

Terms of Reference



GENERAL INFORMATION

Title: Consultant for The Strengthening Capacity GBV Service Providers and Advancing Gender Justice through Behavioral Insights Approach

Project Name: GBV Project

Reports to: Programme Manager at DGPRU, Technical Officer GBV, UNDP Gender Specialist

Duty Station: Home-based

Expected Places of Travel (if applicable): N/A

Duration of Assignment: March - December 2022 (84 Working Days)

REQUIRED DOCUMENT FROM HIRING UNIT

	TERMS OF REFERENCE
5	CONFIRMATION OF CATEGORY OF LOCAL CONSULTANT, please select:
	(1) Junior Consultant
	(2) Support Consultant
	(3) Support Specialist
	(4) Senior Specialist
	(5) Expert/ Advisor
	CATEGORY OF INTERNATIONAL CONSULTANT, please select:
	(6) Junior Specialist
	(7) Specialist
	(8) Senior Specialist
X	APPROVED e-requisition

REQUIRED DOCUMENTATION FROM CONSULTANT

X	P11 or CV with three referees
X	Copy of education certificate
X	Completed financial proposal
X	Completed technical proposal

Need for presence of IC consultant in office:

- ☒ partial (*due to the COVID 19 Outbreak, consultant may be working from home/home-based*)
☐ intermittent (explain)
☐ full time/office based

Provision of Support Services:

- Office space: ☐ Yes ☒ No
Equipment (laptop etc): ☐ Yes ☒ No
Secretarial Services ☐ Yes ☒ No

If yes has been checked, indicate here who will be responsible for providing the support services:

I. BACKGROUND

In 2021, UNDP in partnership with DKI Jakarta Provincial government had strengthened the capacity of public hospitals and front liners through advocacy and awareness raising in handling the cases of GBV/VAW during the pandemic. Monitoring and Evaluation (M&E) Framework for integrated hospital-based service Centre was developed, together with the first prototype design of Moveable GBV 3i Centre to be piloted in DKI Jakarta. In addition, socialisation of the M&E framework to selected target groups was facilitated, as part of overall GBV referral system in Indonesia.

As the health system in Indonesia was relatively collapsed due to the significant increase of COVID-19 cases during the mid-year of 2021, there's an urgent need to continue increase access to essential services to GBV victims, including medical and psychological support, law enforcement services and referral to protection services. In order to improve the quality of GBV service providers, which lead to better life outcomes for GBV victims, it is crucial to examine services most commonly available in Indonesia, covering support helplines, the criminal justice system, the health sector, mental health services, and shelters¹. By leveraging insights from behavioural science, service providers and policy makers will be able to identify potential behavioural barriers that GBV victims face in accessing services and propose intervention solutions for addressing and responding to GBV in the country², thereby contributing to the strengthening of peace and justice for vulnerable populations as part of an inclusive and transformative COVID 19 recovery.

In light of the above, under the Democratic Governance and Poverty Reduction Unit (DGPRU), UNDP will continue support the strengthening public services to protect vulnerable and marginalised group from adverse impacts of Pandemic, in particular to protect survivors of violence against women and girl. UNDP will work with health service provider in Jakarta City and selected target area to advocate and promote monitoring and evaluation framework among target beneficiaries, extend the capacity or services by constructing the first prototype and the second prototype (informed by Behavioral Insights approach) of movable integrated hospital-based GBV services Centre, and support the socialisation of the services to selected target groups, as part of concerted effort in strengthening access to justice for GBV victims and the strengthening of GBV referral system and service provision in Indonesia.

II. SCOPE OF WORK, ACTIVITIES, AND DELIVERABLES

Scope of Work

The Consultant will be tasked to start the assignment soon, starts on 31 March 2022 and ended by 30 December 2022 to support UNDP in strengthening the capacity of relevant service providers in responding to the GBV prevalence. The Consultant will work closely with relevant local government, national government and hospital to strengthen the services of survivors GBV. She/he will support the service providers or local government to conduct immediate supports for GBV survivors and support UNDP in piloting the innovative services to protect survivors. Furthermore, following are details of assignment of the consultant:

1. Based on the lessons learned and best practices from previous UNDP's interventions, the Consultant will advocate and promote the Monitoring and Evaluation Framework of the Hospital-based Integrated Service Centre for GBV Victims, as well as facilitating strategic partnership building with key stakeholders
2. Provide expert advice and coordination support to assist UNDP in data collection for Behavioral Insights research in consultation with BI Consultant
3. With relevant institution and local government in Jakarta province, the consultant will help socialize two (2) pilot prototypes of GBV integrated movable hospital-based services; the latter will be informed by Behavioral insights to support the availability access for protection to survivors, especially during the condition of COVID19. The pilot should be built in coordination with relevant local government and reporting institutions and connect with GBV referral mechanism in Indonesia. With UNDP, She/he will be part of member of evaluation committee for the facilities construction
4. With Local Health agency, selected hospital, and Local Women and Child Protection Office (DPPA), the Consultant will conduct socialization public outreach of movable hospital-based services and available legal services in the country using Behavioral insight approach.
5. Coordination support and expert technical advice in promoting the establishment of Centre of

¹ It should be noted that the type of available services in each province in Indonesia varies and research will be adjusted in accordance with available services in target area.

² The proposed interventions will build upon best practices and lessons learned from research on Behavioral insights for improving GBV services in Argentina, the Dominican Republic, El Salvador and Honduras: <https://www.bi.team/wp-content/uploads/2019/11/Applying-Behavioral-Insights-to-Intimate-Partner-Violence-ENG-3.pdf>

Excellence at selected GBV services centre in hospital, that will enable hospitals to share learning and best practices for sustainability of quality services and replication made by others. This work should lead to the culture of cross learning among GBV services centres to ensure sustainability of this initiative.

6. Advocacy and awareness raising on promoting PPT Bunga Tanjung as Centre of Excellence among Management team, health practitioners of public hospitals in DKI Jakarta and government counterparts are strengthened (if feasible, offline)
7. Advocacy and awareness raising with key/ strategic partners in educating Senior Management team of public hospitals (if feasible, offline), health practitioners of public hospitals in DKI Jakarta and government counterparts on best practices and lessons learned from PPT Bunga Tanjung for improving GBV Service Provision
8. Conduct systemic monitoring framework to prevent any risks and adverse impact during implementation of the project (March-October 2022) and provide final project report to UNDP. The report will consist of (a) results of every output agreed between UNDP with documentation of photos/videos/etc., (b) challenges/risks occur and ways of corrections to overcome challenges/risks, (c) documentation of detail list key stakeholders/institutions who have been involved during process and Consultant and recommendation, (d) recommendation for sustainability.

Expected Outputs and deliverables

The specific outputs/deliverables expected from the Support Consultant for Project Closure are the following:

Deliverables/ Outputs	Estimated number of working days	Completion deadline	Review and Approvals Required
1st Deliverable should consist of the following results: 1. Knowledge sharing and advocacy are facilitated to educate Management team, health practitioners of public hospitals with at least 20 public hospitals in DKI Jakarta and government counterparts on how to use the M&E frameworks (preferred offline, if not feasible online) 2. The use of M&E frameworks with Management team, health practitioners of public hospitals in DKI Jakarta is promoted to at least 20 public hospitals as per local context	7 Working Days	30 April 2022:	Programme Manager DGPRU
2nd Deliverable should consist of: 1. Expert technical advice and coordination support with key stakeholders are provided throughout the formulation stage of Behavioral Insights (BI) research, including support for data collection with selected respondents, attending expert meeting with BI team (in consultation with UNDP) 2. One target public hospital is identified/ selected and agreed upon for hosting the second prototype of GBV movable integrated hospital-based Centre 3. Awareness raising and information sharing on research findings with key partners including public hospitals, Governments, civil society, front liners and media to least 200 high level participants - (if feasible, hybrid to maximise outreach- subject to COVID situation) 4. Partnership agreement established with Government counterparts and	27 Working days	31 June 2022	Programme Manager DGPRU

civil society partners for a joint awareness raising campaign using Behavioral insights with UNDP, UN agencies and the private sector			
3rd Deliverable should consist of the following results: 1. The first GBV movable PPT at selected hospitalis launched with endorsement from high level representatives of Provincial Government with at least 50 participants (preferred hybrid to maximise outreach and live streamed on YouTube, but if not feasible full online) 2. Increased awareness on the innovative concept and service of Moveable PPT service through Socialization of Audio-visual material for awareness raising and promotion in online spaces to at least 30 public hospitals in Jakarta and 10 public hospitals outside Jakarta with the support from the Government counterparts. It should be proven by post test result indicating at least 75% of positive knowledge and attitude change	18 Working Days	30 July 2022	Programme Manager DGPRU
4th Deliverable should consist of the following results: 1. Second version of Moveable GBV 3i (Integrated, Inclusive, Independent) service Centre is developed in selected target area to increase access to essential services for GBV victims in vulnerable area, informed by the findings from BI, including the procedure of services to GBV survivors at location, is also available. 2. Partnership building and coordination support with key strategic partners, including local government of health agency and Women and Child Protection Office (DPPA) to facilitate public outreach and socialization of the second version of movable hospital-based services and legal information at target location/s outside Jakarta (if feasible, offline). This includes socialization of Audio-visual material in online spaces with Government counterparts. It should be proven by post test result indicating at least 75% of positive knowledge and attitude change . 3. Strategic advice and coordination support with key partners to facilitate data collection and Evaluation exercises using Behavioral insight	20 Working Days	20 October 2022	Programme Manager DGPRU
5th Deliverable should consist of the following results: 1. Site visit for promoting PPT Bunga Tanjung with at least 4 provincial representatives outside Jakarta facilitated 2. Final Report is available, consist of:	12 Working Days	30 December 2022	Programme Manager DGPRU

	<p>a. Results of every output agreed between UNDP with documentation of photos/videos/etc.,</p> <p>b. Challenges/risks occur and ways of corrections to overcome challenges/risks,</p> <p>c. Documentation of detail list key stakeholders/institutions who have been involved during process and Consultant and recommendation,</p> <p>d. Recommendation for sustainability</p>			
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III. WORKING ARRANGEMENTS

Institutional Arrangement

The IC will be reporting to UNDP Programme Manager (Mr. Syamsul Tarigan, Ph.D) and Technical Officer (Ms. Nihandini Santi) at DGPRU in seeking approval and acceptance of the above-mentioned outputs. The IC is expected to be in regular contact with the UNDP Technical Officer and Programme Manager at DGPRU and update and report on his/her progress on a month basis.

Duration of the Work

Expected duration of work is 84 working days from March – December 2022. The IC is expected to support the deliverables on a deliverable basis as stipulated in the ToR.

Duty Station

The IC will be home-based.

Travel Plan

Travel will be arranged by Hiring Unit which refers to UNDP rules and regulations. If feasible consultant is expected to travel outside Jakarta for socialisation of second Moveable PPT in selected province/hospital, informed by findings from the Behavioral insights research and, which will be agreed on ad-hoc basis.

IV. REQUIREMENTS FOR EXPERIENCE AND QUALIFICATIONS

Academic Qualifications:

- Master's degree in social sciences, Gender, and International Relations.

Minimum experience requirement:

- Minimum 8 years of relevant experience working at social development sector or research.
- Having experience in working for GBV prevention and strengthening GBV referral services in Indonesia will be highly desirable.
- Having extensive experience in conducting advocacy with GBV relevant stakeholders.

Language Requirements:

- Skills in writing and speak English and Bahasa

Competencies and special skills requirement:

- Has excellent oral communication skills and advocacy skills
- Ability to work under limited supervision
- Strong analytical skills

V. EVALUATION METHOD AND CRITERIA

Cumulative analysis

When using this weighted scoring method, the award of the contract should be made to the individual consultant whose offer has been evaluated and determined as:

- responsive/compliant/acceptable, and*
- Having received the highest score out of a pre-determined set of weighted technical and financial criteria specific to the solicitation.*

** Technical Criteria weight; 70%*

** Financial Criteria weight; 30%*

Only candidates obtaining a minimum of 70 point would be considered for the Financial Evaluation

Criteria	Weight	Maximum Point
<i>Technical</i>	<i>70</i>	<i>100</i>
<i>Criteria A: Qualification Requirements as per TOR:</i>		<i>80</i>
1. Master's degree in social sciences, Gender, and International Relations; PhD is an advantage.		20
2. Minimum 8 years of relevant experience working at social development sector or research.		20
3. Having experience in working for GBV prevention and strengthening GBV referral services in Indonesia will be highly desirable.		20
4. Having extensive in conducting advocacy with GBV relevant stakeholders		20
<i>Criteria B: Brief Description of Approach to Assignment:</i>		<i>20</i>
1. Explaining why you are the most suitable for the work or the relevance of the assigned tasks with experience described		10
2. Provide a brief methodology and approach on how you will conduct the work and completed the expected outputs in timely manner		10