

## Terms of Reference: Research consultancy to deliver gender equality and social inclusion (GESI) analysis in two MSI country programmes.

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### Background

MSI Reproductive Choices (MSI) is a non-profit, non-government organization (NGO), specialising in the delivery of high quality sexual and reproductive health and family planning services (SRH/FP). MSI globally works in 37 countries, empowering millions of women, girls and their families across the world to make informed decisions about their reproductive health so they can fulfil their economic, social and political potential. In 2022 we estimate that our teams were supporting 80,000 women and girls to access reproductive healthcare — including abortion and contraception — every day.

### Gender equality and social inclusion (GESI) programming at MSI

MSI aspires to be gender transformative at every level of our operations. For more information on our organisational commitment to gender see [here](#). MSI's GESI programming focuses on reproductive empowerment. This means expanding the ability of the populations we serve to make strategic life choices in a context where this ability was previously denied to them. We focus on programming which builds the decision-making and agency of vulnerable populations to assert their opinions, desires, and interests in ways that shape discussions, make and influence decisions, and challenge and change individual and community circumstances towards improved SRH outcomes. We look for opportunities to engage men and boys to support women and girls, to address their own reproductive health needs, and to help create positive change in their communities and families. GESI analysis is critical in helping us to understand and address the power dynamics, discriminatory social norms and harmful practices that affect access to sexual and reproductive health and rights access for different populations.

### MSI and Global Affairs Canada (GAC)

GAC is providing MSI with core funding to implement the *Advancing Sexual and Reproductive Health and Rights* project. The award is expected to help catalyse MSI's progress towards GESI transformative programming and support Access Pillar 1 and Enabling Pillars 2 and 3 of [MSI's 2030 strategy, Your Body, Your Choice, Your Future](#). GESI analysis is a key deliverable in the inception phase of this funding.

**MSI Senegal** In 2011, MSI launched a programme in Senegal to improve access to family planning across the country. Since then, MSI Senegal has become a leading sexual and reproductive healthcare provider in Senegal, working with the Government of Senegal and other stakeholders to ensure all women and girls – including those from underserved and marginalised communities - can access affordable services that meet their needs. In Senegal, many women and girls are unable to access modern contraception.

**MSI Tanzania** Since 1989, MSI Tanzania has worked to increase access to high-quality, affordable sexual and reproductive health services, ensuring quality healthcare is available to even the hardest-to-reach clients. MSI Tanzania's projects are designed to fill gaps in provision and reach those who have no alternative access. The country programme has a strong focus on reaching adolescents, those living in poverty, and other marginalised groups, including people with disabilities. MSI Tanzania has recently completed a GAC funded project titled: "Owning Their Reproductive Health Choices: Tanzanian Women and Girls Decide". The project was implemented in 14 regions of Tanzania with the lowest modern contraceptive prevalence rates, to promote ownership of reproductive health choices for Tanzanian women and girls with a perspective of gender as a key determinant for utilization of SRH services and rights. This

consultancy will be able to draw on insights from the gender analysis, monitoring and evaluation activities completed under this project.

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## Objectives

The overall **objective of the consultancy is to deliver gender equality and social inclusion (GESI) analysis** that will help MSI teams in Senegal and Tanzania to design and deliver smart, targeted gender transformative sexual and reproductive health (SRH) programme activities that meet the needs of men, women, boys, and girls, the vulnerable and marginalized in their context.

The GESI analysis should answer the following key questions:

1. How will the different roles and statuses of women, men, boys, girls, people with disabilities and other marginalized persons affect MSI programme's effectiveness and the sustainability of its results?
2. How will MSI programme's work affect men, women, boys, girls, people living with disabilities and other marginalized persons differently, and how can we adjust our interventions to ensure we do not perpetuate inequalities?

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## Proposed methodology

**We propose a two-stage approach to the GESI analysis for each of the two MSI programmes.**

While detailed methods should be proposed by the consultant, we expect the GESI analysis to draw on the The Gender Analysis Framework (GAF)<sup>1</sup> and its four domains (access use and control or resources, practices, roles and participation, beliefs and misconceptions, institutions, laws, and policies), to organize information about gender and social differences.

### **Step 1: Secondary data collection and analysis**

The first phase of the GESI analysis should be a review of available secondary data (quantitative and qualitative, published and grey literature) and analysis of this information using the GAF.

This analysis should seek to explore existing data and insights into the following in each context:

- Differences in women's and men's, people with disabilities and other vulnerable and marginalized groups' access to assets, resources, and health services.
- Differences and inequities in women and men, people with disabilities and other vulnerable and marginalized groups' use of time between paid, unpaid, and volunteer labour and care-taking responsibilities in the household and community.
- Differences and inequalities in leadership roles, decision-making, and legal status.

The consultant will be responsible for developing a secondary data collection plan that can be applied to each MSI country programme. The plan should include a data collection matrix, which includes the gender-related research questions to be asked, the data to be gathered, the source of the data, who will collect it, methods for data collection and analysis, and how the information will be used.

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<sup>1</sup> Various sources, including: <https://gender.jhpiego.org/docs/Jhpiego-Gender-Analysis-Toolkit-for-Health-Systems.pdf>

## Step 2: Primary qualitative data collection

Following a review of the available secondary data and insights, the GESI analysis should then include a round of primary qualitative data collection, designed to explore and expand on any gaps or areas of interest identified through the desk review.

The consultant will be responsible for developing the protocol and instruments for primary qualitative data collection in each country. While we intend the final protocol for the qualitative data collection to be informed by the secondary data analysis, **for the purposes of responding to this Terms of Reference, consultants should use their experience of similar GESI analysis to suggest the scale and scope of qualitative research they expect to be required (e.g., key study populations, methods and sample size/ number of interviews).**

The analysis of the primary data should focus comparing information about men, women, boys and girls, vulnerable and marginalized populations and consider other different categories of women and men (e.g., by ethnicity, sexual orientation, age, class, caste, residence, disability, and race). These comparisons should reveal where there are gaps and inequalities that are likely to affect women's or men's participation rates, leadership, access to services, uptake of healthy behaviours or treatments, or that subject men or women to differential risks and vulnerabilities affecting their health. The analysis should also provide an understanding of why these gaps and disparities exist and how they affect men's and women's opportunities and aspirations.

Further, the analysis should include a constraints analysis, focused on identifying GESI-based constraints and opportunities that can impede or facilitate (also referred to as GESI determinants of health) the achievement of health objectives.

**Note:** We also expect the proposed methodology to **ensure a Do No Harm Approach** and encourage the consultant to address this in their proposal.

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## Deliverables

The consultant will be required to produce the below deliverables.

**Note: all key deliverables will be required in English for Tanzania and French for Senegal**

1. Secondary data collection plan.
2. Summary of secondary data analysis, including key gaps.
3. Primary qualitative data collection protocol and instruments for each country.
4. Supervision of primary qualitative data collection activities in each country.
5. Submission of qualitative transcripts and analysis files.
6. Final summary report for each country.
7. Debrief presentation for each country.

## Table of responsibilities

	Consultant	MSI Global Support Team	MSI Country Programme Teams
<b>Development of the secondary data collection plan</b>	Lead on the development of the secondary data collection plan	Provide feedback on and sign-off on the plans for both programmes	Provide input into the plan for their programme, in particular and potential data sources

<b>Summary of the secondary data analysis</b>	Lead on the secondary data analysis and summary	Provide feedback on the secondary data analysis summary for both programmes	Provide feedback on the secondary data analysis summary for their programme
<b>Development of a primary data collection protocol(s) and instruments</b>	Led on the development of the data collection protocol and instruments	Provide feedback on and sign-off for both programme protocols	Provide feedback on and sign-off for their programme protocol
<b>Ethics approvals*</b>	Prepare the protocol and submission documents for the necessary ethics approvals	Advise on and support with the submission of the protocol to the MSI ERC	Advise on and support with the submission of the protocol for national/local approval
<b>Recruitment and training of in-country research assistants</b>	Lead on the development of enumerator training materials and supervise the delivery of the training	Review training materials	Recruit and contract local research assistants/ team to undertake primary data collection
<b>Data collection**</b>	Supervise and provide technical support during data collection		Supervise and manage the logistics of data collection, including transcription
<b>Primary qualitative data analysis</b>	Finalise any qualitative research data outputs (e.g., transcripts) and complete qualitative analysis	Provide input into the analysis approach	Provide input into the analysis approach
<b>Draft report and presentation to the MSI team</b>	Lead on the drafting of a report and presentation to the MSI team	Provide feedback on the report/ presentation	Provide feedback on the report/ presentation for their country
<b>Final report</b>	Ensure MSI comments are reflected in the final report	Sign-off on the final report	

\* Necessary ethics approvals may depend on the approach taken to the primary qualitative data collection, but we assume at minimum that national or local approval will be required so suggest factoring this into proposed workplans.

\*\* Proposals should specify a proposed approach to managing and delivering the primary data collection, including whether supervision and support will be managed remotely or in person and whether the consultant has existing contacts in-country that can be leveraged (or if the recruitment and oversight of research assistants will need to be managed by the MSI country programme).

**The MSI Country Programme teams, with the support of the MSI global team, will use the findings from the GESI analysis as the basis for a synthesis and strategy design workshop. This activity is beyond the scope of this consultancy.**

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## Consultant profile

The consultant must be pro-choice, committed to an individual's right to control their own fertility, and able to respectfully navigate differing opinions and cultures.

Qualifications:

- Postgraduate degree in relevant area, or equivalent professional experience.

Experience:

- Significant and demonstrated experience working in the project regions. In-country connections in either or both locations (to help facilitate research fieldwork) an advantage, but not essential.
- Demonstrated skills and experience in qualitative research methods and analysis, ideally in the NGO sector.
- Significant demonstrated experience of undertaking gender quality and social inclusion (GESI) analysis to inform programme design.
- Demonstrated experience of research into the themes of family planning, sexual and reproductive health.

Skills:

- Excellent oral and written communication in English and French.
- Ability to summarise findings in creative, engaging ways.
- Ability to drive project forward with collaborating teams juggling multiple other priorities.

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## Remuneration

Consultants should provide a detailed budget breakdown in their proposal. This should cover all costs associated with delivering the consultancy, in line with the responsibilities and deliverables outlined above. The budget should include the expected LoE (in days) for all members of the consultancy team and any costs in addition to consultancy team time (e.g., travel).

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## Applications

Applications should include:

1. A short response (max 10-pages) to the approach proposed in this ToR, including details of how the consultant expects to support the deliverables outlined, including a high-level workplan with timings and budget breakdown.
2. A capacity statement outlining the agency or individual's fit for the consultancy, in line with the profile described above.

MSI invites qualified consultants to **submit applications by midnight (GMT) on September 24<sup>th</sup>, 2023.**

Completed applications should be sent by email to Georgina Page, Head of SBC and Inclusion, [georgina.page@msichoices.org](mailto:georgina.page@msichoices.org).

Any questions can be addressed to Francis Kadiri, Senior GESI Advisor ([francis.kadiri@msichoices.org](mailto:francis.kadiri@msichoices.org)).