

#### **GENDER ANALYSIS CONSULTANT**

# **Terms of Reference**

Within the AGE+ project, Syri i Vizionit plan to engage a consultant to conduct gender analysis on a micro, meso, macro and meta level in two target communities: Peje and Istog in the social, health and care sector targeting elderly/retired women and men.

A gender analysis is the systematic attempt to identify key issues contributing to gender inequalities, many of which also contribute to poor development outcomes. This process explores how gendered power relations give rise to discrimination, subordination and exclusion in society, particularly when overlaid across other areas of marginalization due to class, ethnicity, caste, age, religion, disability status, sexuality, etc.

The analysis aims to be an output of a highly participatory and consultative process involving various stakeholders being active and influential in field of social inclusion of elderly people in Serbia and Kosovo, including beneficiaries but also NGO's, CSO's and private actors working in the health, social and care sector.

The total effort of the Gender Analysis should be **24 working days** including preparation work **between 07 June 2023 and 31 August 2023**. The locations include **Peje and Istog**.

### **Background**

The AGE+ programme is implemented in Kosovo (Peja, Istog) and Serbia (Šabac, Sombor, Novi Sad, Surdulica). Although Kosovo, compared to European countries, still has a younger average population, changing family structures and huge emigration of young people are a growing factor which affects negatively the demographic development. The official forecast is that by 2031 13% of the population will be over the age of 65 years and rapidly growing in subsequent years<sup>1</sup>, even up to 22,3% by 2050<sup>2</sup>. The living conditions of many elderly persons are very difficult and characterized by poverty or at-risk-of-poverty and insufficient provision of social services and health care<sup>3</sup>. The new law on pensioners, which was drafted in 2019, remains unapproved due to objections and accusations of discriminatory regulations. There is a lack of profesional social welfare staff and service providers: only about 800 people are licenced to provide social services. Throughout the country there are only small spaces or no spaces at all for day centres or elderly homes. Care for the elderly is traditionally done by family members with the main burden of care work on women.

<sup>&</sup>lt;sup>3</sup> "Multidimensional Poverty Analysis Kosovo 2017" link https://cdn.sida.se/app/uploads/2020/12/01095837/kosovo-mdpa.pdf













<sup>&</sup>lt;sup>1</sup> Kosovo Agency of Statistics, <a href="https://ask.rks-gov.net/">https://ask.rks-gov.net/</a>

<sup>&</sup>lt;sup>2</sup> https://serbia.unfpa.org/sites/default/files/pub-pdf/survey on loneliness eng 0.pdf



Older people and women are underrepresented in decision-making processes. Older people and women are still underrepresented both quantitatively and qualitatively in local politics and decision making, especially in matters related to elderly.

## **AGE+ Programme**

The AGE+ programme is a regional programme to support the well-being and social inclusion of elderly in Serbia and Kosovo.

AGE+ will contribute primarily to empowering vulnerable older people and women in the areas of social exclusion, health and social protection, sustainable social development, good governance safeguarding the rights and needs of elderly and women, related institutional capacity building at local level, and building inclusive societies and social cohesion.

The AGE+ programme aims to:

- strengthen participation of elderly persons in dialogue with their governments at local level, voicing their needs and involving them in decision making on services to the elderly;
- increase capacity of governments, private sector, and other service providers to deliver services for elderly based on recommendations of the senior citizens, and
- increase provision of complementary services as support to the elderly on community level with pilot actions that enhance cross-sector learning and sharing of social innovations that include intergenerational and gender-transformative actions.

Through strategic planning, targeted capacity building, cross-sectoral efforts, and inclusiveness of elderly people on community and policy level, targeted municipalities will strengthen existing initiatives and services for elderly people with consideration for the specific needs of elderly women and men. New age-friendly, gender-responsive, and gender-transformative initiatives and services will be developed on a community level. Transfer of capacity and knowledge will also be provided to sustainably cater to the needs of ageing societies and shared with other municipalities. Furthermore, age-friendly and intergenerational activities as well as awareness raising and advocacy undertakings, will combat ageism.

The above will be implemented through establishment of gender-balanced Senior Citizen Councils (consisting of members above the age of 60) in target municipalities; diverse capacity building activities for local government units and relevant private and public service providers; and establishment of local intergenerational solidarity centres which include realization of three pilot intergenerational actions with young generations to create age-friendly communities.

The programme's activities will combat the socially constructed way of thinking about older persons, commonly based on negative attitudes and stereotypes about aging. Furthermore, the activities will combat segregation of the elderly and failing to respond appropriately to their real needs. Among others, the consolidation as age-friendly community, with intergenerational solidarity and gender













sensitiveness, is underlined by the target municipalities' preparedness for entry in the Global Network of Age-Friendly Cities and Communities.

The AGE+ programme is implemented from 1.1.2023 to 31.12.2025 with Volkshilfe Solidarität as the Lead Partner and Syri i Vizionit, TARA International Consulting, and Novi Sad Humanitarian Centre as local project partners.

## Objectives of the gender analysis

The aim of this analysis is to gain insight on the gender based needs and wants of elderly women and men and to get recommendations on how to create special targeted interventions to answer to gender specific needs and wants that stimulate inclusion into the communities within the AGE+ programme. The Micro level gender analysis identifies specific needs and priorities of elderly women and men relating to the programme context, and examines gender roles, relationships and social issues. The Meso level focuses on institutions, how they operate and meet the needs of the elderly population in terms of service provision and implementation, and how they influence national policy. The Macro level relates to the national policies governing activities in the country, including legislation, regulations and policies. The meta level focuses on gender norms in Serbia and Kosovo, which are embedded in social structures at all levels and envisage responses that involve social changes. The analysis focuses on how these national instruments influence activities in an institution or organization or at field level.

The role of the consultant is to work with Volkshilfe Solidarität and its partner SiV in Kosovo is to develop a country and context specific gender analysis for elderly people in Kosovo. The consultation has the following objectives:

- 1. To identify the gendered stereotypes and practices in the social, health and care sector on the micro, meso, macro and meta level of Peje and Istog
- 2. Analyse the AGE+ interventions and assess compliance and implementation in respect to gender marker 2.
- 3. Provide sex and age as well as other diversity factors (disability, location, class, retired, single-household, etc.) disaggregated data in respect to gender issues, (access, member, and participation, decision making, spaces, gender activities, reporting, policies, governance, personnel, etc.) in social, care and health sector relevant for this programme.
- 4. Identify barriers and facilitators to gender equality within the programme both at the institutional and community level
- 5. Suggest recommendations for improvement in gender transformative interventions for the programme in line with Gender Marker 2.
- 6. Write and deliver the Gender analysis report.

We suggest a **mixture of methods and approaches** to use to conduct the study, which includes literature-, legislations- and policies-review as well as qualitative data collection methods.



AGE+ IMPLEMENTED BY:











## Methodology

The consultant will lead the process of conducting the gender analysis. The gender analysis will be conducted using the following methodology:

- Literature review of relevant background documents including policies, legislative frameworks, gender and social inclusion studies, other relevant material on the social, health and care sector
- 2) Key stakeholder interviews of relevant stakeholders consultant provides a list of stakeholders to interview that will include key actors such as associations for women, private sector actors, community groups, CSO's, NGO's, etc; consultant also provides interview guides, which will be developed in collaboration with the Age+ partners, that will contain the key questions of the gender analysis
- 3) One-on-one key informant interviews (beneficiaries) and focus group discussions (beneficiaries) will be conducted by physical discussions. The consultant will work together with Volkshilfe Solidarität and the local project partners in this data collection stage of the gender analysis.

The consultant will use a gender-inclusive language (communication, presentations, materials) and safeguard confidentiality, inclusion and active participation of all participants.

## **Output of the gender analysis**

The output of the consultant's work is a Gender Analysis Report for AGE+ programme. Upon completion of the data collection, all data will be ended, cleaned, and analysed for reporting. The final report will include practical information on how to improve social inclusion and community structures, especially activities and measurements to include more women. The report will provide practical information on how to collaborate with private and NGO/CSO sector to improve retired/elderly women's and men's access to social, care and health services. The report will offer a critical understanding of gender inequalities, barriers, risks, and issues at local contexts in both nations. The report will include practical recommendations on how to improve and alleviate the conditions that impede elderly women's and men's access to social, care and health services.

The structure of the Gender analysis report shall include the following chapters:

- Acronyms and Abbreviations
- Definition of Terms
- Executive Summary
- 1. Introduction
- 2. Backgrounds
  - 2.1. Objective, Scope and Methodology
  - 2.2. Geographical Scope
  - 2.3. Study Participants
    - 2.3.1. Data Collection Methods
    - 2.3.2. Key Study Limitations
- 3. Findings of the gender analysis
  - o 4.1. Introduction















#### o 4.2. MACRO LEVEL

- 4.2.1. Kosovo national legislation and policy framework on gender
  - 4.2.1.1. Challenges, barriers, enablers and facilitators
- 4.2.2. Austrian Development Agency Position on Gender
- 4.2.3. Gender in social, health and care sector in Kosovo
  - 4.2.1.1. Challenges, barriers, enablers and facilitators

#### o 4.3. MESO LEVEL

- 4.3.1. Gender balance in leadership and participation in social, health and care sector
- 4.3.2. Gender policies and guidelines in the organisations/companies
- 4.2.3. Participation of retired men and women in and making use of the offered services
- 4.2.4. Gender responsive conditions in the sectors
- 4.2.5. Staff skills and capacity in gender
- 4.2.6. Health-, social-, care sector gender dynamics

#### 4.4. MICRO LEVEL

- Sex disaggregated data of participants
- Decision-making and control over resources
- Gender based violence, safety and security
- Retention of women in social/public sphere
- Care and domestic responsibilities, Housework and health care for relatives
- Infrastructure and gender
- Practical needs, wants and challenges of women and men (beneficiaries) as recipients of social, care and health sector services

#### o 4.5. META LEVEL

- 5.1. Introduction
- 5.2. Gendered Stereotypes
  - 5.2.1. Gendered stereotypes in the CSO, NGO and private sector level (meso)
  - 5.2.2. Gendered stereotypes in the community (micro level)
  - 5.2.3. Recommendations to social changes of stereotypes

### • 5. Recommendations and conclusion

- o 5.1. Recommendations
  - At least 5 recommendations inclusive of underpoints that describe concrete gender-transformative measurements/interventions expected
- o 5.2. Conclusion

#### Annexes

- Report from the meetings / consultations / key informant interviews with stakeholders in target communities. Stakeholders include but not limited to organizations/representatives of older people, caretakers, government/city offices, NGO's, CSO's
- Report from focus group discussions / key informant interviews with beneficiaries in target communities. Beneficiaries are older people (age above 60/65)



AGE+ IMPLEMENTED BY:









With funding from



The report needs to be written in gender-sensitive language.

#### **Ethical Behaviour**

The consultant will follow and comply to the following VHSOL Policy Papers and Guidelines:

- Safeguarding
- Gender-, Diversity- and Inclusion
- Child Protection
- Anticorruption
- Environmental Protection
- Complaints Mechanism

These policy papers and guidelines ensure to protect people, including children and at-risk adults, from harm that might arise from coming into contact with VHSOL staff, its Partners or their contracted persons/institutions.

## **Key questions**

The gender analysis will detect differences at all levels, at micro (beneficiaries), meso (institutions and service delivery actors) and macro (national policies). It should also include a meta level (gender norms in Serbia and Kosovo, which are embedded in social structures at all levels) and envisage responses that involve social changes. As such, the gender analysis will collect primary / secondary data on gender, including different characteristics (such as age, ethnicity, disability etc.), examine the current situation of women and men, their respective needs and priorities, existing inequalities etc. not only by considering sex and age, but also other social determinants, such as disability, residence, ethnicity etc. In this respect, the different needs and priorities of women/men, having different social expectations to fulfil, earning different amounts of pension money, having different social status etc. can be better assessed.

### Key questions on micro level

(to find out the needs and wants of the elderly and how the programme can fulfil that)

- What is the daily activity profile of elderly women and men? Who normally does what?
   (carework, housework, domestic responsibilities, care for household members and relatives, etc.) How do they spend their leisure time?
- Are there gender inequalities in access to resources, and who has control over different resources? How are decisions made about different resources and activities at community and at a household level? Resources include material ones, like money, car, land, bank account, smartphone, internet access, as well as non-material such as time, information, and rights.
- What factors influence (the elderly's women and men) feeling of safety and security? What
  would they need to feel more secure at home and in your community? What are their
  perceptions of gender based violence? Does anything keep them from going out?













- What are the differences in community participation and inclusion of elderly women and men?
- To what extent are women vs. men able to exercise their voice in decisions made by public, private, and civil society organizations, both individually and as collectives?
- What progress do you want to see in the future? If you could change/get support in one thing in your daily life, what would that be? What is your dream for your community?

### Key questions on meso level

- Does your organization/institution/company reflect gender balance in their leadership and participation of recipients of services?
- Do women and men have equal access to services? Are your services gender-responsive to the special needs and wants of men and women in your community? Who is participating more men or women and why? Is equal treatment guaranteed for men and women?
- Do you have company/organization/institution guidelines and policies on gender issues? Is your staff skilled and has the capacity to deal with gender issues?
- What are the gender dynamics in your sector (health, care, social)?

### Key questions on macro level

- Have gender equality commitments been made by the government by adopting human rights standards such as the Declaration of Beijing and Platform for Action, the Sustainable Development Goals, the Convention on the Elimination of all Discrimination Against Women (CEDAW)?
- Do national and sectoral policies reflect these commitments by their awareness of inequalities between men and women at different levels and the inclusion of means to address them?
- Are there any specific laws, policies and regulations in place to promote gender equality and women's empowerment in national-level institutions? How are women represented in the system? Who is taking decisions?
- Are there any special benefits or restrictions in the legal or regulatory framework that directly or indirectly target women or men?
- Do current policies, laws and regulations in a social welfare, care and health sector impact differently on women and men? And if so, how?

## Key questions on meta level

- What are the traditional settings that produce gender inequality among the elderly, genderbased discrimination as well as discrimination due to other differences like disability, age, rural/urban?
- Are there traditional norms or beliefs that discriminate against elderly women in their access to social services?
- In what ways do traditional norms and beliefs affect elderly women of different ethnic backgrounds, social status, educational levels, disability?













- Do traditions/norms/beliefs result into discriminatory policies/laws/regulations?
- What are the possible transformative actions able to mitigate the discriminatory potential of traditions/norms/beliefs in helping elderly women in accessing social services?

# **Application requirements**

- Technical proposal (Which approach will be taken; whom the consultant is going to interview; how many focus groups, interviews, and participants there will be, males/females; how the work is going to be recorded, etc.)
- CV of the consultant
- Financial offer

# **Application deadline**

31 May 2023 via email to office@syriivizionit.org

#### Contact

Dukagjin Nishqi SiV, Isa Demaj 14, 30000, Peje



AGE+ IMPLEMENTED BY:







