

TERMS OF REFERENCE

INDIVIDUAL CONTRACT

FOR

LOCAL CONSULTANT

Assignment Title : An assessment under the project titled “Essential SRH Services for the Women & Girls Who Are At Higher Risk of HIV, Cox’s Bazar” at UkhiyaUpazila, Teknaf, Cox's Bazar

Strategic Area : Health, Nutrition and Population

Program : SRH and HIV/AIDS

Agency : Light House

Assignment period : From August 27, 2019 to September 25, 2019

Light House Bangladesh, is going hire an Individual Experienced Consultant to conduct a situation assessment under the project titled “Essential SRH Services for the Women & Girls Who Are At Higher Risk of HIV, Cox’s Bazar” at UkhiyaUpazila, Teknaf, Cox's Bazar. Which could be a base data of the project for further reference and measurement of the project progress and evaluation at the end of the project.

A. General Background:

The Rohingya are a stateless Muslim minority in Myanmar. The latest exodus began on 25 August 2017, when violence broke out in Myanmar’s Rakhine State and 723,342 refugees get entered in Bangladesh. Most arrived in the first three months of the crisis. Besides January 1, 2018 to December 31, 2018 arrived 16,765 and January 1, 2019 to February 28, arrived more 886 people (Ref: Bangladesh Refugee Emergency population fact sheet, as of February 28, 2019).

The vast majority reaching Bangladesh are women and children, and more than 40 per cent are under age 12. Many others are elderly people requiring additional aid and protection. They have nothing and need everything. Nearly all who arrived during the influx have sought shelter in and around the refugee settlements of Kutupalong and Nayapara in Bangladesh’s Cox’s Bazar district. Some have joined relatives there. The enormous scale of the influx is putting an immense pressure on the Bangladeshi host community and existing facilities and services. New spontaneous settlements sprouted overnight, raising concerns over the lack of adequate shelter, water and sanitation, access to basic services, and general protection considerations such as safety for women and girls. The Kutupalong refugee settlement has grown to become the largest of its kind in the world, with more than 600,000 people living in an area of just 13 square kilometers, stretching infrastructure and services to their limits. (Ref: *Overview of Rohingya Refugee Emergency Response and Rohingya Refuge Emergency at a glance of UNHCR*, please see the <https://www.unhcr.org/ph/campaigns/rohingya-emergency>)

The Bangladesh government has responded generously throughout the latest crisis. Local Bangladeshi villages have also taken in the new arrivals. They spared no effort to help, straining their already limited resources. The humanitarian response in Bangladesh remains focused on meeting the massive humanitarian needs and on mitigating the impact of the seasonal monsoon rains. However, additional international support is urgently needed to step up the assistance from purely humanitarian and day-to-day support towards addressing medium-term challenges, including resilience, education, registration, and

programmes to protect the most vulnerable refugees – including children, women and persons with specific needs. (Ref: Overview of Rohingya Refuge Emergency Response and Rohingya Refuge Emergency at a glance of UNHCR, please see the <https://www.unhcr.org/ph/campaigns/rohingya-emergency>)

With the above context a joint visit was made on October 3-4, 2018, which revealed the following issues to be addressed: **a.** Poverty, unawareness coerced to sex work Client’s demand being foreigner creating interest of getting involved with sex work, **b.** Face GBV during stay at streets/parks, **c.** Lack of awareness on condoms and other FP methods (haven’t heard even about the condoms and family planning methods), **d.** Need of Child Protection and shelter while they come out from camp for sex work, **e.** Need of alternative livelihood.

Based on the recommendations joint visit team, a project proposal has been developed and duly submitted to UNHCR, hence, it got grants approval to implement a one year project titled “Essential SRH Services for the Women & Girls Who Are At Higher Risk of HIV, at Cox’s Bazar” which will be implemented through establishing two Drop-In-Centers at Ukhiya and Cox’s Bazar Sader along with extended outreach at Teknaf. with broad Objective and Purpose: Population has optimal access to reproductive health and HIV services, following Project Strategies: **a.**Enhanced access to comprehensive SRH services through establishing two new DICs at Cox’s Bazar and Ukhiya, **b.** Enhance capacity of the targeted community and service providers, **c.**Create supportive environment through strengthening linkage to protection, livelihood services, other SRH/clinical issues by other actors, **d.**Explore the possibility to establish Safe Shelter Home for the homelessness girls and women of the host community and refugees in close cooperation with other stakeholders. Covering targets and type population by geographical locations are given below:

Population: Types & Targets populations by Geographical Locations:

Types of Population	Targeted Population		Total
	Cox’s Bazar (New DIC)	Ukhiya (New DIC)	
Women & Girls from the refugees who are at higher risk of STI & HIV transmission	400	500	900
Women & Girls from the Host community who are at higher risk of STI & HIV transmission	300	300	600
Especially Vulnerable Adolescents from the host community and refugees who are potential to be sex work.	200	200	400
Total	900	1000	1900

With made substantial Coordination Efforts to ensure participations of project management in the central coordination meeting organized by CS office of Cox’s Bazar, Project Management’s regular contacts/liaison and communication with the different wings of Sader hospital, NTP Partners, TB hospital, Department of SS, CW&A, FP and other NGO service providers, quarterly coordination meeting with the local GO/NGO service providers, for ensuring accesses, quality services and smooth implementation to the target populations.

B. Rationale for the Situation Assessment:

Light House already started implementation of its project activities in those selected geographical locations but felt it’s an emerging need of collection of more data following a systematic process, which could be

referred as baseline or based data for the project. This data could be a bench mark to assess or compare with progress data at end of the project. Also, it will help to mapping and estimates a size of the population, which will help project to serve the target populations in much more beneficial way accomplish all planned activities within the time-frame of the project.

The importance of initiating assessment to collect and gather data in a systematic was discussed many times in joint meeting and given emphasis on to take initiatives as the project has no specific baseline data to start with for further progress measurement. Few data and information about Cox's bazar have been revealed during the conduction of Programmatic Mapping among Key Population in Selected Districts/sub-districts (where Cox's Bazar and Teknaf were included) under HIV Program done by Save the Children in Bangladesh (SCibd) during Dec' 2017 to Mar' 2018. However, data gaps related particularly to Ukhiya, has not been met by referring programmatic mapping of SCibd or any other particular study/assessment. Besides UNHCR conducted a need assessment in June 2018 but no focus was given on the Especially Vulnerable Adolescents (EVA). It's to note that beside Most At-risk Adolescent and Adult FSWs, the project has included EVA as target beneficiaries.

Considering this context, as a priority to address this data gaps also for specially Ukhiyaupazila as well as regarding EVA here in this assessment, it has planned to address Ukhiyaupazila and other locations those are covered during in Programmatic Mapping of SCibd and UNHCR will be excluded.

Based on this above context, Light House is going to conduct an assessment covering all required issues in this context, which is cost effective, less time consuming, and also systematic and scientific.

C. General Objective:

To assess and determine current situation (risk and vulnerability) of women and girls who are at risks for SRH/HIV and responses and needs at selected location (Ukhiya) in Cox's Bazar

D. Specific Objectives

- To assess the current situation of women and girls who are at risks
- To determine risk and vulnerability related to SRH and HIV
- To determine associated stigma and discrimination of women and girls who are at risks for SRH and HIV
- To assess the current response on the issues of SRH/HIV among women and girls who are at risks
- To assess and determine needs for SRH & HIV and beyond
- To mapping and estimates the minimum size of women and girls who are at risks, and who are potential for the risk of sex work

E. SCOPE OF WORK

Mostly the field data collection and gathering Main role of 'consultant' is to conduct the Situation Assessment. S/he will be responsible for the following:

a) Responsibility of Consultant:

The responsibility of the Consultant has divided in two part. Part 1 will be to do the preparatory works along with the M&E department of Light House and the part 2 will be for those works where Consultant will be responsible directly to do.

Part-1: Preparatory works along with M&E department of Light House

- Finalize detail methodology and sample of the assessment and review of existing program documents together.
- Develop and finalize tools/instruments and materials for data collection
- Pre-test the design, data collection tools-instruments, planned methodology and do necessary adjustment, if required
- Prepare/develop training schedule, materials, presentation etc. and conduct of training for field data collectors & relevant team members
- Support M&E department of Light House for proper planning, supervision & mitigating problems during field data collection, engaging data collectors
- Analysis of collected quantitative and qualitative data as per analysis plan

Part – 2: Consultant will be responsible directly for

- Draft and finalize the report as per requirement of the assignment
- Progress update meetings with Light House program and M&E team

b) Responsibility of Light House:

The M&E department, Light House, will be primarily responsible to conduct the assessment. Main responsibilities will be-

- Organize meetings with the consultant and program personnel for discussion and finalization of the study design, field strategy and analysis plan
- Facilitate communication between the consultant and relevant program team to plan the field level activities
- Provide data collection team and data management from the existing program team members
- Organize training for the data collection and data management team
- Conduct field data collection (as per the data collection tools, instruments, materials) in line with the data collection plan (both quantitative and qualitative)
- Ensure detailed field note and transcription of qualitative interviews and document them
- Manage data and ensure quality of data-completeness, validity, reliability, timeliness, accuracy and consistency
- Support to analyze quantitative data (provide guidance on program requirement)
- Support to analyze qualitative data (provide guidance on program requirement)
- Support to develop the assessment report
- Organize and facilitate consultative meeting with program team and joint review team to share draft findings (as required)

F. Field visit and other logistic arrangement

The consultant will work as flexible manner. However, this assignment demands to spend time in both desk and the field accordingly. The information collected from the KP will be anonymous. The principal concern will be to ensure that the participants are protected from any harm that might result from their participation in this study (if any). Consultant will arrange his/her, travel expenses and accommodation. The Light House Program team will be assigned data collection team and data management team, organize training, meetings, other logistical arrangement and cost related to field data collection and data management team.

G. Final Product/ Deliverable

- Final Assessment methodology and questionnaires (both in Bangla and English)
- Draft Assessment Report along with both quantitative and qualitative dataset (soft and hard copy)

- Final Assessment Report with specific recommendations after incorporating feedbacks

H. Confidentiality

All the data and other deliverables produced in this Assessment will be treated as the Light House Bangladesh property and the mentioned deliverables or any part of it cannot be sold, used or reproduced in any manner by the consultant without prior permission from the Light House.

I. Contact Person

This assignment will be supervised & coordinated by Zia Uddin Khan | Director – M&E | Light House | BeenaKanon, Road-27, Block-E, Banani, Dhaka | Mobile +88 01773955561 | E-mail: ziauddinak@yahoo.com | website: www.lighthousebd.org

J. Required qualifications of the Consultant

- Master or Post-graduate degree (Health Science, Social Science, Statistics, or any other relevant discipline)
- Strong understanding of HIV/AIDS program in Bangladesh and the program target population, i.e. female sex workers
- Significant professional background in conducting quantitative and qualitative research, especially in HIV/AIDS related issues and/or among the mentioned target population
- The consultant must have strong analytical skills in both quantitative and qualitative data analysis
- Previous experience in conducting similar work for international donors will be preferred
- Strong command in written English and excellent scientific writing skills

K. Application Process:

Interested individual experienced consultant (those who meet the above required qualifications), may submit their technical and financial proposal along with CV and TIN certificate copy to the Chief Executive, Light House, using the following email:

Email :hrna.lh@gmail.com

Application closing date: August 22, 2019.