

CARE International in PNG Komuniti Tingim AIDS Project

SRMH-related vulnerabilities for young women in the Autonomous Region of Bougainville RESEARCH CONSULTANT TERMS OF REFERENCE

INTRODUCTION

CARE International is a humanitarian aid organisation fighting global poverty, with a special focus on empowering women and girls to bring lasting change to their communities. CARE has implemented development and humanitarian assistance projects in Papua New Guinea for more than 20 years. In 2006, CARE established a permanent country presence in PNG with the establishment of a Country Office in Goroka, Eastern Highlands Province, thereby strengthening local management and support to CARE's in-country operations. CARE International in PNG (CARE PNG) established operations in the Autonomous Region of Bougainville (ARB) in 2008. CARE PNG is guided by the vision, mission, core values and programming principles of CARE International and receives management support through CARE International Member, CARE Australia.

CARE PNG is developing a Long Term Programme which places sexual, reproductive, and maternal health, women's empowerment and gender equality at the centre of its programming and operations. The Long Term Programme draws upon CARE's *Governance Programming Framework* and *Women's Empowerment Framework* to promote good governance, service delivery, and gender equity across its projects. In ARB – an island region of the PNG mainland which experienced a protracted conflict throughout the 1990s – CARE PNG has identified young women and adolescent girls as the impact groups for its programming areas, which include: governance and service delivery, sexual, reproductive and maternal health, adaptation to climate change, and women's economic empowerment. SRH work is currently carried out through the Komuniti Tingim AIDS (KTA) Project. The KTA Project embeds its understanding of sexual and reproductive health among young people in the context of social determinants of health, with recognition of the impact that post-crisis rehabilitation has had on the young people of Bougainville.

In order to further develop its LTP, CARE International in Papua New Guinea is seeking a consultant to conduct research into the causes and consequences of young women's vulnerability to SRMH-related morbidities, as well as opportunities for positive intervention, in the Autonomous Region of Bougainville.

The ARB-based research is intended to inform CARE PNG's activities in the areas of women's empowerment and gender equality, as well as to provide context and practical input for CARE's SRMH work in ARB.

BACKGROUND

Globally, young women are disproportionately affected by sexual and reproductive health issues. Social and cultural norms often undervalue young women, leading to a variety of inequalities in access to educational, political, and economic opportunities. These inequalities leave young women at risk of a variety of SRMH-related consequences, including unplanned pregnancy and sexual violence and trafficking. As a result, rates of maternal deaths and injuries, sexually transmitted infections, and unsafe abortions are very high for young women, particularly those living in developing settings. In this context, vulnerability for young women refers to the extent to which broader factors, often beyond young women's control, influence their risk for SRMH-related issues.

In 2013, the KTA Project Team conducted a knowledge, attitudes and practice (KAP) survey among 673 young people in Bougainville's two largest urban areas, Arawa and Buka. The anonymous, multi-choice questionnaire covered a variety of topics including understanding of sexually transmitted infections and contraception, alcohol and drug use, receipt of payment for sex, and experiences of forced sex.

Among other findings, the KAP Survey identified the following important issues related to youth, women's empowerment, and SRMH: significant income disparity between young men and women; up to 19% of young women report experiencing forced sex during the 12 months prior to the survey; and a high proportion of females report having only 1 sexual partner during the previous year, with more males reporting multiple partners. Although few survey respondents reported ever having received payment for sex, evidence gathered through KTA's outreach work indicates significant levels of transactional sex between young women and older men.

In addition to evidence collected by KTA and CARE within Bougainville, other studies have indicated that the Bougainville Crisis had a substantial impact on young women and sexual health. Sexual assault and sexual violence were pervasive during and have remained prevalent in the aftermath of the Crisis, and changed social norms and continuing trauma have also impacted sexual health and behaviour.

In response to the KAP Survey and information gathered throughout the KTA Project, CARE PNG's SRMH Team has identified young women's vulnerabilities as a key issue about which further information is needed in order to effectively programme to meet the SRMH needs of young women in Bougainville.

CONTENT OF THE STUDY/RESEARCH QUESTIONS

Research activities will be discussed in detail with CARE PNG staff and are outlined below:

- Document the distribution, prevalence, and severity of SRMH-related morbidities, including sexual exploitation and violence, among young women in ARB
- Identify, investigate, and describe factors, including socio-economic and cultural factors, contributing to young women's vulnerability to identified morbidities
- Identify, investigate, and describe potential protective or mitigating factors, both short and long-term, to improve the SRMH status of young women in ARB
- Identify opportunities for interventions and recommend strategies to build upon or increase identified protective and mitigating factors of young women's vulnerability
- Ensure the incorporation of feedback from relevant stakeholders throughout the process

KEY OUTPUTS

Key outputs will be discussed in detail with CARE PNG staff and are outlined below.

- Application for study approval through PNG Medical Research Council in collaboration with CARE PNG staff
- Desk review of and report on relevant literature, including comparisons of similar research and interventions in similar contexts (up to 10 pages)
- Research Design Document (up to 6 pages) in collaboration with CARE PNG staff
- · Cleaned and organized primary data
- Publication-quality report on research findings (up to 30 pages), including annexes

MANAGEMENT & TIMEFRAME

The consultancy will be undertaken both at home base and in-country. Costs associated with the research will be covered by CARE PNG. The consultant will be managed by the CARE PNG SRMH Manager and will work closely with the KTA Project Manager & staff. Both the research design document and final report should be submitted to CARE PNG's Assistant Country Director for Programmes, KTA Project Manager, and SRMH Manager for final sign-off and approval.

The consultancy is scheduled to take place between February and October, 2015, with the bulk of in-country work carried out in May-June. The consultant will be expected to spend approximately 40 working days across the period mentioned. An approximate timeframe is as follows:

Activity	Approx Time Frame	Approx # of Days
Phone briefing with CARE PNG SRMH Team & draft scheduling outline	April 2015	2
Literature review, research design & approval process (home-based)	April - May, 2015	12
ARB-based research preparation (staff briefings, in-country set-up, etc.)	May	3
ARB-based research	May – June	10
Data analysis & report writing (home-based)	June	13
TOTAL		40

CONSULTANT SELECTION CRITERIA

The Consultant/s shall be expected to have the following skills and experience:

- A Masters Degree or equivalent experience in international development related research;
- At least three years of behavioural research experience in PNG or other post-conflict or low-income country, including study design and data analysis. Experience in publishing research findings a plus;
- Strong, demonstrable commitment to research ethics and the privacy & protection of research participants;
- Demonstrable knowledge of sexual and reproductive health, CSEC, and issues concerning young women's vulnerabilities, particularly in post-conflict settings;
- Experience working in remote and resource-limited environments; knowledge of ARB context preferred;
- Proven experience in writing high quality reports including evaluations, reviews, project designs or research reports for publication;
- High quality communication skills, including the ability to speak and write clearly and effectively, listen to and facilitate participation from others, including in cross-cultural contexts; and
- Understanding of CARE's vision, mission and values, and commitment to uphold the CARE Code of Conduct and Child Protection Code of Conduct.

EXPRESSIONS OF INTEREST

Expressions of interest should be submitted to Morgan Garcia, SRMH Manager, CARE International in PNG (morgan.garcia@careint.org), by 11pm PNG time on March 8th, 2015.

All expressions of interest should include:

- Up to date CV with details of three relevant referees;
- Up to two-page cover letter addressing the selection criteria, confirmation of availability, and specific point of departure/return to complete research activities from the home base location;
- A draft theoretical framework and methodological approach for the proposed research (up to 1 page);
- Quotation, including daily rate in Australian Dollars

Enquiries and requests for further information should also be directed to Morgan Garcia.

Please note that CARE International in PNG will manage transport, accommodation and logistical arrangements for the incountry component of the consultancy, including visa fees, international & in-country transport, as well as food allowance and security as needed; daily rates should take into account these benefits.