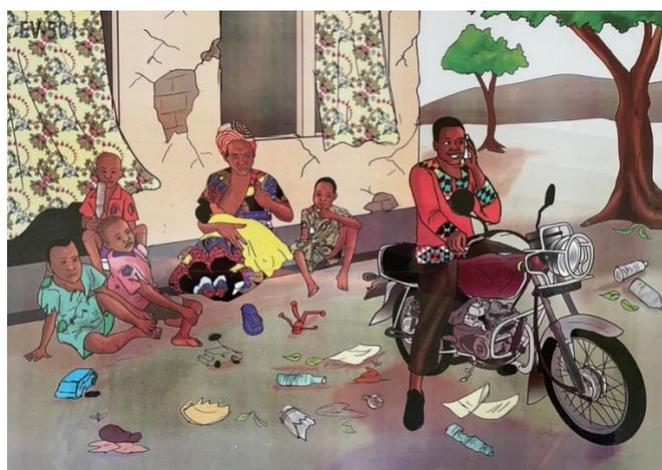


# Comprehensive Endline Evaluation for the Violence Against Women and Girls (VAWG) Program “Scaling Up Faith Leaders’ Engagement to Prevent and Respond to VAWG”



\* Source: Project FAMA cards

Project: Scaling up faith leaders' engagement to prevent and respond to VAWG

Location: Liberia, West Africa

Project period covered by evaluation: 01/10/2018 - 30/09/2022

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## Executive summary

### Introduction

Based on the promising progress documented in the endline evaluation of their three-year project (2015-2017) aimed at improving violence prevention and response to women survivors through engaging faith leaders, the UN Trust Fund awarded Episcopal Relief & Development and Episcopal Church of Liberia Relief and Development (ECLRD) a second three-year grant from 2018 to 2021 (with an extension granted in 2020 that meant the project ended in December 2022). The overall goal of the project was for women and girls to experience less intimate partner violence and non-partner sexual violence and have increased access to services. The project, entitled “Scaling up Faith Leaders Engagement to Prevent and Respond to Violence Against Women and Girls (VAWG)”, was also supported by other funding sources, including a grant from Islamic Relief USA. Episcopal Relief & Development continued with its faith-based methodology from phase 1 of the project, but with the addition of some components. In the second phase of the project, implementation occurred in the same two counties as phase one (Grand Cape Mount and Rivercess, totalling seven years’ ECLRD intervention), with the project scaling up to two additional counties (Bong and Grand Gedeh, which each had a four-year ECLRD intervention). The project was implemented in 14 districts across the four counties, in 54 communities (or townships), 24 of which were new and 30 of which continued to receive project activities from phase 1.

Project implementation started in October 2018. However, during Year 2 of project implementation, COVID-19 broke out in Liberia, with a 5-month national lockdown starting in March 2020. To help adjust to these unforeseen challenges, Episcopal Relief & Development and ECLRD were awarded a one-year Spotlight Initiative Grant. The UN Trust Fund also approved a one-year no-cost extension for project implementation delayed due to COVID-19, as well as an additional three-month no-cost extension, to complete the final evaluation.

Episcopal Relief & Development and ECLRD commissioned an independent endline evaluation of phase 2 of the project in Liberia. The purpose of the evaluation was to measure project achievements and capture key project learnings for further interventions. The key objectives were to:

1. Evaluate the entire project against the effectiveness, relevance, efficiency, sustainability and impact criteria, as well as the cross-cutting gender equality and human rights criteria;
2. Identify key lessons and promising or emerging good practices in the field of ending violence against women and girls, for learning purposes.

The endline evaluation started in July 2022 and concluded in February 2023 by a team of independent researchers, assisted by an in-country enumeration team and transcription team. Fieldwork was implemented in October and November 2022.

### Methodology

The evaluation consisted of a mixed-methods quasi-experimental design, with different approaches used for different types of beneficiary groups. For male and female congregants, the evaluation drew from a non-equivalent groups design to compare outcomes between an intervention group (beneficiary congregants accessing the intervention in intervention communities and tracked from baseline to endline) and a comparison group (non-beneficiary congregants in non-intervention communities tracked from baseline to endline). For faith, youth and school leaders, and youth group members, the evaluation drew from a pre- and post-test design in which faith, youth and school leaders, and youth group members, were sampled at baseline and endline, but with no tracking of

participants and no corresponding comparison group. Across both types of evaluation design, the endline evaluation comprised of a mixed-methods approach including quantitative and qualitative data that was integrated at the goal and outcome levels. Additional qualitative data were generated to respond to the overarching evaluation questions and objectives.

The evaluation drew on four key methods. A **desk review and secondary analysis of project data** was conducted, including monitoring data, quarterly and annual reports, and any additional studies conducted during the project timeframes. The desk review helped the evaluation team to triangulate endline findings, but also contributed to endline measures.

The quantitative methods comprised **surveys conducted with (1) congregants, and (2) faith, youth and student leaders, and youth group members**. Survey questions were separated into seven parts based on topics/content and targeted participants. The quantitative tools replicated the baseline tools in order to compare baseline and endline findings, with some modification. The endline sampling approach replicated the baseline approach, with two separate evaluation designs, one for congregants and the second for faith, youth and school leaders, and youth group members. The baseline sampling approach drew from a non-equivalent groups design that included a treatment group (beneficiary congregants accessing the intervention in intervention communities and tracked at endline) and a comparison group (non-beneficiary congregants in non-intervention communities tracked at endline). The achieved endline sample was 735 in the intervention group and 729 in the comparison group. For youth, faith and school leaders, and youth group members, a pre- and post-test design was implemented, with no tracking of participants and no comparison group. The endline sample replicated, as closely as possible, the baseline sample for each type of group, including the gender of respondents, with an endline achieved sample of 388.

**Focus group discussions (FGDs)** were conducted with male and female faith leaders (separately), male and female youth leaders (separately), male and female congregants (18+ years) (separately), boy and girl congregants (13-17 years) (separately), Savings with Education Group Leaders (women only), Savings with Education group members (women only), and ECLRD staff. The types of FGDs conducted within each of the counties were selected at random by the researchers. Randomised sampling of FGD participants were conducted with the help of the ELCRD county-level staff. A total of 18 FGDs were conducted (17 at county level and 1 at national level), which engaged with a total of 129 participants.

**Key informant interviews (KIIs)** were conducted with ECLRD and Episcopal Relief & Development staff members, national/district duty bearers/stakeholders, and partners (formal and informal) involved in project implementation (at county and national level). ECLRD staff identified the KII participants based on purposive sampling. A total of 16 KIIs were conducted (in county and national level).

Survey data was collected through a mobile phone digital software application, CSPro, which allows data to be uploaded in Excel and other format in real time. Survey data was cleaned and imported into, and analyzed in, a STATA 13 database. KIIs and FGDs were audio recorded and transcribed. All transcripts were coded and analyzed using Atlas.ti 8, drawing from a hybrid deductive and inductive approach.

International ethical clearance for this research project was applied for and received from the Stellenbosch University Research Ethics Committee: Humanities. Ethical research standards were observed at all times, with additional precautions instated to protect participants from harm.

The endline evaluation had a number of challenges and limitations. In terms of the qualitative data collection, adverse weather conditions made it impossible to visit Grand Gedeh, which meant that FGDs and KIs could only be conducted in Rivercess, Grand Cape Mount and Bong. In relation to the quantitative data collection, the evaluation team faced significant challenges tracking and recontacting baseline participants, with approximately 30% of the baseline sample lost and requiring replacing, although this was pre-empted at baseline through the application of a 30% attrition buffer to the sample. Another limitation of the quantitative component of the evaluation is possible 'contamination' in the comparison group given that a number of VAWG prevention and response projects and advocacy activities have been implemented in the comparison county since the baseline evaluation of Episcopal Relief & Development and ECLRD's intervention. Some 'contamination' may have also occurred in the intervention group.

When presenting the findings of the evaluation, the term 'volunteers' is used to refer to individuals who were voluntarily involved in implementing the project at community-level, including faith leaders, youth leaders, community leaders, and community members (e.g., members of Savings with Education groups). The majority of these volunteers were faith leaders and the volunteers were frontline implementers driving project results and impact.

## Findings

Findings are organised around the UN Trust Fund evaluation criteria and questions.

An assessment of the **effectiveness** of the project in achieving intended goals, outcomes and outputs (Evaluation question 1) indicates that the project results were achieved to a medium level overall, but with clear evidence of improvements in behaviours, knowledge and attitudes being associated with intervention exposure. There were also some wide variations in the extent to which results were achieved across the counties. The intervention appears to have been effective in reducing women's experience of IPV and NPSV and there are some significant associations between this reduction in violence and exposure to various intervention activities, including participating in faith-based activities where VAWG was addressed, and having seen FAMA cards (a social and behavior change communication tool). **A corresponding decrease in men's perpetration of violence was not observed; however, this may be linked to men's social desirability bias at baseline, county-level variations, and exposure to intervention activities.**

While there is evidence of some improvements in attitudes that support violence, particularly among adolescent boys, the intervention has not impacted on gender equitable attitudes. Overall, knowledge of VAWG services only improved among adult women and not adult men or adolescent boys and girls; however, knowledge was positively associated with intervention exposure to faith-based activities. Female congregants had better knowledge of services provided by faith leaders, particularly in Bong, but there was a decrease at endline in the proportion of survivors who accessed help from a faith leader. While support from faith leaders was perceived to be helpful overall, this was much less so in Grand Gedeh.

The findings related to actors speaking out suggest that while there has been a small reduction in faith leaders speaking out publicly against VAWG, this was largely driven by a reduction in Grand Gedeh. Nevertheless, there was an increase in congregants having heard faith leaders speak out, and in perceptions that faith leaders were working to stop VAWG, but these improvements were not found in all counties and only small improvements were observed in Grand Gedeh compared with the other counties. The proportion of youth faith leaders, school leaders and youth group members reporting publicly speaking out increased overall across the counties.

Finally, the project appears to have been effective in institutionally strengthening EPISCOPAL RELIEF & DEVELOPMENT and ECLRD's sustainable response to crises, with the implementation of a number of financial and project management systems having clear positive influence on ways of working.

The evaluation findings suggest that, overall, there was strong **fitness** in the project design and implementation processes (Evaluation Question 2), which were found to be appropriate to the context. Project staff and partners highlighted the multisectoral and collaborative engagement of the project, and the multiple types of stakeholders engaged (including government, faith leaders, youth leaders, teachers and community members) as key strengths. The project also adapted throughout the implementation period to enable the inclusion of additional stakeholders. Nevertheless, there were some gaps reported, including the need to engage more comprehensively with national-level stakeholders, and to lengthen project timeframes given that not everyone learns and changes at the same pace.

An assessment of **impact** (Evaluation Question 3) - There is strong evidence from both the quantitative and qualitative data that the project has contributed to reducing VAWG, but it is clear that VAWG still persists, and to a greater extent in some counties (e.g., Rivercess) than others. The survey data shows some important associations between violence reduction and congregants' exposure to faith-based activities and other activities supported by the project, including FAMA cards, and the qualitative data also supports these associations. The qualitative data also suggests that there has been positive impact on gender equality and women's empowerment, most visible through the multiple reports of women stepping into leadership roles in their community, and reports that men are supporting women more with domestic labour and other activities stereotypically associated with women. However, the survey data also suggests that there have been no significant improvements in congregants' gender equitable attitudes, despite some positive improvements in attitudes related to violence, including men and boys' support of rape myths.

The evaluation has identified an important, positive, unintended impact of the project: the bringing together of Christian and Muslim faith leaders and communities, and the strengthening of interfaith collaboration. Participants stated that this interfaith collaboration was unheard of in the past, and has strengthened social cohesion in communities. ECLRD was reported to have been instrumental in supporting and facilitating this process.

There is evidence that the project's **second grant had a positive influence** on the implementation and impact that Episcopal Relief & Development and ECLRD was able to have (Evaluation Question 4). The second grant enabled the project to expand to new locations, and more intentionally engage female faith leaders and youth leaders. Phase 2 also saw the expansion of advocacy work and more activities specifically targeting men.

The **relevance** (Evaluation Question 5) of the achieved results to the needs of women and girls is reflected in the very strong request for continuation of project implementation in the target communities, as well as extension of the intervention to other communities and counties. KII and FGD participants believe the intervention is relevant to the needs of their communities, and to women and girls especially, as it is able to reduce VAWG. The request for the intervention to continue (so that it can fully eradicate VAWG in the target communities) and expand (so that it can reduce and eradicate VAWG in all communities) is testament to its relevance.

The **efficiency** of the project is reflected on in Evaluation Question 6, which asks whether the project was efficiently and cost-effectively implemented. The project is seen as having been efficiently and cost-effectively implemented for a number of reasons: 1) Despite a cost extension of one year and a no-cost extension of three months, as well as the challenges of implementation in an economically

unstable country, the project funds were carefully managed to last over a full four years; 2) Innovative systems were developed to enable effective financial management in these challenging settings, including a mobile money transfer platform and new financial management software; 3) the project was also able to source additional funding and negotiate budget reallocations to deal with the challenges of COVID-19; and 4) project implementation was able to adapt to the impact of COVID-19, including lockdowns, and adjust activities.

Reflecting on the sustainability of the project involved three evaluation questions. **EVAWG activism is viewed as having increased** (Evaluation Question 7) due to project implementation, with qualitative fieldwork reporting an overall increased awareness of and resistance to VAWG, an increase in different community spaces that discuss VAWG, increased reporting of VAWG, and an increase in community systems that address VAWG. Various different project activities have been implemented, experienced and/or witnessed, with the FAMA cards perceived as very impactful. By those involved in EVAWG activism, it was described as challenging work, with resistance experienced.

Qualitative fieldwork showed that participants believe the project results are **sustainable** (Evaluation Question 8), for three reasons: 1) positive, transformational change of many people in the targeted communities; 2) individuals mobilised as activists by the intervention believe that they will continue teaching and spreading what they've learnt; and 3) measures have been put in place to ensure sustainability, e.g., customary community laws. Despite belief in the sustainability of results, there is a strong request for ECLRD to continue implementation, as 1) longer-term engagement in targeted communities are needed; 2) engagement with more communities are needed; and 3) volunteerism will be challenged without ECLRD support, with especially lack of finances challenging volunteer activities. ECLRD and Episcopal Relief & Development did consider sustainability from the outset of the project, identifying a number of specific sustainability measures, as well as developing new ones during project implementation.

**Institutional strengthening** (Evaluation Question 9) activities are viewed as having contributed to ECLRD's adaptability and resilience. The one-year Spotlight Grant facilitated key investments in strengthening the capacity of ECLRD to operate under complex conditions. Infrastructural improvements enabled better functioning and reporting at county and national level, while several investments in Episcopal Relief & Development and ECLRD staff led to improved relationships, morale and accountability structures. It also enabled the implementation of qualitative research on the impact of COVID-19 on women and girls in the four project counties, as well as help address the most direct COVID-19 challenges affecting project implementation.

The project is viewed as having **generated knowledge, promising or emerging practices** (Evaluation Question 10) in the field of EVAWG. Four practices/learnings from project implementation emerged as particularly important: 1) FAMA cards as very usable, impactful and highly recommended, with their pictures and reflection-learning-action dialogue process; 2) the role and engagement of faith leaders as key actors and activists; 3) the interfaith approach of the project, which led to interfaith collaboration; and 4) awareness-raising about VAWG and gender equality as a crucial activity.

**Similar EVAWG interventions are advised** (Evaluation Question 11) to 1) intentionally plan for sustainability already from inception phase; 2) consistently and continuously train and sensitise local stakeholders, and develop the infrastructure to rapidly on-board new volunteers; 3) use an experiential learning model to allow an iterative process of self-discovery that enables attitude and behaviour change; 4) intentionally communicate and disseminate project learning and achievements to a wider audience on the role of faith in addressing VAWG; and 5) build flexibility into project design.

A research piece was commissioned to investigate **the impact of COVID-19 on women and girls** (Evaluation Question 12) in the target counties. The research found that the men and women had been differently affected by COVID-19, because of unequal access to ownership and control of resources. These two factors, in turn, created a gender gap in resources and widened the poverty gap, disrupted education, increased exposure to gender-based and intimate-partner violence, and reduced access to health services. Staff and faith leaders identified COVID-19 as a significant challenge to project impact, which led to several implementation adaptations being made.

ECLRD and Episcopal Relief & Development staff identify **human rights approaches** (Evaluation Question 13) as incorporated in several ways in the project: 1) in the way activities were implemented, emphasising voluntary participation; 2) in the aim of the project and the target beneficiary group, which recognises that women and girls' rights are being violated; 3) by working for the benefit of all women and girls, not prioritising any single culture or religion; and 4) through its increased support (during project implementation) of the most marginalised within communities. At the same time, through intentionally engaging with and through faith groups, the project had to navigate certain religious convictions that counter a human rights approach.

By focusing on decreasing VAWG and increasing women's access to services, the project can be described as designed as **a gender responsive programme** (Evaluation Question 14). Project staff felt gender responsive approaches were present in the project's intentional engagement of women in equal amounts as to men, through project activities addressing gender roles and gender equality, and by creating gender-specific safe spaces. In response to the baseline research, the project also intentionally worked to include more women, especially women faith leaders. However, it is not clear whether these strategies to include more women, and to work with them in safe spaces, used any techniques and approaches that were developed specifically for use with women.

## Conclusions and recommendations

The endline evaluation has identified a wide range of positive impacts according to the project's results framework. At the project goal level, the evaluation found some mixed findings. As outlined in the report, these results need to be read through the lens of an 'imperfect' comparison group, with a large number of VAWG prevention and response programs also being implemented in the comparison county. At outcome level, positive impact was observed for almost all indicators in the results framework. Despite these positive results, it is also evident that impact differed substantially across the intervention counties, and not always with clear trends that can easily explain why more negative impact was observed in some counties on some indicators. There are a number of possible reasons for such variations in results across the counties. Nevertheless, overall, the endline evaluation results suggest that the theory of change holds.

A summary of the results according to each evaluation criteria have been formulated.

- In terms of **effectiveness**, the project results were achieved to a medium level overall, but with clear evidence of improvements in behaviours, knowledge and attitudes being associated with intervention exposure. There were also some wide variations in the extent to which results were achieved across the counties.
- As far as **impact** is concerned, there is strong evidence from both the quantitative and qualitative data that the project has contributed to reducing VAWG, although VAWG still persists, and to a greater extent in some counties (e.g., Rivercess) than others. The evaluation has identified an important, positive, unintended impact of the project: the

bringing together of Christian and Muslim faith leaders and communities, and the strengthening of interfaith collaboration.

- The **relevance** of the achieved results to the needs of women and girls is reflected in the very strong request for continuation of project implementation in the target communities, as well as extension of the intervention to other communities and counties.
- In terms of **efficiency**, the project was efficiently and cost-effectively implemented, with project funds carefully managed to last over a full four years, innovative systems developed to enable effective financial management, additional funding sourced and budget reallocations negotiated to deal with the challenges of COVID-19, and project implementation able to adapt to the impact of COVID-19.
- As far as the **sustainability** of the project impacts are concerned, EVAWG activism is viewed as having increased due to project implementation. The qualitative fieldwork showed that participants strongly believe that the project results are sustainable. Nevertheless, there is a strong request for ECLRD to continue project implementation.
- In terms of **knowledge generation**, four practices/learnings from project implementation emerged as particularly important: 1) FAMA cards as very usable, impactful and highly recommended; 2) the role and engagement of faith leaders as key actors and activists; 3) the interfaith approach of the project, which led to interfaith collaboration; and 4) awareness-raising about VAWG and gender equality as a crucial activity. Based on the learning from this project, similar EVAWG interventions are advised to 1) intentionally plan for sustainability already from inception phase; 2) consistently and continuously train and sensitise local stakeholders, and develop the infrastructure to rapidly on-board new volunteers; 3) use an experiential learning model to allow an iterative process of self-discovery that enables attitude and behaviour change; 4) intentionally communicate and disseminate project learning and achievements to a wider audience on the role of faith in addressing VAWG; and 5) build flexibility into project design.
- Finally, ECLRD and Episcopal Relief & Development staff identify **human rights approaches** as incorporated in several ways in the project. At the same time, the project had to navigate certain religious convictions that counter a human rights approach. Project staff felt **gender responsive approaches** were present in the project's intentional engagement of women in equal amounts as to men, through project activities addressing gender roles and gender equality, and by creating gender-specific safe spaces.

A number of recommendations are offered in light of the study findings and conclusions.

### Effectiveness

- With the endline survey, no impact on gender equitable attitudes was observed, even when some improvements were seen in attitudes that support violence. It is therefore recommended that the intervention programming focuses directly on addressing gender inequitable norms and attitudes, and not only indirectly by promoting non-violence.
- Program participants and beneficiaries experienced the intervention as effective in reducing VAWG in their communities. Considering its impact, the intervention should continue and be expanded to other communities in the target counties, as well as other counties in Liberia.
- The project's Theory of Change should be replicated, as the project has shown that the role and engagement of faith leaders as key actors and activists in project implementation is effective.

### Impact

- The interfaith approach followed in the intervention emerged as one of its main successes. It is recommended that this interfaith approach be continued in future. This is an approach

that should also be considered in other settings by other EAWG organizations working with faith groups.

- The research has shown that there has been attitudinal and behaviour change in the target communities, although not necessarily uniformly across all counties and gender and age groups. It is recommended that longitudinal research is conducted that studies the longer-term sustainability of this change.
- Despite the ECLRD trainings and mentoring, certain rape myths centred around women and girls and their behaviours are propagated by some volunteers. This highlights the importance of being intentional in identifying the dominant, harmful, stereotypical beliefs around women and girls that indirectly drive VAWG, and to intentionally address these in programming. This must be done to avoid volunteers using their platform to propagate these myths, mistakenly believing that it will contribute to ending VAWG.
- Future implementation of the intervention should ensure that risks associated with economic programming (savings groups) are analyzed and that any unintended negative impacts (e.g., reinforcement of masculine norms) are both monitored and intentionally targeted in programming.

### **Relevance**

- The multisectoral engagement of the project was highlighted as a key strength of the design and implementation, in recognition of the need for multisectoral response in order to end VAWG and assist survivors. This approach should be followed in scaling the intervention and/or in developing interventions in similar contexts.

### **Efficiency**

- The project has illustrated the importance of longer-term funding for interventions addressing VAWG at community level. Therefore, it is highly recommended that longer term funding is allocated to programming aiming to transform community attitudes, behaviors and practices related to VAWG.

### **Sustainability**

- It is highly recommended that investment should be made, from inception phase, in the sustainability of project impacts. Such investment should recognise the precariousness of sustained volunteerism in settings with severe economic challenges and poverty, and prioritise sustainability measures that offer continued support and mentoring to volunteers.
- In the light of the value and benefit ECLRD, Episcopal Relief and Development and the intervention experienced because of the Spotlight Funding that allowed activities solely aimed at the institutional strengthening, it is highly recommended that funders invest in these kinds of ways in organizations, and not only in specific projects.
- As the project fully relies on the ability and effectiveness of staff and volunteers, investment should be made to ensure that staff and volunteers have the requisite skills to function effectively and efficiently.
- To support project implementation as well as the sustainability of project impact, it is advised that further training of trainers should be carried out, where trained volunteers receive the requisite training to enable them to use the Faith Leader GBV Toolkit to train others. For this purpose, a training-of-trainers workshop should be developed.

### **Knowledge generation**

- In both the quantitative and qualitative data, FAMA cards emerged as a key success of the intervention. It is recommended that Episcopal Relief & Development and ECLRD continue using FAMA cards in their EAWG interventions. This is also a learning that should be shared with the broader EAWG field, emphasising the importance of participatory creation of

FAMA cards, so that the types of pictures and the situations they represent are appropriate to the context.

- ECLRD's experiences implementing this project have highlighted the challenges of addressing FGM/C. Should ECLRD and Episcopal Relief & Development wish to work on FGM/C prevention, it will require targeted strategies that sensitively engage community and traditional leaders that act as guardians of tradition and culture, and a nuanced understanding of the complexities of culture and identity. Due to the complexity of the issue, it cannot simply be an add-on to general GBV programming, but needs specific, appropriate, context-relevant programming.
- The qualitative research revealed that many volunteers wish for identification that identifies them as being qualified to speak on EAWG. ECLRD chose not to provide such identification, so that volunteers' EAWG activities are seen as natural component of their leadership activities, and not something they are doing for ECLRD. This tension will need to be navigated, especially in the case of volunteers who are not faith leaders. It is recommended that ECLRD and Episcopal Relief & Development engage in consultation with volunteers to identify a solution that suits all parties.

#### **Gender equality and human rights**

- Based on the survey findings, it is recommended that specific approaches, techniques and strategies are developed exclusively and specifically for use with women and girls, based on the assumption that such targeted activities will be better able to reach and influence women and girls.

## Acronyms

CoC	Code of Conduct
Coef.	Coefficient
CSO	Civil Society Organizations
ECLRD	Episcopal Church of Liberia Relief and Development
EVAWG	Ending Violence Against Women and Girls
FAMA	Facts, Association, Meaning and Action
FGD	Focus Group Discussion
FGM/C	Female Genital Mutilation/Cutting
FLC	Faith Leader Coalitions
GBV	Gender-Based Violence
HTP	Harmful Traditional Practice
IFMC	Interfaith Mediation Committee
IPV	Intimate Partner Violence
LCC	Liberia Council of Churches
LDHS	Liberia Demographic and Health Survey
NFLAC	National Faith Leaders Advisory Coalition
NMCL	National Muslim Council of Liberia
NPSV	Non-Partner Sexual Violence
SVAWC	Sexual Violence Against Women and Children
SWE	Savings With Education
ToR	Terms of Reference
UN Trust Fund	United Nations Trust Fund to End Violence Against Women
URDR	Unit for Religion and Development Research
VAC	Violence Against Children
VAWC	Violence Against Women and Children
VAWG	Violence Against Women and Girls

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# 1. Introduction

## 1.1 Background and context of the project

### 1.1.1. Historical context

Civil war in Liberia erupted in 1989. This war, characterized by two phases, continued for 14 years, in which an estimated 150 000 – 300 000 people died and at least one million Liberians were displaced (Fuest, 2008:205; Heaner, 2008:463; Bauer, 2009:196). During these 14 years, sexual violence was used as a tool of terror by all of the fighting factions (Cummings, 2011). The war was finally brought to an end in 2003 by the Comprehensive Peace Agreement (Zounmenou, 2008:1).

It is important to acknowledge that violence against women and girls (VAWG) does not end once peace has been established. The Overseas Development Institute conducted research in post-conflict Liberia, focusing specifically on the effects that the sexual violence perpetrated during war has had on the country. The high levels of sexual violence that they found were ascribed to a form of violent hypermasculinity directed against women (Jones, Cooper, Presler-Marshall & Walker, 2014). It is equally important to recognise that VAWG did not begin with the civil wars, with intimate partner violence and other forms of VAWG, rooted in deeply patriarchal values, pre-dating the conflict (Small Arms Survey, 2012).

### 1.1.2. Prevalence of VAWG

Intimate partner violence (IPV) is highly prevalent in Liberia. The 2019-2020 Liberia Demographic and Health Survey (LDHS) identified that among currently or previously married women aged 15-49, the prevalence of past 12-month IPV was 44.7%, including 33% for physical IPV, 7% for sexual IPV and 35% for emotional IPV. Furthermore, regardless of marital status, 60% of women had ever experienced physical violence from any perpetrator since the age of 15, and 9% had ever experienced sexual violence (Liberia Institute of Statistics and Geo-Information Services et al, 2021).<sup>1</sup>

Prevalence of violence is also high among girls under the age of 15. A baseline assessment conducted in 2016 (IPA, 2016) identified that 38.3% of adolescent girls aged 13 and 14 who were sampled had ever experienced sexual abuse and almost half had ever experienced physical violence. Negative beliefs, attitudes and social norms associated with VAWG are also highly prevalent. The most recent LDHS completed in 2019-2020 found that 37% of women and 25% of men reported believing that a husband is justified in beating his wife in at least one circumstance (out of five).

Harmful traditional practices (HTPs), such as child marriage and female genital cutting, are also practiced in Liberia. According to Girls Not Brides (2022), Liberia has the 20<sup>th</sup> highest prevalence of child marriage globally, with 36% of girls married before the age of 18 and 9% married before the age of 15. Female genital mutilation / cutting (FGM/C) is also common, with data from UNICEF suggesting that 44% of women and girls have undergone FGM/C (UNICEF, 2019).

### 1.1.3. The COVID-19 pandemic

There have been 7656 confirmed COVID-19 cases in Liberia, with 294 deaths (WHO, 2022). After the first confirmed COVID case in March 2020, a series of restrictions were instated by the government, culminating in a three-month shelter-in-place lockdown (running from 24 April – 22 July 2020) (Aggarwal et al, 2020). The COVID-19 pandemic, and its impact on the Liberian people and health system, should be interpreted in the light of the fact that it was the country's second major

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<sup>1</sup> The prevalence of sexual violence in the 2007 LDHS was even higher (18%) although this figure is not comparable to the estimate from the 2019-2020 LDHS as the 2007 survey included questions on forced sexual initiation which were not included in the more recent LDHS.

infectious disease outbreak in less than a decade. From 2014 – 2016, the West African Ebola virus severely challenged the national health care system (Davis et al, 2021). COVID-19, like Ebola, and its mitigation strategies had a disproportionate impact on vulnerable households, especially in rural areas, who have limited access to resources and infrastructure – including basic hygiene and sanitation materials.

In September 2020, the Liberian president declared rape a national emergency, with an epidemic of rape within the pandemic declared after a 50% increase in reports of gender-based violence in the first half of 2020 saw 600 reported cases of rape between January and June (African Union Commission - Women, Gender and Development Directorate, et al, 2020).

#### 1.1.4. The role of religious institutions in the prevention of VAWG

Liberia is considered a predominantly Christian country. The 2008 National Population and Housing Census indicated that 85,6% of Liberians are Christian, 12,2% Muslim, 1,5% Atheist, 0,6% follow indigenous African religions, and less than 1% are members of other religious groups (US Bureau of Democracy, Human Rights and Labor, 2012). During the Liberian war, religious institutions, and particularly the Interfaith Mediation Committee (IFMC), which consisted of the Liberia Council of Churches (LCC) and the National Muslim Council of Liberia (NMCL), reacted early to address armed conflict and, indirectly, gender-based violence. From the beginning of the war, the IFMC tried to broker a peace agreement with the different rebel leaders and facilitated negotiations between these leaders. This lobbying and advocacy for peace by faith leaders continued throughout the war (Toure, 2002:10). Some faith leaders took on activist roles, actively speaking out against government and rebel leader abuses, and ecumenical bodies and faith-based civil society organizations played a key role in peacebuilding (Press, 2010:25). Religious institutions have also practically assisted Liberians, both during and after the war. These services included general relief services, health care and education (Toure, 2002:16).

Although religious institutions in Liberia have a reputation for effective advocacy and lobbying based on their involvement in peacebuilding, they have not been as active on the issue of sexual violence and other forms of gender-based violence. While there are some attempts by some churches and ecumenical bodies to address the causes and consequences of such violence, these appear to be piecemeal and unsystematic, and there appears to have been little or no consistent prioritising of the issue.

## 1.2 Project description and theory of change

Episcopal Relief & Development and its implementing partner, Episcopal Church of Liberia Relief and Development (ECLRD), originally implemented a three-year project (2015-2017) aimed at improving violence prevention and response to women survivors through engaging faith leaders. This included both Christian and Muslim faith leaders and both formal faith leaders (e.g. pastors and imams) and informal faith leaders (e.g. Sunday school teachers and women's group leaders). The project was implemented with a grant from UN Women's UN Trust Fund to End Violence Against Women (UN Trust Fund) and Islamic Relief USA. Working in two counties, Grand Cape Mount and Rivercess, the project developed a GBV prevention and response toolkit to empower Christian and Muslim faith leaders to speak out against VAWG in their communities, and to more effectively support survivors of violence in settings where governance structures are too weak to deliver essential services. The project trained these leaders in the skills to challenge harmful faith and customary beliefs and attitudes about women's subordination and to encourage new behaviours among their congregants and the broader community. Youth leaders were also trained as agents of change who could then engage adolescents and support positive shifts in gender equitable attitudes, interpersonal conflict resolution and other drivers of GBV prevention.

Based on the promising progress documented in the endline evaluation, the UN Trust Fund awarded Episcopal Relief & Development a second three-year grant from 2018 to 2021, for a second project entitled “Scaling up Faith Leaders Engagement to Prevent and Respond to Violence Against Women and Girls (VAWG)”. Other funding sources were also obtained to support phase 2 of implementation, including a grant from Islamic Relief USA. Episcopal Relief & Development continued with its faith-based methodology as outlined above, but with the addition of some components:

- Expanding the Faith Leader GBV Toolkit on preventing and responding to gender-based violence, including content on trauma awareness and resilience, responding to violence against children, and a theological framework for gender equality;
- Further developing the facilitation guide to help empower Christian and Muslim faith leaders to speak out against violence against women in their communities and to support survivors more effectively
- Expanding and integrating youth engagement work, including deepening National-Code of Conduct (CoC) for School Administrators and Teachers enforcement
- Training savings groups facilitators and leaders to work with FAMA cards

In the second phase of the project, implementation occurred in the same two counties as phase one (Grand Cape Mount and Rivercess), with the project scaling up to two additional counties (Bong and Grand Gedeh). The project was implemented in 14 districts across the four counties, in 54 communities (or townships), 24 of which were new and 30 of which continued to receive project activities from phase one.

Project implementation started in October 2018. However, during Year 2 of project implementation, COVID-19 broke out in Liberia, with a 5-month national lockdown starting in March 2020. With the lockdown closing all churches, mosques and schools, as well as placing strict limitations on movement, the project was forced to adapt. As a result of the closures and restrictions, ECLRD postponed most of the planned project activities. Fortunately, due to a special exemption from the government to allow travel, county-based GBV officers and faith leaders could still carry out data collection on GBV incidents and provide accompaniment and referrals to survivors to hospitals, shelters and the police.

Receiving a one-year Spotlight Initiative Grant, Episcopal Relief & Development added another outcome (Outcome 4) to the project’s results chain, focused on institutionally strengthening Episcopal Relief & Development and ECLRD to be able to respond and adapt EAW/G interventions during COVID-19 and other emergencies. Below (in Table 1) is offered an overview of the project, with its Theory of Change provided in Figure 1.

**Table 1: Overview of ‘Scaling up Faith Leaders Engagement to Prevent and Respond to VAWG’ project**

<b>Project start and end-date</b>	01/10/2018 - 31/12/2022 (incl. one-year cost extension and 3-month NCE)
<b>Current project implementation status</b>	On-going
<b>Geographical areas of the project</b>	Liberian counties of Grand Cape Mount, Rivercess, Bong and Grand Gedeh.
<b>Description of the specific forms of violence addressed by the project</b>	Intimate partner violence and non-partner sexual violence

<b>Main objectives of the project</b>	The overall goal of the project is for women and girls to experience less intimate partner violence and non-partner sexual violence and have increased access to services. The project empowers Christian and Muslim faith leaders to speak out against violence against women in their communities and to support survivors more effectively.
<b>Description and graphic representation of targeted primary and secondary beneficiaries</b>	<p>28 298 direct beneficiaries:</p> <ul style="list-style-type: none"> <li>· 24,450 women and girls,</li> <li>· 2,733 women/girl survivors, and</li> <li>· 1,115 women and girl leaders (savings with education groups),</li> </ul> <p>7 300 secondary beneficiaries:</p> <ul style="list-style-type: none"> <li>· 6,927 men and boys</li> <li>· 250 others/clergy</li> <li>· 123 members of faith-based organizations</li> </ul>
<b>Total project budget</b>	\$ 1,426,653
<b>Total project expenditure</b>	<p>\$ 2,793,102.72</p> <ul style="list-style-type: none"> <li>· UN Trust Fund: \$859,381</li> <li>· Islamic Relief USA: \$460,127.72</li> <li>· Episcopal Relief &amp; Development Cost-Share: \$1,473,594</li> </ul>
<b>Key partners</b>	<p>UN Women          Episcopal Relief &amp; Development          Episcopal Church of Liberia Relief and Development          Government of Liberia Ministry of Gender &amp; Development, GBV Unit          Government of Liberia Ministry of Gender &amp; Development, Technical Working Group (TWG)</p>

Figure 1: Episcopal Relief & Development's Theory of Change



### 1.3 Target beneficiary groups

The VAWG project targeted 35,598 beneficiaries from 54 communities across the 14 districts in four counties identified by the Liberian Ministry of Gender, Children & Social Protection based on their lack of access to adequate, available and affordable VAWG prevention and response services. These four counties are: Grand Cape Mount, Rivercess, Bong, and Grand Gedeh. While the religious leaders (clergy) were directly engaged, by being the beneficiaries of trainings, meetings and knowledge exchange sessions, the project documentation list them as secondary beneficiaries, for the reason for these engagements with religious leaders are to benefit women and girls, including survivors (the primary beneficiaries).

There are 28,298 direct beneficiaries, including:

- 24,450 women and girls
- 2,733 women/girl survivors
- 1,115 women and girl leaders.

There are 7,300 secondary beneficiaries:

- 6,927 men and boys
- 250 others/clergy
- 123 members of faith-based organizations.

A beneficiary data sheet is included in Annex A.

## 2. Endline evaluation approach

### 2.1 Purpose and scope of the endline evaluation

The purpose of the evaluation was to measure project achievements and capture key project learnings for further interventions. The learnings from this evaluation will be useful to the UN Trust Fund, Islamic Relief USA, Episcopal Relief & Development, and Episcopal Church of Liberia Relief and Development (ECLRD) in shaping the design and implementation of future programming.<sup>2</sup>

<sup>2</sup> Funding for the third phase of the program is currently being sought from various funding sources.

The evaluation assessed the level of achievements reached in this project against the set targets. This assessment will, in turn, inform if and what further interventions and adaptations may be needed in this region for the project participants to fully realize the project benefits. It will also guide the planning for the next phase of implementation of the project in Liberia.

Key findings and learnings from this project will help shape other projects in the area, and the future of other interventions. Other implementing partners of Episcopal Relief & Development operating in areas of climate, children and women may consider how to incorporate key learnings from this Liberian evaluation into their work. For this reason, learnings from this project will be shared with Episcopal Relief & Development partners and other key stakeholders.

The endline evaluation covers four years of project implementation, starting from 1<sup>st</sup> October 2018. The evaluation was implemented in four intervention counties (Grand Cape Mount, Rivercess, Bong, and Grand Gedeh) and one comparison county (Margibi). While all 14 districts and 54 communities in which the project was implemented were covered by the evaluation, quantitative data collection only occurred in a proportion of these locations in line with the locations sampled for the baseline assessment. It is envisaged that the document review and key informant interviews conducted at the national level will contribute to the coverage of districts not directly sampled for the endline evaluation.

The quantitative component of the endline evaluation replicated the baseline assessment: data collection in intervention counties occurred in two districts per county and two townships per district (16 townships), and in the comparison county quantitative data collection was conducted in two districts with 15 townships in total.

Qualitative data collection took place in the three intervention counties only (Grand Cape Mount, Bong, and Rivercess), because of the inaccessibility of Grand Gedeh due to rainy weather. In each county, the same districts and townships were sampled as with the quantitative data collection. Qualitative data collection also happened at national level. In combination with desk review, this will contribute to coverage of the districts that the qualitative data collection will not directly engage with.

The evaluation covered a wide range of beneficiaries and stakeholders, including: women, men, girls and boys (Christian and Muslim); male and female faith and youth leaders (Christian and Muslim); youth group members; Savings with Education group members; ECLRD staff members; Episcopal Relief & Development staff members, and national and district level duty bearers and stakeholders.

## 2.2 Objectives of the endline evaluation

In line with the terms of reference (ToR) for the evaluation (see Annex B), the key objectives were to:

1. Evaluate the entire project against the effectiveness, relevance, efficiency, sustainability and impact criteria, as well as the cross-cutting gender equality and human rights criteria;
2. Identify key lessons and promising or emerging good practices in the field of ending violence against women and girls, for learning purposes.

According to the ToR, the sub-objectives of the evaluation were to:

1. Measure the extent to which the results at the output, outcome and project goal level have met the targets, and compare and discuss the results against baseline;

2. Assess the project's impact on changing the gender-dynamics of participating communities, specifically attitudes and beliefs about gender-based violence and the way the project has affected men and women's attitudes and beliefs;
3. Assess the degree to which gender and power relationships change as a result of the project intervention (including structural and other causes that give rise to violence, inequities, discrimination and unfair power relations);
4. Assess the fitness of the project design and its implementation processes and gaps;
5. Identify key lessons learnt and promising practices in ending violence against women and girls.

## 2.3 Evaluation framework

The endline evaluation draws from two key frameworks.

1. The first framework is a set of UN Trust Fund evaluation criteria and questions, drawing predominantly from five OECD/DAC criteria (effectiveness, relevance, efficiency, sustainability and impact) with two additional criteria (knowledge generation, and gender equality and human rights). These are listed in Table 2, with corresponding links, where relevant, to the key evaluation objectives and sub-objectives. One additional question has been added (What is the fitness of the project design and its implementation processes and gaps?) to respond to the evaluation sub-objective 4. The full evaluation matrix indicating how the evaluation methods respond to each evaluation question is included in Annex C.
2. The second framework is the project's results framework, with corresponding goal and outcome indicators (see Table 3). Annex D1 contains a results framework matrix mapping key evaluation methods against goal and outcome indicators, with baseline and endline values for quantitative indicators included in Annex D2.

**Table 2: Evaluation criteria and questions<sup>3</sup>**

Evaluation Criteria	Evaluation Question
<p><b>Effectiveness</b>  <i>A measure of the extent to which a project attains its objectives / results (as set out in the project document and results framework) in accordance with the theory of change.</i></p>	<p>1. To what extent were the intended project goal, outcomes and outputs (project results) achieved and how? <sup>4</sup></p> <p>2. What is the fitness of the project design and its implementation processes and gaps?</p>
<p><b>Impact</b>  <i>Assesses the changes that can be attributed to a particular project relating specifically to higher-level impact (both intended and unintended).</i></p>	<p>3. To what extent has the project contributed to ending violence against women and girls, gender equality and/or women's empowerment (both intended and unintended impact)?<sup>5</sup></p> <p>4. How has having a second grant affected the implementation and impact the project/organization was able to have?</p>

<sup>3</sup> Note that the ordering of the evaluation criteria and questions has been modified slightly from the original ToR for the evaluation to enable better flow within the report.

<sup>4</sup> This question corresponds directly to the evaluation's sub-objective 1: Measure the extent to which the results at the output, outcome and project goal level have met the targets, and compare and discuss the results against baseline.

<sup>5</sup> This question corresponds directly to the evaluation's sub-objectives 2 (Assess the project's impact on changing the gender-dynamics of participating communities, specifically attitudes and beliefs about gender-based violence and the way the project has affected men and women's attitudes and beliefs) and 3 (Assess the degree to which gender and power relationships change as a result of the project intervention (including structural and other causes that give rise to violence, inequities, discrimination and unfair power relations)).

<p><b>Relevance</b> <i>The extent to which the project is suited to the priorities and policies of the target group and the context.</i></p>	5. To what extent do the achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls?
<p><b>Efficiency</b> <i>Measures the outputs – qualitative and quantitative – in relation to the inputs. It is an economic term which refers to whether the project was delivered cost effectively.</i></p>	6. To what extent was the project efficiently and cost-effectively implemented?
<p><b>Sustainability</b> <i>Sustainability is concerned with measuring whether the benefits of a project are likely to continue after the project/funding ends. In the context of this project, it is also concerned with institutional sustainability of the Liberian implementing partner organization.</i></p>	<p>7. To what extent will the achieved results, especially any positive changes in the lives of women and girls (project-goal level), be sustained after this project ends?</p> <p>8. Did the project activities and the processes contribute in any way to EVAWG activism more broadly?</p> <p>9. To what extent did the institutional strengthening activities contribute to the organization's adaptability and resilience in crisis/emergency humanitarian response?</p>
<p><b>Knowledge generation</b> <i>Assesses whether there are any promising practices that can be shared with other practitioners. Also assesses whether they are specific project adaptation processes to address disproportionate effects of disaster/crisis on women and girls</i></p>	<p>10. To what extent has the project generated knowledge, promising or emerging practices in the field of ending VAWG (EVAWG) that should be documented and shared with other practitioners?<sup>6</sup></p> <p>11. What are the learnings from this project for future similar project interventions?</p> <p>12. Specifically, what was learned about impact of crisis (Covid-19) on gender equity in terms of project adaptation to mitigate negative consequences?</p>
<p><b>Gender Equality and Human Rights</b></p>	<p>13. To what extent have human rights approaches been incorporated throughout the project?</p> <p>14. To what extent have gender responsive approaches been incorporated throughout the project?</p>

Table 3: Project goal and outcome indicators

Project Goal and Outcomes	Indicators
<p>Project Goal: Women and girls to experience less intimate partner violence and non-partner sexual violence and have increased access to services.</p>	<p>1. % of congregation members who report changes in their attitudes, behavior and practices related to VAWG as a result of their participation in faith based activities (marriage preparation, retreat and counseling)</p> <p>2. % of congregation members (women, girls, men and boys) who know how to access support and referral services for women and girl survivors.</p> <p>3. % of congregation members (women and girls) who report feeling safer from intimate partner and non-partner sexual violence</p> <p>4. Episcopal Relief &amp; Development and ECLRD are institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adapting existing interventions to EAW/G with a focus on the most vulnerable women and girls.</p>
<p>Outcome 1: Faith leaders (i.e. pastors and imams) from churches</p>	<p>1.1 % of Faith Leader who report publicly speaking out against VAWG in the past year at various platforms (Sunday/Friday sermons, retreats/crusades, festivities).</p>

<sup>6</sup> This question corresponds directly to the evaluation's sub-objective 5 – Identify key lessons learnt and promising practices in ending violence against women and girls.

and mosques increase their work to speak out against violence against women and girls (VAW/G) and to change cultural norms in their communities	<p>1.2 % of congregation members who have heard at least one Faith Leaders member publicly speak out against VAWG in the past year</p> <p>1.3 % of women and girl congregation members who believe that Faith Leaders are actively working to end VAWG</p>
Outcome 2: Youth leaders of Christian and Muslim youth groups (i.e. male and female) and school leaders (i.e. staff, students, parents) increasingly speak out against violence against women and girls and provide support to survivors.	<p>2.1. % of trained faith youth group leaders who report publicly speaking out against GBV during the past year.</p> <p>2.2. % of faith youth group members who report that they have spoken out and/or taken action against GBV during the past year</p> <p>2.3. % of trained school leaders who have spoken on prevention of VAW/G and support for survivors during the past year</p>
Outcome 3: Muslim and Christian faith communities increase direct support for survivors of violence and advocacy for their rights and access to services.	<p>3.1. % of women and girls who have learned about which GBV support services are available from Faith Leaders and lay leaders.</p> <p>3.2 % of cases registered by GBV support services that show referral from trained faith leaders and lay leaders.</p> <p>3.3. % of women and girls church and mosque members who had sought support from trained clergy and lay leaders in the past year and reported positive experiences</p>
Outcome 4: Episcopal Relief & Development and ECLRD are institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adapting existing interventions to EAWG with a focus on the most vulnerable women and girls.	<p>4.1: Existence of a new system that improves the efficiency and accountability of the organization (e.g., accounting, procurement, financial management system).</p> <p>4.2: Number of ECLRD staff who use the new digitalized data collection and management system for data storage, reporting, evidence gathering and learning.</p> <p>4.3: Number of faith leaders (women) who report using participatory (qualitative) tools with privacy protocols in place for evidence gathering on gender-based violence using virtual or physical platforms.</p> <p>4.4: Number of faith leaders that are able to use safe communication methods and privacy protocols using the tools (WhatsApp, internet and smart phones) that are available to them.</p>

The overall goal of the project is for women and girls to experience less intimate partner violence and non-partner sexual violence and have increased access to services. The four project outcomes are associated with (1) faith leaders as agents of change, (2) youth and group leaders as agents of change, (3) the ability of faith communities to support, advocate for and facilitate access to services for survivors of violence, and (4) strengthening Episcopal Relief & Development and ECLRD institutionally to enable sustainable EAWG response during COVID-19 and other pandemics.

The four outcome indicators are linked to a variety of activities.

- Outcome 1 is based on equipping faith leaders to promote VAWG prevention through the use of an updated faith-based toolkit for ending VAWG (the Faith Leader GBV Toolkit). The project will form two new county Faith Leader Coalitions (FLCs) in Grand Gedeh and Bong and engage these new FLCs on the National VAWC Plan through county-level VAWC Task Forces.
- Outcome 2 is based on a number of activities implemented at the school level, including: the use of creative outlets such as drama and expanded school CoC interventions, including disciplinary committees for CoC enforcement Youth groups; the use of additional learning aids such as FAMA cards and CoC posters by youth leaders; establishing youth coalitions and expanding the number of schools promoting the school CoC in new target areas; establishing disciplinary committees for CoC enforcement; establishing school SVAWC committees; and

expanding use of women-centered tools including FAMA (Facts, Association, Meaning, Action) cards by savings group members.

- Outcome 3 is based on training with faith leaders on making referrals to service providers; supporting survivors through trauma awareness and resilience through personal self-awareness, self-care and community dynamics; providing survivors with accompaniment, emergency support and temporary safe housing; expanding engagement with savings groups and other women’s associations; and working with police, education, justice and health officials to track VAWC incidents and responses.
- Outcome 4 is based on institutionally equipping Episcopal Relief & Development and ECLRD with the mechanisms, knowledge, skills, practices and capacities that they can use to sustainably respond to COVID-19 and other crises, while continuing EAWW/G interventions.

## 2.4 Timeline for the endline evaluation

Episcopal Relief & Development issued the Terms of Reference (ToR) for this evaluation in April 2022. After selecting and contracting the research team, the endline evaluation abided by the timeline in Table 4.

**Table 4: Timeline**

Date	Activity
25 July – 31 August 2022	Inception phase, including application for ethical clearance
9 October – 6 November 2022	In-country data collection (both quantitative and qualitative)
15 November – 15 December	Data analysis and write-up
15 December 2022	Submission of draft report
15 January 2023	Feedback on draft report from Episcopal Relief & Development and the UN Trust Fund
28 February 2023	Submission of final report

## 2.5 Evaluation team

The research team consisted of three people. Drs Elisabet le Roux and Julienne Corboz were co-research leads on the project, and responsible for conducting the research, including data collection in-country. Dr Corboz took primary responsibility for the quantitative data collection component, including training the enumeration team and overseeing their first day of data collection in-field. Dr le Roux took primary responsibility for the qualitative data collection component. Ms Danya Marx was responsible for managing the research project, taking responsibility for arranging the research infrastructure with ECLRD, liaising with the in-country teams, and ensuring that all activities happen as planned.

The following in-country consultants and teams were identified and contracted by ECLRD during the inception phase to support the research team:

- An enumeration team and enumeration team lead, Mr Joseph Nyan, supported the quantitative data collection
- A transcription team, identified by Mr Nyan, transcribe all FGDs and KIIs
- Interpreters, to support Drs le Roux and Corboz when needed.

## 3. Evaluation design and methodology

### 3.1 Evaluation design

The evaluation consists of a mixed-methods quasi-experimental design, with different approaches used for different types of beneficiary groups. For male and female congregants, the evaluation drew from a non-equivalent groups design to compare outcomes between an intervention group (beneficiary congregants accessing ECLRD's intervention in intervention communities and tracked from baseline to endline) and a comparison group (non-beneficiary congregants in non-intervention communities tracked from baseline to endline). Such an approach provides the opportunity to provide a counterfactual to the intervention (i.e., what would have happened in the absence of the intervention) and measure additional results in the intervention group over and above any change experienced in the comparison group.

For faith, youth and school leaders, and youth group members, the evaluation drew from a pre- and post-test design in which faith, youth and school leaders, and youth group members, were sampled at baseline and endline, but with no tracking of participants and no corresponding comparison group. Incorporating a comparison group would have required having a sufficient sample size to detect significant differences in outcomes between intervention and comparison groups at endline, which was challenging at baseline given the smaller number of beneficiaries in these categories.

Across both types of evaluation design, the endline evaluation comprised a mixed-methods approach including quantitative and qualitative data that was integrated at the goal and outcome levels. Additional qualitative data were generated to respond to the overarching evaluation questions and objectives.

There were a number of reasons that such a complex evaluation design was selected. The evaluation of the first phase of the project had a comparison group at endline but not at baseline and there was interest from EPISCOPAL RELIEF & DEVELOPMENT in implementing a full quasi-experimental approach in the evaluation of the second phase. Further, the range of beneficiary and stakeholder groups sampled through both quantitative and qualitative methods reflected the complexity of the intervention and the wide range of actors who both contributed to and benefited from the intervention.

### 3.2 Evaluation methods

The evaluation drew on four key methods: (1) a desk review and secondary analysis of project data; (2) a quantitative survey; (3) focus group discussions; and (4) key informant interviews.

#### 3.2.1 Desk review

A desk review of relevant project documentation was conducted, including monitoring data, quarterly and annual reports, and any additional studies conducted during the project timeframes. The desk review helped the evaluation team to triangulate endline findings, but also contributed to four important types of endline measures.

1. The evaluation team synthesized the output level data from annual reports.
2. The evaluation team gathered data to respond to outcome indicator 3.2 – % of cases registered by GBV support services that show referral from trained faith leaders and lay leaders).
3. The desk review assisted the evaluation team determining whether any GBV interventions have been implemented since baseline in the comparison county and districts, enabling the

team to contextualize the endline findings by measuring possible contamination in the comparison group.

4. The desk review assisted the evaluation team in gathering data from annual reports that respond to outcome indicator 4.1, 4.2, 4.3 and 4.4.

A full list of project documents reviewed is included in Annex E.

### 3.2.2 Quantitative surveys

#### *Instruments*

The quantitative methods comprised surveys conducted with (1) congregants, and (2) faith, youth and students leaders, and youth group members. Survey questions were separated into seven parts based on topics/content and targeted participants, as listed below and described in more detail in Annex F1. The quantitative tools replicated the baseline tools in order to compare baseline and endline findings, with some modifications, as described below and in Annex F1. The quantitative tools are included in Annex F2.

1. Pre-survey information (asked of all participants): This section contains pre-survey information, including unique ID numbers for congregants who are being tracked, location details (county, district and township), type of respondent and enumerator name or ID number.
2. Socio-demographics (asked of all participants): This section contains demographic questions to determine respondents' age, gender, education background, employment status, relationship and marital status, religious denomination, household composition, number of children and food security.
3. Attitudes related to VAWG (asked of all participants): This section of the survey measures attitudes towards VAWG according to five domains, including (1) general gender attitudes, (2) justification for physical IPV, (3) justification for sexual violence, (4) rape myths and (5) tolerance for VAWG.
4. VAWG response (asked of faith, youth and student leaders, and youth group members): This section contains survey items related to behaviors and responses related to VAWG, including speaking out publicly against VAWG, provision of support for survivors and mode of support. At endline, additional survey questions have been included on project exposure, including faith leader knowledge and use of the Faith Leader GBV Toolkit, respondents' participation in FAMA groups and participation in VAWG training.
5. Knowledge of VAWG messages and services (asked of male and female congregants): This section contains items related to congregants' exposure to and participation in faith activities, and knowledge of VAWG services.
6. Experiences of VAWG (asked of female congregants): This section measures women and girls' past year experience of physical, sexual and emotional IPV, and non-partner sexual violence (NPSV). This section also includes questions about survivors' help seeking behaviour and support provided by faith leaders.
7. Behaviors and practices associated with VAWG (asked of male congregants): This section measures men's past year perpetration of physical, sexual and emotional IPV and NPSV. Two additional items measure behaviors related to gender norms and masculinities, including past year frequency of men asking their partner's opinion on important matters, and helping around the house with cooking or taking care of children.



	Robertsport	9	7	11	8	9	7	12	7
	Tosor	9	8	11	8	9	9	10	7
<b>Rivercess</b>	<b>Doedain</b>								
	Goezohn	14	8	16	8	16	5	16	8
	Cotton Tree /Bogeezay, Bogeezay2	14	7	15	8	15	7	15	9
	<b>ZarFlahn</b>								
	Zor	14	8	16	8	18	2	16	8
	Darsaw	13	7	15	7	17	4	15	6
<b>Grand Gendeh</b>	<b>Tchien</b>								
	Solo Town	15	16	16	13	15	12	15	13
	Gambo	14	16	16	13	14	16	14	13
	<b>B'hai</b>								
	Sinne-Weh (Chensia)	13	15	16	13	13	15	15	13
	Toe's Town	14	17	17	14	14	16	16	12
<b>Bong</b>	<b>Kpaai</b>								
	Baila	13	10	14	13	14	8	14	12
	Gormue	13	10	15	11	12	10	15	11
	<b>Suakoko</b>								
	Taylor Town	13	10	16	10	13	10	15	10
	SKT	13	10	14	12	13	10	14	11
<b>TOTAL</b>		200	164	230	163	207	147	224	157

Table 7 contains the target and achieved endline comparison sample at the district and township levels.

Table 7: Comparison group sample at the district and township levels (target and achieved)

County	District and township	Baseline achieved and endline target				Endline achieved			
		Male (18+ years)	Male (13-17 years)	Female (18+ years)	Female (13-17 years)	Male (18+ years)	Male (13-17 years)	Female (18+ years)	Female (13-17 years)
<b>Margibi</b>	<b>Kakata</b>								
	Baypolu/J. K. Dadzie	12	10	13	9	11	10	13	9
	Massaquoi	12	10	13	8	10	10	12	8
	BollorQuelleh/Gio Village	12	10	14	10	12	10	14	10
	Gbar Town	12	10	13	8	12	9	13	8

Big Fat	12	9	13	9	10	9	12	9	
Konatee/Taki	12	10	13	9	10	8	11	8	
Kpekeh	12	10	14	10	11	10	13	11	
Dorkai	12	9	13	10	12	9	13	10	
<b>Mambah Kaba</b>									
Forzohn # 1/Wheavleen	15	12	17	12	15	12	16	11	
Vah	15	12	18	13	15	12	18	13	
Garmaymu	15	13	18	13	15	13	18	13	
Zoeklin	15	12	17	12	16	11	17	11	
wrajaye/Prince Wallace Estate/Needonwein	16	13	18	13	16	13	18	13	
Doemah	15	12	18	12	14	11	18	11	
Bishop Judith Craig Children V/Ben/ Government Farm	15	13	18	13	14	10	17	11	
<b>TOTAL</b>		202	165	230	161	193	157	223	156

Margibi County and its corresponding districts and townships were selected by ECLRD in communication with the Ministry of Gender, Children and Social Protection with key criteria being that no VAWG or GBV programming were taking place in these locations at baseline. At endline, it is evident that a number of GBV programs and advocacy activities have and are currently being implemented in Margibi County. For example:

- The ENOUGH! Programme is being implemented by Oxfam and the Foundation for Community Initiative (FCI) in a number of counties, including Margibi (albeit not in districts and townships sampled for the evaluation). The programme supports civil society to combat VAWG and meet the needs of survivors, and also has intervention components that aim to challenge the harmful norms and practices that form the root causes of VAWG.<sup>7</sup>
- ActionAid Liberia implemented a three-year programme in Margibi called “Enhanced Protection from Sexual and Gender Based Violence for Women, Girls and Sexual Minorities in Liberia.”<sup>8</sup>
- Medica Liberia has been implementing the “Sexual and Gender-Based Prevention and Response Project” in two counties, including Margibi, with the third phase of the project recently launched.<sup>9</sup>
- In 2021, the NGO Rescue Women Liberia began implementing a legal aid and psychosocial project aimed at ending violence against women and children and increasing access to justice for survivors in Kakata district in Marigibi.<sup>10</sup>

<sup>7</sup> [https://oxfamibis.dk/sites/default/files/media/pdf\\_global/liberia\\_pdf/enough\\_intro\\_pamphlet\\_liberia\\_final.pdf](https://oxfamibis.dk/sites/default/files/media/pdf_global/liberia_pdf/enough_intro_pamphlet_liberia_final.pdf)

<sup>8</sup> [https://liberia.actionaid.org/sites/liberia/files/eu-eps\\_project\\_fact\\_sheet\\_2017-2020\\_2.pdf](https://liberia.actionaid.org/sites/liberia/files/eu-eps_project_fact_sheet_2017-2020_2.pdf)

<sup>9</sup> <https://www.liberianobserver.com/medica-liberia-launches-phase-three-bmz-project>

<sup>10</sup> <https://www.liberianobserver.com/rescue-women-launches-legal-aid-project>

- In 2020, MenEngage conducted a youth symposium in Kakata district in Margibi aimed at supporting the participation of men and boys in the elimination of GBV.<sup>11</sup>
- In November 2021, the 16 Days of Activism Against Gender-Based Violence was launched in Margibi county.<sup>12</sup>
- Margibi is also one of several counties in which comprehensive integrated GBV response centers have been set up to cater to the medical, psychosocial and protection needs of survivors.<sup>13</sup>

The desk review also identified a number of other programmes or advocacy activities related to gender equality and women's empowerment being implemented in Margibi. For example:

- The She Builds Peace campaign, implemented by the Women Education and Development Organization of Liberia (WEDOL), is supporting women's peacebuilding through women's village savings and loans associations, advocacy and resolution of community-level conflicts in Margibi, including in Kakata district.<sup>14</sup>
- In March 2019, Kakata district in Margibi was the site of a large gathering to celebrate International Women's Day.<sup>15</sup>

For the projects outlined above, unless stated (e.g., those projects implemented in Kakata district), the team was unable to confirm whether these have been implemented in the districts and townships sampled for the evaluation's comparison group. However, the presence of a number of GBV and women's empowerment programmes and advocacy activities in the comparison county may mean that 'contamination' has occurred, and that the counterfactual is not complete.

It should also be noted that a number of GBV programs have also been implemented in the four intervention counties and, consequently, there may also be contamination in the intervention counties. For example, the ENOUGH! Programme is also being implemented in Rivercess, although not in the districts targeted by EPISCOPAL RELIEF & DEVELOPMENT and ECLRD's project. The Spotlight Initiative is also being implemented in Grand Cape Mount and Grand Gedeh, although it is unclear whether this is taking place in those districts targeted by ELCRD. Key informants sampled for the endline evaluation also noted that some local women's rights organizations in Bong were also doing awareness raising activities related to VAWG.

#### Pre- and post-test with faith, youth and school leaders and youth group members

For youth, faith and school leaders, and youth group members, a pre- and post-test design was implemented, with no tracking of participants and no comparison group. Full details of the baseline sampling approach are included in the baseline report.

The baseline and endline targeted and achieved sample of faith, youth and school leaders, and youth group members, is summarized in Table 8, with a total target sample size of 389 at baseline, and achieved baseline sample size of 391, and an endline achieved sample of 388. The baseline achieved sample in Table 8 formed the basis for the endline sample of faith, youth and school leaders, and youth group members. The baseline sample only included gender targets for youth group members given that gendered population estimates for the other groups were not available prior to baseline.

<sup>11</sup> <https://menengage.org/stories/liberian-youth-mobilize-to-involve-men-and-boys-in-ending-sexual-violence/>

<sup>12</sup> <https://liberia.un.org/en/160862-16-days-activism-kicks-liberia>

<sup>13</sup> <https://moh.gov.lr/wp-content/uploads/2022/12/07-WB-Updated-GBV-Action-Plan-Final-IFISH-Project.pdf>

<sup>14</sup> <https://icanpeacework.org/2022/11/liberian-women-peacebuilders-resolve-community-disputes/>

<sup>15</sup> <https://data.unhcr.org/en/documents/download/68959>

The endline sample replicated, as closely as possible, the baseline sample for each type of group, including the gender of respondents.

**Table 8: Baseline and endline sample for faith, youth and school leaders, and youth group members (target and achieved)**

	Baseline target	Baseline achieved and endline target	Endline achieved
<b>Faith leaders</b>	<b>40</b>	<b>36</b>	<b>37</b>
Male	---	19	19
Female	---	17	18
<b>Youth faith leaders</b>	<b>36</b>	<b>43</b>	<b>43</b>
Male	---	23	19
Female	---	20	24
<b>School leaders</b>	<b>32</b>	<b>33</b>	<b>33</b>
Male	---	13	15
Female	---	20	18
<b>Youth group members</b>	<b>281</b>	<b>279</b>	<b>275</b>
Male	---	146	144
Female	---	133	131
<b>TOTAL</b>	<b>389</b>	<b>391</b>	<b>388</b>

### *Survey administration*

#### *Congregants*

At baseline, a tracking system was developed to enable endline tracking and sampling of male and female adolescent and adult congregants. The tracking system included details for each participant, including unique ID number, name, address and telephone contact details. Prior to the quantitative data collection, ECLRD staff made phone calls to congregants who had participated in a survey at baseline and consented to be recontacted at endline, to inform them that an endline survey would take place and asking their consent to be invited to participate in an endline survey. During this process, there were many challenges, including phones being switched off or no longer in use, poor network in more remote areas, and respondents having moved to other counties, districts or townships.

Given challenges in tracking baseline respondents through the phone, it was decided to develop a dual sampling system at endline.

1. **Tracking baseline participants:** Enumerators were instructed to attempt to recontact baseline respondents (congregants) when arriving in the field, using phone numbers and addresses provided at baseline. Enumerators applied a screening protocol to ensure that they were the correct respondent, including checking that name, age and other details in the tracking system aligned with information provided by respondents. Those respondents who were successfully recontacted and who consented to participate in a follow up survey were sampled, using the unique ID assigned to them at baseline.

2. **Replacing baseline participants:** Those baseline participants who could not be successfully tracked at endline were replaced with another participant from the baseline gender and age category. This was done by employing the same sampling approach used at baseline: doing random household walks, starting from key sampling points in communities and following an established 'random walk' protocol to randomly select households; and selecting individuals within households using the birthday method (e.g., in the case of sampling an adolescent girl, asking which adolescent girl in the household had the most recent birthday). As for baseline, the endline screening protocols included three key recruitment criteria: (1) the participant should be living in a household that has NOT been sampled for the survey, (2) the participant must be a congregant of a local church, mosque or other faith-based organization, and (3) they must fit within the target group according to age (adolescent or adult) and gender (male or female). Further details about the approach are included in the baseline evaluation report. Replaced respondents were given the same unique ID number as the baseline respondent being replaced, plus \_R (e.g., endline respondent replacing baseline respondent number 135 was given the unique ID 135\_R).

For all survey administration, sex-matched interviewing took place, whereby female enumerators interviewed women and girls, and male enumerators interviewed men and boys. This is particularly important in relation to sensitive questions related to experience or perpetration of VAWG, and sex-matched interviewing increases the likelihood that participants will be open and honest with their responses.

Table 9 contains data for the number of recontacted and replaced respondents at endline by study arm.

**Table 9: Number of baseline congregant respondents recontacted and replaced at endline, disaggregated by study arm**

	Adolescent girls	Adult women	Adolescent boys	Adult men
<b>Intervention group</b>				
Recontacted	108	166	105	141
Replaced	49	58	42	66
<b>Comparison group</b>				
Recontacted	115	166	110	143
Replaced	41	57	47	50

#### Leaders and youth group members

As at baseline, individual sampling of faith, youth, and school leaders, and youth group members, was conducted purposefully given that there were limited numbers of possible participants in these categories. ECLRD supported access and entry to leaders and youth group members at both the community and school levels. At endline, a key criterion for recruitment into the survey was that participants had to have participated directly in intervention activities, such as the Faith Leader GBV Toolkit or FAMA card training, FAMA card discussion groups, school or youth group activities (e.g., youth drama) etc.

As for congregants, sex-matched interviewing took place for leaders and youth group members, whereby female enumerators interviewed women and girls, and male enumerators interviewed men and boys.

### *Characteristics of the quantitative sample*

There are a number of differences between congregants in the intervention and comparison groups, both at baseline and endline. The mean age of congregants was approximately the same in the intervention and comparison groups both at baseline and endline, except for among adult women, who were significantly older in the intervention group at both baseline and endline. The education level of congregants also varied between the intervention and comparison groups for some groups. At baseline, adult women in the intervention group were significantly more educated than those in the comparison group and the reverse was true for female adolescents who were significantly more educated in the comparison group. At endline, education only differed for adolescent respondents, with adolescent girls and boys being more educated in the intervention group than comparison group. There are few variations between congregants in the intervention and comparison groups in relation to current relationship status. At baseline, there was a larger proportion of male and female congregants in the intervention group than comparison group currently married, and this same pattern is observed at endline for adult women. However, no other significant differences were observed. There were some differences between the study arms in relation to religious affiliation. There were more adult women and adolescent boys who identified as Christian in the comparison group at both baseline and endline, but no significant differences found for the other congregant groups. At baseline, significantly higher food insecurity was observed among respondents in the comparison group, and this was true for all congregant groups. At endline, however, this pattern only holds for adolescent girls and boys. The figures for all baseline and endline characteristics of the quantitative sample of congregants are included in Annex G.

There were a number of differences between faith, youth and school leaders, and youth group members, between baseline and endline. Faith leaders and youth group members had higher mean ages at endline. In relation to gender, the only noticeable difference was a higher proportion of male youth group members at endline when compared with baseline. In relation to religious affiliation, the only notable difference was a larger proportion of Christian youth group members at endline than at baseline. The figures for all baseline and endline characteristics of the quantitative sample of faith leaders, faith youth leaders, youth group members and school leaders are included in Annex G.

### 3.2.3 Qualitative methods

The majority of the qualitative data collection was conducted after quantitative data collection has been completed, as this allowed the qualitative research to look in more depth at quantitative findings that were unexpected and/or need further investigation.

#### *Instruments*

Focus group discussions (FGDs) and key informant interviews (KIIs) were conducted. These methods were used to collect data related to specific evaluation criteria and project indicators.

FGDs were conducted with:

- Male and female faith leaders (separately)
- Male and female youth leaders (separately)
- Male and female congregants (18+ years) (separately)
- Boy and girl congregants (13-17 years) (separately)
- Savings with Education Group Leaders (women only)
- Savings with Education group members (women only)
- ECLRD staff

KIIs were conducted with

- ECLRD and Episcopal Relief & Development staff members

- National/district duty bearers/stakeholders
- Partners (formal and informal) involved in project implementation (at county and national level)

A list of stakeholders consulted is included in Annex H. Different FGD and KII guides were prepared with specific evaluation criteria and project indicators in mind (see Annex F4).

### *Sampling*

The intervention was launched in 24 new townships in total.<sup>16</sup> These 24 townships are in four different counties. Two of the counties (Rivercess and Grand Cape Mount) were part of the previous intervention (2015-2017); Bong and Grand Gedeh had never received any form of Episcopal Relief & Development and ECLRD intervention. The new townships are in two districts in each county, with each of these two districts having three new townships.

Qualitative data collection took place in three counties where the intervention was implemented. It was originally planned that it would happen in all four, but due to an extended rainy season the roads to Grand Gedeh were impossible to navigate at the time of the researchers' field visits. Therefore, the qualitative data collection only happened in Rivercess, Grand Cape Mount and Bong. The focus groups and KIIs that were planned for Grand Gedeh, were instead conducted in Grand Cape Mount and Bong. In each of the three counties, the same districts and townships were sampled as with the quantitative data collection.<sup>17</sup>

As stipulated above, FGDs were conducted with a wide range of project beneficiaries. Due to the nature of the project intervention activities and the issues that would therefore be raised during the FGDs, the group sessions were conducted in single-sex groups. However, the groups did not separate Christian and Muslim participants, as this has been shown to not be an issue of contention in Liberia in general. In the case of FGDs with congregants, under-aged congregants will be split from adult congregants. This was in order to manage power dynamics, but also as a specific target of the intervention is school-going children.

Due to budget and time constraints, not all of these FGDs could be conducted in each county. Based on the evaluation matrix, it was decided the following number of FGDs would be conducted with each target group:

- 2 with male faith leaders
- 2 with female faith leaders
- 1 with male youth leaders
- 2 with female youth leaders
- 2 with male congregants (18+ years)
- 2 with female congregants (18+ years)
- 1 with boy congregants (13-17 years)
- 2 with girl congregants (13-17 years)
- 1 with Savings with Education Group Leaders (women only)
- 1 with Savings with Education group members (women only)

The FGDs conducted within each of the original four counties were selected at random by the researchers. Once it was determined that Grand Gedeh was inaccessible, the FGDs allocated to

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<sup>16</sup> With 'new townships' is meant communities that have not received any form of the Episcopal Relief & Development and ECLRD GBV intervention during the 2015 – 2017 project. A township consists of a number of small villages. The term 'township', as used in Liberia, is synonymous with the term 'community'.

<sup>17</sup> See Table 6.

Grand Gedeh were conducted in Grand Cape Mount and Bong. The FGDs conducted in each county are listed in Table 10.

Table 10: FGDs conducted in each county

County	FGDs	Unplanned changes during fieldwork
<b>Grand Cape Mount</b>	Male faith leaders	
	Male congregants (18+ years)	
	Female youth leaders	
	Female congregants (18+ years)	
	Female faith leaders	
	Savings with Education Group Members	
<b>Rivercess</b>	Female faith leaders	
	Male congregants (18+ years)	Male faith leaders <i>This was changed to a FGD with male faith leaders, as all participants who arrived were faith leaders</i>
	Male youth leaders	
	Girl congregants (13-17 years)	
<b>Bong</b>	Male faith leaders	
	Female congregants (18+ years)	Female faith leaders <i>This was changed to a FGD with female faith leaders, as all participants who arrived were faith leaders</i>
	Female youth leaders	
	Savings with Education Group Leaders	
	Boy congregants (13-17 years)	
	Girl congregants (13-17 years)	
	<i>Additional FGD with male congregants (18+ years)</i>	<i>The participants who arrived for the original FGD with boy congregants were all older than 18 years and therefore a FGD with adult male congregants was conducted. A new FGD with boy congregants was then organised.</i>

Randomised sampling of FGD participants were conducted with the help of the ELCRD county-level staff. Each ELCRD county-level staff member was informed of the specific FGDs to be conducted in their county. They were tasked with compiling a list of possible participants for each FGD, containing the following information: name, gender, position in community, age, religious affiliation, and township. These lists were shared with the Programme Manager, who randomised it. The randomised lists were then shared with the county level ELCRD staff, who approached potential participants from the top of the randomised list until eight participants for a FGD had been identified.

At county level, the plan was that 3-4 KIIs should be conducted in each of the three counties. However, additional KIIs could be conducted in some, with the total number of county-level KIIs totalling 13 (see Table 11).

**Table 11: KIIs conducted in each county**

County	Number of KIIs conducted	With whom
Rivercess	3	1 with ECLRD staff member 2 with government partners/stakeholders
Grand Cape Mount	5	1 with ECLRD staff member 3 with government partners/stakeholders 1 with civil society partner
Bong	5	1 with ECLRD staff member 4 with government partners/stakeholders

County-level staff were asked to identify the participants, who should all be county-level duty bearers and stakeholders, and/or partners. One of the KIIs in each county had to be with a county-level staff member.

At national level, one FGD was conducted. All ECLRD staff were invited to the focus group. At national level, three KIIs were conducted. ECLRD staff at headquarters were asked to identify these participants, who should all be national-level duty bearers and stakeholders, and/or partners.

In summary, the qualitative component of the evaluation sampled 80 female participants and 65 male participants (see Table 12).

**Table 12: Summary of qualitative data collection activities and number of participants**

	Total number of sessions	Number of female participants	Number of male participants
County level	17 FGDs	72	48
	13 KIIs	2	11
National level	1 FGD	4	5
	3 KIIs	2	1
<b>TOTAL</b>		<b>80</b>	<b>65</b>

In the discussion of the findings from the qualitative fieldwork, the term ‘volunteers’ is used to refer to individuals who were voluntarily involved in implementing the project at community-level, e.g. by doing awareness-raising in the community or being a member of a schools-based GBV committee. These individuals included faith leaders, youth leaders, community leaders, and community members (e.g. members of SWE groups). The majority of these volunteers were faith leaders and the volunteers were frontline implementers driving project results and impact.

#### *Qualitative data collection administration*

The FGDs were hosted in a central location, with participants from the various townships travelling to the location. A counsellor was available on-site, arranged by ECLRD. Refreshments were made available to participants and travel costs were reimbursed.

KIIs and FGDs were conducted in English. An interpreter was available where participants spoke only the local languages or when the participants and researcher struggled to understand each others’ accents.

All KIIs and FGDs were audio recorded and shared with the transcription team, using OneDrive, at the end of each fieldwork day (when internet access permitted). Where local languages were used, only the English-language parts of the audio recordings were transcribed.

### 3.3 Data processing and analysis

Survey data was collected through a mobile phone digital software application, CSPro, which allows data to be uploaded in Excel and other format in real time. Data was stored on OneDrive. Survey data was cleaned and imported into a STATA database. New variables were created, including for key outcome measures, in line with the baseline approach. The analysis for impact level indicators in the project results framework comprised a difference-in-differences approach, which compares baseline and endline outcome measures by calculating: (1) the difference between baseline and endline values for the intervention group; (2) the difference between baseline and endline values for the comparison group; and (3) the difference between the difference in outcomes in the intervention and comparison groups. All other analysis was conducted using frequencies and means, and t-tests to test statistical significance for continuous data, and Chi Square to test significance for nominal data.

KIIs and FGDs were audio recorded and transcribed. All transcripts were coded and analyzed using Atlas.ti 8, drawing from a hybrid deductive and inductive approach which combines structured qualitative coding based on baseline outcome indicators and evaluation criteria, with an additional flexible method of adding codes to capture new themes or unexpected phenomena. The analysis of the qualitative data was integrated into the quantitative analysis, so as to illustrate, enrich or (where needed) elucidate quantitative findings. At the same time, the qualitative data was a significant source in answering most of the evaluation questions (see Annex C – Evaluation matrix).

### 3.4 Ethical approach

International ethical clearance for this research project was applied for and received from the Stellenbosch University Research Ethics Committee: Humanities (member of the South African National Health Research Ethics Committee, NHREC, registration REC-050411-032).

Observing ethical research standards means that the study was conducted in the following manner:

- Enumerators received training on ethical research practices
- Enumerators, interpreters and data transcribers signed non-disclosure forms
- All participants volunteered to be part of the study and were aware that they have the right to refuse to answer and can withdraw from participation at any time
- Counselling services were available at all of the sites where research was conducted and all participants were informed of the identity and location of counsellors
- Full anonymity of participants and confidentiality of the information shared was observed at all times, including in reporting.
- Consent forms were individually explained by the researchers and signed by all participants prior to partaking in research activities
- In the case of participants younger than 18 years, both the participants and their parent/guardian signed a consent form prior to participation
- Data was protected from unauthorised access at all times, by saving it on password-protected computers, while field notes will be held in locked cupboards in locked offices.

Annex F5 contains consent forms and plain language statements for both the quantitative and qualitative research.

#### 3.4.1 Additional precautions to protect participants from harm

In the evaluation of phase one of the project, female congregant reports of physical and sexual IPV were measured through one item each asking whether in the past 12 months the respondent's husband or partner had been physically violent, or sexually violent, towards her. There are a number of limitations in using such survey items to measure IPV as a respondent's perceptions of what constitutes physical or sexual violence may vary. Consequently, the phase two baseline survey included a series of survey items used in the World Health Organization (WHO) Multi-Country Study on Women's Health and Domestic Violence (Garcia-Moreno et al. 2006) and Demographic and Health Survey (DHS) to measure physical, sexual and emotional IPV. Surveys with men also included adjusted questions to measure prevalence of IPV perpetration. The decision to include stronger measures of prevalence of IPV experience and perpetration was made in order to strengthen the measurement of indicators 1 and 3 of the project goal and, further, to develop evidence of whether the intervention is associated with reduction in VAWG. This latter reason is critical to establishing the further scalability of the project and, if no reduction in VAWG is observed, understanding why programme elements are not translating into important behaviour change.

The evaluation team recognized that there are additional risks, particularly to women and children, when conducting research related to VAWG, and that these risks may be amplified when asking direct questions about experience or perpetration of violence. Below are additional precautions that the team implemented to ensure that participants are protected from harm throughout both the qualitative and quantitative data collection.

#### 3.4.2 Sampling

At baseline, only one person per household was sampled, and no women and men from the same household were sampled. This approach was selected to mitigate the risk of women and men in the same household answering questions about experience or perpetration of violence, which could lead to backlash violence if, for instance, male household members became suspicious about women's disclosures of violence. At endline, the same approach of no more than one person per household was used.

#### 3.4.3 Recruitment and training of data collectors

The endline data collection partner has highly experienced survey staff who have worked on multiple projects, including those related to violence against women, violence against children and other very sensitive topics. All survey staff were trained in Monrovia by Dr Corboz, who travelled to the field to do comprehensive face-to-face training, including on research ethics, and oversaw initial data collection activities. Dr Corboz also held regular debriefs with the data collection supervisors. As at baseline, Dr Corboz developed a data collector's manual with full protocols and guidance on survey data collection, sampling and ethical procedures.

#### 3.4.4 Ensuring privacy and confidentiality

As per the baseline approach, the endline survey data collection was governed by a clear set of protocols to ensure privacy and confidentiality. These protocols include conducting all surveys in privacy and with nobody else present, and clear guidance on how to handle interruptions and to stop interviews if privacy cannot be established. In the case of children (anybody under the age of 18), the guidance articulates that surveys should take place somewhere where the respondent can be seen (i.e., by a family member) but not heard (i.e., auditory privacy must be maintained), in order to support safeguarding and alleviate any parental concerns. Data collectors were instructed that interviews should be terminated if parents or others insist on being present during the survey.

Surveys took place in locations agreed between the interviewer and respondent, with interviewers noting clearly that interviews can only be conducted in a private location where there will be auditory privacy. These locations included inside households, in gardens located away from households, or in other settings including private community spaces, as agreed with participants.

#### 3.4.5 Counselling and referral protocols

Counselling was available to research participants. The ECLRD staff identified 3-4 counsellors and lay counsellors active in the areas where the fieldwork took place. A list was compiled of these counsellors, with their contact information:

- In each new site where the research was conducted, the enumerators/ researcher received multiple copies of the counsellor list for the location. Each research participant received a copy of this list.
- At each new site, ECLRD organised a counsellor to be present, in case a research participant showed distress.

The referral protocol was as follows with the quantitative fieldwork:

- Prior to the enumerator starting data collection, they shared the contact information of the counsellor, both verbally and in writing. They also stated that the participant can go to the counsellor at any stage during or after the interview.
- If during the interview the participant became agitated or emotional, the enumerator would have stopped the interview and let the participant know that if they would like to see a counsellor that they are free to do so. Should the participant have agreed, they would immediately go to the counsellor. If the participant refused, they were advised of the importance of seeing a counsellor but not be forced to do so.
- If the interview was concluded with no visible reaction (the enumerator cannot detect any distress), the enumerator nevertheless again emphasised the availability of the counsellor, and the importance of talking to the counsellor if any traumatic or emotional memories do arise. Participants were reminded that they can use this service in the future as well, and not only in the immediate aftermath of the survey interview.

The referral protocol were as follows with the qualitative fieldwork:

- Prior to starting the FGD or KII, the researcher share the contact information of the counsellor, both verbally and in writing. The researcher also stated that should a participant feel it necessary, they can leave the session at any time to see the counsellor.
- If during the focus group a participant became agitated or emotional, the researcher would halt the session and accompany the individual to the counsellor waiting on-site, should they wish to see her. Should the participant refuse, they were advised of the importance of seeing a counsellor but not be forced to do so.
- If the FGD or KII were concluded with no visible reaction from any of the participants (the researcher cannot detect any distress), the researcher nevertheless again emphasised the availability of the counsellor, and the importance of talking to the counsellor if any traumatic or emotional memories do arise. Participants were reminded that they can use this service in the future as well, and not only in the immediate aftermath of the survey interview.

It should be noted that, although counsellors were always available during data collection, no participants requested to see them.

### 3.4.6 Mandatory reporting

There are no mandatory reporting laws in Liberia requiring researchers to mandatorily report children's disclosures of violence or abuse. Opinions in the field differ on the position that research teams should take on the disclosure of abuse by children in settings where mandatory reporting is not legally required. It is a difficult act of weighing up benefits (wider benefits of research to future reduction in abuse of children) and risks (to the individual if staying in an abusive situation but also to the individual if confidentiality is breached, or if abuse is disclosed and then badly handled or nothing is done). There are also a number of challenges of asking researchers to make judgments about whether abuse has occurred or not, and handle the case appropriately.<sup>18</sup>

It is the evaluation team's position that mandatory reporting by researchers can be very harmful, and should be avoided. Instead, a trained counsellor was made available and the protocol was that for each child who disclosed any kind of violence or abuse, researchers/enumerators were instructed, at the end of the interview, to ask the child if she or he would like to talk in complete confidence to a trained counsellor who could help them think through what to do. The child would only be referred to the trained counsellor if they consented. They would also be referred if they ask for help or became distressed during the interview and agreed to have help. The procedure for what would happen was included in the information and consent forms for children and caregivers.

## 3.5 Challenges and limitations

A number of challenges and limitations arose from this research.

There were a number of challenges recontacting baseline survey participants due to switched off phones, non-functioning phone numbers and migration away from target communities. This means that not all baseline respondents could be recontacted, and a proportion had to be replaced. Nevertheless, approximately 70% of baseline respondents in both the intervention and comparison groups were recontacted, which falls in line with the 30% attrition buffer applied to the baseline sample.

The presence of a number of GBV and women's empowerment programs and advocacy activities in both the comparison county (Margibi) and intervention counties may have led to contamination. Given that qualitative data was not collected in the comparison county, it was not possible to gather evidence on the extent to which GBV programming may have influenced change in Margibi. The qualitative data collected in the intervention counties suggests that while GBV programs in these counties have been influential, particularly in terms of GBV response, many of the positive impacts observed can be attributed to the prevention programming implemented by EPISCOPAL RELIEF & DEVELOPMENT and ECLRD. However, possible contamination means that attribution cannot be fully measured.

The original survey and qualitative tools contained questions about female genital mutilation/cutting (FGM/C); however, these were removed prior to data collection due to concerns from ECLRD about strong sensitivities discussing FGM/C, which had led the project to halt their messaging and FAMA card use related to FGM/C. This means there is very little data related to FGM/C in the evaluation report. This particular challenge in the evaluation points towards a wider challenge in shifting norms and practices around FGM/C, and raises questions about the extent to which faith-based approaches can do so, or whether other or additional approaches are required.

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<sup>18</sup> See for example <https://resourcecentre.savethechildren.net/node/6777/pdf/6777.pdf>

The qualitative fieldwork did not specifically ask about the Faith Leader GBV Toolkit, and the survey only asked whether faith leaders used the toolkit in their work to combat VAWG and how often they had done so. Consequently, there is limited data specifically on the GBV toolkit. However, the qualitative tools did include questions about the FAMA cards, and during qualitative fieldwork the participants often spoke unprompted about the FAMA cards. As the trained volunteers did not receive the full Faith Leader GBV Toolkit (which is for facilitators only), but rather handouts and/or FAMA cards, it appears appropriate that the endline research did not delve into the Faith Leader GBV Toolkit, but focused rather on the FAMA cards.

Due to weather conditions, the roads to Grand Gedeh were unpassable, and qualitative data collection could not happen in this county. This possibility was foreseen at inception stage and a protocol developed for what would happen if this was the case. This protocol was applied a week before fieldwork commenced, with the qualitative fieldwork to be conducted in Grand Gedeh instead being conducted in Grand Cape Mount and Bong. The quantitative data collection in Grand Gedeh was postponed until the roads could be navigated.

All FGDs were hosted in a central location (the ECLRD county offices and the ECLRD national office). However, it means that some participants had to travel further than others, inhibiting their ability or willingness to take part in the research. This limitation was mitigated by arranging the majority of the FGDs at least two weeks before they happened (thus giving participants ample time to plan around it); hosting the FGDs in a town to which participants are motivated to go for other reasons, too (e.g. to do shopping); reimbursing all participants for their travel; and offering refreshments at the FGD. The towns that were selected were centrally located and easily accessible.

With two FGDs, the participants that arrived for the focus group did not all fit the required sample. In all of these cases, the focus group was adjusted to fit the actual participant group. In one case, an additional focus group was organised so that the original sampling could be met. The result of these challenges is that one more FGD than originally planned was conducted at county level, and two more faith leader FGDs, and one less adult female congregant FGD.

## 4. Findings

In this section, the findings are presented according to the key evaluation questions, grouped by evaluation criteria.

### 4.1 Effectiveness

**EQ1. To what extent were the intended project goal, outcomes and outputs (project results) achieved and how?**

The results for evaluation question 1 are outlined below in line with the project's results framework (Annex D1). A summary of baseline and endline results for those goal and outcome indicators measured quantitatively is presented in Annex D2.

#### 4.1.1 Project goal

The project goal is that women and girls experience less intimate partner violence and non-partner sexual violence and have increased access to services. The project's results framework measures the project goal through three key indicators that focus on: **male and female congregants' gender equitable attitudes; experiences and behaviours (including women's and girls' experience and men and boys' perpetration of violence); and male and female congregants' knowledge of how to access VAWG services.** In line with the evaluation approach, indicators under the project goal are

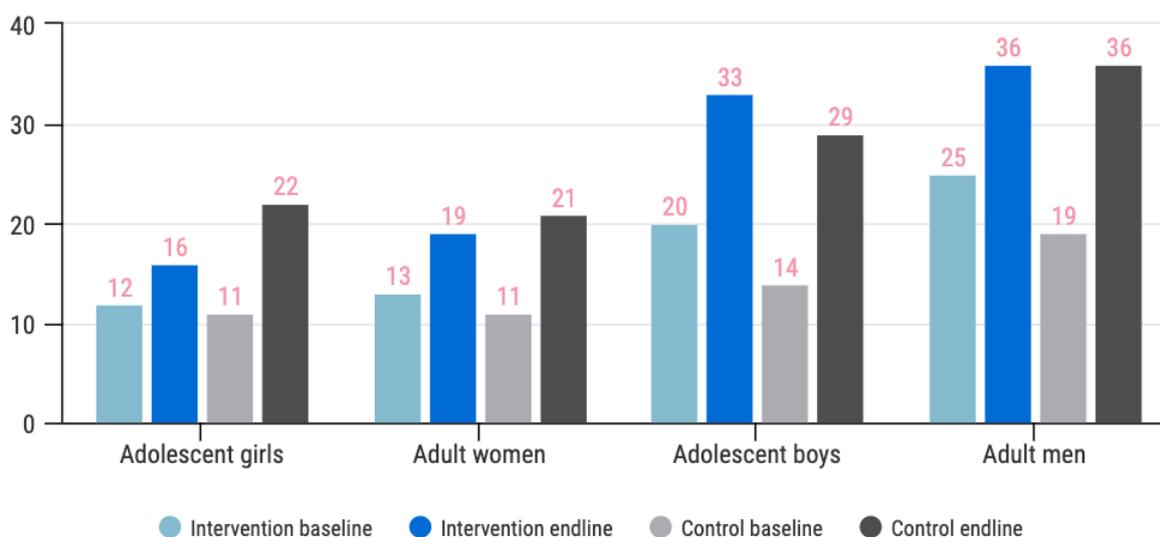
measured quasi-experimentally and the corresponding results should be read with the possibility of contamination of the comparison group (and intervention group) in mind. In particular, findings that show improvement in attitudes and behaviours in the comparison group may in fact be due to GBV or women's rights programmes implemented in Margibi rather than negative effects in the evaluation's intervention group. Likewise, improvements in the intervention group may be partly attributable to other programmes also implemented in these counties. Consequently, key goal-level findings are analysed according to exposure to intervention elements, including faith-based activities and FAMA cards, to test the attribution of impact to the intervention.

### *Gender equitable attitudes*

As outlined in the methods section of the report, the attitudinal questions were designed and have been analyzed according to specific domains: general gender attitudes, justification for physical VAWG, justification for sexual VAWG, belief in rape myths, and tolerance for violence (see Annex F1). Within each domain, scores consist of a value between 0 and 100, with higher scores indicating (1) more gender equitable attitudes, (2) less justification for physical VAWG, (3) less justification for sexual VAWG, (4) less belief in rape myths, and (5) less belief that women should tolerate violence. The results suggest that overall, there has been little change in gender equitable attitudes and attitudes that support violence. In some cases attitudes have worsened slightly in the intervention group, and in other cases we see significant improvements; however, these results differ according to congregants' gender and age categories, and the type of attitudinal measures employed.

Gender equitable attitudes have improved in the intervention group for all congregant groups; however, they have also improved across all congregant groups in the comparison group (see Figure 2). These findings suggest a negative intervention effect on gender equitable attitudes, although this was only statistically significant for adolescent girls ( $p=0,006$ ) and adult men ( $p=0,04$ ) (see Table 13). This result should be read with caution. As noted above, what appears to be a negative effect in the intervention group may in fact be attributable to a positive effect in the comparison group due to existing programmes implemented in Margibi county.

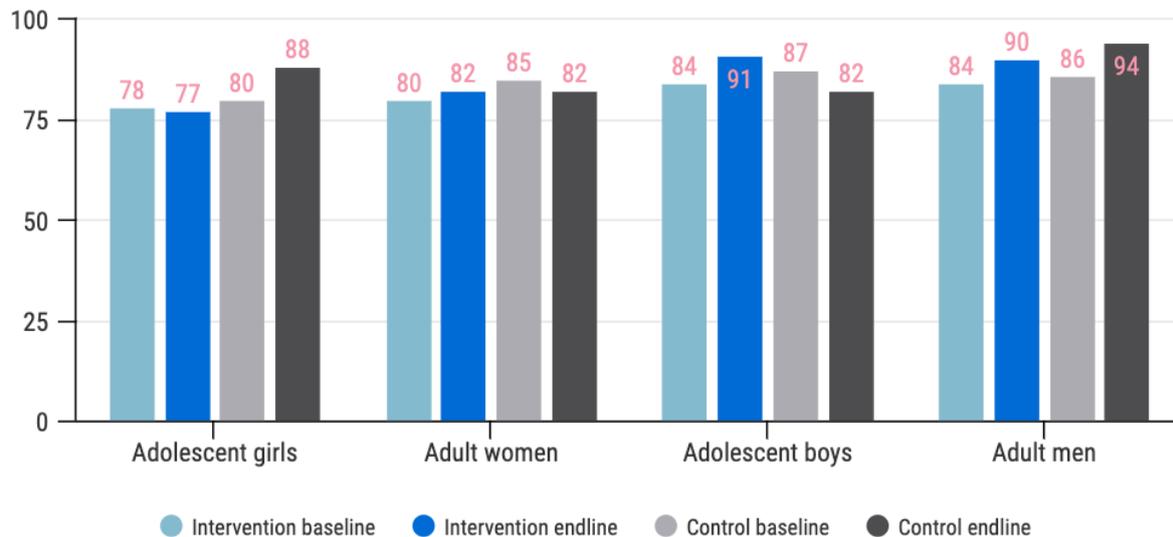
**Figure 2: Mean scores for gender equitable attitudes, disaggregated by evaluation phase, study arm and congregant gender and age**



Attitudes justifying physical VAWG were not common at baseline, and there have been few changes at endline (see Figure 3). The only significant results for attitudes justifying physical VAWG were a significantly negative effect for adolescent girls (with attitudes remaining the same in the intervention group and improving in the comparison group ( $p=0,033$ ), and significantly positive

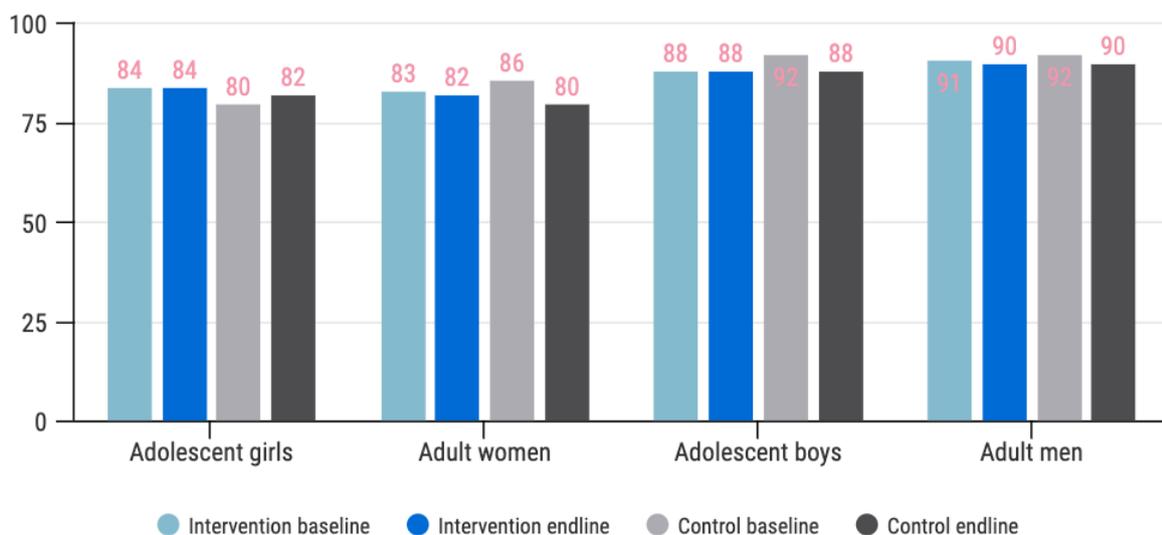
effect for adolescent boys (with an improvement in the intervention group, and worsening in the comparison group) ( $p=0,001$ ) (see Table 13). There were no significant changes for adult women and men, although there were slight improvements in the intervention group for both groups.

**Figure 3: Mean scores for attitudes justifying physical VAWG, disaggregated by evaluation phase, study arm and congregant gender and age**



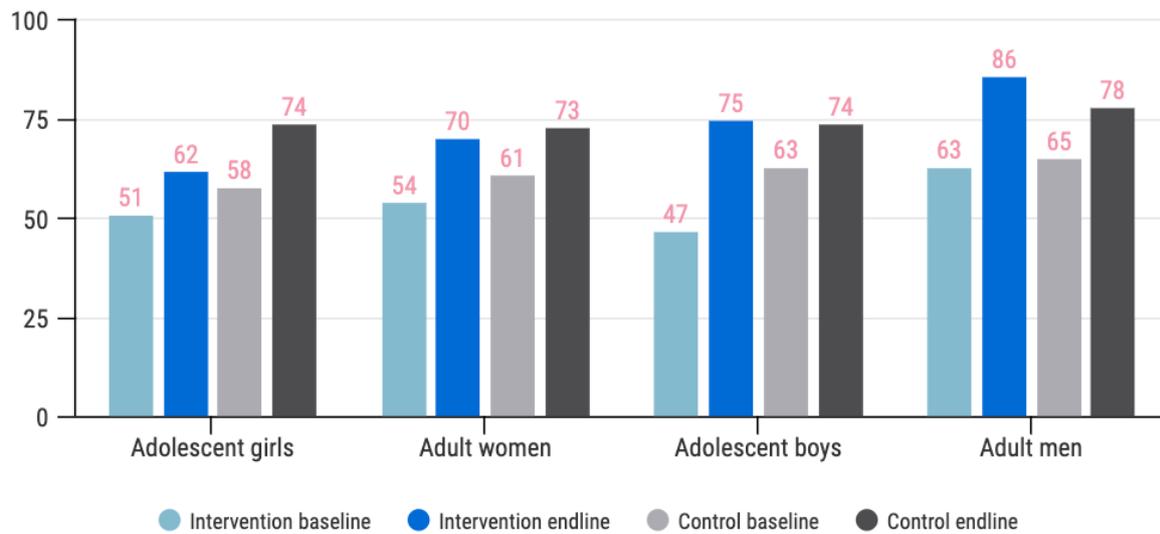
Much like for attitudes justifying physical VAWG, attitudes justifying sexual VAWG were not common at baseline, and there have been no changes at endline, although we do see a slight worsening in the comparison group for adult women, adolescent boys and adult men (see Figure 4). However, these results do not translate to any significant effect in the intervention group (see Table 13).

**Figure 4: Mean scores for attitudes justifying sexual VAWG, disaggregated by evaluation phase, study arm and congregant gender and age**



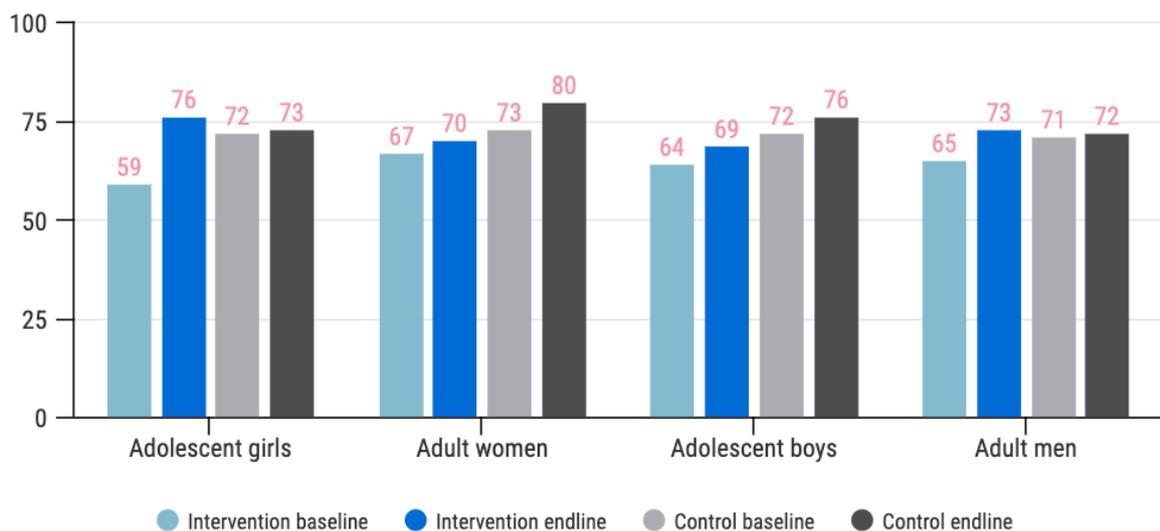
Attitudes supporting rape myths improved in both the intervention and comparison groups for all four categories of congregants (see Figure 5). While there was no significant effect in the intervention group for adolescent girls and adult women, we do see a significant positive intervention effect on adolescent boys ( $p=0,001$ ) and adult men ( $0,009$ ) (see Table 13).

Figure 5: Mean scores for attitudes supporting rape myths, disaggregated by evaluation phase, study arm and congregant gender and age



Much like for attitudes supporting rape myths, attitudes tolerating VAWG improved in both the intervention and comparison groups for all four categories of congregants (see Figure 6). However, the only significant finding was a positive intervention effect for adolescent girls ( $p=0,003$ ), whose attitudes improved alongside no change in the comparison group (see Table 13).

Figure 6: Mean scores for attitudes tolerating VAWG, disaggregated by evaluation phase, study arm and congregant gender and age



When combining the five attitudinal measures into an overall score, we see improvements in attitudes at endline for all congregant groups in both the intervention and comparison groups (see Figure 7). However, the only statistically significant finding is an improvement in overall attitudes among adolescent boys in the intervention group relative to the comparison group ( $p=0,020$ ) (Table 13).

Figure 7: Mean scores for overall attitudes, disaggregated by evaluation phase, study arm and congregant gender and age

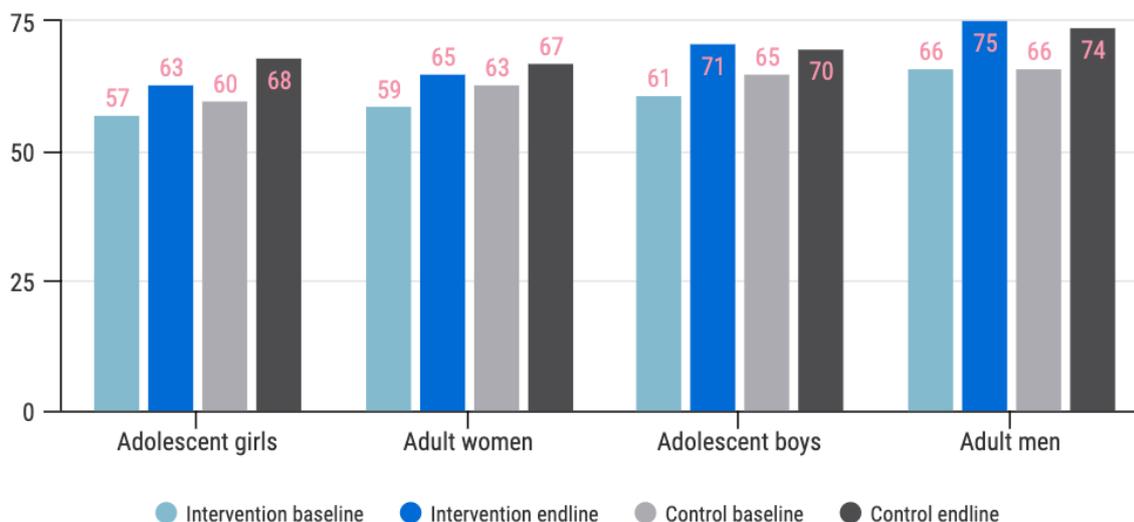


Table 13: Difference-in-differences analysis of attitudes, disaggregated by age and gender of congregants

	Adolescent girls		Adult women		Adolescent boys		Adult men	
	DID Coef	p value	DID Coef	p value	DID Coef	p value	DID Coef	p value
Gender equitable attitudes	-7,5	0,006	-4,1	0,105	-1,4	0,659	-6,8	0,04
Justification for physical VAWG	-8,6	0,033	4,6	0,165	11,4	0,001	-2	0,496
Justification for sexual VAWG	-2	0,62	4,7	0,115	3	0,317	0,9	0,71
Rape myths	-6,1	0,212	5,3	0,177	17,8	0,001	10,5	0,009
Tolerance for violence	14,8	0,003	-4,2	0,276	1,6	0,691	6,6	0,086
Overall	-2,3	0,344	1,5	0,396	5,8	0,020	1,8	0,355

When disaggregating baseline and endline overall attitude scores in the intervention group by county, we see improvements in attitudes at endline in Bong and Grand Gedeh but with very little to no change in Grand Cape Mount and Rivercess (see Figure 8). This pattern is consistent in Bong and Grand Gedeh according to gender and age of congregants, with improvements in attitudes observed for all four congregant groups. However, there are some variations in the other two counties. For example, in Grand Cape Mount, attitudes worsened slightly among adolescent girls and boys but improved for adult women and men. In Rivercess, attitudes worsened among adolescent girls and adult women, and worsened slightly among adolescent boys, but improved among adult men.

Figure 8: Mean scores for overall attitudes in intervention counties, disaggregated by county and evaluation phase



The findings related to attitudes also vary by exposure to intervention activities or other faith-based activities. When examining endline attitudinal scores in the intervention group for female congregants, having heard faith leaders speak out against VAWG in the past year, having participated in faith-based activities where VAWG was addressed and having participated in other community activities where VAWG was addressed, were all associated with less gender equitable attitudes (see Table 14). However, almost all other attitudinal measures were positively associated with having heard faith leaders speak out against VAWG, and having participated in faith-based activities or other community activities where VAWG was addressed. It is interesting to note that higher tolerance for VAWG is significantly associated with participation in a savings group.

Table 14: Female congregants' mean scores for attitudinal measures, disaggregated by exposure to intervention activities or faith-based activities

	Participates in a savings group		Frequently participated in religious festivals in past year		Heard faith leaders speak out against VAWG in past year		Participated in faith-based activities where VAWG was addressed		Participated in other community activity where VAWG was addressed	
	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes
Gender equitable attitudes	16,9	19,5	18,9	16,4	25,7	14,2***	19,8	15,1*	21,2	13,6***
Justification physical VAWG	81,8	81,9	79,8	85,5*	69,7	85,4***	71,4	92***	72,1	91,2***
Justification sexual VAWG	84,8	82,1	82,3	86,1	72	87,5***	80,6	86,5*	80	86,8**
Rape myths	69	66,5	67,7	68,6	59,6	69,5**	60,3	75,6***	60,5	80,4***
Tolerance for VAWG	77,1	69,7**	73,5	74,8	62,6	77,3***	72,2	74	68,6	78**

\*  $p < 0,05$ , \*\*  $p < 0,01$ , \*\*\*  $p < 0,001$

In contrast to female congregants, male congregants' attitudes were significantly more gender equitable when they had participated in various activities, including savings groups, religious festivals and when they had participated in (non-faith) community activities where VAWG was addressed (see Table 15). Further, justifying physical VAWG was less common among male congregants who had participated in religious festivals frequently, heard faith leaders speak out against VAWG in the past year, and those who had participated in faith-based or other community activities where VAWG was addressed. Other significant findings include more justification of sexual VAWG among male congregants who had participated in a savings group, and less tolerance for VAWG among those who frequently participated in religious festivals in the past year.

**Table 15: Male congregants' mean scores for attitudinal measures, disaggregated by exposure to intervention activities or faith-based activities**

	Participates in a savings group		Frequently participated in religious festivals in past year		Heard faith leaders speak out against VAWG in past year		Participated in faith-based activities where VAWG was addressed		Participated in other community activity where VAWG was addressed	
	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes
Gender equitable attitudes	30,6	40,2***	31,5	41,2***	29,7	35,8	35,1	34,4	30,8	37,7*
Justification physical VAWG	89,7	91,5	87,6	95,2***	84,3	91,3*	85,3	93,6***	86	93,8***
Justification sexual VAWG	91,1	87,2*	88,7	90,1	91,4	89	90,6	88,2	91	87,9
Rape myths	82,8	79,2	79,8	83	84,7	80,7	81,8	81	82,4	80,4
Tolerance for VAWG	72,1	70,1	68,9	74,7*	72,5	70,7	70,7	71,2	74,1	68,5

\*  $p < 0,05$ , \*\*  $p < 0,01$ , \*\*\*  $p < 0,001$

The findings related to attitudes also vary by exposure to picture cards (FAMA cards). Among female congregants, the only measures outlined in Table 16 that were significantly associated with attitudinal scores were having seen any picture card or a picture card related to physical violence. Having seen any picture card was associated with less gender equitable attitudes; however, it was also significantly associated with less justification of physical and sexual VAWG, less agreement with rape myths and less tolerance for VAWG. These positive effects were not observed for exposure to picture cards related to physical violence, which was significantly associated with more justification for physical and sexual VAWG.

Table 16: Female congregants' mean scores for attitudinal measures, disaggregated by intervention exposure to FAMA cards

	Saw any picture card		Saw picture card – Physical violence		Saw picture card – Sexual violence		Saw picture card – Emotional violence		Saw picture card – Economic violence		Saw picture card – IPV	
	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes
Gender equitable attitudes	22,4	13,7***	12,3	14,6	16,7	12,2	13,1	18,8	14,1	10,3	14,3	11,6
Justification physical VAWG	70,5	88,6***	92,8	86,5*	87,4	89,7	88,3	93,9	88,7	90,7	87,4	94,6
Justification sexual VAWG	77,2	88,1***	93,9	84,4***	86	89,1	87,9	89,1	88,6	82,2	88	88,4
Rape myths	58,5	73,8***	76,5	72,8	72,6	75	73,9	76,4	72,9	87,8	73,3	77,7
Tolerance for VAWG	64,4	79,5***	84	76,9	78,1	80,4	79	84,8	78,9	87	77,9	86

\*  $p < 0,05$ , \*\*  $p < 0,01$ , \*\*\*  $p < 0,001$

There were no discernible patterns in the findings for male congregants. Attitudes at endline were more gender equitable among male congregants who had seen picture cards about physical, emotional and economic violence (see Table 17). Justification of physical VAWG was also significantly less common among male congregants who had seen any picture card, or picture cards related to physical or emotional violence, or IPV. Male congregants were more supportive of rape myths when they had seen any picture card, and less supportive when they had seen picture cards about economic violence. Interestingly, justification for sexual VAWG was slightly (albeit significantly) more common among those male congregants who had seen picture cards about physical violence.

Table 17: Male congregants' mean scores for attitudinal measures, disaggregated by intervention exposure to FAMA cards

	Saw any picture card		Saw picture card – Physical violence		Saw picture card – Sexual violence		Saw picture card – Emotional violence		Saw picture card – Economic violence		Saw picture card – IPV	
	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes
Gender equitable attitudes	34,7	34,7	23,3	38,9***	30,2	35,5	28,3	49,6***	33,4	44,1*	32,4	38,7
Justification physical VAWG	86,3	91,5*	85,5	93,6***	88	92	89,6	95,7**	91,3	92,9	89,4	95,1**
Justification sexual VAWG	90,3	89	92,6	87,6*	87,4	89,3	88,9	89,2	88,5	92,6	88	90,8
Rape myths	86,8	80*	81,8	79,3	83,7	79,3	78,4	83,8	78,7	89,1*	79,8	80,4

Tolerance for VAWG	75	70,2	71,9	69,6	72,1	69,9	71,5	67,1	70	71,4	68,1	73,9
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\*  $p < 0,05$ , \*\*  $p < 0,01$ , \*\*\*  $p < 0,001$

There are some notable patterns related to attitudes and exposure to intervention activities. These findings appear to be related to gender, whereby exposure to programme activities (including faith-based activities and FAMA card dialogues) seems to have had positive impacts on men and boys' gender equitable attitudes, but not on those of women and girls. However, programme activities do appear to have had positive impact on justification and tolerance for VAWG among both male and female congregants, although the results are not uniform for all types of programme activities. For example, justification for physical VAWG is lower among both female and male congregants who have heard faith leaders speak out, participated in faith-based activities where VAWG was addressed or seen any type of FAMA card. However, while justification for sexual VAWG is lower among female congregants who have participated in the activities noted above, the same is not the case for male congregants, and justification is higher for both male and female congregants who have seen cards depicting physical violence. Further, exposure to faith-based activities and FAMA cards is associated with less agreement with rape myths and less tolerance for VAWG among female congregants, but not among male congregants. These findings suggest that, overall, the programme has been more successful in improving gender equitable attitudes among male congregants, and challenging norms related to VAWG among female congregants.

The finding that participation in a savings group is associated with higher tolerance for VAWG among female congregants, and more justification for sexual VAWG among male congregants, seems to suggest that these groups have not been successful sites for challenging norms around VAWG. This is curious given that members of savings group participated in FAMA card dialogues about GBV both at group meetings and in home visits by trained facilitators. When cross-tabulating tolerance for VAWG among female congregants participating in savings groups with their exposure to FAMA cards, it is evident that tolerance for VAWG is significantly higher among those female savings group members who had not been exposed to FAMA cards ( $p < 0.001$ ). Consequently, it appears that the finding related to female savings group members' higher tolerance to VAWG may be linked to lack of exposure to FAMA cards. The same finding was not found for male savings group members, with exposure to FAMA cards not appearing to mediate the relationship between savings group participation and justification for sexual VAWG.

#### *Experience and perpetration of violence*

Female congregants' reported past year experience of any IPV reduced slightly in the intervention group, and increased in the comparison group, and any IPV perpetration reduced in both study arms but much more so in the comparison group (see Figure 9).

Figure 9: % of past year IPV experience (female congregants) and perpetration (male congregants), disaggregated by study arm and evaluation phase

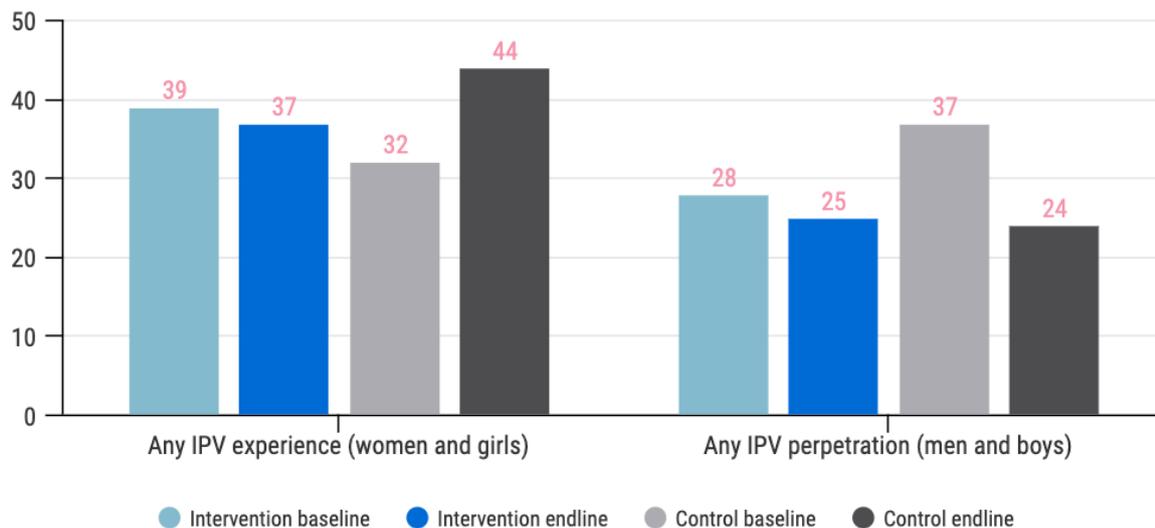


Table 18 presents the intervention effects on female congregants' experience of IPV and NPSV and male congregants' perpetration of IPV and NPSV using difference-in-differences (DID) analysis. Women's experience of emotional IPV, physical IPV and any IPV decreased slightly among female congregants in the intervention group, **while sexual IPV increased slightly**; however, all three types of IPV, and any IPV, increased in the comparison group. The DID analysis shows a significant effect of the intervention on reduction of emotional IPV ( $p=0,004$ ), sexual IPV ( $p=0,001$ ) and any IPV ( $p=0,019$ ). Similarly, while there was a small increase in female congregants' experience of NPSV in the intervention group, there was double the increase in the comparison group, with the DID analysis showing a significant effect of the intervention on reduction of NPSV ( $p=0,029$ ).

The opposite trend was observed for male congregants' perpetration of IPV. In the intervention group, male congregant perpetration of emotional IPV reduced slightly but stayed the same for physical, sexual and any IPV. However, in the comparison group, there were large reductions in male congregants' reported perpetration of emotional, physical and any IPV, and no difference between baseline and endline reports of sexual IPV. The DID analysis indicates a significant increase of physical IPV in the intervention group ( $p=0,001$ ) but no significant differences for other types of IPV. While NPSV stayed the same in the intervention group and decreased slightly in the comparison group, the DID analysis did not reveal a significant effect.

Table 18: Difference-in-differences analysis of past year experience (female congregant) and perpetration (male congregant) of IPV and NPSV

	Study arm	Baseline	Endline	DID Coef	p-value
		%	%		
<b>Female congregant experience</b>					
Emotional IPV	Comparison	24,7	37	-0,17	0,004
	Intervention	33,3	29		
Physical IPV	Comparison	26,8	34,1	-0,09	0,138

	Intervention	31,1	29,7		
Sexual IPV	Comparison	2,9	26,7	-0,19	0,001
	Intervention	11,4	16,1		
Any IPV	Comparison	31,8	43,6	-0,14	0,019
	Intervention	39,3	36,7		
NPSV	Comparison	0,5	8,4	-0,05	0,029
	Intervention	2,4	5,8		
<b>Male congregant perpetration</b>					
Emotional IPV	Comparison	19,8	8,7	0,06	0,145
	Intervention	15,1	10,4		
Physical IPV	Comparison	30,9	15,2	0,18	0,001
	Intervention	19,1	20,9		
Sexual IPV	Comparison	4,8	6,8	-0,01	0,653
	Intervention	6,5	7,1		
Any IPV	Comparison	36,7	23,6	0,11	0,065
	Intervention	27,6	25,4		
NPSV	Comparison	3,6	1,4	0,02	0,128
	Intervention	1,1	1,1		

The trend in results varies according to the age category and gender of respondents. Adult women in the intervention group had lower prevalence of emotional, physical and any IPV at endline when compared with baseline, while prevalence for all types of IPV increased in the comparison group (see Figure 10). Reduction of IPV among adult women in the intervention group was significant for emotional IPV (DID = -0,19, p=0,005), sexual IPV (DID = -0,16, p=0,001) and any IPV (DID = -0,17, p=0,018), and was almost significant for physical IPV (DID = -0,16, p=0,06). Unlike for adult women, emotional, physical and any IPV increased for adolescent girls in the intervention group between baseline and endline (see Figure 11). However, much like for adult women, all forms of IPV increased in the comparison group. A significant reduction of IPV was only observed for sexual IPV among adolescent girls (DID = -0,24, p=0,02), although the results were also moving in the right direction for emotional IPV (DID = -0,13, p=0,3) and any IPV (DID = -0,06, p=0,66). These non-significant findings may be partly due to the much smaller sample size of baseline adolescent girls in the intervention and comparison groups who had been in a relationship in the past year when compared with adult women (see Annex G).

Figure 10: % of past year IPV experience among adolescent female congregants, disaggregated by study arm, evaluation phase, and type of IPV

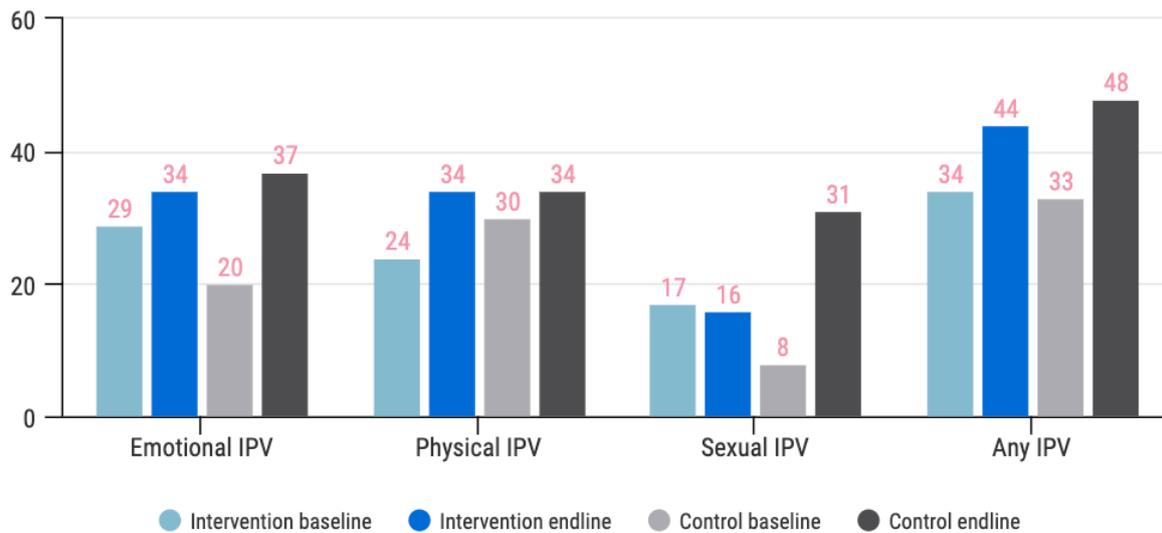
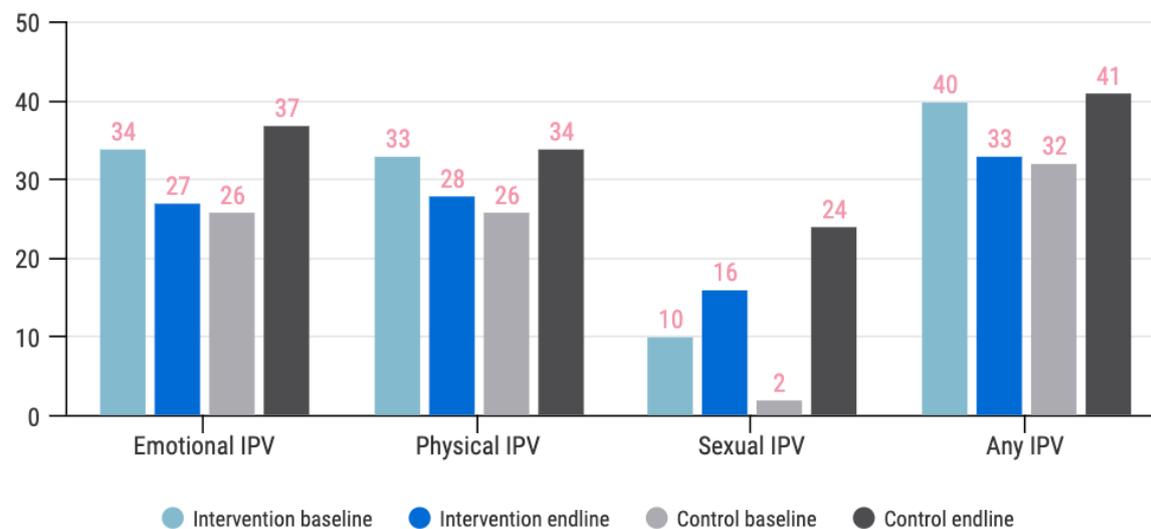


Figure 11: % of past year IPV experience among adult female congregants, disaggregated by study arm, evaluation phase, and type of IPV



The pattern of results according to age is different for male congregants. Prevalence of all forms of IPV perpetration remained approximately the same between baseline and endline for adult men in the intervention group. However, emotional, physical and any IPV perpetration reduced at endline among adult men in the comparison group (see Figure 12). Increase of IPV perpetration among adult men in the intervention group was significant for physical IPV (DID = 0,16,  $p=0,008$ ) and any IPV (DID = 0,16,  $p=0,027$ ) and almost significant for emotional IPV (DID = 0,09,  $p=0,06$ ) but not for sexual IPV (DID = 0,02,  $p=0,513$ ). Unlike for adult men, emotional, sexual and any IPV reduced for adolescent boys in the intervention group between baseline and endline; however, reductions in IPV were larger for boys in the comparison group, except for sexual IPV (see Figure 13). The findings show a significant increase in adolescent boys' perpetration of physical IPV in intervention counties (DID = 0,34,  $p=0,006$ ) but a significant reduction in their perpetration of sexual IPV (DID = -0,16,  $p=0,042$ ). There was no significant change in the intervention group in boys' perpetration of emotional IPV (DID = 0,12,  $p=0,247$ ) or any IPV overall (DID = 0,09,  $p=0,502$ ). As for adolescent girls, these findings may be due to the smaller baseline sample size of adolescent boys in the intervention and

comparison groups who had been in a relationship in the past year when compared with adult men (see Annex G).

Figure 12: % of past year IPV perpetration among adolescent male congregants, disaggregated by study arm, evaluation phase, and type of IPV

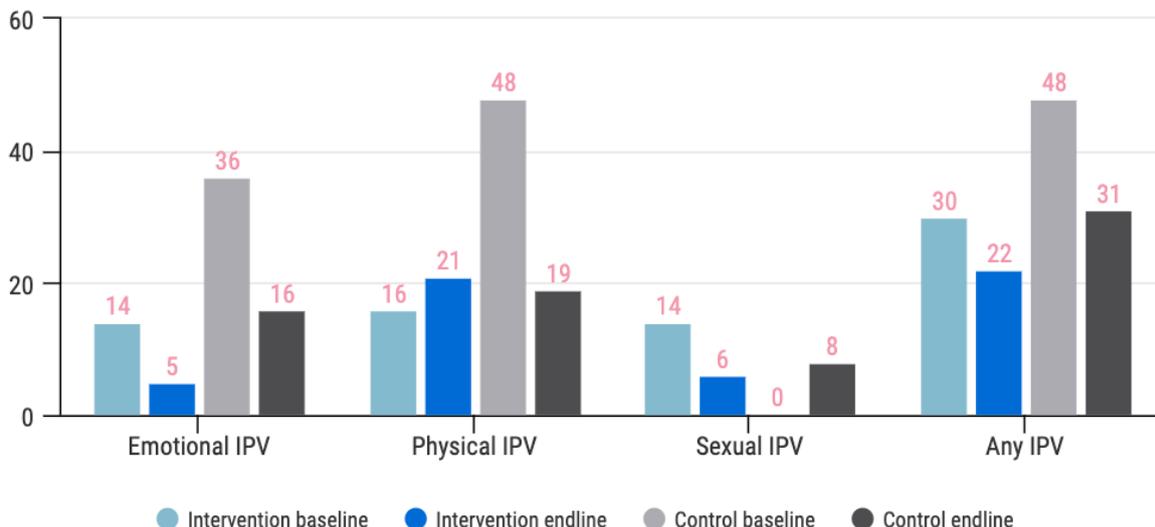
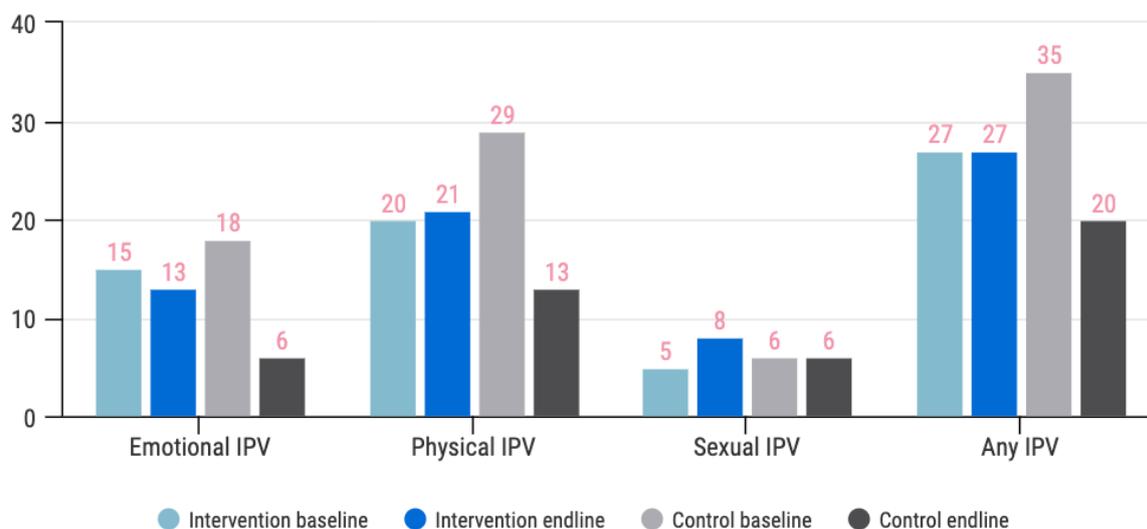


Figure 13: % of past year IPV perpetration among adult male congregants, disaggregated by study arm, evaluation phase, and type of IPV

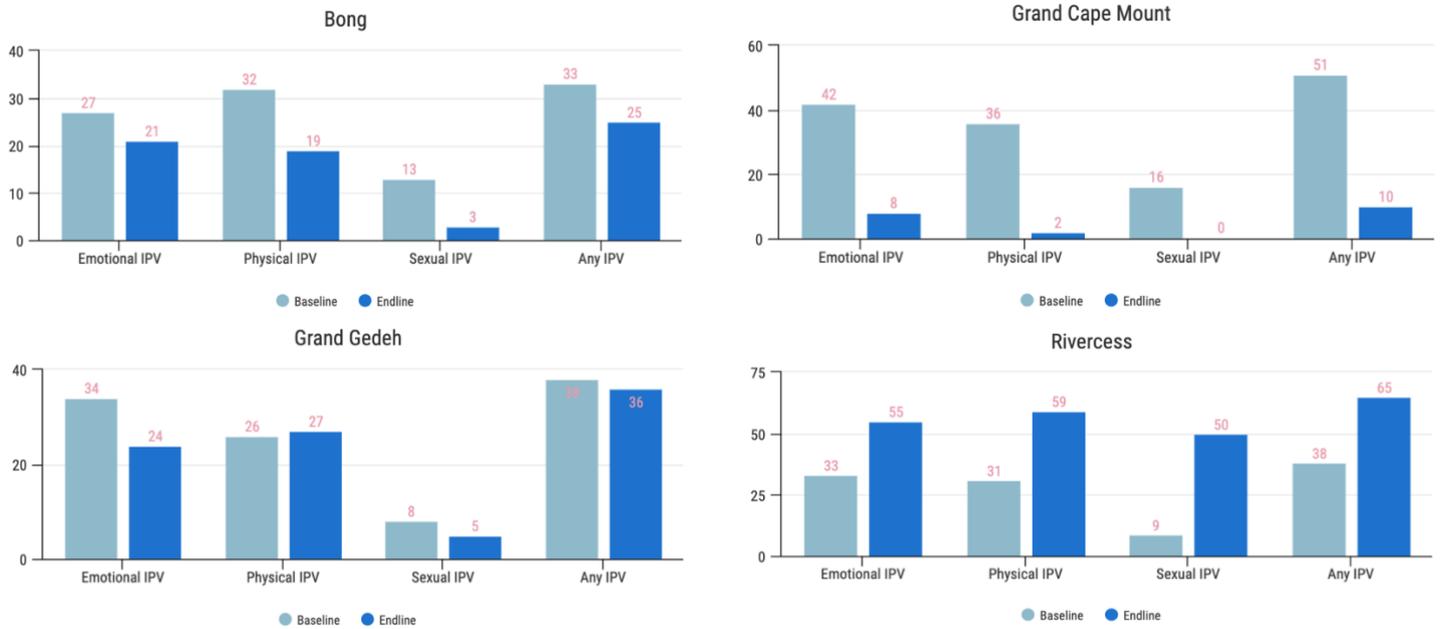


There are a number of possible explanations for why we see positive impact on female congregants’ experience of IPV and NPSV and negative impact on male congregants’ IPV perpetration. Social desirability bias may be an important factor and in research on VAWG, women’s reports of experience of violence are generally more reliable than men’s reports of perpetration. There are also a number of county-level variations in the results that shed some light on the findings.

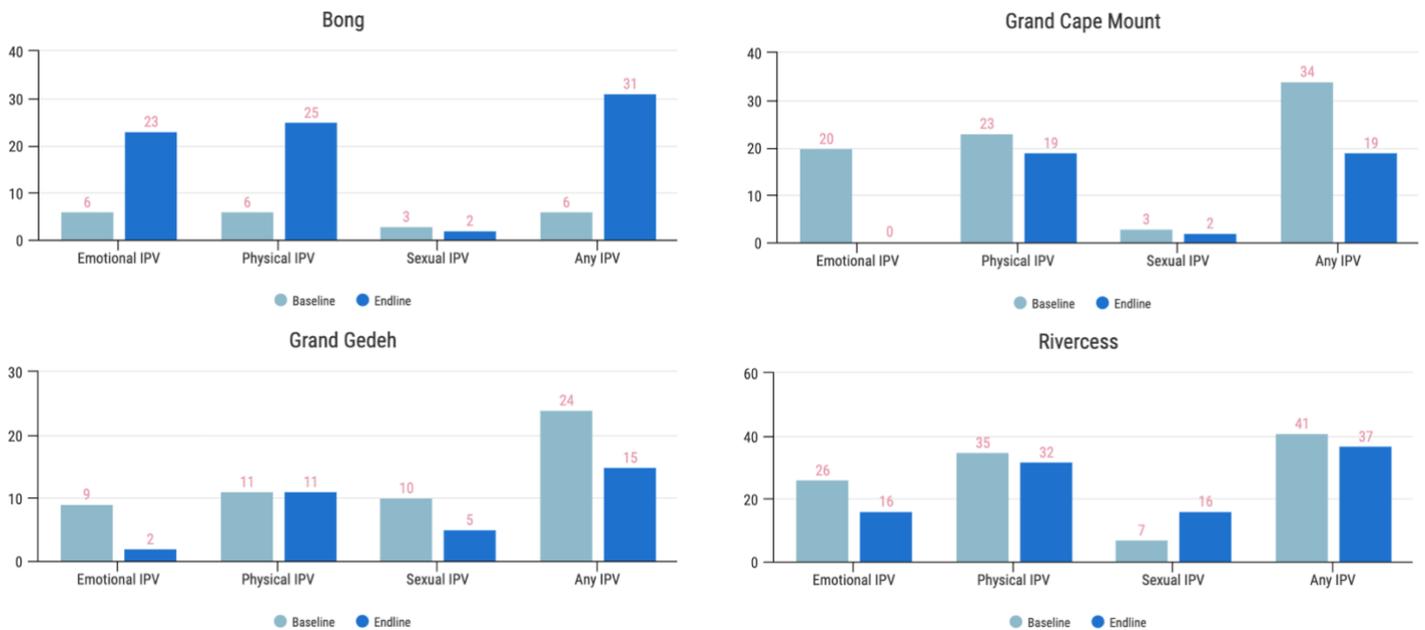
When disaggregating baseline and endline prevalence of past year IPV experience among female congregants in the intervention group by type of IPV and county, we see reductions in almost all forms of IPV among female congregants in Bong, Grand Cape Mount and Grand Gedeh counties, but an increase in all forms of IPV in Rivercess (see Figure 14). When disaggregating baseline and endline

prevalence of past year IPV perpetration among male congregants in the intervention group by type of IPV and county, we see quite different results. There is an increase in all forms of IPV perpetration in Bong county, but reduction of almost all forms of IPV perpetration in the other three counties, with the exception of sexual IPV in Rivercess where we see an increase (see Figure 15).

**Figure 14: % of female congregants' past year experience of IPV in intervention counties, disaggregated by evaluation phase, county and type of IPV**



**Figure 15: % of male congregants' past year perpetration of IPV in intervention counties, disaggregated by evaluation phase, county and type of IPV**



The findings on patterns of male perpetration of IPV in Bong could indicate that IPV has increased in this county, which would be in line with wider trends suggesting that IPV increased during the COVID-19 pandemic. However, it is important to emphasize that IPV experience reported by women in Bong reduced. Further, the evaluation found a reduction in men's IPV perpetration in the other

three intervention counties and in the comparison county, which presumably were also affected by the COVID-19 pandemic. It is possible that baseline prevalence rates in Bong were under-reported, potentially due to male respondents' social desirability bias. This explanation would certainly align with the trends observed in Figures 14 and 15 given that baseline prevalence of male perpetration of IPV in Bong was so low at baseline, but that endline rates of female congregant experience and male congregant perpetration of IPV in Bong are similar.

The findings related to violence experience and perpetration also vary by exposure to intervention activities or other faith-based activities. When examining endline prevalence of past year experience of IPV and NPSV in the intervention group, the prevalence of all forms of IPV and NPSV is significantly lower among female congregants who have participated in faith-based activities where VAWG was addressed (such as marriage preparation, retreats, counselling or community dialogues) compared with those who have not (see Table 19). Experience of physical, sexual and any IPV, and NPSV, is also lower among female congregants who have participated in other (non-faith based) community activities where VAWG was addressed. The survey data also found significant associations between hearing faith leaders speak out against VAWG in the past year and lower past year prevalence of physical and sexual IPV, and NPSV. It is interesting to note that all forms of violence are slightly more prevalent among female congregants who participate in a savings group when compared with those who don't, although this is only statistically significant for NPSV.

**Table 19: % of female congregants' experience of IPV and NPSV in intervention counties, disaggregated by exposure to intervention activities or faith-based activities, and type of violence**

	Participates in a savings group % (n)		Frequently participated in religious festivals in past year % (n)		Heard faith leaders speak out against VAWG in past year % (n)		Participated in faith-based activities where VAWG was addressed % (n)		Participated in other community activity where VAWG was addressed % (n)	
	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes
Emotional IPV	26,2 (37)	31,7 (46)	31,9 (59)	23,8 (24)	34,6 (27)	25,6 (51)	35,3 (53)	20,3** (26)	32,5 (51)	23,8 (30)
Physical IPV	26,2 (37)	33,1 (48)	33,5 (62)	22,8 (23)	37,2 (29)	24,6* (49)	38,7 (58)	18*** (23)	37,6 (59)	19,8*** (25)
Sexual IPV	13,5 (19)	18,6 (27)	20 (37)	8,9* (9)	32,1 (25)	7,5*** (15)	23,3 (35)	6,3*** (8)	26,1 (41)	4*** (5)
Any IPV	32,6 (46)	40,7 (59)	40,5 (75)	29,7 (30)	42,3 (33)	32,7 (65)	46,7 (70)	24,2*** (31)	44 (69)	27** (34)
NPSV	3,3 (7)	8,8* (15)	5,5 (14)	6,5 (8)	14,2 (15)	0,8*** (2)	9,4 (19)	0*** (0)	9,1 (20)	0,6*** (1)

\* p<0,05, \*\* p<0,01, \*\*\*p<0,001

The results for male congregants are less telling. While there is a general trend for lower perpetration among male congregants who participate in intervention and other faith-based activities, there is only one significant positive association. **Perpetration of emotional IPV is lower among male congregants who frequently participated in religious festivals in the past year (see Table 20). All types of violence perpetration are more prevalent among male congregants who participate in a savings group, although the association is only significant for any IPV.**

**Table 20: % of male congregants' perpetration of IPV and NPSV in intervention counties, disaggregated by exposure to intervention activities or faith-based activities, and type of violence**

	Participates in a savings group % (n)		Frequently participated in religious festivals in past year % (n)		Heard faith leaders speak out against VAWG in past year % (n)		Participated in faith-based activities where VAWG was addressed % (n)		Participated in other community activity where VAWG was addressed % (n)	
	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes
Emotional IPV	7,8 (10)	12,9 (18)	14 (22)	5,5* (6)	18,5 (5)	8,9 (21)	14,9 (14)	8,1 (14)	14 (14)	8,5 (14)
Physical IPV	16,4 (21)	25 (35)	23,6 (37)	17,3 (19)	25,9 (7)	20,3 (48)	17 (16)	23 (40)	19,4 (20)	22 (36)
Sexual IPV	3,9 (5)	10 (14)	8,3 (13)	5,5 (6)	0 (0)	8 (19)	7,5 (7)	6,9 (12)	6,8 (7)	7,3 (12)
Any IPV	19,5 (25)	30,7* (43)	29,9 (47)	19,1 (21)	29,6 (8)	24,5 (58)	26,6 (25)	24,7 (43)	27,2 (28)	24,4 (40)
NPSV	0,5 (1)	1,9 (3)	0,9 (2)	1,6 (2)	0 (0)	1,4 (4)	0,7 (1)	1,4 (3)	1,3 (2)	1 (2)

\* p=<0,05

At endline, survey respondents were also asked about whether they had seen picture cards (i.e., FAMA cards) in their community, and which types of violence these cards depicted. Among female congregants in the intervention group, having seen any picture card was significantly associated with lower endline prevalence of all forms of IPV in the past year (see Table 21). Having seen picture cards related to sexual violence was also significantly associated with lower prevalence of sexual IPV experience in the past year, and having seen picture cards related to physical violence was significantly associated with lower prevalence of any IPV experience.

**Table 21: % of female congregants' experience of IPV and NPSV in intervention counties, disaggregated by intervention exposure to FAMA cards and type of violence**

	Saw any picture card % (n)		Saw picture card-- Physical violence % (n)		Saw picture card-- Sexual violence % (n)		Saw picture card-- Emotional violence % (n)		Saw picture card-- Economic violence % (n)		Saw picture card - IPV % (n)	
	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes
Emotional IPV	36,2 (42)	21,7** (35)	14,3 (8)	25 (26)	28,6 (14)	18 (20)	20,7 (3)	26,7 (4)	22,2 (32)	12,5 (2)	23,1 (30)	13,3 (4)
Physical IPV	40,5 (47)	20,5*** (33)	14,3 (8)	23,1 (24)	28,6 (14)	16,2 (18)	20 (29)	20 (3)	20,8 (30)	12,5 (2)	20,8 (27)	16,7 (5)
Sexual IPV	28,5 (33)	5,6*** (9)	1,8 (1)	7,7 (8)	14,3 (7)	1,8*** (2)	6,2 (9)	0 (0)	6,3 (9)	0 (0)	6,2 (8)	3,3 (1)
Any IPV	46,6 (54)	28*** (45)	17,9 (10)	32,7* (34)	40,8 (20)	21,6* (24)	27,6 (40)	26,7 (4)	29,2 (42)	12,5 (2)	29,2 (38)	20 (6)
NPSV	7,9 (13)	2,9 (6)	0 (0)	4,7 (6)	7,1 (5)	0,7 (1)	3,3 (6)	0 (0)	2,7 (5)	5,6 (1)	3,1 (5)	2,3 (1)

\* p=<0,05, \*\* p=<0,01, \*\*\* p=<0,001

While seeing any picture card was not significantly associated with male perpetration of any form of violence, male congregants in the intervention group were significantly less likely to have reported several types of past year IPV perpetration at endline when having seen picture cards about physical, emotional or any IPV (see Table 22). Having seen picture cards related to physical violence was significantly associated with lower perpetration of emotional and any IPV in the past year; having seen picture cards related to emotional violence was significantly associated with lower perpetration of emotional, physical and any IPV; and having seen picture cards about IPV was significantly associated with lower perpetration of emotional and physical IPV.

**Table 22: % of male congregants' perpetration of IPV and NPSV in intervention counties, disaggregated by intervention exposure to FAMA cards and type of violence**

	Saw any picture card % (n)		Saw picture card-- Physical violence % (n)		Saw picture card-- Sexual violence % (n)		Saw picture card-- Emotional violence % (n)		Saw picture card-- Economic violence % (n)		Saw picture card - IPV % (n)	
	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes
Emotional IPV	12 (6)	10,2 (22)	21,2 (11)	6,8** (11)	6,1 (2)	11 (20)	13,1 (19)	4,3* (3)	10,3 (19)	9,7 (3)	15,3 (21)	1,3*** (1)
Physical IPV	12 (6)	23,3 (50)	26,9 (14)	22,1 (36)	18,2 (6)	24,2 (44)	30,3 (44)	8,6*** (6)	25 (46)	12,9 (4)	27,7 (38)	15,4* (12)
Sexual IPV	2 (1)	8,4 (18)	11,5 (6)	7,4 (12)	6,1 (2)	8,8 (16)	9 (13)	7,1 (5)	9,2 (17)	3,2 (1)	8,8 (12)	7,7 (6)
Any IPV	20 (10)	27 (58)	34,6 (18)	24,5* (40)	21,2 (7)	28 (51)	34,5 (50)	11,4*** (8)	28,8 (53)	16,1 (5)	31,4 (43)	19,2 (15)
NPSV	1,5 (1)	1,1 (3)	0 (0)	1,5 (3)	2,3 (1)	0,8 (2)	1,5 (3)	0 (0)	1,2 (3)	0 (0)	1,6 (3)	0 (0)

\* p=<0,05, \*\* p=<0,01, \*\*\*p=<0,001

The findings related to intervention exposure suggest that certain elements of the intervention may be more impactful on violence than others, particularly direct participation in faith-based and other activities where VAWG is addressed, or having heard faith leaders speak out against VAWG, and having seen (and potentially discussed) FAMA cards, particularly those depicting physical or emotional violence, or IPV. The finding suggesting that experience and perpetration of violence are slightly higher among female and male congregants participating in savings groups is curious. It is possible that women's participation in economic activities could lead to conflict in couples if men feel disenfranchised from their perceived economic role as provider. This is in line with the wider global evidence of the pathways to change between economic activities and IPV, which suggests that IPV can increase when economic interventions empower women economically but without sufficiently engaging masculinity and men's possible backlash (Buller et al., 2018). It is unusual, however, that savings group participation is associated with women's experience of NPSV rather than IPV.

These results should be read with caution given that a significant association between IPV experience or perpetration and exposure to intervention activities does not necessarily indicate causality or intervention impact. It is possible that women's experience of violence, for example, preceded participation in savings groups. This hypothesis is supported by the qualitative data. Several participants in the qualitative components of the evaluation described the programme's provision of assistance for women, including survivors of violence, to join savings groups, particularly those who had suffered negative economic consequences from the Covid-19 pandemic.

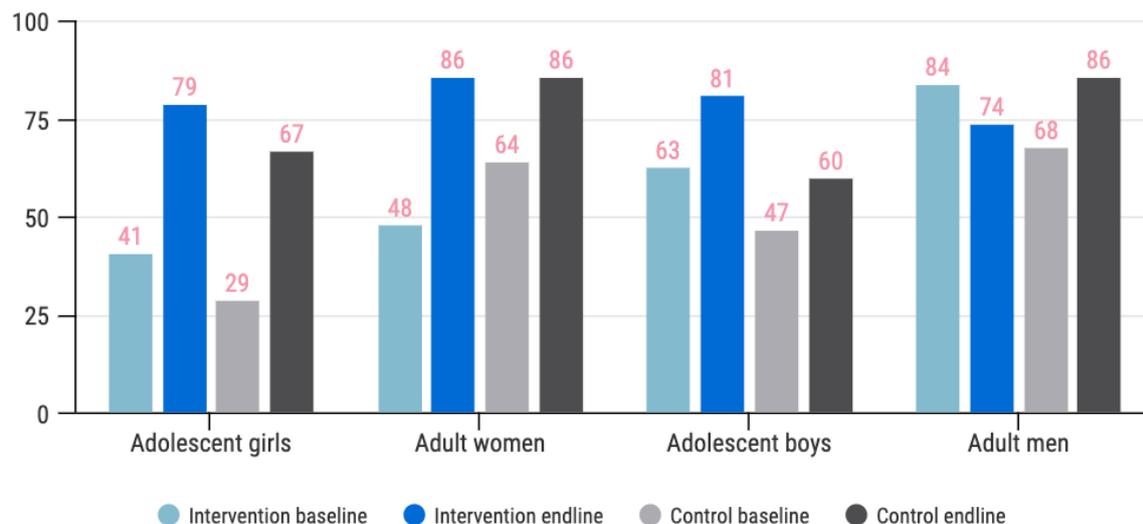
*...as a survivor to be a member of the savings group, you got to have some sort of strain of income, you got to have some income, you got to have some money...during the last years of the project we did provide some kind of support to survivors so they can integrate (into) the savings group. Like I said, not everybody was able to do that. (Staff 4, November 2022)*

Nevertheless, any future implementation of the intervention should ensure that risks associated with savings groups are analysed and that any potential backlash violence from men is both monitored and intentionally targeted in programming.

#### *Knowledge of how to access VAWG services and support*

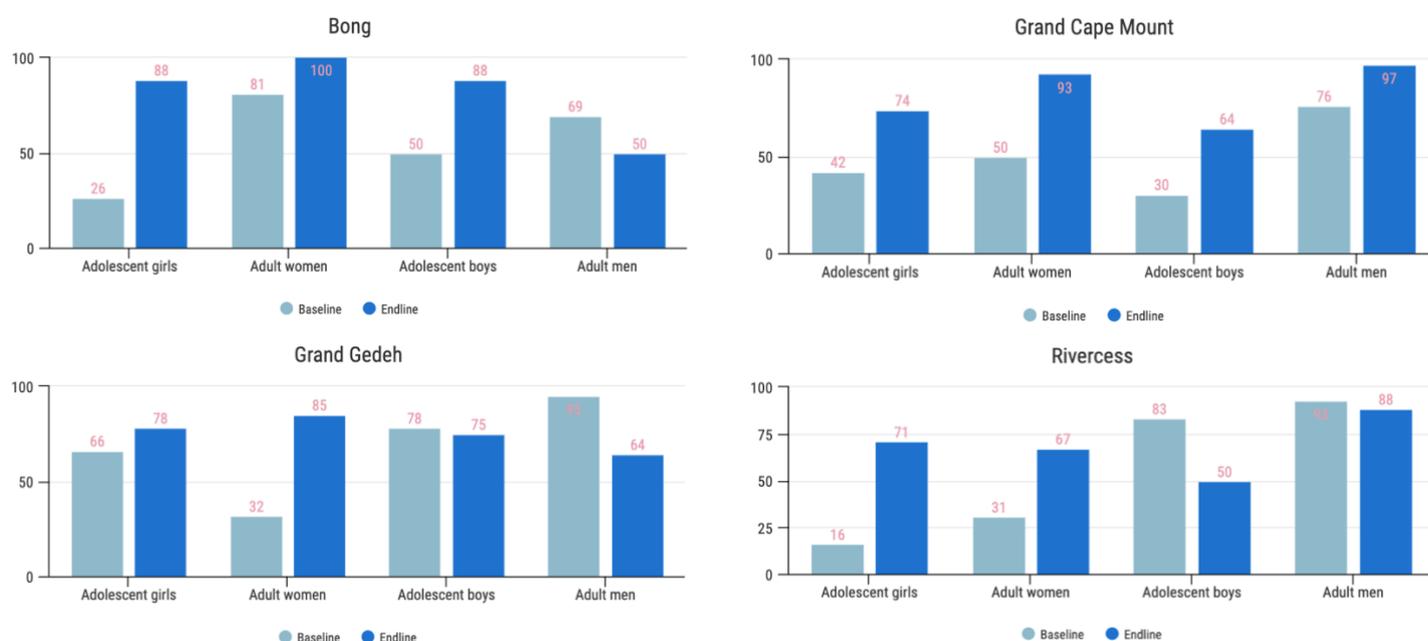
Knowledge of VAWG services and support has increased in the intervention group between baseline and endline; however, knowledge has also increased in the comparison group (see Figure 16). There was no intervention effect observed for adolescent girls (DID = 0,006,  $p=0,933$ ) or adolescent boys (DID = 0,05,  $p=0,511$ ); however, a significant intervention effect was observed for adult women (DID = 0,15,  $p=0,007$ ) and adult men (DID = -0,29,  $p=0,000$ ), although for men this effect was negative (a reduction in knowledge of VAWG services in the intervention group with an increase in the comparison group). A positive intervention effect observed only for adult women may suggest that awareness raising activities related to VAWG services were successful in reaching women but not men or adolescents.

**Figure 16: % of congregants reporting that they know of any services/support for a woman or girl who has experienced violence, disaggregated by study arm, evaluation phase and gender and age of congregants**



The results for knowledge about VAWG services differ across the counties. While an increase in knowledge was observed among adolescent girls and adult women in all four intervention counties (see Figure 17), the results were more varied for adolescent boys and adult men. Knowledge increased among adolescent boys in Bong and Grand Cape Mount, but reduced slightly in Grand Gedeh and to a larger extent in Rivercess. Among adult men, knowledge increased in Grand Cape Mount, but reduced in the other three counties.

**Figure 17: % of congregants in intervention counties reporting that they know of any services/support for a woman or girl who has experienced violence, disaggregated by evaluation phase, county and congregant gender and age group**



Knowledge of VAWG services and support increases according to congregants' exposure to intervention activities. Among congregants in the intervention group at endline, knowledge of services and support was significantly higher among congregants who had heard faith leaders speak out against VAWG and who had participated in faith activities where VAWG was addressed (see Table 23). This effect was observed for all gender and age groups, with the exception of adolescent boys who had heard faith leaders speak out against VAWG.

**Table 23: Endline congregant knowledge of services in the intervention group according to participation in faith-based activities, disaggregated by gender and age group**

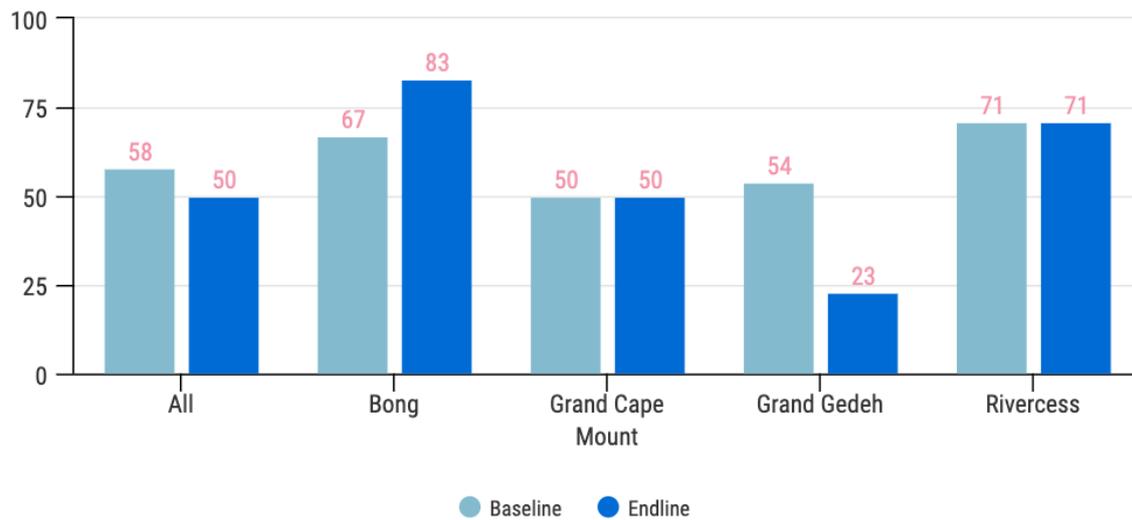
	% Heard faith leaders speak out against VAWG			% Participated in faith activities where VAWG was addressed		
	Yes	No	p value	Yes	No	p value
Adolescent girls	87,5	54,2	0,0001	93,3	73,3	0,006
Adult women	91,4	47,7	0,0001	95,1	74,4	0,0001
Adolescent boys	95,5	64,8	0,186	97,4	60	0,0001
Adult men	82,6	68,8	0,0001	88,7	42,2	0,0001

#### 4.1.2 Outcome 1

Outcome 1 is that faith leaders (i.e., pastors and imams) from churches and mosques increase their work to speak out against VAWG and to change cultural norms in their communities. The outcome has three indicators that measure: faith leaders speaking out publicly against VAWG in the past year; congregants having heard faith leaders publicly speaking out against VAWG in the past year; and female congregants reporting that faith leaders are actively working to end VAWG.

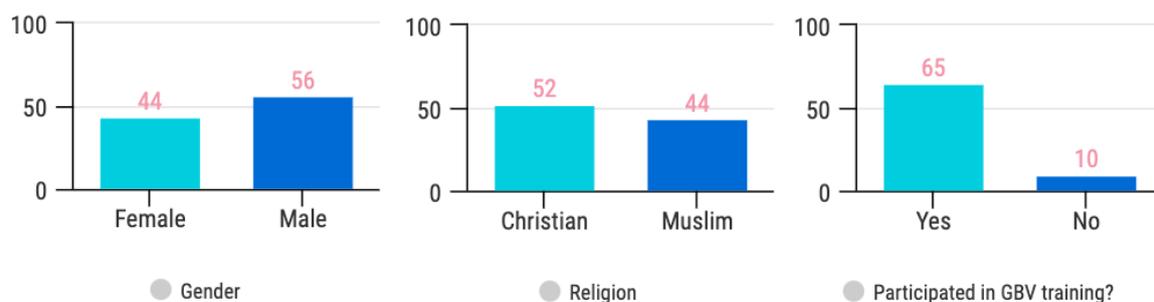
The proportion of faith leaders often speaking publicly about VAWG in the past year decreased slightly overall from 58% to 50%, although there were wide variations across the counties (see Figure 18). Often speaking publicly stayed the same in Grand Cape Mount and Rivercess, increased in Bong from 67% to 83%, and decreased by approximately 30% in Grand Gedeh.

**Figure 18: % of faith leaders in intervention counties reporting that they have OFTEN spoken publicly on the issue of VAWG in the past year, disaggregated by evaluation phase and county**



At endline, faith leaders in the intervention counties were slightly more likely to have spoken out often if they were male or Christian, and were six times as likely to speak out if they had participated in GBV training in the past year (see Figure 19).

**Figure 19: Endline % of faith leaders in intervention counties reporting that they have OFTEN spoken publicly on the issue of VAWG in the past year, disaggregated by gender, religion and participation in GBV training in the past year**



Despite the proportion of faith leaders often speaking publicly against VAWG in the past year decreasing slightly, there was an increase in congregants reporting that they had heard faith leaders speaking publicly and this was true for all congregant groups (see Figure 20). When disaggregating the data by congregant gender and county, female congregants hearing faith leaders speak publicly increased in Bong and Grand Cape Mount, increased only slightly in Grand Gedeh and stayed the same in Rivercess (see Figure 21). Male congregants hearing faith leaders speak publicly increased in all the intervention counties, albeit only slightly in Grand Gedeh.

Figure 20: % of congregants in intervention counties reporting that they have heard faith leaders speak out publicly against VAWG in the past year, disaggregated by evaluation phase, and gender and age of congregants

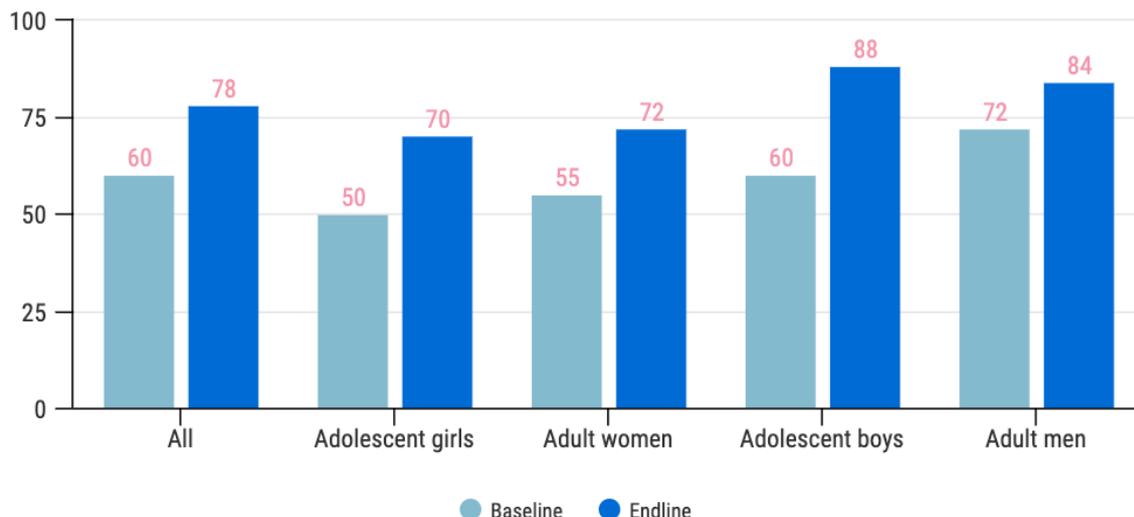
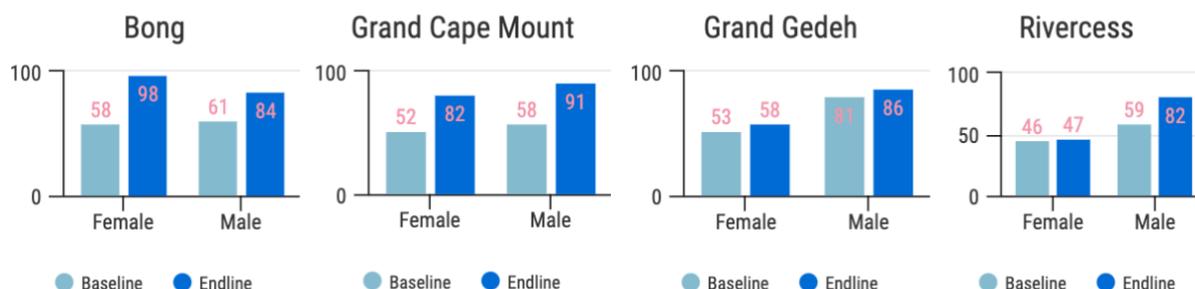
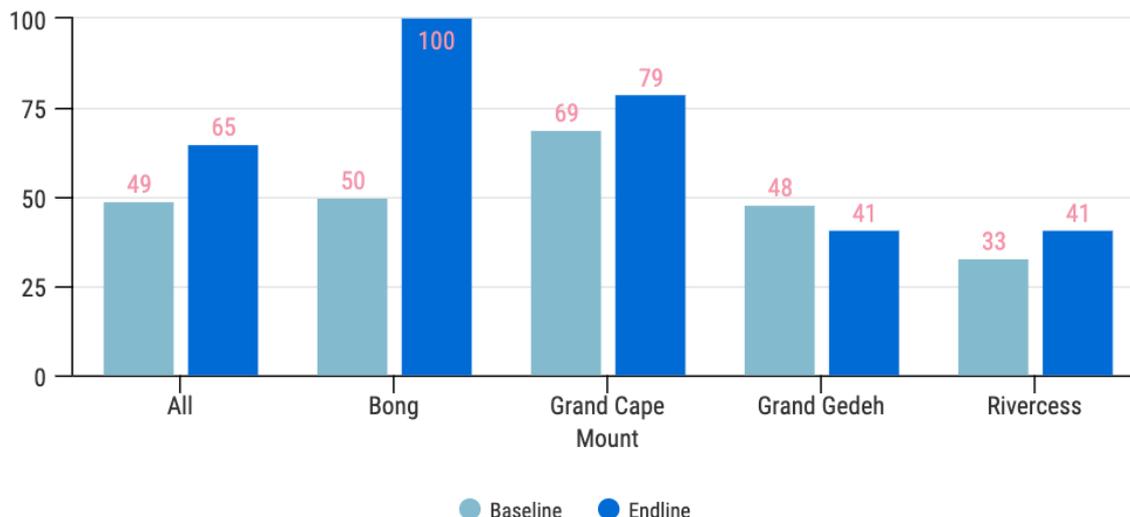


Figure 21: % of congregants in intervention counties reporting that they have heard faith leaders speak out publicly against VAWG in the past year, disaggregated by county, evaluation phase, and gender of congregants



In intervention counties, there was an increase in female congregants who think that faith leaders in their community are actively working to stop VAWG, from 52% at baseline to 61% at endline for adolescent girls, and from 47% to 67% for adult women. The increase observed is mainly driven from perceptions in Bong, with double the proportion of female congregants at baseline reporting that faith leaders were actively working to stop VAWG at endline (see Figure 22). There was only a small increase in female congregants reporting active work in Grand Cape Mount and Rivercess and a small decrease in Grand Gedeh.

Figure 22: % of female congregants in intervention counties who think that faith leaders in their community are actively working to stop VAWG, disaggregated by evaluation phase and county



#### 4.1.3 Outcome 2

Outcome 2 is that youth leaders of Christian and Muslim youth groups and school leaders increasingly speak out against VAWG and provide support to survivors. The outcome has three indicators, one each for faith youth group leaders, faith youth group members and school leaders, which measure the extent to which leaders/group members have spoken out and taken action against VAWG in the past year.

The proportion of youth faith leaders (Figure 23), school leaders (Figure 24) and youth group members (Figure 25) reporting that they often spoke publicly about VAWG in the past year increased at endline in all counties, except school leaders in Rivercess, 13% of whom reported doing so at endline compared with 22% at baseline (Figure 24).

Figure 23: % of youth faith leaders in intervention counties reporting that they have OFTEN spoken publicly on the issue of VAWG in the past year, disaggregated by evaluation phase and county



Figure 24: % of school leaders in intervention counties reporting that they have OFTEN spoken publicly on the issue of VAWG in the past year, disaggregated by evaluation phase and county

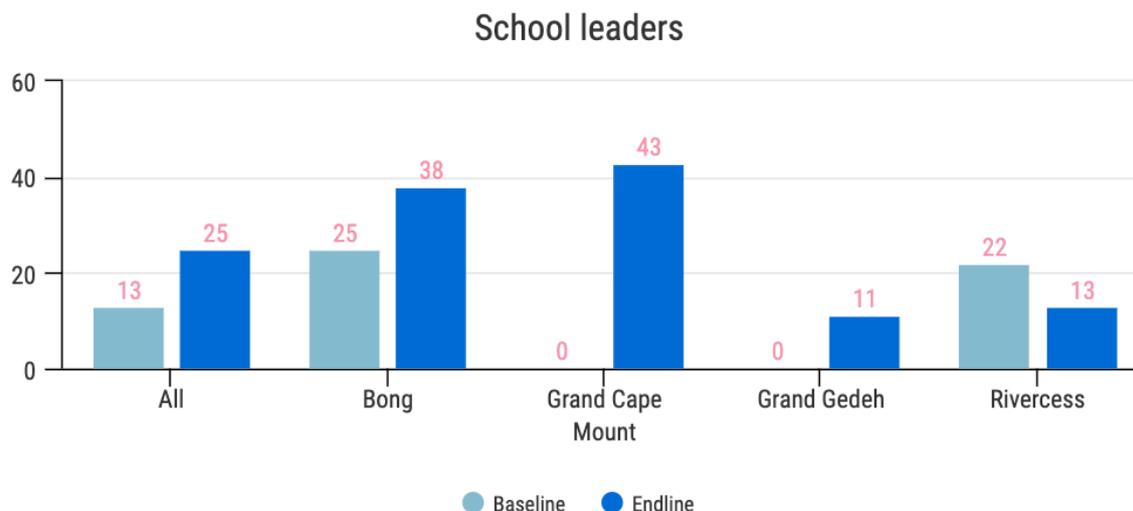
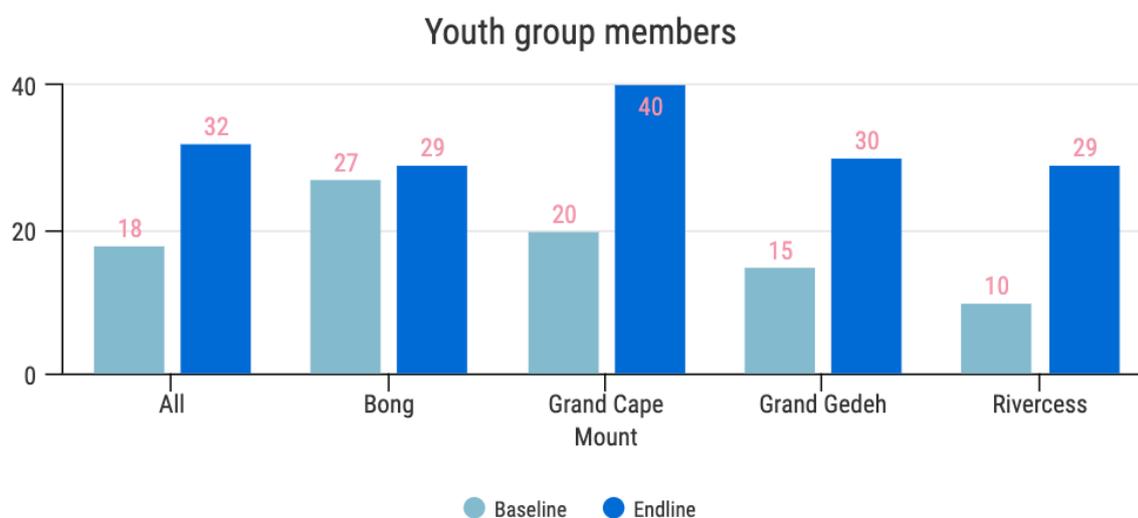
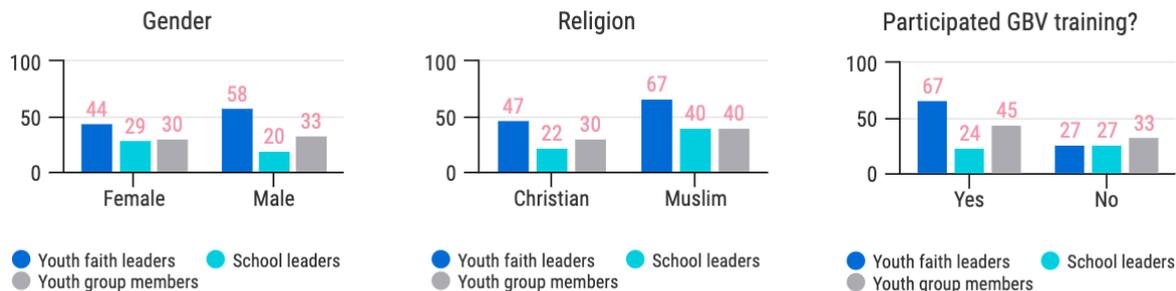


Figure 25: % of youth group members in intervention counties reporting that they have OFTEN spoken publicly on the issue of VAWG in the past year, disaggregated by evaluation phase and county



These findings varied according to gender, religious affiliation and whether respondents had participated in GBV training in the past year. At endline, speaking publicly was more common for male and Muslim youth faith leaders and youth group members, and female and Muslim school leaders (see Figure 26). Publicly speaking out was also more common among youth faith leaders and youth group members who had participated in GBV training in the past year, while very little difference according to GBV training was found for school leaders.

Figure 26: Endline % of youth faith leaders, school leaders and youth group members in intervention counties reporting that they have OFTEN spoken publicly on the issue of VAWG in the past year, disaggregated by gender, religion and participation in GBV training in the past year

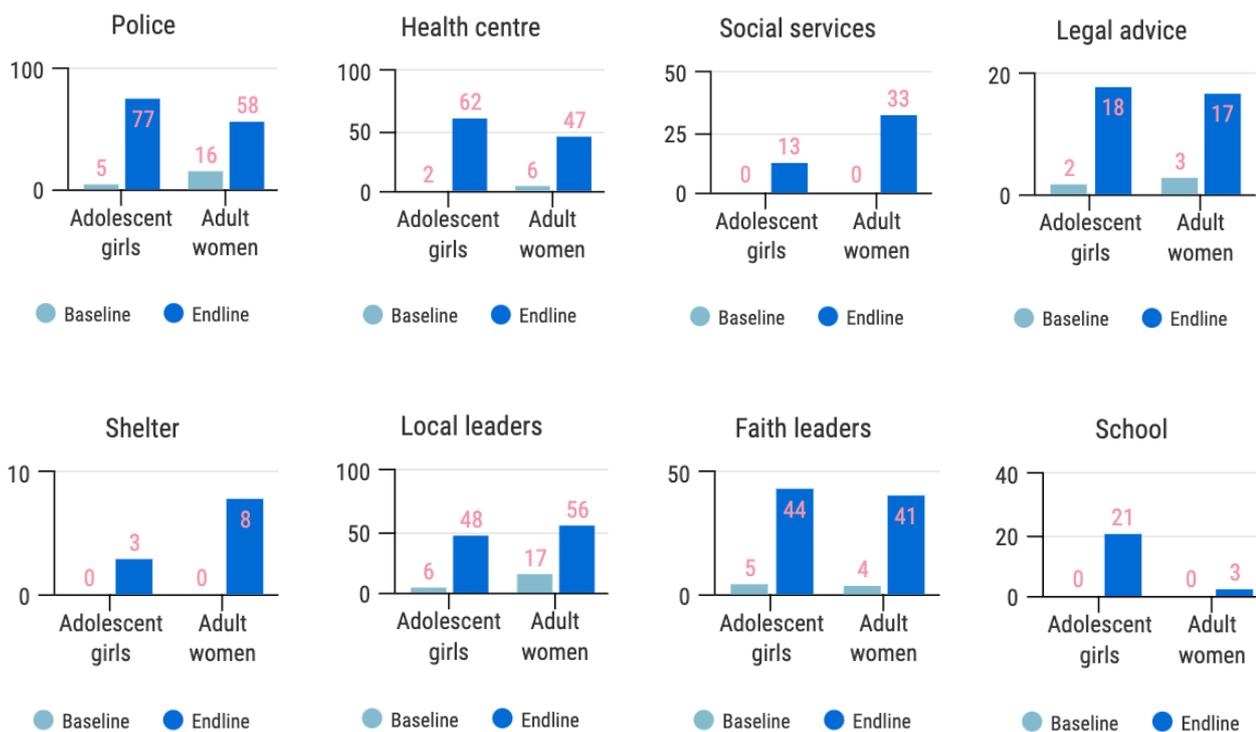


#### 4.1.4 Outcome 3

Outcome 3 is that Muslim and Christian faith communities increase direct support for survivors of violence and advocacy for their rights and access to services. The outcome is measured through three indicators related to female congregants’ knowledge of different types of VAWG services available from faith leaders, female congregants satisfaction with VAWG services provided by faith leaders, and evidence of VAWG referrals made from faith leaders.

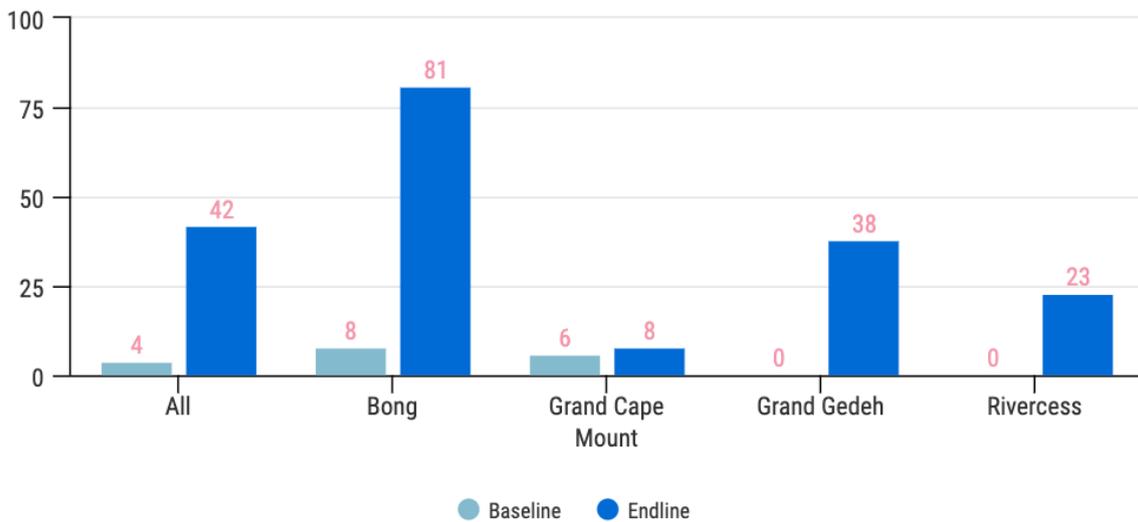
Adolescent girls’ and adult women’s knowledge of VAWG services increased at endline for all types of services, including those provided by faith leaders. However, increases in knowledge were smaller for some types of services, including social services, legal advice, shelters and services provided by schools (see Figure 27), although knowledge of school services was higher among adolescent girls.

Figure 27: % of female congregants reporting knowledge of VAWG services, disaggregated by evaluation phase, age group and type of service



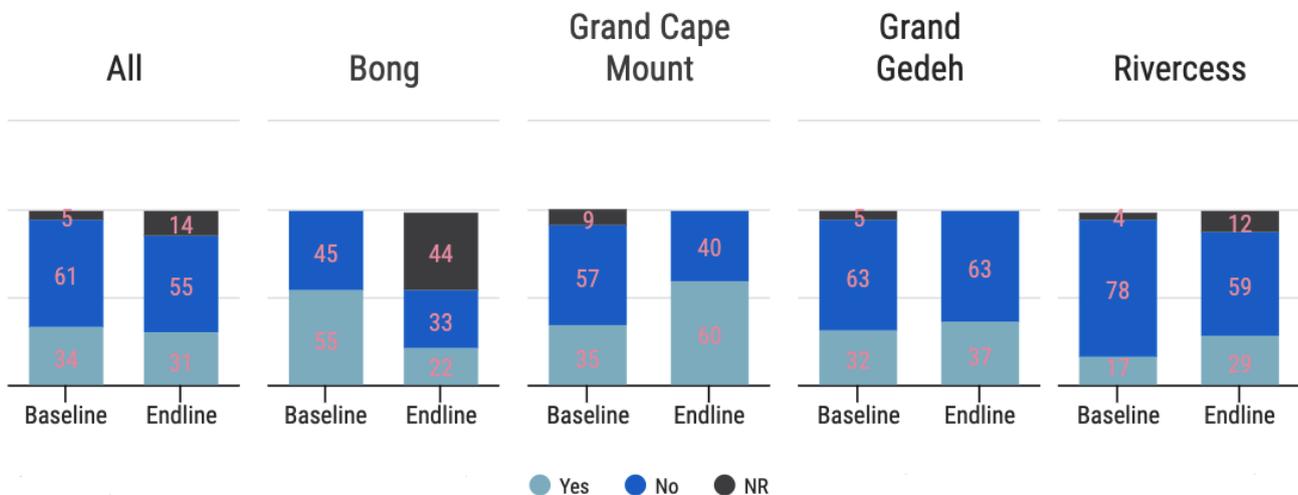
The increase in female congregants’ knowledge of services provided by faith leaders is largely driven by changes observed in Bong County and, to a lesser degree, Grand Gedeh county, with no change in knowledge observed in Grand Cape Mount and a moderate increase in knowledge in Rivercess (see Figure 28).

Figure 28: % of female congregants in intervention counties reporting knowledge of VAWG services available by faith leaders, disaggregated by evaluation phase and county



Those female congregants who reported having experienced IPV in the past year were asked about whether they sought help from a faith leader. Overall, there was a small decrease in female congregant survivors seeking help from a faith leader at endline, and a small increase in those stating that the question was not relevant (see Figure 29). However, there are differences in female congregants’ reports across the counties. While seeking help from a faith leader increased in Grand Cape Mount, Grand Gedeh and Rivercess, it decreases substantially in Bong County.

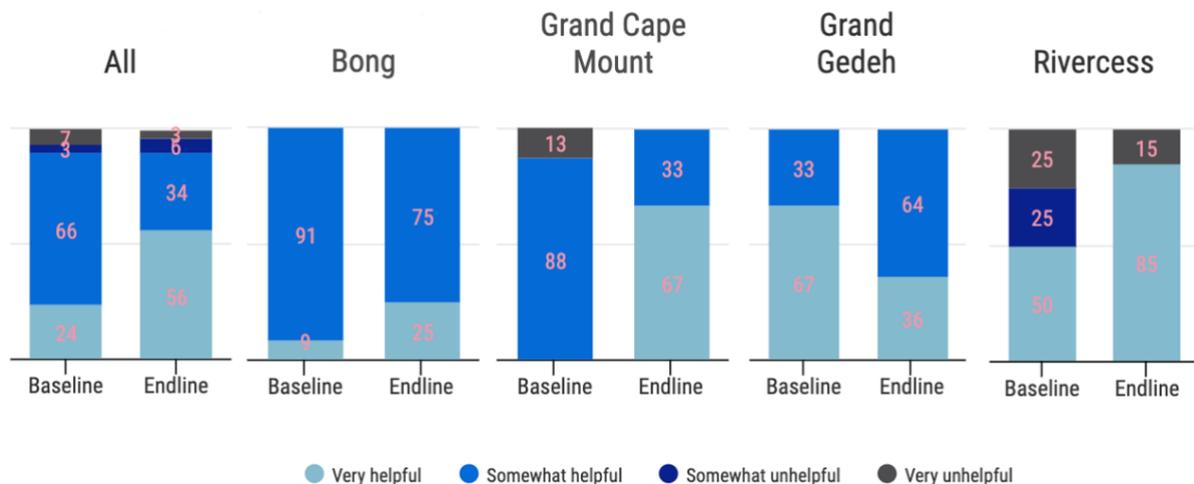
Figure 29: % of female congregants reporting past year experience of IPV who sought help from a faith leader, disaggregated by evaluation phase and county



Those female congregant survivors who sought support from a faith leader were also asked about how helpful this support was. Overall, there was a large increase at endline in perceptions that

support was very helpful, although, once again, the results varied according to county (see Figure 30). Perceptions that support was very helpful increased slightly in Bong, and increased much more so in Grand Cape Mount and Rivercess, with a reduction in perceptions of very helpful support observed in Grand Gedeh.

Figure 30: % of female congregants reporting past year experience of IPV who sought support from a faith leader and felt this was helpful, disaggregated by evaluation phase and county



The project results framework also includes an indicator (#3.2) that measures cases registered by GBV support services that show referral from trained faith leaders and lay leaders. At baseline, there was no data recorded for this indicator given that these data were not yet available to the programme and the evaluation team. Monitoring data obtained from annual MEAL reports suggests that the number of cases increased in years one and two of the programme. According to the continuous monthly data entry on registry of referral cases, in Year 1, 28 faith leaders provided accompaniment and support to 36 women and girl survivors (21 in Grand Cape Mount and seven in Rivercess), including support to access medical, court, police and shelter services (Year 1 Annual Report, p.10). In Year 2, 120 women and girls had their cases referred by faith leaders, lay leaders, savings and education group members and their leaders (Year 2 Annual Report, p.11). In Year 3, 60 women and girls were provided with support (emergency shelter, school support, accompaniment, dignity kits) (Year 3 Annual Report, p.10), and in Year 4 30 women were provided with these types of support (Year 4 Progress Report, p.12).

#### 4.1.5 Outcome 4

Outcome 4 is that Episcopal Relief & Development and ECLRD are institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adapting existing interventions to EAWG with a focus on the most vulnerable women and girls. The outcome is measured through four indicators that measure the existence of a new system to improve the efficiency and accountability of the organization, the number of ECLRD staff using the new digitalized data collection and management system, the number of female faith leaders using participatory qualitative tools with privacy protocols in place for evidence gathering on VAWG and the number of faith leaders who are able to use safe communication methods and privacy protocols using the tools available to them.

The MEAL reports reflect little on this Outcome and its indicators. Outcome 4 was only added in Year 2, after COVID-19 affected the intervention and the Spotlight Grant was received, so it was not part of the outcomes and indicators measures in the Year 1 Annual Report. With the Year 2, Year 3 and Year 4 Annual Reports, Outcome 4 has been added to the Results Framework, but only Indicator 4.1

has been inserted. The Year 4 Annual Report declares Outcome 4 as fully achieved, citing the improvement of ECLRD financial and administrative practices as a result of better internet, solar-powered generators, accounting software, e-money transfer platforms, the digitalization of MEAL data entry, as well the strengthening of the relationships between staff members and their individual ability to handle crises (Year 4 Annual Report, p.13).

The qualitative data collection as part of the endline evaluation confirmed the implementation and value of several systems to ensure project management and financial systems. Staff at national level believed that QuickBooks will minimise errors, allows faster data entry and easier access of financial records. They also reflected on the purchase, training and implementation of CommCare software, to enable paperless reporting and monitoring of activities by allowing in-time data capture/collection on mobile devices, thus minimizing data errors. Both staff and selected volunteers<sup>19</sup> were trained on its use and national-level staff are positive that it will result in more timely and better quality reporting (for more on this, see the discussion in Section 4.5, under Evaluation Question 9).

While the endline data collection did not gather data on the number of faith leaders who report using participatory tools with privacy protocols in evidence gathering (Indicator 4.3), nor on the number of faith leaders able to use safe communication methods when using virtual tools (Indicator 4.4), the qualitative fieldwork did ask some questions on this during the focus groups with faith leaders. Participants reflected on the systems they have used to report cases of VAWG. Faith leaders reported having been trained to use the digital CommCare system on the tablets provided by ECLRD. They report VAWG cases, as well as any activities implemented as part of the ECLRD project, using this system: *“Through this phone (tablet) we get the form too... (For) every awareness you create, (for) anything in your community (you do, you complete the form on your tablet and) and send it”* (Female faith leader FGD, Rivercess, October 2022). Staff explained that, once the activities have been logged, county and national-level staff can review it. In cases where a VAWG case is logged, they can also arrange for the appropriate actors to respond: *“(Once I see it on the system) I will call legal people who are around that we are partnering with to handle the issue quickly”* (Staff 1, November 2022). But not all volunteers have access to the digital system. For example, in Grand Cape Mount, the Savings Groups Members explained that they keep notes of the community activities they conducted on a piece of paper, which they then share with the ECLRD county office. Only faith leaders who serve as District Coordinators on the Faith Leaders Coalition in each of the project counties, were trained. They collected the reports and data from the various project structures (e.g. Savings with Education networks, school-based GBV committees) and then enter it into the system.

Volunteers appear to have been trained on the importance of confidentiality. Phones are password-protected and they have been trained not to discuss cases with anyone outside of the ECLRD team. Those keeping paper records do not include any names on their records.

#### 4.1.6 Outputs

There are ten outputs identified in the Results Chain. With one of these outputs (Output 4.1) no specific targets are included, while with a number of outputs (Output 3.2; 3.3; 4.2) the annual reporting did not report on whether (all) targets were met, stating that the needed data will be collected at endline evaluation. The outputs linked to Outcome 4 (Output 4.1 and 4.2) were not part of Year 1 or Year 2 reporting.

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<sup>19</sup> ‘Volunteers’ are individuals voluntarily involved in implementing of project activities at community-level, e.g. faith leaders, youth leaders, community leaders, and community members.

During Year 1, a number of the targeted results were not achieved, as training of leaders and community members were still on-going, and there were therefore not yet results forthcoming. For example, the targeted number of dialogues conducted by leaders were not reached, as the training of these leaders only started in the second half of the year. Nevertheless, all outputs were classified as 'on track to achieve', with Episcopal Relief & Development and ECLRD confident that the required targets will be met in the following years.

At the start of Year 2 the COVID-19 pandemic broke out. It is therefore remarkable that, where specific target numbers were set and measured in the MEAL reports, these were not met in only two instances: 184 faith leaders reported using the Faith Leader GBV Toolkit, instead of the targeted 237; and 62 faith institutions were involved in Speak Out events, instead of the targeted 75 institutions. With all of the other measured targets, Year 2 exceeded expectations. Arguably the most striking is that, despite a year of lockdowns and movement restrictions, faith leaders reported sharing information with 7421 community members on GBV support services, with the original target being only 1000 (Output 3.1). This Output was also outperformed in Year 3 and Year 4 as well. In Year 3, the target was 2600 community members, but 12 958 were reached; in Year 4 the target was 2600, but 19 981 community members were reached during Year 4.

The outputs linked to Outcome 4 (Output 4.1 and 4.2) were not part of Year 1 or Year 2 reporting, as Outcome 4 was only added once the intervention received a Spotlight Grant. Output 4.1 was addressed in Year 4, with the installation of and training on new digitalized accounting and data collection and management systems. The endline survey research did not gather any data on Output 4.2 (the number of faith leaders who report using participatory tools with privacy protocols in evidence gathering; the number of faith leaders able to use safe communication methods when using virtual tools). However, in the qualitative endline fieldwork, some staff and volunteers did comment on the new MEAL data collection and management systems.

Only one Output that was linked to a specific target and measured in the MEAL reporting showed a fairly consistent inability to reach the required targets. Output 1.2 specifies that a set number faith institutions (75) should be involved in Speak Out events in Rivercess and Cape Mount Counties. While the targeted goal was exceeded in Year 1 (91 faith institutions instead of the targeted 75), Year 2 included 62 faith institutions and Year 3 had 34 institutions. However, the short-fall in Year 2 and Year 3 on the targeted number of faith institutions can (at least partly) be explained by the COVID-19 pandemic that started during Year 2 and which limited group meetings. In Year 4, 68 institutions were engaged.

## **EQ2. What is the fitness of the project design and its implementation processes and gaps?**

All staff members who took part in the research felt that the project design and implementation was appropriate to the context. The multisectoral engagement of the project was highlighted as a key strength of the design and implementation, in recognition of the need for multisectoral response in order to end VAWG and assist survivors. Therefore, the engagement of national government representatives, religious leaders, teachers, community members, etc. was identified as very appropriate. For example, the National Faith Leaders Advisory Coalition (NFLAC) was critical for the design of the Faith Leader GBV Toolkit, as well as FAMA cards. At the same time, it is also challenging for staff members, who have to constantly be monitoring and motivating all the different people and groups involved in the implementation:

*The difficulty was that you are going all out you have to meet a target; you have to make sure that the people are aware or they are doing something related to what you want to do so you have to make sure too all of these groups have connection. (Staff 2, November 2022)*

MEAL documentation also highlighted the collaborative approach of the project, in both project design and implementation, as a major strength. The project was designed to require and facilitate collaboration with stakeholders, faith leaders, youth leaders, women's groups, youth groups, and community members. This collaboration was critical both for the implementation of the project (these actors become volunteers who trained others, disseminated information and influenced others), but was also at the heart of project design, which calls for multi-sectoral engagement. During the project period, ECLRD constantly and intentionally worked on building and strengthening their collaborations. Episcopal Relief & Development and ECLRD staff received training on stakeholder mapping and engagement from Humentum's Project Management for Development Professionals course. This not only led to a better understanding of how to engage stakeholders so that they help project progress and effectiveness, but also helped the project team realise they were engaging certain stakeholders more than others, leading to missed collaboration opportunities. This led to more frequent consultations and collaborations with these groups and the creation of bespoke stakeholder engagement strategies (Year 3 Annual Report, p.32).

The project's ability to develop collaborative partnerships that assist the achievement of project goals was emphasised in the interviews with project partners at county level. All project partners (which included both state and civil society actors) were extremely positive about their partnership with ECLRD and offered various examples of how they worked together to address VAWG and help survivors. For example:

*ECLRD is another partner that is very close to the work we do. It provides psycho-social counselling, temporary sheltering, it provides mentoring as well. And a lot of useful programs, (for example), they had established SGBV Clubs (school-based GBV committees) in the various schools. So we all work closely together. ECLRD is one of the partners that we really rely on. (Partner 2, male, Rivercess, October 2022)*

In the interviews it was noticeable that these partners really do rely on ECLRD a great deal: "This work of (ECLRD) is very important" (Partner 4, male, Bong, November 2022); "ECLRD has been very helpful to my ministry" (Partner 1, male, Grand Cape Mount, October 2022); "I have been working with ECLRD for the past four years now and when there's an issue, I call on ECLRD, they give assistance" (Partner 2, male, Grand Cape Mount, October 2022). Partners expressed concern that the project is coming to an end and worried especially about what would happen to survivors should ECLRD stop operating. Therefore, it appears that while ECLRD has been able to encourage and facilitate greater activism and cooperation amongst the stakeholders involved in EAWG, these stakeholders do not believe they have the ability or resources to provide (all) the services that ECLRD does. This highlights the tension between, on the one hand, creating working partnerships, versus, on the other hand, creating dependency. Have partners at county level, including state actors, become too dependent on ECLRD during the project period? This does not refer only to economic dependency (although this is of course a component), but also dependency on the drive and impetus that ECLRD is lending towards the cause of addressing GBV at county-level. At the same time, with all four counties facing extreme resourcing challenges, it has to be asked whether such dependency can at all be avoided.

Project implementation also adapted to enable the inclusion of more multisector actors and to strengthen their abilities to address VAWG and help survivors. For example, ECLRD partnered with the YMCA in Grand Gedeh in working closely with Youth Faith Leader Coalitions. This led to the creation of safe discussion spaces for youth and by youth, on harmful situations and how they can be resolved. The training of women as part of SWE groups has not only led to the formation of

women's groups but fostered a culture of women supporting women (Year 3 Annual report, p.32-33).

According to the interviewed staff members, there remains a need for further, more comprehensive and more in-depth outreach and engagement. One staff member felt that the project design and implementation should have catered for the inclusion of more communities, since all communities need this kind of intervention; they also felt that longer-term engagement in communities is needed, as not everyone learns and changes at the same pace. Two staff members felt that more in-depth engagement with national-level stakeholders would have been more appropriate, believing this could lead to greater reach of the project, but also to motivate government to do more and better.

Finally, one staff member felt that the project design should have been more responsive to the poverty in the target communities, but also in Liberia overall, by doing more to help women and girls survive and support themselves, as this is such a key driver of their vulnerability to violence. It should be noted, however, that project implementation was adapted to allow for greater responsiveness to the economic needs of the most vulnerable. Responding to the impact of COVID-19, ECLRD provided financial support to specific individuals with disabilities, who were left especially destitute due to COVID-19 and disability. ECLRD also helped women who lost all their savings due to being unable to trade during COVID-19, by linking them with SWE groups, paying their children's school fees, etc. In some communities the project offered financial support to some survivors so they could join local SWE groups: *"Initially we didn't have that (but) as we were implementing we saw the need. (With) some of those women (survivors) we gave them funds so that they can be part of the saving group"* (Staff FGD, November 2022).

## 4.2 Impact

### EQ3. To what extent has the project contributed to ending violence against women and girls, gender equality and/or women's empowerment (both intended and unintended impact)?

The quantitative findings presented in section 4.1.1 (project goal) show that women's experience of both IPV and NPSV decreased in the intervention group compared with the comparison group, and this effect was largely driven by change in Bong, Grand Cape Mount and Grand Gedeh, with a corresponding increase in IPV in Rivercess. These findings suggest that the project has had a positive impact on reducing VAWG, but that these positive impacts have not necessarily occurred in all implementation locations.

The qualitative data supports these findings, although it tells a different story in relation to Rivercess, where there were strong perceptions of a reduction of VAWG as a result of the project. Research participants across all three counties sampled, and particularly in Rivercess, described perceptions that IPV has decreased substantially as a result of the project, although people also suggested that IPV had not been completely eradicated. Physical IPV in particular was described as having reduced, with fewer husbands reported to be beating their wives.

*Before then the men used to beat on their wives but from this awareness we have carried out; soon people get to know now that it is not good that the one you called your wife, to harm her, because you people are no longer two but you are one. (FGD, male faith leaders, Rivercess, 17 October 2022)*

*In our community before men use to beat on their wife or spouse but with help of ECLRD it's not happening again. The town chief also put law down that no man should beat their wife in the town. (FGD, female congregants, Bong, 1 November 2022)*

The topic of economic IPV also came up a number of times in FGDs, with stories emerging of men in target communities changing their behaviors, including no longer spending money on various things such as motorbikes, alcohol and expensive clothes while their families struggled to eat and make ends meet.

FGD participants described a number of processes or activities that they believed had led to a reduction in IPV; in particular, the awareness raising conducted by ECLRD and faith leaders' use of FAMA cards to facilitate dialogue with community members about violence. The link between reduction of IPV and the use of FAMA cards, or engagement in faith activities where VAWG was addressed, was also found in the survey data (see section 4.1.1).

The qualitative data also highlighted strong perceptions of positive impact of the project on other forms of VAWG. A reduction in the cases of rape were referred to across all FGDs and KIIs. While the project's activities linked to the use of FAMA cards were partly credited with making an important contribution to a reduction of rape, a number of participants across the counties described other activities or processes that have also contributed. The most significant appear to be the raising of awareness of the unacceptability of rape and reduction of stigma against survivors, and strengthening GBV response, particularly in relation to women and girls' access to justice.

Other types of violence discussed in the FGDs and KIIs were largely related to children and the abuse of children's, particularly girls', rights. Early marriage was raised by a number of participants who suggested that it had decreased in their community, largely as a result of the work done through the project, including through the use of FAMA cards.

*This is the area where they taught us about the FAMA cards, and dramatize on it if we go in the community, like for example if someone is getting married we will like to know their ages before they get married. Once they are off age we reach that complain to the town chief that this child is under age, but because this man get money and can help the girl's family, so they giving her to him. But ECLRD says girls under the age of 18years shouldn't get married, it is wrong. (FGD, adolescent male congregants, Bong, 31 October 2022)*

These findings are reflected in the endline survey, with seventy percent of faith, youth and school leaders, and youth group members, reporting that they believed that early marriage had decreased in their community in the past year, and 67% of congregants in the intervention group reporting the same. The findings for congregants, however, differed according to county, with 71% of congregants in Bong, 62% in Grand Cape Mount and 86% in Grand Gedeh reporting that early marriage had decreased. A smaller proportion of congregants in Rivercess reported a decrease in early marriage (39%), with 37% reporting that it had increased and 14% saying that it had stayed the same.

Other types of abuse of children's rights that were perceived to have reduced include denial of education, particularly girls' education, with girls' school attendance reported to have improved, particularly in Bong. A reduction in 'sex for grades', perpetrated by teachers in schools, was also mentioned, particularly in Rivercess and Grand Cape Mount, with a number of participants making direct linkages between the use of the FAMA card depicting a teacher sexually exploiting a female student and shifts in prevalence of sex for grades. Although one male faith leader in Rivercess suggested that while the practice has certainly reduced, it still occurs albeit more underground than before.

The topic of FGM/C only emerged in two interviews, both in Grand Cape Mount, with both participants describing improvements through harm reduction rather than eradication, including

cutting girls during school holidays so that they did not miss school, and ensuring that cutting is done by trained health professionals.

*Yeah, we have the FGM that's the female genital mutilation which was a serious issue and we have the dangerous aspect of it is that people who do it are not trained professional nurses or health practitioners to do these kind of things... we don't know the effect of these instruments that they are using and how safe these instruments are because they do it at a destination where men cannot go and only women and they are not trained to (do) these things. So what we are saying is that at least even if it will happen, there should be a trained health practitioner who knows about it and who will know the danger of those substances whether they can be purified or used. Maybe they might use one instrument on two different persons because no one is there and they are not trained to (do) these things. So the issue of FGM, we said it was a tradition because on several occasion when we went to awareness they said it was a tradition and we said we agree it is a tradition but let it not be at the time of school. School can't be in session...with a lot of awareness they accepted that and they were no longer doing it at the time of school and even the momentum they had before, I'm not seeing it again. (KII, partner, Grand Cape Mount, 29 October 2022)*

That the topic of FGM/C emerged infrequently during the interviews is likely partly due to an adjustment in the research tools where the evaluation team removed questions about FGM/C. This was done following consultations with ECLRD where they reported having had to stop their awareness raising about FGM/C due to significant sensitivities and push back from community members.

The qualitative data suggests that there have been some significant impacts of the project on gender equality and women's empowerment. This is most visible in the multiple reports of women's and girls' greater participation, including in leadership roles in their community and schools, both as faith and youth leaders, and in other types of roles such as leaders of savings groups.

*Before then when ECLRD was not in Rivercess, these thing happen on a daily basis, women don't have the right. But after they came they have series of work shop and series of training and we went back in our communities and we carried these messages in our town meetings. The women then they know that they had to take part in decision making for the town because the town and the community is for every one of us...One woman they call (name), she is the head for the village saving, she controls the whole money business. (FGD, male faith leaders, Rivercess, 17 October 2022)*

A large number of qualitative research participants also described changes in the extent to which men supported women in domestic labour and childrearing. Both men and women shared stories of changes they had observed in others in their families and communities. Several men and women also shared stories about their own transformative process of change; for men, starting to engage more in domestic labour and, for women, coming to the realisation that women's only role was not to take care of the household and children.

*The dynamic on gender has been changed; for instance, I (name), I didn't used to wash my wife's clothes but presently now, 'm washing my wife's clothes, when she brings the clothes and says please help me, I wash it and carry my baby to the hospital and sometimes when she is not able I cook and we eat. So, the dynamics have changed. When she is not able, I cook and we all eat together and they will not call me Ma-Mary no. People used to call us, when a man cooks, they will say you Ma-Mary now or you sister Annie or sister this. But*

*actually, everything is going on the same path so the dynamic is been changed. (Partner1, Rivercess, 14 October 2022).*

*Not only women are responsible to cook in the home; not only woman are responsible to take care of the children in the home. We (are) getting to know all that...but we did not know it at first. I did not know it, only woman can send child to school, only woman have the responsibility, only woman must wash, only woman must clean up the house. But for now we get to understand that it is not woman that is responsible for all that. (We) want the man too to get to help. (FGD, female youth leaders, Bong, 2 November 2022)*

The survey data lends some support to these findings. Two items in the survey asked men and boys in a relationship in the past year about their behaviors with female partners, including how often they asked their wife/partner's opinion in the past year, and how often they helped around the house, including cooking and cleaning, in the past year. The frequency in which male congregants engaged in these behaviours increased at endline, although this effect is largely driven by adolescent boys' behaviours, with less change observed among adult men (see Table 24).

**Table 24: Frequency of male congregants in the intervention group asking their wife/partner's opinion and helping around the house with cooking or taking care of children in the past year, disaggregated by evaluation phase and age group**

	Asking wife/partner's opinion		Helping around the house	
	Baseline	Endline	Baseline	Endline
<b>All male congregants</b>				
Never	36,9%	18,7%	35,3%	16,7%
Once	8,1%	16,1%	12,1%	9,9%
A few times	27,8%	27,7%	26,8%	30,8%
Many times	27,3%	37,5%	25,8%	42,6%
<b>Adolescent boys</b>				
Never	71,4%	22,5%	86,5%	19,7%
Once	4,8%	17,5%	13,5%	10,5%
A few times	21,4%	23,8%	0%	34,2%
Many times	2,4%	36,3%	0%	35,5%
<b>Adult men</b>				
Never	27,6%	17,1%	22,9%	15,5%
Once	9%	15,5%	11,8%	9,6%
A few times	29,5%	29,4%	33,3%	29,4%
Many times	34%	38%	32%	45,5%

While the findings presented on impact of the project on VAWG and gender equality and women's empowerment are certainly very promising, there is other endline data that suggests that there are some limitations in the extent to which these changes have been gender transformative. For example, while the survey data suggests that the intervention has had a positive effect on men and boy's agreement with rape myths, as noted under EQ6, the qualitative data showed some examples of persisting rape myths and 'victim blaming' among volunteers. The survey data also suggests that

there has been no significant improvements in congregants' gender equitable attitudes and that these have worsened for adolescent girls and adult men.

The evaluation has identified an important, positive, unintended impact of the project: the bringing together of Christian and Muslim faith leaders and communities, and the strengthening of interfaith collaboration. A large number of participants in FGDs and KIIs in Bong and Grand Cape Mount, and also a partner at the national level, described a significant shift in interfaith collaboration, moving from very little contact in the past to now having joint meetings and discussions, including about VAWG and how to tackle it in their communities. A number of participants also described interfaith preaching, with Muslim faith leaders being invited to church, and Christian faith leaders being invited to the mosque, to exchange in the pulpit.

*... we are one, we are united now, the Muslim and the Christian, the Imam and the Pastor, we can host meeting, one time we can host meeting in the town hall, so we can invite all the people and we can be educating them what to do, what not to do, so they can follow us. (FGD, adolescent male congregants, Grand Cape Mount, 29 October 2022)*

*One important thing under this particular program, it had being very difficult to see Muslim and Christian coming together to work. Even for my first time going to the mosque I was so scared because it had never happened in my life before for the idea for Christian and Muslim to work together. The Imam will join the pastor during the 16 days of activism in the church and then the pastor joins the Imam (and) they go to the Mosque. It brought togetherness in the community. (KII, staff, Bong, 1 November 2022)*

Participants stated that this interfaith collaboration was unheard of in the past, and has strengthened social cohesion in communities. When asked how this process had come to be and how it was facilitated, one national level key informant suggested that ECLRD had been instrumental by providing a safe space for dialogue between Christian and Muslim faith leaders.

#### **EQ4. How has having a second grant affected the implementation and impact the project/organization was able to have?**

Based on the promising progress documented at the endline evaluation of their first three-year grant (2015-2017), the UN Trust Fund awarded Episcopal Relief & Development and ECLRD a second three-year grant (2018-2021), which was extended by a one-year no-cost extension (for project implementation delayed due to COVID-19) and a three-month no-cost extension (to complete the final project evaluation). In the second phase, the original two counties (Grand Cape Mount and Rivercess) were again included, with two additional counties (Bong and Grand Gedeh) added. Overall, the second phase of the project was implemented in 54 communities, 24 of which were new and 30 with whom the project also engaged in Phase 1. Not all the current staff were employed by ECLRD during both phases of the project. However, enough were part of both for worthwhile reflections on how the two phases compared, and how the second grant affected the implementation and impact of the project.

According to the staff that the endline research engaged with, between Phase 1 and Phase 2 some of the project activities changed, as did the number of people to be reached. Two new counties were added to the project, and new communities were added in the counties that were part of Phase 1. A module on trauma awareness and resilience was added to the Faith Leader GBV Toolkit at the start of Phase 2, as was a module on violence against children. In Phase 2, ECLRD was more intentional in identifying and involving women leaders, especially women faith leaders, as well as more youth

leaders. More activities specifically targeting men, discussing masculinities, were added to Phase 2, as was more advocacy work.

It is clear from staff reflections that Phase 1 and Phase 2 are seen as part of the same cohesive project, building on each other to strengthen the attainment of the same goals. Phase 1 was described as the 'embryotic' stage by one of the staff members, where ECLRD was first bringing together the different actors (such as faith leaders, traditional leaders, and youth leaders) and guiding them to the realisation that they can work together and influence their communities. Phase 1 is seen as the phase where there was still a lot of resistance to the project's messaging. It was, therefore, the more difficult phase:

*The first phase challenge... (was in) putting people together to eradicate the traditional norms. (It was) very hard thing, very, very hard. So it was the tough thing to do, it was not easy, because it was new to the people. So you call people around, you are talking to them, but they will say 'it is strange, I can't accept it'. (Staff 1, November 2022)*

Concerning collaboration between Christians and Muslims, Phase 1 was again seen as a foundational phase for forming and facilitation this interfaith collaboration. For the first time faith leaders were brought together, with ECLRD helping them to realise they can work together. This took time, but Phase 2 built on what was achieved in this regard during Phase 1.

Phase 2, in almost every way, benefited from and built on Phase 1. Towards the end of Phase 1 the interest in the project messaging started to grow, as well as support for the idea that Christians and Muslims should work together. Phase 2 was able to leverage this interest and support. Confidence in the messaging and trust and friendship between Christian and Muslim faith leaders could be built because of the groundwork done in Phase 1:

*Phase 2 had confidence and friendship (already) built. And Phase 1 was like 'can we start trusting one another?' Phase 1 is like 'if I trust you, let me see whether it will be well'. But then at the end of Phase 1 it was 'o, we can work together!' (Staff 2, November 2022)*

Staff felt that, in Phase 2, implementation and impact of the project was positively influenced by the ownership that communities have taken of it. Staff explained that during Phase 1, they had to do everything themselves, whereas during Phase 2 the trained volunteers were implementing the activities, with some of those trained during Phase 1 actually doing the training in Phase 2. During Phase 2, when VAWG incidents happened, community members would no longer automatically only contact ECLRD, but would use the appropriate referral pathways. Furthermore, during Phase 2, community members realised that they do not have to be top-level faith leader in order to be able to talk to others. Therefore, Phase 2 had more volunteers who could reach more deeply into a community, but also move into various communities. The formation of safe spaces is also something that only really started happening during Phase 2.

*We started trying to work with these faith leaders to establish safe spaces, to create safe spaces where women and children could go. And so, during the second phase, we really saw it materializing. Okay, whether you are female, Muslim faith leader, (or) a Christian, (or a) Muslim woman, they all created these spaces that (they) could go. And women went there. They talk their stories and talk (about) what was happening in their family, whether with children or with their partners. They were able to create that support group to help them. So it's like (these women) always look forward to going to these safe spaces, because they see it as the means of (talking about) whatever has happened to them. So that was another thing*

*that we started in the first phase, but that (bloomed during the second phase). (Staff FGD, November 2022)*

Overall, there is therefore a strong feeling that the second grant allowed the project to actually reach its proposed aims, for it allowed the project to continue for longer. The groundwork took a long time to implement – almost all of Phase 1. If Phase 2 had not happened, there would not have been the time and opportunity to actually capitalise on and leverage the momentum and energy that was finally developing towards the end of Phase 1. Phase 2 allowed for a continuation of that momentum, with great results.

The only challenge discussed specific to Phase 2, was that the volunteers that were part of Phase 1 had some trouble in adjusting to the reduced financial support they received during Phase 2. In Phase 2, the funding these volunteers received was reduced and/or cut, as the activities had changed. It took some time to explain and convince them of the fact that there is a new phase of the project, with different activities, but also different funding allocations.

*So we have to explain to that you know, for this phase this other support has cut off because we are coming to the climax of all these activities. So there was some explanation all of the time to convince them that the first phase is different from that of the second phase, because we have gotten structures and all those things in place, so now you cannot continue the same support as it was from the beginning. (Staff FGD, November 2022)*

#### 4.3 Relevance

**EQ5. To what extent do the achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls?**

A project is relevant to the extent that its objectives and design respond to the beneficiaries' needs, policies and priorities (OECD, p.7). The endline qualitative fieldwork engaged both with ECLRD partners and beneficiaries, including faith leaders, youth leaders, SWE members and leaders, and community members. In all of these focus groups and interviews, the participants were adamant that the ECLRD project should continue and be extended to other communities, districts and counties. The passion and vehemence with which focus groups and interview participants pleaded that the projects should continue and extend to other communities cannot be overemphasised.

Interview and focus group participants argued for the extension of the project to other communities based on two reasons, namely that VAWG is rife in these communities and that the intervention actually works in reducing VAWG. There was almost a desperation in many of the discussions, with participants feeling that the project actually offered a solution:

*"I am praying to God that this program should extend to my area" (Male faith leader FGD, Rivercess, October 2022)*

*"So I pray to God and ask EPISCOPAL RELIEF & DEVELOPMENT to continue this program" (Partner 1, male, Grand Cape Mount, October 2022)*

*"I want to recommend to you that we need continuation of this project in Rivercess so as to complete the violence against women and girls in total" (Partner 1, male, Rivercess, October 2022)*

*"I only appeal to your that they must extend to Montserrado" (Partner 1, female, national level, October 2022).*

A number of participants also argued that the intervention should continue in the current communities. While the implementation thus far was described as having led to a decrease in VAWG, they felt that not all people in the community had been reached, and to ensure that the change is sustainable, implementation should continue for longer: *“I request that you people continue to be with us and give us more strength so that we can continue to talk to our children and men going around the community to create awareness to the churches and outside”* (Male faith leader FGD, Bong, October 2022).

This conviction that the project should continue is an indication that those it engages with believe it is relevant to their communities and their needs. Furthermore, all of the staff members and partners interviewed agreed that the project’s achieved results continue to be relevant to the needs of women and girls, as VAWG is still happening in communities. Many believe that VAWG has decreased in the target communities, as the project led to VAWG being discussed and assistance being offered to survivors. Nevertheless, VAWG remains present and in the communities that were not reached by the project it was described as being rampant. Therefore, the achieved results continue to be relevant and serve to highlight the importance of continuing the intervention and expanding it to other communities, districts and counties as well. In the reflections of the interviewees, this was the key indication of the relevance of the project and its results, namely that they strongly argued for the project’s continued and expanded implementation:

*The project is relevant, we need the project more than ever before... There were places that we didn’t cover... We need to go (to those) places, to those other districts that we didn’t cover, let them feel the impact of the project like other communities did. (Partner 2, male, Rivercess, October 2022)*

Two partners from Grand Cape Mount emphasised the importance of faith leader engagement in the relevancy of the project and its results.

*The faith leaders component is what ECLRD brought in this process, it is what really helped us a lot. Because over the years of awareness and other activities, (they) have not reached to the faith base. But now when (ECLRD) created and trained them, now the message is going across. (Partner 1, male, Grand Cape Mount, October 2022)*

#### 4.4 Efficiency

##### EQ6. To what extent was the project efficiently and cost-effectively implemented?

The efficiency of project implementation is reflected on below, both in terms of financial management and time management. Staff at local and national level felt that the project was efficiently and cost-effectively implemented, considering the number of people reached and the realities of the contexts in which it was implemented. Project budget was reported to have been efficiently managed to ensure that it stretched over the entire implementation period, that no county office ran out of money, and that all planned activities could be implemented. County-level staff were informed of the project budget at the start of every year, which helped them manage funds appropriately. COVID-19 meant that less travelling was possible (both for staff and volunteers), and with transport costs being a major expense, this assisted in ensuring budgets were adhered to, but also that most of the project funds went to the implementation of activities in Liberia, rather than travel of staff members.

One staff member did indicate that staff were sometimes slow in doing their reporting. This was explained as being the result of the intense, hands-on nature of their community-based work: on their return to the office they know they should do their reporting, but sometimes delay doing so as

they desperately need rest. Yet this may delay the project management and MEAL processes. There was also sometimes a slight time delay in funds reaching staff at county level. Where this meant delays in activities or reimbursement of transport for volunteers, it had the effect of breaking momentum and affecting the morale of the project team (both staff and volunteers).

*Sometimes the money transfer does not come in time. Once the people are in high gear to do a piece of work and you give them a time (that it will happen but then you say because the money has not come) 'oh let's wait for next week', sometimes it... can drop the morale (of the group). (Staff 1<sup>20</sup>, November 2022)*

The project was originally envisioned as a three-year project. However, approximately six months into project implementation, the COVID-19 pandemic started. Realising the impact this will have on project implementation, Episcopal Relief & Development and ECLRD submitted a timely request for a one-year no-cost extension already in the second year of the project. Due to the successful sourcing of other funds (including the Spotlight Grant), they were able to efficiently manage project funds to enable the project infrastructure and activities to continue for a full four years, including an additional three-month no-cost extension so that the final project evaluation could be completed. The financial challenges of COVID-19 were also flexibly and effectively handled. Due to the Spotlight Grant, as well as the timely support of the UN Trust Fund in allowing budgetary reallocations, financial support could be provided to women and girls, including those with disabilities, particularly affected by COVID-19.

This effective financial management should be considered in relation to the fact that Liberia remains an economically unstable country, which has challenged the financial management of the project. For example, in a 3-month period in 2022, the price of travel between Zwedru and Solo Town (both in Grand Gedeh county) rose from USD10 to USD23, due to the dramatic increase in the price of fuel. That the project was financially managed in such a way that project funds were sufficient for the project to continue for the full four years is indicative of good financial management (Year 4 progress report, p.1).

Project implementation also evolved to deal more efficiently with the challenges of implementation in Liberia. One particular challenge, experienced throughout Phase 1 and for the first part of Phase 2, is the bad roads during the rainy season. Due to the lack of banking facilities in the counties, the money needed for county-level implementation had to be transported in cash by car. During the rainy season these cash deliveries could not happen due to the bad roads, effectively halting all project activities (Year 2 Annual Report, p.36). To address this problem, ECLRD worked with MTN LoneStar, a GSM company, to create a mobile money transfer platform. ECLRD staff were trained on the operation and management of the platform and this has meant that all financial transactions in the field are now done via mobile money, reducing the security risk of travelling with cash and allowing efficient implementation of activities and transferring of funds to participants, staff and volunteers (Year 3 Annual Report, p.).

## 4.5 Sustainability

**EQ8. Did the project activities and the processes contribute in any way to EVAWG activism more broadly?**

Participants were asked to reflect on whether they think EVAWG activism in their communities has increased since the ECLRD project implementation started. All agreed that it has. Faith leaders, community leaders and school leaders were experienced as increasingly speaking out against VAWG

<sup>20</sup> The locations of staff members and their genders are not included, so as to protect their anonymity.

and for gender equality and women's empowerment. These findings from the qualitative research component should be read in conversation with the quantitative findings (see Figure 18, 19, 20 and 21 in Section 4.1 [Effectiveness]), which shows a decrease in the proportion of faith leaders reporting often speaking publicly on VAWG in the past year, yet an increase in congregants reporting that they had heard faith leaders speaking publicly on VAWG. It also shows an increase in the proportion of youth leaders, school leaders and youth group members reporting they often spoke publicly about VAWG (see Figure 23, 24 and 25 in Section 4.1 [Effectiveness]).

From the qualitative responses of focus group and interview participants, it appears that there are four areas of increased engagement around EAWG that they see as indicative of an increase in EAWG activism. **First, they perceive an overall increased awareness in the target communities of VAWG and referral pathways, as well as increased opposition to VAWG.** This is the result of many different actors, especially faith leaders, doing awareness-raising and sharing what they have learned with others. There is a willingness and drive to sensitise others:

*I went to conduct a training one time in that town, after we had trained the faith leaders. So I went to do the (next) training and (the trained faith leaders) came to me. They said 'no, you can't do this alone... You cannot train us and then we leave here. So just sit back we will do it (we will train the others in the community)'. (Staff 2, November 2022)*

Second, **the increase in EAWG activism is apparent in the increasing number of spaces that engage with the topic.** Participants described leaders and members in churches and mosques speaking on VAWG during sermons, Bible studies and other meetings; youth meetings discussing the topic; counselling being offered to those affected by violence; and radio shows dealing with the issue. Third, **EAWG activism is seen as increasing as there is an increase in reporting of VAWG, especially rape.** Women and girls are increasingly speaking out, and people are intervening where they see VAWG being perpetrated.

*There is a women group who organized themselves as the result of the training, to take the matters into their own hands... (They) check on each other in the community if, for example... a neighbour next door was beaten by the husband, the women group (will intervene)... They call right away (to see what help she needs). So I think with this kind of information and training it bring to light what people need to do about their own situation, rather than to wait for central government. (Partner 4, male, Bong, November 2022)*

Finally, **they perceive an increase in community systems that address VAWG.** Participants described community laws that have been passed that fine perpetrators of domestic violence, and local dispute management systems that now also deal with domestic violence.

The focus groups and interviews also revealed that people are implementing, experiencing and/or witnessing many different ECLRD activities related to EAWG and the promotion of gender equality and women's empowerment. Different volunteers – faith leaders, community leaders, youth leaders, and members of faith groups and communities – involved in implementation reflected on what they have been doing in their communities as part of the ECLRD project. The key activity that the volunteers engage in is what they usually call 'awareness-raising'. In reflecting on how they explained and described it, 'awareness-raising' refers to more than simply sharing information. It includes discussions and engagements that aim to convince listeners of the importance of ending VAWG and promoting gender equality, and what and why they should be changing in their own lives in order to reach these goals. Key themes that emerged as being often discussed include child marriage, non-support of family, inappropriate teacher/student relationships, sex for grades and domestic violence.

This awareness-raising and outreach takes different forms. It includes preaching and teaching within religious spaces; community trainings at community meetings; talks and discussions in schools; drama groups performing at markets or schools; radio shows and discussions; distribution of flyers; activism during 16 Days and International Women's Day; and household engagements. In these different settings, these volunteer activists are able to reach a wide range of community members.

A key component of their activities are around direct intervention. For example, where a child was raped, a woman beaten, or a pregnant daughter rejected, there are volunteers who intervene on behalf of the victim. Where rape is concerned, this is to ensure that the victim gets the needed treatment, the matter is reported to the police, and that family members do not settle for informal, monetary compensation by the perpetrator. Within the household space, be it domestic violence or neglect of children, volunteers confront perpetrators and engage in discussions to convince them of the error of their ways.

*Two years ago (there was a man) in my community... He didn't want to support his children... He was beating his wife... I called the other faith leaders and we talked to him.... Before, he won't pay attention to you, but now any time there is a meeting he will be the first to come. (Female faith leader FGD, Rivercess, October 2022)*

It should, however, be highlighted that not all awareness-raising and engagement by volunteers are necessarily appropriate. Where volunteers shared what they did and said, a few rape myths emerged, all centred around girls and young women. A number of program participants (faith, community and youth leaders) explained that they often speak with young girls/women as part of their ELCRD-inspired EAWG activism. In these talks they emphasise the importance of respecting your husband and not inviting rape and other sexual abuse by wearing inappropriate clothing and going out at night. It appears that at least some of the messaging being shared with girls and young women infer that certain behaviours invite and justify sexual violence:

*As for me, I always talk to them as a woman (and tell them) 'The way you will carry yourself will make a man use violence against you.' Because some of the girls can just leave the parent house and get in the streets... so it can just make those boys take advantage of them. (Female faith leader FGD, Bong, November 2022)*

FAMA cards were an activity discussed at great length. FAMA (Facts, Association, Meaning, Action) Learning Dialogues facilitate reflection, identification, analysis and decision-making. It was designed and produced as a key strategy of the first phase of the project. Each FAMA card offers a contextualised illustration of VAWG, gender equality, or healthy relationships, and incite lively discussion and the sharing of personal stories. The cards help the facilitator to listen and facilitate discussion points, rather than just teach. As part of Phase 2, FAMA cards on child protection and trauma awareness were added (Year 1 Progress Report, p.6). Almost all of the interview and focus group participants have been exposed to the FAMA cards, either by being part of a session where it had been used, or by using it themselves in their EAWG activities in their community.

Those that have used the FAMA cards or have been exposed to them are immensely positive about it. They explained that community members like the FAMA card pictures and that it creates an engagement that is participatory and interactive. FAMA cards allow the volunteer to become a facilitator, rather than a trainer, where community members speak and come up with their own ideas and solutions. This is an especially valuable angle of engagement considering the low levels of education and high levels of illiteracy that are common in the target communities. Both volunteers

and those that have been participants in FAMA card sessions felt that it is very effective and appropriate in their context:

*Because of the picture (it works). We did not go to school, so (these pictures) tells us how to do it. Because when you did not go to school you can't read. (But with) this picture we are seeing the way it can help us. We are not educated... The picture can help us to learn (Female adult congregant FGD, Grand Cape Mount, October 2022)*

Several stories were shared of how FAMA card engagement led to transformational change and realization in the lives of a participant in the session. One faith leader shared a story of how a participant for the first time recognised the abusive relationships in his own family:

*A boy was in that session (with the FAMA card of a man not supporting his family)... (H)e said 'this is what my uncle is doing to my aunty'. He (could directly relate to) what was in the picture and he really felt bad within himself, (realizing) that it was wrong. (Male faith leader FGD, Grand Cape Mount, October 2022).*

The positive reflection on FAMA cards and their impact concurs with what was found in the quantitative component of the research (see Table 21 and 22 under Section 4.1 [Effectiveness]), where amongst female congregants in the intervention group, having seen FAMA cards was significantly associated with lower endline prevalence of IPV in the last year. Furthermore, while having seen a FAMA card was not significantly associated with male perpetration of any form of violence, male congregants in the intervention group were significantly less likely to have reported several types of past year IPV perpetration at endline if they had seen FAMA cards about physical, emotional or any kind of IPV.

Those involved in EVAWG activism on the ECLRD project were asked to reflect on whether it was easy or hard to do these kinds of engagements. All said that it was quite hard. Community members tend to expect some kind of compensation for attending a group session or meeting, even if only a light refreshment, which cannot always be provided. In such cases it is often difficult to motivate them to take part or listen. Volunteers also face resistance to their messaging, especially with their peers refusing to see them as someone with worthwhile knowledge, or, based on their past behaviour, arguing that they are not in a position to teach or confront others about their behaviour. This links to a further challenge experienced by many, namely the need to be identified as part of the project with the right and ability to speak on the topic. Volunteers felt that having a badge or t-shirt that identifies them as trained and part of the ECLRD (volunteer) team would assist in convincing community members of the legitimacy of their messaging. Another challenge was that volunteers, through promoting non-violence and gender equality, were often going against dominant cultural norms and practices. By, for example, opposing child marriage and initiation practices, or by teaching that women have equal rights, others may see them as going against their culture. They sometimes face resistance and even aggression for doing so. Even if people do not resent them, they are still reported to be slow to let go of deeply-held cultural beliefs: *"Our traditions were highly respected, so... it was very hard to overcome"* (Male faith leader FGD, Rivercess, October 2022).

Volunteers and activists also faced resistance when they disclosed rape cases and insisted on having these reported to the police. Some families prefer 'compromising' (i.e., receiving monetary compensation from the perpetrator and/or his family) and therefore resent the activist for interfering. The perpetrator and/or his family may also issue threats:

*For rape case, if you as an individual report the case (to the police) and that person was sent to jail, the family of the victim will always point hands at you, saying 'you are the cause of the person going to jail', threaten your life. (Male adult congregant FGD, Bong, October 2022)*

While activism is therefore hard, participants could identify various things that made it easier over time. The training by ECLRD, especially refreshers and follow-ups, helped to build their ability and confidence, as did having a passion for doing these kinds of engagements. Activists learnt the importance of patience and perseverance, as a community member may not be willing to listen now, but may be willing in the future: *"You call somebody you talk lengthily you will talk what to do and what to start from so at least gradually it is working up"* (Male faith leader FGD, Rivercess, October 2022). Being a leader in the community and/or a person that others trust also makes others more willing to listen to them. Participants suggested that having some monetary support or compensation for their volunteerism would help, as would the ability to offer refreshments to those they teach, and money for transport to different communities.

**EQ7. To what extent will the achieved results, especially any positive changes in the lives of women and girls (project-goal level), be sustained after this project ends?**

All of the individuals interviewed or taking part in focus groups were asked to reflect on the sustainability of the project results. The overwhelming majority felt that the results will be sustainable, for three key reasons. First, they felt that many people in the target communities have fundamentally changed. This makes the results sustainable, for these transformed individuals will not revert back: *"Because we have already learned and it is part of us and we will continue to go by it"* (Female youth leader FGD, Grand Cape Mount, November 2022). They believed they will also teach their children the same values and beliefs and, through being an example to others in their community, other community members will also be motivated to change in ways that promote gender equality and oppose VAWG. This change in people is seen as crucial to sustainability, as it embeds the project principles and learning in a long-term way that can influence others.

Second, those that are part of the target communities – faith leaders, youth leaders, congregation members, savings group members – explained that they will sustain it, as they will continue to engage in the activities the project promoted. They reported that they will continue raising awareness about VAWG, opposing violence where they see it, intervening with families where VAWG occurs, assisting survivors, and participating in savings clubs. They suggested that they have seen how these activities are good for the community and are therefore motivated to continue. It might not be as large-scale and impactful as it would have been if ECLRD supported with food and/or transport, but it will nevertheless continue. Especially youth leaders and women were adamant that they will continue:

*We are already trained for it and we should tell the people (what we have learnt from ECLRD). Since we were trained for it (and) not because of money... We should (teach) the people what we learned, we are going to put it to practice. It should be part of us. (Male youth leader FGD, Rivercess, October 2022)*

A third reason offered for the sustainability of the achieved results is that measures have been put in place to ensure it. For example, some communities have passed customary laws that fine VAWG perpetrators and have community policing structures in place to ensure that perpetrators are identified. Some schools have put succession structures in place to ensure that student activism continues even if a key student member of the school-based GBV committee leaves school. The women that are part of the SWE groups are adamant that they will continue with these groups,

which means financial support for these women, but also continued women- and girl-focused outreach and awareness by the group members.

Despite the strong belief in the sustainability of project results and in continued positive change in the target communities, there was simultaneously an accompanying request that the ECLRD project should continue to be implemented. Again, three key reasons for this emerged.

First, many participants felt that longer-term engagement in the target communities is needed. Not all people have been exposed to the project, and not all people listen to and internalize messaging at the same pace, therefore some may need more time and input before they are motivated to change their beliefs and behaviours. Furthermore, all communities are also not the same in how quickly they change and start promoting non-violence and gender equality, and may therefore need more focused attention. Change takes time: *“Like I said earlier and I will say again, change don’t come at once. (It comes) through constant education, so we still need ECLRD to be around to educate people more. Because not everyone has heard about this”* (Partner 1, female, Bong, October 2022).

Second, a great number of participants emphasised the importance of also engaging with the remaining communities in the district, county and/or Liberia. The project only targeted a select number of communities in each county and participants could see the difference between these target communities and the remaining ones. They want the project to continue so that the remaining communities, especially the very rural ones, also receive the same intervention. Furthermore, often some community members from the non-target communities have heard of the project and are desperate for it to also reach them

*I am a faith leader in Sinje. My messages actually will be focusing on the people of Sinje. But what happens to the person from Vonzua? (And) if I am not ready to come for congregation or to go for worship, will I get that message? No, so it becomes very difficult. So this community that was selected, we need it to be (continued there) and extended to other districts which were left out (of the project). (Partner 1, male, Grand Cape Mount, October 2022)*

Third, participants felt that the project should continue as volunteerism will be challenged otherwise. While people were volunteering as part of the project, ECLRD did provide transport money and food for refreshments. This made it possible for volunteers to reach different parts of their community and motivate people to attend sessions. If this financial support is missing, it will limit volunteers’ ability to do outreach, which may lead to volunteers becoming demotivated.

It is interesting to note that, of the few who felt that project results will not be sustainable, they were almost all partners of ECLRD. This scepticism appears to be based on their understanding of and experiences in Liberia. In the words of a congregation member: *“What I do know about us in Liberia, we (are) quick to learn and quick to forget”* (Male adult congregant FGD, Grand Cape Mount, October 2022). It should be emphasised, however, that those questioning the sustainability of project impact were not questioning the value and impact of the project, but were rather sceptical of its longevity without ECLRD there to drive and support it.

Finances were identified as a major challenge to sustainability. It was explained that people want some form of compensation for doing anything, whether they are volunteers or simply attending a meeting. While the ECLRD project did not pay any volunteers, it did provide transport money and refreshments, and the lack of these incentives are seen as a threat to sustainability.

Connected to the call for continued project implementation, many felt that the project implementation period was simply too short to ensure sustainable impact and results. The new ideas advocated for are facing norms, beliefs and practices that have been dominant for generations. Therefore, longer term engagement is needed for it to be sustainable:

*I strongly believe that it will slide back, because part of it is that (VAWG and gender inequality) had been a tradition for a very long time. So part of it on their mind is (that non-violence and gender equality are) a new thing. If there is no constant advocacy, (they will) downplay it and go (back to their) old ways. (Partner 4, male, Bong, November 2022)*

Discussions on sustainability emphasised the importance of putting sustainability measures in place right from the start of project implementation: “Success without a successor is failure” (Male faith leader FGD, Rivercess, October 2022). The goal must be to have the community take ownership of the project and the values, beliefs and practices it espouses, creating its own structures and activities to ensure that it is understood and promoted. ECLRD staff felt that they have emphasised to the target communities, right from the start of the project, that the project is temporary and that the communities need to take ownership. ECLRD has supported this ownership-process, e.g., by helping communities think through community-specific systems and plans.

*So most time we tell them (the target communities) that we are just the catalyst, (we are here) to put you into motion and once you continue to be in that actionable state you can continue doing what you are doing... (For example, the town chief instated a fine for beating your wife). We've engaged them in order for them to understand that whatever they have they can use it to improve their lives or to continue doing what they need to do: sensitizing people, educating people against violence against women and children, we feel that they can continue even after this program... (Now) they are using their fines to help other people in the community. (Staff FGD, November 2022)*

EPISCOPAL RELIEF & DEVELOPMENT and ECLRD have been considering sustainability from the outset of the project. Already at project design stage, Episcopal Relief & Development and ECLRD had identified a specific sustainability measure, namely training, supporting, mentoring and equipping the National Faith Leaders Advisory Coalition (NFLAC) to take ownership of and leadership in key project activities (Year 2 Annual Report, p.38). NFLAC was involved in Phase 1 as well, and has used the Faith Leader GBV Toolkit in replicating similar approaches in other counties in Liberia, independent of ECLRD. It has also been able to mobilise funds on its own, including from the UN Mission in Liberia, UN Women, and the EU. Episcopal Relief & Development and ECLRD believe that NFLAC will be capable of taking the leadership in key project activities, as it has the infrastructure and reach to ensure that the core activities that are part of the project can continue (Year 2 Annual Report, p.38). ECLRD reports that NFLAC is planning to transition into a faith-based organization. For this purpose, it has developed administrative/operations guidelines, by-laws and a constitution, an Article of Incorporation, as well as a sustainability/transition plan. It is anticipated that Episcopal Relief & Development and ECLRD will continue to engage and work with them to ensure this transition is achieved.

ECLRD is also currently exploring a partnership with the Theological College of Cuttington University, with the hope that the Faith Leader GBV Toolkit can become an integrated part of the theological course work at the university. This will mean that faith leaders receiving training at Cuttington will enter communities already equipped with the knowledge and skills to speak out against VAWG (Year 4 Progress Report, p.2). Finally, Episcopal Relief & Development and ECLRD see the collaborative approach that it at the heart of the project design and implementation, as a key sustainability strategy.

**EQ9. To what extent did the institutional strengthening activities contribute to the organization's adaptability and resilience in crisis/emergency humanitarian response**

ECLRD's ability to adapt to COVID-19 impacts (discussed in more detail under Evaluation Question 12) was facilitated, at least in part, by receiving a Spotlight Grant. This two-year grant facilitated key investments in strengthening the capacity of ECLRD to operate under complex conditions (such as COVID-19), allowed the deepening of EAWG activities in Liberia through qualitative research, and the strengthening of communication channels at national and community level (Year 2 Annual Report, p.31). These institutional strengthening activities not only allowed the organization to function more easily during COVID-19, but also strengthened their resilience longer-term.

The Spotlight Grant allowed infrastructural improvements that enable better functioning and reporting at county and national level. At national level, seven ECLRD staff members received home internet access to better support working-from-home. The internet at both national and county-level offices was improved. Better internet connectivity helped to overcome communication and logistical challenges and delays that used to slow down project planning and implementation. It also improved the quality of virtual meetings and communication between Episcopal Relief & Development, ECLRD, and NFLAC (Year 3 Annual Report, p.37). County offices received solar panel systems and some county offices found that their solar panel system promoted awareness of and trust in ECLRD, as other stakeholders could rely on them for help when there was no electricity:

*If they have some work to do they come to our office and we assist them. 'Can you please type this information for me' or 'can you please charge my computer' and we have that going on for them. So they take this place (the ECLRD county office) as part of their office. So it (the solar panels) help lot of people... It gives some promotion for the organization. Everyone that comes here and gets service, when they are going out they will say that they got assistance from ECLRD office and the Spotlight Grant... And somebody will say 'what is ECLRD doing' (and their will be a conversation about all the services ECLRD provides to the community). (Staff 2, November 2022)*

The Spotlight Grant was also used for installing new systems. CommCare software was purchased, and both staff and volunteers trained on its use to enable paperless reporting and monitoring of activities. While this training only happened recently (September 2022) and the system is still being tested and rolled out, staff are positive about its use. It can be used on phones and tablets and does not require internet access to be used, therefore county-level staff and the trained volunteers can use it and sync whenever they do have access to the internet. National-level staff are supportive of CommCare use, as it means they no longer have to wait until the end of the month for paper reports to come in. Staff are hopeful that it will ensure more timely data collection of a higher quality, which is easier to process and interpret.

Investment in new and improved financial management systems has also strengthened ECLRD as an organization. The project developed whistleblower and anti-fraud policies, as well as cash advance and liquidation forms and processes to improve transparency and accountability. Mobile money solutions addressed the challenges of disbursing funds at county-level, and staff started using QuickBooks (Year 3 Annual Report, p.37). This new financial management software was purchased, with professional training by a consultant. Staff are positive that it will minimise errors, will allow faster data entry and easier access to financial records and generation of financial statements (Year 4 Progress Report, p.14). Thus far they have had no challenges in using it.

Spotlight funds were also used to capacitate Episcopal Relief & Development and ELCRD staff and improve the relationship between the two organizations and their staff. Episcopal Relief & Development and ELCRD staff together did the PMD Pro course, which created the opportunity for deeper learning and sharing of experiences. Episcopal Relief & Development sponsored a self-care session for ELCRD staff when they lost a staff member, helped organise the ELCRD staff retreat, and provided mentoring. The Spotlight funds also allowed ELCRD to host its first in-person three-day staff retreat, which was used to improve morale and to create a framework to manage challenges, improve accountability and response to emergencies (Year 3 Annual Report, p.37).

The Spotlight Grant also enabled ELCRD to contract a Liberian firm, JAC Consultancy, to support the implementation of qualitative research on the impact of COVID-19 on women and girls in the four project counties<sup>21</sup>. JAC Consultancy provided remote training for the ELCRD staff on how to ethically and effectively conduct focus groups and interviews. This training, as well as the relationships with JAC Consultancy, is seen as increasing the potential for research innovation in the organization (Year 4 Progress Report, p.14)

Finally, Spotlight funds were used to address the most direct COVID-19 challenges that were affecting project implementation. ELCRD was able to buy and distribute masks and hygiene and sanitation materials to volunteers and SWE/GBV Networks groups. To support faith leaders and other key volunteers at county level, they brought smartphones, tablets and data and call time for pre-paid cellphones for them, so they could continue engaging with ELCRD and with community members.

#### 4.6 Knowledge generation

**EQ10. To what extent has the project generated knowledge, promising or emerging practices in the field of ending VAWG (EVAWG) that should be documented and shared with other practitioners?**

All participants in focus groups and interviews were asked to reflect on what they see as important emerging or promising practices or learnings from the implementation of the ELCRD project. A great number of important practices and learnings were identified by the participants, with four emerging as particularly important based on how often it was discussed.

First, FAMA cards were identified by many as particularly useful and impactful and their use was highly recommended for other, similar projects. As explained by a member of a SWE group: *“They should carry the FAMA card to other places, too”* (Female SWE member FGD, Grand Cape Mount, November 2022). Second, the role and engagement of faith leaders as key actors and activists in project implementation was identified as an effective approach that should be replicated elsewhere. In involving them, it is important to engage in a process of discussion and facilitation, where faith leaders are not attacked and criticised, but rather accompanied in a journey where they themselves realise the need for personal and community-wide change. Engaging with faith leaders leverages the unique reach, authority, influence and commitment of faith leaders and brings a longevity to the project messaging: *“It is really how the faith leaders themselves embrace the project... They are being equipped and sensitized and then they go back into their community to make the change”* (Staff 4, November 2022).

This merges with the third key promising, emerging practice that was identified, namely the interfaith approach of the project, which led to interfaith collaboration. Having faith leaders from both religions work together, supporting each other, lent credence and legitimacy to the importance

<sup>21</sup> This is discussed in more detail under Evaluation Question 12.

of their messaging: *“What really work well is to have the two religions Christians and Muslim train and working together to spread out the awareness. So think other countries can follow that”* (Male faith leader FGD, Grand Cape Mount, October 2022). It also promoted interfaith harmony in the community more generally. Finally, awareness-raising about VAWG and gender equality was identified as a key, important activity: *“To succeed, you have to carry on awareness... Go into the communities, talking to people, making them understand, to know what they are doing it is not right”* (Female youth leader FGD, Bong, November 2022).

Other specific activities that were identified as impactful and should continue, was dramas, savings groups, radio sessions, working in schools, intergenerational conversations, and creating safe spaces where people feel the freedom and safety to discuss their challenges. Some participants advised that there should be more intentional engagement with and mobilisation of men, as they are better able to engage with other men; others advised that more women should be targeted, and/or marginalised people in general.

#### EQ11. What are the learnings from this project for future similar project interventions?

Reflecting on key learnings that are applicable to future similar EVAWG interventions, the following has emerged from Episcopal Relief & Development and ECLRD MEAL documentation.

**First**, similar project interventions should recognise the importance of intentionally planning for sustainability already from inception phase. This should be at both national and local level: *“(M)ap critical national actions, as well as community and country-level stakeholders, through a lens of sustainability, from inception”* (Year 4 Progress report, p6).

**Second**, local stakeholders need to be consistently and continuously trained and sensitised, to ensure that VAWG is addressed and survivors supported. Yet, as a project grows and expands its engagement with various stakeholders, a project that relies on volunteers need to be able to rapidly onboard these volunteers. If trainings and workshops can only be presented by national-level staff, it delays the natural growth and expansion of a project, especially in settings where country-wide travel is challenging. Therefore, local-level staff and volunteers need to be equipped to do the needed training of others (Year 1 Annual report, p.29; Year 2 Annual Report, p.34; Year 4 Progress report, p6).

**Third**, experiences in Liberia have emphasised that, for attitude and behaviour change to be successful and sustainable, it must be an iterative process of self-discovery. An experiential learning model, using experiential learning exercises and facilitation strategies, is crucial to this (Year 1 Annual Report, p.29; Year 2 Annual Report, p.33).

**Fourth**, projects that engage with faith and faith leaders need to intentionally communicate and disseminate project learning and achievements to a wider audience, in order to increase recognition and understanding within the international development space of the role of faith in addressing VAWG (Year 4 Progress report, p.6).

**Fifth**, experiences with COVID-19 have emphasised the importance of having flexibility built into project design. This is true not only for being flexible to adjust and adapt to crises, such as pandemics or conflicts, but to adapt longer-term as the fall-out and impact of the crisis for women and girls becomes better understood (Year 2 Annual Report, p.34). Finally, where social media is used as a tool in addressing VAWG, the needed protocols, controls and support has to be put in place to ensure that social media does not become yet another space where women and girls experience violence. Should social media become a project tool, specific strategies should be

developed and implemented to prevent cyberbullying, including systematic monitoring of project social media accounts, but also education of the wider community on the impact of cyberbullying and how it can be prevented (Year 4 Progress report, p7).

**EQ12. Specifically, what was learned about impact of crisis (Covid-19) on gender equity in terms of project adaptation to mitigate negative consequences?**

Episcopal Relief & Development and ELCRD commissioned research in the four project counties specifically to investigate the extent and impact of COVID-19 on women and girls; to triangulate views from faith leaders, stakeholders, and savings groups to understand the impact of COVID-19 on families (with a focus on women and girls); and to make gender recommendations on the role of faith leaders and savings groups in responding to emergencies and disasters such as COVID-19 on families (with a focus on women and girls) (JAC Consultancy, 2022). The research found that the men and women had been differently affected by COVID-19, with two factors creating this differentiated impact: unequal access to ownership and control of resources. These two factors, in turn, created a gender gap in resources and widened the poverty gap, disrupted education (and thus increased child labour), increased exposure to gender-based and intimate-partner violence, and reduced access to health services. The research identified women as particularly affected by loss of livelihood and economic security, as lockdown measures limited or stopped income generating activities for informal traders. It also revealed that women are more impacted than men due to their exclusion from decision-making processes and prominent leadership roles (JAC Consultancy, 2022).

Staff and faith leaders were asked to reflect on how COVID-19 had impacted the implementation of the project. It was described as a significant challenge to implementation, as the project relied heavily on people regularly coming together in big groups. With churches, mosques and schools closed during lockdown, as well as significant limitations on movement, the in-person and group engagements could, for a significant period, not happen as planned. Community members were afraid to engage with volunteers that came to their houses, especially in the light of the uncertainty of COVID-19 and the memories of the impact of Ebola outbreaks in Liberia: *“Sometimes when we go to the various houses to talk to people they don’t want to come closer to us to listen to us that was some of the hard time”* (Female faith leader FGD, Rivercess, October 2022). ECLRD staff were challenged in reaching project targets even when lockdown was relaxed, as social distancing measures meant that they had to meet in much smaller groups than planned. Staff were also personally affected by the pandemic, with a national-level staff member passing away from COVID-19, and many staff members losing family members to the virus.

Staff and volunteers described various adaptations that were made to enable project implementation to continue despite the pandemic. Staff and volunteers wore masks while standing outside when doing household visits. Some used FAMA cards, which are big enough to still be visible even if the volunteer was appropriately socially distanced. During lockdown, some volunteers would engage with the 5-6 houses directly around them, with whom they could speak without violating lockdown rules, sharing basic information on COVID-19 and its prevention, but also on VAWG and gender equality. Volunteers who could afford to, sent text messages or made calls to share the information. One described how she gave her number to everyone in the community:

*Like for me, in my community all of them had my number... I’m with the church working with the youth group and I’m also working with the hospital, so most of them will call and say we are experiencing this and that. And if they need counselling I’ll do the counselling on the phone. And if there is a serious issue where they need to go to the hospital, (I) will direct them to go there... (Female faith leader FGD, Grand Cape Mount, October 2022)*

ECLRD gave masks and handwashing buckets to all their volunteers. Once lockdown measures lifted, they started doing groups and meetings again, but with reduced participants and adhering to social distancing measures.

ECLRD used mobile platforms, such as Messenger and Whatsapp, to reach faith leaders and other volunteers. The national office also organised some Zoom meetings. In these virtual engagements, they realised that women faith leaders are much more vocal and participatory, compared to in-person meetings. This is a learning ECLRD is intending to utilise in the future as well, as a practical way of addressing power dynamics between men and women faith leaders.

The reality is, however, that most people do not have smartphones and/or strong network provision, so this greatly limited the extent to which virtual engagements could be used at county level. Instead, public radio was increasingly used to spread project messaging on COVID-19, VAWG and gender equality. Flyers, with basic information on COVID-19 and how to prevent it, were also printed and delivered to the houses in the communities.

The financial impact of COVID-19 should not be underestimated. Staff explained that, during lockdown, many women lost their only source of income, as they were unable to trade. Farmers could not sell their produce, which were left to spoil in the fields. This left these women unable to provide for themselves or their children. In response to this, ECLRD financially helped a number of women who had lost everything, by linking them with a SWE group, providing school fees for their children, or schoolbooks and other school supplies. The pandemic also led to an increased realisation of the vulnerability of people with disabilities. This led to ECLRD adapting their programming to more intentionally supporting people with disabilities during the pandemic.

#### 4.7 Gender equality and human rights

##### EQ13. To what extent have human rights approaches been incorporated throughout the project?

A human rights based approach requires that all forms of discrimination in the realisation of rights must be prevented, prohibited and eliminated. It also means that those who are the most marginalised or vulnerable, and face the biggest barriers to realising their rights, should be prioritised.

ECLRD and Episcopal Relief & Development staff reflected on the human rights approaches incorporated in the project. The way activities were implemented, and people from the community incorporated in these activities, were identified as reflective of a human rights approach. For example, people had the right to refuse to have photos taken of them by project staff and had to sign a consent form to be included in a photo, and community members had to give consent to take part in any of the project activities, including having a staff member or volunteer speak with them.

Staff also felt that the aim of the project and the people that it targeted are indicative of a human rights approach. The goal of the project is to reduce the violence experienced by women and girls, in recognition of the fact that women and girls' rights are being violated when they experience various forms of violence, including sexual violence. Furthermore, the project worked to achieve the aim for all women and girls in the target communities, not prioritising any single culture, traditional group or religion:

*(W)hen it comes to advocacy on the rights of women and girls we are not selective, we are not biased. We are open to all. We support anybody who we are informed about. We (do not take) into consideration age, your size, your status, we don't care who you are, we don't*

*want to know where you are from. So we do it across the board, considering that we all human and we all are equal before the law (Staff 1, November 2022)*

A human rights-based approach is arguably also reflected in the project's increasing support of the most marginalised within communities. For example, in the last year of the project it started to intentionally identify and support women, girls and survivors with disabilities, recognising that they face particular challenges in realising their rights and accessing the support they need. Also, recognising the financial impact of COVID-19, ECLRD local offices identified women left particularly destitute due to COVID-19, supporting them through savings group membership and/or other financial support. In this way it can be argued that project adaptations were guided by a human rights approach.

It must be recognised that, by intentionally engaging with and through faith groups, Episcopal Relief & Development and ECLRD is engaging with spaces that can be less conducive to human rights approaches. For example, where faith groups, based on religious convictions, limit the rights and access of women, these can be difficult to reconcile with a human rights approach. Episcopal Relief & Development and ECLRD attempted to circumnavigate these tensions by creating alternative, safe spaces. For example, as Muslim women are not allowed to speak in the mosque, Muslim women faith leaders were encouraged to create alternative spaces outside of the mosque where Muslim women can meet and speak. Furthermore, in community-wide gatherings, Muslim women could also speak. While there were therefore such practical ways of navigating these tensions, this must be recognised as a real challenge for any EVAWG project that engages so intentionally and directly with faith leaders and faith spaces, for religious beliefs are not always and in all settings reconcilable with human rights.

#### **EQ14. To what extent have gender responsive approaches been incorporated throughout the project?**

Gender responsive approaches are ones that aim to reduce gender inequalities within communities. The Episcopal Relief & Development and ECLRD project can be described as a designed as a gender responsive programme. The project's goal is to decrease VAWG and increase women's access to services, which are both issues driven (at least in part) by gender inequality. During the focus groups and interviews, participants repeatedly described the project as promoting women's rights, leadership and equality in the target communities:

*One thing that I want to share since this program came the issue of gender equality is being welcome. Before, the man was always in leadership but since ECLRD came the education was giving that anything a man can do a woman can also do it so most of the time (Male faith leader FGD, Rivercess, October 2022)*

*We are having women as town chief, women to head the whole town. It was not like that before... The discussion and awareness being going on over and over, people get to know now that women also need to take responsibility... Way back it was hard to have women as pastor but this time women are serving as pastor (Male faith leader FGD, Rivercess, October 2022)*

*Yes, (the project) is helping women's equality, because now, now you can see women own land. First it was not happening, (but due to) the people going around to talk to people, now we see woman can stand among man and speak her mind, so it helping (Female youth leader FGD, Grand Cape Mount, November 2022)*

Staff explained gender responsive approaches being present in the project as it includes both men and women in all the activities and that the project is intentional in ensuring that an equal amount of women are trained and engaged. Furthermore, a number of the FAMA cards also directly address gender roles and gender equality, encouraging conversations around how men and women are valued. Finally, staff explained that, through creating gender-specific safe spaces (e.g. women's groups, men's groups), staff feel that the project activities are done in a gender responsive way. There are spaces where women are alone to share their experiences and opinions, but also facilitated joint spaces, where men and women can speak to one another.

*The fact that more women leaders was involve in the second phase I think that also and the fact they were creating spaces for other women to talk about their issues and find solutions together I think that created some sort of space, I think there were I put the women, the space that was created; I think the women felt comfortable talking to another woman rather than they were to a man. (Staff 4, November 2022)*

The baseline research identified women as having more gender inequitable attitudes and violence-supportive norms and recommended that intentional and women-specific intervention activities should be designed and implemented to target women, and especially women faith leaders. Episcopal Relief & Development and ECLRD, therefore, worked to include more women, and especially women faith leaders, in their activities, but also in leadership. For example, the NFLAC expanded its representation to include more women representatives (Year 1 Annual Report, p.27).

Through women-only discussion and spaces and women-only savings groups, focused spaces were also created to work with women on their attitudes and norms. However, it is not clear whether these strategies to include more women, and to work with them in safe spaces, used any techniques and approaches that were developed specifically for use with women. Therefore, while there appears to have been more intentional engagement and inclusion of women during Phase 2, it is not clear whether engagement activities offered any new ways of transforming the beliefs and practices of specifically women. Conclusions and recommendations

## 5. Conclusions and recommendations

### 5.1 Conclusions

The endline evaluation has identified a wide range of positive impacts according to the project's results framework. At the project goal level, the evaluation found some mixed findings. For example, there was: positive impact on women's experience of IPV but negative impact on men's perpetration of IPV; positive impact on overall attitudes only among adolescent boys; and positive impact on knowledge of VAWG services only among adult women. As outlined in the report, these results need to be read through the lens of an 'imperfect' comparison group, with a large number of VAWG prevention and response programs also being implemented in the comparison county. When looking only at trends in the intervention group, it is evident that women's IPV experience and men's IPV perpetration reduced slightly or stayed the same, attitudes improved across all congregant groups (but particularly among male congregants), and knowledge of VAWG services improved across all congregant groups except for adult men.

At outcome level, positive impact was observed for almost all indicators in the results framework. While there was a reduction in faith leaders speaking out against VAWG, there was an increase in other leaders speaking out and congregants having heard faith leaders speak out. There was also an increase in female congregants' belief that faith leaders are actively working to end VAWG, knowledge of the services that faith leaders provide and satisfaction with the services provided.

Despite these positive results, it is also evident that impact differed substantially across the intervention counties, and not always with clear trends that can easily explain why more negative impact was observed in some counties on some indicators. For example, female congregants' experience of IPV increased in Rivercess, and this could be partly explained by no change in congregants' attitudes in Rivercess, and no change in faith leaders speaking out or congregants having heard them speak out. Similarly, no change in female congregants' experience of IPV in Grand Gedeh may be linked to negative outcomes on other indicators, including a reduction in faith leaders speaking out against VAWG, a reduction in female congregants' perceptions that faith leaders are actively working to end VAWG and a reduction in female congregant survivors reporting satisfaction with the support provided by faith leaders. However, it is unclear why men's IPV perpetration increased in Bong and not in the other counties when we see improvements on almost all the goal and outcome indicators in Bong. As noted in the report, it is possible that this result was due to men's inaccurate reporting of IPV perpetration at baseline in Bong due to social desirability bias.

There are a number of possible different reasons why we see such variations in results across the counties. While the COVID-19 pandemic clearly impacted on the whole country, it is possible that it impacted in slightly different ways in different locations. For example, throughout the program timeframe, access to the more remote locations, including Grand Gedeh and Rivercess, was challenging due to travel distance, particularly during the rainy season. During the pandemic, access was further complicated particularly in these counties due to poorer internet connection in a context where online communication became the norm. Further, while access to GBV services during the pandemic was negatively affected across the country, it is possible that this was worse in more remote locations where services were limited to begin with. These factors may partly explain some of the more negative results observed in Grand Gedeh and Rivercess.

Overall, the endline evaluation results suggest that the theory of change holds, and that the experiential learning and self-reflection facilitated among faith leaders (and other leaders targeted by the intervention), and their newly developed skills and use of platforms to communicate about VAWG (particularly through FAMA cards), have had a positive impact on community members' knowledge, behaviors and attitudes related to VAWG. There are, however, some gaps. First, while the theory of change makes reference to change in beliefs related to gender inequity, the evaluation suggests that the intervention has been less successful in shifting gender inequitable attitudes. While a focus on messaging related to VAWG has certainly yielded positive results, this messaging may require greater expansion in relation to unequal power relations between men and women in future. Second, while interfaith cooperation, trust and dialogue has emerged as a key outcome at county level, the endline data does not reflect on whether the same interfaith cooperation and dialogue has been strengthened at national level. ECLRD and Episcopal Relief and Development has reported the importance of NFLAC – a national body of interfaith faith leaders – in the planning of Phase 1 and 2, the development of the Faith Leader GBV Toolkit and FAMA cards in Phase 1, and in the sustainability planning for post-Phase 2. It is not clear, however, whether such national-level interfaith dialogue was strengthened during Phase 2, and/or whether it occurred in any space other than NFLAC. Third, the ToC makes reference to faith leaders participating, strengthening and improving national-level communication and accountability. While the endline data does not reflect any such impact, this may be because the intervention did not focus at this level, or because the endline research did not collect the right data at national level.

A summary of the results according to each evaluation criteria is presented in Table 25.

Table 25: Conclusions according to evaluation criteria

Evaluation criteria	Conclusion
<b>Effectiveness</b>	<p>The project results were achieved to a medium level overall, but with clear evidence of improvements in behaviours, knowledge and attitudes being associated with intervention exposure. There were also some wide variations in the extent to which results were achieved across the counties.</p> <p>The intervention appears to have been effective in reducing women’s experience of IPV and NPSV and there are some significant associations between this reduction in violence and exposure to various intervention activities, including participating in faith-based activities where VAWG was addressed, and having seen FAMA cards. A corresponding decrease in men’s perpetration of violence was not observed; however, this may be linked to men’s social desirability bias at baseline, county-level variations, and exposure to intervention activities. While there is evidence of some improvements in attitudes that support violence, particularly among adolescent boys, the intervention has not impacted on gender equitable attitudes overall.</p> <p>Overall, knowledge of VAWG services only improved among adult women and not adult men or adolescent boys and girls; however, knowledge was positively associated with intervention exposure to faith-based activities. Female congregants had better knowledge of services provided by faith leaders, particularly in Bong, but there was a decrease at endline in the proportion of survivors who accessed help from a faith leader. While support from faith leaders was perceived to be helpful overall, this was much less so in Grand Gedeh.</p> <p>The findings related to actors speaking out suggest that while there has been a small reduction in faith leaders speaking out publicly against VAWG, this was largely driven by a reduction in Grand Gedeh. Nevertheless, there was an increase in congregants having heard faith leaders speak out, and in perceptions that faith leaders were working to stop VAWG, but these improvements were not found in all counties and only small improvements were observed in Grand Gedeh compared with the other counties. The proportion of youth faith leaders, school leaders and youth group members reporting publicly speaking out increased overall across the counties.</p> <p>The project appears to have been effective in institutionally strengthening EPISCOPAL RELIEF &amp; DEVELOPMENT and ECLRD’s sustainable response to crises, with the implementation of a number of financial and project management systems having clear positive influence on ways of working.</p>
<b>Impact</b>	<p>There is strong evidence from both the quantitative and qualitative data that the project has contributed to reducing VAWG, but it is clear that VAWG still persists, and to a greater extent in some counties (e.g., Rivercess) than others. The survey data shows some important associations between violence reduction and congregants’ exposure to faith-based activities and other activities supported by the project, including FAMA cards, and the qualitative data also supports these associations. The qualitative data also</p>

	<p>suggests that there has been positive impact on gender equality and women’s empowerment, most visible through the multiple reports of women stepping into leadership roles in their community, and reports that men are supporting women more with domestic labour and other activities stereotypically associated with women. However, the survey data also suggests that there have been no significant improvements in congregants’ gender equitable attitudes, despite some positive improvements in attitudes related to violence, including men and boys’ support of rape myths.</p> <p>The evaluation has identified an important, positive, unintended impact of the project: the bringing together of Christian and Muslim faith leaders and communities, and the strengthening of interfaith collaboration. Participants stated that this interfaith collaboration was unheard of in the past, and has strengthened social cohesion in communities. ECLRD was reported to have been instrumental in supporting and facilitating this process.</p> <p>There is evidence that the project’s second grant had a positive influence on the implementation and impact that EPISCOPAL RELIEF &amp; DEVELOPMENT and ECLRD was able to have. The second grant enabled the project to expand to new locations, and more intentionally engage female faith leaders and youth leaders. Phase 2 also saw the expansion of advocacy work and more activities specifically targeting men.</p>
<b>Relevance</b>	<p>The relevancy of the achieved results to the needs of women and girls is reflected in the very strong request for continuation of project implementation in the target communities, as well as extension of the intervention to other communities and counties. Interview and focus group participants believe the intervention is relevant to the needs of their communities, and to women and girls especially, as it is able to reduce VAWG. The request for the intervention to continue (so that it can fully eradicate VAWG in the target communities) and expand (so that it can reduce and eradicate VAWG in all communities) is testament to its relevance.</p>
<b>Efficiency</b>	<p>The project was efficiently and cost-effectively implemented, for a number of reasons: 1) Despite no-cost extensions (totalling 15 months), as well as the challenges of implementation in an economically unstable country, the project funds were carefully managed to last over a full four years; 2) Innovative systems were developed to enable effective financial management in these challenging settings, including a mobile money transfer platform and new financial management software; 3) the project as also able to source additional funding and negotiate budget reallocations to deal with the challenges of COVID-19; and 4) project implementation was able to adapt to the impact of COVID-19, including lockdowns, and adjust activities.</p>
<b>Sustainability</b>	<p>EVAWG activism is viewed as having increased due to project implementation, with qualitative fieldwork reporting an overall increased awareness of and resistance to VAWG, an increase in different community spaces that discuss VAWG, increased reporting of VAWG, and an increase in community systems that address VAWG. Various different project activities have been implemented, experienced and/or witnessed, with the FAMA cards perceived as very impactful. By those involved in EVAWG activism, it was described as challenging work, with resistance experienced.</p>

	<p>Qualitative fieldwork showed that participants believe the project results are sustainable, for three reasons: 1) positive, transformational change of many people in the targeted communities; 2) individuals mobilised as activists by the intervention believe that they will continue teaching and spreading what they've learnt; and 3) measure have been put in place to ensure sustainability, e.g. customary community laws. Despite belief in the sustainability of results, there is a strong request for ECLRD to continue implementation, as 1) longer-term engagement in targeted communities are needed; 2) engagement with more communities are needed; and 3) volunteerism will be challenged without ECLRD support, with especially lack of finances challenging volunteer activities. ECLRD and Episcopal Relief &amp; Development did consider sustainability from the outset of the project, identifying a number of specific sustainability measures, as well as developing new ones during project implementation.</p> <p>The two-year Spotlight Grant facilitated key investments in strengthening the capacity of ECLRD to operate under complex conditions. Infrastructural improvements enabled better functioning and reporting at county and national level, while several investments in EPISCOPAL RELIEF &amp; DEVELOPMENT and ECLRD staff led to improved relationships, morale and accountability structures. It also enabled the implementation of qualitative research on the impact of COVID-19 on women and girls in the four project counties, as well as help address the most direct COVID-19 challenges affecting project implementation.</p>
<p><b>Knowledge generation</b></p>	<p>Four practices/learnings from project implementation emerged as particularly important: 1) FAMA cards as very usable, impactful and highly recommended; 2) the role and engagement of faith leaders as key actors and activists; 3) the interfaith approach of the project, which led to interfaith collaboration; and 4) awareness-raising about VAWG and gender equality as a crucial activity.</p> <p>Similar EVAWG interventions are advised to 1) intentionally plan for sustainability already from inception phase; 2) consistently and continuously train and sensitise local stakeholders, and develop the infrastructure to rapidly on-board new volunteers; 3) use an experiential learning model to allow an iterative process of self-discovery that enables attitude and behaviour change; 4) intentionally communicate and disseminate project learning and achievements to a wider audience on the role of faith in addressing VAWG; and 5) build flexibility into project design.</p> <p>A research piece was commissioned to investigate the impact of COVID-19 on women and girls in the target counties. The research found that the men and women had been differently affected by COVID-19, because of unequal access to ownership and control of resources. These two factors, in turn, created a gender gap in resources and widened the poverty gap, disrupted education, increased exposure to gender-based and intimate-partner violence, and reduced access to health services. Staff and faith leaders identified COVID-19 as a significant challenge to project impact, which led to several implementation adaptations being made.</p>

<p><b>Gender equality and human rights</b></p>	<p>ECLRD and Episcopal Relief &amp; Development staff identify human rights approaches as incorporated in several ways in the project: 1) in the way activities were implemented, emphasising voluntary participation; 2) in the aim of the project and the target beneficiary group, which recognises that women and girls' rights are being violated; 3) by working for the benefit of all women and girls, not prioritising any single culture or religion; and 4) through its increased support (during project implementation) of the most marginalised within communities. At the same time, through intentionally engaging with and through faith groups, the project had to navigate certain religious convictions that counter a human rights approach.</p> <p>By focusing on decreasing VAWG and increasing women's access to services, the project can be described as designed as a gender responsive programme. Project staff felt gender responsive approaches were present in the project's intentional engagement of women in equal amounts as to men, through project activities addressing gender roles and gender equality, and by creating gender-specific safe spaces. In response to the baseline research, the project also intentionally worked to include more women, especially women faith leaders. FAMA cards, women-only spaces and the experiential approach all are aimed at allowing engagements that centre women and their experiences. However, the survey research did show that exposure to programme activities (including faith-based activities and FAMA card dialogues) seems to have had positive impacts on men and boys' gender equitable attitudes, but less so for women and girls. This suggests that it may be needed to more intentionally create approaches, techniques and strategies specifically for use with women.</p>
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## 5.2 Recommendations

The endline evaluation has raised a number of important findings from which recommendations can be made for future programming (see Table 26).

Table 26: Recommendations

Evaluation criteria	Recommendations	For action by
<p><b>Effectiveness</b></p>	<p><b>Reflecting on non-violent attitudes versus gender equitable attitudes</b></p> <p>At baseline, a key recommendation was made to ensure that the programme focused on addressing gender inequitable attitudes as well as attitudes that justify or support violence. This recommendation continues to be relevant at endline given the finding that no impact on gender equitable attitudes was observed, even when some improvements were seen in attitudes that support violence. Non-violent attitudes do not automatically coincide with gender equitable attitudes, and more intentional work needs to be done to promote gender equality and attitudes that genuinely support gender equality. It is therefore recommended that the intervention programming focuses directly on addressing gender</p>	<p>ECLRD and Episcopal Relief &amp; Development</p>

	<p>inequitable norms and attitudes, and not only indirectly by promoting non-violence. This would be in line with global evidence that shows an association between women's IPV experience and men's IPV perpetration and gender inequitable attitudes (Fleming et al. 2015; Jewkes et al. 2017).</p>	
	<p><b>Continue and expand</b> Program participants and beneficiaries experienced the intervention as effective in reducing VAWG in their communities. Considering its impact, the intervention should continue and be expanded to other communities in the target counties, as well as other counties in Liberia.</p>	ECLRD and Episcopal Relief & Development
	<p><b>Engaging faith leaders</b> The project's Theory of Change should be replicated, as the project has shown that the role and engagement of faith leaders as key actors and activists in project implementation is effective. Engaging with faith leaders leverages the unique reach, authority, influence and commitment of faith leaders and brings a longevity to the project messaging. In involving faith leaders, it is important to engage in a process of discussion and facilitation, where faith leaders are not attacked and criticised, but rather accompanied in a journey where they themselves realise the need for personal and community-wide change. This approach was developed and followed in the Faith leaders GBV Toolkit and workshops and should be continued.</p>	ECLRD and Episcopal Relief & Development  Broader EVAWG field
<b>Impact</b>	<p><b>Interfaith approach</b> Somewhat unexpectedly for Episcopal Relief &amp; Development and ECLRD, the interfaith approach followed in the intervention emerged as one of its main successes, as reported by faith leaders and community members, but also ECLRD staff members and a national partner. While the intention was to engage with both Christian and Muslim faith leaders, so as to ensure that the whole community was reached, the trust, collaboration and relationships that emerged from jointly training these leaders has emerged as a major contribution of the project. With faith leaders from different faiths learning to trust each other and work together, they model it to the community, with greater interfaith harmony and trust resulting. It is recommended that this interfaith approach be continued in future. This is an approach that should also be considered in other settings by other EVAWG organizations working with faith groups.</p>	ECLRD and Episcopal Relief & Development  Broader EVAWG field
	<p><b>Longitudinal tracking</b> The research has shown that there has been attitudinal and behaviour change in the target communities, although not necessarily uniformly across all counties and gender and age groups. It is recommended that longitudinal research is</p>	ECLRD and Episcopal Relief & Development

	<p>conducted that studies the longer term sustainability of this change. Understanding what drives and leads to longer-term sustainable attitudinal and behaviour change in VAWG interventions can be an important part of developing future interventions that have sustainable impact.</p>	
	<p><b>Volunteers and rape myths</b>  The intervention relied heavily on community-based volunteers (mainly faith leaders), who are trained and mentored to become change agents in their communities. From the qualitative research it emerged that, despite the ECLRD trainings and mentoring, certain rape myths centred around women and girls and their behaviours are propagated by some volunteers (e.g. that girls should dress more modestly to ensure that they are not raped). The volunteers espousing these rape myths believe that what they are teaching/preaching will contribute to ending VAWG, and do not realise the harmful impact it has. This highlights the importance of being intentional in identifying the dominant, harmful, stereotypical beliefs around women and girls that indirectly drive VAWG, and to intentionally address these in programming. For example, new FAMA cards can be developed that specifically address these rape myths; and/or the GBV toolkit can be updated for discussion of dominant rape myths. This must be done to avoid volunteers using their platform to propagate these myths, mistakenly believing that it will contribute to ending VAWG.</p>	ECLRD and Episcopal Relief & Development
	<p><b>Mitigating risk in savings groups</b>  The finding that prevalence of men’s IPV perpetration was higher among savings groups members suggests that any future implementation of the intervention should ensure that risks associated with economic programming are analyzed and that any unintended negative impacts (e.g., reinforcement of masculine norms) are both monitored and intentionally targeted in programming.</p>	ECLRD and Episcopal Relief & Development
<b>Relevance</b>	<p><b>Multisectoral engagement</b>  The multisectoral engagement of the project was highlighted as a key strength of the design and implementation, in recognition of the need for multisectoral response in order to end VAWG and assist survivors. This approach should be followed in scaling the intervention and/or in developing interventions in similar contexts.</p>	ECLRD and Episcopal Relief & Development
<b>Efficiency</b>	<p><b>Longer-term funding</b>  The project has illustrated the importance of longer term funding for interventions addressing VAWG at community level. Developing the needed and context-appropriate</p>	Donors

	<p>tools, infrastructure and approaches took almost all of Phase 1 and only towards the end of Phase 1 did the project start to develop momentum towards building impact. This would have been lost without Phase 2, while Phase 2 was able to achieve its outcomes because of the groundwork that was laid during Phase 1. This highlights the importance of longer term funding for programming that aims to transform community attitudes, behaviors and practices related to VAWG.</p>	
<p><b>Sustainability</b></p>	<p><b>Sustainability</b></p> <p>The two phases of the intervention have showcased the importance of longer-term engagement for addressing VAWG. Phase 2 has greatly benefited from the groundwork done during phase 1, and would not have been able to achieve so much without the first phase.</p> <p>At the same time, faith leaders, community members and partners are begging for Episcopal Relief &amp; Development and ECLRD to continue their intervention. This emphasizes the importance of investment in the sustainability of project impacts. While efforts have been made since the inception phase to ensure that project activities can continue once the project comes to an end, it can be questioned whether sustained volunteerism is a realistic expectation in a country such as Liberia, which has severe economic challenges and poverty. Ideally, sustainability measures will ensure that volunteers continue receiving some form of support (mentoring and/or monetary). The possibility of partnership with Cuttington University, which is currently being explored by Episcopal Relief &amp; Development and ECLRD, is arguably a more realistic sustainability measure, for then support and mentoring of faith leaders can be linked to their <i>alma mater</i>.</p>	<p>ECLRD and Episcopal Relief &amp; Development</p>
	<p><b>Importance of investment in the organization itself</b></p> <p>Project funds are usually only for project activities and cannot be used to strengthen or capacitate the implementing organization longer-term. The Spotlight Funding that was awarded to Episcopal Relief &amp; Development and ECLRD was a rare exception, as it allowed for activities solely aimed at the institutional strengthening of ECLRD. These investments, which included very practical things such as project and financial management software and trainings, solar electricity systems, and internet access, not only enabled ECLRD to better implement the project during COVID-19, but has positioned the organization to more effectively do EAWG work longer-term. It is strongly recommended that funders learn from this and also invest in these kinds of ways in organizations, not only specific projects.</p>	<p>UN Trust Fund Donors</p>

	<p><b>Capacity building of staff and volunteers</b> Both time and resources should be allocated to the capacity building of project staff and program volunteers. The project relies fully on the ability and effectiveness of staff and volunteer implementation of project activities, and therefore the investment should be made to ensure they have the requisite skills to function effectively and efficiently.</p>	ECLRD and Episcopal Relief & Development
	<p><b>Develop training-of-trainers module</b> Volunteers, especially faith leaders, were trained with the Faith Leader GBV Toolkit, which was developed during Phase 1 and updated at the start of Phase 2. ECLRD staff conducted these training workshops. It is recommended that a training-of-trainers workshop be developed, where trained volunteers can, in turn, be trained on how to train other faith leaders and community members with the Faith Leader GBV Toolkit. Such a training-of-trainers development can enable better ownership of/by local faith leaders and volunteers, and continuation and sustainability of project activities and impact.</p>	ECLRD and Episcopal Relief & Development
<p><b>Knowledge generation</b></p>	<p><b>FAMA cards</b> During phase 1 of the intervention, FAMA (Facts, Association, Meaning, Action) cards were developed to be used in FAMA Learning Dialogues to facilitate reflection, identification, analysis and decision-making, with some further cards developed during phase 2. These cards contain pictures of what is considered a typical situation in Liberia. The cards incite lively discussions and help the facilitator to facilitate and listen, rather than simply teach.</p> <p>In both the quantitative and qualitative data, FAMA cards emerged as a key success of the intervention. They are experienced as effective in eliciting interactive sessions that lead to new and even transformational understanding amongst those being exposed to the FAMA cards. Exposure to FAMA cards was significantly associated with lower endline prevalence of IPV experience among female congregants and IPV perpetration among male congregants. Furthermore, FAMA cards were identified as being particularly appropriate in the light of low levels of education and literacy. Even SWE group members who were illiterate reported being able to effectively use the FAMA cards to facilitate sessions on VAWG and gender equality.</p> <p>It is therefore recommended that Episcopal Relief &amp; Development and ECLRD continue using FAMA cards in their EVAWG interventions. This is also a learning that should be shared with the broader EVAWG field, emphasising the importance of participatory creation of</p>	<p>ECLRD and Episcopal Relief &amp; Development</p> <p>Broader EVAWG field</p>

	<p>FAMA cards, so that the types of pictures and the situations they represent are appropriate to the context.</p>	
	<p><b>Addressing FGM/C</b>  ECLRD's experiences implementing this project have highlighted the challenges of addressing FGM/C. Due to the complexity of the issue, it cannot simply be an add-on to general GBV programming, but needs specific, appropriate, context-relevant programming. Should ECLRD and Episcopal Relief &amp; Development wish to work on FGM/C prevention, it will require targeted strategies that sensitively engage community and traditional leaders that act as guardians of tradition and culture, and a nuanced understanding of the complexities of culture and identity. It is unlikely that FGM/C can be addressed solely through and with faith leaders and faith communities.</p>	ECLRD and Episcopal Relief & Development
	<p><b>Supporting legitimacy of volunteers within communities</b>  The majority of project volunteers were faith leaders, already known and recognised as leaders within their communities. ECLRD chose not to provide them with badges or t-shirts that identify them as ECLRD volunteers, to ensure that what they are doing is not seen as being done 'for' ECLRD, but is rather seen as a normal, natural part of their leadership position.</p> <p>This rationale stands in tension with the fact that volunteers in all three counties who participated in qualitative fieldwork emphasized the need for a badge or t-shirt, or some sort of identification, which identifies them as having been trained by ECLRD. This is not to have them seen as doing the work 'for' ECLRD, but rather to build community recognition that they have the requisite knowledge and skills to do the sessions and share information. For them, this identification is about having community members recognize the legitimacy of their knowledge and skills, rather than recognizing their leadership.</p> <p>This tension will need to be navigated, especially in the case of volunteers who are not faith leaders. It is recommended that ECLRD and Episcopal Relief &amp; Development engage in consultation with volunteers to identify a solution that suits all parties.</p>	ECLRD and Episcopal Relief & Development
<b>Gender equality and human rights</b>	<p>The project developed and implemented a number of activities (e.g. FAMA cards, women-only spaces and experiential approach) that can be used with both men and women, but (when used with women) allow the centring of women, their experiences and their voices. However, based on the survey findings, it is recommended that specific approaches, techniques and strategies are developed</p>	ECLRD and Episcopal Relief & Development

exclusively and specifically for use with women and girls, based on the assumption that such targeted activities will be better able to reach and influence women and girls.

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## Annex A: Beneficiary data sheet

The table below includes the final project data for beneficiaries reached. The project has reached almost three times as many primary beneficiaries as the target (28,298), and slightly more than twice as many secondary beneficiaries as the target (7300).

	Number of beneficiaries reached	
	At project goal level	At outcome level
<b>Primary beneficiaries</b>		
Women and girls	60,231	---
Women/girl survivors	4190	---
Women and girl leaders	11,433	---
<b>TOTAL NUMBER OF PRIMARY BENEFICIARIES</b>	<b>75,854</b>	---
<b>Secondary beneficiaries</b>		
Men and boys	---	14,056
Others/clergy	---	659
Members of faith-based organizations	---	1125
<b>TOTAL NUMBER OF SECONDARY BENEFICIARIES</b>	---	<b>15,840</b>

## Annex B: Final ToR

# Scope of Work (SOW) for Technical Evaluation Consultant

**A Comprehensive Endline Study for Project in Liberia:**

## **Scaling Up Faith Leaders' Engagement to Prevent and Respond to Violence against Women and Girls (VAWG)**

**Project Duration:** October 1, 2018 – December 31, 2022

### **Background and context**

#### **1.1 Description of the project**

Episcopal Relief & Development, in partnership with the Episcopal Church of Liberia Relief and Development (ECLRD) implemented a second project entitled "Scaling up Faith Leaders Engagement to Prevent and Respond to Violence Against Women and Girls (VAWG)" to continue and expand violence prevention as well as response to women and girl survivors in Liberia. The project was planned for three years and a 14 months of no-cost extension was granted, resulting in a little more than four year project from 10/01/2018 to 12/31/2022.

The previous project was implemented starting in 2015 for three years. The findings and lessons learned from this project guided the effective faith-based methodology of the current project – that included expanding the Faith Leader Toolkit on preventing and responding to Gender-Based Violence (GBV); further developing the facilitation guide to help empower Christian and Muslim faith leaders to speak out against violence against women in their communities and to support survivors more effectively; and expanding and integrating youth engagement work.

Liberia has some of the highest rates of violence against women and girls in the world. The project works to reduce intimate partner violence and increase access to services for survivors in both rural and urban settings. The project works to change attitudes and behavior using the Facts, Association, Meaning and Action Learning (FAMA) methodology and peer-to-peer learning. Sustainability of the project will be ensured through continued engagement with the Inter-Religious Council of Liberia and the Ministry of Gender and Social Protection, as well as the grantee's work to support survivors through services, specifically a safe house in each county.

The overall goal of the project is for women and girls to experience less intimate partner violence and non-partner sexual violence and have increased access to services. The project targeted reaching 35,598 beneficiaries from 54 communities across 14 districts in four counties identified by the Liberian Ministry of Gender, Children & Social Protection based on their lack of access to adequate, available and affordable VAWG prevention and response services. These four counties are: Grand Cape Mount, Rivercess, Bong, and Grand Gedeh.

There are 28,298 direct beneficiaries (24,450 women and girls, 2,733 women/girl survivors, and 1,115 women and girl leaders), and 7,300 secondary beneficiaries (6,927 men and boys, 250 others/clergy, and 123 members of faith-based organizations).

In December 2019, a novel corona virus disease (COVID-19) emerged and quickly spread around the world causing a surge in fatalities. The World Health Organization (WHO) declared a global COVID-19 pandemic on March 11 2020. Since then, over 509 million people have been infected, including over 6 million had died as of April 22 2021.

In Liberia, the COVID-19 pandemic led to government lock down, school closures and restrictions in movement across the country. These measures have a disproportionate impact on vulnerable households, particularly in rural areas with limited access to resources and infrastructure. The project operates in impoverished communities where most beneficiaries are unable to purchase handwashing buckets nor basic hygiene and sanitation material. Women operating in the informal sector are deeply affected by the decrease in economic activities and for beneficiaries who are currently experiencing violence in the home, the restrictions in movement are likely to exacerbate their vulnerabilities.

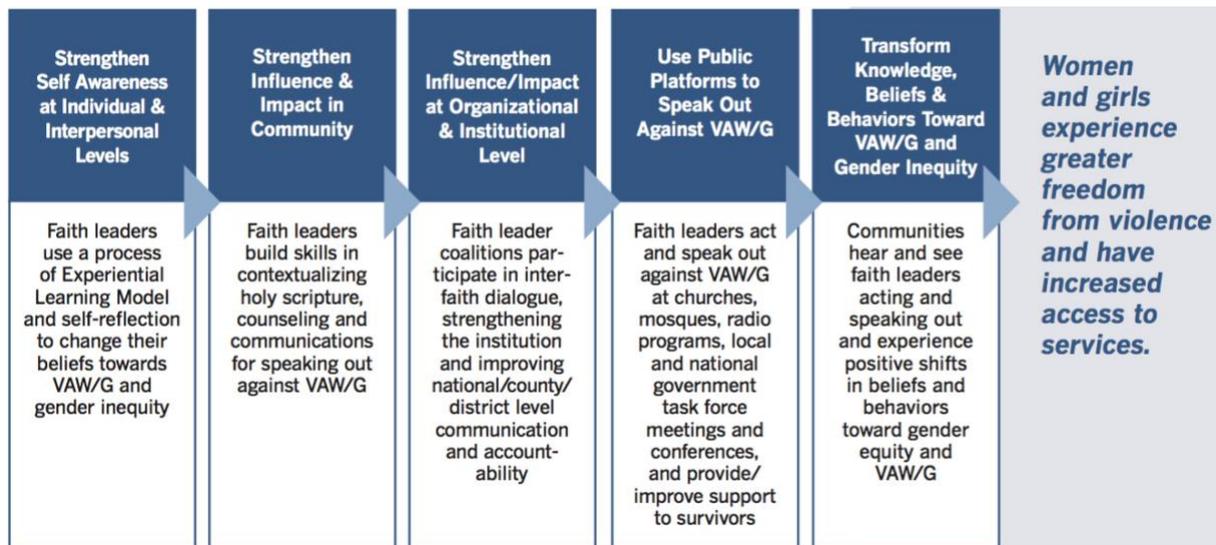
Additionally, government restrictions on gatherings to prevent the spread of the COVID-19 pandemic has forced both Episcopal Relief & Development and ECLRD to rapidly adapt to a new operating environment which has led to the closure of ECLRD offices and a shift to remote working conditions. As a result, and thanks to UNTF's additional funding through the Spotlight grant, ECLRD has been solidifying its capacity to continue delivering high-capacity programming while gathering evidence on the gendered impact of COVID-19 in project communities, developing management systems and structural linkages to increase accountability and the county and community levels, strengthening its administrative and financial management and its monitoring, evaluation and learning system.

## **1.2 Strategy and theory of change (or results chain) of the project with brief description of project goal, outcomes, outputs and key project activities**

### **Strategy and theory of change:**

Episcopal Relief & Development's theory of change developed in the first phase of the project implementation is depicted in Figure 1, with change proposed to happen at a number of different levels, including: strengthening faith leaders' self-awareness and self-reflection about VAWG and gender inequity using an experiential learning model; facilitating faith leaders' influence and impact in their communities by developing their skills in speaking out against VAWG through messaging from scriptures, counselling and other forms of communication; and strengthening the influence of faith leaders at organizational and institutional levels by increasing communication, accountability, as well as inter-faith dialogue. These capacity building activities will lead to faith leaders speaking out publicly against VAWG in different fora and providing improved support to survivors and, subsequently, community members' improved knowledge, beliefs and attitudes associated with VAWG prevention and gender equity. Ultimately, this will lead to women and girls experiencing greater freedom from violence and having increased access to GBV services.

### **Figure 1: Episcopal Relief & Development's theory of change**



The overall goal of this project is for **women and girls** to experience less intimate partner violence and non-partner sexual violence and have increased access to services.

**The Project has 4 key outcomes:**

**Outcome 1:** Faith leaders from churches and mosques increase their work to speak out against VAWG to change cultural norms in their communities.

**Outcome 2:** Youth leaders of Christian and Muslim youth groups (male and female) and school leaders (staff, students, parents) increasingly speak out against violence against women and girls and provide support to survivors.

**Outcome 3:** Muslim and Christian faith communities increase direct support for survivors of violence and advocacy for their rights and access to services.

**Outcome 4:** Episcopal Relief & Development and ECLRD are institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adopting existing interventions to VAWG with a focus on the most vulnerable women and girls.

**Key outputs and activities:**

1. Faith leaders are better equipped to promote VAWG prevention through the use of an updated faith-based toolkit for ending VAWG;
2. Faith leaders increasingly engage in VAWG prevention with families, congregations and communities;
3. Trained lay leader and members of faith groups have an increased understanding of VAWG and actively work to prevent it as well as to support survivors;
4. Secondary school leaders (staff, youth, parents) and community groups increase their actions to prevent VAWG and support survivors;
5. Trained Savings with Education Group leadership and members use behavior change tools (FAMA) and promote School Code of Conduct in their work to prevent VAWG;
6. Muslim and Christian faith leaders have a greater understanding of needed and available GBV services and resources to support women and girls who experience violence;
7. Faith leaders and lay leaders act to reduce violence-related stigma and alleviate practical barriers to survivors accessing services;
8. Men and women in the community have improved gender relationships and reduction in incidents of violence.

### **1.3 The geographic context, such as the region, country and landscape, and the geographical coverage of this project.**

The project is implemented in 4 counties: Grand Cape Mount and Rivercess (the two counties where the project originally started in 2015), Bong and Grand Gedeh. There are a total of 14 districts and 54 communities. The inaccessibility and dispersed nature of many villages in these districts makes engagement by most organizations difficult. These rural areas lack sufficient infrastructure and basic services, have high malnutrition rates and other challenges resulting from high poverty levels and isolation.

### **1.4 Total resources allocated for the intervention, including human resources and budgets (budget need to be disaggregated by the amount funded by the UN Trust Fund and by other sources/donors).**

The total Project budget for the entire project duration across four years is \$2,746,728.

Subtotal UN Trust Fund grant: \$859,381

Subtotal other funding sources: \$1,887,347 (including \$600,000 grant from Islamic Relief USA)

### **1.5 Key partners involved in the project, including the implementing partners and other key stakeholders**

The key partners and stakeholders involved in the implementation of the project are: men and women faith leaders from both national and county levels, youth faith leaders and youth school leaders, Savings with Education Group leaders, and government ministries (Gender, Children and Social Protection, Justice, Education, and Health).

## **Purpose of the evaluation**

### **2.1 Why the evaluation needs to be done**

The project baseline was conducted in March 2019. The endline evaluation is planned for the August 2022 - Feb 2023 period, with the inception report in June. This evaluation will measure project achievements and capture key project learnings for further interventions. The learnings from this evaluation will be useful to the UN Trust Fund, Episcopal Relief & Development, and the Episcopal Church of Liberia Relief and Development (ECLRD) in shaping the design and implementation of future programming.

### **2.2 How the evaluation results will be used, by whom and when**

- a) The evaluation will assess the level of achievements reached in this project against the set targets. This assessment will, in turn, inform if and what further interventions and adaptations may be needed in this region for the project participants to fully realize the project benefits;
- b) Learnings from this project will be shared with key stakeholders;
- c) Key findings and learnings from this project will help shape other projects in the area, and the future of other interventions.

### **2.3 What decisions will be taken after the evaluation is completed**

- a) Planning for the next phase of implementation of the project in Liberia;
- b) Other implementing partners of Episcopal Relief & Development operating in the gender sphere may consider how to incorporate key learnings from this Liberian evaluation into their work.

## **Evaluation objectives and scope**

### **3.1 Scope of Evaluation**

This evaluation will cover little more than four years of the project duration (10/01/2018 to 12/31/2022) and its implementation in four counties (14 districts and 54 communities) targeting 35,598 beneficiaries (28,298 direct + 7,300 secondary beneficiaries). The evaluation scope and

design will be finalized with the Principal Investigator. However, the final evaluation will replicate or be very similar to the baseline assessment. The baseline had a total sample size of 1515 respondents (757 from the Intervention and 758 from the Comparison group) drawn from 4 counties and covering 4 participant types: Women, Men, Girls and Boys.

### 3.2 Objectives of Evaluation

**The evaluation's Objectives are to:**

- a) Evaluate the entire project against the effectiveness, relevance, efficiency, sustainability and impact criteria, as well as the cross-cutting gender equality and human rights criteria;
- b) Identify key lessons and promising or emerging good practices in the field of ending violence against women and girls, for learning purposes.

More specifically the evaluation will:

- a) Measure the extent to which the results at the output, outcome and project goal level have met the targets, and compare and discuss the results against baseline;
- b) Assess the project's impact on changing the gender-dynamics of participating communities, specifically attitudes and beliefs about gender-based violence and the way the project has affected men and women's attitudes and beliefs;
- c) Assess the degree to which gender and power relationships change as a result of the project intervention (including structural and other causes that give rise to violence, inequities, discrimination and unfair power relations);
- d) Assess the fitness of the project design and its implementation processes and gaps;
- e) Identify key lessons learnt and promising practices in ending violence against women and girls.

The evaluation will cover the entire implementation area of the current project.

### Evaluation questions

Evaluation Criteria	Evaluation Question
<p><b>Effectiveness</b>  <i>A measure of the extent to which a project attains its objectives / results (as set out in the project document and results framework) in accordance with the theory of change.</i></p>	<p>To what extent were the intended project goal, outcomes and outputs (project results) achieved and how?</p>
<p><b>Relevance</b>  <i>The extent to which the project is suited to the priorities and policies of the target group and the context.</i></p>	<p>To what extent do the achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls?</p>
<p><b>Efficiency</b>  <i>Measures the outputs - qualitative and quantitative - in relation to the inputs. It is an economic term which refers to whether the project was delivered cost effectively.</i></p>	<p>To what extent was the project efficiently and cost-effectively implemented?</p>
<p><b>Sustainability</b>  <i>A. Sustainability is concerned with measuring whether the benefits of a project are likely to continue after the project/funding ends.</i>   <i>B. Institutional sustainability of Liberian implementing partner organization</i></p>	<p>A. To what extent will the achieved results, especially any positive changes in the lives of women and girls (project-goal level), be sustained after this project ends? Did the project activities and the processes contribute in any way to EVAWG activism more broadly?</p> <p>B. To what extent did the institutional strengthening activities contribute to the organization's adaptability and resilience</p>

	in crisis/emergency humanitarian response
<b>Impact</b> <i>Assesses the changes that can be attributed to a particular project relating specifically to higher-level impact (both intended and unintended).</i>	To what extent has the project contributed to ending violence against women and girls, gender equality and/or women's empowerment (both intended and unintended impact)?
<b>Knowledge generation</b> A. Assesses whether there are any promising practices that can be shared with other practitioners.  <b>Knowledge generation -- continued</b>  B. Assesses whether they are specific project adaptation processes to address disproportionate effects of disaster/crisis on women and girls	A. To what extent has the project generated knowledge, promising or emerging practices in the field of ending VAWG (EVAWG) that should be documented and shared with other practitioners?  What are the learnings from this project for future similar project interventions?  B. Specifically, what was learned about impact of crisis (Covid-19) on gender equity in terms of project adaptation to mitigate negative consequences
<b>Gender Equality and Human Rights</b>	Cross-cutting criteria: the evaluation should consider the extent to which human rights and gender responsive approaches have been incorporated throughout the project and to what extent.

## Evaluation methodology

The evaluation will employ the same mixed-methods approach to data collection and data analysis as the baseline, drawing from the strengths of both qualitative and quantitative methods in order to improve the internal validity of results. After review of the project documents and baseline report, the evaluators would lay out a robust methodology for endline evaluation, including the evaluation design, data sources, data collection methods and analysis plan, sample size and sampling procedures, stakeholders engagement, and the evaluation plan.

The evaluation will draw information from a range of data sources to ensure the reliability of results, reducing biases, and ensuring that the findings are based on the most comprehensive and relevant information possible.

Requirements include:

- a) All the indicators from the project logframe that were used in the baseline shall be included;
- b) Methodology and tools should be in alignment with the baseline study to the extent feasible to ensure results are comparable;
- c) The evaluation process should be inclusive and participatory so as to ensure that the voice and perceptions of the most vulnerable participants are accurately captured;
- d) Data collected should be sex-disaggregated wherever possible and examined for differences of project effects on men and women, as well as youth;
- e) The evaluation process should be respectful to stakeholders in ensuring dignity, confidentiality and safety by adhering to recommendations from WHO's Ethical and Safety Recommendations for Research on Domestic Violence Against Women.

- f) The evaluation process should adhere to local recommended standards of health and safety for evaluators team as well as for project beneficiaries with which the evaluators team would interact.

### Evaluation ethics

The evaluator/s must put in place specific safeguards and protocols to protect the safety (both physical and psychological) of respondents and those collecting the data as well as to prevent harm. This must ensure the rights of the individual involved are protected and participation in the evaluation does not result in further violation of their rights. **The evaluator/s must have a plan in place to:**

- Protect the rights of respondents, including privacy and confidentiality;
- Elaborate on how informed consent will be obtained and to ensure that the names of individuals consulted during data collection will not be made public;
- If the project involves children (under 18 years) the evaluator/s must consider additional risks and need for parental consent;
- The evaluator/s must be trained in collecting sensitive information, specifically data relating to violence against women, and select any members of the evaluation team on these issues;
- Data collection tools must be designed in a way that is culturally appropriate and does not create distress for respondents;
- Data collection visits should be organized at the appropriate time and place to minimize any risk to respondents;
- The interviewer or data collector must be able to provide information on how individuals in situations of risk can seek support (i.e., referrals to organizations that can provide counseling support).

### Key deliverables of evaluators and timeframe

No.	Deliverable	Description	Deadline
1	Evaluation Inception Report	The evaluators will review the relevant project documents, including the UN Trust Fund guidance documents, baseline data collection tools, baseline report and periodic progress reports, and work with ECLRD and Episcopal Relief & Development key contacts to understand the project, refine the scope, focus, approaches and methods. The reports need to meet the minimum requirements and structure* specified in this guideline for UN Trust Fund's review and approval. The evaluation reports shall be written and delivered in English.	By Oct 31, 2022
2	Draft Evaluation Report	The Draft Report needs to meet the minimum requirements and structure specified in this guideline for UN Trust Fund's review and approval.  <i>Presentation of draft report</i> - the draft report shall be presented to Episcopal Relief & Development, ECLRD and the stakeholders (to be organized by Episcopal Relief & Development)	By Jan 31, 2023

3	Final Evaluation Report	<p>The final report needs to meet the minimum requirements and structure specified in this guideline for UN Trust Fund's review and approval.</p> <p>The report must contain an executive summary, a list of recommendations drawn based on evidence, and include all the indicator values from baseline and endline in tabular form for comparison, and discussion on the changes.</p> <p><i>Final Data sets</i> - all the qualitative and quantitative final datasets (processed and analysis ready) along with indicator calculation details are to be submitted with the final report.</p>	By Feb 28, 2022
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\* UNTF guidelines and report structures (inception, draft and final reports) will be available to the evaluators. On submission of each of these deliverables, Episcopal Relief & Development will seek and consolidate the feedback from stakeholders and share back with the evaluators within 5-10 business days.

### Timeline of the entire evaluation process

Stage of Evaluation	Key Task	Responsible	Number of working days required	Timeframe By:
Inception stage	Briefings of evaluators to orient the evaluators	Evaluation Task Manager		Sept 22
	Desk review of key documents	Evaluator/s		Oct 10
	Finalizing the evaluation design & methods; Draft report	Evaluator/s		
	Submit draft <b>Inception report</b>	Evaluator/s		Oct 11
	Review <b>Inception Report</b> and provide feedback	Evaluation Task Manager, Stakeholder Group and UN Trust Fund	5 working days	Oct 12-18
	Incorporating comments and revising the <b>inception report</b>	Evaluator/s		
	Submitting final version of <b>inception report</b>	Evaluator/s		Oct 26
	Review final <b>Inception Report</b> and approve	Evaluation Task Manager, Stakeholder Group and UN Trust Fund	5 working days	Oct 27 - 31
Data collection and analysis stage	Desk research; gather input on evaluation questions to be added to data collection tools; finalize data collection tools	Evaluator/s		Nov - Dec
	In-country technical mission for data collection (visits to	Evaluator/s		Nov - Dec

	the field, interviews, questionnaires, etc.)			
<b>Synthesis and reporting stage</b>	Analysis and interpretation of findings	Evaluator/s		Jan 23, 2023
	Preparing a <b>first draft report</b>	Evaluator/s		
	Presentation of draft report	Evaluator/s		Jan 24
	Review of the draft report with key stakeholders for quality assurance	Evaluation Task Manager, Stakeholder Group and UN Trust Fund	10 working days	Jan 25 - Feb 07
	Consolidate comments from all the groups and submit the consolidated comments to evaluation team	Evaluation Task Manger		
	Incorporating comments and preparing <b>second draft evaluation report</b>	Evaluator/s		Feb 13
	Final review and approval of report	Evaluation Task Manager, Stakeholder Group and UN Trust Fund	5 working days	Feb 14 - 20
	Final edits and submission of the <b>final report</b>	Evaluator/s		By Feb 28, 2023

## Evaluation team composition and required competencies

### 9.1 Evaluation team composition and roles and responsibilities

The evaluation team will consist of one team lead (Principal Evaluator) with National Consultant (if needed) and Field Enumerators (the specific number is to be determined with the principal evaluator once contracted).

The Principal Evaluator will be responsible for undertaking the evaluation from start to finish and for managing the evaluation team for data collection and analysis, as well as report drafting and finalization in English, ensuring the quality of data and interpretations in the report.

The National Consultant will coordinate contracting Field Enumerators and making arrangements with project staff for data collection. Field Enumerators will be hired from local communities who will be engaged in qualitative and quantitative data collections under the supervision of the National Consultant and the Principal Evaluator.

### 9.2 Required Competencies

The Principal Evaluator should have:

- At least 10 years of experience in designing and conducting baseline/endline using mixed methods;
- Expertise in gender and human-rights based approaches to evaluation and issues of violence against women and girls;
- Experience with program design and theory of change, gender-responsive evaluation, participatory approaches and stakeholder engagement;

- Expertise in mobile data collection and data analysis;
- Experience with evaluation of faith-based approaches;
- Experience in collecting and analyzing quantitative and qualitative data as well as data visualization;
- In-depth knowledge of gender equality and women's empowerment;
- A strong commitment to delivering timely and high-quality results;
- A strong leadership and management track record, as well as interpersonal and communication skills to help ensure that the evaluation is understood and used; and
- A strong cultural competency, and local knowledge, in the project locations.

### **Management arrangement of the evaluation**

The evaluators and the Evaluation Task Manager will have key roles as illustrated below.

The Principal Evaluator will:

- Coordinate with the Evaluation Task Manager from Episcopal Relief & Development on any key information needed;
- Discuss the plan, progress or any adjustments needed with the Evaluation Task Manager;
- Coordinate the field activities and manage the evaluation team; and
- Be responsible for all the project deliverables within agreed upon timeframe.

Episcopal Relief & Development's Evaluation Task Manager (Prakash Karn, Senior Manager for Monitoring, Evaluation, and Learning) will:

- Be the single point of contact for the evaluators to manage this project evaluation;
- Coordinate with internal team (Episcopal Relief & Development) and the implementing partner organization (ECLRD) to provide:
  - Any information needed by the evaluators;
  - Discuss and approve any adjustments needed in the evaluation plan (seek the UN Trust Fund approval, as needed);
  - Consolidate internal team and stakeholder feedback and share feedback with consultants on inception report, draft report and final report.

### **Budget**

Evaluation team should prepare a detailed budget including estimated number of days for each member involved, per day rate, and any other associated costs in a tabular form. This should also include the local/field level staff and other expenses such as enumerators, transcription services, transportation etc.

### **Annexes**

- List of key stakeholders/institutions to be consulted
- List of suggested project sites to be visited
- Documents to be consulted
  - Relevant national strategy documents
  - The project document and theory of change (proposal)
  - The Results and Resources Framework
  - Baseline Report
  - Any data collection tools, monitoring plans, indicators and collected data
  - Progress and annual reports of the project
  - Reports from previous evaluations of the project and/or the organization, if any.]

- Structure for the inception report (see Annex C in the UN Trust Fund guidelines)
- Required structure before the final report (see Annex E in the UN Trust Fund guidelines)

### **Application process**

*Note: this section will be prepared for the version to be posted, per UN Trust Fund and Episcopal Relief & Development's requirements.*

Application is open for evaluators/firms with preference given to candidates based in Liberia and the Africa region.

## Annex C: Evaluation matrix

Eval criteria	Evaluation questions	Corresponding Episcopal Relief & Development sub-objectives	Methods
Effectiveness	1. To what extent were the intended project goal, outcomes and outputs (project results) achieved and how?	1. Measure the extent to which the results at the output, outcome and project goal level have met the targets, and compare and discuss the results against baseline	<ul style="list-style-type: none"> <li>● Baseline &amp; Endline survey with male &amp; female congregants</li> <li>● Baseline &amp; Endline survey with faith, youth and school leaders, and youth group members</li> <li>● Desk review</li> <li>● FGDs/KIIs with staff</li> <li>● KIIs with stakeholders/partners</li> <li>● FGDs with faith leaders (male &amp; female)</li> <li>● FGDs with youth leaders (male &amp; female)</li> <li>● FGDs with congregants (male &amp; female)</li> <li>● FGDs with congregants (boy &amp; girl)</li> <li>● FGDs with Savings and Education Group Leaders</li> <li>● FGDs with Savings and Education Group members</li> </ul>
	2. What is the fitness of the project design and its implementation processes and gaps?	4. Assess the fitness of the project design and its implementation processes and gaps	<ul style="list-style-type: none"> <li>● Desk review</li> <li>● KIIs with partners</li> <li>● KIIs/FGDs with staff</li> </ul>
Impact	3. To what extent has the project contributed to ending violence against women and girls, gender equality and/or women's empowerment (both intended and unintended impact)?	2. Assess the project's impact on changing the gender-dynamics of participating communities, specifically attitudes and beliefs about gender-based violence and the way the project has affected men and women's attitudes and beliefs.	<ul style="list-style-type: none"> <li>● Baseline &amp; Endline survey with male &amp; female congregants</li> <li>● Baseline &amp; Endline survey with faith, youth and school leaders, and youth group members</li> <li>● FGDs with FLs (male &amp; female)</li> <li>● FGDs with youth leaders (male &amp; female)</li> <li>● FGDs with congregants (male &amp; female)FGD with child congregants (boys &amp; girls)</li> </ul>

		3. Assess the degree to which gender and power relationships change as a result of the project intervention (including structural and other causes that give rise to violence, inequities, discrimination and unfair power relations)	<ul style="list-style-type: none"> <li>● FGDs/KIIs with staff</li> <li>● KIIs with duty bearers/stakeholders</li> <li>● KIIs with partners</li> <li>● FGDs with Savings with Education Group Leaders</li> <li>● FGDs with Savings with Education group members</li> </ul>
	4. How has having a second grant affected the implementation and impact the project/organization was able to have?		<ul style="list-style-type: none"> <li>● FGDs with faith leaders</li> <li>● FGDs with congregants (male &amp; female)</li> <li>● FGDs with congregants (boys &amp; girls)</li> <li>● FGDs with Savings Group Leaders</li> <li>● FGDs with Savings Group Members</li> <li>● KII with ECLRD &amp; Episcopal Relief &amp; Development staff</li> <li>● FGD with ECLRD staff</li> </ul>
Relevance	5. To what extent do the achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls?	N/A	<ul style="list-style-type: none"> <li>● KIIs with national/district duty bearers/ stakeholders</li> <li>● FGDs/KIIs with staff members</li> <li>● Desk review of M&amp;E materials</li> </ul>
Efficiency	6. To what extent was the project efficiently and cost-effectively implemented?	N/A	<ul style="list-style-type: none"> <li>● Desk review (budget docs, beneficiary numbers, M&amp;E docs)</li> <li>● KIIs with partners</li> <li>● KIIs/FGDs with staff</li> </ul>
Sustainability	7. To what extent will the achieved results, especially any positive changes in the lives of women and girls (project-goal	N/A	<ul style="list-style-type: none"> <li>● KIIs/FGDs with staff</li> <li>● National-level KIIs</li> <li>● FGDs with FLs (male &amp; female)</li> <li>● FGDs with youth leaders (male &amp; female)</li> <li>● FGDs with congregants (male &amp; female)</li> <li>● FGDs with Savings with Education Group Leaders</li> </ul>

	level), be sustained after this project ends?		<ul style="list-style-type: none"> <li>● FGDs with Savings with Education group members</li> <li>● FGDs with boy congregants</li> <li>● FGDs with girl congregants</li> <li>● County-level KIIs</li> </ul>
	8. Did the project activities and the processes contribute in any way to EVAWG activism more broadly?	N/A	<ul style="list-style-type: none"> <li>● FGDs with FLs (male &amp; female)</li> <li>● FGDs with youth leaders (male &amp; female)</li> <li>● Desk review of M&amp;E</li> <li>● KIIs/FGDs with staff</li> </ul>
	9. To what extent did the institutional strengthening activities contribute to the organization's adaptability and resilience in crisis/emergency humanitarian response	N/A	<ul style="list-style-type: none"> <li>● KIIs/FGDs with staff</li> <li>● Desk review</li> </ul>
Knowledge generation	10. To what extent has the project generated knowledge, promising or emerging practices in the field of ending VAWG (EVAWG) that should be documented and shared with other practitioners?	5. Identify key lessons learnt and promising practices in ending violence against women and girls.	<ul style="list-style-type: none"> <li>● KIIs/FGDs with staff</li> <li>● FGDs with FLs (male &amp; female)</li> <li>● FGDs with youth leaders (male &amp; female)</li> <li>● FGDs with congregants (male &amp; female)</li> <li>● FGD with child congregants (boys &amp; girls)</li> <li>● FGDs with Savings with Education Group Leaders</li> <li>● FGDs with Savings with Education group members</li> </ul>
	11. What are the learnings from this project for future similar project interventions?	N/A	<ul style="list-style-type: none"> <li>● KIIs/FGDs with staff</li> <li>● Desk review</li> </ul>
	12. Specifically, what was learned about impact of crisis (Covid-19) on gender equity in	N/A	<ul style="list-style-type: none"> <li>● KIIs/FGDs with staff</li> <li>● Desk review</li> <li>● FGDs with male faith leaders</li> </ul>

	terms of project adaptation to mitigate negative consequences		<ul style="list-style-type: none"> <li>● FGDs with female faith leaders</li> </ul>
Gender Equality & Human Rights (cross-cutting criteria)	13. To what extent have human rights approaches been incorporated throughout the project?	N/A	<ul style="list-style-type: none"> <li>● KIIs/FGDs with staff</li> <li>● Desk review</li> </ul>
	14. To what extent have gender responsive approaches been incorporated throughout the project?	N/A	<ul style="list-style-type: none"> <li>● KIIs/FGDs with staff</li> <li>● Desk review</li> </ul>

## Annex D: Tabulations of results

### Annex D1: Results framework matrix

Project Goal and Outcomes	Indicators	Quantitative methods	Qualitative methods	Desk review
Project Goal: Women and girls to experience less intimate partner violence and non-partner sexual violence and have increased access to services.	1. % of congregation members who report changes in their attitudes, behavior and practices about VAWG as a result of their participation in faith-based activities (marriage preparation, retreat and counselling)	Surveys with male and female adolescent and adult congregants		Annual reports to UN Trust Fund
	2. % of congregation members (women, girls, men and boys) who know how to access support and referral services for women and girl survivors.	Surveys with male and female adolescent and adult congregants		Annual reports to UN Trust Fund
	3. % of congregation members (women and girls) who report feeling safer from intimate partner and non-partner sexual violence	Surveys with male and female adolescent and adult congregants		Annual reports to UN Trust Fund
Outcome 1: Faith leaders (i.e. pastors and imams) from churches and mosques increase their work to speak out against violence against women and girls (VAW/G) and to change cultural norms in their communities	1.1. % of Faith Leader who report publicly speaking out against VAWG in the past year at various platforms (Sunday/Friday sermons, retreats/crusades, festivities).	Surveys with male and female faith leaders	FGDs with male faith leaders, female faith leaders, male youth leaders, female youth leaders, male congregants, female congregants, boy congregants, girl congregants, Savings and Education Group Leaders, Savings and Education Group members	Annual reports to UN Trust Fund
	1.2. % of congregation members who have heard at least one Faith Leaders member publicly speak out against VAWG in the past year	Surveys with male and female adolescent and adult congregants	FGDs with male congregants, female congregants, boy congregant, girl congregants, Savings and Education Group Leaders, Savings and Education Group members	Annual reports to UN Trust Fund

	1.3. % of women and girl congregation members who believe that Faith Leaders are actively working to end VAWG	Surveys with male and female adolescent and adult congregants		Annual reports to UN Trust Fund
Outcome 2: Youth leaders of Christian and Muslim youth groups (i.e. male and female) and school leaders (i.e. staff, students, parents) increasingly speak out against violence against women and girls and provide support to survivors.	2.1. % of trained faith youth group leaders who report publicly speaking out against GBV during the past year.	Surveys with youth faith leaders	FGDs with male faith leaders, female faith leaders, male youth leaders, female youth leaders, male congregants, female congregants, boy congregants, girl congregants, Savings and Education Group Leaders, Savings and Education Group members	Annual reports to UN Trust Fund
	2.2. % of faith youth group members who report that they have spoken out and/or taken action against GBV during the past year	Surveys with youth group members	FGDs with male faith leaders, female faith leaders, male youth leaders, female youth leaders, male congregants, female congregants, boy congregants, girl congregants, Savings and Education Group Leaders, Savings and Education Group members	Annual reports to UN Trust Fund
	2.3. % of trained school leaders who have spoken on prevention of VAW/G and support for survivors during the past year	Surveys with school leaders	FGDs with male faith leaders, female faith leaders, male youth leaders, female youth leaders, male congregants, female congregants, boy congregants, girl congregants, Savings and Education Group Leaders, Savings and Education Group members	Annual reports to UN Trust Fund
Outcome 3: Muslim and Christian faith communities increase direct support for survivors of violence and advocacy for their rights and access to services.	3.1. % of women and girls who have learned about which GBV support services are available from Faith Leaders and lay leaders.	Surveys with female adolescent and adult congregants		Annual reports to UN Trust Fund
	3.2. % of cases registered by GBV support services that show referral from trained faith leaders and lay leaders.	Project monitoring data		Data to be derived from GBV registries, obtained from government agencies

	3.3. % of women and girls church and mosque members who had sought support from trained clergy and lay leaders in the past year and reported positive experiences	Surveys with female adolescent and adult congregants		Annual reports to UN Trust Fund
Outcome 4: Episcopal Relief & Development and ECLRD are institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adapting existing interventions to EAW/G with a focus on the most vulnerable women and girls.	4.1. Existence of a new system that improves the efficiency and accountability of the organization (e.g., accounting, procurement, financial management system).		FGD with ECLRD staff KIIs with ECLRD staff	“The gendered Impact of COVID-19 on Women and Girls in Liberia” Annual reports to UN Trust Fund
	4.2. Number of ECLRD staff who use the new digitalized data collection and management system for data storage, reporting, evidence gathering and learning.		FGD with ECLRD staff KIIs with ECLRD staff	Annual reports to UN Trust Fund
	4.3. Number of faith leaders (women) who report using participatory (qualitative) tools with privacy protocols in place for evidence gathering on gender-based violence using virtual or physical platforms.		FGDs with female faith leaders	Annual reports to UN Trust Fund
	4.4. Number of faith leaders that are able to use safe communication methods and privacy protocols using the tools (WhatsApp, internet and smart phones) that are available to them.		FGDs with male faith leaders and female faith leaders	Annual reports to UN Trust Fund

## Annex D2: Baseline and endline quantitative results

Project Goal and Outcomes	Indicators	Baseline survey values	Endline survey values	Direction of impact	County level variations
Project Goal: Women and girls to experience less intimate partner violence and non-partner sexual violence and have increased access to services.	1. % of congregation members who report changes in their attitudes, behaviors and practices about VAWG as a result of their participation in faith-based activities (marriage preparation, retreat and counselling)	Overall attitudinal score: Women 59.4%, girls 57.2%; Men 65.7%, boys 60.5%	Overall attitudinal score: Women 64.7%, girls 62.9%; Men 74.9%, boys 71.1%	Positive impact among all congregant groups in intervention group, but also positive impact in comparison group. Only statistically significant finding is improvement among adolescent boys in intervention group.	Improvement in overall attitudes in Bong and Grand Gedeh and no change in Grand Cape Mount and Rivercess.
		Any past year perpetration IPV: Men 26.9%, boys 30.2% Any past year perpetration NPSV: Men 1,5%, boys 0,6%	Any past year perpetration IPV: Men 26.7%, boys 22,2% Any past year perpetration NPSV: Men 1%, boys 1,4%	IPV: No change among men, but positive impact among boys in intervention group, with positive impact also observed in the comparison group for both men and boys. NPSV: No change among men or boys in intervention group, but positive impact in the comparison group for both men and boys.	IPV increased in Bong, reduced in Grand Cape Mount and Grand Gedeh, and reduced slightly in Rivercess.
	2. % of congregation members (women, girls, men and boys) who know how to access support and referral services for women and girl survivors.	Women 47,8%, girls 40,5%; Men 84%, boys 63,4%	Women 86%, girls 78,8%; Men 73,6%, boys 81,2%	Positive impact for all congregant groups, except for men where there is negative impact. But there is positive impact for all groups in the comparison group.	Knowledge increased in Bong for all groups, except for adult men whose knowledge has reduced. Knowledge increased in Grand Cape Mount for all groups. Knowledge increased in Grand Gedeh for women and girls, stayed the same for boys and reduced for men. Knowledge increased in Rivercess for women and girls, reduced for boys and stayed the same for men.

	3. % of congregation members (women and girls) who report feeling safer from intimate partner and non-partner sexual violence	Any past year experience IPV: Women 40.5%, girls 34.2% Any past year experience NPSV: Women 0,9%, girls 4,6%	Any past year experience IPV: Women 33%, girls 43,6% Any past year experience NPSV: Women 7,6%, girls 3,2%	IPV: Negative impact among adolescent girls and positive impact among women in intervention group, with negative impact observed in the comparison group for both adolescent girls and women. NPSV: No impact on NPSV among adolescent girls, and negative impact among women in intervention group, with negative impact observed among both adolescent girls and women in the comparison group.	IPV reduced in Bong and Grand Cape Mount, stayed the same in Grand Gedeh, and increased in Rivercess.
Outcome 1: Faith leaders (i.e. pastors and imams) from churches and mosques increase their work to speak out against violence against women and girls (VAW/G) and to change cultural norms in their communities	1.1. % of Faith Leader who report publicly speaking out against VAWG in the past year at various platforms (Sunday/Friday sermons, retreats/crusades, festivities).	Speak out often: 58.3%	Speak out often: 50%	Negative impact	Speaking out often increased in Bong, decreased in Grand Gedeh and stayed the same in Grand Cape Mount and Rivercess
	1.2. % of congregation members who have heard at least one Faith Leaders member publicly speak out against	Women 54,8%, girls 49,7%; Men 71,5%, boys 60,4%	Women 72,4%, girls 69,9%; Men 83,8%, boys 87,5%	Positive impact	Having heard FLs speak out increased among male and female congregants in Bong, Grand Cape Mount and Grand Gedeh, and increased among male congregants in Rivercess but no change observed among female congregants in Rivercess.

	VAWG in the past year				
	1.3. % of women and girl congregation members who believe that Faith Leaders are actively working to end VAWG	Women 46.9%, girls 51.5%	Women 67,1%, girls 61,4%	Positive impact	Belief that FLs are actively working to end VAWG saw large increase in Bong, small increase in Grand Cape Mount and Rivercess, and small decrease in Grand Gedeh.
Outcome 2: Youth leaders of Christian and Muslim youth groups (i.e. male and female) and school leaders (i.e. staff, students, parents) increasingly speak out against violence against women and girls and provide support to survivors.	2.1. % of trained faith youth group leaders who report publicly speaking out against GBV during the past year.	(Speak out often) 40.5%	52,4%	Positive impact	Youth faith group leaders speaking out often saw small increase in Bong and Grand Gedeh, and larger increase in Grand Cape Mount and Rivercess
	2.2. % of faith youth group members who report that they have spoken out and/or taken action against GBV during the past year	(Speak out often) 17.8%	31,9%	Positive impact	Youth faith group members speaking out often saw increase in Grand Cape Mount, Grand gedeh and Rivercess, and no change in Bong.
	2.3. % of trained school leaders who have spoken on prevention of VAW/G and support for survivors during the past year	(Speak out often) 12.5%	25%	Positive impact	School leaders speaking out often saw large increase in Grand Cape Mount, smaller increase in Bong and Grand Gedeh, and decrease in Rivercess.
Outcome 3: Muslim and Christian faith	3.1. % of women and girls who have learned about which	Women 3,6%, girls 4,6%	Women 41,3%, girls 43,7%	Positive impact	Large increase in knowledge in Bong, increase in Grand Gedeh and Rivercess, and no change in Grand Cape Mount.

communities increase direct support for survivors of violence and advocacy for their rights and access to services.	GBV support services are available from Faith Leaders and lay leaders.				
	3.2. % of cases registered by GBV support services that show referral from trained faith leaders and lay leaders.	0 <sup>22</sup>	246 <sup>23</sup>	Positive impact	
	3.3. % of women and girls church and mosque members who had sought support from trained clergy and lay leaders in the past year and reported positive experiences	24,1%	56,3%	Positive impact	Perceptions of very helpful support increased in Bong, Grand Cape Mount and Rivercess, and reduced in Grand Gedeh

<sup>22</sup> The value at baseline is, by default, zero.

<sup>23</sup> This value was not measured through the endline survey but rather compiled from monitoring data presented in annual reports.

## Annex E: List of documents consulted

- Baseline Report: Engaging faith-based organizations to prevention violence against women and girls
- SOW for Technical Evaluation Consultant: A comprehensive endline study for project in Liberia: Scaling up faith leaders' engagement to prevent and respond to VAWG
- EPISCOPAL RELIEF & DEVELOPMENT\_UNTF\_Spotlight Initiative\_Outcome 4\_Indicators with baseline data\_Dec 2020
- Qualitative research report\_July22 latest
- Y1- 6-month Progress report\_4-30-19
- Y1 AnnualReport
- Y2\_AnnualReport\_FINAL
- Y3 Annual Reports
- Y3\_6-month\_ProgressReport
- Y4 6 month Progress report\_May 2022
- Y4\_Result Activity Report-Goal Outcomes Outputs\_Y4 Progress Reports
- Year 1\_6month\_progress report
- Year 1\_12 month\_Progress Report\_Oct 2019
- Year 2\_6-month Progress\_Report\_May 2020
- Year 2\_6-month\_ProgressReport
- Year 2\_ANNUAL Progress\_Report\_Oct 2020
- Year3\_annual report
- Yr3\_6 month\_ProgressReport
- Final Inception Report: Comprehensive Baseline Evaluation for the VAWG Program 'Engaging Faith-based Organizations to Prevent VAWG' 2019

## Annex F: Data collection instruments

### Annex F1: Endline quantitative survey measures

The quantitative methods comprise surveys to be conducted with (1) congregants, and (2) faith, youth and students leaders, and youth group members. Survey questions have been separated into seven parts based on topics/content and targeted participants, as described below. The quantitative tools replicate the baseline tools in order to compare baseline and endline findings, with some modifications, as described below where relevant.

#### 1. Pre-survey information (to be asked of all participants)

This section contains pre-survey information, including unique ID numbers for congregants who are being tracked, location details (county, district and township), type of respondent and enumerator name or ID number.

#### 2. Socio-demographics (to be asked of all participants)

This section contains demographic questions to determine respondents' age, gender, education background, employment status, relationship and marital status, religious denomination, household composition, number of children and food security.

Three survey items are included to measure past month food insecurity, with respondents asked if they never, rarely, sometimes or often faced a situation in which (1) there was no food in their house because of lack of money, (2) they or a family member in the household went to sleep hungry because of lack of food, and (3) they or anybody in their household went for a whole day and night without eating because of lack of food. A food security scale will be created by adding values for each survey item, with the scale ranging between 0 and 9 and higher scores indicating more food insecurity.

#### 3. Attitudes related to VAWG (to be asked of all participants)

This section of the survey measures attitudes towards VAWG according to five domains, including (1) general gender attitudes, (2) justification for physical IPV, (3) justification for sexual violence, (4) rape myths and (5) tolerance for VAWG. These domains and corresponding questions are outlined in the table below. Survey items have been derived from a number of sources, including the baseline and endline assessments for phase 1 of the project; the WHO Multi-Country Study on Women's Health and Life Events (WHO 2003); the International Men and Gender Equality Survey (IMAGES) (ICRW 2010); and the Gender Equitable Men (GEM) Scale (Pulerwitz & Barker, 2008).

Domain	Corresponding survey items
General gender attitudes	1) A man always deserves the respect of his wife and children, no matter what he has said or done 2) Men are superior to women 3) A woman's most important role is to take care of her home and cook for her family 4) A man should have the final word about decisions in the home 5) A good woman obeys her husband even if she doesn't agree 6) God/Allah created man and woman equal

	7) In my religion, a woman should defer any decision to her husband and obey his commands
Justification for physical VAWG	<ol style="list-style-type: none"> <li>1) There are times when a woman deserves to be beaten</li> <li>2) If a woman burns the food while cooking, it is ok for a man to hit her</li> <li>3) If a woman cheats on a man, it is ok for him to hit her</li> <li>4) If a woman disrespects her partner/husband, it is ok for him to hit her</li> <li>5) It is ok for a husband/partner to hit his wife/partner if she refuses to have sex with him</li> <li>6) The scriptures (bible/quran) say that a man can discipline his wife with violence if she does something wrong</li> </ol>
Justification for sexual VAWG	<ol style="list-style-type: none"> <li>1) A man is entitled to sex from his partner even if she doesn't feel like it</li> <li>2) A woman is able to refuse sex if she doesn't want to</li> <li>3) A woman is able to refuse sex if her partner is drunk</li> <li>4) A woman is able to refuse sex if she is sick</li> <li>5) God/Allah condemns rape</li> </ol>
Rape myths	<ol style="list-style-type: none"> <li>1) If a woman does not physically fight back it is not really rape</li> <li>2) In any rape case, one would have to question whether the victim is promiscuous or has a bad reputation</li> <li>3) It is not rape if a woman is forced to have sex with her husband</li> <li>4) When women are raped they usually did something careless to put themselves in that situation</li> <li>5) In some rape incidents the victims actually want it to happen</li> </ol>
Tolerance for violence	<ol style="list-style-type: none"> <li>1) A woman should tolerate violence from her partner/husband in order to keep her family together</li> <li>2) A man using violence against his wife/partner is a private matter that shouldn't be discussed outside the couple</li> <li>3) If a man mistreats his wife/partner, others outside of the family should intervene</li> </ol>

#### 4. VAWG response (to be asked of faith, youth and student leaders, and youth group members)

This section contains survey items related to behaviors and responses related to VAWG, including speaking out publicly against VAWG, provision of support for survivors and mode of support. At endline, additional survey questions have been included on project exposure, including faith leader knowledge and use of the Faith Leaders GBV Toolkit, respondents' participation in FAMA groups and participation in VAWG training.

#### 5. Knowledge of VAWG messages and services (to be asked of male and female congregants)

This section contains items related to congregants' exposure to and participation in faith activities, and knowledge of VAWG services. These include: having heard faith leaders speak about VAWG; the role of faith leaders in working to eliminate VAWG; the efficacy of their work; changes observed; knowledge of services available for survivors of violence; and participation in faith-based activities where VAWG issues are addressed. In the endline survey, additional questions have been added to

measure participation in other VAWG activities, to test for exposure to other interventions, particularly among participants in the comparison group.

#### 6. Experiences of VAWG (to be asked of female congregants)

This section measures women and girls' past year experience of physical, sexual and emotional IPV, and non-partner sexual violence (NPSV). The measures used for physical and sexual IPV are drawn from the World Health Organization (WHO) Multi-Country Study on Women's Health and Domestic Violence (Garcia-Moreno et al. 2006). Two additional items have been added to measure past year emotional IPV, derived from the DHS domestic violence module. For each type of IPV measure (emotional, physical or sexual), items are recorded as never, once, a few times or many times. As per the baseline study, IPV will be coded if respondents reported any act on one or more occasions. NPSV is derived from one survey item (In the past 12 months, how many times has someone other than your partner/husband/ boyfriend forced you to have sex). NPSV is coded if respondents reported any act on one or more occasions in the past year.

This section also includes questions about survivors' help seeking behaviour and support provided by faith leaders.

#### 7. Behaviors and practices associated with VAWG (to be asked of male congregants)

This section measures men's past year perpetration of physical, sexual and emotional IPV and NPSV. Men's perpetration of IPV is measured through the same items used for women but worded in the active voice, as conducted in the UN Multi-Country Cross-Sectional Study on Men and Violence in Asia and the Pacific (Fulu et al. 2013). As per the questions for women and girls on experience of IPV, for each type of IPV measure (emotional, physical or sexual), items are recorded as never, once, a few times or many times. Perpetration of IPV will be coded if respondents report any act on one or more occasions. Male perpetration of NPSV will be measured through one item, 'In the past 12 months, how many times have you forced any other woman who is not a wife/partner/girlfriend to have sex with you' (never, once, a few times or many times).

In addition to the survey items on perpetration of violence, two items have been adapted from a behavioral index derived from a study on gender norms and masculinities in Ethiopia.<sup>24</sup> Both items are directed towards men and boys in a relationship in the past 12 months:

1. In the past 12 months, how frequently did you ask your wife/partner her opinion on important matters?
2. In the past 12 months, how frequently did you help around the house with cooking or taking care of children?

Although the original behavioural index uses a four-point scale (often, sometimes, rarely or never), we have adjusted the response categories to fall in line with the WHO VAWG questioning as outlined above (never, once, a few times or many times). These questions provide an additional set of data on boys' and men's gender-equitable behaviors to explore whether gender-equitable attitudinal change is linked with behavior change.

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<sup>24</sup> [http://www.endvawnow.org/uploads/browser/files/GEM\\_Ethiopia.pdf](http://www.endvawnow.org/uploads/browser/files/GEM_Ethiopia.pdf)

## Annex F2 : Endline quantitative tools

SECTION 0: PRE-SURVEY INFORMATION			
Question ID	Question	Response	Skip logic
PRE_1	Unique ID number  (For male and female adolescent and adult congregants only)	_____	
PRE_2	County	1. Bong 2. Grand Cape Mount 3. Grand Gedeh 4. Rivercess 5. Margibi	
PRE_3	District		
PRE_4	Township	_____	
PRE_5	Type of respondent	1. Adolescent female congregant 2. Adult female congregant 3. Adolescent male congregant 4. Adult male congregant 5. Faith leader 6. Youth faith leader 7. School leader 8. Youth group member	
PRE_6	Enumerator name/ID		

SECTION 1: RESPONDENT SOCIO-DEMOGRAPHIC CHARACTERISTICS (SECTION 1 SHOULD BE ASKED OF ALL RESPONDENTS, INCLUDING MALE AND FEMALE CONGREGANTS OF ALL AGES, FAITH LEADERS, YOUTH FAITH LEADERS AND STUDENT LEADERS, AND YOUTH GROUP MEMBERS)			
Question ID	Question	Response	Skip logic
ALL_1.1	Record sex of respondent	1. Female 2. Male	
ALL_1.3	What is your age?  (If congregant is younger than 13 years, end interview)	_____ <i>(Record years of age)</i>	
ALL_1.4	What is your highest level of education?	1. No schooling 2. Some primary schooling 3. Completed primary schooling 4. Some secondary schooling	

		5. Completed secondary schooling 6. Some higher education 7. Completed higher education 8. Other _____ (Please specify other)	
ALL_1.5	What kind of work do you do to earn income?	1. Clergy 2. Never worked 3. Unemployed 4. Employed 5. Informally employed 6. Retired 7. Other _____ (Please specify other)	
ALL_1.6	Are you currently participating in a Savings Group?	1. Yes 2. No	
ALL_1.7	What is your current relationship status?	1. Currently married 2. Living together with a partner (unmarried) 3. Has boyfriend/girlfriend (regular sexual partner) but not living together 4. No current relationship	If Currently married, SKIP to ALL_1.10
ALL_1.8	Have you ever been married?	1. Yes 2. No	If NO, SKIP to ALL_1.11
ALL_1.9	Did your previous marriage end in separation/divorce, or were you widowed?	1. Separation/divorce 2. Widowed 3. Other _____ (Please specify other)	
ALL_1.10	How old were you when you first married ?	_____ (Age in years)	
ALL_1.11	What religious denomination do you belong to?	1. Christian 2. Muslim 3. Other _____ (Please specify other) 4. None	
ALL_1.12	In the past 12 months, how frequently did you participate in religious festivals or ceremonies?	1. Often 2. Sometimes 3. Rarely 4. Never 98. Refused 99. Don't know	
ALL_1.13	Do you have any children?	1. Yes 2. No	If NO, SKIP to ALL_1.15

ALL_1.14	How many children do you have?	_____	
		(Record number of children)	
ALL_1.15	How many people in total are living in your household?	_____	
		(Record number of household members)	
ALL_1.16	In the past 4 weeks, how often was there no food to eat in your house because of a lack of money?	1. Never (0 times) 2. Rarely (1-5 times) 3. Sometimes (6-10 times) 4. Often (more than 10 times)	
ALL_1.17	In the past 4 weeks, how often did you or any member of your household go to sleep hungry because of lack of food?	1. Never (0 times) 2. Rarely (1-5 times) 3. Sometimes (6-10 times) 4. Often (more than 10 times)	
ALL_1.18	In the past 4 weeks, how often did you or any of your household go a whole day and night without eating because of lack of food?	1. Never (0 times) 2. Rarely (1-5 times) 3. Sometimes (6-10 times) 4. Often (more than 10 times)	

**INSTRUCTION TO ENUMERATORS: SECTION 2 SHOULD BE ASKED OF ALL RESPONDENTS, INCLUDING MALE AND FEMALE CONGREGANTS OF ALL AGES, FAITH LEADERS, YOUTH FAITH LEADERS AND STUDENT LEADERS, AND YOUTH GROUP MEMBERS.**

**Enumerator to read following introduction to participants “In this community and in others, people have different ideas about families and what is acceptable behaviour from men and women in the home. I am going to read a list of statements and I would like you to tell me whether you strongly agree, agree, disagree or strongly disagree with each statement. There are no right or wrong answers. We are just interested in what you think.”**

Question ID	Question	Response	Skip logic
ALL_2.1	A man always deserves the respect of his wife and children, no matter what he has said or done	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.2	Men are superior to women	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.3	A woman's most important role is to take care of her home and cook for her family	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	

ALL_2.4	A man should have the final word about decisions in the home	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.5	A good woman obeys her husband even if she doesn't agree	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.6	God/Allah created man and woman equal	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.7	There are times when a woman deserves to be beaten	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.8	The scriptures (bible/quran) say that a man can discipline his wife with violence if she does something wrong	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.9	If a woman burns the food while cooking, it is ok for a man to hit her	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.10	If a woman cheats on a man, it is ok for him to hit her	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.11	If a woman disrespects her partner/husband, it is ok for him to hit her	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused	

		99. Don't know	
ALL_2.12	It is ok for a husband/partner to hit his wife/partner if she refuses to have sex with him	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.13	A man is entitled to sex from his partner even if she doesn't feel like it	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.14	A woman is able to refuse sex if she doesn't want to	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.15	A woman is able to refuse sex if her partner is drunk	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.16	A woman is able to refuse sex if she is sick	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.17	God/Allah condemns rape	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.18	If a woman does not physically fight back it is not really rape	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.19	In any rape case, one would have to question whether the victim is promiscuous or has a bad reputation	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree	

		98. Refused 99. Don't know	
ALL_2.20	It is not rape if a woman is forced to have sex with her husband	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.21	When women are raped they usually did something careless to put themselves in that situation	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.22	In some rape incidents the victims actually want it to happen	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.23	A woman should tolerate violence from her partner/husband in order to keep her family together	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.24	A man using violence against his wife/partner is a private matter that shouldn't be discussed outside the couple	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.25	If a man mistreats his wife/partner, others outside of the family should intervene	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.26	It is not harmful if a girl has sex before age 18	1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree 98. Refused 99. Don't know	
ALL_2.27	In my religion, a woman should defer any decision to her husband and obey his commands	1. Strongly disagree 2. Disagree 3. Agree	

		4. Strongly agree 98. Refused 99. Don't know	
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**INSTRUCTION TO ENUMERATORS: SECTION 3 IS TO BE ASKED TO FAITH LEADERS; FAITH YOUTH LEADERS; STUDENT LEADERS; AND YOUTH GROUP MEMBERS.**

Question ID	Question	Response	Skip logic
FL_3.0 FLY_3.0 SL_3.0 YGM_3.0	How common is it in your community that faith leaders publicly speak out against violence against women and girls?	1. Very common 2. Somewhat common 3. Somewhat uncommon 4. Very uncommon 98. Refused 99. Don't know	
FL_3.1	Do you use the Faith Leaders GBV toolkit in your work to prevent violence against women and girls?	1. Yes 2. No 98. Refused 99. Don't know	
FL_3.2	How often have you used the GBV toolkit?	1. Never 2 . One time 3 . A few times 4 . Many times 5 . Other _____ <i>(Please specify other)</i>	If NEVER, SKIP to FL_3.4 YFL_3.1 SL_3.1 YGM_3.1
FL_3.3	And how often have you used the GBV toolkit in the past year?	1. One time 2. A few times 3. Many times 4. Other _____ <i>(Please specify other)</i>	
FL_3.4 YFL_3.1 SL_3.1 YGM_3.1	How frequently have you spoken publicly on the issue of violence against women and girls in the past year?	1. Often 2. Sometimes 3. Rarely 4. Never 98. Refused 99. Don't know	If Never, refused or don't know, SKIP to FL_3.8, YFL_3.5, SL_3.5, YGM_3.5
FL_3.5 YFL_3.2 SL_3.2 YGM_3.2	During which types of events in the past year did you speak publicly on violence against women and girls? (Mark all that apply)	1. Sermon 2. Religious event/retreats 3. Other _____ <i>(Please specify other)</i> 98. Refused 99. Don't know	
FL_3.6 YFL_3.3 SL_3.3 YGM_3.3	Have you talked publicly about the prevention of violence against women and girls in the past year?	1. Yes 2. No 98. Refused 99. Don't know	

FL_3.7 SL_3.4 YFL_3.4 YGM_3.4	Have you talked publicly about support for survivors of violence in the past year?	1. Yes 2. No 98. Refused 99. Don't know	
FL_3.8 YFL_3.5 SL_3.5 YGM_3.5	Have you provided any type of support to survivors of violence in the past year?	1. Yes 2. No 98. Refused 99. Don't know	If NO, refused or don't know, SKIP to FL_3.10, YFL_3.7, SL_3.7, YGM_3.7
FL_3.9 YFL_3.6 SL_3.6 YGM_3.6	What type of support have you provided to survivors of violence? (Mark all that apply)	1. Referral to health services 2. Counselling 3. Safe Space 4. Access to justice 5. Other _____ <i>(Please specify other)</i> 98. Refused 99. Don't know	
FL_3.10 YFL_3.7 SL_3.7 YGM_3.7	How comfortable do you feel speaking with men and boys about how violence against women and girls is unacceptable?	1. Very comfortable 2. Somewhat comfortable 3. Somewhat uncomfortable 4. Very uncomfortable 98. Refused 99. Don't know	
FL_3.11 YFL_3.8 SL_3.8 YGM_3.8	Have you participated in any training on violence against women and girls in the past 12 months?	1. Yes 2. No 98. Refused 99. Don't know	If NO, refused or don't know, SKIP to FL_3.13 YFL_3.10 SL_3.10 YGM_3.10
FL_3.12 YFL_3.9 SL_3.9 YGM_3.9	If yes, which organization facilitated the training?	_____ (Name of organization)  99. Don't know	
FL_3.13 YFL_3.10 SL_3.10 YGM_3.10	Have you participated in any training on FAMA cards and dialogues?	1. Yes 2. No 98. Refused 99. Don't know	
FL_3.14 YFL_3.11 SL_3.11 YGM_3.11	Do you conduct FAMA groups or dialogues?	1. Yes 2. No 98. Refused 99. Don't know	

FL_3.15 YFL_3.12 SL_3.12 YGM_3.12	Which types of violence have you spoken with community members about through the FAMA cards?  (DON'T READ OUT, SELECT ALL THAT APPLY)	1. Physical violence 2. Sexual violence 3. Emotional violence 4. Economic violence 5. Intimate partner violence 6. Parental abuse of children 7. Sexual exploitation 8. Early marriage 9. Denial of girls' education 10. Other  _____ (Please specify other) 97. Not applicable (none) 98. Refused 99. Don't know	
	Now I would like to ask you some questions about things that you may have observed in your community over the past year.		
FL_3.16 YFL_3.13 SL_3.13 YGM_3.13	In your opinion, has the practice of marrying girls before the age of 18 increased, decreased or stayed the same in your community in the past year?	1. Increased 2. Decreased 3. Stayed the same 98. Refused 99. Don't know	

#### SECTION 4: VIOLENCE AGAINST WOMEN AND GIRLS IN YOUR COMMUNITY

**INSTRUCTION FOR ENUMERATORS: TO BE ASKED OFF ALL CONGREGANTS MALE AND FEMALE.**

Enumerator to read following introduction to participant "I would now like to ask you about faith-based activities regarding violence against women and girls in your community"

Question ID	Question	Response	Skip logic
Congr_4.1	How common is it in your community that faith leaders publicly speak out against violence against women and girls?	1. Very common 2. Somewhat common 3. Somewhat uncommon 4. Very uncommon 98. Refused 99. Don't know	
Congr_4.2	In the past year, have you heard any Faith Leaders speak out publicly against violence directed at women and girls?	1. Yes 2. No 98. Refused 99. Don't know	If NO, refused or don't know, SKIP to Congr_4.5.

Congr_4.3	During which types of events did you hear them speak about violence against women and girls?  (Mark all that apply)	1. Sermon 2. Religious event/retreats 3. Other  _____ (Please specify other)	
Congr_4.4	How many times in the past year did you hear a faith leader speak out about violence against women and girls?	_____ (Record number of times)	
Congr_4.5	Do you think that Faith Leaders in your community are actively working to stop violence against women and girls?	1. Yes 2. No 98. Refused 99. Don't know	
Congr_4.6	Do you think their efforts have resulted in any changes in your community?	1. Yes 2. No 98. Refused 99. Don't know	If NO SKIP to Congr_4.8
Congr_4.7	What kind of changes have you observed?	_____ (Record changes observed)	
Congr_4.8	Do you know of any services/support a woman or girl who has experienced violence could go to for help?	1. Yes 2. No 98. Refused 99. Don't know	If NO SKIP to Congr_4.11
Congr_4.9	If yes, could you mention the available services you are aware of?  (Do not prompt and mark all that apply)	1. Police 2. Hospital / health center 3. Social services 4. Legal advice center 5. Shelter 6. Local leaders 7. Faith based leaders 8. School 9. Other  _____ (Please specify other) 98. Refused 99. Don't know	
Congr_4.10	How did you learn about these services?	1. Friends 2. Family 3. Radio 4. Faith leaders 5. Church meetings 6. Other _____ (Please specify other) 98. Refused 99. Don't know	

Congr_4.11	Does the church/mosque provide help or support to women or girls who are experiencing violence?	1. Yes 2. No 98. Refused 99. Don't know	
Congr_4.12	Have you participated in any activities through your ( <b>church or mosque</b> ) where violence against women and girls was addressed, such as marriage preparation, retreats, counselling or community dialogues?	1. Yes 2. No 98. Refused 99. Don't know	If NO, go to Congr_4.14
Congr_4.13	If yes, in which activities did you participate?	1. Marriage preparation 2. Retreats 3. Counselling 4. Community dialogues 5 . Other _____ (Please specify other)	
Congr_4.14	Have you participated in any other activities in your community where violence against women and girls was addressed?	1. Yes 2. No 98. Refused 99. Don't know	If NO, go to Congr_4.16
Congr_4.15	If yes, in which activities did you participate?	_____ (Record type of activities)	
Congr_4.16	Have you seen any cards in your community with messages about violence against women and girls (FAMA cards)?	1. Yes 2. No 98. Refused 99. Don't know	If NO, Refused or Don't know, go to Congr_4.18
Congr_4.17	Which types of violence have you seen on these cards? (DON'T READ OUT, SELECT ALL THAT APPLY)	1. Physical violence 2. Sexual violence 3. Emotional violence 4. Economic violence 5. Intimate partner violence 6. Parental abuse of children 7. Sexual exploitation 8. Early marriage 9. Denial of girls' education 10. Other _____ (Please specify other) 98. Refused 99. Don't know	
	Now I would like to ask you some questions about things that you may have observed in your community over the past year.		

Congr_4.18	In your opinion, has the practice of marrying girls before the age of 18 increased, decreased or stayed the same in your community in the past year?	1. Increased 2. Decreased 3. Stayed the same 98. Refused 99. Don't know	
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**INSTRUCTION TO ENUMERATORS: TO BE ASKED TO FEMALE CONGREGANTS BOTH ADULT AND ADOLESCENT AND ENSURE PRIVACY**

Enumerator to read following introduction "I would now like to ask you some questions about your life experiences"

Question ID	Question	Response	Skip logic
FemCongr_5.1	Can I just check that you have had a partner in the last 12 months i.e. you are or have been married, living with a partner or had a boyfriend who you do not live with? This could be a current or previous partner.	1. Yes 2. No 98. Refused 99. Don't know	If no, don't know or refused go to FemCongr_5.12

**Instruction to interviewer to read following statement:** *"When two people marry or live together or are dating, they usually share both good and bad moments. I would now like to ask you some questions about your current relationship or past relationship in the last 12 months and how your husband/partner treats (treated) you. If anyone interrupts us I will change the topic of conversation. I would again like to assure you that your answers will be kept confidential, and that you do not have to answer any questions that you do not want to. May I continue?"*

	<b>In the past 12 months, how many times has your husband/partner/boyfriend done the following things to you?</b>		
FemCongr_5.2	Belittled or humiliated you in front of other people?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
FemCongr_5.3	Threatened to hurt you or someone you care about?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
FemCongr_5.4	Pushed or shoved you?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	

FemCongr_5. 5	Slapped you or thrown something at you which could hurt you?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
FemCongr_5. 6	Hit you with his fist or with something that could hurt you?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
FemCongr_5. 7	Kicked you, dragged you, beat you, strangled you or burned you?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
FemCongr_5. 8	Threatened you or attacked you with a gun, knife or other weapon?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
FemCongr_5. 9	Physically forced you to have sexual intercourse when you did not want to?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
FemCongr_5. 10	Force you to do sexual things that you didn't want to do?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
FemCongr_5. 11	In the last 12 months, how many times have you had sex with your husband/partner/boyfriend because you were frightened he would become violent?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
FemCongr_5. 12	In the past 12 months, when you experienced violence from a husband/partner did you seek help from a faith leader because of this violence?	1. Yes 2. No 97. Not relevant (did not experience violence) 98. Refused	If NO, go to FemCong_5.15  If not relevant, refused or don't

		99. Don't know	know, go to FemCongr_5.16
FemCongr_5.13	If yes, do you feel the support provided by the faith leader was helpful to you?	1. Very helpful 2. Somewhat helpful 3. Somewhat unhelpful 4. Very unhelpful 98. Refused 99. Don't know	
FemCongr_5.14	Please tell me what kind of support you received	1. Referral 2. Counselling 3. Other..... <i>(Please specify other)</i>	
FemCongr_5.15	If no, why did you not seek support from a faith leader?	1. Violence not serious enough 2. Afraid/ashamed to ask for help 3. Did not know to seek help from a faith leader 4. Did not have trust that a faith leader could help me 5. Other..... <i>(Please specify other)</i> 98. Refused 99. Don't know	
FemCongr_5.16	In the past 12 months, how many times has someone other than a partner/husband/boyfriend forced you to have sex?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
FemCongr_5.17	In the past 12 months, when you experienced violence from someone other than a husband/partner/boyfriend, did you seek help from a faith leader because of this violence?	1. Yes 2. No 97. Not relevant (did not experience violence) 98. Refused 99. Don't know	If NO, not relevant, refused or don't know, thank respondent and end interview.
FemCongr_5.18	If yes, do you feel the support provided by the faith leader was helpful to you?	1. Very helpful 2. Somewhat helpful 3. Somewhat unhelpful 4. Very unhelpful 98. Refused 99. Don't know	
FemCongr_5.19	Please tell me what kind of support you received	1. Referral 2. Counselling 3. Other..... <i>(Please specify other)</i>	
FemCongr_5.20	If no, why did you not seek support from a faith leader?	1. Violence not serious enough	

		2. Afraid/ashamed to ask for help 3. Did not know to seek help from a faith leader 4. Did not have trust that a faith leader could help me 5. Other..... (Please specify other) 98. Refused 99. Don't know	
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## SECTION 6: MALE CONGREGANT PRACTICES AND BEHAVIORS

### INSTRUCTION TO ENUMERATORS: TO BE ASKED TO MALE CONGREGANTS BOTH ADULT AND ADOLESCENT AND ENSURE PRIVACY

Enumerator to read following introduction "I would now like to ask you some questions about your everyday life experiences with your family and partners"

Question ID	Question	Response	Skip logic
MaleCongr_6.1	Can I just check that you have had a partner in the last 12 months i.e. you are or have been married, living with a partner or had a girlfriend who you do not live with? This could be a current or previous partner.	1. Yes 2. No 98. Refused 99. Don't know	If NO, refused or don't know, SKIP to MaleCongr_6.13
<b>Instruction to interviewer to read following statement:</b> <i>"When two people marry or live together or are dating, they usually share both good and bad moments. I would now like to ask you some questions about your current relationship or past relationship in the last 12 months. If anyone interrupts us I will change the topic of conversation. I would again like to assure you that your answers will be kept <u>confidential</u>, and that you do not have to answer any questions that you do not want to. May I continue?"</i>			
MaleCongr_6.2	In the past 12 months, how frequently did you ask your wife/partner her opinion on important matters?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
MaleCongr_6.3	In the past 12 months, how frequently did you help around the house with cooking or taking care of children?	1. Never 2. Once 3. A few times 4. Many times 97. Not applicable (no children, or don't live with partner) 98. Refused 99. Don't know	

	<b>In the past 12 months, how many times have you done the following things to your wife/partner/girlfriend?</b>		
MaleCongr_6. 4	Belittled or humiliated her in front of other people?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
MaleCongr_6. 5	Threatened to hurt her or someone she cares about?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
MaleCongr_6. 6	Pushed or shoved her?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
MaleCongr_6. 7	Slapped her or thrown something at her which could hurt her?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
MaleCongr_6. 8	Hit her with your fist or with something that could hurt her?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
MaleCongr_6. 9	Kicked her, dragged her, beat her, strangled her or burned her?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
MaleCongr_6. 10	Threatened her or attacked her with a gun, knife or other weapon?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
MaleCongr_6. 11	Physically forced her to have sexual intercourse when she did not want to?	1. Never 2. Once 3. A few times	

		4. Many times 98. Refused 99. Don't know	
MaleCongr_6. 12	Force her to do sexual things that she didn't want to do?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	
MaleCongr_6. 13	In the past 12 months, how many times have you forced any other woman who is not a wife/partner/girlfriend to have sex with you?	1. Never 2. Once 3. A few times 4. Many times 98. Refused 99. Don't know	

## Annex F3: Baseline sampling approach

The following sampling calculations were conducted for the baseline evaluation.

### **Non-equivalent groups design with male and female congregants**

According to this sampling approach, the baseline compares goal and outcome indicators related to congregants between a treatment group (beneficiary congregants accessing the intervention in intervention communities and tracked from baseline to endline) and a comparison group (non-beneficiary congregants in non-intervention communities tracked from baseline to endline). Given the small number of new clusters (in phase II of the project) overall (n=24), limiting the ability to use a cluster sampling approach, the sample size was conducted via a calculation of power for comparing two proportions. Estimates were derived from two key sources: (1) prevalence of IPV in the Liberia Demographic and Health Survey (DHS), and (2) attitudes towards VAWG measured in the control group in the endline evaluation of Phase I of the project.

For adult female congregants, IPV prevalence was derived from the DHS and not from the endline control group in the first phase of the project for a number of reasons. In the endline evaluation of the previous phase, prevalence of physical or sexual IPV in the control group was low (12.3%) and this may have been related to the nature of the questions, with only two general questions included to measure physical or sexual IPV. In the baseline evaluation of the second phase, IPV is measured through survey items that are closer in nature to the DHS type of questioning. In the DHS, any past 12 month IPV in the four regions in which the project is being implementing was recorded as 51.7%. Using the “power twoproportions” function in STATA 13, alpha (significance level) was set at 0.05, power set at 0.80, and effect size set at 0.30, which has been found to be appropriate in a number of settings in which violence prevention interventions have been implemented (Gibbs et al. 2018). Two further adjustments were made to the estimated sample size. Given that 60% of adult women in the phase one baseline survey were married or in a relationship in the past 12 months, the sample size was increased by an estimate of 40% to account for women not in a relationship in the past 12 months (i.e. among whom past 12 month IPV cannot be measured). The sample was then increased by 30% to factor in attrition at endline. The sample size is then 230 adult women per arm (i.e. 230 in the intervention group and 230 in the comparison group).

There is no data available on men’s perpetration of violence against women and girls in Liberia from which sample size estimates could be made. Hence, the same prevalence of women’s IPV experience in the DHS was used to produce an estimate of IPV perpetration among adult men. The same parameters were set for men as for women, with the exception of calculations according to past 12 month marriage or relationship status given that 77% of men in the phase one baseline evaluation were married or in a relationship in the past 12 months. After adjusting for men’s past 12 month relationship status and 30% attrition, the sample size for men was 202 per arm (202 in the intervention group and 202 in the comparison group).

Given that in the phase one baseline evaluation very few adolescents reported having been married or in an intimate relationship in the past 12 months, it was not feasible to produce sampling estimates based on adolescent experience or perpetration of past 12 month IPV. Instead, sampling estimates were based on attitudes towards VAWG measured in the control group of the phase one endline evaluation. Average negative attitudes in the control group were 35.42% among adolescent girls and 34.98% among adolescent boys. Using the “power twoproportions” function in STATA 13, alpha was set at 0.05, power set at 0.80, and effect size set at 0.40 given that it is common to see larger changes in attitudes than behaviour. After factoring in 30% attrition at endline, the baseline sample sizes were 163 adolescent girls in each arm (163 in the intervention group and 163 in the

comparison group) and 165 adolescent boys in each arm (165 in the intervention group and 165 in the comparison group).

The total target sample of congregants is summarized in Table 1, with a total sample size of 1520 congregants (760 in each arm).

**Table 1: Congregant sample size**

	Intervention	Comparison
Adult men congregants	202	202
Adolescent boy congregants	165	165
Adult women congregants	230	230
Adolescent girl congregants	163	163
<b>TOTAL</b>	<b>760</b>	<b>760</b>

For the intervention group, the following step in the sampling approach was to conduct proportionate sampling according to the population size of beneficiaries at the county level (see Table 2). If further proportionate sampling was conducted at the district level according to the population estimates for congregants, we would get irregular figures for some districts (e.g. with as low as eight estimated congregants in some target groups), which is unlikely to be an accurate representation of the actual beneficiary population that would be reached by the project. Hence, further sample size allocation at the district and township level was conducted in equal proportions, with the evaluation taking place in two districts per county, two townships per district, and a total of 16 townships (see Table 3).

**Table 2: Population size of estimated congregant project participants, and proportionate sampling of intervention congregants, at the county level**

County	Congregant Men		Congregant Boys		Congregant Women		Congregant Girls	
	Population	Sample	Population	Sample	Population	Sample	Population	Sample
Grand Cape Mount	592	38	308	29	723	43	264	34
Rivercess	869	55	306	29	1062	63	244	31
Grand Gedeh	890	57	697	66	1087	65	412	53

Bong	812	52	422	40	993	59	351	45
<b>Total</b>	<b>3163</b>	<b>202</b>	<b>1733</b>	<b>164</b>	<b>3865</b>	<b>230</b>	<b>1271</b>	<b>163</b>

Table 3: Intervention sample size at the district and township levels

County	District	Male (18+ years)	Male (13-17 years)	Female (18+ years)	Female (13-17 years)
<b>Grand Cape Mount</b>	Porkpa				
	Damballa	10	8	11	9
	Bendaja	9	7	11	8
	Commonwealth				
	Robertsport	10	7	11	9
	Tosor	9	7	10	8
<b>Rivercess</b>	Doedain				
	Goezohn	14	8	16	8
	Cotton Tree/ Bogeezay	14	7	16	8
	ZarFlahn				
	Zor	14	8	16	8
	Darsaw	13	7	15	7
<b>Grand Gedeh</b>	Tchien				
	Solo Town	15	17	16	13
	Gambo	14	16	16	13
	B'hai				
	Sinne-Weh (Chensia)	14	16	16	13
	Toe's Town	14	17	17	14
<b>Bong</b>	Kpaai				
	Baila	13	10	15	12

	Gormue	13	10	15	11
	Suakoko				
	Taylor Town	13	10	15	11
	SKT	13	10	14	11
<b>TOTAL</b>		<b>202</b>	<b>165</b>	<b>230</b>	<b>163</b>

The comparison group comprised 15 communities in two districts of Margibi County. This county and corresponding districts and townships were selected by ECLRD in communication with the Ministry of Women with key criteria being that no VAWG or GBV programming should be currently taking place in these locations. Given that the comparison group comprised only two districts with small estimated population variations between them, proportionate sampling by district was conducted based on congregant population estimates. See Table 4 for the comparison group sample size per township.

**Table 4: Comparison group sample size at the district and township levels**

County	District	Male (18+ years)	Male (13-17 years)	Female (18+ years)	Female (13-17 years)	
<b>Margibi</b>	Kakata					
		Baypolu/J. K. Dadzie	12	10	13	9
		Massaquoi	12	10	13	9
		BollorQuelleh/Gio Village	12	10	14	10
		Gbar Town	12	10	13	9
		Big Fat	12	9	13	9
		Konatee/Taki	12	10	13	9
		Kpekeh	12	10	14	10
		Dorkai	12	9	13	10
		Mambah Kaba				
		Forzohn # 1/Wheavleen	15	12	17	12
		Vah	15	12	18	13
		Garmaymu	15	13	18	13

	Zoeklin	15	12	17	12
	wrajaye/Prince Wallace Estate/Needonwein	16	13	18	13
	Doemah	15	12	18	12
	Bishop Judith Craig Children V/Ben/ Government Farm	15	13	18	13
<b>TOTAL</b>		<b>202</b>	<b>165</b>	<b>230</b>	<b>163</b>

### Pre-post test with faith, youth and school leaders and youth members

For youth, faith, and school leaders, and youth group members, a pre/post-test design was implemented with no tracking of participants and no comparison group. Based on the population figures provided by ECLRD for two target communities per district, 95% confidence interval and 5% margin of error, the sample for these beneficiaries is presented in Table 5. These figures are further disaggregated by township and target gender (where relevant) in Table 6.

**Table 5: Population and sample details for faith, youth and school leaders, and youth group members, disaggregated by district**

County	District	Faith leaders Population	Youth leaders Population	School leaders (GBV committee members) Population	Youth group members Population
<b>Grand Cape Mount</b>	Porkpa	6	5	4	118
	Commonwealth	6	5	4	117
<b>Rivercess</b>	Doedain	5	4	4	92
	ZarFlahn	5	4	4	91
<b>Grand Gendeh</b>	Tchien	7	7	4	184
	B'hai	7	7	4	185
<b>Bong</b>	Kpaai	4	4	4	129
	Suakoko	4	4	4	128
<b>TOTAL</b>		<b>44</b>	<b>40</b>	<b>32</b>	<b>1046</b>

Sample based on 95% confidence interval and 5% margin of error	40	36	30	281
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Table 6: Sample for faith, youth and school leaders, and youth group members, disaggregated by district, township and gender (of youth group members)

County	District	Faith leaders	Youth leaders	School student leaders	Youth group members male	Youth group members female
<b>Grand Cape Mount</b>	Porkpa					
	Damballa	3	2	2	8	8
	Bendaja	2	2	2	9	7
	Commonwealth					
	Robertsport	3	2	2	8	8
	Tosor	2	2	2	7	8
<b>Rivercess</b>	Doedain					
	Goezohn	3	2	2	8	5
	Cotton Tree/Bogeezay?Bogeezay2	2	2	2	5	7
	ZarFlahn					
	Zor	3	2	2	7	7
	Darsaw	2	2	2	6	6
<b>Grand Gendeh</b>	Tchien					
	Solo Town	3	3	2	12	12
	Gambo	3	3	2	12	13
	B'hai					
	Sinne-Weh (Chensia)	3	3	2	12	13
	Toe's Town	3	3	2	14	11
<b>Bong</b>	Kpaai					
	Baila	2	2	2	10	8

	Gormue	2	2	2	12	5
	Suakoko					
	Taylor Town	2	2	2	8	8
	SKT	2	2	2	8	9
<b>TOTAL</b>		<b>40</b>	<b>36</b>	<b>32</b>	<b>146</b>	<b>135</b>

## Annex F4: Endline qualitative tools

### FGD guide for male and female faith leaders

1. To start us off, can you tell me a bit about where you are a faith leader, and what are some of the activities that you do with congregants in your community?
2. I would like you think about the last four years, since the end of 2018. Have you noticed any changes in relation to violence against women and girls in your community? Would you say it has decreased, stayed the same or increased? Why do you say so?
3. (If VAWG has decreased:) What do you think contributed to VAWG decreasing here in your community?  
(If VAWG has increased:) What do you think contributed to VAWG increasing here in your community?
4. In your position as a faith leader in your community, you worked on a project supported by ECLRD. What is it that the project asked you to do?
5. Now, thinking about the project supported by ECLRD, do you think it has contributed to ending violence against women and girls, or promoting gender equality or women's empowerment in your community? Why do you say so? Can you provide examples of changes you have seen?
6. What are your observations in relation to activism around ending violence against women and girls in your community?
  - Probes:
    - Are any of the things you have observed in relation to activism an outcome of ECLRD's project?
    - What about other activities outside of ECLRD's project? Did ECLRD influence these activities in any way? If so, how?
7. This project expected of you, in your position of leadership, to speak out about VAWG and gender equality and women's empowerment. Was it easy or was it hard to do so?
  - Probes:
    - What are the challenges for a leader in speaking publicly for gender equality and women's empowerment, and against VAWG?
    - What makes it easier for a leader to speak out publicly on these issues?
8. In other parts of Liberia, and across the world, organizations are working to address VAWG and promote gender equality. What do you think worked well here, that you think they should copy, or learn from you?
  - Possible probes:
    - What key lessons did you learn, that you think others should know about?
    - If you think about all the things that ECLRD did, and the things that you did, and the things that other people who were part of this project did – what do you think really worked that you think others should know about?
9. In the project FAMA cards were used. Did any of you help in the development of these cards, was it ever used in a session that you were part of, and/or did any of you ever use it yourself to lead a discussion on GBV?
  - Probes
    - *If involved in development FAMA cards:* How did you choose the themes of the cards? Do you think the FAMA cards' themes are appropriate for your community?
    - *If involved in a session where FAMA cards were used:* What issues were raised by the FAMA cards? How did you experience the session? Do you think the discussion

based on the FAMA cards changed the participants' attitudes and beliefs around the issue/s?

- *If used FAMA cards:* Can you tell us about the session and how you used it? Do you feel it worked?
10. So, as you may know, ECLRD's project is coming to an end at the end of this year. You have told me a lot about the changes this project has brought in your community, and especially in the lives of women and girls. So with the ECLRD project coming to an end, do you think these changes will be sustained? Why do you say so?
    - Possible probes:
    - Do you think things will go back to the way it used to be, or will things stay changed? Why do you say so?
    - Do you think things will continue changing for the better for women and girls? Why do you say so?
  11. COVID-19 must have challenged how you could communicate with people in your congregation/mosque and in your community. Can you tell me about some of these challenges?
    - Probes:
    - Can you tell me a bit about how you adapted?
    - How did you continue spreading the messaging about ending VAWG and promoting gender equality during COVID-19?
  12. Did any of you use electronic methods, like WhatsApp or Zoom, to talk to people about gender equality and ending VAWG?
    - *(If yes):*
    - You may have engaged with women or girls who were experiencing violence. How did you communicate with and support these women and girls?
    - There is a risk that phone or Zoom calls may be overheard, and Whatsapp messages may be read by someone else. Did you have any measures in place to keep your communication with these women private?
  13. Did any of you collect evidence of the violence that certain women and girls were experiencing?
    - If yes:
    - How did you do so?
    - Did you do it in person, or virtually?
    - How did you ensure the confidentiality of what was shared with you, and protect the person's identity?

#### FGD guide for male and female youth leaders

1. To start us off, can you tell me a bit about where you are a youth leader, and what are some of the activities that you do with youth in your community?
2. I would like you think about the last four years, since the end of 2018. Have you noticed any changes in relation to violence against women and girls in your community? Would you say it has decreased, stayed the same or increased? Why do you say so?
3. (If VAWG has decreased:) What do you think contributed to VAWG decreasing here in your community?  
(If VAWG has increased:) What do you think contributed to VAWG increasing here in your community?

4. In your position as a youth leader in your community, you worked on a project supported by ECLRD. What is it that the project asked you to do?
5. Now, thinking about the project supported by ECLRD, do you think it has contributed to ending violence against women and girls, or promoting gender equality or women's empowerment in your community? Why do you say so? Can you provide examples of changes you have seen?
6. What are your observations in relation to activism around ending violence against women and girls in your community?
  - Probes:
    - Are any of the things you have observed in relation to activism an outcome of ECLRD's project?
    - What about other activities outside of ECLRD's project? Did ECLRD influence these activities in any way? If so, how?
7. This project expected of you, in your position of leadership, to speak out about VAWG and gender equality and women's empowerment. Was it easy or was it hard to do so?
  - Probes:
    - What are the challenges for a leader in speaking publicly for gender equality and women's empowerment, and against VAWG?
    - What makes it easier for a leader to speak out publicly on these issues?
8. In other parts of Liberia, and across the world, organizations are working to address VAWG and promote gender equality. What do you think worked well here, that you think they should copy, or learn from you?
  - Possible probes:
    - What key lessons did you learn, that you think others should know about?
    - If you think about all the things that ECLRD did, and the things that you did, and the things that other people who were part of this project did – what do you think really worked that you think others should know about?
9. So, as you may know, ECLRD's project is coming to an end at the end of this year. You have told me a lot about the changes this project has brought in your community, and especially in the lives of women and girls. So with the ECLRD project coming to an end, do you think these changes will be sustained? Why do you say so?
  - Possible probes:
    - Do you think things will go back to the way it used to be, or will things stay changed? Why do you say so?
    - Do you think things will continue changing for the better for women and girls? Why do you say so?

#### FGD guide for male and female congregants

1. So can you tell me a bit more about which church or mosque you belong to, and about the activities that you engage in at your church/mosque?
2. I would like you think about the last four years, since the end of 2018. Have you noticed any changes in relation to violence against women and girls in your community? Would you say it has decreased, stayed the same or increased? Why do you say so?
3. (If VAWG has decreased:) What do you think contributed to VAWG decreasing here in your community?  
(If VAWG has increased:) What do you think contributed to VAWG increasing here in your community?

4. ECLRD has, since 2018, been implementing a project here in your county and in your community, focused on improving the prevention of violence against women and girls, and the response to it, through engaging faith leaders.  
Now, if you think about what ECLRD has been doing, do you think it has contributed to ending violence against women and girls, or promoting gender equality, or women's empowerment? Why do you say so?
5. Were any of you ever part of a session where FAMA cards were used?
  - Probes:
  - Can you tell us about the session and what the FAMA card was about?
  - Did you feel the FAMA card/s was about something that is happening in your community?
  - Do you think the FAMA card helped you to think about the issue/s in a new way? Why do you say so?
6. One of the things that this project hoped to achieve, is that leaders would speak for gender equality and women's empowerment, and against VAWG. And that women and girls would disclose and seek help if they are experiencing violence. Have you observed any changed in how leaders communicate about VAWG or speak out? Why do you say so?
  - What are the challenges for a leader in speaking publicly for gender equality and women's empowerment, and against VAWG?
7. Have you observed any changed in women and girls seeking help if they experienced violence?
  - What are the challenges for a woman or girl to tell someone and seek help and support if she is experiencing violence?
8. In other parts of Liberia, and across the world, organizations are working to address VAWG and promote gender equality. What do you think worked well here, that you think they should copy, or learn from you?
  - Possible probes:
  - What key lessons did you learn, that you think others should know about?
  - If you think about all the things that ECLRD did, and the things that you did, and the things that other people who were part of this project did – what do you think really worked that you think others should know about?
9. So, as you may know, ECLRD's project is coming to an end at the end of this year. You have told me a lot about the changes this project has brought in your community, and especially in the lives of women and girls. So with the ECLRD project coming to an end, do you think these changes will be sustained? Why do you say so?
  - Possible probes:
  - Do you think things will go back to the way it used to be, or will things stay changed? Why do you say so?
  - Do you think things will continue changing for the better for women and girls? Why do you say so?

#### FGD guide with boy and girl congregants

1. So can you tell me a bit more about which church or mosque you belong to, and about the activities that you engage in at your church/mosque?
2. I would like you think about the last four years, since the end of 2018. Have you noticed any changes in relation to violence against women and girls in your community? Would you say it has decreased, stayed the same or increased? Why do you say so?
3. (If VAWG has decreased:) What do you think contributed to VAWG decreasing here in your community?

(If VAWG has increased:) What do you think contributed to VAWG increasing here in your community?

4. ECLRD has, since 2018, been implementing a project here in your county and in your community, focused on improving the prevention of violence against women and girls, and the response to it, through engaging faith leaders.  
Now, if you think about what ECLRD has been doing, do you think it has contributed to ending violence against women and girls, or promoting gender equality, or women's empowerment? Why do you say so?
5. Were any of you ever part of a session where FAMA cards were used?
  - Probes:
  - Can you tell us about the session and what the FAMA card was about?
  - Did you feel the FAMA card/s was about something that is happening in your community?
  - Do you think the FAMA card helped you to think about the issue/s in a new way? Why do you say so?
6. One of the things that this project hoped to achieve, is that leaders would speak for gender equality and women's empowerment, and against VAWG. And that women and girls would disclose and seek help if they are experiencing violence. Have you observed any changed in how leaders communicate about VAWG or speak out? Why do you say so?
  - What are the challenges for a leader in speaking publicly for gender equality and women's empowerment, and against VAWG?
7. Have you observed any changed in women and girls seeking help if they experienced violence?
  - What are the challenges for a woman or girl to tell someone and seek help and support if she is experiencing violence?
8. In other parts of Liberia, and across the world, organizations are working to address VAWG and promote gender equality. What do you think worked well here, that you think they should copy, or learn from you?
  - Possible probes:
  - What key lessons did you learn, that you think others should know about?
  - If you think about all the things that ECLRD did, and the things that you did, and the things that other people who were part of this project did – what do you think really worked that you think others should know about?
9. So, as you may know, ECLRD's project is coming to an end at the end of this year. You have told me a lot about the changes this project has brought in your community, and especially in the lives of women and girls. So with the ECLRD project coming to an end, do you think these changes will be sustained? Why do you say so?
  - Possible probes:
  - Do you think things will go back to the way it used to be, or will things stay changed? Why do you say so?
  - Do you think things will continue changing for the better for women and girls? Why do you say so?

#### FGD guide for Savings with Education Group Leaders

1. So can you tell me a bit more about your Savings with Education groups, and about the activities that you engage in with your group?

2. I would like you think about the last four years, since the end of 2018. Have you noticed any changes in relation to violence against women and girls in your community? Would you say it has decreased, stayed the same or increased? Why do you say so?
3. (If VAWG has decreased:) What do you think contributed to VAWG decreasing here in your community?  
(If VAWG has increased:) What do you think contributed to VAWG increasing here in your community?
4. ECLRD has, since 2018, been implementing a project here in your county and in your community, focused on improving the prevention of violence against women and girls, and the response to it, through engaging faith leaders.  
Now, if you think about what ECLRD has been doing, do you think it has contributed to ending violence against women and girls, or promoting gender equality, or women's empowerment? Why do you say so?
5. One of the things that this project hoped to achieve, is that leaders would speak for gender equality and women's empowerment, and against VAWG. And that women and girls would disclose and seek help if they are experiencing violence. Have you observed any changed in how leaders communicate about VAWG or speak out? Why do you say so?
  - What are the challenges for a leader in speaking publicly for gender equality and women's empowerment, and against VAWG?
6. Have you observed any changed in women and girls seeking help if they experienced violence?
  - What are the challenges for a woman or girl to tell someone and seek help and support if she is experiencing violence?
7. In the project FAMA cards were used. Was it ever used in a session that you were part of, and/or did any of you ever use it yourself to lead a discussion on GBV?
  - Probes
  - *If involved in a session where FAMA cards were used:* What issues were raised by the FAMA cards? How did you experience the session? Do you think the discussion based on the FAMA cards changed the participants' attitudes and beliefs around the issue/s?
  - *If used FAMA cards:* Can you tell us about the session and how you used it? Do you feel it worked?
8. In other parts of Liberia, and across the world, organizations are working to address VAWG and promote gender equality. What do you think worked well here, that you think they should copy, or learn from you?
  - Possible probes:
  - What key lessons did you learn, that you think others should know about?
  - If you think about all the things that ECLRD did, and the things that you did, and the things that other people who were part of this project did – what do you think really worked that you think others should know about?
9. So, as you may know, ECLRD's project is coming to an end at the end of this year. You have told me a lot about the changes this project has brought in your community, and especially in the lives of women and girls. So with the ECLRD project coming to an end, do you think these changes will be sustained? Why do you say so?
  - Possible probes:
  - Do you think things will go back to the way it used to be, or will things stay changed? Why do you say so?
  - Do you think things will continue changing for the better for women and girls? Why do you say so?

## FGD guide for Savings with Education Group members

1. So can you tell me a bit more about your Savings with Education groups, and about the activities that you engage in with your group?
2. I would like you think about the last four years, since the end of 2018. Have you noticed any changes in relation to violence against women and girls in your community? Would you say it has decreased, stayed the same or increased? Why do you say so?
3. (If VAWG has decreased:) What do you think contributed to VAWG decreasing here in your community?  
(If VAWG has increased:) What do you think contributed to VAWG increasing here in your community?
4. ECLRD has, since 2018, been implementing a project here in your county and in your community, focused on improving the prevention of violence against women and girls, and the response to it, through engaging faith leaders.  
Now, if you think about what ECLRD has been doing, do you think it has contributed to ending violence against women and girls, or promoting gender equality, or women's empowerment? Why do you say so?
6. Were any of you ever part of a session where FAMA cards were used?
  - Probes
  - Can you tell us about the session and what the FAMA card was about?
  - Did you feel the FAMA card/s was about something that is happening in your community?
  - Do you think the FAMA card helped you to think about the issue/s in a new way? Why do you say so?
7. One of the things that this project hoped to achieve, is that leaders would speak for gender equality and women's empowerment, and against VAWG. And that women and girls would disclose and seek help if they are experiencing violence. Have you observed any changed in how leaders communicate about VAWG or speak out? Why do you say so?
  - What are the challenges for a leader in speaking publicly for gender equality and women's empowerment, and against VAWG?
8. Have you observed any changed in women and girls seeking help if they experienced violence?
  - What are the challenges for a woman or girl to tell someone and seek help and support if she is experiencing violence?
9. In other parts of Liberia, and across the world, organizations are working to address VAWG and promote gender equality. What do you think worked well here, that you think they should copy, or learn from you?
  - Possible probes:
  - What key lessons did you learn, that you think others should know about?
  - If you think about all the things that ECLRD did, and the things that you did, and the things that other people who were part of this project did – what do you think really worked that you think others should know about?
10. So, as you may know, ECLRD's project is coming to an end at the end of this year. You have told me a lot about the changes this project has brought in your community, and especially in the lives of women and girls. So with the ECLRD project coming to an end, do you think these changes will be sustained? Why do you say so?
  - Possible probes:
  - Do you think things will go back to the way it used to be, or will things stay changed? Why do you say so?
  - Do you think things will continue changing for the better for women and girls? Why do you say so?

## FGD guide for ECLRD and Episcopal Relief &amp; Development staff

1. Can we start off with each of you telling me about your roles and responsibilities at ECLRD?
2. Let us start with the 'big picture' of this 4-year project. You are now at the end of the implementation period. To what extent, do you think, has the intended project goal been achieved? Why do you say so?
3. How do you think the project has impacted the communities where it has been implemented?
  - Probes:
    - Has it changed the gender dynamics? Why do you say so?
    - Has it influenced the dominant attitudes and beliefs around gender and VAWG?
    - Has it impacted the extent to which VAWG is being perpetrated?
4. How has Phase 2 differed from Phase 1?
  - Probes:
    - Any additional activities, locations, beneficiaries?
5. Do you think these changes between Phase 2 and Phase 1 have led to any changes in impact in the target communities? Why do you say so?
6. Do you think your project has influenced EVAWG activism more broadly in any way? Why do you say so?
7. Do you think that the positive results that the project has achieved, are sustainable? Why do you say so?
8. If you think back over the past 4 years, what important knowledge or promising practices or key lessons learnt emerge for you as most crucial or important?
9. If you think back over the past 4 years, have any other organizations or institutions implemented EVAWG, gender equality or women's empowerment programming in the communities where ECLRD's project has been implemented? If so, can you tell me about the project/s?
10. Do you know if any VAWG projects have happened in Marigibi? If so, can you tell me about the project/s?
11. You received a Spotlight Initiative grant, which was meant to strengthen your organization in how it does EVAWG work during COVID-19 and in crises in general.
  - Probes:
    - What activities did you implement specifically to strengthen ECLRD's adaptability and resilience in crises?
    - How do you think these strengthening activities helped you in continuing implementation during COVID-19?
    - How do you think it will help you in any future pandemic or crises?
12. Can you tell me about the new digitalised data collection and management system that ECLRD is using?
  - Probes:
    - Are you using it?
    - How is it different from what you did before?
    - Is it easy to use, or are you struggling?

### KII guide for ECLRD staff (county and national level)

1. Can you tell me about your role and responsibilities at ECLRD?
2. Let us start with the 'big picture' of this 4-year project. You are now at the end of the implementation period. To what extent, do you think, has the intended project goal been achieved? Why do you say so?
3. Do you think these achieved results – which you designed 4 years ago – are still relevant to the needs of women and girls?
  - Probes:
  - What gaps have emerged during the implementation period? Which needs are not being addressed by the project?
4. How do you think the project has impacted the communities where it has been implemented?
  - Probes:
  - Has it changed the gender dynamics? Why do you say so?
  - Has it influenced the dominant attitudes and beliefs around gender and VAWG?
  - Has it impacted the extent to which VAWG is being perpetrated?
5. How has Phase 2 differed from Phase 1?
  - Probes:
  - Any additional activities, locations, beneficiaries?
6. Do you think these changes between Phase 2 and Phase 1 have led to any changes in impact in the target communities? Why do you say so?
7. Do you think your project has influenced EVAWG activism more broadly in any way? Why do you say so?
8. Do you think that the positive results that the project has achieved, are sustainable? Why do you say so?
9. If you think back over the past 4 years, what important knowledge or promising practices or key lessons learnt emerge for you as most crucial or important?
10. If you think back over the past 4 years, have any other organizations or institutions implemented EVAWG, gender equality or women's empowerment programming in the communities where ECLRD's project has been implemented? If so, can you tell me about the project/s?
11. Do you know if any VAWG projects have happened in Marigibi? If so, can you tell me about the project/s?

Now we are going to dig into a bit more detail around project design and implementation.

12. Looking back over the past 4 years, how appropriate do you think your project design and implementation was for achieving this project goal?
  - Probe: With the benefit of hindsight, what do you think should have been different with design or implementation?
13. Do you think the project was efficiently and cost-effectively implemented? Why do you say so?
14. Was a human rights approach incorporated into the project? Why do you say so?
15. Were any gender responsive approaches incorporated into the project? Why do you say so?

I want us to reflect on COVID-19 for a bit.

16. What impact did COVID-19 have on VAWG, gender equality and women's empowerment in the communities that you were implementing this project – and how did this force you to adapt your programming?
17. Overall, what has the reality of adapting to COVID-19 taught you about project design and implementation?

18. You received a Spotlight Initiative grant, which was meant to strengthen your organization in how it does EVAWG work during COVID-19 and in crises in general. Do you think these institutional strengthening activities contribute to ECLRD's adaptability and resilience – not just during COVID-19, but overall? Why do you say so?
19. Can you tell me about the new digitalised data collection and management system that ECLRD is using?
  - Probes:
  - Are you using it?
  - Is it easy to use, or are you struggling?

#### KII guide for national level and county level stakeholders/partners

1. Can you tell me a bit about your job and how you work with ECLRD?
2. ECLRD has been implementing a programme over the last 4 years in Bong, Grand Gedeh, Rivercess and Grand Cape Mount, entitled "Scaling up Faith Leaders Engagement to Prevent and Respond to Violence Against Women and Girls". As you may know, this project is now coming to an end. What is your understanding of this project – what was its aim?
3. The overarching goal of the project was that women and girls experience less intimate partner violence and non-partner sexual violence, and have increased access to services. This would be achieved through capacitating faith, youth and school leaders to speak out against VAWG and challenge harmful cultural norms; and for Muslim and Christian faith communities to increase their support of and advocacy for survivors of violence. These project goal and outcomes were designed 4 years ago. A lot may have changed since then. Do you think that what the project tried to achieve is still relevant to the needs of women and girls in these communities today? Why do you say so?
4. How do you think the project has impacted the communities where it has been implemented?
  - Probes:
  - Has it changed the gender dynamics? Why do you say so?
  - Has it influenced the dominant attitudes and beliefs around gender and VAWG?
  - Has it impacted the extent to which VAWG is being perpetrated?
5. Do you think that the positive results that the project has achieved, are sustainable? Why do you say so?
6. If you think back over the past 4 years, have any other organizations or institutions implemented EVAWG, gender equality or women's empowerment programming in the communities where ECLRD's project has been implemented? If so, can you tell me about the project/s?
7. Do you know if any VAWG projects have happened in Marigibi county? If so, can you tell me about the project/s?
8. (Question only for NFLAC members and County Faith Coalition members:) What are the opportunities and barriers for sustaining the programme activities once the Episcopal Relief & Development and ECLRD project has come to a close?
9. (Question only for NFLAC members and County Faith Coalition members:) What are the most impactful project activities that you think need to be sustained, replicated and scaled?
10. (Question only for NFLAC members and County Faith Coalition members:) Which project activities will you prioritise to lead and manage, and which activities need to continue through ECLRD or other stakeholders?

## Annex F5: Consent forms, information statements and non-disclosure agreements

Consent form for congregant survey participation



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### **STELLENBOSCH UNIVERSITY CONSENT TO PARTICIPATE IN RESEARCH**

#### **Endline study for VAWG programme – Congregant survey**

You are invited to participate in a research study conducted by Drs. Elisabet le Roux (Stellenbosch University, South Africa) and Julienne Corboz. You were invited as a possible participant in the study because you are a member of one of the communities involved in a project by Episcopal Relief and Development and Episcopal Church of Liberia Relief and Development (ECLRD), and you took part in the baseline study conducted at the start of 2019.

This study serves as an endline for a programme implemented over the past 4 years, aimed at improving violence prevention and response to women survivors through engaging faith leaders.

If you agree to participate in this study, you will spend about 45 minutes answering questions about your life. There are no right or wrong answers, the questions are not difficult and everything that you tell us will be kept secret.

The questions that we will ask you are about your situation at home and so we have questions about your home, who lives there, and income and food at home. We want to know about your health and how women and girls in the household access and use health services. We also want to know about how happy you are, how satisfied you are with your life and how things are at home and so we have questions on these matters, including questions on violence and trauma you may have experienced in your life in the community and at home.

The questions will be asked by trained interviewers and they will note down what you say on a mobile phone device. We would like to interview you in a private place so no one else can hear what you say.

You will remain anonymous in the reporting process. Not your name, nor identifying information will be included in the report. You will not receive any payment for taking part in this study. Confidentiality will be maintained by means of using codes instead of names, keeping paper documents in locked cupboards and offices, and storing data on password-protected computers. Only the researchers will have access to any notes that are taken.

The survey may bring up difficult feelings or memories for you. Counselling services will be available, both during and after the session. If you want to speak to a counsellor during or immediately after completing the survey, you will be able to speak to the counsellor immediately. The researcher will also share with you the contact information of the counsellor, should you want to speak to someone at a later stage. ECLRD is committed to supporting any person who might experience emotional distress from taking part in the survey.

This research has been commissioned by Episcopal Relief and Development. The data collected during this survey will be shared with Episcopal Relief and Development, as will the final report that is prepared based on the data.

You can choose whether to be part of this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don't want to answer and still remain in the study. If you have any questions or concerns about the research, please feel free to contact the Lead Researcher, Elisabet le Roux (eleroux@sun.ac.za).

The Research Ethics Committee: Social, Behavioural and Education Research at Stellenbosch University has approved this study (Project ID #24809]. We commit to conduct the study according to the ethical guidelines and principles of the South African Department of Health Ethics in Health Research: Principles, Processes and Studies (2015).

If you have questions, concerns, or a complaint regarding your rights as a research participant in this research project, please contact Mrs Clarissa Robertson [cgraham@sun.ac.za; (+27) 021 808 9183] at the Division for Research Development.

**If you are willing to participate in this study please sign the attached Declaration of Consent and share it with the researcher.**

### DECLARATION OF CONSENT BY PARTICIPANT

**As the participant, I declare that:**

- \* I have read this information and consent form, or it was read to me, and it is written in a language in which I am fluent and with which I am comfortable.
- \* I have had a chance to ask questions and I am satisfied that all my questions have been answered
- \* I understand that taking part in this study is voluntary, and I have not been pressurised to take part.
- \* I may choose to leave the study at any time and nothing bad will come of it – I will not be penalised or prejudiced in any way.

By signing below, I \_\_\_\_\_ (name of participant)  
 agree to take part in this research study, as conducted by \_\_\_\_\_ (name of  
 principal investigator).

\_\_\_\_\_  
**Signature of Participant**

\_\_\_\_\_  
**Date**

### DECLARATION BY THE RESEARCHER

As the researcher, I hereby declare that the information contained in this document has been thoroughly explained to the participant. I also declare that the participant has been encouraged (and has been given ample time) to ask any questions. In addition, I would like to select the following option:

	The conversation with the participant was conducted in a language in which the participant is fluent.
	I did/did not use an interpreter. (If an interpreter is used then the interpreter must sign the declaration below.)

\_\_\_\_\_  
 Signature of Principal Investigator

\_\_\_\_\_  
 Date

## Consent form for faith, youth, school leaders and youth members survey participation



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**STELLENBOSCH UNIVERSITY**  
**CONSENT TO PARTICIPATE IN RESEARCH**

**Endline study for VAWG programme – Survey with faith, youth, school leaders and youth members**

You are invited to participate in a research study conducted by Drs. Elisabet le Roux (Stellenbosch University, South Africa) and Julienne Corboz. You were invited as a possible participant in the study because of being a faith/youth/school leader or youth members in one of the communities involved in a project by Episcopal Relief and Development and Episcopal Church of Liberia Relief and Development (ECLRD). This study serves as an endline for a programme implemented over the past 4 years, aimed at improving violence prevention and response to women survivors through engaging faith leaders.

If you to participate in this study, you will spend about 45 minutes answering questions about your life and your role as a youth leader or faith leader. The questions that we will ask you are about your role communicating with people in your community about the rights of women and girls, and preventing violence. There are no right or wrong answers, the questions are not difficult and everything that you tell us will be kept secret.

The questions will be asked by trained interviewers and they will note down what you say on a mobile phone device. We would like to interview you in a private place so no one else can hear what you say.

You will remain anonymous in the reporting process. Not your name, nor identifying information will be included in the report. You will not receive any payment for taking part in this study. Confidentiality will be maintained by means of using codes instead of names, keeping paper documents in locked cupboards and offices, and storing data on password-protected computers. Only the researchers will have access to any notes that are taken.

The survey may bring up difficult feelings or memories for you. Counselling services will be available, both during and after the session. If you want to speak to a counsellor during or immediately after completing the survey, you will be able to speak to the counsellor immediately. The researcher will also share with you the contact information of the counsellor, should you want to speak to someone at a later stage. ECLRD is committed to supporting any person who might experience emotional distress from taking part in the survey.

This research has been commissioned by Episcopal Relief and Development. The data collected during this survey will be shared with Episcopal Relief and Development, as will the final report that is prepared based on the data.

You can choose whether to be part of this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don't want to answer and still remain in the study. If you have any questions or concerns about the research, please feel free to contact the Lead Researcher, Elisabet le Roux (eleroux@sun.ac.za).

The Research Ethics Committee: Social, Behavioural and Education Research at Stellenbosch University has approved this study (Project ID #24809]. We commit to conduct the study according to the ethical guidelines and principles of the South African Department of Health Ethics in Health Research: Principles, Processes and Studies (2015).

If you have questions, concerns, or a complaint regarding your rights as a research participant in this research project, please contact Mrs Clarissa Robertson [cgraham@sun.ac.za; (+27) 021 808 9183] at the Division for Research Development.

**If you are willing to participate in this study please sign the attached Declaration of Consent and share it with the researcher.**

**DECLARATION OF CONSENT BY PARTICIPANT**

**As the participant, I declare that:**

- \* I have read this information and consent form, or it was read to me, and it is written in a language in which I am fluent and with which I am comfortable.
- \* I have had a chance to ask questions and I am satisfied that all my questions have been answered
- \* I understand that taking part in this study is voluntary, and I have not been pressurised to take part.

\* I may choose to leave the study at any time and nothing bad will come of it – I will not be penalised or prejudiced in any way.

By signing below, I \_\_\_\_\_ (name of participant)  
agree to take part in this research study, as conducted by \_\_\_\_\_ (name of  
principal investigator).

\_\_\_\_\_  
**Signature of Participant**

\_\_\_\_\_  
**Date**

#### **DECLARATION BY THE RESEARCHER**

As the researcher, I hereby declare that the information contained in this document has been thoroughly explained to the participant. I also declare that the participant has been encouraged (and has been given ample time) to ask any questions. In addition, I would like to select the following option:

	The conversation with the participant was conducted in a language in which the participant is fluent.
	I did/did not use an interpreter. (If an interpreter is used then the interpreter must sign the declaration below.)

\_\_\_\_\_  
Signature of Principal Investigator

\_\_\_\_\_  
Date

## Parental consent form for adolescent congregant survey participation



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### **PARENTAL CONSENT TO PARTICIPATE IN RESEARCH**

#### **Endline study for VAWG programme – Adolescent survey participants**

Your child has been invited to participate in a research study conducted by Drs. Elisabet le Roux (Stellenbosch University, South Africa) and Julienne Corboz. Your child was selected as a possible participant in the study because of being a member of one of the communities involved in a project by Episcopal Relief and Development and Episcopal Church of Liberia Relief and Development (ECLRD), and as they took part in the baseline study conducted at the start of 2019. This study serves as an endline for a programme implemented over the past 4 years, aimed at improving violence prevention and response to women survivors through engaging faith leaders.

If you agree that your child may participate in this study, your child will spend about 45 minutes answering questions about their life. There are no right or wrong answers, the questions are not difficult and everything that your child tells us will be kept secret.

The questions that we will ask your child are about their situation at home and so we have questions about their home, who lives there, and income and food at home. We want to know about their health and how women and girls in the household access and use health services. We also want to know about how happy they are, how satisfied they are with their life and how things are at home and so we have questions on these matters, including questions on violence and trauma they may have experienced in their life in the community and at home.

The questions will be asked by trained interviewers and they will note down what your child says on a mobile phone device. We would like to interview your child in a private place so no one else can hear what they say. In around three years' time, we would like to come and find your child again to ask them the same questions to see how things have changed.

Both you and your child will remain anonymous in the reporting process. Not your names, nor identifying information will be included in the report. You or your child will not receive any payment for taking part in this study. Confidentiality will be maintained by means of using codes instead of names, keeping paper documents in locked cupboards and offices, and storing data on password-protected computers. Only the researchers will have access to any notes that are taken.

The survey may bring up difficult feelings or memories for your child. Counselling services will be available, both during and after the session. If your child wants to speak to a counsellor during or immediately after completing the survey, they will be able to speak to the counsellor immediately. The researcher will also share with them the contact information of the counsellor, should they want to speak to someone at a later stage. ECLRD is committed to supporting any person who might experience emotional distress from taking part in the survey.

Your child's confidentiality will be respected with the following exceptions. In the case that they tell an enumerator about violence or abuse that someone has committed against them, the enumerator will make a recommendation to them that they speak to our trained counsellor who will be able to help them to decide what to do. However, the enumerator will not speak to the counsellor unless your child gives their consent.

This research has been commissioned by Episcopal Relief and Development. The data collected during this survey will be shared with Episcopal Relief and Development, as will the final report that is prepared based on the data.

You and your child can choose whether your child will be part of this study or not. If your child volunteers to be in this study, your child may withdraw at any time without consequences of any kind. Your child may also refuse to answer any questions that he/she doesn't want to answer and still remain in the study. The researcher may withdraw your child from this research if circumstances arise which warrant doing so. If you have any questions or concerns about the research, please feel free to contact the Lead Researcher, Elisabet le Roux (eleroux@sun.ac.za).

The Research Ethics Committee: Social, Behavioural and Education Research at Stellenbosch University has approved this study (Project ID #24809]. We commit to conduct the study according to the ethical guidelines and principles of the South African Department of Health Ethics in Health Research: Principles, Processes and Studies (2015).

If you have questions, concerns, or a complaint regarding your rights as a research participant in this research project, please contact Mrs Clarissa Robertson [cgraham@sun.ac.za; (+27) 021 808 9183] at the Division for Research Development.

### Signature of research subject

#### As parent/caregiver of the participant, I declare that:

- \* I have read this information and consent form, or it was read to me, and it is written in a language in which I am fluent and with which I am comfortable.
- \* I have had a chance to ask questions and I am satisfied that all my questions have been answered
- \* I understand that taking part in this study is voluntary, and I have not been pressurised to let my child take part.
- \* I understand that my child may choose to leave the study at any time and nothing bad will come of it – neither my child or I will not be penalised or prejudiced in any way.

By signing below, I \_\_\_\_\_ (name of participant)

agree that my child may take part in this research study, as conducted by \_\_\_\_\_  
(name of

principal investigator).

\_\_\_\_\_

\_\_\_\_\_

**Signature of Parent**

**Date**

#### DECLARATION BY THE RESEARCHER

As the researcher, I hereby declare that the information contained in this document has been thoroughly explained to the participant. I also declare that the participant has been encouraged (and has been given ample time) to ask any questions. In addition, I would like to select the following option:

	The conversation with the participant was conducted in a language in which the participant is fluent.
	I did/did not use an interpreter. (If an interpreter is used then the interpreter must sign the declaration below.)

\_\_\_\_\_

\_\_\_\_\_

Signature of Principal Investigator

Date

Information sheet for parents of potential adolescent congregant survey participants



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**STELLENBOSCH UNIVERSITY**  
**PARENTAL CONSENT TO PARTICIPATE IN RESEARCH**

**Endline survey for VAWG programme**

Dear Parent,

We would like to invite your child to participate in research that will help us to understand the impact of a programme implemented over the past 4 years by Episcopal Relief and Development and Episcopal Church of Liberia Relief and Development (ECLRD), aimed at improving violence prevention and response to women survivors through engaging faith leaders. We want you to decide if you want your child to be part of this study. Before you agree for him or her to take part in this research you should know all about what is involved. If you have any other questions please ask.

**WHAT WILL HAPPEN?**

This programme is being done by Episcopal Relief and Development and Episcopal Church of Liberia Relief and Development (ECLRD) in 54 communities in Liberia, and your community is one of these. The research will involve your child spending about 45 minutes answering questions about their life. They did so 4 years ago as well, at the start of 2019. There are no right or wrong answers, the questions are not difficult and everything that your child tells us will be kept secret.

The questions that we will ask your child are about their situation at home and so we have questions about their home, who lives there, and income and food at home. We want to know about their health and how women and girls in the household access and use health services. We also want to know about how happy they are, how satisfied they are with their life and how things are at home and so we have questions on these matters, including questions on violence and trauma they may have experienced in their life in the community and at home.

The questions will be asked by trained interviewers and they will note down what your child says on a mobile phone device. We would like to interview your child in a private place so no one else can hear what they say.

**ARE THERE ANY RISKS?**

The research will not put your child at risk, but if you or your child feels bothered after the interview you may ask to talk to one of the research team or to a staff member of ECLRD. Furthermore, your child will also be given the contact information of a counsellor within your community.

**DOES MY CHILD HAVE TO PARTICIPATE?**

No. It is completely your choice and the choice of your child. No one will be upset or disappointed with you or your child if they do not take part in this study. You and your child may decide that he or she will participate and then your child may decide there are some questions he or she doesn't want to answer, or you and your child may decide at a later time that you no longer want them to participate in the study. If this happens, it is your choice and your child's choice and no one will be upset with you or your child.

**WILL ANYONE KNOW WHAT ANSWERS YOUR CHILD HAS GIVEN IN THE INTERVIEWS?**

No one will know what your child says or see the answers that your child has given. The answers will be collected together and we will only tell people about the answers given by all of the participants together.

Your child's confidentiality will be respected with the following exceptions. In the case that they tell an interviewer about violence or abuse that someone has committed against them, the interviewer will make a recommendation to them that they speak to our trained counsellor who will be able to help them to decide what to do. However, the interviewer will not speak to the counsellor unless your child gives their consent.

#### **WHAT ABOUT THE RESULTS OF THE STUDY?**

We will never tell anyone your child's name when we describe what we find out through the research. We will use the results of the study to develop better ways of helping men and women in Liberia.

#### **ETHICAL APPROVAL**

We have been allowed to do this research by the ethics committee of Stellenbosch University in South Africa.

If you have any questions about the study or something that you are not happy about, or if you have questions about your child's rights as a research subject, please feel free to contact Mrs Clarissa Robertson [cgraham@sun.ac.za; (+27) 021 808 9183] at the Division for Research Development.

#### **Compensation**

Your child's participation in this study is voluntary and there is no remuneration.

#### **Confidentiality**

All information that your child will give in this study will be kept strictly confidential. When we write study reports, no one will be able to identify the information that your child has given in this study, therefore no one will know what he or she said in the questionnaire.

#### **WHO CAN I ASK IF I HAVE QUESTIONS ABOUT THE STUDY?**

If you have any questions or concerns about the research, please feel free to contact the Lead Researcher, Elisabet le Roux (eleroux@sun.ac.za).

Consent form for all FGDs at county level



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### STELLENBOSCH UNIVERSITY CONSENT TO PARTICIPATE IN RESEARCH - FGDs

We would like to invite you to participate in endline research on a programme implemented over the last 4 years by *Episcopal Church of Liberia – Relief and Development (ECLRD)* and *Episcopal Relief & Development*, on scaling up faith leaders' engagement to prevent and respond to violence against women and girls (VAWG). This study is being conducted by Drs. Elisabet le Roux (Stellenbosch University, South Africa) and Julienne Corboz. You are invited because you were involved in or impacted by this programme's implementation.

Please take some time to read the information presented here, which will explain the details of this project and contact us if you require further explanation or clarification of any aspect of the study. Also, your participation is **entirely voluntary** and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw from the study at any point, even if you do agree to take part. With your permission, the information that has been collected from you up to that point will be used. If you do not provide permission, it will be deleted.

We are asking you to take part in a focus group discussion (FGD) that will last no more than 90 minutes. In the FGD we will discuss your community, VAWG, the programme implemented by ECLRD and Episcopal Relief & Development, and the impact of the programme.

You will remain anonymous: not your name, your position, nor identifying information will be included in any reporting. Any information you share with us during this study and that could possibly identify you as a participant will be protected. You will not receive any payment for taking part in this study. Confidentiality will be maintained by means of using codes instead of names and storing data on password-protected computers. Only we will have access to any notes that are taken.

The session will be recorded. You will have the right to review/edit the recording after the session. These recordings will be transcribed. Only the transcriber and the two researchers will have access to these recordings and transcriptions.

The FGD may bring up difficult feelings or memories for you. Counselling services will be available, both during and after the session. If you want to speak to a counsellor during or immediately after the session, you will be able to speak to the counsellor immediately. The researcher will also share with you the contact information of the counsellor, should you want to speak to someone at a later stage. ECLRD is committed to supporting any person who might experience emotional distress from taking part in the FGD.

This research has been commissioned by Episcopal Relief & Development. They will, however, only have access to the reports that are produced based on this research. They will not have any access to the raw data (audio recordings and notes), nor to any data that can be connected to you as an individual.

You can choose whether to be part of this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don't want to answer and still remain in the study. If you have any questions or concerns about the research, please feel free to contact the Lead Researcher, Elisabet le Roux (eleroux@sun.ac.za).

The Research Ethics Committee: Social, Behavioural and Education Research at Stellenbosch University has approved this study (Project ID #24809]. We commit to conduct the study according to the ethical

guidelines and principles of the South African Department of Health Ethics in Health Research: Principles, Processes and Studies (2015).

If you have questions, concerns, or a complaint regarding your rights as a research participant in this research project, please contact Mrs Clarissa Robertson [cgraham@sun.ac.za; (+27) 021 808 9183] at the Division for Research Development.

**If you are willing to participate in this study please sign the attached Declaration of Consent and share it with the researcher.**

#### **DECLARATION OF CONSENT BY PARTICIPANT**

As the participant, I declare that:

- \* I have read this information and consent form, or it was read to me, and it is written in a language in which I am fluent and with which I am comfortable.
- \* I have had a chance to ask questions and I am satisfied that all my questions have been answered
- \* I understand that taking part in this study is voluntary, and I have not been pressurised to take part.
- \* I may choose to leave the study at any time and nothing bad will come of it – I will not be penalised or prejudiced in any way.

By signing below, I \_\_\_\_\_ (name of participant)

agree to take part in this research study, as conducted by \_\_\_\_\_ (name of principal investigator).

- I agree that the focus group that I will take part in, can be audio-recorded.
- I do not agree that the focus group that I will take part in, can be audio-recorded.

\_\_\_\_\_

\_\_\_\_\_

**Signature of Participant**

**Date**

#### **DECLARATION BY THE RESEARCHER**

As the researcher, I hereby declare that the information contained in this document has been thoroughly explained to the participant. I also declare that the participant has been encouraged (and has been given ample time) to ask any questions. In addition, I would like to select the following option:

	The conversation with the participant was conducted in a language in which the participant is fluent.
	I did/did not use an interpreter. (If an interpreter is used then the interpreter must sign the declaration below.)

\_\_\_\_\_

\_\_\_\_\_

Signature of Principal Investigator

Date

Consent form for staff KIIs & FGDs



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### STELLENBOSCH UNIVERSITY CONSENT TO PARTICIPATE IN RESEARCH – Staff KIIs & FGDs

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We would like to invite you to participate in endline research on a programme implemented over the last 4 years by *Episcopal Church of Liberia – Relief and Development (ECLRD)* and *Episcopal Relief & Development*, on scaling up faith leaders' engagement to prevent and respond to violence against women and girls (VAWG). This study is being conducted by Drs. Elisabet le Roux (Stellenbosch University, South Africa) and Julienne Corboz. You are invited to take part because you are a ECLRD staff member.

Please take some time to read the information presented here, which will explain the details of this project and contact us if you require further explanation or clarification of any aspect of the study. Also, your participation is **entirely voluntary** and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw from the study at any point, even if you do agree to take part. With your permission, the information that has been collected from you up to that point will be used. If you do not provide permission, it will be deleted.

We are asking you to take part in either a key informant interview (KII) or a focus group discussion (FGD). It will last no more than 90 minutes. In these sessions we will discuss the programme you have implemented over the past 4 years, what has been achieved, and what you have learnt from it.

Your are invited to take part in a:

- Key informant interview  
 Focus group discussion

You will remain anonymous: not your name, your position, nor identifying information will be included in any reporting. Any information you share with us during this study and that could possibly identify you as a participant will be protected. You will not receive any payment for taking part in this study. Confidentiality will be maintained by means of using codes instead of names and storing data on password-protected computers. Only we will have access to any notes that are taken.

The session will be recorded. You will have the right to review/edit the recording after the session. These recordings will be transcribed. Only the transcriber and the two researchers will have access to these recordings and transcriptions.

The research session may bring up difficult feelings or memories for you. Counselling services will be available, both during and after the session. If you want to speak to a counsellor during or immediately after the session, you will be able to speak to the counsellor immediately. The researcher will also share with you the contact information of the counsellor, should you want to speak to someone at a later stage. ECLRD is committed to supporting any person who might experience emotional distress from taking part in the FGD.

This research has been commissioned by Episcopal Relief & Development. They will, however, only have access to the reports that are produced based on this research. They will not have any access to

the raw data (audio recordings and notes), nor to any data that can be connected to you as an individual.

You can choose whether to be part of this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don't want to answer and still remain in the study. If you have any questions or concerns about the research, please feel free to contact the Lead Researcher, Elisabet le Roux (eleroux@sun.ac.za).

The Research Ethics Committee: Social, Behavioural and Education Research at Stellenbosch University has approved this study (Project ID #24809]. We commit to conduct the study according to the ethical guidelines and principles of the South African Department of Health Ethics in Health Research: Principles, Processes and Studies (2015).

If you have questions, concerns, or a complaint regarding your rights as a research participant in this research project, please contact Mrs Clarissa Robertson [cgraham@sun.ac.za; (+27) 021 808 9183] at the Division for Research Development.

**If you are willing to participate in this study please sign the attached Declaration of Consent and share it with the researcher.**

#### DECLARATION OF CONSENT BY PARTICIPANT

As the participant, I declare that:

- \* I have read this information and consent form, or it was read to me, and it is written in a language in which I am fluent and with which I am comfortable.
- \* I have had a chance to ask questions and I am satisfied that all my questions have been answered
- \* I understand that taking part in this study is voluntary, and I have not been pressurised to take part.
- \* I may choose to leave the study at any time and nothing bad will come of it – I will not be penalised or prejudiced in any way.

By signing below, I \_\_\_\_\_ (name of participant) agree to take part in this research study, as conducted by \_\_\_\_\_ (name of principal investigator).

- I agree that the focus group/key informant interview that I will take part in, can be audio-recorded.
- I do not agree that the focus group/key informant interview that I will take part in, can be audio-recorded.

\_\_\_\_\_  
**Signature of Participant**

\_\_\_\_\_  
**Date**

#### DECLARATION BY THE RESEARCHER

As the researcher, I hereby declare that the information contained in this document has been thoroughly explained to the participant. I also declare that the participant has been encouraged (and has been given ample time) to ask any questions. In addition, I would like to select the following option:

	The conversation with the participant was conducted in a language in which the participant is fluent.

	I did/did not use an interpreter. (If an interpreter is used then the interpreter must sign the declaration below.)
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Signature of Principal Investigator

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Date

Consent forms for KIIs with national and county level stakeholders & partners



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## **STELLENBOSCH UNIVERSITY**

### **CONSENT TO PARTICIPATE IN RESEARCH – KIIs with partners and stakeholders**

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We would like to invite you to participate in endline research on a programme implemented over the last 4 years by *Episcopal Church of Liberia – Relief and Development (ECLRD)* and *Episcopal Relief & Development*, on scaling up faith leaders' engagement to prevent and respond to violence against women and girls (VAWG). This study is being conducted by Drs. Elisabet le Roux (Stellenbosch University, South Africa) and Julienne Corboz. You are invited because you engaged with this programme as a national or county-level stakeholder or partner.

Please take some time to read the information presented here, which will explain the details of this project and contact us if you require further explanation or clarification of any aspect of the study. Also, your participation is **entirely voluntary** and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw from the study at any point, even if you do agree to take part. With your permission, the information that has been collected from you up to that point will be used. If you do not provide permission, it will be deleted.

We are asking you to take part in a key informant interview (KII) that will last no more than 90 minutes. In the KII we will discuss the programme implemented by ECLRD, how it has impacted the community, and what can be learnt from it.

You will remain anonymous: not your name, your position, nor identifying information will be included in any reporting. Any information you share with us during this study and that could possibly identify you as a participant will be protected. You will not receive any payment for taking part in this study. Confidentiality will be maintained by means of using codes instead of names and storing data on password-protected computers. Only we will have access to any notes that are taken.

The session will be recorded. You will have the right to review/edit the recording after the session. These recordings will be transcribed. Only the transcriber and the two researchers will have access to these recordings and transcriptions.

The KII may bring up difficult feelings or memories for you. Counselling services will be available, both during and after the session. If you want to speak to a counsellor during or immediately after the session, you will be able to speak to the counsellor immediately. The researcher will also share with you the contact information of the counsellor, should you want to speak to someone at a later stage. ECLRD is committed to supporting any person who might experience emotional distress from taking part in the FGD.

This research has been commissioned by Episcopal Relief & Development. They will, however, only have access to the reports that are produced based on this research. They will not have any access to the raw data (audio recordings and notes), nor to any data that can be connected to you as an individual.

You can choose whether to be part of this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don't want to answer and still remain in the study. If you have any questions or concerns about the research, please feel free to contact the Lead Researcher, Elisabet le Roux (eleroux@sun.ac.za).

The Research Ethics Committee: Social, Behavioural and Education Research at Stellenbosch University has approved this study (Project ID #24809]. We commit to conduct the study according to the ethical guidelines and principles of the South African Department of Health Ethics in Health Research: Principles, Processes and Studies (2015).

If you have questions, concerns, or a complaint regarding your rights as a research participant in this research project, please contact Mrs Clarissa Robertson [cgraham@sun.ac.za; (+27) 021 808 9183] at the Division for Research Development.

**If you are willing to participate in this study please sign the attached Declaration of Consent and share it with the researcher.**

#### **DECLARATION OF CONSENT BY PARTICIPANT**

As the participant, I declare that:

- \* I have read this information and consent form, or it was read to me, and it is written in a language in which I am fluent and with which I am comfortable.
- \* I have had a chance to ask questions and I am satisfied that all my questions have been answered
- \* I understand that taking part in this study is voluntary, and I have not been pressurised to take part.
- \* I may choose to leave the study at any time and nothing bad will come of it – I will not be penalised or prejudiced in any way.

By signing below, I \_\_\_\_\_ (name of participant) agree to take part in this research study, as conducted by \_\_\_\_\_ (name of principal investigator).

- I agree that the key informant interview that I will take part in, can be audio-recorded.
- I do not agree that the key informant interview that I will take part in, can be audio-recorded.

\_\_\_\_\_  
**Signature of Participant**

\_\_\_\_\_  
**Date**

#### **DECLARATION BY THE RESEARCHER**

As the researcher, I hereby declare that the information contained in this document has been thoroughly explained to the participant. I also declare that the participant has been encouraged (and has been given ample time) to ask any questions. In addition, I would like to select the following option:

	The conversation with the participant was conducted in a language in which the participant is fluent.
	I did/did not use an interpreter. (If an interpreter is used then the interpreter must sign the declaration below.)

\_\_\_\_\_  
Signature of Principal Investigator

\_\_\_\_\_  
Date

## Parental consent for adolescent congregant FGDs



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### STELLENBOSCH UNIVERSITY

#### PARENTAL CONSENT TO PARTICIPATE IN RESEARCH

##### Endline study for VAWG programme – FGDs with adolescent congregants

Your child has been invited to participate in endline research on a programme implemented over the last 4 years by *Episcopal Church of Liberia – Relief and Development (ECLRD)* and *Episcopal Relief & Development*, on scaling up faith leaders' engagement to prevent and respond to violence against women and girls (VAWG). The research is being conducted by Drs. Elisabet le Roux (Stellenbosch University, South Africa) and Julienne Corboz. Your child was selected as a possible participant in the study because he/she is a member of a community in which the programme was implemented and belongs to a faith group.

If you agree that your child may participate in this study, your child will take part in a focus group discussion (FGD). During the FGD, your child may be asked to discuss their community, VAWG, the programme implemented by ECLRD and Episcopal Relief & Development, and the impact of the programme. The session should take no longer than 90 minutes.

Both you and your child will remain anonymous in the reporting process. Not your names, nor identifying information will be included in the report. You or your child will not receive any payment for taking part in this study. Confidentiality will be maintained by means of using codes instead of names, keeping paper documents in locked cupboards and offices, and storing data on password-protected computers. Only the researchers will have access to any notes that are taken.

The session will be recorded. Your child will have the right to review/edit the recording after the session. Only the researchers will have access to the recordings and when the study is done these recordings will be erased. The transcriber will sign a confidentiality agreement.

The FGD may bring up difficult feelings or memories for your child. Counselling services will be available, both during and after the session. If your child wants to speak to a counsellor during or immediately after completing the survey, they will be able to speak to the counsellor immediately. The researcher will also share with them the contact information of the counsellor, should they want to speak to someone at a later stage. ECLRD is committed to supporting any person who might experience emotional distress from taking part in the FGD.

Your child's confidentiality will be respected with the following exceptions. In the case that they tell the researcher about violence or abuse that someone has committed against them, the researcher will make a recommendation to them that they speak to our trained counsellor who will be able to help them to decide what to do. However, the researcher will not speak to the counsellor unless your child gives their consent.

This research has been commissioned by Episcopal Relief and Development. While none of the data will be shared with Episcopal Relief and Development, the final report that is prepared based on the data, will be shared with them.

You and your child can choose whether your child will be part of this study or not. If your child volunteers to be in this study, your child may withdraw at any time without consequences of any kind. Your child may also refuse to answer any questions that he/she doesn't want to answer and still remain in the study. The researcher may withdraw your child from this research if circumstances arise which warrant doing so. If you have any questions or concerns about the research, please feel free to contact the Lead Researcher, Elisabet le Roux (eleroux@sun.ac.za).

The Research Ethics Committee: Social, Behavioural and Education Research at Stellenbosch University has approved this study (Project ID #24809]. We commit to conduct the study according to the ethical guidelines and principles of the South African Department of Health Ethics in Health Research: Principles, Processes and Studies (2015).

If you have questions, concerns, or a complaint regarding your rights as a research participant in this research project, please contact Mrs Clarissa Robertson [cgraham@sun.ac.za; (+27) 021 808 9183] at the Division for Research Development.

### Signature of research subject

**As parent/ caregiver of the participant, I declare that:**

- \* I have read this information and consent form, or it was read to me, and it is written in a language in which I am fluent and with which I am comfortable.
- \* I have had a chance to ask questions and I am satisfied that all my questions have been answered
- \* I understand that taking part in this study is voluntary, and I have not been pressurised to let my child take part.
- \* I understand that my child may choose to leave the study at any time and nothing bad will come of it – neither my child or I will not be penalised or prejudiced in any way.

By signing below, I \_\_\_\_\_ (name of participant)

agree that my child may take part in this research study, as conducted by \_\_\_\_\_  
(name of principal investigator).

\_\_\_\_\_  
**Signature of Parent**

\_\_\_\_\_  
**Date**

**DECLARATION BY THE RESEARCHER**

As the researcher, I hereby declare that the information contained in this document has been thoroughly explained to the participant. I also declare that the participant has been encouraged (and has been given ample time) to ask any questions. In addition, I would like to select the following option:

	The conversation with the participant was conducted in a language in which the participant is fluent.
	I did/did not use an interpreter. (If an interpreter is used then the interpreter must sign the declaration below.)

\_\_\_\_\_  
Signature of Principal Investigator

\_\_\_\_\_  
Date

## Information sheet for parents of potential adolescent FGD participants



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### **STELLENBOSCH UNIVERSITY PARENTAL CONSENT TO PARTICIPATE IN RESEARCH**

#### **Participation in focus group discussion**

Dear Parent,

We would like to invite your child to participate in research that will help us to understand the impact of a programme implemented over the past 4 years by Episcopal Relief and Development and Episcopal Church of Liberia Relief and Development (ECLRD), aimed at improving violence prevention and response to women survivors through engaging faith leaders. We want you to decide if you want your child to be part of this study. Before you agree for him or her to take part in this research you should know all about what is involved. If you have any other questions please ask.

#### **WHAT WILL HAPPEN?**

This programme is being done by Episcopal Relief and Development and Episcopal Church of Liberia Relief and Development (ECLRD) in 54 communities in Liberia, and your community is one of these. The research will involve your child spending about 90 minutes being part of a group of girls (if she is a girl) or a group of boys (if he is a boy), answering questions about their views on violence within their communities. All of these children will be between the ages of 13 and 17. There are no right or wrong answers, the questions are not difficult and everything that your child tells us will be kept secret.

We will ask them questions about their community, VAWG, the programme implemented by ECLRD and Episcopal Relief & Development, and the impact of the programme.

The questions will be asked by a trained interviewer. She will record the group discussion and also make notes. We would like to do the group discussion with your child in a private place so no one else can hear what they say.

#### **ARE THERE ANY RISKS?**

The research will not put your child at risk, but if you or your child feels bothered after the interview you may ask to talk to one of the research team or to a staff member of ECLRD. Furthermore, your child will also be given the contact information of a counsellor within your community.

#### **DOES MY CHILD HAVE TO PARTICIPATE?**

No. It is completely your choice and the choice of your child. No one will be upset or disappointed with you or your child if they do not take part in this study. You and your child may decide that he or she will participate and then your child may decide there are some questions he or she doesn't want to answer, or you and your child may decide at a later time that you no longer want them to participate in the study. If this happens, it is your choice and your child's choice and no one will be upset with you or your child.

#### **WILL ANYONE KNOW WHAT ANSWERS YOUR CHILD HAS GIVEN IN THE INTERVIEWS?**

No one will know what your child says or see the answers that your child has given. The answers will be collected together and we will only tell people about the answers given by all of the participants together.

Your child's confidentiality will be respected with the following exceptions. In the case that they tell the researcher about violence or abuse that someone has committed against them, the researcher will make a recommendation to them that they speak to our trained counsellor who will be able to help them to decide what to do. However, the researcher will not speak to the counsellor unless your child gives their consent.

#### **WHAT ABOUT THE RESULTS OF THE STUDY?**

We will never tell anyone your child's name when we describe what we find out through the research. We will use the results of the study to develop better ways of helping men and women in Liberia.

#### **ETHICAL APPROVAL**

We have been allowed to do this research by the ethics committee of Stellenbosch University in South Africa.

If you have any questions about the study or something that you are not happy about, or if you have questions about your child's rights as a research subject, please feel free to contact Mrs Clarissa Robertson [cgraham@sun.ac.za; (+27) 021 808 9183] at the Division for Research Development.

#### **Compensation**

Your child's participation in this study is voluntary and there is no remuneration. Your child will be transported to the group discussion venue and will receive something to eat and drink while there. She will also be transported back home.

#### **Confidentiality**

All information that your child will give in this study will be kept strictly confidential. When we write study reports, no one will be able to identify the information that your child has given in this study, therefore no one will know what he or she said in the questionnaire.

#### **WHO CAN I ASK IF I HAVE QUESTIONS ABOUT THE STUDY?**

If you have any questions or concerns about the research, please feel free to contact the Lead Researcher, Elisabet le Roux (eleroux@sun.ac.za).

## Transcriber &amp; interpreter non-disclosure agreement

**NON-DISCLOSURE AGREEMENT**

between

**STELLENBOSCH UNIVERSITY**(hereinafter "**the University**")

And

**Dr Elisabet le Roux ("the Researcher")**

And

[ \_\_\_\_\_ ] (**ASSISTANT**)(hereinafter "**the Parties**")

It is recorded that Dr Elisabet le Roux is a Researcher with the Unit for Religion and Development Research registered at the University. As per the request of Episcopal Relief & Development, the Researcher is, with Dr Julienne Corboz, conducting an endline evaluation of a 4-year programme entitled 'Scaling Up Faith Leaders' Engagement to Prevent and Respond to VAWG'. Endline qualitative research (focus groups and interviews) will be conducted in implementation communities ("**the Subject**"), to study the impact of programme implementation ("**the Purpose**") and the Parties have agreed to enter into a Non-Disclosure Agreement ("**the NDA**") or confidentiality clauses for this Purpose.

1. In connection with the Purpose it will be necessary for certain Confidential Information to be provided by the Subjects and/ or the University to the Assistant. This Confidential Information means any information disclosed to the Parties which has been defined as confidential in terms of the NDA;
2. The Parties specifically agrees not to disclose any Confidential Information to a third party and to protect it through the exercise of reasonable care. The Parties agrees to keep the Confidential Information in a secure environment, and not copy or use the Confidential Information except as it is reasonably necessary in connection with the Purpose. Access to this Confidential Information is for the sole purpose of the Purpose and the Parties agrees that breach of confidentiality may result in sanctions, civil or criminal prosecutions against the University or the Parties and/or University disciplinary action against the Parties.
3. The foregoing obligations shall not apply to any information which –
  - 3.1 can be demonstrated to have been lawfully in the public domain at the time of disclosure or subsequently and lawfully becomes part of the public domain by publication or otherwise;
  - 3.2 can be demonstrated through documentary proof to have been lawfully in the Party's possession prior to disclosure;
  - 3.3 subsequently becomes available to the Party from a source other than the Subject, which source is lawfully entitled without any restriction on disclosure to disclose such information; or
  - 3.4 is disclosed pursuant to a requirement or request by operation of law or by any court of competent jurisdiction, provided that the Party gives as much notice of such impending disclosure as is reasonably possible and provide the the University with all reasonable assistance in preventing and/or limiting such disclosure.
4. Notwithstanding the completion or non-completion of the Purpose, or the termination of University's involvement with it, this Agreement shall commence on the Signature Date and shall remain in force and effect for a period of 31/10/2022, unless replaced by another agreement concluded between the University and the Party/s superseding this Agreement.

**STELLENBOSCH UNIVERSITY**

**THE ASSISTANT**

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Title: \_\_\_\_\_

Print Title: \_\_\_\_\_

**THE Researcher**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

SU Number: \_\_\_\_\_

## Enumerator non-disclosure agreement



UNIVERSITEIT-STELLENBOSCH-UNIVERSITY  
jou kennisvenoot • your knowledge partner

**STELLENBOSCH UNIVERSITY**  
**Non-disclosure Form: Enumerators**

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**NON-DISCLOSURE AGREEMENT**

between

**STELLENBOSCH UNIVERSITY**

(hereinafter “**the University**”)

And

**Dr Elisabet le Roux (“the Researcher”)**

And

[ \_\_\_\_\_ ] (**ASSISTANT**)

(hereinafter “**the Parties**”)

It is recorded that Dr Elisabet le Roux is a Researcher with the Unit for Religion and Development Research registered at the University. As per the request of Episcopal Relief & Development, the Researcher is, with Dr Julienne Corboz, conducting an endline evaluation of a 4-year programme entitled ‘Scaling Up Faith Leaders’ Engagement to Prevent and Respond to VAWG’. Endline quantitative surveys (a mixed-methods quasi-experimental design) will be conducted in implementation and control communities (“**the Subject**”), to study the impact of programme implementation (“**the Purpose**”) and the Parties have agreed to enter into a Non-Disclosure Agreement (“the NDA”) or confidentiality clauses for this Purpose.

1. In connection with the Purpose it will be necessary for certain Confidential Information to be provided by the Subjects and/ or the University to the Assistant. This Confidential Information means any information disclosed to the Parties which has been defined as confidential in terms of the NDA;
2. The Parties specifically agrees not to disclose any Confidential Information to a third party and to protect it through the exercise of reasonable care. The Parties agrees to keep the Confidential Information in a secure environment, and not copy or use the Confidential Information except as it is reasonably necessary in connection with the Purpose. Access to this Confidential Information is for the sole purpose of the Purpose and the Parties agrees that breach of confidentiality may result in sanctions, civil or criminal prosecutions against the University or the Parties and/or University disciplinary action against the Parties.
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  - 3.2 can be demonstrated through documentary proof to have been lawfully in the Party’s possession prior to disclosure;
  - 3.3 subsequently becomes available to the Party from a source other than the Subject, which source is lawfully entitled without any restriction on disclosure to disclose such information; or
  - 3.4 is disclosed pursuant to a requirement or request by operation of law or by any court of competent jurisdiction, provided that the Party gives as much notice of such impending disclosure as is reasonably possible and provide the the University with all reasonable assistance in preventing and/or limiting such disclosure.
4. Notwithstanding the completion or non-completion of the Purpose, or the termination of University’s involvement with it, this Agreement shall commence on the Signature Date and shall remain in force and

effect for a period of 31/10/2022, unless replaced by another agreement concluded between the University and the Party/s superseding this Agreement.

**STELLENBOSCH UNIVERSITY**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Title: \_\_\_\_\_

**THE ASSISTANT**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Title: \_\_\_\_\_

**THE Researcher**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

SU Number: \_\_\_\_\_

## Annex G: Characteristics of the baseline and endline quantitative samples

Baseline and endline characteristics of congregants in comparison and intervention groups, disaggregated by gender and age groups										
Characteristics	Baseline				p value	Endline				p value
	Comparison		Intervention			Comparison		Intervention		
	n	%	n	%		n	%	n	%	
<b>Adolescent girls</b>										
Age (SD/mean)	1,4	14,8	1,4	14,8	0,886	1,8	18,3	1,5	18,1	0,205
Education level										
No schooling	18	11,2	14	8,6	0,002	15	9,6	13	8,3	0,001
Some primary	92	57,1	126	77,3		84	53,9	39	24,8	
Primary complete	25	15,5	20	8		20	12,8	34	21,7	
Some secondary	23	14,3	9	5,5		35	22,4	54	34,4	
Secondary complete	3	1,9	1	0,6		2	1,3	10	6,4	
Some higher ed	0	0	0	0		0	0	5	3,2	
Higher ed complete	0	0	0	0		0	0	2	1,3	
Other	0	0	0	0		0	0	0	0	
Relationship status										
Currently married	0	0	4	2,5	0,170	2	1,3	9	5,7	0,198
Living with partner	6	3,7	9	5,5		34	21,8	30	19,1	
Not living with partner	29	18	28	17,2		49	31,4	49	31,2	
No current relationship	126	78,3	122	74,9		71	45,5	69	44	
Religion										
Christian	145	90,1	139	85,3	0,072	136	87,2	125	79,6	0,190
Muslim	16	9,9	24	14,7		20	12,8	32	20,4	
Food security (SD/mean)	2,7	2,6	2,4	1,6	0,210	1,2	1,1	1,7	0,9	0,001
<b>Adult women</b>										

Age (mean)	9,9	30,4	13,1	36,9	0,001	10,9	35,3	13	40,6	0,001
Education level										
No schooling	103	44,8	106	46,1	0,044	95	42,6	91	40,6	0,282
Some primary	72	31,3	68	29,6		54	24,2	68	30,4	
Primary complete	13	5,7	20	8,7		33	14,8	26	11,6	
Some secondary	35	15,2	24	10,4		21	9,4	21	9,4	
Secondary complete	5	2,2	1	0,4		18	8,1	10	4,5	
Some higher ed	2	0,9	8	3,5		1	0,5	4	1,8	
Higher ed complete	0	0	3	1,3		1	0,5	3	1,3	
Other	0	0	0	0		0	0	1	0,5	
Relationship status										
Currently married	59	25,7	84	36,5	0,026	44	19,7	88	39,3	0,001
Living with partner	80	34,8	68	29,6		66	29,6	65	29	
Not living with partner	54	23,5	36	15,7		46	20,6	29	13	
No current relationship	37	16,1	42	18,3		67	30,1	42	18,8	
Religion										
Christian	216	93,9	192	83,5	0,001	204	91,5	187	83,5	0,011
Muslim	14	6,1	38	16,5		19	8,5	37	16,5	
Food security (SD/mean)	2,6	3,4	2,5	1,9	0,001	1,4	0,8	1,7	1,1	0,061
<b>Adolescent boys</b>										
Age (mean)	1,4	14,9	1,4	14,9	0,998	1,6	18,1	1,5	18,2	0,390
Education level										
No schooling	19	11,5	15	9,2	0,770	11	7	2	1,4	0,001
Some primary	88	53,3	83	50,6		51	32,5	33	22,5	
Primary complete	33	20	33	20,1		49	31,2	37	25,2	
Some secondary	23	13,9	29	17,7		38	24,2	63	42,9	
Secondary complete	2	1,2	2	1,2		5	3,2	12	8,2	
Some higher ed	0	0	1	0,6		3	1,9	0	0	

Higher ed complete	0	0	0	0		0	0	0	0	
Other	0	0	1	0,6		0	0	0	0	
Relationship status										
Currently married	0	0	0	0	0,347	1	0,6	2	1,4	0,846
Living with partner	4	2,4	2	1,2		21	13,4	15	10,2	
Not living with partner	17	10,3	11	6,7		58	36,9	60	40,8	
No current relationship	144	87,3	151	92,1		77	49,1	70	47,6	
Religion										
Christian	151	91,5	135	82,3	0,013	148	94,3	115	78,2	0,001
Muslim	14	8,5	29	17,7		8	5,1	30	20,4	
Food security (SD/mean)	2,4	2	2,4	1.3	0,004	2,2	2	1,7	1.5	0,025
<b>Adult men</b>										
Age (mean)	13,8	35,8	15,1	38,4	0,072	14,3	39,8	13,6	41,8	0,146
Education level										
No schooling	48	23,8	33	16,5	0,269	37	19,2	20	9,7	0,128
Some primary	37	18,3	30	15		42	21,8	54	26,1	
Primary complete	23	11,4	27	13,5		29	15	37	17,9	
Some secondary	50	24,8	55	27,5		41	21,2	55	26,6	
Secondary complete	32	15	39	19,5		33	17,1	28	13,5	
Some higher ed	9	4,5	11	5,5		9	4,7	8	3,9	
Higher ed complete	0	0	2	1		2	1	4	1,9	
Other	3	1,5	3	1,5		0	0	1	0.5	
Relationship status										
Currently married	78	38,6	92	46	0,313	65	33,7	87	42	0,134
Living with partner	64	31,7	48	24		72	37,3	73	35,3	
Not living with partner	30	14,9	32	16		37	19,2	24	12	
No current relationship	30	14,9	28	14		19	9,8	23	11,1	
Religion										

Christian	182	90,1	172	86	0,205	178	92,2	176	85	0,063
Muslim	20	9,9	28	14		15	7,8	30	14,5	
Food security (SD/mean)	2,6	2,4	2,5	1,7	0,009	1,6	1,5	1,7	1,4	0,614

### Baseline and endline characteristics of faith leaders, faith youth leaders, school leaders and youth group members

Characteristics	Faith leaders		Youth faith leaders		Youth group members		School leaders	
	Baseline % (n)	Endline % (n)	Baseline % (n)	Endline % (n)	Baseline % (n)	Endline % (n)	Baseline % (n)	Endline % (n)
Age (mean(SD))	43,7 (14,7)	49,6 (13,3)	30,3 (7,5)	31,3 (6,6)	19,1 (5,3)	23,2 (7,8)	25,1 (7,8)	24,7 (6,5)
Gender								
Male	52,8 (19)	51,4 (19)	53,5 (23)	55,8 (24)	39,4 (13)	45,5 (18)	52,3 (146)	52,4 (144)
Female	47,2 (17)	48,7 (18)	46,5 (20)	44,2 (19)	60,6 (20)	54,6 (18)	47,7 (133)	47,6 (131)
Religion								
Christian	72,33 (26)	73 (27)	76,7 (33)	79,1 (34)	75,8 (25)	84,9 (28)	83,9 (234)	80 (220)
Muslim	27,8 (10)	24,3 (9)	23,3 (10)	20,9 (9)	24,2 (8)	15,2 (5)	15,8 (44)	20 (55)

## Annex H: List of stakeholders consulted

The following stakeholders were consulted in surveys and FGDs:

- Faith leaders
- Youth leaders
- Congregants (adult and adolescent)
- Savings with Education Group Leaders (women only)
- Savings with Education Group Members (women only)

In the 16 interviews, stakeholders holding one of the following positions were consulted. *No further detail on KII participants are offered, so as to ensure anonymity.*

- County Gender Coordinator
- District Commissioner
- County Education Officer
- County Gender Coordinator
- County Attorney Officer
- Police Officer
- Child Welfare Officer
- Nurse at medical centre
- NGO representative