

RESEARCH CONSULTANT - IPPF

Assessing the effectiveness of peer education to deliver comprehensive sexuality education

Background

IPPF is a locally owned, globally connected civil society movement that provides health services and champions sexual and reproductive rights for all, especially the under-served. IPPF's Member Associations deliver sexual and reproductive health (SRH) services to millions of women each year, and the Federation aims to provide technical leadership to the wider SRHR community based on global expertise.

The Get Up Speak Out (GUSO) programme is a five-year programme funded by the Dutch Ministry of Foreign Affairs and implemented by a Consortium of partners (IPPF, Dance4life, Choice, Rutgers, Simavi and Aidsfonds). The long-term objective of the programme is for all young people, especially girls and young women are to be empowered to realize their SRHR in societies that are positive towards their sexuality. The programme seeks to realize five key outcomes: (1) strengthened and sustainable Alliances comprehensively address the Sexual and reproductive health and rights (SRHR) of young people; (2) empowered young people increasingly voice their rights; (3) increased utilization of comprehensive SRHR information and education by all young people; (4) increased utilization of quality and youth-friendly SRH services that respond to the needs and rights of all young people; and (5) improved social-cultural, political and legal environment for gender-sensitive, youth-friendly SRHR.

Overview and rationale

In the past decade, extensive research has been conducted into the effectiveness of different approaches to providing SRHR education and information to young people¹. Evidence has shown mixed results for peer education programmes, with positive outcomes often limited to young volunteers themselves. However, peer education is often used as an umbrella term to define a multitude of different approaches, with several factors coming into play when it comes to its effectiveness. For instance, frequency of sessions, content of programme, ability and role of peer educators, quality of training, availability and relevance of information, education and communication (IEC) materials and tools, size of the class, supervision and many other quality assurance mechanisms can influence the result of the interventions. These factors need to be thoroughly analysed to avoid any generalisations on the overall effectiveness of peer education.

At the same time, comprehensive sexuality education (CSE) has emerged as an effective method to improve youth SRH knowledge, attitudes and behaviours, as evidenced by the *International technical guidance on sexuality education: an evidence-informed approach* published by UNESCO in 2018.

Several programmes combine these approaches (peer education and comprehensive sexuality education) to reach young people, especially in out-of-school settings and in underserved areas. Empirical evidence has shown mixed results and therefore, more

¹ See for example Chandra-Mouli V, Lane C, Wong S. (2015), What does not work in adolescent sexual and reproductive health: a review of evidence on interventions commonly accepted as best practices. *Glob Health Sci Pract.*;3(3):333-340. <http://dx.doi.org/10.9745/GHSP-D-15-00126>

research is needed to understand how to tailor such programmes to respond to the needs of young people.

Purpose of the study

The purpose of this study is to analyse which factors make peer education programmes more effective (as defined below) to deliver comprehensive sexuality education and to clarify what can reasonably be expected from such programmes.

We aim to analyse whether a mixed approach of peer education delivery of CSE (outlined in [the IPPF CSE framework](#)) leads to reduced sexual risk behaviour and increased use of SRH services (if and when needed) among beneficiaries, and what factors lead to such effectiveness.

For the purpose of this study, effectiveness includes increased knowledge of SRHR, reduced self-reported sexual risk behaviour and increased use of SRH services (if and when needed) among peer educators and beneficiaries.

Research questions

- What are the expected outcomes of peer education interventions in tandem with CSE?
- What factors make mixed CSE and peer education interventions more and less effective in reducing sexual risk behaviour and increasing use of SRH services (if and when needed) among beneficiaries?

Methodology

The consultant team will be expected to develop research tools (including questionnaires, FGD guides, interview guides) to support both quantitative and qualitative data collection. The research should cover the CSE peer led program in Kenya, with a control group of teacher-led or adult-led CSE in the same region.

The consultant team is expected to involve young people in the research design and data collection.

Geographic scope

The research will be conducted in Kenya in GUSO regions.

Tasks of the Consultant Team

- Review available literature on peer education and comprehensive sexuality education
- Develop research tools
- Present inception report and research tools to IPPF team for review and approval
- Attend inception meeting to discuss inception report, research tools and sample for interviews
- Conduct field research at the research site
- Analyse data
- Produce research report

Deliverables

- Inception report
- Applications for ethical clearance
- Research tools
- Research report with best practices, recommendations and limitations

Profile of the Consultant Team

Proven ability and skills:

- Have a sound knowledge of sexual and reproductive health and rights issues
- Be conversant with peer education mechanisms
- Be knowledgeable in participatory approaches that involve participants and generate constructive and result-oriented discussions
- Have excellent communication skills
- Have strong research skills
- Proven experience of working with youth researchers is a plus

Personal competence:

- Willing to travel internationally – approximately 15 days during this assignment
- Cultural sensitivity
- Supportive of a woman's right to choose and to have access to safe abortion services.

Timeframe

The consultancy should start as soon as possible and be finalized by 30th August 2020. The estimated number of days for this consultancy is 60 days

How to apply

Interested persons who meet the set Profile specified above should submit CV, a cover letter that directly addresses the TOR alongside a financial proposal to Dr Shadia Elshiwiy at selshiwiy@ippf.org by 15 February 2020.