#### THE UNITED REPUBLIC OF TANZANIA



# MINISTRY OF COMMUNITY DEVELOPMENT, GENDER, WOMEN AND SPECIAL GROUPS

# PROJECT FOR ADVANCING GENDER EQUALITY IN TANZANIA-PAMOJA PROJECT

TERMS OF REFERENCE FOR DESIGNING AND PILOTING A COMMUNITY-BASED SOCIAL NORMS CHANGE AND GENDER-BASED VIOLENCE (GBV) PREVENTION PROGRAM IN TANZANIA MAINLAND

## 1. Background

New National Plans of Action to End Violence Against Women and Children in Tanzania aim to tackle the high levels of gender-based violence (GBV) as well as the negative social norms that drive this violence. Women and girls in Tanzania continue to experience high levels of violence and the negative social norms that drive this violence persist, leading to a cycle of violence. An estimated 32 percent of women aged 15 to 49 in Mainland and 10 percent of women in Zanzibar have experienced physical violence committed by their current intimate partner. Nationally, 11 percent of women have experienced sexual violence and 39 percent have experienced either physical or sexual violence by an intimate partner. The recent National Strategy for Gender Equality and Women's Empowerment (2024) emphasizes addressing the different forms of GBV through a comprehensive approach. Changing norms and values which perpetuate inequality while increasing multisectoral response systems is one of the core pillars of the renewed National Plans of Action to End Violence against Women and Children in mainland Tanzania

(2024/2025-2028/29) and Zanzibar (2025-2030). The NPAs provide a comprehensive framework for addressing GBV and Violence Against Children (VAC) in the country. This approach has brought together a range of functions and capacities across key sectors, including social services, health, justice, security, and education, from national to local levels and sets critical groundwork and vision for eradicating GBV as a barrier to more and better economic empowerment of women in the country.

- 2. The Project for Advancing Gender Equality Project (PAMOJA) (P178813) is a World Bank funded, Government of Tanzania led project that was approved on March 5, 2024, and became effective on April 30 2025. At approval, the project comprised an International Development Association (IDA) credit of US\$100 million as well as a US\$4 million grant from the Early Learning Partnership Multi Donor Trust Fund. The project will be jointly implemented by the Ministry of Community Development, Gender, Women and Special Groups (MoCDGWSG) and the President's Office, Regional Administration and Local Government (PO-RALG) in Mainland Tanzania and the Ministry of Community Development, Gender, Elderly and Children (MoCDGEC) and the Zanzibar Economic Empowerment Agency (ZEEA) in Zanzibar.
- 3. The PDO is to increase access to (i) economic opportunities for women and (ii) Gender-Based Violence prevention and response services, in targeted areas of the United Republic of Tanzania. PAMOJA has four main components: 1) Promoting Economic Opportunities for Women through Community Based Models; 2) Strengthening Gender-based Violence Prevention and Response Services; 3) Innovations and Partnerships; and 4) Project Management and Monitoring and Evaluation. The project targets women in rural areas who are on, or just above the poverty line and economically active. The project targets approximately 319,850 direct beneficiaries and an additional 399,000 indirect beneficiaries including households. The project addresses the interlinked social and economic dimensions of gender inequality. By combining economic empowerment interventions for women

with gender-transformative approaches to prevent GBV, the project aims to improve gender attitudes while improving women's economic position. In bundling economic and social interventions targeting the same beneficiaries, the project therefore addresses multiple constraints that women face.

9. This specific consultancy relates to sub component 2.1 on GBV prevention. On prevention of GBV, the PAMOJA project will scale up the implementation of a prevention model for GBV in Tanzania to 15 councils. One of the aims of PAMOJA is to help create Tanzania's first national protocol on community-based GBV prevention as current efforts are small-scale and ad hoc. As the starting point, the project will adapt the *Bandebereho* model as a prevention model and test and implement the adapted protocol in a subset of 15 councils out of the 40 project councils overall in Mainland Tanzania. The *Bandebereho* model, which is a couples-based intervention, has been successfully implemented in Rwanda through the Ministry of Health and CSO partnership and aims to promote positive fatherhood and gender equality to shift gendered power imbalances and reduce intimate partner violence. It includes small group workshops based on a 15-session curriculum to enable couples to share, discuss and critically reflect on inequitable gender norms, attitudes and behaviors in the home.

## 2. Objectives

The overall objective is to assist the Ministry of Community Development, Gender, Women and Special Groups and the PO-RALG to design, pilot, validate and support to rollout a national protocol for a community-based social norms change and GBV prevention program in Tanzania Mainland in 15 rural councils of Tanzania based on the Bandebereho model

The specific objectives are:

- 1. Design, alongside PO-RALG and MoCDGWSG counterparts, a culturally adapted community-based social norms change and GBV prevention program for Tanzania Mainland, based on the Bandebereho/Program P model.
- 2. Pilot the program in selected councils/districts with high GBV prevalence.
- 3. Build the capacity of community structures (WCPCs, Social welfare officers, and community development officers and , facilitators) to roll out the model nationally.
- 4. Establish robust Monitoring, Evaluation and Learning (MEL) systems for lessons learning, on-ground adaptation, evidence generation and scale-up.

## 3. Scope of Work

## Task 1: Formative Research and Curriculum Adaptation

- Conduct formative research (FGDs, KIIs) in the 15 selected councils to understand gendered realities, masculinity, family dynamics, and perceptions of GBV in the Tanzanian context with a view to informing the adaptation of the Bandebereho model Make changes based on suggestions from government.
- Adapt the Bandebereho/Program P curriculum and facilitators' manual for Tanzania Mainland, ensuring fidelity to core evidence-based components while integrating local realities (language, culture, climate-induced risks).
- Develop draft monitoring and evaluation and learning tools.
- Ensure elements of inclusion (youth, persons with disabilities, marginalized groups), and ethical GBV research principles.

# Task 2: National Training of Trainers (ToT)

- Recruit and train National facilitators
- Deliver a 10-day ToT workshop for ≥40 trainers, covering curriculum delivery, facilitation skills, survivor-centred approaches, and MEL tools.
- Develop refresher training modules for subsequent years and as needed by GoT staff

## Task 3: Pilot Implementation in Selected Councils

- Alongside support from MoCDGWSG and PO-RALG and district level staff, implement the adapted Bandebereho model in 2 pilot councils (selected based on capacity in individual councils as well as high level of commitment from district and regional leadership) -12 couples per module session which can be repeated per council
- Reach at least 1,500 participants disaggregated by gender (men, women,) with structured sessions.
- Document implementation progress, challenges, and lessons through quarterly reports.
- Firm will be responsible for working closely with on the ground community welfare officers and social welfare officers in the selected councils

## Task 4: Refinement, Validation, and Scale-Up Plan

- Collect feedback from participants, facilitators, WCPCs, and stakeholders.
- Revise and finalize the curriculum/manual
- Conduct a national validation and consolidation workshop (≥60 stakeholders).
- Produce a scale-up plan for rollout to 15 councils.

#### 4. Deliverables

- Draft Inception report
- draft adapted curriculum, and MEL tools.
- Preparation of high quality training modules
- ToT workshop report with ≥40 certified trainers.
- Post-training evaluation report (skills gained, capacity gaps).
- Final revised curriculum/manual
- Validation workshop report and assistance as needed in the development of the national scale-up plan.
- Development of the national scale-up plan as a task to give it the attention it deserves.

## 5. Expected Key Results

- A well tested couples intervention approach developed for the Tanzanian context to reduce intimate partner violence and change attitudes about acceptability of this violence
- Increased capacity of community facilitators and WCPC structures.
- Documented behavioral and attitudinal change in participating communities.
- Strengthened integration of prevention and response services under NPA-VAWC.

#### 6. Duration and Timeline

The assignment will run for 18 months:

- Months 1–4: Formative research and curriculum adaptation.
- Months 5–6: ToT and facilitator training.
- Months 7–14: Pilot implementation in 2 councils.
- Months 15–18: Refinement, validation, and final reporting.

# 7. Reporting and Supervision

The consultant will report to the Permanent Secretary, MoCDGWSG, through the Project Implementation Unit (PIU) which is led by the Presidents Office -Regional and Local Government and the Ministry of Community Development, Gender, Women and Special Groups.

## 8. Qualifications of the consulting firm

- At least 10 years' experience in GBV prevention, social norms change, and community-based interventions.
- Specific experience implementing the Program P model or other couples based behavior change models is required
- Program experience working with government systems and integrating best practice into government systems for sustainability issues.

- Proven expertise in curriculum design, adaptation, and participatory training methodologies.
- Demonstrated capacity in formative research, program evaluation, and MEL system design.
- Knowledge of Tanzania's GBV, gender, and social protection frameworks.
- Strong safeguarding policies and survivor-centred approaches.

The consultant team shall comprise at least the following key personnels with the specialization and experience indicated;

Position	No. of Experts	Minimum Academic Qualifications	Required Experience (Social/Gender Focus)	Proposed Key Responsibilities
K-1:Team Leader / GBV Technical Lead	1	Master's in Gender Studies, Sociology, or related	<ul> <li>10+ years of general experience in Social development and community intervention projects.</li> <li>Managed at least three (3) similar projects (GBV prevention, social norms change, managing large-scale gender programs, community-based interventions; World Bank or donor experience) within a period of the last 10 years.</li> <li>Proven experience leading Program P or Bandebereho adaptations or similar models in Tanzania or Sub-Saharan Africa.</li> <li>Excellent communication skills, fluent in the written and spoken English language</li> </ul>	Provide overall leadership, quality control, strategic direction, and coordination with ministries
K-2: Social Scientists (Social Norms & Social and Behavior Change Communication Specialist)	4	Master's in Gender Studies, Sociology, or related	<ul> <li>10+ years of general experience in Social development and community intervention projects.</li> <li>Undertaken at least two (2) similar projects (GBV prevention, social norms change, large-scale gender</li> </ul>	<ul> <li>Lead the         Formative         Research and         adaptation         Program P or         Bandebereho, to         the Tanzanian         context.</li> </ul>

			<ul> <li>programs, community-based interventions; World Bank or donor experience) within a period of the last 10 years.</li> <li>Excellent communication skills, fluent in the written and spoken English language</li> </ul>	<ul> <li>Ensures deep understanding of local contexts; informs model adaptation and scale-up strategy</li> </ul>
K-3: Curriculum Design & Training Expert	2	Master's in Education, Gender Studies, Sociology, or related area.	<ul> <li>8+ years of general experience in Social safeguards education, or Social development and community intervention projects.</li> <li>Undertaken at least two (2) similar projects (curriculum design, participatory training, especially in GBV or gender equality programs) within a period of the last 8 years.</li> </ul>	<ul> <li>Designs localized training materials; ensures facilitators are equipped to deliver sessions effectively</li> <li>Delivers national ToT; mentors local facilitators; ensures consistency in model rollout</li> </ul>
K-4Monitoring, Evaluation and Learning (MEL) Specialist	1	Bachelor's degree in M&E, Economics, Statistics, or Social Sciences	<ul> <li>8+ years of general experience in MEL for Social development and community intervention projects.</li> <li>Undertaken at least two (2) similar projects (MEL for GBV/social development programs; experience with behavior change tracking and ethical GBV data systems) within a period of the last 8</li> </ul>	<ul> <li>Develop MEL plan and tools; supervise data collection and analysis.</li> <li>Guides learning loop for scale-up</li> </ul>

			years.  • Experience working in Tanzania or other sub- Saharan African contexts
K-5: Social Research expert (Formative Research specialist)	2	Master's in Gender Studies, Sociology, or related area.	<ul> <li>8+ years of general experience in Social development and community intervention projects.</li> <li>Undertaken at least two (2) similar projects in designing and conducting qualitative and participatory research, particularly in the areas GBV, social norms change, masculinity, family dynamics, and community-based interventions.</li> <li>Experience working in Tanzania or other sub-Saharan African contexts</li> <li>Familiarity with gendertransformative models such as Program P, Bandebereho, or other couples-based behavioral change models aimed at GBV prevention.</li> <li>Design FGDs/KIIs; oversee data collection in 15 councils; synthesize findings</li> <li>Perform data analysis by reviewing, organizing, and examining the information collected by field teams</li> </ul>
NK-7: M&E Officers/Data Collectors /or Field Enumerators (Non- key but essential)	15	Diploma or Bachelor's in Social Sciences, Economics, Statistics, or related area.	<ul> <li>3+ years of general experience in Social development and community intervention projects.</li> <li>Undertaken at least two (2) similar projects in collecting qualitative and quantitative</li> <li>Conduct FGDs, KIIs, MEL surveys in 15 councils; adhere to ethical GBV research standards</li> <li>Responsible for collecting quantitative and</li> </ul>

	data in gender or GBV- focused projects.  • At least 3 years of Experience working in Tanzania • Excellent communication skills, fluent in the written a spoken English and the Swahili language	qualitative data for ongoing evaluation, including. Pre- and post-intervention surveys.
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# **Estimated Staff-Months**

The consultant is expected to formulate a team of experts with the following estimated months for the entire duration of the assignment.;

S/N	Position	Estimated Time Input(Months)
	K-1:Team Leader / GBV Technical Lead	16
	<ul> <li>K-2: Social Scientists (Social Norms &amp; Social and Behavior Change Communication Specialist)</li> <li>a) Social Scientists I- 15</li> <li>b) Social Scientists II-15</li> <li>c) Social Scientists III-15</li> <li>d) Social Scientists IV-15</li> </ul>	60
	<ul> <li>K-3: Curriculum Design &amp; Training Expert</li> <li>a) Curriculum Design &amp; Training Expert I- 6</li> <li>b) Curriculum Design &amp; Training Expert II-6</li> <li>c) Curriculum Design &amp; Training Expert III-6</li> <li>d) Curriculum Design &amp; Training Expert IV-6</li> </ul>	24
	K-4: Monitoring, Evaluation and Learning (MEL) Specialist	7
	<ul><li>K-5: Social Research expert (Formative Research specialist)</li><li>a) Social Research expert I-4</li><li>b) Social Research expert II-4</li></ul>	8
	NK-7: M&E Officers/Data Collectors /or Field Enumerators (Non-key but essential)	38
	I. Research Phase & Pilot Implementation Phase	
	<ul> <li>a) M&amp;E Officers I- 4</li> <li>b) M&amp;E Officers II- 4</li> <li>c) M&amp;E Officers III- 4</li> <li>d) M&amp;E Officers IV- 4</li> </ul>	
	II. Formative research phase only	
	<ul> <li>e) M&amp;E Officers I-2</li> <li>f) M&amp;E Officers II- 2</li> <li>g) M&amp;E Officers III- 2</li> <li>h) M&amp;E Officers IV- 2</li> </ul>	
	i) M&E Officers V- 2	

j) M&E Officers VI- 2	
k) M&E Officers VII- 2	
I) M&E Officers VIII- 2	
m) M&E Officers IX- 2	
n) M&E Officers X- 2	
o) M&E Officers XI- 2	
p) M&E Officers XII- 2	
q) M&E Officers XIII- 2	
r) M&E Officers XIV- 2	
s) M&E Officers XIV-2	
TOTAL	153

# 9. Procurement Approach

The international consultant will be required to partner with a **local Tanzanian NGO** experienced in GBV prevention and community facilitation, to ensure contextual relevance, ownership, and sustainability.

# 10. Safeguarding and Ethical Standards

The consultant must demonstrate:

- Policies and practices for safeguarding participants, especially women, children, and vulnerable groups.
- Commitment to ethical GBV research and survivor-centred approaches.
- Mechanisms for reporting, referral, and psychosocial support.

# . 12. Financial Arrangements

- The proposed costs shall covers international expertise (Bandebereho/Program P developers), local partner NGO collaboration, formative research, curriculum adaptation, Training of Trainers (ToT), pilot implementation, monitoring & evaluation, and final validation.
- The international consultant will be required to partner with a local Tanzanian
   NGO to ensure contextual relevance, sustainability, and capacity transfer.

- A detailed financial proposal must be submitted, breaking down costs under the following indicative categories:
  - 1. **Personnel Costs** (international experts, local facilitators, trainers, enumerators).
  - 2. **Training Costs and other reimbursables** (transport, venue, materials, per Diems, and logistics).
  - 3. **Research & Curriculum Adaptation Costs** (tools development, translation, printing).
  - 4. **Implementation/Pilot Costs** (community sessions, supervision, MEL activities).
  - 5. Operational & Administrative Costs (coordination, reporting, overheads)

# Payment schedule

Consultant should clearly indicate the fee for consultant services when submitting their financial proposals.

S/N	Project Phase / Deliverable	Timeline	Milestone Description	% of Contract Value
1	Inception Phase: Kick-off & Stakeholder Engagement(Development and/or strengthening networks with local CSOs active in the councils with experience on GBV prevention in targeted project Councils) and preparation of inception report.	Month1	Inception report and CSO Mapping and Partnership Engagement Report	10%
2	Formative Research & Curriculum Adaptation	Months 2–4	Completion of FGDs/KIIs in 15 councils, draft curriculum/manual, MEL tools submitted & approved	15%
3	National Training of Trainers (ToT)	Months 5–6	Successful delivery of 10-day ToT trainers.	15%

			ToT report and post-evaluation submitted	
4	Pilot Implementation – Mid- Point	Months 7–10	Completion of structured sessions for at least 50% of target couples in 2 councils (750+ participants); submission of midline report	15%
5	Pilot Implementation – Completion	Months 11–14	Completion of all sessions in pilot councils; total ≥1,500 participants reached; submission of pilot report & lessons learned	15%
6	Validation & Final Curriculum	Months 15–17	Stakeholder feedback incorporated; Final curriculum/manual approved; Validation workshop conducted	10%
7	National Scale-Up Plan & Final Reporting	Month 18	Final report (project narrative, MEL analysis), National scale-up plan submitted & accepted  Submission of all supporting documentation, financial closure, debriefing, and knowledge transfer	20%