

TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANT

Develop a comprehensive Sexual and Reproductive Health and Rights (SRHR) Resource Package for Traditional Leaders

| TERMS OF REFERENCE (to be completed by Hiring Office) | |
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| Hiring Office: | UNFPA Botswana |
| Purpose of consultancy: | <p>Purpose UNFPA Botswana Country Office is seeking an Individual Consultant to develop a succinct and user-friendly SRHR Resource package for traditional leaders.</p> <p>Background & Rationale Ensuring that traditional leaders have the requisite information and knowledge to speak about and challenge harmful cultural and gender norms at the community level is pivotal for the attainment of Sexual Reproductive Health and Rights (SRHR). The Republic of Botswana is committed to the implementation of the Sustainable Development Goals (SDGs), which include specific targets for advancing SRHR. The 2030 agenda puts greater emphasis on leaving no one behind, including vulnerable and key populations while closing the inequalities that some populations continue to face. The Government has also committed to implementing continental and regional frameworks to advance Sexual and Reproductive Health and Rights (SRHR) under the umbrella of SDG 3 which aims to ensure healthy lives and promote well-being for all across all age groups. SRHR incorporates a wide range of issues including access to family planning, Comprehensive Sexuality Education, prevention and treatment of Sexually Transmitted Infections including HIV, and gender equality. These rights are fundamental to individual well-being, gender equality, and sustainable development. However, there are still gaps in realizing such rights for all.</p> <p>While the country has accomplished remarkable progress in advancing SRHR, including HIV-related rights, major gaps still exist in policy, and programming including ensuring access to SRH information and services. Major differentials in contraceptive use exist; less than 1 percent of women with non-formal education, compared to 89.5 percent for women with secondary and higher education. Estimates from the State of World Population Report 2019 place the unmet need for family planning at 14 percent. Moreover, half of the HIV-infected pregnant women report that their last pregnancy was unintended. The maternal mortality rate has shown a sharp increase in 2022, rising from 162.3 deaths per 100,000 live births in 2021 to 282.7 deaths per 100,000 live births in 2023. Only 24 percent of school-going adolescents report having used contraceptives.</p> <p>SRHR indicators among adolescents and young people have also stagnated; the Adolescent Birth Rate (ABR) was estimated at 39 births per 1,000 girls aged 15-19 years in 2019; while lower than the global average of 44, it remains high. Pregnancy is also a major factor in the high rates of school dropout and grade repetition, especially among girls from poor and rural communities. Many girls who drop out of school do not return to school due to stigma among others. While new HIV infections have declined, infections remain high among adolescent girls and young people, the group that continues to account for over a quarter of new HIV infections. The high number of new infections is associated with the early sexual debut, Gender Based Violence (GBV), limited access to SRH information and services, and unequal power relations from social, economic, and cultural factors that influence age-disparate relationships. Additionally, adolescent girls and young women are exposed to harmful social and cultural norms that increase their vulnerability to violence and sexual exploitation as well as limit their access to education. Supporting GBV are entrenched negative social norms and harmful practices reinforcing inequalities, patriarchal attitudes, and gender stereotypes that promote negative masculinity and normalize GBV.</p> <p>While studies have not been undertaken on harmful practices in Botswana, it is apparent that there are certain practices such as child marriage that are perpetuated and entrenched by harmful cultural practices, customs, and traditions exist in some communities. Addressing such negative factors and their influence on the national legal and policy environment and the day-to-day life of citizens, especially girls and women, is a key priority in achieving the SDGs.</p> <p>Traditional leaders as respected figures in many communities and a critical entry point for advancing SRHR of young people. They hold significant influence and play a critical role in influencing community values, norms, and behaviours. They are often responsible for decision-making processes and the preservation of cultural heritage. Their authority and status must be harnessed to drive positive change to promote SRHR. Empowering traditional leaders with relevant skills, accurate information and resources can enable them to be agents of change within their communities. Their involvement in promoting SRHR can assist in breaking down barriers, challenging harmful cultural norms, and creating a supportive environment that protects and promotes the rights of women, girls, and vulnerable populations.</p> <p>It is against this background that UNFPA and the Ministry of Health (MOH) in collaboration with Ntlo Ya Dikgosi are seeking a consultant to lead the development of a user-friendly SRHR resource package for traditional leaders.</p> |

| Scope of work: <i>(Description of services, activities, or outputs)</i> | The consultant will: <ul style="list-style-type: none"> a) Develop a succinct and user-friendly SRHR Resource package for traditional leaders, of up to 25 pages (maximum) in English. b) The assignment involves facilitating a validation meeting with members of Ntlo Ya Dikgosi | | | | | | | | | | | | | | | | |
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| Duration and working schedule: | The consultancy will run for 40 working days, from November 2024 to February 2025. The consultancy is spread over four months to allow for the review of drafts by the task team represented by MOH, Ntlo Ya Dikgosi, and UNFPA to facilitate payments within an active contract. <table border="1"> <thead> <tr> <th>TASK</th> <th>TIME FRAME (days) Deliverables expected by end of 2024</th> </tr> </thead> <tbody> <tr> <td>Review background documents & Submission of Inception report, with a clear outline for the SRHR Resource Package</td> <td>3</td> </tr> <tr> <td>Develop and submit a draft succinct and user-friendly SRHR Resource package for traditional leaders, of up to 25 pages (maximum) in English</td> <td>14</td> </tr> <tr> <td colspan="2" style="text-align: center;">Deliverables Expected by February 2025</td> </tr> <tr> <td>Facilitate a validation meeting on the draft products (SRHR Resource Package)</td> <td>3</td> </tr> <tr> <td>Incorporate feedback from stakeholders in the final SRHR Resource Package</td> <td>12</td> </tr> <tr> <td>Facilitate a task team meeting and present the product</td> <td>1</td> </tr> <tr> <td>Incorporate feedback from the task team, finalize and submit edited SRHR Resource package for traditional leaders in English</td> <td>7</td> </tr> </tbody> </table> | TASK | TIME FRAME (days) Deliverables expected by end of 2024 | Review background documents & Submission of Inception report, with a clear outline for the SRHR Resource Package | 3 | Develop and submit a draft succinct and user-friendly SRHR Resource package for traditional leaders, of up to 25 pages (maximum) in English | 14 | Deliverables Expected by February 2025 | | Facilitate a validation meeting on the draft products (SRHR Resource Package) | 3 | Incorporate feedback from stakeholders in the final SRHR Resource Package | 12 | Facilitate a task team meeting and present the product | 1 | Incorporate feedback from the task team, finalize and submit edited SRHR Resource package for traditional leaders in English | 7 |
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| Place where services are to be delivered: | Home-based | | | | | | | | | | | | | | | | |
| Delivery dates and how work will be delivered (e.g. electronic, hard copy etc.): | Deliverable(s): <ul style="list-style-type: none"> a) Inception report detailing approach to the assignment within 3 days into the consultancy b) Final edited laid out SRHR Resource Package for Traditional leaders (2 copies), of up to 25 pages (maximum) in English (Print ready copies - edited & designed) | | | | | | | | | | | | | | | | |
| Monitoring and progress control, including reporting requirements, periodicity format and deadline: | The consultant will submit all products in soft copy format within established timelines which will be agreed upon during the inception meeting. Payment for this consultancy will be in 2 parts: 50% upon submission and approval of draft products and 50% upon submission and approval of final products. | | | | | | | | | | | | | | | | |
| Supervisory arrangements: | The consultant will work under the direct supervision of the Programme Specialist (Youth & Gender) under the overall direction of the Head of Office. | | | | | | | | | | | | | | | | |
| Expected travel: | No trip anticipated | | | | | | | | | | | | | | | | |
| Required expertise, qualifications and competencies, including language requirements: | The consultant (Team leader) must: <ul style="list-style-type: none"> a) Hold a master's degree or equivalent in Public Health, Social Science, Gender Studies, or other related fields b) A minimum of 10 years working experience, and extensive experience in developing curriculum, resource materials, and information packages. c) Technical expertise in Sexual and Reproductive Health, especially in Botswana d) Highly conversant with traditional practices, beliefs, and cultural nuances around SRHR in Botswana. e) Experience in working with traditional leaders, and government officials, and able to interact with a variety of stakeholders at different levels. f) Strong analytic and writing skills g) Submit one work sample related to the assignment, not more than 5 years old <p>*The team leader is expected to assemble a requisite team to undertake this assignment.</p> <p>Application Details</p> | | | | | | | | | | | | | | | | |

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| | <p>The proposal will include</p> <ul style="list-style-type: none"> ● Cover letter ● Detailed technical proposal outlining the proposed methodology to achieve the objectives of the assignment ● Brief CV(s) of the team ● Detailed budget ● Indicates dates of availability to commence the assignment |
| <p>Inputs / services to be provided by UNFPA or implementing partner (e.g support services, office space, equipment), if applicable:</p> | <p>UNFPA and the Ministry of Health will share relevant background materials to facilitate this assignment.</p> <p>UNFPA will coordinate the review of drafts and engagement with the Ministry of Health and Ntlo Ya Dikgosi</p> <p>The consultant will utilize their equipment</p> <p>UNFPA will provide high-resolution logos (Ntlo Ya Dikgosi, MOH & UNFPA) for branding of the products</p> |
| <p>Other relevant information or special conditions, if any:</p> | <p>UNFPA reserves the right to offer to the selected service provider the rate in accordance with UNFPA consultant rates and available budget. Payments for contractors will not exceed average UNFPA rates for consultants.</p> <p>If the contractor fails to deliver the required quality of products, the rate payable may be reduced. UNFPA reserved the right to assess the quality of products. The contractor must finalize products to the satisfaction of UNFPA.</p> <p>All work produced under this scope will belong to Ntlo Ya Dikgosi, MOH, and UNFPA. The information gained through undertaking this work should not be used for any other purpose without the consent of Ntlo Ya Dikgosi, MOH and UNFPA.</p> |
| <p>Signature of Requesting Officer in Hiring Office: DocuSigned by: <i>Grace #XDSWA</i> 953A89F303864A6...</p> <p>Date: 08-oct-2024</p> | |