

CONSULTANCY TRAINING: ETHICAL STANDARDS IN MANAGING GENDER BASED VIOLENCE (GBV)

Background

IIRR is an international not for profit Non-Governmental Organization that works with communities to develop innovative yet practical and sustainable solutions to poverty eradication through innovation and community empowerment.

With a grant from the United Nations Trust Fund (UNTF) to End Violence against Women (EVAW), International Institute of Rural Reconstruction (IIRR) is implementing a project entitled; Stop Violence against Women and Girls in Samburu, Marsabit and Isiolo Counties in Northern Kenya.

The project seeks to create enabling environment for greater gender equality, translating commitments into action to reduce Gender Based Violence (GBV), including Female Genital Mutilation or Cutting (FGM/C), early forced marriages, beading for sexual exploitation and other forms of domestic violence. The project goal is for Women and girls in Marsabit, Samburu and Isiolo counties of Northern Kenya to be better protected from SGBV and other harmful cultural practices and survivors to have improved access to services and support (psycho-social, medical, and legal) by December 2018. To achieve this, the project will translate commitments, laws and policies into action to prevent and protect women from violence and other harmful practices. Existing GBV related laws will be enforced, women and girls rights improved and services and protection for survivors strengthened. Building on experiences of International Institute of Rural Reconstruction in Community-led development, the project will increase engagement with key stakeholders including communities (elders, women, youth, girls), religious leaders, teachers, health workers, law enforcers-police, legal department-judiciary, and others raise awareness, change behaviors, build capacity of local actors to protect women and girls and also support GBV survivors.

The project goal is for Women and Girls in Marsabit, Samburu and Isiolo Counties of northern Kenya to be better protected from violence and other cultural harmful practices and survivors of GBV access to services and support to services improved by 2018. The goal is to be achieved through 3 outcomes namely;

1. Cultural and Gender sensitive positive behavior change is influenced and sustained for the protection of women and girls against SGBV
2. Laws and policies to protect the rights of women and girls and prevent violence against them are implemented more effectively through improved practices of law enforcement officials and increased awareness on available legal frame work among the community
3. Response service coordination plan developed and strengthened in Marsabit, Samburu and Isiolo Counties in Northern Kenya

Terms of Reference for Training Project Teams in Ethical Standards in managing Sexual Gender Based Violence (SGBV)

Preamble

Project implementing teams and partners need training so that they can be prepared to help monitor and respond to GBV during the project implementation. They need to understand basic concepts such as definitions, the reasons for the occurrence of GBV, how socio-cultural context influences GBV, as well as practical skills such as nonjudgmental listening skills to offer support to someone who discloses their experience to project staff or partners. Training in basic GBV is planned as part of the process of gender integration and not a one-time activity, but ongoing capacity building opportunities throughout the project implementation cycle and to offer refresher training's from time to time.

Expected number of participants to be trained

- At least 50 Health Care providers
- At least 70 psycho-social counselors

Overall training objective

The training seeks to enhance knowledge and skills among health care providers and psychosocial officers on Sexual and Gender Based Violence (SGBV) response which includes medical management of rape/defilement survivors, SGBV screening process, approaches and SGBV guiding principles. The participants will understand about SGBV in health care set up and how to combat HIV/AIDS among women and girls in the community and help to manage the ethical and safety standards of women and girls affected by Sexual and Gender Based Violence (SGBV). All participants will be trained to (a) understand the complexities of domestic violence, (b) guide women and girls through basic safety planning if necessary, (c) actively listen and empathize with participants (survivors), (d) maintain confidentiality, and (e) recommend community resources as needed to support management of survivors and referrals.

Specific objectives: At the end of the training, participants will;

- Gain skills on SGBV screening process at health care set up (from community level to health care facility level)
- Gain knowledge on ethical standards in SGBV management at the health care set up
- Understand the approaches of managing information with survivors to enhance privacy and confidentiality
- Gain experiences how to minimize under reporting of violence
- Gain knowledge on how to protect the confidentiality to ensure women's/girls safety
- Gain knowledge on how to reduce any possible distress caused to survivors
- Gain knowledge on how to refer women/girls who may request for assistance to available local services and sources of support.
- Learn how to gather evidence through interviews and documentations from survivors
- Learn how to manage the medical requirement and care of rape and defilement cases
- Learn how to manage the medical care for HIV/AIDS among women and girls
- How to manage the consent and disclosure of those affected
- Create short term support mechanisms

- Define Gender and differentiate it from GBV, understand the forms of GBV at different contexts (community, family, and schools); how GBV manifests itself and its impact.
- Ensure safety of survivors and be able to guide them in all decisions they make; including how to guide those who wish to help them

Training methodology

Consultant will be free to employ an interactive training methodology which includes presentations, plenary discussions, Question and Answer, Small group discussions, brainstorming sessions, case studies, role play, games and expert panel interviews, Videos, etc. Lengthy lectures or large group discussions may be minimized as much as possible remembering that most individuals learn best through engaging methods.

Key deliverables/outputs

1. Develop an inception report detailing the process and strategy to be employed to achieve the objective of this training as stated above. It should include a detailed training schedule/plan
2. Prepare training materials and handouts to be given to participants
3. Conduct pre-post confidence evaluations to assess level of knowledge before and after the training.
4. Conduct training sessions for the participants identified and invited by IIRR
5. Compile a training report including the following sections;
 - Executive Summary (max 1 page)
 - Preliminary pages – Acknowledgment, Acronyms and Table of contents
 - Main report to include:
 - i. Background Information: Brief on the training and context;
 - ii. Training purpose and objectives
 - iii. Lessons learnt, best practices and opportunities for improvement
 - iv. Action plans to be implemented by participants
 - v. Recommendations
 - vi. Appendices
6. Present the draft report to IIRR team for review before producing a final draft
7. Submit a Final Training Report to IIRR in both soft/hard copy.

Required qualifications

1. Qualified practitioner with a Degree in a medical field or Counseling Psychology.
2. Over 5 years' experience in SGBV programming in health care set up
3. Proven experience in SGBV response and prevention, building capacities of local partners and providing direct technical support to local organizations
4. Thorough understanding of best practices and strategies in GBV programming and response (case management, psychosocial support, etc.) and GBV primary prevention and risk reduction.
5. Proven experience working in emergency settings or in fragile environments which are prone to conflicts, e.g. the northern Kenya rangelands and pastoralist's contexts
6. Solid experience on planning, reporting, monitoring and evaluation skills
7. Strong skills in training facilitation and report writing

Time line for the training

Successful consultant/trainer will deliver the training within the month of November 2017 guided by the following parameters;

- Run back to back training's involving a total of 120 participants drawn from Health Care Providers and Psychosocial Counselors: (15 HCW's/20 psychosocial workers in Wamba-Samburu; 10 HCW's/15 psychosocial workers each for Kargi-Marsabit and Korr-Marsabit; and 15 HCW's/20 psychosocial workers in Merti-Isiolo.
- Each site training will take Two and a half (2 ½ days), thus a total of 10 days for all 4 training's.
- Up to 6 days will cater for preparation of training, travel to training sites and compilation of training report(s)

Application Process

Interested applicants who meet the required profile are invited to submit an expression of which should include;

1. Technical proposal that summarizes your understanding of the TOR, the proposed approach and tools to be used for the assignment,
 2. Financial proposal providing cost estimates of consultancy fees
 3. Contacts of three organizations that have recently contracted you to carry out a similar assignment
- **Only shortlisted consultants/trainers will be contacted: Send your EOI by Monday, 13th November 2017 to: recruitment@iirr.org**