

## COMMUNITY HEALTH PROMOTION FUND

### Consultant (Adolescents and Youth Sexual Reproductive Health And Rights)

Community Health Promotion Fund (CHPF), a charitable trust fund that focus on improving community health by supporting health related training, primary health care services and community-based health research in Kilifi County has been implementing the SRHR project in Kilifi-South Sub-County aimed at contributing to the reduction of teenage pregnancies is seeking to recruit a consultant to support the end-line evaluation exercise for the said project within Kilifi South and Chonyi.



**Community Health  
Promotion Fund**

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#### **Background of the Project**

Project Goal is to Reduce Teenage pregnancies and improve access to sexual and reproductive health rights (SRHR) for adolescents and youth in Kilifi South and Chonyi sub county.

This project aims to contribute to the reduction of teenage pregnancies in Kilifi sub-county. Project interventions aim to change the educational, social, and cultural environment in this area in a direction that makes adolescents (10–19-years) and youth (15-24-years) feel safe, supported, and enabled to learn about and make informed decisions about their sexual reproductive health rights (SRHR), supported by their peers, parents, schools, and the local community and its leaders at large. The project targets 9,300 young adolescents and youth within eight (8) primary and four (4) secondary schools catchment areas in the sub-county.

The following key project outputs were to be achieved within the project period of 3.3 years:

1. Adolescents and youth are well informed about gender equity, children’s rights, SRHR and prevention of pregnancy and are truly empowered to make informed choices.
2. Youth and adolescents have improved access to and make use of youth-friendly SRHR services in their vicinity
3. Community members and parents are aware of SRHR matters of children/youth, particularly girls and show a positive attitude to support the youth.
4. Advocacy and multi-sectoral coordination is supported to address gender issues and SRHR needs of adolescents and youth

#### **Objectives of the Endline Evaluation**

The objective of the endline evaluation is to assess the relevance, effectiveness, efficiency, and sustainability, performance and success/ achievements, outcomes, and impact of project interventions, draw lessons for future planning and implementation.

Specifically, the study will:

- Quantify progress toward the project's outcome and impact indicators (as aligned with the baseline indicators, and impact matrix) – measure extent to which project objectives and expected outputs have been achieved. Assess changes in knowledge, attitudes, behaviors, service utilization, and enabling environments related to SRHR among adolescents, youth, parents, teachers, health service providers, and community leaders regarding SRHR.
- Identify factors that facilitated or hindered achievement of results.
- Document project contributions towards reducing teenage pregnancies and promoting SRHR in Kilifi South (lessons learnt, best practices, success stories)
- Compare endline findings with baseline data to establish project contribution to observed changes.
- Provide evidence-based recommendations for program strengthening, scale-up, and policy engagement.
- Outline how well the project interventions were aligned with county and national Sexual and Reproductive Health and Rights (SRHR) policies, strategies, and frameworks.
- Highlight the efficiency and effectiveness of coordination, planning, and implementation mechanisms among CHPF, implementing partners, and community structures.
- Highlight how the project has contributed to reducing teenage pregnancies and promoting gender equity and SRHR rights among adolescents and youth.
- Outline the extent to which the project results and benefits are likely to continue beyond the project funding period.

#### Specific Objectives

The study aims to;

1. **Assess outcomes and impact:** Evaluate changes in adolescent and youth SRHR knowledge, attitudes, practices, and service uptake.
2. **Measure output-level achievements:** Determine the extent to which the four key project outputs were achieved.
3. **Evaluate community and institutional engagement:** Assess community leaders', parents', and teachers' awareness and involvement in SRHR promotion.
4. **Examine access to services:** Assess availability and utilization of youth-friendly SRHR services within school catchment areas and health facilities.
5. **Assess advocacy and policy influence:** Determine how far the project has influenced multisectoral collaboration, gender equity, and SRHR policy awareness.
6. **Draw lessons for sustainability:** Provide recommendations for scaling up and sustaining project gains beyond the project cycle.

### **Scope of Work**

The study will be undertaken in all the twelve (12) catchment areas of; Mtwapa Primary, Mbuyuni Primary, St. Teresa Secondary, Ngombeni Girls, Bungu Primary, Mavueni Primary, Chodari Primary, Mkwajuni Primary, Msumarini Secondary, Kireme Primary, Mtomondoni Secondary, and Mtomondoni Primary.

### **Study Design**

The consultant is expected to design a relevant and effective methodology and approach for this endline evaluation. The evaluation design should employ both qualitative and quantitative approaches, ensuring it is suitable for measuring change against the baseline. It should further include a project contribution analysis and documentation of outcome harvesting. This will involve;

- Designing appropriate approach and methodology
- Reviewing relevant documents including project document, baseline survey report, mid-term evaluation reports and impact matrix
- Preparing and testing relevant data collection tools
- Conducting interviews and consultations with relevant stakeholders
- Processing and analyzing data
- Preparing the evaluation report
- Presenting findings to the CHPF team and finally to the donor

### **Sampling & Population**

Define sampling frame and sample size for adolescents (10–14, 15-19), youth (20–24 or as defined), parents, teachers, health workers, community leaders, and other relevant stakeholders within Kilifi South and Chonyi Sub county.

- **Data Collection** - Develop and pilot data collection tools (surveys, interview guides, focus group discussion guides, and document reviews) aligned with end line indicators.
- **Data Analysis** - Analyze data to produce indicator-level results, cross-tabulations, and trend analysis where applicable; triangulate quantitative and qualitative findings. Produce indicator-level results and integrated findings.

### **Methodology**

The consultant will prepare the detailed research methodology for the endline after reading of the full project proposal and other relevant documents, discussion with the CHPF team led by the program manager, and in line with the requirements for the endline Evaluation in these terms of reference. The proposed methodology will go for final review by the CHPF and German doctor's team in Bonn before adoption.

The endline survey should apply both quantitative and qualitative interviews/focus group data collection methods to inform the various indicators.

The project team and other staff members of CHPF and NCMTC will support and provide information to the consultant when and where needed. In addition, NCMTC will avail students from the college who will assist with data collection as research assistants.

Data collection tools will be discussed, shared and confirmed by the CHPF team and the German Doctors team in Bonn before use.

### Deliverables

The consultant will provide:

1. Inception report with detailed methodology, work plan, and tools.
2. Data collection tools that are tailored to target groups.
3. Training and supervision of enumerators.
4. Field data collection and analysis.
5. Presentation of preliminary findings to CHPF and stakeholders.
6. Draft endline report for review.
7. Final endline report including executive summary, results against indicators, lessons learned, and recommendations.

### Proposed Timeline / Schedule

The study is expected to start in **November 2025**, with key deliverables as follows:

The first draft report findings are to be shared and discussed with CHPF SRHR team by **February 2026** and the final report is to be submitted by **30<sup>th</sup> March 2026**.

Tasks	Expected deliverable Date	Specific Dates
Share project documents with the consultant	November 2025	17 <sup>th</sup> November 2025
Desk review based on the shared project documents	November 2025 (5 days)	21 <sup>st</sup> – 23 <sup>rd</sup> November 2025
Design methods of the endline survey finalized (Inception report) and tools developed	November 2025 (5 days)	24 <sup>th</sup> – 25 <sup>th</sup> November 2025
Share Inception report and tools	November 2025	26 <sup>th</sup> November 2025
Discussion of the inception report with CHPF and German doctors	November 2025	27 <sup>th</sup> -30 <sup>th</sup> November 2025
Research assistants identified	December 2025	1 <sup>st</sup> December 2025
Training conducted & Piloting of the tools	December 2025 (1 day)	1 <sup>st</sup> December 2025
Field data collection:	December 2025 (6 days)	2 <sup>nd</sup> – 8 <sup>th</sup> December 2025

Field data collection report (draft endline report) prepared	January 2026	30 <sup>th</sup> January 2026
Discussion on the finding report with CHPF Team and German Doctors Berlin	February 2026 (10 Days)	2 <sup>nd</sup> February 2026 13 <sup>th</sup> February 2026
Endline data dissemination to stakeholders	March 2026	5 <sup>th</sup> March 2026
Prepare and submit final endline survey report; executive summary of main findings of maximum 2 pages and maximum 20 pages for the whole report (excluding annexes and references)	March 2026	16 <sup>th</sup> March 2026

### **Consultant Qualifications**

- Advanced degree in Public Health, Social and Behavioral Sciences, Demography, Statistics, M&E, or related field (masters or PhD is an added advantage)
- Minimum 7–10 years of experience in SRHR programming and research, with at least 5 years specifically in endline or impact evaluations of SRHR or adolescent health programs
- Proven experience in conducting endline or impact evaluations, preferably in SRHR.
- Demonstrated expertise in both qualitative and quantitative methods.
- Strong analytical, writing, and communication skills.
- Knowledge of Kenya’s health system and Kilifi context is an added advantage

### **Budget and Payment Schedule**

Provide a detailed budget aligned with tasks, tools development, data collection, analysis, reporting, and dissemination

### **Call for Application**

Applicants interested in this position should provide the following

- A cover letter to express interest, summarizing qualifications and fit for the profile.
- A detailed resume highlighting the work that the Consultant has undertaken, which is relevant to the assignment and preferably supported by recommendation letters for similar tasks.
- A brief technical proposal outlining the methodology approach, sampling plan, data collection tools, and a work plan/ timeframe.
- Two (2) samples of reports developed by the Consultant addressing similar issues.

Interested applicants are requested to submit their application with the reference “SRHR Endline study” clearly indicated in the email subject line to: “[recruitment@chpfund.org](mailto:recruitment@chpfund.org)”.

Deadline for application: 4<sup>th</sup> November 2025. Ideal start date: 17<sup>th</sup> November 2025 and Only shortlisted candidates will be contacted.