

## 4H Ghana:

# THE 5TH H: HER – EMPOWERING GIRLS THROUGH 4-H'S METHODOLOGY OF "LEARNING BY DOING"

Various locations, Ghana | November 2015 – December 2017

### THE CHALLENGE

Countries across Africa face chronic youth unemployment, especially among young women. Originally developed in the U.S. around the turn of the 20th century, the 4-H approach to experiential learning, centering on "head, heart, hands, and health," has spread across the world through different organizations and networks adopting the 4-H approach. 4-H Ghana runs clubs to provide youth with employment and life skills. However, since its inception, 4-H Ghana has found that limited access to resources, deep seated gender norms, such as preferences for boys' education and less financial support for girls from parents and communities, and 4-H staff members' insufficient training to support dampened the effectiveness of these clubs for girls. The team sought to address these challenges and strengthen its programs for girls.



Photo: 4-H Ghana

### THE APPROACH

4-H Ghana supported 600 new and existing 4-H school and community clubs in 5 regions of Ghana to integrate a stronger approach to working with girl club members. The clubs teach boys and girls ages 8-25 livelihood and life skills such as business planning, farming and communication skills. The clubs are intended to enhance economic and educational opportunities particularly for young girls. 4-H Ghana recruited and trained more women to facilitate the clubs and engaged girls by providing them the opportunity to act as mentors to other girls. Additionally, they worked with male club facilitators to improve their ability to work with girls and, wherever possible, encouraged a two-facilitator approach in clubs where both a man and a woman supported the students. Through a gender conscious curriculum, they tried to change both boys' and girls' attitudes to traditional gender roles and norms. Finally, the program team provided girls an opportunity to take up leadership positions in the clubs by instituting a quota to ensure that girls were involved in club leadership roles.

### THE RESEARCH

4-H Ghana conducted a mixed methods evaluation with quantitative baseline and endline surveys conducted at randomly selected schools with 4-H clubs (treatment) and without 4-H clubs (control) and a qualitative midline conducted only with 4-H club students. 720 male and female students participated in the baseline and endline surveys and 180 male and female students participated in the midline. The treatment schools themselves varied; some included only single sex clubs (separate clubs for both girls and boys) and others including co-educational clubs. Although the study was not powered to detect differences between these varieties of treatment schools, 4-H Ghana staff members did report anecdotal differences between them.

### MAIN FINDINGS



Co-educational (as opposed to single sex) clubs showed the most improvement in gender-related attitudes and the lowest reported rates of gender-based violence.



Girls participating in gender-focused 4-H Clubs developed the resources to support their own education.

### KEY INTERVENTION COMPONENTS

- ♦ Gender-conscious curriculum for pre-existing 4-H clubs
- ♦ Gender quota in club leadership

### THE FINDINGS

At baseline, 4-H Ghana determined that the control and treatment arms were largely comparable. However, at endline the treatment and control schools saw some key differences in decision-making power, self-efficacy and beliefs about gender roles. Similarly, at endline, about 90% of treatment students reported having held a leadership role, compared with around half in the control. These findings indicate that 4-H Ghana’s program generally is effective in supporting students, particularly in building confidence in their decision-making activities, their resources to support themselves and their gender equitable attitudes.

Impressively, the 4-H Ghana team also found minimal difference between girls in boys across key indicators in their treatment group at endline, suggesting that the program was able to support both girls and boys, and indeed 4-H Ghana achieved a 1 to 1 ratio of female to male club leaders over the course of the project. Although the vast majority of indicators were nearly equal for boys and girls, a few of the key differences in results for girls and boys in the treatment arm are highlighted in *table 2*.

Girls reported that they can provide resources for themselves more than boys. The 4-H Ghana team proposes two possible explanations for these differences: 1) girls have more home-based income generation projects than boys; or 2) girls were more involved in non-agricultural projects than boys, which required less reinvestment of resources each season, and may have increased girls’ ability to save from these projects. Although boys were more likely than girls to say they felt teachers worked with them during school activities, girls and boys said teachers provided them with leadership opportunities at equal rates (97.2%), perhaps indicating a need for follow-on support from teachers for girl leaders, who feel less supported.

Although the evaluation was not powered to evaluate differences between co-educational and single-sex clubs, 4-H Ghana staff members anecdotally reported that boys and girls in the co-educational clubs expressed more positive perceptions of members of the opposite gender than boys and girls in single sex clubs. This finding may be masked by the fact that overall boys were less likely to hold gender equitable attitudes than girls. Both boys and girls participating in co-educational clubs were also less likely to exhibit acceptance of gender-based violence.

### THE IMPACT

4-H Ghana’s gender intentional transformation of the 4-H approach showed promising results for students generally and demonstrated how gender intentional programming can lead to positive results for both girls and boys. Program staff reported that program activities focused on advancing agency through building skills in decision-making and leadership were critical to efficacy outcomes, and norm and behavior change were supported by observational learning and peer modeling opportunities. Observations from the 4-H Ghana team speak to the importance of investigating the different efficacy of single-sex and co-educational approaches for adolescents in advancing gender equality. More research needs to be done to further explore the relative advantages of each approach.

INDICATOR	BASELINE, TREATMENT	ENDLINE, TREATMENT	BASELINE, CONTROL	ENDLINE, CONTROL
Percent of students who believe they can make their own education and career decisions	5.3%	92.5%	6.1%	20.8%
Percent of students who believe they can provide the resources they need for school themselves	5.8%	51.7%	6.4%	3.1%
Percent of students who believe that boys and girls should have equal responsibilities at home and at school	14.4%	88.1%	14.2%	12.8%

Table 1: Change in selected outcomes of interest

INDICATOR	GIRLS	BOYS
Percent of students who believe they can provide the resources they need for school themselves	55.6%	47.8%
Percent of students who believe boys and girls should hold equal positions in schools and communities	97.8%	88.9%
Percent of students who believe that boys and girls should have equal responsibilities at home and at school	91.7%	84.4%
Percent of students who feel teachers work with them during school activities	81.7%	92.8%

Table 2: Differences in select outcomes between boys and girls in the treatment arm

## The BOMA Project:

# RURAL ENTREPRENEUR ACCESS PROJECT

Northern Kenya | May 2016 – May 2018

### THE CHALLENGE

In northern Kenya, a region with a high rate of extreme poverty and livestock dependent economy, the increased severity of droughts and decreased dependability of weather patterns in recent years have contributed to the instability of the pastoral lifestyle there. Women and children are especially vulnerable to changes in climate and the resultant cycles of drought and famine. Traditional gender roles dictate the lives and decisions of couples and families. Because herding is traditionally a male activity, food and water scarcity demand that men spend more time in satellite camps, away from their homes and families. The same gender norms have created a system under which men have greater authority in household decision-making, ownership of assets and control over financial resources. Most women will need to consult with their husbands about spending decisions, including paying for medical treatment and school fees. This can leave women without resources for months at a time while their husbands are away, forcing them to survive by subsisting on food aid, begging for credit from shopkeepers or performing menial labor. For the few women who have been able to cultivate their own source of income, lack of access to financial institutions makes it difficult to keep, transfer and save money. Geographic, political, economic and financial isolation have conspired with climate change and gender norms to further marginalize women in northern Kenya's pastoralist communities.



Photo: The BOMA Project

### THE APPROACH

The BOMA Project (BOMA) is a U.S. non-profit and Kenyan non-governmental organization with a transformative approach to alleviating poverty and building resilience. BOMA's cornerstone program, the Rural Entrepreneur Access Project (REAP), launched in 2008 and is a two-year gender-focused poverty graduation program that seeks to transform the situation of vulnerable women by providing them with the tools, training and resources necessary to start and maintain small businesses, establish sustainable incomes and move out of poverty. REAP participants receive seed capital and business and life skills training, join business and savings groups and are mentored by BOMA staff. In 2016, for the first time, BOMA also introduced mobile banking in order to harness mobile technology for additional impact. Participants received feature phones and SIM cards registered with mobile money accounts that allow members of savings groups to contribute to and withdraw from both personal and group-based digital accounts.

### MAIN FINDINGS



**BOMA's program enables women to earn and save income, take out loans and build shock resilience.**



**Access to personal income and savings increases women's decision-making power.**



**Women with more decision-making power spend more on food and healthcare for their families.**

### KEY INTERVENTION COMPONENTS

- ♦ Seed capital
- ♦ Business groups
- ♦ Savings groups
- ♦ Business & life skills training
- ♦ Mentorship
- ♦ Mobile money

# The BOMA Project: Rural Entrepreneur Access Project

## THE RESEARCH

BOMA anticipated that by the end of the two-year project, women enrolled in REAP would hold both financial and social capital and assets and be able to make spending decisions around the nutrition, education and health of their families. To understand and measure any change occurring as a result of the program, evaluators looked for change in household income, savings, household decision-making power, livestock ownership, enrollment of children in school, food security, healthcare use and expenditure. BOMA implemented a Standard of Living Survey (SOLI) based on key outcome measures and used a pre-posed comparison between baseline and endline survey results. The survey was completed by 100 percent of participants at baseline (April 2016), 90 percent at midline (April 2017) and 92 percent at endline (May 2018).

BOMA also conducted a qualitative assessment of REAP's impact on household decision-making, household conflict and child labor. This research primarily relied on eight focus group discussions held in five locations in Marsabit and Samburu, Kenya. Focus groups included REAP participants and their husbands. Focus group participants discussed their common purchases and the decisions made around those purchases, and they were asked to identify differences between these scenarios before and after their enrollment in REAP.

## THE FINDINGS

Both the survey and the focus group discussions revealed significant impacts as a result of REAP. Overall, women were found to be better able to feed themselves and their families, pay for school fees and medical care, accumulate savings, sustain themselves during drought and other emergencies, respond to economic shocks and adapt to climate change. By endline, total household income and household savings had risen – by 78.8 percent and 1,748 percent, respectively. 44 percent of participants had taken out a loan, up from 22 percent at baseline, and 99 percent were prepared in some way to respond to drought, flooding and other emergencies. Expenditure on education and household nutrition increased. 68.5 percent of participants reported at endline that all primary school-age daughters were enrolled, and 98.5 percent reported that no child missed an evening meal, from 56.7 percent and 42.8 percent, respectively.

While traditionally men were responsible for all financial assets and women reported needing their husbands' approval to spend money, focus group results suggest that women's power to make decisions increased during the program. Female respondents reported that having their own income and assets increased their bargaining power, changed the way their husbands perceived them and increased their own confidence and self-worth. These inspired increases in decision-making power, particularly in a few key realms, including family nutrition, livestock for their own businesses and household items. Around larger expenses, men still appeared to be the ultimate decision-maker, but women reported being increasingly consulted and involved in those spending decisions.

## THE IMPACT

BOMA's experience highlights the role that income plays in decision-making dynamics within households, and the effect of business and savings groups on women's ability to both earn and save money. REAP proved to be highly successful in empowering women to transition out of extreme poverty and build resilience to climate and other shocks.

However, evidence from evaluation of BOMA's digital finance platform also indicates the need for simple tools designed in thoughtful ways for their target populations. REAP participants were largely illiterate and innumerate and had limited familiarity with digital technology, resulting in low levels of understanding – and therefore independent use – of the platform. Participants were skeptical of the product's security, and its complicated interface was a significant barrier to use. Digital services may be a promising solution for financial inclusion's last mile but they demand careful analysis of community literacy and numeracy skills, observation and integration of consumer preferences, and the development of intentional and tailored tools that meet their needs.

INDICATOR		2016	2018
FOOD SECURITY	No child went to bed without an evening meal in the past week.	42.8%	98.5%
	Household members ate at least two meals a day in the past week.	80.0%	99.0%
SUSTAINABLE LIVELIHOODS	Value of business is 25% larger than total value of the initial cash transfer.	n/a	95.9%
	Participant can access more than one source of income.	64.9%	96.4%
SHOCK PREPAREDNESS	Participant is a member of a savings group, has access to credit and has a minimum of KES 8,000 in savings.	2.0%	99.0%
HUMAN CAPITAL INVESTMENT	All eligible primary-school aged girls are enrolled in primary school.	56.7%	68.5%

Evidence from evaluation of BOMA's digital finance platform also indicates the need for simple tools designed in thoughtful ways for their target populations.

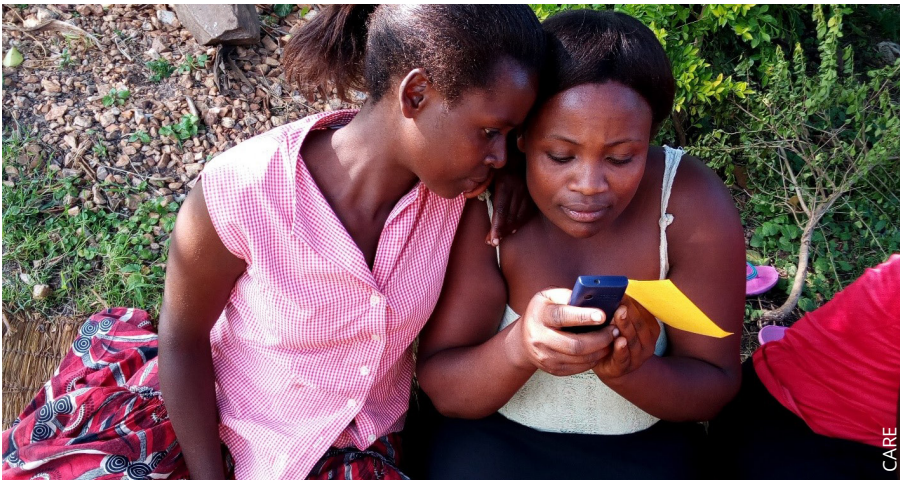


## DIGITAL SUB-WALLETS AND HOUSEHOLD DIALOGUES

Western Uganda | 2017-2020

### THE CHALLENGE

It is widely understood that financial services and structures can have huge impacts on the economic empowerment and livelihoods of women and the well-being of their families, particularly when those services are made accessible directly to the women themselves, and not through their husbands and other power holders in their families. Equal participation in decision making at household level coupled with access to bank accounts increases women's capacity and likelihood to save, reduces their risk of loss of income and improves their financial stability and resilience to shocks. Yet despite numerous interventions to increase women's access to such services, there has been a shortage of financial products and systems designed to meet women's specific financial behaviors and needs, or to address the gender norms that impact their access and use of bank products and other financial services.



### THE APPROACH

In order to address the financial needs of women in a unique way, CARE worked with a bank (PostBank) to design a financial product specifically tailored for women. A key component of the design of this platform was the creation of "sub-wallets" – pockets of savings designated for a particular use, based on women's needs. The team identified goals that women prioritized for saving toward, including school fees, medical emergencies, longer-term purchases, such as land and personal needs. CARE then worked with PostBank to design "Women in Progress," a user-friendly platform that could be accessed from a feature mobile phone that enables users to designate their savings into one or more of these sub-wallets.

CARE implemented a financial literacy training that included such concepts as budgeting, financial planning and goals and banking, and how to use the sub-wallet platform. Following the training, participants were encouraged to open bank accounts with PostBank and enroll on Women in Progress. They were trained to access and use the platform.

CARE also implemented with a subset of participants household dialogue sessions designed to improve relations between men and women, increase equal decision-making between household members and increase women's financial autonomy. These sessions covered seven modules: decision-making, participatory visioning, growing collaborative power, household discussion, aligning visions, developing financial goals and financial planning. It included seven weekly sessions and was facilitated by Community Based Facilitators trained by CARE.

### PRELIMINARY FINDINGS

*Study is ongoing*



Household dialogues address gender norms that include power relations, decision making, access and control over resources.



Women's financial behavioral and patterns need to be accounted for when designing financial products for their use.

### KEY INTERVENTION COMPONENTS

- ♦ Tailored financial product for women
  - ♦ Financial literacy training
  - ♦ Norm transformation through gender dialogue

### THE RESEARCH

In order to gauge acceptability of the program and test whether the innovation works, CARE implemented the program first as a six-month pilot with 586 women and men, all of whom were members of savings groups that had been active for at least two years. These participants were divided into two groups: about half received the financial literacy training and digital sub-wallet intervention; the rest engaged in household dialogues. A control group of savings group members was identified for comparison and received no intervention.

In February 2018, CARE scaled the intervention to reach more another 1,320 women, and 100 men. These participants are also divided into three groups, but unlike the pilot, one intervention arm engages in household dialogues and the digital sub-wallets intervention. The other arm receives only the digital sub-wallet intervention. The third is the Control group. This will allow the team to evaluate the added benefit of the household dialogues training.

The endline evaluation is ongoing. Final analysis is expected to be completed by June 2020.

### THE FINDINGS

Final analysis is expected in 2020, following completion of the endline survey. These findings reflect the pilot research and implementation lessons.

While final evaluation is underway, both the pilot research and CARE's monitoring data provide key insight into the effects of the program. The pilot was neither large enough nor long enough to infer any impact from product adoption and usage on empowerment, financial autonomy, or overall phone or bank account ownership. However, they suggest that women are still less likely than men to use the digital platform. Challenges identified included gaps in gender skills of frontline field staff to appropriately deliver gender and financial planning dialogues, high levels of digital illiteracy among target members and inconsistency in data capture for different service providers. This necessitated the project to invest more in capacity building for staff, providing intensive digital literacy training to women including "one-on-one" support on the use of sub-wallets.

Evidence from both the pilot evaluation and field reports suggests that women who participated in the household dialogue intervention are more active in household financial planning and decision-making than those receiving only the financial literacy training and digital sub-wallets platform. They also report improved spousal communication.

### THE IMPACT

Endline data will shed more light on the value of both interventions, however preliminary findings point to the importance of household dialogues to shift household relationships and women's decision-making power. Interventions seek to improve women's empowerment and power over financial decisions may need to go further than providing access to financial systems and also address gender norms around the use of those services.

Additionally, CARE observed lower levels of familiarity with digital tools and of digital literacy than was expected, suggesting a need for targeted training, including one-on-one support to encourage women to actively and successfully engage with them.

## CARE:

## UMODZI

Kasungu District, Central Malawi | November 2015 – April 2018

### THE CHALLENGE

Deep-rooted gender inequality is one of the primary drivers of poverty in Malawi. Social norms that value men and boys more than women and girls exacerbate gender inequalities, putting women and girls at increased risk for gender-based violence and other violations of their human rights such as child, early and forced marriage. Additionally, girls lack access to information about reproductive health and contraceptives and face norms that limit their ability to decide when and if to use contraception. As a result, some have little choice but to drop out of school due to pregnancy and/or early marriage. To support girls to stay in school and avoid unintended pregnancy, it is critical that girls, boys, men and women in communities work together to transform norms that restrict girls access to contraceptives and information about reproductive health as well as those that prioritize boys' education over girls', such as inequitable division of chores among children in a household and prioritization of boys' school fees over their sisters'.



KASUNGU DISTRICT

### THE APPROACH

CARE Malawi implemented the Umodzi project in Kasungu District in Central Malawi to promote gender equality by engaging adolescent girls and boys (10-19 years old) in after-school gender dialogue sessions, as well as an intergenerational role model program for both boys and girls, to integrate gender-equitable attitudes and behavior in schools. This was meant to confront a whole range of norms and attitudes which undervalue girls and women relative to men and boys. Umodzi, which means "oneness" in Chichewa, a Malawian dialect, built upon and adapted existing gender equality approaches. These included integrating a gender curriculum into after-school clubs and activities, training teachers to convene teen club meetings with a focus on gender issues, and working with adults who were also engaged in CARE's agriculture and savings programs in the school catchment areas. The teen clubs implemented a Gender Conscious Practice (GCP) Curriculum, developed by CARE, to complement an existing Life Skills and Sex Education program, which ran concurrently with the GCP Curriculum. Sex-segregated intergenerational gender dialogues occurred between male youth and adult Male Champions and between female youth and Mothers Group members. Originally, the project was not intended to include many older adolescents (ages 15-19), but rather was designed with younger adolescents (ages 10-14) in mind. However, since many students in Kasungu District repeat grades, there ended up being a higher proportion of older adolescents than anticipated.

### THE RESEARCH

A quasi-experimental, mixed methods study design was used to evaluate Umodzi, consisting of a quantitative survey at baseline and endline and qualitative data collection at baseline, midline and endline. The study was designed as a panel study, with the same students interviewed at each interval. The survey was conducted with male and female students in grades 4 through 8 who were attending team clubs in control and intervention schools. The intervention arm received the GCP curriculum integrated into the regular life skills and sex education program, while the control group received only the Life Skills and Sex Education program. The quantitative baseline was conducted with 1,417 students (ages 10-19) of whom 60% were in intervention schools and 40% were in control. Approximately 63% of research participants were girls, while the remainder were boys. By endline, there was a 27% attrition rate, leaving 1035 students at endline. Attrition rates were similar across zones (intervention and control) and sexes.

### MAIN FINDINGS



The intervention was most effective at improving knowledge, attitudes and behaviors that indicate support for gender equality and gender equitable roles for boys (ages 10-19) and older adolescent girls (ages 15-19).



The Umodzi Project curriculum was particularly effective at changing attitudes and practices around relationships and gender roles between boys and girls.

### KEY INTERVENTION COMPONENTS

- ♦ Club-based Gender Conscious Practice Curriculum program run by teachers
- ♦ Same sex intergenerational dialogues

For the qualitative data collection, interviews and focus groups were conducted with a subset of students in both intervention and control schools. The qualitative study involved 90 interviewees (60 in intervention and 30 in control) and 9 focus groups (6 in intervention, 3 in control) at baseline. At midline and endline, there were 68 and 58 completed interviews

## THE FINDINGS

As measured at endline, the intervention was effective at improving knowledge, attitudes and behaviors that indicate support for gender equality for boys (ages 10-19) and older adolescent girls (ages 15-19). Respondents could identify the difference between gender and sex (knowledge), had adopted attitudes against harmful gender norms (as measured by the Gender Equitable Mens Scale), and expressed changed behaviors around gender roles. Among boys, the intervention was more effective for older boys (ages 15-19). This indicates that the Umodzi approach - including the GCP curriculum, teen clubs and intergenerational dialogues - is an effective supplement to CARE Malawi's Life Skills and Sex Education curriculum, particularly for older adolescents. Interestingly, this was not the curriculum's original intended audience, so further modifications may be necessary to support growing gender supportive knowledge, attitudes and behaviors for younger adolescents, particularly girls.

INDICATOR	BASELINE, CONTROL	ENDLINE, CONTROL	BASELINE, INTERVENTION	ENDLINE, INTERVENTION
<b>Percentage of respondents expressing willingness to support a member of the opposite sex with homework without expectation of a relationship</b>	94.5%	96.1%	92.9%	97.7%
<b>Percent of respondents who said sweeping should be done by both girls and boys</b>	51%	56%	53%	70%
<b>Percent of respondents who said cooking should be done by both girls and boys</b>	35%	43%	37%	67%

Table 1: Key differences in outcomes between Umodzi intervention vs. comparison intervention

Table 1 highlights a few indicators for which there were major differences between treatment and control schools in regards to relationships between the sexes and gender roles. The intervention arm generally had a greater effect on these outcomes than the control arm, though changes were often positive for both arms. This indicates that the Umodzi project activities were useful supplements to the Life Skills and Sex Education program to address and even transform gender roles and relations.

While the Umodzi project is promising, its impacts are gender and age sensitive, with the intervention showing greatest effects for older boys (ages 15-19), then older girls (ages 15-19), and finally for younger boys (ages 10-14), with minimal change for younger girls (ages 10-14). Change in knowledge and attitudes were more prevalent in certain project domains, namely division of labour at household level, leadership and decision-making, communication and negotiation and care and support between boys and girls. Fewer differences between the intervention and control arms were observed in the sexual and reproductive health (SRH) and gender based violence (GBV) domains. Across all domains, adoption of different behaviour and practice was still limited. This is especially true for the GBV and SRH domains, likely because the implementation period was too short to influence behaviour and practices of the learners and the community. However, it is expected that the gains made in four domains will contribute to incremental gains in SRH and GBV domains in the medium to long term.

## THE IMPACT

The Umodzi project was an effective supplement to CARE's pre-existing Life Skills and Sex Education curriculum in Malawi in terms of changing knowledge, attitudes and behaviors across the domains of the intervention. The project model resulted in positive adoption of gender conscious knowledge, attitudes and practices relative to the Life Skills and Sex Education Curriculum among older adolescents, though with smaller change among younger adolescents. Given that the curriculum had been designed for younger adolescents, this is a surprising finding. For older adolescents, continued use of the GCP curriculum along with the intergenerational dialogue sessions could help supplement other programmatic approaches. For younger adolescents, some modifications may be needed to increase the efficacy of the intervention.



## THE CHALLENGE

In many contexts globally, power relations and gender norms restrict women's access to and participation in economic and household decision-making, maintaining gender inequality and women's disempowerment. Mainstream interventions in the agricultural sector have worked to address women's access to work and material resources, under the assumption that these would translate to empowerment in other domains. Yet deep-seated norms remain unchanged and may temper any gains to women's empowerment that are made through these interventions.



## THE APPROACH

To understand the added value of intentionally addressing gender relations, CARE compared two interventions: a traditional, "gender-light" model of agricultural and microenterprise development and a "gender transformative" program that addressed social norms and incorporated critical reflection, power analysis and group discussion. These interventions are integrated into a livelihoods intervention that provides agricultural skills, extension services, entrepreneurship training, financial education, market and microfinance linkages and Village Savings and Loan Association (VSLA) networks.

The "gender-light" package included basic gender activities, including messaging with community leaders and women's groups around gendered division of labor, household decision-making dynamics and control of assets. The "gender transformative" intervention, called Empowerment, Knowledge and Transformative Action (EKATA), was initially developed in Bangladesh and adapted for the Burundi context. It incorporates analysis of power and gender socialization, building of critical reflection and community skills, engagement with community leaders and men's groups and development of group action plan and collective action. These activities seek to raise community consciousness of and counter discriminatory social norms by encouraging deep reflection, community dialogues and meaningful collective action.

## PRELIMINARY FINDINGS

*Study is ongoing*



Incorporating a gender transformative curriculum may improve outcomes beyond what is achieved through traditional agricultural development approaches



Gender transformative programs may increase women's decision-making power and empowerment levels as well as household food security beyond the achievements of a "gender-light" model

## KEY INTERVENTION COMPONENTS

### Gender-Light

- ♦ Sensitization of community leaders
- ♦ Messaging on division of labor, household decision-making, control of assets

### EKATA

- ♦ Power and gender socialization
- ♦ Critical reflection
- ♦ Active engagement of local leaders
- ♦ Engagement with male relatives
- ♦ Collective action and solidarity building

### THE RESEARCH

The CARE hypothesized that incorporating an intensive and transformative gender focus into an agricultural livelihoods intervention would lead to significant improvements in both gender equality and livelihoods outcomes, including agricultural productivity, income and household food security. In order to test this hypothesis, CARE conducted a 4-year quasi-experimental study in two provinces in Burundi. Comparisons were drawn between three groups of women, all of whom were members of VSLAs and received livelihoods skills and market access. A comparison group was used as a control, which received these livelihoods activities, so as to test the added impact of each gender intervention. One intervention group also received the “gender-light” treatment, while the other received EKATA.

The baseline survey included 1,296 respondents and was based on the International Food Policy Research Institute's Project level Women's Empowerment in Agriculture Index (Pro-WEAI). A qualitative study was carried out in 2018. 30 project participants were selected for in-depth interviews and 106 participated in ten focus group discussions.

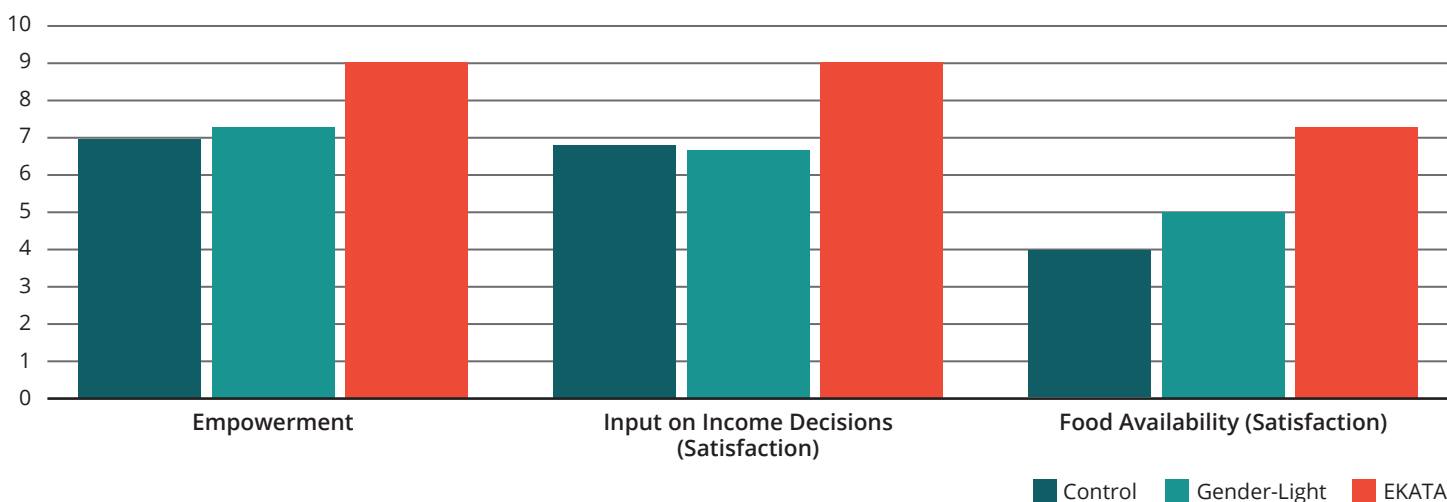
Data collection for the quantitative endline evaluation is scheduled for January – June 2020.

### THE FINDINGS

Final analysis is expected in 2020, following completion of the endline survey. These findings reflect the qualitative and midline research only.

Qualitative research found distinct differences between women across the EKATA, gender-light and control groups. EKATA participants reported more sources of extension information and less food insecurity than their counterparts in either of the other groups. Women in the EKATA groups exhibited higher self-reported empowerment scores and satisfaction in their decision-making power than in either of the other two groups. Decision-making patterns also seemed to have shifted among the EKATA group, so that women were more often consulted or involved in household decisions, compared to men making all decisions alone. Both women and men participating in the EKATA treatment reported that married couples should make decisions together. Women in the EKATA group reported higher levels of satisfaction with their lives, confidence to speak in public and self-reported empowerment scores. They were also both less likely to experience violence and more likely to say they would report it if they experienced it, compared to both the control and gender-light groups.

#### Women's Self-Reported Scores



### THE IMPACT

The qualitative findings of EKATA in Burundi suggests that integrating gender-transformation, including engaging male community members in reflecting on household power dynamics and decision-making patterns, can pave the way for sustainable women's empowerment and gender equality in addition to improved household food security. Endline results will shed light on whether gender transformative programming impacts women's economic and social empowerment.

## THE CHALLENGE

Marriage during adolescence can have significant implications for young women's opportunities, livelihoods and wellbeing. Yet in Jharkhand, according to the 2014-2015 National Family Health Survey (NFHS-4), 38% of young women ages 20-24 were married before the legal minimum age of 18. Relatedly, 12% of women ages 15-19 in Jharkhand have already begun bearing children - that is, they have already had a live birth or are currently pregnant. Pregnancy during adolescence puts young women and girls at a high risk of maternal mortality – the risk of pregnancy-related death is twice as high for women ages 15-19 as for women in their twenties. Pregnancy- and childbirth-related complications are among the leading causes of death worldwide for women in that age group.

In Jharkhand, the total unmet need for family planning is 18.4%. The family planning needs of married adolescent girls are different from both those of unmarried adolescents and married adults, but these needs have often been overlooked. There is a dire need to fill that gap and specifically and intentionally address married adolescents.



## THE APPROACH

The Couple Power approach is based around a couple-based approach of peer-to-peer advocacy. Using a digital survey administered through tablets, the project team identified the most vulnerable couples within their intervention communities, with vulnerability defined around current age of the wife (adolescent vs. adult), age of marriage, age of first birth, spacing between children, age difference in couple, and recentness of marriage and/or birth. Among these couples, the team recruited 160 Leader Peer Couples (LPCs). These are couples which include women ages 20-24, have basic literacy skills and reside in the village in which they are working. The project invested in the LPCs through capacity building and training and engaged with them in reflective dialogues to ensure that their attitudes become more gender equitable. It was envisaged that these LPCs would have more balanced relationships, better inter-spousal communication and more joint decision making, with the woman feeling more empowered.

The responsibilities of LPCs included:

1. Attending cluster meetings once per month for capacity building on Couple Communication Strategy
2. Conducting group meetings with respective Potential Peer Couples (PPC)
3. Couple and family counseling through home visits
4. Attending community level meetings and events
5. Counseling participants

## MAIN FINDINGS



Increased use of and  
intention to use family  
planning practices.



Increased decision-making  
skills and self-confidence.

## KEY INTERVENTION COMPONENTS

- ♦ "Positive deviant" role modelling through LPCs.
- ♦ Regular, public forums to challenge harmful gender norms led by LPCs.
- ♦ Home visits by LPCs.
- ♦ Continuous active tracking of couple vulnerability.

Of the 160 recruited LPCs, 43% (69) were retained through the program. A total of 3360 PPCs were identified, of which 50% (1689) couples were retained. The others either left the area or refused participation in the program.

The counselling sessions, meetings and events focused on reproductive health, including available service providers and intention to use contraception, gender norms, equitable relationships and joint decision-making. The peer couple-to-couple approach was based on the premise that it would enhance better quality, equitable, informed and sustainable decision making on family planning because the decisions will be owned by both the partners.

Throughout the project, LPCs and CINI staff used tablets to track the vulnerability of couples in the project area, particularly during the home visits, and help to monitor the couple and provide access to government services to couples as needed.

### THE RESEARCH

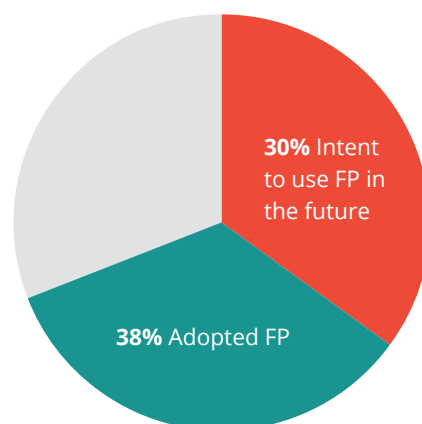
The Couple Power project was designed to include a research component centered around assessing the impact of the training on the couples, including their gender equitable attitudes and communication as well as their capacity to lead sessions, as well as the efficacy of the peer couple to couple approach on changing family planning behaviors in the community. However, due to delays in implementation, the evaluation was cancelled after baseline. Quarterly vulnerability tracking of all young couples continued during the project period. Activity as well as intervention details were maintained by LPCs and LPC coordinators in their meeting registers and daily diaries.

### THE FINDINGS

Findings reported here reflect monitoring data only.

Through the duration of the program, more than 650 young couples have adopted family planning services, and about 500 of the remaining couples reported intention to use family planning methods in the future.

Nearly 90% of PPCs (more than 1500 couples) reported that they had begun discussions with their spouses about family planning, and over 80% reported that they had become more vocal, learned to negotiate within their relationships and families for their needs and grew more confident in their decision-making skills.



### THE IMPACT

Couples involved in this project have made meaningful strides in building awareness around healthy family planning practices, including use of contraception and birth spacing. The Couple Power intervention suggests the value of peer approaches for shifting both attitudes and behaviors around family planning, and for instilling the self-confidence that young people need to believe they have the power to participate in making key decisions in their lives. Giving young people access to peer role models with whom they can discuss new and potentially sensitive topics has been critical to helping them challenge harmful norms and build self-esteem.



**icddr,b:**

# PILOTING MENSTRUAL HYGIENE MANAGEMENT INTERVENTIONS AMONG URBAN AND RURAL SCHOOLS IN BANGLADESH

Bangladesh | August 2016 – July 2018

## THE CHALLENGE

In both urban and rural schools in Bangladesh, girls and young women face a lack of access to products and facilities for menstrual health maintenance (MHM), coupled with poor understanding and misinformation about menstrual hygiene. Financial constraints, limited toilets at school and lack of disposal facilities affect girls' safe use of MHM products and stigma around menstruation leads to fear and shame for girls and misperceptions among boys and men in the community. In this context many girls miss school during menstruation, contributing to up to 40% of all girls' school absences.



Photo: icddr,b

## THE APPROACH

icddr,b sought to understand MHM barriers in Bangladesh and to develop an approach to empower girls to continue attending school while menstruating. As such, icddr,b conducted formative research on these barriers in order to develop a pilot program. The piloted intervention included access to disposal bins, MHM products, behavior change communications and teacher training to respond to girls' menstrual health needs. Cloth pads, storage bags and underwear were provided for free to each participant, and additional products were given to janitors for emergency MHM. icddr,b also renovated toilet facilities and installed piped disposal systems. Social and behavior change communication (SBCC) components included gender clubs, teacher trainings and teacher-led sessions in classrooms, menstrual tracking calendars and sessions through the intervention to sensitize the community to MHM issues, deliver puberty education and ensure proper maintenance of the facilities and conduct ongoing awareness building.

## MAIN FINDINGS



Both girls and boys are misinformed about MHM; this creates stigma, shame and fear.



Toilets, handwashing facilities and disposal systems in both urban and rural schools are insufficient.



Increasing access to MHM products and addressing stigma around menstruation improves girls' school attendance.

## KEY INTERVENTION COMPONENTS

- ♦ Delivery of free products
- ♦ Renovation of toilets and disposal systems
- ♦ Gender clubs and teacher-led MHM sessions

## THE RESEARCH

icddr,b's formative research included spot checks of menstrual health facilities in two urban schools in Dhaka and two rural schools as well as In-Depth Interviews and Key Informant Interviews with girls, boys, teachers and parents. Additionally, the team led participatory exercises such as ranking exercises and vignette drawing, with female and male students to provide a clear understanding of the barriers facing girls regarding menstruation and education, the MHM environment in urban and rural areas and girls' preferences. Findings were used to develop an appropriate and effective intervention.

To assess the feasibility and acceptability of the piloted intervention, icddr,b also conducted a pre-post comparison in the four pilot intervention schools. The team implemented a baseline survey to 527 girls in August 2017 and an endline survey to 528 girls in April 2018. Questions centered around use and maintenance of MHM products and school absences and sought to determine whether the intervention had successfully improved the MHM environment at school to reduce absences related to menstruation.

## THE FINDINGS

**Formative Research.** Facility spot checks revealed limited facilities, including functional toilets, soap and handwashing stations and disposal bins. Interviews revealed that both girls and boys receive incorrect and inadequate information around menstruation, which seed stigma around the process and results in fear and shame among girls as well as restrictions on their normal activities.

**Feasibility Assessment.** The endline survey showed that use of cloth pads had increased from 22% to 83%. The majority of respondents (64%) listed comfort as a key benefit of the products provided. Other benefits included protection from staining (38%), softness (30%) and reusability (26%). School absence due to menstruation had decreased over the same period, from 28% to 20%, mostly due to reduction in discomfort during menstruation, as reported by the respondents. Notably, girls were less likely to store their pads in a hidden place and more likely to dry and keep the pads in the open, which demonstrates a reduction in shame and stigma related to menstruation.

## THE IMPACT

The MHM intervention piloted by icddr,b increased uptake of environmentally friendly cloth pads, improved maintenance and MHM and reduced school absenteeism due to menstruation by targeting both access to products and information, thereby reducing stigma. The intervention was both feasible and accepted by the target population. These findings pave the way for further testing, including rigorous evaluation into the program's impact and potential for scaling.

INDICATOR	URBAN (2 SCHOOLS)	RURAL (2 SCHOOLS)
NUMBER OF FUNCTIONAL TOILETS	17 (723 girls per toilet)	11 (194 girls per toilet)
NUMBER OF HANDWASHING BASINS WITH TAP	5	13
SOAP AVAILABLE AT HANDWASHING BASINS	3	1
SANITARY PAD DISPOSAL INSIDE TOILET CUBICLE	0	2

Table 1. Findings: Formative Research

INDICATOR	AUGUST 2017	APRIL 2018
CLOTH PAD USE	22%	83%
WASHING CLOTH PADS WITH DETERGENT, SOAP & WATER	40%	55%
DRYING IN OPEN AIR WITH OTHER CLOTHES (NOT HIDDEN)	38%	74%
STORING IN HIDDEN PLACE	70%	43%
MISSED SCHOOL DURING LAST MENSTRUATION	28%	20%
REASON:		
EXCESSIVE BLEEDING/PAIN	67%	68%
FEELING UNCOMFORTABLE	29%	18%
FEAR OF VISIBLE STAINS	14%	12%
FRIENDS MISSED SCHOOL IN THE LAST 3 MONTHS DUE TO MENSTRUATION	68%	39%

Table 2. Findings: Intervention Evaluation

## THE CHALLENGE

Women's labor force participation is increasingly recognized as critical driver and outcome of economic growth and development that pays long term dividends for families, communities, countries and women themselves.<sup>1</sup> Yet women often end up working in the informal economy in unskilled jobs that are poorly paid and lack benefits and opportunities for advancement. The rate of female labor force participation in India has remained low and even declined in recent years. This has been attributed to inequitable gender norms, poor access to education, lack of skilling opportunities and poor linkages for productive entry into labor market. Although in India, school enrolment rates have improved and the gender gap in enrollment declined, girls have low secondary level school completion rates<sup>2</sup> and are left out of economic participation, which are key catalytic pivots to achieving empowerment and gender equality. It is not enough to get women into work; it is critical to intervene during adolescence and ensure girls have access to education and skills necessary to obtain and retain quality employment, along with shifting norms.<sup>3,4</sup> Life Skills are a tool to equip young people to navigate and influence the ecosystem, but they have been critiqued for not addressing gender related issues and for not providing employability skills. ICRW's 2013 study scoping study also revealed that programs for adolescent girls need to integrate gender lens and create an enabling ecosystem.<sup>5</sup>



## THE APPROACH

Plan-It Girls is a multi-level and multi-stakeholder program to build agency of adolescent girls and promote gender equality to support their aspirations. The program uses ecological framework with adolescent girls at the center. It equips girls of grades 9 to 12 with a gender perspective to build an understanding of gender, power, patriarchy and how it impacts their day to day life and their ability to access opportunities and resources. It also builds life skills and employability skills to help them transition from school to work through a two-year gender integrated curriculum, which included a career fair. The program also engaged with significant stakeholders like male peers, parents, teachers and community members to shift gender norms and create an enabling environment for girls to reach their potential. The program was implemented in 20 secondary schools (10 girls' schools and 10 boys' schools) in Delhi and in 10 co-educational secondary schools in two districts of Jharkhand – Deoghar and Pakur. The diversity of these sites allowed for testing the model in both an urban and rural setting.

Through participatory activities, the curriculum focused on equipping girls with concepts related to identity, gender, power, patriarchy and its influence on day to day lives, emotions, relationships, communication, violence and the gendered nature of work and aspirations, along with skills to map aspirations, set goals, develop resumes, prepare for interviews and manage work, stress and money. As part of the ecosystem approach, the GEMS curriculum was transacted with the male peers of these girls in Delhi and Jharkhand.

## MAIN FINDINGS



Key outcomes vary  
by age and location



Increases in self-efficacy  
and self-esteem



Among some groups,  
increases in employment  
self-efficacy and  
career readiness

## KEY INTERVENTION COMPONENTS

- ♦ P.A.C.E. for Adolescents Curriculum
  - ♦ GEMS curriculum with boys
  - ♦ Engagement with teachers and mothers
  - ♦ Community campaigns

In Delhi, weekly meetings with mothers' groups were conducted over 4 weeks to discuss the value of the girl child, her education, issues related to early or forced marriage and an interaction between mother and daughter about the daughter's aspirations. Monthly sessions with teachers were held to discuss issues related to gender, adolescence, learning styles and creating a safe space for girls. The teachers also undertook individual action projects such as gender auditing of textbooks and engaging with girls and their parents to better understand their needs.

In Jharkhand, girls and boys participating in the program also led community campaigns. They held rallies, door-to-door campaigns and role plays focusing on issues related to girls' education and employment and early and forced marriage. Meetings were held with community stakeholders such as parents, panchayat leaders and other local government officials to make panchayat commits to actions that they can undertake to support education of adolescent girls. For teachers, a series of 3 workshops were held on understanding needs of adolescents, gender and related issues and familiarization with the curriculum for girls.

## THE RESEARCH

An evaluation study was conducted to assess the impact of Plan-It Girls' program on participants' empowerment and employability. The study employed a quasi-experimental longitudinal cohort design, following two cohorts of girls from class 9 through class 10 and from class 11 through class 12. A baseline survey was conducted before initiating the program implementation and an endline survey followed completion of the intervention. In Delhi, 3434 girls were interviewed at baseline, of whom 83% were interviewed again at endline. In Jharkhand, of 2971 baseline respondents, 97% were interviewed again at endline.

Key indicators fell into one of two domains. Empowerment included measures of self-efficacy, self-esteem, gender-equitable attitudes, self-assertive efficacy, mobility, self-decision-making and safe spaces. Measures of employability included employment aspirations, education aspirations, goal orientation, career decision-making self-efficacy, economic self-efficacy and preparation for work in the future.

## THE FINDINGS

Outcomes differed by both location and age. In Delhi, among Class 9 girls who participated in Plan-It Girls program compared to those who did not participate, a significant positive change occurred in self-esteem, gender attitudes, economic self-efficacy, preparation for work in future and enlisting parental support related to education and work. While a similar change was observed among Class 11 girls in empowerment indicators, no change was observed on employability indicators. The younger cohort feels more confident of their ability to acquire a job that pays well.

### Multilevel regression-mixed model

		Delhi		Jharkhand	
		Class-9	Class-11	Class-9	Class-11
Empowerment	Self-esteem	1.552***	1.311**	1.118*	0.156
	Self-efficacy	0.413	-0.113	1.727**	1.499*
	Gender attitudes	4.588**	2.735*	0.187	1.81
Employability	Career decision-making efficacy	-0.593	-0.891	2.345	2.812*
	Economic self-efficacy	1.289**	0.252	0.3	-0.366
	Preparation for work in future	1.366***	0.547	-0.053	-0.287

\*\*\* p<0.01, \*\* p<0.05, \* p<0.1

In Jharkhand, the program had a significant impact on the self-efficacy of girls across classes. It was observed that the self-esteem of girls in Class 9 of intervention schools improved significantly. A greater proportion of girls in both Class 9 and 11 reported equitable attitudes towards gender roles, gender attributes and gender-based violence. However, the shift does not seem significant after controlling for all socioeconomic characteristics. Career decision-making self-efficacy was found to be significantly impacted for girls in Class 11. A higher proportion of girls of class 11 reported that they feel confident of making a CV, identify employer and find relevant information for vocational or professional courses.

## THE IMPACT

Plan-It Girls had a significant impact on girls' self-perception across urban and rural program sites. The shift in gender attitudes was significant in Delhi irrespective of age. However, in Jharkhand despite greater proportion of girls reporting favorable attitudes at the time of endline, it does not seem to be impacted significantly when controlled for socioeconomic characteristics. In Delhi, the younger cohort feels more confident of getting a job, while in Jharkhand the older cohort reports greater efficacy to plan for work. The summary analysis highlights the differential impact based on age group and urban rural location. The qualitative study that is underway will help explain the differences and build a nuanced understanding of the impact.



**Harvard:**

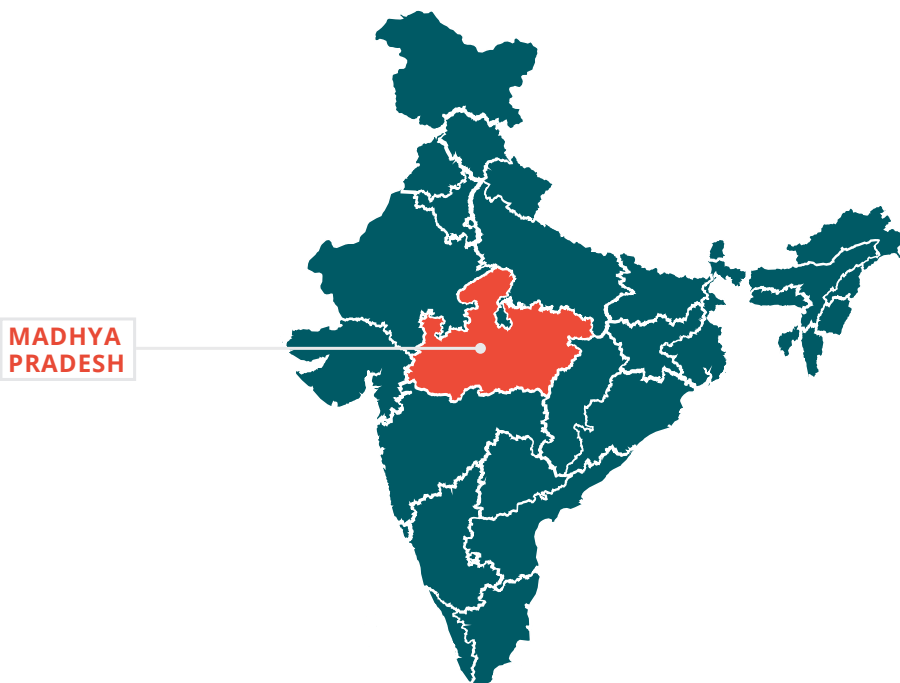
## SMART PAYMENT SCHEMES AS A GATEWAY TO WOMEN'S FINANCIAL INCLUSION AND SOCIOECONOMIC EMPOWERMENT

Madhya Pradesh, India | November 2015 – August 2017

### THE CHALLENGE

There is a big push towards broad-based financial inclusion and digital payments for social protection programs in India. Female labor force participation (FLFP) is low in India, but many women say they would like to work. If these women took up jobs, the FLFP rate would be 78 percent higher than it is. Restrictive gender norms limit women's mobility, decision-making power and access to the labor force.

The Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) is a national workfare program that guarantees 100 days of paid work at a fixed minimum wage. However, in some parts of India wages are paid into household accounts and not individual accounts. Since household accounts are almost always owned by men, this means women have very little control over their own wages.



**MADHYA  
PRADESH**

### MAIN FINDINGS



Providing poor, rural Indian women with the facility to directly deposit wages in their own bank accounts, along with training in digital banking:

- Led them to work more outside the home
- Increased empowerment among those with the least labor market experience
- Liberalized social norms

### KEY INTERVENTION COMPONENTS

- ◇ Personal bank accounts
- ◇ Basic bank training
- ◇ Direct wage deposit

### THE APPROACH

Researchers at Yale University, Harvard University, Duke University and the University of Southern California, in collaboration with Evidence for Policy Design (EPoD) India at the Institute for Financial Management and Research, conducted an experiment to measure the impact giving women more control over their MGNREGA payments. Women were provided with personal bank accounts, and some received further assistance, in the form of either a basic bank training session, direct deposit of MGNREGA wages to the new personal account or both direct deposit and training.

### THE RESEARCH

A randomized controlled trial was conducted in 197 communities to estimate the effect of increasing a woman's control over her wages separately from the effect of increasing her access to a bank account. The study covered four districts in northern Madhya Pradesh, India. The research focused on several main comparisons:

- i. Women who opened bank accounts
- ii. Women who opened bank accounts and linked their MGNREGA wages to those accounts
- iii. Women who opened bank accounts and were trained on how to use them
- iv. Women who opened bank accounts, linked their MGNREGA wages to those accounts, and were trained on how to use their accounts.

5,851 women in targeted communities satisfied the study's inclusion criteria; researchers sampled 4,500 to participate in follow-up surveys. 66 villages formed a pure control group, 68 received bank accounts, and 65 received bank accounts and linking. Bank training was cross-randomized across arms that received bank accounts.

### THE FINDINGS

Roughly one year after the intervention, the team found that women receiving a bank account, training and MGNREGA direct deposit were significantly more likely to work in either MGNREGA and the private sector. Treatment effects were concentrated among women who were least attached to the labor market and whose husbands believed there were larger community sanctions associated with female work. These "socially constrained" women fared better on a proxy of socioeconomic empowerment.

The longer-term results of the study, determined from a survey conducted approximately three years after the intervention began, showed that direct deposit and training liberalized social norms: women became more accepting of female work, while their husbands reported fewer social costs to having a wife who worked. Impacts for socially constrained women were even further reaching: three years after intervention socially constrained women offered direct deposit and training were still significantly more likely to work in the private sector and were significantly more empowered.

Why did strengthening women's financial control have such wide-ranging effects? One possibility is that women wanted to work all along, but stayed out of the labor force at the request of their husbands, who feared incurring community sanctions. Direct deposit and training may have given women the impetus to work despite their husbands' preferences.

### THE IMPACT

Social norms constrain women's labor supply all over the world, and we are still learning about the best way to change them. Many scholars think policies must directly address norms to effect rapid change. But this study shows that folding gender-intention design into social protection programs can get women working and spur social change.

### THE CHALLENGE

Despite steady economic growth in Cambodia in recent years, poverty and food insecurity persist, particularly in rural areas where residents rely on farming and fishing to make a living. Insufficient arable land, a failure to use land most productively and limited opportunities for income generation limit prospects for growth in these communities. Moreover, gender norms that maintain gender inequality exacerbate these challenges for women who, though they are primarily responsible for preparing meals and caring for children, are often barred from decision-making around household expenditure and other matters that affect them. Lack of decision-making power affects the wellbeing of the women themselves, and that of their children and families, contributing to food insecurity and child malnutrition.



### THE APPROACH

To improve child nutrition and household food security as well as enhance women's empowerment, Helen Keller International (HKI) is implementing an integrated series of interventions in Cambodia's Tboung Khmum Province. Working through "Village Model Farms," HKI targets vulnerable households with young children, and provides them with training and material support to help these families increase their food production and practice better nutrition and WASH behaviors, using HKI's proven Enhanced Homestead Food Production (EHFP) model. A gender analysis conducted by HKI found many direct links between gender inequality and household vulnerability. HKI seeks to target the harmful gender norms that impact these households through its Nurturing Connections© (NC) curriculum, originally tested in Bangladesh and then adapted to the Cambodian context. This interactive, facilitated approach involves both men and women, and uses role playing, games, and group demonstrations to foster dialogue and an understanding of power and inequality within households. The discussions are intended to improve the nutrition and food security of targeted households by empowering women to participate in decisions around food production and allocation of household resources. A key component of the NC curriculum is the active engagement of local leaders and the wider community in order to garner support for gender norm shift and mitigate the potential risk of backlash against such activities.

### PRELIMINARY FINDINGS

*Study is ongoing*



Increased crop and dietary  
diversity among both  
treatment arms.



Participation in the  
program and understanding  
of nuanced questions were  
both challenges.

### KEY INTERVENTION COMPONENTS

- ♦ Hands-on training on food production, nutrition, water, sanitation, and hygiene (WASH), and waste management
- ♦ Provision of subsidized agricultural inputs, with a focus on highly-nutritious produce and small livestock
- ♦ Facilitated monthly sessions focused on improving household dialogue and equitable decision-making

### THE RESEARCH

In order to measure the added benefit of incorporating a gender dialogue component into agricultural programming, HKI conducted a randomized controlled trial with three arms. One arm acts as a control, one arm receives only the EHFP intervention, and the third receives the EHFP plus Nurturing Connections® model. The study hopes to identify whether gender-transformative activities increase the effect of the EHFP intervention on food production and women's empowerment, and whether increased gender equality is associated with improved household health and nutrition.

A baseline survey in October 2016 collected information from 1,517 participants on indicators related to nutritional knowledge and practices, women's empowerment, and WASH practices. The survey used the Women's Empowerment in Agriculture Index (Pro-WEAI) to measure domains of women's empowerment, including self-efficacy and decision-making. The survey was conducted among the same households at endline. Approximately 20% of the baseline survey participants could not be located during the endline; where possible, another member of the household was interviewed.

The project was evaluated using a baseline and endline survey, and through analysis of quarterly monitoring data collected from households. In addition, regular observation was conducted during Nurturing Connections sessions, along with feedback to help facilitators continuously improve their skills. Cognitive testing was conducted in March 2019 to assess the degree of participant understanding of relevant questions in the Pro-WEAI. This assessment found very high levels of confusion around the concepts presented in the Pro-WEAI tool, raising questions over its reliability as a measure of women's empowerment. To supplement the Pro-WEAI the survey collected data on decision-making, and monitoring data was used to collect information on women's time use.

### THE FINDINGS

Analysis of the endline survey data is still underway, and final results will be available in Spring 2020. Preliminary analysis shows that the EHFP and EHFP+Gender arms showed good increases in crop diversity and women's dietary diversity scores compared to the control arm. Women who participated in the EHFP+Gender arm had slightly increased dietary diversity compared to the other two arms, but this difference may not be significant. The endline also shows small, positive shifts toward increased decision-making, but it is unclear whether these indicate increased empowerment, or merely increased women's participation in agricultural activities.

The cognitive testing produced several interesting findings relating to women's ability to comprehend the questions and statements from the Pro-WEAI tool. The majority of women interviewed faced difficulty in understanding the nuances between the questions and statements, with a few even unable to understand the instructions of the survey. Respondents' characteristics show that their level of education and whether or not they participated in gender-related activities may have been associated with their ability to comprehend the Pro-WEAI questions.

Participation in the Nurturing Connections sessions was a major challenge, which likely influenced the final results of the project. Among women, 40% participated in 6 or fewer NC sessions (out of 11), and participation was even lower for men. HKI is currently exploring ways to update its gender-transformative activities to increase the level of participation and engagement, such as by adding film and digital content.

### THE IMPACT

This study has the potential to point to the role of gender norms on household spending, and the ability of gender-focused curricula to expand the impact of agricultural programming on household food production, nutrition and food security. The successful adaptation of the NC curriculum from Bangladesh to Cambodia and other countries suggests the flexibility of such interventions to address gender inequality and harmful gender norms in diverse contexts.

However, challenges in delivering and monitoring gender-transformative approaches in a rural setting may lead to diluted impact. Strengthening the routine monitoring and analysis of project data on a regular basis, understanding the barriers to participation, and identifying ways to increase engagement with the curriculum are essential for realizing the potential of gender-focused interventions. In addition, there is a need to develop simple tools for assessing measures of empowerment that are meaningful and understandable for participants.



## THE CHALLENGE

In the urban and peri-urban areas around Kinshasa, Democratic Republic of Congo (DRC), poverty rates are extremely high and opportunities for earning income are limited. Despite high potential for agricultural production and mining, DRC suffers from some of the world's highest rates of poverty, malnutrition and infant mortality. Women are particularly vulnerable in this context and gender norms and constraints limit their access to agricultural inputs, education and markets. High rates of food insecurity and malnutrition with limited opportunities for improvement cause women in this desperate context to turn to sex work. Forced into this choice, sex work creates increased vulnerability, exposing women to HIV and other sexually transmitted infections, violence and stigmatization.



Photo: Panzi Foundation

## THE APPROACH

The Panzi Foundation (Panzi) created a program supporting women in this context, aiming to offer alternative income-generating opportunities in agriculture and food processing as well as address the stigma attached to sex-workers. Panzi worked in three sites in Kinshasa: Kimvula, Mpasa and Yolo.

The project was multi-sectoral, addressing economic, health and gender issues. Women received material support – in the form of either cash or productive inputs – as well as land rented by the Foundation for the Advancement of Science and Technology in Africa and training in the cultivation of cassava and vegetables and in food processing techniques. Panzi offered a savings initiative, encouraging women to save and matching their total savings at the end of the first phase of the project. Women were also advised by mentors, called “accompagnatrices” and enrolled in small groups to conduct productive and savings activities. Nutrition education activities were also carried out, and over the course of the intervention, 58 sessions were held with a local nutritionist and eight videos were created by the International Institute for Tropical Agriculture in French and Lingala on food processing and nutritional education. The gender component included enrollment of girls in vocational schools or formal education and the formation of women's groups to discuss gender issues and other issues of interest.

## MAIN FINDINGS



There is a rapid and significant decrease in engagement in sex work if an alternative source of income becomes available.



Women are likely to save money once they have established trust with a program or platform.

## KEY INTERVENTION SECTORS

♦ Economics ♦ Health ♦ Gender

**THE RESEARCH**

A quantitative survey of 450 women across the three sites collected socioeconomic and employment characteristics and explored respondents’ experience with and perceptions of female sex work. In addition, four sex-disaggregated focus group discussions looked deeper into the social and structural drivers of sex work.

Panzi also sought to understand the effectiveness of its multisectoral approach relative to a purely economic intervention. Therefore, Kimvula was selected as a control site, in which only the economic intervention (provision of agricultural inputs and creation of savings groups) was implemented. Panzi hoped to compare outcomes in Kimvula to those in Mpasa and Yolo, where economic activities were complemented by nutrition and gender activities.

Anticipated outcomes included increased production of commodities and income, improved dietary diversity and awareness of nutritional concepts and improved gender equity and social position of women.

**THE FINDINGS**

Baseline data show high levels of engagement in sex work. Sixty-five percent of participants reported professional sex work as a major source of income, but remuneration for this work could be as low as USD 1. On average, women entered into professional sex work at the age of 20. Education levels were low and food insecurity was high. Poverty and income shocks are the major factors that drives women into sex work in the study region.

Unfortunately, due to funding constraints, the team was not able to fully analyze endline data or draw comparisons between the study sites as planned. However, observational and monitoring data provide insights to the success of the project, as well as a few challenges.

The rate of engagement in sex work dropped significantly during the first phase of the project, to 22% by midline and 21% by endline, suggesting that when alternative opportunities for employment were available, women were quick to take advantage of them. Participants were given the choice to pursue either agriculture or food processing. About 2/3 (303 women) opted to engage in food processing. This proved to be a challenge because, since they were given identical productive inputs, they produced identical outputs. The lack of diversity in the food they produced caused them to compete with each other. By endline, only 30% of those women were still engaged in food processing, but the majority had shifted to other types of small businesses and, as a result, were not economically pressured to return to sex work. Additionally, 313 of the 450 women enrolled in the program (70%) were able to save money. Though the average amount saved was small (in general less than USD 8 per month), the percentage of women saving in all three sites increased between the first and second phase of the project, even when there was no promise of a matched contribution from the program.

Over the course of the project, more than 100 girls either were enrolled in professional education or else received support for formal schooling. There was no recorded change in nutrition status, though this was likely due, at least in part, to the short reporting period.

**THE IMPACT**

Panzi’s research suggests that vulnerable women are driven to sex work due to poverty and limited opportunity. When an alternative source of income is established, they largely take advantage of it and move out of sex work. Experience with savings suggests that once trust has been established – as through the realization of Panzi’s matching grant to women who had saved by midline – women are willing to continue to save when they are able. Finally, this project teaches an important lesson to implementers of economic empowerment projects around the need for diversity in business inputs to allow all businesses to succeed, rather than compete with one another.

**CHARACTERISTICS OF PARTICIPANTS**

ENGAGED IN PROFESSIONAL SEX WORK	65%
COMPLETED SECONDARY SCHOOL	15%
FOOD INTAKE LIMITED TO 1-2 MEALS PER DAY	98%
CHILDREN EXHIBIT STUNTING	31%

## Population Foundation of India:

# BAS AB BAHUT HO GAYA (“ENOUGH IS ENOUGH”) CAMPAIGN TO END GENDER-BASED VIOLENCE

India | March 2017 – October 2018

### THE CHALLENGE

Gender-based violence (GBV), particularly violence against women and girls, is deeply rooted in the social fabric of countries across the world. It takes various forms: physical, emotional, sexual and financial. The relatively young digital space has given rise to new forms of violence. Digital or cyber violence against women is being perpetrated through new information and communication technologies such as the mobile phone and internet (social networking sites, email). It can include pornography, stalking, uploading pictures or videos of women and girls without their permission, intimidating, threatening or blackmailing women and girls via social network sites and widely circulating personal or abusive emails.

Disturbingly, the regressive social norms and attitudes that sanctify GBV continue to shape youth across the world. In India, young women and men grow up witnessing GBV within their communities, families and homes. Since these norms are not contested, they take hold as “normal.” However, just as digital media can perpetuate GBV, it can also serve as a medium to challenge the norms which uphold GBV.



Photo: Population Foundation of India

### THE APPROACH

In partnership with film and theatre director Feroz Abbas Khan and actor Farhan Akhtar's Men Against Rape and Discrimination (MARD) initiative, the Population Foundation of India (PFI) conducted a pilot project using digital media entertainment as a form of education (edutainment) to change the cultural and social norms underlying GBV in India. PFI recruited national celebrities to relay messages motivating young girls to stand up against violence and showing boys that masculinity is not connected with violence. They also produced six short films and an anthem condemning GBV targeted to young people to be disseminated across various media channels over ten months. Additionally, they held a digital film contest for Indian youth to tell stories about combating GBV and discrimination in their own lives. The three winning films were shown at the project's final event: a concert during which noted male and female Indian celebrities spoke out against GBV.

### MAIN FINDINGS



Individuals who engaged with the campaign were more likely to feel the campaign videos were “meant for them” when they were in the focus age range (15-24).



Some exposure to the campaign was associated with better knowledge about GBV and attitudes rejecting GBV as acceptable.



Celebrity and non-celebrity films were equally effective in terms of changing knowledge and attitudes, but celebrity films were more likely to be shared on social media.

### KEY INTERVENTION COMPONENTS

- ◆ Celebrity messages ◆ 6 short films and an anti-GBV anthem
- ◆ Digital film contest for youth ◆ Celebrity concert

# Population Foundation of India: Bas Ab Bahut Ho Gaya (“Enough is Enough”) Campaign

## THE RESEARCH

The evaluation consisted of 1) a baseline/endline survey to determine the effect of exposure to the campaign on audiences’ knowledge, attitudes, beliefs, and behavioral intentions around GBV; 2) an efficacy study where groups answered questions around the design and message of each film; 3) Facebook chatbox surveys used to provide immediate feedback about each film online; and 4) campaign metrics. The researchers set out to determine whether messages aimed at changing norms around GBV delivered via short films over digital media would be effective, whether this intervention approach could change youth attitudes and perceptions towards violence against women and girls, and the influence of celebrities in the effectiveness of the messaging.

## THE FINDINGS

Through the different forms of data collection, the PFI team made several discoveries about both the efficacy of social media in reaching the intended audience (youths, particularly males, aged 15 to 24) and the efficacy of the message once it reached both male and female youth. They found that more males than females engaged with the content on both Facebook and YouTube, and the largest group of viewers was aged between 25 and 34. However, despite a larger group of older users seeing the campaign materials than intended, respondents of the Chatbot surveys who were in the focus age range were twice as likely as members of other age groups to feel the content was meant for them, indicating that the content was well designed for the target group. Of these respondents, most said they liked the film they viewed a lot (85%), thought this film was created for someone like them (87%), and would share it with their friends on Facebook (73%).

On both Facebook and YouTube, videos featuring celebrities and those featuring non-celebrities garnered about the same number of minutes of video viewed, though on YouTube celebrity videos had a marginally higher percentage of completed viewership. In the efficacy study, where participants commented on the efficacy of individual videos, female participants thought the films were equally effective regardless of whether the subject was a celebrity or not. Male participants thought videos involving non-celebrities were more effective. However, participants were 35% more likely to say they fully intended to share celebrity films on Facebook than non-celebrity films.

Overall, participants in the efficacy study felt the campaign films, whether featuring a celebrity or not, were attention-grabbing, informative, convincing, and gave good reasons to treat women and men equally and speak out against violence toward women. However, there was limited evidence that individual videos (whether celebrity vs. non-celebrity) affected the viewers’ beliefs, attitudes, and intentions to change behavior regarding violence against women. The only exception to this was that films focused on celebrities did increase the research subject’s intention to speak out against violence against women.

Despite the limited impact seen in the findings of the efficacy study, the endline evaluation, which focused on exposure to the campaign generally, rather than to a single video, did find significant differences in both knowledge of and attitudes towards GBV between people who were exposed to the campaign and those who were not. These differences held true controlling for confounding factors such as age, gender, urban/rural location, education and marital status. Interestingly, the biggest difference in knowledge occurred for people who had “some” exposure (1-99 video views) as opposed to those with “more” exposure (100+ views). Some differences emerged between men and women in these findings. For example, men were significantly less likely than women to identify a man forcing a woman or girl to perform a sexual act she does not want to, stalking, and indecent touching of a child as forms of GBV. Men were also more likely to agree with the statement “there are times when beating a woman is justified.” The study found no difference regarding intentions about GBV behaviors between participants who were exposed to the campaign and those who were not, though this may have been in part because participants generally voiced strong intentions against GBV.

## THE IMPACT

The campaign’s Facebook activities (videos, posters, and the anthem video) reached **18,751,214 Facebook users**. The campaign videos shared on YouTube (including the 6 videos, the anthem video, and a promo) garnered a total of **1,428,293 views**. The unique campaign hashtag #BasAbBahutHoGaya, however, gathered **52,497,036 impressions** and **34,953 tweets** with the hashtag.

The digital film contest received **1,700 entries** from across India. Of these 6 were shortlisted for a viewer’s choice poll which reached 8,500 people. The winning films were then more broadly disseminated.

At the concert, the campaign received endorsements from major celebrities. The concert was viewed through **Facebook Live by 480,000 people and got over 25,000 twitter impressions**. Nearly **2,000 people** attended the concert.

**SOCIAL MEDIA ENGAGEMENT**  
**18,751,214** Facebook users reached  
**1,428,293** YouTube views  
**52,497,036** Twitter impressions from  
#BasAbBahutGaya



## THE CHALLENGE

One of the largest challenges facing girls in Southern Malawi is the practice of child marriage. This practice is driven by a range of factors, one of which is poverty, which leads girls to engage in sexual relationships with older men for school fees, supplies or food. Another is the initiation camps commonly held at the onset of puberty, which can include the practice of *kusasa fumbi*, i.e. forced sexual initiation. Such practices increase the risk of unwanted pregnancy, which may result in child marriage and maternal death. Education is recognized as a force for good in girls' lives, but pregnancy leads to dropout and girls rarely return to school after childbirth. Although there are national and local level laws against child marriage, knowledge and enforcement of the laws remain inconsistent.



## THE APPROACH

The Enabling Girls to Advance Gender Equity (ENGAGE) intervention employs a multi-pronged approach to empower adolescent girls to increase their autonomy and decision-making agency, advance more gender-equitable social norms and build civil society organization (CSO) capacity to hold duty-bearers accountable for ending child marriage, keeping girls in school and improving access to sexual and reproductive health services. The intervention includes three main parallel interventions:

- A Girl Empowerment Intervention, focusing on training girl club leaders (ages 15 to 17) to raise their voices and increase their agency in making decisions pertaining to their education, health and development. These girl leaders form clubs of adolescent girls (ages 9 to 18) that receive the same content and create advocacy action plans targeting key local duty bearers to address the barriers limiting their opportunities and impacting their lives.
- A Civil Society Organization Leader Intervention to create an enabling environment to advance gender equity, by developing the capacity of civil society leaders and their organizations to create and implement girl-centered advocacy campaigns to push key decision-makers at local and district level to address the root causes of child marriage.
- SMS and Radio Interventions to build community support to end child marriage and enhance gender equity by reinforcing positive program messages, creating platforms where leaders can share their work and connect to key resources and services.

## THE RESEARCH

ENGAGE is being evaluated using a mixed method, quasi-experimental design with four arms. One arm receives only the girls' intervention, one arm receives only the CSO's intervention, and one arm receives both interventions. The fourth arm serves as the comparison arm. The radio campaign occurs across all four arms and is not included in the formal evaluation. Data was collected

## OUTCOME INDICATORS

*Study is ongoing*



Adult decision-makers' knowledge of child marriage related laws and other aspects of child marriage



Adult decision-makers' attitudes towards child marriage, girls' sexual and reproductive health and girls' education



Norms around child marriage in Southern Malawi

## KEY INTERVENTION COMPONENTS

- ♦ Girls' clubs supporting a girl-led community advocacy campaign
- ♦ Civil-society organizations that create an enabling environment
- ♦ SMS/radio campaign

before the intervention began, and about halfway through implementation, and will be collected again after the intervention ends. The primary objective of the evaluation—measured through a quantitative survey before and after implementation—is to assess how adult decision-makers' knowledge, attitudes and norms around child marriage change and what differences appear between arms. Additional qualitative interviews and focus groups allows the evaluation team to dig deeper into understanding the norms and drivers of child marriage as well as the dynamics of ENGAGE among participants and communities.

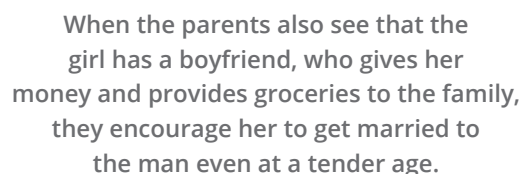
### THE FINDINGS

*Findings reported here are through midline only. Endline data collection is planned for spring 2020.*

At baseline, the evaluation found that decision-makers in ENGAGE communities believed child marriage was a negative practice that nevertheless still occurred. There were limited significant differences between the study arms. Rather than a social norm, decision-makers reported that several factors drove child marriage, including pregnancy, lack of education, limited job opportunities and poverty. Additionally, there was poor awareness of existent child marriage laws in Malawi, both at the national and local level. Given these baseline findings, ENGAGE partners incorporated a focus on increasing awareness of child marriage laws, preventing child pregnancy and encouraging girls to stay in school, or to re-enter school after pregnancy.

At midline, the team conducted qualitative interviews and focus groups that further investigated the complex relationship between poverty, adolescent sexuality and pregnancy, access to safe schools and child marriage.

Furthermore, these interviews explored the promises and challenges that ENGAGE faced in its first year of implementation. As was true at baseline, participants often highlighted how poverty drove sexual behavior, which parents then want to formalize into marriage. As one mother participating in a focus group explained, “When the parents also see that the girl has a boyfriend, who gives her money and provides groceries to the family, they encourage her to get married to the man even at a tender age.” For unmarried girls, sexual activity is often unprotected because of intense stigma, which prevents their access to contraceptive services. One ENGAGE girl leader says “the people [in the community] never trust you and they will always have questions on why you are accessing [family planning] services while you don’t have a husband... You are labeled as a prostitute because they believe if you don’t have multiple partners there is no need of accessing family planning services (Girl leader, age 15).” This, of course, suggests that stigma around unmarried adolescents’ use of contraception drives pregnancy, which oftentimes leads to marriage.



When the parents also see that the girl has a boyfriend, who gives her money and provides groceries to the family, they encourage her to get married to the man even at a tender age.

Girls and community members perceived girls who had participated in the program as more empowered and able to serve as leaders through the knowledge they had gained in the program. One ENGAGE girl leader reported “Because we are trained, our fellow girls believe what we tell them and listen to us when we visit them to discuss and discourage child marriages (Girl leader, age 15).” Some girls said that they felt they have been able to support other girls to go back to school, through either encouragement or financial support that they helped to raise through the girls’ clubs. Stakeholders interviewed at midline, CSO leaders, and ENGAGE girl leaders themselves regarded ENGAGE girl leaders as a resource for girls who were being forced into marriage. Girl participants described the knowledge and skills acquired through ENGAGE as a component of their empowerment. In the words of one participant “Before attending summer camp, I did not know what constitutes an abuse but now I do ... I am empowered and no one can cheat me into getting married now (Girl leader, age 17).” CSO leaders likewise reported important skill building and increases in their own self-confidence to work on girl-led advocacy projects.

### THE IMPACT

In addition to the important advantages for the girls and CSO leaders in the program, qualitative findings indicate that participants reported significant changes in their communities. These changes included a perception that cases of child marriage had been reduced (though this was contested between different respondents), particularly through the girls’ and CSO’s advocacy and partnerships with the chiefs, and increases in girls’ school attendance, including the readmission of girls who had dropped out and increased acceptance of married girls back into school. There were positive impacts reported around acceptance of access to SRH services for adolescents; however, stigma against unmarried girls’ use of family planning remains. While the presence and magnitude of these changes will be investigated after endline data is collected this indicates the potential that the program has made important improvements in the lives of girls living in the intervention communities.

**THE CHALLENGE**

Mobile technologies have swept through the developing world, and many believe they are revolutionizing not just person-to-person communication and the transmission of information but also access to financial services. Historically, most people in sub-Saharan Africa, especially women, have been unbanked—they tend not to use formal financial institutions for savings or payments. The increasing accessibility of mobile money platforms, therefore, is potentially transformative. The potential of digital financial services has attracted great interest from development agencies, NGOs, and academics focusing on poverty alleviation and empowerment. Extant research and programming, however, have tended to take it as a given that potential users of digital financial services already own a mobile device. There is less systematic knowledge of the actual effects of mobile phone ownership on access and use of digital financial services. This represents an important question given the critical disparities in mobile and smartphone ownership, especially among women, the poor and rural residents.



*Photo: Room to Grow*

**THE APPROACH****PHONE DISTRIBUTION:**

- ♦ Basic phone
- ♦ Smart phone

**CASH DISTRIBUTION:**

- ♦ Equivalent to the price of phones

REPOA's intervention consisted of cost-free distribution of basic mobile phones, smartphones, data plans and solar electrical chargers to low-income women in Tanzania in order to evaluate the effect on uptake of mobile financial services and women's welfare. Women were given either basic handsets, smartphones or cash equivalent to the price of a basic phone. They also received instructions and training on using a mobile device.

**MAIN FINDINGS**

**Mobile phone uptake improved economic livelihoods through greater use of mobile money and by boosting their efficiency as market traders.**



**Basic handsets had the largest impact on individual economic outcomes, but smartphones had the largest impact on household gains.**

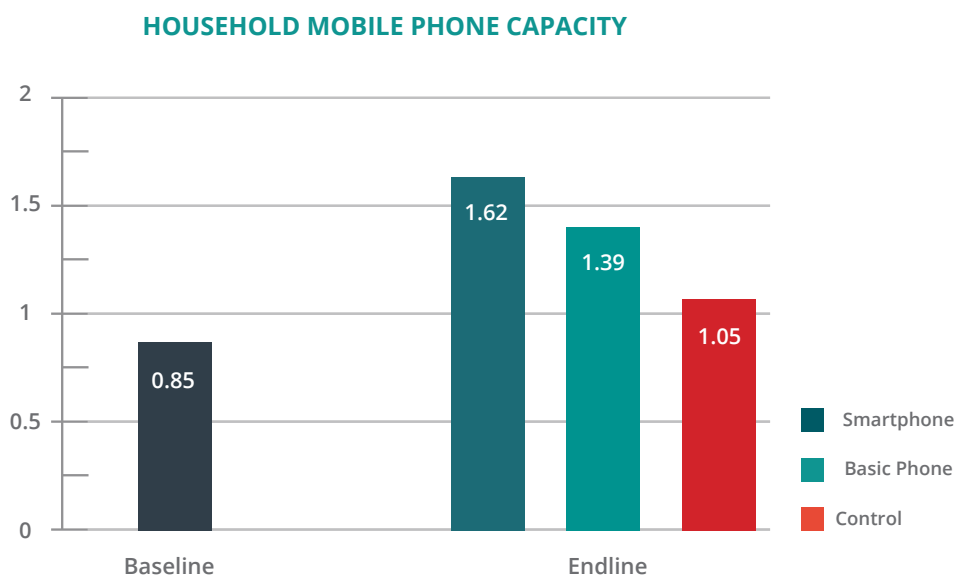


**Smartphones are among the most cost-effective anti-poverty interventions available, with a benefit-cost ratio of 2:1.**

### THE RESEARCH

REPOA conducted a randomized control trial with 1,352 female non-phone owners in Tanzania in 2016-17 and randomly assigned participants to one of four study groups: basic handsets, smartphones, a cash placebo and a control in which subjects were placed on a waitlist for the phones to be received one year later. Mobile-use instructions were bundled with the treatment conditions and therefore any treatment effects are interpreted as the impact of the intervention + training. The study also examined the effects of group vs. individual training, as well as subgroup effects of the phones on urban vs. rural residents, literate vs. illiterate women and women with more or less openness to new technology. This was the first randomized control trial to test the effects of different types of mobile devices and packages on uptake of mobile financial services and also the first large-scale trial to assess the effects of cellphone ownership on women's welfare.

### THE FINDINGS



Over fourteen months, the mobile phone intervention significantly improved participants' uptake and use of digital financial services. Receipt of basic and smart phones, however, produced differential economic effects at the individual and household-level, respectively. Whereas basic phones had stronger effects on women's mobile money use and income levels, smartphones induced higher gains in household consumption. Two factors account for this. Basic handsets tended to better match the participants' technical competencies and were thus more likely to be of direct benefit to the participants themselves. In contrast, smartphones were more likely to be shared among the household and tended to have stronger effects on the household's overall mobile phone capacity—leading to a significantly higher count of phones in the household by endline compared to other conditions, including the basic group.

The welfare effects in the smartphone group were quite substantial: increasing annual consumption by \$215 (95% CI: \$48-\$351). With a benefit-cost ratio of more than 2:1, this makes it among the most cost-effective anti-poverty interventions available. In contrast, for example, cash transfer programs at best have a 1:1 benefit-cost ratio.

Individual and household economic gains, however, were attenuated by handset loss, which occurred at a rate of 26% among those assigned to the phone groups. Of those who failed to retain their handsets at midline, more than 75% were still without a phone 8 months later at endline. Consumption effects also appear to be mediated by how the smartphone was shared within the household between the recipient and her spouse—whether cooperatively or non-cooperatively. If the participant reported that her husband confiscated the phone (i.e., was the only one who used it), households were much worse off.

### THE IMPACT

Overall, this study affirms the benefits of increasing mobile technology uptake among the poorest. However, that individual and household economic gains emerged only in the face of substantial turnover in mobile phone ownership suggests that policies to mitigate phone turnover require as much attention as policies to increase phone adoption. Observers may be tempted to assume that an essential threshold will be reached when all possess a mobile phone. Instead, the results here suggest that handset ownership is quite tenuous and that the very poor living at the margins simply cannot easily or readily replace a lost, broken, or stolen phone. So any mobile-based income-generating activities must necessarily wait for a windfall or for savings to accumulate—and our data suggest that such a moment may take many months or even years. While mobile phones might indeed provide part of the answer in the struggle against global poverty, deeper consideration must be given to the challenges faced by low-income households when they confront the loss of valued assets.



# Population Services International: ROOM TO GROW

Zinder Region, Niger | 2016-2018

## THE CHALLENGE

Niger suffers from one of the world's highest birth rates, resulting in a high rate of population growth. This taxes an already strained agriculture sector, further aggravated by unpredictable rains and weather patterns brought on by climate change and can result in childhood malnutrition. In a cultural context of gender inequity and one in which status depends on the number of children, this is complex and difficult to overcome. Social pressures drive early marriage and high fertility and leave little room for conversations between marital partners about family planning.



Photo: Room to Grow

## THE APPROACH

Room to Grow was introduced in 2016 to improve gender equity, nutrition and access to family planning services. Where possible, Room to Grow leveraged existing community gardens created by non-governmental organizations, or otherwise worked with the communities to set up women-led gardens. The gardens are tended daily by women, and so offer a unique and convenient opportunity to reach women in rural areas and engage them in a safe and supportive space. The Room to Grow intervention included reproductive health counseling and capacity-building on family planning, nutrition and joint decision-making. It involved both men and women as well as religious leaders in an effort to address deep social norms.

### KEY INTERVENTION COMPONENTS

◇ Gender equity in decision-making ◇ Use of family planning ◇ Nutrition

## MAIN FINDINGS



Women increase  
participation in  
household decisions



Use of and intention to use  
contraception significantly  
increased



Knowledge of the benefits  
of family planning  
significantly improved



No change in dietary diversity  
scores, but women have  
better understanding  
of its importance

## THE RESEARCH

In order to measure the success of the intervention package, the team conducted both quantitative and qualitative research. Twenty gardens in southern Niger were selected, of which half were assigned to receive treatment group and the others were used as a comparison. In total, 600 women participated in the research. The two groups were assessed at baseline (in 2016) and at endline (in 2019) and data were analyzed using a difference-in-difference technique. Qualitative interviews were conducted to gain a deeper understanding of the concepts and expected change.

The research assessed progress around three primary goals:

1. Women play a more active role in household decision-making;
2. Couples have increased their use of modern family planning methods; and
3. Families and children experience improved nutrition and greater dietary diversity.

## THE FINDINGS

The intervention improved access to information on family planning and the use of modern contraceptive products. In terms of gender equity and nutrition, the effects remain nuanced.

**Gender equity and decision-making.** There was no significant change in either women's or men's scores around traditional gender roles or in couples' communications scores. However, qualitative findings indicate that women reported participating in household decisions more than the control group.

**Use of family planning.** Room to Grow's clearest successes were around family planning. Though knowledge of family planning methods was initially high in both groups and the change there was not significant, use and intention to use contraception increased significantly in the treatment group. The project also significantly improved knowledge on various benefits of family planning, including women's health and children's education. Men in the treatment group were, like their female partners, more likely to know about the advantages of family planning. Qualitative research showed that they were particularly driven by the economic benefits, indicating a potential avenue for further engaging them. Room to Grow also points to the relationship between gender equity and family planning and found that the intervention increased the proportion of women discussing contraception with their husbands, which is directly correlated with increased use of contraception. There was a noted negative relationship between adherence to traditional roles and the use of contraception.

Qualitative findings stressed the importance of involving religious leaders in the programming. Participants reported that this helped increase the acceptability of family planning and normalize such conversations between spouses.

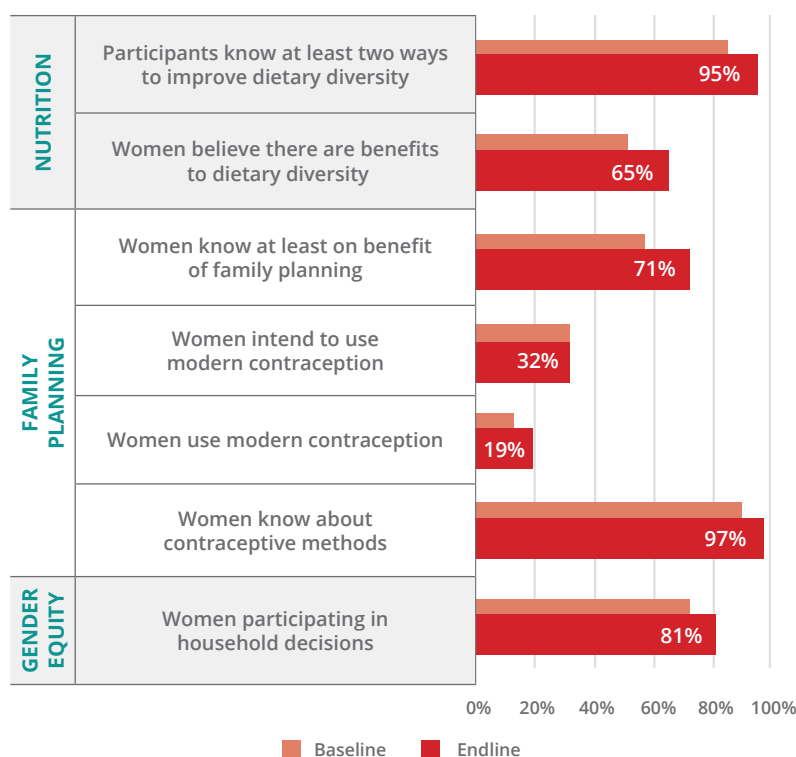
**Nutrition.** Although there was no significant change in participants' dietary diversity scores, 88 percent of reproductive age women who received the treatment report an increase in the number of types of foods eaten. They also gained a better understanding of the importance of dietary diversity and of methods to achieve it. Qualitative analysis suggests that lack of resources and a scarcity of vegetables at the time of data collection might explain why the improvements in knowledge did not translate into behavior change.

## IMPACT

Room to Grow's research indicates that norms around gender equity and communication may begin to shift if there is a longer intervention period and longer-term data collection to understand how shifts in norms can translate in behaviors.

Community dialogue and religious leaders may play an important role in this process and help the project achieve the trust that was essential for its success, which suggests that similar projects should attempt to leverage various stakeholders in similar ways. The project demonstrates that integrating reproductive health and gender-intentional programming within their existing activities such as community gardens may be an effective modality to engage and educate women in rural communities.

### CHANGES OBSERVED IN TREATMENT GROUP



# A RIGOROUS GIRLS' EDUCATION LIFE SKILLS EVALUATION IN A DEVELOPING COUNTRY CONTEXT

Rajasthan, India | July 2016 – July 2018

## THE CHALLENGE

Girls around the world continue to lag behind boys in school performance. In India, girls experience pressure from the family to engage in paid or unpaid work and from inequitable gender norms around the value of education, which keeps them out of school or forces them to drop out in higher numbers than their male peers. Even when girls do attend school, barriers to their education persist, in the form of classroom curricula and teaching methods that favor boys. When girls do not complete school or are not successful in school, they are at a higher risk for child and forced labor.



Photo: Room to Read

## THE APPROACH

Introduced in India in 2004, the Girls' Education Programme (GEP) implements a life skills curriculum that helps girls develop the necessary skills to negotiate key decisions and have agency over their lives. Girls in secondary school, generally from grade six through twelve, engage with the curriculum in a variety of age-appropriate and adaptable simulations, discussions and activities, led by a social mobilizer. These are employees of Room to Read – typically local women who adopt the role of mentor and role model for the engaged students.

For the duration of the multi-year intervention, social mobilizers conduct biweekly sessions during the school day. They also offer group and one-on-one mentoring sessions to support girls in a more targeted way, focusing on the challenges that they face and developing long-term goals. Social mobilizers are also trained to engage with various stakeholders, including school staff and parents, hosting school-wide events and conducting home visits with the parents of enrolled girls.

## MAIN FINDINGS



GEP reduced  
school drop-out



GEP enhanced life skills  
among girls, especially  
around creative problem  
solving, decision-making  
and relationship building.

## KEY INTERVENTION COMPONENTS

*Life skills curriculum including:*

- ♦ Self-confidence
- ♦ Expressing and managing emotions
- ♦ Empathy
- ♦ Self-control
- ♦ Critical thinking
- ♦ Decision-making
- ♦ Perseverance
- ♦ Communication
- ♦ Relationship building
- ♦ Creative problem solving

THE RESEARCH

Independent researchers surveyed 2,400 female students and their parents in Rajasthan, India – half of whom participated in Room to Read's life skills-focused Girls' Education Programme [GEP] and half who hadn't. This research aimed to inform the program's potential for scale up and reveal any areas for refinement to the program. 119 schools were identified as eligible for the program based on teacher experience and education level and classroom infrastructure. Of those, 60 were assigned treatment and 59 served as a control group.

Outcomes of interest included school completion and progression, life skills, child labor and academic achievement. Both quantitative and qualitative data were collected. 2,459 were surveyed at baseline, and 2,387 (97%) remained enrolled through the endline. The survey included detailed questions, activity tests and cognitive tests designed to measure life skills and academic achievement. In-depth interviews provided a basis for better understanding the channels of change in attitudes, perceptions and decision-making.

THE FINDINGS

The two-year study found that girls who participated in a streamlined version of Room to Read's program showed a measurable increase in grade progression, as well as problem solving, decision making, relationship building, expressing agency over their lives, and planning for the future, when compared to the control group. Program participants also exhibited a 25% lower dropout rate, and a 4% increase in grade progression. Qualitative evaluation reveals that the supportive environment fostered by GEP helped girls stay in school longer and prepared girls to set and attain personal and academic goals.

No significant benefits were noted, at least during the first two years of the program, regarding labor inside or outside the home or probability of being married by endline (approximately age 14). However, changes in these domains as a result of the GEP may be expected outside of the short-term nature of this evaluation as this study only captures short-term impacts of a two-year version of the program.

THE IMPACT

This evaluation highlights the key role that life skills development may play in support girls' education. Particularly in settings where girls have restricted access to professional and personal development, the building of strong relationships both within girls' peer groups and between girls and female mentors is critical. Likewise, programming should implement multi-level interventions that engage communities to transform inequitable gender norms. Room to Read's experience also points to the need for thorough and long-term evaluations of similar life skills programs to understand the impact of developing life skills on outcomes later in girls' lives.

INDICATOR	CHANGE
Participant self-identifies as primary decision-maker of education	↑ 17%
Participant decides who and when to marry	↑ 40%
Participant's ability to articulate a goal	↑ 20%
Participants' dropout rate	↓ 25%

The supportive environment fostered by GEP helped girls stay in school longer and prepared girls to set and attain personal and academic goals.



# Swaziland Action Group Against Abuse:

## EMPOWERING GIRLS FOR IMPROVED HEALTH AND WELLBEING

Manzini and Lubombo, eSwatini | February 2016 – February 2021

### THE CHALLENGE

Gender inequality is a norm in eSwatini and girls and young women face high levels of exposure to violence and HIV with serious consequences for their health and long-term well-being. The 2007 national Violence Against Children Survey (VACS) show 48% of 13-24 years olds reported experiencing some form of sexual violence.<sup>1</sup> Girls who experienced violence were more likely to report sexually transmitted infections (STIs) including HIV, unwanted pregnancy and pregnancy complications, alcohol use, suicidality and depression and are more likely to experience intimate partner violence in adulthood.<sup>2</sup> While rates of violence against girls tend to be high, reporting is consistently low. Boys also are not immune to violence and its consequences. 68% of boys report experiencing physically violent discipline.<sup>3</sup> Boys who experience violence in childhood are at a higher risk of growing up to perpetrate violence.<sup>4</sup>



### THE APPROACH

To respond to this challenge, the Swaziland Action Group Against Abuse (SWAGAA) has implemented a project centered on two different groups of clubs: Girls Empowerment Clubs (GECs) and Boys for Change Clubs (BCCs). SWAGAA engages girls and boys aged 10-14 years in grades 4 and 5. Clubs are active for approximately 2 months of every school term. The purpose of the GECs is to help improve girls' social assets, self-efficacy and leadership skills as well as increasing their access to and use of services, including those responding to gender-based violence (GBV), HIV/AIDs and sexual and reproductive health (SRH) needs. To increase use of these services, the GECs are connected with local service providers and provide a referral system. There are GECs both inside and outside of schools and they serve both in- and out-of-school girls. GECs meet on a weekly basis and allow girls to participate in guided discussions on issues including violence, HIV, SRH, child rights, advocacy, leadership and gender roles and behaviors. GECs are facilitated both by teachers and volunteer mentors, who are either club graduates or recent high school graduates from the same community as the girls. The BCCs take place in-schools only and are meant to serve as a "factory" for deconstructing harmful masculinities. In the clubs, boys participate in weekly facilitated discussions around gender norms, gender-based violence and the harmful results of some conceptions of masculinity on people of all genders. In-school GECs, BCCs and out-of-school GECs ran for two years for all research arms except the control. Through this work in the GECs and BCCs, SWAGAA hopes to promote gender equality. The clubs ran for an average of 24 weeks per year.

Additionally, SWAGAA supplements these clubs with both community engagement work such as engagement with faith leaders, parents' meetings, trainings for traditional leaders and community dialogues. Additionally, mentors and home visitors for club participants come from the community and help engage the clubs with the communities. Lastly, to support this program of activities, SWAGAA has purposively engaged the Ministry of Education in eSwatini to develop both the GEC and BCC and to provide training to teachers in schools where the program is implemented and guidance officers based in these regions. Additionally, the SWAGAA team collaborates with the Deputy Prime Minister's Office' Department of Social Welfare (DSW) and Department of Gender and Family Issues (DGFI) to coordinate regional multi-sectoral referral networks

### OUTCOME INDICATORS

*Study is ongoing*



Program impact on girls' and young women's health and self-efficacy



Girls' experience with SRH, violence and services



Girls' school retention and psycho-social health



Program impact on boys' attitudes, knowledge, and actions related to gender equality and rights; SRH issues (including HIV); and violence



Boys' experience of violence



Relationship between girls' and boys' experiences of violence

### KEY INTERVENTION COMPONENTS

- ♦ Girls Empowerment Clubs (in school and out of school)
- ♦ Boys for Change Clubs
- ♦ Community engagement
- ♦ Government stakeholder involvement

# SWAGAA: EMPOWERING GIRLS FOR IMPROVED HEALTH AND WELLBEING

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with the service providers listed above as well as police officers from the Domestic Violence Unit to ensure adequate service delivery through the referral systems.

## THE RESEARCH

To evaluate the in-school girls' clubs, a total of 30 schools (15 in Manzini and 15 in Lubombo) were randomly assigned to intervention or control arms and evaluated with baseline and endline surveys. Schools implementing the intervention began implementation at the same point in the project, wherein 10 schools had GECs and complementary BCCs; 10 schools had GECs only and 10 schools did not have clubs and served as the control group. The schools were block randomized for inclusion within one of the three study arms. These three groups will be compared against each other and the comparison group to assess the influence of the GECs alone and of the complementary BCCs. The out-of-school girls clubs began in year 1 of the project implementation and will have only a pre-, post- test evaluation, with no comparison of non-intervention of schoolgirls. At baseline, the sample size was 1794 girls and 884 boys.

The program is evaluating how the GECs impact girls' and young women's health and self-efficacy along context-appropriate measures for SRH, violence, service use, school retention and psycho-social health. The boys' club evaluation investigates how the project impacts boys' attitudes, knowledge, and actions related to gender equality and rights; SRH issues (including HIV); and violence. Additionally, schools which include boys' clubs will be used to assess how violence features in the lives of in-school boys, and how this informs girls' experience of violence.

In addition to the quantitative surveys, the project includes focus groups with club participants, both in and out of school and interviews with select key informants (such as mentors, school officials, community leaders involved with the out of school clubs, and multi-sectoral committee members) to provide an ongoing process evaluation of the project. Work with the government sectors is also evaluated qualitatively to gather data on whether and how investment in government coordination can create sustainable mechanisms to support increased service access and quality.

## THE FINDINGS

*This evaluation is ongoing. Findings reported here are based on data collected and program staff observations.*

From the initial observations during implementation, the SWAGAA team has found that exposure to the boys' club curriculum has the potential to decrease violent behavior by the club's members and improve relations between girls and boys. One anecdote serves as a telling example. Following a session on bullying, boy in one of the BCCs felt that his own behavior constituted bullying. In the days after the session, he took steps to correct his behavior by apologizing to the focal teacher, the mentor and his fellow club members. In several schools with BCCs, boys have become protective of girls in the school. There are also reports of better relationships between girls and boys at school level activities.

In terms of project learnings from implementation, SWAGAA has found that engagement of the schools' administration teams integral to program implementation and promoted uptake of the project. They have also found that both male and female mentors have had the capacity to run clubs, demonstrating that the model of working with local volunteer mentors can be highly successfully.

The SWAGAA team has experienced some challenges in implementation, in particular around absenteeism and lack of completion from the boys' club members. Absenteeism was high among clubs that met after school compared to those that were allocated time within school hours. Reasons include having to use transport that departs at a specific time, having to walk long distances resulting in late arrival at home, or being unable to stay for the club due to hunger especially in schools that did not provide meals. Absenteeism was a particular problem when there were sporting activities in the schools. To solve these problems, the program team worked to ensure scheduling around other school and sporting activities. Challenges also occurred because teachers who were not engaged in implementation were not supportive of the clubs, SWAGAA was able to respond by providing sensitizations to the whole school staff to increase buy-in and engagement. SWAGAA was also able to improve response to case reporting through continuous involvement and collaboration with the relevant ministries.

## THE IMPACT

Although the evaluation remains ongoing, the SWAGAA team has already observed some important impacts of the program. One of the most important elements of these has been an improved relationship with the Ministry of Education through the ongoing engagement work, and they see a high level of ownership of the program from the ministry. This has eased implementation and will likely continue to ease implementation of future programs. Likewise, parents in the intervention communities have reported being highly supportive of the program and believe it is useful in encouraging good, healthy behaviors from their children. This has also eased project implementation.

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4) Ministry of Gender, Children, Disability and Social Welfare of the Republic of Malawi, United Nations children's Fund, the Center for Social Research at the University of Malawi, and the Centers for Disease Control and Prevention. Violence Against Children and Young Women in Malawi: Findings from a National Survey, 2013. Lilongwe, Malawi: Government of Malawi, 2014.

## THE CHALLENGE

Women have limited power over decisions related to their household, finances and their own reproductive health. New evidence suggests that more equitable distribution of resources between spouses will not be sufficient for women's empowerment. Gender norms, too, impact household power dynamics and restrict women's ability to play a meaningful role in the decisions that affect their lives and those of their families. Confronting and transforming those norms, alongside structural changes, is critical to building women's agency.



## THE APPROACH

Implemented by researchers at the University of Ibadan, Women Working with Partners is a couples' intervention in Ibadan, Nigeria that targets married couples, engaging women and their husbands together to shift gender norms and household dynamics in order to strengthen women's agency around key decision-making domains – household, financial and reproductive – while improving husbands' gender equitable attitudes, decreasing Intimate Partner Violence (IPV) and increasing use of and access to contraception.

Women and their husbands were recruited randomly from 48 communities in four Local Government Areas (LGAs) in Ibadan, Nigeria, including two urban LGAs – Ibadan North and Ibadan Southwest – and two peri-urban LGAs – Oluyole and Akinyele.

The program included three key components. Over six weeks between July and September 2018, all participants joined group sessions focused on gender socialization, including awareness of gender, division of labor, decision-making and communication skills. One group also received financial literacy training and a third group were targeted for gender socialization and financial literacy as well as family planning counselling. In each group, women and their husbands attended sessions and engaged with the material. In some sessions, participants were divided by sex, while others were couples-focused and therefore mixed. Among those in the family planning group, the poorest couples also received vouchers for contraception to ensure that use of contraception was not constrained by finances.

Individual sessions were led by program-trained facilitators of the same sex as participants. Couples' sessions were led by one male and one female facilitator. Interactive sessions were held weekly during the implementation period with each session lasting between 90 minutes and two hours.

## MAIN FINDINGS



Norm transformation was successful in improving women's DM power across household, financial domains.



Gender socialization is important for women's empowerment, but added benefits of other intervention components not clear.

## KEY INTERVENTION COMPONENTS

- ◆ Gender socialization
- ◆ Financial literacy
- ◆ Family planning

### THE RESEARCH

In order to test the efficacy of each intervention component to shift household power dynamics and improve the agency of women involved, the University of Ibadan and the International Center for Research on Women conducted a four-arm clustered Randomized Controlled Trial: 1) Gender socialization; 2) Gender socialization and financial literacy; 3) Gender socialization, financial literacy and family planning activities; and 4) a control group.

A baseline survey was conducted immediately before implementation with 1,236 couples. The endline was conducted with 1,064 of those original couples six months after implementation was complete. The research team analyzed the results using a difference-in-difference method to compare changes across all four groups.

The baseline and endline surveys sought to evaluate:

1. Perceived level of involvement in household decisions, financial decisions and reproductive decisions;
2. Use of time for various household responsibilities and other tasks;
3. Experience and perpetration of violence;
4. Women's use of traditional or modern methods of contraception and ability to obtain a method of choice; and
5. Men's gender attitudes, including around violence and contraception.

### THE FINDINGS

In all study arms, women's participation in household decision-making increased significantly, particularly in the arm that received all three interventions. Improvements across all arms were also observed in financial decision-making. Increases in reported decision-making power around reproductive choices were not found to be significant, but across all groups, including the control arm, use of contraception and the ability to obtain a method of one's choice increased.

#### Difference-in-Difference Results (Women)

	Gender Socialization	Gender Socialization & Financial Literacy	Gender Socialization, Financial Literacy & Family Planning
Household Decision-making Score	▲ 5.194**	▲ 4.709*	▲ 6.176**
Financial Decision-making Score	▲ 7.569*	▲ 7.786*	▲ 1.039
Reproductive Decision-making score	▲ 3.105	▼ 2.472	▲ 4.604

\* p<0.1; \*\*p<0.05

Women in all three treatment groups reported reduced time spent on household chores and lower rates of emotional and physical violence. Decreases in experience of sexual violence were not statistically significant.

Men in the group receiving all three interventions showed significant improvements in GEM scores ( $p<.01$ ), a decrease in acceptance of IPV ( $p<.01$ ) and an improvement in attitudes toward contraception ( $p<.05$ ).

### THE IMPACT

Endline analysis of Women Working with Partners points to the critical need of programs seeking to build women's agency to build awareness of and work to transform harmful and restrictive gender norms and household power dynamics. Only when these restrictions are lifted can women meaningfully exercise power over key household, financial and reproductive decisions. These findings also point to the added value of building tangible skills and knowledge in relevant areas, like financial literacy and sexual and reproductive health, to both support women's decisions in those domains and serve as an incentive for participation in the program. Finally, this evidence points to the success of couples-based interventions for improving health and empowerment outcomes. Both women and their intimate partners are key players in shaping household outcomes, and they must therefore be engaged as partners in change.



## WaterSHED:

# EMPOWERING WOMEN AND INCREASING SANITATION: MAKING THE RURAL WASH MARKET WORK

Cambodia | January 2016 – December 2017

### THE CHALLENGE

In Cambodia, 40% of children under 5 are chronically malnourished. Evidence shows that improved sanitation is the single best intervention to support healthy growth and development. Strengthening markets for low cost, improved latrines can help ensure access and contribute to sustainable behavior change and healthy sanitation practices.

Women have roles on the supply side as well as on the demand side of the WASH market. Women are the main audience of sales activities and final users of products. When access to WASH products is improved, women benefit the most. Additionally, market-based approaches in WASH offer significant opportunities for women to engage in economic activities, hone their business skills and gain professional experience. However, women in Cambodia also face adverse social pressures that do not allow them to take full advantage of these economic opportunities. Norms around women's domesticity, coupled with burdensome household responsibilities can limit women's ability to participate in the labor market. Owning their own businesses allows women to work from home and have the flexibility needed to complete housework and care for children while also earning an income.



Photo: WaterSHED

### THE APPROACH

WaterSHED's program used a women's mentorship network for peer-coaching, training and community support for leadership and business skills of women in the industry. The program created gender-sensitive marketing strategies and recruited women as actors in the value chain to use marketing tools and channels that resonate with women customers. In addition, the project used research to capture learnings about women in rural markets in WASH sector in Cambodia that can be used for effective programming in the future.

### MAIN FINDINGS



**WEwork increased women's leadership abilities and confidence**



**Increased income, job specialization and interest in working the WASH sector**



**Both treatment and control groups increased record-keeping, political participation, and social networks**

### KEY INTERVENTION COMPONENTS

- ♦ Professional and personal skills training
- ♦ Peer mentorship circles
- ♦ Women-to-women marketing
- ♦ Gender-sensitive marketing plans

### THE RESEARCH

WaterSHED launched the “WEwork Collective” – the women’s economic empowerment program that includes leadership training, focused business coaching, and peer-led mentoring – in 2015 and conducted baseline, midline and endline surveys to analyze changes among program participants over a range of outcomes. Between 240 and 280 women from 7 rural provinces in Cambodia were interviewed at baseline, midline and endline depending on their participation and departure from the program. The research collected data on women’s household decision-making and agency, business skills, WASH knowledge and access, and financial inclusion. The team used a difference-in-difference method to understand the changes in participants’ behaviors and capabilities. However, it should be noted that the treatment and comparison groups were not randomly allocated.

### FINDINGS

Participants had high baseline scores for self-efficacy and as a result did not show significant changes through the end of the project. Both treatment and comparison groups showed an increase in household expenses record keeping; increased political participation, such as nominations for public posts; and income from wage employment. The number of businesses owned by women fell from 92 to 65, with indications that businesses that are not sustained were less productive. The women who closed their businesses during the program took on more paid work instead, and therefore closing of those businesses may have been an improvement on overall efficiency in women’s income generating activities. The number of women who plan on opening a business also fell significantly, indicating more research is needed to understand why running businesses was unattractive to participants. Lastly, respondents showed an increased social network between baseline and endline, including the number of people contacted by respondents, the number of people contacting the respondents and the frequency of contacts. This change was significant for both treatment and comparison groups.


Qualitative research further found that participants of the project felt more empowered by the end of the project. Respondents mentioned that before the project many did not have experience in leadership and lacked confidence. Being a part of the collective improved their confidence to pursue business ambitions, motivated them to take up leadership roles in the community, and communicate more effectively with their husbands. Female sales agents who participated in the WEwork program also reported greater self-efficacy and confidence.

It is possible that the quantitative research did not find significant results because of a few logistical challenges in setting up the research. The sample size was too small to capture the treatment effect. The comparison group consisted of only 44 women who had indicated interest in the program and then did not enroll. The treatment and control group were also from the same community; therefore, it was not possible to ensure that the control group was not exposed to spillover from the program, as women from the program may have shared their knowledge with non-participants.

### IMPACT

WaterSHED’s project contributed to increased income among participants and increased job specialization among participants. At endline, participants specialized more, working a smaller number of jobs and engaging in fewer types of income-generation activities, but working overall more days of the year: 154 days compared to 85 days at baseline. Women also reported being more confident and capable of political engagement.

Lastly, the program generated significant interest among women in work in the WASH sector. At an endline workshop, 145 out of 200 WeWork participants set goals related to WASH jobs. The challenge remains in converting that interest into entrance and retention in WASH jobs.



**“Although I am not highly educated,  
I am brave enough to voice my ideas  
during village meetings.”**

**– WaterSHED participant**



### THE CHALLENGE

During adolescence, young people begin to take on more risky behaviors and evidence shows that the health of adolescents is affected by a variety of social factors at the individual, family, community, and national levels.<sup>1</sup> South Africa has one of the world's highest rates of sexual gender-based violence (SGBV) against adolescent girls,<sup>2</sup> with more than a third of girls experiencing sexual violence before the age of 18.<sup>3</sup> The timing of transition as adolescent girls enter secondary schooling is particularly precarious; girls' exposure to physical and emotional threats increase as they age. As girls mature, they become increasingly at risk for HIV, pregnancy, and SGBV. Both genders experience school violence, adolescent girls experience SGBV in this setting at far higher levels than boys.<sup>4</sup> Violence and gender inequality, may be a major driver of school dropout in South Africa, though the data on reasons for dropout remain poor. In any case, violence and gender inequality significantly affect girls' physical, mental, and educational outcomes; ultimately affecting life trajectories.

At the same time young men are typically expected to uphold patriarchal norms around masculinity, which privilege male power, risk taking behaviors, and dominance over women.<sup>5</sup> Adolescence is a critical period for programs that reduce the risk of boys becoming perpetrators of abuse.



### OUTCOME INDICATORS

*Study is ongoing*



**School retention/drop out among program participants**



**Reporting of violence & improved health seeking behaviors**



**Gender attitudes & girl's agency**



**Nature and density of participants support networks**



**Overall safety at every stage of the program**

### KEY INTERVENTION COMPONENTS

- ♦ Girls' clubs that combine sport with teaching about gender inequality, empowerment and sexual and reproductive health.
- ♦ Boys' clubs that combine sport with teaching about gender inequality, sexual and reproductive health and gender-based violence.

### THE APPROACH

The goal of GAP Year is to empower adolescent girls as they progress in education by improving their overall health, safety, and wellbeing through an increase in their educational, health, social, and economic assets, while at the same time shifting gender attitudes and encouraging positive behavior among adolescent boys. To do so, the program ran a 44-session afterschool intervention, delivered to a cohort of grade 8 learners by trained coaches over a 2-year period. Using sport as a medium of teaching, the curricula covered a variety of topics such as gender norms and empowerment, violence, HIV prevention and treatment, sexuality, risky sexual behaviors and decision making. These clubs were organized to be single sex during the first year of implementation but then brought girls and boys together into co-educational clubs in the second year so that girls and boys could explore these topics together.

Parent dialogues and a text-messaging platform were key to keep parents engaged and informed about the program. Simultaneously, the program held workshops with teachers, and school administrators to strengthen their capacity to effectively implement the National School Safety Framework. The program also worked to create links between the school and students with a cadre of local health and psychosocial support service providers, seeking to increase uptake of services. Taken together, this work in schools was meant to create an enabling environment where the afterschool intervention could flourish.

### THE RESEARCH

The GAP Year program was evaluated using a cluster randomized control trial. In each provincial location (Western Cape and Gauteng) schools were randomized into intervention and control arms. In both arms, girls and boys participated in quantitative surveys at baseline and endline. Girls and boys who participated in the study were followed longitudinally, i.e. they participated in both rounds of data collection. The evaluation of the GAP Year program tested the impact of the intervention primarily on school retention (or drop out) and reporting of violence. Secondary measures focused on gender attitudes, girl's agency, improvement in health seeking behaviors, nature and density of participants support networks and overall safety at every stage of the program.

### THE FINDINGS

*Findings reported here are from the implementation of the program. Endline data collection has been completed in one study site and analysis is ongoing. Endline data collection for the 2 other study sites is planned for February – May 2020.*

The team found that adopting a combination of strategies for linking adolescents to care and leveraging existing service providers was critical to ensuring an ecological approach to SRH service provision. Multipronged parental engagement also allowed the team to reach as many parents as possible and to ensure meaningful and continued sharing of information. Channels including text messages, dialogues, graduation events, letters and phone calls provided a broad range of communication with parents.

Implementers also noted the importance of culturally-sensitive and age-appropriate curricula, particularly for sessions around sexual decision-making and personal boundaries. Similarly, while mixed-sex programs can inspire productive conversations around sexual health, participants also need the time and space to address and challenge social and gender norms around the interactions between boys and girls, which they may be more comfortable doing in a single-sex setting.

Finally, the team noted that after-school programs benefit from incentives of food and safe transportation home, in order to ensure that all participants can participate meaningfully and safely, particularly in settings where mobility is limited and often differentiated by sex.

### THE IMPACT

As noted above, the evaluation is ongoing. Following completion of the intervention, we hope to see improved school retention among program participants and increased reporting of experiences of violence. We also hope to see improved health seeking behaviors generally, an improved social support network and reports of feeling safe throughout the program. The results will also demonstrate whether girls and boys have adopted for equitable gender attitudes and if girls have furthered their agency.

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## THE CHALLENGE

Adolescent girls in Kenya lack the products and information they need and seek to make safe, informed decisions and to develop healthy, lasting behaviors as they navigate puberty. The onset of puberty and menarche is a specifically vulnerable time for girls, during which they are exposed to myriad external pressures, including sexual coercion or predation from boys and men, expectations to marry from their families, and the need to perform well in primary school in order to qualify for secondary school. Such pressures are deeply exacerbated by girls' lack of knowledge of their bodies, their rights, and the implications of their decisions, and by their inability to manage puberty and adolescence safely and comfortably with appropriate menstrual health and hygiene management (MHM) products. Their lack of resources compounded with the external pressures they face leaves girls susceptible to unsafe or inaccurate information and unsafe people that may hold deep and lasting negative implications for their sense of voice and agency, their confidence and self-determination, their sexual activity and health, and their education as they transition to womanhood. The problem is not merely that girls lack the products, education, and support they need to navigate puberty and make lasting, informed decisions. It is that girls actively seek this level of support but have yet to receive a holistic solution that is safe, accurate, scalable, and consistently responsive to their most pressing questions and needs.



## THE APPROACH

ZanaAfrica's intervention rested on two central pillars that would provide girls with both physical resources in the forms of sanitary pads and knowledge, skills and critical consciousness through a comprehensive, rights-based, adolescent health and resiliency curriculum. The curriculum focused on adolescent health, including pregnancy, drugs and alcohol, sexually transmitted infections and menstrual health; gender and power; human rights; violence and resiliency. It was conducted through 25 sessions broken across five school terms (over 18 months, nearly two full academic years). This curriculum was supplemented by five editions of "Nia Teen" magazine, an educational resource that centered around a fictional character, Nia, a young girl who served as a role model for the readers as told through an illustrated comic. The magazine also included informative articles, Q&A and other resources that support girls through the joys and challenges of growing up. These magazines were

## MAIN FINDINGS

ZanaAfrica's intervention changed girls' understanding of gender norms.



Girls' reproductive health knowledge improved.



Girls showed improved attitudes towards menstruation, particularly those who used pads.



Educational outcomes such as attendance, performance on final primary education exams and matriculation into secondary school were not affected by the intervention.

## KEY INTERVENTION COMPONENTS

- ♦ A magazine aimed at teen age girls centered on teaching about sexual and reproductive health and girls' empowerment
- ♦ A sexual and reproductive health curriculum using the magazine as a curriculum guide and resource
- ♦ Provision of sanitary pads

delivered at the beginning of each school term and were used as a “textbook” to support the curriculum, with activities and content that followed the curriculum. The physical resources provided by the project included packages of sanitary pads and clean underwear.

### THE RESEARCH

The Nia Project was evaluated using a mixed method, cluster randomized control trial with four arms. One arm received only the sanitary pads and underwear, one arm received only the curriculum and teen magazine, and one arm received both interventions. The fourth arm served as the comparison arm. Data was collected at baseline, before the intervention began, about halfway through implementation (midline, qualitative only), and after the intervention ended (endline). The primary objective of the evaluation—as measured through a quantitative survey before and after implementation—was to assess changes in knowledge and attitudes around MHM, reproductive health and gender. Additionally, the project measured education outcomes such as attendance, performance on final primary exams and matriculation in secondary school. Additional qualitative interviews allowed the evaluation team to dig into the dynamics of the Nia project among participants, schools and communities.

### THE FINDINGS

ZanaAfrica’s intervention changed girls’ understanding of gender norms around what girls and boys are “supposed” to do, their roles and marriage, and their perception of the sexual double standard, where boys are afforded praise for engaging in sexual activities and girls are stigmatized. Girls reproductive health knowledge also improved. Girls showed increased knowledge of pregnancy and sexually transmitted diseases and increased their ability to name at least one modern family planning method. Girls also showed improved attitudes towards menstruation across the intervention, with girls who received menstrual pads showing the greatest improvement.

Notably, educational outcomes such as attendance, performance on final primary education exams (given at the end of 8th grade), and matriculation into secondary school were not affected by the intervention. This is not surprising given that poverty accounted for 65% of girls’ inability to transition to secondary school.

Outside of the quantitative findings, in the qualitative midline girls reported that the program hoped developed role models for them, both in the forms of the educated female facilitators and in the form of Nia herself. Girls reported that they respected and wished to emulate Nia, and underscored that she had gone through school, worked hard and become a pilot. One participant described Nia as “a girl there who studied hard... And now she has a good job. She helps herself.”

### THE IMPACT

Through the last few years, ZanaAfrica and others have been working to shift the narrative that “pads keep girls in school” to a more nuanced understanding of the role sanitary pads and other elements play in engaging girls and communities in comprehensive sexuality education. The data from this project underscores the fact that there is not one solution to solving the challenges faced by girls.

However, by engaging girls in conversations about their sexual and reproductive health through the lens of menstrual health, ZanaAfrica’s intervention offers an entry into communities where there may otherwise be resistance to reproductive health education. When combined with poverty-alleviating and school strengthening programs, this model has a powerful role in helping girls navigate the challenges of adolescence.