

## Vacancy for Short-Term Consultancy to Compile a National Report on the East and Southern Africa Ministerial Commitment- Readvertised

**Assignment Title: Writing National Report on the East and Southern Africa Ministerial Commitment**

**Location: Juba, South Sudan**

**Closing date for Application: 4 October 2024**

**Start date: 11 October 2024**

**End Date: 18 October 2024**

**Reporting to: Education Programme Specialist**

### **Background**

UNESCO Juba Office seeks the services of an individual to the national Technical working group on the Eastern and Southern Africa Ministerial Commitment to provide a report on the progress made in realising the commitment.

South Sudan is one of the countries that signed the Eastern and Southern African (ESA) Commitment in the ESA region in 2013 and commitment to scaling up comprehensive sexuality education and sexual reproductive health services for adolescents and young people in the region. South Sudan renewed the ESA Commitment 2021-2030 to

- Continue investing in high quality, evidence-based, gender-transformative, age and culturally appropriate sexuality education, both in and out of school, that covers a broad range of critical topics on values, the human body, relationships, safety, consent, gender, and health and wellbeing.
- Address the structural factors that increase the vulnerability of adolescents and young people and their risk of acquiring HIV and STIs or becoming pregnant, notably gender inequalities, GBV, poverty, climate change, stigma, and discrimination.
- Ensure the inclusion of adolescent and youth-friendly SRHR within the national Universal Health Coverage packages while strengthening collaboration between the education, health, youth and gender sectors at all levels to strengthen resilient adolescent-responsive health systems and increase access by adolescents and young people to a good quality package of safe, climate smart, effective, acceptable, and affordable adolescents and youth-friendly SRH services and commodities, including menstrual health, psychosocial support, and social protection services.
- Connect health, education, and social service systems and other support mechanisms and position schools as an entry point for providing support, protection, and referrals for adolescents and young people while ensuring alternative mechanisms to reach adolescents and young people out of school with the same package of services.
- Create formal and sustainable mechanisms with a safe and supportive environment for the meaningful and effective engagement of adolescents and young people in decision-making, planning, implementation, and evaluation of programmes, as well as in effectively influencing legislation and policy reforms.

- Ensure that interventions at the national level are well-targeted and evidence-based through strengthened collection, analysis, and use of multiple data sources for all stakeholders at all levels, disaggregated by sex, age, economic status, disability, and geographical location.
- Strengthen the role of community organisations and community actors to improve engagement and dialogue, including with parents and traditional and religious leaders, on the consequences of EUP, GBV, and harmful practices such as child marriage and FGM to deconstruct gender-entrenched norms that put girls and young women at higher risk of HIV infection, GBV, EUP, and child marriage and hinder their access to SRHR information and services.
- Promote the attainment of the ESA Commitment by ensuring that national policy and programme delivery, and related continental and regional commitments, are costed and allocated budgets commensurate with the size of the youth population and with their needs and that increased investments in SRHR are promoted and supported through innovative financing mechanisms that include progressively increased domestic budgets, technical assistance and funding from private sector as well as development partners.
- Coordinate and support the development of national multisectoral and multistakeholder plans (including other government ministries, parliamentarians, judicial services, community and religious leaders, youth-led and youth-serving organisations, civil society organisations, private sector, and international cooperating partners) for the popularisation, funding, implementation, monitoring, and progress reporting of the ESA Commitment.

### **About the Assignment**

Following the virtual meeting of all the ESA countries, attended by South Sudan on 8th August 2024, one action point was that countries would submit the report (See Appendix 1) to the regional Technical Coordination Group. Therefore, UNESCO seeks a professional consultant to compile a report for dissemination.

This assignment aims to produce a report summarising the key achievements during the biennium period of 2022-2023.

The report's compilation will involve members of the technical working group, including partners of the Ministry of General Education and Instruction, Ministry of Health, Ministry of Gender, Child and Social Welfare and Ministry of Youth and Sports. The consultant should ensure accuracy, well written content per format, and alignment with the objectives. The consultant will incorporate feedback to the draft.

The consultant will work under the overall guidance of the Head of Education and work closely with the National Programme Officer.

### **Contract period**

The duration of this project is four working days.

Start date: 11 October 2024- End date: 18 October 2024.

The service is required immediately.

The Application should consist of the following:

1. A detailed Curriculum Vitae;
2. Timelines and proposed approach to be taken for the roll-out of the consultancy;

**Essential criteria for selection-**

Excellent report writing skills - Should have prior experience conducting similar work - Must have working knowledge in reproductive health, gender, youth, population and development sectors. Supporting evidence is required.

**Duties and Responsibilities**

The contractor will use a personal computer for the assignment.

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Voice over Internet Protocol (VOIP) Microsoft Teams will be used for communication.

- Government and the UN system shall be entitled to all property rights, including but not limited to patents, copyrights and trademarks, with regard to material which bears a direct relation to or is made in consequence of the services provided to the Organization by the consultant. The government and the UN system would be prepared to share intellectual property rights, requiring, at a minimum, that the government and the UN system be acknowledged in all use and publications of the data generated under the present consultancy. This retains the right to use the data for further analysis and publication, with acknowledgement of the research institution.

Please send applications to [Proposals.Juba-ED@unesco.org](mailto:Proposals.Juba-ED@unesco.org) and copy [c.lado@unesco.org](mailto:c.lado@unesco.org)

Payment instalments

- i. Full payment will be made upon submission of the report and close out report.

## Appendix 1 Report Format

### **EASTERN AND SOUTHERN AFRICA MINISTERIAL COMMITMENT PROGRESS REPORT**

#### **1. Introduction and Background**

- Overview of the country context
- Any historical background and rationale for the report
- Scope of the report, including the period covered.

#### **2. Progress, Achievements, and Challenges**

- Key milestones and progress to date
- Significant achievements and successes
- Major challenges, obstacles faced and mitigation measures

#### **3. Lessons Learned**

- Key insights and takeaways from the implementation processes
- Analysis of what worked well and what did not
- Implications for future initiatives/approaches/processes

#### **4. Promising Practices and Human Interest Stories**

- Examples of successful interventions and promising practices
- Personal stories and case studies highlighting the impact on different stakeholders (young people, communities, etc)

#### **5. Recommendations and Conclusions**

- Strategic recommendations for stakeholders
- Conclusions and future directions

#### **Annex 1: Indicator Reporting Matrix**

<b>Indicator</b>	<b>Value of the Indicator</b>	<b>Progress Assessment/Narrative</b>	<b>Data Source and Year, &amp; any Data Gaps</b>
<b>IMPACT INDICATORS [II]</b>			
<b>ESA Target 1: Fast-track regional and country level actions to reduce early and unintended pregnancies among adolescents and young people aged 10-24 years by 40%</b>			
<b>II.1.</b> Number of unintended pregnancies averted among women aged 15-24 years due to modern contraception use within the past 12 months			

Indicator	Value of the Indicator	Progress Assessment/Narrative	Data Source and Year, & any Data Gaps
<b>IMPACT INDICATORS [II]</b>			
<b>II.2.</b> Percentage of adolescent girls 15-19 years who have begun childbearing.			
<b>ESA Target 2: Reduce new HIV infections among adolescents and young people aged 15-24 years by 60%</b>			
<b>II.3a.</b> Number of new HIV infections among adolescent girls and boys aged 10-19 years	<b>Girls:</b> <b>Boys:</b>		
<b>II. 3b: Name of Indicator:</b> Number of new HIV infections among young women and men aged 20-24 years.	<b>Young women:</b> <b>Young men:</b>		

Indicator	Value of the Indicator	Progress Assessment/Narrative	Data Source and Year, & any Data Gaps
<b>OUTCOME INDICATORS</b>			
<b>ESA Target 1: Fast-track regional and country level actions to reduce early and unintended pregnancies among adolescents and young people aged 10-24 years by 40%</b>			
<b>OCI.1.</b> Percentage of adolescent girls and young women aged 15-24 who have their need for family planning satisfied with modern contraceptive methods.			
<b>ESA Target 2: Reduce new HIV infections among adolescents and young people aged 15-24 years by 60%</b>			
<b>OCI.2.</b> Percentage of young people aged 15-19 years who both correctly identify ways of preventing the sexual transmission of	<b>Female:</b> <b>Male:</b>		

Indicator	Value of the Indicator	Progress Assessment/Narrative	Data Source and Year, & any Data Gaps
<b>OUTCOME INDICATORS</b>			
HIV, and who reject major misconceptions about HIV transmission.			
<b>OCI.3.</b> Percentage of young people aged 20-24 years who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission	<b>Female:</b>  <b>Male:</b>		
<b>OCI.4.</b> Percentage of adolescent girls and boys aged 15-19 who used a condom during the last sexual intercourse with a non-cohabiting partner	<b>Girls:</b>  <b>Boys:</b>		
<b>OCI.5.</b> Percentage of young women and men aged 20-24 who used a condom during the last sexual intercourse with a non-cohabiting partner	<b>Female:</b>  <b>Male:</b>		
<b>ESA Target 3: Eliminate all forms of violence including sexual and gender-based violence against all adolescent girls and young women</b>			
<b>OIC.6.</b> Percentage of adolescent girls and boys aged 15-19 years who believe that wife beating is justified for at least one of	<b>Female:</b>  <b>Male:</b>		

Indicator	Value of the Indicator	Progress Assessment/Narrative	Data Source and Year, & any Data Gaps
<b>OUTCOME INDICATORS</b>			
the 5 reasons specified			
<b>OCI.7.</b> Percentage of young women and men aged 20-24 years who believe that wife beating is justified for at least one of the 5 reasons specified	<b>Female:</b>  <b>Male:</b>		
<b>OCI.8.</b> Percentage of adolescent girls and boys aged 15-19 years who experienced physical and/or sexual violence from an intimate partner in the past 12 months	<b>Female:</b>  <b>Male:</b>		
<b>OCI.9.</b> Percentage of women and men aged 20-24 years who experienced physical and/or sexual violence from an intimate partner in the past 12 months	<b>Female:</b>  <b>Male:</b>		
<b>ESA Target 4: Eliminate harmful practices such as child marriage and female genital mutilation/cutting among adolescents and young people</b>			
<b>OCI.10.</b> Percentage of young women and men aged 20-24 years who were first married or in union by age 18	<b>Female:</b>  <b>Male:</b>		
<b>OCI.11.</b> Percentage of young women and men aged 20-24 years who were first married or in union by age 15	<b>Female:</b>  <b>Male:</b>		

Indicator	Value of the Indicator	Progress Assessment/Narrative	Data Source and Year, & any Data Gaps
<b>OUTPUT INDICATORS [OI]</b>			
<b>ESA Target 5: All adolescents and young people across the 21 countries are reached with good-quality, age-appropriate and evidence-based sexuality education through in and out of school programmes</b>			
<b>OI.1.</b> Existence of a national programme that provides out-of-school youth with comprehensive sexuality education and youth-friendly SRHR services (Yes/No)			
<b>OI.1b.</b> Number of out-of-school youth reached youth with comprehensive sexuality education and youth-friendly SRHR services.	<b>Female:</b>  <b>Male:</b>		
<b>OI.2.</b> Referral systems for learners (both formal and informal learning) to receive integrated youth friendly SRHR services in place (Yes/No).			
<b>ESA Target 6: All 21 countries integrate adolescent and youth sexual and reproductive health and rights services into Universal Health Care packages.</b>			
<b>OI.3.</b> National strategy or framework for integrating adolescents' and young people's SRHR services into Universal Health Care			



Indicator	Value of the Indicator	Progress Assessment/Narrative	Data Source and Year, & any Data Gaps
<b>OUTPUT INDICATORS [OI]</b>			
packages in place (Yes/No)			
<b>ESA Target 7: Functional multi-sectoral frameworks in place to facilitate linkages between sexuality education and youth-friendly sexual and reproductive health, and psychosocial services</b>			
<b>OI.4.</b> Availability of enhanced strategies or frameworks for linking sexuality education and youth-friendly SRHR services including psychosocial support (Yes/No)			
<b>ESA Target 8: All 21 countries have laws and regulations that guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information, and education.</b>			
<b>OI.5.</b> Laws or regulations that guarantee women and men aged 15 years or older full access to SRHR care, information and education in place (HIGH performance, MEDIUM performance, LOW performance).			