



TERMS OF REFERENCE

CONSULTANCY ON WORKSHOP FACILITATOR

NATIONAL MULTISTAKEHOLDER MEETING ON ADOLESCENT SEXUAL REPRODUCTIVE HEALTH AND RIGHTS

KEY INFORMATION:

PROJECT TITLE	SOLUTIONS FOR SUPPORTING HEALTHY ADOLESCENTS AND RIGHTS
	PROTECTION (SHARP)
APPLICATION	
DEADLINE	4 TH NOVEMBER, 2024

BACKGROUND INFORMATION

The Network of African National Human Rights Institutions (NANHRI) is a regional membership organization consisting of 47 National Human Rights Institutions (NHRIs) and whose vision is a continent with an enhanced human rights culture and justice for every African. With funding from The European Union, NANHRI is implementing a four-year programme dubbed *Solutions for Supporting Healthy Adolescents and Rights Protection (SHARP)*, in Kenya, Tanzania, Democratic Republic of Congo and Zambia, and at regional level (East African Community, International Conference on the Great Lakes Region). The programme's aim is to contribute to improved adolescents' sexual and reproductive health and rights (ASRHR) in the Great Lakes region.

One of SHARP's objectives is improving synergies between various sectors via multi-sector engagement driven by adolescents. SHARP enhances multi-sector collaboration at subnational, national, and regional level through Medicines Transparency Alliance (MeTA) approach. MeTA multi-actor engagement is a safe space where the NHRIs, public- and private sectors, civil society, multilateral organisations, such as the WHO and UNFPA, can meet to engage in policy dialogue. The MeTA approach emphasizes on the importance of dialogue and collective learning. By bringing together stakeholders from different sectors, MeTA aims to improve innovation, decision-making processes, and actions taken to enhance access to medicines. Presentations on multi-stakeholder approaches to ASRHR advocacy approaches will be shared by various resource persons from the partner organizations.

According to WHO more than two billion people lack reliable access to essential medicines in the developing world.¹ Average availability of medicines in public sector facilities in developing countries is just 34%. People are frequently driven to the private sector where availability is higher at 63.2% but prices are often unaffordable.



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¹ WHO (2004). World Medicines Situation Report

The Sub-Saharan Africa records high fertility rates, early age at birth of first child, and high birth rates among adolescents are closely associated with the risk of HIV infection and cervical cancer. It is also estimated that close to 70,000 maternal deaths annually (13%) are due to unsafe abortions. Yet universal access to Reproductive Health and Rights is unavailable for millions of young women and girls living in low- and middle-income countries. Of the 32 million adolescents aged 15-19, 14 million don't have modern contraception. At least 10 million unwanted pregnancies occur among this age group, leading to 5.7 million abortions, the majority of which are unsafe².

However, decision-makers often refuse to concede the need for ASRH services and commodities. To succeed, we need to convince decision-makers of the importance of investing in ASRHR, strengthen their understanding of it, shift their conservative/negative attitudes and create political incentives with evidence-based recommendations for girls and vulnerable adolescents (marginalized, discriminated, out-of-school, poor, disabled etc.). It is based on this background that NANHRI seeks to contract the services of a consultant to conduct a two-day National Multistakeholder Forum on ASRHR in Dar es Salaam, Tanzania.

MAIN TASKS OF THE CONSULTANT

The Facilitator will, in close collaboration with the Programme Officer, perform the following tasks:

- 1. Design the programme of a 2-day workshop, including its process and methodology, and detailed guidelines for inputs from workshop participants).
- 2. Facilitate sessions on:
 - Linking and Learning in ASRHR by creating linkages between regional and national advocacy work to addressing SRH challenges including increased domestic financing for health:
 - Existing gaps on SRH Legal Policy Frameworks in Tanzania;
 - Experience sharing by stakeholders on their respective SRHR, fostering networking and identifying potential areas for collaboration;
 - Opportunities/Challenges faced by CSOs in addressing ASRHR in Tanzania;
 - Government initiatives, policies, and priorities related to SRHR, encouraging collaboration and alignment of efforts;
- 3. Catalyze discussions on effective advocacy methods, reinforce the need for sustained efforts, and strategize actionable follow-up steps to ensure the implementation of agreed-upon interventions; and
- 4. Guide in development of an action plan towards the end of the workshop that can be assessed over the implementing period.

EXPECTED OUTPUT

The Facilitator shall be responsible for facilitating sessions during the Multistakeholder Forum, manage a coherent workshop resulting into good advocacy strategies in advancing the realization

 $^{^2\} https://www.guttmacher.org/sites/default/files/factsheet/adding-it-up-investing-in-sexual-reproductive-health-adolescents.pdf$



of ASRHR, provide technical advice and support to participants during the workshop on **11**th **and 12**th **November, 2024.** Finally, shall submit a report upon completion of the workshop.

The following outputs will be expected:

- Identification of priority advocacy interventions and gaps in ASRH within Tanzania.
- Multi-sectoral action plan development to address the identified gaps.
- Enhanced coordination, information flow, and evidence-based decision-making mechanisms.
- Strengthened engagement processes and partnerships to bolster ASRH initiatives.
- Collaboration for improved commodities security and prioritization of Maternal and Adolescent health.

DURATION OF THE TASK

The work will be done for a total of 4 days. The facilitator will have one day to discuss and develop the workshop programme and organize session's coordination, two days of workshop facilitation and a day for compiling workshop report.

ORGANISATIONAL POSITION

- The Consultant will work in close collaboration with the SHARP Programme Officer
- The Consultant will be line managed by NANHRI

COMPETENCIES AND QUALIFICATION OF THE CONSULTANT

- i. At least a Master's Degree or equivalent in Law, Public Health, Public Policy, Sociology, Development Studies, Economics or related Social Sciences.
- ii. Demonstrable relevant working experience in the health sector of at least 10 years preferably on ASRHR, policy and advocacy at national and regional level including working with NHRIs.
- iii. Should be able to communicate effectively in English
- iv. Hard-working, collaborative, and committed to NANHRI's values
- v. Must be a Tanzanian Resident.

Interested candidates are requested to submit their expression of interest containing their profiles/detailed CV quoting their charges, to the email address below not later than **Monday 4**th **November, 2024.**

Attn: Executive Director to;

info@nanhri.org:

cc: rathewa@nanhri.org

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Kindly note that only shortlisted candidates will be contacted.

