



EMBASSY OF DENMARK
Danida

Call for Concept Notes – Sexual and Reproductive Health and Rights (SRHR) and Gender-Based Violence (GBV) Engagement

In this call for concept notes, the Embassy of Denmark in Nairobi is inviting innovative expressions of interest from entities interested in collaborating with Denmark to promote access to adolescent-friendly and inclusive SRHR services and the prevention of and response to GBV. Successful applicants will then be requested to submit full proposals through a [call for proposals](#) process.

About the SRHR/ GBV Engagement

Denmark's new SRHR /GBV Engagement is a 5-year programme funded by the Ministry of Foreign Affairs of Denmark/Danida through its Embassy in Nairobi. The SRHR/GBV engagement is part of the overall *Strategic Objective 2*, of the new Denmark-Kenya, Strategic Framework 2021-2025 and the following expected *outcome*:

Strategic Objective: *Increased pro-poor access to maternal, new born, child and adolescent health services at county-level, and strengthened respect for and improved access to sexual and reproductive health and rights, including family planning and decrease in gender-based violence.*

Specifically, the expected outcome of the engagement would be: *Strengthened respect for and improved sexual and reproductive health and rights (SRHR) and decrease in gender-based violence (GBV).*

Background:

Promoting sexual and reproductive health and rights (SRHR) has high priority in Danish development assistance. Kenya has made considerable progress towards policy development in the health sector including in the reproductive health sphere. However, political controversy and opposition around issues related to the prevention and reduction of unsafe abortion, adolescent sexual and reproductive health and sexual rights, remain significant. This is reflected in the fact that the SRHR response in Kenya to a large extent, has been reduced to a focus on maternal and new born health rather than a more comprehensive and multi-disciplinary approach. Moreover, insufficient SRHR, HIV and GBV integration in the health system remains a challenge.

- *Kenya's Maternal Mortality Ratio (MMR)* is approximately 362 deaths/100,000 live births. The even much higher MMR in some counties is a reflection of major supply and demand gaps and challenges in health service coverage, which result in continued disparities among counties, between urban and rural residents, and among different vulnerable and marginalised population groups.
- *Access to contraception is limited and teen pregnancies and (unsafe) abortion* remains high. According to the Kenya National Demographic Health Survey (KDHS) 2014, only 44.2 pct of Kenyan women are able to access modern contraceptives. A large portion of Kenyan women including those with disabilities, in rural areas, with low income as well as adolescents girls and boys have huge unmet family planning

needs including lack of access to information on the full range of family planning services and modern contraceptive methods.

- *Adolescent and youth sexual and reproductive health (AYSRH)* still remains a low priority. With limited access to modern contraception, teenage pregnancy remains high and stands at 18 pct. Many girls continue to experience health-related challenges, including mortality and morbidity due to birth-related complications and unsafe abortion and in some instances, are forced into early marriages. Some of the health-related issues affecting adolescent girls include barriers in accessing information on SRHR, which result in lack of knowledge and skills to prevent unwanted/unintended pregnancies and HIV infections. Strategies to support adolescent/teen mothers must take cognizance of the broader overall agenda of supporting the rights of adolescent girls and include the sensitization of adolescent boys in that respect, as a vital component of fostering sustainable development.
- *GBV, including domestic and sexual violence, sexual harassment, human trafficking and harmful traditional practices (HTPs)*, such as early and forced child marriage and Female Genital Mutilation (FGM) is still endemic in Kenya. Despite the existence of legislation, administrative directives, judicial sanctions, and awareness-raising efforts by a variety of CSOs and the government, factors that fuel GBV include socio-economic/cultural dynamics that contribute to socialization that normalizes and condones GBV. In addition, uneven enforcement of anti-GBV laws and policies, also fuel the spread of harmful cultural practices and other forms of GBV. Gaps exist in providing effective and easy access reporting mechanism, multi-disciplinary and comprehensive services to survivors of GBV and only few government public health facilities have GBV recovery centres.

These and other challenges compromise, not only human dignity and women, girls and other vulnerable groups' fundamental human rights but also human capital and the development of Kenyan society more broadly. Kenyan counties experience vast disparities in health indicator performance with the periphery and largely rural counties facing the biggest brunt of challenges but also large disadvantaged urban communities, within otherwise relatively well-performing urban areas, are left behind when it comes to SRHR and GBV.

Scope:

The Development Engagement (DE) on SRHR and GBV will focus, but not exclusively so, on the following priorities:

- *Increased pro-poor access of adolescent, youth-friendly and inclusive sexual, reproductive, maternal and child health services, including integrated support for particularly marginalised groups such as LGBT+ persons and persons with disabilities (PWDs).*
- *Addressing unmet need for family planning, including modern contraception methods and access to services for adolescent girls and boys, women and men.*
- *Prevention of and response to sexual and gender based violence including addressing domestic violence, sexual harassment and Harmful Traditional Practices (HTPs) such as Female Genital Mutilations (FGM) and early and forced marriage.*
- *Provision of access to post-abortion care, preventing and reducing unsafe abortion and improving life-saving skills.*

- Across the four priorities above, *increasing awareness and knowledge* about *women's and girl's rights* (including the right to bodily autonomy, and family planning decision-making), leading to *a change in attitudes and practices*. Awareness raising activities should also find innovative ways to addressing the barriers in accessing information on SRHR, which result in lack of knowledge and skills to prevent unwanted pregnancy, HIV infection and GBV.

The Engagement will take a *targeted and innovative approach* to preventing and responding to GBV (including the use of new technologies, more user friendly and effective reporting methods etc.) and strengthening social accountability from duty bearers across multi-disciplinary sectors. *Innovative approaches* will be prioritising i) *knowledge of and access to adolescent girls' and women's human rights*; ii) *targetted work on boys, male roles and masculinities towards gender equality*, and iii) *addressing the root causes and drivers of early pregnancy and marriage*, ultimately contributing towards keeping girls in schools.

Assessment Criteria:

Successful applicants will demonstrate how they will comprehensively address the priorities mentioned under the scope-section from a human rights based approach and their extensive, proven experience within and consideration of these priorities.

In the assessment of the Concept Notes, the following criteria will be considered:

- Applicants should demonstrate the relevance of their Concept Note's objectives to this Call as defined in the scope and objective.
- Applicants must demonstrate strong institutional capabilities with 7 years or more experience of implementation of donor funding in improving access to youth friendly and inclusive SRHR and in preventing and responding to GBV within an in-depth understanding of the Kenyan context and related challenges.
- Applicants must have clear intervention logic that clarifies the targeted change processes and the main assumptions and show a strategic and innovative gender, youth and inclusive human rights-based perspective linking the national and county levels with regional and international levels.
- Applicants must have a broad national and county outreach in their operations, with the ability to scale up operations if required, during the implementation period.
- Applicants must be familiar with developing a Theory of Change, have a MEAL system in place that focuses on learning and adaptive programming.
- Applicants must have proper legal registration to work in Kenya well as sound organisational, financial and risk management systems in place.

Collaboration and Network: Applicants that demonstrate working partnerships with national and county government entities will be favorably evaluated. They must also incentivize collaboration within and/or between civil society organisations and the state to implement joint initiatives, overcome divisions, and strengthen their collective influence and capabilities. Consortium with diverse, complementary and specialized partners are thus hereby encouraged to apply.

Programme Location: Program activities **must** take place in Kenya. Applicants may propose and justify geographically targeted focus, i.e. select counties of operation, using the following criteria: a) low access to youth friendly and inclusive SRHR services including access to modern contraception methods, b) high prevalence of GBV and HTPs, early and forced marriage and FGMs, c) counties prone to high MMR and high level of adolescent pregnancies.

Budget and funding period:

Around DKK 50 million to run from January 2021-December 2025.

Deadline of submissions: The deadline for submitting a concept note for this call is Monday 20th April 2020 at 17:00hrs East African Time. The concept note shall follow the provided format and the project presentation section be no more than four (4) pages (see attached template). Any additional information will not be considered.

Questions may be send to the embassy, as per e-mail addresses below, concerning the application form or the application process up to seven days before the deadline for the submission of the concept notes. The Embassy will *not* be able to provide specific guidance concerning the formulation of the concept note. The embassy requests applicants to limit questions regarding the call to minimum during the concept phase. Relevant information is found in the call. Questions and answers will be published on the the embassy webpage.

You must submit your application to helbon@um.dk adaspl@um.dk and fortisarah@hotmail.com before the deadline. Late submissions will not be accepted.

Selection Process: The Embassy will select the final applicant through an open and transparent call in the following order:

1. *Concept note stage:* All submitted concept notes will be reviewed and applicants will receive brief written response on decisions.
2. *Proposal stage:* Successful applicants (concepts) will receive a call for (full) proposals. (Expected during May 2020)
3. *Selection stage:* The successful proposal will proceed to the Development Engagement Document (DED) formulation stage (Expected during June and July 2020).

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For information on the next stage of proposals, direct to
<https://kenya.um.dk>