

Terms of Reference for Conducting an assessment, Stakeholder Mapping, and documentation of best practices in Berea, Leribe, Mafeteng and Quthing Districts.

Sub-themes for the assignment

- Measure the knowledge and attitudes assessment for OUT OF SCHOOL youth to determine behaviours and barriers to COVID-19 vaccine access and other health services and use the data to replan
- Conduct stakeholders mapping exercise for existing community structures for intergration into the COVID-19 education campaigns (CBOs, Community leaders, youth groups, youth networks etc.)
- Building from results of the mapping exercise, develop and implement actions aimed at strengthening community structures such as youth action clubs, football clubs, community-based protection committees, faith based, sex worker networks, at the community level including district, local councils, and chiefs, youth influencers through targeted training on COVID-19 vaccine
- Capturing and documentation of best practices from the ASRHR-HIV and COVAX program

Program background:

Skillshare Lesotho in partnership with UNICEF has been implementing a UN/GOVT program; ***“Strengthening integrated sexual and reproductive health and rights (SRHR)/HIV and Sexual and Gender Based Violence Services in East and Southern Africa to accelerate action on SDG 3 and 5.”***

- *CPD Outcome:* 80% of adolescent girls aged 10-24 have the knowledge and practice the behaviours that reduce their risk of HIV infection.
- *Performance indicator:* % of adolescent girls aged 10-24 years who received an HIV test and know their results

Project title: Exploring social accountability as the means to increased uptake of health services among adolescents in Lesotho.”

Additionally, Skillshare Lesotho and UNICEF have undertaken an amendment program for the July-December 2022 implementation program, covering 4 districts of Berea, Leribe, Mafeteng and Quthing. The COVAX program is aimed at making a special linkage with out of school adolescents and young mothers and ensure linkages with health centres, schools and communities around COVID-19, immunization, SRHR/HIV and Child Protection. The amendment will also focus on social accountability whereby the CSO will collect feedback from 15,000 in 4 districts and distribute life-saving messaging and services in response to information collected through the feedback mechanisms. The amendment also covers an increase in the number of districts from 2 to 4

Program strategies:

The partnership provides Skillshare administering the community scorecard and the community feedback tool. All the tools aim at collection data on community services access and uptake. Collected information to feed into the MoH HMIS system providing information on ASRHR-HIV and COVID-19 vaccination and other vaccines. Skillshare will provide AYP's as peer educators COVID-19 prevention, SHRH/HIV, GBV and Child Protection. The intervention will be complemented by U-Report engagement for service access bottleneck identification and response and community level mobilization to reduce SGBV. To ensure the safety of beneficiaries and youth advocates, activities will ensure physical distancing and provision of PPE.

The project will increase the beneficiaries’:

- i. Increase Covid-19 vaccination for 15,000 out of school youth (both boys and girls)
- ii. Increase HPV vaccination for adolescent girls that are out of schools
- iii. Knowledge about sexual and reproductive health and sexually transmitted infections (STIs).
- iv. Understanding of HIV/AIDS prevention, transmission and treatment, prevention of mother-to-child transmission (PMTCT).
- v. Understanding around social accountability
- vi. Participation in health centre committee

A special focus will be given to COVID-19, through risk communication and community engagement. This includes:

- i. Provide especially developed materials and training on COVID-19
- ii. Community mobilization on COVID-19 & SGBV
- iii. Remote psychosocial and health education support to prevent GBV

Sustainability & Gender; The program largely targets adolescent girls and young women given the fact that they are the most affected by HIV and target group for HPV vaccination. It also targets young men/boys for increased covid-19 vaccination. The program intends to contribute to the empowerment AYP's particularly of adolescent girls and young women who are most vulnerable to HIV and struggle to get access to SRH/HIV services.

Additionally, the community feedback mechanisms and U-Report will monitor the quality of messaging provided to adolescents. The selection of the youth that will consider gender parity to adequately capture gender issues. The project will increase the capacity of other stakeholders, and the Ministry of Health to collect feedback from AYP's. The program relies heavily on using existing cadres within the health system and within communities to ensure sustainability.

The collaboration contributes to the Lesotho National Strategic Plan and the UNICEF Lesotho Country Programme Document which prioritizes improved health outcomes and reduction of vulnerability for all, especially adolescents and young people. The proposed interventions will also have programmatic convergence with the work of the national RCCE TWG to ensure synergies and adaptation of national messages for the target

Adolescents and young people/youth Involvement

The program has undertaken capacity building initiative for of adolescents, youth representatives and duty bearers on Social Accountability, practices, and tools to create an environment for engagement between young people representatives and health facilities. The program aims at improving SRHR-HIV and COVID-19 services access and uptake for adolescents and young people within their communities. In this case the program emphasizes SRHR services that meet the need of the adolescents', young people, and youth.

In addition to capacity building for primary actors and duty bearers in Berea, Leribe, Quthing and Mafeteng, the following achievements have been registered too.

- i. Developing, rolling out, collecting and analysing community scorecard data, learning and deploying the community feedback tool to guide community sensitization and community feedback mechanism (CFM), providing platform for duty bearers and primary actors engagement, and monitoring of SRHR- HIV services by adolescents' and young people.
- ii. Digitalization of the data collection process; CSC and CFM
- iii. Training of health facility staff on SA and the CSC tool for facility administration
- iv. Through trained peer educators conducted community mobilization and sensitization on the existing SRHR-HIV & COVID-19 services
- v. Conducted data analysis from the community scorecard and shared results through summaries and infographic to different stakeholders during district meetings
- vi. Built a community force of community leaders, opinion leaders, village healthcare workers- to supplement the efforts of peer educators in sensitization and mobilization of the community on SRHR -HIV for adolescents and young people and youth

With all the achievements above, the program drive towards strengthening for sustainability remains a priority for Skillshare and UNICEF. The process of building for the sustainability of community empowerment, results of the social Accountability as an approach and utilizing positively the results to benefit the intended beneficiaries. Skillshare Lesotho will undertake the process of quantifying program gains to gauge the program contribution to the desired change of SRHR-HIV and COVID-19 services uptake and identify relevant structures to support and build on the gains of the program in their wider national development.

Additionally, an assessment to establish the barriers, challenges and knowledge on ASRHR-HIV, and COVID-19 services and their uptake will be conducted and proper documentation of the gains, best practices, and stories of change to inform future programs.

Therefore Skillshare Lesotho is looking into hiring a consultant firm/individual Consultants to undertake the following

- I. Measure the knowledge and attitudes assessment for OUT OF SCHOOL youth to determine behaviours and barriers to COVID-19 vaccine access and other health services and use the data to replan***
 - To assess the level of knowledge on SRHR-HIV services among adolescent and young people at the community level
 - Assess changes in perception at the community level on the health facility based ASRHR-HIV services by adolescents and young people
 - To assess the program contribution to change in terms of perceptions, attitudes, and contribution of services uptake through data triangulation
- II. Conduct stakeholders mapping exercise for existing community structures for intergration into the COVID-19 education campaigns (CBOs, Community leaders, youth groups, youth networks etc.)***
 - To take stock of the existing youth groups, formal and informal or youth-led grassroots structureless/ informal initiatives in Leribe, Quthing, Mafeteng and Berea district for strengthening the AYP access and uptake of ASRHR-HIV and COVID-19 services including vaccination.
 - To document the topology, in different areas, overview of the presence of youth-led grassroots organizations, networks and groups; their main sector of intervention, funding/budget size, issues and campaign areas, geographic representation, organizational structure and youth development support provided to young people.
 - To examine the leadership, the power dynamic, the management culture, and partnership in the youth-led grassroots networks.
 - To identify gaps, barriers in these platforms (gender composition, organizational structures leadership and motives);
 - Develop a training guide for AYP/youth groups, youth networks and youth led organization for sustainability of Social Accountability, COVID-19 vaccination and other health services access and uptake
- III. Building from results of the mapping exercise, develop and implement actions aimed at strengthening community structures such as youth action clubs, football clubs, community-based protection committees, faith based, sex worker networks, at the community level including district, local councils, and chiefs, youth influencers through targeted training on COVID-19 vaccine***
- IV. Capturing and documentation of best practices from the ASRHR-HIV and COVAX program***
 - Capture and document best practice among the health facilities exhibiting best social accountability practices that promote involvement and participation- youth friendly services delivery model
 - Document improved health facilities and services within the respective health facilities, provide of evidence of change relating improved services uptake (STIs, ANC, abortion services, etc)
 - identify and document the unintended project outcomes among the participating young people, health services providers and health facilities for learning

Methodology

The consultant (s) expected to develop a methodology document, which will include but not limited to:

- Desk/ literature Review
- Individual interviews and focus groups with young people engaged in structureless platforms networks, youth led organizations and partners
- Individual interviews and focus groups with any relevant stakeholders
- collect and collate data at community level- in line with ASRHR-HIV services uptake

Deliverables:

- A draft work plan outlining timeline, detailed methodology, for the 3 components of the exercise (assessment, mapping, and documentation of best practices.)
- An inception report, outlining the methodology for the 3 components of the exercise
- Clearly articulated methodology for both components, tools (qualitative and quantitative)- including desk review. The methodology should extensively cover the applicable model for the assessment, mapping and documentation of best practices.
- Draft of the report for input
- Report on best practices- and their application to a wider program replication or expansion
- Final reports (Mapping and assessment with best practices, lessons learnt and a replication/expansion model)

Timeline

The consultant will work closely with the Skillshare Lesotho Staff (Program Manager, & District Coordinators) to deliver on the assignment within 30 days.

| Activities | Dates |
|--|-------|
| Work plan and methodology | |
| Desk review- desk review results | |
| Field work- Primary Data Collection | |
| Data analysis and Submission of First Draft Report | |
| Comments and Feedback from SKL/UNICEF | |
| Submission of Final Version of Report | |

Specific requirements for the consultant(s)

- A higher degree in public health, demography, development studies or any related relevant field. Experience in conducting research, baselines, assessments, SBC qualitative research, and evaluation of community-based project with a bias in health-related programs, and Adolescents, young people and youth programs. In addition, knowledge of social accountability, policy analysis, and data management and triangulation will be an added advantage.
- A minimum of 7 years' experience in SRHR -HIV and COVID-19 and youth programme/project evaluation in an international development context, integrated with results-based monitoring and evaluation, and documentation of best practices, lessons learnt for replication and expansion.
- Ability to design and plan assessment at the community level linked to the health facility data to inform program contribution in any setting.
- Demonstrated experience in a variety of research methodologies, including quantitative and qualitative research methods. Where feasible and proportionate, the person or team should include skills and expertise required to design, plan, and conduct impact evaluation, potentially with knowledge in using experimental or quasi-experimental techniques
- Relevant subject matter knowledge and experience such as health education, gender, Youth programming, non-state actors, community development and human rights-based approaches to ensure the assessment/evaluation design and research methods are as relevant and meaningful as possible given the aims and objectives of the project and the context in which it is being delivered
- Consultant must have appropriate country knowledge/experience including understanding of the context of the project impact areas.

Expression of interest

SKL requests Financial and Technical Proposals from qualified research agencies, project evaluators and individual consultants.

- Please **hand deliver** your application to Skillshare Lesotho Offices located at **42b Old Europa, UN Road, and Opposite Maseru Golf Club**.
- Submission should include application letter, financial proposal, CVs of the individual/team of consultants. Ensure submission in separate envelopes for the financial and technical proposals- clearly marked.
- The finance proposal should clearly indicate budget cost per item (mapping, assessment, and documentation)
- Address the Applications to the; Executive Director, Skillshare Lesotho,
- Clearly indicate the title on the envelope: ***“Application for conducting an assessment, stakeholder mapping & Best Practices of the ASRHR-HIV, COVID-19 Program in Leribe, Quthing, Berea and Mafeteng”***
- Skillshare will only contact an entity/person that qualified. If not contacted, consider your application unsuccessful.
- Skillshare reserve the right to call off the offer and or the advert.
- **Deadline for submission – 23rd Dec 2022 before or at 4:00 Pm Maseru time**