



Initiative Africa

**VIOLENCE AGAINST WOMEN AND GIRLS IN ADDIS ABABA
DURING THE COVID-19 PANDEMIC**

Terms of Reference

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Introduction

Violence against women and girls (VAWG) is any act of gender-based violence (GBV) directed against a woman because she is a woman, or that affects women disproportionately. Over 35% of the world's women have experienced some form of violence in their lifetime, most at the hand of their husbands or partners, and an estimated 7% have been sexually assaulted by non-intimate partners.¹ VAWG is a fundamental violation of human rights that requires greater attention, investment and action by governments, development partners and the private sector.

The impact of VAWG is most grave for survivors and can result in profound, long-term consequences to their health and well-being. VAWG also incurs high costs for households, communities, employers and governments, including as a result of the direct financial costs of responding to VAWG, and the indirect productivity costs that result from it, e.g., absenteeism, lost wages, productivity and women's long-term earnings. A UN study estimated that the global cost of violence against women was US\$1.5 trillion in 2016, equivalent to approximately 2% of the global gross domestic product (GDP), or about the size of the Canadian economy.²

VAWG in Ethiopia

Levels of sexual and gender-based violence are high in Ethiopia. Although most incidents are unreported - 70% of women who experienced physical or sexual violence never sought help or told anyone - the 2016 Ethiopian Demographic and Health Survey (EDHS) indicates that nearly one-quarter (23%) of Ethiopian women have experienced physical violence at some point in their lives, and 10% of women 15-49 have experienced sexual violence. Over a third of ever-married women (34%) are survivors of physical, sexual, or emotional violence by their spouse, although rape is not a crime when committed by husbands against their wives.³

Although women and girls are at greatest risk in their own homes and families, they are vulnerable to VAWG in a range of contexts and settings, and some populations, such as women migrants, domestic workers, sex workers, and young women and girls, face greater risks. Other factors that increase women and girls' risks include low education; previous exposure to violence (particularly as a child); social acceptance of violence; and weak legal sanctions and lack of policies aimed at preventing or responding to VAWG.⁴ Acceptance of violence-supportive cultural and social norms is

¹WHO, Department of Reproductive Health and Research, London School of Hygiene and Tropical Medicine, South African Medical Research Council (2013). Global and regional estimates of violence against women: Prevalence and health effects of intimate partner violence and non-partner sexual violence.

²Ibrahim, Zainab, JayanthiKuru-Utumpala, Jay Goulden (2018). Counting the Cost: The Price Society Pays for Violence against Women. CARE International

³Ethiopia Demographic and Health Survey (2016)

⁴ErikaMcAslan Fraser (2012). Risks, effects and prevalence of VAWG. Governance and Social Development Resource Center.

widespread among both women and men in Ethiopia: nearly two-thirds (63%) of Ethiopian women believe that a man is justified in beating his wife in some circumstances.⁵

VAWG during COVID-19

Violence against women and girls remains a major global public health and women's health threat during emergencies. Violence against women is highly prevalent in most countries. Intimate partner violence is the most common form of violence. Globally, 1 in 3 women worldwide have experienced physical and/or sexual violence by an intimate partner or sexual violence by any perpetrator in their lifetime. Most of this is intimate partner violence.

As the covid-19 pandemic intensifies, its gendered effects have begun to gain attention. Though data are scarce, media coverage and reports from organisations that respond to violence against women reveal an alarming picture of increased reports of intimate partner violence during this outbreak, including partners using physical distancing measures to further isolate affected women from resources.

Violence against women tends to increase during every type of emergency, including epidemics.⁶ Women who are displaced, refugees, and living in conflict-affected areas are particularly vulnerable. While data are scarce, reports from China, the United Kingdom, the United States, and other countries suggest an increase in domestic violence cases since the COVID-19 outbreak.⁷

According to one report, the number of domestic violence cases reported to a police station in Jingzhou, a city in Hubei Province, tripled in February 2020, compared to the same period the previous year.⁸ The health impacts of violence, particularly intimate partner/domestic violence, on women and their children are significant. Violence against women can result in injuries and serious physical, mental, sexual and reproductive health problems, including sexually transmitted infections, HIV, and unplanned pregnancies.

These reports are disturbing yet predictable. Globally, 30% of women experience physical or sexual violence by an intimate partner in their lifetime.⁹ Such violence can increase during humanitarian crises, including conflict and natural disasters. The gendered impacts of infectious disease epidemics are less understood and acknowledged.

⁵Ibid.

⁶Melissa Godin, "As Cities Around the World Go on Lockdown, Victims of Domestic Violence Look for a Way Out," Time, March 18, 2020, <https://time.com/5803887/coronavirus-domestic-violence-victims/>

⁷ Women's Aid UK, "The Impact of COVID-19 on Women and Children Experiencing Domestic Abuse, and the Life-Saving Services that Support Them," March 17, 2020, <https://www.womensaid.org.uk/the-impact-of-covid-19-on-women-and-children-experiencing-domesticabuse-and-the-life-saving-services-that-support-them/>

⁸Bethany Allen-Ebrahimian "China's Domestic Violence Epidemic," Axios, March 7, 2020, <https://www.axios.com/china-domestic-violencecoronavirus-quarantine-7b00c3ba-35bc-4d16-afdd-b76ecfb28882.html>

⁹WHO. Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence. World Health Organization, 2013.

VAWG during COVID 19 in Ethiopia

Undeniably, Ethiopian women and girls experience violence in a variety of contexts, including in the family and home, at work and in the community, both during times of peace and conflict. Prior to the COVID-19 pandemic, violence against women and girls (VAWG) was recognized as a pervasive violation of human rights, a national health problem and a challenge for the social and economic development of the community.

Increased VAWG is closely connected to the national measures taken to contain and prevent the spread of COVID-19, including declarations of the states of emergency that restrict mobility and include self- stay-at-home options, requirements for quarantine and self-isolation, closing of schools and workplaces, and reductions in public transportation routes. Many women are now trapped in their homes with their abusers, leaving them without the vital support and protection that they need. Without access to private spaces, many women struggle to make a call or seek help online.¹⁰

Evidence show that measures being introduced to prevent the spread of COVID-19 are inadvertently putting women and girls at increased risk of violence, including domestic violence, intimate partner violence, sexual assault/rape, sexual exploitation and harassment, and abuse from male-dominated security forces and other state/community officials tasked with enforcing movement restrictions and quarantine measures.¹¹ Girls who are out-of-school as a result of COVID-19 are at increased risk of being illegally forced into underage unions/marriages in some regions of Ethiopia.

Currently, due to the state of emergency and restrictions of movement in place caused by the COVID 19 pandemic, there are more news of increased violence, abuse and exploitation of women and girls on mainstream and social media.¹² For many reasons the victims are not going to the police immediately after the incident, in time to collect medical evidence and press charges against the perpetrator. They consider that such services may not be available during the pandemic. As a result, many violence incidences including rape cases go unreported and many women have to endure repeated violence. Consequently, sufficient VAWG data is not readily available to policy makers and practitioners for evidence-based planning and response.

This TOR is developed by Initiative Africa in collaboration with Addis Ababa Women and Children Affairs Bureau in order to guide the survey on VAWG as part of it gender equality program. The assessment reports will contribute to the availability of sex disaggregated data and gender analysis that would be used to inform emergency interventions, and longer-term response and recovery planning.

Purpose and Scope of the Survey

Given increasing demand of reliable and comparable data on VAWG by the government, NGOs and donors community there is a consensus that creating concrete indicators on VAWG is a step towards achieving and understanding the various causes of domestic violence in the country. Currently there

¹⁰Policy Brief: The Impact of COVID-19 on Women, United Nations (9 April 2020), p. 17. Retrieved from: https://www.un.org/sites/un2.un.org/files/policy_brief_on_covid_impact_on_women_9_apr_2020_updated.pdf

¹¹Retrieved from: <https://africa.unwomen.org/en/news-and-events/stories/2020/04/covid-19-and-the-link-to-violence-against-women-and-girls>

¹² <https://www.youtube.com/watch?v=sb7NSrZTckM>

is no established system for systematic collection and analysis of VAWG-related data, which would link various actors that play key roles in dealing with VAWG, it's therefore is important to take stock of the current situation of violence against women. Findings from this Survey will be drawn on to clarifying indicators and setting baselines to track progress made in fighting VAWG.

Methodology

The survey should be representative of the Addis Ababa and its surrounding with sampling size drawn on stratified basis to ensure adequate representation of the diverse geographies and population groups in the country. If the bidder has any pertinent suggestion other than the proposal made, then the bidder could suggest that with note of points. It could be discussed accordingly in the pre-bid or pre- award meeting(s). While submitting the proposal, please ensure that WHO survey methodology is followed.

The Consultant is expected to provide the required technical and managerial leadership to complete the survey in Addis Ababa. The Consultant has overall responsibility for the proper technical and ethical standards of all phases of the survey. The main purpose of the survey is to generate information and data on: 1) the current capacities and organizational capabilities of the institutions involved to address/confront issues of violence against women/girls and to address gender and gender-based social issues broadly within their mandates; and 2) gender-based violence, variation and prevalence; the vulnerability of women to VAW/G; and VAWG-specific advocacy and support service provision-related to both institutional/organizational environments as well as individual perceptions/awareness

Under the general supervision of the Director of IA and Addis Ababa Women and Children Affairs Bureau representative the consultant will provide: 1. Overall management and coordination and leadership for the preparation, planning, implementation and completion of the survey; 2. lead and coordinate the training of enumerators, data collection team, data tabulation and analysis and reporting; 3. estimate the magnitude of VAWG during COVID 19 pandemic in different settings and understand what kinds of acts are pervasive on a particular group of women and girls.

Critical Questions

The study will seek to answer, but not limited to, the following major questions:

1. Has violence against women increased since the beginning of the COVID-19 pandemic? Why?
2. In what way the COVID-19 crisis does increased risks of violence for women?
3. Who are the most vulnerable to violence during COVID-19?
4. What are the major types of violence reported during COVID-19?
5. What should be done to reduce the risks of violence during this pandemic?
6. What should be done to support and protect women survivors of violence during COVID-19?
7. Are there case stories that could be used to understand the phenomenon and push the advocacy of the protection of women and girls rights further?

Expected outputs/deliverables:

Detailed and professional reporting that addresses both the overall and specific objectives of the survey, and which includes specific recommendations on issues related to VAWG. The report must be concisely addressing the information outlined above. Documentation will include the following:

- Work plan and Inception Report (with key parameters and indicators to be considered for the survey including the methodologies for data collection and dissemination).
- Data Collection based on both administrative data and survey methodology in conforming to data requirement of international conventions, SDGs and national goals.
- Present results of the survey and prepare a draft report for technical working group and stakeholder review clearly identifying information relevant to SDGs; as well as data gaps and areas that may require further assessment.
- Finalize the draft report with inputs from all stakeholders, including IA and the Addis Ababa Women and Children Affairs Bureau personnel.
- Submit all the working files and final dataset (in all formats) including the raw data to IA.

Reporting will include:

- A comprehensive and well organized Final Report complete with standard reporting formats (main body of the report should be a minimum 30 pages in length, excluding TOC, tables and annexes).
- An Abridged Report synthesizing the main findings and indicators of the survey (not to exceed 7-10 pages in length).
- Case studies with testimony from victims of VAWG; institutions/organizations working and/or addressing issues related to VAWG
- A set of recommendations on suitable indicators for program monitoring Recommendations should consider the needs of specific stakeholder groups, and be relevant to the effective impact measurement of programme objectives and outcomes.
- The consultant will present findings/recommendations in a workshop organized by IA and Addis Ababa Women and Children Affairs Bureau
- Production of a workshop report summary document to supplement the final report.

Management and partnership strategy for the survey

IA will be lead agency responsible for the overall coordination of the research. Other national partners will include the Addis Ababa Women and Children Affairs Bureau. It is anticipated that IA will provide technical and logistical support as appropriate related to the implementation of the research.

To oversee and coordinate the research an Advisory Committee will be established for overall management of the survey and final endorsement of the research reports and will comprise the heads or senior delegates of participating agencies. The Committee will be also responsible for coordination and technical inputs to the survey and will comprise operational level focal points from relevant agencies.

The survey firm will support the data analysis of the survey and provide all project management support to the survey.

Qualifications and job requirements:

- 1) A company experienced in research-oriented social science with extensive knowledge of and experience in leading (designing and undertaking) large scale quantitative social/health/economic surveys as well as qualitative research; extensive knowledge and experience with statistical data analysis, and demonstrated competency in using statistical software;
- 2) Proven experience with the WHO Multi-country Survey on Women's Health and Domestic Violence research methodology and protocols. (examples of completed quantitative studies to be submitted with the application);
- 3) Extensive experience in advising government institutions on similar surveys on violence against women, including guiding research teams on survey methodology and implementation;
- 4) Proven ability to facilitate workshops and trainings, as well as to lead discussions with researchers and government officials;
- 5) 7 years of increasingly responsible professional experience in gender equality, women's empowerment and violence against women, of which at least seven years at the international level;
- 6) Strong track record of technical leadership, and proven ability to produce demonstrable results;
- 7) Strong verbal and written communications skills in English;
- 8) Demonstrated ability to network within national government partners, National Statistical Offices, NGOs and the academic and development community;
- 9) Demonstrated expertise in policy dialogue and high level advocacy is desirable.

Application Procedures

Applicants are requested to apply online the website www.initiativeafrica.net by 30 June 2020. The consultant is invited to submit applications along with a cover page and the technical proposal with 2 CVs of senior experts.

- a) Duly accomplished Letter of Confirmation of Interest and Availability;
- b) Personal CVs of 2 senior staff indicating all experience from similar projects, as well as the contact details (email and telephone number) of the Candidate and at least two professional references;
- c) Brief description of why the individual considers the organization as the most suitable for the assignment, and a methodology on how they will approach and complete the assignment.
- d) Financial Proposal that indicates the all-inclusive fixed total contract price, supported by a breakdown of costs. Based on the deliverables, the consultant should propose missions to Bhutan when necessary. The consultant shall submit the price offer indicating a lump sum all-inclusive cost for the assignment with the Technical Proposal.