

**Research Consultancy to generate evidence and ideas on what policy- and decision-makers from 5 Balkan countries (Albania, BiH, Bulgaria, Kosovo and N-Macedonia) could do to improve the access of young vulnerable people to SRHR services, information and education during and beyond crisis.**

## **CONSULTANCY OVERVIEW**

IPPF EN is seeking a consultant to develop a research methodology and coordinate a research investigating the impact of COVID-19 on young people, in particular vulnerable youth's SRH needs (i.e. those living in remote/rural areas and/or in difficult socio-economic conditions) and the health systems' capacity to address them.

The research should document for each of the 5 countries:

- (1) The most affected SRH needs of young people (14-30) during (and because of) C-19
- (2) The major factors (institutional, social, cultural, economic) influencing (+/-) the access to SRH services, information and education during C-19 for (vulnerable) youth compared to before
- (3) The coping and help seeking mechanisms, behaviour and solutions that (vulnerable) young people adopted in addressing their unmet SRH needs during C-19
- (4) The consequences (at personal, demographic and systems level) of neglecting or addressing the SRH needs of (vulnerable) young people during C-19
- (5) A mapping of promising/positive practices in responding to the SRH needs of (vulnerable) young people during C-19 – having the potential to be embedded/generalised/replicated in future through legislation, policies and practice changes
- (6) A mapping of other (similar) promising measures/actions taken by European (EU) governments in response to the SRH needs of (vulnerable) young people during C-19

The consultant is expected to:

1. Refine the research questions in line with the agreed focus and framework
2. Develop a research methodology and data collection tools in collaboration with the project partners addressing each of the above listed research questions
3. Train the 5 project partners (NGOs/IPPF members in Albania, BiH, Bulgaria, Kosovo and N-Macedonia) in running the research (collecting and reporting the data) within their countries
4. Coordinate the collection of data and reporting by the project partners
5. Collect European/cross-country data via desk review as relevant (particularly relevant for output 6 above)
6. Analyse the data and seek feedback and input from partners on draft reports
7. Develop research finding report(s) at country and project level

Based on the research findings, the partners and an expert group will propose recommendations as to what policy- and decision-makers from the 5 Balkan countries (Albania, BiH, Bulgaria, Kosovo and N-Macedonia) need to do to improve the access of young vulnerable people to SRHR services, information and education during and beyond periods of crisis. These recommendations will be used as a basis for the development of advocacy plans at national and regional level.

While we would invite the consultant to propose his/her own methodology, we suggest the use a mix of quantitative and qualitative research methods in responding to the above listed research questions. More concretely, we foresee a desk review of secondary quantitative and qualitative data that will be used as a basis in shaping the outline of focus group discussions and in-depth interviews with different stakeholders – and where (and if) applicable will be enriched with some quantitative data, as feasible. Focus groups and interviews with vulnerable young people and relevant stakeholders from the health and education sector should be prioritized. Others, such as policy and decision-makers can also be considered.

The methodology should be applicable and the same in the 5 countries to ensure a consistent, uniform and coherent approach to the data collection and to allow for a general overview of findings. The methodology should be developed with input and feedback from the project partners.

The methodology for data collection should take into account possible restriction of movement due to C-19 and should be realistic in terms of time and human and financial capacity of partners.

## **BACKGROUND TO THIS CONSULTANCY**

Stigma and discrimination, socio-economic factors and geographic distance already create barriers for the vulnerable groups within our society to access health services and search for help. The COVID-19 pandemic negatively impacted the delivery of sexual and reproductive health (SRH) care, including maternal health and family planning, for women and vulnerable groups. COVID-19 has demonstrated how fragile our systems are and the unpreparedness of countries in dealing with health emergencies. A lot of false information is circulating, especially among youth, and young people underestimate the impact of pandemic, making it crucial to continue health literacy and sexuality education.

The COVID-19 pandemic also stimulated the creativity to counter these barriers. Digital outreach and support have become an essential way to inform young people, especially women and girls, and support their health and safety throughout their lives.

Thus, the COVID-19 crisis provides an opportunity to identify gaps, lessons learned, sharing of good practices and readiness to strengthen health systems and prepare more-inclusive plans. Recommendations and exchange of good/promising practices can support advocacy initiatives towards local, national and regional authorities to identify and support areas for change and prepare plans for a future with a more inclusive approach towards those in need. To do this, we need to better understand the impact that crisis situations such as COVID-19 have on the sexual and reproductive health of young people, especially on those within remote areas and living in unfavourable social conditions such as Roma and on their health care providers.

### **About the project (Youth Voices -Youth Choices)**

This research is a first step within the framework of a 2-year project (2021-2023) funded by the Merck for Mothers Program. The project aims to contribute to more accessible and youth friendly SRH services and information in and beyond emergency situations in 5 countries in the Western Balkan

region, building on young people's (age 14-30) sexual, reproductive and maternal health (SRH) needs and experiences during C-19 crisis, with special attention to those most vulnerable.

To bring about structural and long-term change, we will combine advocacy techniques with powerful new narratives and youth led campaigning to raise public awareness and persuade national and regional authorities. Multi-stakeholder partnerships will support the communication and advocacy initiatives.

Cross sharing and learning will empower young people to get involved in national advocacy:

- firstly, by conducting research to better understand the impact of COVID-19 on young people's access to SRH services and information and the opportunity and need to integrate digital services, especially for those most vulnerable; Young people will be supported and trained to actively participate in the research – both in conducting as well as participating as respondents.
- secondly, via compilation and exchange of good practices and empowerment of young people through a combination of online/offline education tools;
- thirdly via the development of (policy) recommendations that will support national and regional advocacy initiatives to strengthen health systems and increase access to (youth friendly) SRH services and information to all those in need, including within a context of crisis.

Young people are in the driving seat of the project and their futures. Starting from their needs, national and regional recommendations will be jointly developed. Empowerment will happen through training and capacity building to support them in becoming advocates for their own SRHR.

### **About IPPF**

The International Planned Parenthood Federation (IPPF) is a global service provider and a leading advocate of sexual and reproductive health and rights for all. We are a worldwide movement of national organizations working with and for communities and individuals. IPPF EN is one of the International Planned Parenthood Federation's six regional networks and has 30 Member Associations across Europe and Central Asia working on sexual and reproductive health and rights through advocating, empowering actors of change and providing care.

### **KEY RELATIONSHIPS**

With support from Marieka Vandewiele, Senior Programme Advisor at IPPF EN (the lead within the project), the consultant will:

- Seek feedback and input from the project partners and a selection of young people at crucial phases within the development of detailed research questions, the methodology, tools and on the drafted findings.
- Connect with project partners through their focal point (researcher/project manager) during the implementation of the research.

- Provide the project partners with clear guidance and instructions on the data collection, desk review of local secondary data and the reporting of these to the consultant.
- The consultant is expected to monitor the partners' in country data collection and timely reporting to the consultant.

The project partners will designate a focal point who will coordinate the research process in the field for their specific country as agreed by the consortium.

### **CONSULTANCY TIMELINE AND KEY MILESTONES**

This consultancy will be managed by outcome starting as soon as possible.

- Draft concept for methodology and process to be presented by 7 May 2021
- Finalisation of methodology and tools by 21 May 2021
- Training of project partners by 4 June 2021
- Coordination/Implementation research (4 June – 31 October 2021)
- Analysis and development of research report (deadline 30 November 2021)
- Present research findings to the project partners (deadline 31 December 2021)
- Present research findings to other relevant stakeholders (for example a high level meeting in Brussels – date TBD)

### **OUTPUTS**

- Research methodology and process
- Training on methodology and tools
- Full analysis report including e.g.: 1. An executive summary 2. Methodology 3. Overall Cross-Country Analysis 4. Country Chapters 5. Good practices 6. Conclusion
- A PPT of main findings and recommendations in a digestible format for average audience that will be involved in advocacy planning discussions and decisions.

The Consultant is responsible for editing and quality control of the report in English language.

### **ACTIVITIES**

- Remote meetings with the Senior Programme Advisor and project partners / young people
- Training on methodology and tools for data collection and reporting
- Research coordination
- Desk review/collection of data as identified at regional level
- Analysis of data
- Report writing

## CONSULTANT SPECIFICATION

### Required

- Academic degree / proven experience developing and conducting qualitative research
- Outstanding command of English

### Asset

- Solid knowledge of SRHR
- Experience in training/capacity building
- Affinity with Balkan region
- Experience working with young people

The research report needs to be completed by 30 November 2021. Please email [mvandewiele@ippf.org](mailto:mvandewiele@ippf.org) with your technical and financial proposal by 16 April 2021. The TECHNICAL PROPOSAL should contain: the consultant details & experience; brief outline of your proposed methodology and approach for the data collection and analysis. This outline will be subject to negotiation and further refinement.

The amount available for this research consultancy is 18.000 USD