

TERMS OF REFERENCE	
Hiring Office:	UNFPA Egypt Country Office
Purpose of consultancy:	Develop a policy paper on Menstrual Health in Egypt.
Scope of work: (Description of services, activities, or outputs)	<p>Menstrual health (MH) refers to “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity, in relation to the menstrual cycle”.¹</p> <p>Menstrual Health Management (MHM) is defined as ‘Women and adolescent girls using a clean menstrual management material to absorb or collect blood that can be changed in privacy as often as necessary for the duration of the menstruation period, using soap and water for washing the body as required, and having access to facilities to dispose of used menstrual management materials’.²</p> <p>MH is essential for the well-being and empowerment of adolescent girls, encompassing a range of interventions designed to equip girls with knowledge, skills, and provide them with access to quality services, to enable them to manage their periods in a dignified manner and reach their full potential. These interventions include:</p> <p>Education and Information: Providing comprehensive and timely information to adolescent girls about the menstrual cycle, menstruation, and related changes throughout their life-course.</p> <p>Self-care and Hygiene Practices: Promoting appropriate self-care hygienic practices related to menstruation to ensure comfort.</p> <p>Access to Menstrual Materials: Ensuring access to effective and affordable menstrual products that meet the specific needs of adolescent girls, enabling them to manage their periods with confidence.</p> <p>Supportive Facilities and Services: Creating safe and supportive environments equipped with proper water, sanitation, and hygiene (WASH) facilities for washing, changing menstrual materials, and managing waste discreetly.</p>

¹ WHO

² Biran A, Curtis V, Gautam OP, Greenland K, Islam MS, Schmidt W-P, et al. Menstrual Hygiene. In: Background paper on measuring WASH and food hygiene practices—definition of goals to be tackled post 2015 by the joint monitoring Programme. 1st ed. London: London School of Hygiene and Tropical Medicine; 2012.

Healthcare Services: Facilitating timely access to diagnosis, treatment, and care for menstrual-related discomforts and disorders through appropriate health services and resources such as adolescents and youth friendly health services, including pain relief and self-care strategies.

Respectful and Stigma-free Environment: Fostering a positive and stigma-free environment that supports girls and women, free from negative social norms and stigma, psychological distress, and discriminatory practices such as menstrual-related exclusion, restriction, or violence.³

While menstruation is a natural, normal event, menstruation is surrounded by stigma, shame and negative cultural and religious misconceptions that negatively impacts girls' social life and health wellbeing.

Adolescent girls, especially young adolescents, tend to be less prepared for menstruation and experience anxiety, fear, and shame during their periods. Challenges persist regarding access to timely information, a safe and respectful environment, and the availability and affordability of menstrual products for adolescent girls. Additionally, the inability of girls to manage their menstrual hygiene properly in schools contributes to school absenteeism.

A UNESCO study revealed that one in 10 girls in Sub-Saharan Africa misses school during menstruation. In Egypt, 37% of never-married females aged 15-29 reported that their menstrual cycle affected their school attendance (EFHS 2021). The EFHS findings also highlight that nearly half of never-married females aged 15-29 (48%) have not received information about puberty and menstruation. Among those who have received such information, three-quarters received it from their mothers, while about one-third received it from relatives or friends. Approximately 29% of females learned about puberty and menstruation from school.

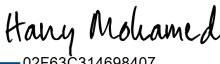
Promoting menstrual health is not solely about sanitation; it is a critical step towards safeguarding the dignity, bodily integrity, and overall life opportunities of girls.

To that end, UNFPA is seeking to hire a consultant with expertise in health advocacy and policy. The consultant will be responsible for developing a policy brief on Menstrual Health in Egypt and facilitating a policy dialogue based on the findings and recommendations outlined in the brief.

In the execution of this assignment, the consultant shall undertake the following tasks, in close collaboration with relevant stakeholders:

³ Hennegan J, Winkler IT, Bobel C, Keiser D, Hampton J, Larsson G, Chandra-Mouli V, Plesons M, Mahon T. Menstrual health: a definition for policy, practice, and research. *Sex Reprod Health Matters*. 2021 Dec;29(1):1911618. doi: 10.1080/26410397.2021.1911618. PMID: 33910492; PMCID: PMC8098749.

	<ol style="list-style-type: none"> 1. Meet with relevant officers at UNFPA for a comprehensive briefing on the specific tasks and objectives of the consultancy. 2. Develop a detailed plan of action with a clear timeline that outlines key activities, milestones, and deliverables of the consultancy. 3. Conduct a thorough review of relevant documents, knowledge and policy, and advocacy products, and MH programs both within Egypt and globally to inform the content and scope of the policy paper. 4. Organize and facilitate a minimum of 6 IDIs/FGDs with key stakeholders identified during the consultation phase. The number of interviews and discussions may vary based on the agreed plan of action and identified stakeholders. 5. Develop a comprehensive policy paper on MH specifically tailored for adolescent girls, ensuring the inclusion of relevant research findings, best practices, and policy recommendations. 6. Facilitate a dissemination event organized by UNFPA to share the findings and recommendations of the policy paper with relevant stakeholders. 7. Lead a policy dialogue session aimed at engaging stakeholders in discussions on MH for adolescent girls, promoting awareness, and advocating for policy actions based on the paper's findings.
Duration and working schedule:	4 months from contract signature
Delivery dates and how work will be delivered (e.g. electronic, hard copy etc.):	<p>The consultant will be responsible to deliver:</p> <ol style="list-style-type: none"> 1- A detailed plan of action with a clear timeline that outlines key activities, milestones, and deliverables of the consultancy, by 15th of July 2024. 2- A draft policy paper, based on the desk review and meeting with different stakeholders, by the 30th of August 2024. 3- Final policy paper, by the 15th of September 2024. 4- Final report on policy dialogue, by 31 of October 2024.
Monitoring and progress control, including reporting requirements, periodicity format and deadline:	<p>The consultant is requested to provide the following:</p> <ol style="list-style-type: none"> 1- By 15th of July 2024, as a first installment, 30% of the total remuneration will be provided upon receipt of the action plan; 2- By 15 of September 2024, as a second installment, 50% of the total remuneration will be provided upon receipt of the inception report;

	3- By 31 of October 2024, as a third and final installment, 20% of the total remuneration will be provided upon receipt of the final report on policy dialogue.
Supervisory arrangements:	Programme Associate (in coordination with Adolescent and Youth Specialist and Reproductive Health Specialist).
Expected travel:	The assignment will not require travel.
Required expertise, qualifications and competencies, including language requirements:	<ol style="list-style-type: none"> 1. Advanced educational background in one of the areas of public policy, public health, Gender, social science, or related field. 2. At least ten years of professional experience in health advocacy and policy. 3. Demonstrated experience in working on reproductive health and gender, particularly related to adolescent girls. 4. Experience in coordinating and facilitating policy dialogues is considered an asset. 5. Strong communication and reporting skills in both Arabic and English; the consultant must provide proof/supporting documents from previous experiences.
Inputs / services to be provided by UNFPA or implementing partner (e.g support services, office space, equipment), if applicable:	UNFPA will provide available materials relating to MH to assist the consultant in conducting the desk research.
Other relevant information or special conditions, if any:	N/A
Signature of Requesting Officer in Hiring Office: Date: 27-May-2024	<p>DocuSigned by:  02F63C314698407...</p>