

Terms of Reference:

Consultant services for Gender, Equity, Disability and Social Inclusion (GEDSI) assessment

GEDSI assessment of MSPNG's DFAT-funded Partnering for Stronger Families (PSF) project

1. Background

The Marie Stopes Papua New Guinea (MSPNG) mission is to ensure individuals' fundamental right to have **children by choice, not chance**. MSPNG works to support the Ministry of Health (MoH) of PNG to implement national SRH strategies and achieve national maternal health goals through the delivery of a broad range of high-quality family planning (FP) and SRH services and health systems strengthening approaches. MSPNG is part of the MSI global partnership, which works to improve the health and quality of life of communities in 37 countries world-wide.

Since 2017, MSPNG has received funding by the Australian Government's Department of Foreign Affairs and Trade (DFAT), managed by PNG-Australia Transition to Health (PATH), to implement the *Partnering for Stronger Families* project. The overarching goal of the project is to contribute to the reduction of maternal, infant, neonatal, and under-five mortality in PNG through the increased coverage and uptake of high-quality FP and SRH services. PSF focuses on reaching women, men, adolescents, people with disabilities, and survivors of sexual and gender-based violence (SGBV) across PNG. PSF supports service delivery, training and quality assurance through various service delivery mechanisms, including National Family Planning and Training Program (NFPTP) providers, MSPNG hospital embedded providers, outreach teams, and MSPNG's contact centre. This initiative also seeks to enhance partnerships, collaboration, and capacity at national and sub-national levels with government and other stakeholders.

2. Purpose and objectives

The PSF project is due to end in December 2024, and MSPNG wishes to conduct an assessment of the extent to which GEDSI considerations and approaches have been embedded and actioned within the project from inception in 2017 to date. Findings and recommendations will be used internally to inform proposal development for any further phases of the project, as well as broader programming, and will also be shared with project stakeholders including PATH.

The objectives of the GEDSI assessment are to:

1. Review the GEDSI approaches employed throughout the PSF project and evaluate the achievements, challenges, and lessons learned concerning GEDSI
2. Analyse the effectiveness of MSPNG's GEDSI Strategy in informing PSF programming, and provide recommendations for improvements
3. Formulate actionable recommendations for a GEDSI approach and strategy/strategies for the design of any further phases of the project
4. Document the GEDSI assessment process and methods to inform future GEDSI analyses of other MSPNG projects.

The following questions will guide data collection on GEDSI:

1. To what extent has the project been proactive in reaching adolescents, people living with disabilities, survivors of SGBV, and other marginalised groups? How has MSPNG's GEDSI Strategy been applied within the project, and to what extent have the applied approaches/strategies been gender transformative versus responsive? What factors have facilitated or hindered the project's ability to reach marginalised groups?
2. What are the norms and practices in PNG contributing to FP/SRH access barriers for marginalised groups? How can MSPNG's GEDSI Strategy be strengthened, and what strategies can MSPNG employ to better address barriers and engage and reach different marginalised groups?
3. What are the possible risks faced by marginalised groups in accessing FP/SRH services, and what strategies can MSPNG use to help mitigate these risks?
4. How can MSPNG apply the lessons learned from this assessment to our health systems strengthening approach and the next phase of the PSF project?

3. Scope of work

The consultant will be responsible for:

- Developing the protocol and research tools for the assessment as guided by MSPNG
- Conducting the research and analysing the results
- Presenting initial results and conclusions to MSPNG team members through a sense-making workshop
- Integrating feedback from the workshop into a final evaluation report.

4. Existing information sources

The consultant/s should use the following sources:

- a. PSF project documents and reports, including media reports
- b. MSPNG's GEDSI Strategy
- c. Peer-reviewed and grey literature on GEDSI approaches in the context of similar projects
- d. Interviews with relevant project staff and stakeholders (excluding clients).

The consultant will also have access to service data from MSPNG's digitised client record system as well as relevant data from MSPNG's annual Client Exit Interview (CEI) survey. They will be required to protect the confidentiality of any personal data relating to clients or service providers.

5. Methodology

The consultant will use a mix of quantitative and qualitative analysis to answer the broad research questions outlined above. These are likely to include:

- A literature review of the broader FP/SRH environment in PNG with a focus on access barriers for marginalised groups, as well as GEDSI approaches in the context of sexual and reproductive health service delivery and health systems strengthening approaches
- Analysis of service data from the teams/service delivery sites supported through the PSF project
- Interviews with relevant service providers as well as key members of MSPNG's support office team
- Review of data from MSPNG's CEI survey.
- Key informant interviews with other relevant stakeholders (excluding clients) as needed.

Activity/deliverable	Deadline
Signing of contract with the consultant	13 th Nov 2023

Initial informational meeting with relevant members of the MSPNG team	14 th Nov 2023
Draft protocol submitted	17 th November 2023
Final protocol approved	22 nd November 2023
Research and analysis activities completed	8 th December 2023
Preliminary results presented to MSPNG team for feedback and sense-making	15 th December 2023
Draft report submitted	19 th January 2024
Final report approved	31 st January 2024

6. Skills and experience

The consultant/s will need the following minimum qualifications, skills and experience:

- A post-graduate degree in relevant subject (Gender, Public Health, International Development, Evaluation etc.)
- Experience working in the field of gender equality and social inclusion programming, preferably with expiring in the areas of health, research and/or conducting GEDSI analyses.
- A good understanding of sexual and reproductive health, including family planning
- Demonstrated experience using both quantitative and qualitative methods, including design of GEDSI analyses or similar experience. Experience evaluating DFAT/PATH-funded projects is desirable.
- A good understanding of PNG's health system, including current strengths and challenges
- A sound understanding of gender, equity, disability and social inclusion best-practice in health programming
- Fluency in written and spoken English. Tok Pisin desirable.
- Experience delivering presentations and facilitating group discussions
- Experience working in development projects in PNG or Pacific Island Countries
- A pro-choice supporter of sexual and reproductive health rights for all
- Highest level of integrity and ethics including a commitment to protecting the confidentiality of individuals and organisations and to safeguarding children and vulnerable adults.

7. Logistics and procedures

The consultant/s will be responsible for their own office space, IT software and hardware, communications, transport and logistics, with the exception of:

- Organisation of the initial meeting with the MSPNG team.
- Extraction and compilation of relevant MSPNG datasets.
- Organisation of the end-of-project workshop.
- Any printing or publication costs relating to the final report.

Support for travel arrangements (in line with MSIAP and MSPNG's travel policy) may be provided on request.

8. Outputs/deliverables and remuneration

The consultancy fee will be paid based within 30 days of submission of invoices on completion of evaluation deliverables as detailed below:

- 30% on submission of the approved evaluation protocol
- 50% following presentation of preliminary results at the end-of-project workshop

- 20% on submission of the approved final report

9. Reporting

The consultant/s will report to MSPNG's Director of Projects, Marie Mondu (Marie.Mondu@mariestopespng.org.pg).

Rights and ownership of all data, reports and other outputs relating to this evaluation will remain with MSIAP and MSPNG.

10. Submission of proposals and selection process

Interested individuals / agencies should apply no later than **COB 3rd November 2023**. Applicants are encouraged to apply early, as interviews may begin before the application deadline. Applications should include:

- Curriculum vitae for all lead consultants, including references
- At least two samples of a report from a similar evaluation or piece of research conducted by the consultant/s
- Short proposal addressing the above terms of reference, outlining sufficient detail about the methodology to assess whether this will allow for the research questions to be answered
- Budget, broken down by each activity, including travel costs and additional expenses incurred.

Applications and enquiries should be directed to Sara Hudson (Senior Advisor, Programme Design and Development): sara.hudson@msichoices.org.au