



Examination of teenage pregnancy in World Vision Ireland's PGII and HPP Programmes

Terms of Reference (ToR)

World Vision Ireland was established as a registered Irish charity in 1983. World Vision Ireland's primary objective is to support our field operations, both in terms of our core long-term development programmes and humanitarian & emergency relief. We do this by raising private, institutional and Governmental funds, by informing the Irish public about humanitarian issues as witnessed first-hand by World Vision in the field, and by influencing Irish Governmental policy in the areas of long-term development and emergency relief. World Vision Ireland is a member of the World Vision International partnership, which is both the largest emergency relief and Child Sponsorship agency in the world.

Background

World Vision Ireland is one of Irish Aid's six key partners for the implementation of Irish Aid's Programme Grant (PG) II cycle (2017- 2022) and Humanitarian Programme Plan (HPP) (2019 - 2022).

World Vision Ireland's Programme Grant (PG) II is called Access: Infant and Maternal Health Plus (AIM Health Plus). AIM Health Plus is a maternal and child health programme being implemented in Uganda, Tanzania, Sierra Leone, and Mauritania. The goal of AIM Health Plus is to reduce neonatal and under-five mortality rates by 20% and maternal mortality ratios by 15% in each of the Programme sites between 2017 and 2021. To achieve this goal, AIM Health Plus focuses on five outcomes: 1) Children and their mothers are well nourished 2) Children are protected from illness and are managed appropriately when ill 3) Children and their caregivers' access and utilise essential maternal and newborn care (MNC) services 4) Health Governance and partnerships strengthened at micro, meso and macro levels 5) MNCH outcomes accelerated and amplified through the use of digital technology.

HPP is a protection and education programme being implemented in Somalia, South Sudan, Sudan and Syria. The three common objectives are: 1) Displaced children aged 3-6 are protected and provided with educational and psychosocial support 2) Improved access to quality primary and life skill education for girls and boys in target community (IDP and host communities in Sudan and South Sudan; children in fragile contexts in Somalia) 3) Increased protection against GBV for women and girls and access to empowerment opportunities. All programmes share these objectives except for the intervention in Syria which does not include the education component (objective two).

Sub-Saharan Africa has the highest regional rate of adolescent pregnancy in the world. In 2018, the estimated global adolescent birth rate was 42 births per 1,000 girls aged 15 to 19. In sub-Saharan Africa, the regional adolescent birth rate is more than double the global average, with 101 births per 1,000 girls aged 15 to 19. The implications of teenage pregnancy are multiple. Pregnancy is both a barrier to girls' continued education as well as a consequence of dropping out given its association with child marriage. Teenage pregnancy also carries

extremely high health risks. Worldwide, complications related to early pregnancy and childbirth are the number one cause of death for girls aged 15 to 19 years.¹

In both of World Vision Ireland's PGII and HPP programmes, rising rates of adolescent pregnancy has been identified as a challenge. However, while the programmes address the issue, neither programme was designed to directly address teenage pregnancy. COVID-19 is further increasing the chances that adolescent girls will be exposed to different forms of gender-based violence and the risk of pregnancy.

World Vision Ireland seeks to understand the drivers of teenage pregnancy in its eight programme countries. It further seeks to examine the nuanced responses taking place within its current programmes, and more widely, and how this can inform future World Vision programming.

Scope of Work

This piece of work aims to outline the drivers of teenage pregnancy in the context of World Vision Ireland's programmes. It further seeks to examine the responses taking place within World Vision Ireland's current programmes, within the World Vision International programmes and by peer agencies. Based on this, recommendations can be made to inform World Vision Ireland's future programming.

While the approach to this examination is open to the consultant, it is expected to include:

- An extensive literature review and analyses of background information on teenage pregnancy, evidence, approaches, and learning.
- Key Informant interviews with relevant programme staff, World Vision International staff, peer agency staff.
- Key Informant Interviews with government officials
- Key Informant Interviews/FGDs with beneficiaries and community groups

Due to COVID-19 restrictions and limitations on travel to and within programme countries, a remote approach is preferred.

Outputs

The expected outputs are:

- A research approach and action plan outlining timeline and key deliverables
- Preliminary findings shared with World Vision Ireland
- A final report that sets out methodology, findings, conclusions, and recommendations. The report should be no more than 30 pages long excluding annexes and with an executive summary.

Timeframe

The consultancy work is scheduled to start in June 2021 and the following milestones are envisaged:

- Expression of Interest – to be submitted by 14th May 2021.
- Research approach and action plan completed 25th June 2021.
- Literature and documentary review, KIIs and FGDs 31st August 2021.

¹ World Vision International, 2020. COVID-19 Aftershocks: Access Denied. https://www.wvi.org/sites/default/files/2020-08/Covid19%20Aftershocks_Access%20Denied_small.pdf

- Final report by September 30th, 2021.

Management of Consultancy

Clodagh McLoughlin, Senior Programmes Officer - Development Programmes (PGII) and Aoife Reilly, Senior Programmes Officer - Humanitarian and Emergency Affairs (HPP) will manage the consultancy.

Consultant Requirements

The consultant should have research skills. In addition, they shall have the following expertise and qualifications:

- At least 10 years of experience in working in the field of SRHR;
- A background in social science or similar discipline (International Development, Development Economics/Planning, Public Health)
- At least 5-7 years of demonstrated leadership in qualitative and mixed methods research projects
- Extensive expertise, knowledge, and experience in conducting multi-country research projects
- Fluent in English. Working knowledge in French and Arabic is an added advantage
- Excellent written and verbal communication skills in English

Other:

- Consultants shall be required to sign and abide by child and adult safeguarding policies
- The context requires a flexible mindset in regard to planning, approaches, methodology, dates among others. Hence, the consultant should be prepared to respond according to changes in context.

Application and Selection Process

Interested and qualified applicants are invited to submit an application of no more than 2 pages to programmes@wveu.org by 5pm Wednesday 19th May 2021. The application should include an approach to the work, timelines, a proposed budget and 2 references. It should be accompanied by an UpToDate CV.