# Terms of Reference for an individual consultant to develop models for delivering Universal





Access to Menstrual Health Products for girls and young women 10 to 24 years.  TERMS OF REFERENCE		
Background:	Menstrual health encompasses a state of complete physical, mental, and social well-being related to the menstrual cycle, rather than just the absence of disease. Menstruation is a natural monthly occurrence for 1.8 billion individuals globally, including girls, women, transgender men, and non-binary persons. Despite its naturalness, many people are denied the ability to manage their menstruation with dignity due to gender inequality, cultural taboos, and inadequate services. Adolescent girls, in particular, face additional challenges such as stigma, harassment, and social exclusion, further complicating their menstrual health and hygiene.	
	In addition to challenges with menstrual health, adolescent girls and young women in Lesotho also experience other negative sexual and reproductive health issues.	
	Globally, menstrual health management remains a challenge, particularly in low-and middle-income countries. In Sub-Saharan Africa, inadequate access to clean water and sanitation facilities further exacerbates the problem. Lesotho faces similar issues, with an estimated 13% of women aged 15-49 reporting that menstruation impedes their participation in social activities, school, or work. The lack of appropriate menstrual management supplies and infrastructure, combined with cultural barriers and embarrassment, forces many girls and women to use inappropriate methods. The government's current reliance on sporadic donations highlights the need for a more structured and sustainable approach to address these pressing issues.	
	One of the pressing challenges facing the Kingdom of Lesotho is high school absenteeism rates among girls, especially in rural areas due to menstruation. According to the 2022 Menstrual Health Situational Analysis (MH SITAN), 9% of girls are particularly affected by inadequate access to sanitary products, leading to issues such as soiling and dysmenorrhea. This problem affects school attendance and general academic performance of the girl child and further	

The response to this national challenge has been mostly ad hoc and uncoordinated. It is against this background that the government has decided to pilot models to deliver universal access to menstrual health. The pilot will be limited to two districts and will be targeted to 10 to 24 years old. The pilot will

undermines the gender equality agenda. The impact is more pronounced on economically disadvantaged households who cannot afford sanitary products.

	be undertaken in the Maseru and Mokhotlong Districts as experiential learning to inform a national program.
Purpose:	The purpose of this consultancy is to develop comprehensive people centred models for piloting the delivery of universal access to menstrual health products and information on sexual and reproductive health, including prevention of GBV

#### Scope of work:

(Description of services, activities, or outputs)

Scope of Work:

The individual consultant will be expected to develop models of delivering Menstrual Health Programme to adolescents, girls and young women of ages 10 - 24 years. This includes both the in and out of school young people.

The proposed models must also integrate empowerment programmes to adolescent girls and young women in the area of sexual and reproductive health and rights. These will include common challenges faced by girls and young women such as unintended pregnancies, child marriage, HIV, STIs and Gender Based Violence.

The consultant will be expected to undertake a number of activities that will ultimately lead to a comprehensive people centred model of delivering menstrual health programmes that are integrated to SRH and GBV . These will include development of an inception report, draft models for integrated service delivery, consensus building workshops and final models for piloting. For each product, the consultant will develop a powerpoint presentation to facilitate discussions.

On the inception response, the consultant will be expected to demonstrate a clear understanding of the TOR and the subject matter. The latter will be exhibited through sharing of preliminary literature review in the area. Furthermore, the consultant will reflect on a plan of action and timelines. This will be a report not exceeding 15 pages. It will among other things cover the following elements: i) Introduction

- ii) Background with clear literature review on different models of delivering menstrual health programmes (including delivery of integrated adolescent girls and young women's SRHR empowerment programmes)
- iii)Purpose of the consultancy demonstrating understanding of the assignment iv) Methodology describing how the models will be documented. The
- consultant must identify rights holders and different duty bearers and demonstrate how they will co-create the programme with all stakeholders, to ensure a people centred approach.
- v) Expected outputs and timeframe

With regards to the model development, the consultant must ensure that it is a comprehensive guide for experiential learning that can help inform a national prototype for delivering universal access to menstrual health products that integrate empowerment of the young women and their partners on SRHR and GBV.

The pilot testing models must address a number of issues and the main paper should not exceed 30 pages, excluding annexes.

The main guiding model documents must include the following:

Defining duty bearers at both national levels and district level and clearly defining their roles in supporting the initiative. Defining the different rights holders both in and out of school and the ii) appropriate products to use (10 - 18 disposable and 19-24 reusable) iii) Defining the platforms that could be used to deliver the products and services (eg schools, shops, health facilities, community centres, etc) iv) Defining different supply chain methods appropriate for different delivery platforms. This must articulate clearly recommended pathways from central level to the consumer. v) Defining impactful interventions to empower young women and their partners that should be integrated in the distribution of the menstrual health products. This should include outlines for a referral system on any issue within the scope of the pilot such as period pain management, GBV etc. vi) Providing clear guidance of appropriate messaging on disposal of used sanitary products (context specific) and management of reusable sanitary products. vii)Defining indicators that will inform the levels of success or otherwise (Framework for monitoring and evaluation) viii) Lastly, articulate the steps to piloting the different models and how the evaluation and lessons learnt should be undertaken.. The next stage will be validation of the models at both the national level and also district level to assess the practicality and acceptability of the models. The key stakeholders must be present (Duty Bearers and Rights Holders). The district validation workshop will also develop draft road maps for piloting. Finally, the consultant will present the revised models and road maps that have been informed by the validation workshops. This consultancy will require 40 person days over 3 months **Duration and** working schedule: Place where services • The drafts will be submitted electronically to UNFPA office in Maseru are to be delivered: through the National Program Analyst **Delivery dates and** how work will be Deliverable Person days Deadline/ payment delivered (e.g. electronic, hard copy etc.): Inception Report 7 days 21 November /15% Draft Model 18 days 18 January, 2025/40% Consensus building 10 days 31 January, 2025/20% workshop reports 15 February 2025/25% 5 days Final models and roadmaps

Monitoring and	The consultant will be required to provide bi-weekly progress updates through
progress control,	one-on-one meetings, e-mails or telephonically to UNFPA and UNICEF.
including reporting	
requirements,	

periodicity format and deadline:	
Supervisory arrangements:	The consultant will be supervised day to day by the UNFPA National Program Analyst. However, the clearance of the deliverables will be done by Menstrual Hygiene and health technical Team (Constituted by UN and government officials)
Expected travel:	The consultancy will be required travel to the two pilot districts in Lesotho

Required expertise, qualifications, and competencies, including language requirements: The consultancy is seeking an international consultant with the following:

## **Educational Background**

1. **Relevant Degrees**: Masters degrees in public health, sociology, social sciences, or a related field.

### **Professional Expertise:**

- 1. At least for 7 years experience working on adolescent health and SRHR including a particular focus on Menstrual Health programmes, policies, or research.
- 2. Policy Development: Expertise in developing and advocating for health policies and programmes, especially those related to menstrual health and hygiene.
- 3. Public Health Experience: Experience in public health programme design, implementation, assessments and evaluation.
- 4. Project Management: Proven track record of managing health-related projects, preferably those with a focus on women's health and menstrual health.
- 5. Fieldwork: Experience conducting fieldwork and working directly with diverse communities, particularly in the Southern African context, having worked in Lesotho being an added advantage.

### **Skills and Competencies**

- 1. Research and Analytical Skills: Strong ability to conduct qualitative and quantitative research, analyse data, and translate findings into actionable strategies.
- 2. Communication Skills: Excellent written and verbal communication skills for reporting, presentations, and stakeholder engagement.
- 3. Cultural Competence: Sensitivity to cultural differences and the ability to work effectively in diverse cultural contexts.

#### **Additional Considerations**

1. Technology Proficiency: Familiarity with digital tools and platforms for health communication and education.

#### Interested candidates should submit:

- 1. Curriculum Vitae (CV)
- 2. **Cover Letter**: Outlining relevant experience and approach to the consultancy.
- 3. Attach a copy of similar work

Inputs / services to be provided by UNFPA or implementing partner (e.g. support services, office space, equipment), if applicable:	<ul> <li>Ministry of Health will provide the consultant with an office and desk to work</li> <li>The task team will provide technical assistance to the assessment processes</li> </ul>	
Other relevant information or special conditions, if any:		
Signature of Requesting Officer in Hiring Office:		
Date:		

# **Procedures for Submission**

Interested local consultants should submit (by mail) their CV with motivational letter to <a href="mmathe@unfpa.org">mmathe@unfpa.org</a> by 1st November 2024the For Further information visit UNFPA on Lesotho.unfpa.org