TECHNICAL ASSISTANCE FOR REGIONAL TRAINING IN THE CARICOM MODEL FOR
NATIONAL PREVALENCE SURVEYS ON GENDER-BASED VIOLENCE AND THE
PILOTHING OF THE SURVEY IN GRENADA (2016-2017)

Considered at the Two Hundred and Seventy-First
Meeting of the Board of Directors on May 16, 2016

Paper BD 70/16

MAY 2016
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<tr>
<th>Position</th>
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<tr>
<td>Division Chief, Social Sector Division (SSD)</td>
<td>Deidre Clarendon</td>
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<td>Portfolio Manager, SSD</td>
<td>Idamay Denny</td>
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<tr>
<td>Operations Officer (Gender and Development), SSD</td>
<td>Maria Ziegler</td>
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</tbody>
</table>
1. **BACKGROUND**

1.01 According to a World Health Organisation (WHO) analysis, one in three women world-wide will experience violence.\(^1\) The significance of this fact is recognised in Goal five of the Sustainable Development Goals (SDG) where it is stated that States should commit to eliminate all forms of violence against all women and girls in public and private spheres, including trafficking, sexual and other types of exploitation.\(^2\) Gender-based violence (GBV), and in particular violence against women and girls, is one of the most common forms of insecurity facing citizens in the Caribbean. As per the Country Gender Assessment (CGA) Synthesis Report 2016 of the Caribbean Development Bank (CDB),\(^3\) GBV is endemic among the researched countries\(^4\), and according to the latest available data from the United Nation’s Office on Drugs and Crime (UNODC) Trend Survey, three of the top ten recorded rape rates in the world in 2007 occurred in the Caribbean.\(^5\) All countries in the Caribbean for which comparable data is available

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\(^{1}\) WHO, Department of Reproductive Health and Research, London School of Hygiene and Tropical Medicine, South African Medical Research Council (2013). Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence, p.2. For individual country information, see The World’s Women 2015, Trends and Statistics, Chapter 6, Violence against Women, United Nations Department of Economic and Social Affairs, 2015 - See more at: [http://www.unwomen.org/en/what-we-do/ending-violence-against-women/facts-and-figures#sthash.vWmsXt8b.dpuf](http://www.unwomen.org/en/what-we-do/ending-violence-against-women/facts-and-figures#sthash.vWmsXt8b.dpuf)

\(^{2}\) [https://sustainabledevelopment.un.org/sdgproposal](https://sustainabledevelopment.un.org/sdgproposal)

\(^{3}\) The CGA Synthesis Report was elaborated by Rawwida Baksh and Associates with support from CDB. The Report reveals a predominance of male perpetrators (reported cases), women and girls as the vast majority of victims/survivors, men and boys increasingly reporting GBV, inadequate police response, reporting, and investigation; lack of shelters and victim support services (counselling, psychosocial services); lack of trained medical professionals and adequate (forensic) tools and no or limited legal aid as well as the lack of understanding by women of their legal rights.

\(^{4}\) Antigua and Barbuda, Anguilla, Barbados, Belize, Grenada, Dominica, Montserrat, St. Kitts and Nevis, St. Lucia, and St. Vincent and the Grenadines.

experienced a rate of rape above the unweighted average of the 102 countries assessed.\textsuperscript{6} In addition to quantitative increases in rates of violence against women and girls in the Latin American and Caribbean region, there has also been a higher incidence of cruelty in violence against women such as strangulation, dismemberment, a larger number of underage victims and high rates of kidnapping and rape.\textsuperscript{7}

1.02 Despite some statistics on GBV, Caribbean Community (CARICOM) Member States do not generate regular and comprehensive national data on the prevalence, nature and response to GBV, including violence against women. While there have been notable efforts by police and key Ministries in the collection of administrative data, lack of comprehensive and systematic data on the prevalence of GBV remains a serious bottleneck in determining the scope of the problem and its effects on social and economic development – because GBV comes at a cost; it does not only harm the affected victims, but also society as a whole. GBV impacts negatively on Gross Domestic Product: on the one hand, through increased public spending in terms of social services, increased judicial system and police costs; and on the other hand, through decreased human capital and productivity. There are costs arising from physical and mental health, income lost due to missed work or low productivity and the negative impact on children’s school performance.

1.03 In the spring of 2014, in partnership with CARICOM Secretariat, the Government of Canada, the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) and the United Nations Development Programme (UNDP), CARICOM statistical experts and governments, reviewed the various global models of assessing the prevalence of GBV, and agreed with CARICOM to pilot and adopt a CARICOM Model\textsuperscript{8} on National Prevalence Surveys on GBV (see Appendix 1 on the CARICOM Model). This was confirmed by the Council for Human and Social Development (COHSOD) of CARICOM in May 2014 and it was agreed that an initial pilot would take place in a larger CARICOM country [Jamaica – ongoing – implemented with support from Inter-American Development Bank (IDB)] and one small island state in the Eastern Caribbean (Grenada - proposed). See Appendix 2 for Partnerships in the Programme.

1.04 The Country Gender Assessment (2014) for Grenada underlines the importance of piloting the CARICOM Model in Grenada by highlighting the gravity of GBV in Grenada. GBV is a severe problem in Grenada with 1,630 officially reported cases of sexual offences during the period 2000-10. In 2012, Grenada, with 235.1 cases of total sexual offences per 100,000 population, had one of the highest rates of sexual offences per capita in the Region.\textsuperscript{9} Further to this, Grenada was chosen because:

(a) Within the Organization of Eastern Caribbean States (OECS), Grenada has one of the stronger track records in investing in statistics as compared to a number of the other OECS – so in general there is an openness to a new survey process and a degree of capacity to support the process.

(b) Grenada is one of UN Women’s main programme countries in working on GBV, and UN Women has a long history of partnership with the government and non-governmental organisations (NGO) in Grenada on GBV. The Government and Civil Society

\textsuperscript{6} The Bahamas, St. Vincent and the Grenadines, Jamaica, St. Kitts and Nevis, Dominica, Barbados, and Trinidad and Tobago. Crime Violence and Development: Trends, costs, and Policy Options in the Caribbean. 2007. Joint report by UNODC and the Latin America and the Caribbean region of the World Bank. see figure 1.1

\textsuperscript{7} Latin America and Caribbean Regional Strategy on Women’s Access to Justice 2011-2015.

\textsuperscript{8} The CARICOM Model being piloted is based on a long tested global WHO model, which is considered internationally to be the best practice for national, population-based surveys on GBV.

\textsuperscript{9} https://data.unode.org/?inf=1&lng=en, Countries for comparison are The Bahamas, Barbados, Belize, Dominican Republic, Guyana, Jamaica, St. Kitts and Nevis, St. Vincent and the Grenadines, and Trinidad and Tobago.
Organisations have a solid track record in trying to seriously improve policy and protocols, and they allow for a free dialogue at the community level around GBV. There is commitment and political will. 

(c) Grenada has a strong network of experts on gender equality and GBV, and a strong cadre of NGOs\textsuperscript{10} – this is not the case in the other OECS countries – and this is needed in terms of the guidance and work around the National Survey on the Prevalence on GBV that is to be undertaken.

1.05 The CARICOM GBV Model focuses on violence against women as violence against women is the most prevalent form of GBV. It is called GBV because it refers to the root causes of violence against women which is the unequal power relations inherent in gender roles that men and women play. Moreover, the qualitative component of the model will pull in the experiences that men have faced, including their perceptions and responses. There is no quantifiable model available to investigate the violence that men have experienced in intimate partner settings because, statistically, the numbers are very low and it would therefore be cost-prohibitive to launch such a process, and second, men are, in general, not likely to admit to violence in a one-to-one setting.

1.06 Technical assistance (TA) in the form of regional training at the CARICOM level and to the Government of Grenada (GOGR) is needed to:

(a) close the apparent gap in data on GBV in Caribbean countries;

(b) monitor the achievement of the SDGs, in particular Goal five;

(c) foster regional cooperation, expertise and harmonisation in data collection led by CARICOM; and

(d) implement the CARICOM Model of National Prevalence Survey in Grenada.

2. THE PROPOSAL

2.01 It is proposed that CDB approve:

(a) the use of funds (UOF) of an amount not exceeding the equivalent of one hundred and fifty-three thousand six hundred United States dollars (USD153,600) from CDB’s Special Funds Resources (SFR) to partner with and finance the implementation by UN Women of: support to the CARICOM Secretariat in building regional knowledge transfer and sustainability in systematic collection, analysis and dissemination of comparable prevalence data on GBV (regional component); and

(b) a grant to GOGR of an amount not exceeding the equivalent of three hundred and sixty-one thousand three hundred ninety-six United States dollars (USD361,396) from CDB’s SFR to pilot the CARICOM Model of National Prevalence Surveys on GBV in Grenada, including Carriacou and Petit Martinique (Grenada component).

2.02 The two main components are:

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\textsuperscript{10} These are, for example, the Grenada National Organisation of Women or GRENCODA.
Regional Component - Knowledge Transfer and Sustainability: CDB and UN Women will work in tandem to support the deepening of the CARICOM region’s expertise in prevalence data collection and analysis on GBV, through the implementation and formal adoption of the CARICOM Model. In so doing, CDB and UN Women will be supporting a common approach to measuring GBV, thereby enhancing regional cooperation and harmonisation on one of the most pressing citizen security concerns. In partnership with the CARICOM Regional Statistical Programme, CDB and UN Women will take the lead in the following:

(i) Convening of a Regional Advisory Group (ad hoc): This group, convened by UN Women in 2015, is made up of representatives from CDB, IDB, CARICOM Secretariat, Pan-American Health Organisation (PAHO), UNDP and UN Women. The group’s main aim is to ensure a coordinated use of the CARICOM Model’s tools; and coordinated “capture” of the efforts of the international organisations supporting the implementation of the CARICOM Model. CDB, as the current Chair of the Development Partners Task Force on Statistics, is well placed to enhance regional cooperation on data collection on GBV.

(ii) Capacity Development for Regional Experts: Critical to the sustainability of this partnership is expanding the regional pool of technical expertise equipped with knowledge and skills necessary to implement the CARICOM Model at national levels. With the piloting of the CARICOM Model in Jamaica (separate project implemented with support from IDB) and Grenada in the coming two years, regional statistical and research experts will participate in the training of field workers in Jamaica and Grenada that is led by the Global Women’s Institute (GWI) at George Washington University. This will expose a cadre of regional experts to the methodology and tools and capacities required for fielding the survey. In addition, with CDB’s financial support, UN Women will also implement a Regional Training of Trainers which will be conducted in the latter part of 2016 in Barbados to ensure sustainability and knowledge transfer.

(iii) Refining Model Tools for CARICOM Context: Questionnaire, manual and field training will be modified to fit the CARICOM context. Through each piloting process, and with the expertise of the GWI (financed by CDB), these revisions will be captured for presentation to CARICOM for adoption. The piloting process in Jamaica will inform the piloting of the questionnaire in other countries, like Grenada, in the CARICOM region; and

Grenada Component - Piloting of the CARICOM Model of National Prevalence Survey on GBV: With overall technical support from UN Women and contracted expertise from GWI (financed by UN Women), GOGR will lead the rolling out of the Pilot Prevalence Survey. The Prevalence Survey Process is broken into three main parts, and on average takes approximately 15 months to complete in total:

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11/ With UN Women and IDB’s support, the ongoing piloting of the CARICOM Model in Jamaica has already resulted in an updated “CARICOM contextualised” version of the WHO Questionnaire. In particular, and based on the feedback from the CARICOM Statistical Offices, the following realities of the sub-region are factored in: (i) Context information: Religion and culture; (ii) Additional types of violence such as early marriage, teenage pregnancy, sexual harassment, and cyber stalking; and (iii) further changes on the age cohort (now 15-64 years) to be interviewed.
Phase I - Preparatory Phase:

(i) Establishment of a National Steering Committee (NSC) which oversees the entire process. This ensures strong national ownership of the survey results, and is chaired by the Ministry of Social Development and Housing in close cooperation with the Ministry of Finance (MOF) and is made up of key government departments, for example, the Gender Bureau, and UN Women. The NSC is required, to coordinate the process and guide/monitor implementation of the Prevalence Survey. The primary role of the NSC would be to:

(aa) guide the overall implementation of the Prevalence Survey on GBV, ensuring alignment with the core methodologies, ethical principles, and questionnaire as per the WHO global methodology and as agreed to within the CARICOM community for piloting;

(bb) determine the strategy for conducting the qualitative aspect of the Survey, including the strategy for carrying out focus group discussions with men, service providers and other groups identified by the NSC;

(cc) identify the need for establishment of ad hoc advisory or expert sub-groups to support the implementation of the Prevalence Survey, as necessary;

(dd) support the inclusion of CARICOM statistical partners so as to ensure knowledge sharing with other CARICOM Member States who will conduct the Prevalence Survey in the future;

(ee) troubleshoot and advise on how to overcome any bottlenecks encountered in the implementation of the Prevalence Survey methodology; and

(ff) guide the launch of the final results of the Prevalence Survey in Grenada, advising on strategy to ensure the effective use of the results.

(ii) Under the NSC, a sub-committee on research is established, so as to ensure that the global tools (questionnaire and qualitative component strategy) are nationally relevant.

(iii) Recruitment of a coordinator responsible for conducting the survey and producing the report.

(iv) Revision of the global WHO questionnaire – the global questionnaire is now undergoing revision in Jamaica’s pilot, and this revised version will be reviewed by Grenada’s National Statistical Office (NSO) and the partners in the programme to determine if any further revisions are needed to adequately meet the needs in Grenada.

(v) Agreement on the strategy for the qualitative component – primarily, the nature of the focus group discussions and the target audience therein.

(vi) Recruitment of field workers. These must be female as only women will be surveyed.
Selection of 1,800 sample households, as well as oversampling (2,100 households in total).

Generation of questionnaire in tablet form. In Jamaica, tablets are used in the survey also.

Phase II - Field work: Quantitative and qualitative component:

(i) Generation of tools for the household interviews and pre-testing.

(ii) Training by GWI of the field workers (two to three weeks).

(iii) Conducting the household survey; cleaning of data and processing.

(iv) In parallel to the field work, the qualitative component will be launched – this requires an agreement per country of how the triangulation of data would be arrived at; conducting of focus group discussions with survivors, men, religious and community leaders, persons running the victim services, health and rule of law sector discussions.

Phase III - Generation of National Report on Prevalence of GBV:

(i) With UN Women’s support, triangulation of results from quantitative and qualitative phases.

(ii) Adoption of Final Report by NSC.

(iii) Support Government-led communications and advocacy efforts in disseminating the findings among national bodies and society.

2.03 The components will be implemented with the following consultancies and institutional agreements (see Appendices 3–9 for a description of the different consultancies):

(a) Project Coordinator (PC), procured by UN Women on behalf of GOGR, to support GOGR in conducting Prevalence Survey on GBV (financed by CDB).

(b) Field workers (interviewers) to do the household portion of the National Prevalence Survey on GBV in Grenada (financed by CDB).

(c) Supervisors of field workers conducting the household portion of the National Prevalence Survey on GBV in Grenada (financed by CDB).

(d) Graphic Designer to lay out the Final Report of the National Prevalence Survey on GBV Grenada (financed by CDB).

(e) Consultancy of GWI: revised Agreement with UN Women to train field workers, to conduct regional training of trainers and to revise model tools (grant component financed by UN Women, regional component financed by CDB).
Consultancy Firm to support the qualitative component of the National Prevalence Survey on GBV in Grenada (financed by CDB).

Statistical Consultant: Data cleaning National Prevalence Survey on GBV Grenada (financed by CDB).

2.04 Upon completion of the piloting, the final revisions to the Model will be consolidated by UN Women at the end of 2017 for presentation to CARICOM, with a view to formal submission to the Heads of Government in order to formally constitute the Model as the regional norm.

2.05 The coordinated use of this CARICOM Model will ensure the systematic collection of globally comparable and comprehensive, nationally-owned data on the prevalence and scope of GBV – and in particular Violence Against Women – in the Region.

2.06 It is assumed that costs of rolling out subsequent surveys, to be conducted by the individual CARICOM governments, will be lower due to the capacity building conducted in the piloting stage. Field workers are available and statisticians of the NSOs will be trained in the survey methodology. This should increase the sustainability of the surveys and the willingness of governments to continue with the surveys.

3. **Outcome**

3.01 The overall outcomes of this TA project are: (a) enhanced technical capacity at the regional/CARICOM level to collect systematic, harmonised and comparable data on GBV in the Region; and (b) improved availability of quality statistics on GBV for Grenada to meet policy and reporting commitments under the SDGs and other international conventions and agreements. See Appendix 10 for the Design and Monitoring Framework.

4. **Justification**

4.01 The TA is consistent with CDB’s Strategic Objectives of supporting inclusive and sustainable growth and development and promoting good governance within its Borrowing Member Countries (BMC), as well as CDB’s Corporate Priorities of improving citizen security in general and reducing GBV in particular. It is also consistent with the SDF 8 thematic and cross-cutting themes of regional cooperation and integration and gender equality. The Project is in line with the objectives and core commitments of the Gender Equality Policy and Operational Strategy and in line with the Gender Equality and Action Plan objective 3, outcome 3.2: Increased BMCs’ capacity for critical data analysis, planning and reporting on gender equality. It is also in line with the stated divisional commitment to “work jointly with development partners and BMC statistical departments to strengthen capability for data collection and dissemination of sex and gender disaggregated data.”

4.02 GBV, and in particular violence against women and girls, is one of the most common forms of insecurity facing citizens in the Caribbean. The findings of CDB’s Country Gender Assessment Synthesis Report 2016 reinforce the need for this TA project as they show that GBV is endemic among the researched countries. (For a justification as to why Grenada is chosen, see Chapter 1. Background)

4.03 UN Women is well placed to implement the TA. UN Women’s primary areas of work in the Caribbean are in supporting the increased measurement of the implementation of the SDGs from a gender lens; ending GBV; increasing access to justice; and ending poverty among women through sustainable development and decent work [see Appendix 11 for background information on UN Women and the Multi-Country Office (MCO) Caribbean]. A key area of UN Women’s work in the Region is ending GBV, with ongoing partnerships in Jamaica and Grenada as well as multiple CARICOM countries focused on:
(a) supporting the development and monitoring of legislation, policies and protocols to end GBV; (b) social mobilisation and behaviour change initiatives and dialogues at the national and local level; and (c) the MCO’s Access to Justice portfolio, supporting regional and national justice and police institutions to build capacities to tackle GBV. Throughout CARICOM, and in partnership with the CARICOM Secretariat, UN Women MCO in Barbados has been supporting gender awareness data and analysis so as to better understand the commitments set out in the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), Beijing Platform for Action, and now the SDGs. Under this portfolio, UN Women has supported the CARICOM Secretariat in a former project in developing the CARICOM Gender Equality Indicators Model which will be piloted with UN support in four countries.

4.04 The TA project links to other projects and processes that CDB is supporting. CDB supports the Legal Aid and Counselling Clinic in Grenada in giving psychosocial and educational support to victims and perpetrators of GBV in Grenada and finances a public education component to raise awareness of the problem (Paper BD 133/15). The CDB/UN Women Partnership is complementary as it will enhance awareness of the public sector and civil society about the scope of the problem will lay the foundation for better policy responses. The project also links to the CDB financed Gender Implementation Guidelines for the Design and Implementation of Education Sector Plans (ESDPs) in BMCs which build a critical input for applying gender analysis to the education sector and can give guidance on how to use education to change attitudes to prevent GBV.

4.05 The TA project is a further response to Paper BD34/12 Add. 3 on the Status Report on the Implementation of the Gender Equality Policy and Operational Strategy of CDB. First, it implements the idea of partnership framed in the paper. Second, it will allow for the development of a regional public good in the form of available data on GBV that would inform policies and service delivery. Third, these data can further be used for advocacy and CDB’s programming and will support CDB to influence policy dialogue with BMCs.

4.06 In accordance with the Performance Matrix of CDB’s 2012 TA Policy and Operational Strategy, the proposed project has been accorded a composite rating of 3.75. This is a highly satisfactory rating, indicating that the Project outputs are expected to be of a high quality and delivered in a timely and cost-effective manner. Details of the Performance Rating are provided at Appendix 12. As indicated in Table 1 below, the Project has been rated as Gender Specific (GS). The Project’s principal purpose is to advance gender equality. Details of the Gender Marker Analysis are provided at Appendix 13.

<table>
<thead>
<tr>
<th>Gender Marker</th>
<th>Analysis</th>
<th>Design</th>
<th>Implementation</th>
<th>Monitoring and Evaluation (M&amp;E)</th>
<th>Score</th>
<th>Code</th>
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<tr>
<td></td>
<td>1.0</td>
<td>1.0</td>
<td>1.0</td>
<td>1.0</td>
<td>4.0</td>
<td>GS12/</td>
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5. EXECUTION

5.01 The Project will be implemented over a period of two years. For the regional component, CDB will be the executing agency, and UN Women will implement the project on behalf of CDB. UN Women is responsible for technical and day-to-day oversight of the regional component of the TA project. Quarterly progress reports shall be provided by UN Women to CDB. Furthermore, as partners, UN Women and CDB will meet regularly (that is, monthly) to discuss next steps in the project (see Appendix 15 for Roles and Responsibilities of CARICOM, UN Women, CDB, and GOGR).

12/ GS: The Project’s principal purpose is to advance gender equality.
5.02 CARICOM Secretariat will ultimately own the Prevalence Survey Model, and take on the responsibility of securing Heads of Government approval of the final version of the Model, once the piloting has been completed in 2017. The CARICOM Regional Statistical Programme will partner with CDB and UN Women in identifying regional experts to be trained, in coordinating aspects of the regional training and the development of a cadre of regional experts. That cadre/roster of experts will be a CARICOM Secretariat roster, and the Secretariat will become the repository of information for member states who wish to use the Model in future years, with the support of UN Women. An agreement will be entered into between CARICOM, UN Women and CDB with respect to the roles and responsibilities within the Project.

5.03 GOGR will be responsible for implementing the Grenada component through MOF, who will contract UN Women on a single source selection basis. However, the hiring of the field workers/supervisors and basic communications will be implemented by the Central Statistical Office (CSO), under MOF (see Appendix 14 for the Letter of Agreement). UN Women will be selected on a single source selection due to the experience of UN Women with implementing prevalence surveys on GBV in other countries, for example, Jamaica. Furthermore, Grenada is one of UN Women’s main programme countries in working on GBV, and UN Women has a long history of partnership with the government and NGOs in Grenada on GBV. Quarterly progress reports shall be provided by the MOF to CDB.

5.04 Overall guidance will be provided by the UN Women Representative, and the GBV and Statistical Teams in the UN Women MCO Caribbean, with support also provided by the UN Women Regional Office for Americas and Caribbean in Panama and the UN Women Headquarters Research Unit. UN Women will assign its National Programme Specialist (Economic/Statistics Portfolios) to support the day-to-day operations of all work on the Prevalence Survey in the Caribbean, including in Grenada.

5.05 UN Women will procure a PC on behalf of GOGR for the Grenada component (see Appendix 3) who will coordinate and implement work plans, supervision of the Survey, logistical arrangements, coordination with key stakeholders, write-up of analysis and report. UN Women will deliver quarterly progress reports to GOGR, which will be provided to CDB.

6. **RISK ASSESSMENT AND MITIGATION**

6.01 A few risks have been identified which could affect project implementation and outcomes. These risks are mainly operational and are shown at Table 2 below. Given the UN Women’s experience in this area, the risks are quite small.

<table>
<thead>
<tr>
<th>Risk Type</th>
<th>Description of Risk</th>
<th>Mitigation Measures</th>
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<tbody>
<tr>
<td>Operational</td>
<td>National election cycles impact work of statistical offices.</td>
<td>Timing of national roll-out will take this into consideration.</td>
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<td></td>
<td>NSOs have limited capacity and are over-burdened.</td>
<td>International team of experts will provide full support, as required per country capacity; and where needed, for example, consultancy firms will be recruited to support the NSOs; UN Women will utilise its procurement processes to ensure timely implementation of work plan, upon agreement with national governments involved.</td>
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<tr>
<td></td>
<td>GOGR is reluctant to release results of the survey.</td>
<td>An NSC chaired by the relevant Ministry and including the Office of the Prime Minister will be convened to oversee the full process of the</td>
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<tr>
<td>Risk Type</td>
<td>Description of Risk</td>
<td>Mitigation Measures</td>
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<tr>
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<tr>
<td></td>
<td></td>
<td>Prevalence Survey. A sub-committee on research (government and NGOs) will be established to oversee the methodology. The involvement of decision-making organs of the government in the governance structure of the project, provides an opportunity for continuous sensitisation and awareness of the value of the data produced in informing evidence-based policy and programme development.</td>
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7. **COST AND FINANCING**

7.01 The total cost of the Project which will be financed by CDB and UN Women has been estimated at six hundred and forty-four thousand one hundred fifty-six United States dollars (USD644,156). CDB’s contribution, which will fund 80% of the project cost, will cover the cost of the Prevalence Survey in Grenada as well as the training of national statistical experts and the training of trainers at the regional level. The cost and the financing plan is summarised at Table 3 for the Regional Component, the Grant Component and the Overall Project, and detailed in the project’s budget in Appendix 16.

**TABLE 3: FINANCING PLAN**

**Regional Component:**

<table>
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<tr>
<th>Financing Source</th>
<th>USD</th>
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<tbody>
<tr>
<td>UN Women</td>
<td>7,150</td>
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<td>CDB – SFR</td>
<td>153,600</td>
<td>96%</td>
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<tr>
<td>Total</td>
<td>160,750</td>
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**Grant Component:**

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<thead>
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<tr>
<td>UN Women</td>
<td>100,890</td>
<td>21%</td>
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<tr>
<td>GOGR</td>
<td>21,120</td>
<td>4%</td>
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<tr>
<td>CDB – SFR</td>
<td>361,396</td>
<td>75%</td>
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<tr>
<td>Total</td>
<td>483,406</td>
<td>100%</td>
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**Overall Budget:**

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<th>Financing Source</th>
<th>USD</th>
<th>(%)</th>
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<tbody>
<tr>
<td>UN Women</td>
<td>108,040</td>
<td>17%</td>
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<td>GOGR</td>
<td>21,120</td>
<td>3%</td>
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<tr>
<td>CDB – SFR</td>
<td>514,023</td>
<td>80%</td>
</tr>
<tr>
<td>Total</td>
<td>644,156</td>
<td>100%</td>
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</table>
UN Women’s financial and in-kind contribution constitutes the counterpart financing to the Regional (4%) and Grant component (21%) for the piloting of the Prevalence Survey and will cover:

(a) 20% of the time of the UN Women National Programme Specialist on Economics and Statistics and 20% of the time of the UN Women Programme Associate backstopping this portfolio;

(b) approximately 20% of UN Women senior management’s time – Representative and Deputy Representative – given the importance of the Model Survey’s success; and

(c) results based management expertise being provided by UN Women MCO programme staff.

UN Women’s contribution to the Regional component covers in particular the cost of the workshop for the regional training of trainers.

As per UN Women’s corporate Cost Recovery Policy, a proportion of the funds under the CDB/UN Women partnership will cover direct programme management costs. Eight per cent of the total funds contributed by CDB will go to UN Women, which must be applied against all external funds received. The 8% is a fixed rate which UN Women member states and the governing body of UN Women have set. In line with the harmonised cost classification definitions the extra budgetary income generated from the application of the cost recovery fee (8%) is used to support UN Women activities mainly in support of activities under the ‘management’ cost classification category. All cost recovery generated is utilised both at the Headquarters and Country Office level. At MCO, this may fund general operations management costs such as activities related to staff/office management and the provision of workplace and support services (Information Communication Technology, Finance, Human Resource, security, travel, assets and general services) which permit UN Women to carry out the mission of the organisation (but excluding direct project implementation support). It is also used for activities related to the harmonisation and simplification of UN operational processes and business practices.

The counterpart contribution of GOGR for the Grant component is in-kind and encompasses the working time of the National Statistical Office and the Gender Bureau under the implementation of the survey as well as the office space for the PC. The counterpart contribution of GOGR constitutes 4% of the Grant component.

In detail, GOGR will conduct the following tasks:

(a) Receiving the CDB Grant and being the overall owner of the CARICOM Prevalence Survey process in Grenada; in this vein, the responsible authority of GOGR will convene the National Steering Committee to oversee the Survey’s implementation, and will ensure the establishment and functioning of the Sub-committee on Research. UN Women will procure the PC on behalf of GOGR to support this work, and can act as the Secretariat of both the NSC and Sub-committee, if requested by the Government;

(b) Recruiting the female field workers and supervisors who will carry out the household portion of the survey;

(c) Providing office space in the CSO for the PC who, under the director of the CSO, will coordinate the overall survey;
(d) Ensuring the overall completion of agreed upon steps under the Grant agreement, and ensuring alignment with the CARICOM Prevalence Survey Model’s and WHO’s ethics and guidelines for such surveys;

(e) Ensuring the availability and publication of the completed National Survey on GBV in Grenada, as per the process outlined above;

(f) Reporting financially and substantively back to the CDB in quarterly progress reports, as per the terms and conditions of the Grant.

7.06 The contribution of UN Women to the Grant component is 21%, comprising:

(a) senior management’s time;

(b) backstopping by two UN programme specialists – Economics and Statistics, and Programme Associate:

(c) the cost of a Project Assistant to the PC of the Project;

(d) the cost of the international consortium – GWI – to support the NSOs in carrying out the piloting of the Survey Model Grenada;

(e) the cost of the launch of the Report; and

(f) travel costs.

8. **FUNDING SOURCE**

8.01 CDB’s contribution, the equivalent of five hundred and fourteen thousand and nine hundred and ninety-six United States dollars (USD514,996) is eligible for funding from its SFR. Funds are available within existing resources.

9. **PROCUREMENT**

9.01 Procurement under the Grenada Grant component shall be in accordance with CDB’s “Guidelines for the Selection and Engagement of Consultants by Recipients of CDB Financing,” October 2011. UN Women, through UN Women MCO Barbados, shall be single sourced, as permitted under section 3.15 of CDB’s abovementioned “Guidelines for the Selection and Engagement of Consultants,” given their exceptional expertise and experience in managing similar such projects in the Region. The Procurement Plan is at Appendix 17.

9.02 In accordance with section 3.15 of CDB’s “Guidelines for the Selection and Engagement of Consultants,” UN Women may be permitted to follow their own procedures, detailed in the “Procurement and Contract Management” section of the prevailing version of the “UN Women Programme and Operations Manual”, which is currently the 2015 version, in the selection of sub-consultants and individual experts and the supply of the necessary goods for the assignment. These procedures conform to international best practice and with the principles of CDB’s procurement guidelines. Given that the “UN Women Programme and Operations Manual” does not restrict country eligibility a waiver of CDB’s “Guidelines for the Selection and Engagement of Consultants,” October 2011, is sought to extend eligibility
to all countries with respect to UN Women’s selection of sub-consultants and experts, and for the supply of goods required to perform their services. However, countries subject to UN sanctions shall not be eligible.

9.03 In addition, a further waiver is sought in relation to the Grenada Grant component, with respect to the restrictions under Section 1.13 (d) of CDB’s “Guidelines for the Selection and Engagement of Consultants,” October 2011, to permit the unrestricted contracting of civil servants to perform the role of field workers and their supervisors under the project. This waiver is sought because due to the sensitive subject matter, it has been determined there is a need to identify 40 middle-aged female interviewers with a suitable level of both education and experience in data collection roles. This profile of interviewer is deemed necessary to ensure a sufficient response rate. GOGR has confirmed it has a pool of civil servants who fit the required profile and who already have relevant experience working in census type data collection roles. It is proposed that the civil servants used could be deployed to work on future surveys providing for sustainability. The work would be undertaken outside of normal office hours.

9.04 CDB’s procurement procedures with respect to its UOF shall apply to the Regional component. Given their expertise and to ensure cohesion and efficiency, UN Women shall be single sourced to provide the necessary services on behalf of CDB. UN Women MCO Barbados shall execute the procurement, in accordance with the abovementioned “UN Women Programme and Operations Manual.” The Procurement Plan is at Appendix 18.

10. RECOMMENDATION

10.01 It is recommended that the Board of Directors approve:

(a) the UOF in an amount not exceeding the equivalent of one hundred and fifty-three thousand six hundred United States dollars (USD153,600) from CDB’s SFR to finance the regional component; and

(b) CDB entering into an agreement with UN Women and CARICOM with respect to the use and administration of the above amount, on terms and conditions considered acceptable to the management of CDB; and

(c) a grant to GOGR of an amount not exceeding the equivalent of three hundred and sixty-one thousand three hundred ninety-six United States dollars (USD361,396) (the Grant) from CDB’s SFR to assist in financing the Grenada component on CDB’s standard terms and conditions and on the following terms and conditions:

1. Disbursement

(a) Except as CDB may otherwise agree, payment of the Grant will be made as follows:

(i) seventy-two thousand United States dollars (USD72,000) shall be paid to GOGR as an advance (the Advance) on account of expenditures in respect of the Project after receipt by CDB of:

(aa) a request in writing from GOGR for such funds; and

(bb) a signed copy of the contract between GOGR and UN Women; and
(ii) the balance of the Grant shall be paid to GOGR periodically after receipt by CDB of an account and documentation satisfactory to CDB, in support of expenditures incurred by GOGR with respect to the Project provided, however, that CDB shall not be under any obligation to make:

(aa) the first such payment until CDB shall have received an account and documentation, satisfactory to CDB, in support of expenditures incurred by GOGR with respect to the Advance;

(bb) any subsequent payment until CDB shall have received the requisite number of copies of the reports to be submitted by GOGR to CDB for the time being in accordance with Appendix 15 of this Paper, in form and substance acceptable to CDB; and

(cc) payments exceeding the equivalent of three hundred and forty-four thousand United States dollars (USD 344,000) until CDB shall have received the requisite number of copies of the Final Report to be submitted by GOGR to CDB in accordance with Appendix 15 of this Paper, in form and substance acceptable to CDB, and a certified statement of the expenditures incurred by GOGR in respect of, and in connection with, the Grant.

(b) The first payment of the Grant shall be made by July 31, 2016, and the Grant shall be fully disbursed by December 31, 2017, or such later dates as CDB may, from time to time, specify in writing.

2. **Procurement:**

(a) Except as provided in sub-paragraphs (c) and (d) below, procurement shall be in accordance with the procedures set out and/or referred to in the Grant Agreement between CDB and GOGR or such other procedures as CDB may from time to time specify in writing.

(b) The Procurement Plan approved by CDB is set out in Appendix 17. Any revision to the Procurement Plan shall require CDB’s prior approval in writing.

(c) In respect of the role of field workers and their supervisors under the Grant, unrestricted contracting of civil servants will be permitted.

(d) The selection of sub-consultants and experts and the supply of goods required to perform services by UN Women, shall be without restriction as to country eligibility.

3. **Other Conditions:**

(a) Except as CDB may otherwise agree, GOGR shall implement the Project through the Ministry of Finance.
(b) For the duration of the Grenada component, GOGR shall, recruit a Project Coordinator (PC) to carry out the duties and responsibilities set out in Appendix 3. The qualifications and experience of any person subsequently appointed or assigned to the position of PC shall be acceptable to CDB.

(c) GOGR shall:

(i) establish and maintain NSC to oversee the Grenada component with the duties set out in paragraph 2.02(b)(i) of this Paper;

(ii) meet with UN Women normally at intervals of one month or more frequently as required, in order to monitor overall project progress and provide direction;

(iii) provide office space in the CSO of MOF for the PC; and

(iv) publish the completed National Survey on GBV in Grenada.

(d) GOGR shall, in accordance with the procurement procedures applicable to the Grant, select and engage:

(i) UN Women to provide the services outlined in Appendix 15;

(ii) Field workers (interviewers) to carry out the services outlined in Appendix 4; and

(iii) Supervisors of field workers to carry out the services outlined in Appendix 5.

(e) Except as CDB may otherwise agree, GOGR shall meet or cause to be met:

(i) the cost of the items designated for financing by GOGR in the Budget set out in Appendix 16 (the Budget);

(ii) any amount by which the cost of the Project exceeds the estimated cost set out in the Budget; and

(iii) the cost of any other items needed for the purpose of, or in connection with, the Project;

and shall provide all other inputs required for the punctual and effective carrying out of the Project not being financed by CDB.

(f) CDB shall be entitled to suspend, cancel or require a refund of the Grant, or any part thereof, if there shall have been a failure by GOGR or UN Women to provide the whole or any part of their contribution, except that GOGR shall not be required to refund any amount of the Grant already expended in connection with the Grenada component and not recoverable by GOGR.
**SUPPORTING DOCUMENTATION**

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1.01 Prevalence Surveys on GBV are data driven surveys which involve interviewing a representative sample of women using a well-designed questionnaire and especially trained interviewers. As a population-based survey, a prevalence survey has proven to be a reliable way to measure violence against women and the extent of the problem in a given population.

1.02 Prevalence Surveys differ from administrative data on Violence Against Women significantly insofar as administrative data gathered from health management information systems, police, social services and justice sector is based primarily on reported incidence. Therefore Administrative data – even if properly collected, presented and interpreted – only represent the very tip of the iceberg of the problem in the population. Administrative data is a good measure of how the state or non-state actors are responding to cases, but it is not a measure of how many women have experienced violence in a country within a period of time. Indeed, increasing numbers in administrative data is often a measure of increased awareness of the population about services and laws, and less about an increase in prevalence of violence.

1.03 The CARICOM Model being piloted is based on a long-tested global World Health Organisation (WHO) model which is considered internationally to be the best practice for national, population-based studies on GBV. The CARICOM’s methodology not only serves to obtain prevalence data on violence against women within GBV – as violence against women is the most prevalent form of GBV – but also highlights the consequences for women, their children and families, women’s help-seeking behaviour and risk and protective factors for violence. This information can directly inform service provision and prevention strategies. Further, the use of a standard questionnaire and methodology ensures comparability of data between settings. Additionally, in order to ensure integrity of the data collected and safety of the participants a strict adherence to the ethics and interview methodology tested by the WHO over the past 15 years in over 30 countries worldwide is required.

1.04 The Survey methodology consists of a quantitative population-based survey involving the structure interview of a sample size no less than 1,800 women; to be accompanied by a qualitative component including focus groups, in-depth interviews, and informant interviews. The size of no less than 1,800 women is the size required for the results to be statistically significant regardless of population size.

1.05 Because of the sensitivity of the issue area, the fact that many women share experiences of violence for the first time through these kinds of surveys, and that these surveys are used as baselines for national programming and response to GBV the methodology requires specific approaches and procedures, ownership by the government, and active involvement of various governmental and non-governmental national partners (national statistical offices, Ministries of Health, women’s national machinery, etc.)

1.06 The WHO methodology upon which the CARICOM Prevalence Survey is based is strongly anchored around ethical and safety considerations necessary for the respondent and the field worker, ensuring fair, sensitive and responsible approaches. The Prevalence Surveys during the field work phase (quantitative phase) are to be initially assigned titles using benign language, not revealing the topic of interest. In Jamaica (another project implemented with support from Inter-American Development Bank (IDB)), for example, it is to be called the Women’s Health Survey, until such time as the field work is completed.

1.07 Types of GBV that will be measured are:
physical and sexual violence by intimate partners as experienced in a woman’s lifetime and in the 12 months preceding the interview; broken down by frequency and severity;

(b) psychological abuse by intimate partners by frequency, as experienced in a woman’s lifetime and in the 12 months preceding the interview;

(c) economic abuse by intimate partner, as experienced in a woman’s lifetime and in the 12 months preceding the interview;

(d) sexual and physical violence by persons other than partners broken down by perpetrators, as experienced in a woman’s lifetime and in the 12 months preceding the interview; for sexual violence by persons other than partners, separate questions are formulated for rape and other types of sexual violence; and

(e) child sexual abuse by other than partners, before the age of 15 years old (asked retrospectively).

1.08 The CARICOM Model uses a questionnaire which is for women respondents only, asked by female field workers only. It includes an individual consent form (to be signed by the interviewer only) and 12 sections designed to obtain details about the respondent and her community, her general and reproductive health, her financial autonomy, her children, her partner, her experiences of partner and non-partner violence and the impact of partner violence on her life and coping mechanisms.

1.09 The qualitative component of the Survey will consist of documents review, and a number of in-depth and key informant interviews as well as focus group discussions. This part will be used to inform the interpretation of the quantitative findings (triangulation) and in the presentation of results it will complement the quantitative data by providing real-life stories that illustrate in a different way women’s experiences. This qualitative component will also provide opportunities to discuss with men how they perceive, experience and understand GBV, including elderly men.

1.10 The agreed upon CARICOM Model has the following objectives:

(a) to obtain reliable estimates of the prevalence and incidence of different forms of GBV, in particular violence against women, including intimate partner violence;

(b) to assess the extent to which intimate partner violence against women is associated with a range of health and other outcomes;

(c) to identify factors that may either protect or put women at risk of intimate partner violence against women as well as other forms of violence;

(d) to identify how men’s role in GBV is manifested; and

(e) to document and compare the strategies and services used to deal with GBV.
PARTNERSHIPS SUPPORTING THE PILOTING OF THE CARICOM MODEL

1.01   IDB: Under the IDB’s Citizen Security loans throughout the CARICOM region, they are increasingly earmarking funds to support increased data on violence against women; coordinating with UN Women in terms of the provision of technical support in utilising the CARICOM Model.

1.02   UNDP: UN Women and UNDP in the Eastern Caribbean, are working to coordinate the timing and alignment of the CARICOM Prevalence Survey being used in parallel with Victimisation/Citizen Security Surveys. In so doing, UN Women and UNDP would be working with Eastern Caribbean governments to ensure that an understanding of “citizen insecurity” goes beyond public crime (to be captured in the planned Victimisation/Citizen Security surveys UNDP is considering), but also is strongly linked to insecurity in the home, or “private” crime, which would be captured by the CARICOM Prevalence Survey model being rolled out in each country.

1.03   WHO/PAHO: The CARICOM model is based on the WHO tools and methodologies developed over the past 20 years. As such, UN Women is coordinating with the Geneva and Washington DC offices of PAHO/WHO, as well as the Regional Office in Barbados, in the identification of strong experts, and in the modification and use of the prevalence survey tools.

1.04   National Governments and NGOs — Offices of the Prime Minister; National Planning Offices/Ministries of Finance; and NSOs: The Prevalence Survey must be nationally owned. In the majority of situations, UN Women will seek to ensure that the surveys are carried out by the NSOs. In consultation with governments, however, it may be determined that in some countries in the Eastern Caribbean, it exceeds the capacity of the respective NSOs. In such instances, the Government and UN Women will identify a regional research body to conduct the survey under a National level Steering Committee. In all countries, key CSOs with expertise on GBV will be engaged through the NSCs on the Prevalence Survey (to be established in every country where the Prevalence Survey is conducted).
APPENDIX 3

DRAFT TERMS OF REFERENCE

PROJECT COORDINATOR TO SUPPORT GOVERNMENT OF GRENADA IN CONDUCTING PREVALENCE SURVEY ON GENDER-BASED VIOLENCE

1. BACKGROUND

1.01 Despite the overwhelming indicative statistics, no CARICOM Member State generates regular and comprehensive national data on the prevalence, nature and response to Gender-based Violence (GBV), including violence against women. While there have been notable efforts by police and key Ministries in the collection of administrative data on GBV, lack of comprehensive and systematic data remains a serious bottleneck in determining the scope of the problem. Government and Non-Governmental Organisations in the Caribbean have expressed concern about the lack of both types of data. UN Women, Caribbean Development Bank (CDB), the Inter-American Development Bank, United Nations Development Programme (UNDP) and others, have agreed to work to support nationally-owned processes to address these gaps throughout the CARICOM region.

1.02 Through the support of UN Women, in partnership with the Government of Canada and UNDP, in 2014, the CARICOM Council of Human and Social Development (COHSOD) agreed to the piloting of a CARICOM Model on National Prevalence Surveys on GBV. The CARICOM Model is based on a long tested global WHO model which is considered internationally to be the best practice for national, population-based studies on GBV. The COHSOD confirmed that – with UN Women support – the Model should be modified to fit the Caribbean context, and then piloted in a number of countries, using a strategy which builds statistical capacity within CARICOM to support the eventual conducting of the survey in all CARICOM Member States. Specifically, it was agreed with COHSOD that an initial pilot would take place in a large CARICOM country (Jamaica – ongoing) and one small island state in the Eastern Caribbean (proposed – Grenada).

1.03 Through a technical and financial partnership with CDB, UN Women is supporting the following:

(a) The implementation of a National Prevalence Survey on GBV in Grenada.

(b) Regional knowledge transfer and capacity development to ensure the availability of regionally-based experts to the Member States. This will contribute to the development of systematic, comparable and harmonised measurements of GBV in the Region.

(c) The provision of accessible GBV Prevalence Data, collected every seven to ten years, to strongly inform key policies relating to health, education, citizen security, and poverty reduction.

(d) Evidence-based monitoring of the Sustainable Development Goals and Agenda 2030, which contains strong commitments towards ending all forms of violence against women and girls.

1.04 The above will be implemented in partnership with National Statistical Offices, Ministries responsible for gender equality; the CARICOM Regional Statistical Programme; IDB; UNDP OECS/Barbados; PAHO/WHO (global and regional).
To guide the piloting and implementation of the Prevalence Survey in Grenada, a National Steering Committee will be formed, to oversee the work. A Research Sub-Committee will also be formed to guide the research management process to facilitate the creation of “ad hoc advisory or expert sub-groups to support the implementation of the Prevalence Survey”; this sub-committee will provide more specialised attention to the core research methodologies of the survey and the ethics and standards required. Specifically, the sub-committee, with the advice of the international experts and the Central Statistical Office (CSO) will guide the Steering Committee in outlining the qualitative components of the Final Report, including the methodology for focus group discussions; and would think through, in a comprehensive manner, any proposed amendments to the Survey Questionnaire.

The Prevalence Survey will be executed in Grenada in partnership with CSO and the Ministry of Social Development and Housing. UN Women has contracted the Global Women’s Institute (GWI) of George Washington University to provide technical advice and support to the implementation of the Prevalence Survey, where required.

UN Women, on behalf of the CSO, will be recruiting a Project Coordinator to sit within the CSO and support the overall coordination of the Prevalence Survey process.

2. **OBJECTIVE**

The objectives of the Project Coordinator (consultant) is, working with the director at CSO of the Government of Grenada, to coordinate the daily activities related to the implementation of the “Prevalence Survey on Gender Based Violence”.

3. **SCOPE OF SERVICES**

Under the day-to-day supervision of the director/CSO, and the overall supervision of UN Women Multi-Country Office (MCO) – Caribbean, the Project Coordinator (PC) will be responsible for coordinating and ensuring the implementation of the following activities by the CSO:

(a) preparing detailed work plan and timelines and ensuring their implementation within the stipulated time frame;

(b) under the guidance of the international experts, preparing survey plans, survey tools, customisation of questionnaires and indicators, field manuals for interviewers and supervisors;

(c) coordinating the pre-testing and piloting of questionnaires and documentation of results and feedback;

(d) ensuring all the logistical arrangements for the field work, including overseeing the recruitment of the field supervisors and field workers;

(e) coordinating to ensure that the field team is issued with contracts, tools and identification cards and are compensated on a timely basis;

(f) coordinating the sample design and the selection of the sample;
coordinating within the CSO and government departments for the data capture and processing of the survey;

coordinating personnel and data analysis for the triangulation of the quantitative and qualitative components of the survey, working in partnership with the organization subcontracted to carry out the qualitative component of the work (TBD); coordinating with the relevant parts of the CSO and line ministries and departments in order to write up the analysis of the quantitative and qualitative components of the study; and

drafting the combined report and analysis (qualitative and quantitative parts) for input and feedback as well as finalising the report in collaboration with CSO and UN Women, with technical support from the international experts, and coordinate its launch.

4. **DELIVERABLES AND REPORTING REQUIREMENTS**

4.01 The PC will be under the day-to-day supervision of the director/CSO, and the overall supervision of UN Women MCO. The Project will assist in preparing reports each stage of the survey to inform and guide the National Steering Committee and related sub-committees.

5. **DURATION**

5.01 Expert will be contracted under an Individual Contract from July 2016 until end July 2017 for approximately 45 weeks of work throughout this period (averaging approximately two to three weeks per month).

6. **QUALIFICATIONS AND EXPERIENCE**

6.01 Qualifications and experience are according to UN Women minimum requirement:

**Core Values:**

(a) demonstrates integrity and fairness;

(b) demonstrates professional competence and is conscientious and efficient in meeting commitments, observing deadlines and achieving results; and

(c) displays cultural, gender, religious, race, nationality and age sensitivity and adaptability.

**Qualifications Required:**

(a) Post-graduate Degree, at least a Master’s Degree, in Statistics, Sociology, Demography or a related field with working experience in one of the following areas: Social research methods; qualitative research; survey design and management; project management; public administration; gender studies, development studies, or a related field of study; and

(b) the candidate is expected to have significant experience in qualitative research, mixed methodologies and survey implementation and research management.
Experience and Competencies Required:

(a) strong qualitative methodological and analytical skills with considerable knowledge of the field of gender and the use of participatory research methods.

(b) substantive experience in surveys and use of mixed methods of research; a minimum of seven to ten years of progressively responsible and relevant experience in the field of Statistics and survey design and management and a demonstrable and comprehensive understanding of social policy issues, and/or gender issues of the Caribbean;

(c) proven expertise in the area of supporting the statistical processes, capacities and systems of the Caribbean, at the national and/or regional level;

(d) proven capacity to work with a broad range of partners, including statistical experts, government bodies, non-government organisations and academia in the Caribbean;

(e) ability to work independently and as part of a small team, manage competing priorities and perform well under pressure;

(f) experience in supporting or contributing to national policy development; and

(g) excellent command of written and spoken English including the ability to convey complex concepts and recommendations, in a clear and persuasive style tailored to match different audiences.

Competencies Desired:

(a) excellent planning and facilitation skills;

(b) ability to handle multiple tasks simultaneously and flexibly;

(c) strong analytical and presentation skills;

(d) cultural awareness and sensitivity;

(e) ability to research, analyse and present complex information as demonstrated by past work experience and references;

(f) ability to establish and maintain strong and effective working relationships;

(g) strong interpersonal, teamwork and communication skills; and

(h) strong analytical and presentation skills as demonstrated by past work experience and references.
FIELD WORKERS (INTERVIEWERS) TO DO THE HOUSEHOLD PORTION OF THE NATIONAL PREVALENCE SURVEY ON GENDER-BASED VIOLENCE IN GRENADE

1. BACKGROUND

1.01 Despite the overwhelming indicative statistics, no CARICOM Member State generates regular and comprehensive national data on the prevalence, nature and response to Gender-based Violence (GBV), including violence against women. While there have been notable efforts by police and key Ministries in the collection of administrative data on GBV, lack of comprehensive and, systematic data remains a serious bottleneck in determining the scope of the problem. Government and Non-Governmental Organisations in the Caribbean have expressed concern about the lack of both types of data. UN Women, Caribbean Development Bank (CDB), the Inter-American Development Bank, United Nations Development Programme (UNDP) and others, have agreed to work to support nationally-owned processes to address these gaps throughout the CARICOM region.

1.02 Through the support of UN Women, in partnership with the Government of Canada and UNDP, in 2014 the CARICOM Council of Human and Social Development (COHSOD) agreed to the piloting of a CARICOM Model on National Prevalence Surveys on GBV. The CARICOM Model is based on a long tested global WHO model which is considered internationally to be the best practice for national, population-based studies on GBV. The COHSOD confirmed that – with UN Women support – the Model should be modified to fit the Caribbean context, and then piloted in a number of countries, using a strategy which builds statistical capacity within CARICOM to support the eventual conducting of the survey in all CARICOM Member States. Specifically, it was agreed with COHSOD that an initial pilot would take place in a large CARICOM country (Jamaica – ongoing) and one small island state in the Eastern Caribbean (proposed – Grenada).

1.03 Through a technical and financial partnership with CDB, UN Women is supporting the following:

(a) The implementation of a National Prevalence Survey on GBV in Grenada.

(b) Regional knowledge transfer and capacity development to ensure the availability of regionally-based experts to the Member States. This will contribute to the development of systematic, comparable and harmonised measurements of GBV in the Region.

(c) The provision of accessible GBV Prevalence Data, collected every seven to ten years, to strongly inform key policies relating to health, education, citizen security, and poverty reduction.

(d) Evidence-based monitoring of the Sustainable Development Goals and Agenda 2030, which contains strong commitments towards ending all forms of violence against women and girls.

1.04 The above will be implemented in partnership with National Statistical Offices, Ministries responsible for gender equality; the CARICOM Regional Statistical Programme; IDB; UNDP OECS/Barbados; PAHO/WHO (global and regional).
1.05 To guide the piloting and implementation of the Prevalence Survey in Grenada, a National Steering Committee will be formed, to oversee the work. A Research Sub-Committee will also being formed to guide the research management process to facilitate the creation of “ad hoc advisory or expert sub-groups to support the implementation of the Prevalence Survey”; this sub-committee will provide more specialised attention to the core research methodologies of the survey and the ethics and standards required. Specifically, the sub-committee, with the advice of the international experts and the Central Statistical Office (CSO) will guide the Steering Committee in outlining the qualitative components of the Final Report, including the methodology for focus group discussions; and would think through in a comprehensive manner any proposed amendments to the Survey Questionnaire.

1.06 The Prevalence Survey will be executed in Grenada in partnership with the CSO and the Ministry of Social Development and Housing. UN Women has contracted the Global Women’s Institute (GWI) of George Washington University to provide technical advice and support to the implementation of the Prevalence Survey, where required.

1.07 On behalf of the CSO, UN Women seeks to recruit approximately 40 female field workers

2. **OBJECTIVES AND SCOPE OF SERVICES**

2.01 The approximately 40 female field workers will administer the door-to-door portion of the household survey, interviewing respondents. It is also expected that the field workers will participate in a 15-day training prior to the launch of the door-to-door component. The scope of work is in detail:

(a) Participate in an intensive training of the Prevalence Survey methodology.

(b) Commit to the confidentiality clauses required to conduct the field work, and as outlined in the Prevalence Survey methodology.

(c) Conduct door-to-door survey as per the sampling group provided, and in strict adherence to the Prevalence Survey methodology, with particular emphasis on the ethics and safety considerations when dealing with the female respondents.

(d) Participate in weekly meetings with Supervisor in which there will be monitoring of all aspects of the data collection process in order to ensure that errors are detected and corrected early in the process.

(e) Participate in debriefing sessions with experts to ensure continued comfort and capacity of field workers to carry out the door-to-door surveys.

3. **REPORTING REQUIREMENTS**

3.01 The field workers will be under the day-to-day supervision of the field supervisors on behalf of the CSO and UN Women.

4. **DURATION**

4.01 The assignment will take eight weeks of work, including training, at delivery-based fees, from October until early December 2016.
5. **QUALIFICATIONS AND EXPERIENCES**

5.01 Qualifications and experience are according to UN Women minimum requirement:

**Core Competencies:**

(a) Work in teams: Demonstrate ability to work in a multicultural, multi-ethnic environment and to maintain effective working relations with people of different national and cultural backgrounds.

(b) Communicating and Information Sharing: Facilitate and encourage open communication and strive for effective communication.

(c) Self-management and Emotional Intelligence: Stay composed and positive even in difficult moments, handle tense situations with diplomacy and tact, and have a consistent behaviour towards others.

(d) Conflict management: Surface conflicts and address them proactively acknowledging different feelings and views and directing energy towards a mutually acceptable solution.

(e) Appropriate and Transparent Decision-making: Demonstrate informed and transparent decision-making.

**Minimum Requirements:**

(a) Only females can apply.

(b) An Associate’s Degree (Bachelor’s Degree preferred but not required), in Statistics, Sociology, or a related field.

(c) High levels of reading and computational skills and are able to follow instructions.

(d) Receptiveness to other's ideas, open-mindedness, motivation, ability to interact with all classes of people, good interpersonal skills to build a rapport with the respondent and experience in dealing with sensitive issues.

(e) The candidate is expected to have previous experience in conducting household interviews. Experiences as an interviewer for the population census, survey of living conditions or other household surveys will be an asset.

(f) Excellent command of written and spoken English including the ability to convey complex concepts and recommendations, in clear and persuasive style tailored to match different audiences.
APPENDIX 5

DRAFT TERMS OF REFERENCE

SUPERVISORS OF FIELD WORKERS CONDUCTING THE HOUSEHOLD PORTION OF THE NATIONAL PREVALENCE SURVEY ON GENDER-BASED VIOLENCE IN GRENADA

1. BACKGROUND

1.01 Despite the overwhelming indicative statistics, no CARICOM Member State generates regular and comprehensive national data on the prevalence, nature and response to Gender-based Violence (GBV), including violence against women. While there have been notable efforts by police and key Ministries in the collection of administrative data on GBV, lack of comprehensive and, systematic data remains a serious bottleneck in determining the scope of the problem. Government and Non-Governmental Organisations in the Caribbean have expressed concern about the lack of both types of data. UN Women, Caribbean Development Bank (CDB), the Inter-American Development Bank, United Nations Development Programme (UNDP) and others have agreed to work to support nationally-owned processes to address these gaps throughout the CARICOM region.

1.02 Through the support of UN Women, in partnership with the Government of Canada and UNDP, in 2014 the CARICOM Council of Human and Social Development (COHSOD) agreed to the piloting of a CARICOM Model on National Prevalence Surveys on GBV. The CARICOM Model is based on a long tested global WHO model which is considered internationally to be the best practice for national, population-based studies on GBV. The COHSOD confirmed that – with UN Women support – the Model should be modified to fit the Caribbean context, and then piloted in a number of countries, using a strategy which builds statistical capacity within CARICOM to support the eventual conducting of the survey in all CARICOM Member States. Specifically, it was agreed with COHSOD that an initial pilot would take place in a large CARICOM country (Jamaica – ongoing) and one small island state in the Eastern Caribbean (proposed – Grenada).

1.03 Through a technical and financial partnership with CDB, UN Women is supporting the following:

   (a) The implementation of a National Prevalence Survey on GBV in Grenada.

   (b) Regional knowledge transfer and capacity development to ensure the availability of regionally-based experts to the Member States. This will contribute to the development of systematic, comparable and harmonised measurements of GBV in the Region.

   (c) The provision of accessible GBV Prevalence Data, collected every seven to ten years, to strongly inform key policies relating to health, education, citizen security, and poverty reduction.

   (d) Evidence-based monitoring of the Sustainable Development Goals and Agenda 2030, which contains strong commitments towards ending all forms of violence against women and girls.

1.04 The above will be implemented in partnership with National Statistical Offices, Ministries responsible for gender equality; the CARICOM Regional Statistical Programme; IDB; UNDP OECS/Barbados; PAHO/WHO (global and regional).
1.05 To guide the piloting and implementation of the Prevalence Survey in Grenada, a National Steering Committee will be formed, to oversee the work. A Research Sub-Committee will also be formed to guide the research management process to facilitate the creation of “ad hoc advisory or expert sub-groups to support the implementation of the Prevalence Survey”; this sub-committee will provide more specialised attention to the core research methodologies of the survey and the ethics and standards required. Specifically, the sub-committee, with the advice of the international experts and the Central Statistical Office (CSO) will guide the Steering Committee in outlining the qualitative components of the Final Report, including the methodology for focus group discussions; and would think through in a comprehensive manner any proposed amendments to the Survey Questionnaire.

1.06 The Prevalence Survey will be executed in Grenada in partnership with the CSO and the Ministry of Social Development and Housing. UN Women has contracted the Global Women’s Institute (GWI) of George Washington University to provide technical advice and support to the implementation of the Prevalence Survey, where required.

1.07 On behalf of the CSO, UN Women seeks to recruit five supervisors to provide oversight to the field-based portion of the Prevalence Survey.

2. **OBJECTIVES AND SCOPE OF SERVICES**

2.01 Under the overall supervision of the CSO, the supervisors of field workers will be contracted for six weeks within the period October 2016 and December 2016, and will be required to participate in a 15-day training prior to supervising the field work.

2.02 The contracted persons are expected to supervise the field workers who will be administering the surveys, as well as deliver the following:

   (a) **Induction/Supervisor Training**: Attend and participate in interviewers training. The supervisors that have been successfully identified will be required to attend this training, but their contracted duties will commence afterwards.

   (b) **Commit to the confidentiality clauses required to conduct the field work, and as outlined in the Prevalence Survey methodology**

   (c) **Coordinate and Facilitate weekly meetings with Field Workers/Supervision of Conduct of Interviews**:

      (i) attend and participate in supervisors briefing led by the Field Services Director;

      (ii) review with the Field Workers the boundaries of the enumeration districts (EDs) that are assigned;

      (iii) assign cases to the Field Workers;

      (iv) establish clear production goals with the Field Workers;

      (v) hold weekly meetings with Field Workers to review status of each of their cases, find out how much they have worked, review any problem situations, and motivate them to finish on time; they will also need to be available to receive calls from interviewers who have problems throughout the week; and
(vi) monitor progress of data collection, review non-response reported by Field Workers, and implement reassignment and conversion procedures;

(d) **Review of completed survey questionnaires to reduce errors:**

(i) Ensure that the correct questionnaires are used, the right households are visited and that the interviews are properly conducted in accordance with the WHO methodology;

(ii) Re-visit households as needed to resolve any inconsistencies in the data;

(iii) Review Field Workers reporting of number of questionnaires completed and the rate at which they are being completed;

(iv) perform validation of a designated fraction of each Field Worker’s work by visiting the respondent and asking a brief set of questions;

(v) examine all entries made in the questionnaire by the interviewers and make corrections where necessary;

(vi) edit the data collected from each Field Worker’s completed cases;

(vii) report to the Field Services Director on a regular basis on the progress of the survey in their Region; and

(viii) ensure that questionnaires are returned in a timely manner.

(e) **Participate in debriefing sessions with experts to ensure continued comfort and capacity of field workers to carry out the door-to-door surveys**

3. **REPORTING REQUIREMENTS**

3.01 Supervisors of Field Workers are under the overall supervision of the CSO.

4. **DURATION**

4.01 Approximately 8 weeks of time – with 15 days training and 6 weeks of supervisory work. The contracts will run from early October until mid December 2016.

5. **QUALIFICATIONS AND EXPERIENCES**

5.01 Qualifications and experience are according to UN Women minimum requirement:

**Core Competencies:**

(a) Work in teams: Demonstrate ability to work in a multicultural, multi-ethnic environment and to maintain effective working relations with people of different national and cultural backgrounds.
(b) Communicating and Information Sharing: Facilitate and encourage open communication and strive for effective communication; self-management and Emotional Intelligence: Stay composed and positive even in difficult moments, handle tense situations with diplomacy and tact, and have a consistent behaviour towards others.

(c) Conflict management: Surface conflicts and address them proactively acknowledging different feelings and views and directing energy towards a mutually acceptable solution.

(d) Appropriate and Transparent Decision-Making: Demonstrate informed and transparent decision-making.

Minimum Requirements:

(a) A Bachelor’s Degree (Master’s Degree preferred but not required), in Statistics, Sociology, Demography or a related field with working experience in one of the following areas: social research methods; qualitative research; survey design and management; project management; public administration; gender studies, development studies, or a related field of study.

(b) The candidate is expected to have significant experience in qualitative research, mixed methodologies and survey implementation and research management.

(c) Strong qualitative methodological and analytical skills with considerable knowledge of the use of participatory research methods.

(d) Substantive experience in surveys and use of mixed methods of research.

(e) A minimum of seven to ten years of progressively responsible and relevant experience in the field of Statistics and survey design and management.

(f) Proven expertise in the area of in supporting the statistical processes, capacities and systems of the Caribbean, at the national and/or regional level.

(g) Ability to work independently and as part of a small team, manage competing priorities and perform well under pressure.

(h) Excellent command of written and spoken English including the ability to convey complex concepts and recommendations, in a clear and persuasive style tailored to match different audiences.

(i) Excellent planning and facilitation skills.

(j) Ability to handle multiple tasks simultaneously and flexibly.

(k) Strong analytical and presentation skills.

(l) Cultural awareness and sensitivity.
(m) Ability to research, analyse and present complex information as demonstrated by past work experience and references.

(n) Ability to establish and maintain strong and effective working relationships.

(o) Strong interpersonal, teamwork and communication skills.

(p) Strong analytical and presentation skills as demonstrated by past work experience and references.
DRAFT TERMS OF REFERENCE

GRAPHIC DESIGNER TO LAY OUT THE FINAL REPORT OF THE NATIONAL PREVALENCE SURVEY ON GENDER-BASED VIOLENCE IN GRENADA

1. BACKGROUND

1.01 Despite the overwhelming indicative statistics, no CARICOM Member State generates regular and comprehensive national data on the prevalence, nature and response to Gender-based Violence (GBV), including violence against women. While there have been notable efforts by police and key Ministries in the collection of administrative data on GBV, lack of comprehensive and systematic data remains a serious bottleneck in determining the scope of the problem. Government and Non-Governmental Organisations in the Caribbean have expressed concern about the lack of both types of data. UN Women, Caribbean Development Bank (CDB), the Inter-American Development Bank, United Nations Development Programme (UNDP) and others, have agreed to work to support nationally-owned processes to address these gaps throughout the CARICOM region.

1.02 Through the support of UN Women, in partnership with the Government of Canada and UNDP, in 2014 the CARICOM Council of Human and Social Development (COHSOD) agreed to the piloting of a CARICOM Model on National Prevalence Surveys on GBV. The CARICOM Model is based on a long tested global WHO model which is considered internationally to be the best practice for national, population-based studies on GBV. The COHSOD confirmed that – with UN Women support – the Model should be modified to fit the Caribbean context, and then piloted in a number of countries, using a strategy which builds statistical capacity within CARICOM to support the eventual conducting of the survey in all CARICOM Member States. Specifically, it was agreed with COHSOD that an initial pilot would take place in a large CARICOM country (Jamaica – ongoing) and one small island state in the Eastern Caribbean (proposed – Grenada).

1.03 Through a technical and financial partnership with CDB, UN Women is supporting the following:

(a) The implementation of a National Prevalence Survey on GBV in Grenada.

(b) Regional knowledge transfer and capacity development to ensure the availability of regionally-based experts to the Member States. This will contribute to the development of systematic, comparable and harmonised measurements of GBV in the Region.

(c) The provision of accessible GBV Prevalence Data, collected every seven to ten years, to strongly inform key policies relating to health, education, citizen security, and poverty reduction.

(d) Evidence-based monitoring of the Sustainable Development Goals and Agenda 2030, which contains strong commitments towards ending all forms of violence against women and girls.

1.04 The above will be implemented in partnership with National Statistical Offices, Ministries responsible for gender equality; the CARICOM Regional Statistical Programme; IDB; UNDP OECS/Barbados; PAHO/WHO (global and regional).
1.05 To guide the piloting and implementation of the Prevalence Survey in Grenada, a National Steering Committee will be formed, to oversee the work. A Research Sub-Committee will also be formed to guide the research management process to facilitate the creation of “ad hoc advisory or expert sub-groups to support the implementation of the Prevalence Survey”; this sub-committee will provide more specialised attention to the core research methodologies of the survey and the ethics and standards required. Specifically, the sub-committee, with the advice of the international experts and the Central Statistical Office (CSO) will guide the Steering Committee in outlining the qualitative components of the Final Report, including the methodology for focus group discussions; and would think through in a comprehensive manner any proposed amendments to the Survey Questionnaire.

1.06 The Prevalence Survey will be executed in Grenada in partnership with the CSO and the Ministry of Social Development and Housing. UN Women has contracted the Global Women’s Institute (GWI) of George Washington University to provide technical advice and support to the implementation of the Prevalence Survey, where required.

2. OBJECTIVES AND SCOPE OF SERVICES

2.01 The UN Women Multi-Country Office Caribbean seeks to contract a Graphic Designer and Communications consultant for the design and layout of the Final Report of Prevalence of GBV in Grenada. The successful consultant will provide technical support to the programme and communication teams in the development of infographics based on the content of the Report, and the design and layout of the Final Report. The final deliverable should be in pdf format and should be produced to allow for online use, upload to websites as well as for printing.

3. DELIVERABLES AND REPORTING REQUIREMENTS

3.01 Under the overall supervision of UN Women, in partnership with the CSO of Grenada, the consultant will be contracted to complete the following specific activities and deliverables:


(c) Submission of final draft of the report in pdf and infographics reflecting comments from National Steering Committee, CDB, UN Women and the Government of Grenada – mid August 2017.

4. DURATION

4.01 The expert will be contracted under an individual contract for an estimated 30 days between early July 2017 and mid August 2017.
5. **QUALIFICATIONS AND EXPERIENCES**

5.01 Qualifications and experience are according to UN Women minimum requirement:

**Core Competencies:**

(a) Work in teams: Demonstrate ability to work in a multicultural, multi ethnic environment and to maintain effective working relations with people of different national and cultural backgrounds;

(b) Communicating and Information Sharing: Facilitate and encourage open communication and strive for effective communication;

(c) Self-management and Emotional Intelligence: Stay composed and positive even in difficult moments, handle tense situations with diplomacy and tact, and have a consistent behaviour towards others;

(d) Conflict management: Surface conflicts and address them proactively acknowledging different feelings and views and directing energy towards a mutually acceptable solution;

(e) Appropriate and Transparent Decision-making: Demonstrate informed and transparent decision-making.

**Minimum Requirements:**

(a) Post-graduate studies in communications, publishing, gender and development, international relations and/or graphic design.

(b) A minimum of five years of progressively responsible and relevant experience in the field of publication development, layout and design.

(c) Strong theoretical and practical background in graphic design, including the use of design software such as Adobe Design Premium, In-Design, CorelDraw, web design tools such as Dreamweaver and Flash, etc.

(d) Show a clear and mature style of design, demonstrating an understanding of the communication requirements of a UN agency.

(e) Proven experience of graphic production from start to published/printed product with knowledge of printing processes (offset and digital) and colour management;

(f) Good understanding of new and evolving technologies and digital platforms;

(g) Knowledge of standard software packages, including MS Office–MS Access–MS Visio–Adobe Acrobat; and

(h) Working experience in communications for development or behavioural change is desirable.

(i) Excellent command of written and spoken English.
APPENDIX 7

DRAFT CONSULTANCY GLOBAL WOMEN’S INSTITUTE
REVISED AGREEMENT WITH UN WOMEN

1. Standard Cover Sheet

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<tr>
<th>ProDoc Cover Page</th>
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<td>UN-Women</td>
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This information is withheld in accordance with one or more of the exceptions to disclosure under the Bank’s Information Disclosure Policy.

2. Executive Summary

In the Caribbean, Gender Based Violence (GBV) is one of the most prevalent forms of violence and it directly impacts citizen security, including the stability and health of the family and community. Despite the prevalence of GBV in CARICOM territories, citizen security approaches too often fail to give consideration to GBV - including sexual violence - as “serious” citizen security issues. Rather, GBV cases are often seen as “soft” issues or “private” family issues and separate from the state security concerns related to the more public manifestations of insecurity such as crime, including drug interdiction and small arms control.

Looking at the occurrence of violence against women through the lens of gender-based violence is essential to understanding the root causes; the response; and the societal challenges to tackling this phenomena.

Despite the overwhelming indicative statistics, no CARICOM member state generates regular and comprehensive national data on the prevalence, nature and response to GBV, including violence against women. While there have been notable efforts by police and key ministries in the collection of administrative data on GBV, lack of comprehensive, systematic, data remains a serious bottleneck in
determining the scope of the problem. Government and Non-Governmental Organisations in the Caribbean have expressed concern about the lack of both types of data, and UN Women, the Inter-American Development Bank, UNDP and others will work to support nationally-owned processes to address these gaps throughout the CARICOM region.

To this end, under UN Women and CARICOM leadership, and in partnership with the Government of Canada and UNDP OECS/Barbados CARICOM statistical experts and governments reviewed the various models of assessing prevalence of GBV, and agreed to CARICOM piloting and adopting a CARICOM Model on National Prevalence Surveys on Gender-Based Violence. The Council of Ministers of Human and Social Development/CARICOM (COHSOD) subsequently endorsed this recommendation for piloting of the model.

The CARICOM Model being piloted is based on the original WHO global model looking at violence against women in the home – the WHO Model has laid out an internationally recognized methodology and protocols for providing governments with a comprehensive picture of actual numbers of women who have experienced violence, the types of violence, and frequency of the violence.

It was agreed that the model will be piloted initially in Jamaica and one Eastern Caribbean country. Ongoing discussions with the Inter-American Development Bank and the Caribbean Development Bank, as well as with UNDP, are now determining what other CARICOM countries could be folded into this piloting process.

3. Situation Analysis

With worsening crime rates and violent crimes in the Caribbean, there is an urgent need for evidenced based responses that focuses on primary prevention and addressing the root and underlying social issues. UNDP’s 2012 Caribbean Human Development Report on Citizen Security (CHDR)) points to the fact that whilst Caribbean countries have made significant development advances post-independence, there is a growing concern that increasing crime and violence is eroding the quality of life of citizens and has resulted in a greater sense of insecurity and fear of victimization. The CHDR points to a strong correlation between pervasive inequalities and multiple deprivations, and rising rates of violence. Of notable concern, is the increasing levels of gender-based violence (GBV) – and within this, the most prevalent form of GBV, which is violence against women. It is increasingly acknowledged that combatting GBV is of considerable importance to addressing the challenges of growing insecurity in the Caribbean.

Within the UN system, the need for national violence against women (VAW) data is given high priority. One of the five key outcomes in the current 2008-2015 UN Secretary General Campaign UNiTE to End Violence against Women is the establishment of systems for data collection and analysis on VAW in all countries by 2015. Further the Friends of the Chair Group, established in February 2008 by United Nations Statistical Commission (UNSC) at its 39th session, developed 9 statistical indicators on the prevalence of VAW. Following this adoption, the UN Statistics Division/Economic & Social Affairs, in collaboration with various stakeholders, in 2013, finalized and published the “Guidelines for producing statistics on violence against women: statistical surveys.” In line with the request by the UNSC, these guidelines have been developed to help standardize statistics on violence against women and to provide national statistical offices with guidance for collecting, processing, disseminating and analyzing the data. They build strongly on the experience and methodology of dedicated studies, such as the methodology for the WHO multi-country study which has focused on violence against women in the home. Most recently, the 57th Commission on the Status of Women (2013) stressed once more the importance of data collection on the prevention and elimination of VAW in their agreed conclusions.
The conceptual framework of the Model to be tested is as follows: i) Field/household survey on violence against women in the home, using the WHO global model; ii) Drawing from the WHO model experience in other countries, qualitative focus groups, individual interviews, and analysis rooted in GBV as the conceptual framework by which the field/household survey results on violence against women are to be understood. This qualitative focus may also allow for improved understanding of the prevalence of broader forms of GBV, beyond violence against women in the home.

The objectives of the Prevalence Survey are as follows:

- To obtain reliable estimates of the prevalence and incidence of different forms of violence against women in the home;
- To assess the extent to which violence against women is associated with a range of health and other outcomes;
- To identify factors that may either protect or put women at risk of violence in the Caribbean;
- To understand how the conceptual framework of gender-based violence aids Caribbean governments in understanding the differing types of violence which women and men face; and how gender roles rest at the heart of all forms of GBV, including violence against women;
- Within the GBV framework, and utilizing quantitative data on violence against women in the home, and qualitative data on overall GBV and its root causes and response, the Survey Report will attempt to identify how men’s role in gender-based violence is manifested;
- To document and compare the strategies and services used to deal with GBV, and in particular, violence against women in the home;
- Ensure that the data and results of the study are put to good use and utilized in the different departments and institutions for formulating policies and legislature and other programmes of intervention against gender based violence.

In the 2015 - 2016 period, UN Women, in partnership with other international development partners such as the Inter-American Development Bank (IDB) and United Nations Development Programme (UNDP), will support implementation of the Prevalence Survey Model in at least two countries in the English and Dutch speaking Caribbean. It was agreed that the model will be piloted initially in Jamaica and one Eastern Caribbean country. On-going discussions with the Inter-American Development Bank and the Caribbean Development Bank, as well as with UNDP, are now determining what other CARICOM countries could be folded into this piloting process.

Results of these pilots will inform the use of the Prevalence Survey throughout CARICOM:

- Jamaica - A partnership was developed between UN Women, the Inter-American Bank and the Government of Jamaica, to pilot the model in Jamaica as the first nationally-led Prevalence Study on GBV in CARICOM. Lead by the National Statistical Institute of Jamaica (STATIN), technical and financial support to the Pilot will be provided by UN Women and the IDB through Phase II of the Government of Jamaica’s Citizens Security and Justice Programme (CSJP II). Implementation of the Survey is guided by a National Steering Committee, chaired by the Planning Institute of Jamaica.

- In the Eastern Caribbean - UN Women, in partnership with potentially CDB and UNDP, as well as the Inter-American Development Bank, will seek to identify at least one country where the Prevalence Survey Model’s implementation can be tested in a small island context, alongside with the implementation of a UNDP-led Victimization Survey. This process will ensure the country selected has a comprehensive picture of citizen security – both public and private.
To support national stakeholders in the piloting of the proposed CARICOM Model, UN Women MCO-Caribbean will partner with an international research organisation with experience on the WHO Model, who can peer mentor and build capacity in the Caribbean region to conduct the prevalence surveys. To identify the partner, UN Women advertised for Expressions of Interest from individuals or institutions requiring the following capacities and experience:

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<th>List of Attributes</th>
<th>Benchmark</th>
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<tbody>
<tr>
<td>Post-graduate degree, at least a Master’s degree, in one of the following areas: social policy, gender studies, development studies, human rights or a related field of study.</td>
<td>7 to 10 years’ experience</td>
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<tr>
<td>A minimum of seven to ten years of progressively responsible and relevant experience in the field of social inclusion, gender-based violence and/or human rights</td>
<td>5 to 7 years’ experience</td>
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<tr>
<td>Five to seven years proven experience in working around statistical processes relating to domestic, violence against women, sexual violence and related issues. Experience in conducting household surveys on violence in the home is required</td>
<td>5 to 7 years’ experience</td>
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<tr>
<td>Direct experience and knowledge with the WHO Multi-Country Study Domestic Violence against Women global methodology considered a strong asset</td>
<td>Measurable knowledge and experience on the WHO global methodology on measuring prevalence of violence against women in the home</td>
</tr>
<tr>
<td>Proven Training and facilitation expertise in the conduct household surveys around human rights and/or domestic violence issues</td>
<td>Training and facilitation experience in conducting household surveys in this area;</td>
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<tr>
<td>Ability to work independently and as part of a small team, manage competing priorities and perform well under pressure</td>
<td>Measurable experience in working as part of a team;</td>
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<tr>
<td>Experience in supporting or contributing to national statistical processes</td>
<td>Measurable experience in working on national statistical processes;</td>
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<tr>
<td>Excellent command of written and spoken English</td>
<td>Fluent in written and spoken English</td>
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<tr>
<td>Knowledge of the Caribbean considered an asset</td>
<td>Experience in Caribbean is an asset</td>
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</table>

After a competitive review of candidates (see attached documents), the Global Women’s Institute (GWI) was selected as the appropriate programme partner for this process.

4. Justification

The team at Global Women’s Institute (GWI) at the George Washington University is well-positioned to provide technical guidance on the design, implementation, analysis and dissemination of the Prevalence Surveys in Jamaica and a small-island country in the Eastern Caribbean. As an internationally recognized leader in the field of gender-based violence (GBV), GWI’s focus of their action-oriented research spans from prevalence studies that generate rigorous evidence on GBV as a pervasive issue to evidence reviews and evaluations that detail effective interventions that prevent and respond to VAWG. Recently, the GWI team published a systematic review of reviews and a subsequent article in a special series on violence against women and girls in *The Lancet* (2014) on primary and secondary prevention interventions. These articles demonstrated key lessons and effective approaches to reduce levels of different types of Violence Against
Women and Girls (VAWG) in a wide range of settings. In addition, GWI partnered with the World Bank Group and the Inter-American Development Bank to create a *VAWG Resource Guide*, which provides important recommendations for VAWG programming in various sectors (education; health; social protection; finance and enterprise development; citizen security, law and justice; and disaster risk management).

The GWI team also has extensive experience in diverse methods for collecting data on violence against women throughout the world, including the WHO Methodology being proposed for the CARICOM Model.

Of special note is Dr. Mary Ellsberg was a member of the Core Technical Team of the WHO Multi-Country Study on Women’s Health and Domestic Violence against Women, and helped draft the World Health Organization’s Safety and Ethical Guidelines for Research on Violence against Women. She has participated as a Principal Investigator, or Co-Investigator on survey research on VAW in Nicaragua, Peru, Brazil, Indonesia and Ethiopia. She is a co-author, with Dr. Lori Heise, of *Researching Violence against Women: A Practical Guide for Researchers and Activists*, published by WHO and PATH, and currently teaches a course on VAWG research methods at the Milken Institute School of Public Health. She has also conducted multi-country evaluations on domestic violence programs using qualitative and participatory methods for the Australian Government in Melanesia and East Timor, as well as in Central America for the Swedish and Norwegian Governments.

Related to prevalence surveys specifically, GWI is in the process of developing a robust methodology for conducting GBV research in conflict and humanitarian settings. The GWI team is leading a component of the DFID-funded *What Works to Prevent Violence against Women and Girls* project, by conducting a population-based survey, adapted from the *WHO Multi-Country Study on Women’s Health and Domestic Violence*, and concurrent qualitative research in two heavily conflict-affected sites in South Sudan. Through this research, they will interview approximately 3,000 men and women by collaborating with international NGOs, including CARE International and the International Rescue Committee (IRC), as well as local partners. The results of the study will not only inform local policy and programs, but will also contribute to the systematization of how research is conducted in other conflict and humanitarian settings. To anticipate this, GWI has convened a number of world-renowned GBV researchers to gather recommendations and input on how to standardize methodologies to collect information on GBV in humanitarian crises.

Furthermore, GWI strong institutional expertise on prevalence studies has allowed them to provide technical support in the development of country reports for VAWG prevalence studies that were conducted in four countries in the Pacific Island region.

### 5. Deliverables under this partnership

Over the course of the consultancy, GWI will work closely with the national statistical organization (NSO) in both of the countries surveyed, as well as with UN Women and any local implementing partners, to complete the following outputs:

**Jamaica**

1. **Consultancy Work Plan:** Development of a consultancy work plan, in partnership with the National Statistical Organization and submit the agreed upon plan to UN Women for clearance;

2. **Overall Technical Guidance on WHO Methodology application:** Provide technical guidance to the NSO and the *National Technical Advisory Group (TAG)* on the proposed Survey methodology and work plan, so as to ensure alignment with the core methodologies, ethical principles and questionnaire as per the WHO global methodology and as agreed to within CARICOM;
3. **Finalisation of Survey Tools:** Provide technical inputs into the finalisation of the Survey Questionnaire and the finalisation of the Prevalence Survey methodology, again in line with the WHO global questionnaire and methodology, and as per the proposed amendments put forward by the CARICOM statistical experts; **Finalisation of Focus Group and Qualitative Methodology of the Survey:** Provide guidance on the focus group methodology to be used, as well as overall technical support as required to the national implementing partner contracted to work with NSO in this regards;

4. **Training of Field Workers to conduct the Survey:** Take the substantive lead in developing the tools and methodology for training of the field workers, in accordance with the WHO Global Methodology, so as to ensure all methodological and ethical considerations are reflected in the household survey carried out. The team will undertake this activity out the ground, taking the lead in conducting the two to three week training of field workers, and in developing/adapting the tools, and guiding the NSO’s role therein;

5. **Technical support to NSO on the cleaning of Survey data;**

6. **Oversee the triangulation of the qualitative and quantitative results,** providing NSO with the necessary inputs to ensure a strong draft Prevalence Survey Report;

7. **Provision of detailed technical and analytical inputs** into the preparation of the final Prevalence Survey Report;

8. **Trouble shoot and advise** on how to overcome any bottlenecks encountered in the implementation of the Prevalence Survey methodology;

9. **Support the collection of lessons learned and revisions to Methodology** based on the experiences in Jamaica and one Eastern Caribbean country, for submission to the CARICOM Secretariat.

**Eastern Caribbean Territory**

1. **Consultancy Work Plan:** Development of a consultancy work plan, in partnership with the National Statistical Organisation (NSO) of the selected country and UN Women;

2. **Overall Technical Guidance on WHO Methodology application:** Provide technical guidance to the NSO and the National Steering Committee on Conducting the National Prevalence Survey on GBV on the proposed Survey methodology and work plan, so as to ensure alignment with the core methodologies, ethical principles and questionnaire as per the WHO global methodology and as agreed to within CARICOM;

3. **Finalisation of Survey Tools:** Provide technical inputs into the finalisation of the Survey Questionnaire and the finalisation of the Prevalence Survey methodology, again in line with the WHO global questionnaire and methodology, and as per the proposed amendments put forward by the CARICOM statistical experts and based on experiences in Jamaica;

4. **Training of Field Workers to Conduct the Survey:** Take the substantive lead in developing the tools and methodology for training of the field workers, in accordance with the WHO Global Methodology, so as to ensure all methodological and ethical considerations are reflected in the household survey carried out. This training requires the international expert to be on the ground, taking the lead in conducting the two to three week training of field workers, and in developing/adapting the tools, and guiding NSO’s role therein;
5. Technical support to NSO on the cleaning of Survey data;

6. Finalisation of Focus Group and Qualitative methodology of the Survey: Provide guidance on the focus group methodology to be used, as well as overall technical support as required to the national implementing partner contracted to work with NSO in this regards.

7. Oversee the triangulation of the qualitative and quantitative results: Providing NSO with the necessary inputs to ensure a strong draft Prevalence Survey Report;

8. Provision of detailed technical and analytical inputs into the preparation of the final Prevalence Survey Report;

9. Trouble shoot and advise on how to overcome any bottlenecks encountered in the implementation of the Prevalence Survey methodology;

10. Support the collection of lessons learned and revisions to Methodology based on the experiences in Jamaica and one other country, for submission to CARICOM Secretariat;

Regional:
- Support the finalisation of the CARICOM Prevalence Survey Model tools, based on the piloting of these tools in Jamaica, the OECS, and other countries (in cooperation with IDB and CDB). This includes capturing the best practices which emerge from the piloting of the Model, for submission (along with tools) to CARICOM for full endorsement;

- Provide technical support in the development of a Regional cadre of experts in the use of the CARICOM Prevalence Survey Model. This includes, but is not limited to, conducting a Region-wide Training of Trainers on the WHO Global Model; the CARICOM Model (adapted from the WHO Model). The ToT specifically will be focused on building the expertise of individuals and institutions in the CARICOM region to provide technical backstopping to Member States who wish to conduct Prevalence Surveys in the future;

6. Strategy and Partnerships

The Global Women's Institute will coordinate all activities closely with UN Women, the National Statistical Offices (NSO) and local implementing partners, as well as with the National Technical Advisory Groups (TAG). The consultancy will be divided into three phases:

**Phase 1** will involve support of the Prevalence Study in Jamaica, now called the Women’s Health Survey for purposes of confidentiality until the Field work is complete. Activities will commence within one month after signing the contract between UN Women and George Washington University, and the consultancy workplan will be developed in detail with UN Women, IDB, the National Statistical Institute of Jamaica (STATIN) and shared with the National Steering Committee on the Prevalence Survey (chaired by the Planning Institute of Jamaica) The remaining activities in Phase 1 will be concluded within 12 months of the start of the consultancy. [Jamaica – work starting in 2015 and to be completed in 2016].

**Phase 2** will involve adapting and replicating the methodology of Phase 1 in another country, to be determined by UN Women. This phase will start approximately six (6) months after the work in Jamaica has begun, and will continue for another 12 months, in parallel to the work in Jamaica. [Other Caribbean country (to be determined) – work starting in late 2015 or early 2016 and to be completed in late 2016].
Phase 3 consists of collecting lessons learned from implementing the studies in two countries, and making any additional revisions to the methodology so that it can be replicated in other Caribbean countries. This phase will result in a report describing the main lessons learned from the process, and copies of the revised questionnaire and protocol. [early 2017]. An aspect of Phase 3 will run in parallel to Phase 2, and includes conducting a Regional Training of Trainers so as to ensure a cadre of Regional experts available to member states who wish to utilise the CARICOM Prevalence Survey Model in the future.

7. Implementation and Management Arrangements

Under a partnership cooperation agreement (PCA), UN Women will work with GWI in providing overall technical expertise to national stakeholders. IDB, UNDP and CDB are all international developing partners who will be engaged in the process as well, but the partnership with GWI will be coordinated by UN Women MCO directly, including through UN Women MCO’s programme presence in Jamaica. GWI will also maintain day-to-day contact with STATIN in Jamaica so as to ensure timely movement of the Prevalence Survey in Phase I. Once the second country and national stakeholder is identified, GWI will have direct contact with them as well.

In both countries, GWI will participate in the meetings of the National Steering Committees on the Prevalence Survey (and related sub-groups) as/when required, and upon the request of the national statistical body and/or UN Women.

UN Women will cover the costs of travel of GWI directly, and as per UN Women travel regulations and procedures.

GWI has assembled a team of international experts in research on VAWG to carry out this consultancy. Dr. Mary Ellsberg, Director of the Global Women’s Institute at The George Washington University, will serve as Principal Investigator. She will be responsible for overseeing the design, training, and implementation of the project, in collaboration with the GWI team and other partners. Dr. Ellsberg has over 30 years of experience in international and program work related to public health, gender and women’s rights. Dr. Ellsberg conducted the first in-depth study on the prevalence of GBV in Nicaragua in 1995 entitled Candies in Hell. This ground-breaking study revealed that 52% of ever-partnered women in Leon, Nicaragua had experienced physical intimate partner violence during their lifetime. The results of this study were fundamental in demonstrating VAWG as a public health concern and laid the foundation for the creation of the WHO Multi-Country Study on Women’s Health and Domestic Violence. Dr. Ellsberg was an original member of the core research team in the development and implementation of the WHO Multi-Country Study on Women’s Health and Domestic Violence against Women, and was a primary author on several of the key publications arising from the study. She has conducted research on different aspects of VAWG in Latin America, Sub-Saharan Africa, Indonesia and the Pacific Islands. She has written over 50 books and articles on the topic, and contributed to key methodological guidelines and resources, such as Putting Women First: Ethical and Safety Recommendations for Researching Violence against Women (WHO, 2002) and Researching Violence against Women: A Practical Guide for Researchers and Activists (WHO/PATH, 2005). Her proven expertise and ground-breaking research on VAWG makes her extremely well-qualified to provide technical assistance on all phases of these national prevalence surveys. Dr. Ellsberg will work with closely with the GWI research team to ensure timely delivery of all products.

Dr. Manuel Contreras, Director of Research at the Global Women’s Institute, will serve as a Co-Investigator on the project. He will provide technical and methodological expertise in the study design, training, implementation and data analysis; and he will contribute 46 days to this project. Dr. Contreras has 20 years of experience working on research and programs pertaining to gender, sexual and reproductive
health. He earned a PhD in population and gender; his dissertation was on violence against women using quantitative and qualitative methods. Before joining GWI, Dr. Contreras worked as the Program Officer of the UN Women Office for Mexico, Central America, Cuba and Dominican Republic. Dr. Contreras also worked as the coordinator of the Gender, Violence and Rights portfolio at the International Center for Research on Women (ICRW). One of his most relevant experiences while at ICRW was the coordination of the multi-country project “International Men and Gender Equality Survey” (IMAGES), one of the most comprehensive surveys on men, gender issues and GBV. His experience in design and implementation of large-scale research projects and programs will make him a valuable asset to the team.

Drs. Ellsberg and Contreras will be accompanied by two additional staff who are currently being recruited: a Senior Research Scientist at the Global Women’s Institute, will provide technical assistance on the qualitative research component, and a Senior Research Associate at the Global Women’s Institute, who will assist with training, research design, data analysis (both quantitative and qualitative), and report writing.

8. Evaluation and Learning Plans
As outlined, Phase III of the PCA will involve capturing lessons learned and best practices, for presentation to CARICOM for the formal adoption of the Prevalence Survey Model in 2017.

9. Budget
This information is withheld in accordance with one or more of the exceptions to disclosure under the Bank’s Information Disclosure Policy.

**Personnel**
Director of the Global Women’s Institute at The George Washington University, will serve as Principal Investigator. She will be responsible for overseeing the design, training, and implementation of the project, in collaboration with the GWI team and other partners. She will contribute 24 days to this project.

Director of Research at the Global Women’s Institute, will serve as a Co-Investigator on the project. He will provide technical and methodological expertise in the study design, training, implementation, and data analysis. He will contribute 46 days to this project.

TBD, Senior Research Scientist at the Global Women’s Institute, will provide technical assistance on the qualitative research component. She will contribute 10 days to this project.

TBD, Senior Research Associate at the Global Women’s Institute, will assist with training, research design, data analysis (both quantitative and qualitative), and report writing. She will contribute 40 days to this project.
Annex I – Proposed Timeline and Work Plan (To be modified in consultation with STATIN and Gov of Jamaica)

**Phase 1** will involve support of the Prevalence Study in Jamaica, now called the Women’s Health Survey for purposes of confidentiality until the Field work is complete. Activities will commence within one month after signing the contract between UN Women and George Washington University, and the consultancy work plan will be developed in detail with UN Women, IDB, the National Statistical Institute of Jamaica (STATIN) and shared with the National Steering Committee on the Prevalence Survey (chaired by the Planning Institute of Jamaica) The remaining activities in Phase 1 will be concluded within 12 months of the start of the consultancy. [Jamaica – work starting in 2015 and to be completed in 2016]

**Phase 2** will involve adapting and replicating the methodology of Phase 1 in another country, to be determined by UN Women. This phase will start approximately six (6) months after the work in Jamaica has begun, and will continue for another 12 months, in parallel to the work in Jamaica. [Other Caribbean country (to be determined) – work starting in late 2015 or early 2016 and to be completed in late 2016]

**Phase 3** consists of collecting lessons learned from implementing the studies in two countries, and making any additional revisions to the methodology so that it can be replicated in other Caribbean countries. This phase will result in a report describing the main lessons learned from the process, and copies of the revised questionnaire and protocol. [early 2017]
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<th>Program Rollout Gantt Chart</th>
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<td>Phase 1 Consultancy Work Plan</td>
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<td>Phase 2 Consultancy Work Plan</td>
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<td>Phase 3 Conduct Regional Training of Trainers on CARICOM Prevalence Survey Model</td>
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<td>Support the collection of lessons learned and revision to methodology</td>
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**APPENDIX 7**
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1. BACKGROUND

1.01 Despite the overwhelming indicative statistics, no CARICOM Member State generates regular and comprehensive national data on the prevalence, nature and response to Gender-based Violence (GBV), including violence against women. While there have been notable efforts by police and key Ministries in the collection of administrative data on GBV, lack of comprehensive and systematic data remains a serious bottleneck in determining the scope of the problem. Government and Non-Governmental Organisations in the Caribbean have expressed concern about the lack of both types of data. UN Women, Caribbean Development Bank (CDB), the Inter-American Development Bank, United Nations Development Programme (UNDP) and others, have agreed to work to support nationally-owned processes to address these gaps throughout the CARICOM region.

1.02 Through the support of UN Women, in partnership with the Government of Canada and UNDP, in 2014 the CARICOM Council of Human and Social Development (COHSOD) agreed to the piloting of a CARICOM Model on National Prevalence Surveys on Gender-Based Violence. The CARICOM Model is based on a long tested global WHO model which is considered internationally to be the best practice for national, population-based studies on GBV. The COHSOD confirmed that – with UN Women support – the Model should be modified to fit the Caribbean context, and then piloted in a number of countries, using a strategy which builds statistical capacity within CARICOM to support the eventual conducting of the survey in all CARICOM Member States. Specifically, it was agreed with COHSOD that an initial pilot would take place in a large CARICOM country (Jamaica – ongoing) and one small island state in the Eastern Caribbean (proposed – Grenada).

1.03 Through a technical and financial partnership with CDB, UN Women is supporting the following:

(a) The implementation of a National Prevalence Survey on GBV in Grenada.

(b) Regional knowledge transfer and capacity development to ensure the availability of regionally-based experts to the Member States. This will contribute to the development of systematic, comparable and harmonised measurements of GBV in the Region.

(c) The provision of accessible GBV Prevalence Data, collected every seven to ten years, to strongly inform key policies relating to health, education, citizen security, and poverty reduction.

(d) Evidence-based monitoring of the Sustainable Development Goals and Agenda 2030, which contains strong commitments towards ending all forms of violence against women and girls.

1.04 The above will be implemented in partnership with National Statistical Offices, Ministries responsible for gender equality; the CARICOM Regional Statistical Programme; IDB; UNDP OECS/Barbados; PAHO/WHO (global and regional).
1.05  To guide the piloting and implementation of the Prevalence Survey in Grenada, a National Steering Committee will be formed, to oversee the work. A Research Sub-Committee will also being formed to guide the research management process to facilitate the creation of “ad hoc advisory or expert sub-groups to support the implementation of the Prevalence Survey”; this sub-committee will provide more specialised attention to the core research methodologies of the survey and the ethics and standards required. Specifically, the sub-committee, with the advice of the international experts and the Central Statistical Office (CSO) will guide the Steering Committee in outlining the qualitative components of the Final Report, including the methodology for focus group discussions; and would think through in a comprehensive manner any proposed amendments to the Survey Questionnaire.

1.06  The Prevalence Survey will be executed in Grenada in partnership with the CSO and the Ministry of Social Development and Housing. UN Women has contracted the Global Women’s Institute (GWI) of George Washington University to provide technical advice and support to the implementation of the Prevalence Survey, where required.

1.07  UN Women, on behalf of the CSO, will be recruiting an institute or team of consultants to conduct the qualitative component of the Prevalence Survey.

2.  OBJECTIVES AND SCOPE OF SERVICES

2.01  The objectives of the consultancy is, working with the director at the CSO of the Government of Grenada, to conduct the qualitative component of the “Prevalence Survey on Gender Based Violence”.

2.02  The institute/team of experts will be responsible for the following:

(a) review documentation related to the Prevalence Study on GBV in CARICOM, particularly the elements related to the pilot in Grenada;

(b) develop a detailed methodology, including tools, for conducting the qualitative component of the CARICOM Prevalence Survey in Grenada, in close consultation with the international consortium providing technical backstopping to the overall survey, GWI. The tools will include, but not be limited to, the design and creation of research tools, including a guide for in-depth interviews and consent forms;

(c) based on feedback from the National Research Sub-Committee, GWI and UN Women, finalise the proposed methodology and tools for the qualitative component;

(d) coordinate and implement all logistical details required to implement the qualitative component, including convening of interviews and focus group discussions;
(e) implement the qualitative component in Grenada throughout the duration of the project by:

(i) obtaining access to key informants, in cooperation with the CSO or the Steering Committee;

(ii) coordinating with the CSO, and the research subcommittees to recruit participants for interviews;

(iii) negotiating community access, in cooperation with CSO, UN Women, the Ministry of Social Care and other project partners, as needed, including acquiring site permission letters from community leaders; and

(iv) overseeing the completion of focus group discussions and in-depth interviews in all sites;

(f) attend on-site and off-site (via Skype) meetings with GWI, local stakeholders, members of the Research subcommittee and other partners, as requested, throughout the process;

(g) submit a full report on the findings of the interviews and focus group discussions to UN Women, for distribution and comments by the Research Sub-Committee, the CSO and GWI;

(h) support GWI and the CSO in the drafting of the full Prevalence Survey Report, supporting triangulation and interpretation of qualitative and quantitative data, where necessary; and

(i) once the Government has produced the initial draft, provide editorial and review services in finalising the full Report of the Prevalence survey.

3. REPORTING REQUIREMENTS

3.01 The consultancy team will be under the day-to-day supervision of the director/CSO, and the overall supervision of UN Women Multi-Country Office – Caribbean.

4. DURATION

4.01 The consultancy will be from October 2016 through to July 2017 (estimated 65 days of work), with bulk of work being conducted between October 2016 and March 2017.

5. QUALIFICATIONS AND EXPERIENCES

5.01 Qualifications and experience are according to UN Women minimum requirement:

Experience and Competencies Desired:

(a) Fluency in English.

(b) Post-graduate Degree, at least a Master’s Degree, in Sociology, Social Research, Gender and Development, Demography or a related field. Demonstrable experience in gender analysis of both qualitative data and quantitative data.
(c) A writing sample of a report of previous qualitative research conducted.
(d) Working experience in the Caribbean social research.
(e) Significant experience conducting research on violence against women.
(f) Strong qualitative methodological and analytical skills with considerable knowledge of the field of gender and the use of participatory research methods.
(g) Some experience in surveys and use of mixed methods of research.
(h) Proven expertise in the area of conducting qualitative research, including focus group discussions and in-depth interviews.
(i) Proven capacity to work with a broad range of partners, including statistical experts, government bodies, non-government organisations and academia in the Caribbean.
(j) Ability to work independently and as part of a small team, manage competing priorities and perform well under pressure.
(k) Experience in supporting or contributing to national policy development.
(l) Excellent command of written and spoken English including the ability to convey complex concepts and recommendations, in a clear and persuasive style tailored to match different audiences.

Core Values

(a) Demonstrates integrity and fairness.
(b) Demonstrates professional competence and is conscientious and efficient in meeting commitments, observing deadlines and achieving results.
(c) Displays cultural, gender, religious, race, nationality and age sensitivity and adaptability.

Competencies Desired:

(a) Excellent planning and facilitation skills.
(b) Ability to handle multiple tasks simultaneously and flexibly.
(c) Strong analytical and presentation skills.
(d) Cultural awareness and sensitivity.
(e) Ability to research, analyse and present complex information as demonstrated by past work experience and references.

(f) Ability to establish and maintain strong and effective working relationships.

(g) Strong interpersonal, teamwork and communication skills.

Strong analytical and presentation skills as demonstrated by past work experience and references.
APPENDIX 9

DRAFT TERMS OF REFERENCE

STATISTICAL CONSULTANT: DATA CLEANING
NATIONAL PREVALENCE SURVEY ON GENDER-BASED VIOLENCE IN GRENADA

1. BACKGROUND

1.01 Despite the overwhelming indicative statistics, no CARICOM Member State generates regular and comprehensive national data on the prevalence, nature and response to Gender-based Violence (GBV), including violence against women. While there have been notable efforts by police and key Ministries in the collection of administrative data on GBV, lack of comprehensive and systematic data remains a serious bottleneck in determining the scope of the problem. Government and Non-Governmental Organisations in the Caribbean have expressed concern about the lack of both types of data. UN Women, Caribbean Development Bank (CDB), the Inter-American Development Bank, United Nations Development Programme (UNDP) and others, have agreed to work to support nationally-owned processes to address these gaps throughout the CARICOM region.

1.02 Through the support of UN Women, in partnership with the Government of Canada and UNDP, in 2014 the CARICOM Council of Human and Social Development (COHSOD) agreed to the piloting of a CARICOM Model on National Prevalence Surveys on GBV. The CARICOM Model is based on a long tested global WHO model which is considered internationally to be the best practice for national, population-based studies on GBV. The COHSOD confirmed that – with UN Women support – the Model should be modified to fit the Caribbean context, and then piloted in a number of countries, using a strategy which builds statistical capacity within CARICOM to support the eventual conducting of the survey in all CARICOM Member States. Specifically, it was agreed with COHSOD that an initial pilot would take place in a large CARICOM country (Jamaica – ongoing) and one small island state in the Eastern Caribbean (proposed – Grenada).

1.03 Through a technical and financial partnership with CDB, UN Women is supporting the following:

(a) The implementation of a National Prevalence Survey on GBV in Grenada.

(b) Regional knowledge transfer and capacity development to ensure the availability of regionally-based experts to the Member States. This will contribute to the development of systematic, comparable and harmonised measurements of GBV in the Region.

(c) The provision of accessible GBV Prevalence Data, collected every seven to ten years, to strongly inform key policies relating to health, education, citizen security, and poverty reduction.

(d) Evidence-based monitoring of the Sustainable Development Goals and Agenda 2030, which contains strong commitments towards ending all forms of violence against women and girls.

1.04 The above will be implemented in partnership with National Statistical Offices, Ministries responsible for gender equality; the CARICOM Regional Statistical Programme; IDB; UNDP OECS/Barbados; PAHO/WHO (global and regional).
1.05 To guide the piloting and implementation of the Prevalence Survey in Grenada, a National Steering Committee will be formed, to oversee the work. A Research Sub-Committee will also being formed to guide the research management process to facilitate the creation of “ad hoc advisory or expert sub-groups to support the implementation of the Prevalence Survey”; this sub-committee will provide more specialised attention to the core research methodologies of the survey and the ethics and standards required. Specifically, the sub-committee, with the advice of the international experts and the Central Statistical Office (CSO) will guide the Steering Committee in outlining the qualitative components of the Final Report, including the methodology for focus group discussions; and would think through in a comprehensive manner any proposed amendments to the Survey Questionnaire.

1.06 The Prevalence Survey will be executed in Grenada in partnership with the CSO and the Ministry of Social Development and Housing. UN Women has contracted the Global Women’s Institute (GWI) of George Washington University to provide technical advice and support to the implementation of the Prevalence Survey, where required.

1.07 On behalf of the CSO, UN Women seeks to recruit a statistical consultant.

2. **SCOPE OF SERVICES**

2.01 The statistical consultant will provide data cleaning services subsequent to the culmination of the field-based portion of the Prevalence Survey. In detail the consultant is required to:

(a) Detect and correct errors in data collected from the field-based portion of the Survey, in accordance with parameters provided by the CARICOM Model and the agreed upon methodology laid out by the CSO, UN Women and GWI;

(b) Submit the cleaned data for review by CSO and GWI;

(c) Based on review by CSO and GWI, provide updated, final submission of cleaned data.

3. **REPORTING REQUIREMENTS**

3.01 The statistical consultant will be under the overall supervision of the CSO.

4. **DURATION**

4.01 The statistical consultant will be contracted for 30 days within the period of December 2016 and early February 2017. Work will commence as soon as the field work based portion of the Survey is completed (expected in early/mid-December).

5. **QUALIFICATIONS AND EXPERIENCES**

5.01 Qualifications and experience are according to UN Women minimum requirement:
Core Competencies:

(a) Work in teams: Demonstrate ability to work in a multicultural, multi-ethnic environment and to maintain effective working relations with people of different national and cultural backgrounds;

(b) Communicating and Information Sharing: Facilitate and encourage open communication and strive for effective communication.

(c) Self-management and Emotional Intelligence: Stay composed and positive even in difficult moments, handle tense situations with diplomacy and tact, and have a consistent behaviour towards others.

(d) Conflict management: Surface conflicts and address them proactively acknowledging different feelings and views and directing energy towards a mutually acceptable solution;

(e) Appropriate and Transparent Decision-making: Demonstrate informed and transparent decision-making.

Minimum Requirements:

(a) A Master’s Degree in Statistics, Sociology, Demography or a related field with working experience in one of the following areas: social research methods; qualitative research; survey design and management; project management; public administration; gender studies, development studies, or a related field of study.

(b) The candidate is expected to have significant experience in statistics and data management systems utilised by statistical offices in CARICOM.

(c) A minimum of seven to ten years of progressively responsible and relevant experience in data cleaning and management;

(d) Proven expertise in the area of supporting the statistical processes, capacities and systems of the Caribbean, at the national and/or regional level.

(e) Ability to work independently and as part of a small team, manage competing priorities and perform well under pressure.

(f) Excellent command of written and spoken English including the ability to convey complex concepts and recommendations, in a clear and persuasive style tailored to match different audiences; and

(g) Strong interpersonal, teamwork and communication skills.
### DESIGN AND MONITORING FRAMEWORK

#### Narrative Summary

<table>
<thead>
<tr>
<th>1. IMPACT:</th>
<th>Objectively Verifiable Indicators</th>
<th>Means of Verification</th>
<th>Assumptions/Accountabilities</th>
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<tr>
<td>(a) Key policies relating to the social sector (health, education, citizen security, and poverty reduction) will be informed by prevalence data collected.</td>
<td>(a) National reports on SDG implementation incorporate prevalence data on GBV by 2020 (pilot countries: Jamaica, Grenada, Guyana, The Bahamas, Trinidad and Tobago, and Suriname).</td>
<td>(a) National reports on SDG implementation.</td>
<td>(a) Governments release the full results of the surveys, once finalised.</td>
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<td>(b) Availability of high quality, globally comparable data on GBV to improve the ability of BMCs for evidence-based decision-making and gender planning</td>
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<td>(b) Country reporting on policies against violence against women.</td>
<td>(b) Governments and International agencies use the data to inform key policies and to monitor the SDGs’ Agenda.</td>
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| 2. OUTCOME: | | |
|-------------|-----------------------|-----------------------|-----------------------------|
| (a) Enhanced technical capacity at the national/Grenada and regional/CARICOM level to collect systematic, harmonised and comparable data on GBV in the Region. | (a) CARICOM Model for National Prevalence Surveys is adopted by Heads of Government by December 2017. | | (a) CARICOM Secretariat remains committed to developing the regional level expertise around the CARICOM Model. |
| (b) Quality gender equality statistics on GBV are available for Grenada to meet policy and reporting commitments under the SDGs, CEDAW and Beijing. | (b) Grenada National Prevalence Survey results released to general public by August 2017. | (b) Project Completion Report. | (b) National Piloting Processes are rolled out in a timely manner (countries are Jamaica, Grenada Guyana, The Bahamas, Trinidad and Tobago, and Suriname). |

| 3. OUTPUTS: | | |
|-------------|-----------------------|-----------------------|-----------------------------|
| (a) Regional knowledge transfer for sustainability has taken place. | (a) 20 Regional statistical and research experts trained in field work and gender statistics in Jamaica and Grenada (disaggregated by sex) by 2017 | | (a) Experts and consultants are hired in a timely manner. |
| (b) Grenada pilot survey on prevalence of GBV is implemented. | (b) 10 participants in regional training of trainers by 2017 | (b) Contract completed | (b) Governments are committed to supporting the Prevalence Survey process. |
| | (c) “CARICOM contextualised” version of the WHO questionnaire is available in 2017. | (c) Final Report of the Prevalence Survey Grenada. | (c) National Statistical Offices have sufficient capacity. |
| | (d) NSC is established (July 2016). | | |
| | (e) WHO questionnaire is contextualised to the Grenada reality (September 2016). | | |
### DESIGN AND MONITORING FRAMEWORK

<table>
<thead>
<tr>
<th>Narrative Summary</th>
<th>Objectively Verifiable Indicators</th>
<th>Means of Verification</th>
<th>Assumptions/Accountabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>(f) 2 supervisors and 40 field workers are recruited and trained. (October 2016).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(g) Quantitative and qualitative component of the prevalence survey are implemented (December 2016).</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Activities/Inputs (USD):

<table>
<thead>
<tr>
<th></th>
<th>CDB</th>
<th>UN Women</th>
<th>GOGR</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grenada Component and</td>
<td>361,396</td>
<td>100,890</td>
<td>21,120</td>
<td>483,406</td>
</tr>
<tr>
<td>Contingencies</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Sub-total Grenada Component</td>
<td>361,396</td>
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<td>21,120</td>
<td>483,406</td>
</tr>
<tr>
<td>Regional Component and</td>
<td>153,600</td>
<td>7,150</td>
<td>0</td>
<td>160,750</td>
</tr>
<tr>
<td>Contingencies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sub-total Regional Component</td>
<td>153,600</td>
<td>7,150</td>
<td>0</td>
<td>160,750</td>
</tr>
<tr>
<td>Total</td>
<td>514,996</td>
<td>108,040</td>
<td>21,120</td>
<td>644,156</td>
</tr>
</tbody>
</table>

This information is withheld in accordance with one or more of the exceptions to disclosure under the Bank’s Information Disclosure policy.
5. ACTIVITIES WITH MILESTONES:

1. Signing of an agreement with GOGR; PC recruited within NSO by June 2016
2. Set up and convening of a NSC – joint chairing by Ministry of Social Development and Housing in close cooperation with the Ministry of Finance by July 2016
3. Set up and convening of research sub-committee (under the aegis of the NSC by August 2016
4. Agreement on strategy for qualitative component (focus groups, target audience) by August 2016
5. Recruitment of field workers and selection of 1,800 sample households by August 2016
6. Generation of questionnaire in paper or tablet form by August 2016
7. Modify Questionnaire based on Jamaica experience and with guidance of GWI by September 2016
8. Generation of tools for household interviews by September 2016
9. Pre-test of Questionnaire by October 2016
10. Training of field workers by GWI – to include representatives of NSOs from six CARICOM countries and statistical experts from Regional Organisations such as CARICOM Regional Programme, SALISES, etc) by October 2016
11. Regional Trainer of Trainers Workshop co-hosted by CARICOM Regional Statistical Programme and UN Women on the GBV Prevalence Survey Methodology (hosted at either UN House or CDB. Participants to include regional statistical experts) by October 2016
12. Field work – conduct of household survey by December 2016
13. Conduct of the qualitative component – focus groups by December 2016
14. Cleaning of data by February 2017
15. Analysis of data from survey and qualitative portion – triangulation of findings by April 2017
16. Review of draft Report on GBV in Grenada by May 2017
17. NSC Meeting to validate report by July 2017
18. Preparation of Final Report by July 2017
19. Launch of results (printing, preparation of infographics, official launch) by August 2017
20. Planning meeting on use of results and identification of further steps to address GBV – NSC by August 2017
21. CARICOM Model for National Prevalence Surveys adopted by Heads of Government by December 2017
1.01 In July 2010, the United Nations General Assembly created the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women). The creation of UN Women came about as part of the UN reform agenda, bringing together resources and mandates for greater impact. It merges and builds on the important work of four previously distinct parts of the UN system, which focused exclusively on gender equality and women’s empowerment: Division for the Advancement of Women (DAW), International Research and Training Institute for the Advancement of Women (INSTRAW), Office of the Special Adviser on Gender Issues and Advancement of Women (OSAGI), and United Nations Development Fund for Women (UNIFEM).

1.02 UN Women’s main roles worldwide, and in the Caribbean, are:

(a) To support inter-governmental bodies, such as the Commission on the Status of Women, CARICOM, the Organisation of Eastern Caribbean States (OECS) and others in their formulation of policies, global standards and norms.

(b) To help Member States to implement these standards, standing ready to provide suitable technical and financial support to those countries that request it, and to forge effective partnerships with civil society.

(c) To lead and coordinate the UN system’s work on gender equality as well as promote accountability, including through regular monitoring of system-wide progress.

1.03 Formerly the UNIFEM Sub-Regional Office for the Caribbean, the now UN Women Multi-Country Office (MCO) Caribbean covers 22 Countries and Territories in the English and Dutch-speaking Caribbean, and 6 UN Country Teams (UNST for OECS/Barbados, Belize, Guyana, Jamaica, Suriname, and Trinidad and Tobago).

1.04 UN Women MCO – Caribbean remains one of the most influential bodies working on gender equality in the Caribbean and is seen as the primary source of expertise on international normative standards on gender equality and women’s empowerment in the Region. With trusted reputation among CARICOM, Organisation of American States (OAS), Governments, and Civil Society Organisations and academic institutions, UN Women is seen as the primary convener and source of advocacy support on gender equality and women’s empowerment; as a producer of catalytic initiatives to combat gender-based violence and engage boys and men; as the lead in working with Courts on gender equality; and as a source of demand-based support for CSOs and NWMS on policy development and advocacy.

1.05 Under the UN Women Global Strategic Plan (2014-2017) and the newly adopted Agenda 2030/Sustainable Development Goals, the UN Women MCO – Caribbean has five main focus areas:

(a) access to prevention and basic services to end GBV;

(b) ending the feminisation of poverty through gender responsive social protection, and increased access to sustainable decent work by women farmers;

(c) women’s leadership and access to justice;

(d) enhanced data on the gender equality commitments and status of women and men in the Region; and
women’s leadership and the Inter-governmental processes: The MCO also focuses on ensuring – through Regional convening – that Caribbean women are part of the Regional and Global inter-governmental processes which drive climate change, SIDS and resiliency. The strength of this convening is tied to the strength of our programme work. To this end, UN Women MCO works closely with United Nations Economic Commission for Latin America and the Caribbean (ECLAC), CDB, and United Nations Population Fund (UNFPA) in supporting CARICOM in leading the regional convening.

1.06 MCO is comprised of a presence in Barbados, and under that, a project office in Jamaica. In total, UN Women MCO is made up of 16 staff and personnel, and within this total, eight are professional officers, including an Operations Manager for the sub-region; and eight are operational and support staff/personnel. The MCO has three senior programme specialists: one to cover all GBV work; one to cover the statistical work and work on feminisation of poverty; and one covering the political leadership and access to justice work. UN Women staff and personnel in the Caribbean are made up entirely of CARICOM nationals, excepting the Representative. The MCO operates under the UN Women Regional Portfolio for the Americas and Caribbean and the Regional Office in Panama, which is comprised of 30 plus professional and operational staff who support the MCO’s day-to-day operations.

1.07 UN Women’s partners in the Region are made up of Member States, and within this working with Ministries responsible for Gender Equality, Ministries of Foreign Affairs, Offices of Attorneys General/Ministries of Justice, and statistical offices. Supporting the revitalisation of regional networks – including men’s networks – and national women’s rights organisations and advocacy is a strategic priority for the MCO. UN Women works closely with civil society at the country and sub-regional level, both those active on gender equality and women’s rights, as well as those working on the broader SDG agenda. At the sub-regional level, UN Women works with the CARICOM Secretariat on the issues of gender and statistics; and norm/standard setting in the application of gender equality in the region (that is, model legislation; supporting gender/women’s bureaus; strengthened government accountability towards Beijing PFA and CEDAW). The MCO works closely with the Caribbean Court of Justice and the Caribbean Association of Judicial Officers; and the University of West Indies. Partnerships with CDB and IDB are essential to ensure strengthened focus by Member States in CARICOM on reducing the feminisation of poverty, and enhancing data and statistics from a gender perspective.

1.08 Among international development partners, UN Women collaborates closely with UNICEF, UNFPA and UN ECLAC in the area of GBV and gender/child responsive social protection; and with UNDP in the area of data, and citizen security. The MCO continues to be a strong source of expertise for UN Member States operating in the Caribbean, such as those under the European Union Delegation, the Government of Canada, the Government of the United Kingdom, and the Government of the USA.

1.09 The MCO operates under UN Women’s global Programme and Operations Manual and Financial Regulations and Rules, which are adopted and monitored by the UN Women Executive Board, and within this, the UN Systems’ bodies on financial rules and regulations (made up of member states). UN Women’s global governance structure is unique in the UN System in that it has two multi-tiered governance structures. One consists of the General Assembly, the Economic and Social Council (ECOSOC), and the Executive Board (41 member states). It is the governance structure for the organisation’s operational activities and provides operational policy guidance to UN Women, and thus ultimately oversees UN Women MCO’s work in the Caribbean.
1.10 The other governing body, given UN Women’s intergovernmental role, consists of the UN General Assembly, ECOSOC, and the Commission on the Status of Women. It is the governance structure for the organisation’s normative support functions and provides normative policy guidance to UN Women.

1.11 ECOSOC is responsible for establishing appropriate and concrete linkages between the Commission on the Status of Women and the Executive Board to ensure consistency between the overall policy guidance set by the Commission and the operational strategies and operational activities approved by the Executive Board (paragraph 67(b) of GA resolution 64/289).
## PERFORMANCE RATING

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Score</th>
<th>Justification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relevance</td>
<td>4</td>
<td>The TA is consistent with CDB’s Strategic Objectives of supporting inclusive and sustainable growth and development and promoting good governance within its BMCs, as well as CDB’s Corporate Priorities of improving citizen security in general and reducing GBV in particular. It is also consistent with the SDF 8 cross-cutting themes of regional integration and cooperation and of gender equality. The project provides a regional public good, namely comparable data for capturing the issue of GBV in the Caribbean which helps at a later stage to design appropriate policies to combat GBV. The Project is in line with the objectives and core commitments of the Gender Equality Policy and Operational Strategy. The Country Gender Assessment (2014) for Grenada reinforces the importance of piloting the CARICOM Model in Grenada by highlighting the gravity of GBV in Grenada. GBV is a severe problem in Grenada with 1,630 officially reported cases of sexual offences during the period 2000-10. In 2012, Grenada with 235.1 cases of total sexual offences per 100,000 population, had one of the highest rates of sexual offences per capita in the Region.¹³⁷</td>
</tr>
<tr>
<td>Efficacy</td>
<td>4</td>
<td>Since training and orientation are implemented at the national and regional level to increase capacities of field workers, supervisors and regional experts in statistics, there is a greater likelihood of more effective implementation.</td>
</tr>
<tr>
<td>Efficiency</td>
<td>3</td>
<td>UN Women has considerable experience with the implementation of programmes to combat GBV and the collection and analysis of data on gender equality. Throughout CARICOM, and in partnership with CARICOM Secretariat, UN Women MCO in Barbados has been supporting the gender awareness data and analysis so as to better understand the commitments set out in the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), Beijing Platform for Action, and now the Sustainable Development Goals. Under this portfolio, UN Women has supported CARICOM Secretariat in developing the CARICOM Gender Equality Indicators Model which will be piloted with UN support in four countries.</td>
</tr>
<tr>
<td>Sustainability</td>
<td>4</td>
<td>CDB/UN Women partnership will allow CARICOM Secretariat to establish a cadre of regionally-based experts in the use of the CARICOM Model in other member states than the pilot ones. The implementation arrangements of the project will furthermore seek to ensure that the Prevalence Surveys on GBV are nationally-owned and thus are carried out by the national statistical offices. In addition, Building a cadre of regional experts will significantly reduce the cost of implementing the prevalence surveys in the long run. Countries will have field workers already trained, many of whom could be drawn upon again in seven years’ time, when the next round of GBV Prevalence Surveys are due to take place. Additionally, the supervisors and NSOs will have significantly improved capacity on the issue of such Prevalence Surveys.</td>
</tr>
</tbody>
</table>

| Overall Score  | 3.75  | Highly Satisfactory.                                                                                                           |

¹³⁷ https://data.unodc.org/?lf=1&lng=en, Countries for comparison are The Bahamas, Barbados, Belize, Dominican Republic, Guyana, Jamaica, St. Kitts and Nevis, St. Vincent and the Grenadines, and Trinidad and Tobago.
## GENDER MARKER ANALYSIS

<table>
<thead>
<tr>
<th>Project Cycle Stage</th>
<th>Criteria</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Analysis:</strong> Introduction/Background/Preparation</td>
<td>Consultations with women/girls/men/boys and relevant gender-related or sector-related public or private organisations have taken place.</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>Social analysis identifies gender issues and priorities.</td>
<td>0.25</td>
</tr>
<tr>
<td></td>
<td>Macroeconomic analysis identifies gender issues and priorities.</td>
<td>0.25</td>
</tr>
<tr>
<td><strong>Design:</strong> Project Proposal/Definition/Objective/Description</td>
<td>To address the needs of women/girls and men/boys concrete interventions to reduce existing gender disparities have been designed. Effect on project outcome is direct.</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>Project objective/ outcome includes gender equality.</td>
<td>0.5</td>
</tr>
<tr>
<td><strong>Implementation:</strong> Execution</td>
<td>Implementation arrangements (gender mainstreaming capacity building or gender expertise in implementing agency) to enhance the gender capacity of the implementing agency. Effect on project outcome is indirect.</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>TOR of project coordinating unit/ project management unit include responsibilities of gender mainstreaming, especially at the levels of the project coordinator/director and the M&amp;E officer.</td>
<td>0.5</td>
</tr>
<tr>
<td><strong>M&amp;E:</strong> Results-Monitoring-Framework (RMF)</td>
<td>Sex-disaggregated data included in the baselines, indicators and targets of the RMF.</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>At least one gender-specific indicator at the outcome and/or output level in the RMF.</td>
<td>0.5</td>
</tr>
<tr>
<td><strong>Score</strong></td>
<td>4.0</td>
<td></td>
</tr>
</tbody>
</table>
This information is withheld in accordance with one or more of the exceptions to disclosure under the Bank’s Information Disclosure policy.
ROLES AND RESPONSIBILITIES OF CARICOM, UN WOMEN, CARIBBEAN DEVELOPMENT BANK AND THE GOVERNMENT OF GRENAADA

1.01 Overall guidance will be provided by the UN Women Representative, and the GBV and Statistical Teams in the MCO Barbados, with support also provided by the UN Women Regional Office for Americas and Caribbean in Panama and the UN Women Head Quarters Research Unit. UN Women will assign its National Programme Specialist (Economic/Statistics Portfolios) to support the day-to-day operations of all work on the Prevalence Survey in the Caribbean, including in Grenada.

1.02 Under the Regional Component, and utilising CDB’s positioning and funds, UN Women will be responsible for:

(a) convening and co-chairing with CDB the Regional Advisory Group;

(b) liaising with CARICOM Secretariat in terms of identification of regional experts to be engaged in the capacity development exercises;

(c) supporting CARICOM Secretariat in holding of Training of Trainers for regional experts to utilise the CARICOM Model;

(d) organising the travel and engagement of regional experts into the national level processes; and

(e) preparing a full and revised package of the CARICOM Model (after piloting) to the COHSOD and eventually the CARICOM Heads of Government.

1.03 CARICOM Secretariat will ultimately own the Prevalence Survey Model, and take on the responsibility of securing Heads of Government approval of the final version of the Model, once the piloting has been completed in 2017. The CARICOM Regional Statistical Programme will partner with CDB and UN Women in identifying regional experts to be trained; in coordinating aspects of the regional training and the development of a cadre of regional experts. That cadre/roster of experts will be a CARICOM Secretariat roster, and the Secretariat will become the repository of information for Member States who wish to use the Model in future years, with UN Women support.

1.04 For the Grenada component, and utilising CDB’s funds, UN Women will be responsible for:

(a) providing overall support to the Government of Grenada (GOGR) in the implementation of the Survey, including day to day backstopping and support;

(b) providing of the international team of experts to ensure quality control and to conduct the field training (UN Women funds);

(c) recruiting the National Project Coordinator, on behalf of GOGR, who will sit in the CSO; (CDB Funds to GOGR);
executing the budget as per the attached, and under a sub-contract with GOGR. (CDB Funds to GOGR). This includes but is not limited to the procurement of the tablets; contracting of a group of experts to conduct the qualitative portion of the survey; convening the training of the field workers and supervisors; guiding the CSO on the day-to-day execution; technically and financially supporting the completion and dissemination of the final National Survey Report on the Prevalence of GBV in Grenada;

ensuring that the process supports the strengthening of the CARICOM Model and allows for the engagement of regional expert capacity development, where strategic;

UN Women will execute the procurement on behalf of GOGR in accordance with the “Procurement and Contract Management” component of the prevailing version of the “UN Women Programme and Operations Manual”, which is currently the 2015 version. These procurement guidelines are deemed to conform to international best practice and with CDB’s procurement procedures with respect to its Use of Funds. It should be noted that participation in UN Women’s procurement is unrestricted in terms of eligibility of the nationality of firms and individuals although because of the nature of many of the consultancy and non-consultancy contracts to be awarded where appropriate preference will be given in the evaluation criteria to entities with regional expertise and experience. The procurement plan shall form part of the wider UN Women’s Procurement Plan and this part of the plan shall be approved by CDB; and

providing quarterly progress reports on the Regional component to CDB and on the Grant component to GOGR.

GOGR will conduct the following tasks:

Receiving the CDB Grant and being the overall owner of the CARICOM Prevalence Survey process in Grenada; in this vein, the responsible authority of the Government of Grenada will convene the National Steering Committee to oversee the Survey’s implementation, and will ensure the establishment and functioning of the Sub-committee on Research. UN Women will procure the Project Coordinator on behalf of GOGR to support this work, and can act as the Secretariat of both the NSC and Sub-committee, if requested by the Government.

Recruiting the female field workers and supervisors who will carry out the household portion of the survey.

Providing office space in the CSO for the UN Women-contracted Project Coordinator who, under the director of the CSO, will coordinate the overall survey.

Ensuring the overall completion of agreed upon steps under the Grant agreement, and ensuring alignment with the CARICOM Prevalence Survey Model’s and WHO’s ethics and guidelines for such surveys.

Ensuring the availability and publication of the completed National Survey on GBV in Grenada, as per the process outlined above.
(f) Reporting financially and substantively back to CDB in quarterly progress reports, as per the terms and conditions of the Grant.

(g) Delivering a Final Report on the results of the survey to CDB.

1.06 CDB’s role in general will be:

(a) granting the funds to GOGR to conduct the CARICOM Prevalence Survey on GBV in Grenada;

(b) leading, with UN Women, the support to CARICOM Secretariat in the finalisation of the CARICOM Model Survey, once piloting is complete;

(c) ensuring linkages between the Prevalence Survey process in the Region with other related data and enhanced statistical processes which CDB is leading and/or supporting, using various platforms, including, but not limited to the Development Partner Task Force on Statistics, which CDB chairs;

(d) convening, with UN Women, the Regional Advisory Group;

(e) disseminating results of the survey across the Region; and

(f) advocating with member states on the use and interpretation of the data in terms of future policy development.
<table>
<thead>
<tr>
<th>Item</th>
<th>CDB</th>
<th>UN Women</th>
<th>GOGR</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regional Component Sub-Total and Contingencies</td>
<td>153,600</td>
<td>7,150</td>
<td>160,750</td>
<td></td>
</tr>
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<td>108,040</td>
<td>21,120</td>
<td>644,156</td>
</tr>
<tr>
<td>%</td>
<td>80%</td>
<td>17%</td>
<td>3%</td>
<td>100%</td>
</tr>
</tbody>
</table>

This information is withheld in accordance with one or more of the exceptions to disclosure under the Bank’s Information Disclosure policy.
PROCUREMENT PLAN

I. General

1. Project Information:
   Country: Grenada
   Grantee: Government of Grenada
   Project Executing Agency: Ministry of Finance

2. Bank’s Approval Date of the Procurement Plan: May 16, 2016

3. Period Covered by this Procurement Plan: May, 2016 – September, 2017

II. Consulting Services

1. Prior Review Threshold: Procurement decision subject to prior review by the Bank as stated in Appendix 1 to the Guidelines for the Selection and Engagement of Consultants:

<table>
<thead>
<tr>
<th>Selection Method</th>
<th>Prior Review Threshold</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Single Source Selection</td>
<td>All</td>
<td></td>
</tr>
<tr>
<td>2. ICS</td>
<td>Prior review for first two field worker and supervisor contracts and then unless CDB deems otherwise in writing all subsequent contracts shall be subject to post review.</td>
<td></td>
</tr>
</tbody>
</table>


3. Any Other Special Procurement Arrangements:
   • UN Women shall be single sourced for project execution component because of prior and exceptional experience in rolling out GBV surveys and because of ongoing commitments in the region which align with this intervention.
   • A waiver is granted of CDB’s “Guidelines for the Selection and Engagement of Consultants by Recipients of CDB Financing,” 2011 for the procurement that UN Women shall undertake for sub-consultants and related goods to extend eligibility without restrictions to all countries in accordance with the “Procurement and Contract Management” component of the prevailing version of the “UN Women Programme and Operations Manual.”
• A waiver is granted of the restrictions under Section 1.13 d) of the Guidelines for the Selection and Engagement of Consultants by Recipients of CDB Financing, 2011, to permit the unrestraining contracting of civil servants to perform the role of field workers and their supervisors under the project.

**Procurement Packages with Methods and Time Schedule:**

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Assignment (Description)</th>
<th>Estimated Cost (USD)</th>
<th>Selection Method</th>
<th>Review by Bank (Prior/Post)</th>
<th>Expected Proposal Submission Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Project Execution</td>
<td></td>
<td>SSS</td>
<td>Prior</td>
<td>June 2016</td>
<td>Contract with UN Women Multi-Country Office Barbados</td>
</tr>
<tr>
<td>2</td>
<td>Field Workers and Supervisors x 45</td>
<td></td>
<td>ICS</td>
<td>Prior for first two field worker and supervisor contracts</td>
<td>June 2016</td>
<td></td>
</tr>
</tbody>
</table>

**III. Implementing Agency Capacity Building**

In this section the agreed Capacity Building Activities are listed with time schedule.

<table>
<thead>
<tr>
<th>No.</th>
<th>Expected Outcome/Activity Description</th>
<th>Estimated Cost</th>
<th>Estimated Duration</th>
<th>Start Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Procurement training via telephone</td>
<td>N/A</td>
<td>0.5 days</td>
<td>May 2016</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>CDB procurement e-learning modules, Introduction to Procurement and Engagement and Selection of Consultants, for those involved in procurement</td>
<td>N/A</td>
<td>At learners pace</td>
<td>Prior to commencement of procurement</td>
<td></td>
</tr>
</tbody>
</table>
PROCUREMENT PLAN

I. General

4. Project Information:

   Country: Regional

   Project Name: Technical Assistance for Regional Training in the CARICOM Model for National Prevalence Surveys on Gender-Based Violence and the Piloting of the Survey in Grenada (2016-2017) – Regional Component

   Project Executing Agency: CDB

5. Bank’s Approval Date of the Procurement Plan: May 16, 2016

6. Period Covered by this Procurement Plan: May 2016 – August 2017

II. Consulting Services

1. Reference to (if any) Project Operational/Procurement Manual: CDB’s Procurement shall be in accordance with CDB’s procurement procedures with respect to its UOF.

2. Any Other Special Procurement Arrangements: UN Women shall be single sourced because of prior and exceptional experience in rolling out GBV surveys and because of ongoing commitments in the Region which align with this intervention.

Procurement Packages with Methods and Time Schedule:

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Assignment (Description)</th>
<th>Estimated Cost (USD)</th>
<th>Selection Method</th>
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<td>Project Execution</td>
<td></td>
<td>SSS</td>
<td>May 2016</td>
<td>Contract with UN Women Multi-Country Office Barbados</td>
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This information is withheld in accordance with one or more of the exceptions to disclosure under the Bank’s Information Disclosure Policy.