About medica mondiale

medica mondiale e.V. is a non-governmental organisation based in Cologne, Germany. As a feminist women’s rights and aid organisation medica mondiale supports women and girls in war and crisis zones throughout the world. Through own programmes and in cooperation with local women’s organisations we offer holistic support to women and girl survivors of sexualised and gender-based violence. On the political level, we pro-actively promote women’s rights, call for a rigorous punishment of crimes as well as effective protection, justice and political participation for survivors of violence. Currently medica mondiale is working in Northern Iraq/Kurdistan, in Afghanistan, in Liberia, in Kosovo, in Bosnia and Herzegovina as well as the African Great Lakes Region.

Call for Expressions of Interest

Study “Dealing with Long-Term Consequences of War-Related Sexualised and Gender-Based Violence (SGBV) in Kosovo”

1. Overview

medica mondiale e.V. seeks a FEMALE RESEARCHER / TEAM OF RESEARCHERS for supporting a study of the long-term consequences of war-related SGBV, social recognition and support as seen from the perspective of survivors of such violence in Kosovo:

<table>
<thead>
<tr>
<th>Research Duration (from preparation to final report)</th>
<th>August 2021 – February 2023</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desired data collection period in-country (field work planned pending development of the Covid-19 situation)</td>
<td>January – March 2022 and June/July 2022</td>
</tr>
<tr>
<td>Project Title</td>
<td>The study “Dealing with Long-Term Consequences of War-Related SGBV in Kosovo” is realized within the BMZ-funded Global Programme “Amplifying Voices of Women Affected by War-Related SGBV in the Western Balkans – For a Culture of Recognition and Reconciliation” (01.11.2020 – 31.01.2024).</td>
</tr>
<tr>
<td>Country</td>
<td>Kosovo</td>
</tr>
<tr>
<td>Partner organisation</td>
<td>Medica Gjakova</td>
</tr>
</tbody>
</table>

Project background, research objectives / scope / questions / methodology / timeline / outputs

These TOR provide information about the purpose and objectives of the research, background information about the context, preliminary research questions, methodological requirements and details about the scope of work as well as the projected timeline with deliverables.
Application procedure
Applications with the subject line ‘Long-Term Consequences Kosovo’ are received at evaluation@medicamondiale.org until 22 June 2021. Questions can be asked at bumrath@medicamondiale.org. To indicate your interest, please send your CV and a cover letter describing your motivation and the experience you bring to this research. In addition, please include your daily rate and a budget, as well as references and writing samples. A maximum of 30 pages of writing samples shall be included in the expression of interest; for longer writing samples please include links. The budget should not exceed 49,000 Euros and include travel costs for consultants. We ask you to also indicate where you found out about this call. Please make sure to send all documents in one PDF file. Only short listed/successful candidates will be contacted. The interviews will take place via Zoom between 12 and 16 July 2021.

Professional qualifications
The key selection criteria are
- solid knowledge of trauma discourse, including concepts, debates, state-of-research and clinical as well as psychosocial/multi-sectorial approaches – ideally with a focus on SGBV
- solid knowledge of and experience with quantitative as well as qualitative research methods, including relevant software (e.g. SPSS, MAXQDA)
- understanding of the Kosovar and broader regional context
- all team members: proficiency in English language (oral and written), at least some team members: proficiency in Albanian language (oral and written)
- excellent analytical skills
- excellent writing skills in English (ideally, also in Albanian)

In addition, suitable candidates are ideally experienced in the following areas:
- facilitating (research) processes that encourage participation of different stakeholders
- cultural and conflict sensitivity
- gender- and trauma-sensitivity
- feminist and intersectional perspectives in research

About Medica Gjakova
Medica Gjakova was founded as a new local Kosovarian NGO in July 2011. The management team and professional staff have been working together since August 1999 in Gjakova and surroundings under the umbrella of medica mondiale e.V. with roughly a thousand women. The organisation’s mission is to improve the mental and physical condition of women survivors of sexual violence and to advocate for social policies that support women’s welfare and their integration in all vital areas. For this purpose, a double strategy was developed that combines basic level activities with activities at the social and political level. Basic level activities include offering psychosocial, gynecological, and legal counseling as well as economic empowerment activities. At the social and political level, activities aim at the sensitization of society and government for the difficult situation of women attacked by the war and for the need of shaping policies on behalf of women’s welfare and their social integration.

Further information on Medica Gjakova can be found on the organisation’s webpage and Facebook-site: http://medicagjakova.org/, https://www.facebook.com/medica.gjakova/

2. Purpose and Objectives of the Study

This research project serves as an important participatory learning process for all stakeholders involved. Focusing on survivors of war-related SGBV in Kosovo and realized in close collaboration with our partner organisation Medica Gjakova, the questions to be studied at the same time are of general interest for the work of medica mondiale e.V. and our partner organisations in different regions of the world.
The purpose of this research is to deepen our understanding of

- long-term and transgenerational effects of war-related SGBV (physical and mental health, economic, social etc.),
- coping mechanisms and recovery trajectories of survivors as well as close family members,
- survivors’ experience of social recognition, in particular of the reparations process in Kosovo,
- impact of medica mondiale’s stress- and traumasensitive approach (STA®) and Medica Gjakova’s holistic support for survivors.

It is expected that based on the findings concrete recommendations for different stakeholders will be formulated. This way, the planned study contributes to further developing and shaping our work.

3. Background and Context of the Research

While SGBV in contexts of war and/or conflict is increasingly discussed in both academic and non-academic literature from the perspective of different disciplines and professions, empirical research on its consequences, in particular on long-term consequences, is still scarce. Something similar holds true for empirical evidence of the impact of mental health and psychosocial support (MHPSS) and of combined, multi-sectorial interventions in the context of international cooperation programmes. The planned study aims to address this twofold gap by centring the experience of survivors of war-related SGBV in Kosovo roughly twenty years after the war.

The study will be realized as one of the activities within the broader BMZ-funded Global Programme “Amplifying Voices of Women affected by War-Related SGBV in the Western Balkans – For a Culture of Recognition and Reconciliation” (2020–2024). This programme is implemented in cooperation with seven partner organisations from Kosovo, Bosnia and Herzegovina and Serbia. It aims for changes at macro, meso and micro level via integrating the perspectives and needs of women affected by war-related SGBV into national and regional Dealing with the Past initiatives. By generating knowledge and sharing this knowledge with relevant stakeholders (“Right to truth”), the study seeks to contribute to the overall goal of the Global Programme: to create a culture of recognition and reconciliation in Southeastern Europe, which enables women affected by war-related SGBV to live in dignity and without violence.

4. Core Partners and Preliminary Research Questions

The two core partners in this research are medica mondiale e.V. and Medica Gjakova. In order to develop a shared understanding, a concept note for this study was compiled in close cooperation. This concept note will also serve as a briefing paper for the selected researcher/team of researchers.

The study builds on a first joint research project into the long-term consequences of war-related SGBV that was realized between 2012 and 2014 by medica mondiale e.V. together with our partner organisation Medica Zenica in Bosnia and Herzegovina. For one, it draws on insights into trauma and processing of trauma in the context of war-rape and seeks to deepen our understanding of aspects that could not be studied in more detail back then. Second, experiences gained with realising a collaborative, stress- and traumasensitive feminist research project inform the overall design of the study as well as the choice of particular data collection instruments.

1 See the report „We are still alive. We have been harmed but we are brave and strong.” Research on the long-term consequences of war rape and coping strategies of survivors in Bosnia and Herzegovina (2014).
Jointly, medica mondiale e.V. and Medica Gjakova have identified the following research questions that shall guide the study:

1) What are the long-term consequences of war-related SGBV on survivors from a holistic perspective (physical and mental health, economical, juridical etc.)?
2) What coping strategies are used by survivors and what are their sources of resilience?
3) What are the effects of war-related SGBV on families and communities?
4) What are survivors’ experiences of social acknowledgment? In what ways do the reparations contribute to a sense of social recognition?
5) In what ways has Medica Gjakova in general, in what ways have the various services provided by the different sectors of Medica Gjakova contributed to survivors’ recovery/dealing with trauma? What conclusions can be drawn from this with respect to the impact/effectiveness of medica mondiale e.V.’s stress- and traumasensitive approach (STA®)?

It is understood that, in the course of the research process, these questions will require further elaboration.

5. Methodology

The study will follow a feminist, stress- and traumasensitive approach. In particular, this means designing the research in a way that any harm and negative stress for survivors of SGBV is avoided and participating in the study becomes an empowering experience. The design is based on a participatory approach and centres learning in all phases of the research process, e.g. by designing data collection instruments in a way that data collection by itself allows for learning experiences on the part of stakeholders involved. The concept note has already identified measures to ensure a feminist, stress- and traumasensitive, participatory and empowering research design. For example, it is agreed upon that data collection with survivors will be carried out by staff members of Medica Gjakova. It is understood that further concretization will be required throughout all stages of the research process.

The research project will make use of a mixed-methods design, thus combining the respective strengths of quantitative and qualitative methods. It is planned that data collection and analysis will take place in three phases, with the first two stages producing quantitative insights, the last one generating more in-depth qualitative knowledge. Phase 1 shall consist of secondary analysis of data regarding the overall condition of survivors available via client-management systems. During Phase 2, additional quantitative data with approximately 200 survivors shall be generated via well-established psychometric tests and a questionnaire that will be specifically designed for the purpose of this study. Finally, in Phase 3 qualitative interviews with a sample of approximately 20 survivors shall further deepen our understanding, in particular with respect to survivors’ recovery trajectories and the impact of medica mondiale’s and Medica Gjakova’s support. It is expected that both quantitative as qualitative data will be rigorously analysed, preferably by making use of SPSS and MAXQDA. In order to interpret the results and draft the report, data shall be triangulated and relevant literature by third parties considered.

The final methodology and the data collection instruments that will be used still have to be identified, modified and/or developed in close cooperation with medica mondiale e.V. and Medica Gjakova. This ensures stress- and traumasensitivity, cooperation and transparency. Furthermore, the dialogue is important to achieve “ownership” of the research by medica mondiale e.V. and partner staff and with this the acceptance and use of the research results. During the various stages of the research process, sharing workshops with relevant stakeholders shall be conducted to present and discuss preliminary findings as well as, at a later stage, to present and discuss initial recommendations.

All research for medica mondiale e.V. should follow the WHO (World Health Organisation) guidelines for ethical data collection “Putting women first: Ethical and safety recommendations for research on domestic violence against women” and “WHO Ethical and safety recommendations for researching, documenting and monitoring sexual violence in emergencies.”
It is understood that the current Covid-19-pandemic will require flexibility and adaptation, in particular when it comes to considering alternatives to on-the-ground data collection and face-to-face meetings/workshops.

6. Scope of Work and Deliverables

- Based on the concept note which medica mondiale e.V. will provide, the researcher/research team is expected to compile an inception report which further fleshes out the research project. In particular, this implies desk review of further relevant theoretical and empirical literature as well as suggestions for specific data collection instruments, methods of analysis and the work plan.
- The researcher/the research team is expected to identify, modify and/or develop the data collection instruments (including pretests), prepare staff members of Medica Gjakova for quantitative and qualitative data collection and provide technical support to Medica Gjakova during these phases.
- The researcher/the research team is expected to analyse and eventually triangulate the quantitative and qualitative data. It is expected to give presentations of preliminary findings and recommendations to medica mondiale e.V., Medica Gjakova and other relevant stakeholders during workshops at the end of the various data collection phases. These workshops are an essential component in the research process. Possible follow-up steps and actions can be discussed and a learning process takes place that is moderated by the researcher/research team. The discussions and results of these workshops should be included and identified as such in the research report, thus making explicit the participatory character of the research process.
- The researcher/research team is expected to compile a draft report in English within 4 months after completion of the final data collection phase, which has to be shared first with medica mondiale e.V.’s evaluation advisor. There will be one round of feedback, which the evaluation advisor coordinates internally, after which the draft report has to be revised and returned.
- A presentation of the findings and recommendations to medica mondiale e.V. and Medica Gjakova (on-site or remotely).
- The researcher/research team is expected to compile the final report based on the feedback on the draft report through medica mondiale e.V. and Medica Gjakova. Quality criteria for the report will be provided and discussed in advance.

7. Timeline

As described above, the study seeks to contribute to the overall goal of the Global Programme in which it takes place by generating knowledge and sharing this knowledge with relevant stakeholders. In order to allow for the results still to be used during the duration of the Global Programme, the following timeline is projected:

<table>
<thead>
<tr>
<th>Timeframe</th>
<th>Research phase</th>
<th>Description of phase</th>
<th>Maximum # days</th>
</tr>
</thead>
<tbody>
<tr>
<td>August /September 2021</td>
<td>Developing an understanding of and opinion on the research project</td>
<td>Analysis of relevant literature as well as documents provided by medica mondiale e.V. and Medica Gjakova; inception report; planning meetings with medica mondiale e.V. and Medica Gjakova</td>
<td>Please state in your proposal</td>
</tr>
<tr>
<td>October – December 2021</td>
<td>Secondary analysis and preparation for data collection</td>
<td>Analysis of data provided by client-management-systems; theory-of-</td>
<td>Please state in your proposal</td>
</tr>
<tr>
<td>Period</td>
<td>Task</td>
<td>Description</td>
<td>Please state in your proposal</td>
</tr>
<tr>
<td>---------------------</td>
<td>----------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td>January – March 2022</td>
<td>Quantitative data collection</td>
<td>Provide technical background support to Medica Gjakova, including capacity building and debriefing workshop</td>
<td>Please state in your proposal</td>
</tr>
<tr>
<td>April – May 2022</td>
<td>Analysis of quantitative data and preparation for qualitative data collection</td>
<td>Analysis of collected quantitative data; workshop for presentation and discussion of preliminary quantitative results with medica mondiale e.V. and Medica Gjakova; design, pretest and adapt qualitative data collection instruments, including capacity building for Medica Gjakova</td>
<td>Please state in your proposal</td>
</tr>
<tr>
<td>June – July 2022</td>
<td>Qualitative data collection</td>
<td>Provide technical background support to Medica Gjakova, including capacity building and debriefing workshop</td>
<td>Please state in your proposal</td>
</tr>
<tr>
<td>August – September 2022</td>
<td>Analysis of qualitative data</td>
<td>Analysis of qualitative data; workshop for presentation and discussion of preliminary qualitative results with medica mondiale e.V. and Medica Gjakova</td>
<td>Please state in your proposal</td>
</tr>
<tr>
<td>October – November 2022</td>
<td>Synthesis: Triangulation, analysis and report writing</td>
<td>Data triangulation and analysis; drafting of the report in English</td>
<td>Please state in your proposal</td>
</tr>
<tr>
<td>Until February 2023</td>
<td>Finalization</td>
<td>Incorporate feedback and prepare final</td>
<td>Please state in your proposal</td>
</tr>
</tbody>
</table>
Considering that data collection with survivors will be realized by Medica Gjakova, all phases of the research process can at least in principal take place remotely.

8. Management of the Research

As described above, the selected researcher/research team will be responsible for designing the data collection instruments, analysing the data and producing the final report. The Department of Evaluation and Quality of medica mondiale e.V. will lead and manage the research process, e.g. consultant selection, contracting, quality assurance, and the provision and coordination of internal feedback on the reports. The Department is an independent unit within medica mondiale e.V., distinguished from programme departments, to enhance impartiality and credibility of research results. Decisions in the course of the research process will be made in close dialogue with our partner organisation Medica Gjakova, in particular when it comes to all questions that directly affect survivors.

The independency of the team towards medica mondiale e.V. and Medica Gjakova has to be guaranteed. For us, this independency is a key requirement for research and the resulting findings and recommendations. Drawing on different competencies of each researcher is an important necessity for us to produce beneficial results and recommendations for Medica Gjakova, medica mondiale e.V. and other stakeholders.

9. Research Report - Requirements

The report shall be submitted as a word and PDF document. It shall be written in readily understandable English language. The report shall clearly describe the background and research questions as well as the research methodology, process, and results in order to offer comprehensive and understandable content. A transparent line of arguments shall be kept throughout analysis, assessment, and recommendations so that every recommendation can be comprehensibly attributed to the results that are based on data analysis. A document detailing quality criteria for reports will be provided by medica mondiale e.V. in advance.

Further information on medica mondiale and our projects can be found on our website: medicamondiale.org