

# Terms of Reference

## Adolescent and Youth Health and Wellbeing in the MENA Region Producing Evidence to Inform a Regional Roadmap

August 2022

### 1. PROJECT SUMMARY

Type of study	Qualitative Research
Name of the initiative	Producing Evidence and Analysis of Adolescent and Youth Health and Wellbeing in the MENA Region to Inform a Regional Roadmap
Project Start and End dates	September 2022 – Mar 2023 (indicatively)
Locations:	Egypt, Iraq, Lebanon and Yemen
Thematic areas	Adolescent Physical and Mental Health and Wellbeing
Sub themes	<ul style="list-style-type: none"> <li>▪ Mental Health and Psychosocial Support</li> <li>▪ Sexual and Reproductive Health</li> <li>▪ Other sub themes as emerging from secondary data review</li> </ul>
Donor	UNICEF
Overall objective of the project	<p>Save the Children Regional Office in the Middle East, North Africa and Eastern Europe (MENAEE RO) has engaged in a technical partnership with UNICEF in the area of <b>Adolescent and Youth Physical and Mental Health and Wellbeing</b>.</p> <p>Within this partnership, Save the Children MENAEE RO and UNICEF MENARO will contribute to enabling a positive change for young people by strengthening the evidence base around <i>key determinants of adolescent physical and mental health and wellbeing, with a focus on community and institutional barriers and facilitators for adolescents and youth to access quality, age- and gender-appropriate physical and mental health and psychosocial support services</i>.</p> <p>Save the Children is seeking a Consultant/Consultancy team to coordinate, oversee, analyse and report against the qualitative research work in subject.</p>

# Introduction

This document provides Terms of Reference for a consultancy to conduct qualitative research work on Adolescent and Youth Physical and Mental Health and Wellbeing in the MENA Region.

The research work will be conducted in Egypt, Iraq, Lebanon and Yemen engaging young people aged 10-24, their caregivers and service providers to better understand key determinants of physical and mental health and wellbeing – with a focus on ***individual, community and institutional barriers and facilitators for adolescents and youth to access quality, age- and gender-appropriate physical and mental health and psychosocial support services.***

The research work covered in these Terms of Reference complements and builds on the findings of a secondary review of available data and literature on health risks and vulnerabilities affecting adolescents and young people (15-24 years) in the MENA region. The secondary review, led by UNICEF and partners, will prompt identification of qualitative research questions, which will be explored in the context of the research work here described, through a series of Focus Group Discussions and Case Studies of promising and scalable good practices.

## 2. BACKGROUND AND CONTEXT

Adolescents 10-19 years comprise 17% (77,679) of the total population (463,375) in the Middle East and North Africa (MENA) region. Adolescents and young people have specific healthcare and other needs based on their developmental stage and individual life circumstances. Within the current context, health and other services dedicated to adolescents and young people are not proportional to their population size or their specific needs. Gaps exist between the training, knowledge and skill set of existing healthcare providers and the needs of the adolescents and young people for whom they provide care. Also, there are large gaps in adolescents and young people's perception of their own health and other needs. Adolescents and young people and their families often do not know where to obtain medical and other services should they need it.

## 3. SCOPE OF STUDY

### 3.1 Purpose, Objectives and Scope

Save the Children Regional Office in the Middle East, North Africa and Eastern Europe is commissioning this research work within its strategic efforts to generate evidence around adolescent and youth health and wellbeing, to inform and strengthen programming and advocacy. The research probes into adolescent and youth health and wellbeing, with a focus on understanding health-seeking behaviors, and identifying barriers and facilitators to accessing services; the views of adolescents and young people, their caregivers, service providers and other duty bearers will be sought. The domains of focus for the qualitative research will be identified through a secondary data review, currently ongoing as an independent piece of analysis; it is anticipated that areas of interest will include sexual and reproductive health (SRH) including HIV, mental health and psychosocial support (MHPSS), and potentially others as indicated by the secondary data review .

## 3.2 Expected results

- **A qualitative analysis** of the key barriers and facilitators at all levels of the socio-ecological framework affecting adolescents and youth's access to quality, age- and gender-appropriate physical and mental health and psychosocial support services.
- **Recommendations** on policy shifts, programmatic strategies and priorities required to protect and promote adolescent and youth physical and mental health and wellbeing, and to strengthen health and care-seeking behaviours in MENA at individual, community and primary healthcare levels.
- **Recommendations** on key messages to be included in regional initiatives promoting health- and care- seeking behaviours among adolescents and youth in MENA.
- **Documentation of successful or promising programmatic/intervention models** to learn from and promote for further development, scalability and/or replication.

## 3.3 Geographic Scope

The qualitative research will be conducted in four MENA countries (tentatively: Lebanon, Egypt, Iraq, Yemen).

## 3.4 Intended Audience and Use of the Study

Primary audiences of the study are **Save the Children, UNICEF and partners, alongside service providers and other institutional duty-bearers in the region.**

It is expected that findings from the study will inform Save the Children and UNICEF's strategies for Adolescent and Youth Health and Wellbeing programming and advocacy, and will feed into an intervention road map around these issues. It is expected as well that the report of findings may feed into an academic paper of publishable quality, to be co-authored by Save the Children and partners.

# 4. STUDY METHODOLOGY

## 4.1 Study Design and Sampling and Data Collection

The qualitative research design will draw on the findings of a secondary review of available data and literature on health risks and vulnerabilities affecting adolescents and youth (10-24 years) in the MENA region. The secondary review, led by UNICEF and partners, will prompt identification of qualitative research questions, which will be explored in the context of the research work here described, through:

- **Focus Group Discussion:** Up to 20 FGDs per Country, capturing the views of female and male adolescents and youth, male and female caregivers, and service providers. These FGDs will be designed to complement, clarify and validate results from the secondary review.
- **Case studies:** Up to 4 case studies are anticipated, to highlight promising programmatic/intervention models to learn from and promote for replication and scalability as relevant. Duty bearers engaged through the research will be consulted for reflections and inputs on the suggested case studies.

Consultants are welcome to suggest innovative/alternative participatory research methods and tools, employing age-appropriate, gender-sensitive and ethically sound approaches. Alternative methods and tools would however have to be discussed/agreed with the donor,

This study will engage three main groups of participants:

1. **Young people:** Adolescent girls and boys, and young women and men across 2-3 locations per country, disaggregated into three age brackets (younger adolescents, older adolescents and young adults); further disaggregation according to displacement status, marital status and other significant demographic characteristics to be agreed between the Consultant/s and Save the Children.
2. **Caregivers:** Families (parents / caregivers) in corresponding locations to those engaging young people
3. **Service Providers:** At community and primary health care level primarily

In addition to the above, and for the purpose of developing the Case Studies, the following participants will also be involved:

4. **Save the Children staff and Partners** involved in programming and service delivery in relevant thematic areas
5. **Ministries, International Organisations and Civil Society Organisations** involved in policy development, service planning and service delivery for Adolescent Health and Wellbeing.

Female and male adolescents and youth balance is necessary for the study, and inclusion of non-binary individuals is encouraged where feasible. Diversity is further encouraged in sampling, with respect to ability, displacement status, education level, marital status and benefit from NGO programming.

All primary data collected during the study must facilitate disaggregation by gender, age, ability location, setting (rural, urban, peri-urban, camp, etc.), and other identity signifiers per the desk review and consultation conducted at inception phase.

A range of documentation will be made available to the Consultant/s where relevant to the scope of information investigated.

The Consultant/s will be required to adhere to the [Save the Children Child Safeguarding: Protection from Sexual Exploitation and Abuse: Anti-Harassment, Intimidation and Bullying](#); and Data Protection and Privacy policies throughout all project activities.

## 4.2 Data Collection

Data collection will be conducted at field level with the support of Save the Children Country Offices. The Consultant/s should indicate whether they plan to conduct data collection activities themselves, or to recruit, train, coordinate and supervise facilitators for this purpose. In the latter case, the Consultant/s will be expected to coordinate closely with Save the Children Regional and Country Offices.

## 4.3 Ethical Considerations

The study must be guided by the following ethical considerations:

- Inclusion – *ensuring that adolescents and youth from different ethnic, social and religious backgrounds have the chance to participate, as well as adolescents and youth with disabilities and adolescents and youth who may be excluded or discriminated against in their community.*
- Safeguarding – *demonstrating the highest standards of behaviour towards children and adults.*
- Sensitive – *to child rights, gender, inclusion and cultural contexts.*
- Openness - *of information given, to the highest possible degree to all involved parties.*
- Confidentiality and data protection - *measures will be put in place to protect the identity of all participants and any other information that may put them or others at risk.*

- Public access - *to the results when there are not special considerations against this.*
- Broad participation - *the relevant parties should be involved where possible.*
- Reliability and independence - *the study should be conducted so that findings and conclusions are correct and trustworthy.*

It is expected that:

- Data collection methods will be age- and gender-appropriate.
- Study activities will provide a safe, creative space where all participants feel that their thoughts and ideas are important.
- A risk assessment will be conducted that includes any risks related to children, young people, or adults' participation.
- A referral mechanism will be in place in case any child safeguarding or protection issues arise.
- Informed consent must be used.
- Study field teams of facilitators involved in data collection will be trained on child safeguarding, gender and conflict sensitivity, and data collection tools and methods.

The Consultant/s will be required to obtain approval from a Research Ethics Committee. Save the Children will provide support with this process.

## 5. EXPECTED DELIVERABLES

The study deliverables and tentative timeline (subject to the commencement date of the study) are outlined below. The study team and SC study lead will agree on final milestones and deadlines at the inception phase.

**Key deliverables expected for this study include:**

- Inception report
- Final data collection tools (in English and Arabic), with brief guidance on administration
- Final study report (in English)
- PowerPoint presentation of key study findings and recommendations in a creative and visually appealing format
- A brief of the research (2-4 page summary of the full report); creative and visually appealing formats are encouraged

**Note!** Arabic translation of the study report, brief and presentation is an optional task under this consultancy. If capacity is available for quality translation, kindly indicate clearly the timelines and budget breakdown for the translation deliverable in your application.

**Milestones and tentative timeline – please note: the timeline below is subject to confirmation pending reception of findings from the secondary data review. Consultants applying under these ToRs must be able to adjust timeline and milestone delivery flexibly within the period Sep 2022-March 2023.**

Milestones	Days	Tentative deadline	Key deliverable
Consultancy starts		October, 1	
Review of findings from secondary data review	1		
Coordination workshop with Country Offices	1		

<p><b>Draft Inception Report, including:</b></p> <ul style="list-style-type: none"> <li>▪ Objectives, scope and key questions informing the qualitative research work</li> <li>▪ Description of the methodology, including design, sampling strategy, and study matrix against the key study questions</li> <li>▪ Caveats and limitations of the study</li> <li>▪ Risks and mitigation plan</li> <li>▪ Ethical considerations including details on consent</li> <li>▪ Draft data collection tools - Guides for KIIs (for case studies) and FGDs</li> <li>▪ Data collection plan</li> <li>▪ Stakeholder and youth communication and engagement plan, including logistics and support needed from Save the Children</li> <li>▪ Data analysis and reporting plan</li> <li>▪ Revised work plan if necessary</li> </ul>	2	October, 8	<b>Draft Inception Report and Data Collection Tools</b>
<p><b>Final Inception Report and Data Collection tools, integrating feedback from Save the Children</b></p>	1	October, 15	<b>Final Inception Report and Data Collection Tools</b>
<p><b>Ethical Review completed:</b> Approval from a Human Research Ethics Committee is desirable for this study; an ethics submission should include:</p> <ul style="list-style-type: none"> <li>▪ study protocols (participant recruitment, data security and storage, consent and confidentiality, etc.)</li> <li>▪ considerations for consulting with children and other vulnerable groups (if applicable)</li> <li>▪ participant information statement and consent forms</li> </ul>	1	October, 30	
<p><b>Recruitment and training of facilitators completed, as required</b></p>	5	November, 05	
<p><b>Data collection completed</b></p> <ul style="list-style-type: none"> <li>▪ FGD coordination and oversight</li> <li>▪ KII for case studies</li> </ul>	18	December, 15	
<p><b>Data Analysis completed</b></p> <ul style="list-style-type: none"> <li>▪ Primary data analysis</li> <li>▪ Data triangulation with existing literature</li> </ul>	7		
<p><b>Draft Report</b> including the following elements:</p> <ul style="list-style-type: none"> <li>▪ Executive summary</li> <li>▪ Background description of the Program and context relevant to the Study</li> <li>▪ Scope and focus of the study</li> <li>▪ Overview of the study <b>methodology</b> and data collection methods, including a Study matrix</li> <li>▪ <b>Findings</b> aligned to each of the key Study questions</li> <li>▪ Specific caveats or methodological limitations of the evaluation</li> <li>▪ <b>Conclusions</b> outlining implications of the findings or learnings; these will include</li> </ul>	4	January, 15	<b>Draft Study Report</b>

four case studies outlining promising practices and scalable intervention models <ul style="list-style-type: none"> <li>▪ <b>Recommendations</b></li> <li>▪ Annexes (Results framework , ToR for the Review, Inception Report, , List of people involved)</li> </ul>			
<b>Final Report</b> incorporating feedback from Save the Children and UNICEF	2	January -30	<b>Final Study Report</b>
<b>Knowledge translation materials:</b> <ul style="list-style-type: none"> <li>▪ PowerPoint presentation of Study findings</li> <li>▪ Research Brief</li> </ul>	2	January -30	<b>PowerPoint Presentation</b> <b>Research Brief</b>
<b>Validation workshop</b> <b>Or</b> <b>Joint Remote Launch</b>	2	Jan-Mar 2023 - TBC	
<b>Total n. of days</b>	46		

All reports are to use the Save the Children [Final Study Report template](#).

All documents are to be produced in MS Word format and provided electronically by email to the SC study lead. Copies of all PowerPoint presentations used to facilitate briefings for the project should also be provided to Save the Children in editable digital format.

## 6. REPORTING AND GOVERNANCE

The Consultant/s will report against the study plan to the study lead, the Regional Mental Health and Psychosocial Support Advisor. The following regular reporting and quality review processes will also be used:

- A bi-weekly (or more frequent, if/as required) written update by email to Save the Children's study lead, documenting progress, any emerging issues to be resolved and planned activities until the next update.

## 7. SELECTION CRITERIA

Save the Children welcomes applications from individual Consultants or research teams; multidisciplinary expertise would be particularly valued, noting however that the total number of days indicated in these ToRs cannot be exceeded.

Interested Consultants/teams are required to submit an Expression of Interest which should demonstrate adherence to the following requirements:

- *Advanced university degree in a relevant area (Public Health, Mental Health, Child and Adolescent Health, Sexual and Reproductive Health)*
- *Academic affiliation a distinct advantage*
- *Demonstrable technical expertise in the thematic areas covered in this study*
- *Proven experience in designing and conducting qualitative research in the thematic areas covered in this study*
- *Experience and understanding of Middle East contexts; ability to demonstrate coordination with in-country experts or research institutes to facilitate meaningful access to adolescents and youth and/or contribute to analysis insights is a plus*

- *Impeccable command of the English and Arabic languages – primary data collection and validation exercises will be conducted in Arabic, while design, data analysis and reporting will be in English*
- *Strong written and verbal skills in communicating technical and/or complex findings to non-specialist audiences (especially report writing and presentation skills)*
- *Proven ability to work independently and deliver results*
- *A track record of open, collaborative working with clients*
- *Access to and experience in working with Qualitative Data Analysis software (ex. Nvivo) desirable*

**Please note: the timeline outlined in these ToRs is subject to confirmation pending reception of findings from the secondary data review. Consultants applying under these ToRs must be able to adjust timeline and milestone delivery flexibly within the period Sep 2022-March 2023.**

Submissions will be evaluated in consideration of the selection Criteria as stated below:

Criteria	Weight	Max. Point
<b>TECHNICAL: Relevant technical expertise and competence to undertake this task; Multidisciplinary expertise; Unique advantages such as academic affiliation, ownership of relevant tools, etc.</b>	50%	50
<b>FINANCIAL OFFER</b>	40%	40
<b>SUSTAINABILITY : Experience and understanding of MENA contexts; Demonstrating regional/local recruitment)</b>	10%	10

## 8. HOW TO APPLY

Interested candidates are invited to submit a technical and financial proposal by September 3rd 2022. The proposal shall include:

- *Expression of interest/cover letter. This should include:*
  - *Details of relevant competence to undertake this consultancy*
  - *Past experience in relation to the objectives and scope of this consultancy*
  - *Description of the approach you would use to undertake this consultancy including timeline and estimated number of days required for task completion. In particular, and among the rest, applicants should clarify:*
    - *How they would select and recruit, train and oversee the work of FGD facilitators*
    - *How they would ensure the fulfilment of all ethical requirements and adherence to safeguarding and do no harm best practice standards*
- *Full curriculum vitae for key study team members*
- *Summary of previous experience in undertaking tasks of this type*
- *Sample of previous similar assignments (2 samples of previous work)*
- *Details of two reference clients/supervisors for which you have provided services/fulfilled tasks similar to our requirements. References will only be taken up for shortlisted bidders*
- *Financial proposal (indicating number of days for each milestones; rate per day in USD, inclusive of any and all related expenses necessary to undertake the assignment; noting that*



*for this home-based consultancy, Save the Children will not provide equipment or materials, and no separate budget is provided to cover travel or accommodation costs).*

**FULL APPLICATION PACK AS STATED ABOVE SHOULD BE SUBMITTED THROUGH PROSAVE**

**INTERESTED PARTICIPANTS PLEASE CONTACT [GHASSAN.KHZOUZ@SAVETHECHILDREN.ORG](mailto:GHASSAN.KHZOUZ@SAVETHECHILDREN.ORG) IN ORDER TO REGISTER TO PROSAVE AND UPLOAD YOU PROPOSAL**

**FINAL DATE OF SUBMISSION IS 12 PM GMT 3<sup>RD</sup> SEPTEMBER 2022**

<b>ToR prepared by:</b>	Marta Petagna, Regional Mental Health and Psychosocial Support Advisor Yousra Hassan, Regional Adolescent and Youth Advisor Dr Shihab Ibrahim, Regional Health Advisor Shatha el Fayez, Research and Evidence Specialist
<b>ToR approved by:</b>	Cathy Emery, Regional Programme Delivery and Quality Director
<b>Date of sign off:</b>	18 August 2022