**WGCD COMMUNITY MEETING: ADOLESCENTS AND AGENCY & ENGAGING MEN AND BOYS**

**OCTOBER 25TH - 26TH, 2017**

**INDIA HABITAT CENTER, NEW DELHI, INDIA**

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**MEETING OBJECTIVES**

- Gain a deeper understanding of evidence and practice in building adolescent agency and engaging men and boys
- Foster substantive partnerships and linkages between WGCD partners
- Agree to 3 deliverables per learning cluster that advance the WGCD Learning Agenda, and outline preliminary workplans to achieve the deliverables

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**AGENDA AT-A-GLANCE**

**DAY 1. EVIDENCE AND COLLABORATIONS**

**OCTOBER 25**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 AM - 5:30 PM</td>
<td>Welcome</td>
</tr>
<tr>
<td></td>
<td>Update on the WGCD Learning Agenda: Adolescents</td>
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<tr>
<td></td>
<td>Plenary <strong>Girls, Power, and Change in India: The Promise of Skilling</strong></td>
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<tr>
<td></td>
<td><strong>Small Groups Session 1.</strong> Presenting Evidence, Making Connections</td>
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<td></td>
<td>Adolescents and Agency Engaging Men and Boys</td>
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<td>LUNCH</td>
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<td></td>
<td><strong>Small Groups Session 2.</strong> Presenting Evidence, Making Connections</td>
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<td></td>
<td>Adolescents and Agency Engaging Men and Boys</td>
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<td></td>
<td>Small Groups Report Out</td>
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<td></td>
<td>Overview of Day 1 and Adjourn</td>
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**DAY 2. PLANNING AND COMMITMENTS**

**OCTOBER 26**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>9 AM - 5:30 PM</td>
<td>Day 1 Recap and Overview of Day 2</td>
</tr>
<tr>
<td></td>
<td>Big Picture <strong>Influencing Global Policy and Practice for Gender Equality</strong></td>
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<tr>
<td></td>
<td><strong>Small Groups Session 3.</strong> Identifying Target Audiences &amp; Key Moments</td>
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<td></td>
<td>Adolescents and Agency Engaging Men and Boys</td>
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<tr>
<td></td>
<td>LUNCH</td>
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<tr>
<td></td>
<td><strong>Small Groups Session 4.</strong> From What to How: Workplans</td>
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<td></td>
<td>Adolescents and Agency Engaging Men and Boys</td>
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<td></td>
<td>Small Groups Report Out</td>
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<td></td>
<td>Next Steps and Evaluation</td>
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<tr>
<td></td>
<td>Adjourn</td>
</tr>
</tbody>
</table>
## IMPORTANT CONTACT NUMBERS

<table>
<thead>
<tr>
<th><strong>ICRW Asia Staff</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Amajit Mukherjee, Chief Operating Officer</td>
<td>+91-8800479004</td>
</tr>
<tr>
<td>Monica Bhalla, Office Manager</td>
<td>+91-9811557168</td>
</tr>
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<table>
<thead>
<tr>
<th><strong>India Habitat Centre</strong></th>
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<tbody>
<tr>
<td>Lodi Road, Near Air Force Bal Bharati School New Delhi</td>
<td>+91-11-24682222</td>
</tr>
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<table>
<thead>
<tr>
<th><strong>Emergency</strong></th>
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<tr>
<td><strong>Police</strong></td>
<td>100</td>
</tr>
<tr>
<td><strong>Ambulance</strong></td>
<td>102</td>
</tr>
<tr>
<td>Max Health Care, Saket (Ambulance)</td>
<td>+91-11-26515050 Press 1 for Ambulance</td>
</tr>
<tr>
<td>Air Ambulance Services</td>
<td>+91-11-23388222</td>
</tr>
</tbody>
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<tr>
<th><strong>Hospitals</strong></th>
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<tbody>
<tr>
<td>Max Health Care, Saket</td>
<td>+91-11-26515050</td>
</tr>
<tr>
<td>Medical Care (Max Healthcare-Panchsheel Park)</td>
<td>+91-11-46097200 +91-11-66114545</td>
</tr>
<tr>
<td>Apollo Hospital</td>
<td>+91-11-26825555 +91-11-26925888 +91-11-29872003/05</td>
</tr>
<tr>
<td>AIIMS</td>
<td>+91-11-26594706 +91-11-26594255 +91-11-26546595</td>
</tr>
<tr>
<td>Moolchand Hospital</td>
<td>+91-11-42000000</td>
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<tr>
<th><strong>Medical Shop (24 hrs)</strong></th>
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<tbody>
<tr>
<td>Spring Meadows</td>
<td>+91-11-41620182 +91-11-41323630</td>
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<table>
<thead>
<tr>
<th><strong>Taxi</strong></th>
<th></th>
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<tbody>
<tr>
<td>Jandour (they are our official vendor) – cost is slightly higher than other local taxi agencies but its safe</td>
<td>+91-11-24367477</td>
</tr>
</tbody>
</table>
MEETING OBJECTIVES

Gain a deeper understanding of evidence and practice in building adolescent agency and engaging men and boys

Foster substantive partnerships and linkages between WGCD partners

Agree to 3 deliverables per learning cluster that advance the WGCD Learning Agenda, and outline preliminary workplans to achieve the deliverables

AGENDA

DAY 1. EVIDENCE AND COLLABORATIONS  
OCTOBER 25  9 - 5:30 PM

<table>
<thead>
<tr>
<th>Activity</th>
<th>Lead</th>
<th>Time &amp; location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Welcome</td>
<td>Yamini Atmavilas&lt;br&gt;Bill &amp; Melinda Gates Foundation</td>
<td>9 AM Magnolia Hall</td>
</tr>
<tr>
<td>The WGCD Learning Agenda: Focusing on Adolescent Girls</td>
<td>Amy Pennington&lt;br&gt;Bill &amp; Melinda Gates Foundation&lt;br&gt;Zena Itani&lt;br&gt;ICRW</td>
<td>9:15 AM Magnolia Hall</td>
</tr>
<tr>
<td>Plenary Girls, Power and Change in India: The Promise of Skilling</td>
<td>Diva Dhar, Moderator&lt;br&gt;Bill &amp; Melinda Gates Foundation</td>
<td>9:45 - 11 AM Magnolia Hall</td>
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<tr>
<td>BREAK (15 minutes)</td>
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<tr>
<td>Introduction of Learning Cluster Sessions</td>
<td>Zena Itani</td>
<td>11:15 - 11:30 AM Magnolia Hall</td>
</tr>
<tr>
<td>• Overview of 4 sessions and group goals</td>
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<tr>
<td>• Introduce facilitation teams</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Learning Clusters Session 1. Presenting Evidence, Making Connections</td>
<td></td>
<td>11:30 - 1 PM</td>
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</tbody>
</table>
## DAY 1. EVIDENCE AND COLLABORATIONS

### FACILITATORS:
- Chisina Kapungu, ICRW
- Laura Hinson, ICRW
- Amy Pennington, BMGF

### PARTNERS:
- Wits RHI
- CARE Malawi
- Rise Up/PHI
- ZanaAfrica
- CARE Ethiopia
- Room to Read
- SWAGAA
- ICRW
- ICDDR Bangladesh
- Population Foundation of India

### FACILITATORS:
- Anne Stangl, ICRW
- Ted Rizzo, ICRW

### PARTNERS:
- Wits RHI
- CARE Malawi
- 4-H Ghana
- ICRW
- SWAGAA
- Population Foundation of India

## LUNCH (1 - 2 PM)

### LEARNING CLUSTERS SESSION 2. PRESENTING EVIDENCE, MAKING CONNECTIONS

### FACILITATORS:
- Chisina Kapungu, Laura Hinson, Amy Pennington

### BREAK (15 minutes)

### CLUSTER REPORT OUT AND REFLECTIONS
- ICRW Facilitators

### OVERVIEW OF DAY 2 AND ADJOURN
- Zena Itani

### OPTIONAL DINNER, SEVILLA RESTAURANT, THE CLARIDGES (7 PM)
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Day 1 Recap and Overview of Day 2</td>
<td>Zena Itani</td>
<td>9 AM Maple Hall</td>
</tr>
<tr>
<td>Big Picture Influencing Global Policy and Practice for Gender Equality</td>
<td>WGCD Partners, Yamini Atmavilas</td>
<td>9:15 - 10:30 AM Maple Hall</td>
</tr>
<tr>
<td>Break (15 minutes)</td>
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<td></td>
</tr>
<tr>
<td>Learning Clusters Session 3. Target Audiences &amp; Key Moments</td>
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<td>10:45 - 12:30 PM</td>
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<tr>
<td>Adolescent Agency and Girls’ Empowerment (Maple Hall)</td>
<td>Facilitators: Chisina Kapungu and Laura Hinson</td>
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<tr>
<td>Facilitators:</td>
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<tr>
<td>Engaging Men and Boys (Chinar Hall)</td>
<td>Facilitators: Anne Stangl and Ted Rizzo</td>
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<tr>
<td>LUNCH (12:30 - 1:30 PM)</td>
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<tr>
<td>Showcase WGCD Multimedia</td>
<td>WGCD Partners</td>
<td>1:30 - 2:15 PM Maple Hall</td>
</tr>
<tr>
<td>Adolescent Agency and Girls’ Empowerment (Maple Hall)</td>
<td>Facilitators: Chisina Kapungu, Laura Hinson, Amy Pennington</td>
<td></td>
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<tr>
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<td></td>
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<tr>
<td>BREAK (15 minutes)</td>
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<tr>
<td>Clusters Report Out on Workplans</td>
<td>ICRW Facilitators</td>
<td>4:30 PM Maple Hall</td>
</tr>
<tr>
<td>Feedback and evaluation</td>
<td>Zena Itani</td>
<td>5 PM Maple Hall</td>
</tr>
<tr>
<td>Adjourn</td>
<td>Amy Pennington &amp; Yamini Atmavilas</td>
<td>5:30 PM Maple Hall</td>
</tr>
</tbody>
</table>
ADITI VYAS
Technical Specialist, International Center for Research on Women
WGCD Project: Plan-It Girls: Empowerment, Employability and Entrepreneurship for Older Adolescent Girls in India
Email: avyas@icrw.org

Aditi Vyas is a Technical Specialist at ICRW’s Asia Regional office, where she manages and coordinates the Delhi Chapter of the PLAN-IT Girls program. She brings over seven and a half years of experience in thematic areas of gender, adolescents and empowerment, and education. Through her work, she has been involved in proposal writing, developing data collection tools, conducting qualitative research, qualitative data analysis, analytical writing, and developing a life-skills curriculum aimed at adolescent girls.

AKIM OSSENI
First Time Parent Project Manager, Pathfinder International Niger
WGCD Project: IMPACT au Niger: Reaching Married Adolescents
Email: AAssaniOsseni@pathfinder.org Twitter: @AssaniOsseni

Mr Akim Assani Osseni is a biostatistician epidemiologist and expert in epidemiology of intervention. He has more than 5 years’ experience in operational research as a consultant both for students in the year of thesis at the Abdou Moumouni University in Niamey and for international NGOs. Mr Akim has four consecutive years of experience implementing sexual and reproductive health projects targeting Adolescents and Youth. Previously coordinator of the project “Sexual and Reproductive Health of Youth and Adolescents Married from 10 to 24 years of the communes I and V of Niamey” in the Nigerian Association for the Family Wellness (ANBEF), Mr. Akim, is currently ”First Time Parents” project manager with Pathfinder International.

ALEM AGAZI
Sexual and Reproductive Health and Nutrition Program Coordinator, CARE Ethiopia
WGCD Project: Abdiboru Project
Email: alem.agazi@care.org

Alem Agazi is currently working for CARE Ethiopia on programs for vulnerable women and girls in rural Ethiopia. She is responsible for managing CARE Ethiopia’s health and nutrition portfolio. Improving Adolescent Reproductive Health and Nutrition in Ethiopia through Structural Solutions/Abdiboru project is under her supervision. Alem has more than 13 years of experience in managing, coordinating and implementing health and health related projects at different level as a country program manager, Ethiopian Multi-Sectoral HIV/AIDS Program and Grant Officer, HIV/AIDS Project Coordinator, HIV/AIDS Counselor, Health Service and Family Planning Expert as well as 3 years of clinical service (Patient Diagnosis and Treatment both adult and Under 5 Children, Provision of Antenatal, Delivery and Postnatal Care) in Oromia and Southern Region of Ethiopia.
AMY PENNINGTON
Program Officer of Measurement, Learning and Evaluation, Bill and Melinda Gates Foundation
WGCD Learning Agenda Partnership Bill and Melinda Gates Foundation Director
Email: Amy.Pennington@gatesfoundation.org

Amy Pennington is a Program Officer of Measurement, Learning and Evaluation on the Gender Equality team at the Bill and Melinda Gates Foundation. In this role, she facilitates learning and evidence synthesis across a diverse group of partners focused on gender equality and women and girls' empowerment. She also led on the development and launch of the Gates Foundation's model of women and girls' empowerment and is currently working to develop tools and resources on measuring empowerment for Program Officers and Partners. Prior to the foundation, Amy worked as a research assistant for the Evans School Policy Analysis and Research Group at the University of Washington, providing research and analysis support for the foundation's Agricultural Development team.

ANNE ST ANGL
Senior Behavioral Scientist, International Center for Research on Women (ICRW)
WGCD Learning Agenda Partnership ICRW Senior Technical Specialist
Email: astangl@icrw.org Twitter: @AnneStangl

Dr. Anne Stangl is a Senior Behavioral Scientist and has 14 years of global health experience in Africa, Asia and the Caribbean with a focus on qualitative and quantitative research methods, research design, statistical analysis, systematic reviews, rapid assessments and monitoring and evaluation. She has also been actively engaged in utilizing research findings to inform global policy and action. During her decade with ICRW, she has become highly knowledgeable about a range of issues pertaining to gender in development and has developed relationships with many experts working in diverse sectors. She is also experienced in providing and conceptualizing technical assistance and capacity building, as well as utilizing networks to advance learning.

ALFRED MULI
Senior Project Manager, ZanaAfrica
WGCD Project: ListenUp: Amplifying girls' voices through sanitary pads & health information
Email: alfred@zanaafrica.com Twitter: @mulislera

Alfred Muli is a Public Health, Monitoring, Learning and Evaluation Specialist with over 5 years hands-on experience in the Water Sanitation and Hygiene (WASH) and Menstrual Hygiene Management space. Alfred is currently a senior Project Manager with ZanaAfrica, managing the Nia Project: the first longitudinal study in sub-Saharan Africa to rigorously measure the independent and combined impact of sanitary pads and reproductive health education (RHE) provision on girls’ education, health, safety, and social outcomes. Prior to joining ZanaAfrica, Alfred worked with WASH United where he was the National Coordinator for Menstrual Hygiene Day in Kenya for three years. Alfred has previously worked at Kenya Medical Research Institute (KEMRI) the Ministry of Health and Impact Research and Development Organization (IRDO) on varied public health interventions spread across East Africa. Alfred continues to influence equity-focused policies in his country Kenya.
PARTICIPANT BIOS

**APPIAH KWAKU BOATENG**
Executive Director of the 4-H Ghana Program  
WGCD Project: Fifth-H-Her Project, Empowering Girls Through 4-H  
Methodology of Learning By Doing  
Email: 4hghana@gmail.com Twitter: @4hghana

As the Founder of 4-H programme in Ghana, Appiah has led rural youth development in Ghana for decades. He was the Youth Development Coordinator with the National Youth Authority for more than 27 years. Appiah currently serves as Global Board Member of the Global 4-H Network representing the Africa Region.

**BIJETRI BOSE**
Senior Research Analyst, WORLD Policy Analysis Center, UCLA  
WGCD Project: Leveraging Policies and Laws that are Pro-women and Girls  
Email: bbose@ph.ucla.edu

Bijetri Bose is an economist with expertise in statistical analysis of social policy. Bijetri works as a Senior Research Analysts at the WORLD Policy Analysis Center where she is involved in the development and analysis of globally comparative legal and policy data to inform policy debates on various topics. Prior to this, she was as a Visiting Assistant Professor at Oberlin College, OH and has also taught at several other institutions including the University of Washington, and the Northwestern University-Seattle. Bijetri was involved in each stage of the WGCD project at the WORLD Policy Analysis Center, working collaboratively with other core team members. She undertook quantitative analysis using cross-sectional survey data from India to examine the relationship between specific social determinants of health and maternal and child health (MCH) outcomes in the country.

**BONGINKOSI ZWELI NDLANGAMANDLA**
Boys for Change Project officer/ MenEngage-SD Coordinator, Swaziland Action Group Against Abuse (SWAGAA)  
WGCD Project: Empowering Girls for Health and Wellbeing  
Email: swagaa@swagaa.org.sz Twitter: @bonginkosindla1

Bonginkosi Zweli Ndlangamandla is the SWAGAA Boys for Change Project officer/ MenEngage-SD Coordinator. He works with religious and traditional leaders, men in the workplace, and school aged boys. Previously, he was the Monitoring and Evaluation Officer for SWAGAA, monitoring programs, analysing and providing guidance to project officers. Bonginkosi has also worked as a Mathematics and Information Technology teacher.

**CAITLIN CORNELIESS**
Senior Program Development Advisor, Pathfinder International  
WGCD Project: IMPACT au Niger: Reaching Married Adolescents  
Email: CCorneliess@pathfinder.org Twitter: @ccorneliess

Caitlin Cornelieiss joined Pathfinder International in 2013 and develops sexual and reproductive health programming across Africa, Asia, and the Middle East, with a focus on adolescent and youth SRH.
CATHERINE LANE  
Senior Adolescent and Youth Advisor, Pathfinder International  
WGCD Project: IMPACT au Niger: Reaching Married Adolescents  
Email: clane@pathfinder.org  

Cate Lane is the Senior Adolescent and Youth Advisor with Pathfinder International. She has over 25 years of experience in designing, implementing, and monitoring ASRH interventions in the US, Jamaica and several countries in sub Saharan Africa. Prior to joining Pathfinder, she was the Youth Advisor in USAID’s office of Population and Reproductive Health, where she provided technical guidance to global and mission level ASRH activities, helped to develop the Agency Youth in Development Policy and contributed to the design of the Agency Global Youth Mechanism, YouthPower.

CHISINA KAPUNGU  
Senior Gender and Youth Specialist, International Center for Research on Women  
WGCD Learning Agenda Partnership ICRW Senior Technical Specialist  
Email: ckapungu@icrw.org  

Dr. Chisina Kapungu is the Senior Gender and Youth Specialist at the International Center for Research on Women. In this role, she provides technical oversight to research and evaluation projects focused on gender, youth development and adolescent health internationally. Dr. Kapungu has nearly 15 years of experience as a clinical psychologist, community-based researcher and program developer with special expertise in adolescent health, sexual and reproductive health and HIV/AIDS. Prior to joining ICRW in 2015, Dr. Kapungu was an assistant professor in the department of obstetrics and gynecology at the University of Illinois at Chicago where she served as principal investigator of a research study funded by the National Institute of Mental Health (NIMH) aimed at the evaluation of a culturally sensitive and faith-centered HIV prevention and health promotion program for African American girls and their mothers. Dr. Kapungu also managed maternal and child health projects in Ghana and Zimbabwe.

CLARENCE YAH  
Senior Researcher in Implementation Science, WITS Reproductive Health & HIV institute, Faculty of Health Sciences, University of the Witwatersrand, South Africa  
WGCD Project: Yes! Girls Achieve Power (GAP) year program  
Email: cliodintilhac@gatesfoundation.org  

Dr. Clarence Yah is a Senior Researcher in Implementation Science at the WITS Reproductive Health & HIV Institute, Faculty of Health Sciences, University of the Witwatersrand, South Africa. He has wide experience in HIV epidemiology. He has work as project manager for NIH, CDC, ILO and MAC AIDS-funded collaborative research of HSRC, Wits RHI, Emory and Johns Hopkins Universities and DTHF to test the feasibility, acceptability, efficacy and effectiveness of combination of HIV prevention packages among vulnerable populations to address the disproportionate nature of HIV and STIs epidemics among key population across sub Saharan Africa.
DENISE DUNNING
Founder and Director, Rise Up
WGCD Project: ENGAGE (Enabling Girls to Advance Gender Equity)
Email: ddunning@riseuptogether.org Twitter: @RiseUp_Together

Dr. Denise Dunning is the Founder and Executive Director of Rise Up, which advances health, education, and equity globally. Rise Up’s work in 14 countries integrates advocacy, innovative programming, and strategic partnerships with the United Nations and the Obama Administration. Denise teaches in the University of California San Francisco’s Masters of Global Health program, and is a Board Member of the Public Health Institute and EngenderHealth. She previously worked for the David and Lucile Packard Foundation and the Rockefeller Foundation, and served as a Fulbright Scholar with the Inter-American Development Bank in Honduras.

CLARISSA BRUNDAGE
Associate Strategy Officer, Strategy, Innovation & Impact, Bill and Melinda Gates Foundation
WGCD Learning Agenda Gates Program Officer
Email: Clarissa.Brundage@gatesfoundation.org Twitter: @clarissalordb

Clarissa Lord Brundage is a Program Officer, focused on adolescents and youth, on the Family Planning team at the Bill & Melinda Gates Foundation. Clarissa’s portfolio includes very young adolescents and developing innovative solutions to increase adolescent and youth uptake of SRH services and information. Prior to working at the foundation, Clarissa interned with Health Alliance International and conducted her graduate thesis on public-sector family planning services in the northern region of Côte d’Ivoire. Prior to graduate school, Clarissa worked on reproductive health and family planning projects at PATH including HPV vaccine demonstration and introduction of the SILCS Diaphragm and the Woman’s Condom. Clarissa served in the Peace Corps (Togo 2006-2008) as a Girls’ Education & Empowerment volunteer.

CLIO DINTILHAC
Associate Strategy Officer, Strategy, Innovation & Impact, Bill and Melinda Gates Foundation
WGCD Learning Agenda Gates Program Officer
Email: clio.dintilhac@gatesfoundation.org

Clio Dintilhac is a strategy officer at the Bill and Melinda Gates Foundation and works for their education team. She has also worked at the Jakarta office of The Boston Consulting Group and The Tony Blair Africa Governance Initiative. She interned at the Directorate General for Economic and Financial Affairs at the European Commission.
**DIVA DHAR**  
*Program Officer of Measurement, Learning and Evaluation, Bill & Melinda Gates Foundation India*  
WGCD Learning Agenda Gates Program Officer  
**Email:** Diva.Dhar@gatesfoundation.org

Diva is a Program Officer with the Measurement, Learning and Evaluation team at the Bill & Melinda Gates Foundation in India. Her portfolio includes research and evaluations on gender and youth, child health and nutrition as well as health systems design. She is an impact evaluation specialist, and is also leading evaluations in gender and education. Diva was formerly the Associate Director at J-PAL South Asia for Evaluation Capacity Building and the Program Director of the Centre of Learning on Evaluation and Results (CLEAR) in South Asia, where she worked on strengthening M&E capacity in the region and promoting evidence based decision-making. Previously, she worked for J-PAL and Innovations for Poverty Action (IPA) on several impact evaluations dealing with governance, education, gender and urban services in India, Morocco and Bangladesh. She has also worked as consultant for the World Bank, Planning Commission and other non-profit organizations in India.

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**DOMITILLE NTACOBAKIMVUNA**  
*Team Leader, CARE Burundi*  
**WGCD Project:** A Win-Win for Gender, Agriculture and Nutrition: Testing a Gender-Transformative Approach from Asia in Africa  
**Email:** Domitille.Ntacobakimvuna@care.org

Domitille Ntacobakimvuna is Team Leader for “A Win-Win for Gender, Agriculture and Nutrition: Testing a Gender-Transformative Approach from Asia in Africa” in CARE Burundi. She has been with CARE for 13 years in several roles M&E and Project Management, and gender and learning. Domitille is also a professional Gender and Diversity trainer with expertise in action research and participatory research methodologies.

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**FARHANA SULTANA**  
*Research Investigator, International Center for Diarrheal Disease Research Bangladesh*  
**WGCD Project:** Piloting menstrual hygiene management interventions among urban and rural schools in Bangladesh  
**Email:** farhana.sultana@icddrb.org

Farhana Sultana has over a decade of public health experience in Bangladesh. She has worked with JICA and BRAC on maternal health, at James P. Grant School of Public Health, BRAC University on violence against marginalized women and HIV project, and at the World Bank on a sanitation project. She is a Research Investigator at icddr,b and a Senior Teaching Fellow at the James P. Grant School of Public Health, BRAC University. Her current research interests include handwashing behavior change, water treatment, measuring stigma, academic performances and school attendance, respiratory hygiene, menstrual hygiene and exploring low-cost innovative technologies to improve health in low income countries.
PARTICIPANT BIOS

GARY L. DARMSTADT
Associate Dean for Maternal and Child Health, and Professor of Neonatal and Developmental Medicine in the Department of Pediatrics at Stanford University
WGCD Project: Development of a five-paper Lancet Series on Gender Equality and Health
Email: gdarmsta@stanford.edu

Gary L. Darmstadt, MD, MS, is the Principal Investigator for the BMGF/UAЕ funded project to develop a five-paper Lancet Series on Gender Equality and Health, with a focus on associations between gendered social norms and adolescent health behaviors and outcomes. Dr. Darmstadt is Associate Dean for Maternal and Child Health, and Professor of Neonatal and Developmental Medicine in the Department of Pediatrics at Stanford University. At Stanford, he is Co-Director for Global Pediatric Research and is developing programs centered around the use of gender-related data to inform program design and policy dialogue. Previously Dr. Darmstadt was Senior Fellow in the Global Development Program at the Bill & Melinda Gates Foundation (BMGF), where he led a cross-foundation initiative on Women, Girls and Gender, assessing how addressing gender inequalities and empowering women and girls leads to improved gender equality as well as improved health and development outcomes. Prior to this role, he served as BMGF Director of Family Health. Darmstadt was formerly Associate Professor and Founding Director of the International Center for Advancing Neonatal Health in the Department of International Health at the Johns Hopkins Bloomberg School of Public Health, and Senior Research Advisor for the Saving Newborn Lives program of Save the Children-US.

GYWN HAINSWORTH
Senior Director of Development, University of California San Diego
WGCD Learning Agenda Gates Program Officer
Email: Gwyn.hainsworth@gatesfoundation.org

Gwyn Hainsworth has over 20 years of experience in sexual and reproductive health and rights (SRHR), adolescents and youth, and gender working across 16 countries in Sub-Saharan Africa, Asia, and the Caribbean. Gwyn recently joined the Bill and Melinda Gates Foundation as their Senior Program Officer for Adolescents and Youth, where she provides leadership and strategic direction for new and existing investments on adolescents and youth. She also supports efforts to integrate gender equality and empowerment within the Foundation’s family planning strategy with a focus on adolescents. Previously, Gwyn played a dual role at Pathfinder International. As Deputy Director of Technical Services, she contributed to the overall technical direction of Pathfinder’s global SRHR portfolio as well as helped set strategic priorities for the unit. As Senior Advisor for Adolescent Sexual and Reproductive Health and Gender, she provided technical leadership in the areas of adolescent and youth SRHR and gender, including youth-friendly service delivery, prevention and mitigation of child, early and forced marriage, and gender and social norm change. Prior to working at Pathfinder, she held positions at Women's Rights International and Massachusetts General Hospital focused on addressing gender-based violence.
PARTICIPANT BIOS

JACQUELINE NINTUNZE
Sexual and Reproductive Health Team Leader, CARE Burundi
WGCD Project: A Win-Win for Gender, Agriculture and Nutrition: Testing a Gender-Transformative Approach from Asia in Africa
Email: Jacqueline.Nintunze@care.org

Dr. Jacqueline Nintunze has over a decade of experience, currently as Sexual and Reproductive Health Team Leader for CARE Burundi. She manages a 5 years youth and adolescent SRH project that is implemented by 6 local organizations. Previously, she worked at the Burundian Ministry of Health as a medical advisor and a Deputy Director of National Integrated Program for Tropical Neglected Diseases. She was on staff at the Neuropsychiatric Center, and taught at 3 local universities.

JENNIFER YORE
Senior Program Manager for the Center on Gender Equity and Health (GEH), at the University of California, San Diego
WGCD Project: EMERGE Project
Email: jyore@ucsd.edu Twitter: @GEH_UCSD

Jennifer Yore is the Senior Program Manager for the Center on Gender Equity and Health (GEH), at the University of California, San Diego. She is currently responsible for overseeing the day-to-day operation of GEH and Dr. Anita Raj's domestic and international research project development and implementation, as well as manuscript review, proposal and report generation, fiscal oversight and development efforts. She has experience managing projects in maternal and child/reproductive health, gender based violence, HIV/AIDS, and tobacco prevention and control.

LAURA HINSON
Social and Behavioral Scientist, International Center for Research on Women
WGCD Learning Agenda Partnership ICRW Senior Technical Specialist
Email: lhinson@icrw.org Twitter: @LauraHinson23

Laura Hinson is a social and behavioral scientist at ICRW. In this role, she works on a variety of research projects on women's and girls' sexual and reproductive health. She has more than seven years of experience in research and evaluation, with specific expertise in family planning, adolescents and gender. She has worked with multi-lateral institutions, foundations, and international and local NGOs, including the World Bank, USAID, the Gates Foundation, Georgetown IRH, the Society for Family Health in Zambia, Population Services International, and Women Care Global. Previously, Laura worked with the Gates Institute for Population and Reproductive Health, Advance Family Planning, and FHI360. Laura also previously worked at FHI360 and co-led the Honduran Health Alliance. She has lived and worked in South America, and in recent years has worked exclusively in Africa and Asia.
LINDIWE MHLANGA
Project Manager, Swaziland Action Group Against Abuse (SWAGAA)
WGCD Project: Empowering Girls for Health and Wellbeing
Email: eghwmanager@swagaa.org.sz

Lindiwe Gcinaphi Mhlanga is currently working as a Project Manager- Empowering Girls for Improved Health and Wellbeing (EGHW). From 2012 – 2016, Lindiwe successfully led a 3 country operational research project to assess the efficacy of the engagement of community leaders, community days and community peer groups to increase the demand for, uptake of, and retention of HIV positive pregnant/postpartum women in MCH/PMTCT with male involvement.

MELISSA GILLIAM
Ellen H. Block Professor of Health Justice at the University of Chicago
WGCD Project: Kissa Kahani
Email: mgilliam@bsd.uchicago.edu Twitter: @MelissaGilliam1

Dr. Melissa Gilliam is the Ellen H. Block Professor of Health Justice at the University of Chicago and the Vice Provost for Academic Leadership, Advancement, and Diversity. Dr. Gilliam is the founder and director of Ci3, a research center at the University of Chicago addressing the health of adolescents using methods such as technology, design, and narrative. Her clinical focus is in pediatric and adolescent gynecology and family planning. Melissa is the PI on Kissa Kahani a project conducted in Lucknow, Uttar Pradesh using narrative and design with adolescents to understand gender and develop youth-informed interventions.

NANDITA BHAN
Research Scientist – India at the Center on Gender Equity and Health at UC San Diego
WGCD Project: EMERGE Project
Email: nandita.gehindia@gmail.com

Nandita Bhan is a Research Scientist at the Center on Gender Equity and Health at UC San Diego, based in Delhi. She works on EMERGE (PI: Prof Anita Raj), an initiative funded by BMGF on developing rigorous measurement science on gender equality and empowerment (GE/E) for research and field based program monitoring and evaluation. Her work with EMERGE focuses on research and capacity building on measurement principles and methodology, particularly psychometrics, in the evaluation of existing measures and collaborative engagement with Indian partners on measures development, methodological gaps and training. She is also engaged in research on adolescents, and in understanding the enablers and barriers to adolescent programming in India.
NEETU JOHN
Sexual and Reproductive Health Specialist, International Center for Research on Women
WGCD Project: Promoting Female Empowerment at the Household Level with Family Planning Use, Financial Literacy and Gender Socialization Education Among Couples in Ibadan, Nigeria
Email: njohn@icrw.org

Dr. Neetu A. John is a Sexual and Reproductive Health Specialist at ICRW. In this role, she manages and provides technical assistance to a variety of research projects, designs and executes research studies and impact evaluations, and conducts data analysis. Dr. John is a Population and Health Scientist with eight years of experience in international and domestic public health research and programs, with a focus on sexual and reproductive health and its intersection with gender, socioeconomic disparities and broader developmental processes. Prior to joining ICRW, Neetu was a post-doctoral fellow at the Bill and Melinda Gates Institute for Population and Reproductive Health, Johns Hopkins Bloomberg School of Public Health, where she conducted research on couples and their fertility and contraceptive behaviors, as well as examined the pathways by which contraceptive use can empower women.

NINI MEHROTRA
Senior Program Manager, Girls Education Program, Room to Read India
WGCD Project: First Girls’ Education Life Skills Evaluation in a Developing Country Context
Email: Nini.Mehrotra@roomtoread.org

Nini has worked with various organizations for over 13 years in areas of gender, education and governance. Her experience brings together a strong grassroots understanding and technical expertise on the issue of gender and girls’ education. She is currently serving as the Senior Program Manager at Room to Read, having been with the organization since 2015.

NISHANT SRIVASTAVA
Senior Program Officer, Girls Education Program, Room to Read India
WGCD Project: First Girls’ Education Life Skills Evaluation in a Developing Country Context
Email: Nishant.Shrivastava@roomtoread.org Twitter: @nishant__bhopal

Nishant is a Senior Program Officer for Girls’ Education Program at Room to Read India Trust, where he leads the implementation of Room to Read India’s intervention Girls’ Education Program. He has been working in the development sector for the over 13 years. His primary area of work has been in the field of school education, gender and adolescent issues. During this time, he worked closely with government system and INGOs like UNICEF on monitoring and implementing large scale programs with teachers, teacher educators and school administrators on various aspect of improving quality of school education.
PARTICIPANT BIOS

PILAR PACHECO  
Program Officer, Office of the President - Global Development Division, Bill & Melinda Gates Foundation  
WGCD Learning Agenda Gates Program Officer  
Email: pilar.pacheco@gatesfoundation.org  
Twitter: @ppacheco

Pilar Pacheco, a program officer of the Office of the President in the Global Development Division, joined the Bill and Melinda Gates Foundation in 2011. She spent her first 5 years at the foundation as a Program Officer in the Global Libraries program, overseeing a portfolio of investments aimed at improving access to information and opportunities for development of individuals and communities in Vietnam, India, Brazil, Chile, and Colombia. Today, she supports teams across the Global Development Division, including the Maternal, Newborn, and Child Health team where she manages a portfolio of investments focused in low-income and low-medium income countries. Pilar has worked in the fields of education, ICT4D, and international development for over 25 years and has experience in strategic planning, development and implementation large-scale programs, gender analysis, advocacy strategies, and development and management of communities of practice and leadership programs.

POONAM MUTTREJA  
Executive Director of the Population Foundation of India (PFI)  
WGCD Project: Combating Gender-Based Violence Amongst the Youth in India Through a Celebrity-Centered Digital Media Edutainment Intervention  
Email: pmuttreja@populationfoundation.in

Poonam Muttreja is the Executive Director of the Population Foundation of India (PFI), a non-profit organisation that focuses on shifting the current thinking and programmes on family planning to empowering people, especially women, to take decisions regarding their health, sexuality and well-being. Poonam has more than 35 years of experience in the socio-development sector. Before joining PFI, Poonam worked with the McArthur Foundation as India Country Director where she was responsible for the Foundation’s grants in population and development issues. An innovator in the field of development, in the earlier stage of her career Poonam co-founded organizations in the areas of social justice (SRUTI), craft/livelihood (DASTKAR) and programmes on leadership (Founder Director of the Ashoka Foundation, India), and in the field of women’s health. Poonam is spearheading and providing creative and executional supervision to PFI’s digital campaign Bas Ab Bahut Ho Gaya (Enough is Enough) to end violence against women and girls (VAWG).

PRABHLEEN TUTEJA  
Partner Management and Program Design, International Center for Research on Women  
WGCD Project: Plan-It Girls: Empowerment, Employability and Entrepreneurship for Older Adolescent Girls in India  
Email: ptuteja@icrw.org

Prabhleen Tuteja has been working on advancing gender justice and violence against women through different programs and campaigns largely in northern region of the country for the last seven years. Prior to her joining ICRW, she worked with Jagori, a feminist training and resource center and Magic Bus in Delhi. She was a Program Manager for the Safer Cities Initiative and has an experience of developing community based intervention models in rural and urban settings. She has been a trainer on gender issues for community women, peer educators, and youth activists. She also works closely with government officials including the Delhi Police and Delhi Transport Corporation as a gender trainer. For Plan It Girls program, Prabhleen is a government liaison, and manages partners and program design.
PRERNA KUMAR  
**Senior Technical Specialist, International Center for Research on Women**  
**WGCD Project:** Plan-It Girls: Empowerment, Employability and Entrepreneurship for Older Adolescent Girls in India  
**Email:** pkumar@icrw.org  

Prerna Kumar has over 13 years of experience in social sciences research. At ICRW, she’s leading project Plan-It Girls which is an intervention research project that aims to implement and test the effectiveness of a curriculum that will enable young girls to make an effective transition from education to employment within an ecosystem approach of creating a positive environment through key stakeholders. She has had extensive experience of research, program evaluation, policy review, behavior change communication, capacity building and advocacy with organizations like Johns Hopkins University; BBC Media Action; International Planned Parenthood Federation; Clinton Health Access Initiative; Asian Forum of Parliamentarians on Population and Development; Ernst and Young; Action Aid; and Tata Institute of Social Sciences.

RAVI VERMA  
**Director for the International Center for Research on Women, Asia Regional Office**  
**WGCD Project:** Plan-It Girls: Empowerment, Employability and Entrepreneurship for Older Adolescent Girls in India  
**Email:** rverma@icrw.org  

Ravi Verma is Regional Director for ICRW’s Asia Regional Office in New Delhi, India. Over the past three decades, he has worked on issues of men, masculinities, male sexual health and gender equality as they relate to violence against women, reproductive health including family planning and HIV/AIDS in India and other Asian countries. He has published extensively on these issues in both Indian and international journals. Ravi also serves as Chair of the Indian National Technical Resource Group on Stigma and Vice Chair of the Indian National AIDS Control, Ethics Review Committee, as well as sits on advisory committees on the government’s response to child marriage, gender-based violence and adolescent health. He served as a member of High Level Committee on the Status of Women (HLCSW), Government of India and the Rights & Empowerment working group of the FP2020 Initiative.

SANGHAMITRA SINGH  
**Senior Manager, Knowledge Management and Partnerships, Population Foundation of India**  
**WGCD Project:** Combating Gender-Based Violence Amongst the Youth in India Through a Celebrity-Centered Digital Media Edutainment Intervention  
**Email:** sanghamitra@populationfoundation.in  

Sanghamitra Singh is a Health Scientist and has extensive experience in mentoring, training, and managing diverse researchers. As PFI’s Senior Manager, Knowledge Management and Partnerships, Sanghamitra plays a key role in leveraging key findings and communication material from the Bas Ab Bahut Ho Gaya (Enough is Enough) campaign to mobilize key stakeholder base and engage them in our GBV initiatives. She also works closely with the ED in strengthening and expanding partnerships with key stakeholders. Prior to joining PFI, Sanghamitra worked with GWU, NIH Maryland, Federal Drug Administration (FDA) Maryland, as well as Ajinomoto Corporation, Tokyo.
PARTICIPANT BIOS

SARAH ECKHOFF
Senior Impact Measurement Advisor on the Gender Justice team at CARE USA
WGCD Project: Malawi Umodzi + Uganda Digital Sub-Wallets
Email: sarah.eckhoff@care.org

Sarah Eckhoff currently serves as the Senior Impact Measurement Advisor on the Gender Justice team at CARE USA. In her role Ms. Eckhoff provides project-specific impact measurement, evaluation, and learning technical assistance across CARE USA’s portfolio of gender transformative interventions, including two WGCD projects in Malawi and Uganda. Ms. Eckhoff also leads the impact measurement initiative for CARE International’s gender equality and gender-based violence (GBV) work globally. Prior to her current role at CARE, Sarah worked in global health-, development-, and gender-related roles for over seven years both domestically and abroad working in various project implementation, management and systems development roles as well as across technical areas including adolescent and youth sexual reproductive health, gender integration, and GBV prevention and response.

SRABANI MITTAL
Principal Investigator, Child in Need Institute (CINI), Kolkata
WGCD Project: Couple Power Project in Jharkhand, India
Email: srabani@cinindia.org

Srabani Mittal a doctor and the Principal Investigator of WGCD project ‘Couple Power’ in Jharkhand, India. She leads all project related planning, implementation and ensuring quality research work, as well as advocacy and coordination with various stakeholders involved in family planning. She has held roles in government and NGOs, and as an international consultant to WHO-SEARO on cervical cancer screening and prevention programs, and clinical training initiatives.

SUCHI BANSAL
Research Specialist, Center for Interdisciplinary Inquiry and Innovation in Sexual and Reproductive Health (Ci3)
WGCD Project: Kissa Kahani
Email: Sbansal@bsd.uchicago.edu

Suchi Bansal, MPH is a Research Specialist at the Center for Interdisciplinary Inquiry and Innovation in Sexual and Reproductive Health (Ci3) at the University of Chicago and senior researcher for Ci3’s international health portfolio including project Kissa Kahani. Ms. Bansal has extensive experience with adolescent sexual and reproductive health issues in developing countries, specifically in South and Southeast Asia. Her research interests include prevention of teen pregnancy, improving menstrual health and hygiene, and family planning.
TAKONDWA KALIWO
Programs Advisor, Girls Empowerment Network (GENET)
WGCD Project: ENGAGE- Enabling Girls to Advance Gender Equity
Email: takondwatk@gmail.com

Miss Takondwa Kaliwo works with a local Malawian NGO called Girls Empowerment Network (GENET) as a Programs Advisor. GENET is a local young women’s rights organization and a grassroots movement of girls and young women that works to support and improve the wellbeing of vulnerable and marginalized girls in Malawi. Through the ENGAGE project and in collaboration with partner RISE UP, GENET empowers girls and young women to advocate for gender equality and justice. Her professional recognitions include the Moremi Initiative Fellow (2009) awarded to 25 upcoming women leaders with proven innovativeness and outstanding in their carriers.

TED RIZZO
Program Associate, Global Health Youth and Development, International Center for Research on Women
WGCD Learning Agenda Partnership Coordinator
Email: trizzo@icrw.org Twitter: @A_Ted_Rizzo

Ted is a program associate at the International Center for Research on Women (ICRW), where he works in the Global Health, Youth and Development portfolio. Prior to joining ICRW, Ted was a middle school history teacher at Success Academy Charter School’s Harlem Central campus and a U.S. Peace Corps Volunteer in Morocco. In Morocco, Ted served in Tighssaline, a small community in the Middle Atlas Mountains, where he worked on projects focused on girls’ education, environmental education, sexual harassment and asset based positive youth development.

THOKOZANI MWENYEKONDE
Project Manager, CARE Malawi
WGCD Project: Umodzi - Men, Women, Boys and Girls in Alliance to Achieve Gender Equality
Email: thokozani.mwenyekonde@care.org

Ms. Thokozani Mwenyekonde is an experienced researcher who prior to joining CARE Malawi worked with Save the Children International on an operational research project testing the use of male motivators to motivate younger married men to use family planning. She has worked with CARE Malawi for seven years on two action-research projects. She led a five-year research project to develop a comprehensive understanding of the linkages between poverty, HIV/AIDS and food security in the Malawi context. Ms Mwenyekonde has vast experience coordinating data collection and management phases of quasi-experimental and experimental designs. Her work experience has mainly focused on management of field-based surveys, providing technical guidance in quality assurance and control in field conventional and electronic data collection techniques, management and entry, and designing data collection tools.
**PARTICIPANT BIOS**

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**WILLETTA WAISATH**  
Senior Research Analyst at the WORLD Policy Analysis Center (WORLD) at the Fielding School of Public Health at the University of California, Los Angeles (UCLA)  
WGCD Project: Leveraging Policies and Laws that are Pro-women and Girls to Decrease Inequities in Health and Development Outcomes  
Email: wwaishath@ph.ucla.edu

Willetta Waisath is a Senior Research Analyst at the WORLD Policy Analysis Center (WORLD) at the Fielding School of Public Health at UCLA. At WORLD, Willetta guides the development of law and policy databases, contributes to analysis, and supports the translation and dissemination of policy data to diverse stakeholders. For the WGCD project focused on “Leveraging Policies and Laws that are Pro-women and Girls to Decrease Inequities in Health and Development Outcomes,” Willetta provided project leadership and served as the principal researcher for the qualitative studies in India. Prior to WORLD, she worked in a range of quantitative and qualitative research projects including: access to early childhood care and education, health needs assessments, reproductive health education, and others.

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**YAMINI ATMAVILAS**  
Lead, Communities and State Health Systems Measurement and Evaluation, Bill and Melinda Gates Foundation India  
WGCD Learning Agenda Gates Program Officer  
Email: Yamini.Atmavilas@gatesfoundation.org  
Twitter: @yaminiyaminina

Yamini Atmavilas is part of the Measurement, Learning, and Evaluation Team at the India Country Office of the Bill & Melinda Gates Foundation. She leads the evaluation of the foundation’s work with women’s collectives and community-based health and development, and of the foundation’s work on health systems strengthening for MCH and Nutrition in Bihar. In her role, she manages a comprehensive and complex evaluation portfolio of grants, and facilitates evidence-based decision-making on quality of public service delivery, and reproductive, maternal and child health, nutrition, empowerment and well-being, cost effectiveness, and drivers of change in the foundation’s large multi-sectoral programs. Yamini is also fostering innovations in measurement such as measurement of motivation and work climate, time-use and time-stress and poverty, and contextualized poverty and asset measures. She has worked in previous roles on gender data, time use, evaluation design, building gender-integrated measurement systems and indicators, capacity-building of statistical systems, and gender and equity-focused mainstreaming including gender budgeting.

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**ZENA ITANI**  
Knowledge Management Specialist, International Center for Research on Women  
WGCD Learning Agenda ICRW Project Director  
Email: zitani@icrw.org  
Twitter: @zenaitani

Zena joined ICRW as the WGCD Learning Agenda Project Director and Knowledge Management Specialist in August 2017. She came to ICRW after working for the International Rescue Committee in Amman, Jordan as their Middle East Regional Information Officer. That role took her to Lebanon, Iraq, and Syria to support program teams with multimedia content collection, training and facilitation, and information management. Prior to working in the Middle East, Zena held government and NGO positions in the US public health system for over a decade, providing training and technical assistance to community implementers delivering mental health, addiction recovery, and sexual health services in minority and immigrant communities.
<table>
<thead>
<tr>
<th>Organization:</th>
<th>4-H Ghana</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Project Name:</strong></td>
<td>The Fifth H: Her – Empowering Girls through 4-H’s Methodology of ‘Learning by Doing’</td>
</tr>
<tr>
<td><strong>Project Activities:</strong></td>
<td>“The Fifth H: Her – Empowering Girls through 4-H’s Methodology of ‘Learning by Doing’” seeks to assist young girls in Ghana between the ages of 8-25 in schools and communities. This project applies Positive Youth Development Theory through schools and community 4-H clubs to enable girls together with their male counterparts change their economic and educational status through the acquisition of life skills and livelihood skills by positioning girls and boys together to accomplish common goals. Multiple sectors are combined in this theory of change – agricultural development, nutrition, gender and reproductive health – in order to holistically empower young girls in- and out-of-school.</td>
</tr>
<tr>
<td><strong>Research study design:</strong></td>
<td>Participant survey</td>
</tr>
</tbody>
</table>
| **Key findings to date:** | 1. Positioning girls and boys side by side leads to the exhibition of leadership roles, goal setting abilities, and problem solving skills.  
2. Gender awareness creation through the use of gender manuals, posters and the facilitation of gender dialogues by young people in their own communities positively builds their agency and mitigate negative gender norms and stereotypes.  
3. Economic empowerment for girls and boys through micro project implementation leads to proper control over assets and resources. |
<table>
<thead>
<tr>
<th><strong>Organization:</strong></th>
<th><strong>CARE Burundi</strong></th>
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<tbody>
<tr>
<td><strong>Project Name:</strong></td>
<td><strong>A Win-Win for Gender, Agriculture and Nutrition: Testing a Gender-Transformative Approach from Asia in Africa</strong></td>
</tr>
<tr>
<td><strong>Partner(s):</strong></td>
<td>Great Lakes Inkingi Development, University of Burundi, Réseau Burundi 2000 Plus, and Africa Gender Center</td>
</tr>
<tr>
<td><strong>Meeting Participants:</strong></td>
<td>Domitille Ntacobakimvuna, Team Leader Jacqueline Nintunze, Sexual and Reproductive Health and Rights Leader</td>
</tr>
<tr>
<td><strong>Project Activities:</strong></td>
<td>The project is testing two key approaches in the agriculture sector: a gender-transformative model (the “EKATA”- Empowerment through Knowledge and Transformative Action- model) for gender equality, and a typical gender-mainstreamed approach (“Gender-Light” model) in which basic gender activities are integrated into a program that has a principle focus and measures of success on women’s economic empowerment through agriculture and micro-enterprise.</td>
</tr>
</tbody>
</table>
| **Research study design:** | The key research question is: what is the added value, and what are the associated costs, of applying a gender transformative approach within a livelihood intervention, in terms of accelerating lasting transformations in gender equality, food security and economic well-being? A quasi-experimental approach will test the impacts of the Gender Light and EKATA models against a control. A multi stage cluster sampling technique was used to randomly select collines. These 2 treatments and control were randomly allocated at the collines level:  
  • Village Savings and Loan Association (VSLA) + Livelihoods skills and market access (Control)  
  • VSLA + Livelihoods skills and market access + Gender Light (Treatment 1)  
  • VSLA + Livelihoods skills and market access + EKATA (Treatment 2) |
| **Key findings to date:** | 1. % of women participating who demonstrate increased control over household decisions: 62.9% of the women made input into most or all the decisions household care work  
  2. % of women who demonstrate increased autonomy (including self-confidence, communication skills): 8.8% of women reported some or full autonomy on the use of household income  
  3. Evidence of more equitable social norms and practices (i.e., non-tolerance of gender-based violence): 38.4% of women respond that they were conformable most of the time to inform their spouses when they disagreed with them |
<table>
<thead>
<tr>
<th>Organization:</th>
<th>CARE Ethiopia</th>
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<tbody>
<tr>
<td>Project Name:</td>
<td>The Abdiboru Project: Improving Adolescent Reproductive Health and Nutrition in Ethiopia through Structural Solutions</td>
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<tr>
<td>Partner(s):</td>
<td>Addis Continental Institute of Public Health</td>
</tr>
<tr>
<td>Meeting Participants:</td>
<td>Alem Agazi, SRH and Nutrition Program Coordinator</td>
</tr>
<tr>
<td>Project Activities:</td>
<td>CARE Ethiopia is implementing a program targeting adolescent girls ages 10 to 14 in four districts in West Hararghe, Ethiopia with interventions aimed at increasing their agency and improving their health and development outcomes. The program has three study arms with distinct approaches for comparison. The first is a control, the second works on the government level to provide life skills to girls in schools using existing girls’ groups and the third combines the government level approach with community social norm change interventions. CARE hopes to leverage comparisons between these three arms to improve decision making about investments and program design to more effectively advance adolescent girls’ empowerment in Ethiopia.</td>
</tr>
<tr>
<td>Research study design:</td>
<td>Quasi experimental mixed methods design, including focus group discussions using vignettes.</td>
</tr>
<tr>
<td>Key findings to date:</td>
<td>The baseline for the Abdiboru project included study of 3 social norms around girls’ early marriage, household food allocation, and education. CARE used its Social Norms Analysis Plot (SNAP) framework to develop and analyze qualitative vignette data to explore norms presence, strength, and influence of norms on behavior. The study suggests social norms around girls’ early marriage are particularly rigid, with few exceptions, and clear and strong anticipated social sanctions against girls’ and their parents in cases on nonconformity. The study also found that adolescent girls themselves are often the ones making the decision to marry, and are strongly influenced to do so by their peers. Exceptions to norms were identified as possible “cracks” or weaknesses in norms, and considered as opportunities to leverage for program design. Sample exceptions include: “Girls can refuse marriage proposal if they are strong to continue their education and if they could mobilize support from school to convince their parents,” and “Married girls can only continue their education if the husband allows.” Girls are expected to eat after males in the household, and expect social sanctions if they do not: “Girls/wives who eat before males would be blamed, insulted, considered as selfish, not worthy, stealers and norm breakers.”</td>
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<tr>
<td>Organization:</td>
<td>CARE Malawi</td>
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<tr>
<td>Project Name:</td>
<td>Umodzi – Men, Women, Boys and Girls in Alliance to Achieve Gender Equality</td>
</tr>
<tr>
<td>Partner(s):</td>
<td>Center for Development Management</td>
</tr>
</tbody>
</table>
| Meeting Participants: | Thokozani Ng’ombe-Mwenyekonda, Project Manager  
Sarah Eckhoff, Senior Impact Measurement Advisor, Gender |
| Project Activities: | • Conducted formative research to identify key gender issues and their negative effect on girls in communities of Kasungu District.  
• Integration of a Gender Conscious Practice (GCP) curriculum in Life Skills and Sex Education based activities carried out in teen clubs in 17 primary schools of Suza Educational Zone in Kasungu. Sessions are delivered by trained teachers (matrons and patrons of teen clubs) in the GCP curriculum.  
• Intergenerational discussions between community-based male champions and adolescent boys from Teen Clubs, Mother Groups and adolescent girls from Teen Clubs. |
| Research study design: | Proof-of-concept to test the gender-synchronized approach for gender equality. Real time learning and a robust monitoring system facilitate real-time design modifications.  
Impact assessment – a comparative research design to test the effectiveness of the intervention on adolescent girls’ expected outcomes. A longitudinal study with a mixed methods approach: quantitative and qualitative, pre-and post-intervention assessment. |
| Key findings to date: | • To date, most patrons/matrons have been innovative in the delivery of GCP sessions, engaging the community in GCP activities (e.g. the mopping competition) and using quizzes. Some schools emulated while others used innovative ideas such as quizzes, soccer games, drama to showcase learnings to the community. Consequently, the intervention is getting community buy-in to support activities and the changes in gender norms in the learners, such as equal sharing of roles and household chores.  
• During the first real time learning (RTL) session, some patrons/matrons reported that delivery of GCP sessions is challenging with two age groups mixed. They concluded that if a facilitator finds it challenging, they should split the groups if possible. In the subsequent RTL session, patrons/matrons concluded that having tried the separation, it was time-consuming and increased workload. They also learned that mixing age groups works to the advantage of the younger adolescents as they are learning from the older ones.  
• Monitoring data show that more girls attended teen clubs than boys. The Umodzi team is mobilizing teachers to support male champions to keep boys around for the sessions. To address any stigma that boys may have about staying for WMB sessions while girls go home, the team took advantage of the orientation of mother groups to have discussions with girls in specific topics of interest in the WMB manual. This way both boys and girls are staying for teen club activities but with special focus on WMB sessions.  
• The first RTL sessions showed that there was need to include community and religious leaders as custodians of culture to get their buy in and support parents whose children are attending the teen clubs. They have since taken this positively and are providing suggestions to make the interventions culturally sensitive. |
<table>
<thead>
<tr>
<th>Organization:</th>
<th>Child in Need Institute (CINI)</th>
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<tbody>
<tr>
<td>Project Name:</td>
<td>‘Couple Power’ project in Jharkhand, India</td>
</tr>
</tbody>
</table>
| Partner(s): | ICRW, New Delhi  
Accenture Services Pvt. Ltd |
| Meeting Participants: | Indrani Bhattacharya, Assistant Director of Quality Assurance  
Srabani Mittal, Principal Investigator |
| Project Activities: | 1. Formative research to explore how the complex issues related to pregnancy and birth spacing can be addressed by involving both men and women as individuals and couples  
2. Interventions focused on gender transformation and ‘positive deviance’ role modeling  
3. Evaluation to assess outcomes like gender equity and social norms that influence family planning, intention to use family planning methods and accessibility to family planning services |
| Research study design: | Quasi Experimental Design with Matched Control Groups  
Two rounds of Cross Sectional Surveys  
• Baseline (prior to intervention)  
• End-line (after conclusion of the intervention) |
| Key findings to date: | Formative research:  
1. Familial and social pressure to prove fertility leads to increasing chances of an early pregnancy  
2. Early period of marriage marked by limited communication between spouses  
3. Women lack decision making power to decide on timing and type of family planning method to be used  
4. Women still relying on traditional methods to avoid pregnancies  
5. Limited engagement of men with family planning and health system |
<table>
<thead>
<tr>
<th>Organization:</th>
<th>Evidence for Policy Design (EPoD)</th>
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<tbody>
<tr>
<td>Project Name:</td>
<td>Mobile Access for Women</td>
</tr>
<tr>
<td>Partner(s):</td>
<td>Harvard University, Duke University, Princeton University, University of Southern California</td>
</tr>
<tr>
<td>Meeting Participants:</td>
<td>Rashi Sabherwal</td>
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<tr>
<td>Project Activities:</td>
<td>Researchers at Harvard, Duke, Princeton, and USC, in collaboration with India-based EPoD India at IFMR LEAD and JPAL South Asia, have launched a new initiative on women and mobile technology funded by the Bill &amp; Melinda Gates Foundation. The project will build an evidence base on (1) barriers to women’s adoption of mobile phones and associated value-added services and (2) effective strategies to address these barriers. An important focus is on the multiple, complex social realities faced by women and girls across India. In addition to mapping gender gaps across the country, researchers will study social norms, household decision-making dynamics, and the attitudes, beliefs, and needs of women and men regarding mobile technology.</td>
</tr>
<tr>
<td>Research study design:</td>
<td>1-2 randomized control trials, complemented by qualitative research, secondary data analysis, and an in-depth literature review.</td>
</tr>
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</table>
| Key findings to date: | India has the second-largest internet user base in the world, with 462 million users in 2016. Sixty-five percent of the internet traffic is driven by mobile data. It is the world’s second largest smartphone market and, now, has some of the world’s cheapest mobile rates.  
But, India’s women are being left behind. Only 28% of Indian women own a mobile phone as compared to 43% of men, and women account for just a quarter of all Facebook accounts in India  
Key findings from our qualitative research include:  
1. Social norms in India prevent women from owning and using mobile phones, particularly in rural and semi-urban settings. However, as women become more mobile, they are permitted to have and use phones.  
2. Digital harassment is becoming a significant barrier for women to use phones. Women often receive unwanted calls and messages from men.  
3. Often, women do not perceive any incentive for them to own a mobile phone, which is seen as a means of accessing entertainment. As such, sharing phones or borrowing phones is adequate. |
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<tr>
<th><strong>Organization:</strong></th>
<th><strong>International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR)</strong></th>
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<tbody>
<tr>
<td><strong>Project Name:</strong></td>
<td>Piloting menstrual hygiene management interventions among urban and rural schools in Bangladesh</td>
</tr>
<tr>
<td><strong>Partner(s):</strong></td>
<td>Johns Hopkins University</td>
</tr>
<tr>
<td><strong>Meeting Participants:</strong></td>
<td>Farhana Sultana, Research Investigator</td>
</tr>
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</table>
| **Project Activities:** | 1. Develop low-cost intervention to improve menstrual hygiene management practices and the school environment for menstruating students  
2. Measure school attendance and develop strategies/systems/indicators to assess impact of interventions on the academic performance and self-efficacy of girls  
3. Pilot and evaluate the preferred set of interventions and measure uptake of target practices  
4. Form school-based gender clubs (including boys, girls, teachers, school management committee members, parents, and janitors) to sensitize MHM and puberty issues  
5. Formation of advisory committee (including stakeholders from different ministries, development partners, schools, and NGOs) as an MHM platform. |
| **Research study design:** | Proof of concept study in which we are using formative approach, implementation science, piloting and qualitative assessments. |
| **Key findings to date:** | 1. Girls preferred a) low-cost cloth pads and underwear to support using the pads, b) single use disposable pads for emergency use in school compound, and piped disposal bins.  
2. Girls preferred female, and boys preferred male teacher led sessions.  
3. We have pre-tested four absenteeism tracking systems including, mobile messaging, fingerprint, scanners and class captain approaches among which fingerprint was more accurate, feasible and acceptable that we are pilot testing as part of the intervention. |
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<tr>
<th>Organization:</th>
<th><strong>International Center for Research on Women</strong></th>
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<tr>
<td>Project Name:</td>
<td><strong>Plan-It Girls - Empowerment, Employability and Entrepreneurship for Adolescent Girls</strong></td>
</tr>
<tr>
<td>Partner(s):</td>
<td>Restless Development, Pravah</td>
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</table>
| Meeting Participants: | Prerna Kumar, Senior Technical Specialist  
Aditi Vyas, Technical Specialist  
Prabhleen Tuteja, Technical Specialist  
Ravi Verma, Director, ICRW Asia |
| Project Activities: | 1. School based gender integrated life skills and employability skills curriculum for older adolescent girls (Grade IX and XI students of Government Girls Senior Secondary School) to improve girls’ self–efficacy and employability  
2. GEMS curriculum for male peers in school to promote gender equality and reduce violence  
3. Intentional engagement with families and others in community settings to reduce the risk of resistance to girls’ success by fostering gender equitable norms  
4. Create a network of motivated teachers  
5. Engage with industry partners to create pathways for employment  
6. Engage with government sector and private sector |
<p>| Research study design: | Quasi-experimental longitudinal cohort design. |
| Key findings to date: | The baseline study is underway. |</p>
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<tr>
<th>Organization:</th>
<th>Pathfinder International</th>
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<tbody>
<tr>
<td>Project Name:</td>
<td>Perception and Attitudes of Family Planning Among Married Adolescent Girls and Their Partners in Two Rural Communities in Niger</td>
</tr>
</tbody>
</table>
| Partner(s): | NGO Lafia Matassa in Dosso Region, Niger  
NGO SongES in Zinder Region, Niger |
| Project Activities: | **In Dosso Region:**  
• Creation of RH / FP demand for married adolescents aged 13-19 and their partners through a specific district approach: home visit in Loga district, small group meeting in Doutchi district and a combination of home visit and small groups meeting in Dosso district;  
• Tracking the cost of each approach to assess the cost effectiveness of the three intervention models  
**In Zinder Region:**  
• Creation of RH / FP demand for married adolescents aged 13-24 and their partner through a combined approach to home visit, small group meeting and community mobilization;  
• Strengthening the provision of services at the level of community health centers |
| Research study design: | In Dosso, a household survey was conducted in March 2016 on a random sample of households with the following criterion: “married adolescent wives between the age of 13-19 years”. In Zinder, a household survey was conducted in July 2016 on a random sample of households with the following criterion: “having an adolescent girl or a young wife under 25, married and without children”. |
| Key findings to date: | 1. Adolescent girls in both regions had heard of short-acting methods more than long-acting methods  
2. Adolescent girls interviewed in Dosso appear to be more confident in their ability to engage a conversation with their husband about contraceptive use than the girls in Zinder.  
3. In both Dosso and Zinder, the majority of adolescent girls’ husbands declare being ready to support their wife in practicing birth spacing. |
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<tr>
<th>Organization:</th>
<th>Population Foundation of India</th>
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<tr>
<td>Project Name:</td>
<td>Bas Ab Bahut Ho Gaya (Enough is Enough) Digital Campaign</td>
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</table>
| Partner(s):   | MARD (Men Against Rape and Discrimination)  
Feroz Abbas Khan  
RTI International |
| Meeting Participants: | Poonam Muttreja, Executive Director  
Sanghamitra Singh |
| Project Activities: | 1. **Six short films** (three with celebrities and three with non-celebrities) to showcase the importance of the girl child.  
2. **Digital film contest for youth:** College students were invited to make two minute films to narrate how they would change patriarchal mindsets, attitudes, and behaviour towards women and girls.  
3. **Celebrity Concert** has been conceptualized as a live event promoting an end to violence against women & girls. The mission is to engage and garner more support and awareness for the issue. |
| Research study design: | A **research design** has been developed in partnership with Research Triangle Institute (RTI International), to measure the change in knowledge, attitude and perception of youth on GBV, particularly VAWG, through digital media interventions. The formative research was conducted to identify the effectiveness of various digital platforms, online habits of youth and methodologies for measuring the effectiveness of social media. Online pre-and post-campaign cross-sectional surveys are part of the research design. |
| Key findings to date: | 1. The first two films featuring celebrities Vidya Balan and Sania Mirza were launched in May-June 2017. Both films were hugely successful over social media and have received more than 9 million views with a reach and engagement of over 27 million and counting.  
2. The digital film contest was promoted on social media as well as on-ground in 600 colleges and received more than 1700 film entries.  
3. On 2nd October 2017, International day of Non-Violence, the third short titled ‘Nirbhaya’ was released under the ‘Bas Ab Bahut Ho Gaya’ campaign. |
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<tr>
<th>Organization:</th>
<th>Rise Up/Population Health International</th>
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<tbody>
<tr>
<td>Project Name:</td>
<td>Enabling Girls Advance Gender Equity (ENGAGE)</td>
</tr>
<tr>
<td>Partner(s):</td>
<td>Girls’ Empowerment Network (GENET), International Center for Research on Women (ICRW), Youth Tech Health (YTH), and YONECO</td>
</tr>
<tr>
<td>Meeting Participants:</td>
<td>Denise Dunning, Rise Up Founder and Executive Director Takondwa Kaliwo, GENET Program Advisor Laura Hinson, ICRW Social and Behavioral Scientist</td>
</tr>
<tr>
<td>Project Activities:</td>
<td>The ENGAGE initiative aims to reduce the prevalence of child marriage in Southern Malawi by increasing girls’ empowerment and the advocacy impacts of civil society leaders and organizations in the Phalombe and Thyolo Districts. Through a multi-pronged approach, ENGAGE will: 1. Competitively select 800 adolescent girls to raise their voices and increase their agency in making decisions pertaining to their education, health and development; 2. Develop the capacity of 36 civil society leaders to help create an enabling environment for gender equity through advocacy; 3. Employ an innovative SMS and radio strategy to build community support to end child marriage; 4. Implement an independent baseline, midline and endline mixed method evaluation to test the effectiveness of these interventions.</td>
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<tr>
<td>Research study design:</td>
<td>ICRW will evaluate the ENGAGE interventions using a four-arm, quasi-experimental mixed methods evaluation design to assess the effects of each of the two primary interventions (the girls’ empowerment intervention and the civil society organization capacity building intervention) independently, in comparison with the effects of the combined interventions, and against a comparison arm, as follows: Arm 1: Girls’ Empowerment intervention (Chiwalo, Phalombe) Arm 2: CSO intervention (Nichilamwela, Thyolo) Arm 3: Girls’ Empowerment and CSO interventions (Changata, Thyolo) Arm 4: Comparison (neither the Girls’ Empowerment nor CSO interventions, Nazombe, Phalombe) Mixed methods will include a household survey with decision-makers of girls ages 10-17, key informant interviews, and focus groups with key district and community leaders, heads of households in these districts, and the ENGAGE girl participants and CSO leaders themselves.</td>
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<tr>
<td>Key findings to date:</td>
<td>1. Just 25.3%, or about one in four adult decision-makers in these four sites, know that the legal minimum age of marriage for girls in Malawi is 18, even with parental consent. 2. More than nine out of every ten (92.3%) adult decision-makers across the four sites agree that it is wrong to marry a girl before the age of 18. Similarly, 95.3% of adult decision-makers agree that a girl should have a say in whom she marries and 89.8% agree that a girl should have a say in when she marries. 3. Adult decision-makers across the four sites nearly universally accept that all girls have a right to be educated (99.5%) and that there is value to a girl being educated (98.7%). Furthermore, more than nine in ten (91.2%) agree that the value of educating a girl outweighs the costs.</td>
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<td>Organization:</td>
<td>Room to Read</td>
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<tr>
<td>Project Name:</td>
<td>First Girls’ Education Life Skills Evaluation in a Developing Country Context</td>
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</tbody>
</table>
| Partner(s): | Nina Mehota, Senior Program Manager  
Nishant Srivastava |
| Meeting Participants: | Denise Dunning, Rise Up Founder and Executive Director  
Takondwa Kaliwo, GENET Program Advisor  
Laura Hinson, ICRW Social and Behavioral Scientist |
| Project Activities: | Room to Read in India delivers a program that teaches life skills, provides mentoring, and establishes community support to ensure girls complete secondary school education and can build healthier lives for themselves and their families. Their Girls’ Education Program will be tested in a randomized control trial in 119 schools in Rajasthan, India (60 randomly selected schools receive intervention), where there is a high incidence of child labor and relatively few girls enroll in school. Room to Read is evaluating the program’s impact on academic output and development of life skills after one and two-years. We’re also investigating how women who have previously participated in the program perceive its longer-term effects on their lives. |
| Research study design: | Two-pronged research design involving a tracer study (qualitative in nature) and a 2-year RCT of Girls Education Program in 119 schools of Rajasthan, India. RCT besides being a quantitative study will also involve qualitative data collection. |
| Key findings to date: | Evaluation findings:  
1. High percentage of girls (85%) have consistently participated in LS sessions.  
2. Excellent participation of girls in mentoring sessions.  
3. Implementation of program without any significant delay  
Tracer Study findings:  
• Respondents cited communication, goal-setting, and resiliency as the skills they had learned in the program with the greatest benefit for their lives.  
• The majority of interviewees (89%) had pursued tertiary education following completion of the program (though this may also result from sampling bias)  
• Many interviewees cited a desire to delay marriage and family life until more secure in their education and/or careers; some said they did not expect to marry at all.  
• The study concluded that many of the alumnae interviewed would have benefited from greater career counseling before graduation, a finding which validates Room to Read’s later decision to increase this content in the life skills curriculum. |
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<th>Organization: Stanford University</th>
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| **Project Name:** Lancet Series on Gender Equality  
Stanford, USA |
| **Partner(s):**  
- Bill and Melinda Gates Foundation  
- Cesar Victora and the International Center for Equity in Health at the Federal University of Pelotas, Brazil  
- Lori Heise, Johns Hopkins University  
- Ben Cislaghi, LSHTM  
- Caroline Harper, ODI  
- Margaret Greene, GreeneWorks  
- Ruth Levine, Hewlett Foundation  
- Anita Raj and the Center on Gender Equity and Health at UCSD  
- Jeni Klugman, Georgetown University  
- Sarah Hawkes, UCL  
- Geeta Rao Gupta, UN Foundation  
- Jody Heymann, UCLA  
- Lindsay Stark, Columbia University  
- Linda Richter, University of Witwatersrand, South Africa  
- Jeremy Shifman, American University  
- Thoai Ngo, Population Council  
- Jessica Levy and the Iris Group |
| **Meeting Participants:** Gary Darmstadt |
| **Project Activities:** We are developing a *Lancet Series*, which will include 5 papers with a focus on examining the impact of underlying gendered social norms on health and development outcomes globally.  
We aim to provide new insights into relationships between gendered social norms and health behaviors and outcomes that will lead to new hypotheses about potential ways in which to intervene and to make more strategic and targeted investments in promoting gender equality. |
<p>| <strong>Research study design:</strong> Multiple approaches to analysis of survey data and longitudinal cohort data, and synthesis of evidence. |
| <strong>Key findings to date:</strong> It is possible to gain insights into influences of gendered social norms on health through analysis of existing survey and longitudinal data. |</p>
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<tr>
<th>Organization:</th>
<th>Swaziland Action Group Against Abuse (SWAGAA)</th>
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<tr>
<td>Project Name:</td>
<td>Empowering Girls for Improved Health and Wellbeing</td>
</tr>
<tr>
<td>Partner(s):</td>
<td>Population Council, Together for Girls</td>
</tr>
<tr>
<td>Meeting Participants:</td>
<td>Bonginkosi Ndlangamandla, Boys for Change Project Officer Lindiwe Mhlanga, Project Manager</td>
</tr>
</tbody>
</table>
| Project Activities: | SWAGAA is partnering with Together for Girls and Population Council to adapt the “The Girl Roster” tool, and to test and implement several innovative approaches to working with girls in Swaziland. For nearly a decade, SWAGAA has worked with Crossroads International to implement Girls’ Empowerment Clubs in schools to help improve gender equality by strengthening girls’ social assets and self-efficacy related to sexual behavior, violence and HIV. SWAGAA is building on this work, identifying and involving the most vulnerable girls within and outside of schools; starting work with boys to engage them with gender equality and transformative social norms; and establishing health and multi-sectoral referral networks that help girls to overcome common barriers to accessing post violence and sexual and reproductive health services. Project activities include:  
• Selected 30 pilot Primary Schools; 15 in the Manzini and 15 in Lubombo region.  
• Developed, piloted and conducted a baseline survey to the target group in those schools, Grades 4 and 5  
• Developed manuals to be used during the Girls Empowerment Clubs and Boys for change Clubs, still to be approved by Curriculum Coordinating Committee end of October 2017  
• Developed standard operating procedures for referral and linkages network for sexual violence and child abuse  
• Conducted quarterly referral network meetings in the all the country’s regions |
<p>| Research study design: | Operation Research with five arms: 6 schools with 2 years exposure - girls only, 6 schools with 2 years exposure - boys and girls, 6 schools with 1 year exposure - girls only, 6 schools with 1 year exposure - girls and boys and 6 school with no exposure (control group). |
| Key findings to date: | Just completed baseline survey. |</p>
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<tr>
<th>Organization:</th>
<th>University of California, Los Angeles Fielding School of Public Health WORLD Policy Analysis Center (WORLD)</th>
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<tr>
<td>Project Name:</td>
<td>Leveraging Policies and Laws that are Pro-women and Girls to Decrease Inequities in Health and Development Outcomes</td>
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<tr>
<td>Partner(s):</td>
<td>African Child Policy Forum, Asmita Basu, Centre for Equity Studies, Landesa, Population Services International, Dr. Rachel Kidman, Stony Brook School of Medicine</td>
</tr>
</tbody>
</table>
| Meeting Participants: | Bijetri Bose, Senior Research Analyst  
Willetta Waisath, Senior Research Analyst |
| Project Activities: | • Developed a Global Framework for Gender Equality that captured consensus on what needs to be done at the country level to advance women’s and girls’ empowerment globally  
• Used policy data to examine what progress across Framework pillars  
• Two quantitative analyses that used cross-sectional survey data (one at the global level and one specific to India) to examine relationship between social determinants of health aligned with the Global Framework and MCH outcomes  
• Examined recent policy improvements and areas for progress in India |
| Research study design: | We reviewed landmark global agreements and the research evidence base to identify six pillars critical to individual, family, community and national outcomes. Then, we drew on WORLD’s quantitative global policy databases (DHS data for 47 countries) to examine progress on laws and policies crucial to gender equality in each of these six pillars in Sub-Saharan Africa.  
The examination of laws, policies, and implementation in India used:  
• Data from the 2005-06 National Family Health Surveys, logistic regression models with state fixed effects to estimate the relationship between key social determinants of health and MCH outcomes.  
• Roundtable discussions and semi-structured interviews with 38 key informants in Delhi, Lucknow, and Patna. |
| Key findings to date: | Importance of Secondary Education and Age at Marriage: Increasing access to and completion of secondary education is likely to have a significant impact on the well-being and opportunities of women and girls. Age at marriage was similarly identified as a key driver of MCH outcomes.  
Priorities for Gender Equality in India: The work in India highlighted specific opportunities to accelerate progress on gender equality, including: extending the Right to Education Act to cover pre-primary and upper-secondary, advancing implementation efforts to ensure girls are protected from early marriage, and developing simple labor and social protections inclusive of the informal sector.  
The Global Importance of Filling Gaps in Policy and Implementation Data: Policy data, outcome data, and implementation data for all countries are essential for monitoring progress and accelerating change for women and girls across all elements of the Global Framework for Gender Equality. |
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<tr>
<th>Organization:</th>
<th>University of California, San Diego Center on Gender Equity and Health</th>
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<tbody>
<tr>
<td>Project Name:</td>
<td>EMERGE: Evidence-based Measures of Empowerment for Research on Gender Equity</td>
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<tr>
<td>Partner(s):</td>
<td>N/A</td>
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<tr>
<td>Meeting Participants:</td>
<td>Jennifer Yore, Senior Program Manager Nandita Bhan, Research Scientist – India Holly Shakya</td>
</tr>
<tr>
<td>Project Activities:</td>
<td>EMERGE is a 3-year initiative funded by BMGF that focuses on supporting the development and use of robust and rigorous quantitative measures of gender equality and empowerment (GE/E) for health and development in India, with an eye-toward field-based program monitoring and evaluation, and monitoring of progress on UN SDG 5. Through this project, we aim a) to identify and share the best evidence science of GE/E measures via meetings with experts and stakeholders, review of the literature on GE/E measurement, and development of website through which to share identified strong GE/E measures and b) to engage and support multidisciplinary research focused on development and psychometric testing of innovative new GE/E measures, through sub-grants and technical support.</td>
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</table>
| Key findings to date: | 1. Early findings show that rigour in the science of measures development needs improvement, particularly through formative research and assessment of test-retest reliability and construct validity of measures.  
2. Good measures exist that are built on formative research and have undergone psychometric testing, with examples like reproductive autonomy and coercion, measures for IPV, coercive sexual environment, and collective efficacy.  
3. Measurement gaps also exist, particularly in the areas of environment, political and economic dimensions. There is interest from researchers in India on improving measurement capacity and for developing novel measures for women’s economic empowerment. EMERGE grantees are presently working on a range of new measurement topics including domestic work, time poverty, women’s labour force participation and norms around punishment in local governance systems.  
4. There is a desire for better awareness, access and use of best evidence measures from researchers, funders and program managers engaged in research on empowerment. To this end, ongoing development of a website is underway that provides synthesis and evaluation of measures that can be used by different stakeholders. |
| Organization: | **University of Chicago**  
The Center for Interdisciplinary Inquiry and Innovation in Sexual and Reproductive Health |
|---|---|
| Project Name: | Kissa Kahani  
Uttar Pradesh, India |
| Partner(s): | Operation ASHA |
| Meeting Participants: | Suchi Bansal, Research Specialist  
Melissa Gilliam, Ellen H. Block Professor of Health Justice |
| Project Activities: | Kissa Kahani identifies and addresses gender-based barriers that influence the lives of young people ages 15-24 in Uttar Pradesh (UP), India. Kissa Kahani has two main objectives:  
1. ensuring active youth engagement and empowerment through participatory research methods including digital storytelling, body mapping, design thinking and games, and  
2. strengthening capacity of local communities and organizations to scale and sustain novel solutions in adolescent sexual and reproductive health. |
| Research study design: | Mixed methods. |
| Key findings to date: | 1. Gender norms play a salient role in defining adolescents’ roles and responsibilities.  
2. Gender-based discrimination is deeply entrenched in the overall eco-system including family, community, and schools, that constitute key aspects of adolescent lives.  
3. Girls are disproportionately burdened with gender norms. |
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<tr>
<th>Organization:</th>
<th>University of Ibadan College of Medicine</th>
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<tr>
<td>Project Name:</td>
<td>Promoting female empowerment at the household level with family planning use, financial literacy and gender sensitization education among couples in Ibadan</td>
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<tr>
<td>Partner(s):</td>
<td>International Center for Research on Women (ICRW)</td>
</tr>
<tr>
<td>Meeting Participants:</td>
<td>Neetu John, ICRW Sexual and Reproductive Health Specialist</td>
</tr>
<tr>
<td>Project Activities:</td>
<td>The study consists of three intervention arms and one control arm. In arm 1, the couples will participate in a structured group education program on gender socialization. In arm 2, the couples will participate in a structured financial literacy education program, in addition to the program on gender socialization. In arm 3, the study couples will receive the complete package of interventions (gender socialization education, financial literacy, FP counseling and vouchers for the poorest couples). Arm 4 will serve as the control group.</td>
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<tr>
<td>Research study design:</td>
<td>A mixed-methods approach will be employed for this study. For the quantitative part, a 4-arm cluster randomized control design will be utilized. The qualitative part will include the following: (1) a formative phase that will include focus group discussions to explore the acceptability of the proposed intervention roll-out and an inventory of family planning commodities available in Ibadan; (2) baseline focus group discussions among selected study participants; (3) endline focus group discussions among selected study participants.</td>
</tr>
<tr>
<td>Key findings to date:</td>
<td>Forthcoming</td>
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| Organization: | Wits Reproductive Health and HIV Institute (Wits RHI)  
University of the Witwatersrand Faculty of Health Sciences |
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<tr>
<td>Project Name:</td>
<td>Girls Achieve Power (GAP) Year: Building Health, Social and Educational Assets for Empowering Girls at Critical Time of Adolescent Transition in South Africa</td>
</tr>
<tr>
<td>Partner(s):</td>
<td>Grassroot Soccer, Sonke Gender Justice, Path USA</td>
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</table>
| Meeting Participants: | Ayanda Magida  
Clarence Yah, Senior Researcher |
| Project Activities: | GAP year is an asset building programme and school safety intervention that seeks to empower adolescent girl’s agency and safety, while shifting gender attitudes and encouraging positive behavior among adolescent boys. The study works with schools and communities to encourage a culture of health and safety and build evidence around the impact of asset approaches for adolescent girls.  
The primary aims of the study are to reduce learners’ school dropout rate, increase reporting of any experiences of gender based violence, and uptake health care services as the learners progress through high school. |
| Research study design: | A four year cluster randomized behavioural trial design, implemented in 26 schools in three townships in South Africa. |
| Key findings to date: | Baseline findings from 7 schools N= 946: Girls and boys aged between 12 and 17 years old from schools in Cape Town.  
**Out of 349 boys**  
• 215 (62.32%) learners reported currently dating or in relationship of which 72(33.49%) are dating partners who are more than 10 years older than them  
• 62 (28.84%) describing their dating relationship with partners as casual versus 153 (71.16%) as serious relationships  
• 43% experienced violence of which 44% is physical; 21% psychological; 4% sexual violence (rape)  
• 118 (33.91%) reported to forcing themselves onto someone they were interested in dating.  
• 25(7.53%) reported to have received money or gift in exchange for sex.  
**Out of 597 girls**  
• 303 (51.10%) learners reported currently dating or in relationship of which 70 (23.26%) are dating partners who are more than 10 years older than them.  
• 88 (29.14%) describing their dating relationship with partners as casual versus 214 (70.86%) as serious relationships  
• 24% experienced violence of which 48% psychological abuse/violence; 16% physical violence; 10% sexual violence (rape)  
• 27(4.52%) reported to have received money or gift in exchange for sex  
Girls feel unsafe at school and in their community. Boys feel safer at school and unsafe in the community. Girls considered education an asset and health as important, while the boys seem more concerned about social and financial assets. |
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<tr>
<th>Organization:</th>
<th>ZanaAfrica</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Name:</td>
<td>ListenUp: Amplifying girls’ voices through sanitary pads and health education</td>
</tr>
<tr>
<td>Partner(s):</td>
<td>The Population Council, Plan International Kenya</td>
</tr>
<tr>
<td>Meeting Participants:</td>
<td>Alfred Muli</td>
</tr>
<tr>
<td>Project Activities:</td>
<td>ZanaAfrica Group in Kenya seeks to implement safe, accurate, and cost-effective reproductive health innovations for girls—in the form of disposable sanitary pads coupled with girl-centered reproductive health information and resources—and to evaluate this approach against traditional facilitation-based methods for impact on girls’ educational attainment, sexual behavior, reproductive health, and self-determination.</td>
</tr>
<tr>
<td>Research study design:</td>
<td>Longitudinal, four-armed cluster-randomized controlled trial of Class 7 students in 140 schools, to evaluate the individual and combined impact of sanitary pads and health education. Consists of a baseline survey with 3,489 girls, a school quality survey, qualitative data collection, school attendance tracking, intervention over five school terms (18 months) and endline surveys with same girl cohort.</td>
</tr>
</tbody>
</table>
| Key findings to date: | 1. Menstruation: 89% agreed menstruation should be kept a secret, 38% experienced period blood leaking at school, and 32% avoid sports while on their period. 79% report that they do not have enough pads.  
2. Unwanted sex: 1 in 8 girls in Class 7 had had sex before (9-17 years old, average 12 years). 90% of those interactions were forced or unwanted, for transactional sex, or the girl was unsure.  
3. Gender-based violence: 23% of respondents had experienced violence perpetrated by a male in the previous year.  
4. Relatively low scores on the self-efficacy and decision-making scales, together with inequitable gender norms and a high justification of intimate-partner violence, suggest that there is substantial room for improvement to positively affect the girls in these domains through our intervention. |
**Introduction**

On October 25th and 26th, the Women and Girls at the Center of Development (WGCD) Community will convene partners to discuss evidence emerging from two WGCD Learning Clusters: Adolescents & Agency and Engaging Men & Boys. Meeting participants will work together to 1) gain a deeper understanding of the evidence and practice in building adolescent agency and engaging men and boys; 2) agree to three deliverables per cluster to further the WGCD Learning Agenda; and 3) foster substantive partnerships and linkages across projects.

In this document, the International Center for Research on Women (ICRW) provides a synthesis of two timely and relevant literature reviews, drawing out findings to guide partners attending the meeting. The findings are framed by strategic cluster learning questions, which are tools to focus partner collaborations, data analyses, and learnings for joint products such as conference panels, journal articles, and briefs. To support small group assignments, the ICRW team has mapped WGCD partners by learning cluster, question, and their potential to address gaps with a range of evidence and implementation learnings.

Attending partners are expected to review this document so that participants move into small group work and define strategic deliverables with a shared understanding of the literature, and the WGCD Learning Cluster process. Following the meeting in Delhi, ICRW will continue to facilitate the process of achieving the WGCD Learning Clusters’ deliverables by organizing regular working meetings (virtually, and in person when possible) led by ICRW technical experts; hosting webinars to present evidence to a wider audience (e.g., joint webinars with GAGE and YouthPower); and providing strategic technical assistance to WGCD partners to support data analyses that address the WGCD Learning Questions.

For more background on the WGCD Learning Agenda and how ICRW developed the learning clusters and questions, please see Appendices 3 and 4.
I. ADOLESCENTS AND AGENCY

LEARNING QUESTION: HOW CAN PROGRAMS FOSTER AGENCY IN ADOLESCENT GIRLS?

What components of girl-focused programming contribute to increased agency?
What are the effects of deliberately addressing gender norms in programs seeking to increase adolescent girls’ agency?
How do contextual factors in the enabling environment influence interventions to increase adolescent agency?

Fifteen of the WGCD projects focus on fostering agency\(^1\) in adolescent girls. Adolescence is a critical period for both boys and girls due to rapid physical and mental growth and changes, accompanied by shifts in cognitive and emotional development. Young people begin to experience new health risks (both physical and mental), and develop new behavior patterns that will shape their health and employment opportunities for the rest of their lives. At the same time, environmental factors including family, peer group, school, community and societal expectations can help or hinder young people’s well-being. As gender norms solidify and gender role differentiation increases, girls experience limited mobility and shrinking opportunities to gain the education and skills necessary for employment (“UNICEF Gender Action Plan 2014-2017,” 2014).

Generally, WGCD projects use approaches that fall within a positive youth development (PYD) framework. Positive youth development views young people not as “at risk” or “problems,” but as assets and partners in their own development and the development of their communities (Alvarado et al., 2017).\(^2\) There is a dearth of evidence on how these techniques can be used in low- and middle-income countries (LMICs), particularly the specific program components that work in these contexts. And within this limited literature, the effects of gender roles and norms are not well understood.

1. For the definition of agency and its component parts, see the above side bar. For more on the empowerment model, see the white paper or brief on the conceptual model of women and girls’ empowerment. For a visual depiction of the model, see Appendix 1.
2. For an explanation of frequent PYD program components, see Youth Power Learning’s Systematic Review of PYD in LMICs or the brief.
ICRW recently completed a systematic review of 108 studies covering 97 PYD programs in LMICs for YouthPower. The following is a summary of review findings and PYD evidence gaps most relevant to the WGCD Learning Agenda.

**Key Review Findings**

- **PYD programs had a range of components.** All but one included intervention components focused on building youth assets, including transferable skills such as social and communication skills, emotional regulation and problem solving. Over 80% of programs targeted institutional structures to improve the enabling environment. About half of the programs had components that allowed youth to contribute to their communities through leadership and collective action (Alvarado et al., 2017).

- **Only 43% of PYD programs reviewed considered gender in program design or data collection** (Alvarado et al., 2017).

- **Programs that involved children, youth, parents, and other adults working collaboratively at different levels (individual, household, community) helped achieve health-related program outcomes,** especially mental health outcomes. They were most effective when implemented in multiple settings, including schools, households, and community centers. This is particularly true of programs focused on gender norms (Ager et al., 2011; Andrade et al., 2014; Araya et al., 2013; Ashburn, Kerner, Ojamuge, & Lundgren, 2016; Guo, Lee, Liao, & Huang, 2015; Jegannathan, Dahlblom, & Kullgren, 2014; Leventhal et al., 2015; Lotrean, Dijk, Mesters, Ionut, & DeVries, 2010; Marsiglia et al., 2014; Mathur, Mehta, & Malhotra, 2004; O’Callaghan et al., 2014; Orpinas et al., 2014; Quota, Palosaari, Diab, & Punamäki, 2012; Wong et al., 2009).

- **Adult-led education activities were by far the most common approach to working with youth,** with 81% of the programs including adult-led activities. Other common components were peer education, media and youth-friendly community services (Alvarado et al., 2017).

- **Several randomized control trials (RCTs) found that PYD programming can improve knowledge, attitudes and behaviors related to sexual and reproductive health,** including increased health service use, contraceptive use and other health outcomes (Aninanya et al., 2015; Heeren, Jemmott, Ngwane, Mandeya, & Tyler, 2013; Ibrahim, Rampal, Jamil, & Zain, 2012; James, Reddy, Ruiter, McCauley, & van den Borne, 2006; Li et al., 2010; Pham et al., 2012).

- **PYD approaches led to improvements in employment outcomes,** expectations of employment, and savings, as well as improvements in employability, job quality, retention and self-esteem. Yet studies had limited ability to quantify causal impact (Alicid, 2014; Jewkes et al., 2006; Network-Brasil, 2012; Rotheram-Borus, Lightfoot, Kasirye, & Desmond, 2012).

- **Programs that worked across multiple sectors to improve food security, income level or employability also improved health sector outcomes.** The link across sectors beyond health has not been clearly established (Amin, Ahmed, Saha, Hossain, & Haque, 2016; Dunbar et al., 2014; Ibarraran, Ripani, Taboada, Villa, & Garcia, 2012; Jewkes et al., 2006; Kysia et al., 2014; Mathur et al., 2004; Rotheram-Borus et al., 2012).

- **Programs that incorporated youth-led and youth-centered components and approaches reported better program attendance and engagement** (Amin et al., 2016; Plaut, Moss, & Jayaram, 2016).

- **Programs separately targeting males and females tended to be most effective in reducing gender inequality** (Amin et al., 2016; Bandiera et al., 2017; Jewkes et al., 2006; Miller et al., 2014).

- **Peer mentorship activities seemed particularly valuable for young women,** both the mentors and mentees. While the mentors gained leadership experience and an opportunity to contribute to their communities, the recipients gained valuable skills and practice in communication and problem solving with their mentors (Amin et al., 2016; Bandiera et al., 2017; Network-Brasil, 2012).

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3. YouthPower is a USAID project meant to promote the Agency's 2012 Youth in Development Policy to build the capacities of youth so that they can contribute to and benefit from their community’s stability and prosperity. YouthPower is divided into mutually reinforcing Learning and Action arms. The Learning arm focuses on evidence and evaluation, which informs implementations funded through the Action arm. These implementations generate further evidence for the Learning arm. For more on YouthPower, visit the program website.
Evidence Gaps of Note for the WGCD Learning Agenda

• While the field is growing, there is still a shortage of evidence on PYD programming in LMICs. Most evaluations focus on sector specific outcomes (e.g., HIV infection rates, labor market outcomes) rather than outcomes like self-regulation, positive identity, and self-efficacy. Programs tend to report only in their particular sector, missing the opportunity to determine cross-over effects (Alvarado et al., 2017).

• Several intervention components are consistent across PYD programs, but there is a lack of evidence showing how these common components contribute to the development of adolescent agency (Alvarado et al., 2017).

• While there is promising early work on integrating gender norm change into programming, this area, and its effect on outcomes, needs to be more deeply explored (Alvarado et al., 2017).

• The review identified the importance of engaging stakeholders at multiple levels in both intervention communities and national governments. However, greater programmatic learning on how to identify and engage with these stakeholders will provide valuable insights for future interventions (Alvarado et al., 2017).

WGCD projects in the Adolescents and Agency cluster are well placed to provide evidence on gender-intentional youth programming, particularly in the following areas, which will guide presentations and small group work at the New Delhi meeting:

■ Intervention Components: The WGCD partner projects contain a diverse range of project components meant to foster agency in adolescent girls. Some provide club experiences using different levels of adolescent leadership, some include components meant to increase girls’ knowledge and/or critical consciousness, and some work with girls themselves to be change agents in their communities and schools, shifting institutional structures. Although only three projects in this cluster have study designs meant to test individual components, in aggregate WGCD partners can provide case studies detailing how effective different intervention set-ups are in increasing girls’ agency in respective contexts.

■ Gender Norms: A subset of WGCD partners are deliberately addressing gender norms in their projects with adolescents, usually through a club or class-room based approach. As defined here, addressing gender roles and gender norms means identifying and unpacking these norms and roles in discussion and giving girls opportunities to explore and act outside of those roles and norms. These group approaches are sometimes limited to girls, and other times directed to boys and girls either through gender-mixed clubs or gender-segregated clubs using a synchronized approach to their curricula. The WGCD partners can generate evidence on the effects of these intervention approaches.

■ Enabling environment: While all projects in this cluster are addressing the enabling environment in some way, a subset have pre-identified individuals in government ministries and school districts, as well as community opinion leaders (e.g. traditional authorities, religious leaders, celebrities), to serve as allies and partners in the process of creating environments that allow for girls’ empowerment. Through these targeted alliances, projects can exert influence both in their intervention sites and the wider community and municipalities. This subset of partners can share key programmatic learnings about the process of identifying, recruiting, and working with these partners to shift institutional structures.
What components of girl-focused programming contribute to increased agency?

<table>
<thead>
<tr>
<th>Partner &amp; Project</th>
<th>Relation to Question</th>
<th>Ability to assess causal impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal University of Birnin Kebbi</td>
<td>Builds girls’ assets (knowledge and skills) needed to gain access to vocational schools to become health workers or teachers. Provides cash grants to help girls stay in school and offset income lost to their family.</td>
<td>High</td>
</tr>
<tr>
<td>Girls for Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CARE</td>
<td>Works with girls by forming girls clubs both in-school and out-of-school, and a youth parliament to allow youth to express their collective voice. Includes programmatic approaches to engage with youth to improve economic and health outcomes. Includes work with communities through a social norms approach and government institutions. Study compares three arms: 1) control, 2) institutional and individual approach, 3) government, individual and community social norms approach.</td>
<td>Medium</td>
</tr>
<tr>
<td>Improving Adolescent Family Planning and Nutrition in</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ethiopia through Structural Solutions (Adolescent FP)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CARE</td>
<td>Works with mothers’ groups and male champions to create clubs for adolescent boys and girls. These clubs provide a curriculum to improve girls’ sexual and reproductive health knowledge and decision-making outcomes. Adolescents have an opportunity to work with adult leaders as co-facilitators in the program.</td>
<td>Medium</td>
</tr>
<tr>
<td>Umodzi</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ICRW</td>
<td>Works with adolescent girls through clubs to increase critical consciousness and agency; adolescent boys to create a more gender equitable and safe school space for girls; teachers to provide an enabling environment; and business leaders and government officials to provide girls with employment opportunities.</td>
<td>Medium</td>
</tr>
<tr>
<td>Plan-it Girls</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public Health Institute (PHI)</td>
<td>Works with adolescent girls to become peer leaders. Girls return to their communities to establish and lead girls’ clubs where they provide information on child marriage, sexual and reproductive health, leadership and collective action for participants. Clubs work with local opinion leaders to try to change attitudes around child marriage. Project works with other civil society organizations to end child marriage and run an SMS campaign. Study compares four arms: 1) SMS campaign ONLY (comparison), 2) girls’ intervention and SMS campaign, 3) CSO intervention and SMS campaign and 4) All intervention components.</td>
<td>Medium</td>
</tr>
<tr>
<td>Enabling Girls to Advance Gender Equity (ENGAGE)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population Services International (PSI)</td>
<td>Works with adolescents in a participatory research design to determine drivers of non-contraceptive use among adolescents, possible interventions to alleviate these drivers, pilot interventions and bring the successful pilots to scale. The project allows opportunities for youth leadership in identifying challenges and solutions in their lives. Project also conducts formative research with sexual and reproductive health providers and adolescent influencers to inform program design.</td>
<td>Medium</td>
</tr>
<tr>
<td>Adolescents 360</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organization</td>
<td>Program Title</td>
<td>Description</td>
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<tr>
<td>Room to Read</td>
<td>First Girls’ Education Life Skills Evaluation in a Developing Country Context</td>
<td>Works with adolescent girls by providing life skills curriculum in school settings. Social mobilizers work with parents and the wider community to help keep girls in schools.</td>
</tr>
<tr>
<td>SWAGAA</td>
<td>Empowering Girls for Improved Health and Wellbeing in Two National Regions in Swaziland</td>
<td>Works with adolescent girls both in- and out-of-school by establishing clubs using a Safe Spaces curriculum to educate vulnerable girls about HIV/AIDS, sexual and reproductive health, and gender based violence. The curriculum covers information on the issues and available services and self-efficacy training. In addition to adult mentors, this program includes older youth mentors. There is a synchronized boys’ club component meant to promote gender equality and reduce perpetration of gender based violence. Other components include increasing access to services and community outreach through adult programming.</td>
</tr>
<tr>
<td>Wits RHI</td>
<td>Girls Achieve Power (GAP) Year Program</td>
<td>Works with adolescent girls through girls’ clubs using a life skills curriculum covering HIV knowledge, self-efficacy, self-esteem and team building. Concurrently, the program delivers gender synchronized curricula in pre-existing boys’ soccer clubs, with a focus on gender norms and reducing GBV. Both programs work with slightly older peer facilitators to deliver the curriculum. The program also works with girls’ families to make sure they are aware of economic resources to keep girls in school and out of work. Simultaneously, the program is working with the Department of Basic Education to roll out a curriculum on gender and sexuality education for grades 7-9 and working with teachers and school administrators to create safe schools.</td>
</tr>
<tr>
<td>ZanaAfrica</td>
<td>ListenUp: Amplifying Girls’ Voices through Sanitary Pads and Health Information</td>
<td>Works with girls through a two-pronged approach to support menstrual health. One project component is the provision of sanitary pads and underwear to girls through their schools. Another component is sexual and reproductive health training through the school and a periodic teen magazine with information on life skills, sexual and reproductive health and other topics. Study design compares four arms: 1) control, 2) sanitary pads provided, 3) SRH education and teen magazine provided, 4) all intervention components.</td>
</tr>
</tbody>
</table>
## What are the effects of deliberately addressing gender norms in programs seeking to increase adolescent girls’ agency?

<table>
<thead>
<tr>
<th>Partner &amp; Project</th>
<th>Relation to Question</th>
<th>Ability to assess causal impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>4-H Ghana</td>
<td>Works to shift gender norms around girls’ leadership and segregation of boys and girls activities via co-ed clubs. Two adult facilitators (one man and one women) encourage boys and girls to work together in club projects, to make sure boys’ give space for girls’ leadership and to discuss gender norms and roles. Has an additional component on community norms.</td>
<td>Low</td>
</tr>
<tr>
<td>CARE Umodzi</td>
<td>Works to change norms around SRH and decision-making through boys’ and girls’ clubs led by male and female adult champions. Also seeking to change norms around bullying girls, supporting girls in school and division of household labor.</td>
<td>Medium</td>
</tr>
<tr>
<td>Child in Need Institute (CINI) Couple Power</td>
<td>Works to improve married adolescents’ SRH and decision-making abilities through work with couple champions. These couple champions will work with other couples in their communities to improve gender norms within couples.</td>
<td>Low</td>
</tr>
<tr>
<td>International Center for Diarrhoeal Disease Research (ICDDR) Bangladesh Piloting Menstrual Hygiene Management Interventions Among Urban and Rural Schools in Bangladesh</td>
<td>Works to improve girls’ school attendance and performance through changing gender norms around menstruation. Particularly focuses on destigmatizing menstruation through gender clubs for boys and girls (segregated) and work with male and female teachers to facilitate gender clubs.</td>
<td>Low</td>
</tr>
<tr>
<td>ICRW Plan-it Girls</td>
<td>Works to enhance girls’ decision-making ability by changing norms around girls’ employment opportunities gender based violence and limitations on girls’ mobility by working with girls, boys and community members in different contexts.</td>
<td>Medium</td>
</tr>
<tr>
<td>Public Health Institute (PHI) Enabling Girls to Advance Gender Equity (ENGAGE)</td>
<td>Works to reduce child marriage and increase girls’ leadership abilities by changing attitudes around when girls are expected to marry and who makes the decision.</td>
<td>Medium</td>
</tr>
<tr>
<td>SWAGAA Empowering Girls for Improved Health and Wellbeing in Two National Regions in Swaziland</td>
<td>Works to reduce GBV and increase girls’ self-efficacy to seek out services and refuse to accept GBV. Works with: 1) girls to increase their life skills, knowledge about GBV and awareness of service provision, 2) boys to reduce GBV and increase gender equitable attitudes and 3) communities by engaging men to work as agents of change in their communities.</td>
<td>Medium</td>
</tr>
<tr>
<td>Wits RHI Girls Achieve Power (GAP) Year Program</td>
<td>Works to improve girls’ life skills, school safety and SRH and decision-making through work with boys’ and girls’ clubs to interrogate gender norms and provide positive role models.</td>
<td>High</td>
</tr>
</tbody>
</table>
### How do contextual factors in the enabling environment influence interventions to increase adolescent agency?

<table>
<thead>
<tr>
<th>Partner &amp; Project</th>
<th>Relation to Question</th>
<th>Ability to assess causal impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>4-H Ghana&lt;br&gt;<strong>The Fifth H: Her</strong></td>
<td>Works with government officials at the national and local level, particularly in the Ministry of Food and Agriculture, Ministry for Local Government and Rural Development, Ministry of Education and Ghana Education Service.</td>
<td>Low</td>
</tr>
<tr>
<td>CARE&lt;br&gt;<strong>Improving Adolescent Family Planning and Nutrition in Ethiopia through Structural Solutions (Adolescent FP)</strong></td>
<td>Works with government institutions to improve the accountability of local and district level health, education and women’s affairs offices to adolescent girls. The program is building off existing relationships with these officials.</td>
<td>Medium</td>
</tr>
<tr>
<td>ICDDR Bangladesh&lt;br&gt;<strong>Piloting Menstrual Hygiene Management Interventions Among Urban and Rural Schools in Bangladesh</strong></td>
<td>Works with Bangladesh’s Deputy Secretary for the Ministry of Education, who is a focal point for the project’s Menstrual Health Management advisory committee.</td>
<td>Low</td>
</tr>
<tr>
<td>ICRW&lt;br&gt;<strong>Plan-it Girls</strong></td>
<td>Mobilizes a network of teachers working together to create an enabling environment in school intervention sites, as well as with industry leaders to increase girls’ employment opportunities and a Government Advisory Group constituted under the project with representatives from various government agencies. This program is building off existing relationships with officials.</td>
<td>Medium</td>
</tr>
<tr>
<td>Population Foundation of India (PFI)&lt;br&gt;<strong>Celebrity GBV Intervention</strong></td>
<td>Works with celebrities to disseminate messages and media against gender based violence.</td>
<td>Low</td>
</tr>
<tr>
<td>PHI&lt;br&gt;<strong>Enabling Girls to Advance Gender Equity (ENGAGE)</strong></td>
<td>Works with civil society organizations identified through the project. Additionally, though program participants (both adults and girls), project engages with local religious and traditional leaders to change norms around child marriage.</td>
<td>Medium</td>
</tr>
<tr>
<td>SWAGAA&lt;br&gt;<strong>Empowering Girls for Improved Health and Wellbeing in Two National Regions in Swaziland</strong></td>
<td>Works with church leaders to engage men at the community level around gender based violence and sexual and reproductive health.</td>
<td>Medium</td>
</tr>
<tr>
<td>Wits RHI&lt;br&gt;<strong>Girls Achieve Power (GAP) Year Program</strong></td>
<td>Works with the Department of Basic Education to roll out scripted lesson plans on gender and sexuality education for grades 7-9 to help promote an enabling environment in schools.</td>
<td>High</td>
</tr>
</tbody>
</table>
II. ENGAGING MEN AND BOYS

LEARNING QUESTION: WHAT ARE THE PERCEPTIONS AND PREFERENCES THAT MEN AND BOYS HAVE REGARDING DIFFERENT PROGRAM APPROACHES? WHAT ARE PROMISING WAYS OF ENGAGING THEM?

Eight of the WGCD projects include an intervention component to directly engage with men and boys in service of achieving their women and girls’ empowerment goals. In this learning cluster, there are two different intervention types: 1) adolescent boys’ clubs and/or classes for boys with a focus on masculinities, and 2) messaging and advocacy with male leaders and opinion leaders at the community level, sometimes combined with men’s clubs.

Engaging men and boys is a critical element of women’s empowerment, as across the world various societies and cultures have maintained masculine power structures that limit women and girls’ mobility, safety, opportunities and freedom of choice. Conformity to patriarchal norms limits the range of opportunity and places pressure on men and boys, some of whom exert power over women and girls as a direct response to their feelings of powerlessness in the face of expectations on their own lives. Men are therefore potential co-beneficiaries of greater gender equality. Yet critical questions remain on how best to approach and work with men and boys for the goal of women’s empowerment and gender equality (ICRW, 2017; MenEngage, UN Women, & UNFPA, 2014).

Summary of Literature Reviewed

ICRW recently completed a literature review of the evidence and programmatic approaches currently in use to engage men and boys for women and girls’ empowerment in LMICs. The trends and approaches are well represented across WGCD partners, who may prove valuable in generating related evidence. What follows is a summary of the findings that are most relevant to the WGCD projects. The report for this review is not yet public, but will be shared with partners upon its release.

Key Takeaways

- Most male engagement programming frames men in one of three ways:
  > Gatekeepers: Men are seen as holding the vast majority of power in societies around the world and have largely maintained inequitable norms that protect their privileges;
  > Allies: Men are seen as playing a valuable role in supporting women’s empowerment programs, but not directly benefiting from them; or
  > Stakeholders: Men are seen as beneficiaries of women’s empowerment programming, both on an individual and societal level (MenEngage et al., 2014).

- Male engagement programming has the potential to be gender transformative. As men take on a greater care role in the household, women have more opportunities to build their capacities and engage in paid labor outside the home. Improved opportunity and income may promote gender equality and fairer divisions of care work (Casey, Carlson, Two Bulls, & Yager, 2016; Flood, 2015; Greene & Levack, 2010; Gupta, 2000; van Eerdewijk et al., 2017).

- Positive male role models are an effective tool in engaging other men and boys (Flood, 2015).

- Keeping men and boys engaged in women’s empowerment work can be crucial to women’s safety. When women are given opportunities to build their capacities, male partners, family members and community members may feel left out and resentful, or even threatened, increasing the risk of violence against women. Women for Women International found that female participants in their programs in different countries have requested programming for their partners; women found they were not able to use what they were learning either at home or in their communities without male engagement. Preliminary results from the Democratic Republic of the Congo indicate that there is greater impact for both members of a couple when both are program participants (Flood, 2015; Women for Women International, n.d.).
• **Programs have found success using familiar, non-threatening spaces, institutions, and platforms.** In general, programs are successful if the initial recruitment is somewhat neutral, allowing facilitators and male participants to build a relationship before delving into more challenging discussions around male privileges and harmful masculinities (Carlson et al., 2015; MenEngage et al., 2014).

**Evidence Gaps of Note for the WGCD Learning Agenda**

• Few male engagement programs track and report on outcomes for women (ICRW, 2017).

• Male engagement programs have not used schools as the locus to change gender roles and norms as much as might be expected, and there is limited data on school based programming (ICRW, 2017).

• Male engagement projects have primarily focused on women’s health outcomes (particularly HIV/AIDS). Violence reduction and other elements of women’s empowerment have been largely untested (ICRW, 2017).

• The link between programs aimed at changing attitudes and actual behavior change has not been established. Many male engagement programs do not measure behavior change at all (ICRW, 2017).

The WGCD partners in this cluster are implementing and measuring approaches to male engagement for girls’ empowerment; their learnings in the following areas will guide presentations and small group work at the New Delhi meeting:

**Impact on girls’ empowerment:** A key gap in the literature around male engagement for gender equality is any evidence on the effects of these programs for women and girls. The WGCD projects all focus on women and girls’ empowerment, and therefore collect these data. Although none of the projects evaluate the female component of the intervention without the male component, in aggregate the WGCD partners could provide case studies that draw important inferences about engaging men and boys to empower girls.

**Male role models:** The partners in this cluster use relatable, authoritative male figures to act as role models and facilitators either in school clubs, or community outreach. For the boys’ clubs, this usually means a slightly older peer. For the men’s clubs, interventions have identified community leaders, particularly religious leaders. The WGCD partners can contribute implementation learnings for identifying, training and supporting male role models.

**Sports-based approaches:** Several partners use sports-based approaches, particularly football, to work with men and boys. While some conceive of these approaches as incentives to bring men and boys in, at least one partner (4-H Ghana) encourages co-ed sports in order to build connections between boys and girls in its school based clubs. WGCD partners can share programmatic knowledge on the efficacy of sports as a draw, a retaining mechanism and a gender norms teaching tool.

**Gender role change:** A sub-set of WGCD partners have used intervention approaches that encourage gender role change (e.g., having men prepare food for club activities). Through this approach, partners can encourage men to explore and challenge traditional framings of masculinity and femininity, and open up spaces for gender equality.

**Resistance:** Several of the WGCD projects in this cluster have encountered male resistance to the gender norm changes promoted in their interventions. These points of resistance vary, from a perception by boys that development programming is just for girls, to active resistance from community leaders to programs that upend traditional roles. The WGCD projects in this cluster can document and share their learnings both around the sorts of resistance they encounter in different contexts, and the strategies they use to overcome this inertia.
### Table 2. Relationship of Engaging Men and Boys Cluster Projects to Learning Question

**WHAT ARE THE PERCEPTIONS AND PREFERENCES THAT MEN AND BOYS HAVE REGARDING DIFFERENT PROGRAM APPROACHES?**

**WHAT ARE PROMISING WAYS OF ENGAGING THEM?**

<table>
<thead>
<tr>
<th>Partner &amp; Project</th>
<th>Relation to Question</th>
<th>Ability to assess causal impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>4-H Ghana</td>
<td>Works with boys in co-ed, school-based clubs led by adult facilitators who respond to student leaders and decisions. There are two adult facilitators per club, one male and one female. The program is implemented in existing 4-H Clubs with a modified curriculum, and draws boys with standard 4-H approaches of offering practical skills, competitions and games. The program also oversees community men’s and women’s clubs to help create an enabling environment for change.</td>
<td>Low</td>
</tr>
<tr>
<td>The Fifth H: Her</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CARE Umodzi</td>
<td>Works with adolescent boys in school-based clubs through adult male role models working with peer facilitators. The adult men have been involved with other CARE projects in the community and have previous training in gender equality.</td>
<td>Medium</td>
</tr>
<tr>
<td>ICRW Plan-it Girls</td>
<td>Works with boys in classroom settings of schools with simultaneous girl club implementation, all to create a safe and enabling environment for the girls’ intervention. The boys’ curriculum is focused on reducing GBV and gender equality. Project also works with male and female teachers as role models for students, and at community centers to encourage changes at the community level.</td>
<td>Medium</td>
</tr>
<tr>
<td>Child in Need Institute (CINI) Couple Power</td>
<td>Works to improve married adolescents’ SRH and decision-making abilities through work with couple champions. These couple champions will work with other couples in their communities to improve gender norms within couples.</td>
<td>Low</td>
</tr>
<tr>
<td>Population Services International (PSI) Room to Grow</td>
<td>Works with village chiefs and religious leaders in to engage men and spread positive messaging around parenthood, breastfeeding, child spacing and women’s rights. Village chiefs are also consulted on the design and roll-out of the broader project, to ensure their buy-in and support in creating an enabling environment. Male participants in the couples’ intervention portion of this project will also participate in mutual support groups.</td>
<td>Medium</td>
</tr>
<tr>
<td>SWAGAA Empowering Girls for Improved Health and Wellbeing in Two National Regions in Swaziland</td>
<td>Works with boys in school-based clubs to reduce GBV. Works with men in community based clubs to act as change agents. Tactics used to attract men include football, card games and discussions around fatherhood. The project engages religious leaders to disseminate gender equitable messages about GBV and SRH.</td>
<td>Medium</td>
</tr>
<tr>
<td>Wits RHI Girls Achieve Power (GAP) Year Program</td>
<td>Works with boys in football clubs using a life skills curriculum that synchronizes with the curriculum used in girls’ clubs. Football clubs are led by slightly older peers, who serve as role models. Students in the intervention schools also receive a gender and sexuality curriculum implemented by the Department of Basic Education.</td>
<td>High</td>
</tr>
</tbody>
</table>
REFERENCES


The Gates Foundation defines empowerment as “the expansion of choice and strengthening of voice through the transformation of power relations so women and girls have more control over their lives and futures.” As both a process of change and an outcome, empowerment is central to gender equality and facilitates individual and community health and wellbeing.

The foundation’s Model of Women and Girls’ Empowerment is a tool to help “set strategic goals, make investments with partners, and measure progress [towards gender equality].” The model, which was developed as part of the Women and Girls’ at the Center of Development (WGCD) Community, frames WGCD partner projects and guides the WGCD Learning Agenda to best synthesize evidence and learnings.

**Figure 1. The Gates Foundation’s Model of Women and Girls’ Empowerment**
**APPENDIX 2: PROJECTS IN THE ADOLESCENTS & AGENCY AND ENGAGING MEN & BOYS CLUSTERS**

Table 3. Learning clusters and associated WGCD partner organizations

<table>
<thead>
<tr>
<th>Learning Cluster (No Projects included)</th>
<th>WGCD Projects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescents &amp; Agency (15)</td>
<td></td>
</tr>
<tr>
<td>4-H Ghana</td>
<td>PSI – Adolescents 360</td>
</tr>
<tr>
<td>CARE – Adolescent FP</td>
<td>Room to Read</td>
</tr>
<tr>
<td>CARE – Umodzi</td>
<td>SWAGAA</td>
</tr>
<tr>
<td>Child in Need Institute (CINI)</td>
<td>University of Chicago</td>
</tr>
<tr>
<td>Federal Univ. Birnin Kebbi</td>
<td>Wits RHI</td>
</tr>
<tr>
<td>icddr,b</td>
<td>ZanaAfrica</td>
</tr>
<tr>
<td>ICRW – Plan-it Girls</td>
<td></td>
</tr>
<tr>
<td>PFI – Celebrity GBV Intervention</td>
<td></td>
</tr>
<tr>
<td>PHI – ENGAGE</td>
<td></td>
</tr>
<tr>
<td>Engaging Men &amp; Boys (8)</td>
<td></td>
</tr>
<tr>
<td>4-H Ghana</td>
<td>PSI – Room to Grow</td>
</tr>
<tr>
<td>CARE – Umodzi</td>
<td>SWAAGA</td>
</tr>
<tr>
<td>ICRW – Plan-it Girls</td>
<td>Wits RHI</td>
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<td>Child In Need Institute (CINI)</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>
The Women and Girls at the Center of Development (WGCD) Learning Agenda is a partnership across a diverse set of nearly 40 projects funded by the Bill and Melinda Gates Foundation that are focused on advancing gender equality and the empowerment of women and girls. The WGCD Learning Agenda is facilitated by the International Center for Research on Women (ICRW) through a platform that supports learning across and between projects and provides technical assistance directly to partners. ICRW is instituting a variety of mechanisms that enable the WGCD partners to share knowledge, learning, resources and tools that enhance their individual and collective capacities, foster a community of practice and amplify the larger impact of their work. The learning agenda is designed not only to support mutual learning among the WGCD partners, but also to enrich the broader global development field with a greater understanding of how to effectively address gender inequalities and empower women and girls.

**Objectives of the WGCD Learning Agenda**

1. Support four learning clusters to generate and synthesize evidence across WGCD projects in response to specific learning questions that address critical gaps in the field;

2. Facilitate a community of practice for mutual learning and sharing of measurement tools and methods, learning on project implementation and results from research and evaluation; and

3. Provide direct technical assistance and support to projects as they develop and implement their measurement, evaluation, data analysis and dissemination plans.
ICRW identified four learning clusters that the WGCD projects can contribute substantively to over the course of the learning agenda. These clusters emerged following a thorough review of all WGCD project proposals and metrics, discussions with ICRW technical experts on sectoral evidence gaps around women and girls’ empowerment, an assessment of data being collected and input from the WGCD partners and WGCD working group at the foundation. The learning clusters are:

- Adolescents and agency;
- Engaging men and boys;
- Intra-household bargaining and decision-making; and
- Pathways to income generation

ICRW developed learning questions for both clusters that address key gaps in the evidence-base, are broad enough for multiple projects to contribute to, and that WGCD partners are well placed to answer. These questions emerged from a five-step process (Figure 2):

1. ICRW developed the learning clusters by analyzing themes common across the projects, proposed to the clusters to the projects and requested that project teams provide questions they thought were key to their learning clusters that their data could answer;
2. ICRW consolidated these questions for review and discussion with ICRW technical experts; then
3. Prioritized a smaller set of questions with input from ICRW technical experts;
4. Refined the questions for each cluster based on findings from the rapid literature reviews and a thorough review of the data being collected by the WGCD projects aligned to each cluster; and
5. After the questions were identified, the team defined sub-questions based on further updates from the WGCD partners.

Figure 2. Refining the learning clusters and questions