

**TANZANIA ELECTRIC SUPPLY COMPANY LIMITED**

**'We Light Up Your Life'**



**GENDER BASED VIOLENCE (GBV) ACTION PLAN  
FOR  
TANZANIA – ZAMBIA INTERCONNECTION PROJECT**

**JUNE, 2022**

## **ABBREVIATIONS AND ACRONYMS**

AFNET	Anti-Female Genital Mutilation Network
FGM	Female Genital Mutilations
GBV	Gender Based Violence
GRM	Grievance Redress Mechanism
kV	Kilovolt
KIWOHEDE	Kiota Women Health Development Organization
KWIECO	Kilimanjaro Women Information Exchange and Consultancy Organization
LHRC	Legal and Human Rights Centre
MoHCDGEC	Ministry of Health, Community Development, Gender, Elderly and Children
PAPs	Project Affected Persons
SEA	Sexual Exploitation and Abuse
SH	Sexual Harassment
SOSPA	Sexual Offences Special Provisions Act
TANESCO	Tanzania Electric Supply Company Limited
TGNP	Tanzania Gender Networking Program
TL	Transmission Line
TAMWA	Tanzania Media Women Association
TAWLA	Tanzania Women Lawyers Association
TAZA	Tanzania - Zambia
WB	World Bank
WHO	World Health Organization
WILDAF	Women in Law and Development in Africa
WLAC	Women's Legal Aid Centre

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<b>Developed by</b>	<b>Safeguard Team – TANESCO Environmental and Social Section</b>

## **DEFINITIONS OF TERMS**

**Gender Based Violence (GBV):** - Gender-based violence (GBV) is an umbrella term for any harmful act that is perpetrated against a person’s will and that is based on socially ascribed (i.e., gender) differences between males and females. GBV broadly encompasses physical, sexual, economic, psychological/emotional abuse/violence including threats and coercion, and harmful practices occurring between individuals, within families and in the community, at large. These include sexual violence, domestic or intimate partner violence (IPV), trafficking, forced and/or early marriage, and other traditional practices that cause harm. GBV has a greater impact on women and girls, as they are most of often the survivors and suffer of great physical damage than men when victimized (WHO 2005).

**Sexual Harassment:** - defined as any unwelcome sexual advance, request for sexual favor, verbal or physical conduct or gesture of a sexual nature, or any other behavior of a sexual nature that might reasonably be expected or be perceived to cause offense or humiliation to another, when such conduct interferes with work, is made a condition of employment, or creates an intimidating, hostile or offensive work environment. It occurs between personnel/staff and involves any unwelcome sexual advance or unwanted verbal or physical conduct of a sexual nature.

**Sexual Exploitation:** - Is any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, threatening or profiting monetarily, socially or politically from the sexual exploitation of another.

**Sexual Abuse:** - Is the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions. SEA” is therefore a form of GBV and generally refers to acts perpetrated against beneficiaries of a project by staff, contractors, consultants, workers and partners.

## **1. INTRODUCTION**

### **1.1 Brief Description of the Project**

The Government of the United Republic of Tanzania (GoT) through Tanzania Electric Supply Company Limited (TANESCO) has obtained financing from the World Bank (WB) to implement the proposed 400kV double circuit power Transmission Line (TL) from Iringa to Sumbawanga (616 km) via Mbeya and Tunduma with associated substations at Kisada, Mbeya, Tunduma and Sumbawanga. The project also includes the 4km of the 330kV from Tunduma Substation to Zambia border with objective of interconnecting with Zambia.

The proposed Iringa – Kisada – Mbeya – Tunduma – Sumbawanga 400kV transmission line is among several proposed 400kV transmission lines to be constructed in the country. The transmission line will interconnect Iringa, Mbeya, Songwe and Rukwa regions and will be used to evacuate power from various generation sources and facilitate power distribution in the regions and also facilitate inter-regional power trade and power exchange with Zambia in the south and with Kenya and Ethiopia in the north. The proposed transmission line will have new substations at Kisada, Mbeya, Tunduma and Sumbawanga and existing substation at Tagamenda in Iringa.

### **1.2 Project Components**

The three project components include: -

- The Transmission Line divided into four (4) Lots where: -
  - Lot 1 covers the line route from Iringa Substation to Kisada Substation approximately 106km
  - Lot 2 covers the line route from Kisada Substation to Mbeya (Iganjo) Substation approximately 185km
  - Lot 3 covers the line route from Mbeya Substation to Tunduma Substation approximately 122km and
  - Lot 4 covers the line route from Tunduma Substation to Sumbawanga Substation approximately 203km.
- Substations
  - This will include construction of new substations at Kisada, Mbeya, Tunduma and Sumbawanga.
- Access road
  - The construction of the proposed transmission line will utilize the existing main and path roads for accessing the transmission line route and substation areas. However, where necessary the path roads to the substations will be improved to ensure transportation construction materials and equipment.

### **1.3 Purpose of this Document**

This Gender Based Violence (GBV) Action Plan details the operational measures that will be put in place to assess and mitigate risks of gender-based violence, including sexual exploitation and abuse (SEA) and sexual harassment that are project related. This includes procedures for preventing and responding to GBV, managing GBV related grievances and supporting survivors.

### **1.3 Description of project activities**

The major activities of the proposed project include, construction of line structures and associated accessories; Construction of the 400kV double circuit transmission line from Iringa – Sumbawanga and associated substations of Kisada, Mbeya, Tunduma and Sumbawanga, Clearing of Way leaves and Construction of access roads, workers' camps and storage for project materials. Civil works that will be conducted in the transmission line and substations include: - excavation of pits, steel fixing, stub settings, casting, backfilling, construction of staff quarter, construction of fence and service road in the substation area. GBV/SEA/SH risks are not only related to civil works activities but capacity building, procurement and project management may entail potential risks.

During the construction phase, some work camps will be needed as storage area for construction materials (such as steel profiles, isolators, conductors, concrete, fuels and lubricants) for workshops, logistics and offices for a period of several months. For the entire line, it is expected that 200 workers will secure employment and the number will involve both men and women.

Also, some permanent and semi-permanent access roads will have to be constructed to ship equipment to and from the sub-stations. Access roads to transmission line structures for both line construction and maintenance shall be required. Most of community members along the transmission line are engaged in agricultural activities whereby some are self-employed and others are doing agricultural activity as casual labours. Livestock keeping and petty trading are also another economic activity that community members are depending on.

## **2. GBV PROJECT RISKS**

### **2.1 Contextual GBV risks**

Gender based violence is prevalent in Tanzania - 40% of women aged 15 -49 years have experienced physical violence, whilst 17% have experienced sexual violence. 44 percent of women aged 15-49 have experienced either physical or sexual violence by an intimate partner. Spousal violence prevalence is highest in rural areas, averaging at 52 percent while the prevalence in urban areas averages at 45 percent. Additionally, almost 30 percent of girls experience sexual violence before the age of 18 whilst more than 1 in 3 girls are married before their 18th birthday and the average prevalence of FGM among girls and women aged 15-49 is 10 percent. Types of gender based violence include, physical violence, intimate partner violence, sexual abuse, economic abuse, trafficking of persons, denial of basic necessity and early marriage.

GBV in Tanzania is widely accepted, 58 percent of women and 40 percent of men believe that a husband is justified in beating his wife under certain circumstances. It is often underreported and survivors who report their experiences risk “scorn” as communities consider sexual violence and IPV private issues.<sup>1</sup> According to the TDHS 2015-2016, only 54 percent of women who experienced physical or sexual violence sought help. Of those who do seek help, most women turn to a family member, with only 9 percent seeking help from the police.<sup>2</sup> One of the project sites in Iringa is reported to have high help seeking for physical and sexual violence at 72 percent according to the TDHS. This region is also where the Iringa Paralegal Centre is housed.

The national response to GBV in Tanzania is anchored on key legal, policy and development frameworks which illustrate improved commitments to the rights and protections of women and girls however enforcement of laws continues to be a challenge. This is due to, among other factors, weak investigations, insufficient evidence, social norms against reporting and delays within the court system.

Along the project sites, and in line with the national government approach, there are Gender and Children Police Desks at all district offices which respond and offer services for survivors of GBV. In addition, there is a One Stop Centre in Iringa housed at the Regional Referral Hospital provides comprehensive and holistic GBV services under one roof. Other national NGOs conduct outreach activities for legal awareness on GBV/SEA, provide legal aid and train paralegals such as the Women in Law in Development (WILDAF), Tanzania Association of Women Lawyers (TAWLA), Tanzania Media Women Association (TAMWA). Other non-governmental organizations present include Save the Children, Integrated Rural Development Organization, Christian Council of Tanzania, The Life hood of Children and Development Society, SOS Children’s Villages Tanzania and Plan International.

### **2.2 Project GBV/SEA/SH risks**

The construction of the transmission line will entail major civil works as well as resettlement. These types of work will require a large labour force that may not be fully sourced locally – some of the construction workers may be brought from outside the project areas. Often, the construction workers are male requiring projects to set up construction camps/on-site accommodation for workers and families. Risks of SEA relating to women and children coming into close contact with workers (whether from within or outside the community) increases. The influx of labour requires a strategy for their management particularly with engagement with the community especially the women and children.

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<sup>1</sup> Key informant interview

<sup>2</sup> TDHS 2015-2016 Page 367

An influx of workers can expose the community to risks of sexual exploitation and abuse. The influx of predominantly male workers into a community area can expose women and vulnerable groups living in the community and providing services (such as traders); for example, females engaged in near-site petty businesses may suffer abuse from their benefactors/guardians in instances where they do not meet projected sales for the day.

Experience shows that most women are hesitant to engage in civil works type of jobs which leads to a minimum number of female workers being employed. Sexual harassment and other forms of abusive behavior is exacerbated by traditionally male working environments which might potentially compromise the wellbeing and safety of vulnerable groups of workers and the local communities while adversely affecting project performance. On the other hand, there is the potential of SEA risks for female members of the community who are seeking employment and/or services provided by the project and are given by project employers in exchange for sex.

Increasing the number of female workers in the project might interfere with the community gender norms, thus increase the risks of violence at the household level and even at the workplace where they can be exposed to incidents of GBV and SH. For example, when female workers have less time available for traditional gender role-related household duties, such as childcare can also be a risk of increased intimate partner violence (IPV) as household members push back.

The resettlement process presents risks for women being excluded in consultations and ultimate compensation. Husbands or male partners may refuse to share information about their compensation plans. More specifically there may be risks: of intimate partner violence as a result of increased household tensions related to distribution and control of compensation benefits as well as where livelihood projects during resettlement empower women shifting the traditional roles within households; of family violence over land disputes due to shift in norms of ownership of property (where traditionally women do not own land); of sexual violence for women who are relocated to places where traditional social protections no longer exist and they have long distance to cover for markets and water collection; of child marriage where males receiving compensation use it as bride price in regions where the practices are prevalent. Tensions over compensation may result in situations of emotional abuse, spousal abandonment, and in some instances escalate to physical threats or violence. Also, there may be risks with regards to women's lack of awareness of their rights or how to access support regarding these issues. TANESCO conducted GBV risk assessment before resettlement processes and before compensation payment in order to put mitigation measures in place. This done during GRM operationalization Phase I from 24<sup>th</sup> March, 2022 to 3<sup>rd</sup> April, 2022 and continues during GRM operationalization Phase II, III and IV.

Large and more remote construction contracts may include women who travel to live in or around the camps, who are potentially highly vulnerable and will be a target for abuse, harassment and violence because of their lack of a local support network. Also, access roads created by the project (e.g. for transportation of materials) may cross through established routes used by the community, such as schools/market routes, crossing such paths could put children and vulnerable groups at risk of exploitation and abuse, especially after dark in remote areas.

There might be emergence of survival sex/transactional sex practiced by vulnerable women, girls looking for money to cover their needs and those of their families. They become vulnerable and easily abused and might suffer contracting infectious diseases, STDs and STIs due to labour influx. There may also be the likelihood of them suffering sexual exploitation and abuse.

There are the potential risks associated with child labour (children dropping out of school to work with contractors) as well as the risks of underage/school-going girls eloping with project workers or be married off to project workers in exchange for resources to the girl's family.

### **2.2.1 Issues raised during GBV risk assessment.**

TANESCO conducted the GBV risk assessment aiming at identifying and understanding better the GBV/SEA/SH risks within the project area. Data collection for the risk assessment was conducted using Focus Group Discussion (FGD) and Key informant interviews. FGD was conducted (on 24<sup>th</sup>, 25<sup>th</sup>, 29<sup>th</sup>, 30<sup>th</sup> March, 2022 and 02<sup>nd</sup> April, 2022 during GRM operationalization Phase I) to groups of women, men and boys(youth) with a number of 10 -12 participants and the discussion was participatory. Key Informants Interviews were conducted to the officers in the GBV Police desk who are working directly with people facing GBV risks. The findings of the assessment indicated that there are widespread of GBV/SEA/SH risks among both women, girls, boys and men. Risks identified in both FGD groups are as indicated below: -

- **Physical violence**

Women reported that among the contributing factor of physical violence such as spouse beating/domestic violence is poverty and alcoholism. Some of men are lazy and they don't engage themselves in different activities so as to earn income which will enable them to take care of their families and make sure that they have all the basic needs. This has caused a burden to their wives as they have been forced to work hard and make sure that their families are getting their basic needs such as school fees, food etc. It was also reported that there are other men who have enough income but they are using their income for buying alcohol and having relationship with other women and all the money are used outside their families. Too much alcoholic drink has caused beating of spouses and a lot of conflicts within the family. When they are asked by their wives, wives are ending up getting physically violence and domestic violence and some of them have been forced to leave there home and abandon children and family.

- **Traditional practices (Early marriage)**

It was also reported that due to traditional practices and lack of income in the family which cause poverty, some of the young girls have been forced to enter into early marriages with old men. Some of the parents have been taking it as an advantage because they will be given money by the man who got married with their daughters. These young girls mostly those who have been forced to get married they face emotional abuse, sexual harassment, sexual abuse and mental abuse. In areas where community and family support system are missing there is high risk of early marriage among young girls. Awareness should be provided to the community in order to reduce the risk as it was noted that among the contribution factor of early marriages are poverty and lack of education.

- **Empowerment of women financially**

Men who were interview reported that nowadays most men are also suffering from GBV/SEA/SH cases mostly the psychological and emotional abuse and the main reason is empowerment of women financially. Being empowered have caused most of women to ignore their husband, have voice over their husbands and despising their husbands, Husbands to be denied their rights to have sex from their wives and sometimes they are denied to have the rights of food or washed their clothes etc. Men reported that nowadays there is loss of men power/role in the family and community. When asked if they are reporting this form of GBV they said most of men cases are not reported because of the



perception that it is shameful to report the incidents of GBV and the community have a perception that the GBV desk was established in order to listen and resolve women and girls cases only. Awareness should be provided in community in order to make men aware that Gender Desk is there to resolve all cases faced by men and women.

During FGD, PAPs were also asked of what they do when they face GBV issues or where do they go to report once there is any kind of GBV/SEA/SH risks. In all FGD groups it was reported that they normally start with a level of 10 cell leaders, then go to Village offices (baraza) if the issue is not resolved and if the village office failed to resolve they go to the Police GBV desk. They also reported that women are the most group reporting their GBV cases to the police desk than men.

- **Key informant Interviews findings**

Interview was made with Police Officers (on 4th April 2022 at Ifunda and Mafinga where there are police post with GBV desk) who are dealing with GBV desk cases in order to gather information concerning GBV/SEA/SH issues and do they handle and resolve issues received in their offices.

During interview, police officers reported that most of the cases received are associated with marriage conflicts among spouses. Low income and poor economy of men has been mentioned as the main cause of GBV issues because this has caused most men to start alcoholic drink and other are running from their families as they have failed to provide basic needs to their families. Children drop out of school or run away from home, killings based on superstition, suicides by men, beatings and spouse's conflicts, father/mother abandon the family or husband/wife, rape of girls. These cases are caused by superstitions beliefs, alcoholism from Ulanzi, absence of communication between husband and wife, economic poverty and hardship at home, parents failures to pay school fees or buy school requirements, school distance from home and failure of parents to provide means to go to school (fare or bicycles). Due to conflicts in the families which cause depression/stress, most men have been reported by their wives of not performing well in the sexual act.

Other cases received in the police office gender desk are young men and children sodomization, under age marriages, women overtaking men as head of the house, public humiliation and criticism of their men or husbands and women taking money from microfinances without husbands knowledge leading to men being indebted.

During project implementation TANESCO will provide more awareness training to community and inform them the meaning, causes, effects and how GBV/SEA/SH issues are handled and familiarize them with referral pathway services available and procedures of handling GBV/SEA/SH grievance. This will be done a month before start of construction works and quarterly during construction phase.

### **3. NATIONAL LAWS AND POLICIES ADDRESSING GBV**

The Constitution of the United Republic of Tanzania explicitly prohibit discrimination based on gender and has enshrined the principle of gender equality<sup>3</sup> inserting the Bill of Rights and Duties. For instance, sections 12 and 13 of the Constitution states that all human beings are born free, equal and are equally entitled to the recognition and respect of their rights.

The legal and policy framework that responds to GBV is found in a number of specific laws including: Law of the Child, Law of Marriage, Anti-Trafficking in Persons Act, Criminal Procedure Act, Employment and Labour Relations Act, Education Act, Customary Laws Declaration Order of 1963, HIV and AIDS (Prevention and Control) Act, Land Act, Indian Succession Act, Probate and Administration of Estates Act, Rights of Persons with Disabilities Act and Village Land Act.

National commitments to addressing GBV are captured in the National Plan of Action to End Violence Against Women and Children in Tanzania 2017/18 – 2021/22 and the National Plan of Action to End Violence Against Women and Children Zanzibar 2017-2022. Legislation like the Land Act and the Village Land Act, 1999 portray the equality aspect. The Sexual Offences Special Provisions Act, (SOSPA) 1998 (as incorporated into the Penal Code 2002), criminalizes various forms GBV offences including rape, sexual assault, sexual harassment. SOSPA increases the criminal penalties for sexual violence and made illegal the crimes of trafficking in persons, sexual harassment and FGM.

The Law of the Child Act prohibits amongst other things, child labour and sexual exploitation of children. It also establishes multisectoral procedures that provide standards for identifying, referring, and responding to cases of child abuse and other forms of violence. The amendments to the Education Act 2016 prohibit child marriage and Act No. 4 of 1998, Sexual Offences Special Provisions Act, 1998 also prohibits sex with minor (under 18 years).

Apart from the legal framework, the Government through various Ministries has come out with policies that guard against gender-based violence such as the National Integrated Case Management which seeks to have a harmonized, standardized and systematic framework for the care and protection of the most vulnerable children and linking them to social welfare, health/HIV, protection and education services from the community to the national level. One other such policy is the Women Gender and Development Policy of 2000 which aims at ensuring that gender equality is embraced in all plans, strategies and development undertaking in every sector and institution; the National Development Vision 2005 which envisages poverty reduction and improving the country's income to middle level, MKUKUTA strategy which also aims at eradicating poverty, hunger, disease, ignorance, environment destruction and discrimination against women by 2025.

#### **3.1 Existing local practice when responding to GBV**

Consultations with women's NGOs during preparation of the environmental and social assessments and throughout project implementation is very important as it helps to understand and address the project risks to women and girls. These NGO's can also play a part in sensitizing the community about project risks and increasing their ability to withstand them.

The National Plans of Action to End Violence Against Women and Children in Tanzania 2017/18 – 2021/22 have established Women and Child Protection Committees (MTAKUWWA committees), comprised of duty bearers, NGOs, CBO's and community members who convene quarterly and share protection concerns across the protection spectrum. These committees operate from National level

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to Village/mtaa levels. They operate as the referral pathways for survivors through a collaborative approach with service providers within the Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC), the law enforcement agents, local governments (District/Municipal level for the Council Health Management Team (CHMT), ward health committees as well as ward social welfare officers.

Through the Ministry of Health, Community Development, Gender, Elderly and Children MoHCDGEC, health care providers in Songwe and Rukwa have been trained on the National Management Guidelines on GBV for the health sector which provides an opportunity for strengthening referrals and linkages with the community as well as assuring standardized medical management of GBV<sup>4</sup>.

Various NGOs such as Women in Law and Development in Africa (WiLDAF), Tanzania Media Women Association (TAMWA), Tanzania Women Lawyers Association (TAWLA), Legal and Human Rights Centre (LHRC), Women's Legal Aid Centre (WLAC), Kilimanjaro Women Information Exchange and Consultancy Organization (KWIECO), Tanzania Gender Networking Program (TGNP), Kivulini Women Organization, Anti-Female Genital Mutilation Network (AFNET), ABC Foundation, Kiota Women Health Development Organization (KIWOHEDE), have undertaken tremendous sensitization campaigns to prevent and respond to gender based violence through media campaign education and training, legal aid services, publication and dissemination of GBV materials and coordination. There is an opportunity for the project to link with existing NGO's, CBO's, existing structures (e.g. MTAKUWWA committees) and One Stop Centres in Mbeya and Iringa as part of the referral pathways in an instance of reported GBV/SEA incident. Also, the presence of the Iringa Paralegal Centre provides an opportunity to support training and outreach to the community to promote prevention of GBV.

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<sup>4</sup> United Republic of Tanzania, Beijing Plus 25, Page 15

#### **4. PIU's CAPACITY TO PREVENT AND RESPOND TO GBV RISKS**

The PIU does not have the capacity to address GBV issues however, TANESCO has established a gender desk for the first time in this project with a Gender Focal Person who will be responsible for all gender issues including GBV. They will be part of the team in receiving grievances related to GBV/SEA and SH and during project implementation which they will refer to the recruited GBV Service Provider. They will train/sensitize other actors in the project on survivor centered approaches to prevent and respond to GBV. They will also be responsible for identifying and mapping GBV service providers and actors to ensure effective and safe referrals are put in place and collaboration in GBV prevention is enhanced. The Gender Focal person will also document and log all GBV/SEA cases and provide status updates whether one is ongoing, completed or closed.

The Gender Focal Person who is TANESCO staff under Human Resource Department will work in collaboration with Gender Specialist who will be procured as an Individual Consultant during implementation of TAZA project. The Gender Specialist will have experience and background on GBV issues. The Gender Specialist will work closely with the grievance mechanism (GM) officers to ensure that they implement the survivor centred approach to survivors of GBV, work with the Gender Focal person to sensitize the community on the GBV/SEA/SH Plan, monitor the implementation of the GBV Action Plan, notify the PIU on any matters relating to GBV/SEA/SH - see TORS. Other safeguard team have minimum knowledge on GBV issues. More capacity building will be required for the whole PIU in order to make them conversant with GBV/SEA/SH issues and survivor centered approach in order to know how to handle incidents when they occur during project implementation. A comprehensive training programme on GBV/SEA/SH will be developed and rolled out throughout the project implementation for the PIU and project workers.

TANESCO has prepared ESIA's for Iringa-Mbeya and Mbeya-Sumbawanga sections of the transmission line that include ESMPs (the ESIA was disclosed on the World Bank website on January 31, 2018). These safeguards documents identify potential risks associated with labor influx and GBV, and introduce mitigation measures to address these risks. The measures include but are not limited to, following clear criteria for worker camp set up and location, as well as relevant gender and HIV/STI trainings and information campaign both for workers and local communities. Contractors will be required to prepare a Labor Influx Plan as part of the ESMP that has to be cleared by the World Bank, to foster positive impact on employment generation in the communities and mitigate potential social risks. TANESCO will ensure that Contractors' ESMPs incorporate GBV/SEA/SH risk management. The supervision consultant will oversee the contractors' compliance with the ESHS Management Plan, GBV Action Plan as well as the code of conduct and Contractors will be required to enforce an Honor Code, particularly for those residing in construction camps, and to monitor interactions with the local population. If there will be inappropriate relations between the workers and local population, the Contractors will be required to report to the local law enforcement agencies such as Ward or Village Local Leaders and to TANESCO as well.

TANESCO safeguard team prepared a draft Gender Action Plan (GAP) to address the identified barriers to the professional development of female staff. Identification and mitigation of risks to female community members from labor influx will also be included as a part of project implementation and monitoring. Also, a Gender Gap Assessment has been conducted with the technical and financial support of the WB and specific gender equality gaps identified in TANESCO are expected to be reflected in the four-year gender work program and implementation strategy. TANESCO is hiring a Gender Specialist who will provide technical support for the implementation of the four year gender work program and, GBV and SEA/SH prevention and response activities.

To prevent SEA/SH by project workers, TANESCO is using a Code of Conduct which was established by the Public Service Management and Good Governance. This CoC states that a public servant shall not discriminate or harass a member of the public or a fellow employee on grounds of sex, tribe, religion, nationality, ethnicity, marital status or disability. Contractors are also required to follow Tanzanian laws when employing workers for construction activities. Sometimes, staff from the Ministry of Labor visit construction sites to observe if contractors are adhering to Government employment laws and regulations. It is mandatory that contractors/consultants ensure that all project workers sign a Code of Conduct that specifies appropriate behavioral conduct, responsibilities and penalties for violation of SEA/SH amongst other social misconduct. TANESCO will develop a sensitization forum for all contractors and consultants on SEA/SH and an addendum to the Code of Conduct indicating that they (contractors and consultants) understand and will ensure they and any project worker will not be engaged in any sexual exploitation and abuse of community members, sexual harassment of project workers and sex with minors.

## 5. INSTITUTIONAL ARRANGEMENT

The Institution arrangement will include different groups with different roles and responsibilities as follows: -

➤ **Gender Focal Person (TANESCO staff under Human Resource Department)**

- She will be responsible in implementing and follow up on gender-related activities and provide support to Counterpart staff, partners and donors on mainstreaming gender in their programs and activities including design and implementation of trainings on gender-related topics.
- Monitor the integration of gender mainstreaming through regular visits to project location, draws the attention on all gender affairs including sexual harassment and Gender Based Violence (GBV)
- Work closely with Gender Specialist (Individual Consultant) and NGO when dealing with GBV, SEA, SH issues during the project implementation and reviewing reports submitted by Gender Specialist and NGO.

➤ **Gender Specialist (Individual Consultant)**

- Develop follow-up mechanisms to be implemented in TAZA project sites for GBV prevention and response based on WB GBV good practice note.
- Support and supervise implementation of GBV prevention and response awareness raising and capacity building trainings to PIU, government officials, the community and other stakeholders in TAZA project.
- Ensure that contractors prepare gender responsive Labor Influx Plans with appropriate mitigation measures for any potential GBV risks.
- In collaboration with PIU team to regularly follow up and report on the operation of the GRM and resolution of grievances received under the Project.

➤ **NGO**

The recruited NGO will be responsible for implementation of measures to prevent and respond to Gender-Based Violence (GBV), including Sexual Exploitation and Abuse (SEA) and Sexual Harassment (SH), in support of TAZA Project. Other roles and responsibilities includes: -

- Update mapping GBV risks and services in the project implementation zone
- Training and awareness raising
- Support for survivors
- Support for the project's Grievance Redress Mechanism
- Monitoring and evaluation

## 6. GRIEVANCE REDRESS MECHANISM

There is a Grievance Redress Mechanism (GRM) prepared by the TANESCO safeguard team which has specific procedures for dealing with GBV cases to ensure survivor centered approaches including confidentiality, safety and security of survivors. Among the objectives of the GRM is to prevent and address all forms of Gender Based Violence (GBV) including Sexual Harassment (SH) incidents that potentially happen at the workplace and Sexual Exploitation and Abuse (SEA) incidents that potentially happen at community. The GBV GRM involves a formal separate process for receiving project-related grievances from affected communities and from workers and making swift referrals. This shall be managed by the GBV Service Provider that will be recruited. During sensitization of the GRM, communities and other stakeholders will be informed of the multiple channels to facilitate confidential logging in of GBV/SEA/SH complaints, procedures for handling GBV and the confidentiality of the process in supporting survivors and resolving the issues. A complaints and/or suggestion box will be placed in strategic locations that are accessible to communities and others will be placed at the workplace for project workers to submit complaints.

At the project level there will be a **GBV Complaints Team** comprising of Human Resource Manager/Officer from the Contractor side, Representative from the Project Consultant, Gender Specialist (Consultant, TANESCO Gender Focal Person and Supervisor Engineer). This committee will be established before the commencement of the project implementation. It will be responsible for recruiting a GBV Service Provider (as per the Terms of reference in Appendix), receiving and investigating the occurrence of project related GBV incidents, review and advise on matters pertaining to the needs of the survivor/victim and other witnesses, determine if the alleged perpetrator has breached the employers Code of Conduct and other policies, identifies aspects of program delivery or performance that increase risks of abuse, harassment, or exploitation by contract workers, as well as recommend appropriate and proportionate disciplinary action. TANESCO shall also recruit a GBV Service Provider who will amongst other things offer psychosocial and case management support and safe referrals to survivors, map existing GBV services, train project workers and community as well as support identification and training of Community GBV focal persons across the transmission line, be the GBV GRM linking to the overall project GRM and manage a hotline for reporting abuse and violence. Confidential reporting with safe and ethical documenting will be adopted and after the project GRM receives a GBV complaint, it will be referred directly to the service provider.

The reporting of a GBV/SEAH incident does not typically follow a uniform pattern due to the importance of maintaining confidentiality as well as the urgency for survivor to seek care and the preservation of evidence. As such, the complainant can use any avenue to report including text message, email, phone call, written note, or word of mouth in person to trusted colleague, member of the GM, GBV service provider, or local CBO or NGO. Reported GBV incidents shall be referred to the service provider for services, safe referrals and forwarded to the GBV Complaints team for accountability purposes according to the wishes of the survivor.

The only information to be collected from the person reporting will be on:

- demographic data, such as age and gender;
- the nature of the complaint (what the complainant says in her/his own words);
- whether the complainant believes the perpetrator was related to the project; and whether they received or were offered referral to services

Procedures of handling Gender Based Violence (GBV), Sexual Exploitation and Abuse (SEA) and Sexual Harassment (SH) Grievances are as follows: -

- submitting grievances

- logging the grievance
- providing the initial response and referral to the GBV Service Provider
- accountability procedures

In resolving all cases associated with GBV/SEA/SH issues, TANESCO shall within 72-120 hours agree with the survivor on the course of action to be taken. More specifically, the following actions shall be undertaken:

- once a complaint is made it shall be registered immediately in a separate confidential log by the GM Operator (reported directly to the GM Operator or referred to the GM Operator by GBV Service Provider/GBV Specialist/Gender Focal Person);
- as soon as possible and in less than 24 hours the survivor shall be referred to the GBV service provider for timely incident reporting, access to services and safe referrals according to their wishes.
- a notification of the complaint will be made by the client to the World Bank within 24 hours
- within 48-72 hours (where possible) the GBV Service Provider will update the GM Operator on the survivors informed consent and wishes to pursue sanctions against the perpetrator, and timeline for its resolution
- the GBV service provider shall be in communication with GBV Specialist/Gender Focal Point and keep the survivor informed of the course of actions and timeline for its resolution.
- Upon resolution, the GBV Specialist and GBV Service Provider advises the GCT that it has been resolved, who in turn advises the GM operator.
- The GM operator notes the resolution and closes the case.

For project workers to avoid the risks of stigmatization and rejection, workers will be allowed to seek services directly from the Consultant or TANESCO Supervisor Engineer and they will have access to the Gender Focal Person. Consultant and Supervisor Engineer will be trained on how to handle data on GBV incidents in a confidential and empathetic manner.

Some of the survivor centered measures that will be applied include: Ensuring that all data on GBV is kept anonymous and a high level of confidentiality is maintained; Ensuring that all records of GBV cases are filed in a secure location with limited access to ensure confidentiality. GBV cases are addressed as per the WB GBV good practice note expectations. Those in the GRM handling GBV incidents are trained on how to handle the related grievances and handle the complaint based on the principles of confidentiality and a survivor-based approach

Supervising Engineers and other PIU members who will be in the project site full time will link the complainant via Gender Focal Person or Gender Specialist (Consultant) to the GBV Service Provider. PIU members will be trained in making sure that all information related to GBV are managed confidentially and maintained by the overall project GRM. The Gender Focal Person shall refer the survivor to the GBV Service Provider for emergency support and care. The service provider shall inform the GBV Specialist/PIU of any case that is reported to them to notify the Bank within 48 hours. Meanwhile the GBV Specialist shall also refer the complaint to the GBV Complaints Team (GCT) which:

- Reviews the case and collectively agree upon the appropriate actions to be taken and sanctions, if any.
- Refers the case to the police as appropriate and according to the law (mandatory reporting)



- Upon resolution, the GBV Specialist and GBV Service Provider advises the GCT that it has been resolved, who in turn advises the GM operator.
- The GM operator notes the resolution and closes the case.

TANESCO will develop a SEA/SH reporting guideline/protocol to enable timely and safe reporting of SEA/SH incidences. The guideline/protocol, will embed a survivor centric approach that outlines professional standards and work ethics for the protection of women and children, including confidentiality, consent, timely resolution of grievance, safety and also detail the roles and responsibilities of the key actors including TANESCO, consultants, contractor and other government line ministries CBOs and NGOs. It also will highlight what reporting tools will be used to register incidences when they occur. TANESCO will ensure that all incidents of GBV/SEAH are reported through the project GM and shall inform the World Bank within 24 hours of a project related GBV incident when it occurs.

Communities and individuals who believe that they are adversely affected by a World Bank (WB) supported project may submit complaints to existing project-level grievance redress mechanisms or the WB's Grievance Redress Service (GRS). The GRS ensures that complaints received are promptly reviewed in order to address project-related concerns. Project affected communities and individuals may submit their complaint to the WB's independent Inspection Panel which determines whether harm occurred, or could occur, because of WB non-compliance with its policies and procedures. Complaints may be submitted at any time after concerns have been brought directly to the World Bank's attention, and Bank Management has been given an opportunity to respond. For information on how to submit complaints to the World Bank's corporate Grievance Redress Service (GRS), please visit <http://www.worldbank.org/en/projects-operations/products-and-services/grievance-redress-service>. For information on how to submit complaints to the World Bank Inspection Panel, please visit [www.inspectionpanel.org](http://www.inspectionpanel.org).

The approved and disclosed GRM document can be accessed through the link below.  
<https://www.tanESCO.co.tz/index.php/investments/environment-report/452-grievance-redress-mechanism-for-taza-october-1>

## **7. Monitoring Mitigation Measures**

During implementation of the project, mitigation measures will be monitored in order to avoid or substantially reduce the GBV/SEA/SH risks and make sure that GBV risk is not increasing. TANESCO and Consultant will make sure that all activities proposed by the contractors have been undertaken and/or are on track. There will be frequently monitoring and reporting on the effectiveness of the implementation of the contractor GBV/SEA/SH APs. TANESCO will ensure that all incidents of GBV/SEAH are reported through the project GM and shall inform the World Bank within 24 hours of a project related GBV incident when it occurs and actions will be taken if the Contractor will not adhere to the agreed mitigation measures by following the clauses that are indicated in the contract.

## 8. Action Plan

This section details the specific measures for mitigating GBV, SEA/SH risks under the TAZA project in the life time of the project. These include the mitigation measures already in place as well as steps to be undertaken to further mitigate and respond to risks and allegations of GBV/SEA/SH in the project sites. This Action Plan is designed to inform the integration of Gender Based Violence (GBV) prevention and response within the TANESCO and TAZA project implementation.

The interventions are largely on awareness raising and advocacy to promote knowledge of rights, resources, and available services. The activities include the development of GBV knowledge and competencies, production of training PIU, project workers and awareness materials, community outreach, a GBV responsive GBV, as well as signing of Codes of Conduct by construction workers. In terms of design for facilities such as workers camps and/or offices at construction sites, there is need for gender friendly facilities to ensure safety for all as well as fair sharing of project benefits amongst women and men. It is anticipated that these broad interventions will infuse a gender responsive culture in the project as well as ensure protection from GBV for women and men, girls and boys. See a table of action plan below:

<b>Activity to address GBV/SEA/SH</b>	<b>Steps to be taken</b>	<b>Time lines</b>	<b>Responsible</b>	<b>Monitoring (who will monitor)</b>	<b>Output Indicators</b>	<b>Estimated Budget (USD)</b>
<b>1. Awareness training of GBV/SEA/SH issues to the PIU on how to address GBV/SEA/SH issues</b>						
<ul style="list-style-type: none"> <li>- Building and strengthening capacity of TANESCO Management, staff and other key actors on GBV/SEA and SH issues</li> <li>- Conducting awareness training to PIU members on GBV/SEA/SH issues</li> <li>• Awareness training to project workers/contractors/subcont</li> </ul>	<ul style="list-style-type: none"> <li>- Prepare training materials to be used during training</li> <li>- Conducting training to TANESCO Management, PIU members and other staff</li> <li>- Conducting training of trainers amongst contractors/subcontractors/workers</li> <li>- Include SEA/SH as an agenda item during meetings</li> </ul>	<ul style="list-style-type: none"> <li>- Soon after contract signing and before starting construction works.</li> <li>- For project workers this should be done throughout the</li> </ul>	Gender Specialist (Consultant), TANESCO Gender Focal Person and GBV Service Provider throughout the project implementation	TANESCO & Project Consultant	<ul style="list-style-type: none"> <li>• Number of trainings conducted</li> <li>• Number of trained PIU members</li> <li>• Knowledge and skills acquired by Management, PIU members, staff, contractors and project workers on GBV/SEA/SH</li> </ul>	10,000.00

<p>ractors and informing them the meanings, causes, effects and how GBV/SEA/SH issues are handled, referral pathway services available, SEA/SH grievance redress mechanism</p>		<p>implementation of the project</p>			<p>issues and being aware of it</p>	
<p><b>2. Stakeholders Consultation</b></p>						
<ul style="list-style-type: none"> <li>• Conduct consultations with a variety of stakeholders such as religious leaders, political and cultural leaders, health workers, police officers, local leader, social workers, women's groups etc and inform them of GBV/SEA/SH risks, identify preferred channels for reporting and get their feedback. Data should not be collected as part of risk assessment (confidentiality must be observed and maintained)</li> <li>• Consultation during resettlement to minimize risks of intimate partner violence due to compensation or men</li> </ul>	<ul style="list-style-type: none"> <li>- Prepare checklist to be used during consultation</li> <li>- Conduct face to face interviews and FGD</li> </ul>	<p>Before starting construction and throughout the implementation of the project.</p> <p>Upon signing of the contract and after receiving a report on the GBV risk on</p>	<p>Gender Specialist (Consultant) and TANESCO Gender Focal Person</p>	<p>TANESCO &amp; Project Consultant</p>	<ul style="list-style-type: none"> <li>• Number of stakeholders met</li> <li>• Number of meetings conducted</li> </ul>	<p>10,000.00</p>

adapting practices of child marriage because of having compensation monies		resettlement identified and documented.					
<b>3. GBV/SEA/SH risk assessment prior to and during project implementation</b>							
<ul style="list-style-type: none"> <li>Conducting GBV risk assessment.</li> </ul>	<ul style="list-style-type: none"> <li>Consultation with girls, women, local leaders and community members and provide them with an opportunity to share information on project related risks</li> </ul>	<p>This will be before the resettlement process for compensation and will continue throughout the implementation of the project</p>	<p>Gender Specialist (Consultant), TANESCO Gender Focal Person and GBV Service Provider</p>	<p>TANESCO &amp; Project Consultant</p>	<ul style="list-style-type: none"> <li>- GBV risks before resettlement and during implementation identified and mitigation measures put in place</li> <li>Resettlement arrangements and frameworks outline efforts to reduce risks of GBV/SEA at the household and community levels</li> <li>PIU's capacity to prevent and respond to GBV risks enhanced</li> </ul>	10,000.00	
<b>4. Map out GBV prevention and response actors in communities adjoining the project</b>							

<p>- Delivery GBV/SEA/SH interventions by a qualified service provider</p>	<ul style="list-style-type: none"> <li>• Identify service providers within the project area who can provide quality survivor-centered services and manage GBV cases</li> <li>• Engage them in doing the risk assessment, developing referral pathway, training at community and project levels</li> </ul>	<p>First quarter after signing contract</p>	<p>Gender Specialist (Consultant), TANESCO Gender Focal Person and GBV Service Provider</p>	<p>TANESCO &amp; Project Consultant</p>	<p>Qualified service provider in place Project GBV risk assessment in place.</p>	<p>8,000.00</p>
<p>- Establish working relationship (for referrals, monitoring and training) with other institution dealing with GBV in line with the NPA-VAWC</p> <p>- Preparing reporting Mechanism of GBV/SEA and SH incidences as well as process and procedures.</p>	<ul style="list-style-type: none"> <li>• Develop a tool kit and brochure on referral mechanisms – what constitutes GBV/SEA/SH; how to report; where GBV/SEA/SH incidents are to be reported; the rights of a survivor – confidentiality and ensuring their safety</li> <li>• Develop a directory of GBV service providers</li> <li>• Disseminate and popularize the referral pathway list to all project stakeholders</li> </ul>	<p>Throughout the implementation of the project</p>	<p>Gender Specialist (Consultant), TANESCO Gender Focal Person and GBV Service Provider</p>	<p>TANESCO &amp; Project Consultant</p>	<p>- Strong Referral pathways are established for locations where transmission line construction will happen</p> <p>- Strengthened Partnerships for consultations, referrals and capacity building support with GBV service providers</p> <p>- Enhanced support service and quick response to GBV through an established GBV reporting, response and referral mechanism</p>	<p>5,000.00</p>

**5. Inform project affected communities about identified GBV/SEA/SH risks and GRM**

<ul style="list-style-type: none"> <li>- To empower the community on issues of gender based violence and its effects on individual and how to address GBV related issues</li> </ul>	<ul style="list-style-type: none"> <li>• Sensitize community on GBV risks and impact, referral pathways and GBV GRM.</li> <li>• Display visible signs around the project site as the signal to workers and the community that the project site is an area where GBV is prohibited.</li> </ul>	<p>Throughout the implementation of the project</p>	<ul style="list-style-type: none"> <li>- Gender Specialist (Consultant), TANESCO Gender Focal Person and GBV Service Provider</li> <li>- Contractor</li> </ul>	<p>TANESCO &amp; Project Consultant</p>	<ul style="list-style-type: none"> <li>- Number of people reached with GBV related information</li> <li>- Availability of display signs</li> </ul>	<p>5,000.00</p>
<ul style="list-style-type: none"> <li>• Operationalize the GRM system</li> </ul>	<ul style="list-style-type: none"> <li>• Review and adapt the GRM for GBV/SEA mitigation</li> <li>• Ensure contractors, labor and community members are well informed of GBV grievance mechanisms.</li> <li>• Clarify role of GBV/SEA/SH focal persons within the referral pathways</li> <li>• Train personnel to operate GRM i.e., proper</li> </ul>	<p>February 2022 and throughout the implementation of the project</p>	<p>Safeguard officers/Gender Specialist (Consultant) and GBV Service Provider</p>	<p>TANESCO &amp; Project Consultant</p>	<p>Clear GBV/SEA entry points within the GRM and clarity on procedures</p> <p>Number of GRM sensitization meetings conducted</p> <p>GBV focal persons trained and roles clarified within the overall referral pathway</p>	<p>58,156.00</p>

	documentation for complaint registration and management; and confidential reporting with safe and ethical documenting of GBV cases.					
<ul style="list-style-type: none"> <li>Implement appropriate project related civil works for labor to reduce GBV risks.</li> </ul>	<ul style="list-style-type: none"> <li>Ensure availability of female construction workers including women workers from nearby communities and that there is no gender stereotype</li> <li>Ensure contracts include clauses on GBV (for example all workers and staff sign codes of conduct).</li> <li>Provide safe, secure, and separate living spaces for male and female construction workers.</li> <li>Prepare latrines, showers and changing room which separate men and women</li> <li>Latrines and changing rooms should be located in separate areas, well-lit and include the ability to be locked from the inside.</li> <li>Latrines and changing rooms should be located in separate</li> </ul>	August 2022 and throughout the implementation of the project	Contractors	TANESCO & Project Consultant	<p>Number of female workers employed</p> <p>Signed code of conduct</p> <p>Availability of latrines, showers separating men and women</p> <p>Display signs on the facilities.</p> <p>GBV/SEA/SH awareness enhanced along transmission lines</p> <p>Reduced incidences of GBV/SEA/SH</p>	To be covered by Contractor



	<p>areas, well-lit and include the ability to be locked from the inside.</p> <ul style="list-style-type: none"> <li>• Develop a GBV/SEA communication strategy – multimedia campaign</li> <li>• Enhanced gender campaigns women’s engagement in: formal labour markets and resettlement processes for communities along the transmission routes</li> <li>• Outreach to schools on risks of GBV/SEA</li> <li>• Sensitization on children labour and their protection laws</li> <li>• Implementation of internal GAP findings to role model women’s engagement in formal labour market</li> <li>• Sensitizing all contractors and employees on the Codes of Conduct including in the worker camps as well as strengthened monitoring</li> </ul>				<p>Codes of Conduct signed, complied with and monitored</p> <p>Procurement processes and contracts defining GBV/SEA/SH</p>	
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	<ul style="list-style-type: none"> <li>Integrating GBV/SEA/SH risk management in Contractor's ESMPs,</li> <li>Ensuring that all procurement processes and contract define and reinforce GBV/SEA/SH requirements</li> <li>Incorporate GBV/SEA requirements and expectations in the contractor and consultants contracts</li> <li>Allocation of funds for GBV/SEA/SH related costs in procurement documents</li> </ul>					
<ul style="list-style-type: none"> <li>Monitoring and evaluation of GBV issues</li> </ul>	<ul style="list-style-type: none"> <li>Conduct M&amp;E field visits.</li> <li>Review quarterly the action plan and progress against indicators listed</li> <li>Provide quarterly report throughout project implementation</li> </ul>	Throughout the implementation of the project	Gender Specialist (Consultant), TANESCO Gender Focal Person and GBV Service Provider	TANESCO & Project Consultant	Information obtained from the Quarterly report  Performance analysis on lessons learnt and challenges to inform 2023 and long term GBV/SEA/SH plans	5,000.00

## **Addendum to Company Code of Conduct: Gender Based Violence and Child Abuse/Exploitation Code of Conduct**

Contractors' employees are obliged to create and maintain an environment which prevents gender-based violence (GBV) and child abuse/exploitation (CAE) issues, and where the unacceptability of GBV and actions against children are clearly communicated to all those engaged on the project. In order to prevent GBV and CAE, the following core principles and minimum standards of behavior will apply to all employees without exception:

1. GBV or CAE constitutes acts of gross misconduct and are therefore grounds for sanctions, penalties and/or termination of employment. All forms of GBV and CAE including grooming are unacceptable be it on the work site, the work site surroundings, or at worker's camps. Prosecution of those who commit GBV, or CAE will be pursued.
2. Treat women and children (persons under the age of 18) with respect regardless of race, color, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status.
3. Do not use language or behavior towards women or children that is inappropriate, harassing, abusive, sexually provocative, demeaning or culturally inappropriate.
4. Sexual activity with children under 18—including through digital media—is prohibited. Mistaken belief regarding the age of a child and consent from the child is not a defense.
5. Exchange of money, employment, goods, or services for sex, including sexual favors or other forms of humiliating, degrading or exploitative behavior is prohibited.
6. Sexual interactions between contractor's and consultant's employees at any level and member of the communities surrounding the workplaces that are not agreed to with full consent by all parties involved in the sexual act are prohibited. This includes relationships involving the withholding, promise of actual provision of benefit (monetary or non-monetary) to community members in exchange for sex – such sexual activity is considered “non-consensual” within the scope of this Code.
7. Where an employee develops concerns or suspicions regarding acts of GBV or CAE by a fellow worker, whether in the same contracting firm or not, he or she must report such concerns in accordance with Standard Reporting Procedures.
8. All employees are required to attend an induction training course prior to commencing work on site to ensure they are familiar with the GBV and CAE Code of Conduct.
9. All employees must attend a mandatory training course once a month for the duration of the contract starting from the first induction training prior to commencement of work to reinforce the understanding of the institutional GBV and CAE Code of Conduct.

10. All employees will be required to sign an individual Code of Conduct confirming their agreement to support GBV and CAE activities.

I do hereby acknowledge that I have read the foregoing Code of Conduct, do agree to comply with the standards contained therein and understand my roles and responsibilities to prevent and respond to GBV and CAE. I understand that any action inconsistent with this Code of Conduct or failure to act as mandated by this Code of Conduct may result in disciplinary action.

**FOR THE COMPANY**

**Signed by:** \_\_\_\_\_

## **SAMPLE TERMS OF REFERENCE**

### **Terms of reference to recruit an NGO responsible for implementation of measures to prevent and respond to Gender-Based Violence (GBV), including Sexual Exploitation and Abuse (SEA) and Sexual Harassment (SH), in support of TAZA Project**

#### **TERMS OF REFERENCE**

#### **1. BACKGROUND AND JUSTIFICATION**

Thirty-five percent of women worldwide have experienced either physical and/or sexual violence by intimate partners or other actors (WHO 2013). The World Bank recognizes that combating gender-based violence (GBV) globally is critical for closing gaps between men and women, ensuring a lasting impact on a reduction in poverty, and promoting inclusive and sustainable economic growth.

Nonetheless, the recent Good Practice Note on Addressing Gender-Based Violence in Investment Project Financing involving Major Civil Works<sup>5</sup> (GBV Good Practice Note) recognizes that major civil works may exacerbate GBV risks, notably risks for sexual exploitation and abuse (SEA) as well as sexual harassment (SH), by a range of perpetrators linked to project implementation in both public and private spheres in a number of ways, such as the following:

- Projects with a large influx of workers may increase the demand for sex work—even increase the risk for sex trafficking of women—or the risk of early marriage in a community where marriage to an employed man is seen as the best strategy for an adolescent girl’s livelihood. Furthermore, higher wages for workers in a community can lead to an increase in transactional sex. The risk of sexual relations between laborers and minors, even when it is not transactional, can also increase.
- Projects create changes in the communities in which they operate and can cause shifts in power dynamics between community members and within households. For example, men in the community may be agitated when they think that workers are interacting with women in the community or when female project employees begin to bring more income than usual back to the household. Hence, abusive behavior can occur not only between project staff and those living in and around the project site, but also within the homes of those affected by the project.
- When land redistribution occurs—for example due to resettlement for civil works—women may be extremely vulnerable to GBV incidents. This is particularly true in countries where the legal systems preclude women from holding titles to land.
- Insecurity for women and girls is exacerbated by a lack of appropriate transportation options. Traveling to and from work in some settings can force women and girls in some contexts to use unsafe, poorly lit commuter routes, or unsafe public transport.

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<sup>5</sup> <http://documents.worldbank.org/curated/en/399881538336159607/Environment-and-Social-Framework-ESF-Good-Practice-Note-on-Gender-based-Violence-English.pdf>

Risk of violence is increased when women must travel long distances to access work opportunities or are forced to travel at night.

The Good Practice Note was prepared to assist Task Teams in establishing an approach to identifying GBV risks, in particular for SEA and SH, which investment project financing operations involving major civil works contracts may present and to advise Borrowers accordingly on how best to manage such risks. The Note builds on World Bank experience and good international industry practices, including those of other development partners.<sup>6</sup>

The World Bank's new Environmental and Social Standards (ESS)<sup>3</sup> set out specific requirements relating to the identification and assessment of environmental and social risks and impacts associated with projects financed by the World Bank. The Good Practice Note instructs the Task Teams on good practices permitting the project to manage GBV risks and impacts in the context of the Environmental and Social Framework, notably the following Environmental and Social Standards, as well as other safeguards policies that pre-date the Framework:

ESS 1: Assessment and Management of Environmental and Social Risks and Impacts;  
ESS 2: Labor and Working Conditions;  
ESS 4: Community Health and Safety; and  
ESS 10: Stakeholder Engagement and Information Disclosure.

These Terms of Reference (TOR) have been drafted for the purpose of recruiting an NGO that specializes in GBV prevention and response, including for SEA and SH, and which will be responsible for supporting the project in preventing, mitigating, and responding to such risks during implementation.

## **2. PROJECT BACKGROUND**

The Government of the United Republic of Tanzania (GoT) through TANESCO has obtained financing from the World Bank (WB) to implement the proposed 400kV double circuit power Transmission Line (TL) from Iringa to Sumbawanga (616 km) via Mbeya and Tunduma with associated substations at Kisada, Mbeya, Tunduma and Sumbawanga. The project also includes the 4km of the 330kV from Tunduma Substation to Zambia border with objective of interconnection with Zambia. Also, the transmission line will connect the North West regions of Tanzania to the national grid. The general objective of the project is to increase transit capacities and flexibility of operation of the grid and to improve sustainable electricity supply in Zambia, Tanzania, Kenya and the South African Power Pool (SAPP) as well as East Africa Power Pool (EAPP) countries.

Also, implementation of this project will connect Sumbawanga to the national grid and TANESCO will stop using a diesel generator at Sumbawanga for power generation as it is very expensive and not environmentally friendly. The project will reduce cost of generating electricity that are incurred by TANESCO.

## **3. NATIONAL CONTEXT FOR GENDER-BASED VIOLENCE (GBV)**

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<sup>6</sup> <http://www.worldbank.org/en/topic/gender>

<sup>3</sup> <http://documents.worldbank.org/curated/en/383011492423734099/pdf/114278-WP-REVISED-PUBLIC-Environmental-and-Social-Framework.pdf>

Gender based violence is prevalent in Tanzania - 40% of women aged 15 -49 years have experienced physical violence, whilst 17% have experienced sexual violence. 44 percent of women aged 15-49 have experienced either physical or sexual violence by an intimate partner. Spousal violence prevalence is highest in rural areas, averaging at 52 percent while the prevalence in urban areas averages at 45 percent. Additionally, almost 30 percent of girls experience sexual violence before the age of 18 whilst more than 1 in 3 girls are married before their 18th birthday and the average prevalence of FGM among girls and women aged 15-49 is 10 percent. Types of gender based violence include, physical violence, intimate partner violence, sexual abuse, economic abuse, trafficking of persons, denial of basic necessity and early marriage.

GBV in Tanzania is widely accepted, 58 percent of women and 40 percent of men believe that a husband is justified in beating his wife under certain circumstances. It is often underreported and survivors who report their experiences risk “scorn” as communities consider sexual violence and IPV private issues. According to the TDHS 2015-2016, only 54 percent of women who experienced physical or sexual violence sought help. Of those who do seek help, most women turn to a family member, with only 9 percent seeking help from the police.

The national response to GBV in Tanzania is anchored on key legal, policy and development frameworks which illustrate improved commitments to the rights and protections of women and girls. The legal and policy framework that responds to GBV is found in a number of specific laws including: The Constitution, Law of the Child, Law of Marriage, Anti-Trafficking in Persons Act, Criminal Procedure Act, Employment and Labour Relations Act, Education Act, Customary Laws Declaration Order of 1963, HIV and AIDS (Prevention and Control) Act, Land Act, Indian Succession Act, Probate and Administration of Estates Act, Rights of Persons with Disabilities Act, and Village Land Act. The National commitments to addressing GBV are captured in the National Plan of Action to End Violence Against Women and Children in Tanzania 2017/18 – 2021/22 and the National Plan of Action to End Violence Against Women and Children Zanzibar 2017-2022. However, enforcement of laws continues to be a challenge. This is due to, among other factors, weak investigations, insufficient evidence, social norms against reporting and delays within the court system.

The construction of the transmission line will entail major civil works as well as resettlement. These types of work will require a large labour force that may not be fully sourced locally. Often, the construction workers are male requiring projects to set up construction camps/on-site accommodation for workers and families. Risks of SEA relating to women and children coming into close contact with workers (whether from within or outside the community) increases. An influx of workers can expose the community to risks of sexual exploitation and abuse. The influx of predominantly male workers into a community area can expose women and vulnerable groups living in the community and providing services (such as traders); for example, females engaged in near-site petty businesses may suffer abuse from their benefactors/guardians in instances where they do not meet projected sales for the day.

Sexual harassment and other forms of abusive behavior is exacerbated by traditionally male working environments which might potentially compromise the wellbeing and safety of vulnerable groups of workers and the local communities while adversely affecting project performance. On the other hand, there is the potential of SEA risks for female members of the community who are seeking employment and/or services provided by the project and are given by project employers in exchange for sex.

The resettlement process presents risks for women being excluded in consultations and ultimate compensation. Husbands or male partners may refuse to share information about their compensation plans. Tensions over compensation may result in situations of emotional abuse, spousal abandonment and in some instances intimate partner violence. Also, there may be risks with regards to women's lack of awareness of their rights or how to access support regarding these issues.

Large and more remote construction contracts may include women who travel to live in or around the camps, who are potentially highly vulnerable and will be a target for abuse, harassment and violence because of their lack of a local support network. Also, access roads created by the project (e.g. for transportation of materials) may cross through established routes used by the community, such as schools/market routes, crossing such paths could put children and vulnerable groups at risk of exploitation and abuse, especially after dark in remote areas.

There might be emergence of survival sex/transactional sex practiced by vulnerable women, girls looking for money to cover their needs and those of their families. They become vulnerable and easily abused and might suffer contracting infectious diseases, STDs and STIs due to labour influx. There may also be the likelihood of them suffering sexual exploitation and abuse

There are the potential risks associated with child labour (children dropping out of school to work with contractors) as well as the risks of underage/school-going girls eloping with project workers or be married off to project workers in exchange for resources to the girl's family

#### **4. OBJECTIVES**

The general objective of this work is to support World Bank-financed projects in GBV risk prevention, mitigation, and response, including SEA and SH, linked to implementation operations, and in the provision of holistic support for survivors in the project zone.

The specific objectives of the NGO's work are to:

1. Carry out regular GBV risk mapping in the project intervention areas by means of consultations and participatory approaches, both in terms of the context and, more particularly, risks that are likely to be exacerbated or potentially prevented by project implementation, and propose effective and ethical prevention and mitigation measures to be implemented by the different project stakeholders;
2. Design and implement risk awareness-raising and prevention campaigns for both the concerned communities and the workers hired for the project. These campaigns should include, among others, regular awareness-raising and training for workers and communities affected by the project on GBV, SEA and SH, their causes and consequences and the risks specifically linked to the project, the response services available to survivors, the project code of conduct and the penalties for violations, the GRM, how to file a grievance and the objectives of the mechanism, etc.;
3. Ensure that survivors have access to holistic care, including psycho-social, medical, and legal support under a survivor-centered response protocol;



4. Support the Environmental and Social Unit (ESU) within the Project Management Unit (PMU) in implementing a GRM and, more particularly, in filing, managing, and reporting GBV complaints during project implementation, in accordance with the GRM manual that will be drafted and established to ensure ethical and confidential management of GBV complaints; and
5. Support the project in monitoring and evaluating GBV prevention and response activities in an ethical manner.

## **5. SCOPE OF WORK AND TASKS FOR THE NGO**

Interventions to combat project-related GBV must take into account and contribute to implementation of the following principles:

- i. *Survivor-centered action:* Favor an approach related to GBV prevention and mitigation, and for combatting GBV, through a lens focused on the survivor and respect for their confidentiality and safety, recognizing them as principle decision-makers for their own care and treating them with consideration, dignity, and respect for their needs and wishes.
- ii. *Emphasis on prevention:* Adopt risk-based approaches that aim to identify key project-related risks of GBV/SEA/SH and contribute to putting into place measures to prevent or minimize at a minimum the risks.
- iii. *Support for survivors:* Map the existing services in project implementation zones and assess the quality of service provision so as to establish a referral and/or care pathway for survivors who choose to seek services. The minimum package of services should include medical, psychosocial, and legal case management that complies with national directives and international good practices and provides to survivors who report project-related incidents with referrals to the project's grievance redress mechanism.
- iv. *Community engagement:* Engage stakeholders in the population affected by project implementation by recruiting community focal points—local authorities, women leaders, civil society organizations, women's and children's rights advocates—as resources for knowledge on local level risks, effective protection factors, and support mechanisms throughout the project cycle. Community engagement with identification and support for community focal points will also contribute to capacity building and sustaining efforts, while also ensuring that survivors have immediate and culturally appropriate access to information and services.
- v. *Evidence-based action:* Develop approaches based on national and international research and good practices on combating GBV, SEA, and SH effectively.
- vi. *Enabling continuous monitoring and learning:* Ensure that the approach integrates a mechanism for regular monitoring and analysis to track effectiveness and build knowledge of what works to prevent, mitigate, and respond to GBV, SEA, and SH on the project.

### **i. Mapping GBV risks and services in the project implementation zone**

*The service mapping exercise should take place during the project preparation phase as part of the social risk assessment. This exercise should not be carried out by the NGO, unless it was not done during project preparation or if it needs to be updated.*

- Map the holistic case management services in communities in which the project is being implemented, including medical, psychosocial, and legal services at a minimum. Include in the mapping exercise an assessment of basic service quality and accessibility with regard to national and international minimum standards<sup>7</sup> in order to establish a referral pathway for use by the project in the various implementation locations.
- Develop a referral pathway and/or case management system for survivors in each community/sub-prefecture to distribute to the communities and project workers, which permits ethical and nondiscriminatory case management and referrals for GBV survivors in project implementation zones.
- Ensure that the system defines a minimum package of services, in accordance with the ESU within the PMU, including at a minimum psychosocial, medical, and legal services. The referral pathway is to be based on a detailed mapping of the existing services in the project implementation zones, as described above, as well as on an effective and efficient approach that complies with good practices to close any eventual gaps. The response system proposed by the NGO will ensure adherence to a survivor-centered approach, prioritizing at all times respect for the survivor’s confidentiality, safety, choice, and right to no discrimination. The system will be tasked with responding to all reports regarding GBV incidents linked to the project, independently of the process for investigating and identifying the perpetrator.
- Engage in regular participatory community mapping of GBV and SEA risk “hot spots” and the most vulnerable groups, especially within the context of project implementation.
- Identify specific activities for the various project stakeholders to undertake in order to prevent the identified GBV and SEA risks on the basis of the community mapping exercise and consultations with the local stakeholders, the Environmental and Social Unit within the Project Management Unit, and the other project implementation actors.

### **ii. Training and awareness-raising**

- Define and implement a community communication and awareness-raising strategy, report regularly on progress regarding activities and the project implementation timetable targeting the communities living in the project adjoining areas, as well as especially vulnerable groups (e.g. adolescent girls,

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<sup>7</sup> The services must comply, among others, with the standards set out in the National Guide for Holistic Case Management for Rape Survivors of the Central African Republic — Ministry of Health, Clinical Management of Rape Survivors — WHO, Guidelines on Caring for Child Survivors of Sexual Abuse in Humanitarian Settings — UNICEF/IRC, the Interagency Gender-Based Violence Case Management Guidelines and the Inter-Agency Minimum Standards on the Prevention of and Response to Gender-Based Violence in Emergencies — UNFPA.

adolescent mothers, women heads of household, displaced women, indigenous women, boys living on the street or without shelter, etc.). The NGO should also work with the NGO supporting implementation of the GRM and the contractor personnel responsible for social safeguards.

- Define a plan for regular training of all workers employed by the project, including an initial training and refresher training plan on a monthly interval, in collaboration with the Environmental and Social Unit within the Project Management Unit as well as the contractor, and the supervision consultant.
- Prepare community awareness-raising and worker training messages and information, education, and communication (IEC) materials on GBV and on SEA risks related to the project and to the country context adapting and using existing tools and the risk mapping. The training and awareness-raising materials should fulfill the following minimum criteria:
  - Ensure that the materials center on human rights, survivors and children and adhere to the guiding principles for addressing GBV;
  - Be non-discriminatory, centered on equality and accountability, and gender-sensitive;
  - Adapt the GBV prevention messages to the specific project-related risks and to the prevention strategies implemented by the project, including codes of conduct, the grievance redress mechanism, and the services available to survivors;
  - Adopt an active approach centered on behavioral change that uses various educational and learning approaches for the different target groups;
  - Use culturally appropriate content and presentation;
  - Ensure that the materials are understandable, in the local language and/or developed using communication tools that are adequate and can be understood by all members of the community, including those who are illiterate;
  - Use a simplified language that is adapted as necessary for each target group in order to relate educational messages.
- Submit the training and awareness-raising materials to the ESU within the PMU and to the World Bank for validation and incorporate any eventual feedback;
- Hold a training workshop to test and adapt the training and awareness-raising tools and approaches;
- Develop a pre-test and post-test tool to measure changes in the knowledge, attitudes, skills, and behavior of members of the community and project workers after awareness-raising;

- Conduct GBV awareness-raising and prevention campaigns in the community, using a network of local focal points;
- Provide training to the focal point network on community awareness-raising approaches and on responses and referrals for GBV survivors, as well as training on specific topics concerning project-related GBV identified within the communities. This will provide a critical mass of community focal points with the tools to ensure that survivors have a network of trusted persons in their communities that they can seek out in case of violence and be directed to the appropriate services in a timely manner;
- After the training period, support the focal points to implement a community engagement campaign targeted at opinion leaders, community organizations, and influential men and women who play a key role by sustaining acceptance of certain attitudes regarding GBV, the most vulnerable groups in terms of GBV and SEA risks, and the community as a whole. These campaigns should include messages about project-related GBV/SEA risks, along with the mitigation, prevention, and response measures implemented. More particularly, the focal points will help inform various population groups about the project's codes of conduct, the relevant sanctions, the grievance redress mechanism and the services available to survivors, how to access them, the grievance redress process, etc.

### **iii. Support for survivors**

*All projects, regardless of the risk level, must:*

- Provide safe spaces accessible to women and girls where survivors can report GBV incidents, including those presumed to be project-related, to trained personnel, without fear for their safety or breach of their confidentiality;
- Provide primary psychosocial care and integrated support for GBV survivors seeking referrals to other services;
- Ensure that survivors have access to the necessary medical, psychosocial, and legal services due to the response protocol and referral system established as part of the project and according to the needs and choices of each individual;
- Ensure that medical care remains the priority in cases involving rape and other physical injuries. In the case of rape, support must be provided in accordance with the World Health Organization Guide and the national protocol in effect. Ideally, this support must be provided within 72 hours. At a minimum, it must include emergency contraception and post-exposure prophylaxis to prevent HIV transmission to a seronegative person who may have been infected during an incident of rape;

*Projects at substantial or high risk must also:*

- Facilitate access to safe and confidential services for survivors (including transport, payment of documentation and accommodation fees to facilitate access to minimum basic services when necessary), and ensure that case management be provided directly by the service providers;

- Guarantee the provision of psychosocial, medical, and legal services, if these services are not available in the project execution zone.

#### **iv. Support for the project's Grievance Redress Mechanism**

- Coordinate, through the referral system established in the project zones, referrals of survivors to the confidential GRM set up to respond to GBV incidents;
- Support the project with complaint intake, documentation, and referrals, in compliance with the GBV GRM structure developed by the project and by collaborating to diversify the possible channels for filing complaints;
- Support the project with complaint management, by advocating compliance with the guiding principles for GBV case management and by ensuring the survivor's confidentiality and safety during the process of managing and verifying the complaint, which will be managed by an independent structure;
- Ensure that any collection of GBV, SEA, and SH-related data, including intake and referral forms and those for the GRM, is done confidentially and ethically and that files are kept in a safe and confidential place, in compliance with international good practices.<sup>8</sup>

#### **v. Monitoring and evaluation**

- Develop and test specific indicators for effective monitoring and evaluation of all GBV interventions (prevention, risk mitigation, and response), such as the indicators suggested in the table below (see Appendix);
- Establish an ethical data collection system for GBV cases supported through the project (in compliance with the system already in use in the country, e.g. GBVIMS);
- Submit monthly reports of aggregated data on recorded complaints presumed to be project-related as well as on the support provided to survivors who report project-related incidents, while ensuring the confidentiality, safety, and informed consent of survivors;
- Report any GBV complaints recorded and presumed to be project-related within 24 hours of receiving them, using the information-sharing protocol established beforehand by the project and in compliance with the GBV Good Practice Note<sup>9</sup> and ethical considerations on documenting and reporting information about GBV incidents;
- Submit monthly situation analysis reports and at least one final report on the project, which will be shared with the ESU within the PMU and the World Bank. Monthly reports must include quantitative and qualitative data, monitoring indicators, progress toward expected outcomes, and any necessary

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<sup>8</sup> These include the WHO's 2007 Ethical and Safety Recommendations for Researching, Documenting, and Monitoring Sexual Violence in Emergencies as well as GBVIMS best practices, <http://www.gbvims.com/wp/wp-content/uploads/BestPractices2.pdf>.

<sup>9</sup> Page 28 and Table 2, page 30.

adjustments. The final report will summarize the activities to combat GBV implemented as part of the project and the lessons learned during the project, including recommendations and action points for long-term continuation of GBV prevention measures;

- Collect quarterly information about GBV and SEA risks linked to the project using participatory methods and propose risk mitigation measures to the ESU within the PMU to be implemented by different project stakeholders.

## 6. DELIVERABLES

The NGO is expected to provide the following deliverables:

1	Work plan with timetable
2	Mapping of existing GBV services and implementation of a response and referral/case management protocol for survivors in the project execution zone or within a radius of approximately 30 kilometers from the project area (specific geographical parameters to be adapted by each project, according to the area considered to be adjoining the project and the findings of the GBV risk assessment)
3	Reports summarizing the community consultations highlighting the key themes and critical risks identified at each meeting
4	Quarterly assessment of project-related GBV risks and proposals for mitigation measures to the ESU within the PMU to be implemented by different project stakeholders
5	Context-appropriate awareness-raising and training materials (presentations, documents, manuals, etc.)
6	Training of GBV focal points in the communities adjoining project implementation zones
7	GBV awareness-raising and training sessions on codes of conduct and GBV risk mitigation plan for all project employees (after the initial sessions, once a month/quarter (as determined by the project according to the risk level and feasibility) throughout the life of the project)
8	Awareness-raising sessions at worksites for project adjoining communities on GBV issues during work on the project at a frequency to be determined by the NGO
9	Holistic case management for survivors (for projects at high or substantial risk) and referrals to appropriate services
10	Participation in the work supporting the project's GRM
11	Monthly reports summarizing interventions and outcomes obtained as compared to the established indicators
12	Draft of final report will be submitted at the latest two weeks after the end of the project. The ESU within the PMU will have 10 days to provide feedback.  The definitive report at the end of the project, incorporating the feedback from the Environmental and Social Unit, will be submitted with five hard copies and an electronic copy on CD (MS Word file), three days after receipt by the NGO.

13	Transmission within 24 hours to the ESU of reports of all project-related GBV/SEA/HS cases. This report will be transmitted to the World Bank Task Team Leader within a few hours using the information-sharing protocol included in the GRM procedures for handling GBV/SEA/SH cases.
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## **7. DURATION AND PROCEDURES FOR DELIVERING SERVICES**

The total duration of the NGO's services will be defined by the project, in accordance with the risk level. Awareness-raising activities will continue on a regular basis throughout the life of the project.

The work will be done under the supervision of the ESU within the PMU and in coordination with the Supervision Consultant and the World Bank.

## **8. NGO QUALIFICATIONS**

The NGO providing services must:

- Be legally incorporated in the country;
- Have at least five years of experience in GBV prevention and response;
- Have ongoing activities to address GBV or protect women and children in the project intervention zones;
- Have excellent experience in the following fields: (a) Community engagement and promotion of behavior change; (b) Training and promotion of behavior change; (c) Organization of safe spaces for women and girls; (d) Case management, psychosocial and psychological support; (e) Medical referrals and establishment of collaboration agreements with competent health care facilities, and (f) Legal assistance;
- Have experience in ethical data collection on case management of GBV survivors;
- Have a code of conduct and a clear internal policy on preventing and responding to sexual harassment, exploitation and abuse, including a plan for regular personnel training that complies with the minimum standards of the project;
- Have experience in strengthening local accountability systems, including training and awareness-raising on prevention of EAS and SH;
- Have the necessary material and human resources to fulfill the tasks, including a project team made up of individuals with adequate qualifications and experience for the contract;
- Keep accounts and have had at least one financial audit conducted in the past two years by well-known and reputable audit firms; and
- Demonstrate positive outcomes in implementation of projects financed by international donors.



## APPENDIX 1

### Examples of project indicators for monitoring GBV interventions

Objectives	Examples of indicators
<p>1. Mapping case management services, risks, actors and “hot spots” related to GBV using regular consultations with stakeholders</p>	<p>Number of women, women’s organizations, and women’s groups consulted for the purpose of identifying risks and gathering their opinions on mitigation measures</p> <p>Number of actors met during the stakeholder mapping process</p> <p>Number of service providers evaluated during the stakeholder mapping process</p>
<p>2. Community and employee awareness-raising campaigns on project-related risks, and mitigation and response mechanisms</p>	<p>Number of trainings / awareness-raising campaigns held on GBV prevention</p> <p>Number of trainings / awareness-raising campaigns held on project-related risks and response mechanisms (including referral pathways)</p> <p>Number of community members sensitized (men, women, boys, and girls) regarding GBV prevention and GBV risks and mitigation measures</p> <p>% of employees trained on GBV, SEA, SH and codes of conduct</p> <p>Number of focal points trained in the community</p> <p>% of community members with improved scores on the post-test, demonstrating an increase in knowledge and a change in attitude</p> <p>% of employees with improved scores on the post-test, demonstrating an increase in knowledge and a change in attitude</p>

Objectives	Examples of indicators
<p>3. Implementation and monitoring of the GBV response mechanism, including clearly defined referral pathways</p>	<p>Number of GBV/SEA/SH cases reported to the GRM (disaggregated by survivor age and sex and type of incident reported)</p> <p>% of GBV/SEA/SH cases closed within the delays defined in the project GBV Action Plan (disaggregated by outcome of the verification process)</p> <p>% of survivors reporting project-related incidents who were referred to case management services (disaggregated by type of service)</p>
<p>4. Needs-based support for service providers, such as training and technical expertise</p> <p><i>(Relevant for projects at substantial or high risk, for which it is respectively recommended to consider that contracted NGOs should be expected to provide medical, psychosocial, and legal services for survivors, bridging existing gaps in project implementation zones)</i></p>	<p>Number of service providers trained or provided with technical expertise</p> <p>Number of survivors reporting project-related GBV/SEA/SH incidents who received medical care within 72 hours after an incident of rape</p> <p>Number of survivors reporting project-related GBV/SEA/SH incidents who received psychosocial support services</p> <p>Number of survivors reporting project-related GBV/SEA/SH incidents who received legal services</p>

## APPENDIX 2

### Examples of technical evaluation criteria for expressions of interest by NGOs

Maximum points: 80

Criteria	Scoring
More than three years of experience with GBV prevention activities, notably (a) Community mobilization and promotion of behavior change, and (b) Organization of trainings on sexual harassment and sexual exploitation and abuse	2 points per activity  If NGOs have worked for 10 years or more on prevention activities, add an extra point per activity.
More than three years of experience with GBV response, notably: (a) Case management, psychosocial and psychological support, (b) Medical care referrals and establishment of collaboration agreements with competent health care facilities, and (c) Legal assistance	2 points per activity  If NGOs have worked for 10 years or more on response activities, add an extra point per activity.
Experience in training (a) medical personnel, (b) psychosocial service providers, and (c) judges	2 points per category
Is a regular member of national GBV coordination mechanisms	5 points
Experience in creating and organizing safe spaces for women and girls	2 points

<b>Criteria</b>	<b>Scoring</b>
Ongoing activities in the project implementation zone	2 points If they are GBV activities, add 2 extra points
Experience in ethical data collection on case management for GBV survivors	5 points
Experience in setting up community-based grievance redress mechanisms	5 points
Has a code of conduct and a clear internal policy on preventing and responding to sexual harassment, sexual exploitation and abuse, including a plan for regular personnel training that complies with the minimum standards of the project	3 points
Has at least eight full-time staff members	5 points
Keeps accounts and has had at least one financial audit conducted in the last two years by well-known and reputable audit firms	5 points
Number of international donors in the last three years	2 points per financing agency