TERMS OF REFERENCE

CONSULTANCY TO CONDUCT A COMPARATIVE STUDY ON ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS DURING THE COVID-19 PANDEMIC (KENYA AND GHANA)

1. Introduction

KELIN is a human rights NGO working to protect and promote health-related human rights in Kenya. We do this by: providing legal services and support, training professionals on human rights, engaging in advocacy campaigns that promote awareness of human rights issues, conducting research and influencing policy that promotes evidence-based change.

KELIN has enshrined sexual and reproductive health and rights as one of its key thematic areas in line with its strategic plan and direction for the next four years. Under this arm, KELIN aims to advocate for the integration of a human rights based approach in all laws, policies and operational frameworks relating to reproductive health and rights. As part of implementing this strategy, KELIN has been undertaking a series of projects aimed at promoting and protecting the right to access safe abortion as provided for by the laws of Kenya. This is geared towards enhancing the respect and protection of reproductive health and rights nationally as recognized under the Constitution and International treaties, conventions and norms.

The Constitution of Kenya, 2010 recognizes the right to reproductive health, which is inextricably tied to the right to choose when and if to have children. Additionally, the Constitution guarantees the right to safe abortion for a wide range of grounds under Article 26(4) however, these rights are largely illusory as safe abortion is highly stigmatized and criminalized by outdated legislation. There are several factors that have fueled abortion stigma in Kenya. This includes the haphazard withdrawal of the Standards and Guidelines on the Reduction of Maternal Mortality from Unsafe Abortion by the Ministry of Health in December 2013. Moreover, this hostility has additionally been exacerbated by constant police harassment and intimidation of service providers who are often charged in court under the previously existing, yet outdated, laws on
abortion, namely, sections 158-160 of the Penal Code. Unsafe abortion accounts for over 13% of all cases of maternal mortality on Kenya.¹ A 2012 study revealed an estimated 464,000 induced abortions occur annually.²

With the advent of the COVID-19 Pandemic across the globe and a declaration of COVID-19 as a global pandemic on March 11, 2020 by the World Health Organisation, health systems in Africa are projected to undergo unprecedented strains across all pillars of a healthcare system. Whilst African countries have recorded fairly lower rates of infection and transmission (32, 557 confirmed cases with 18,895 and 43,622 confirmed cases against 41,695 recoveries cases in Kenya and Ghana respectively as at 25th August 2020) the WHO espouses that the lower rate of transmission suggests a prolonged and extended outbreak for the continent if containment and mass testing measures are not escalated and prioritized.³ While this presents the most urgent face of the multi-faceted impact of a pandemic on health care systems, there are a myriad of other health rights that will suffer greatly alongside the advent of COVID-19 including (but not limited to) sexual and reproductive health and rights (SRHR). With due regard to COVID-19, the continent consists of countries with a large vulnerable population attributed to high poverty levels, crowded urban areas and weak health systems unable to comprehensively cater to our health needs.⁴

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² This study was conducted by Ministry of Health in collaboration with the African population and Health Research Centre (APHRC) undertook a study titled ‘Incidence and complications of unsafe abortion in Kenya’ This Study is available at https://www.guttmacher.org/sites/default/files/report_pdf/abortion-in-kenya.pdf
2. Purpose of Consultancy

Subsequently, this project will: Identify through research the impact of COVID-19 on the state of SRHR in Kenya and Ghana; it will also provide a living model innovation of learning and information exchange on the impact of COVID-19 on SRHR services including access to safe and legal abortion that will improve advocacy strategies for members of the Learning 4 Change platform and; help identify additional trends and patterns during COVID-19 and their impact on access to SRH services and information in Kenya, Ghana and ultimately in other countries represented by members in the L4C platform.

3. Specific Objectives

The specific objectives of this consultancy are:

1. To outline, establish and compare the impact of COVID-19 on access to sexual and reproductive health (SRH) services and specifically access to safe and legal abortion in Kenya and Ghana

2. To identify existing barriers of access to SRH services and most at risk populations as a result of the COVID-19 Pandemic in Ghana and Kenya

3. To establish strategies being deployed to guarantee access to SRH services, particularly safe and legal abortion during the Pandemic

4. Scope of Work and Main Tasks

The Consultant shall be required to:

- Participate in an inception meeting and prepare an inception report detailing the methodology to be employed and the detailed work plan;
- Finalize a jointly agreed work plan and map out timelines for activities as guided by the Research Plan;
• Develop a template for the final report and standardized tool (Popular version of the report and Webinar Curriculum)

• Conduct a literature review to make an assessment of the current knowledge, studies, reports and media reports on the impact of COVID-19 on access to SRHR with a keen focus on access to safe and legal abortion in Kenya and Ghana;

• Develop a standard questionnaire for the Key Informant Interviews and survey respectively;

• Analyse and collate the aforementioned findings including the results of the survey and Key Informant Interviews into a final report and develop a standardised toolkit (Popular Version of the report and Webinar Curriculum).

• Develop and submit a draft report indicating the findings from the comparative analysis, survey and Key Informant Interviews;

• Submit final report with stakeholder’s feedback incorporated

5. Proposed Methodology

The proposed research methodology is three pronged:

1. Conduct a comparative study by way of a desk review on existing literature with the aim of providing a context analysis and in depth understanding on the impact of the COVID-19 Pandemic on Sexual and Reproductive Health and Rights with a keen focus on access to safe and legal abortion.

2. Non-doctrinal research carried out in Kenya that may verify nuances from the desk review.

3. An expansion of the study to other countries in the L4C Platform intended to expand the exchange of learnings through webinars, assessment through kahoot and brainstorming
sessions on *Mural* in a bid to inform civil society’s response to prevent and eliminate barriers to access of SRH services and information for vulnerable populations.

6. **Deliverables**

The consultant will complete and submit the final report and standardized tool (Popular Version of the report and Webinar Curriculum) in both hard and soft copy capturing an in depth and clear analysis of the findings from the research and findings from the survey. The report will comprehensively incorporate and be founded on comparative analysis vide the literature review, survey and Key Informant Interviews. The key deliverables include:

i. An Inception report, prepared after an inception meeting, detailing the general understanding of the assignment and research plan developed by KELIN, the study design, work plan, budget and deliverables.

ii. Final work plan with timelines as agreed on with KELIN.

iii. Data collection tools to be approved by KELIN, which shall be used to conduct a survey and Key Informant Interviews with members of the COVID – RBA Advocacy group.

iv. Draft and final report and standardized toolkit (Popular Version and Webinar Curriculum) on the Comparative Study, surveys and KIIs.

7. **Time Frame**

Given the project duration and scope of work, the assignment should be completed within 5 weeks of signing the Agreement. The consultant will be engaged for a period of 26 working days and this shall be within the five-week period in accordance with the research and work plan. 10 consecutive days shall be dedicated to an extensive and in-depth literature review and dissemination of the survey;
8. KELIN’s Role

KELIN shall provide administrative and logistical support in relation to conducting the Key Informant interviews and the validation meeting. KELIN shall also review the literature review, questionnaires, report and standardized toolkit and promptly avail comments to the consultant for the finalization of the final report and standardized toolkit. The roles will be further defined at the inception meeting.

9. Qualifications of the Consultant

a. Functional competencies:

- Knowledge on International and regional human rights, legal frameworks and sexual and reproductive health and rights;
- Knowledge on national, legal, policy and normative frameworks on Sexual and Reproductive Health and Rights with a specific focus on access to safe and legal abortion;
- Significant experience in conducting interviews especially with diverse persons within Civil Society and vulnerable and marginalized populations;
- Ability to research and write at a high level; and
- Any other SRHR related experience or knowledge would be an added advantage

b. Core competencies:

- Ability to produce high quality outputs in a timely manner under a high pressure environment while understanding and anticipating the evolving needs of the client;
- Strong organizational skills; and
- Ability to work independently, produce high quality outputs.
c. Required skills and experience

• Education:

Masters degree in law, public health or any other relevant social sciences

• Experience:

Minimum of 5 years of relevant experience is required.

• Language

Excellent written and spoken English and Swahili.

10.0 APPLICATION INSTRUCTIONS:

Send a Cover Letter, a Resume and a detailed proposal to conduct the assignment outlining the consultant’s understanding of this task, proposed methodology, work plan and budget before application deadline 4th September, 2020 to applications@kelinkenya.org and copy info@kelinkenya.org.

While submitting your application be sure your email subject line is CONSULTANCY TO CONDUCT A COMPARATIVE STUDY ON ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS DURING THE COVID-19 PANDEMIC (KENYA AND GHANA) - (Your Name)