TERMS OF REFERENCE	
Hiring Office:	UNFPA Botswana Country Office
Background	With an estimated 166.3 deaths per 100, 000 live births (2019), Botswana's maternal mortality ratio (MMR) is almost double the average MMR for upper-middle income countries of 70 deaths per 100,000 live births. Together with postpartum hemorrhage, complications from abortion is one of the top causes of maternal mortality in the country. The continued high number of maternal deaths compared to the projected number deaths and high MMR trends indicate that Botswana may not achieve the 2030 SDG target.
	In response the Ministry of Health and Wellness (MoHW) has launched several initiatives and has recognized the role that unplanned pregnancies, need for contraception and unsafe abortion contribute to the high MMR. The MoHW partnered with UNFPA and WHO, to use the three-stepped WHO-sponsored Strategic Approach to Strengthening and Reproductive Health Policies and Programmes. Implementation of the Strategic Approach involves three stages: (1) a Strategic Assessment to identify needs and priorities; (2) testing of health-service innovations on a limited scale; and (3) scaling-up so that the benefits of proven innovations reach more people.
	In 2020 Botswana successfully completed the first stage of the Approach (Strategic Assessment) with technical and financial support from UNFPA and WHO. The main aim of the Strategic Assessment was to identify and prioritise needs and potential follow-up actions related to critical sexual and reproductive health issues, specifically the reduction of unintended and unwanted pregnancies, unmet need for contraception and the morbidity and mortality related to the unsafe termination of pregnancy- and the integration of HIV and Sexual and Gender-Based Violence (SGBV). Through the Strategic Assessment report Botswana has established and documented national stakeholder consensus on recommendations for new or revised policies and improvements in service delivery, programme management, and community-level interventions related to critical SRH issues.
	It is against this background that three (3) policy briefs are being commissioned to present the evidence and policy options for strengthening SRH policies and programmes to achieve the SRHR targets of SDG 3 and 5. The policy briefs will address each of the three (3) thematic/issues of concern being <i>unintended pregnancies, contraceptives and unsafe abortion and abortion services</i> .

Purpose of consultancy:	To develop three (3) Policy Briefs, one in each of the following areas: unintended pregnancies, contraception and unsafe abortion. The Policy Briefs will stem from key findings of the <i>Strategic Assessment on unintended pregnancies</i> , contraception and unsafe abortion in Botswana, along with findings from the Background Paper on policies, Programmes, and Research on Unintended Pregnancies, Contraception, Unsafe abortion and Contraception and Abortion Services for Botswana (both to be supplied to the consultant).
Scope of work: (Description of services, activities, or outputs)	 Major Activities/ Expected Deliverables Consultative meeting with UNFPA/WHO and MoHW (1day) Create a brief inception report/ outline that includes resources to be used and a timeline of activities. (2 days) Collection and collation of information needed in addition to the Botswana Strategic Assessment. (3 days) Complete review of materials of aforementioned materials. (4 days) Drafting of the three policy briefs (6 days) and submission for review by stakeholders Revision and finalization of briefs including any necessary formatting and graphics. (6 days) Creation of visual aids and presentation materials such as PowerPoints. (2 days) Validation (1 day)
Duration and working schedule:	This assignment shall not exceed a period of 25 working days and will commence in April 2021.
Place where services are to be delivered:	The consultant will carry out the assignment remotely. Where there is a need for discussions virtual meeting tools will be used to minimize the need for face-to-face meetings.
Delivery dates and how work will be delivered (e.g. electronic, hard copy etc.):	The consultancy will run from April - June and the work carried out in a period not exceeding 25 working days within the duration of the consultancy. Deliverables: Inception report 3x Draft Policy briefs 3x Final Policy briefs Completed presentation materials Resource list/ bibliography Each Policy brief shall not exceed 4-5 pages including figures and graphics.

	 Explanation of the issue or the problem, including its importance, why now, who is impacted and who cares? When defining the problem, be specific to the audience and clearly frame the issue. 1–3 specific policy actions that will address the problem. Display and description of relevant data using 1–2 figures or tables; declaration of potential bias based on the data sources; reference to other related policies. Brief discussion of the implications of both action and inaction; analysis of estimated pros and cons of the policy action; consider intended and unintended consequences; address opposing arguments. Specific recommendations to address each problem and actions required. A conclusion with a restatement of how this policy specifically addresses this problem. All materials will be delivered electronically and in accordance with the timeline established in the initial outline for the approach (to be created by consultant).
Monitoring and progress control, including reporting requirements, periodicity format and deadline:	The consultant will deliver electronic weekly progress reports to show progress and outline the next steps.
Supervisory arrangements:	The consultant will contractually work under the supervision of the SRH/HIV Linkages Coordinator from the Botswana UNFPA office as well as the Coordinator for unintended pregnancies, contraception and safe abortion (UNFPA ESARO) with overall guidance from the Assistant Representative in UNFPA Botswana and in consultation with WHO and the Ministry of Health and Wellness.
Expected travel:	UNFPA will work with the MoHW to organize a 1-day stakeholder dissemination meeting in a modality that is responsive to the requirements of the COVID-19 protocols.

Graduate level education (Masters or higher) in Public Health, Midwifery, 1. Required expertise, Medicine or Nursing with relevant public health experience. qualifications and At least five years previous experience working in SRH, health policy, policy competencies, including implementation with relevant experience in PAC/CAC and clinical in-service language requirements: training. 3. Experience working in SHRH in Botswana or ESA region and familiarity with the political and cultural environment as it relates to SRH. Candidate will be expected to have a demonstrated understanding of policy, research and strategies. Excellent writing skills and previous experience writing policy briefs or similar. All interested applicants should submit letters of interest (cover letters), CVs and relevant writing samples. The writing samples/experience should be at the same technical level of this ToR e.g., social policy analysis, evidence for policy formulation, translating research to impact, policy, health policy or similar. Applications without writing samples will not be considered. Inputs / services to be UNFPA will provide relevant support and guidance to ensure the successful undertaking of this consultancy, including administrative and financial support. provided by UNFPA or implementing partner (e.g support services, office space, equipment), if applicable: Other relevant Fluent in written and spoken English. information or special

Signature of Requesting Officer in Hiring Office:

conditions, if any:

Date: 26 Feb 2021

