PDSP has strengthened Disabled People's Organizations (DPOs) and their programs in Danang, Binh Dinh, Quang Nam, Thai Binh, and Hue provinces. Project support has especially helped to expand DPO networks at the district and commune levels and to generate employment opportunities for their members. DPOs have supported business start-up trainings and helped more than 200 PWDs start a new business or expand an existing one.

Small grants to Thanh Khe and Hoa Vang district DPOs in Danang helped establish small businesses such as photocopy and printing services. Income generated has been used to encourage members to participate in community activities, enhancing the voice of PWDs within their local community.

STRENGTHENING PUBLIC HEALTH PROGRAMS



A woman is counseled about NBS for her new baby by a nurse at Danang HWC

USAID PDSP has strengthened three public health programs in order to prevent or reduce the severity of disabilities:

- Established a newborn screening (NBS) unit at the Danang Hospital for Women and Children
- Tested a pilot birth defects surveillance (BDS) system in Danang
- Initiated a pre-conception care (PCC) education program for youth in Danang and Dong Nai provinces

NEWBORN SCREENING (NBS) UNIT ESTABLISHED IN DANANG

PDSP supported training to establish a NBS unit at the Hospital for Women and Children, including:

- Four staff trained to screen newborns for hearing loss
- One trained in screening and ultrasound diagnosis for congenital heart disease, another in abdominal ultrasound
- Two trained in diagnosis and treatment of hormonal and metabolic disturbances
- 120 trained in counseling new and expectant parents of the importance of having newborns screened
- Three trained in management of NBS unit and ten trained in data entry into the database

As a result of this training:

- 1,161 newborns screened for hearing loss
- 2,242 newborns screened for congenital heart disease
- 2,341 pregnant women in third



Newborn screened for hearing loss

- trimester were counseled about newborn testing
- 12,404 post-partum women received counseling about testing newborns
- 124 infants received diagnosis and follow up on hormonal and metabolic diseases by a PDSP-trained doctor
- 603 infants received heart ultrasound diagnosis by a PDSP-trained doctor

A CASE OF METABOLIC DISTURBANCE SUCCESSFULLY TREATED

Six months after Lưu Thị Tuyết Nhi was born in April 2011 in Hoa Vang, she became very ill and was intermittently admitted to the Danang HWC in a coma, sometimes for two months. Nhi's parents were not financially able to transfer her to Hanoi or HCMC for treatment.

In November 2014, Nhi was re-admitted to the HWC and was cared for by Dr. Hoàng Nguyễn Thanh Thủy, a physician who received training from USAID PDSP on screening for metabolic disorders.

A blood test was sent to Shimane University School of Medicine in Japan, which allowed Nhi to be diagnosed with a metabolic disorder that could be treated with medicine available in Vietnam. After six days Nhi was discharged.



Since then, with a special diet and regular medication, Nhi has been healthy. Her parents have been delighted with her recovery and appreciate the treatment they received from Dr. Thủy.

SUCCESSFUL PRE-CONCEPTION CARE PROGRAMS INTEGRATED INTO ROUTINE REPRODUCTIVE HEALTH SERVICES



A woman receives counseling about pre-conception care

PCC refers to the examination and counseling for women prior to pregnancy to prevent birth defects in their children by encouraging preventative measures, such as rubella vaccinations and folic acid supplementation.

USAID PDSP supported the integration of PCC programs into routine reproductive health services in Danang and Bien Hoa. Results in Danang included:

- Establishing a team of six

PCC master trainers to be coordinated by DOH

- Developing PCC exam and counseling training materials for doctors and midwives; guidelines for PCC service delivery at city, district and commune levels; a checklist for monitoring PCC exams and counseling services
- Training a core group of 30 commune educators to provide education on PCC to communities

- 2,122 women received a PCC exam and counseling services
- 13,958 women of reproductive age joined PCC community talks

ESTABLISHING A PILOT BIRTH DEFECTS SURVEILLANCE SYSTEM

Birth defects surveillance can help improve public health by providing data on the prevalence and type of birth defects, help the development of strategies for their prevention and refer children to needed services.

USAID PDSP helped to establish and test a pilot birth defects surveillance system.

The pilot Birth Defects Surveillance (BDS) system was tested in two districts—Cam Le and Hai Chau—and the Danang Hospital for Women and Children.

306 clinicians from all Danang's districts were trained to identify

birth defects such as cleft lip and palate, and 14 staff were trained to manage birth defects data within the DOH system.

An independent assessment conducted in June 2015 found that the pilot system in Cam Le had been effectively established and a resultant increase in case detection, diagnosis and referral within the case management system thanks to the training for physicians, nurses and midwives.



Little Nguyen Chi Quoc was successfully treated at Danang HWC

CHALLENGES

The recent evaluation of USAID's disability programming over the past 10 years (by Vietnam Evaluation, Monitoring and Survey Services) identified one overall key challenge:

“Availability of adequate human and financial resources from GVN for implementation is the key issue for sustainability across all sectors.”

Specific challenges to the sustainability of PDSP's work noted by the evaluation team included uncertainty about the continuation of case management and of many direct health and medical services funded through PDSP (such as corrective surgeries) without stronger local government support.

PDSP agrees with the evaluation that stronger local government support for staff, training, systems development, and expansion is needed. But we are optimistic.

Case management now has clear national government policy guidance (from MOLISA Circular 1). Danang local government has already issued its own policies on case management and is building support for it in the new Disability Action Plan for 2016-20. This includes support for the current network of 3 case managers at the commune level (from DOLISA, DOET, and DOH) as well as funding for opening 30 cases per commune per year (i.e. $30 \times 56 = 1680$ cases). Danang and other provinces are also in the process of implementing circular 7 that will support the deployment of social workers at the commune level.

The PDSP team believes that while further adaptation and simplification may be needed, the “Danang model,” developed in close collaboration with our partners DOLISA, DOET, and DOH, is bringing major improvements to the services available to people with disabilities. And we are hopeful that, going forward, this important PDSP legacy will find support for continuation not only in Danang but in other provinces and at the national level, and be seen as an important and successful investment by USAID.



Disabled and non-disabled children played together at an event sponsored by PDSP on Vietnam Disability Day in April in Danang

Please stay in touch!

For contact details and more information about USAID PDSP,
please visit:

<https://www.usaid.gov/vietnam/persons-with-disabilities-support-program>





MỞ RỘNG CƠ HỘI CHO NGƯỜI KHUYẾT TẬT TẠI VIỆT NAM

Chương trình Hỗ trợ Người khuyết tật do USAID tài trợ
2012-2015

TỔNG QUAN



Chương trình toàn diện và tích hợp trợ giúp người khuyết tật, hay còn gọi là Chương trình Hỗ trợ Người khuyết tật (PDSP), do USAID tài trợ đã hợp tác với chính phủ Việt Nam và các đối tác địa phương trong hơn ba năm qua để mở rộng và cải thiện các dịch vụ hỗ trợ sẵn có cho người khuyết tật trên 8 tỉnh thành của Việt Nam.

Chương trình PDSP và các đối tác địa phương đã hỗ trợ cho hơn 12.500 người khuyết tật ở cả khu vực nông thôn lẫn thành thị của

Việt Nam thông qua việc mở rộng hệ thống quản lý trường hợp với phương pháp tiếp cận mới, phối hợp đa ngành, để cung cấp các dịch vụ toàn diện nhằm cải thiện sự tiếp cận của NKT với các cơ hội về y tế, giáo dục và sinh kế. Chương trình cũng đã nỗ lực xây dựng năng lực dài hạn cho hơn 4.700 nhân viên y tế, cán bộ giáo dục, nhà tuyển dụng và nhân viên công tác xã hội để đáp ứng đầy đủ các nhu cầu của người khuyết tật trong cộng đồng.

Sổ tay này tóm lược một số thành tựu nổi bật của chương trình PDSP trong hơn ba năm qua trong việc tăng cường các cơ hội cho người khuyết tật của Việt Nam, giúp họ có cuộc sống độc lập và mãn nguyện hơn.

Phần đầu tiên, sổ tay trình bày tổng quan về chương trình PDSP và các kết quả đạt được. Các phần sau chia sẻ thông tin chi tiết kết quả đạt được của các hợp phần chính của chương trình, gồm:

- Cải thiện và mở rộng quản lý trường học cho người khuyết tật
- Cải thiện và mở rộng giáo dục chuyên biệt và giáo dục hòa nhập cho trẻ khuyết tật

- Mở rộng cơ hội việc làm và đào tạo nghề cho người khuyết tật
- Cải thiện các chương trình y tế công cộng để ngăn ngừa hoặc giảm thiểu mức độ trầm trọng của khuyết tật

Các thành tựu của chương trình PDSP sẽ không đạt được nếu không có sự hợp tác và nỗ lực của đối tác địa phương — Sở Lao động, Thương binh và Xã hội (Sở LĐ, TB&XH), Sở Giáo dục và Đào tạo (Sở GD&ĐT) và Sở Y tế — và các đối tác là Tổ chức phi chính phủ cũng như nhóm nhân viên dự án tận tâm của chúng tôi.

Xin cảm ơn và chúng tôi hy vọng sẽ gặp lại các bạn trong tương lai.

GD chương trình PGĐ chương trình

Tài liệu này được xuất bản bởi DAI và VNAH cho chương trình hỗ trợ Người khuyết tật tại Việt Nam do USAID tài trợ. Nội dung của tài liệu này không nhất thiết phản ánh quan điểm của USAID hoặc của Chính phủ Hoa Kỳ.

ĐỐI TÁC THỰC HIỆN

ĐÀ NẴNG

Hội người khuyết tật Đà Nẵng và các
Chi hội quận huyện
Đại học Kỹ thuật Y - Dược Đà Nẵng
Bệnh viện Phụ sản - Nhi
Bệnh viện Chính hình và Phục hồi
chức năng
Bệnh viện Điều dưỡng và Phục hồi
chức năng
Chi cục Dân số và Kế hoạch hoá gia
đình
Trung tâm truyền thông giáo dục sức
khỏe
Trung tâm Sức khoẻ sinh sản
Đại học Đông Á
Hội Y Dược học Đà Nẵng
Hội nạn nhân chất độc da cam Đà
Nẵng
Hội phụ huynh trẻ tự kỉ Đà Nẵng
Hội bảo trợ người tàn tật và trẻ mồ côi
Đà Nẵng
Trung tâm giáo dục và hỗ trợ người
điếc Miền Trung
Công ty cổ phần VBPO
Quán Cà phê Freewheeling Life
Nhóm Hương trầm Trần Quốc
Công ty may Tâm Thiện
Công ty thêu Thanh Ngọc Minh
Trung tâm dạy nghề Hội chữ thập đỏ
Công ty cổ phần LED Bình Minh
Trường PT Chuyên biệt Nguyễn Đình
Chiểu
Trường Chuyên biệt Trương Lai
Trường Chuyên biệt Thanh Tâm
Trung tâm Y tế các quận huyện
Trung tâm Dịch vụ Công tác xã hội
Trung tâm giới thiệu việc làm

BÌNH ĐỊNH

Đại học Quy Nhơn
Hội người mù Bình Định
Trung tâm Nguyễn Nga
Hội Chữ thập đỏ Bình Định
Hội Nông dân huyện Hoài Ân
Hội Khuyến học huyện Phù Cát
Hội bảo trợ người tàn tật và trẻ mồ côi
tỉnh Bình Định
Trung tâm Y tế huyện Hoài Ân
Trường Chuyên biệt Hy Vọng
Bệnh viện Chính hình và Phục hồi chức
năng
Bệnh viện Phục hồi chức năng Bình
Định

ĐỒNG NAI

Hội nạn nhân chất độc da cam Đồng
Nai
Hội Nông dân huyện Vĩnh Cửu
Công ty Phú Hòa
Trường nuôi dạy trẻ khuyết tật tỉnh
Trung tâm nuôi dưỡng trẻ mồ côi và trẻ
khuyết tật tỉnh
Hội người mù tỉnh
Trung tâm Sông Phố
Trung tâm Sức khoẻ sinh sản tỉnh
Chi cục Dân số và Kế hoạch hoá gia
đình
Trung tâm Y tế huyện Vĩnh Cửu

QUẢNG NAM

ĐỐI TÁC THỰC HIỆN

Hội người mù tỉnh Quảng Nam
Hội người khuyết tật tỉnh Quảng Nam
Trung tâm PHCN khiếm thính cho trẻ em Paddy tại Hội An
Tổ chức Kianh

TÂY NINH

Bệnh viện Phục hồi chức năng tỉnh
Hội bảo trợ người tàn tật & trẻ mồ côi
Trung tâm trợ giúp trẻ khiếm thị và khiếm thính Tây Ninh

BÌNH PHƯỚC

Hội bảo trợ người tàn tật & trẻ mồ côi
Trung tâm Công tác xã hội

THỪA THIÊN - HUẾ

Hội người khuyết tật Huế
Trung tâm Khoa học xã hội và nhân văn Huế
Bệnh viện Trung ương Huế
Văn phòng tư vấn di truyền Huế

THÁI BÌNH

Hội thanh niên khuyết tật tỉnh Thái Bình
Hội người mù tỉnh Thái Bình
Trung tâm Công tác xã hội

ĐỐI TÁC QUỐC GIA & QUỐC TẾ

Bộ Lao động - Thương binh & Xã hội

Văn phòng điều phối quốc gia các hoạt động hỗ trợ người khuyết tật
Hội Y tế công cộng Việt Nam
Hội người mù Việt Nam
Viện Dân số, Sức khỏe và Phát triển
Trung tâm phát triển sức khỏe bền vững VietHealth
Trung tâm hành động vì sự phát triển cộng đồng
Trung tâm phát triển hoà nhập (IDEA)
Tổ chức Trẻ em Việt Nam
War Legacies Project
Đại học Lao động - Xã hội
Đại học Sư phạm Hà Nội
Đại học sư phạm Tp. Hồ Chí Minh
Bệnh viện Chính hình và Phục hồi chức năng Tp. Hồ Chí Minh
Đại học Y Hà Nội
Đại học Y tế công cộng
Phòng Thương mại và Công nghiệp Việt Nam
Viện Ung thư quốc gia

Đây là danh sách các đối tác và các đơn vị nhận tài trợ thực hiện chương trình. Ngoài ra, trong quá trình triển khai, chương trình còn phối hợp chặt chẽ với Sở Lao động, Thương binh và Xã hội, Sở Giáo dục và Đào tạo và Sở Y tế của các tỉnh thành.

THÁI BÌNH: Hỗ trợ hạn chế (Phát triển phần mềm quản lý thông tin NKT; tập huấn chính sách khuyết tật; lập đường dây nóng về khuyết tật; tài trợ cho các tổ chức phi chính phủ địa phương)

THỪA THIÊN HUỆ: Hỗ trợ hạn chế (tài trợ cho các tổ chức phi chính phủ địa phương để tăng cường phát hiện sớm khuyết tật và hỗ trợ sinh kế cho NKT)

ĐÀ NẴNG: Chương trình hỗ trợ toàn diện (Thiết lập và triển khai hệ thống quản lý trường hợp; cung cấp thiết bị y tế và chăm sóc sức khỏe; giáo dục và đào tạo nghề; tạo cơ hội việc làm và hỗ trợ sinh kế; cải thiện nhà ở; tăng cường hệ thống y tế công cộng)

QUẢNG NAM: Chương trình hỗ trợ tập trung (mở rộng mạng lưới Hội NKT; triển khai phần mềm khuyết tật; tập huấn luật NKT và khởi sự kinh doanh; thiết lập đường dây nóng về khuyết tật)

BÌNH ĐỊNH: Chương trình hỗ trợ toàn diện (tập huấn và xây dựng hệ thống quản lý trường hợp tại 2 huyện; hỗ trợ vật nuôi và sinh

BÌNH PHƯỚC: Hỗ trợ hạn chế (Phát triển phần mềm thông tin NKT; tập huấn chính sách khuyết tật; lập đường dây nóng về khuyết tật; tài trợ các tổ chức phi chính phủ địa phương)

TÂY NINH: Chương trình hỗ trợ tập trung (phát triển phần mềm quản lý NKT; tập huấn chính sách; tài trợ nhỏ cho các tổ chức phi

ĐỒNG NAI: Chương trình hỗ trợ toàn diện (phát triển hệ thống quản lý trường hợp tại Biên Hòa và 1 huyện; chương trình “Trường học đến việc làm” tại Trường nuôi dạy trẻ khuyết tật; tập huấn cho giáo viên về GD hoà nhập; hỗ trợ vật nuôi và các hỗ trợ phát triển

TỔNG QUAN

CÁC DỊCH VỤ HỖ TRỢ CHO NKT VÀ NÂNG CAO NĂNG LỰC CHO ĐỊA PHƯƠNG

Chương trình PDSP của USAID có hai hợp phần chính: tăng cường năng lực cho các nhà cung cấp dịch vụ và cung cấp dịch vụ hỗ trợ cho người khuyết tật.

Sau đây là một số minh họa bằng hình ảnh và số liệu về thành tựu đạt được của chương trình ở cả hai hợp phần nói trên.

Hơn 12.600 người khuyết tật tại Việt Nam được tiếp cận :



TỔNG QUAN

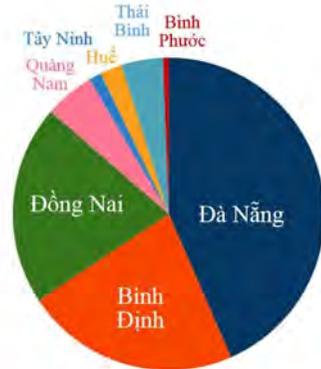
Chương trình đã cung cấp hỗ trợ trực tiếp cho...



5,834
đối tượng
nữ giới



6,830
đối tượng
nam giới



Người hưởng lợi từ chương trình trợ giúp người khuyết tật của USAID đến từ Đà Nẵng, Bình Định, Đồng Nai, Quảng Nam, Tây Ninh, Huế, Thái Bình và Bình Phước

Chương trình trợ giúp người khuyết tật của USAID đã cung cấp hỗ trợ (xem trang bên) cho hơn 12.000 người khuyết tật tại Việt Nam, vượt chỉ tiêu 10.000 người đã đặt ra.

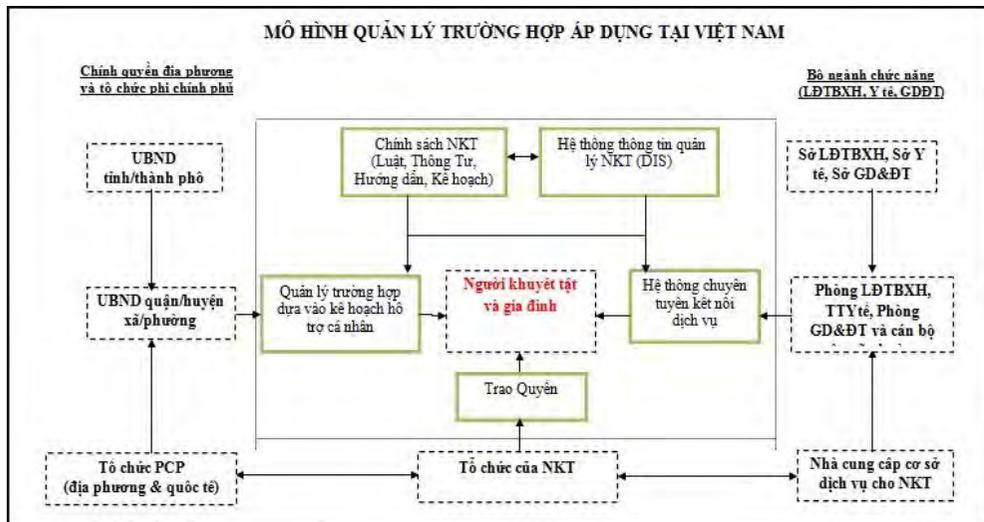
Mục tiêu: 10.000 NKT
Đạt được: 12.664 NKT

Dự án còn triển khai các buổi tập huấn và các hỗ trợ xây dựng năng lực khác cho hơn 4.700 cá nhân và tổ chức - đối tượng cung cấp các dịch vụ chính cho người khuyết tật tại cộng đồng.

Mục tiêu: 2.700 người cung cấp dịch vụ
Đã đào tạo: 4.700 người cung cấp dịch vụ

QUẢN LÝ TRƯỜNG HỢP

THỬ NGHIỆM THÀNH CÔNG HỆ THỐNG QUẢN LÝ TRƯỜNG HỢP TOÀN DIỆN CHO NGƯỜI KHUYẾT TẬT



- Hệ thống quản lý trường hợp đa ngành cho NKT đã được triển khai trên toàn bộ 7 quận huyện ở Đà Nẵng, trên 1 huyện và thành phố Biên Hòa ở Đồng Nai và 2 huyện ở Bình Định.
- Hệ thống quản lý trường hợp được thiết lập tại địa phương và được hướng dẫn bởi Thông tư quản lý trường hợp do Bộ LĐ, TB&XH ban hành.
- Mô hình quản lý trường hợp nhận được sự hỗ trợ tích cực của UBND các cấp: tỉnh thành phố, quận huyện và xã phường.

XÂY DỰNG NỀN TẢNG VỮNG CHẮC CHO VIỆC TIẾP TỤC PHÁT TRIỂN MÔ HÌNH QUẢN LÝ TRƯỜNG HỌC VÀ CUNG CẤP DỊCH VỤ CHO NGƯỜI KHUYẾT TẬT

- Hoàn tất tập huấn về công tác xã hội cho 10 giảng viên nguồn (chọn từ các giảng viên đại học quốc gia) đến các tỉnh: Quảng Nam, Tây Ninh, Bình Phước và Thái Bình.
- Xây dựng chương trình tập huấn công tác xã hội tại trường Đại học Đông Á - Đà Nẵng
- Trường Đại học Lao động Xã hội tập huấn về công tác xã hội và quản lý ca cho 15 giảng viên nguồn công tác xã hội của Trường Đại học Đông Á và các trường đại học khác.
- Tập huấn, xây dựng năng lực quản lý trường học cũng được mở rộng



Tư vấn cho người khuyết tật về phòng chống bạo lực giới được lồng ghép trong tập huấn quản lý trường học.

MỞ RỘNG HỆ THỐNG QUẢN LÝ THÔNG TIN NGƯỜI KHUYẾT TẬT (DIS)



Phần mềm quản lý thông tin người khuyết tật là một trong những yếu tố chính đem lại sự thành công trong việc tiếp tục triển khai quản lý trường học và chuyển tuyến dịch vụ cho NKT.

Hệ thống quản lý thông tin người khuyết tật (DIS) ứng dụng mã nguồn mở, được điều chỉnh phù hợp cho phép cán bộ quản lý ca nhập dữ liệu thu thập được và xuất ra các báo cáo toàn diện để cung cấp dịch vụ cho NKT.

Chương trình PDSP do USAID tài trợ đã hỗ trợ việc xây dựng và triển khai sử dụng phần mềm quản lý thông tin NKT tại Bình Định, Đồng Nai, Quảng Nam, Thái Bình, Bình Phước và Tây Ninh.

Hiện nay, phần mềm này đã lưu trữ dữ liệu của hơn 270.000 người khuyết tật hưởng lợi.

CẢI THIỆN CHẤT LƯỢNG VÀ SỐ LƯỢNG DỊCH VỤ Y TẾ CHO NGƯỜI KHUYẾT TẬT



Ann Maree Chapman, chuyên gia hoạt động trị liệu (HĐTL) người Úc cộng tác với PDSP, đang tiến hành tập huấn cho kỹ thuật viên PHCN tại Sở Y tế về HĐTL cho chi trên

Chương trình PDSP do USAID tài trợ đã hỗ trợ đáng kể cho địa phương về tập huấn phục hồi chức năng và cung cấp trang thiết bị cho các cơ sở phục hồi chức năng tại Đà Nẵng và các tỉnh khác.

- Làm việc với Trường Đại học Kỹ thuật Y Dược Đà Nẵng để Thiết kế mới chương trình giảng dạy Hoạt động trị liệu.
- Thành lập mới Phòng điều trị ngôn ngữ trị liệu tại Trường Đại học Kỹ thuật Y Dược Đà Nẵng
- 12 bác sĩ được tập huấn dài hạn về định hướng chuyên khoa PHCN tại Hà Nội
- 24 y tá được tập huấn dài hạn về chuyển tiếp PHCN tại Đà Nẵng
- Phát triển hoặc nâng cấp 13 cơ sở PHCN tại Đà Nẵng, Đồng Nai và Bình Định
- Tập huấn cho hơn 700 nhân viên y tế về hoạt động trị liệu, ngôn

HỖ TRỢ THÀNH LẬP MỚI KHOA PHỤC HỒI CHỨC NĂNG CHO TRẺ EM TẠI BỆNH VIỆN PHỤ SẢN - NHI ĐÀ NẴNG

Chương trình PDSP đã cung cấp các thiết bị về vật lý trị liệu, hoạt động trị liệu và ngôn ngữ trị liệu cho bệnh viện Phụ sản - Nhi Đà Nẵng để hỗ trợ thành lập mới khoa PHCN cho trẻ em tại đây.

Thêm vào đó, chương trình đã tài trợ cho một bác sĩ của BV Phụ sản - Nhi tham dự khóa học 6 tháng về PHCN tại Đại học Y Hà Nội và tài trợ một y tá của bệnh viện tham dự khóa học 6 tháng về chuyên tiếp PHCN tại ĐH Kỹ thuật Y Dược Đà Nẵng.

Nhờ đó, Bệnh viện Phụ Sản - Nhi đã cung cấp được dịch vụ điều trị ngôn ngữ trị liệu cũng như các dịch vụ khác như phát hiện sớm và can thiệp sớm, giúp trẻ khuyết tật nhận được các dịch vụ PHCN chuyên biệt ở giai đoạn phát triển sớm về thể chất và trí tuệ.

Số lượng trẻ em nhận được dịch vụ PHCN tại Bệnh viện Phụ Sản - Nhi tăng lên rõ rệt sau khi Bệnh viện nhận được hỗ trợ của chương trình PDSP.



Đơn vị PHCN nhi khoa mới tại Bệnh



Trẻ được tập vật lý trị liệu

MỞ RỘNG VÀ CẢI THIỆN CHƯƠNG TRÌNH GIÁO DỤC ĐẶC BIỆT VÀ GIÁO DỤC HÒA NHẬP

Các thành tựu chính bao gồm:

- 242 trẻ chưa đến trường được nhập học
- 76 giáo viên nhận bằng hai về GD đặc biệt tại trường ĐH Sư phạm TP. Hồ Chí Minh
- 608 GV được tập huấn ngắn hạn về GD hoà nhập cho trẻ khuyết tật (TKT).
- 106 cha mẹ TKT được tập huấn về các kỹ năng hỗ trợ con học tại nhà
- 1.058 TKT nhận học bổng gồm cả đồng phục và các dụng cụ học tập
- 24.000 tờ rơi được phát hành về quyền NKT và hỗ trợ bạn học là trẻ khuyết tật
- 7 phòng học mới tại hai trường chuyên biệt được nâng cấp để bảo đảm cơ sở vật chất cho 77 TKT được vận động đi học

PHÒNG NGUỒN ĐỂ HỖ TRỢ GIÁO DỤC



Chương trình PDSP của USAID đã hỗ trợ việc xây dựng 13 phòng nguồn tại các trường tiểu học với sách, văn phòng phẩm, phần mềm và thiết bị để hỗ trợ việc học tập cho trẻ cần giáo dục đặc biệt.

Nhờ đó, trên 130 trẻ cần giáo dục đặc biệt đã được nhận hỗ trợ tiết học cá nhân tại các phòng nguồn đã được xây dựng.

KHÔNG TRẺ EM NÀO BỊ BỎ QUÊN:

CẢI THIỆN CƠ HỘI GIÁO DỤC HÒA NHẬP CHO THANH THIẾU NIÊN TẠI VIỆT NAM

Mười năm trước, khi Nguyễn Thọ vừa chào đời tại quận Ngũ Hành Sơn, thành phố Đà Nẵng, bác sĩ đã chẩn đoán em bị bại não – căn bệnh tuy không gây nguy hiểm đến tính mạng nhưng để lại thương tật suốt đời và gây nhiều khó khăn trong sinh hoạt. Những lần chữa trị cho Thọ tại bệnh viện trong những năm đầu đời đã gây sức nặng rất lớn đối với tài chính vốn đã không khá giả của gia đình, khiến cha mẹ em phải tạm gác ý định đăng ký cho Thọ vào học tại một trường chuyên biệt tại địa phương khi em đủ tuổi đến trường. Mặc dù kỹ năng vận động và thể chất của Thọ đã có nhiều tiến triển thông qua các buổi tập vật lý trị liệu, cha mẹ Thọ vẫn không tin rằng em có thể đi học được như những bạn đồng lứa tuổi.

Tháng 6 năm 2014, chương trình Hỗ trợ người khuyết tật của USAID (PDSP) đã làm việc với lãnh đạo và

nhân viên quản lý ca địa phương để thuyết phục cho em được ghi danh theo học tại trường tiểu học Phạm Hồng Thái gần nhà. Dự án hỗ trợ Thọ tiền học phí, tiền ăn trưa, đồng phục, cặp sách và đồ dùng học tập. Ngoài ra, những giáo viên đã được đào tạo về giáo dục hòa nhập từ chương trình PDSP cũng đã lập kế hoạch giáo dục cá nhân phù hợp với Thọ để hỗ trợ tạo môi trường học tập tích cực cho em. Dự án còn trang bị một phòng nguồn mới cho trường với đầy đủ dụng cụ hỗ trợ học tập, đồ chơi và sách giáo khoa chuyên biệt dành cho Thọ cũng như các học sinh có nhu cầu đặc biệt khác, giúp các em có thêm những giờ học phụ đạo bổ ích.

Sau một học kỳ theo học tại trường Tiểu học Phạm Hồng Thái, Thọ đã có những tiến bộ đáng kể và đã vượt qua bài kiểm tra học kỳ đầu tiên với kết quả học tập tương đương với các bạn cùng lớp.



Thọ (thứ hai từ phải sang) đang chơi đùa cùng các bạn

“Thọ đã tiến bộ rất nhiều. Chúng tôi rất tự hào về em. Cảm ơn chương trình PDSPP đã giúp đỡ chúng tôi tiếp cận được nhiều hơn với trẻ khuyết tật tại địa phương.”

**Cô giáo Vinh, Phó Hiệu trưởng trường Tiểu học
Phạm Hồng Thái**

TĂNG CƯỜNG CƠ HỘI VIỆC LÀM CHO NKT



Anh Trần Song Thế đang học nghề tại một cửa hàng sửa chữa điện



kỹ Chị Đinh Thị Hồng Thủy học may chuyên nghiệp tại Hội nạn nhân chất độc da cam Đà Nẵng

Tổng cộng 1.096 người khuyết tật có việc làm nhờ sự hỗ trợ của chương trình PDSP, trong đó:

- 352 người khuyết tật được đào tạo nghề và có việc làm sau khi đào tạo
- 744 người khuyết tật nhận được hỗ trợ từ PDSP để phát triển tự doanh, bao gồm cung cấp vật nuôi và hỗ trợ các nhóm kinh doanh nhỏ

Ngoài ra, hơn 150 người khuyết tật được đào tạo kỹ năng sống và

năng làm việc, giúp họ nhanh chóng hòa nhập với môi trường làm việc.

Một mô hình hiệu quả khác mà dự án PDSP đã sử dụng là đào tạo nghề dựa vào cộng đồng. Trong mô hình này, các doanh nghiệp nhỏ tổ chức đào tạo nghề cho NKT ngay tại nơi làm việc và NKT sẽ được nhận vào làm việc cho các doanh nghiệp này sau khi khóa đào tạo nghề kết thúc.

TỔ CHỨC ĐÀO TẠO NGHỀ NHẪM TĂNG CƯỜNG KỸ NĂNG TẠO SẢN PHẨM CẠNH TRANH



Một bạn nữ được đào tạo lắp ráp đèn LED tại công ty LED Bình Minh

Dự án PDSP do USAID tài trợ đào tạo nghề đa dạng cho hơn 250 thanh niên khuyết tật tại Đà Nẵng trong khuôn khổ hợp tác với:

- Công ty VBPO
- Trung tâm đào tạo nghề Thanh Tâm
- Công ty may Tâm Thiện
- Trung tâm đào tạo nghề Thanh Ngọc Minh
- Trung tâm đào tạo nghề của Hội chữ thập đỏ
- Công ty LED Bình Minh

Những học viên khuyết tật về thể chất hoặc khó khăn về học được đào tạo chuyên biệt về nghề may, thêu, làm bánh, mộc, mát-xa trị liệu, quản lý dữ liệu và thiết kế đồ họa.

Hơn 202 NKT hoàn thành các khóa đào tạo nghề và có việc làm thích hợp sau đào tạo nghề.

HỖ TRỢ SINH KẾ

GIÚP NKT TỰ DOANH THÔNG QUA HỖ TRỢ SINH KẾ



Anh Chế Mậu Nhân được dự án hỗ trợ cấp bò tại huyện Hòa Vang, Đà Nẵng

- 744 NKT nhận được hỗ trợ sinh kế của chương trình để phát triển tự doanh, gồm phát triển chăn nuôi và kinh doanh nhóm.
- 398 hộ tại Đà Nẵng có thêm thu nhập từ chăn nuôi bò, lợn, dê và gà do chương trình PDSP và Sở LĐ, TB&XH hỗ trợ.
- 198 NKT được hỗ trợ khởi nghiệp hoặc mở rộng kinh doanh từ nguồn cung cấp vốn nhỏ của chương trình thông qua Hội Người khuyết tật.

SỬA CHỮA NHÀ Ở CHO NKT MANG LẠI SỰ KHÁC BIỆT



Trước và sau khi chị Lài cùng chồng nhận được hỗ trợ từ PDSP

Chương trình PDSP đã hỗ trợ 84 NKT sửa chữa, nâng cấp nhà ở như lợp mái nhà mới, xây dựng và nâng cấp nhà vệ sinh, nhà bếp.

Việc sửa chữa nhà ở này không chỉ cải thiện điều kiện sống mà còn giúp NKT có căn nhà an toàn và thuận tiện hơn trong việc di chuyển.

Bức ảnh trên đây là ví dụ về trước và sau khi sửa chữa nhà. Chương trình PDSP đã hỗ trợ chị Lài cùng chồng xây dựng một ngôi nhà mới bên cạnh nhà của gia đình chồng. Nơi này trước đây chị Lài và gia đình phải sống tạm bợ dưới tấm bạt nhựa màu xanh.

CÁC HỖ TRỢ KHÁC

HỖ TRỢ NGƯỜI KHIẾM THÍNH



Chương trình PDSP đã tiến hành đo thính lực và kiểm tra máy trợ thính cho người khiếm thính, cũng như tập huấn kỹ năng giao tiếp cho người chăm sóc.

Đến nay, dự án đã cấp hơn 350 máy trợ thính – giúp học sinh nghe bài giảng tốt hơn, giúp cha mẹ nghe được giọng nói của con và giúp người lao động khiếm thính hoàn thành tốt công việc.

HỖ TRỢ NGƯỜI KHIẾM THỊ TRONG VIỆC DI CHUYỂN



Dự án PDSP đã làm việc với Hội người mù địa phương để cấp gậy chỉ đường và tập huấn định hướng di chuyển cho hơn 300 người khiếm thị tại Đồng Nai.

Gậy chỉ đường giúp người khiếm thị di chuyển an toàn và thuận tiện hơn trong nhà, tại trường học và tại nơi làm việc.

ĐÁP ỨNG NHU CẦU NKT VỀ DỤNG CỤ TRỢ GIÚP

Chương trình PDSP cùng với Sở LĐ, TB&XH đã cấp xe lăn, chân tay giả, dụng cụ chỉnh hình và máy trợ thính cho 1.527 NKT tại Đà Nẵng, Thái Bình, Quảng Nam và các tỉnh thành khác. Đa số các dụng cụ và thiết bị này, đặc biệt là tay chân giả, cần phải điều chỉnh phù hợp với người sử dụng, nên giá thành khá cao so với thu nhập của NKT tại Việt Nam.



GIÚP ĐỠ TRẺ TỰ KỶ

PDSP đã giúp thành lập đơn vị trị liệu tại Hội Phụ huynh trẻ tự kỷ Đà Nẵng, phục vụ nhu cầu điều trị thường xuyên của 65 trẻ khuyết tật phát triển. Các chuyên gia về tự kỷ đã hoàn thành đánh giá toàn diện cho trẻ tại đơn vị điều trị, bao gồm đánh giá về phát triển nhận thức, giao tiếp, hành vi và ngôn ngữ. Hoạt động này giúp Hội xây dựng kế hoạch can thiệp cụ thể cho từng trẻ.



HỖ TRỢ HỘI NKT

TĂNG CƯỜNG PHÁT TRIỂN HỘI NKT VÀ CÁC CHƯƠNG TRÌNH



Hội NKT Đà Nẵng tổ chức buổi tập huấn khởi sự kinh doanh cho các thành viên với viện trợ từ PDSP và hỗ trợ kỹ thuật từ VCCI

Chương trình PDSP đã nâng cao năng lực cho các Hội NKT và các chương trình của Hội tại Đà Nẵng, Bình Định, Quảng Nam, Thái Bình và Thừa Thiên Huế. Đặc biệt, hỗ trợ của dự án đã giúp mở rộng mạng lưới hội NKT cấp quận huyện và xã phường, cũng như tạo nhiều cơ hội việc làm cho thành viên Hội. Các Hội NKT đã tiến hành tập huấn khởi sự kinh doanh và giúp hơn 200 NKT khởi sự kinh doanh hoặc mở rộng quy mô kinh doanh sẵn có.

Các khoản tài trợ nhỏ cho Hội NKT quận Thanh Khê và huyện Hòa Vang tại Đà Nẵng đã giúp thành lập các cơ sở kinh doanh nhỏ như dịch vụ photocopy và in ấn. Thu nhập tạo ra từ kinh doanh được dùng để khuyến khích Hội viên tham gia các hoạt động cộng đồng, nâng cao tiếng nói của NKT

TĂNG CƯỜNG CÁC CHƯƠNG TRÌNH Y TẾ CÔNG CỘNG



Một phụ nữ đang được y tá của bệnh viện Phụ sản - Nhi tư vấn về sàng lọc sơ sinh cho trẻ

Chương trình PDSP đã hỗ trợ tăng cường ba chương trình y tế công cộng nhằm ngăn ngừa hoặc giảm nhẹ mức độ khuyết tật:

- Thành lập đơn vị sàng lọc sơ sinh (SLSS) tại Bệnh viện Phụ Sản - Nhi Đà Nẵng
- Thử nghiệm hệ thống giám sát dị tật bẩm sinh thí điểm tại Đà Nẵng
- Khởi động chương trình giáo dục, chăm sóc sức khỏe trước khi mang thai cho thanh thiếu niên tại Đà Nẵng và Đồng Nai

ĐƠN VỊ SÀNG LỌC SƠ SINH ĐƯỢC THÀNH LẬP TẠI BV PHỤ SẢN-NHI ĐÀ NẴNG

Chương trình PDSP đã hỗ trợ tập huấn cho nhân viên y tế để thành lập đơn vị Sàng lọc sơ sinh (SLSS) tại Bệnh viện Phụ sản-Nhi Đà Nẵng:

- Bốn nhân viên y tế được tập huấn về sàng lọc trẻ sơ sinh mất thính lực
- Một nhân viên được tập huấn về sàng lọc và siêu âm chẩn đoán bệnh tim bẩm sinh, một nhân viên khác được tập huấn về siêu âm bụng
- Hai nhân viên được tập huấn về chẩn đoán và điều trị các bệnh rối loạn nội tiết và chuyển hóa
- 120 nhân viên được tập huấn về tư vấn cho các cặp đôi mới kết hôn hoặc sắp sinh con về tầm quan trọng của SLSS
- Ba nhân viên y tế được tập huấn về quản lý đơn vị SLSS và mười nhân viên được tập huấn về nhập dữ liệu

Kết quả đạt được của chương trình tập huấn này như sau:



Trẻ sơ sinh được sàng lọc về mất thính lực

- 1.161 trẻ được sàng lọc về mất thính lực
- 2.242 trẻ được sàng lọc bệnh tim bẩm sinh
- 2.341 sản phụ ở giai đoạn cuối của thai kỳ được tư vấn về xét nghiệm sơ sinh
- 12.404 phụ nữ sau khi sinh được tư vấn về xét nghiệm trẻ sơ sinh
- 124 trẻ sơ sinh được chẩn đoán và được theo dõi các bệnh nội tiết và chuyển hóa bởi bác sĩ được đào tạo từ chương trình PDSP
- 26• 603 trẻ sơ sinh được siêu âm chẩn đoán tim/ sức khỏe bởi bác sĩ được

MỘT TRƯỜNG HỢP RỐI LOẠN CHUYỂN HÓA ĐƯỢC ĐIỀU TRỊ THÀNH CÔNG

Lưu Thị Tuyết Nhi sinh vào tháng 4 năm 2011 tại Hòa Vang. Lúc sáu tháng tuổi, em bị ốm nặng và thường được chuyển vào Bệnh viện Phụ sản – Nhi trong tình trạng hôn mê, đôi khi kéo dài đến hai tháng. Bố mẹ Nhi không đủ điều kiện tài chính để đưa em đi Hà Nội hay Thành phố Hồ Chí Minh để chữa bệnh.

Tháng 11 năm 2014, Nhi lại phải nhập viện tại bệnh viện Phụ sản-Nhi và được bác sĩ Hoàng Nguyễn Thanh Thủy chăm sóc. Bác sĩ Thủy từng được tập huấn về sàng lọc các bệnh rối loạn chuyển hóa từ chương trình PDSP.

Kết quả xét nghiệm máu của em được chuyển đến Đại học Y khoa Shimane tại Nhật Bản, nhờ đó các bác sĩ chẩn đoán em bị rối loạn chuyển hóa và căn bệnh này hoàn toàn có thể chữa trị



được ở Việt Nam. Sáu ngày sau, em đã có thể xuất viện. Từ đó đến nay, nhờ có chế độ ăn đặc biệt và dùng thuốc thường xuyên, Nhi đã khỏe mạnh trở lại. Cha mẹ em rất vui mừng với kết quả hồi phục của em cũng như rất biết ơn sự điều trị tận tình của bác sĩ Thủy.

CHƯƠNG TRÌNH CHĂM SÓC SỨC KHỎE TRƯỚC KHI MANG THAI ĐƯỢC LỒNG GHÉP THÀNH CÔNG VÀO CÁC DỊCH VỤ CHĂM SÓC SỨC KHỎE SINH SẢN ĐỊNH KỲ



Một phụ nữ được tư vấn về chăm sóc sức khỏe trước khi mang thai

Chăm sóc sức khỏe trước khi mang thai (CSSKTKMT) là khám và tư vấn cho phụ nữ trước khi mang thai nhằm ngăn ngừa các khuyết tật bẩm sinh ở trẻ thông qua việc khuyến khích thực hiện các biện pháp phòng ngừa, như tiêm vắc xin phòng rubella và bổ sung axit folic.

Chương trình PDSP hỗ trợ việc lồng ghép các chương trình CSSKTKMT vào các dịch vụ chăm sóc sức khỏe sinh sản định kỳ tại Đà Nẵng và thành phố Biên Hòa, bao gồm:

- Thành lập một nhóm gồm 6 giảng viên CSSKTKMT
- Xây dựng tài liệu tập huấn về khám và tư vấn về CSSKTKMT cho bác sĩ và hộ lý; soạn thảo các hướng dẫn về cung cấp dịch vụ CSSKTKMT tại cấp thành phố, quận huyện và xã phường; xây dựng bảng kiểm giám sát việc triển khai các dịch vụ khám và tư vấn CSSKTKMT
- Tập huấn một nhóm nòng cốt gồm 30 giảng viên cấp xã

phường để tiến hành truyền thông giáo dục sức khỏe về CSSKTKMT cho cộng đồng

- 2.122 phụ nữ được khám và tư vấn về CSSKTKMT
- 13.958 phụ nữ trong độ tuổi sinh sản tham gia các buổi nói chuyện tại cộng đồng về CSSKTKMT

THÀNH LẬP HỆ THỐNG GIÁM SÁT DỊ TẬT BẨM SINH THÍ ĐIỂM

Hệ thống giám sát dị tật bẩm sinh có thể giúp cải thiện hệ thống y tế công cộng bằng việc xác định tỷ lệ các dạng dị tật bẩm sinh, giúp xây dựng chiến lược dự phòng dị tật bẩm sinh và chuyển trẻ dị tật bẩm sinh đến các dịch vụ y tế cần thiết.

Chương trình PDSP đã hỗ trợ xây dựng và thử nghiệm một hệ thống giám sát dị tật bẩm sinh thí điểm tại Đà Nẵng.

Hệ thống giám sát dị tật bẩm sinh thí điểm đã được thử nghiệm tại hai quận Cẩm Lệ và Hải Châu và tại Bệnh viện Phụ

sản – Nhi Đà Nẵng.

Hơn 300 bác sỹ lâm sàng tại các quận huyện trên địa bàn thành phố Đà Nẵng đã được tập huấn phát hiện dị tật bẩm sinh và 14 nhân viên y tế được tập huấn về lưu trữ dữ liệu kết quả về dị tật bẩm sinh.

Một đánh giá độc lập tiến hành vào tháng 6 năm 2015 đã chỉ ra rằng hệ thống thí điểm tại Cẩm Lệ đã được thành lập hiệu quả, gia tăng số lượng các trường hợp dị tật bẩm sinh được phát hiện, chẩn đoán và chuyển tuyến trong hệ thống quản



Bé Nguyễn Chí Quốc được điều trị thành công tại Bệnh viện Phụ sản - Nhi Đà Nẵng

THÁCH THỨC

Một báo cáo đánh giá gần đây về chương trình trợ giúp Người khuyết tật của USAID trong 10 năm qua do đơn vị tư vấn đánh giá độc lập tiến hành đã chỉ ra thách thức chính như sau:

“Vấn đề cốt lõi quyết định tính bền vững trong tất cả các lĩnh vực là các cơ quan địa phương cần có đầy đủ nguồn lực về tài chính và nhân lực trong quá trình thực hiện chương trình hỗ trợ cho người khuyết tật.”

Các thách thức cụ thể đối với sự bền vững của chương trình PDSP được nhóm đánh giá chỉ ra là: nếu không có hỗ trợ mạnh hơn từ phía chính quyền địa phương thì khó đảm bảo được tính liên tục của việc triển khai quản lý ca và các dịch vụ hỗ trợ trực tiếp về y tế cho người khuyết tật đã được PDSP tài trợ (như phẫu thuật chỉnh hình).

Chương trình PDSP đồng ý với nhận định rằng cần có nhiều hỗ trợ hơn từ chính quyền địa phương cho việc huy động nhân lực, đào tạo cán bộ, phát triển hệ thống và mở rộng chương trình. Tuy nhiên chúng tôi vẫn rất lạc quan.

Hiện tại, chúng ta đã có hướng dẫn cụ thể của nhà nước về công tác quản lý ca (Thông tư 01 của Bộ LĐ, TB&XH). Thành phố Đà Nẵng đã ban hành chính sách riêng về quản lý ca và đang triển khai hỗ trợ cho lĩnh vực này lồng ghép trong Kế hoạch Trợ giúp Người khuyết tật giai đoạn mới 2016-2020, bao gồm hỗ trợ cho mạng lưới quản lý ca cấp cơ sở trong 3 ngành (LĐ, TB&XH, Giáo dục và Y tế) cũng như hỗ trợ mở mới 30 ca một năm tại mỗi xã phường (tức $30 \times 56 = 1680$ ca). Đà Nẵng và các tỉnh thành khác cũng đang trong quá trình thực hiện Thông tư 07 về việc triển khai nghề công tác xã hội tại tuyến xã phường

Đội ngũ cán bộ chương trình PDSP tin rằng dù vẫn cần nhiều điều chỉnh và tinh giản cho phù hợp, nhưng “mô hình Đà Nẵng” – một mô hình được xây dựng nhờ sự hợp tác chặt chẽ với Sở LĐ, TB&XH, Sở GD&ĐT và Sở Y tế - đang mang lại nhiều kết quả khả quan trong việc cung cấp dịch vụ cho người khuyết tật. Và chúng tôi hy vọng rằng, trong tương lai, các thành tựu quan trọng đạt được của chương trình PDSP sẽ tìm được nguồn hỗ trợ để tiếp tục duy trì và nhân rộng, không chỉ ở Đà Nẵng, mà còn ở các tỉnh thành khác và



Trẻ em vui chơi hòa nhập tại sự kiện do PDSP tài trợ nhân ngày Người khuyết tật Việt Nam trong tháng 4 tại Đà Nẵng

Liên lạc với chúng tôi!

Để biết thêm thông tin và chi tiết liên hệ chương trình PDSP do USAID tài trợ, vui lòng truy cập:

<https://www.usaid.gov/vietnam/persons-with-disabilities-support-program>



PDSP GRANTS HIGHLIGHTS

Selected Activities under PDSP's Small Grants Program

November 2015

Action to the Community
Development Center



A legal counseling session



Training for DPO officials



ACDC staff & experts participated at the legal counseling event

“Strengthening the Role and Voice of PWD through PWD Associations in Quang Nam”

Project location: Dai Loc, Dien Ban, Hoi An - Quang

Results

- ⇒ 88 PWD received direct legal counseling
- ⇒ 30 DPO officials were trained on policy advocacy for PWD
- ⇒ 4 new DPO at commune level and 1 DPO at district level were established



Sustainable Health
Development Center

“Support on Home-based Interventions for Children with Disabilities in Thua Thien Hue”

Project location: Huong Tra - Thua Thien Hue

Results

- ◆ 32 parents' awareness increased on early interventions for children under 6
- ◆ 21 parents trained on rehabilitation techniques for children with mobility difficulties
- ◆ 22 parents trained on special education for children with mental disabilities
- ◆ 8 assistive devices provided to CWD

“I can't attend the training”



Thu during VietHealth assessment

That was the answer from Thu's mother when asked to attend a training class. Her home was far away, nobody could help carry her child to the training, and previous rehab therapies did not show any progress at all.

Thu, a 6-year-old girl from Huong Van commune, Huong Tra town, suffers severe CP and was unable to sit. Her muscles and joints were weak. But Thu's mother decided to bring her to the VietHealth training. And after 1 month following the home-based rehabilitation methods she learned, Thu was able to sit in a chair and her muscles and joints showed positive development.



PDSP GRANTS HIGHLIGHTS

Selected Activities under PDSP's Small Grants Program

November 2015

Center for Children with Hearing and Vision Impairment of Tay Ninh



Enrolled children having a meal



Hearing test



Children learning at the center

"Support School Enrollment for Children with Autism and Developmental Disabilities"

Project location: Hoa Thanh - Tay Ninh

Results

- ⇒ Upgraded 2 class rooms to accommodate developmentally impaired children
- ⇒ Enrolled & provided school supplies and meal allowances for 20 developmentally impaired children
- ⇒ Provided monthly salaries for 4 additional teachers/caregivers to facilitate these new



Nguyen Nga Center

"Improve Economic Conditions of PWD through Vocational Training and Job Placement"

Project location: Quy Nhon - Binh Dinh

Results

- ◆ Provided vocational training and job placement for 20 PWD
- ◆ 16 PWD learned to play traditional musical instruments
- ◆ 3 PWD completed vocational training
- ◆ 3 PWD received support for business start-up
- ◆ 1 PWD was assisted with job placement



Nguyen Nga Center's traditional music



Mr. Quy at his new motorbike repair shop



PDSP GRANTS HIGHLIGHTS

Selected Activities under PDSP's Small Grants Program

November 2015

Inclusive Development Action



Participants of "My story" event

Publications of "My story" event

"Capacity Building and Promoting Enforcement of Rights of Women with Disabilities in Thai Binh"

Project location: Thai Binh

Results

- ⇒ Through a 2-month story composing competition, "My story", many PWDs' touching lives and stories were revealed. This increased awareness and understanding from the local society about the issues disabled persons face.
- ⇒ Organized a photography class, "Photo Voice," for disabled women. The exhibition of photos taken by these women was highly attended and appreciated.



Results of "Photo Voice" photography class

Institute of Population, Health and Development

"Enhance Access to Jobs and Vocational Training for PWD through Community Collaborator Model"

Project location: Quynh Phu - Thai Binh

Results

- ◆ Surveyed & mapped available vocational training centers and business companies for PWD in Quynh Phu district
- ◆ Developed handbook guiding the employment for PWD
- ◆ Set up communication channels for employment including a bulletin board on employment for PWDs at each commune
- ◆ 200 collaborators were trained on job counselling skills
- ◆ Developed banners / leaflets to advocate for PWD employment
- ◆ 100 PWDs received vocational trainings and job
- ◆ 900 PWDs received job counselling by social workers



Jobs for PWDs



Job counselling skills training



Employment bulletin board



PDSP GRANTS HIGHLIGHTS

Selected Activities under PDSP's Small Grants Program

November 2015

Da Nang Disabled Person Organization



“Capacity building, DPO establishment & Jobs for PWD in Da Nang”

Project location: Da Nang city

Results (after 2 years)

- ⇒ 6 new district DPOs established
- ⇒ 63 PWD received job placements
- ⇒ 17 PWD received livelihood support
- ⇒ 27 PWD accessed loans from social policy bank
- ⇒ 73 PWD received support to expand a business
- ⇒ 8 training courses on leadership, management, and job counseling conducted (255 participants)



Vocational & Job counselling skills training



DPO establishment session

Job for PWD



Da Nang Association of Victims of Agent Orange/Dioxin

“Improving Capacity of DAVA’s Centers to Meet the Needs of Children with Disabilities”

Project location: Da Nang city

Results

- ⇒ 20 teachers & 5 DAVA staff from two centers improved knowledge & skills on special education, vocational training, and rehabilitation
- ⇒ Improved facilities & provided equipment for the two centers
- ⇒ 90 students were assessed & received individual learning plan
- ⇒ 12 PWD and their families received support for community integration



CWD learning at a center



Vocational training



CWD receiving Tet gifts



PDSP GRANTS HIGHLIGHTS

Selected Activities under PDSP's Small Grants Program

November 2015

Quy Nhon University



Early detection activity at a nursery



Workshop on early detection



Parents' club: Exchanging knowledge



A regular meeting of volunteers group

“Capacity Building at the Counseling & Early Intervention Center for CWD”

Project location: Quy Nhon - Binh Dinh

Results

- ⇒ 262 CWD detected; 50 received interventions
- ⇒ 2,013 parents and 309 nursery teachers participated in communication activities
- ⇒ 23,000 handbooks on early intervention delivered
- ⇒ 70 parents, 138 nursery teachers, and 95 volunteers received trainings on screening tools, early detection, early intervention, and assessment skills
- ⇒ Established parent clubs and volunteer groups



Quang Nam Disabled Persons Organization

“Capacity Building & Deployment of Livelihood Activities for PWD in Quang Nam”

Project location: Quang Nam province

Results

- ◆ 58 PWD trained on business start-up skills
- ◆ 40 PWD received support for livelihood development
- ◆ 12 PWD received support to expand a business
- ◆ 2 district DPOs received office equipment
- ◆ 7 new DPO at commune level were established



Training on Business Start-up skills for PWD



Office equipment for new DPOs



Livelihood assistance beneficiary



SUMMARY OF PDSP GRANTEES

No.	Organization	Field of Activity	Duration (Month)	Funding Amount
A. Fixed Obligation Grants (FOGs)				
1	Binh Dinh Blind Association	IT training and livelihood support	5	\$9,903
2	Binh Dinh Red Cross Association	Surgery & Rehabilitation	4	\$8,734
3	Danang UMTF	Education in Rehabilitation	16	\$37,341
4	Danang DOET	Education & Services to CWDs	12	\$75,870
5	Danang DOET	Education & Services to CWDs	5	\$15,240
6	Danang DOH	Quality & Access to Rehabilitation and Specialized Services	12	\$76,961
7	Danang DOH	Pre-Conception Care services	18	\$66,766
8	Danang DOH	Birth Defects Surveillance	12	\$26,453
9	Danang DOLISA	Case Management & Specialized Services	16	\$258,986
10	Danang DOLISA	Case Management & Specialized Services	4	\$109,376
11	Danang Hospital for Women & Children	Newborn Screening Services	7	\$22,662
12	Danang Office of Population and Family Planning	Newborn Screening Services	7	\$22,462
13	Dong A University	Develop social workers and trainers on social work	16	\$79,405
14	Dong Nai Association for Agent Orange Victims	Livelihood Activities for PWD	4	\$24,692
15	Farmers Association of Hoai An District	Vocational training, employment and livelihood development	5	\$22,976
16	Nguyen Nga Center	Vocational training & employment	4	\$11,766
17	Phu Cat Study Promotion Association	Vocational training, employment & livelihood development	5	\$22,943
18	Quang Nam Blind Association	Vocational & Skill Trainings for Blind People	5	\$10,748
19	Quy Nhon University	Capacity building in early detection and intervention for CWD	10	\$36,029
20	Tay Ninh Association for Disabled & Orphans	Improve income for PWD	6	\$23,675
21	Vinh Cuu Farmer's Association	Vocational training, employment and livelihood development	6	\$22,359

B. Standard Grants				
No.	Organization	Field of Activity	Duration (Month)	Funding Amount
1	Binh Dinh Association for Disabled & Orphans	Capacity building, vocational training & jobs for PWD	10	\$20,735
2	Binh Phuoc Association for Disabled & Orphans	Capacity building, Vocational training & Livelihoods for PWD	8	\$24,277
3	Danang Association for Disabled & Orphans	Vocational training, employment & livelihood for PWD	6	\$11,126
4	Danang DPO	Capacity building & Economic	18	\$24,627
5	Danang Association of Parents of Autistic Children	Rehabilitation & Enhance Knowledge for Children & Parents	11	\$8,400

No.	Organization	Field of Activity	Duration (Month)	Funding Amount
6	DAVA	Capacity building for two centers to meet the needs of CWD	7	\$19,936
7	Hue DPO	Capacity building & improve livelihoods of PWD	7	\$24,812
8	Kianh Foundation	Strengthening a Model for Special Education	8	\$13,970
9	Quang Nam DPO	Leadership training, employment	7	\$22,268
10	Thai Binh Disabled Youth Association	Employment, livelihood, capacity building training	7	\$24,497

C. 2015 Competitive Small Grants Program (FOGs)				
No.	Organization	Field of Activity	Duration (Month)	Funding Amount
1	Action to the Community Development Center	Strengthening the role and voice of PWD	6	\$22,827
2	Central Deaf Services	Sign Language Training	6	\$8,791
3	Centre for Social Sciences and Humanities (CSSH)	Livelihoods for PWD through a Market Approach	5	\$22,508
4	Children of Vietnam	Hope System of Care for CWD	8	\$24,481
5	Inclusive Development Action (IDEA)	Business Skills & Promoting Rights of Disabled Women	8	\$24,588
6	Institute of Population, Health and Development	Jobs And Vocational Training For PWD	6	\$24,998
7	VietHealth	Home-based intervention	8	\$24,847
8	Vietnam Blind Association	Leadership training & forming clubs for the blind women	6	\$24,451
9	War Legacies Project	Bringing Health Care Home	8	\$24,999

D. In-Kind Grants				
No.	Organization	Field of Activity	Duration (Month)	Funding Amount
1	Binh Dinh Blind Association	IT training & livelihood support	5	\$5,425
2	Danang Association for Disabled & Orphans	Vocational training, employment and livelihood for PWD	7	\$1,913
3	Danang DOET	Resource rooms	4	\$10,806
4	Danang DOLISA	Rehabilitation equipment/tools	3	\$5,686
5	Danang Association of Parents of Autistic Children	Rehabilitation & Enhance Knowledge for Children & Parents	9	\$7,375
6	Danang VBPO	Provision of desktop computers	4	\$4,524
7	DAVA	Capacity building for two centers	7	\$7,572
8	Thanh Khe District DPO	Photocopy & typing services	6	\$4,157
9	Hoa Vang District DPO	Capacity building & employment	4	\$3,532
10	Hoai An DOET	Establish Resource Room	4	\$2,263
11	Hy Vong Special School	Establish Resource Room	4	\$2,195
12	Phu Cat DOET	Establish Resource Room	4	\$2,209
13	Phu Hoa Cooperative	Plastic Waste Processor		\$9,488
14	Quang Nam DPO	Provision of equipment for DPO	6	\$3,051
15	Tam Thien Sewing Company	Provision of industrial sewing machines	6	\$4,640
16	Center for Hearing & Vision Impaired Children	Provision of equipment for the Center in Tay Ninh	3	\$4,041
17	Freewheeling Life Coffee	Set up a coffee shop	7	\$2,351
18	Tran Quoc Aloe Incense Making Group	Set up an aloe-incense making business	4	\$1,409

KẾT QUẢ NỔI BẬT TRONG CHƯƠNG TRÌNH VIỆN TRỢ NHỎ

Một số hoạt động trong Chương trình Viện trợ nhỏ của PDSP

Tháng 11/2015

Trung tâm Hành động vì sự
phát triển Cộng đồng



Một buổi tư vấn pháp luật



Tập huấn cho cán bộ Hội NKT

“Nâng cao vai trò và tiếng nói của NKT thông qua các tổ chức của NKT tại tỉnh Quảng Nam”

Địa điểm: Đại Lộc, Điện Bàn, Hội An - Quảng Nam

Kết quả:

- ⇒ 88 NKT được tư vấn pháp luật trực tiếp
- ⇒ 30 cán bộ Hội NKT được tập huấn về vận động chính sách cho người khuyết tật
- ⇒ 4 Hội NKT cấp xã phường và 1 Hội NKT cấp quận huyện được thành lập



Các cán bộ và chuyên gia của ACDC tham gia chương trình tư vấn pháp luật



Trung tâm Phát triển Sức
khỏe Bền vững

“Hỗ trợ can thiệp tại nhà cho trẻ khuyết tật tại tỉnh Thừa Thiên Huế”

Địa điểm: Hương Trà - Thừa Thiên Huế

Kết quả:

- ◆ tăng cường nhận thức của 32 phụ huynh về can thiệp sớm cho trẻ dưới 6 tuổi
- ◆ 21 phụ huynh được tập huấn về các kỹ thuật PHCN cho trẻ gặp khó khăn trong vận động
- ◆ 22 phụ huynh được tập huấn về giáo dục đặc biệt cho trẻ khuyết tật tâm thần
- ◆ 8 dụng cụ trợ giúp được cấp phát cho trẻ KT

“Tôi không thể tham gia tập huấn”



Thu khi VietHealth thăm khám tại nhà

Đây chính là câu trả lời của mẹ Thu khi được yêu cầu tham gia lớp tập huấn. Nhà chị quá xa, lại không có ai giúp chị đưa con đi tập huấn, những liệu pháp phục hồi chức năng trước đây cũng không mang lại kết quả khả quan.

Thu năm nay 6 tuổi, hiện đang sống tại xã Hương Vân, thị xã Hương Trà. Em bị bại não rất nặng và không thể ngồi dậy được. Các cơ và khớp của em rất yếu. Nhưng mẹ Thu đã quyết định đưa em đến các buổi tập huấn của VietHealth. Sau 1 tháng áp dụng các kỹ thuật phục hồi chức năng tại nhà đã được học, Thu đã có thể ngồi trên ghế, các cơ và khớp của em đã có những chuyển biến rất tích cực.

KẾT QUẢ NỔI BẬT TRONG CHƯƠNG TRÌNH VIỆN TRỢ NHỎ

Một số hoạt động trong Chương trình Viện trợ nhỏ của PDSP

Tháng 11/2015

Trung tâm Nuôi dạy trẻ khuyết thị & khiếm thính tỉnh Tây Ninh



Bữa ăn của các em tại trung tâm



Bài kiểm tra thính lực



Buổi học của các em tại trung tâm

“Hỗ trợ vận động ra lớp cho trẻ tự kỷ và chậm phát triển”

Địa điểm: Hòa Thành - Tây Ninh

Kết quả

- ⇒ Nâng cấp 2 phòng học cho phù hợp với trẻ chậm phát triển
- ⇒ Ghi danh, hỗ trợ đồ dùng học tập và tiền ăn cho 20 trẻ chậm phát triển
- ⇒ Hỗ trợ lương hàng tháng cho 4 giáo viên/ người chăm sóc mới cho các trường hợp đăng kí thêm này



Trung tâm Nguyễn Nga

“Cải thiện điều kiện kinh tế của NKT thông qua các hoạt động dạy nghề và giới thiệu việc làm”

Địa điểm: Quy Nhơn - Bình Định

Kết quả:

- ◆ Tổ chức dạy nghề và giới thiệu việc làm cho 20 người khuyết tật
- ◆ 3 người khuyết tật được nhận hỗ trợ khởi nghiệp
- ◆ 16 người khuyết tật học chơi nhạc cụ dân tộc



Tiết mục biểu diễn nhạc cụ truyền thống của trung tâm Nguyễn Nga



Anh Quý tại tiệm sửa xe mới của mình

KẾT QUẢ NỔI BẬT TRONG CHƯƠNG TRÌNH VIỆN TRỢ NHỎ

Một số hoạt động trong Chương trình Viện trợ nhỏ của PDSP

Tháng 11/2015

Trung tâm Hành động vì sự
phát triển hòa nhập



Người tham gia chương trình “Câu chuyện của tôi”

Ấn phẩm chương trình “Câu chuyện của tôi”

“Xây dựng năng lực và thúc đẩy thực thi quyền của
phụ nữ khuyết tật tại tỉnh Thái Bình”

Địa điểm: Thái Bình

Kết quả

- ⇒ Qua 2 tháng của cuộc thi sáng tác “Câu chuyện của tôi”, nhiều mảnh đời và câu chuyện xúc động của người khuyết tật đã được kể lại. Điều này giúp nâng cao nhận thức và sự cảm thông của cộng đồng địa phương về những khó khăn mà người khuyết tật phải đối mặt.
- ⇒ Tổ chức lớp học nhiếp ảnh “Photo Voice” cho phụ nữ khuyết tật. Triển lãm ảnh do các học viên thực hiện đã nhận được nhiều sự chú ý và khen ngợi.



Kết quả của lớp học nhiếp ảnh “Photo Voice”

PHAD Viện Dân số, Sức khỏe và Phát triển

“Nâng cao việc tiếp cận dịch vụ việc làm và dạy nghề cho NKT thông qua Mô hình Cộng tác viên cộng đồng”

Địa điểm: Quỳnh Phụ - Thái Bình

Kết quả

- ◆ Điều tra & xác định các trung tâm dạy nghề và các doanh nghiệp cho NKT trên địa bàn
- ◆ Xây dựng sổ tay hướng dẫn việc làm cho người khuyết tật
- ◆ Thành lập các kênh truyền thông về việc làm, bao gồm bảng tin việc làm cho người khuyết tật tại các xã
- ◆ 200 cộng tác viên được tập huấn về kỹ năng tư vấn việc làm
- ◆ Làm băng rôn/ tờ rơi vận động tuyển dụng người khuyết tật
- ◆ 100 người khuyết tật được dạy nghề và có việc làm
- ◆ 900 người khuyết tật được nhân viên xã hội tư vấn việc làm



Công việc cho người khuyết tật



Tập huấn kỹ năng tư vấn việc làm



Bảng tin việc làm

KẾT QUẢ NỔI BẬT TRONG CHƯƠNG TRÌNH VIỆN TRỢ NHỎ

Một số hoạt động trong Chương trình Viện trợ nhỏ của PDSP

Tháng 11/2015

Hội Người khuyết tật Đà Nẵng



“Xây dựng năng lực, thành lập Hội NKT & việc làm cho người khuyết tật tại Đà Nẵng”

Địa điểm: Thành phố Đà Nẵng

Kết quả (sau 2 năm):

- ⇒ 6 chi hội NKT cấp quận huyện được thành lập
- ⇒ 63 NKT được giới thiệu việc làm
- ⇒ 17 NKT nhận được hỗ trợ sinh kế
- ⇒ 27 NKT được tiếp cận vốn vay từ ngân hàng chính sách xã hội
- ⇒ 73 NKT được hỗ trợ mở rộng kinh doanh
- ⇒ 8 khóa tập huấn về kỹ năng lãnh đạo, quản lý và tư vấn việc làm được triển khai (255 người tham dự)



Tập huấn kỹ năng tư vấn việc làm & dạy nghề



Đại hội thành lập Hội NKT

Nghề nghiệp cho người khuyết tật



Hội Nạn nhân Chất độc Màu da cam Đà Nẵng

“Cải thiện năng lực cho các trung tâm thuộc Hội nạn nhân chất độc màu da cam Đà Nẵng nhằm đáp ứng nhu cầu của trẻ khuyết tật”

Địa điểm: Thành phố Đà Nẵng

Kết quả

- ⇒ 20 giáo viên và 5 cán bộ Hội từ hai trung tâm được nâng cao kiến thức và kỹ năng về giáo dục đặc biệt, dạy nghề và phục hồi chức năng
- ⇒ Cải thiện cơ sở vật chất và cung cấp thiết bị cho hai trung tâm
- ⇒ 90 học sinh được đánh giá và được xây dựng kế hoạch học tập cá nhân
- ⇒ 12 người khuyết tật và gia đình được hỗ trợ để hòa nhập cộng đồng



Buổi học của trẻ khuyết tật tại trung tâm



Dạy nghề



Tặng quà Tết cho trẻ em khuyết tật

KẾT QUẢ NỔI BẬT TRONG CHƯƠNG TRÌNH VIỆN TRỢ NHỎ

Một số hoạt động trong Chương trình Viện trợ nhỏ của PDSP

Tháng 11/2015

Trường Đại Học Quy Nhơn



Hoạt động phát hiện sớm tại trường



Hội thảo về Phát hiện sớm



Hội phụ huynh: Trao đổi kiến thức



Họp mặt định kỳ của tình nguyện viên

“Nâng cao năng lực tại Trung tâm Tư vấn và Can thiệp sớm cho trẻ khuyết tật”

Địa điểm: Quy Nhơn - Bình Định

Kết quả

- ⇒ 262 trẻ khuyết tật được phát hiện sớm; 50 trường hợp được can thiệp
- ⇒ 2.013 phụ huynh và 309 giáo viên mầm non tham gia các hoạt động truyền thông
- ⇒ 23.000 số tay về can thiệp sớm được phát hành
- ⇒ 70 phụ huynh, 138 giáo viên mầm non và 95 tình nguyện viên được tập huấn về công cụ sàng lọc, phát hiện sớm, can thiệp sớm và kĩ năng đánh giá
- ⇒ Hội phụ huynh và các nhóm tình nguyện được thành lập



Hội Người khuyết tật tỉnh Quảng Nam

“Xây dựng năng lực và triển khai các hoạt động sinh kế cho NKT tại Quảng Nam”

Địa điểm: tỉnh Quảng Nam

Kết quả:

- ◆ 58 NKT được tập huấn kỹ năng khởi sự kinh doanh
- ◆ 40 NKT được hỗ trợ phát triển sinh kế
- ◆ 12 NKT được hỗ trợ mở rộng kinh doanh
- ◆ 2 chi hội NKT được cấp thiết bị văn phòng
- ◆ 7 chi hội NKT cấp xã phường được thành lập



Tập huấn kỹ năng khởi sự kinh doanh cho NKT



Cấp thiết bị văn phòng cho chi hội mới



Người nhận hỗ trợ sinh kế

TÓM TẮT CÁC ĐỐI TÁC VIỆN TRỢ CỦA PDSP

STT	Tên tổ chức	Lĩnh vực hoạt động	Thời gian (Tháng)	Kinh phí viện trợ
A. Viện trợ theo hình thức cam kết công việc				
1	Hội người mù Bình Định	Đào tạo CNTT và hỗ trợ sinh kế	5	\$9,903
2	Hội Chữ thập đỏ Bình Định	Phẫu thuật và Phục hồi chức năng	4	\$8,734
3	Đại học kỹ thuật Y dược Đà Nẵng	Giảng dạy Phục hồi chức năng	16	\$37,341
4	Sở GD&ĐT Đà Nẵng	Giáo dục và Dịch vụ cho Trẻ KT	12	\$75,870
5	Sở GD&ĐT Đà Nẵng	Giáo dục và Dịch vụ cho Trẻ KT	5	\$15,240
6	Sở Y tế Đà Nẵng	Cải thiện chất lượng & tiếp cận dịch vụ chuyên biệt & PHCN	12	\$76,961
7	Sở Y tế Đà Nẵng	Dịch vụ chăm sóc sức khỏe trước khi mang thai	18	\$66,766
8	Sở Y tế Đà Nẵng	Giám sát dị tật bẩm sinh	12	\$26,453
9	Sở LĐ,TB&XH Đà Nẵng	Quản lý ca & Dịch vụ chuyên biệt	16	\$258,986
10	Sở LĐ,TB&XH Đà Nẵng	Quản lý ca & Dịch vụ chuyên biệt	4	\$109,376
11	Bệnh viện Phụ sản - Nhi Đà Nẵng	Dịch vụ sàng lọc sơ sinh	7	\$22,662
12	Chi cục Dân số - Kế hoạch hóa Gia đình Đà Nẵng	Dịch vụ sàng lọc sơ sinh	7	\$22,462
13	Trường Đại học Đông Á	Phát triển đội ngũ nhân viên và giảng viên công tác xã hội	16	\$79,405
14	Hội nạn nhân chất độc da cam tỉnh Đồng Nai	Hoạt động sinh kế cho người khuyết tật	4	\$24,692
15	Hội Nông dân huyện Hoài Ân	Dạy nghề, giới thiệu việc làm và phát triển sinh kế	5	\$22,976
16	Trung tâm Nguyễn Nga	Dạy nghề & việc làm	4	\$11,766
17	Hội Khuyến học huyện Phù Cát	Dạy nghề, giới thiệu việc làm và phát triển sinh kế	5	\$22,943
18	Hội Người mù tỉnh Quảng Nam	Dạy nghề và Đào tạo kỹ năng cho người mù	5	\$10,748
19	Đại Học Quy Nhơn	Xây dựng năng lực về phát hiện và can thiệp sớm đối với Trẻ KT	10	\$36,029
20	Hội Bảo trợ người tàn tật và Trẻ mồ côi Tây Ninh	Tăng thu nhập cho người khuyết tật	6	\$23,675
21	Hội Nông dân huyện Vĩnh Cửu	Dạy nghề, giới thiệu việc làm và phát triển sinh kế	6	\$22,359

B. Viện trợ tiêu chuẩn				
1	Hội Bảo trợ người tàn tật & trẻ mồ côi Bình Định	Xây dựng năng lực, đào tạo nghề & giới thiệu việc làm cho NKT	10	\$20,735
2	Hội Bảo trợ người tàn tật, trẻ mồ côi và bệnh nhân nghèo Bình Phước	Xây dựng năng lực, đào tạo nghề và hỗ trợ sinh kế cho người khuyết tật	8	\$24,277
3	Hội Bảo trợ Người tàn tật & Trẻ mồ côi Đà Nẵng	Dạy nghề, việc làm và sinh kế cho người khuyết tật	6	\$11,126
4	Hội Người khuyết tật thành phố Đà Nẵng	Xây dựng năng lực và cải thiện kinh tế	18	\$24,627
5	Chi hội Gia đình Người tự kỷ thành phố Đà Nẵng	Phục hồi chức năng và nâng cao kiến thức cho trẻ và cha mẹ	11	\$8,400
6	Hội nạn nhân chất độc màu da cam Đà Nẵng	Xây dựng năng lực cho 2 T.Tâm để đáp ứng nhu cầu của trẻ KT	7	\$19,936

STT	Tên tổ chức	Lĩnh vực hoạt động	Thời gian (Tháng)	Kinh phí viện trợ
7	Hội Người khuyết tật tỉnh Thừa Thiên Huế	Xây dựng năng lực và cải thiện sinh kế cho người khuyết tật	7	\$24,812
8	Trung tâm Kiên Anh	Mô hình giáo dục đặc biệt	8	\$13,970
9	Hội Người khuyết tật tỉnh Quảng Nam	Tập huấn kỹ năng lãnh đạo, việc làm	7	\$22,268
10	Câu lạc bộ Thanh niên Khuyết tật tỉnh Thái Bình	Việc làm, sinh kế và tập huấn xây dựng năng lực	7	\$24,497

C. Viện trợ nhỏ mang tính cạnh tranh trong năm 2015				
1	Trung tâm Hành động vì Sự phát triển cộng đồng	Tăng cường vai trò và tiếng nói của người khuyết tật	6	\$22,827
2	Trung tâm Giáo dục và Hỗ trợ người điếc miền Trung	Tập huấn ngôn ngữ kí hiệu	6	\$8,791
3	Trung tâm Khoa học xã hội và nhân văn Huế	Sinh kế cho người khuyết tật thông qua Tiếp cận thị trường	5	\$22,508
4	Tổ chức Trẻ em Việt Nam	Hệ thống chăm sóc hy vọng cho trẻ khuyết tật	8	\$24,481
5	Trung tâm hành động vì sự phát triển hòa nhập	Kĩ năng kinh doanh và thúc đẩy quyền của phụ nữ khuyết tật	8	\$24,588
6	Viện Dân số, Sức khỏe và Phát triển	Việc làm và dạy nghề cho người khuyết tật	6	\$24,998
7	Trung tâm phát triển sức khỏe bền vững (VietHealth)	Can thiệp PHCN tại nhà	8	\$24,847
8	Hội người mù Việt Nam	Tập huấn kỹ năng lãnh đạo & thành lập CLB phụ nữ khiếm thị	6	\$24,451
9	War Legacies Project	Dịch vụ chăm sóc sức khỏe tại nhà	8	\$24,999

D. Viện trợ bằng hiện vật				
1	Hội người mù Bình Định	Đào tạo CNTT và hỗ trợ sinh kế	5	\$5,425
2	Hội Bảo trợ người tàn tật và trẻ mồ côi Đà Nẵng	Dạy nghề, việc làm và sinh kế cho người khuyết tật	7	\$1,913
3	Sở GD&ĐT Đà Nẵng	Phòng nguồn	4	\$10,806
4	Sở LĐ,TB&XH Đà Nẵng	Dụng cụ/ thiết bị PHCN	3	\$5,686
5	Chi hội Gia đình Người tự kỷ thành phố Đà Nẵng	Phục hồi chức năng và nâng cao kiến thức cho trẻ và cha mẹ	9	\$7,375
6	Công ty VBPO Đà Nẵng	Trang bị máy tính để bàn	4	\$4,524
7	Hội nạn nhân chất độc màu da cam Đà Nẵng	Xây dựng năng lực cho 2 trung tâm	7	\$7,572
8	Hội NKT quận Thanh Khê	Dịch vụ photo và đánh máy	6	\$4,157
9	Hội NKT huyện Hòa Vang	Xây dựng năng lực và giới thiệu việc làm	4	\$3,532
10	Phòng GD&ĐT Hoài Ân	Xây dựng phòng nguồn	4	\$2,263
11	Trường chuyên biệt Hy Vọng	Xây dựng phòng nguồn	4	\$2,195
12	Phòng GD&ĐT Phù Cát	Xây dựng phòng nguồn	4	\$2,209
13	Hợp tác xã Phú Hòa	Máy xử lý phế liệu		\$9,488
14	Hội NKT tỉnh Quảng Nam	Trang bị thiết bị cho Hội	6	\$3,051
15	Công ty may Tâm Thiện	Trang bị máy may công nghiệp	6	\$4,640
16	Trung tâm nuôi dạy trẻ khiếm thị Tây Ninh	Trang bị thiết bị cho trung tâm	3	\$4,041
17	Quán cà phê Freewheeling Life	Mở quán cà phê	7	\$2,351
18	Nhóm hương trầm Trần Quốc	Thành lập cơ sở làm hương trầm	4	\$1,409