ASTHA: Strengthening Access to Multi-sectoral Public Services for GBV Survivors in Bangladesh
Scope of Work for the Implementing Partner

Background and context of the project
Gender-based violence (GBV) is a global phenomenon that exists beyond cultural, geographical, religious, social and economic contexts. It is one of the most prevalent and worst forms of human rights violations in the world, which undermines the health, safety and dignity of its victims. The incidence of GBV is alarmingly high in Bangladesh. Despite this high prevalence of GBV, it is important to note that a majority of women (73 percent) who experience partner physical or sexual violence, did not disclose it to anyone. An analysis of the prevalence of violence and the reasons cited for the acts of violence reveals a context where structured gender inequality and deep-rooted patriarchal socio-cultural norms shape the perceptions and behavior of men and women in that society.

The United Nations Population Fund (UNFPA) is, globally and in Bangladesh as well, the lead UN agency addressing the physical and emotional consequences of GBV and promoting gender equality and women’s empowerment. UNFPA has supported the Government of Bangladesh (GoB) in its GBV prevention and response efforts. In this connection, UNFPA with support from the Embassy of Netherlands has recently initiated a 4 year (Nov 2017-Dec 2021) project, ‘ASTHA: Strengthening Access to Multi-sectoral Public Services for GBV Survivors in Bangladesh’, components of which will be implemented through a national NGO. ASTHA is part of UNFPA’s 9th Country programme and is aligned with the National Women’s Development Policy (2011). The project will contribute to the accomplishment of key national development priorities of gender equality and women’s empowerment as detailed in the 7th Five Year Plan (2016-2020) and the National Action Plan to Prevent Violence against Women and Children (2013-2025).

The proposed project will also contribute to the two UNDAF thematic pillars: 1. Develop and implement improved social policies and programmes that focus on good governance, reduction of structural inequalities and advancement of vulnerable individuals and groups and UNDAF Pillar 3. Increase opportunities, especially for women and disadvantaged groups to contribute to and benefit from economic progress. ASTHA will also contribute to the achievement of SDG priorities including SDG 5: Achieve Gender Equality and Empower all Women and Girls, SDG 3: Ensure Healthy Lives and Promote Well-being for All, SDG 10: Reduce Inequality within and Among Countries, SDG 16: Promote Peaceful and Inclusive Societies for Sustainable Development, Provide Access to Justice for all and Build Effective, Accountable and Inclusive Institutions at all Levels.

ASTHA has identified key strategies to achieve the aforementioned outcomes which include capacity development of relevant stakeholders including Government and CSOs; improving service delivery through the establishment and operationalization of women’s help desks at police stations and Courts in project districts; increasing community engagement and awareness creation by strengthening the role of community watch groups in mitigating GBV

1 BBS VAW Survey 2015
risks at the community level, especially in emergency contexts; improving coordination among different sectors; and identifying issues for policy advocacy.

The overall objective of the project is increased utilization of multi-sectoral GBV response services in selected districts of Bangladesh by having in place an effective multi-sectoral referral system so that Gender Based Violence (GBV) survivors have increased access to multi-sectoral response services for GBV survivors, and there is increased positive attitudes among community members about harmful gender norms and behaviors that perpetuate violence.

All activities of ASTHA, under the coordination of the Ministry of Women and Children Affairs (MoWCA) and in collaboration with the police, legal, health and social sectors, will be implemented in 12 upazila\(^2\) (3 selected upazilas and all unions of the each selected Upazila) from Jamalpur, Patuakhali, Bogra and Cox’s Bazar districts. ASTHA targets vulnerable populations at risk of GBV, particularly women and girls who do not have access to multi-sectoral services as a result of poverty, social exclusion, statelessness, geographic distance, extreme weather conditions and lack of transport.

Under the overall guidance of the Chief, Gender Unit of UNFPA and the day to day monitoring and supervision of the ASTHA Project Manager, the Implementing Partner (IP) organization will implement district level activities mentioned under the scope of work, coordinate internal and external communications and liaise with district government stakeholders as and when necessary. ASTHA will be implemented through a national NGO and its scope of work will be as follows:

**Scope of work:**

**Improve Coordination**

- Establishing an intra and inter-agency feedback mechanism and maintaining the GBV MIS database to promote a safe and ethical system for standardized collection, analysis, sharing and management of GBV related data (functional GBV MIS) under the GBV cluster, as a network/forum of GO-NGO working on GBV issues;
- Establishing a model referral pathway engaging multi-sectors in GBV response and make it functional in selected districts [union to district level];
- Establishing linkages with other service providers to ensure district-level alternative and temporary shelter programming options for survivors and their dependents in acute danger
- Forming a referral committee led by the District Women Affairs Officer (DWAO) by engaging GO and NGO multi-sectoral service providers to improve inter-agency coordination in both development and humanitarian settings;
- Providing technical assistance to organize regular meetings of the referral committee to monitor the performance of the GBV referral system in districts;
- Initiating the GBV cluster mechanism at district level following the national model to engage service providers to respond to and prepare for GBV in emergencies and facilitate their regular meetings;

\(^2\) Ramu, Teknaif and Ukhiya in Cox’s Bazar; Golachipa, Kalapara and Mirzaganj in Patuakhali, Dewangonj, Sarishabari and Islampur in Jamalpur; and Sadar, Nandigram and Sonatola in Bogura
Promoting a safe and ethical system for standardized collection, analysis, sharing and management of GBV related data (functional GBV MIS) under the GBV cluster.

Quality assurance systems (protocols, SOPs, data, monitoring, complaint mechanism)

- Providing technical assistance to improve witness recording, evidence preservation and case management systems related to VAW cases in both police stations and at court;
- Developing facility-level protocols and procedures for referring survivors of GBV from union to upazila to district levels;
- Developing guidelines and SOPs for operationalizing the district GBV referral committee for improved referral services;
- Organizing regular meetings and discussions to strengthen linkages between and among union, Upazila and district health services and/or OCC and multi-sectoral services.
- Conducting stakeholder consultations in project districts for mapping the mechanisms and identifying gaps in the referral system in terms of available facilities, resources and capacities of the service providers (emphasizing One Stop Crisis Cells (OCCs) and its linkages from union to divisional level) to develop a referral directory that will be updated on a regular basis

Capacity development

- Deploying a case worker at union level, case manager at Upazila level and case coordinator and legal volunteer at district level to facilitate comprehensive multi-sectoral referral services for GBV survivors;
- Capacity building, including orientation, for the police, prosecutors and court officials to ensure survivor centered responses, adherence to GBV guiding principles and psychological first aid;
- Strengthening the capacity of District Women Affairs Officer (DWAO), and all other service providers at Upazila and district level to ensure effective coordination;
- Developing the capacity of stakeholders and service providers to ensure effective implementation of protocols on GBV prevention and response;
- Strengthening the capacity of Nari Nirjaton Paritirod Committee (NNPC) at all levels to prevent and mitigate the potential risks of GBV and conduct community safety audits as well as identify risk mitigation strategies;
- Training and mentoring of health care providers on Clinical Management of Rape (CMR), Psychological First Aid (PFA) and appropriate referral services;
- Provide GBV case management training to the case workers/managers/coordinators
- Exchanging knowledge and skills for enhancing capacities of service providers to enable optimum utilization of financial and human resources;
- Developing/adapting tools and techniques of GBV case management aligned with international norms and guiding principles and providing adequate briefings, training and orientations to case workers/managers/coordinators from union to district level;
- Implementing GBV guiding principles and developing protocols to ensure that GBV survivors are able to access services through a safe and effective administrative process;
- Enhancing the capacity of stakeholders, primarily the duty bearers, in the performance of their roles and responsibilities to ensure effective protocol implementation;
- Developing the capacity of all stakeholders on different issues from union to district level which includes health, police, legal, Women Affairs department and CSOs.
Direct service delivery

- Establishing 09 women’s help desks in police stations in 09 upazilas3 across Patuakhali, Jamalpur, Bogra and Cox’s Bazar to ensure the availability of secure, safe, welcoming entry points for incident reporting;
- Establishing women’s help desks and waiting rooms in district court premises to ensure the provision of legal information, assistance and referral to appropriate additional services;
- Establishing new and supporting existing Women Friendly Spaces (WFS) for women and girls in makeshift settlements occupied by Rohingya Refugees and host communities in Cox’s Bazar.
- Establishing WFS, as needed in the three other districts during and in the immediate aftermath of disasters (to provide psychosocial support, case management, and referral options).

Strengthened partnerships for addressing GBV

- Developing partnerships with members of the referral network (including OCCs, District WAO, Social Welfare Officer, Civil Surgeon, Superintendent of Police, District Legal Aid Officer, Chief Prosecutor among others) for the delivery of services based on their mandated functions or enter into a Memorandum of Agreement (MoA) with additional partners, as appropriate;
- Forming a referral committee/task force led by the District WAO by engaging GO and NGO multi-sectoral service providers to improve inter-agency coordination in both development and humanitarian settings;
- Supporting the GBV cluster at district level as a network/forum of CSOs working on GBV issues, based on data made available through the GBV MIS system;
- Capacity building of CSOs and non-partner service providers engaged in prevention and multi-sectoral response to GBV on a range of issues;
- Conducting dialogues with CSOs working on preventing and responding to GBV to identify issues for directives and policy advocacy;
- Strengthening GBV case management through capacity development of NGOs including improvement of multi-sectoral services for GBV survivors;
- Provide training to health personnel including OCC staff on CMR and PFA.

Increased awareness among communities on positive gender norms and behaviors.

- Conducting a comprehensive study on women’s access to justice to identify key barriers and potential scope for policy reform;
- Enhancing public awareness on GBV prevention and services through modern mass-media communication and community outreach interventions;
- Observing international days [international day on the elimination of VAW] and publication of human interest stories, Op-Eds and other news articles in print media;
- Awareness raising sessions with women and girls, men and boys on gender norms, GBV prevention and multi-sectoral response;
- Strengthening community mobilization for the identification of GBV and other risks through Community Watch Groups (CWG)/NNPC;

3 Teknaf and Ukhiya in Cox’s Bazar; Kalapara and Mirzagonj in Patuakhali, Dewangonj, Sarishabari and Islampur in Jamalpur; and Nandigram and Sonatola in Bogura
- Documenting and disseminating good practices from project districts to policy makers;
- Developing knowledge products (assessments, studies, research, etc.) for policy advocacy and communication on multi-sectoral services for GBV survivors;
- Developing communication products to be used at community level to change norms on gender and GBV prevention.

Project management

- Developing an M&E and results framework and tools as per the project goal and objectives to achieve results;
- Conduct a base line and project end line assessment
- Submitting quarterly progress reports to UNFPA/MoWCA District Office on the referral system;
- Submitting annual reports detailing implementation processes, results achieved, challenges and lessons learnt;
- Submitting periodic financial progress reports and requests for funds as per UNFPA’s rules and regulation to ensure the smooth implementation of planned activities;
- Overseeing, supervising and providing guidance to the project team to ensure smooth implementation of all activities;
- Engaging a dedicated project team in each district (direct/through partner NGO) for the effective and smooth implementation of ASTHA.
- Organizing regular team meetings and sharing key achievements, recommendations, challenges and opportunities with UNFPA;
- Organizing/participating project implementation and project steering committee meeting jointly organized with other project with MoWCA.

Eligibility Criteria and Selection Process:

National NGOs who have district branch offices or local partners (PNOs) and have previous experience as well as adequate capacity to work in collaboration with district health, police, court, women affairs and social welfare department on multi-sectoral referral services for gender based violence survivors; will be given preference. Interested National NGOs can participate in the bid forming coalitions or consortiums with other National and local NGOs.

The eligible IP will be selected in a transparent and competitive manner, based on their capacity to ensure the highest quality of service, including the ability to apply innovative strategies to meet programme priorities in the most efficient and cost-effective manner.

UNFPA Bangladesh office will review evidence provided by the national NGO following the prescribed format and evaluate applications based on the following criteria:

<p>| Governance and Leadership | The organization has a clearly defined mission and goal that reflect the organization’s structure and context, as well as alignment to UNFPA priority areas with a strong focus on multi-sectoral referral system for GBV survivors. |
| Human Resource           | The organization does not have a history of fraud, complaints or service delivery issues. |
| Human Resource           | The organization has sufficient staff resources and technical expertise to implement the proposed activities. |</p>
<table>
<thead>
<tr>
<th>Comparative Advantage</th>
<th>Monitoring</th>
<th>Partnerships</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The organization does not have conflicts of interest with UNFPA or its personnel that cannot be effectively mitigated.</td>
<td>• The organization’s mission and/or strategic plan focuses on at least one of the UNFPA’s programme areas.</td>
<td>• The organization has systems and tools in place to systematically collect, analyse and use humanitarian programme monitoring data.</td>
</tr>
<tr>
<td>• The organization has experience in the country or field and has a solid reputation in areas related to UNFPA’s mandate.</td>
<td>• The organization has a proven track record in implementing similar activities and is seen as credible by its stakeholders and partners.</td>
<td>• The organization has established partnerships with the government and other relevant local, international and private sector entities.</td>
</tr>
<tr>
<td>• The organization has relevant community presence and an ability to reach the target audience; especially vulnerable populations and hard-to-reach areas.</td>
<td>• The organization can function in multiple districts either through branch offices or partner organizations, for multiple districts.</td>
<td></td>
</tr>
</tbody>
</table>

**Expression of Interest must be submitted following the format:**

**Expression of Interest (EoI)**

**ASTHA: Strengthening Access to Multi-sectoral Public Services for GBV Survivors in Bangladesh**

<table>
<thead>
<tr>
<th>Full name and address of applying organization</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Mandate or mission statement of the organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Max 50 words</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statement of organization’s expertise in the relevant area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Max 200 words</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Short description of the organization’s existing operations in the subject matter areas, including how long the operations have been carried out</th>
</tr>
</thead>
<tbody>
<tr>
<td>Max 300 words</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Short description of proposed implementation modality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Max 250 words</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Determine organization’s suitability to implement ASTHA as per the project results chain attached herewith (Annex 2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Max 200 words</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sustainability plan for ASTHA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Max 100 words</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>An estimated cost for implementing ASTHA, aligned with the scope of work</th>
</tr>
</thead>
</table>

Page 6 of 7
Summary of year wise estimated budget

Proposed human resource plan
Max 1 page

Need to be enclosed as Annexure:
1. Signed forwarding letter on the organization’s letter head
2. Copy of all valid legal registrations authenticated by the head of office
3. Supporting document (copy of agreement) of last 2 projects/programmes, relevant to ASTHA within the last 5 years as evidence of implementation

Procedure of submission:
1. EoI must be submitted in English, one of the UNFPA’s working language.
2. Follow the EoI format; using Times News Roman, size 12, single space
3. Submission deadline: 20 January 2018 before 4 pm
4. All document associated with EoI must be a single document.
5. Only postal submission is accepted using this address:
   Chief, Gender Unit
   UNFPA Bangladesh
   15th Floor, IDB Bhavan (UN Offices)
   Sher-E- Bangla Nagar
   Agargoan, Dhaka
6. Marked the sealed envelope as ‘EoI for ASTHA’.