



## USAID Stop Gender-Based Violence (USAID Stop GBV) Project

# Terms of Reference for the Development of USAID Stop GBV Referral Directory in 16 Districts of Zambia

*Disclaimer: The development of the referral development is made possible by the support of the American people through the United States Agency for International Development (USAID) and the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). The contents are the responsibility of ZCCP-Kwatu and its project partners: Lifeline/Childline Zambia, WILDAF and do not necessarily reflect the views of USAID/PEPFAR.*

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## Acronyms

CATFS	Community AIDS Task Force
GBV	Gender Based Violence
HIV	Human Immuno-deficiency Virus
IR	Intermediate Result
KPs	Key Populations
MoG	Ministry of Gender
MoH	Ministry of Health
PLWH	People Living with HIV
OSC	One Stop Center
OVC	Orphans and Vulnerable Child(ren)
SRH	Sexual and Reproductive Health
TOR	Terms of Reference
USAID	United States Aid for International Development
VAC	Violence against Children
VAWG	Violence Against Women and Girls
VSU	Victim Support Unit (of the Zambia Police)
WiLDAF	Women in Law and Development in Africa
WHO	World Health Organization
ZCCP	Zambia Center for Communication Programmes



## 1.0 Introduction

Zambia Centre for Communications Programs (ZCCP) is implementing the USAID Stop Gender-Based Violence (GBV) project aimed at strengthening the environment for girls and women, boys and men, and members of key/priority populations in Zambia, to live lives free of GBV and enjoy healthy-supportive, gender-equitable relationships, using evidence-based and locally owned approaches.

ZCCP, as a Prime implementer of the USAID Stop GBV project, has partnered with two organizations to meet the objectives of the Stop GBV project:

- WiLDAF will lead interventions that will promote advocacy and access to justice for GBV survivors; the training of paralegals; supporting paralegal services at One Stop Centers (OSCs) and engagement with legislators and judiciary on strengthening the GBV laws.
- Lifeline/ChildLine Zambia will lead the tele counselling and referrals for services for GBV survivors and KP especially those that seek anonymity.
- ZCCP as a prime is leading on (i) GBV/HIV prevention and awareness, (ii) capacity building and quality improvement of the OSCs including engaging with Ministry of Health (MoH) to manage OSCs housed in health institutions to respond to post GBV care and HIV testing services (HTS) and, (iii) engagement of boys, men and key populations (KPs) in coordination with other organizations.

Lifeline/ChildLine Zambia is seeking a service provider to develop a Referral Directory for Gender Based Violence service providers across 24 districts. This will strengthen coordination among GBV service providers and improve the chain of service provision through referral for appropriate service points for relevant GBV services.

## 1.1 Background

The USAID Stop GBV project will be implemented from 15<sup>th</sup> November 2018 to 14<sup>th</sup> November, 2023 and is being implemented in sixteen districts (Chingola, Chipata, Chongwe, Kabwe,



Kalulushi, Kapiri Mposhi, Kitwe, Livingstone, Luanshya, Lusaka, Masaiti, Mongu, Mufulira, Ndola, Sesheke and Solwezi).

The goal of the project is to strengthen the environment for adolescent girls and boys especially the 9-14 years old, ) including people living with disabilities (PWD), to live lives free of GBV and enjoy healthy-supportive, gender-equitable relationships.

The objectives of the project are;

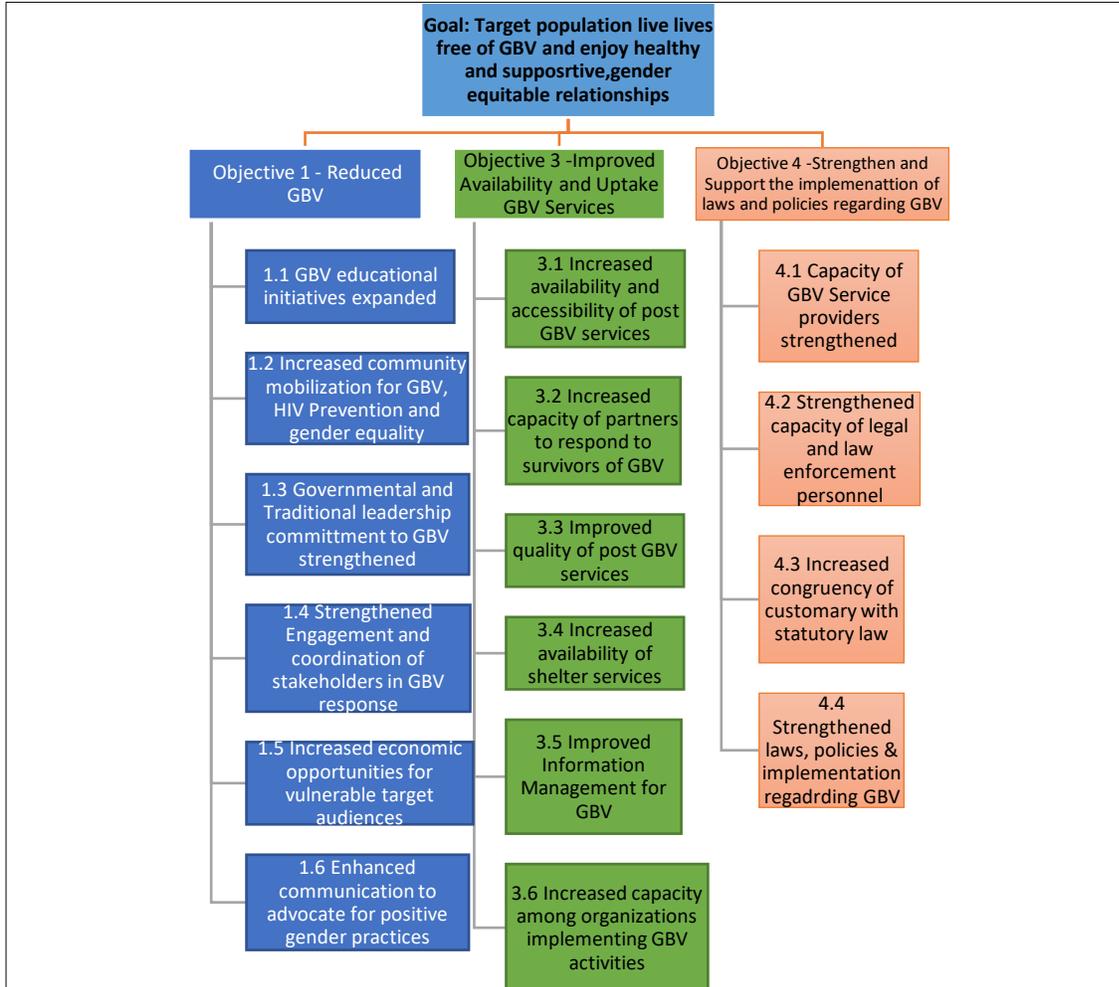
- To prevent GBV and increase support for gender equality among adolescent girls and boys especially the 9-14 years old
- To strengthen access to and uptake of quality post-GBV services for GBV survivors.
- To strengthen and support the implementation of laws and policies regarding GBV, gender equality, and female empowerment, and increase the congruence of customary laws with national laws.

The project outcomes are summarized below and further presented graphically in the results framework (figure 1). Detailed outcome results areas are in annex 1.

- Decreased societal acceptance of GBV, reduced perpetration, enhanced protective factors, and improved enabling environment for GBV response.
- Increased availability and timely uptake of quality GBV services by GBV survivors.
- Strengthened regulation and support for the implementation of laws and policies regarding GBV and gender equality.



Figure 1: USAID Stop GBV Project Results Framework



The Ministry of Gender with other key stakeholders developed Multi-sectoral guidelines for managing of GBV and child survivors of violence but no attempt has been made to develop a GBV services referral directory. Development of the GBV services Referral Directory is critical in the enhancement of the management of GBV and child survivors of violence in a timely access of services and performance monitoring of service providers As there are many actors working in the sector, there is need for a well- coordinated coherent approach to a delivering both pre and post GBV survivor’s centered services



The directory is expected to outline specific services, resource and service points, geographical location and contacts detailed. The directory will provide direction and align resources according to types and category of services for both adult and children survivors of GBV.

### **Call for the expression of interest**

This call for the expression of interest from suitable candidates is made for the development of a GBV Referral Directory for the 16 target districts as outlined above. The purpose for developing the Referral Directory is to ensure effective coordination, management, provision of and access to various services to victims of GBV and survivors of child violence in the target areas. In this regard, consultancy services are being sought from qualified and interested individuals to

- Identify and develop a well elaborated inventory of available service providers as recommended in the methodology section for the 24 project districts.
- Develop a GBV Referral Directory handbook/electronic copy for the comprehensive management of GBV/VAC survivors
- Support and facilitate the roll-out/discemination framework of the referral directory handbook/electronic copy to users at National, District and Community levels.

### **1.2 Scope of work**

The consultant is to undertake visits to all the 16 districts to appreciate the forms of Gender based violence (GBV) and Violence Against Children (VAC) cases, available services, availability of service providers and current synergies and collaboration among various stakeholders providing GBV services. In addition, the consultant is also expected to work in line with support the achievement of the general objectives of the project which include:

- To strengthen and support the referral pathway in the implementation of laws and policies regarding GBV and VAC.
- To prevent GBV and increase support for gender equality among adolescent girls and boys especially the 9-14 years old.



- To strengthen access to and uptake of quality post-GBV services for GBV survivors.
- To identify barriers that inhibit survivors to access post GBV services from the OSCs.
- To highlight legal protection benefits, awareness and legal aid services available in the 16 districts
- Indicate the role of lifeline childline Zambia within the service provision framework

### 1.3 Methodology

The consultant is expected to use a mixed methods approach combining qualitative and quantitative methods to assess how many GBV referral partners are there in the districts of project operation and how many various services are available for the survivors. This also includes but not limited to the use of document review, key informant interviews, and focus groups discussions where necessary. All data, collected must be disaggregated to clearly show the location of a service provider, what services are provided/ available, contact details (phone, email, physical address) and where possible the contact person(s).

**Secondary documentation:** The Consultant is expected to work closely with Lifeline/Childline staff who will share key documents required to successfully carry out this assignment. However, the Consultant is also expected to use available literature and any other official documents from the Zambian government, USAID Stop GBV Partners, national and international reports.

### 1.4 RESPONSIBILITY

The Chief Executive Officer for Lifeline/Childline Zambia and other key stakeholders in the consortium will work with the consultant providing overall supervision during the execution of the tasks. The consultant will take into account on-going work linkages with other stakeholders and ministerial departments addressing GBV and VAC in this project.



## 1.5 DELIVERABLES

Task	Activity	Delivery period	Milestone Payment
1.	Inception report documenting available and accessible resources as well as service providers in each individual district	20 days from the date of commencement (1 <sup>st</sup> January-20 <sup>th</sup> January 2020)	20% upon signing of contract. (Inception report)
2.	Draft Referral Directory hand book inclusive of; <ul style="list-style-type: none"> <li>All GBV/VAC and HIV/AIDS service providers in the 16 districts</li> <li>Preamble background information to the services and all forms of GBV/VAC</li> <li>Procedural guidelines and referral systems</li> </ul>	50 days (10 <sup>th</sup> March 2020)	50% payment Draft referral directory developed
3.	The final draft of the referral directory handbook <ul style="list-style-type: none"> <li>Validation of the handbook</li> </ul> <p>The consultant shall submit both in written (in English) and electronic copies for review and/ or approval. At the end of the assignment, the consultant shall not claim any right of authorship or design patent of the referral directory handbook submitted during or at the end of the assignment.</p>	10 days (20 <sup>th</sup> March 2020 )	Validation Meeting



4.	Annexes of all key documents that contributed to the report including the tools, Terms of References and any other vital documents.	10 days (30th March)	30% final payment Final Report
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### 1.6 Budget

The service provider is expected to document an explicit, reasonable and realistic budget (in Zambian Kwacha) to cover all survey related costs. This budget will be approved before commencement of any survey related activities by the consultant.

The proposed budget should be tax exempt.

### 1.7 DATA AND DOCUMENTS TO BE PROVIDED BY LIFELINE/CHILDLINE

The documents to be availed by the Contractor during the assignment shall comprise:

- USAID Stop GBV Project Concept paper and work plan
- Available frameworks currently utilized by all service providers
- Anti- GBV Act of 2011
- GBV Multi-sectoral Guidelines
- Draft document of the post GBV minimum standards
- Child help line Directory
- National Referral Mechanisms Handbook
- List of GBV OSC and coordinators contact numbers
- USAID Stop GBV project year 1 annual report

The consultant shall be expected to actively search and solicit for other relevant government and private sector publications that will be useful in the execution of the task.



## Eligibility and Evaluation Criteria

Only proposals which include all the parts mentioned under the section “How to apply” are eligible and will be evaluated.

Bids will be scored according to the following criteria:

### 1. **Technical Evaluation Criteria**

- |     |   |     |
|-----|---|-----|
| 1.1 | Overall Response  | 15% |
|     | <ul style="list-style-type: none"><li>• Completeness of response</li><li>• An interpretation of the tasks described in the TORs which demonstrates an understanding of the services to be provided.</li><li>• Relevance of previous work undertaken</li></ul>   |     |
| 1.2 | Company and Key Personnel   | 25% |
|     | <ul style="list-style-type: none"><li>• Strength of the team proposed to respond to the overall scope of the services requested, including the team leader who will have the overall responsibility for all other team members, as well as contact with Lifeline/Childline Zambia.</li><li>• Composition of the team proposed, including the appropriate gender balance and the overall scope of the project.</li><li>• A description of the input of each of the team members and the distribution and interaction of tasks and responsibilities between them.</li></ul> |     |
| 1.3 | Proposed Methodology and Approach   | 30% |
|     | <ul style="list-style-type: none"><li>• Outline of the approach framework and methodology proposed.</li><li>• Work plan and time schedule, including milestones breakdown and the number of personnel and the number of working days they will require for the assignment.</li></ul>  |     |



**Total Technical**

**70%**

2. **Price Proposal**

**30%**

Including VFM, total costs, fee rates

### **Skills and qualifications of team**

Lifeline/Childline Zambia is looking for a consultant/team with the following skills and qualifications:

- At least 10 years' experience in the justice sector (GBV/VAC) or any other related fields in Zambia
- Excellent understanding of GBV/VAC issues and management of GBV/VAC cases
- Excellent experience of/or working with the health and legal systems
- Strong analysis, report writing and communication skills including ability to write clear and concise report in plain English.
- Master's degree is an added advantage
- Basic degree in social sciences, public health, development studies or a related field
- Experience in managing and coordinating similar tasks, delivering agreed outputs on time and on budget
- Ability to respond to comments and questions in a timely, appropriate manner
- Experience in communication and documentation

### **Terms and Conditions**

The assignment will be carried out by a service provider with the relevant expertise and applicable experience and will work under the terms and conditions as provided by Lifeline/Childline regulations governing consultants. The service provider should have his/her own reliable laptop and mobile phone. The service provider shall be responsible for the safety and well-being of their personnel and third parties affected by their activities under these ToRs.



All materials and information collected in this study will be the property of Lifeline/Childline Zambia and will not be used by the consultant for any other purposes without the express authorization of Lifeline/Childline Zambia.

### **Service Provider's Responsibilities**

- Develop appropriate data collection and analysis collection tools needed to successfully undertake this assignment
- In consultation with ZCCP, WiLDAF and Lifeline, development of the framework for the Referral Directory
- compile and present a draft Referral Directory
- Facilitate the validation of the Draft Referral Directory
- Facilitate the community/ national roll out of the referral directory

### **How to Apply**

Interested consultants or team of consultants should submit their proposal by e-mail to: [lifelinechildline@yahoo.com](mailto:lifelinechildline@yahoo.com) and copy in [chibesaernest@gmail.com](mailto:chibesaernest@gmail.com) before 20<sup>th</sup> February 2020.

Proposals should include:

- A technical component, describing how the assignment will be carried out.
- A financial component, detailing the budget.
- Overview of the (lead) consultant's past works, focusing on the most relevant.
- Curriculum vitae of the (lead) consultant and team members.

The Technical proposal should be submitted in separate emails from the Financial Proposal.

Feedback will be provided to all proposals. Lifeline/Childline Zambia reserves the right to accept or reject any proposal received without giving reasons and is not bound to accept the lowest or the highest bidder.



## Risk Assessment

The full list of risks and mitigating actions are set out below

Risk	Likelihood	Impact	Mitigation
1. The consultant has limited knowledge of project goal and operational areas to collect data relevant to the project.	Unlikely	Major	1)Engage consultant with vast knowledge of Gender Based Violence programming and has track record of directory development 2)Project partners will provide all relevant information about the project and provide support to the consultant during the whole process.
2 That collected data is of poor quality and undermines the credibility of the GBV referral directory	Unlikely	Major	The project team to establish strict quality control measures e.g. supporting quality data collection and monitor the computation of the same.