

Terms of Reference

Baseline study

Our Rights, Our Lives, Our Future: Making positive sexual and reproductive health and education outcomes a reality for adolescents and young people in Sub-Saharan Africa

1. Background

In August 2017, the Swedish International Development Cooperation Agency (Sida) approved a UNESCO proposal on strengthening sexual and reproductive health and HIV prevention amongst children and young people through scaling up comprehensive sexuality education in sub-Saharan Africa. This project entitled *Our Rights, Our Lives, Our Future* (O³) aims at reaching 10.7 million learners, in 45 000 primary and secondary schools, 30 000 preservice teachers, and 186 000 in-service teachers. An additional 30 million people (parents, guardians, religious leaders, and young people out of school) will be reached through community engagement activities and 10 million young people through social and new media platforms.

The purpose of the project is to build on current efforts by UNESCO to improve sexual and reproductive health, and gender and education outcomes for adolescents and young people. UNESCO will scale up the current programme to sub-Saharan Africa by implementing programmes designed to:

1. Secure and sustain strong political commitment and support for adolescents' and young people's access to comprehensive sexuality education and sexual and reproductive health services across sub-Saharan Africa.
2. Support the delivery of accurate, rights-based and good quality comprehensive sexuality education programmes that provide knowledge, values, and skills essential for safer behaviours, reduced adolescent pregnancy, and gender equality.
3. Ensure that schools and community environments are safer, healthier, and inclusive for all young people.
4. Strengthen the evidence base on comprehensive sexuality education and safer school environments.

The project, which will be implemented from January 2018 to December 2020 will offer intensive support to 13 *focus* countries (Cameroon, Côte d'Ivoire, Democratic Republic of the Congo, Ethiopia, Kenya, Malawi, Mozambique, Nigeria, South Africa, United Republic of Tanzania, Uganda, Zambia, Zimbabwe). Eighteen *networking* countries will receive seed funding and will benefit from common regional level activities (Angola, Benin, Botswana, Burundi, Chad, Congo, Gabon, Ghana, Lesotho, Madagascar, Mali, Namibia, Niger, Rwanda, Senegal, South Sudan, Swaziland, Togo).

2. Purpose of the study

UNESCO is seeking the technical services of a contractor to conduct a baseline study to inform the result framework at the beginning of the project. The overall purpose of the study is to provide baseline data for the quantitative of the result framework. The baseline study will also provide an assessment of country readiness to provide data for the result framework.

3. Scope of the Evaluation

The result framework of the O³ Programme includes both quantitative and qualitative indicators (see Annex A). The baseline study will **only focus on quantitative indicators**.

The study is to collect data for all 31 countries through desktop review. The assessment of country readiness to provide data for the result framework will also focus on quantitative indicators for all 31 countries.

4. Method

Quantitative data and country readiness

Most of the quantitative data that is needed to complete the result framework is produced through measurement of internationally agreed, standardized indicators on sexual and reproductive health and rights. The consultant will collect quantitative data and assess country readiness to provide data through consulting major databases (e.g. AIDSinfo, STATcompiler, UNICEF Data, UNFPA Open Data), as well as Education Management Information Systems (EMIS), country reports, and UNESCO Offices.

Procedure

It is expected that the consultant or firm will:

- Expand and further define the method of the study in consultation with UNESCO as part of the inception phase
- Consult the various partners that deliver the Project in the context of working with Government Ministries, CSOs and organisations for young people in East and Southern Africa
- Whenever relevant, disaggregate data by school level (primary, secondary), sex (male, female), and age (children, adolescent, young people)
- Whenever possible and relevant, work with researchers which are resident in the focus countries in order to conduct the interviews with key informants
- Have the ability to work in English, French and Portuguese as the study covers countries with all three languages
- Process, analyse and present the data in a user-friendly format
- Produce a report that will be widely shared with partners and stakeholders as an important tool for mapping and guiding the implementation of the project.

5. Expected Deliverables

This section describes in detail the expected deliverables and the timeline for delivery:

- Two weeks (10 working days) after signing of the contract, the evaluator will submit an inception report. This report will outline in detail the key scope of the work; a work plan/schedule of tasks designating a team member with the lead responsibility for each task and deliverable (output); sources of data; ; and a data reporting plan.
- A draft report will be presented to UNESCO by the research team during a stakeholder workshop at a date to be agreed. The evaluation team will facilitate the workshop, which will be aimed at discussing preliminary findings and conclusions of the study.
- A final baseline report is due on 30 March 2018, which should present the findings, recommendations and lessons learnt, particularly in terms of country readiness to monitor the result framework. The report should follow, but not limited to the following structure;

- ✓ Executive Summary (usually not more than 3–4 pages)
- ✓ Programme description
- ✓ Purpose and objectives
- ✓ Method
- ✓ Findings
- ✓ Conclusions
- ✓ Recommendations
- ✓ Annexes (including the list of stakeholders consulted during the evaluation, key documents and websites consulted, terms of reference of baseline study, aggregate findings, etc.)

6. Duration of the study

It is expected that the evaluation will start in January 2018 for an estimated duration of 2.5 months. This will include desk reviews, data compilation and report writing.

7. Expression of Interest

Interested consultants may submit a cover letter and CV together with a brief proposal not exceeding 5 pages on the methodology and approach for the assignment to the following email: vacancies.harare@unesco.org

Please copy Ruth Musindo on sr.musindo@unesco.org

Closing date for applications **30 January 2018**

Annex A: Results Framework

	Intervention Logic	INDICATOR	Baseline 2016		Target 2020		Sources				
			Male (N)	Female (N)	Male (N)	Female (N)					
Project Vision	Adolescents and young people in SSA are empowered, educated, healthy and resilient and have the capacity to reach their full potential and contribute to the development of their community, country and region	1) Number of new HIV infections among adolescents and young people aged 15-24 years	SSA	121 900	250 900	38 599	79 446	UNAIDS Spectrum			
			ESA	110 900	228 600	35 116	72 384				
			WCA	11 000	22 300	3 483	10 544				
		2) Number of births to women ages 15-19 per 1,000 women ages 15-19 (Adolescent birth rate)	Female (N)		Female (N)				Country DHS; UNICEF State of the World's Children report		
			SSA	122	TBD						
			ESA	114	TBD						
			WCA	130	TBD						
		3) Percentage of women aged 15-24 who believe that wife beating is justified for at least one of the 5 specified reasons	Male (%)		Female (%)		Female (%)		Country DHS; UNICEF State of the World's Children report		
			SSA	40	51	11	15				
			ESA	42	52	12	15				
		4) Proportion of women aged 20-24 years who were married or in a union before ages 15 and 18	Married by 15 (%)		Married by 18 (%)		Married by 15 (%)		Country DHS; UNICEF State of the World's Children report		
			SSA	12	39	5	37				
			ESA	10	36	4	34				
			WCA	14	42	5	40				
		Project Goal	Adolescents and young people realise positive sexual and reproductive health outcomes through sustained reduction in new HIV infections, early and unintended pregnancy, gender based violence and child marriage	1) Percentage of never-married women and men aged 15-24 who had sexual intercourse in the past 12 months and used a condom at the last sexual intercourse	Male (%)		Female (%)		Female (%)		Country DHS; UNICEF State of the World's Children report
					SSA	46	33	13	7		
ESA	45				31	13	6				
WCA	46				33	13	7				
2) Percentage of young people, aged 15 – 24 years, who have had sexual intercourse before the age of 15 years	Male (%)			Female (%)		Female (%)		Country DHS			
	SSA			13	13	TBD	TBD				
	ESA			11	15	TBD	TBD				
3) Percentage of young people aged 15-24 years who demonstrate desired level of knowledge and reject major misconceptions about HIV and AIDS	Male (%)			Female (%)		Female (%)		Country DHS; UNICEF State of the World's Children report			
	SSA			36	28	10	6				
	ESA			41	35	11	8				
	WCA			31	22	8	5				

SPECIFIC OBJECTIVE		Baseline 2016	Target 2020	Target 2018	Target 2019	Target 2020	Sources	
Specific objective 1	To secure and sustain strong political commitment and support for adolescents and young people's access to CSE and SRH services across SSA	1.1. Percentage of project countries incorporating sexuality education in their policies, strategies and laws (<i>National Commitments and Policy Instruments-NCPI</i>)	Percent (%)					EMIS Annual School Census; Country project reports
		SSA	57% (17)	100% (30)	100%	100%	100%	
		ESA	100% (17)	100% (17)				
		WCA	0%	100% (13)	100%	100%	100%	
		1.2. Percentage of primary and secondary schools that provided an orientation process for parents or guardians of students regarding life skills-based HIV and sexuality education programmes in schools in the previous academic year	Percent (%)					EMIS Annual School Census; Country project reports
		SSA	7% (27 984)	18% (73 429)	10%	14%	18%	
		ESA	20% (27 984)	43% (59 306)	28%	36%	43%	
		WCA	0	5% (14 123)	1%	3%	5%	
		1.3. Opinions on and support for young people's need for CSE and SRH services in the SSA region from opinion leaders (political, religious and traditional leaders) ¹	SSA	Qualitative indicator				
Specific objective 2	To deliver accurate, rights-based and good quality CSE programmes that provide knowledge, attitudes and skills essential for safer behaviours, reduced adolescent pregnancy, and gender equality	2.1. Percentage of primary and secondary schools that provided life skills-based HIV and sexuality education in the previous academic year ²	Percent (%)					EMIS Annual School Census; Country project reports
		SSA	10% (41,338)	22% (86 783)	14%	18%	22%	
		ESA	30% (41,338)	53% (72 660)	37%	45%	53%	
		WCA	0	5% (14 123)	1%	3%	5%	
		2.2. Percentage of learners reached by life skills-based HIV and sexuality education within the previous academic year ³	Percent (%)					EMIS Annual School Census; Country project reports
		SSA	11% (13 724 227)	19% (24 424 843)	13%	16%	19%	
		ESA	22% (13 724 227)	33% (21 228 765)	25%	29%	33%	
		WCA	0	5% (3 196 078)	1%	3%	5%	
		2.2. Interviews on experience of teachers with CSE training and experience with teaching of CSE to learners ⁴	SSA	Qualitative indicator				
2.3. Views of learners on their understanding of CSE, satisfaction with CSE programmes received and relevance of CSE in their lives ⁵	SSA	Qualitative indicator					Baseline and endline evaluation reports	
Specific objective 3	To support delivery of safer, healthier and inclusive schools and community environments for all young people	3.1. Number of community members reached with efforts to keep girls in school ⁶	Number					Country project reports
		SSA	No baseline	30 000	9,000	20,000	30,000	
		ESA	No baseline	20 000	6,000	13,000	20,000	
		WCA	No baseline	10 000	3 000	7 000	10 000	
		3.2. Percentage of educational institutions that have rules and guidelines for staff and students related to physical safety, stigma and discrimination and sexual harassment and abuse that have been communicated to relevant stakeholders ⁷	Percent (%)					EMIS Annual School Census; Country project reports
		SSA	No baseline	12% (45 000)	4%	8%	12%	
		ESA	No baseline	27% (31 000)	9%	18%	27%	
WCA	No baseline	5% (14 000)	1%	3%	5%			

¹ Indicator will provide qualitative data measuring negative/positive opinions towards CSE and increased/decreased support for CSE from opinion leaders at baseline (2017) and endline (2020). Qualitative data from PTAs will also be collected under this indicator to show shifts in opinions and subsequent support among PTAs

² In line with the *International Technical Guidance on Sexuality Education (UNESCO et al., 2009)*, this indicator captures a set of 'essential' and 'desirable' components of a life skills-based HIV and sexuality education programme that is provided within the formal curriculum (as a standalone examinable subject, or integrated into other curriculum subjects) and/or as part of extra-curricular activities, by ensuring that the data disaggregation allows for reporting on curricular and extra-curricular activities.

³ Data to be disaggregated by school level (primary/secondary) and sex (male/female)

⁴ Teachers will be interviewed to collect qualitative data to find out if they now feel better equipped to deliver CSE (non-biased or judgemental) and if they are teaching CSE after being trained

⁵ Learners will be interviewed to collect qualitative data to find out if they are satisfied with the mode of delivery. Data to be collected by school level (primary/secondary) and sex (male/female)

⁶ Pre and post questionnaires will be administered to gauge the knowledge levels of attitudes change (at output and outcome levels). Data to be disaggregated by sex (male/female)

⁷ This includes primary schools, secondary schools, teacher training colleges and universities

SPECIFIC OBJECTIVE			Baseline 2016	Target 2020	Target 2018	Target 2019	Target 2020	Sources	
		3.3.Attitudes of parents and teacher associations toward SRGBV, EUP and FGM ⁸	SSA	Qualitative indicator				Baseline and endline evaluation reports	
Specific objective 4	To strengthen evidence base on CSE and safer school environments	4.1.Number of policy and advocacy information products developed from commissioned research		Number					Research reports; Country project reports
			SSA	4	11	6	9	11	
			ESA	4	8	5	7	8	
			WCA	0	3	1	2	3	
		4.2.Number of project countries integrating at least one (1) HIV and one (1) CSE indicators into EMIS systems		Number					Country project reports, EMIS reports
			SSA	8	20	11	16	20	
			ESA	8	15	10	13	15	
		WCA	0	5	1	3	5		

⁸ Indicator will provide qualitative data measuring attitudes towards SRGBV, EUP and FGM and efforts towards addressing SRGBV, EUP and FGM from PTAs at baseline (2017) and endline (2020)

OUTPUTS PER SPECIFIC OBJECTIVE

Objective 1: To secure and sustain strong political commitment and support for adolescents and young people's access to CSE and SRH services across SSA			Baseline 2016	Target 2020	Target 2018	Target 2019	Target 2020	Sources	
Output 1.1	ESA countries supported to deliver quality and effective programmes that accelerate progress towards attainment of ESA commitment 2020 targets	1.1.1.Number of ESA countries engaged to secure support for the ESA commitment	ESA	10	21	21	21	21	ESA Commitment progress report; Country project reports
		1.1.2.Number of ESA Commitment countries with a functional Technical Working Group to coordinate the ESA commitment	ESA	15 ⁹	21	21	21	21	ESA Commitment progress report; Country project reports
Output 1.2	WCA countries commit to implementing CSE and providing SRH services within the framework of the WCA Call to Action	1.2.1.Number of WCA countries that have developed action plans to operationalises the WCA Call to Action	WCA	0	13				Country project reports
		1.2.2.Number of countries committing to implementing CSE and delivering SRH services for adolescents and young people	WCA	0	13	13	13	13	Country project reports
Output 1.3	Young people mobilized through CSE Campaigns	1.3.1.Number of young people in and out of school reached with CSE through multiple media platforms ¹⁰	SSA	7 000 000	22 000 000	11 000 000	17 000 000	22 000 000	Country project reports; Young people today website and social media analytics report
			ESA	7 000 000	17 000 000	10 000	14 000	17 000 000	
			WCA	0	5 000 000	1 000 000	3 000 000	5 000 000	
Output 1.4	Parents, guardians, traditional and religious leaders show better understanding and support for CSE among adolescents and young people	1.4.1. Number of PTAs oriented on skills-based HIV and sexuality education programmes that are offered in schools	SSA	3,018	15 000	6 000	10 000	15 000	Country project reports
			ESA	3,018	10 000	5 000	7 000	10 000	
			WCA	0	5 000	1 000	3 000	5 000	
		1.4.2.Number of community members (traditional, religious leaders and parents/ guardians) sensitised on CSE/life-skills education	SSA	0	30 000	9 000	20 000	30 000	Country project reports
			ESA	0	17 000	5 000	11 000	17 000	
			WCA	0	13 000	4 000	9 000	13 000	
Objective 2: To deliver accurate, rights-based and good quality CSE programmes that provide knowledge, attitudes and skills essential for safer behaviours, reduced adolescent pregnancy, and gender equality			Baseline 2016	Target 2020	Target 2018	Target 2019	Target 2020	Sources	
Output 2.1	Enhance the capacity of curriculum developers to review and develop CSE curricula that is evidence-informed, gender transformative, and age- and culturally- appropriate in line with the ITGSE	2.1.1.Number of CSE curriculum developers reached with training on designing effective curricula for reducing risk behaviour amongst young people	SSA	228	348	267	307	348	Country project reports
			ESA	228	268	241	254	268	
			WCA	0	80	26	53	80	
	2.1.2.Number of approved and adopted revised curricula for primary, secondary and teacher training	SSA	8	14	10	12	14	Country project reports; Curricula for primary, secondary schools	
		ESA	8	10	9	10	10		
		WCA	0	4	1	2	4		
Output 2.2	Support building capacity of teacher educators, pre-service teachers and in-service teachers to deliver	2.2.1.Number of pre-service teachers trained in CSE in focus countries	SSA	68 042	146 000	93 000	118 000	146 000	Country project reports
			ESA	68 042	136 000	90 000	112 000	136 000	

⁹ Madagascar, South Africa, and South Sudan yet to form a functional Technical Working Group to coordinate the ESA commitment

¹⁰ Where possible, disaggregated by sex and age

	comprehensive sexuality education that responds to the specific needs of adolescents and young people	2.2.2.Number of "in-service teachers" trained in CSE in focus countries	WCA	0	10 000	3 000	6 000	10 000			
			Number								
			SSA	89 092	275 926	152 000	214 000	275 926	Country project reports		
			ESA	89 092	209 926	130 000	170 000	209 926			
			WCA	0	66 000	22 000	44 000	66 000			
			2.2.3.Number of teacher educators trained in CSE in focus countries	Number							
		SSA		930	2 060	1 306	1 682	2 060	Country project reports		
		ESA		930	1860	1 240	1 550	1 860			
		WCA	0	200	66	132	200				
		2.2.4.Number of training colleges/ universities that have institutionalized CSE	Number								
			SSA	21	53	31	37	53	Country project reports		
			ESA	21	34	25	29	34			
WCA	0	19	6	18	19						
Output 2.3	Adolescents and young people (boys and girls) benefit from quality comprehensive sexuality education programmes	2.3.1.Number of adolescents and young people (boys and girls) reached with comprehensive sexuality education programmes (Disaggregated by sex)	Number						Country project reports		
			SSA	13 724 227	24 424 843	17 265 000	20 830 000	24 424 843			
			ESA	13 724 227	21 228 765	16 200 000	18 700 000	21 228 765			
			WCA	0	3 196 078	1 065 000	2 130 000	3 196 078			
Output 2.4	High quality CSE teaching and learning materials and resources developed and disseminated, including ICT-based resources	2.4.1.Number of newly developed CSE Teaching and learning materials developed and disseminated	Number						Country project reports		
			SSA	13	28	17	22	28			
			ESA	13	23	16	19	23			
			WCA	0	5	1	3	5			
Objective 3: To support delivery of safer, healthier and inclusive schools and community environments for all young people			Baseline 2016	Target 2020	Target 2018	Target 2019	Target 2020	Sources			
Output 3.1	Support the development and implementation of policies to protect children from school related gender based violence	3.1.1.Number of focus countries supported in the development and implementation of education sector policies which address School Related Gender Based Violence and Child Marriage	Number						National education sector policy; Country project reports		
			SSA	0	10	3	6	10			
			ESA	0	6	2	4	6			
			WCA	0	4	1	2	4			
Output 3.2	Support the creation of safe and inclusive school environments that are free from bullying, discrimination and gender-based violence	3.2.1.Percentage of primary and secondary schools that have rules and guidelines for staff and students related to physical safety, stigma and discrimination and sexual harassment and abuse ¹¹	Percent (%)						EMIS Annual School Census; Country project reports		
			SSA	No baseline	12% (45 000)	4%	8%	12%			
			ESA	No baseline	27% (31 000)	9%	18%	27%			
			WCA	No baseline	5% (14 000)	1%	3%	5%			
Output 3.3	Improve adolescent girls' retention in formal schooling through enhanced support towards prevention and management of learner pregnancy	3.3.1.Number of focus countries supported in the development and implementation of a policy on learner pregnancy and readmission	Number						Policy on learner pregnancy and readmission; Country project reports		
			SSA	4	8	6	8	8			
			ESA	4	6	5	6	6			
			WCA	0	2	1	2	2			
Output 3.4	Mobilise communities to be supportive of efforts to keep girls in school ¹²	3.4.1.Number of community members reached with efforts to keep girls in school	Number						Country project reports		
			SSA	0	30 000	9 000	19 000	30 000			
			ESA	0	20 000	6 000	13 000	20 000			
			WCA	0	10 000	3 000	6 000	10 000			
Objective 4: To strengthened evidence base on CSE and safer school environments			Baseline 2016	Target 2020	Target	Target	Target	Sources			

¹¹ This indicator, from the global M&E guidance provides a measure of the development, adoption and dissemination of legal frameworks (rules) and guidelines by schools and other educational institutions to reduce sexual harassment, stigma and discrimination, especially towards those students who live with HIV and those at higher risk of exposure to HIV.

¹² This output includes efforts to address Early and Unintended Pregnancy (EUP) and Early Child Marriage (ECM)

			2018	2019	2020				
Output 4.1	Support the integration of CSE indicators into EMIS	4.1.1. Number of project countries integrating at least one (1) HIV and one (1) CSE indicators into EMIS systems	Number				Country project reports, EMIS reports		
			SSA	8	20	11		16	20
			ESA	8	15	10		13	15
			WCA	0	5	1		3	5
Output 4.2	Commission research to increase the knowledge base around CSE delivery in SSA	4.2.1. Number of research pieces commissioned in the project countries ¹³	Number				Research reports; Country project reports		
			SSA	7	20	10		15	20
			ESA	7	15	9		12	15
			WCA	0	5	1		3	5
Output 4.3	Support linking of evidence to policy while promoting cross national learning	4.3.1. Number of policy and advocacy information products developed from commissioned research	Number				Research reports; Country project reports		
			SSA	4	11	6		9	11
			ESA	4	8	5		7	8
			WCA	0	3	1		2	3
Output 4.4	Increase visibility of work on CSE and SRH in the SSA region	4.4.1. Number of project countries in the SSA region that have an active webpage on the YPT website	Number				YPT website; Country project reports		
			SSA	21	30	0		30	30
			ESA	21	21				
			WCA	0	9	0		9	9

Notes on the Results Framework

- Quality control of every delivery output is ensured through the use of standardised tools and guides, such as the International Technical Guidance on Sexuality Education, International Guidance on SRGBV, and International Guidance on EUP, national CSE frameworks, agreed curricular, etc
- This quality then cascades to intervention level, whether such interventions are implemented by partners of by UNESCO
- Pre and post questionnaires will be used at intervention point to measure immediate change in knowledge, attitudes and intent to change behaviour
- Random data verification will be done by the Regional M&E Officer to validate data collected from countries
- Qualitative data collection tools will be used to document changes as the result of the project, such as Most Significant Change (MSC), digital stories, testimonies, etc
- All trainings and community interventions will have minimum standards, which will include, maximum size of group, minimum hours and content
- Every training will include values clarification exercises, aimed at changing negative gender norms and promoting gender equality
- Sustained change in knowledge, attitudes, behaviour, norms, political will, and other outcomes will be measured at outcome level using both quantitative and qualitative indicators
- Views and feedback from beneficiaries regarding the quality of interventions or programmes will be measured, where possible at delivery point, such as workshop evaluations, pre-post questionnaires, etc

¹³ This will include a) conducting a baseline and endline study on early and unintended pregnancy in all focus countries b) conduct a studies on linkages between CSE delivery and SRH uptake among adolescents and young people and c) conduct a qualitative study to understand learner perception on CSE lesson plans