TERMS OF REFERENCE FOR A SERVICE PROVIDER TO DEVELOP MATERIALS FOR TRAINING OF PROVIDERS ON THE REVISED BOTSWANA PROTOCOLS AND SERVICE STANDARDS FOR PREVENTION AND MANAGEMENT OF GBV

Hiring Office:	UNFPA Botswana Country Office	
Purpose of consultancy:	UNFPA Botswana Country Office is seeking the services of a service provider develop training materials for training of healthcare providers on the below liste Guideline. 1. Prevention and Management of Gender-Based Violence: A Guide for Health Care Providers. Revised in 2022.	
Background	Gender-based violence (GBV) and other harmful practices violate human rights because they cause irreversible physical and emotional harm to women and girls UNFPA and other UN agencies, work with the government of Botswana, civil society and other development partners to strengthen the prevention and response to GBV. In particular, UNFPA focuses on the prevention of sexual violence, addressing the inadequacies of national legislation, policies and strategies; and supports developing culturally sensitive and rights-based policies on GBV prevention and response, with a strong focus on SRH. Through advocacy and partnerships UNFPA provides technical support to strengthen institutional capacity of government and civil society actors in GBV response, particularly health care providers. The Government of Botswana's 11th National Development Plan (NDP11), Vision 2036, National Health Policies and their corresponding strategic frameworks articulated action towards the achievement of the country's development goals including health and gender equality. The country subscribes to the Sustainable Development Goals (SDGs) and is signatory to several international and regional conventions that address GBV.	
	The Botswana National Relationship Study (2018), shows that GBV remains high in Botswana. Thirty-seven (37%) of the women interviewed reported experiencing GBN at least once in their lifetime including intimate partner and non-partner violence According to the study, women of reproductive age are more likely to experience intimate partner violence than older women. Domestic violence increased during the COVID-19 outbreak UNFPA, 2020. Botswana Gender Based Violence Prevention and Support Centre (BGBVC) and Women Against Rape (WAR) reported an exponential increase in the demand for counseling, consultations and safe spaces in April-May during the national lockdown. However, national Relationship study has also shown that most people do not report cases of GBV due to stigma or shame, but often present to health facilities with injuries, without explicitly indicating themselves as victims of GBV.	
	The increased risk for adverse sexual and reproductive health (SRH) outcomes is heightened when sexual and gender-based violence survivors do not receive comprehensive survivor-centered services including clinical management of rape such as access to post exposure prophylaxis to prevent unintended pregnancies, STIs and HIV infection. Barriers to addressing GBV include limited national capacity for provisior of client-centered quality assured and sustainable prevention of GBV and services fo victims and survivors of SGBV. This highlights the key role the health sector plays as a critical entry-point for addressing GBV, not only as a means for treating victims, but	

also for prevention. It underscores the need to strengthen capacities of health care workers to effectively prevent and respond to GBV, and provide strong referrals to other essential services (police, justice and social services) as needed and requested by the victim/survivor.

In 2011, the Government of Botswana, through support from the UNFPA and WHO Botswana Offices, developed the Protocols and Service Standards for Prevention and Management of Gender Based Violence which aimed to improve the quality of care given by the health care providers and overall health services response to GBV in Botswana.

The Protocol and Service Standards, has been revised in 2022 to align it to the current national legal, policy, institutional and implementation frameworks; and adaptations to regional and global standards for strengthening violence against women (VAW) response and its integration in SRH and HIV services.

The revised protocol, renamed *Prevention and Management of Gender-Based Violence A Guide for Health-Care* are targeted to guide all stakeholders in the health-care sector, including the private sector, non-governmental organizations (NGOs) and governmental departments, on the provision of gender-sensitive and culturally appropriate sexual reproductive health (SRH) services. The purpose of the Guidelines is to assist the health care workers to identify, manage and refer victims/survivors of GBV appropriately including screening and identification, examining and provision of comprehensive services according to national guidelines. The Guidelines further guides the continuum of comprehensive services such as referrals to other essential services (police, justice, social services), collection and presentation of forensic evidence and giving evidence in a court of law.

Scope of work:

(Description of services, activities, or outputs)

The assignment requires a service provider with training material/curriculum development capabilities to carry out the below tasks.

Main objective:

To develop a Facilitator's Guide and Participant handout package, and supporting materials for an integrated capacity building program for health care-care providers, which will serve to enhance the knowledge base and skills of health care providers in the provision of quality rights-based services for prevention and management of GBV.

Specifically, the scope of work requires the service provider to:

- 1. Develop a fully-illustrated Facilitator's Guide for Trainers that should include:
 - a. Assessment Tools (pre and post training)
 - Facilitation guidance on introduction of the guideline such as Glossary of Definitions, Situation Analysis, Purpose of the Guidelines, Guiding Principles etc.;
 - c. Facilitation guidance on each of the fifteen chapters of the Guideline;
 - d. PowerPoint Slides with key messages and illustrations;
 - e. Selected handouts for participants;
 - f. Exercises for the participants
 - g. The Facilitators Guide will outline Learning objectives, Timeframe, Training approach/methodology and materials required for each session/topic
 - h. Training plan for a five-day program
- 2. Develop a Participant's handout package that should include:
 - A summarized version of information covered in each of the topics/sessions;

- b. PowerPoint slide with key messages for each topics/session
- A template for and Action Plan to be developed by participants to strengthen implementation of Revised Guidelines in the specific roles
- d. Any other handout as appropriate to be determined by the vendor and MoH/UNFPA
- 3. To facilitate training of TOTs
 - a. Train national GBV TOTs and Program Officers on the implementation/application of the training materials.

Methodology:

<u>Literature Review:</u> The assignment will involve a desk review of the revised Guidelines along with related curricula, manuals, and strategic documents that must be read together with the Guideline

<u>Inception meeting/administrative:</u> The service provider will meet with UNFPA to discuss the project inception including the work plan, scope of work and clarify expectations and payment schedule.

<u>Drafting and finalisation of deliverables:</u> The service provider will draft and finalise deliverables considering the outcomes of the desk review, feedback from drafts review as needed.

Deliverables

- Inception report and proposed methodology or approach to meeting the objectives of the assignment
- Draft Facilitators' Guide, Participant's handout packages, PowerPoint Slides and annexures
- 3. Final Facilitators' Guide and Participant's handout packages, PowerPoint Slides and annexures
- 4. Version of the copy edited and designed and digital and print ready booklet with annexures
- 5. Report from the training with concrete recommendations on the next step

Payment Schedule

- 40% upon completion and approval of the Draft Facilitators' Guide, Participant's handout packages, PowerPoint Slides and annexures
- 60% upon completion and approval of the Final Facilitators' Guide, Participant's handout packages, PowerPoint Slides and annexures; print ready documents, and report on training of ToTs.

Duration and working schedule:

The assignment will run from 06 February – 14 April 2023. With a total of 37 working days.

	Task	T/Frame
	Inception Meeting with UNFPA to discuss the project inception including the work plan, scope of work and clarify expectations and payment schedule.	0.5 day
	Desk review	3 days
	Development of Inception report	1 day
	Presentation of Inception report to reviewers (Allow for 2 days review prior to presentation)	0.5 days
	Drafting of Facilitators Guide and Participants Manual and Annexes	15 days
	Review of Drafts by UNFPA and MoH (allow 5 working days)	0 days
	Incorporation of feedback	3 days
	Design and Layout of final drafts	3 days
	Validation with UNFPA and MOH	1 day
	Incorporation of feedback and finalisation of deliverables	2 days
	ToT training	5 days
	ToT Training Report preparation	1 day
	Final edits and submission of deliverables	2 days
	TOTAL	37 days
Place where services are to be delivered:	Company based The service provider will be expected to conduct an in-person training for ToTs and Program officers to be held outside Gaborone.	
Delivery dates and how work will be delivered (e.g. electronic, hard copy etc.):	The final deliverables should be approved by 12 April 2023. All deliverables will be presented in an electronic copy by email to UNFPA.	
Monitoring and progress control, including reporting requirements, periodicity format and deadline:	 UNFPA will closely monitor the progress through email and scheduled meetings The consultant will be expected to provide drafts for review and allow up to 5 working days and/or as may arise. 	
Supervisory arrangements:	The work will be supervised by the UNFPA Botswana SRH/HIV Linkages Coordinator with overall support and guidance from the UNFPA Botswana Head of Office. The oversight on the final deliverable will be provided by MoH.	
Expected travel:	Travel may be required for the in-person training of ToTs If applicable travel will be arranged by the service provider and UNFPA will provide travel compensation (applicable DSA using UN rates).	

Required expertise, qualifications and competencies, including language requirements:	 A minimum of 10 years' working experience at least five of which should be in developing curriculum, training manuals or teaching guides. Expertise in designing and implementing a wide range of interactive, engaging training materials and sessions Knowledge and practical experience on SRH, HIV and GBV or related health sciences programs Demonstrated evidence of good technical writing in English Familiarity with Health Systems in the ESA region Experience in working diverse teams Excellent and analytical, writing and communication skills in English Ability to complete tasks efficiently and handling tight deadlines Prior experience with the UN will be considered an asset 	
Inputs / services to be provided by UNFPA or implementing partner (e.g support services, office space, equipment), if applicable:	 UNFPA will provide an electronic copy of the Guideline UNFPA will cover the cost of the TOT training UNFPA will coordinate the reviews of drafts and interactions with the Ministry of Health The consultant is expected to utilize own equipment and relevant materials The trainer will provide any other training resources tools/aids needed for the TOT training UNFPA will provide high-resolution Logos for branding of the products 	
Other relevant information or special conditions, if any:	UNFPA reserves the right to offer to the selected service provider the rate in accordance with UNFPA consultant rates and UNFPA available budget. Payment for contractors will not exceed average UNFPA rates for consultants. Where the contractor fails to deliver the required quality of products, the rate payable may be reduced. UNFPA reserves the right to assess the quality of products. Contractor has the obligation to finalize products/documents to the full UNFPA satisfaction. All work produced under this scope will belong to the MoH and UNFPA Information gained through undertaking this work should not be used for any other purpose without the consent of the Botswana Ministry of Health and UNFPA	
Signature of Requesting Officer in Final Date: 20-Jan-2023	Hiring Office: Kesaobaka dikçole 5B2047FE940A405	