



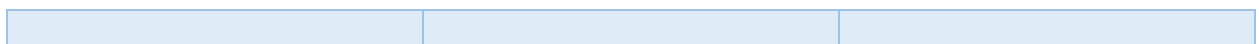
End of Project Evaluation Report

**Community-Based Prevention of Violence against Refugee Women
and Girls in Nairobi Project**

HIAS Refugee Trust of Kenya

TUESDAY 25TH OCTOBER 2022

PROJECT PERIOD: September 2019 – September 2022



DISCLAIMER

Disclaimer: An independent evaluator has developed this Evaluation Report. The analysis and recommendation presented in this report reflect the author's views and may not necessarily represent those of HIAS, its partners, or the UN Trust Fund.

Report Prepared by: The
Leviathan
Kenya Limited
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ABBREVIATIONS

CSO	Civil society organization
FGD	Focused Group Discussions
HRTK	HIAS Refugee Trust of Kenya
IJW	Ijara Women for Peace
IPV	Intimate partner Violence
KII	Key Informant Interviews
LGBTI	Lesbian, Gay, Bisexual, Transgender and Intersex
M&E	Monitoring and Evaluation
MHPSS	Mental Health and Psychosocial Support
SPSS	Statistical package for the social sciences
TOTs	Trainer of Trainers
UN Trust Fund	United Nations Trust Fund to End Violence Against Women
VAWG	Violence against Women and Girls

EXECUTIVE SUMMARY

Background

HIAS Refugee Trust of Kenya (HRTK) - Kenya Office commissioned the Leviathan Kenya Ltd to undertake an end-of-project evaluation of the “*Community Based Prevention of Violence against Refugee Women and Girls*” project, which was funded by the United Nations Trust Fund (UNTF). The project, implemented over three years - from September 2019 to September 2022 - in Nairobi, sought to change the gendered drivers that make up the root causes of Violence against Women and Girls (VAWG) in Kayole, Eastleigh and Kawangware locations. It aimed to contribute towards refugee toward girls facing less interpersonal violence among the urban refugee population in Nairobi County by 2022. This evaluation assessed the project’s performance in relevance; effectiveness; efficiency; sustainability; coherence; impact, knowledge generation, gender equity, and human rights.

Methodology

The study employed a mixed methods approach, whereby quantitative and qualitative data were collected using a cross-sectional survey design complemented by observation, storytelling, and a desk review. Quantitative data was used to show the magnitude of change, whereas qualitative data described the significance and meanings of the observed changes. The target population included all project beneficiaries, which included men, women, and adolescent girls, out of whom the study randomly selected 180 respondents for the survey. Furthermore, eight (8) focus group discussions (FGDs) were conducted with 72 participants. The evaluation also collected qualitative data from 23 key informants. Quantitative data were analyzed through excel and SPSS, and presented in Tables and graphs, while qualitative data were thematically coded, analyzed and presented in narratives.

Key Findings

1. **Relevance:** The evaluation observed that the project is well aligned to community felt needs in the target population. The KII transcripts indicated that the project was initiated during the reflection meetings of the urban refugee protection with partners, during which it was agreed that IPV is a big problem. , women and girls expressed appreciation to HIAS for having opened their eyes to human rights violations, which though oppressive, they had come to accept as their way of life. They were particularly grateful that they are now aware of what to do/where to seek help in case of an IPV incident. The project had a valid TOC as evidenced by clear causal linkages between the problem that was identified and interventions.

2. **Effectiveness:** The evaluation observed a significant change in attitude (25.9% at baseline and 17.9% at end line) in negative masculinity¹, including beliefs that violence between a husband and a wife is a private matter and others should not interfere, gender roles, and decision-making powers. The change in attitude is attributed to knowledge acquired on the various forms of VAW/G through the curriculum sessions that were held for men. Findings on knowledge on different forms of VAW/G show 94.4% of men are aware of the various forms of VAW/G at the endline compared to 63.7% at the start of the project.
 - More women in the project population were of the opinion that IPV is not acceptable. 15.3% of women and girls down from 20% at the baseline level do not believe that it is wrong for them to challenge their partner's views. 11.2% down from 25.6% at the baseline do not think that GBV is a private matter. Interestingly however, 71.7% up from 38.3% agree with assignment of gender roles at home, while 30.9% up from 13.8% believe that men should have the final word on family decisions.
 - More than half, (60%) of women and adolescent girls reported knowing where to seek help, whenever a woman in the community needed to get outside advice or support on violence issues. This is a 45% increase from the 15% which was recorded at the start of the project. The evaluation also observed improved access to GBV services from 29% at the baseline to 41.1% at the end line.
 - The evaluation observed that the project contributed to increased awareness among the communities and the government officials about the refugee rights. The FGD transcripts indicated that IPV service providers including doctors, chiefs², and the police are currently more responsive, as a result of project interventions. They however felt that more work may be needed to increase their relations with the host communities. On the one hand, host communities felt that the government and international communities tend to favor refugees over them, while on the other hand, refugees felt that the locals were discriminating against them and that they have few opportunities for recourse in case of conflicts. Thus, while it was expected that neighbors would help in reporting IPV incidences and guide refugees on redress procedures, these actions are still very limited.
 - The project also helped HIAS staff members to access training and mentorship sessions on GBV programming within a refugee setting. The KII transcripts indicated the staff training sessions helped deepen their understanding on the unique types of vulnerabilities experienced by refugees, and ways in which such challenges can be addressed. The training and mentorship sessions also contributed to behavior and attitude change towards IPV among refugees.
 - **Efficiency:** Discussions with partners and implementing officials revealed that the project used cost-effective methods, such as online meetings and holding meetings in the office spaces, in a bid to reduce the project operational costs. A review of the project reports

¹ believes such as beating women is ok

² local leaders

against the plans indicated that the project activities were implemented promptly. The stakeholders highly-rated the quality of the IEC materials and sensitization activities conducted by the project. A comparative analysis with other partner CSO projects indicated that the project selected the most cost-effective implementation choices.

3. **Sustainability:** The evaluation observed that the project implemented all the sustainability activities that had been planned for. Notably, the project strengthened and worked with locally established structures including local government and refugee leaders, and CSOs/FBOs such as NCKK, which have continued implementing the activities beyond the project period. Moreover, the implementing officials requested their office to help them mobilize funds for the second phase of the project. However, the project did not have a written and signed-off sustainability plan and exit strategy with the community and its partners, who will continue providing the project's goods and services/interventions.
4. **Impact:** The evaluation observed that the project significantly contributed towards the reduction of violence against women, gender equality, and women's empowerment by challenging systematic issues and discourses that underpin IPV. Women gained knowledge about their right to not be subjected to any form of GBV, including physical, psychological, and economic. There was enhanced GBV deterrence through increased reporting, accompaniment of survivors when either seeking redress or treatment, and capacity building of local communities and criminal justice systems in order to increase chances of successful prosecution. The FGD transcripts also indicated that women and girls who were supported with economic wellbeing services no longer tolerate abusive partners. The evaluation further observed that while the project was intended to help refugees, women in the host communities also acquired protection against IPV through increased knowledge of its causes, support, and redress systems in their communities.
5. **Gender equality and human rights:** The project employed various strategies aimed at promoting gender equality and human rights within the target population. It began by analyzing gender issues and establishing their implications on the project. The baseline survey was an eye opener on identifying gender issues that also determined planning for project interventions. Thereafter, implementing teams were trained on the unique vulnerabilities of refugee women, the root causes and possible interventions to IPV. Deliberate actions were taken to ensure women's participation in the project implementation processes. Safe spaces were provided to enable them to talk about their issues with trained personnel. Creative ways, such as social media platforms were used to pass information to women, given that their movement was restricted. Safe houses which ensured a safe space for survivors away from the perpetrators, and other support systems that increased possibilities of reporting of cases without fear of reprisals were provided. Misconceptions about religion and culture were clarified to avoid the use of the same as tools for patriarchy. FGD transcripts indicate that women from both the refugees and host

communities felt that they could take control of their lives as a result of the project interventions. The project also involved men, women, and girls in its interventions. This was done with the aim of ensuring that all genders collaborated towards eliminating VAW/G in the community. This was done through imparting knowledge on GBV, power relations, and the referral pathways. These consolidated efforts were proven to have yielded more results.

Because of the foregoing conclusions, it is recommended that:

1. The relations between the refugees and host communities are an essential aspect of the fight against IPV in the refugee community. Since most IPVs occur in the close family set-up and are thus rarely reported, there is a need to empower the entire community to enhance their accountability and be able to comfortably report GBV cases to the relevant authorities.
2. Community outreach sessions should be targeted at the immediate neighbors of refugees, as opposed to the entire community. It is less costly to conduct repeat visits, which increase the possibilities of behavior change, instead of mass sensitization.
3. There is a need to conduct more economic empowerment of women. This is because many women fear reporting IPV out of fear that the perpetrator would be imprisoned, making them lose their bread winner. These services may be extended to men who tend to be more irritable and violent.
4. Future implementation should consider including more creative ways of conducting training sessions, i.e., including skits, games that focus on power relations, GBV and reporting pathways. These sessions should be embedded in other activities and if possible ongoing activities.
5. There is a need to increase engagement of community resource persons /institutions such as SUPKEM and women prayer meetings. This is because of the fact religious leaders are highly respected among the refugee communities, especial those of Islam faith.

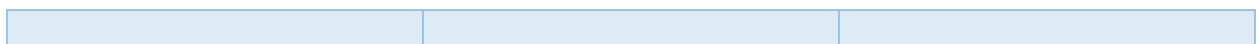
1. BACKGROUND INFORMATION

Historically, when tackling GBV, the humanitarian community has focused on sexual violence committed by armed actors. However, it has become clear that the biggest danger to women in humanitarian situations is often found in their own homes. Recently there has been increased attention on IPV in humanitarian settings. Research undertaken by The Global Women's Institute, CARE and IRC culminated in the ground-breaking report, *No Safe Place: A Lifetime of Violence for Conflict-Affected Women and Girls in South Sudan*, found that IPV was the most common form of VAW faced in conflict. The rates of physical and sexual violence against women in Kenya are sobering and represent an overall acceptance of VAWG in Kenyan society. Four out of ten Kenyan females have experienced an episode of physical or sexual violence mostly perpetrated by an intimate partner. Between 39% and 47% of Kenyan women experience GBV in their lifetime - among the highest rates in the world. 38% of ever-married women have ever experienced physical violence compared to 9% of ever-married men. 14% of ever-married women have ever experienced sexual violence compared to 4% of ever-married men. 41% percent of ever-married women have ever experienced physical or sexual violence, while 11% of ever-married men have ever experienced either form of violence from a partner. From a policy perspective Kenya is a signatory to various international legal instruments that obligate action against all forms of GBV

VAWG is fueled by a global system of oppression based on patriarchal norms. This means that Kenyan and refugee staff have been socialized to varying degrees to accept or minimize IPV against women and girls, whether consciously or not. Thus, the project focused on personal accountability of HIAS staff and their engagement in reflection and unlearning harmful attitudes and beliefs.

Prior to writing the proposal, HIAS held multiple FGDs with urban refugee women, girls and men from Somalia, DRC, Rwanda, Burundi and Ethiopia. Sex-specific group included participants from 20 to 55 years old. Despite the different group profiles, there was consistent and positive support for this project. Women noted that while many programs focus on discussing GBV with women there are very few that focus on discussing it with men. Women shared that they didn't know of any programs that engaged men while advocating for the rights and safety of women and expressed a strong need for such a program.

Social context: In March 2020, five months into the project implementation, there was COVID-19 outbreak in Kenya. The Kenyan government put measures to control the spread of COVID 19, which limited social interactions and movements of refugees and host communities, including project staff. More refugees reported feeling anxious during this time of limited in-person activities. In response, HIAS adopted remote service delivery approaches such as zoom meetings and use of electronic money transfer platform (M-pesa). In 2022, most public health restrictions were lifted as the prevalence of the virus reduced significantly. This allowed physical meetings to



take place while observing safe distances and wearing face masks. The numbers per gathering were also limited, which translated to more sessions to achieve targets.

Political Context: The political context remained unchanged for most of the project implementation. However, Kenya entered an election period over the last six months of 2022 and political campaigns intensified. This raised anxiety among the refugee community. As consequence, HIAS fast-tracked implementation of project activities including endline evaluation data collection, and this was completed before the election.

Economic Context: Due to the COVID-19 crisis, most individuals targeted by the project were not able to meet their basic needs, especially in 2020 and 2021. A World Bank report³ shows almost 1 in 3 household run businesses were not operating in 2020, and between February and June 2020, average revenue from household run businesses decreased by almost 50%. This exacerbated food insecurity, and elevated pain and human suffering. A rapid needs assessment conducted by HIAS in 2020 found that the majority of these surveyed could not meet their basic needs for food or secure shelter. Refugees in Nairobi depended on financial assistance (FA) received from agencies such as UNHCR/HIAS to purchase food and other basic items. Loss of income and the subsequent inability to meet basic needs equates to loss of autonomy for women specifically, who are at greater risk for experiencing GBV when they do not have or cannot control their own economic resources. Women were also exposed to additional protection risks when engaging in casual work, as these work environments do not offer any legal protection against sexual exploitation. HIAS Kenya supported 209 urban refugees with financial assistance, of which 104 were women, 24 men, 51 adolescent girls, and 30 uncategorized beneficiaries.

1.1: About HIAS - Kenya

HIAS Refugee Trust of Kenya (HRTK) is a Jewish charitable, not-for-profit organization originally founded in response to the late 19th and 20th-century exodus of Jewish emigrants from Imperial Russia. HIAS Kenya protects most at-risk refugees whose lives are in danger of being violated because of their status. HIAS Kenya helps refugees rebuild their lives in safety, and advocates for the protection of refugees, ensuring that all displaced people are treated with dignity. HIAS began its Africa operations in 2002, launching the HIAS Refugee Trust of Kenya (HRTK). HRTK (also referred to as HIAS Kenya) has its head office in Mimosa court and operates in three sites Kayole, Kawangware, and Eastleigh in Nairobi. These are refugee densely populated neighborhoods where most of the refugee populations reside in Nairobi. HIAS Kenya serves the most at-risk urban refugees including those who identify as LGBTI, persons with disability, victims of torture, and single heads of households, the elderly, those with chronic illnesses, youth,

³ <https://openknowledge.worldbank.org/bitstream/handle/10986/35173/Socioeconomic-Impacts-of-COVID-19-in-Kenya-on-Households-Rapid-Response-Phone-Survey-Round-One.pdf?sequence=6&isAllowed=y>

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unaccompanied and separated children, and women most at risk. HIAS Kenya implements four major programs, which include: (i) Mental Health and Psychosocial Support (MHPSS); (ii) Legal Protection; (iii) Economic Inclusion program; and (iv) The Gender/GBV Prevention and Response program.

HIAS protects and supports refugees to build new lives and reunite with family members in safety and freedom. HIAS Kenya integrates best practices based on international standards with a focus on community-based protection and empowerment. HIAS works to advocate and promote durable solutions for refugees, including local integration, safe and voluntary repatriation, and third-country resettlement.

Women, girls, and LGBTQ individuals are disproportionately affected by forced displacement. HIAS Kenya’s GBV services are driven by the needs and voices of survivors, and the GBV programming helps women, girls, and LGBTQ individuals who have been forcibly displaced to pursue their potential, free from violence and gender-related oppression. The HIAS gender and GBV program in Kenya focuses on building strong, responsive pathways for survivors to access medical, mental health, and legal services. The program works to break the gendered cycle of vulnerability and violence for women and girls through strengthening community response and protection units, and development of prevention models. These units and models seek to transform men and boys to be allies, and empowerment of women and girls. Working closely with the local community, HIAS works closely with the community through the use of an array of strategic interventions to enhance the quality of care for survivors of GBV, including the provision of financial assistance, mental health and psychosocial counseling, therapy groups, and accessible and comprehensive health services. The organization coordinates the GBV working group that is co-chaired by UNHCR, a collaboration that includes the collection of data and data management of GBV cases.

1.2: About the Project

Key Project Details	
Organization	HIAS Kenya
Project title	Community Based Prevention of Violence Against Refugee Women and Girls in Nairobi.
Project duration	3 years
Budget and expenditure	US\$ 652,362
Geographical areas	Nairobi County, Kenya
Specific forms of violence addressed by the project	Violence Against Women and Girls (VAWG)
Main objectives of the project	1. Refugee men have changed attitudes around power, gender, masculinities, and male privilege and take action to prevent IPV.

	<ol style="list-style-type: none"> 2. Refugee women and girls demonstrate an increased understanding that IPV is a violation of their rights and feel confident reporting that violation. 3. Community systems enable refugee friendly IPV prevention through both improved access pathways and strengthened community awareness of IPV. 4. Increased accountability of program staff implementing the project through changes in staff knowledge and attitudes on prevention of IPV. 5. HIAS is institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adapting existing interventions to EVAW/G with a focus on the most vulnerable women and girls.
<p>Description of targeted primary and secondary beneficiaries</p>	<p>Primary beneficiaries: Included women and girls who are family members and intimate partners of men’s discussion group participants. Other primary beneficiaries included women and adolescent girls from the refugee community whose intimate partners have changed their attitude and behavior based on the project’s social media campaign. Women’s group participants and intimate partners of men staff trained to facilitate EMAP are also primary beneficiaries. Primary beneficiaries within this project benefitted through a decrease in violence. A total of 881 direct beneficiaries were targeted</p> <p>Secondary beneficiaries: Included the men’s discussion group participants, Kenyan local administrators who were trained, and male refugee community members who interacted with the social norms campaign. HIAS staff men who were been trained to be facilitators of EMAP are also secondary beneficiaries. A total of 700 secondary beneficiaries were targeted.</p>
<p>Key implementing partners and stakeholders</p>	<p>The project supported and complemented the work of the Kenyan Government, UNHCR and other actors targeting critical service gaps. HIAS worked with the Government of Kenya through the Refugee Affairs Secretariat (Now Department of Refugee Services (DRS) under the new Refugee act 2021)) and as National Gender Based Violence sub-cluster working group meeting (chaired by the National Gender and Equality Commission under the Ministry of Public Service, Youth and Gender Affairs). HIAS coordinated with UNHCR in different forums including monthly coordination meetings with the URPN and co-chaired the GBV Working Group as a lead implementing agency of GBV interventions in Nairobi. HIAS engages refugees as community workers and staff work closely with refugee community leaders to ensure their participation in community outreach and education activities. HIAS also partnered with the following organizations to provide various services; Nairobi Women’s Hospital – Gender Violence Recovery Centre, Kituo cha Sheria, Refugee Consortium of Kenya (RCK), Coptic Hospital, Nairobi Metropolitan Services, National Council of Churches of Kenya (NCCCK),</p>

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Funded by the United Nations Trust Fund (UNTF), the *Community Based Prevention of Violence against Refugee Women and Girls* project, was implemented by HIAS Kenya over a three-year period starting in September 2019 to September 2022 in Nairobi. The project sought to change the gendered drivers that make up the root causes of Violence against Women and Girls (VAWG) in Kayole, Eastleigh and Kawangware locations within Nairobi County. These include men’s control over decision-making, stereotyping of masculinity and femininity, and condoning acts of VAWG. The project’s goal is to contribute to refugee women and girls facing less interpersonal violence among the urban refugee population in Nairobi County by 2022.

To contribute to the goal, the project was underpinned on a feminist theory of violence with the belief that if a woman cannot be safe and valued in her own home, there is nowhere she will feel safe and valued. Using the socio-ecological framework, the project worked at the individual, relational and community levels. The project sought to change the gendered drivers that make up the root causes of VAWG. These included men’s control over decision making, stereotyped constructions of masculinity and femininity, and condoning acts of VAWG. HIAS developed and used a curriculum (infusing content from EMAP, SASA!) that sought to transform these drivers as they exist within the home. Because violence restricts and devalues, starting its prevention within the home can give women an essential place to thrive and explore their own power.

The project was a transformational individual behavior change intervention that used a group modality and build off two evidence-based intervention models, SASA! and EMAP. The behavior change methodology emphasized personal and relational accountability. Personal accountability was a critical, long-term process that taught men to take responsibility for their use of oppressive and/or violent behavior. Relational accountability included understanding and, where necessary, changing the ways that power and privilege play out in interactions between men and women, specifically within the home. There were five phases to the project: 1) intensive staff training, 2) community engagement and group member self-selection, 3) starting separate discussion groups for women and for adolescent girls, 4) starting the men’s discussion groups, and 5) promoting a community level social norms campaign. In response to COVID-19, HIAS received a spotlight fund from UNTF to ensure business continuity, to stabilize or strengthen the institutional capacity to continue in its pursuit of ending violence against women and girls (EVAW/G) as well as respond to the impact of COVID-19. This fund helped HIAS to be institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adapting existing interventions to EVAW/G with a focus on the most vulnerable women and girls. The project implementation was guided by the following result chain

Project Goal	Refugee women and girls among the urban population in Nairobi experience less interpersonal violence by 2022.
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Outcome 1	Refugee men have changed attitudes around power, gender, masculinities, and male privilege and take action to prevent IPV.	Output 1.1	Refugee men have increased knowledge about the root causes of IPV and ability to identify harmful attitudes and beliefs that lead to IPV.
		Output 1.2	Refugee men with increased knowledge about IPV start taking concrete steps to change unequal power relations within their own lives
Outcome 2	Refugee women and girls demonstrate an increased understanding that IPV is a violation of their rights and feel confident reporting that violation.	Output 2.1	Refugee women and girls have increased knowledge about the root causes of IPV and demonstrate increased ability to identify harmful attitudes and beliefs that lead to IPV.
		Output 2.2	Refugee adolescent girls exercise increased agency and voice through sharing their reactions, concerns, and priorities in a consultative process that informs the intervention.
		Output 2.3	Refugee women and girls demonstrate increased confidence to share their experiences with IPV, including reporting instances of IPV where applicable.
Outcome 3	Community systems enable refugee friendly IPV prevention through both improved access pathways and strengthened community awareness of IPV.	Output 3.1	Refugee leaders have increased awareness on prevention of IPV
		Output 3.2	Civil society organization and government leaders have increased knowledge of IPV prevention principles and best practices.
		Output 3.3	Increased number of refugee men and women have access to community-level initiatives for advancing women's rights and eliminating IPV
		Output 3.4	Community members increase awareness and participation in reduction of IPV via
Outcome 4	Increased accountability of program staff implementing the project through changes in staff knowledge and attitudes on prevention of IPV.	Output 4.1	Program staff demonstrate increased understanding of IPV prevention and increased behaviors supporting IPV prevention throughout implementation.
		Output 4.2	Periodic assessment and ongoing monitoring data used to create increased actionable learning on prevention of IPV.
Outcome 5	HIAS is institutionally strengthened to sustainably respond to the COVID-19 pandemic	Output 5.1	HIAS has put in place mechanisms to improve institutional resilience to crises including COVID-19, that ensures the stability of projects and sustainability of the organization [s] in the longer term.

and other crises while maintaining or adapting existing interventions to EVAW/G with a focus on the most vulnerable women and girls.	Output 5.2	HIAS has improved knowledge, skills, and capacities to maintain or adapt EVAW/G interventions and reach the most vulnerable women and girls while responding to the impact of the COVID-19 pandemic or other crises.
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1.3. Purpose of the Evaluation

The purpose of the evaluation was to understand how and to what extent project activities achieved the stipulated outcomes including contribution of the project towards the overall goal on EVAW/G. The findings of the evaluation will also contribute to learning on the best ways to achieve women’s empowerment and gender equality through operational and normative work.

As part of the program, a final, independent, and summative evaluation was carried out upon completion of implementation. Finding and recommendations from the evaluation will inform HIAS’ future programming in related issues.

The findings will be used for strategic policy and programmatic decisions, organizational learning, and accountability as well as for the identification of good practices on access to justice as a prevention mechanism to violence against women and girls. The targeted users of the evaluation are the HIAS, implementing partners, targeted project beneficiaries and other key stakeholders.

1.4. Evaluation Objectives and Scope

1.4.1. Evaluation Objectives

- **To evaluate the entire project** (from start to end date), against the effectiveness, relevance, efficiency, coherence, sustainability and impact criteria, as well as the cross-cutting gender equality and human rights criteria (*defined below*);
- **To identify key lessons and emerging good practices** in the field of ending violence against women and girls, for learning purposes (*this is defined under the knowledge generation criteria below*).
- **Provide actionable recommendations** to inform future program design for similar projects in this context
- Examine critical factors that enabled or hindered effective achievement of intended results. To assess the type and levels of capacities and how they facilitated the achievement of project results

1.4.2. Scope of the evaluation

- **Timeframe:** this evaluation covered the entire project duration.
- **Geographical Coverage:** The project locations were in Nairobi County, which included Kawangware, Kayole and Eastleigh field offices
- **Target groups to be covered:** this evaluation covered the target primary and secondary beneficiaries as well as broader stakeholders.
- **Thematic Scope:** The evaluation covered thematic areas as outlined under the five outcomes envisaged as per the results framework. In addition, under the evaluation criteria, the evaluation covered cross-cutting issues such as gender equality and human rights, coherence, effectiveness, efficiency, relevance, impact, sustainability and knowledge generation.

1.5. Evaluation Criteria and Questions

Evaluation Criteria	Mandatory Evaluation Question
<p>Effectiveness <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>	<ol style="list-style-type: none"> 1.To what extent were the intended project goal, outcomes, and outputs (project results) achieved and how? 2.Did the project achieve its objectives and expected results in ways that contribute to EVAWG? If so, how? 3.What were the major factors influencing the achievement or non-achievement of different the objectives? Reflection on various factors: internal and external, operational, and programmatic, components of the project etc. 4.Were there differential results for different people? If so, how, and why?
<p>Relevance <i>The extent to which the project is suited to the priorities and policies of the target group and the context.</i></p>	<ol style="list-style-type: none"> 1.To what extent do the achieved results (project goal, outcomes, and outputs) continue to be relevant to the needs of women and girls? 2.Was the intervention designed in ways that respond to the needs and priorities of women and girls? If so, how? 3.To what extent are the objectives of the programme still valid? 4.To what extent is the theory of change still relevant? 5.Are the assumptions that went into the design of the project still relevant?
<p>Efficiency <i>Measures the outputs - qualitative and quantitative - in relation to the inputs. It is an economic term which refers to whether the project</i></p>	<ol style="list-style-type: none"> 1.To what extent was the project efficiently and cost-effectively implemented? 2.Were activities cost-efficient? 3.Were objectives achieved on time? 4.Was the project implemented in the most efficient way compared to alternatives?

<i>was delivered cost effectively.</i>	
<p>Sustainability <i>Sustainability is concerned with measuring whether the benefits of a project are likely to continue after the project/funding ends.</i></p>	<ol style="list-style-type: none"> 1.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? 2.What were the major factors which influenced the achievement or non-achievement of sustainability of the program or project?
<p>Coherence Measures the compatibility of the intervention with other interventions in a country, sector or institution.</p>	<ol style="list-style-type: none"> 1.Are the key interventions compatible with other interventions in the region? 2.Is there any potential duplication of efforts in this area?
<p>Impact <i>Assesses the changes that can be attributed to a particular project relating specifically to higher-level impact (both intended and unintended).</i></p>	<ol style="list-style-type: none"> 1.To what extent has the project contributed to ending violence against women, gender equality and/or women’s empowerment (both intended and unintended impact)? 2.What real difference/changes has the project made to the lives of the target groups? 3.How many people have been positively affected by the project interventions? 4.How do the women, men and girls see the impact themselves and how do they describe the changes? 5.Were there equal impacts for different genders or were there any gender-related differences in engagement, experience and impacts? If so, why did these differential impacts occur?
<p>Knowledge generation <i>Assesses whether there are any promising practices that can be shared with other practitioners.</i></p>	<ol style="list-style-type: none"> 1.To what extent has the project generated knowledge, promising or emerging practices in the field of EVAW/G that should be documented and shared with other practitioners? 2.What best practices can be learnt from the programme that can be applied to similar future programmes? 3.What should have been done differently and should be avoided in such programmes in future.
<p>Gender Equality and Human Rights</p>	<ol style="list-style-type: none"> 1.Cross-cutting criteria: the evaluation should consider the extent to which human rights based and gender responsive approaches have been incorporated through-out the project and to what extent. 2.To what extent have impacts contributed to equal power relations between people of different genders and to changing of social norms and systems?

1.6. Evaluation Team

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The evaluation was conducted by an external independent evaluation company, The Leviathan Kenya. Leviathan's evaluation team consisted of: (i) an evaluation team leader with overall responsibility for carrying out the evaluation exercise, and (ii) 4 members who provide technical expertise in thematic areas of the evaluation.

The evaluation team members have adequate violence against women, regional and subject matter expertise and experience and knowledge of the country context. The evaluation team leader has solid knowledge and experience in conducting evaluations of SGBV interventions and humanitarian action. In addition, the evaluation team had the requisite level of knowledge to conduct human rights- and gender-responsive evaluations and was able to work in a multidisciplinary team in a multicultural environment. The evaluation team was composed of the following:

Position	Task
Lead Evaluator	Overall project lead Ethics/ accountability for the affected person Quality Assurance
GBV Expert	Tool development Quantitative tools administration Data Analysis
Communication	Drafting inception report Technical editing of assignment products Copy edition of the assignment products
Epidemiology	Qualitative data collection Report writing
Data Analysis	ODK/Kobo collect administration. Quantitative data management

2. METHODOLOGY

2.1 Evaluation Design

The evaluation adopted a blended approach that allowed for collection of both primary and secondary qualitative and quantitative data, using varied research designs. This enabled a deep and broad understanding of project results over the implementation period. In this regard, quantitative and qualitative methods complemented each other and provided for triangulation of findings, hence greater validity of the emerging inferences. Towards this end, the evaluation used a cross-sectional survey design, complemented by desk review of secondary data including previous case studies conducted. For the cross-sectional design, data were collected using focus group discussions (FGDs), key informant interviews (KIIs) and a questionnaire survey.

2.1.1 Data Collection Sites, Population, Tools and Procedures

a) Data collection methods,

The evaluation used mixed methods of document review, surveys, interviews with key informants, direct observation, group discussions, desk review etc. Fieldwork focused on gathering data from the project beneficiaries and various stakeholder groups that were engaged with the project. Additionally, a key informant interview with a UNTF representative was done. This allowed triangulation of results from different data sources and techniques ensuring greater validity of information to generate a robust comprehensive evaluation report. The documents reviewed include the following:

- Evaluation ToR
- Project proposal
- Project baseline survey report
- Project progress reports
- Records of project success stories harvested during the project cycle.

b) Sampling section

The survey was conducted in Kayole, Eastleigh and Kawangware as the three project sites within Nairobi County, targeting women, men and adolescent girls who were project beneficiaries. In total, the project reached out to 920 primary beneficiaries. The survey adopted a sample size of 180 from the primary beneficiaries.

The survey respondents were determined through a three-stage procedure - clustering, stratification and simple random sampling techniques. In the first stage, each of the project intervention sites - Kayole, Eastleigh and Kawangware - were treated as clusters. In the second stage, lists of beneficiaries provided by HIAS-Kenya were used to categorize respondents in each of the clusters into gender and age strata - men, women and adolescent girls. The strata were further disaggregated by nationality, after which proportionate quotas were assigned to each stratum. In

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the final stage, respondents were randomly selected from each strata using random numbers, generated from sampling frames. This ensured that both genders, as well as age and nationality were well represented in the sample.

FGD participants were purposely selected from among respondents who participated in the questionnaire survey. Care was taken to ensure each of the strata were involved in the FGDs. Key informants were also purposely selected from among the key stakeholders of the project. These included HIAS Kenya staff, partner organizations including the donor (UNTF), UNHRC, government officials, and opinion leaders in the refugee communities.

Table 1: Sample size distribution

Tool	Participants	Kayole	Kawangware	Eastleigh	Total
Survey	Men	20	20	20	60
	Women	20	20	20	60
	Adolescent Girls	20	20	20	60
Total					180
KII Schedule	HIAS Kenya Program Staff	6			6
	Local administration - Police and Chiefs	2	1	1	4
	Refugee community leaders	1	1	1	3
	GBV Facilitators	1	2	1	4
	Donor - UNTF				1
KII Participant Total					17
FGD Schedule	Men	8	8	8	24
	Women	8	8	8	24
	Adolescent Girls	8	8	8	24
	General Community member	8	8	8	24
FGD Participant Total		32	32		96
Case studies	Men	3			3
	Women	3			3
Observation & Case studies Total		6			6

2.2 Data Analysis

Data analysis was conducted using the following steps:

1. Cleaning and organizing the data from quantitative survey, KIIs, FGDs, and observation checklists.
2. Coding and evaluation of qualitative data using the techniques of theme analysis and convergence-divergence analysis, and assigning attributes to data, using NVivo.
3. Quantitative analysis was performed on MS Excel and SPSS using descriptive statistics techniques (frequencies, percentages, etc.), and the RStudio application was used for data visualization. The Z-Score was used to do the checks and cases were defined as outlier if they exceeded +3.0/-3.0 deviations. These were done per sampled area and per variable.
4. Corroboration and triangulation of all findings and analysis with groups of design participants to address inconsistencies or differing interpretations; Validation of findings with HIAS Kenya; and
5. Integration of both qualitative and quantitative findings.

2.3 Limitations of the Study & Mitigation Strategies

The evaluation encountered the following challenges during data collection:

- i. **Language barrier** – Beneficiaries from different countries lacked local language capacity. The evaluation team worked closely with the HIAS Kenya Team to provide interpreters during the data collection exercise.
- ii. **Technological issues for KIIs/FGDs for remote interviews** – The evaluation team used the respondent’s preferred mode of participation including in-person meeting for FGD but in adherence with Ministry of Health (MoH) guidelines; ensuring groups are of six (6) to eight (8) persons, maintaining social distances, masking, hand washing, and sanitizing.
- iii. **Competing priorities leading to low response rates** – The sample sizes were adjusted upward to take care of non-responses and any transitions. The team ensured timely mobilization/appointments and obtained confirmation in advance.
- iv. **Validity and reliability of the tools** – The evaluation team piloted the tools
- v. **Incomplete or inaccurate data:** Due to the anticipation that some of the participants would fear expressing themselves freely due to lack of trust, the enumerators were trained on ensuring a safe environment for the interviews through creating rapport with participants, explaining the purpose and benefits of the evaluation, and the ethical considerations. Further, prior mobilization was done before the actual data collection with the support of the HIAS team.

2.4 Ethical Considerations and do no harm

The evaluation adhered to all research and humanitarian law standards. All team members signed the non-disclosure, child safeguarding policy aimed at protection of all children from all forms of harm or abuse and other HIAS ethical policies. Among other things, consent was secured from the respondents before interviews and all the information gathered from the respondents was treated with outermost confidentiality. Moreover, the respondents were informed that their participation

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was on a purely voluntary basis, and they were free to leave at any time without victimization. It's important to note that no minors were engaged during the data collection exercise. The specific safeguard measures are hereunder explained:

- **Training on Ethics:** All the team members were trained on research ethics and accountability for the affected persons.
- **Protecting human subjects in research and evaluation:** The consulting team endeavored to minimize the harm and risk they could inadvertently cause through interviewing refugees and accorded the study subjects the respect, beneficence, and justice.
- **Informed consent and voluntary participation:** Data was only to be solicited from consenting adults who were eligible to participate based on a pre-specified criteria and sampling requirements. The study was conducted in a language respondents understood, and they were informed of their ability to participate or withdraw from study without repercussions
- **Confidentiality:** The survey design prevented traceability of survey participants, by minimizing the collection of personal details that could provide unique identities of the participants. During analysis, data was anonymized, and no specific statements were attributed to any respondent
- **Data sharing:** Transparency and accountability was exercised to all evaluation stakeholders, by making the evaluation as participatory as possible, ensuring replicability.

3. FINDINGS

3.1 Overview

This section presents final evaluation data on various project indicators. The data presented is both qualitative and quantitative in nature. The section has been organized according to the OECD/DAC evaluation study questions, namely: relevance, efficiency, effectiveness, coherence, sustainability, and impact criteria, as well as the cross-cutting gender equality and human rights. The data has been disaggregated based on gender where possible.

3.2: Demographics

Quantitative data for the study was collected from project beneficiaries and other stakeholders, comprising refugee men (n-28); refugee women (n-27); and refugee adolescent Girls (n-30). Table 2 provides a breakdown of respondents' demographic data.

Table 2: Respondents' demographic data

Respondent's age	Adolescent girls	Women	Men	Total
15-19	10.7% (n-3)	0% (n-0)	0% (n-0)	3.7% (n-3)
20-24	75% (n-21)	7.7% (n-2)	0% (n-0)	28.0% (n-23)
25-29	14.3% (n-4)	19.2% (n-5)	10.7% (n-3)	14.6% (n-12)
30-34	0% (n-0)	30.8% (n-8)	17.9% (n-5)	15.9% (n-13)
35-39	0% (n-0)	11.5% (n-3)	17.9% (n-5)	9.8% (n-8)
40-44	0% (n-0)	19.2% (n-5)	17.9% (n-5)	12.2% (n-10)
45-49	0% (n-0)	7.7% (n-2)	14.3% (n-4)	7.3% (n-6)
Anova 50	0% (n-0)	3.8% (n-1)	21.4% (n-6)	8.5% (n-7)
Respondent Previous Country of Residence				
Somali	25% (n-7)	34.6% (n-9)	10.7% (n-3)	23.2% (n-19)
Congo	17.9% (n-5)	15.4% (n-4)	25% (n-7)	19.5% (n-16)
Ethiopia	21.4% (n-6)	19.2% (n-5)	3.6% (n-1)	14.6% (n-12)
Burundi	17.9% (n-5)	15.4% (n-4)	25% (n-7)	19.5% (n-16)
Others	17.9% (n-5)	15.4% (n-4)	35.7% (n-10)	23.2% (n-19)
Highest level of education				
No formal education	14.3% (n-4)	26.9% (n-7)	3.7% (n-1)	14.8% (n-12)
Some primary education	35.7% (n-10)	46.2% (n-12)	37.0% (n-10)	39.5% (n-32)
Completed primary education	10.7% (n-3)	19.2% (n-5)	0% (n-0)	9.9% (n-8)
Some secondary education	21.4% (n-6)	3.8% (n-1)	11.1% (n-3)	12.3% (n-10)
Completed secondary education	7.1% (n-2)	0% (n-0)	18.5% (n-5)	8.6% (n-7)
Technical course	3.6% (n-1)	3.8% (n-1)	3.7% (n-1)	3.7% (n-3)
University degree	3.6% (1)	0% (n-0)	25.9% (n-7)	9.9% (n-8)

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Other	3.6% (n-1)	0% (n-0)	0% (n-0)	1.2% (n-1)
Do you have children				
Yes	35.7% (n-10)	92.3% (n-24)	78.6% (n-22)	68.3% (n-56)
No	64.3% (n-18)	7.7% (n-2)	21.4% (n-6)	31.7% (n-26)
What is your religion				
Christian	53.6% (n-15)	53.8% (14)	78.6% (n-22)	62.2% (n-51)
Muslim	46.4% (n-13)	46.2% (n-12)	17.9% (n-5)	36.6% (n-30)
No religion (Atheist/Agnostic)	0% (n-0)	0% (n-0)	3.6% (n-1)	1.2% (n-1)
What do you do for a living				
Student	17.9% (n-5)	0% (n-0)	0% (n-0)	6.1% (n-5)
Unemployed	46.4% (13)	30.8% (8)	25% (n-7)	34.1% (n-28)
Paid employee	3.6% (n-1)	0% (n-0)	17.9% (n-5)	7.3% (n-6)
Self employed	32.1% (n-9)	69.2% (n-18)	57.1% (n-16)	52.4% (n-43)
Have you been involved in any income-generating activities in the last 3 months?				
Yes	39.3% (n-11)	69.2% (n-18)	82.1% (n-23)	63.4% (n-52)
No	60.7% (n-17)	30.8% (n-8)	17.9% (n-5)	36.6% (n-30)

Most of the respondents had intimate partner relationships. Men 64.3% (n-18), Women 50% (n-13) and Girls 17.9% (n-5). Table 3 below summarizes the demographic data of the respondent's intimate partners.

Table 3: Demographic Data of Respondent's Partner

Are you currently in an intimate partner relationship?				
Respondent's age	Adolescent girls	Women	Men	Total
Yes	17.9% (n-5)	50% (n-13)	64.3% (n-18)	43.9% (n-36)
No	82.1% (n-23)	50% (n-13)	35.7% (n-10)	56.1% (n-46)
How long have you been in this relationship?				
Less than one year	0% (n-0)	7.7% (n-1)	5.6% (n-1)	5.6% (n-2)
1-2 years	60% (n-0)	7.7% (n-1)	0% (n-0)	11.1% (n-4)
3-5 years	20% (n-1)	30.8% (n-4)	5.6% (n-1)	16.7% (n-6)
More than 5 years	20% (n-1)	53.8% (n-7)	88.9% (n-16)	66.7% (n-24)
What is your marital status				
Married	40% (n-2)	61.5% (n-8)	94.4% (n-17)	75% (n-27)
Co-habiting	20% (n-1)	38.5% (n-5)	5.6% (n-1)	19.4% (n-7)
Refused to answer	20% (n-1)	0% (n-0)	0% (n-0)	2.8% (n-1)
Other	20% (n-1)	0% (n-0)	0% (n-0)	2.8% (n-1)
What is the gender of your partner?				
Male	100% (n-5)	100% (n-13)	0% (n-0)	50% (n-18)
Female	0% (n-0)	0% (n-0)	100% (n-18)	50% (n-18)
What is the highest level of education your partner has attained?				

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None	0% (n-0)	0% (n-0)	5.6% (n-1)	2.8% (n-1)
Primary	20% (n-1)	53.8% (n-7)	33.3% (n-6)	38.9% (n-14)
Secondary	80% (n-4)	46.2% (n-6)	38.9% (n-7)	47.2% (n-17)
Post-secondary	0% (n-0)	0% (n-0)	11.1% (n-2)	5.6% (n-2)
Others	0% (n-0)	0% (n-0)	11.1% (n-2)	5.6% (n-2)
What does your partner do for a living?				
Student	20% (n-1)	0% (n-0)	0% (n-0)	2.8% (n-1)
Unemployed	20% (n-1)	15.4% (n-2)	77.8% (n-14)	47.2% (n-17)
Paid employee	20% (n-1)	7.7% (n-1)	0% (n-0)	5.6% (n-2)
Others	40% (n-2)	76.9% (n-10)	16.7% (n-3)	41.7% (n-15)

3.2 Relevance

This study measured relevance in terms of alignment to community felt needs, operational context, and similar government programs in the areas. It also examined the extent to which the project results continue to be relevant to the needs of the beneficiaries. The evaluation found that the project strategies and interventions were relevant, as they were able to address the gaps identified during baseline study. Key findings during the baseline include: 40% of the respondents identified financial stress as the most common reason why the men in their community are violent towards women. Other reasons identified include the inability to manage their anger, alcohol intake, and the belief that men should oversee relationships.

More men (59.3%) than women 15.5% and Adolescent Girls and Young Women (AGYW) (11.5%) were aware of the Kenyan laws related to domestic violence. Notably, most women and girls who knew about the laws believed that they were too harsh. Only 15% of the survey respondents believed that women in their communities would know where to go if they needed advice or violence response services. Although most women and AGYW reported that health and psychosocial support/counseling services were easy to access (47.5% and 54.2% respectively), stigma seemed to play an important role in hindering access. Several respondents said that survivors of violence fail to seek services because they feared other people knowing what is happening to them.

The project worked with the refugee community and other project stakeholders to ensure the project addresses the main goal of refugee women and girls in the urban population in Nairobi experiencing less interpersonal violence by 2022 by focusing the main interventions of creating awareness and increasing knowledge on different forms of GBV and accessing the specific GBV services.

3.2.1 Relevance to Community Needs

The project was motivated by sentiments expressed during the urban refugee protection partners meetings, which identified GBV as an issue of concern in the refugee communities. These data

collaborated with those collected by HIAS during its own program assessment sessions in which the issue was raised as undermining other protection issues such as livelihood security, wash and education. The pairwise ranks conducted during the FGDs indicated physical, economic, and sexual abuse as the most common forms of IPV among them. Moreover, 76.6% of the baseline respondents reported men in the community beat-up their wives. These discussions summed together point to the fact that IPV was a big issue among the target community at the beginning of the project. This phenomenon is associated with the power imbalance between male and female refugees and between refugees and host communities. It was further exacerbated by the patriarchal cultures to which the respondents belonged. It was further observed that despite the high prevalence, the reporting levels were very low due high dependence levels among women on their men as well as their desire to keep their families together.

3.2.2: Relevance of the project assumptions and validity of its objectives

The study observed that the project made valid assumptions on the root causes of IPV in the target population. From the project proposal document, the project is informed by four main assumptions, thus: male refugees scarcely understand women rights and benefits of equality; women and girls have been socialized to believe that IPV is part of their lives; there exist weak systems for IPV prevention in the refugee communities; and enhanced project staff capacity is required to implement an IPV prevention program and COVID 19 would undermine its implementation.

One of the male FGD respondents reported as follows:

“This project was a real eye opener. I never knew the importance of involving women in family decisions. In my community women and children are counted as a man’s property. I also never raised a voice whenever there was a domestic fight in my neighborhood.”

These sentiments were shared by female respondents who reported that IPV had become part of their lives, and thus never raised concerns whenever there was an incident. This explains the low levels of seeking help for IPV related instances among the communities at the start of the project. The data from the urban refugee protection meetings also indicated that IPV is prevalent in the project target population. The study further observed that while most of the project implementation team members were knowledgeable on refugee matters, GBV in the refugee context presented new challenges that required capacity building. These challenges were particularly more profound during the COVID-19 epidemic. Discussions with the KIIs showed that the project objectives were well aligned to the problems that were identified during the reflection sections of previous projects and urban refugee protection meetings.

3.2.3 Validity of Approach and Theory of Change

The study found that the project’s ToC has clarity of thought, is well articulated and relevant to the context. The ToC is operationalized through three project objectives, namely: 1) Refugee men have changed attitudes around power, gender, masculinities, and male privilege and take action to prevent Violence against Women and Girls VAW/G; 2) Refugee women and girls demonstrate an increased understanding that IPV is a violation of their rights and feel confident reporting that violation; 3) Community systems enable refugee-friendly prevention of VAW/G through both improved access, and pathways and strengthened community awareness of IPV; 4) Increased accountability of program staff implementing the project through changes in staff knowledge and attitudes on prevention of VAW/G; and 5) HIAS is institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adapting existing interventions to EVAW/G with a focus on the most vulnerable women and girls. Each of the outcomes has various outputs and activities. The result areas are as visualized below:

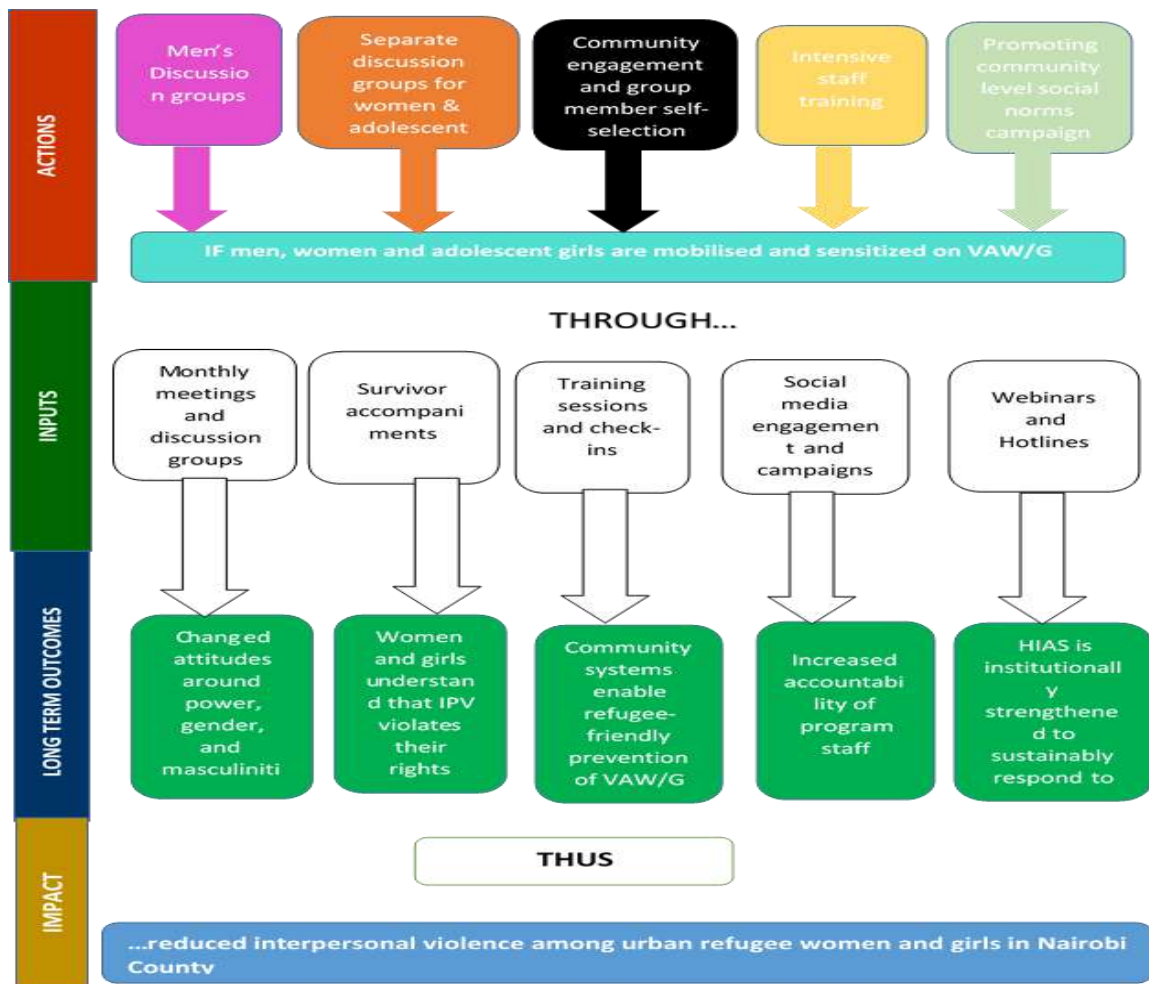


Figure 1: Project Theory of Change (TOC)

From the visualization in Figure 1, it can be deduced that the project TOC is coherent, clearly articulated, and has strong linkages between activities, inputs, outcomes, and impact.

“The project’s ToC has clarity of thought and shows a clear link between the activities, inputs, outcomes and eventual goal. It was also well aligned to HIAS’s mission because it focused on welcoming refugees and providing them with a safe space within which they would enjoy their asylum. Gender based violence is one of the areas that had denied refugee girls and women the opportunity to enjoy their rights.” HIAS Kenya project Staff.

These sentiments were also reflected in the KII transcripts which indicated that there are strong linkages between the project interventions and root causes of IPV. Moreover, the FGD transcripts indicate that beneficiaries viewed the project interventions as useful.

3.2.4: HIAS capacity strengthened to provide a timely and relevant response to target population needs and priorities in the COVID-19 context

The evaluation observed that enhanced HIAS capacity to provide GBV services in medical emergency situations, e.g., covid 19. HIAS engaged consultants to develop training guides for the different audiences, i.e., adolescent girls, women and men which aided the GBV facilitators on the topics to cover during the trainings for the different groups.

The project staff directly involved in the project interventions were trained on GBV and how best to handle and support survivors of violence⁴. During the COVID-19 pandemic the staff were engaged in webinars, zooms meetings and online training to continue enhancing their capacity. The training enhanced the staff capacity on advocacy and prevention/ ending of VAW/G.

HIAS offered support to survivors of violence i.e., counseling, reporting cases through the HIAS toll free line and the capacity to cushion women and girls by offering financial assistance and dignity kits during the COVID pandemic. The IPV survivors without access to internet were also given smartphones and internet so that they can attend online training.

Discussions with the implementing staff indicated that lessons learnt from these interventions will prove useful in the future during other emergency situations such as conflicts where in-person contact with beneficiaries is impossible. There were however challenges associated with the interventions as some beneficiaries did not have smartphones. There were also cases of cheating where some refugees claimed to have been IPV survivors to access benefits given that case workers had no way of cross-examining them or home visits to verify information provided.

⁴ This training took into account the pandemic context and shift to remote/hybrid services in some cases

3.3 Project efficiency

The project was implemented by HIAS Kenya in Kayole, Kawangware and Eastleigh in Nairobi County. Project efficiency was measured by assessing partners' and beneficiaries' perceptions on whether project activities were implemented promptly, services and interventions were offered in an adequate and cost-effective way, and the extent to which the project's inputs are perceived to have led to results. In addition to perceptions, efficiency was further evaluated using cost and yield maximization indicators in all the critical operational departments within the project, as well as the overall decision-making processes, guiding policies, and procedures.

a) Adequacy of the services rendered.

The respondents observed that most of the goods⁵ and services offered by HIAS Kenya were adequate to fulfill the needs for which they were provided. The level of satisfaction among adolescent girls was higher, as compared to that of women and adult men in all the intervention sites. Notwithstanding this, several complaints were reported by men in Eastleigh who felt that the services provided by HIAS were adequate but undermined by lack of basic needs including rent and schools' fees, among others which were to be provided by other partners.

b) Timeliness in service delivery

The study observed that all the project activities were implemented on schedule despite the challenges that were occasioned by the COVID 19 pandemic. This was attributed to the fact that the project came up with innovative ways of implementing the project by purchasing smartphones for vulnerable IPV survivors and refugee leaders. The level of vulnerability was determined by social workers in charge of case management.

“During the Covid 19 pandemic, we had to come up with innovative ways of implementing by moving from physical to virtual meetings. This meant that we had to procure smart phones for the beneficiaries, although it was not possible to provide the phones to everyone.” HIAS Project Staff

c) Quality of the services rendered.

With regards to the quality of services, which were provided to the community, the evaluation established that the organization employed efficient operational strategies including high quality materials and qualified staff for training. The HIAS project staff noted that this was made possible by the fact that all procurements went through competitive tendering processes. This is further demonstrated by the fact that for instance, when respondents were asked about the quality and importance of services they received, the majority stated that these services were very important to them. This was further demonstrated by respondents highly rating the quality of services they

⁵ dignity kits

received showing that indeed implementation strategies were of good quality. The respondent's views on the quality of the project deliverables are hereunder discussed as per the FGD transcripts.

d) Cost Effectiveness

Discussions with the project staff revealed that the project was implemented within the agreed upon budget. This is attributable to various cost sharing and planning mechanisms that were employed by the organization. In addition to the aforementioned, only a small percentage of cash was handled physically with most of the transactions being conducted online. This enabled both prompt implementation and accountability.

3.4 Project Effectiveness

The project sought to achieve the following objectives: 1) Refugee men have changed attitudes around power, gender, masculinities, and male privilege and take action to prevent Violence Against Women and Girls VAW/G; 2) Refugee women and girls demonstrate an increased understanding that IPV is a violation of their rights and feel confident reporting that violation; 3) Community systems enable refugee-friendly prevention of VAW/G through both improved access, and pathways and strengthened community awareness of IPV; 4) Increased accountability of program staff implementing the project through changes in staff knowledge and attitudes on prevention of VAW/G, and 5) HIAS is institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adapting existing interventions to EVAW/G with a focus on the most vulnerable women and girls. This section of the report discusses the performance of the project against these objectives.

3.4.1 Refugee men have changed attitudes around power, gender, masculinities, and male privilege and take action to prevent Violence against Women and Girls VAW/G

In this objective, the project sought to change gendered drivers that make up the root causes of Violence against Women and Girls (VAWG). These include men's control over decision making, stereotypes of masculinity and femininity, and condoning acts of VAWG. Men were engaged through awareness creation about the root causes of IPV and ability to identify harmful attitudes and beliefs that lead to IPV. This project objective was achieved largely through men's group discussions using the men's curriculum developed by the project, and men's weekly check in meetings with the facilitator for accountable practice.

The evaluation obtained information from project beneficiaries to establish if there were any changes of attitudes as a result of the project's intervention. Men were asked to rate the extent to which they agree or disagree with specific statements on their attitudes about gender roles, power and decision making, as well as violence against women. Their responses were then compared with baseline results, and the data on those who agreed or strongly agreed with the statements are presented in Table 4.

Table 4: Comparison of baseline and end line attitudes on men’s perceptions on power and gender roles.

Number of men who agree with the statements.	Baseline	End line
<u>Gender roles in the household</u>		
I believe a woman’s most important role is to take care of her home, cook for her family and look after the children.	33.30%	32.1%
<u>Power and decision-making</u>		
I think that a man should have the final word about decisions in the home.	25.9%	10.7%
I think that a woman does not have the right to challenge her man’s opinions and decisions, even if she disagrees with him	14.8%	14.3%
<u>Violence against women</u>		
I think violence between a husband and a wife is a private matter and others should not interfere.	29.7%	14.3%
Aggregate	25.9%	17.9%

The most notable finding in Table 4 is a significant decline in retrogressive attitudes towards violence against women. For instance, the number of men who believe that intimate partner violence (IPV) is a private matter reduced by half - from 29.7% before the project to 14.3% after the project intervention. This finding was corroborated by qualitative data obtained from FGDs, which confirmed that indeed, there is a general change in attitude towards bystander involvement in IPV.

In the words of one FGD participant:

“I no longer keep silent whenever I hear commotion at my neighbor’s house. I have to go and check what is happening because you can ignore yet your neighbor is being killed.”

This change in attitudes is a very significant outcome of the project intervention, considering that it has a direct impact on risk reduction for IPV. According to UNCT Pacific (2017) and UNICEF (2006), it is very important for survivors of IPV to seek external help from relatives, friends and even government authorities^{6 7}. The reduction in the number of men who perceive IPV as being a private matter implies that they are more receptive to the idea of bystander involvement, which is identified as one of the risk prevention strategies by CDC (2017)⁸. It also implies that a larger

⁶ UNCT Pacific (2017). A Resource Book on Domestic Violence for UN Staff in the Pacific

⁷ UNICEF (2006) Caring for Us: Dealing with Domestic Violence

⁸ CDC (2017). Preventing Intimate Partner Violence Across the Lifespan: A Technical Package of Programs, Policies, and Practices

proportion of men at endline are willing to discuss IPV prevention in strategies in their homes, which is similarly identified as a prevention strategy⁹.

Another notable decline was realized in relation to attitudes towards women's involvement in decision making in the household. Baseline data (Table 4) shows that 25.9% of men either agreed or strongly agreed that men should have the final word about decisions in the home. This reduced to 10.7% after the project intervention and is indicative of project effectiveness. As confirmed by qualitative data from FGDs, as well as key informant interviews.

One of the women FGD participants reported the following:

“Following the HIAS training where my husband and I were both involved, we normally discuss and plan for our family activities together, especially big expenses such as rent and school fees”.

Nevertheless, Table 4 also shows that there was no distinctive change in attitude towards gender roles, with those who agreed or strongly agreed that the role of women is that of homemaker, remaining the same at baseline and after the project intervention. Nonetheless, it is instructive to note that conceptualization and perceptions on gender roles are long-term cultural constructs that may take long to change¹⁰. According to Omollo *et al.* (2021), short-term intervention may have minimal, if any, effect on perceptions of gender roles¹¹. In this sense therefore, the 1.2% reduction (from 33.3% to 32.1%) in the number of men who view the role of women as being that of homemakers, could be noteworthy. However, caution is advised in counting this as being among the project's outcomes.

A male respondent stated:

“I think that a woman does not have the right to challenge her man's opinions and decisions, even if she disagrees”. This was rather contradictory, considering the significant change in attitude regarding the construct. He further noted: *“I think that a man should have the final word about decisions in the home”.*

However, this apparent anomaly was clarified by qualitative data from FGDs and KIIs, which seem to indicate that in the African context, decision making is conceptualized as a process, and not an event. Regarding the latter construct where there was a change in attitudes, respondents conceptualized it as the decision-making process, in which women were perceived to have a right to participate. The earlier construct was conceptualized as the end-result of the process, whereby women are not expected to challenge a decision that has already been made. According to most FGD participants, women reserve the right to be heard, hence the change in attitude regarding men having the final word.

⁹ Ditto

¹⁰ Omollo, C.O; Ong'anyi, P.O; Agwanda, A.O & Shivachi, Ti. (2021). *Gendered Perspectives on Contraceptive Use: An Exploratory Study of Persons Living with HIV in Rural Kenya* IJRISS 5(1)

¹¹ Ditto

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In the words of one FGD discussant: *“Women have a right to be heard and to participate in important decision-making processes in the homestead.”*

Nonetheless, the idea of challenging decisions that have already been made appears to be a sign of defiance, which is perceived negatively in the African context.

A notable increase in positive attitudes was found among men on gender roles and relations particularly on power and decision making at the household level. Compared to the perception of men at the start of the project where 25.9% agreed with the questions in Table 4 above, this has since dropped to 17.9% of men still in agreement. Significantly, there was a 15% decrease in the number of men who believed that a man should have the final word about decisions in the home and that violence between a husband and a wife is a private matter and others should not interfere. However, a significant percentage of men still believe that physical form of violence towards their intimate partner is a form of violence. The findings demonstrate a significant improvement in attitude among men regarding VAWG specifically on emotional/psychological, sexual and economic violence. These forms of violence are commonly normalized and are less reported by survivors.

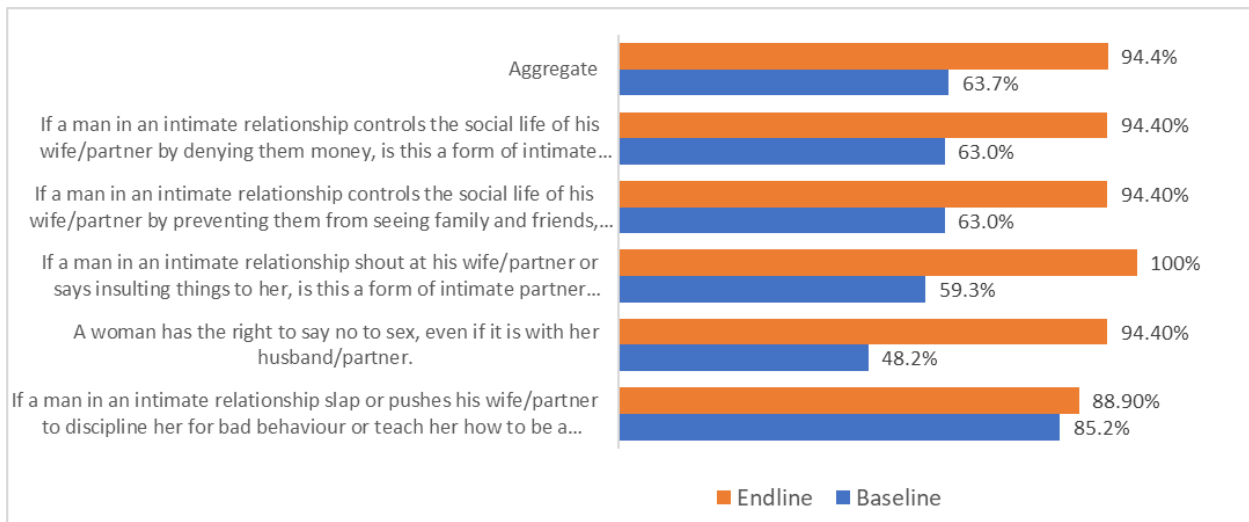


Figure 2: Percentage of men who agreed or strongly agreed with each statement about the different forms of VAW/G

The change in attitude is attributed to knowledge acquired on the various forms of VAW/G through the men’s curriculum sessions. Figure 2 shows 94.4% of men are aware of the various forms of VAW/G compared to 63.7% at the start of the project demonstrating a 30.7% increase. Equally, there is an increase in the level of knowledge among men on the domestic violence laws in Kenya 79% informed of the laws compared to 59% at the start of the project.

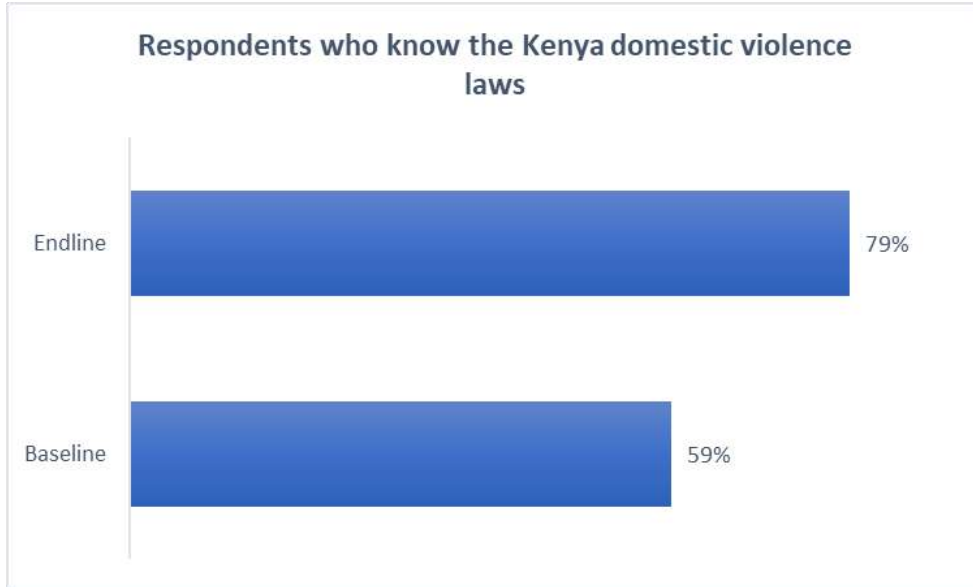


Figure 3: Percentage of men who know Kenya’s domestic violence laws

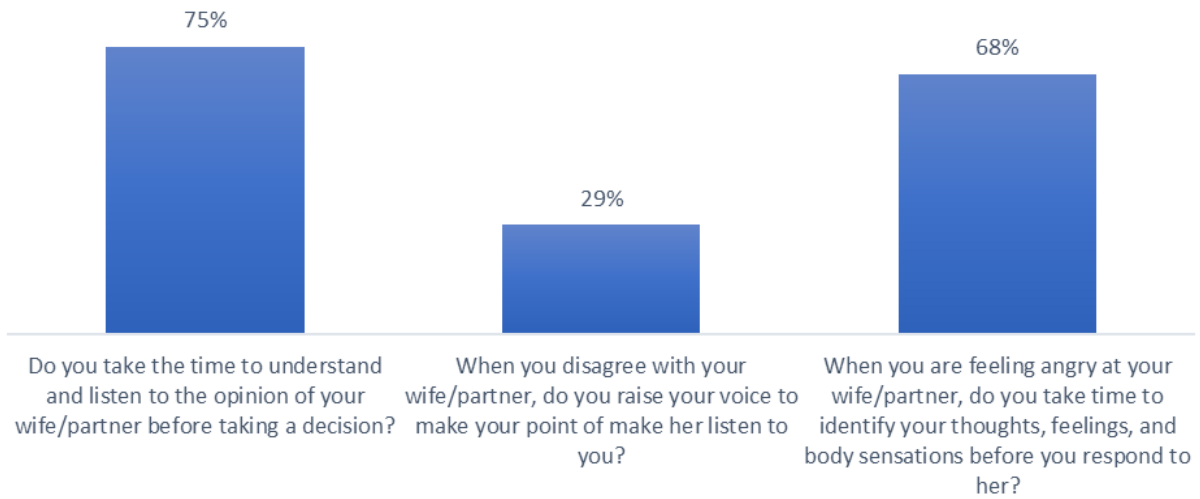


Figure 4: Number of respondents who agree to positively engage with their wives/Partners

The survey showed that men were willing to be allies in the fight against GBV.

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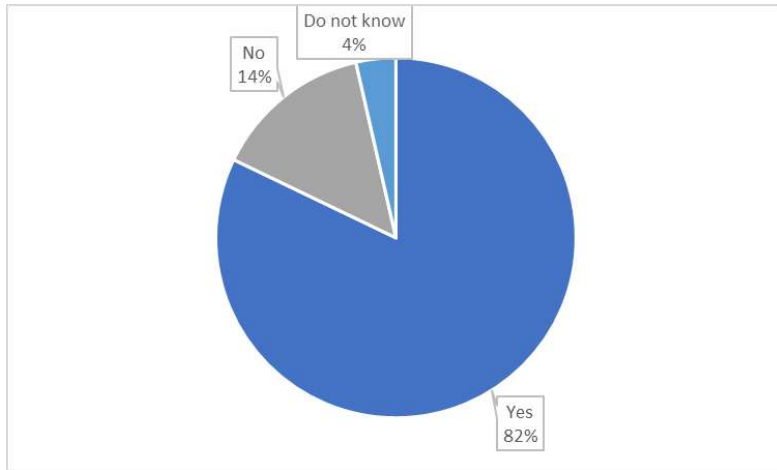


Figure 5: Percentage of men who have taken action in the last 12 months to prevent violence against women and girls in their community

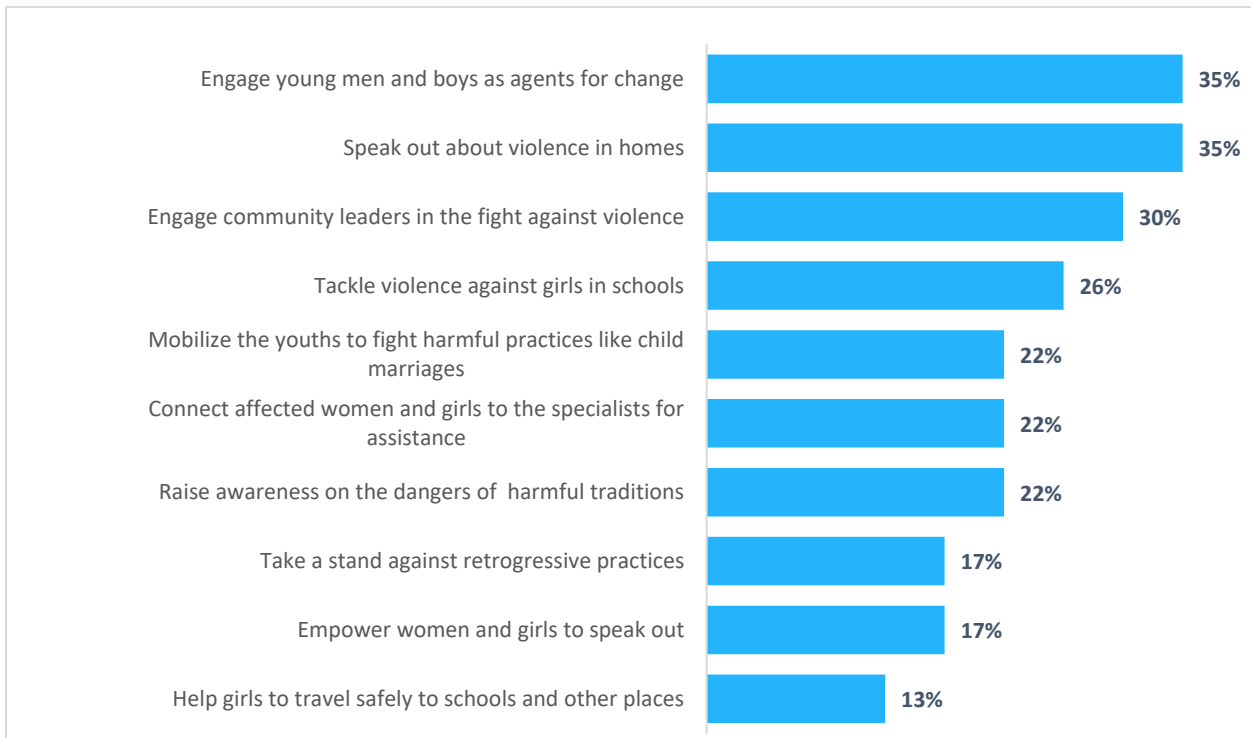


Figure 6: Proportion of actions taken by men in the last 12 months to prevent violence against women and girls in their community

Figures 5 and 6 above demonstrate the action and initiatives by men in the last 12 months in preventing violence against women in their communities. 82% of men are committed to addressing VAW with most actions involving engaging young men and boys as agents for change and breaking the silence by speaking out about violence in homes. The changing beliefs and perception among on the various forms of IPV have led to a changing behavior and taking action

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to provide support to women and experiencing violence, promoting the benefits of non-violence in relationships, supporting flexible gender and social roles, sharing decision-making and improving the quality of couple communication.

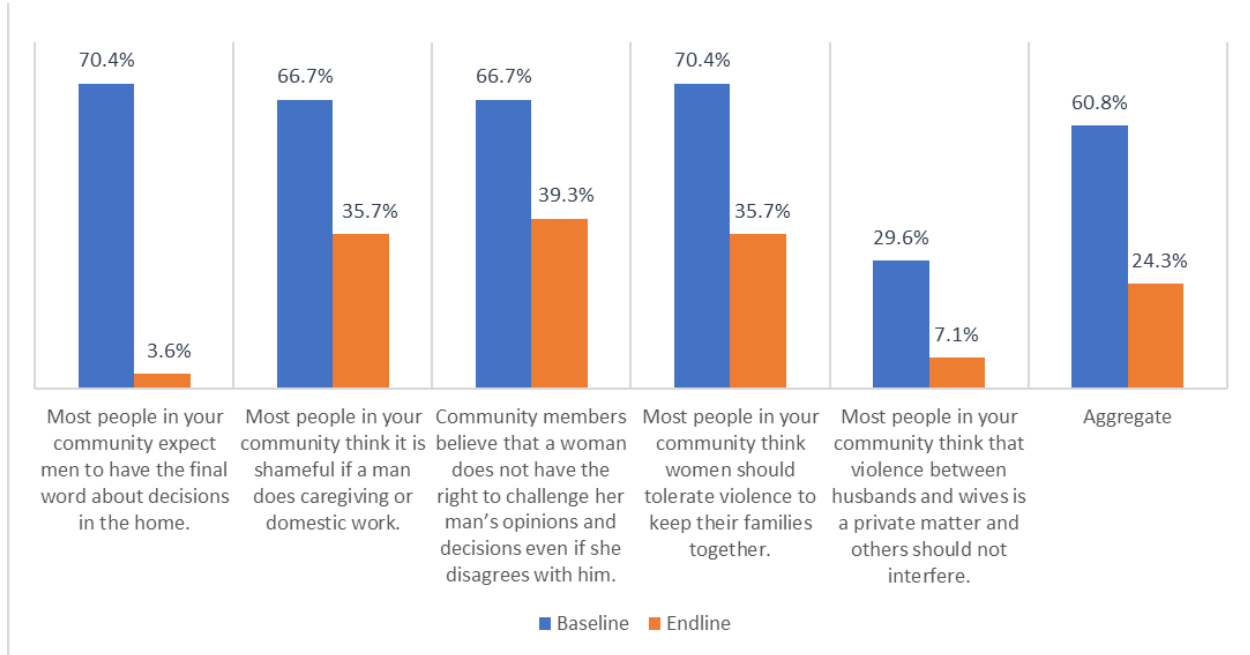


Figure 7: Respondent's perception of gender roles and relations among community members.

The questions in Figure 7 were administered to the men in assessing communities' perception on gender roles in the household, power and decision making and perception on VAW/G. There was a significant decrease in the community's attitude from 60.8% to 24.3% who agree with the questions above. The findings show an improvement in decision making at the household with communities starting to appreciate joint decision-making increasing agency among women to get involved in decision making.

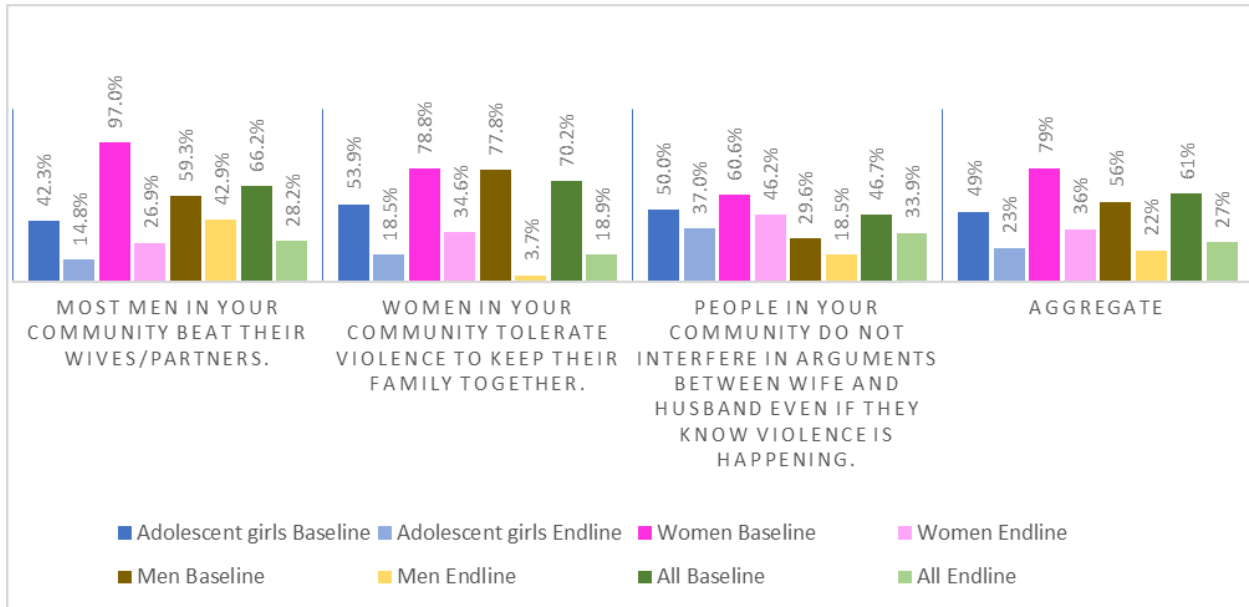


Figure 8: Respondent's perception of community members' actions regarding IPV

As can be seen from figure 8 above there has been a substantial reduction in negative community attitudes that promote IPV from 61% to 27%. discussions with the project officers indicated that these results stemmed from community activities such as radio talk shows and posters. These sentiments were repeated in the FGD discussions with the host community members who reported increased knowledge about IPV.

3.4.2 Refugee women and girls demonstrate an increased understanding that IPV is a violation of their rights and feel confident reporting that violation

3.4.2.1 Awareness of IPV as a violation women and adolescent girls' rights

Refugee women and girls are at greater risk of experiencing violence due to discrimination, poverty, low education level, and early & forced marriages. The project strategized on increasing knowledge about the root causes of IPV among these women and girls with an aim of increasing their ability to identify harmful attitudes and beliefs that led to IPV. An increase in knowledge would then enhance the process of experience sharing and reporting of IPV cases among these vulnerable women. During the FGD session in Kawangware one of the respondents stated as follows:

“Awareness means survivors know their rights and that the community will support and understand that blame and shame should not be placed on the survivor, regardless of country of origin, the more we know about how to address the issues of violence against women and girls, the better support survivors feel throughout counselling and the justice system.”

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The KII transcripts from the refugee leaders indicated the sensitization sessions were aimed at BCC¹² and clarification of common understandings about IPV. From FGD transcripts, women gained full understanding of IPV. Besides physical and sexual abuse, verbal abuse was also a form of GBV. In addition, the women were made aware of the negotiation and protection rights and that they were important in decision making

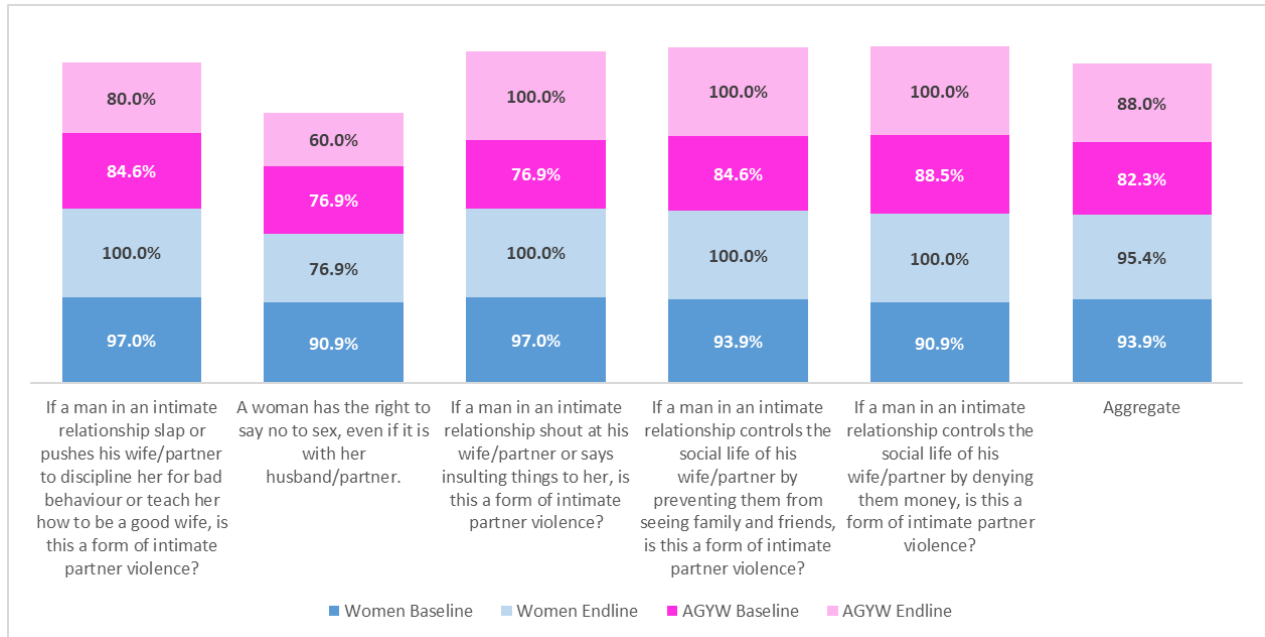


Figure 9: Percentage of women and AGYW who agreed or strongly agreed with each statement about their personal beliefs on gender roles and relations

As shown in Figure 9 above, the women and adolescent girls were given IPV statements and asked whether they believed that these were forms of IPV (physical, emotional, sexual, and financial violence), 95.4% of women and 88% adolescent girls agreed with the statements demonstrating knowledge on the various forms of VAW/G up from 93.9% and 82.3% at the start of the project.

¹² Behavior change communication

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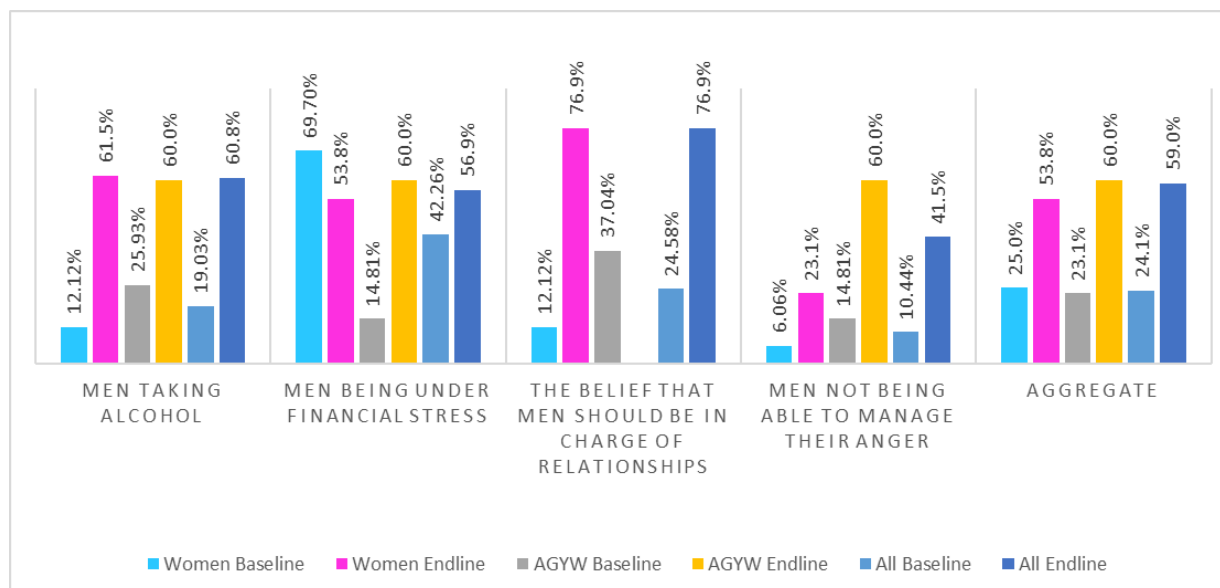


Figure 10: Causes of men's violence.

Table 5: Women and Adolescent girls' perception on gender roles, power and VAWG

	Women		AGYW		All	
	Baseline	Endline	Baseline	Endline	Baseline	Endline
Gender roles in the household						
I believe a woman's most important role is to take care of her home, cook for her family and look after the children.	30.3%	72.0%	46.2%	71.4%	38.3%	71.7%
Power and decision-making						
I think that a man should have the final word about decisions in the home.	12.1%	15.4%	15.4%	46.4%	13.8%	30.9%
I think that a woman does not have the right to challenge her man's opinions and decisions, even if she disagrees with him	9.1%	26.9%	30.8%	3.6%	20.0%	15.3%
Violence against women						
I think violence between a husband and a wife is a private matter and others should not interfere.	24.2%	3.8%	26.9%	18.5%	25.6%	11.2%
Aggregate	18.9%	29.5%	29.8%	35.0%	24.4%	32.3%

From the table below it is noticeable that there has been a change of attitudes by the project beneficiaries on various aspects of IPV including thinking that it's a private affair, women's right to challenge men's decisions. However, some patriarchal values such as not challenging men's decisions at home and gender roles have been entrenched. Future projects should find ways of better addressing these issues. Indeed, the FGD participants reported that in their culture and religion women's submission to their husbands and effectively taking care of their gender roles is considered good upbringing.

3.4.2.2 Awareness of reporting channels

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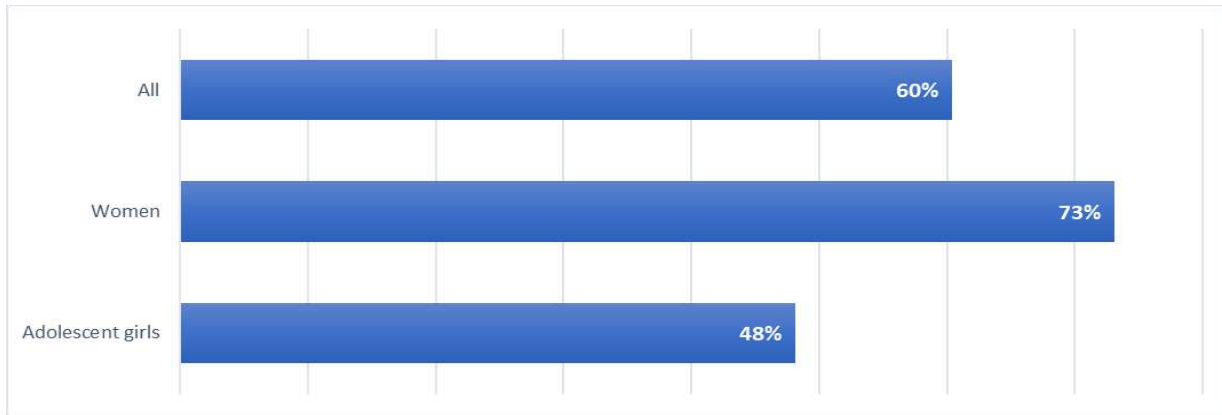


Figure 12: Knowledge among women and AGYW on where to go if they needed advice or support on violence issues

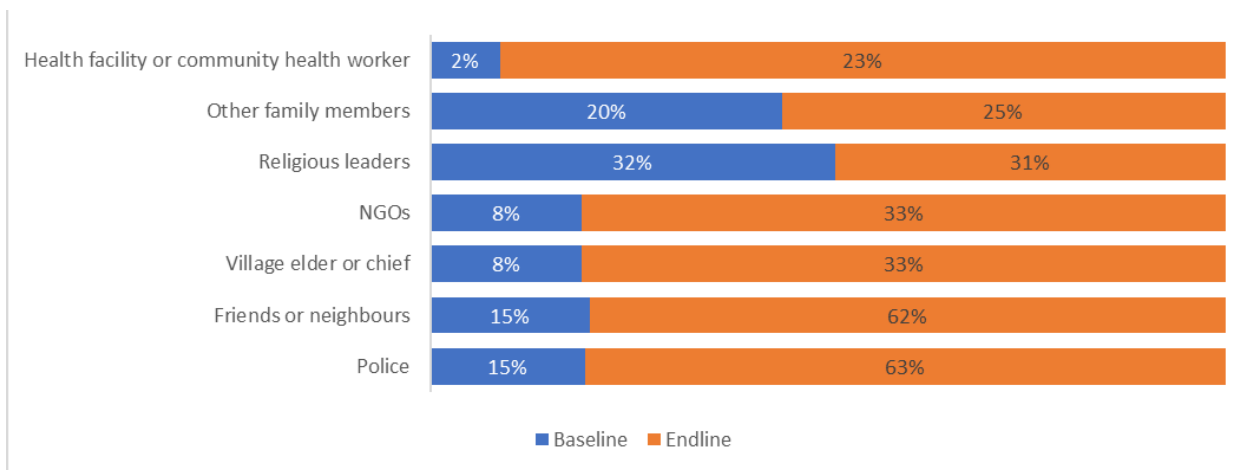


Figure 13: Services that women who have undergone violence would seek support from in the communities

Regarding where to get help, (see Figure 13) the women and AGYW were more likely to seek help at the police station (63%) followed by friends or neighbors (62%), and village elder or chief and NGOs at 33% each. This is a shift from the previous practice at the start of the project where most women and AGYW would prefer seeking help from religious leaders followed by other family members. This demonstrates increased recognition of the formal structures of VAW/G case management.

Qn: Now I'd like you to name all the groups you can think of who provide services to women and girls in this community.

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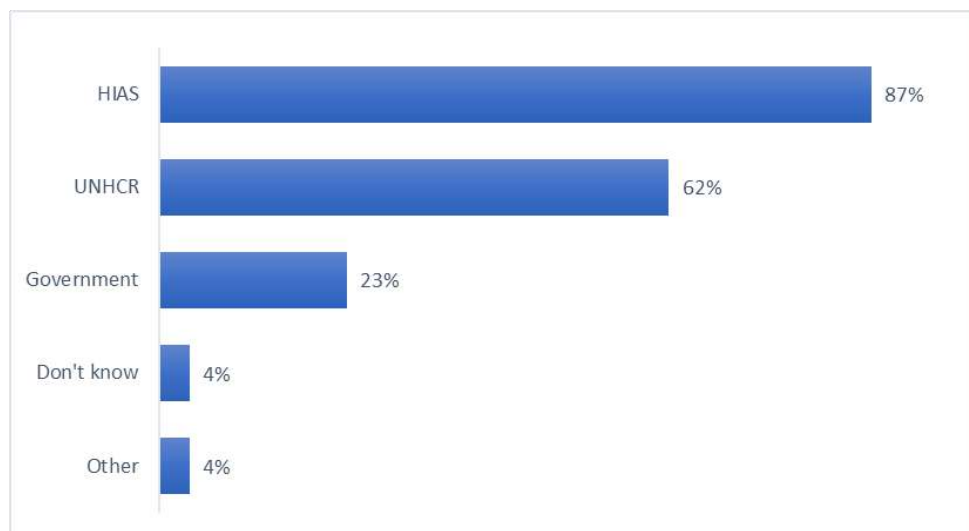


Figure 14: Service providers that women who have undergone violence would seek support from in the communities

Of all the GBV service providers within the project catchment area, HIAS services are most popular among the women and AGYW at 82% followed by UNHCR (62%), and government services at 23%.

Table 6: Respondents' perception on easy access to various IPV services for women and girls in the study locations

Services	Baseline	Endline
Health services	50.0%	59.6%
Psychological Support/ Counseling	54.2%	45.3%
Cash/ Food assistance	15.2%	39.6%
Shelter	6.8%	36.5%
Legal assistance	18.6%	24.5%
Aggregate	29.0%	41.1%

The women and AGYW reacted to the level of access to GBV services within their locality particularly on health services, psychological support and counseling, cash/food assistance, shelter, and legal assistance services. Generally, there was an increase in access to GBV services up from 29% at the baseline to 41.1% at the end of the project translating to a 12.1% increase. Notably, there was general increase across most of the services for women and AGYW with access to shelter (29.7%) and cash/food assistance (24.2%) recording the highest improvement in access¹³ compared to the situation at the start of the project. However, there was a drop in access to

¹³ services provided for and directly controlled by HIAS

psychological support/counseling services, with this attributed to the COVID 19 containment measures and limited access to tele-counseling services due to personal safety of the survivors.

3.4.3: Community systems enable refugee-friendly prevention of VAW/G through both improved access, and pathways and strengthened community awareness of IPV

The project made several efforts to increase community awareness of IPV and refugee rights, primarily through radio talk shows. The KII transcripts indicated that there had been improved attitudes of government officials towards refugees. They try as much as possible to give them a listening ear and help where they can. One of the respondents reported thus: *“There was a time I was beaten up, I reported that matter to the police and I was assisted. Kenyan police are good.”*

Similarly, during the FGD discussions, some respondents reported that they now appreciate that IPV is bad for everyone, irrespective of their nationality. It was noted, however, that the Somalia-Kenya marine conflict and the rise of the Al-Shabaab insurgency have created a sense of suspicion from the local communities toward refugees of Somali origin. There is also a misunderstanding among the host community that refugees live better than host community. As a result, they tend to be indifferent when the refugees are involved in IPV.

Discussions with refugees also indicated that, in general, refugee discrimination is still too high. They are frequently called nasty names and asked to return to their countries. Future implementation should try to enhance refugee-host community relations.

3.4.4: Increased accountability of program staff implementing the project through changes in staff knowledge and attitudes on prevention of VAW/G

HIAS Kenya conducted a remote staff training on relational accountability where staff were trained on prevention of violence against women and girls through healthy and respectful relationships. In total, 62 staff were trained (and 30F, 32M). Staff learnt to use strategies such as recognizing when they are angry, feel powerless or frustrated and identify the source of the feelings (e.g., gender socialization, power lists), manage those emotions in a way that does not hurt or intimidate others, find alternative ways of dealing with emotions including talking to others about feelings, taking a walk, taking deep breaths and being generous towards others.

HIAS has put in place policies that mitigate the possible challenges and incidences of safety and ethical risks, sexual exploitation, and sexual abuse. The organization has a code of conduct that all staff must adhere to along with policies on Child protection, Conflict of interest and whistle blower policies, among others. The HR department conducted virtual sessions to sensitize HIAS staff on the different policies and every staff has a signed copy in their staff files as a sign of commitment to the policies. It also has reporting mechanisms in place with point persons within the organization and conducted refresher trainings on the different policies, including prevention of sexual exploitation and abuse and prevention of corruption and fraud.

Discussions with the project implementation team showed that HIAS Kenya has extensive geographic reach, due to the availability of satellite offices in areas with high refugee populations. This enabled the project to relate with the community who were always kept abreast of all activities, reporting, and increased the team's accountability to the community. In addition to this, the team members had a lot of expertise in terms of GBV which ensured that they were able to handle the project's complexities adequately.

At the same time, membership, and chairing of the Technical Working Group (TWG) made it easy for the organization to offer support to survivors.

“Strategic partnerships developed over the years made it easy for us to offer GBV response and clients get efficient services.” Said a project team member.

3.4.5: HIAS is institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adapting existing interventions to EVAW/G with a focus on the most vulnerable women and girls

The project took considerable steps to ensure business continuity during and after the COVID-19 epidemic. To begin with, all the project staff were trained on COVID 19 implementation protocol. Efforts were made to ensure the digital inclusion of the refugees into the project through buying smartphones for some vulnerable clients. The GBV staff members and case managers were increased from one to four¹⁴. Moreover, a hybrid system composed of both physical and online meetings was adapted to ensure all the beneficiaries were reached with goods and services.

- During the COVID 19 pandemic, HIAS adapted the project activities to cushion the women and girls by providing dignity kits to 129 refugee women and girls for three months under the original UNTF grant. This support enhanced menstrual hygiene and increased their self-confidence as a result the money they were to use to buy the sanitary towels enabled them to meet their other needs.
- At the time, HIAS offered cash assistance to 227 vulnerable women, which played a huge role in catering for their needs during the harsh economic times because of the pandemic. The women were able to cater for their basic needs such as paying their rent and buying food for their households and meeting other basic needs, including access post GBV services.
- To enable the staff continue rendering services during the COVID 19 pandemic, HIAS organized a staff capacity building session/s on relational accountability where staff were trained on prevention of violence against women and girls through healthy and respectful relationships. Staff learnt to use strategies such as recognizing when they are angry, feel powerless or frustrated and identify the source of the feelings (e.g., gender socialization, power lists), manage those emotions in a way that does not hurt or intimidate others, find

¹⁴ entire project

alternative ways of dealing with emotions including talking to others about feelings, taking a walk, taking deep breaths and being generous towards others.

- Webinars for HIAS staff were held on EVAW/G programs during and beyond COVID-19, policy influence & development, and innovative resource mobilization. This was done to ensure advocacy and prevention of EVAW/G during Covid-19, and safe use of new approaches and technologies in remote service delivery to survivors.
- Since HIAS adapted to remote working due to the COVID-19 pandemic, the staff were trained on cyber security and were required to undertake online courses on the same. HIAS also enhanced the IT system to guard against cyber-attacks and staff are encouraged not to use their personal devices to access the HIAS network, etc.
- The organization also acquired and maintained network infrastructure equipment using HIAS funds. In terms of self-care and staff wellbeing, HIAS had a debriefing session for all staff. The discussions were centered on the creation of a healthy and supportive work environment, fostering teamwork and individual personal/career development.
- A refresher training on HIAS policies (finance, procurement, code of conduct and whistle blowing) was conducted in June. As part of the accountability to affected populations framework, the M & E officer trained staff on relational accountability. To improve staff capabilities on matters such as decision making, time management, financial planning etc. a leadership and management coaching session was conducted for interested staff. As part of the UNTF project activities, HIAS engaged different consultants to train staff on remote working, change management, and remote data collection during COVID 19.

3.5 Sustainability

In considering the project's sustainability, the evaluation assessed its ability to continue running beyond the implementation period. It focused on the possibilities of continuing the project benefits beyond HIAS support. This subsection highlights the key findings on sustainability, looking at the presence of a sustainability and exit strategy, funding, and participation of communities in sustaining the project.

3.5.1 Involvement of UNHCR and Local government agencies

The project trained and actively involved local chiefs, police, and other members of the criminal justice system at the grassroots level. The KII transcripts indicate that these government officials were willing to continue offering services to IPV survivors even after the reporting period.

3.5.2 Community Participation, linkages, and Local Resource Persons

The implementing officials actively engaged refugees and other beneficiary associations. One of the FGD participants noted as follows:

“the training was done in a similar manner in my local language. This has helped me to remember most of the things we learnt in class. I now use those lessons to advise my fellow women whenever they have problems.”

The project also created linkages and referral systems with civil society organizations involved in urban refugee protection, such as the Danish Refugee Council, Kituo cha Sheria, and Freedom from Fistula Foundation who are likely to continue supporting the project beneficiaries even after the project period. Some of the KII interviewed however complained that the involvement of certain local structures such as the SUPKEM and Muslim women prayer groups was inadequate.

3.5.3 Presence of a sustainability and exit strategy

The study established that the project proposal incorporated sustainability into its design. The design included creating linkages with other GBV CSOs, relevant ministries and community participation. The evaluation noted that activities under the above thematic areas were adequately implemented. However, no agreements were made with the community and its partners on how the current project interventions would be extended after the funding period and a close-up workshop is yet to be conducted.

3.6 Coherence

The project has played a key role in the reduction of VAW/G in the region by working collaboratively and strengthening the capacities of the local leaders/chiefs), the police, CHVs, and GBV trainers on how to handle survivors of GBV and IPV, where they can report cases, and on how to collect and preserve evidence.

3.6.1 Training of police and local leaders (Chiefs)

HIAS was not working in isolation but collaborated with local leaders (chiefs) to reduce VAW/G. This was a result of the training of leaders conducted that enabled them to be aware of handling survivors of violence with the aim of preserving evidence. Through HIAS support and working collaboratively, the chiefs have been able to oversee and implement the frameworks of the Community Based Prevention of Violence against Refugee Women and Girls project.

Prior to engaging the local leaders, the chiefs attended training that equipped them with knowledge on being able to understand and handle GBV effectively. This enabled them to become community mobilizers, reporting cases of abuse on refugees, and sensitizing the community on how to relate with refugees.

3.6.2 Working collaboratively with CHVs.

HIAS CHVs collaborated in the reduction of VAW/G among the refugee community in the area. The project enabled CHVs to expound on the knowledge that made them knowledgeable about refugees, accept them, and be able to handle refugees who are survivors of violence and IPV.

HIAS has been able to adopt the participatory approach in the eradication of VAW/G. This is thorough sensitization of the community and enhancing their capacity in reporting GBV and IPV cases and in handling survivors of violence.

3.6.3 Collaboration with other CSO

The project collaborated with several state and non-state actors who are specialists in various GBV services, including law enforcement, forensic medical documentation, counseling, and livelihood security to provide certain services. Through this approach, the project was able to concentrate on its areas of comparative advantage and tap into the synergies of other partners.

3.7 Impact

The study found that the project had greatly impacted society with a great difference noted between the inception of the project and its finalization. Discussions with the project implementation team revealed that for instance, there had been a notable change in the understanding of issues related to power, gender, and masculinity among the target population. The project had also occasioned a drastic change of attitude due to continued engagement on norms and practices.

“At the family level, there has been a change of attitude and increased reporting of cases. This can be attributed to the fact that the project enhanced the community's knowledge on GBV and enlightened them on the people they can report to in case of violations.” HIAS project staff narrated.

The study also found that although patriarchal practices were the norm among refugee communities, women were considered part of the children within the homestead¹⁵. However, things had changed over the project duration period and men have realized the importance of involving women in decision making within the households.

It was further established that while initially the police, state and non-state actors did not differentiate between refugees' issues and common day occurrences, currently, have a clear understanding of refugee issues and know how best to support them e.g., Nyumba Kumi involves refugees in their monthly meetings where reporting takes place. There has also been integration

¹⁵ especially among the Somali communities

into existing structures on the ground and the county officials have better understanding of the refugees.

Projects contribution to ending violence against women, gender equality

The project worked collaboratively with other stakeholders i.e., the police, local leaders(Chiefs), CHVs and GBV trainers by enhancing their capacity through training where they were able to realize and appreciate the refugee community, strengthened their capacities on how to handle survivors bearing in mind preserving the evidence and supporting survivors report cases of violence. Through the capacity enhancement they were able to sensitize the community on GBV and the importance of reporting cases of violence.

Prior to the project interventions the refugee community was not aware on how to prevent, support and report cases of violence. After the project interventions, the community leaders have become better leaders since they are able to support and handle survivors of violence and support survivors of violence to seek services from the hospitals, police and reporting on the HIAS toll free number.

The project has contributed to the reduction of VAW/G. This was because of the enhanced capacities among local leaders and the community sensitizations where before the interventions the community viewed refugees as strangers but now, they embrace them and regard them as part of them by involving them in community activities.

There has been a reduction of GBV cases because of the project interventions where refugees' girls and women have knowledge on their human rights, and they can confidently report cases of GBV to relevant authorities and the authority leaders take action to ensure justice is served.

3.8 Knowledge Generation

Some of the knowledge produced by the project includes social media content, social media messaging for different audiences, IPV pamphlet, the development of a guide for training GBV prevention facilitators and developed a curriculum for training for the men's groups' sessions. The project has embraced some practices that should be disseminated to other practitioners including:

Capacity strengthening of services providers: The project trained the police, local administrators, CHVs and GBV trainers. The training enhanced their capacities in handling GBV survivors and supporting survivors of violence. For instance, following the training of police officers on GBV, the number of cases being processed for prosecution had gone up. The police officers interviewed reported that skills in GBV case presentation have significantly improved. They were well aware of how to report the GBV incidences to the prosecutor.

Involving men to prevent VAW/G: The strategy involved identifying male champions for women rights, strengthening their capacity on prevention of VAW/G. In most instances perpetrators are always men, and their involvement is key in the fight against GBV in the

community. The development of the male engagement curriculum provided a systematic guide for the project in addressing the social norms among the men and challenging their biases that perpetuate violence against their partners.

Community sensitization: Webinars and training sessions for men, women and girls were held with the aim of enhancing knowledge on GBV and the referral pathways and the available support for survivors of violence. This approach was effective in reaching the wider population with key messages on GBV prevention and response while providing an efficient means of behaviors change communication within the pandemic period.

Working in collaboration: The project did not work in isolation but instead involved other stakeholders i.e., the police, the local administration, CHVs, GBV trainers and institutions i.e., Nairobi Women’s Hospital in eradicating VAW/G. The project strengthened multi-sectoral mechanism for coordination and collaboration. The regular and ad-hoc planning, consultation, and coordination meetings such as the GBV TWGs and Networks, enhanced relationships and collaboration among duty bearers for improved reporting of GBV cases, coordination of GBV referral services and other forms of support that meet critical needs of survivors. The project also worked with already established network of CHVs religious and community leaders within the project sites to strengthen community-based referrals and support for GBV survivors during the COVID-19 period.

Community involvement: The project engaged the community who are the project beneficiaries as the center by addressing their needs. They built and enhanced their capacity through training where they were more aware of their rights, increased knowledge on GBV and the importance of reporting cases.

Capacity strengthening: To ensure effective service delivery, the project enhanced the capacity by increasing knowledge of the service providers through training offered. This enabled them to understand the refugee community more, GBV and the importance of supporting survivors of violence when they report cases to them

3.9 Gender equality and human rights

The evaluation observed that the project helped to change gender relations in the target population in which it was implemented. One of the participants noted as follows:

“Before this project my husband was not very keen on following up how our girls are doing in school but since he went for training now he is very keen on how they are doing in school. He escorts them to school every day and brings them back home. He also does their shopping. He fears that if he is careless someone can take advantage of them.”

At the start of the project, staff received a gender orientation where they discussed and identified gender-based cultural norms, like women’s limited involvement in decisions making processes in

their homes. Without this mutual understanding, particularly among the technical staff, the project would not have added interventions focused on changing power dynamics and behaviors to encourage women's participation in the project.

The project developed a training curriculum to engage men in creating understanding on the different types of power and its connection to violence, understanding IPV and its consequences and creating healthy relationships.

The project also provided for safe spaces where women and adolescent girls could discuss their issues either alone or with trained female facilitators. Some of the topics discussed through the women and girls group sessions included understanding power, VAWGs, self-confidence, understanding gender, human rights and violence reporting and support services.

In addition, the project provided support services to the women and girls including legal and psychological services, provision of dignity kits for the girls and awareness on gender equality and women's rights. There were interventions targeting key stakeholders including the local administration, community leaders who participated in training on GBV case management.

As a result of these interventions the study observed that more men are allowing their wives to take part in the decisions making processes in their families. The deliberative enclaves organized by the project also allowed for IPV survivors to open up and discuss their issue with a trained counselor and seek further help. One of the respondents reported that her daughter had been assaulted by a family member, she was threatened that if she talked about it she would be killed. After talking to HIAS counselor she was referred to a safe house and the perpetrator arrested.

3.10 Lessons Learnt

- Multi sectoral approach: Project planning guided the project implementation. This enhanced proper coordination of the activities from the community, reporting of cases and offering the necessary support to the project beneficiaries.
- Working in collaboration: Engaging the community leaders, i.e., the local administration, CHVs and the police was very crucial in the reduction of GBV cases in the community. These combined forces ensured they work together towards achieving a common goal by first building their capacities that enabled them to understand GBV and be involved in the community sensitizations through the media and trainings, which were held within the community to reach the direct and indirect project beneficiaries and as a result making the interventions very relevant.
- Developing training materials: The development of the different training materials for the different groups, i.e men and women enabled the project to address the challenges each category faced separately and adequately rather than involving both men, women and girls in the same sessions.

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- Capacity building stakeholders: The training of the police, local chiefs, CHVs and GBV facilitators ensured enhanced coordination and communication at all levels when responding to and supporting survivors of violence.
- Men involvement: Involving men in the fight towards eliminating GBV as agents of change is the way to go in eradicating the vice. If men change their attitudes and behavior towards harmful practices, they will encourage other men to change and as a result change will be in the entire community.
- It is good to adapt to situations: HIAS was able to change programming and adapt to addressing challenges posed by the COVID pandemic. strategies were put in place to cushion women that involved financial assistance, support with dignity kits and adopting to virtual sessions of reporting and receiving support with physical engagements were highly discouraged during the period.
- It is important to conduct risk analysis in projects to be able to handle emergencies
- Involve refugees in all steps of the project to enhance ownership by the community and work together towards addressing a common goal.
- Financial support to refugees is important as it reduces their vulnerability – this played a critical role
- Support for GBV survivors by linking them to other reference points, escorting them to these points, paying transport and accompanying them to the service points ensured they received the support needed.
- Evidence for EMAP showed that involvement of the community helped in the continuity of knowledge and values – woman and girls were able to know needed and ways of addressing the same.
- Donor flexibility is crucial to the success of the project: This was clear during COVID 19. In the design of the project, there were no funds set aside to respond to emerging issues, but when COVID emerged the donor was flexible enough to support with funds that enabled HIAS address the current situation that the project beneficiaries were facing. This made the beneficiaries have more trust and focus more during the virtual trainings because their immediate needs had been already addressed.
- Engagement of law enforcement officers including legal and police ensured that the refugees could access some services pro bono and pledged to support them fully. This gave the community members confidence to report cases since they did not have to worry on the financial implications of securing the services.

4. CONCLUSIONS

On the question of relevance, it was observed that the project interventions were relevant to the community needs, since they addressed malignant issues that had bedeviled the refugee populations for a long time. The interventions were welcomed and appreciated by the community members, government and other stakeholders. During the KIIs and FGDs, it was established that the project had a clearly defined goal, and designed interventions that would help ensure its achievement.

Regarding efficiency, the project achieved its targets. This was because all the activities were implemented in a timely manner despite the onset of the COVID 19 Pandemic and adaptive management during the pandemic. The goods and services were of high-quality standards and provided in a timely manner, which was partly attributable to the fact that all purchases went through the organization's tendering process. The organization exhibited a cost saving culture. For purposes of cost planning and sharing, staff planned activities in a manner allowed for carpooling. E.g., supportive monitoring visits were conducted during field activities.

Regarding effectiveness, the project made tremendous progress towards attaining its objectives. By the end of the project duration, the community members (adolescent girls, men and women) were knowledgeable about issues related to GBV and VAW/G. It was particularly noted that there was a change of attitude among men who started involving women in decision making processes at the household level and were willing to be allies in the war against GBV.

In terms of sustainability, the project put into place adequate plans to ensure that the interventions lasted beyond the project duration. This was done through the training and active involvement of local chiefs, police and other members of the criminal justice system at the grassroots level, and community members and local resource persons. Although sustainability was incorporated into the proposal design, and linkages created with other GBV CSOs, and relevant ministries, it is worth noting that no agreements were made with the community and its partners on how the current project interventions would be extended beyond the funding period.

As regards impact, the project created awareness among the refugee populations on GBV and VAW/G. By the end of the project, a great difference was noted between the inception of the project and its finalization. For instance, unlike at the beginning of the project when the girls were not aware of the different violations and where to report them, by the end of the project, they had knowledge about the same.

On coherence, the project played a key role in the reduction of VAW/G in the region by collaborating with and strengthening the capacities of the local leaders & chiefs, the police, CHVs, and GBV trainers on how to handle survivors of GBV and IPV.

In the issue of knowledge generation, the project produced some of the social media content, social media messaging for different audiences, IPV pamphlet, the development of a guide for training GBV prevention facilitators and developed a curriculum for training for the men's groups' sessions.

Lastly, with regard to gender equality and human rights, the project helped change gender relations in the target population in which it was implemented. The staff received a gender orientation where they discussed and identified gender-based cultural norms, including the limited involvement of women in decision making processes in their homes.

6. RECOMMENDATIONS

1. The evaluation observed that refugees-host community relations are an essential aspect of the fight against IPV in the refugee community. This is especially important given that most IPV's happen in the close family set-up and are thus rarely reported. A third eye not involved in the mix may help with reporting. However, the refugee-host community relations are still embedded with suspicion and antagonism.
2. The community outreach sessions should be targeted at the immediate neighbors of refugees instead of the whole community. It is cheaper to make repeat visits thus increasing possibilities of behavior change as opposed to mass sensitization.
3. More work is needed on economic empowerment of women. The KII transcripts indicated that most women fear reporting IPV's in fear that if the perpetrator is imprisoned then they may lose a breadwinner. These services may be extended to men who tend to be more irritable and violent.
4. Future implementation should include more creative ways of doing training. Some of the participants questioned why they get called so many times. Trainings should thus be embedded in other activities and if possible, participants ongoing activities.
5. Increased engagement of community resource persons /institutions such as SUPKEM and women prayer meetings. The evaluation observed that religious leaders are highly respect among the refugee communities especial those of Islam faith. If these leaders get to talk more about IPV then it is highly likely that their followers will change their ways.
6. The project formed strong partnership linages with other like-minded CSOs during the implementation process. The evaluation recommends use of the same method in future project. This aspect of programming can be enhanced through forming stronger alliances to avoid duplication of duties and encourage maximum resource utilization.

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7. To ensure sustainability the project should start income generating activities both for itself and beneficiaries. For instance, they can engage in relevant consultancy assignment to boost its income. IGAs are expected to help beneficiaries to establish alternative sources of livelihood but also keep busy and thus avoid negative thought that may lead to GBV.
8. The project needs to strengthen the capacity of community child protection volunteers and community health workers to help with sensitization and business continuity after the project period. The evaluation observed these two groups have extensive networks in the target population.
9. Knowledge management efforts should improve. The project produced several knowledge products during the implementation process including business continuity during COVID19 epidemic. However, there no systematic way of preserving this knowledge for future use.
10. The study participants recommended use of social media to pass GBV messages. The majority of targeted individuals in Eastleigh area are Muslims and as per the Muslim culture, women rarely get to engage in community level activities. As such, use of this social was found to be useful, particularly among individuals staying in the Eastleigh area .
11. Contextualize training materials: The development of the different training materials for the different groups, i.e. young men, older men and women enabled the project to address the challenges each category faced separately and adequately rather than involving both men, women and girls in the same sessions.

7. APPENDICES

Annex 1: Total Beneficiaries Reached by the Project

Annex 2: Data Collection Tools

Annex 3: Evaluation Matrix

Annex 4: Populated Results Framework

Annex 5: Evaluation Terms of Reference

Annex 6: Stakeholders consulted.

TOTAL BENEFICIARIES REACHED BY THE PROJECT	
Type of Primary Beneficiary	Total number
Female refugees/ internally displaced asylum seekers	513
Women/ girls survivors of violence	39
Women and girls in general	368
TOTAL PRIMARY BENEFICIARIES REACHED	920
Type of Secondary Beneficiary	Total number
Members of Community Based Organizations	13
Journalists / Media	5
Men and/ or boys	85
Uniformed personnel (i.e. Police, military, peace keeping)	35
Other (Refugee Leaders)	35
Other (HIAS staff)	62
TOTAL SECONDARY BENEFICIARIES	235
Indirect beneficiaries reached	Total numbers
Other (Other primary beneficiaries include general refugee community ,women and girls whose intimate partners have changed their attitudes and behavior based on the social media campaigns.)	15,257,433
GRAND TOTAL	15,258,588

ANNEX 1: DATA COLLECTION TOOLS

Evaluation Survey Questionnaire- Women and Girls

SECTIONS

- i. Section A: Introduction
- ii. Section B: Respondent's details
- iii. Section C: Main questions

SECTION A: INTRODUCTION

Annex I : Survey Questionnaire

Hello. My name is....., and I am working on behalf of HIAS. HIAS is conducting an endline evaluation of the project entitled “Community-Based Prevention of Violence Against Refugee Women and Girls in Nairobi”. If you choose to participate in this study, HIAS will use the information that you provide to understand how and to what extent project activities contributed towards Prevention of Violence Against Refugee Women and Girls for the target population, was implemented, in order to better design and implement future projects

Before we start, I want to let you know that you do not have to answer any questions that you do not feel comfortable answering, and you can decide to stop at any time. Any of the answers that you share will be anonymous and confidential. There are no consequences of any kind if you decide at any point that you do not want to participate. The answers you share will not affect your access to HIAS services or your relationship with HIAS.

If you would like to speak to another HIAS staff member about any of these questions, if you would like to share something that you are not comfortable sharing in the interview. This information will not be included in the interview summary. If you participate in this study, you will participate in an interview with a HIAS interviewer. The interview may also include a translator [if applicable] and note taker to write down the ideas expressed during the interview.

All information that you share with us will be kept in our electronic records for the duration of the project, plus an additional three (3) years. The information will be de-identified, which means that your personal details will not be attached to any information you share. No individual participant will be identified or linked to the results. All information obtained in this study will be kept strictly confidential.

While we are not collecting any personal details as part of this focus group discussion, you may contact us at any time if you would like us to delete your name and contact details from the list of participating individuals. You can make this request by sending us an email at henry.nyanaro@hias.org

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This interview will take about 20 minutes.

Do you give your consent to proceed with this interview?

I agree I do not agree

Respondent's name: _____

Date: _____

a. Do you have any questions? YES NO

b. Can we proceed with the survey? Yes/ No (If no, thank the respondent and proceed to identify another suitable respondent.

. MODULE 1: Sociodemographic Info

First, I want to ask you some questions about your background. You may find some of my questions personal or sensitive, so please remember you do not have to give answers if you are not comfortable.

#	QUESTION	CODING CATEGORIES	SKIP
1.	How old are you?	<input type="text"/> <input type="text"/> years	
2.	Before you moved here, in which country did you live in?	<input type="checkbox"/> COUNTRY 1 01 <input type="checkbox"/> COUNTRY 2 02 <input type="checkbox"/> COUNTRY 3 03 <input type="checkbox"/> COUNTRY 4 04 <input type="checkbox"/> COUNTRY 5 05 <input type="checkbox"/> Other _____	
3.	What is the highest level of education you have attained?	<input type="checkbox"/> No Formal Education <input type="checkbox"/> Some Primary Education <input type="checkbox"/> Completed Primary Education <input type="checkbox"/> Some Secondary Education <input type="checkbox"/> Completed Secondary Education <input type="checkbox"/> Technical Course <input type="checkbox"/> University Degree <input type="checkbox"/> Other (Specify:) <input type="checkbox"/> (Don't know)	

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		<input type="checkbox"/> (No answer)	
4.	Do you have children?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> (No answer)	
5.	What is your religion?	<input type="checkbox"/> Christian <input type="checkbox"/> Muslim <input type="checkbox"/> Traditional <input type="checkbox"/> No religion (Atheist/Agnostic) <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Don't know <input type="checkbox"/> No answer	
6.	What do you do for a living?	<input type="checkbox"/> Student <input type="checkbox"/> Unemployed <input type="checkbox"/> Paid employee <input type="checkbox"/> Self-employed <input type="checkbox"/> Others(specify) _____	
7.	Have you been involved in any income-generating activities in the last 3 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> No answer	
I am now going to ask you some questions about your relationships. Please fill free to answer or skip any question you might be uncomfortable with			
8.	What is your marital status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Co-habiting <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Refused to answer <input type="checkbox"/> Other _____	
9.	Are you currently in an intimate partner relationship?	<input type="checkbox"/> Yes <input type="checkbox"/> No Skip to 24	
10.	How long have you been in this relationship?	<input type="checkbox"/> less than 1 year <input type="checkbox"/> 1-2 years <input type="checkbox"/> 3-5 years <input type="checkbox"/> More than 5 years	
11.	How old is your partner?	<input type="checkbox"/> _____	
12.	What is the gender of your partner?	<input type="checkbox"/> Male <input type="checkbox"/> Female	
13.	What is the highest level of education your partner has attained?	<input type="checkbox"/> None <input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Post-secondary	

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		<input type="checkbox"/> Others: Specify _____	
14.	What does your partner do for a living?	<input type="checkbox"/> Student <input type="checkbox"/> Unemployed <input type="checkbox"/> Paid employee <input type="checkbox"/> Self-employed <input type="checkbox"/> Others(specify) _____	

2. Knowledge

MODULE 2: Knowledge – Intimate Partner Violence

INTERVIEWER NOTE: Do not ask unless completely private.

I'd like to talk to you about relationships between women and men, and some of the problems they face. You may find some of my questions personal or sensitive, so please remember you do not have to give answers if you are not comfortable.

I am now going to read you a series of statements. For each, I would like to tell me whether or not you regard the following sorts of behaviour as intimate partner violence and how serious you think they are.

#	QUESTION	CODING CATEGORIES	SKIP
15a.	If a man in an intimate relationship slap or pushes his wife/partner to cause harm or fear, is this a form of intimate partner violence? <i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i>	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	Go to 16a Go to 16a Go to 16a
15b.	And how serious is this, would you say very, a bit, not that serious or not at all? <i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship slapping or pushing his wife/partner to cause harm or fear to be (READ OUT)</i>	<input type="checkbox"/> Very serious <input type="checkbox"/> A bit serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

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16a	<p>If a man in an intimate relationship forces his wife/partner to have sex, is this a form of intimate partner violence?</p> <p><i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i></p>	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know) <input type="checkbox"/> No answer	<p>Go to 17a Go to 17a Go to 17a</p>
16b	<p>And how serious is this, would you say very, quiet, not that serious or not at all?</p> <p><i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship forcing his wife/partner to have sex to be (READ OUT)</i></p>	<input type="checkbox"/> Very serious <input type="checkbox"/> Quite serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
17a	<p>If a man in an intimate relationship repeatedly criticizes his wife/partner to make her feel bad or useless, is this a form of intimate partner violence?</p> <p><i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i></p>	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know) <input type="checkbox"/> No answer	<p>Go to 18a Go to 18a Go to 18a</p>
17b	<p>And how serious is this, would you say very, quiet, not that serious or not at all?</p> <p><i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship repeatedly criticizing his wife/partner to make her feel bad or useless to be (READ OUT)</i></p>	<input type="checkbox"/> Very serious <input type="checkbox"/> Quite serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
18a	<p>If a man in an intimate relationship throws or smashes objects near his wife/partner to frighten or threaten her, is this a form of intimate partner violence?</p> <p><i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i></p>	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know) <input type="checkbox"/> No answer	<p>Go to 19a Go to 19a Go to 19a</p>

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18b	<p>And how serious is this, would you say very, quiet, not that serious or not at all?</p> <p><i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship throwing or smashing objects near his wife/partner to frighten or threaten her to be (READ OUT)</i></p>	<input type="checkbox"/> Very serious <input type="checkbox"/> Quite serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
19a	<p>If a man in an intimate relationship controls the social life of his wife/partner by preventing them from seeing family and friends, is this a form of intimate partner violence?</p> <p><i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i></p>	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know) <input type="checkbox"/> No answer	<p>Go to 20a Go to 20a Go to 20a</p>
19b	<p>And how serious is this, would you say very, quiet, not that serious or not at all?</p> <p><i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship controlling the social life of his wife/partner by preventing them from seeing family and friends to be (READ OUT)</i></p>	<input type="checkbox"/> Very serious <input type="checkbox"/> Quite serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
20a	<p>If a man in an intimate relationship controls the social life of his wife/partner by denying them money, is this a form of intimate partner violence?</p> <p><i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i></p>	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know) <input type="checkbox"/> No answer	<p>Go to 21 Go to 21 Go to 21</p>
20b	<p>And how serious is this, would you say very, quiet, not that serious or not at all?</p> <p><i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship controlling the social</i></p>	<input type="checkbox"/> Very serious <input type="checkbox"/> Quite serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

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	<i>life of his wife/partner by denying them money to be (READ OUT)</i>		
21	<p>Do you think that it is mainly men, mainly women or both men and women that COMMIT ACTS of violence against an intimate partner?</p> <p><i>(IF BOTH PROBE TO CLARIFY: Both but men more often, both but women more often, or both equally?).</i></p>	<input type="checkbox"/> Mainly men <input type="checkbox"/> Both – but men more often <input type="checkbox"/> Both – equally <input type="checkbox"/> Both – but women more often <input type="checkbox"/> Mainly women <input type="checkbox"/> (Don't Know / Can't Say) <input type="checkbox"/> (No answer)	
22	<p>There are many reasons why some men are violent towards their female partners, I'm now going to read out four statements, and I'd like you to tell me which ONE of these you think is the MAIN reason why some men are violent towards women.</p> <p><i>(INTERVIEWER NOTE: Prompt for one thing they consider to be the main cause of violence against women. Re-read statements as necessary.)</i></p>	<p>Men not being able to manage their anger</p> <p>Men being under financial stress</p> <p>Men taking alcohol</p> <p>The belief that men should be in charge of relationships</p> <p>Other (Specify: )</p> <p>(Don't Know / Can't Say)</p> <p>(No answer)</p>	

3. Attitude

MODULE 3.1: Normative Expectations - Gender Roles & Intimate Partner Violence

INTERVIEWER NOTE: Do not ask unless completely private.

In this community and elsewhere, people have different ideas about families and what is acceptable behavior for men and women in the home. In these questions, we'd like to learn from you what you believe people in your community think. I am now going to read you a series of statements. For each, I would like to tell me whether you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree. There are no correct or incorrect answers.

#	QUESTION	CODING CATEGORIES	SKIP
23	Most people in your community expect men to have the final word about decisions in the home. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
24	Most people in your community think it is shameful if a man does caregiving or domestic work. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
25	Community members believe that a woman does not have the right to challenge her man's opinions and decisions even if she disagrees with him. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
26	Most people in your community think a man needs more than one sexual partner	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree	

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	<p>even if they already have a partner.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
27	<p>Most people in your community disapprove of men who don't beat their wives when they deserve it.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
28	<p>Most people in your community think women should tolerate violence to keep their families together.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
29	<p>Most people in your community think that violence between husbands and wives is a private matter and others should not interfere.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
30	<p>Most people in your community would disapprove of adolescent girls having sex before marriage.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

MODULE 3.2: Domestic Violence Laws

INTERVIEWER NOTE: Do not ask unless completely private.

I am now going to ask you about laws on domestic violence in Kenya.

#	QUESTION	CODING CATEGORIES	SKIP
31	Are there any laws in Kenya about intimate partner violence or domestic violence?	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	<input type="checkbox"/> Go to 29 <input type="checkbox"/> Go to 29 <input type="checkbox"/> Go to 29
What do you think about domestic violence laws? Please tell me if strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with each one. Please answer honestly. There are no right or wrong answers here.			
32	Domestic violence laws are too harsh. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
33	Domestic violence laws are not harsh enough. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
34	The laws contribute to conflict in the family. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
35	Women are using the laws to dominate men. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree	

	<i>disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
--	--	---	--

MODULE 3.3. Rape Myths

INTERVIEWER NOTE: Do not ask unless completely private.

Now I want to ask you some questions about things that might happen to women. Now, please feel free to answer in a way that reflects what you believe people in your community think. There are no right or wrong answers. For the following statements, please state whether you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with each one.

#	QUESTION	CODING CATEGORIES	SKIP
36	Most people in your community think that when a woman is raped, she is usually to blame for putting herself in that situation. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
37	Most of your community think that if a woman doesn't physically fight back, it's not rape.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

MODULE 3.4. Attitudes - Gender Roles & Intimate Partner Violence

INTERVIEWER NOTE: Do not ask unless completely private.

Now I want to ask you some questions about things that might happen to women. Now, please feel free to answer in a way that reflects what you believe. For the following statements, please state whether you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with each one. There are no right or wrong answers. Please remember you do not have to give answers if you are not comfortable

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#	QUESTION	CODING CATEGORIES	SKIP
38	<p>I think that a man should have the final word about decisions in the home.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
39	<p>I believe a woman's most important role is to take care of her home, cook for her family and look after the children.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
40	<p>I think that a woman does not have the right to challenge her man's opinions and decisions, even if she disagrees with him</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
41	<p>I think a man needs more than one sexual partner even if they already have a partner.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
42	<p>I think there are times when a woman deserves to be beaten.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

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43	<p>I believe that a woman should tolerate violence to keep her family together.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<p><input type="checkbox"/> Strongly agree</p> <p><input type="checkbox"/> Agree</p> <p><input type="checkbox"/> Neither agree nor disagree</p> <p><input type="checkbox"/> Disagree</p> <p><input type="checkbox"/> Strongly disagree</p> <p><input type="checkbox"/> (Don't Know)</p> <p><input type="checkbox"/> (No answer)</p>	
44	<p>I think violence between a husband and a wife is a private matter and others should not interfere.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<p><input type="checkbox"/> Strongly agree</p> <p><input type="checkbox"/> Agree</p> <p><input type="checkbox"/> Neither agree nor disagree</p> <p><input type="checkbox"/> Disagree</p> <p><input type="checkbox"/> Strongly disagree</p> <p><input type="checkbox"/> (Don't Know)</p> <p><input type="checkbox"/> (No answer)</p>	
45	<p>I think adolescent girls should not have sex before marriage.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<p><input type="checkbox"/> Strongly agree</p> <p><input type="checkbox"/> Agree</p> <p><input type="checkbox"/> Neither agree nor disagree</p> <p><input type="checkbox"/> Disagree</p> <p><input type="checkbox"/> Strongly disagree</p> <p><input type="checkbox"/> (Don't Know)</p> <p><input type="checkbox"/> (No answer)</p>	
46	<p>I think that a girl who gets pregnant before marriage deserves to be shunned, sent away, beaten, or otherwise punished.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<p><input type="checkbox"/> Strongly agree</p> <p><input type="checkbox"/> Agree</p> <p><input type="checkbox"/> Neither agree nor disagree</p> <p><input type="checkbox"/> Disagree</p> <p><input type="checkbox"/> Strongly disagree</p> <p><input type="checkbox"/> (Don't Know)</p> <p><input type="checkbox"/> (No answer)</p>	
47	<p>It is a woman's, not a man's, responsibility to avoid getting pregnant.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<p><input type="checkbox"/> Strongly agree</p> <p><input type="checkbox"/> Agree</p> <p><input type="checkbox"/> Neither agree nor disagree</p> <p><input type="checkbox"/> Disagree</p> <p><input type="checkbox"/> Strongly disagree</p> <p><input type="checkbox"/> (Don't Know)</p> <p><input type="checkbox"/> (No answer)</p>	

4. Practice

MODULE 4.1. Empirical Expectations – Intimate Partner Violence

INTERVIEWER NOTE: Do not ask unless completely private.

Now I will read some statements about relations between men and women. Please tell me what you think other people in your community actually do. For the following statements, please state whether you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with each one. Please remember you do not have to give answers if you are not comfortable

#	QUESTION	CODING CATEGORIES	SKIP
48	Most men in your community beat their wives/partners. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
49	Women in your community tolerate violence to keep their family together. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
50	People in your community do not interfere in arguments between wife and husband even if they know violence is happening. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
51	Most girls in your community that have a man who is providing for them do not let him go, even if he hits them sometimes. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

	<i>disagree, disagree or strongly disagree).</i>		
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MODULE 4.2. IPV Services

INTERVIEWER NOTE: Do not ask unless completely private.

Now I will ask you about intimate partner violence services. There are no right or wrong answers. Please remember you do not have to give answers if you are not comfortable.

N	QUESTION	CODING CATEGORIES	SKIP
45	<p>If a woman in your community needed to get outside advice or support for someone about a violence issue, she would know where to go.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
46	<p>If a woman in your community experiences violence of any kind, who would she turn to for support outside of her own household?</p> <p><i>INTERVIEWER NOTE: Do not read out options; multiple answers are possible.</i></p>	<input type="checkbox"/> Other family members <input type="checkbox"/> Friends or neighbors <input type="checkbox"/> Religious leaders <input type="checkbox"/> Health facility or community health worker <input type="checkbox"/> Village elder or Chief <input type="checkbox"/> Police <input type="checkbox"/> NGOs <input type="checkbox"/> Other (specify:.....) <input type="checkbox"/> Nobody <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
47	<p>Do you know of any services in this community that provide help for women who have experienced violence?</p> <p><i>INTERVIEWER NOTE: Do not read out options; multiple answers are possible.</i></p>	<input type="checkbox"/> Health services <input type="checkbox"/> Psychosocial support / Counselling <input type="checkbox"/> Legal assistance/ advice <input type="checkbox"/> Cash assistance / Food <input type="checkbox"/> Shelter <input type="checkbox"/> Other (specify:)	

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		<input type="checkbox"/> None <input type="checkbox"/> (Don't know) <input type="checkbox"/> (No answer)	
48	<p>Now I'd like you to name all the groups you can think of who provide services to women and girls in this community.</p> <p><i>INTERVIEWER NOTE: Do not read out options; multiple answers are possible.</i></p>	<input type="checkbox"/> Government <input type="checkbox"/> UNHCR <input type="checkbox"/> HIAS <input type="checkbox"/> Other (specify:) <input type="checkbox"/> None <input type="checkbox"/> (Don't know) <input type="checkbox"/> (No answer)	
<p>Now I am going to read you a list of services for women who experienced violence. For each, I would like you to tell me if it is easy or difficult for women and girls in your community to access them.</p>			
49a	Health services	Easy Difficult (Don't know) (No answer)	Go to 50a Go to 50a Go to 50a
49b	If difficult, why?	Mixing of men and women at the facilities Lack of female service providers Not permitted by family members Services too far away Service providers behave badly Services are inadequate or don't exist Services are too expensive Services have long waited times Services opening hours too short Language barriers with service provider Other (Specify:) (Don't know) (No answer)	
50a	Cash / Food assistance	Easy Difficult (Don't know) (No answer)	Go to 51a Go to 51a Go to 51a
50b	If difficult, why?	Mixing of men and women at the facilities Lack of female service providers Not permitted by family members Services too far away Service providers behave badly Services are inadequate or don't exist Services are too expensive Services have long waited times	

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		Services opening hours too short Language barriers with service provider Other (Specify:) (Don't know) (No answer)	
51a	Shelter	Easy Difficult (Don't know) (No answer)	Go to 52a Go to 52a Go to 52a
51b	If difficult, why?	Mixing of men and women at the facilities Lack of female service providers Not permitted by family members Services too far away Service providers behave badly Services are inadequate or don't exist Services are too expensive Services have long waited times Services opening hours too short Language barriers with service provider Other (Specify:) (Don't know) (No answer)	
52a	Psychosocial support / Counselling	Easy Difficult (Don't know) (No answer)	Go to 53a Go to 53a Go to 53a
52b	If difficult, why?	Mixing of men and women at the facilities Lack of female service providers Not permitted by family members Services too far away Service providers behave badly Services are inadequate or don't exist Services are too expensive Services have long waiting times Services opening hours too short Language barriers with service provider Other (Specify:) (Don't know) (No answer)	
53a	Legal assistance/ advice	Easy Difficult (Don't know) (No answer)	Go to 54 Go to 54 Go to 54

53 b	If difficult, why?	Mixing of men and women at the facilities Lack of female service providers Not permitted by family members Services too far away Service providers behave badly Services are inadequate or don't exist Services are too expensive Services have long waiting times Services opening hours too short Language barriers with service provider Other (Specify:) (Don't know) (No answer)	
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5. Satisfaction

MODULE 5.1: Survey Satisfaction.

We have now come to the end of the survey. I have just a few final questions related to how you experienced this interview.

#	QUESTION	CODING CATEGORIES	SKIP
54	I have asked you some easy and some difficult questions. How has talking about these things made you feel?	Good Bad Neither good nor bad (Don't know) (No answer)	
55	Are there any comments you'd like to share with the interviewer and research team? <i>INTERVIEWER NOTE: Write comments verbatim.</i>	<i>Respondent comments:</i>	

1. Do you feel you have the power within you to help bring positive change to your community in EVAWG?

RESPONSE	CODE
Yes	1
No	2
Do not know	3

2. Would you say that in general, women and men feel safe to talk about cases of violence against women and girls in this community?

RESPONSE	CODE
Yes	1
No	2
Do not know	3

3. Would you say that in general, women feel safe to report their cases of violence in this community?

RESPONSE	CODE
Yes	1
No	2
Do not know	3

4. In the last 3 years, do you feel that relationships between women and men have generally become less violent in your community?

RESPONSE	CODE
Yes	1
No	2
Do not know	3

5. In the last one year, what is your assessment of the level of effort by the following actors in the table below regarding ending VAWG in your community? Please answer whether it is very high, high, average, rare, very rare; there are no wrong answers, so please be honest.”

VARIABLE	Very high	High	Average	Rare	Very rare
Police	1	2	3	4	5
Local administration i.e., chiefs	1	2	3	4	5
Community Refugee leaders	1	2	3	4	5
HIAS Community Outreach Workers.	1	2	3	4	5
CSOs/partner agencies	1	2	3	4	5

C) SKILLS AND BEHAVIORS RELATED TO VAWG

“In the next few questions, I am going to ask you about some common situations that happen in your community. We would like to know what you think about them. Please answer yes or no or do not know; there are no wrong answers, so please be honest.”

Questions		Yes	No	Do not know
6.	In the last 12 months, have you had discussions with anyone about the benefits of changing the way women and men use their power in this community?	1	2	3
7.	In the last 12 months, have you made any important decisions together with your partner? <i>*Please select DOESN'T APPLY for unpartnered participants</i>	1	2	3
8.	In the last 12 months, have you usually felt respected by your partner?	1	2	3
9.	In the last 12 months, have you offered support to a woman who you knew was experiencing violence from her husband or boyfriend?	1	2	3
10.	In the last 12 months, have you taken any action to prevent violence against women in your community? <i>If yes, answer Q32</i>	1	2	3

11. What action did you take to prevent violence against women and girls in your community?

STEP(S) TAKEN	CODE
Raise awareness on the dangers of harmful traditions	1
Help girls to travel safely to schools and other places	2
Tackle violence against girls in schools	3
Speak out about violence in homes	4
Connect affected women and girls to the specialists for assistance	5
Engage community leaders in the fight against violence	6
Mobilize the youths to fight harmful practices like child marriages	7
Engage young men and boys as agents for change	8

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Empower women and girls to speak out	9
Reach out to marginalized and rural women/girls	10
Take a stand against retrogressive forces	11
Funding women’s organizations	12
Other (specify)	

E) PROJECT INVOLVEMENT AND SUSTAINABILITY

“Thank you so much; we are almost finished. These last questions are about what you see in your community about violence prevention. Please answer yes or no.”

		Yes	No
12.	In the last 3 years, have you seen people in your community doing something to prevent violence against women and girls?		
13.	In the last six months, have you participated in activities on preventing VAWG such as a community dialogue sessions or social media engagement?		
14.	Do you feel like the above activities are helping make your community safer for women and girls?		
15.	Apart from HIAS activities, have you participated in any other activities to prevent violence against women in your community?		

We have come to the end of the survey. We appreciate the time you have spent answering these questions. Your response and those of approximately 200 other men and wome will give us an understanding of women in EVAWG roles in society today.

“Would you like a list of organizations or people who you could talk confidentially with about any of these issues?” [If yes, give referral list. If no, thank again and remind them of the name of your organization in case they are interested in follow-up.]

THANK RESPONDENT & CLOSE INTERVIEW

Evaluation Survey Questionnaire- Men

SECTIONS

- iv. Section A: Introduction
- v. Section B: Respondent's details
- vi. Section C: Main questions

SECTION B: INTRODUCTION

Annex I: Survey Questionnaire

Hello. My name is....., and I am working on behalf of HIAS. HIAS is conducting an end-line evaluation of the project entitled “Community-Based Prevention of Violence Against Refugee Women and Girls in Nairobi”. If you choose to participate in this study, HIAS will use the information that you provide to understand how and to what extent project activities contributed towards the Prevention of Violence Against Refugee Women and Girls for the target population, was implemented, in order to better design and implement future projects

Before we start, I want to let you know that you do not have to answer any questions that you do not feel comfortable answering, and you can decide to stop at any time. Any of the answers that you share will be anonymous and confidential. There are no consequences of any kind if you decide at any point that you do not want to participate. The answers you share will not affect your access to HIAS services or your relationship with HIAS.

If you would like to speak to another HIAS staff member about any of these questions if you would like to share something that you are not comfortable sharing in the interview. This information will not be included in the interview summary. If you participate in this study, you will participate in an interview with a HIAS interviewer. The interview may also include a translator [if applicable] and note taker to write down the ideas expressed during the interview.

All information that you share with us will be kept in our electronic records for the duration of the project, plus an additional three (3) years. The information will be de-identified, which means that your personal details will not be attached to any information you share. No individual participant will be identified or linked to the results. All information obtained in this study will be kept strictly confidential.

While we are not collecting any personal details as part of this focus group discussion, you may contact us at any time if you would like us to delete your name and contact details from the list of participating individuals. You can make this request by sending us an email at henry.nyanaro@hias.org

This interview will take about 20 minutes.

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Do you give your consent to proceed with this interview?

I agree *I do not agree*

Respondent's name: _____

Date: _____

a. Do you have any questions? YES NO

b. Can we proceed with the survey? Yes/ No (If no, thank the respondent and proceed to identify another suitable respondent.

1. Demographics

MODULE 1: Sociodemographic Info

First, I want to ask you some questions about your background. You may find some of my questions personal or sensitive, so please remember you do not have to give answers if you are not comfortable.

#	QUESTION	CODING CATEGORIES	SKIP
1	How old are you?	years	
2	Before you moved here, in which country did you live in?	<input type="checkbox"/> COUNTRY 101 <input type="checkbox"/> COUNTRY 202 <input type="checkbox"/> COUNTRY 303 <input type="checkbox"/> COUNTRY 404 <input type="checkbox"/> COUNTRY 505 <input type="checkbox"/> Other _____	
3	What is the highest level of education you have attained?	<input type="checkbox"/> No Formal Education <input type="checkbox"/> Some Primary Education <input type="checkbox"/> Completed Primary Education <input type="checkbox"/> Some Secondary Education <input type="checkbox"/> Completed Secondary Education <input type="checkbox"/> Technical Course <input type="checkbox"/> University Degree <input type="checkbox"/> Other (Specify:) <input type="checkbox"/> (Don't know)	

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		<input type="checkbox"/> (No answer)	
4	Do you have children?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> (No answer)	
5	What is your religion?	<input type="checkbox"/> Christian <input type="checkbox"/> Muslim <input type="checkbox"/> Traditional <input type="checkbox"/> No religion (Atheist/Agnostic) <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Don't know <input type="checkbox"/> No answer	
6	What do you do for a living?	<input type="checkbox"/> Student <input type="checkbox"/> Unemployed <input type="checkbox"/> Paid employee <input type="checkbox"/> Self-employed <input type="checkbox"/> Others(specify) _____---_____	
7	Have you been involved in any income generating activities in the last 3 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> No answer	
I am now going to ask you some questions about your relationships. Please fill free to answer or skip any question you might be uncomfortable with			
8	What is your marital status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Co-habiting <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Refused to answer <input type="checkbox"/> Other_____	
9	Are you currently in an intimate partner relationship?	<input type="checkbox"/> Yes <input type="checkbox"/> No (Skip to 24)	

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10	How long have you been in this relationship?	<input type="checkbox"/> less than 1 year <input type="checkbox"/> 1-2 years <input type="checkbox"/> 3-5 years <input type="checkbox"/> More than 5 years	
11	How old is your partner?	<input type="checkbox"/> _____	
12	What is the gender of your partner?	<input type="checkbox"/> Male <input type="checkbox"/> Female	
13	What is the highest level of education your partner has attained?	<input type="checkbox"/> None <input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Post-secondary <input type="checkbox"/> Others: Specify _____	
14	What does your partner do for a living?	<input type="checkbox"/> Student <input type="checkbox"/> Unemployed <input type="checkbox"/> Paid employee <input type="checkbox"/> Self-employed <input type="checkbox"/> Others(specify) _____	

2. Knowledge

MODULE 2: Knowledge – Intimate Partner Violence

INTERVIEWER NOTE: Do not ask unless completely private.

I'd like to talk to you about relationships between women and men, and some of the problems they face. You may find some of my questions personal or sensitive, so please remember you do not have to give answers if you are not comfortable.

I am now going to read you a series of statements. For each, I would like to tell me whether or not you regard the following sorts of behaviour as intimate partner violence and how serious you think they are?

#	QUESTION	CODING CATEGORIES	SKIP
15a.	If a man in an intimate relationship slap or pushes his wife/partner to discipline her for bad behaviour or teach her how to be a good wife, is	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know)	Go to 16a Go to 16a Go to 16a

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	<p>this a form of intimate partner violence?</p> <p><i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i></p>	<input type="checkbox"/> (No answer)	
15b	<p>And how serious is this, would you say very, a bit, not that serious or not at all?</p> <p><i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship slapping or pushing his wife/partner to cause harm or fear to be (READ OUT)</i></p>	<input type="checkbox"/> Very serious <input type="checkbox"/> A bit serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
16a	<p>A woman has the right to say no to sex, even if it is with her husband/partner.</p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
16b	<p>If a man in an intimate relationship forces his wife/partner to have sex, is this a form of intimate partner violence?</p> <p><i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i></p>	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know) <input type="checkbox"/> No answer	<p>Go to 17a</p> <p>Go to 17a</p> <p>Go to 17a</p>
16c	<p>And how serious is this, would you say very, quiet, not that serious or not at all?</p> <p><i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship forcing his</i></p>	<input type="checkbox"/> Very serious <input type="checkbox"/> Quite serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

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	<i>wife/partner to have sex to be (READ OUT)</i>		
17a	<p>If a man in an intimate relationship shout at his wife/partner or says insulting things to her, is this a form of intimate partner violence?</p> <p><i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i></p>	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know) <input type="checkbox"/> No answer	<p>Go to 18a</p> <p>Go to 18a</p> <p>Go to 18a</p>
17b	<p>And how serious is this, would you say very, quite, not that serious or not at all?</p> <p><i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship repeatedly criticising his wife/partner to make her feel bad or useless to be (READ OUT)</i></p>	<input type="checkbox"/> Very serious <input type="checkbox"/> Quite serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
18a	<p>If a man in an intimate relationship throws or smashes objects near his wife/partner to frighten or threaten her, is this a form of intimate partner violence?</p> <p><i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i></p>	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know) <input type="checkbox"/> No answer	<p>Go to 19a</p> <p>Go to 19a</p> <p>Go to 19a</p>
18b	<p>And how serious is this, would you say very, quite, not that serious or not at all?</p> <p><i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship throwing or smashing objects near his wife/partner to</i></p>	<input type="checkbox"/> Very serious <input type="checkbox"/> Quite serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

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	<i>frighten or threaten her to be (READ OUT)</i>		
19a	<p>If a man in an intimate relationship controls the social life of his wife/partner by preventing them from seeing family and friends, is this a form of intimate partner violence?</p> <p><i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i></p>	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know) <input type="checkbox"/> No answer	<p>Go to 20a</p> <p>Go to 20a</p> <p>Go to 20a</p>
19b	<p>And how serious is this, would you say very, quite, not that serious or not at all?</p> <p><i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship controlling the social life of his wife/partner by preventing them from seeing family and friends to be (READ OUT)</i></p>	<input type="checkbox"/> Very serious <input type="checkbox"/> Quite serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
20a	<p>If a man in an intimate relationship controls the social life of his wife/partner by denying them money, is this a form of intimate partner violence?</p> <p><i>(IF YES, PROBE: Would you say that is always the case, usually the case, or just sometimes).</i></p>	<input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> (Don't Know) <input type="checkbox"/> No answer	<p>Go to 21</p> <p>Go to 21</p> <p>Go to 21</p>
20b	<p>And how serious is this, would you say very, quite, not that serious or not at all?</p> <p><i>(PROMPT IF REQUIRED: Do you regard a man in an intimate relationship controlling the social</i></p>	<input type="checkbox"/> Very serious <input type="checkbox"/> Quite serious <input type="checkbox"/> Not that serious, or <input type="checkbox"/> Not at all serious <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

	<i>life of his wife/partner by denying them money to be (READ OUT)</i>		
21	<p>Do you think that it is mainly men, mainly women or both men and women that COMMIT ACTS of violence against an intimate partner?</p> <p><i>(IF BOTH PROBE TO CLARIFY: Both but men more often, both but women more often, or both equally?).</i></p>	<input type="checkbox"/> Mainly men <input type="checkbox"/> Both – but men more often <input type="checkbox"/> Both – equally <input type="checkbox"/> Both – but women more often <input type="checkbox"/> Mainly women <input type="checkbox"/> (Don't Know / Can't Say) <input type="checkbox"/> (No answer)	
22	<p>There are many reasons why some men are violent towards their female partners, I'm now going to read out four statements and I'd like you to tell me which ONE of these you think is the MAIN reason why some men are violent towards women.</p> <p><i>(INTERVIEWER NOTE: Prompt for one thing they consider to be the main cause of violence against women. Re-read statements as necessary.)</i></p>	<input type="checkbox"/> Men not being able to manage their anger <input type="checkbox"/> Men being under financial stress <input type="checkbox"/> Men taking alcohol <input type="checkbox"/> The belief that men should be in-charge of relationships <input type="checkbox"/> Other (Specify:) <input type="checkbox"/> (Don't Know / Can't Say) <input type="checkbox"/> (No answer)	

3. Attitude

MODULE 3.1: Normative Expectations - Gender Roles & Intimate Partner Violence

INTERVIEWER NOTE: Do not ask unless completely private.

In this community and elsewhere, people have different ideas about families and what is acceptable behaviour for men and women in the home. In these questions, we'd like to learn from you what you believe people in your community think. I am now going to read you a series of statements.

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For each, I would like to tell me whether you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree. There are no correct or incorrect answers.

#	QUESTION	CODING CATEGORIES	SKIP
23	<p>Most people in your community expect men to have the final word about decisions in the home.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
24	<p>Most people in your community think it is shameful if a man does caregiving or domestic work.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
25	<p>Community members believe that a woman does not have the right to challenge her man's opinions and decisions even if she disagrees with him.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
26	<p>Most people in your community think a man needs more than one sexual partner even if they already have a partner.</p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know)	

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	<i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> (No answer)	
27	Most people in your community think that when a woman is raped, she should keep it a secret. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
28	Most people in your community think women should tolerate violence to keep their families together. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
29	Most people in your community think that violence between husbands and wives is a private matter and others should not interfere. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
30	Most people in your community would disapprove of adolescent girls having sex before marriage. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

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	<i>disagree, disagree or strongly disagree).</i>		
31	<p>Most people in your community think that a couple can still have a good relationship even if the husband sometimes hits his wife.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
32	<p>Most people in your community think that a woman could be a good leader or boss.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
33	<p>Most people in your community think that if men and women have the same rights, men will lose their authority.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

MODULE 3.2: Domestic Violence Laws

INTERVIEWER NOTE: Do not ask unless completely private.

I am now going to ask you about laws on domestic violence in Kenya.

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#	QUESTION	CODING CATEGORIES	SKIP
34	Are there any laws in Kenya about intimate partner violence or domestic violence?	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	<input type="checkbox"/> Go to 39 <input type="checkbox"/> Go to 39 <input type="checkbox"/> Go to 39
<p>What do you think about domestic violence laws? Please tell me if strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with each one. Please answer honestly. There are no right or wrong answers here.</p>			
35	Domestic violence laws are too harsh. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
36	Domestic violence laws are not harsh enough. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
37	The laws contribute to conflict in the family. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
38	Women are using the laws to dominate men. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree	

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	<i>disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
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MODULE 3.3. Rape Myths

INTERVIEWER NOTE: Do not ask unless completely private.

Now I want to ask you some questions about things that might happen to women. Now, please feel free to answer in a way that reflects what you believe people in your community think. There are no right or wrong answers. For the following statements, please state whether you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with each one.

#	QUESTION	CODING CATEGORIES	SKIP
39	<p>Most people in your community think that when a woman is raped, she is usually to blame for putting herself in that situation.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
40	<p>Most of your community think that if a woman doesn't physically fight back, it's not rape.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

MODULE 3.4. Attitudes - Gender Roles & Intimate Partner Violence.

INTERVIEWER NOTE: Do not ask unless completely private.

Now I want to ask you some questions about things that might happen to women. Now, please feel free to answer in a way that reflects what you believe. For the following statements, please state whether you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with

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each one. There are no right or wrong answers. Please remember you do not have to give answers if you are not comfortable

#	QUESTION	CODING CATEGORIES	SKIP
41	<p>I think that a man should have the final word about decisions in the home.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
42	<p>I believe a woman's most important role is to take care of her home, cook for her family and look after the children.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
43	<p>I think that a woman does not have the right to challenge her man's opinions and decisions, even if she disagrees with him</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
44	<p>I think a man needs more than one sexual partner even if they already have a partner.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

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45	<p>When a woman is raped she should keep it a secret.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
46	<p>I believe that a woman should tolerate violence to keep her family together.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
47	<p>I think violence between a husband and a wife is a private matter and others should not interfere.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
48	<p>I think adolescent girls should not have sex before marriage.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
49	<p>I think that a girl who gets pregnant before marriage deserves to be shunned, sent away, beaten, or otherwise punished.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

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	<i>disagree, disagree or strongly disagree).</i>		
50	<p>It is a woman's, not a man's, responsibility to avoid getting pregnant.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
51	<p>A couple can still have a good relationship even if the husband sometimes hits his wife.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
52	<p>A woman could be a good leader or boss.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
53	<p>If men and women have the same rights, men will lose their authority.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	

4. Practice

MODULE 4.1. Empirical Expectations – Intimate Partner Violence

INTERVIEWER NOTE: Do not ask unless completely private.

Now I will read some statements about relations between men and women. Please tell me what you think other people in your community actually do. For the following statements, please state whether you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with each one. Please remember you do not have to give answers if you are not comfortable

#	QUESTION	CODING CATEGORIES	SKIP
54	Most men in your community beat their wives/partners. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
55	Women in your community tolerate violence to keep their family together. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
56	People in your community do not interfere in arguments between wife and husband even if they know violence is happening. <i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i>	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree <input type="checkbox"/> (Don't Know) <input type="checkbox"/> (No answer)	
57	Most girls in your community that have a man who is providing for them do not let	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Neither agree nor disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree	

	<p>him go, even if he hits them sometimes.</p> <p><i>(PROBE: Strongly agree, agree, neither agree nor disagree, disagree or strongly disagree).</i></p>	<p><input type="checkbox"/> (Don't Know)</p> <p><input type="checkbox"/> (No answer)</p>	
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MODULE 4.2. Techniques for healthy relationships and anger management

INTERVIEWER NOTE: Do not ask unless completely private.

Now I will read some statements about managing relationships and emotions. For the following statements, please tell me about yourself if you have this kind of behaviour often, sometimes, never, doesn't apply, don't know or prefer not to say. Please remember you do not have to give answers if you are not comfortable.

#	QUESTION	CODING CATEGORIES	SKIP
58	<p>Do you take the time to understand and listen to the opinion of your wife/partner before taking a decision?</p> <p><i>(PROBE: often, sometimes, never, doesn't apply, don't know or prefer not to say)</i></p>	<p><input type="checkbox"/> Often</p> <p><input type="checkbox"/> Sometimes</p> <p><input type="checkbox"/> Never</p> <p><input type="checkbox"/> Doesn't apply</p> <p><input type="checkbox"/> Don't know</p> <p><input type="checkbox"/> Prefer not to say (No answer)</p>	
59	<p>When you disagree with your wife/partner, do you raise your voice to make your point of make her listen to you?</p> <p><i>(PROBE: often, sometimes, never, doesn't apply, don't know or prefer not to say)</i></p>	<p><input type="checkbox"/> Often</p> <p><input type="checkbox"/> Sometimes</p> <p><input type="checkbox"/> Never</p> <p><input type="checkbox"/> Doesn't apply</p> <p><input type="checkbox"/> Don't know</p> <p><input type="checkbox"/> Prefer not to say (No answer)</p>	
60	<p>When you are feeling angry at your wife/partner, do you take time to identify your thoughts, feelings, and body sensations before you respond to her?</p>	<p><input type="checkbox"/> Often</p> <p><input type="checkbox"/> Sometimes</p> <p><input type="checkbox"/> Never</p> <p><input type="checkbox"/> Doesn't apply</p> <p><input type="checkbox"/> Don't know</p> <p><input type="checkbox"/> Prefer not to say (No answer)</p>	

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	<i>(PROBE: often, sometimes, never, doesn't apply, don't know or prefer not to say)</i>		
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5. Satisfaction

MODULE 5.1: Survey Satisfaction.

We have now come to the end of the survey. I have just a few final questions related to how you experienced this interview.

#	QUESTION	CODING CATEGORIES	SKIP
61	I have asked you some easy and some difficult questions. How has talking about these things made you feel?	<input type="checkbox"/> Good <input type="checkbox"/> Bad <input type="checkbox"/> Neither good nor bad <input type="checkbox"/> (Don't know) <input type="checkbox"/> (No answer)	
62	Are there any comments you'd like to share with the interviewer and research team? <i>INTERVIEWER NOTE: Write comments verbatim.</i>	<i>Respondent comments:</i>	

16. Do you feel you have the power within you to help bring positive change to your community in EVAWG?

RESPONSE	CODE
Yes	1
No	2
Do not know	3

17. Would you say that in general, women and men feel safe to talk about cases of violence against women and girls in this community?

RESPONSE	CODE
Yes	1

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No	2
Do not know	3

18. Would you say that in general, women feel safe to report their cases of violence in this community?

RESPONSE	CODE
Yes	1
No	2
Do not know	3

19. In the last 3 years, do you feel that relationships between women and men have generally become less violent in your community?

RESPONSE	CODE
Yes	1
No	2
Do not know	3

20. What is your assessment of the level of effort by the following actors in the table below regarding ending VAWG in your community? Please answer whether it is very high, high, average, rare, very rare; there are no wrong answers, so please be honest.”

VARIABLE	Very high	High	Average	Rare	Very rare
Police	1	2	3	4	5
Local administration i.e., chiefs	1	2	3	4	5
Community Refugee leaders	1	2	3	4	5
HIAS Community Outreach Workers.	1	2	3	4	5
CSOs/partner agencies	1	2	3	4	5

C) SKILLS AND BEHAVIORS RELATED TO VAWG

“In the next few questions, I am going to ask you about some common situations that happen in your community. We would like to know what you think about them. Please answer yes or no or do not know; there are no wrong answers, so please be honest.”

Questions	Yes	No	Do not know
21. In the last 12 months, have you had discussions with anyone about the benefits of changing the way women and men use their power in this community?	1	2	3

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22.	In the last 12 months, have you made any important decisions together with your partner? <i>*Please select DOESN'T APPLY for unpartnered participants</i>	1	2	3
23.	In the last 12 months, have you usually felt respected by your partner?	1	2	3
24.	In the last 12 months, have you offered support to a woman who you knew was experiencing violence from her husband or boyfriend?	1	2	3
25.	In the last 12 months, have you taken any action to prevent violence against women in your community? <i>If yes, answer Q32</i>	1	2	3

26. What action did you take to prevent violence against women and girls in your community?

STEP(S) TAKEN	CODE
Raise awareness on the dangers of harmful traditions	1
Help girls to travel safely to schools and other places	2
Tackle violence against girls in schools	3
Speak out about violence in homes	4
Connect affected women and girls to the specialists for assistance	5
Engage community leaders in the fight against violence	6
Mobilize the youths to fight harmful practices like child marriages	7
Engage young men and boys as agents for change	8
Empower women and girls to speak out	9
Reach out to marginalized and rural women/girls	10
Take a stand against retrogressive forces	11
Funding women's organizations	12
Other (specify)	

E) PROJECT INVOLVEMENT AND SUSTAINABILITY

“Thank you so much; we are almost finished. These last questions are about what you see in your community about violence prevention. Please answer yes or no.”

End of Project Evaluation report | Community Based Prevention of Violence against Refugee Women and Girls in Nairobi Project

		Yes	No
27.	In the last 3 years, have you seen people in your community doing something to prevent violence against women and girls?		
28.	In the last six months, have you participated in activities on preventing VAWG such as a community dialogue sessions or social media engagement?		
29.	Do you feel like the above activities are helping make your community safer for women and girls?		
30.	Apart from HIAS activities, have you participated in any other activities to prevent violence against women in your community?		

We have come to the end of the survey. We appreciate the time you have spent answering these questions. Your response and those of approximately 300 other men and women will give us an understanding of women in EAWG roles in society today.

“Would you like a list of organizations or people who you could talk confidentially with about any of these issues?” [If yes, give referral list. If no, thank again and remind them of the name of your organization in case they are interested in follow-up.]

THANK RESPONDENT & CLOSE INTERVIEW

PROPOSED KII GUIDE – Refugee Community Leaders

Section A: Introduction

Annex 3: Key Informant Interview Guide for Refugee Community Leaders Endline Evaluation of the “Community Based Prevention of Violence against Refugee Women and Girls project in Nairobi.”

INFORMED CONSENT TO PARTICIPATE IN THE STUDY

(Information to consider before taking part in this study)

Hello. My name is....., and I am working on behalf of HIAS. HIAS is conducting an endline evaluation of the “Community Based Prevention of Violence against Refugee Women and Girls project in Nairobi” to learn more about how the project was implemented and this will inform future programming. You are being asked to participate because you are a Key Informant who may wish to share his/her experience of how the above-mentioned project was implemented.

The interview will take approximately 60 minutes to conduct. Anything you tell me in this interview is confidential & anonymous. I would like to ask you a few questions related to your experience and knowledge in the Prevention of Violence against Refugee Women and Girls project in Nairobi” project to learn more about how the project was implemented and this will inform future s. Before we start, I want to let you know that you do not have to answer any questions that you do not feel comfortable answering, and you can decide to stop at any time. Any of the answers that you share will be anonymous and confidential. There are no consequences of any kind if you decide at any point that you do not want to participate. The answers you share will not affect your access to HIAS services or your relationship with HIAS.

If you would like to speak to another HIAS staff member about any of these questions, please let me know at any time during the conversation. If you participate in this study, you will participate in an interview with a HIAS interviewer. The interview may also include a translator [if applicable]

All information that you share with us will be kept in our electronic records for the duration of the project, plus an additional three (3) years. The information will be de-identified, which means that your personal details will not be attached to any information you share. No individual participant will be identified or linked to the results. All information obtained in this study will be kept strictly confidential.

While we are not collecting any personal details as part of this Key Informant Interview, you may contact us at any time if you would like us to delete your name and contact details from the list of

participating individuals. You can make this request by sending us an email at henry.nyanaro@hias.org

Consent

By signing this form, you are indicating that you fully understand the above information and agree to participate in this interview.

Do you give your consent to proceed with this interview?

I agree *I do not agree*

Participant's signature: _____

Participant's name: _____

Date: _____

Interviewer's name: _____

Gender of the Respondent: _____

Position in Community: _____

Nationality: _____

Start time: _____

End time: _____

RESPONDENTS' PROFILE/WARM-UP

- Please introduce yourself and the role you carry out in the community?
- For how long have you been a refugee community leader?

RELEVANCE

- Are you aware of HIAS Kenya's "Community Based Prevention of Violence against Refugee Women and Girls project" implemented in the last 3 years? How did you become aware?
- Would you say that the project was relevant to the refugee community's needs in terms of reducing VAWG? Why do you say so?
- How was the situation of refugee women and girls 3 years ago before the program?
 - What was the community perception of refugee women and girls?
 - Which were the harmful practices that refugee women and girls faced?
 - What forms of violence did they use to face?
- How important has the project been to your role as a community leader?
- Which of the following strategies of the HIAS project on EVAWG has helped you in your in the prevention of VAWG
 - Sensitizing men on women's rights
 - Making women aware of their rights
 - Training of chiefs and police officers on VAWG
 - Establishing linkages with state and non-state actors for swift and sensitive response to VAW survivors

- Establishing linkages with other organizations and CBOs to build an atmosphere that is sensitive and just towards women and girls
- Use of IEC materials to create awareness on VAWG.

EFFECTIVENESS OF PROJECT

- What would you describe as the level of your involvement in this project?
- Have you attended any training organized by HIAS Kenya on VAWG?
 - What training have you attended?
 - Has the training been helpful to you? In which ways?
 - Do you have any suggestions for improvement on future training?
- What actions have you undertaken to improve your service and responsiveness in relation to VAWG? (**Prompt response, collaboration with other agencies, community mobilization and awareness**)
- Would you say your capacity as a community leader to respond to SGBV has improved as a result of the project? probe on
 - **ability to provide safe and adequate response and care**
 - **ability to identify and refer VAWG survivors or those at risk to appropriate support and care**
- How many cases of SGBV have you responded to since the beginning of the project?
- During the three years period, how do the refugee community members report cases of abuse? What do you do when you receive such cases?
 - How is the safety of survivors enhanced? How was it like three years ago?
- What kind of support do you provide to survivors?
- What happens if a case is reported to the community leader?
- How would you describe the relationship between the community leader and the refugee community?
 - How was it like three years ago?
 - How is it now?
 - What contributed to this change?
- How would you describe the relationship between community leaders and community outreach workers?

IMPACT OF THE PROJECT

- Has there been a change in the number of reported cases since the time of the project? Why do you say so? Probe for examples
- Has there been a change in how you have responded to the cases you receive? Why do you say so?
- Have refugee women and girls become more confident in reporting cases of violence to the Community leader? In which ways?

End of Project Evaluation report | Community Based Prevention of Violence against Refugee Women and Girls in Nairobi Project

- Which dominant forms of VAWG have you tried to tackle/have been reported to you in the last one year?
- Which forms of reported VAWG have reduced in the last one year?
- Has the perception of the community changed when it comes to the role of community leader in handling VAWG cases? in which ways? what has influenced the change?
- Have you passed the knowledge gained to other co-workers? if yes did you face any challenges? if no why not?
- In the last one year as you interact with the women and with other people of the refugee community, do you notice any change or shift in their behavior regarding their awareness of their rights? Which of the following can you say is definitely true?
 - Women display increased awareness of rights when they approach you
 - Refugee community leaders display more gender-sensitive response and supports the women in the legal journey to justice
 - Family (when not the site of violence) supports the woman in the steps towards law-based justice
 - Women are vocal about the violence they face and show confidence in reporting it
 - Women have more legal awareness
 - There is more reporting and follow-through of VAWG cases
 - There are some people/ groups in the community who support the survivor in her legal journey
- Since you are acquainted with the work of HIAS, which of the above do you think is an impact of their work?
- What do you think that you and HIAS have achieved with respect to EVAWG that had not happened before in your community?
- How has the work you have done impacted your personal life, and belief systems? Has it brought about any changes in you that you want to share?

LESSONS LEARNT

- What could have been done better when HIAS Kenya was reaching out to the community leader?
- What more needs to be done to reduce cases of violence against refugee women and girls in this community?
- Do you have any other reflections/lessons learnt or recommendations to share?

THANK RESPONDENT & CLOSE INTERVIEW

PROPOSED KII GUIDE – Refugee Community Leaders

Section A: Introduction

Annex 3: Key Informant Interview Guide for Refugee Community Leaders Endline Evaluation of the “Community Based Prevention of Violence against Refugee Women and Girls project in Nairobi.”

INFORMED CONSENT TO PARTICIPATE IN THE STUDY

(Information to consider before taking part in this study)

Hello. My name is....., and I am working on behalf of HIAS. HIAS is conducting an endline evaluation of the “Community Based Prevention of Violence against Refugee Women and Girls project in Nairobi” to learn more about how the project was implemented and this will inform future programming. You are being asked to participate because you are a Key Informant who may wish to share his/her experience of how the above-mentioned project was implemented.

The interview will take approximately 60 minutes to conduct. Anything you tell me in this interview is confidential & anonymous. I would like to ask you a few questions related to your experience and knowledge in the Prevention of Violence against Refugee Women and Girls project in Nairobi” project to learn more about how the project was implemented and this will inform future s. Before we start, I want to let you know that you do not have to answer any questions that you do not feel comfortable answering, and you can decide to stop at any time. Any of the answers that you share will be anonymous and confidential. There are no consequences of any kind if you decide at any point that you do not want to participate. The answers you share will not affect your access to HIAS services or your relationship with HIAS.

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All information that you share with us will be kept in our electronic records for the duration of the project, plus an additional three (3) years. The information will be de-identified, which means that your personal details will not be attached to any information you share. No individual participant will be identified or linked to the results. All information obtained in this study will be kept strictly confidential.

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Consent

By signing this form, you are indicating that you fully understand the above information and agree to participate in this interview.

Do you give your consent to proceed with this interview?

I agree *I do not agree*

Participant's signature: _____

Participant's name: _____

Date: _____

Interviewer's name: _____

Gender of the Respondent: _____

Position in Community: _____

Nationality: _____

Start time: _____

End time: _____

RESPONDENTS' PROFILE/WARM-UP

- Please introduce yourself and the role you carry out in the community?
- For how long have you been a refugee community leader?

RELEVANCE

- Are you aware of HIAS Kenya's "Community Based Prevention of Violence against Refugee Women and Girls project" implemented in the last 3 years? How did you become aware?
- Would you say that the project was relevant to the refugee community's needs in terms of reducing VAWG? Why do you say so?
- How was the situation of refugee women and girls 3 years ago before the program?
 - What was the community perception of refugee women and girls?
 - Which were the harmful practices that refugee women and girls faced?
 - What forms of violence did they use to face?
- How important has the project been to your role as a community leader?
- Which of the following strategies of the HIAS project on EVAWG has helped you in your in the prevention of VAWG
 - Sensitizing men on women's rights
 - Making women aware of their rights
 - Training of chiefs and police officers on VAWG

- Establishing linkages with state and non-state actors for swift and sensitive response to VAW survivors
 - Establishing linkages with other organizations and CBOs to build an atmosphere that is sensitive and just towards women and girls
- Use of IEC materials to create awareness on VAWG.

EFFECTIVENESS OF PROJECT

- What would you describe as the level of your involvement in this project?
- Have you attended any training organized by HIAS Kenya on VAWG?
 - What training have you attended?
 - Has the training been helpful to you? In which ways?
 - Do you have any suggestions for improvement on future training?
- What actions have you undertaken to improve your service and responsiveness in relation to VAWG? (**Prompt response, collaboration with other agencies, community mobilization and awareness**)
- Would you say your capacity as a community leader to respond to SGBV has improved as a result of the project? probe on
 - **ability to provide safe and adequate response and care**
 - **ability to identify and refer VAWG survivors or those at risk to appropriate support and care**
- How many cases of SGBV have you responded to since the beginning of the project?
- During the three years period, how do the refugee community members report cases of abuse? What do you do when you receive such cases?
 - How is the safety of survivors enhanced? How was it like three years ago?
- What kind of support do you provide to survivors?
- What happens if a case is reported to the community leader?
- How would you describe the relationship between the community leader and the refugee community?
 - How was it like three years ago?
 - How is it now?
 - What contributed to this change?
- How would you describe the relationship between community leaders and community outreach workers?

IMPACT OF THE PROJECT

- Has there been a change in the number of reported cases since the time of the project? Why do you say so? Probe for examples
- Has there been a change in how you have responded to the cases you receive? Why do you say so?

End of Project Evaluation report | Community Based Prevention of Violence against Refugee Women and Girls in Nairobi Project

- Have refugee women and girls become more confident in reporting cases of violence to the Community leader? In which ways?
 - Which dominant forms of VAWG have you tried to tackle/have been reported to you in the last one year?
 - Which forms of reported VAWG have reduced in the last one year?
- Has the perception of the community changed when it comes to the role of community leader in handling VAWG cases? in which ways? what has influenced the change?
- Have you passed the knowledge gained to other co-workers? if yes did you face any challenges? if no why not?
- In the last one year as you interact with the women and with other people of the refugee community, do you notice any change or shift in their behavior regarding their awareness of their rights? Which of the following can you say is definitely true?
 - Women display increased awareness of rights when they approach you
 - Refugee community leaders display more gender-sensitive response and supports the women in the legal journey to justice
 - Family (when not the site of violence) supports the woman in the steps towards law-based justice
 - Women are vocal about the violence they face and show confidence in reporting it
 - Women have more legal awareness
 - There is more reporting and follow-through of VAWG cases
 - There are some people/ groups in the community who support the survivor in her legal journey
- Since you are acquainted with the work of HIAS, which of the above do you think is an impact of their work?
- What do you think that you and HIAS have achieved with respect to EAWG that had not happened before in your community?
- How has the work you have done impacted your personal life, and belief systems? Has it brought about any changes in you that you want to share?

LESSONS LEARNT

- What could have been done better when HIAS Kenya was reaching out to the community leader?
- What more needs to be done to reduce cases of violence against refugee women and girls in this community?
- Do you have any other reflections/lessons learnt or recommendations to share?

THANK RESPONDENT & CLOSE INTERVIEW

KEY INFORMANT GUIDE (HIAS Kenya Staff)

Section A: Introduction

Annex 3: Key Informant Interview Guide for HIAS Staff

Endline Evaluation of the “Community Based Prevention of Violence against Refugee Women and Girls project in Nairobi.”

INFORMED CONSENT TO PARTICIPATE IN THE STUDY

(Information to consider before taking part in this study)

Hello. My name is....., and I am working on behalf of HIAS. HIAS is conducting an endline evaluation of the “Community Based Prevention of Violence against Refugee Women and Girls project in Nairobi” to learn more about how the project was implemented and this will inform future programming. You are being asked to participate because you are a Key Informant who may wish to share his/her experience of how the above-mentioned project was implemented.

The interview will take approximately 60 minutes to conduct. Anything you tell me in this interview is confidential & anonymous. I would like to ask you a few questions related to your experience and knowledge in Prevention of Violence against Refugee Women and Girls project in Nairobi” project to learn more about how the project was implemented and this will inform future projects. Before we start, I want to let you know that you do not have to answer any questions that you do not feel comfortable answering, and you can decide to stop at any time. Any of the answers that you share will be anonymous and confidential. There are no consequences of any kind if you decide at any point that you do not want to participate. All information that you share with us will be kept in our electronic records for the duration of the project, plus an additional three (3) years. The information will be de-identified, which means that your personal details will not be attached to any information you share. No individual participant will be identified or linked to the results. All information obtained in this study will be kept strictly confidential.

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Consent

By signing this form, you are indicating that you fully understand the above information and agree to participate in this interview.

End of Project Evaluation report | Community Based Prevention of Violence against Refugee Women and Girls in Nairobi Project

Do you give your consent to proceed with this interview?

I agree *I do not agree*

Participant's signature: _____

Participant's name: _____

Date: _____

Interviewer's name: _____

Gender of the Respondent: _____

Start time: _____

End time: _____

INTRODUCTION

- What role do you play at HIAS? What is your specific role in the implementation of the Community Based Prevention of VAWG project funded by UNTF?

Relevance

I would like us to now focus on the Project

1. Was the intervention designed in ways that respond to the needs and priorities of a) women and girls? If so, how if not why?
2. Did the project target the communities in need? Why/Why not?
3. To what extent are the objectives of the program still valid?
4. To what extent is the theory of change still relevant? Are the assumptions that went into the design of the project still relevant?
5. How were men, women and girls involved at the design, planning and implementation stages of the project?
6. How was the implementation of the planned project activities monitored and adjusted to the existing context

Effectiveness and Efficiency

- Have the key project activities been implemented within the proposed timelines?
 - Were project targets achieved within anticipated timelines? Explain why or why not.

End of Project Evaluation report | Community Based Prevention of Violence against Refugee Women and Girls in Nairobi Project

- Have the actual project expenditures been according to plan/schedule? Explain why or why not
- To what extent do you think that GBV facilitators were successful in VAWG prevention?
 - Which of the project activities and approaches had the greatest success?
 - Do you think GBV facilitator activities were well received by the beneficiaries of different nationalities?
 - What hindered the work of GBV facilitator, posed obstacles in their functioning?
- What challenges did you experience during implementation of the program?
 - How did Covid-19 affect implementation of the project?
 - What measures did you put in place to ensure implementation during the COVID 19 pandemic/ cessation of movement measures?
 - Was the project effective in delivering desired/planned results even in the phase of the pandemic? Explain
 - To what extent did the project adaptation during COVID-19 contribute to meeting project results? Explain
- Were all project activities conducted according to project design?
 - Were there any deviations from the project plans?
 - If yes, what were the reasons behind the deviations?
- To what extent do you think the project resources have been economically converted into project results in terms of value for money? Please give reasons for your answers
- Do you feel there was adequate capacity to implement the project as planned? Probe Fully for financial, human resource, technical capacity etc.
- How has the project enhanced response from the police? Probe for evidence collection, preservation & presentation in court, visiting the scene of crime, completeness of charge sheets
- How do you compare response of officers compared to three years ago?
- How easy is it for victims of VAWG to access justice compared to three years ago? What kind of legal support is being offered? *Probe for virtual legal services through the toll free line, legal advice (on court process, rights) pro bono legal services including representation in court*

End of Project Evaluation report | Community Based Prevention of Violence against Refugee Women and Girls in Nairobi Project

- *How many cases have you responded to by following the referral pathway steps?*
- How effective have been the IEC materials, and social media campaigns activities to reduce/ prevent VAW in target communities?
- HIAS had a multiple stakeholder involvement strategy in order to have holistic approach to VAWG prevention. To what extent have you been successful in reaching and engaging these stakeholders in VAW prevention? Civil society stakeholders, Law enforcement officials, State development actors, non-state development actors. What could be the reasons for the success? What have been the main challenges and how have these been resolved?

Partnership

- What were the challenges of working in partnership with partners? What improvements can be done?
- Do you think working with partners affected the overall efficiency and effectiveness of the project negatively or positively? Probe for reasons
- To what extent has cooperation with institutions or persons dealing with gender issues (UN Women, women and feminist organizations, feminist and gender-specific researchers, etc.) been undertaken? Explain?
- Were other organizations (state/ CSOs) also working at the same time, in the same area, on the same issue/ any other issue? Did you work in collaboration with them? If you did, what were the points of collaboration? Did it help your work in any way? Please elaborate. If it hindered your work, please state the reasons for the same.
- Which organizations/partners have resulted to be strategic partners for efforts of mainstreaming gender equality issues and approaches in the thematic area?

Impact

I would like us to discuss the achievements of the project

- Would you say that the project achieved its outcome? What are the gaps in terms of policies knowledge gaps /capacity? Why do you say so?
- What actual changes do you notice in the lives of refugee women and girls as a result of project implementation? Has there been a reduction in reported cases of VAWG

End of Project Evaluation report | Community Based Prevention of Violence against Refugee Women and Girls in Nairobi Project

- Which of the forms of VAWG, dominant among refugees have reduced and to what extent?

Would say the project has contributed to:

- Reduced cases of violence against women and girls among refugee communities? What factors contributed to the achievement or non-achievement?
- What are some of the unintended impacts/outcomes as a result of project intervention?
- How have refugee men been involved in ending violence in the community in the last two years? Give examples
- Has there been a change in how you have responded to the cases you receive? Why do you say so?
- Have refugee women and girls become more confident in reporting cases of violence? In which ways?
- Has the perception of the community changed in relation to the rights of women and issues affecting women?
- Would you say that the overall understanding of VAWG and the overall responsiveness to it among different stakeholder groups in targeted communities have improved as a result of your work? What have been some of the indicators you have used to assess it in the course of implementing the project?

Sustainability

- How would you describe the level of ownership of project activities by the beneficiaries?
- Where do you see the initiatives promoted by your organization under this project in the next 5 years? Probe (which initiatives/outcomes will continue to be relevant to the needs of women and girls)
- What is the exit strategy for this program?
 - What measures are in place to ensure sustainability of the activities promoted by the program intervention?
 - What is the one element in this project that you would say will contribute to its sustainability?
 - To what extent has there been an institutional change that will sustain future efforts in preventing IPV?

End of Project Evaluation report | Community Based Prevention of Violence against Refugee Women and Girls in Nairobi Project

- To what extent have you been successful in building/improving relationships/ linkages between the community and institutions in relation to VAW? (Law Enforcement)
- To what extent do you feel the project implemented can be replicated by other organizations or in other areas? Probe Fully

Coherence

- Would you say the project interventions are compatible with other HIAS projects and other actors' interventions in the same context? Explain why or why not
- Are there elements in the project implemented that have been adopted by other organizations? Give examples

Gender Equality and Human Rights

- o To what extent have gender equality and human rights considerations been integrated into the project/programme design and implementation? Explain
- o How satisfactorily has the project/programme integrated a gender mainstreaming and a Human Rights Based Approach (HRBA) in its design, planning, implementation, and monitoring?
- o Which were the major challenges to effectively mainstream gender and Human Rights in the project/programme? (Financial, institutional, understanding, political, expertise, tools)
- o How has attention to/integration of gender equality and human rights concerns advanced the area of work?
- o Would you say the project has contributed to improved power relations and changed gender norms among project beneficiaries
- o How were structural issues of gender inequality addressed?

Knowledge generation

- What new generated knowledge, promising or emerging practices in the field of EVAW/G has the project generated that should be documented and shared with other practitioners?
- What is your learning regarding women's rights? How has this project enhanced your understanding of VAW/VAG, added new dimensions to it?

End of Project Evaluation report | Community Based Prevention of Violence against Refugee Women and Girls in Nairobi Project

- Which of your learnings from the project should become a part of your next work on VAWG prevention among refugees
 - In terms of theoretical understanding
 - In terms of strategies

Lessons learnt and best practices

- What would you say are the strengths/ weaknesses of the program implemented?
- What lessons did you learn from the project implemented?
- What are the best practices that can be drawn from this project?
- What recommendations, if any, can you provide for any future work in a similar area?
- How can future capacity building activities be improved?

KEY INFORMANT GUIDE (Funding Partner)

Section A: Introduction

Annex 3: Key Informant Interview Guide for the Funding Partner – UN Trust Fund

Endline Evaluation of the “Community Based Prevention of Violence against Refugee Women and Girls project in Nairobi.”

INFORMED CONSENT TO PARTICIPATE IN THE STUDY

(Information to consider before taking part in this study)

Hello. My name is....., and I am working on behalf of HIAS. HIAS is conducting an endline evaluation of the “Community Based Prevention of Violence against Refugee Women and Girls project in Nairobi” to learn more about how the project was implemented and this will inform future programming. You are being requested to participate because you are a Key Informant who may wish to share his/her experience of how the above-mentioned project was implemented.

The interview will take approximately 45 minutes to conduct. Anything you share with us through this questionnaire will be kept confidential & anonymous.

Before we start, I want to let you know that you do not have to answer any questions that you do not feel comfortable answering. All information that you share with us will be kept in our electronic records for the duration of the project, plus an additional three (3) years. The information will be de-identified, which means that your personal details will not be attached to any information you share. No individual participant will be identified or linked to the results. All information obtained in this study will be kept strictly confidential.

Consent

By signing this form, you are indicating that you fully understand the above information and agree to participate in this interview.

Do you give your consent to proceed with this interview?

I agree *I do not agree*

Participant's signature: _____

Participant's name: _____

Date: _____

INTRODUCTION

- What role do you play at UNTF? What is your specific role in the implementation of the Community Based Prevention of VAWG project?

Relevance

I would like us to now focus on the Project

7. Was the intervention designed in ways that respond to the needs and priorities of refugee women and girls? If so, how if not why?
8. Do you think the project reflected the needs of the targeted community?

Effectiveness and Efficiency

- How satisfied are you overall with the way the project was implemented?
 - **Probe:** beneficiary targeting, engaging of other stakeholders, management of funds, communication between grantee and donor; adhering to the donor requirements?
- How responsive do you feel that HIAS has been to your needs?
 - **Probe:** How has the HIAS-implemented contributed to UNTF goals? To the needs of the other project stakeholders?
- Do you think the financial resources donated to HIAS by UNTF have been efficiently utilized toward achievement of project goal? Please mention the reasons for the same.
 -

Partnership

- In your view, to what degree did HIAS collaborate with other organizations or individuals that are involved in EVAWG? How, or why not?

Impact

I would like us to discuss the achievements of the project

- Would you say that the project achieved its outcome? Why do you so?

End of Project Evaluation report | Community Based Prevention of Violence against Refugee Women and Girls in Nairobi Project

- In your view, what has been the changes in the lives of targeted refugee women and girls as a result of project implementation?
- What other benefits or impact associated with the project have you observed (from reports, social media, and any other source)?

Coherence

- From your observation, are there elements in the project implemented that have been adopted by other organizations? Give examples
- Which other EVAW/G prevention programs were concurrent to HIAS work? Was there any collaboration? please mention?

Lessons learnt and best practices

- What would you say are the strengths/ weaknesses of the program implemented?
- What have been the major challenges faced by HIAS while implementing the project? How did you support HIAS to overcome them?
- What lessons did you learn from the project implemented?
- What are the best practices that can be drawn from this project?
- What recommendations, if any, can you provide for any future interventions to be implemented by HIAS in a similar area?
- Any other relevant information?

FGD GUIDE FOR ADOLESCENT GIRLS/WOMEN/MEN

DETAILS	
Name of Project Region	
Number of Participants	

SECTION C: INTRODUCTION

Annex 5: Focus Group Discussion Guide

Endline evaluation of the “Community-Based Prevention of Violence Against Refugee Women and Girls in Nairobi” project

Consent/Assent Form for Focus Groups

HIAS is conducting an endline evaluation of the project entitled “Community-Based Prevention of Violence Against Refugee Women and Girls in Nairobi”. If you choose to participate in this study, HIAS will use the information that you provide to understand how and to what extent project activities contributed towards Prevention of Violence Against Refugee Women and Girls for the target population, was implemented, in order to better design and implement future projects

If you participate in this study, you will be in a group of approximately 6-10 people. The group will have a facilitator who will ask questions and facilitate the discussion, and a translator [if applicable] and note-taker to write down the ideas expressed within the group. If you volunteer to participate in this focus group, you will be asked some questions about your experience with the services you have accessed from HIAS. Your participation is voluntary. You may withdraw from the discussion at any time without penalty. The answers you share will not affect your access to HIAS services or your relationship with HIAS.

Everyone will be asked to respect the privacy of the other group members. All participants will be asked not to disclose anything said within the context of the discussion, but it is important to understand that we cannot control what other participants do or say outside this group. Please talk to a HIAS staff member either before or after the group discussion if you would like to share something that you absolutely need to keep private.

All information that you share with us will be kept in our electronic records for the duration of the project, plus an additional three (3) years. The information will be de-identified, which means that your personal details will not be attached to any information you share. No individual participant will be identified or linked to the results. All information obtained in this study will be kept strictly confidential

While we are not collecting any personal details as part of this focus group discussion, you may contact us at any time if you would like us to delete your name and contact details from the list of

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participating individuals. You can make this request by sending us an email at henry.nyanaro@hias.org

Consent/Assent

(Please circle one above)

By agreeing to participate, you are indicating that you fully understand the above information and give consent to participate in this focus group.

Do you give your consent to proceed with this interview?

I agree *I do not agree*

Date of interview	
Interviewer name 1	
Interviewer name 2	
Program site	
Start time	
Gender and Number of participants	
Women/Girls/Men	

Ground rules

- The most important rule is that only one person speaks at a time. There may be a temptation to jump in when someone is talking but please wait until they have finished.
- There are no right or wrong answers
- You do not have to speak in any particular order
- When you do have something to say, please do so. There are many of you in the group and it is important that I obtain the views of each of you
- You do not have to agree with the views of other people in the group

Does anyone have any questions? (Answers). Okay, let's begin

FGD GUIDE

1. Icebreaker/warm-up activity (5-10 minutes)
2. Safe environment for participants (30 min)
3. Energizer (5-10 min)

Icebreaker (5 minutes) – Use one or two of the following examples or use others that you feel comfortable facilitating. If the group is large, each of these can be done with sub-groups.

- 1). Reorganize. Ask the participants to stand in a line as quickly as possible and organize themselves by first name. The participants whose name begins with “A” stand first, followed in alphabetical order. Also, those born in a particular month have to line up according to their birth dates. This process can be repeated using other categories like age, number of years in school (if all go to school), date of birth (birth month and date), if time permits.
- 2). Ask them to give a name of their favourite animal and one thing they like about that animal.

SECTION B: DISCUSSION QUESTIONS

Background

1. Are you aware of the project being implemented by HIAS on “Community-Based Prevention of Violence Against Refugee Women and Girls in Nairobi”? If yes, how did we participate in the project activities?
2. According to you what is violence against girls and women? Probe if they consider the following as acts of violence against women and girls-
 - Bodily harm inflicted on woman/girls by a man
 - Sexual Violence (assaults, defilement, incest, rape) on women and girls
 - Psychological harm inflicted by man or woman/girl (fear, shame, bullying, controlling behavior, constant criticism, humiliation, intimidation, verbal abuse)
 - Harmful traditional practice on woman/girl (early marriage, FGM, beading etc)
 - Verbal abuse
 - Economic abuse- discrimination in employment
4. Probe which of the above (Q2) acts of violence are common in the community and use participatory ranking to identify the most common acts of violence
5. Are you aware of services or support (counselling, support groups, legal aid, child right clubs, teenage/young mothers clubs, etc.) available for women and girls that are victims of violence in your community?
6. Where can women and girls who are survivors of violence report cases? List in order of preference (Facilitator to help the participants using participatory ranking) (Police/chiefs, Teacher, community refugee leader, social worker, hospital, HIAS’s toll free and hotline number; others as mentioned)

Relevance

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7. In your opinion do you think HIAS project addressed VAWG needs of the refugee women and girls within your community? If so how, if not what were the gaps?
8. During COVID-19 were the services offered HIAS adequate to meet the needs of women and girls in the community? Explain, if yes/no why.

Impact

9. In your view, how has the situation for girls and women in the society changed since HIAS project started in 2021?
 - Would you say that refugee women and men are having equal rights? Why do you say so?
 - Are refugee women and girls being discriminated? Has this increased or reduced? Why do you say so?
 - What forms of violence do refugee women and girls continue to face? Has there been a change?
 - Are refugee women confident enough to speak out and report to relevant authorities whenever they are violated?
 - What happens to perpetrators who instill violence on women?
10. Can you say women and girls are safer in the community you live in compared to a year ago? Why do you say so?

Recommendations

11. In your view what more should be done to ensure the safety of women and girls in this community?
 - Specifically, what can men /women leaders/groups, and local administration/police do to prevent GBV in this community?
 - What other programs or activities geared towards EVAWG would you like to see implemented in your community?

ENERGIZER – The facilitator should use a context-friendly energizer to cheer up the group of participants.

CLOSING

1. This brings us to the end of our discussion.
2. We want to thank you for being so generous with your time today and for talking to us.
3. We will now work through the information that you shared with us today and identify some important ideas.
4. Please contact us should you have any questions or further comments.
5. Have a wonderful rest of your day! Goodbye. *OR If providing refreshments: Now that we are done, please enjoy refreshment before you go.*

Thank You All

ANNEX 2: EVALUATION MATRIX

Table 12: Evaluation Criteria and Guiding Questions

S/N	Evaluation Criteria	Mandatory Evaluation Question	Sources	Method
1	<p>Effectiveness</p> <p>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.</p>	<p>1. To what extent were the intended project goal, outcomes, and outputs (project results) achieved and how?</p> <p>2. Did the project achieve its objectives and expected results in ways that contribute to EVAWG? If so, how?</p> <p>3. What were the major factors influencing the achievement or non-achievement of different the objectives? Reflection on various factors: internal and external, operational, and programmatic, components of the project etc.</p> <p>4. Were there differential results for different people? If so, how, and why?</p> <p>5. To what extent did the mechanisms put in place achieve HIAS Kenya’s COVID -19 response strategic objectives?</p>	<p>Beneficiaries</p> <p>Staff/partners</p> <p>Staff/partners</p> <p>Beneficiaries</p> <p>Staff/partners</p>	<p>Survey</p> <p>KII</p> <p>KII</p> <p>FGD</p> <p>KII</p>
2	<p>Relevance</p> <p>The extent to which the project is suited to the priorities and policies of the target group and the context.</p>	<p>1. 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>2. Was the intervention designed in ways that respond to the needs and priorities of women and girls? If so, how?</p> <p>3. To what extent are the objectives of the programme still valid?</p> <p>4. To what extent is the theory of change still relevant?</p> <p>5. Are the assumptions that went into the design of the project still relevant?</p>	<p>Staff/partners</p> <p>Government</p> <p>Government</p> <p>Document review</p> <p>Staff/partners</p>	<p>KII</p> <p>KII</p> <p>KII</p> <p>Checklist</p>

		6. To what extent was HIAS Kenya, as an institution been strengthened to provide a timely and relevant response to target population needs and priorities in the COVID-19 context?		
3	Efficiency 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.	1. To what extent was the project efficiently and cost-effectively implemented? 2. Were activities cost-efficient? 3. Were objectives achieved on time? 4. Was the project implemented in the most efficient way compared to alternatives?	Staff/partners Staff/partners Staff/partners Staff/partners	KII KII KII KII
4	Sustainability Sustainability is concerned with measuring whether the benefits of a project are likely to continue after the project/funding ends.	1. 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? 2. What were the major factors which influenced the achievement or non-achievement of sustainability of the programme or project?	Staff/partners Staff/partners	KII KII
5	Coherence Measures the compatibility of the intervention with other interventions in a country, sector, or institution.	1. Are the key interventions compatible with other interventions in the region? 2. Is there any potential duplication of efforts in this area?	Staff/partners Staff/partners	KII KII

6	<p>Impact</p> <p>Assesses the changes that can be attributed to a particular project relating specifically to higher-level impact (both intended and unintended).</p>	<ol style="list-style-type: none"> 1. To what extent has the project contributed to ending violence against women, gender equality and/or women’s empowerment (both intended and unintended impact)? 2. What real difference/changes has the project made to the lives of the target groups? 3. How many people have been positively affected by the project interventions? 4. How do the women, men and girls see the impact themselves and how do they describe the changes? 5. Were there equal impacts for different genders or were there any gender-related differences in engagement, experience, and impacts? If so, why did these differential impacts occur? 	<p>Beneficiaries</p> <p>Staff/partners</p> <p>Staff/partners</p> <p>Beneficiaries</p> <p>Beneficiaries</p> <p>Beneficiaries</p>	<p>FGD/ case study</p> <p>KII</p> <p>FGD/ case study</p> <p>FGD/ case study</p>
7	<p>Knowledge generation</p> <p>Assesses whether there are any promising practices that can be shared with other practitioners.</p>	<ol style="list-style-type: none"> 1. To what extent has the project generated knowledge, promising or emerging practices in the field of EVAW/G that should be documented and shared with other practitioners? 2. What best practices can be learnt from the programme that can be applied to similar future programs? 3. What should have been done differently and should be avoided in such programs in future. 	<p>Staff/partners</p> <p>Staff/partners</p> <p>Staff/partners</p>	<p>KII</p> <p>KII</p> <p>KII</p>
8	<p>Gender Equality and Human Rights</p>	<ol style="list-style-type: none"> 2. To what extent have impacts contributed to equal power relations between people of different genders and to changing of social norms and systems? 	<p>Project document</p> <p>Project document</p>	<p>Doc. Review</p> <p>Doc. Review</p>

ANNEX 3: POPULATED RESULTS FRAMEWORK

Results	Baseline	Target	Endline
Goal: Refugee women and girls among the urban population in Nairobi experience less interpersonal violence by 2022.			
Indicator 1: Percentage of all men targeted by the project who display equitable attitudes toward gender norms	TBD B	75%	81%
Indicator 2: Number of people indicating that IPV is unacceptable	84	2x the number of people at baseline	108
Indicator 3: Number of refugee women and girls who are aware of the referral pathway and would feel comfortable using this to report cases of IPV	74	2x the number of people at baseline	80
Outcome 1: Refugee men have changed attitudes around power, gender, masculinities and male privilege and take action to prevent IPV.			
Indicator 1.1: Proportion of refugee men (segregated by age) participating in group activities who display equitable attitudes around power, gender, masculinities and male privilege	TBD B	75%	81%
Indicator 1.2: Number of refugee men in the community (segregated by age) who take action to prevent IPV, such as saying it is unacceptable to hit women or vocalizing that women should be involved in decision making in the home	25	70	74
Output 1.1: Refugee men have increased knowledge about the root causes of IPV and ability to identify harmful attitudes and beliefs that lead to IPV.			
Indicator 1.1.1: Number of refugee men (segregated by age) participating in group discussions who report understanding that IPV is caused by harmful attitudes and beliefs.	27	90	85
Output 1.2: Refugee men with increased knowledge about IPV start taking concrete steps to change unequal power relations within their own lives			
Indicator 1.2.1: Number of refugee men (segregated by age) who take concrete steps to change unequal power relations within their own lives	0	65	51
Outcome 2: Refugee women and girls demonstrate an increased understanding that IPV is a violation of their rights and feel confident reporting that violation.			
Indicator 2.1: Number of refugee women and girls (segregated by age) who demonstrate increased understanding that IPV is a violation of their rights.	57	100	157
Indicator 2.2: Number of refugee women and girls (segregated by age) who feel confident reporting a violation.	41	90	74

Output 2.1: Refugee women and girls have increased knowledge about the root causes of IPV and demonstrate increased ability to identify harmful attitudes and beliefs that lead to IPV.			
Indicator 2.1.1: Number of refugee women (segregated by age) participating in group discussions who understand the root causes of IPV and identify harmful attitudes and beliefs that lead to IPV	0	90	71
Output 2.2: Refugee adolescent girls exercise increased agency and voice through sharing their reactions, concerns, and priorities in a consultative process that informs the intervention.			
Indicator 2.2.1: Number of refugee adolescent girls who participate in a consultative process in order to share their reactions, concerns, priorities and experiences informing the intervention.	0	90	74
Output 2.3: Refugee women and girls demonstrate increased confidence to share their experiences with IPV, including reporting instances of IPV where applicable.			
Indicator 2.3.1: Number of survivors who have received accompaniment through the project and report that the service they received is appropriate	12	24	24
Outcome 3: Community systems enable refugee-friendly IPV prevention through both improved access pathways and strengthened community awareness of IPV.			
Indicator 3.1: Percentage of community (disaggregated by sex and age) who agree or disagree with the "call to action" or ideals of the awareness-raising campaign.	47	45	50
Indicator 3.2: Number of male community leaders who take action to prevent IPV, such as saying it is unacceptable to hit women or vocalizing that women should be involved in decision making in the home	10	30	30
Indicator 3.3: Community leaders apply their knowledge on IPV to engage in survivor-centered alternative dispute resolution practices	TBD B	15	36
Output 3.1: Refugee leaders have increased awareness on prevention of IPV			
Indicator 3.1.1: Number of refugee leaders trained who report having gained knowledge on prevention of IPV, including ADR survivor-centered practice.	0	20	36
Output 3.2: Civil society organization and government leaders have increased knowledge of IPV prevention principles and best practices.			
3.2.1: Number of civil society organization leaders, government leaders and police and law enforcement officers (segregated by sex and affiliation) who report having gained knowledge on prevention of IPV and best practices.	0	40	35

Output 3.3: Increased number of refugee men and women have access to community-level initiatives for advancing women's rights and eliminating IPV			
Indicator 3.3.1: Number of refugee men and women (segregated by sex and age) who initiate community level activities for advancing women's rights and eliminating IPV	0	250	42
Output 3.4: Community members increase awareness and participation in reduction of IPV via social media.			
Indicator 3.4.1: Number of people surveyed (segregated by sex and age) who report that they learned something new about IPV through HIAS' social media engagement	0	500	500
Indicator 3.4.2: Number of social media messages addressing IPV created through a participatory design process	0	4	6
Outcome 4: Increased accountability of program staff implementing the project through changes in staff knowledge and attitudes on prevention of IPV.			
Indicator 4.1: Percentage of project participants who report that they are satisfied with the quality of project activities (from a pre-designed checklist following key training objectives)	TBD B	80%	82%
Output 4.1: Program staff demonstrate increased understanding of IPV prevention and increased behaviors supporting IPV prevention throughout implementation.			
Indicator 4.1.1: Number of project team members who report increased understanding of how to practice personal and relational accountability on prevention of IPV (including EMAP)	0	15	19
Output 4.2: Periodic assessment and ongoing monitoring data used to create increased actionable learning on prevention of IPV.			
Indicator 4.2.1: Number of supervision sessions between staff and supervisor	0	15	15
Outcome 5: HIAS is institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adapting existing interventions to EVAW/G with a focus on the most vulnerable women and girls.			
Indicator 5.1: Percentage of original project plan targets that are back on track 6 and 12 months after the start of implementation of activities supported by COVID-19 fund.	0%	100%	100%
Output 5.1: HIAS has put in place mechanisms to improve institutional resilience to crises including COVID-19, that ensures the stability of projects and sustainability of the organization[s] in the longer term.			
Indicator 5.1.1: Percentage of staff/partners reporting improved knowledge of how to integrate COVID-19 response guidelines into EVAW/G interventions.	0%	90%	96%

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Indicator 5.1.2: Percentage of staff who feel adequately equipped by HIAS to effectively work remotely during COVID-19 period.	60%	90%	100%
Output 5.2: HIAS has improved knowledge, skills and capacities to maintain or adapt EVAW/G interventions and reach the most vulnerable women and girls while responding to the impact of the COVID-19 pandemic or other crises.			
Indicator 5.2.1: Cumulative number of survivors of GBV who have called the GBV hotline, disaggregated by gender/sex and age	0	45	21
Indicator 5.2.2: Number of beneficiaries (disaggregated by type of vulnerable group) reached with dignity kits in order to ensure stability of project reach to the most vulnerable	0	40	330



Welcome the stranger.
Protect the refugee.

HIAS Refugee Trust of Kenya (HRTK) - Kenya Office

Final Evaluation of HIAS Kenya project on: Community Based Prevention of Violence Against Refugee Women and Girls in Nairobi, effected from September 2019 – September 2022.

1. BACKGROUND AND CONTEXT

1.1 Description of the project that is being evaluated.

HIAS is a Jewish charitable, not for profit organization originally founded in response to the late 19th and 20th century exodus of Jewish emigrants from Imperial Russia. HIAS protects most at-risk refugees whose lives are in danger for being who they are. HIAS helps refugees rebuild their lives in safety, and advocates for the protection of refugees, ensuring that all displaced people are treated with the dignity.

HIAS began its Africa operations in 2002, launching the HIAS Refugee Trust of Kenya (HRTK). HRTK (also referred to HIAS Kenya) has its head office in Mimosa court, and operates in three sites Kayole, Kawangware and Eastleigh in Nairobi. These are refugee densely populated neighborhoods where most of refugee populations reside in Nairobi. HIAS serves the most at risk urban refugees including those who identify as LGBTI, persons with disability, victims of torture, single heads of households, the elderly, those with chronic illnesses, youth, unaccompanied and separated children, and women most at risk. HIAS implements 4 major programs that include (i) Mental Health and Psychosocial Support (MHPSS; (ii) Legal Protection; (iii) Economic Inclusion program and (iv) The Gender/GBV Prevention and Response program.

With funding from United Nations Trust Fund (UNTF), this project, *Community Based Prevention of Violence Against Refugee Women and Girls in Nairobi*, was to be implemented by HIAS Kenya over a three-year period. The project started in September 2019 and is planned to finish in September 2022. with the last activities scheduled for August 2022. The project sought

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to change the gendered drivers that make up the root causes of Violence Against Women and Girls (VAWG). These include men's control over decision making, stereotyped of masculinity and femininity, and condoning acts of VAWG. This project is a transformational individual behavior change intervention that used a group modality geared towards promoting gender equitable behavior and some reduction of physical

violence in the home. The behavior change methodology emphasizes personal and relational accountability.

Primary beneficiaries for this project included women and girls who are family members and intimate partners of men involved in the project discussion groups. Other primary beneficiaries included women and adolescent girls from the refugee community whose intimate partners changed their attitude and behavior based on the project's social media campaign. Women's group participants and intimate partners of men staff trained to facilitate EMAP intervention approach are also primary beneficiaries.

Secondary beneficiaries included the men who participated in men's discussion groups, Kenyan local administrators who were trained, and male refugee community members who interacted with the social norms campaign. HIAS staff men who were trained to be facilitators of EMAP are also secondary beneficiaries.

The project's goal is to contribute to refugee women and girls facing less interpersonal violence among the urban refugee population in Nairobi County by 2022. The project aims to achieve the following outcomes:

1. Refugee men have changed attitudes around power, gender, masculinities and male privilege and take action to prevent Violence against Women and Girls VAW/G.
2. Refugee women and girls demonstrate an increased understanding that IPV is a violation of their rights and feel confident reporting that violation.
3. Community systems enable refugee - friendly prevention of VAW/G through both improved access, pathways and strengthened community awareness of IPV.
4. Increased accountability of program staff implementing the project through changes in staff knowledge and attitudes on prevention of VAW/G.
5. HIAS is institutionally strengthened to sustainably respond to the COVID-19 pandemic and other crises while maintaining or adapting existing interventions to EVAW/G with a focus on the most vulnerable women and girls.

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

This transformational individual behavior change intervention includes a group-based methodology, community mobilization and diffusion strategy to expose community members to

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alternative social norms. The project builds on two evidence-based intervention models, SASA! and EMAP. The project implementation was guided by the following result chain

Project Goal	Refugee women and girls among the urban population in Nairobi experience less interpersonal violence by 2022.		
Outcome 1	Refugee men have changed attitudes around power, gender, masculinities and male privilege and take action to prevent IPV.	Output 1.1	Refugee men have increased knowledge about the root causes of IPV and ability to identify harmful attitudes and beliefs that lead to IPV.
		Output 1.2	Refugee men with increased knowledge about IPV start taking concrete steps to change unequal power relations within their own lives
Outcome 2	Refugee women and girls demonstrate an increased understanding that IPV is a violation of their rights and feel confident reporting that violation.	Output 2.1	Refugee women and girls have increased knowledge about the root causes of IPV and demonstrate increased ability to identify harmful attitudes and beliefs that lead to IPV.
		Output 2.2	Refugee adolescent girls exercise increased agency and voice through sharing their reactions, concerns, and priorities in a consultative process that informs the intervention.
		Output 2.3	Refugee women and girls demonstrate increased confidence to share their experiences with IPV, including reporting instances of IPV where applicable.
Outcome 3	Community systems enable refugee-friendly IPV prevention through both improved access pathways and strengthened community awareness of IPV.	Output 3.1	Refugee leaders have increased awareness on prevention of IPV
		Output 3.2	Civil society organization and government leaders have increased knowledge of IPV prevention principles and best practices.
		Output 3.3	Increased number of refugee men and women have access to community-level initiatives for advancing women's rights and eliminating IPV
		Output 3.4	Community members increase awareness and participation in reduction of IPV via
Outcome 4	Increased accountability of program staff implementing the project through changes in staff knowledge and attitudes on prevention of IPV.	Output 4.1	Program staff demonstrate increased understanding of IPV prevention and increased behaviors supporting IPV prevention throughout implementation.
		Output 4.2	Periodic assessment and ongoing monitoring data used to create increased actionable learning on prevention of IPV.
Outcome 5	HIAS is institutionally strengthened to sustainably respond to the COVID-19	Output 5.1	HIAS has put in place mechanisms to improve institutional resilience to crises including COVID-19, that ensures the stability of projects and sustainability of the organization [s] in the longer term.

	pandemic and other crises while maintaining or adapting existing interventions to EVAW/G with a focus on the	Output 5.2	HIAS has improved knowledge, skills, and capacities to maintain or adapt EVAW/G interventions and reach the most vulnerable women and girls while responding to the impact of the COVID-19 pandemic or other crises.
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1.3 The geographic context, of this project.

The Geographical scope of the study will be within Nairobi County, in Kayole, Eastleigh and Kawangware locations where HIAS has field offices.

1.4 Key partners involved in the project, including the implementing partners and other key stakeholders.

The project supported and complemented the work of the Kenyan Government, UNHCR and other actors targeting critical service gaps. HIAS worked with the Government of Kenya through the Refugee Affairs Secretariat (Now Department of Refugee Services(DRS) under the new Refugee act 2021)) and as National Gender Based Violence sub-cluster working group meeting (chaired by the National Gender and Equality Commission under the Ministry of Public Service, Youth and Gender Affairs). HIAS coordinated with UNHCR in different forums including monthly coordination meetings with the URPN and co-chaired the GBV Working Group as a lead implementing agency of GBV interventions in Nairobi. HIAS engages refugees as community workers and staff work closely with refugee community leaders to ensure their participation in community outreach and education activities. HIAS also partnered with the following organisations to provide various services; Nairobi Women’s Hospital – Gender Violence Recovery Centre, Kituo cha Sheria, Refugee Consortium of Kenya(RCK), Coptic Hospital, Nairobi Metropolitan Services, National Council of Churches of Kenya (NCCCK),

2. PURPOSE OF THE EVALUATION

2.1 Why the evaluation needs to be done

The purpose of the evaluation will be to understand how and to what extent project activities achieved the stipulated outcomes including contribution of the project towards the overall goal on EVAW/G. The findings of the evaluation will also contribute to learning on the best ways to achieve women’s empowerment and gender equality through operational and normative work.

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

As part of the programme, a final, independent, and summative evaluation will be carried out upon completion of implementation. Finding and recommendations from the evaluation will inform HIAS' future programming in related issues.

2.3 What decisions will be taken after the evaluation is completed

The findings will be used for strategic policy and programmatic decisions, organizational learning and accountability as well as for the identification of good practices on access to justice as a prevention mechanism to violence against women and girls. The targeted users of the evaluation are the HIAS, implementing partners, targeted project beneficiaries and other key stakeholders.

3 EVALUATION OBJECTIVES AND SCOPE

The primary objective of evaluation is to understand how and to what extent project activities achieved the stated outcomes and goal.

3.1 Scope of Evaluation:

- **Timeframe:** this evaluation will cover the entire project duration.
- **Geographical Coverage:** The project locations are in Nairobi County, which include Kawangware, Kayole and Eastleigh field offices
- **Target groups to be covered:** this evaluation will cover the target primary and secondary beneficiaries as well as broader stakeholders.

The evaluation is a final project evaluation. It will cover activities conducted in the project areas (within Nairobi County), that have taken place since the beginning of the project (September 2019) until the time of the evaluation (August 2022). The evaluation will be targeting primary and secondary beneficiaries listed under section 1.1, partners listed under section 1.5 as well as the project staff.

3.2 Objectives of Evaluation:

- **To evaluate the entire project** (from start to end date), against the effectiveness, relevance, efficiency, coherence, sustainability and impact criteria, as well as the cross-cutting gender equality and human rights criteria (*defined below*);
- **To identify key lessons and emerging good practices** in the field of ending violence against women and girls, for learning purposes (*this is defined under the knowledge generation criteria below*).
- **Provide actionable recommendations** to inform future program design for similar projects in this context
- Examine critical factors that enabled or hindered effective achievement of intended results

4 EVALUATION QUESTIONS

Evaluation Criteria	Mandatory Evaluation Question
<p>Effectiveness</p> <p><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>	<ol style="list-style-type: none"> 1. To what extent were the intended project goal, outcomes and outputs (project results) achieved and how? 2. Did the project achieve its objectives and expected results in ways that contribute to EVAWG? If so, how? 3. What were the major factors influencing the achievement or non-achievement of different the objectives? Reflection on various factors: internal and external, operational and programmatic, components of the project etc. 4. Were there differential results for different people? If so, how and why?
<p>Relevance</p> <p><i>The extent to which the project is suited to the priorities and policies of the target group and the context.</i></p>	<ol style="list-style-type: none"> 1. To what extent do the achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls? 2. Was the intervention designed in ways that respond to the needs and priorities of women and girls? If so, how? 3. To what extent are the objectives of the programme still valid? 4. To what extent is the theory of change still relevant? 5. Are the assumptions that went into the design of the project still relevant?
<p>Efficiency</p> <p><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>	<ol style="list-style-type: none"> 1. To what extent was the project efficiently and cost-effectively implemented? 2. Were activities cost-efficient? 3. Were objectives achieved on time? 4. Was the project implemented in the most efficient way compared to alternatives?
<p>Sustainability</p> <p><i>Sustainability is concerned with measuring whether the benefits of a project are likely to continue after</i></p>	<ol style="list-style-type: none"> 1. 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? 2. What were the major factors which influenced the achievement or non-achievement of sustainability of the programme or project?

<i>the project/funding ends.</i>	
<p>Coherence</p> <p>Measures the compatibility of the intervention with other interventions in a country, sector or institution.</p>	<ol style="list-style-type: none"> 1. Are the key interventions compatible with other interventions in the region? 2. Is there any potential duplication of efforts in this area?
<p>Impact</p> <p><i>Assesses the changes that can be attributed to a particular project relating specifically to higher-level impact (both intended and unintended).</i></p>	<ol style="list-style-type: none"> 1. To what extent has the project contributed to ending violence against women, gender equality and/or women’s empowerment (both intended and unintended impact)? 2. What real difference/changes has the project made to the lives of the target groups? 3. How many people have been positively affected by the project interventions? 4. How do the women, men and girls see the impact themselves and how do they describe the changes? 5. Were there equal impacts for different genders or were there any gender-related differences in engagement, experience and impacts? If so, why did these differential impacts occur?
<p>Knowledge generation</p> <p><i>Assesses whether there are any promising practices that can be shared with other practitioners.</i></p>	<ol style="list-style-type: none"> 1. To what extent has the project generated knowledge, promising or emerging practices in the field of EVAW/G that should be documented and shared with other practitioners? 2. What best practices can be learnt from the programme that can be applied to similar future programmes? 3. What should have been done differently and should be avoided in such programmes in future.
<p>Gender Equality and Human Rights</p>	<ol style="list-style-type: none"> 1. Cross-cutting criteria: the evaluation should consider the extent to which human rights based and gender responsive approaches have been incorporated through-out the project and to what extent. 2. 7.To what extent have impacts contributed to equal power relations between people of different genders and to changing of social norms and systems?

5 EVALUATION METHODOLOGY

5.1 Proposed evaluation design

The overall approach of this evaluation will be utility focused. The evaluation should adhere to a framework supporting human rights-based (HRBA), results-oriented and gender responsive monitoring and evaluation. Towards this purpose, the evaluation of the project will encompass the principles of gender equality and human rights, ensuring that the evaluation process respects these normative standards, and aims for progressive realization of the same by respecting, protecting, and fulfilling obligations of non-discrimination, access to information, and ensuring participation through a combination of consultative and participatory evaluation approach. The evaluation will be conducted in a transparent and participatory process involving relevant HIAS Kenya stakeholders and partners. The consultant will develop a detailed research methodology in consultation with HIAS program and M&E team. The following methodologies will be utilized, but should not be limited to:

- a. Desk review on EVAW/G: The consultant will review project documents and other relevant secondary data sources.
- b. Quantitative data to be collected through a representative survey.
- c. Qualitative approaches, such as focus group discussions and key informant interviews, participatory exercises and approaches will be used.

Triangulation of information gathered during the quantitative and qualitative research is crucial in this study, with reflection on how the findings relate to the secondary documentation including baseline evaluation, midterm monitoring data among other sources.

5.2 Proposed sampling methods

As part of the inception report, the evaluation team should develop a sampling frame based on several factors and not limited to; area and population represented, vulnerability. The evaluation team should uphold data quality, reliability and validity of data collection tools and methods and their responsiveness to gender equality and human rights; for example, the limitations of the sample (representativeness) should be stated clearly, and the data should be triangulated to ensure robust results.

5.3 Proposed data collection methods and analysis

The evaluation will use a variety of data collection methods and sources with a view to triangulate data. The methods should be participatory, ensure collection of disaggregated data, interrogate gender roles, be context and culturally sensitive and whenever possible mixed (qualitative and quantitative) such as desk reviews, semi-structured key informant interviews, Focus group discussions and face to face interviews among others, desk review of documents. Contribution Analysis will be used by the evaluation team to develop an overall ‘performance story’ for the project. The project’s initiatives contributions to outcomes and their internal

coherence with HIAS Kenya programmes and policies will be assessed against the theory of change.

5.4 Field visits

HIAS will organise field visits to facilitate data collection through; focus groups with women, men and girls’ groups; and semi-structured interviews with partners and surveys with beneficiaries. Coordination in the field including logistical support will be the responsibility of the HIAS Project Team in close collaboration with the consultant.

6 EVALUATION ETHICS

The evaluator/s must put in place specific safeguarding 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 are protected and participation in the evaluation does not result in further violation of their rights.

7 KEY DELIVERABLES OF EVALUATORS AND TIMEFRAME OF THE ENTIRE EVALUATION PROCESS

Stage of Evaluation	Key Task	Responsible	Number of working days required	Timeframe Example – please edit
Inception stage	Briefings of evaluators to orient the evaluators	Evaluation Task Manager	10 working days	First week
	Desk review of key documents	Evaluator/s		First week
	Finalizing the evaluation design and methods	Evaluator/s		Second week
	Submit draft Inception report. The inception report needs to meet the minimum requirements and structure (to be shared by HIAS), for HIAS’ review and approval.	Evaluator/s		By 22 July 2022
	Review Inception Report and provide feedback	Evaluation team,	5 working days	By 28 July 2022

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		Stakeholder Group and HIAS		
	Incorporating comments and revising the inception report	Evaluator/s	2 working days	By 30 July 2022
	Submitting final version of inception report	Evaluator/s		
	Review final Inception Report and approve	Evaluation Team, Stakeholder Group and HIAS	2 working days	By 2 August 2022
Data collection and analysis stage	Desk research	Evaluator/s	2 working days	
	Mission for data collection (visits to the field, interviews, questionnaires, etc.)	Evaluator/s	7 days	By 11 August 2022
Synthesis and reporting stage	Analysis and interpretation of findings	Evaluator/s	12 days	By 24 August 2022
	Preparing a first draft report. The Draft Report needs to meet the minimum requirements and structure (to be shared by HIAS), for HIAS' review and approval.	Evaluator/s		
	Review of the draft report with key stakeholders for quality assurance. The consultant will be responsible for presenting the preliminary results and collecting/incorporating feedback).	Evaluation team, Stakeholder Group and HIAS	5 working days	By 30 August 2022
	Consolidate comments from all the groups and submit the	Evaluation Task Manger		

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	consolidated comments to evaluation team			
	Incorporating comments and preparing second draft evaluation report	Evaluation Team	2 days	By 2 September 2022
	Final review and approval of report	Evaluation Team, Stakeholder Group and HIAS	5 working days	By 7 September 2022
	Final edits and submission of the final report. Report needs to meet the minimum requirements and structure (to be shared by HIAS), for HIAS' review and approval.	Evaluator/s	2 working days	By 9 September 2022

8 EVALUATION TEAM COMPOSITION AND REQUIRED COMPETENCIES

8.1 Evaluation Team Composition and Roles and Responsibilities

The core evaluation team will be composed of at least 2 lead evaluators with extensive experience in evaluation and/or in the thematic area of violence against women. The team will include an experienced Team Leader; a senior evaluation expert; ending violence against women expert (preferable with specialized knowledge in access to justice to end violence against women). The team should be gender balanced and include evaluators with experience in evaluating refugee-focused interventions in Kenya or in sub-Saharan Africa.

The combined expertise of the team should include:

- The lead consultant must have a background (at least university degree) in social sciences, community development or related field, with proven experience in evaluating SGBV projects.
- The EVAWG expert must have a background (at least university degree) in GBV or related field with 5 years professional experience in EVAW field, such as access to justice, public policies and legislation to end violence against women including National Action Plans, data collection, primary and secondary prevention, integrated services to address the needs of women and girls survivors of violence, institutional protocols; truth commissions, reparations.

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- Advanced evaluation expertise and experience in a wide range of evaluation approaches including utilization-focused, gender and human rights responsive, and mixed methods.
- Previous experience in conducting thematic evaluations, preferably for refugee-focused interventions and gender analysis.
- Experience/Knowledge of the relevant international/regional frameworks pertaining to violence against women, gender equality and women's empowerment, country level programming expertise and gender mainstreaming.
- Specialized knowledge in access to justice to end violence against women.
- Experience and knowledge in human rights issues, the human rights-based approach to Programming and gender responsive approach to evaluation.
- Excellent analytical, facilitation and communications skills; ability to negotiate with a wide range of stakeholders.
- Excellent verbal and written communication in English required.
- Balance in terms of gender is desirable.
- Knowledge and/or experience in Kenya or sub-Saharan Africa region is mandatory
- Experience with program design and theory of change, gender-responsive evaluation, participatory approaches and stakeholder engagement
- Experience in collecting and analysing quantitative and qualitative data as well as data visualization
- A strong commitment to delivering timely and high-quality results, i.e. credible evaluation and its report that can be used
- A strong team leadership and management track record, as well as interpersonal and communication skills to help ensure that the evaluation is understood and used.
- Good communication skills and ability to communicate with various stakeholders and to express concisely and clearly ideas and concepts
- Language proficiency: Excellent verbal and written communication in English required; good command of Kiswahili language is desirable.

Roles and Responsibilities

The Team Leader: Will be responsible for the overall delivery under the TOR. The team leaders will be responsible for undertaking the evaluation from start to finish and for managing the evaluation team under the supervision of HIAS evaluation team, for the data collection and analysis, as well as report drafting and finalization in English. In particular, the team leader will;

- Developing an inception report outlining the design, methodology and the criteria for the selection of the required resources and indicative work plan of the evaluation team.
- Assigning and coordinating team tasks within the framework of the TOR.
- Directing and supervising the research and analysis of secondary evidence, project documents, databases and all relevant documentation.
- Coordinating the conduct of case studies and preparing case study reports.
- Overseeing and assuring quality in the preparation of the case studies and taking a lead in the analysis of evaluation evidence.

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- Drafting the evaluation report and leading the preparation of specific inputs from designated team members, based on survey, KII, FGD, desk research, etc.
- Preparing for meetings with the evaluation team and other stakeholders to review findings, conclusions and recommendations.
- Leading the stakeholder feedback sessions, briefing the evaluation team on the evaluation through informal sessions and finalizing the report based on feedback from the evaluation team.
- Preparing evaluation brief, PPT presentation and working with the report editor, responding to final edits on the evaluation report
- Participating in a Webinar to present evaluation results.

EVAW expert: The senior violence against women expert will provide substantive advice on the integration of EVAW issues and analysis in evaluation. Under the overall supervision of the evaluation team leader, the EVAW expert will participate in the inception and the conduct phases of the evaluation. He/she will provide inputs to the inception report, participate in the qualitative data collection and analysis. In addition, he/she will contribute to the preparation of the final report and evaluation brief as necessary.

8.2 Required Competencies

Lead evaluator

- Must have a background (at least university degree) in social sciences, community development or related field, with proven experience in evaluating SGBV projects
- Evaluation experience at least 5 year in conducting external evaluations, with mixed-methods evaluation skills and having flexibility in using non-traditional and innovative evaluation 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
- Specific evaluation experiences in the areas of ending violence against women and girls
- Experience in collecting and analysing 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, i.e. credible evaluation and its report that can be used
- A strong team leadership and management track record, as well as interpersonal and communication skills to help ensure that the evaluation is understood and used.
- Good communication skills and ability to communicate with various stakeholders and to express concisely and clearly ideas and concepts
- Regional/Country experience and knowledge: in-depth knowledge of country Kenya is required.

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- Language proficiency: Excellent verbal and written communication in English required; good command of Kiswahili language is desirable.

EVAW expert:

- Must have a background (at least university degree) in GBV or related field with 5 years professional experience in EVAW field, such as access to justice, public policies and legislation to end violence against women including National Action Plans, data collection, primary and secondary prevention, integrated services to address the needs of women and girls survivors of violence, institutional protocols; truth commissions, reparations.
- Experience/knowledge on gender equality and women's empowerment issues, gender mainstreaming, normative frameworks to end violence against women at regional and global level; gender analysis and thorough knowledge of the related mandates within the UN system and particularly that of UN Women's including in the field of Women, Peace and Security.
- Knowledge of human rights issues, the human rights-based approach to programming, human rights analysis and related mandates within the UN system.
- Strong analytical, facilitation and communications skills and ability to negotiate amongst a wide range of stakeholders.
- Good communication skills and ability to communicate with various stakeholders and to express concisely and clearly ideas and concepts
- Regional/Country experience and knowledge: in-depth knowledge of country Kenya is required.
- Language proficiency: Excellent verbal and written communication in English required; good command of Kiswahili language is desirable.

9 MANAGEMENT ARRANGEMENT OF THE EVALUATION

HIAS National M&E team and the project team (project manager and project officer) will manage the evaluation team to ensure delivery of quality outputs on a timely basis. In addition, Director of programs, Country Director, and Regional MEAL and GBV Advisors will provide all the necessary technical support required throughout the evaluation process. HIAS will provide:

- Relevant documentation and background information.
- Contacts of relevant stakeholders and set up meeting(s).
- Staff to conduct the survey.
- Consolidated feedback/guidance on draft reports and strategy.

10. APPLICATION PROCESS AND REQUIREMENTS

Qualified and interested parties are asked to submit the following:

- Letter of interest in submission of a proposal

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- A detailed technical proposal clearly demonstrating a thorough understanding of this ToR and including but not limited to the following:
 - Consultant/Company Profile
 - Proposed methodology including areas of piloting, Sample Size Determination, and a proposed consultancy work plan.
 - Demonstrated previous experience in similar assignments and qualifications outlined in this ToR (with submission of the most recent report)
 - Proposed data management plan (collection, processing, and analysis).
 - Team composition and level of effort of each proposed team member (include CVs of each team member).
 - A financial proposal with a detailed breakdown of costs for the study quoted in Kenya Shillings.

Applications that fail to include these elements will not be considered.

HOW TO APPLY

We welcome applications from both individuals, partnerships, and firms. The Applications should be submitted to the following email: recruitment.kenya@hias.org by 5.00PM on 30th June 2022

Applications not bearing the requirements highlighted in this advert will not be considered.

Note: Only shortlisted candidates will be contacted. Late applications will not be considered.

HIAS Kenya is an equal opportunity employer, does not charge candidates for recruitment and dissociates itself from any entity defrauding candidates.

STAKEHOLDERS CONSULTED

STAKEHOLDER	NUMBER	M	F
HIAS Kenya Program Staff	6	4	2
Local administration - Police and Chiefs	4	2	2
Refugee community leaders	3	2	1
GBV Facilitators	4	2	2
Donor - UNTF	1		1