

## TERMS OF REFERENCE FOR THE DEVELOPMENT OF A CAPACITY-BUILDING PROGRAMME ON GENDER-RESPONSIVE URBAN PLANNING FOR THE MUNICIPALITIES OF AL-HOCEIMA (MOROCCO) AND TRIPOLI (LEBANON)

Budget code: EEP001

Project: MELUP

Imputation item: 2.9.1, 2.9.7, 2.9.8

### Introduction

The Associació MedCités / MedCities is an association of cities, with its headquarters in Barcelona, dedicated to sustainable urban development in the Mediterranean. It comprises 81 municipalities and unions of municipalities from seventeen different states and runs projects in the fields of strategic urban planning, urban services, the environment and local economic and social development, as well as training activities, technical support and the capitalisation of best practices. The network was created in 1991, since which time it has carried out dozens of projects in Mediterranean cities.

MedCities coordinates the “Mediterranean Everyday Life Urban Planning (MELUP): Gender Perspective in Urban Development” project, funded by the Catalan Agency for Development Cooperation (ACCD). This initiative aims to strengthen the capacities of the municipalities of Al-Hoceima (Morocco) and Tripoli (Lebanon) to integrate a gender perspective into urban planning. The project runs from June 2025 to December 2026.

The first axis of action focuses on promoting inclusive urban planning through the active participation of women’s organisations and residents’ associations. A gender-sensitive diagnosis will be conducted in each pilot neighbourhood of Al-Hoceima and Tripoli to identify needs, barriers to accessing services, and situations of insecurity in public spaces. This process will involve local women’s associations and other community-based entities, ensuring an intersectional approach.

The **methodology** will include participatory workshops and other information gathering techniques with women of diverse ages and socio-economic backgrounds. Based on the findings, an action plan will be co-developed with local stakeholders and municipal teams to adapt public spaces through a gender lens. The plan will include a set of proposed interventions, from which one will be selected and implemented in each city with an approximate budget of 20.000 EUR.

At the end of the project, final seminars will be held in Al-Hoceima and Tripoli to present the results to regional and national public institutions, fostering dialogue on integrating gender perspectives in urban planning and other municipal policies. Additionally, inauguration events for the adapted spaces will be organised to raise local awareness and highlight the importance of gender-sensitive planning.

The second axis aims to build the capacities of the municipalities of Al-Hoceima, Tripoli, and other MedCities member cities. At the project's outset (September 2025), specialized **training** will be delivered to elected officials and municipal staff on gender-responsive urban planning. To enhance impact and promote peer exchange, other network cities will also participate in capacity-building activities, including two study visits:

- The first, to Barcelona (January 2026), will focus on good practices in inclusive urban planning and public space regulation.

- The second, in July 2026, will explore the concept of “caring cities” and promote South-South cooperation.

In parallel, two “givers” cities from the MedCities network will engage in a peer-review process to support Al-Hoceima and Tripoli in developing gender-responsive urban planning practices. Furthermore, based on the 2021 MedCities brief guide on participatory processes with a gender perspective, a **guide on Everyday Life Urban Planning for Mediterranean municipalities will be developed**.

Finally, an international online seminar on inclusive urban planning will be held to share the project’s outcomes with the wider MedCities network and promote knowledge exchange.

### 1. Objective

The objective of this service provision is to develop a capacity building programme on gender-responsive urban planning for the municipalities of Al-Hoceima (Morocco) and Tripoli (Lebanon)

### 2. Scope of the services

The scope and characteristics of the services are as follows:

#### **Activity A. Animation of 2 Training programmes (2 days each) on Everyday Life Urban Planning, September 2025**

Location: Al-Hoceima and Tripoli.

Date: Mid-September 2025

A two-day in person training will be conducted in Al-Hoceima and Tripoli to introduce the principles of Everyday Life Urban Planning from a gender perspective. The training targets municipal staff, elected officials, and representatives of local civil society, especially those working on gender equality, urban development, and community engagement. The goal is to strengthen their capacity to design and implement urban policies that reflect the daily needs, routines, and safety concerns of all city residents, particularly women and other often underrepresented groups. Through a mix of theoretical inputs, case studies, and participatory exercises, participants should explore how to make public spaces more inclusive, accessible, and responsive to the realities of everyday life. The training should provide participants with tools, methods and strategies to incorporate a gender and care perspective into urban diagnosis and planning.

Participants will also reflect on local challenges and identify opportunities to integrate these approaches into ongoing or future urban development initiatives. The training will be tailored to the specific context and needs of each city and will serve as a preparatory step for the participatory diagnoses and action planning processes to follow in the MELUP project. In this sense, by the end of the training, the service provider will **co-develop the participatory methodology** (see activity B for further details) with the municipal and the project’s local expert(s) team, all of whom will participate in the training.

The language of the training will be French for Al-Hoceima and English for Tripoli. The expected audience is between 10 and 15 beneficiaries, including municipal staff, elected officials, representatives of local civil society and the project’s local expert(s) team responsible for leading the diagnosis and action plan.

Prior to the in-person sessions, a 2-hour online kick-off meeting will be held with each municipality in July 2025. During this meeting, the service provider will lead an introductory session (approx. 1 hour), presenting:

- Introduction to gender-responsive urban planning key framework and concepts;
- Examples of good practices in gender-responsive urban planning across the Mediterranean;
- Set of criteria to support municipalities to define the intervention area;
- A draft agenda for the September mission.

In this sense, during the missions in September, the international expert will visit the chosen area of intervention in each city and support the municipality to define the space's study units, together with the local expert. Additionally, the service provider will present the aim and objectives of the intervention and showcase other good practices examples around the Mediterranean during the public presentation of the project in front of the relevant political institutions and the local ecosystem.

#### Deliverables:

- A.1. Presentation PPT to be used during the online kick-off meeting of July 2025.
- A.2 Training programme. To be submitted 10 days prior to the start of the training.
- A.3 PPT to be used during MELUP project's public presentation in September.
- A.4 Activity report. To be submitted 10 days after the training, including:
  - Key takeaways, results, and conclusions;
  - Annexes: attendance sheets, photos, training presentations (PPT);
  - Recommended section: list of relevant online tools and resources for participants.

All deliverables must be submitted in French for Al-Hoceima and in English for Tripoli.

The project will cover lunches and coffee breaks during the two-day training sessions. However, the travel, accommodation, and subsistence costs of the service provider will not be covered by the project.

#### **Activity B. Co-development of the participatory methodology and implementation follow-up**

The service provider will co-develop, in close collaboration with the municipal teams and local expert(s), a participatory methodology and related assessment tools for the development of the urban diagnosis and the subsequent action plans. The "[Handbook for everyday life urban planning : urban planning with a gender perspective](#)" (2019) may serve as a useful reference for this task.

The service provider will also be responsible for monitoring and validating the key deliverables produced by the local experts during the diagnosis and action plan phases, in coordination with the MedCities project officer.

#### **Key Elements to Consider in the Methodology Design:**

- Intersectional Perspective: The selection of participants should reflect an intersectional approach, considering gender, age, socio-economic status, functional diversity, and migration background, where relevant.
- Data Collection Methods: The methodology should clearly specify the tools to be used (e.g. focus groups, workshops, semi-structured interviews, surveys, etc.).

- The use of exploratory walks is particularly encouraged. These walks involve groups of residents and local organisations who jointly identify unsafe areas, access barriers to services and facilities, and daily life challenges for women in public spaces. This method is valuable for grounding the diagnosis in lived experiences.
- Action Plan Design: The action plan should propose priority actions to improve women's safety, mobility, and access to public spaces. When possible, it should promote the integration of nature into urban areas to enhance sustainability, quality of life, and climate resilience.
- The plan must also define impact indicators and measurement tools for each proposed action. One of the proposed actions will be selected for implementation as a pilot intervention, ideally through a participatory workshop with local stakeholders.
- Workshops and Budget: The project foresees two physical diagnosis workshops and one workshop for the action plan. However, the budget foreseen could be adapted to the decided participatory events / activities (not the amount though).
- Monitoring Participation and Feedback: All participatory activities involving beneficiaries—particularly women—must include evaluation forms to assess the perceived impact and satisfaction of participants.
- Logistical Considerations for Women's Participation: Methodological design must ensure women's full participation by addressing logistical barriers such as:
  - Distance to the activity venue and availability of public transportation;
  - Scheduling that considers caregiving responsibilities;
  - Provision of child-friendly spaces during workshops to support work-life balance.
- Communication and Outreach: Awareness-raising and mobilisation efforts must be adapted to reach a broad and diverse female audience. If developing communication materials, these should be in dialectal Arabic (Moroccan and Lebanese) and Amazigh, considering high levels of female illiteracy and limited digital access in some segments of the population.

The local expert will be responsible for preparing a stakeholder mapping of the identified intervention area, which will serve as a foundational input for the methodology development.

At the end of the service, the provider will organise a final online meeting with the municipal teams and local expert(s) to discuss lessons learned and share feedback on the co-development process.

#### Deliverables

- B.1. Participatory Methodology. Methodology for the development of the diagnosis and action plans, to be submitted 10 days after the training.
- B.2. First Review of Local Deliverables. Feedback on the first drafts of the diagnosis and action plan submitted by each local expert.
- B.3. Executive Activity Report. Report on the monitoring and implementation of the methodology for both the diagnosis and action plan. It should detail the support provided to the local experts and include lessons learned for each city. To be submitted at the end of the service.

All deliverables must be submitted in French for Al-Hoceima and English for Tripoli.

#### **Activity C. Development of a guide on Everyday Life Urban Planning for Mediterranean municipalities and online training**

##### **General Secretariat**

Àrea Metropolitana de Barcelona – Carrer 62, núm. 16-18 Edifici B, Zona Franca, 08040 Barcelona, SPAIN  
 Tel. (+34) 93 506 93 58 – Fax (+34) 93 223 48 49 – [contact@medcities.org](mailto:contact@medcities.org) – [www.medcities.org](http://www.medcities.org)

The service provider will be responsible for drafting a practical and action-oriented guide on Everyday Life Urban Planning from a Gender Perspective tailored to the specific context and challenges of Mediterranean municipalities.

The guide should serve as a technical and methodological resource for municipal staff and elected officials involved in urban planning, spatial development, and the design of public spaces and facilities. It must support the mainstreaming of gender and care perspectives into the planning cycle, from diagnosis and participatory processes to design and implementation.

This publication can build upon and expand MedCities' earlier work, particularly the 2021 Brief Guide to Design a Participatory Process from a Gender Perspective ([https://medcities.org/wp-content/uploads/2022/01/BriefGuide\\_ParticipationGender\\_final.pdf](https://medcities.org/wp-content/uploads/2022/01/BriefGuide_ParticipationGender_final.pdf)) and be inspired by other relevant tools such as the “Handbook for Everyday Life Urban Planning: Urban Planning with a Gender Perspective” developed by the Municipality of Barcelona in 2019 ([https://bcnroc.ajuntament.barcelona.cat/jspui/bitstream/11703/130065/1/Everyday\\_life\\_urban\\_planning2.pdf](https://bcnroc.ajuntament.barcelona.cat/jspui/bitstream/11703/130065/1/Everyday_life_urban_planning2.pdf)).

Content and Structure of the Guide. The guide should include, at minimum:

- Introduction and conceptual framework: Explanation of the “Everyday Life Urban Planning” approach and its relevance in the Mediterranean urban context, with a focus on gender equality, care, and inclusive cities.
- Key planning principles: Gender-sensitive planning criteria applicable across various urban scales (e.g. neighbourhood, street, facility design), including safety, accessibility, mobility, and care infrastructures.
- Participatory diagnosis tools: Methods and tools to conduct participatory assessments, including examples such as exploratory walks, focus groups, community mapping, and intersectional stakeholder analysis.
- Planning and implementation strategies: Steps and recommendations to translate participatory diagnosis into actionable, inclusive urban planning and interventions.
- Good practices: At least 4–6 case studies from Mediterranean municipalities that showcase innovative and effective applications of gender-sensitive planning, including from both Northern and Southern shores.
- Resources and tools: Annexes or appendices with checklists, indicators, toolkits, and further references for local authorities.

The tone of the guide should be accessible yet technically sound, targeting municipal professionals with various levels of prior experience in gender and urban planning.

The guide will be produced in English. The translation into French and design and layout will be handled by the project team. The service provider is only responsible for the content drafting and structuring, though it is encouraged to suggest visuals, tables, and graphics where relevant to support comprehension.

The guide will be presented online to MedCities members in a 1,5-2h webinar and/or during the study visit to Barcelona, foreseen in January 2026.

Expected submission date: December 2025

Deliverables:

- C.1. Final version of the Guide on Mediterranean Everyday Life Urban Planning – Gender Perspective in Urban Development, in English (Word format, including suggested visuals).
- C.2. PPT presentation of the guide.

At the end of the project lifetime, end of 2026, an online international seminar with other MedCities members will be organised to share the projects' results and exchange on gender-responsive urban planning practices. MedCities will kindly invite the service provider to take part in this event and share its experience, if interested.

Minimum Profile of the Service Provider / Expert

- Advanced academic qualifications in urban planning, architecture, gender studies, sociology, or a related field. A postgraduate specialization in gender and urban development will be considered a strong asset.
- Proven professional experience (minimum 5 years) in the design and implementation of urban development strategies and/or public space planning projects that integrate a gender-responsive or gender-sensitive approach.
- Demonstrated experience in designing and delivering training programmes and capacity-building activities for local authorities, technical staff, or civil society actors on topics related to inclusive urban planning, gender equality, and participatory processes.
- Excellent knowledge of intersectional and feminist approaches to urban planning, including familiarity with tools such as participatory diagnosis, exploratory walks, and care infrastructure mapping.
- Previous experience working in the Mediterranean region, particularly in North Africa and/or the Middle East, with a solid understanding of local urban and gender dynamics.
- Strong facilitation and intercultural communication skills, with the ability to adapt content and methods to diverse audiences and socio-political contexts.
- Working proficiency in English and French is required. Knowledge of Arabic is an asset but not mandatory.

*Please refer to Section 10 for the requested detailed offer of services required for the application.*

**3. Type of service, duration and place of execution**

These terms of reference and the winning proposal will define the conditions of the service as a contract of provision of services from the notification of the order until 31<sup>st</sup> of March 2026. The service will be carried out in the service provider premises, Al-Hoceima (Morocco) and Tripoli (Lebanon).

The service will be governed by the Catalan law, the Spanish law and the courts of Barcelona.

**4. Base budget of the service**

The maximum budget for this service is €14.876,03 (all taxes included). If the bidder has its tax domicile in Spain, the maximum amount will be €17.999,99 including the VAT rate valid on the date of the publication of these terms of reference which is 21%.

Any offer exceeding this amount will be rejected.

It is understood that the budget includes all of the costs that the successful bidder is required to pay for the normal fulfilment of the services contracted such as general expenses, financial costs,

insurance, transport and travel expenses, remuneration for the staff under its control and all verification and job costs.

#### **5. Price of the contract and economic conditions**

The administrative details of the Contracting Body are:

ASSOCIACIÓ MEDCITIES AND/OR MEDCITÉS  
C / 62. 16-18. EDIFICI B, ZONA FRANCA  
08040 BARCELONA – CATALONIA - SPAIN  
Tax number (VAT): ESG66401258

The contract price is the one established by the award of the tender, in line with the offer submitted.

3 invoices are required according to the following details:

- 50% of the total amount after submission and validation by the MedCities team of the deliverables included under activity A (Imputation item 2.9.7.)
- 25% of the total amount after submission and validation by the MedCities team of the deliverables included under activity B and end of the service (Imputation item 2.9.1.).
- 25% of the total amount after submission and validation by the MedCities team of the deliverables included under activity C and end of the service (Imputation item 2.9.8.).

Offer and invoices must contain at least the following information:

- Full tax name and full tax address of the supplier
- Tax identification number of the supplier
- Complete MedCities data
- Offer/Invoice number
- Offer/Invoice date
- Budget code and project name indicated in the header of this document
- Description of the service to be provided/provided
- Detail of the amount of the service and taxes (if any)

The payment term of the invoice will be: bank transfer around 30 days after the date of the invoice (bank account details are required) and always after internal favourable report issued by the General Secretariat of MedCities at the end of each phase.

The service provider will be directly responsible for paying the local or national taxes applied to the services except if the service provider is fiscally domiciled in Spain, whereupon the current tax law in respect of personal income tax (IRPF) will be applied.

Invoices must be sent either by post to the offices of the General Secretariat of MedCities or, if they are in digital format, to [contact@medcities.org](mailto:contact@medcities.org).

Bank charges arising from the payment of invoices will be shared (SHA according to bank coding).

MedCities may require information from the service provider regarding its compliance with obligations relating to social security contributions and the payment of taxes.

Those non-EU service providers will be required to present a certificate of tax residence within 7 calendar days of the award of the service. If the aforementioned document has not been provided to MedCities within 7 days, the contract may be terminated.

## **6. Participation requirements**

Those bidding for the service can be individuals or companies that have the full capacity to carry out the work, that are not subject to a ban on hiring staff and that can demonstrate their technical reliability and professional experience.

## **7. Confidentiality clause**

The information that the service provider will have access to in order to fulfil the purpose of this contract must be kept strictly confidential and must not be used for any activity not covered by this contract. In circumstances where a particular use of the information gives rise to doubts in respect of this confidentiality clause, the service provider must, in all cases, request the consent of MedCities.

## **8. Ownership and authorship of the work**

The ownership and authorship of any service provision work carried out belongs to MedCities. As owners of the study, any use or mention of it in publications, articles, interviews, conferences, etc. must have the express authorisation of MedCities.

## **9. Termination of the service**

By giving notice of one month, the service can be terminated by either party before the date indicated in Point 3 of these terms of reference for objective reasons or for the reason described in the last paragraph of point 5 of this terms of reference.

## **10. Submission of offers**

The offer must be sent to the following email address: [contact@medcities.org](mailto:contact@medcities.org)

- Proposal submission period: 10 working days from the date of these terms of reference.
- The subject line of the email should specify "Service offer for the development of a capacity-building programme on gender-responsive urban planning for the municipalities of Al-Hoceima (Morocco) and Tripoli (Lebanon)"

The offer must include the extent of the services offered and fulfil the conditions expressed in the previous sections. Notwithstanding that the candidate can attach to their offer any complementary information they consider to be of interest, the tender must include the following documentation:

- Detailed offer of the services, including:
  - 1-2 pages draft programme for the training programme – Activity A
  - 1-2 pages initial executive methodological proposal – Activity B
  - 1-2 pages index proposal for the guide – Activity C
- Economic proposal: candidates must submit an economic proposal in euros that either they or their representative must sign. The prices offered should include any type of tax,

charge or fiscal ruling of a European, state, autonomous community or local nature as indicated in Points 5 and 6 of these terms of reference.

- CV of the professional person or company involved and of the working team, giving relevant examples of similar work undertaken and, if applicable, international experience.

In the event that additional information is required to present the offer, we invite you to contact MedCities by writing to the email address [contact@medcities.org](mailto:contact@medcities.org). Only written questions about clarifications of the presentation of offers will be answered.

MedCities may request additional information related to the proposal if it deems it appropriate. If this is the case, the proposals that require clarification must be answered within a reasonable period established by the evaluation team.

## **11. Assessment criteria**

The most advantageous offer will need to be evaluated bearing in mind the cost-effectiveness ratio in accordance with the overall proposal. The assessment could take the price-quality ratio into account.

MedCities guarantees equal treatment of the people/companies bidding and will keep their offers confidential.

The person/company adjudicated as the successful bidder will be notified within a period of 5 working days from the final submission date for offers.

Barcelona, June 19, 2025

Josep Canals Molina  
MedCities Secretary General