



**EXTERNAL EVALUATION OF THE INCLUSIVE PARTNERSHIP AGAINST  
VIOLENCE (InPAV) AMONG WOMEN AND GIRLS WITH DISABILITY  
Final External Evaluation Report Nepal  
November 2022 - February 2023**

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transformations

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### DISCLAIMER:

This Final Evaluation Report was produced by an external evaluation team. The analysis presented in this report reflects the views of the author and may not necessarily represent those of NDWA, its partners, UN Women or the UN Trust Fund to End Violence against Women.

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## Acronyms and Abbreviations

CEDAW	Convention on the elimination of all forms of discrimination against women
CSO	Civil Society Organization
DAC	Development Assistance Committee
EET	External Evaluation Team
FGD	Focus Group Discussion
GBV	Gender-Based Violence
GESI	Gender Equality and Social Inclusion
GTN	Green Tara Nepal
InPAV	Inclusive Partnership Against Violence Among Women and Girls with Disability
IEC	Information, Education and Communication
KII	Key Informant Interview
NDWA	Nepal Disabled Women Association
OECD	Organization for Economic Co-Operation and Development
OCCMC	One Stop Crisis Management Centre
RRF	Results and Resource Framework
TOR	Terms of Reference
TOT	Training of Trainers
UNTF	United Nations Trust Fund to End Violence against Women
UNCRPD	United Nations Convention on Rights of Persons with Disabilities
USD	United States Dollar
WGWDs	Women and girls living with disabilities

## Executive Summary

### Background

The project entitled 'Inclusive Partnership Against Violence Among Women and Girls with Disability' (InPAV) is a three-year project, implemented between October 2019 - September 2022, and extended until December 2022 due to the COVID-19 pandemic. The project is supported by the UN Trust Fund to End Violence against Women (UNTF), and collaboratively implemented by Nepal Disabled Women Association (NDWA) and Green Tara Nepal (GTN). The project reaches across 7 provinces, and 73 local governments of 27 districts. The InPAV objectives were, (i) To increase community awareness and capacity to combat violence against women and girls with disability, (ii) To strengthen governance and gender-based violence (GBV) mechanism [one stop crisis management center (OCMC), gender equality and social inclusion (GESI) focal point, justice committee disability coordination committee] to mainstream gender and disability, and (iii) To improve knowledge and evidence on violence against women and girls with disabilities (WGWDs) to influence policies and programs.

The current evaluation was commissioned to PSR Research and Consultancies in consortium with RAMP UP to undertake an independent external evaluation of InPAV. The intended audience will be UNTF, implementing partners, and stakeholders engaged in addressing violence against WGWDs. The key objectives of the external evaluation are:

1. To evaluate the entire InPAV project, and gauge its impact through Organization of Economic Co-Operation and Development (OECD) Development Assistance Committee (DAC) criteria of effectiveness, relevance, efficiency, sustainability, knowledge generation and impact, as well as the cross-cutting gender equality and human rights criteria so as to understand why and to what extent the life of women and girls with disability has changed through available policies and service provisions/mechanisms at various levels; and
2. To identify intended and unintended results and document key lessons that are obvious and tacit, as well as promising or emerging good practices in the field of ending violence against women and girls, for learning purposes and future projects.

### Evaluation Methodology

The external evaluation team (EET) developed an evaluation methodology framework in collaboration with NDWA and GTN to address the evaluation questions outlined in the terms of reference (TOR). The framework expanded upon the TOR questions and provided a wider interpretation of the issues. Major sources of data for the evaluation are information collected from key informant interviews (KIIs) and focus group discussions (FGDs) with primary and secondary project beneficiaries as well as NDWA and GTN team members, and project documents.

The sample for the external evaluation involves 8 local governments in 4 identified districts. In each district one Rural Municipality and Municipality each was selected to ensure diversity in terms of ecology, caste/ethnicities, and type of WGWDs. Representatives from OCMCs across all 7 provinces were also evaluated.

### Limitations of the Evaluation

1. The evaluation draws heavily on the opinions of NDWA team members involved in project implementation. In consultation with the InPAV team, stakeholders were purposively selected for KIIs and FGDs, based on their level of engagement with the project.

2. Due to the brevity of InPAV training/orientation sessions, there was recall bias among training participants.
3. The robustness of the evaluation is challenged by constraints in identifying sound bases for comparison, and difficulties in establishing a clear and reliable set of project data.

### **Key Findings**

1. The external evaluation finds InPAV has identified prevalence of GBV among WGWDs as high, and begins from the family and communities. However, efforts to address various forms of GBV faced by WGWDs remain nominal. As such, InPAV has proven very relevant in highlighting the need for its focus, and targeting stakeholders such as family, neighborhood and community members, society at large, service providers and policy makers.
2. InPAV has generated invaluable resources pertaining to WGWD and GBV, some of which are pioneering, e.g., the baseline and endline comparative data, OCMC assessment from WGWD perspectives, curriculum for teacher training in relation to WGWD and GBV, etc. which can be widely disseminated for policy influencing and advocacy.
3. InPAV evidences that social media and online counseling are effective means of reaching and supporting WGWDs facing various forms of GBV - such as emotional and verbal torture, physical abuse, and threats of sexual abuse for which they faced difficulties in seeking support whilst maintaining confidentiality, and addressing some of their challenges in accessing available resources.
4. Findings highlight InPAV effectiveness in capacitating and influencing government and non-government service providers on linking GBV and WGWDs to provide effective and disability/GBV sensitive services. However, without frequent refresher and monitoring to ensure the institutionalization of these initiatives there is a risk of the capacities being lost.
5. Major and effective outreach and support to WGWDs during the pandemic were made possible through flexible UNTF emergency support, and NDWA linkages and networking with various local and federal level policy makers. However, InPAV faced challenges in ensuring outreach to WGWDs at community levels primarily due to inadequate human resources at local levels, COVID pandemic and remote locations of some WGWDs.
6. Ensuring the presence of InPAV Focal Persons at Palika levels would have categorically ensured greater influencing and accountability of policy makers, and service providers who received training, and closer networking with and empowerment of WGWDs facing GBV or at risk of GBV.

### **Key Recommendations**

1. The EET recommends mapping be initially undertaken in collaboration with local governments to determine WGWD needs, especially in the local legal and social contexts. Mapping will facilitate development of targeted approaches within limited timeframe to ensure WGWDs' empowerment and access to information on resources and rights to socio-economic and legal services.
2. NDWA should establish linkages with other projects to support OCMCs in addressing WGWDs, either through referrals, refresher training, legal services and safe homes for WGWDs, for continuation of InPAV initiatives.
3. NDWA and related CSOs should regularly coordinate and lobby with local governments, especially prior to the budgetary planning sessions to assess and ensure fund allocation from local bodies' grants to the WGWD and GBV sector. Plans should include orientation to newly elected representatives.

4. InPAV experiences highlight that exiting a project such as InPAV at a stage when only basic understanding of GBV has been touched upon is a risk for both WGWD-GBV survivors and their family members. These should be overcome by linking with local level organizations with past GBV work experiences to scale up capacity of community knowledge on GBV-related information and existing available resources. Such interventions should also be of longer timeframe.



## 1. Background and Context

Nepal was ranked 110<sup>1</sup> by the Gender Inequality Index Rank and 106<sup>2</sup> by the Gender Global Gap Index Rank regarding the disparities against women and girls. According to the 2021 census, people with disabilities in Nepal are estimated to constitute 2.2 percent of the total population. Among the female population 2 percent have some disability, and among the male population 2.5 percent<sup>3</sup>. In a country where the prevalence data on different forms of violence against women is high (lifetime physical and/or sexual intimate partner violence: 25%<sup>4</sup>; physical and/or sexual intimate partner violence in the last 12 months: 11.2%; child marriage: 32.8%), conditions are worse for those who are socially, economically, politically marginalised and for those residing in geographic and demographically remote parts of the country. One such marginalised group are the women and girls with disabilities (WGWDs), a group that risks being overlooked in the advocacy for gender equality, and elimination of all forms of discriminations against women and girls. A number of studies underline that socio-economic barriers and their subordinate positions in society render them more vulnerable to violence<sup>5</sup>. Exact data on the type of violence and the population type among WGWDs could not be identified.

The purpose of the United Nations Convention on Rights of Persons with Disabilities (UNCRPD) is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.<sup>6</sup> The Nepal Disabled Women Association (NDWA) was established in 1998 adopting the values of fundamental rights and responsibilities provided by the Constitution of Nepal, and in alignment with the UNCRPD to support and empower women with disabilities<sup>7</sup>. The NDWA came to life with a realisation that in a socio-economic and political setting where women are already marginalised, their disabilities – irrespective of the type of disability, multiplies their vulnerabilities manifold. The organisation is continuously advocating mainstreaming of women’s disability issues as an integral component of strategies for sustainable development. However, there is a dearth of data on gender-based violence (GBV) faced by WGWDs; their vulnerability to various forms of GBV – emotional, physical, sexual, social, economic and cultural – have remained in the background with prioritisation being on voicing the rights of WGWDs, and promoting their access to services.

## 2. Context of the Project

The project entitled ‘Inclusive Partnership Against Violence Among Women and Girls with Disability’ (InPAV) is a three-year project covering the period October 2019 to September 2022, and also benefitted from a no cost extension until December 2022 due to the COVID-19 pandemic. The project was collaboratively implemented by NDWA and Green Tara Nepal (GTN) (an organization leading in assessment, studies and monitoring and evaluations), and financially supported by United Nations Trust Fund to End Violence against Women and Girls (UNTF). The consortium project has been undertaken to enable and empower women with disabilities to pursue and exercise their rights

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<sup>1</sup> The Gender Inequality Index is a composite measure reflecting inequality between women and men in three different dimensions: reproductive health (maternal mortality ratio and adolescent birth rate), empowerment (share of parliamentary seats held by women and share of population with at least some secondary education), and labour market participation (labour force participation rate). Source: United Nations Development Programme, Human Development Report 2020.

<sup>2</sup> The Global Gender Gap Index benchmarks national gender gaps on economic, political, education and health criteria. Source: World Economic Forum, the Global Gender Gap Report 2021.

<sup>3</sup> <https://nfdn.org.np/ne/news/disability-data/>

<sup>4</sup> Proportion of ever-partnered women age 15-49 experiencing intimate partner physical and/or sexual violence at least once in their lifetime. Source: Ministry of Health - MOH/Nepal, New ERA/Nepal, and ICF. 2017. Nepal Demographic and Health Survey 2016. Kathmandu, Nepal: MOH/Nepal, New ERA/Nepal, and ICF.

<sup>5</sup> Source: The socio-economic barriers for well-being of women with disabilities are plenty. They suffer violence as a result of their subordinate position in society as women with disabilities (Puri et al, 2015). The prevalence of violence seems to be higher for women with disabilities who belong from marginalized caste and ethnic groups (NIDA, NIDWAN & AIPP, 2018).

<sup>6</sup> <https://lawcommission.gov.np/en/wp-content/uploads/2021/03/Convention-On-The-Rights-Of-Persons-With-Disabilities.pdf>

<sup>7</sup> Terms of Reference

as per the UNCRPD. The focus of the project is to address the linkages between WGWDs and GBV, and empowering WGWDs, their family and community members, and service providers to identify and understand WGWDs’ risks to GBV and facilitate in accessing support.

Geographically, the project aimed to reach across the 7 provinces of the country, an appropriate move considering Nepal was entering only the fifth year of its historic transitioning from a unitary to federal system of government with three tiers of government, local, provincial and federal<sup>8</sup>. The project adopted a strategy to reach the local government - and thereby communities and grassroots level target groups, by leveraging upon the decentralization process, optimizing information dissemination, and ensuring service providers provide dignified services to WGWDs facing GBV. The spread out of the project area, with focus on local governments was to also enable advocacy and influencing at social, political and economic levels through the NDWA’s networks; it also aligned with rights provisioned by UNCRPD.

However, at the outset of InPAV project implementation, COVID-19 pandemic became a major deterrent to implementation of Year I activities. It limited in-person networking and outreach to community levels which was a core element of the project, described below in Section 3. Nevertheless, it is duly noted Outcome 4 was included in the InPAV results chain as result of COVID-19. These are elements that need to be taken into consideration as they influence the utility and accuracy of the evaluation, and findings also echo the impact of the pandemic on the results.

### 3. Description of the Project

InPAV is a 3-year project with a total 22,890 targeted project beneficiaries of WGWDs in 73 local governments of 27 districts, across 7 provinces of Nepal. A total grant of United States Dollar (USD) 465,807 was received from UNTF and total expenditure for the project was USD 394,517.00. Along with WGWDs, target beneficiaries included service providers such as police, health workers, counsellors, family members of WGWDs and the general public. Primary beneficiaries for the project were identified by NDWA networks across the seven provinces, where the project assigned Focal Persons in each province.

The key InPAV objectives were:

- i. To increase community awareness and capacity to combat violence against women and girls with disability,
- ii. To strengthen governance and GBV mechanism [one stop crisis management centre (OCMC), gender equality and social inclusion (GESI) focal point, justice committee disability coordination committee] to mainstream gender and disability, and
- iii. To improve knowledge and evidence on violence against WGWDs to influence policies and programs.

Following is a brief on the project objectives, location, partners and beneficiaries.

**Table 1: Project objectives, location, partners and beneficiaries**

<b>Organization</b>	<b>Nepal Disabled Women Association</b>
<b>Project title</b>	Inclusive Partnership Against Violence Among Women and Girls with Disability

<sup>8</sup>The Constitution of Nepal (2015) established Nepal as a federal democratic republic with three tiers of government – local, provincial and federal.

<b>Project duration</b>	October 2019 - September 2022, extended until December 2022
<b>Budget and expenditure</b>	Project Total Budget: USD 465,807.00 Project Total Expenditure: USD 394,517.00
<b>Geographical areas</b>	73 local governments of 27 districts, across 7 provinces of Nepal (Province 1, Madhesh Pradesh, Bagmati Pradesh, Gandaki Pradesh, Lumbini Pradesh, Karnali Pradesh, SudurPaschim Pradesh)
<b>Specific forms of violence addressed by the project</b>	Social, economic, verbal, physical, emotional, psychological violence, etc.
<b>Main objectives of the project</b>	i. To increase community awareness and capacity building ii. To strengthen governance and GBV mechanism iii. To improve knowledge and evidence on violence against WGWDs.
<b>Description of targeted primary and secondary beneficiaries</b>	<b>Primary Beneficiaries:</b> 6,100 WGWDs, from age 10 onwards, from 7 provinces and living in urban and rural areas selected on the basis of vulnerability, exclusion and risk of GBV; number of WGWDs of selected 73 municipalities calculated on pro-rata were considered the primary focus of the project. The goal of the project was to improve their access to mainstream GBV services, make them benefit from improved protection, justice and compensation mechanism, reduced stigma against WGWDs, and reduce physical and psychological inter-partner and non-partner violence against them.  <b>Secondary Beneficiaries:</b> 9,284 secondary beneficiaries targeted, including 301 community members, 5,748 general public, 140 teachers, 77 CBOs, 30 media, 27 police, 27 women children and senior citizen cells, 77 Judicial Committees, 27 OCMCs, counsellors, and 2,830 men and boys. Secondary beneficiaries were selected because of their forefront role of managing the risk of GBV in local governance set up. This project also aimed to enhance their knowledge and skills through trainings and resources provided by the project to establish GBV mechanisms and support the WGWDs in mainstream development.
<b>Key assumptions of the project</b>	The strategy of the project is based on the assumption that raising awareness and improving knowledge on challenges faced by WGWDs can lead to influencing policies and strengthen GBV mechanisms at local level to eventually better support WGWD's rights and access to justice.
<b>Key implementing partners and stakeholders</b>	UN Women - UN Trust Fund to End Violence against Women and Green Tara Nepal (GTN)

#### **Primary and Secondary Beneficiaries Table:**

The InPAV project builds on the strength of the key implementing partners, namely, NDWA and its implementing partner GTN. NDWA has worked across all sections of the Nepali communities to support women and girls living with disabilities, and is leading the advocacy and awareness activities among communities, government counterparts and stakeholders at local levels. Local and culture-specific violence prevalent in each province, such as child marriage in Sudur Paschim Province and Madhesh Pradesh are also addressed along with other various forms of violence. GTN, with its background in research, publications, advocacy, training and social mobilization through a holistic community development approach is leading the assessments, studies, monitoring and evaluation of the project.

#### **4. Purpose of the Evaluation**

The current assignment is to undertake an external evaluation of the InPAV's 3 years of project implementation. The consortium of PSR Research and Consultancies and RAMP UP is commissioned to collect information and evaluate how the awareness, knowledge, attitude, and practices, experiences of violence as well as access and utilization of services have changed over the period of time. The External Evaluation will document evidences of changes, the rationale behind the same, what has worked, what has not worked, as well as document the learnings to be used as evidence for course correction and further planning for implementing organisations through lessons learnt from the External Evaluation.

The evaluation has been undertaken following completion of the project. The endline was also just completed, and in some instances obtaining the endline data for evaluation was delayed. Since the Focal Persons at field level were members of the NDWA network it was possible to reach out to them despite conclusion of InPAV. However, some team members - for instance in GTN had already left, but despite this provided time to collaborate, and share relevant information.

The decisions to be adopted following evaluation will depend on the key implementers, NDWA and GTN. Based on the nature of the project and findings generated, the External Evaluation Team (EET) is of the opinion these can be utilized by NDWA in its ongoing programs, while both NDWA and GTN can build on the knowledge resources for strategic policy advocacy, awareness raising across WGWDs and related stakeholders, and to promote accountability of services providers. The UNTF can also utilize the findings to support future WGWD-related violence against women (VAW) programming in the country, and where relevant other parts of the world.

#### **5. Evaluation Objectives and Scope**

##### **5.1 Evaluation Objectives**

The key objectives of the external evaluation, as per the Terms of Reference (TOR), are outlined below:

- To evaluate the entire InPAV project, and gauge its impact through Organization of Economic Co-Operation and Development (OECD) Development Assistance Committee (DAC) criteria of effectiveness, relevance, efficiency, sustainability, knowledge generation and impact, as well as the cross-cutting gender equality and human rights criteria so as to understand why and to what extent the life of women and girls with disability has changed through available policies and service provisions/mechanisms at various levels;
- To identify intended and unintended results and document key lessons that are obvious and tacit, as well as promising or emerging good practices in the field of ending violence against women and girls, for learning purposes

##### **5.2 Scope of Evaluation**

The external evaluation covers the entire InPAV project duration, from October 2019 to September 2022 and extended till December 2022. Close discussions were held with NDWA and GTN during selection of sample location. In terms of target location for the evaluation, out of InPAV's total target of 7 provinces 4 were identified (Province 1, Madhesh Pradesh, Bagmati Province and Karnali Province), and from within these provinces 4 districts and 8 local governments were selected for the evaluation. For ensuring inclusion, the 4 districts ensured geographical diversity while local government included both rural and urban areas.

As per the TOR specifications all 7 One Stop Crisis Management Centres (OCMCs), i.e., one per province was sampled. Additionally, two OCMCs were included following NDWA request to ensure inclusion and avoid information loss in areas where they had focused.

**Geographic location:** The evaluation covers information from both primary and secondary beneficiaries. Information from primary beneficiaries is generated from the following: (i) Key Informant Interview (KIIs) with WGWDs randomly identified based on the list provided by NDWA and/or local government officials; (ii) Focus Group Discussions (FGDs); and (iii) baseline and endline survey data. Secondary beneficiaries such as teachers, government officials, elected representatives, police, OCMC representatives, parents of WGWDs and civil society organization (CSO) representatives were also administered interviews for the evaluation. The list of interview respondents was also provided by NDWA/GTN based on their high intervention areas.

In addition to the 4 districts mandated by the TOR, upon request by the NDWA the external evaluation team (EET) also administered interviews in Kathmandu with OCMC focal persons and police personnel. The request was made as these were locations where more input was made and changes visible.

**Challenges:** Although the InPAV project faced COVID-19 challenges during initial implementation phase, the EET did not encounter pandemic related challenges. However, budgetary constraints proved to be a major challenge as it was not possible for the core team to visit and monitor the target districts and Palikas-municipalities and rural municipalities - identified for the evaluation. The EET team was only able to visit some of the closer districts such as Kavre district, nearby Kathmandu, to undertake FGDs and KIIs, and engaged some the Endline Survey field researchers to administer external evaluation FGDs and KIIs<sup>9</sup>. The remaining were administered online, either via phone calls, WhatsApp, Viber or Zoom.

Identifying WGWD respondents proved another major challenge. Though most InPAV Focal persons provided the list of WGWDs from their corresponding localities – which they obtained from respective local governments, since these lists were not updated field researchers were unable to identify many of the registered WGWDs. Additionally, lack of accurate data on WGWDs, limited timeframe for field researchers to complete data collection, WGWDs' households being situated in geographically distant areas, lack of public transportation in some instances or public vehicles which plied the routes only once a day, and budgetary restriction for the EET preventing hiring of transportation proved extremely challenging factors.

## 6. Evaluation Questions and Criteria

Following literature review and review of the evaluation questions below (Table 2), the core EET examined the various stakeholders to be reached out to ensure project impacts at different levels were not overlooked. Next, NDWA and GTN were shared the initial list of respondents to be interviewed, and their feedback collected on additional respondents required.

A core criterion agreed upon by the EET was to ensure promising and good practices, intended and unintended changes which took places, and measures adopted for overcoming challenges should not be missed out as these would prove vital for NDWA, GTN and other organizations engaged in WGWD and GBV to learn from. Thus, a total of five types of respondents were identified (OCMC,

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<sup>9</sup> InPAV endline survey and evaluation were taking place at almost the same time and GTN was agreeable to the proposition to engage the enumerators when they were in some of the evaluation districts.

government officials, InPAV central office and district office staff and other stakeholders) which resulted in the administration of 48 KIIs and 8 FGDs, using five separate evaluation tools. Details are available in section 8.3.

While Table 2 questions would be relevant for NDWA and InPAV team members due to their knowledge of the project, it was acknowledged that many of the stakeholders - such as OCMC representatives, teachers, elected representatives, maybe unaware of the UNTF-specific project interventions. Hence, separate questions were added to generate basic information and understanding on GBV and WGWD related information, knowledge of GBV facing WGWDs, existing support services and any changes visible during the project period, changes in behavior of services providers, impact of the training/orientation sessions, and so forth. All these were consolidated and reviewed to contribute to the evaluation criteria.

Since COVID-19 had an impact on the project implementation, the EET has taken due note during the overall process of designing the data collection tools, and data analysis.

Table 2 represents the Evaluation Criteria and Questions drawn from the Terms of Reference.

**Table 2. Evaluation Criteria and Questions**

<b>Evaluation Criteria</b>	<b>Mandatory Evaluation Question</b>
<b>Effectiveness</b> <i>A measure of the extent to which a project attains its objectives / results (as set out in the project document and results framework) in accordance with the theory of change.</i>	1. To what extent were the intended project goal, outcomes and outputs (project results) achieved and how?
<b>Relevance</b> <i>The extent to which the project is suited to the priorities and policies of the target group and the context.</i>	2. To what extent do the achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls?
<b>Efficiency</b> <i>Measures the outputs - qualitative and quantitative - in relation to the inputs. It is an economic term which refers to whether the project was delivered cost effectively.</i>	3. To what extent was the project efficiently and cost-effectively implemented?
<b>Sustainability</b> <i>Sustainability is concerned with measuring whether the benefits of a project are likely to continue after the project/funding ends.</i>	4. 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?
<b>Impact</b> <i>Assesses the changes that can be attributed to a particular project relating specifically to higher-level impact (both intended and unintended).</i>	5. To what extent has the project contributed to ending violence against women, gender equality and/or women's empowerment (both intended and unintended impact)?
<b>Knowledge generation</b> <i>Assesses whether there are any promising practices that can be shared with other practitioners.</i>	6. 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?
<b>Gender Equality and Human Rights</b>	7. Cross-cutting criteria: the evaluation should consider the extent to which human rights based and gender responsive approaches have been incorporated throughout the project and to what extent.

## 7. Evaluation Team

The evaluation was undertaken by an independent evaluation team comprising of a Team Leader/GBV/Research Expert and another Co-Lead/GESI Expert who were supported by experienced qualitative researchers. The Team Leader, Ms. P.S. Rana was responsible for overall designing of tools, analysis and at the same time ensuring adequate feedback loops and adaptations as required

without jeopardizing the independence and credibility of the analysis. She was responsible for building quality assurance during each analysis phase - from design to field work, to utilization/uptake of the findings and recommendations. She ensured use of various methods of quality assurance during different phases, such as back check, scrutiny and inter-reliability among field researchers.

The Co-Lead, Ms. A. Pradhan worked closely with Team Leader in undertaking literature review, design of tools and conducting interviews. She also coordinated with EET team members, and supported in the data collating and analysis from interviews, and overall management and liaison with NDWA and GTN. The team was supported by Ms. R.D.B. Shrestha who was responsible for coordination with field team members, coordinating with identifying and connecting with respondents, and facilitating the financial coordination. Their resumes are available in Annex 3.

At the field level, the EET was supported by NDWA team for coordination and communication for data collection. NDWA's seven province coordinators contributed substantially in coordinating with relevant stakeholders for their times.

Finally, a total of 6 field researchers (Ms. Goma Lama, Ms. Jamuna Rai, Ms. Kriti Gautam, Ms. Manju KC, Ms. Pavitra Gurung and Ms. Sharmila Rijal), primarily employed for the endline survey were also engaged in administering interviews and facilitating FGDs in the evaluation districts. The EET worked with the NDWA/GTN evaluation management team to build consensus around the evaluation scope and process.

## 8. Evaluation Methodology

### 8.1 Proposed Evaluation Design

The evaluation covered the period from 25 November 2022 to 28 February 2023. The workplan and deliverable dates were designed in line with the proposal and in coordination with GTN. In hindsight, the EET notes identifying WGWD respondents at field level requires more time and financial resources as compared to identification of other general respondents. It was a lesson learnt that special consideration to time and resources is critical while working with persons with disabilities.

**Table 3: Work Plan (with key deliverables and timeframes)**

Activities	Nov.	Dec.	Jan.	Feb.	Deliverables
Literature Review					
Evaluation Inception Report					Inception Report
Training of Field Researchers					
Data collection / Field Work					Progress Report
Data analysis					
Draft Evaluation Report					Draft report
Final Evaluation Report					Final report

To initiate the assignment, the EET developed an evaluation methodology framework in collaboration with NDWA and GTN to address the evaluation questions outlined in the TOR and ensure the utility of the research for organizational planning. The framework expanded upon the TOR questions and provided a wider interpretation of the issues. The framework indicated the

proposed data source and the specific evaluation methodologies (document review, key informant interview, field visits, etc.) to address each evaluation question. The framework served as a means of verifying whether sufficient evidence was gathered for each evaluation criterion. The evaluation methodology was developed under the assumptions that, (i) Full documentation would be available to the EET and was of appropriate quality to enable them to make objective assessments on the achievements of each of the evaluation criteria (effectiveness, relevance, efficiency, sustainability, impact, knowledge generation, gender equality and human rights); (ii) EET would be able to interview a range of key stakeholders, including program management and service delivery stakeholders, WGWDs and other key stakeholders identified; (iii) Appropriate data was available to enable the EET to assess effectiveness and impact of the program; (iv) Key stakeholders give their consent to be interviewed and are willing to discuss sensitive evaluation issues; (v) EET is able to conduct an appropriate range of field visits and will have access to service delivery stakeholders, OCMC representatives, key stakeholders and project targets.

The evaluation was conducted based on the knowledge and availability of the baseline and endline survey data. Considering the evaluation may be compromised by the constraints in identifying sound bases for comparison, and the difficulties in establishing a clear and reliable set of project data, the EET sought to mitigate these limitations and minimize possible biases through data triangulation. This was achieved through (i) perceptions (elicited through interviews with internal and external stakeholders), (ii) validation (through FGDs and debriefing meetings with GTN/NDWA staff; direct observations during field visits; and beneficiary assessments) and (iii) documentation (review of program documentation, baseline and endline findings, relevant policies and strategies, and other external documents).

## **8.2 Data Sources**

The major sources of data for the evaluation are information collected from KIIs from NDWA and GTN team members at central and provincial levels, primary and secondary project beneficiaries, project documents, namely, information pertaining to project outputs, progress reports and annual reports, quantitative data consolidated from these reports, as well as baseline and endline survey reports. Information from FGDs is also sourced to validate information from various interviewees. A full list of documents consulted is in Annex 4.

## **8.3 Description of Data Collection Methods and Analysis**

Three methods of data collection were employed to conduct the evaluation. These are:

- i. Document review: The EET core team initially conducted a desk review of documents at global and national levels, along with other project related documents such as annual workplans, baseline reports, progress reports (1 October 2019 to 31 March 2022), annual reports (reports (1 October 2019 to 30 September 2022), rapid assessment report, OCMC reports, etc. The progress A list of references and documents is included as Annex 4.
- ii. Key informant interviews: The EET conducted a series of KIIs (48) with selected key informants and stakeholders across the 4 districts, and 8 municipalities and rural municipalities. For the purpose of the KIIs a generic semi-structured KII guide was developed, which was shaped by the key evaluation questions (Annex 2). From the generic guide, separate specific questions were developed for particular stakeholders being interviewed. Identified respondents included (detail in Annex 6):
  - a. OCMC representatives (9)
  - b. Government officials (10)



- c. InPAV district partners / focal person (6)
- d. InPAV Focal persons (7)
- e. Other stakeholders (parents of WGWDs, counselors, lawyers, teachers, police, etc.) (17)
- f. NDWA/GTN management team – central and provincial levels (5)

For the purpose of anonymity of respondents, the names and organizations of respondents are not included. Only their gender, district and date of interview are included in the annex.

iii. Focus group discussions: The generic semi-structured tool used for the KIIs was adapted to target the FGD participants. A total of 8 FGDs with 75 participants were conducted with the following:

- a. Women and Girls living with Disabilities (4 FGDs)
- b. Mixed group of parents of WGWDs, community leaders non-governmental organizations (NGOs), and community based organizations (CBOs) (4 FGDs). Only a few male respondents (9 out of 75) attended these FGDs.

**Table 4: Number and category of FGD participants**

Category of FGD	Number of women participants	Number of girl participants (under 18 years)	Number of male participants
Women and Girls living with Disabilities in Koshi Province	10	--	--
Mixed Group(teachers, lawyers, counselor, beneficiaries, government personnel, Koshi Province	10	--	1
Women and Girls living with Disabilities in Madhes Pradhesh	7	2	--
Mixed Group(teachers, lawyers, counselor, beneficiaries, government personnel, Madhes Pradhesh	3	--	5
Women and Girls living with Disabilities in Bagmati Province	6	1	--
Mixed Group(teachers, lawyers, counselor, beneficiaries, government personnel, Bagmati Province	9	--	--
Women and Girls living with Disabilities in Karnali Province	10	1	--
Mixed Group(teachers, lawyers, counselor, beneficiaries, government personnel, Karnali Province	7	--	3
<b>Total</b>	<b>62</b>	<b>4</b>	<b>9</b>

Field visits to selected sites and OCMCs: The evaluation team visited sample districts selected for the evaluation to assess the quality of services provided in response to the needs of WGWDs, and the training provided to service providers. Of the total sample districts and municipalities (see sub-section 8.4) the EET visited Surkhet (Birendranagar) and Kavre districts (Dhulikhel and Panauti) while field researchers visited Morang (Sundarharicha, Biratnagar), Dhanusha (Bateshwor, Dhanushadham), and Surkhet districts (Birendranagar, Barahataal). One visit per target district was conducted and included KIIs and/or FGDs with OCMCs, WGWDs, elected representatives, NGOs and CBOs. Budgetary and time constraints prevented the EET from visiting remaining locations. Hence,

data was also collected via phone, or online. The core team visited the nearby district of Kavre district for KII with OCMC representatives and FGDs with mixed stakeholders.

During and upon data collection, review meeting of EET were undertaken to determine key findings, observations and gaps/challenges identified. Findings from the data collected (FGD, KIIs, observations, document review, baseline and endline data) were collated in the Analysis Framework to undertake the analysis. These were cross-checked to obtain preliminary key findings. Questions set in the Evaluation Framework guided the interpretation and analysis of the data gathered. Triangulation and analysis began following completion of all interviews and group discussions, and involved consolidation of evidence and identification of key preliminary findings. Baseline and endline quantitative data were compared and reviewed for analysis. To ensure the validity of the baseline and endline data, the EET closely reviewed the sample size, sampling techniques and the study variables used by the two quantitative studies to ensure their comparability. The EET team notes slight variance in the baseline and endline sample (baseline: 1294; endline 1302). Another variance is WGWDs from 18 years were included in the endline, while the baseline included the WGWDs from 15 years onwards. Regarding data collection, unlike the baseline study the endline did not include any WGWDs as field researchers. Aside for these the sampling units (WGWDs) and sampling techniques remained the same. The questionnaire used in the baseline was utilized for the endline with only slight adaptations. Both baseline and endline studies included the same dependent variable (violence experience) and independent variables (demographic factors, disability and health-related variables, socio-economic status, violence related variables and individual barriers). The limited timeframe and resources served as the major deterrent. Kobo ToolBox was the application utilized for data collection, and quality control was embedded within the questionnaire as well as the overall data collection process, followed by its coding, and analysis using SPSS data management software.

Regarding qualitative data, the EET ensured data was transposed in an analytical framework for qualitative analysis. Median and recurrent responses were identified for qualitative measurement, with the level of participation of stakeholders during the evaluation process, and field level perceptions of field researchers duly taken into account by the EET during analysis. De-briefing meetings with field researchers following completion of fieldwork supported the analysis. These contributed to determining key findings, conclusion and recommendations.

#### **8.4 Description of Sampling**

The sample for the external evaluation is 8 local governments in 4 identified districts. Random sampling approach was adopted to select the districts (4 out of total 14 districts). Districts from different provinces were sampled. In each district one Rural Municipality and Municipality each was selected, i.e., 8 rural municipality/municipality of project districts (8 out of 28 local governments). For the purpose of selecting the districts and local governments the EET identified selection criteria, and following consultations with NDWA, the below districts and local governments were sampled (Table 5). Upon request from NDWA, Kathmandu was also sampled (KIIs administered) as it was identified as a district with high project contributions. Selection of municipality and rural municipalities ensured diversity in terms of topography, caste/ethnicities, type of women with disabilities and availability of support systems. Selection was also made based on availability of OCMC in respective location. To reach the required 7 OCMCs, the team also visited 3 other OCMCs in the remaining provinces while 2 additional OCMCs were identified based on NDWA request.

For the purpose of selecting sample respondents, the EET held extensive consultations with NDWA and GTN to identify key stakeholders engaged during project implementation. While OCMC representatives from each target OCMC were ensured, a balanced representation from across the

local governments and districts was confirmed. NDWA and GTN provided the list of respondents, and final selection was made by the EET.

**Table 5. Districts, Municipalities and Rural Municipalities, and their Selection Criteria**

Category	District Names (finalized in consultation with NDWA/GTN)	Selection criteria	Ecological Distribution
<b>Districts</b>	Morang	i. Ecological distribution	Plain/Terai
	Kavre	ii. Provincial distribution	Hill/Mountain
	Dhanusa	iii. Inclusion of type of women with disability	Plain/Terai
	Surkhet	iv. Inclusion of diverse caste/ethnicity	Hill/Mountain
		v. Project area geography	
		vi. Consensus with NDWA/GTN team	
<b>Local government / Municipalities</b>	Sundarharaicha Gaun Palika, Biratnagar Palika	vii. Ecological distribution viii. Inclusion of type of women with disability	Plain/Terai
	Dhanusadham Palika, Bateshwor Gaun Palika	ix. Inclusion of diverse caste/ethnicity	Hill/Mountain
	Birendra Nagar Palika, Barahataal GaunPalika	x. Project area geography xi. Consensus with NDWA/GTN team	Plain/Hill
	Madandeupur Gaun Palika, Panauti Palika		Plain/Hill

## 8.5 Description of Ethical Considerations in the Evaluation

The evaluation included documentation of consent procedures for stakeholders and/or beneficiaries/target groups interviewed or consulted. To this end, the EET developed a safeguard plan to ensure the rights of the respondents are protected and participation in the evaluation did not lead to violation of respondents' rights. The EET also conducted rigorous orientation to Field Researchers engaged in data collection to ensure the following:

- i. Respondents understood the assessment's purpose, objectives and the intended use of findings
- ii. Researchers' sensitivity to cultural norms and disabilities during interactions with all respondents. This was ensured through a 2-day orientation provided to the study team prior to moving to the fields. The orientation included background on InPAV project, information sharing on various forms of disabilities, terminologies to be utilised during data collection, sensitivity to be adopted during interviews with WGWDs and/or their parents/guardians, and potential challenges that may arise during data collection. The researchers were also provided a guideline addressing these key elements.
- iii. Study team respected respondents' rights and welfare by ensuring informed consent and rights to confidentiality before interviews, and anonymity with regards to information shared
- iv. Respondents had the right to refuse interview or leave at any time. Interviewers were to explicitly state and clarify these before administering interviews.

- v. Field researchers possessed information on the local NDWA and OCMC contact numbers as referrals, where required.
- vi. To ensure FGD venues were disability-friendly NDWA coordinators were requested to identify venues suitable and accessible to the diverse WGWDs who would be participating.
- vii. Protocols for research on children, and WGWDs who are unable to respond on their own, i.e., to ensure consent from parents/guardians and their signatures on consent forms, information sharing to both parents/guardians and children on the evaluation objectives, and respecting confidentiality were duly addressed.

## **8.6 Limitations to the Evaluation Methodology**

While undertaking the evaluation, some limitations that came up are as follow:

- i. The evaluation drew heavily on the opinions of NDWA team members involved in the implementation of the project. In consultation with the InPAV team, stakeholders were purposively selected for KIIs and FGDs, based on their level of engagement with the project; the EET acknowledges these opinions may be, at least partly, subjective.
- ii. The progress reports provided to the EET cover the period from 1 October 2019 to 31 March 2022, while the two annual reports cover the periods 1 October 2019 – 31 September 2020, and 1 October 2020-30 September 2021. The team notes data from the remaining project period is not included.
- iii. Due to time and budgetary constraints, it was not possible to visit all the locations, including the OCMCs. In-person consultations by the core team would have provided a more nuanced understanding of the project effectiveness and impacts.
- iv. The brevity of InPAV training/orientation sessions, recall bias among training participants (e.g. teachers, parents) and absence of refresher training prevented interviewees from providing in-depth information on the training effectiveness.
- v. Moreover, the robustness of the evaluation is challenged by constraints in identifying sound bases for comparison, difficulties in establishing a clear and reliable set of project data, and possible biases of key stakeholders. Triangulation of methods has been used to minimize this.

## **9. Findings and Analysis per Evaluation Question**

In line with the TOR, the review focuses on effectiveness, relevance, efficiency, sustainability and impact, outcomes and their relevance for the various stakeholders. These strategic issues are supplemented with an assessment of the performance of the project and retention of the successful attributes of the project after its phase-out from December 2022 onwards. Recommendations emphasize the replication and sustainability needs and will depend to some extent on decisions taken on the basis of the recommendations.

### **9.1 Effectiveness**

This section addresses the evaluation TOR question under ‘effectiveness’: To what extent were the intended project goal, outcomes and outputs (project results) achieved and how? It also looks into the main factors that contributed to the realization or non-realization of the outcomes, the major

risks and constraints faced by the project as well as practical difficulties, challenges faced during the implementation.

9.1.1 Observation

9.1.1.1 Outcome/Output level progress

**Outcome 1: Increased community awareness and capacity to combat VAWGWDs**

**Table 6. Outcome 1: Increased community awareness and capacity to combat VAWGWDs\***

Outcomes/Outputs and Indicators	Target	Achievement (01/10/2019 – 31/03/2022)	Remarks
<b>Outcome 1: Increased community awareness and capacity to combat VAWGWDs</b>			
<b>Outcome Indicator 1.1: Percentage of awareness level and knowledge of community will be increased on VAWGWDs, disability, GBV prevention and reporting mechanism.</b>	11,445	17,387	<ul style="list-style-type: none"> <li>• Distribution of 163 flex and 15 hoarding board – outreach to 1,780 persons reached.</li> <li>• 4,300 posters/stickers placed at public places - 12,900 people reached.</li> <li>• 1,417 people are trained about GBV and disability through training and orientation. (Source: Year 3 Progress report)</li> </ul>
<b><i>Output 1.1: Engage communities (Self Help groups, Concern network, CSOs, Local Media, Police/ Women Cell, OCMC, Justice committees, counselor and teachers) in gender and disability focused multimedia campaign to sensitize on risk, needs, rights and laws about VAW that will enable communities to prevent and protect WGWDs</i></b>			
<b>Output Indicator 1.1: Percentages of women and girls with disability who have the knowledge on all forms of GBVs</b>	11,446	14,690	<ul style="list-style-type: none"> <li>• Distribution of visual aid (178: 163 flex +15 hoarding board) – expected outreach 1,780 persons (10 persons per visual aid type)</li> <li>• Placement of 4,300 posters/stickers in public places – outreach to 12,900 people.</li> <li>• Broadcasting of 3 types of radio jingles – expected outreach – 1.4 million persons (Source: Year 3 Progress report)</li> </ul>
<b>Outcome Indicator 1.2: Number of lobby and advocacy conducted at local level to mainstream gender and disability in policy and program</b>	3	3	<ul style="list-style-type: none"> <li>• Celebration of International Women's day in 7 provinces</li> <li>• Publication of short GBV videos on social media.</li> </ul>

- Budget allocation budget for disability where WGWDs are incorporated.
- Knowledge and skills provision for accessible physical infrastructure guideline in Karnali province health centers.  
(Source: Year 3 Progress report)

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***Output 1.2: Advocacy with local government for creating an enabling environment and support system for WGWDs***

<b>Output Indicator 1.2: Number of lobby and advocacy conducted at local level to mainstream gender and disability in policy and programs</b>	11	11	<ul style="list-style-type: none"> <li>• Provincial focal persons (7) attend judicial committee and disability coordination committee meetings at local levels.</li> <li>• GBV Manager and NDWA board members (3) visit networks, alliances and federal government for reducing GBV among WGWDs, and to promote judicial services. (Year 3 Progress report)</li> </ul>
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**Outcome Indicator 1.3: Capacity of WGWDs, their organizations and LGs officials developed to promote and act as GBV Champions.**

***Output 1.3: Develop capacity of WGWDs, representatives of LGs of 77 rural/ urban municipalities and CSOs of 27 districts to advocate, lobby and claim services to prevent and end violence.***

<b>Output Indicator 1.3: Developed capacity of WGWDs</b>	1,400	1,417	<ul style="list-style-type: none"> <li>• TOT to 144 participants for reducing GBV in WGWDs.</li> <li>• 41 local units conduct 1-day GBV orientation following TOT - 1,154 participants.</li> <li>• TOT for school teachers to promote gender and disability in 5 provinces - 119 participants. (Year 3 Progress report)</li> </ul>
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\* Outputs and targets sourced from UNTF\_NDWA Results and Resources Framework (RRF)

\*\* Unable to confirm through evaluation KIIs and FGDs.

**Awareness raising:** The EET was provided with various IEC materials developed by the InPAV project. The EET well appreciates the quality of the IEC materials, and their appropriateness in awareness raising on WGWDs due to the type of information these contained.

Reviewing the output level progress, Output indicator 1.1 involves increased knowledge of WGWDs on all forms of GBV. Computing the data of the three Progress reports 1, 2 and 3, findings indicate 14,690 WGWDs and community members were reached by 2022 with the help of visual aids such as flex, hoarding boards, posters and stickers. Broadcasting of jingles via radios have reportedly had a wide outreach, with an estimated reach of 1.4 million persons at large. (Table 6: Details on target vs. achievement)

Comparative the baseline and endline survey findings social media network (Table 7) is identified as an effective tool. Similarly, a total of 107 endline participants (out of the 1,302) indicate NDWA as the source of information (baseline: 0% vs. endline: 8.2%). There is also slight increase on the information WGWDs received from radio/TV programs (baseline: 56.9% vs. endline: 60.8%). However, there is decline in information received from newspapers/hoarding boards (baseline: 21.1% vs. endline: 4.1%), as well as from family members, health personnel and teachers.

Interviewee responses during the evaluation did not generate information regarding knowledge of these awareness initiatives. None of the selected FGDs and KIIs participants could recall the activities listed above. This could either be a result of the sampled groups and their locations not being targeted by the awareness raising activities, or a recall bias. It was thus not possible for the EET to measure impact and reach of these awareness materials and modes.

**Advocacy and lobbying and Provincial Focal Persons:** The influence of NDWA has been positive in the achievement of Output 1.2. The EET notes, InPAV provincial coordinators and NDWA central Board members' active lobbying with local governments, the impact of the latter during training and orientations, and NDWA legacy and legitimacy proved valuable in creating a conducive environment and demanding support for WGWDs. This also resulted in budgetary allocation by several local governments for WGWDs.

InPAV mobilized a total of 7 Focal Persons through their provincial contact offices and they contributed to establishing links with the municipalities/rural municipalities, working as contact points for WGWDs and referring WGWD survivors' cases. Some of the Focal Persons' ownership of the project interventions and willingness to work beyond their TORs is well appreciated by GTN team members also. Nevertheless, their presence at provincial level is repeatedly identified as a modality that prevented wider reach at community levels. Since the country was transitioning from a unitary to a federal system of government with three tiers of government – local, provincial and federal, NDWA planned a modality whereby Focal Persons were situated at provincial levels and would align with the federal structure. The government's transitioning process was a learning period for the country and proved challenging for InPAV as devolution of powers was more focused at local and federal levels and less at provincial levels. This impacted the project as Focal Persons needed to reach local governments for accessing information and influencing decision makers. This modality, along with COVID-19 mobility restrictions and budgetary constraints which had not planned for the frequent need for Focal Persons to travel to local governments prevented greater reach and effectiveness of InPAV interventions. This also prevented more lobbying and advocacy and influencing for local government budgetary allocations.

**Capacity development:** Output indicator for Output 1.3 states 'developed capacity of WGWDs' through trained teachers, leaders, and mentoring support to WGWDs. The number of training participants is slightly above the target (target: 140; achieved: 144) and proved

effective in preparing TOT trainees and raising their understanding and awareness level. Information sourced from InPAV Annual Report, Year 2 and 3 indicates the following training took place during the project period till March 2022 (see Table 6 for target vs. achievements).

- Orientation and capacity building training: 138 participants oriented on GBV of WGWDs; participants included 124 OCMC staff members and government representatives and 14 WGWDs for an initial target of 3492. (Annual Report, Year 3)
- 5-day capacity building participatory and inclusive training: 1 training per province, in total 7 5-day trainings conducted
- 5-day GBV Training of Trainers (TOT) in 7 provinces (Annual Report, Year 2)
- Training to school teachers: 7 times – 1 per province (Annual Report, Year 2)
- Accessibility trauma informed counseling training: 6 times (Annual Reports, Year 2 and 3)
- 1-day orientation to community people: 77 times (Annual Reports, Year 2 and 3)
- 3-dayToTo school teachers and academic institutions on promoting gender and disability in all 7 provinces - 167 teachers trained (female: 54%; male: 46%) (Annual Report, Year 1)

Responses from the evaluation interviewees, across different types of respondents, indicate the orientation/capacity building to various government and non-government service providers and stakeholders such as teachers, social leaders, counsellors, etc. as a positive initiative which enhanced their 'awareness and internalization of WGWD and GBV'. The approach of ensuring a mix of stakeholders during the orientation/training was further appreciated, such as by teachers and counsellors, as it led to a broader understanding of each other's' responsibilities.

COVID-19 enabled reach of WGWDs through online counseling sessions and awareness raising which are a positive highlight of InPAV; the possibility of reaching WGWDs who remain generally out of reach was realized. Nevertheless, an overwhelming number of interviewees (45% from KIIs; 63% from FGDs) indicate InPAV should have reached the community and grassroots levels.11 percent and 13 percent each from KIIs and FGDs respectively highlight that while the project was targeted across 27 districts and 73local governments, interventions were too scattered with limited reach to WGWDs. Efforts to raise community awareness through TV/radio and dissemination of IEC (Information, Education and Communication)materials, and street dramas have been undertaken, but the lack of monitoring system in the InPAV design has made it difficult to track and measure the progress. This calls for continuity and further strengthening of efforts to reach WGWDs, while enhancing monitoring activities in future projects. Positive feedback was generated from service providers, namely, teachers, CSOs, OCMCs and elected representatives on the orientations and training provided via InPAV. Appreciation for the sessions and their contents, especially on trauma healing which was again requested for during the evaluation interviews, as well as teachers' training which facilitated understanding and internalization of the WGWDs and the GBV they encounter, along with sharing of personal stories have been highlighted by interviewees. Praises for the facilitators and their facilitation skills are well appreciated by interviewees particularly with regards to the examples cited, interlinkages established between GBV and WGWDs, and the clarity and convictions with which these were facilitated. Some 29 percent of KII respondents (OCMC: 6, teachers: 4,



CBO: 1, Police: 1, GoN: 1) highlighted the positive impact of the training/orientation. While a couple of teachers (half of the teachers interviewed) shared that they had become more sensitive to the needs of children with disabilities in their classes, and were also able to transfer the knowledge in their classes, OCMC representatives and police respondents highlighted a better understanding of WGWDs' needs and their GBV related challenges. Orientations have built capacity and understanding among stakeholders. 1 parent of WGWDs, interviewed during KII, also underscored a better understanding of their child's needs after the training, and about the various related stakeholders and support mechanisms available. In total 49% (23 out of 47) of the people interviewed shared a better understanding of the needs of people living disabilities.

Nevertheless, their ability to transfer knowledge at community levels by sensitizing WGWDs, relevant stakeholders and community members is ambiguous. The pandemic which delayed the program implementation has impacted the outreach to community levels and achievement of this result, which is also reinforced by endline survey results which reflect limited change in knowledge and awareness among WGWDs. Review of baseline and endline data vis-à-vis the InPAV capacity building initiatives indicate inconsistency in information, i.e., positive feedback from teachers, CSOs, OCMCs and elected representatives on the orientations and training provided are not reflected by WGWDs. There is a decline in WGWDs receiving information from health personnel, teachers, family members, disability networks. (Table 7).

Findings indicate that while orientations and training were taking place they may have been too few, and the impact is yet to reach the WGWDs. The EET notes a number of factors have contributed towards this and include, (i) COVID-19 which restricted project personnel's movement, (ii) interventions being targeted at 'higher level', i.e., district levels rather than community levels, (iii) InPAV GBV Focal Persons who were based at provincial levels and faced challenges in frequent communication at community levels due to budgetary constraints and COVID-19 restrictions, and (iv) absence of data to measure increased community awareness levels and capacity to combat various forms of GBV facing WGWDs. The spread out nature of the project, absence of follow up on the trainees, as well as inability to monitor the project reach to WGWDs may have led to these evaluation findings.

**Table 7. Comparative look at WGWDs' source of information to improve prevention and response activities to violence against girls and women with disability in community**

Source of information to improve prevention and response activities to address VAWGD in community (multiple response)	Baseline		Endline	
	N=1,294	%	N=1,302	%
<b>Family members</b>	816	63.1	694	53.3
<b>Health personnel</b>	383	29.6	213	16.4
<b>Teacher</b>	420	32.5	193	14.8
<b>Radio/TV program</b>	736	56.9	791	60.8
<b>Newspaper/Hoarding board</b>	273	21.1	54	4.1
<b>I/NGO staff</b>	183	14.1	76	5.8
<b>NDWA</b>	-	-	107	8.2
<b>FCHVs</b>	134	10.4	26	2.0
<b>Disability network</b>	346	26.7	84	6.5

Street drama	189	14.6	17	1.3
Social Media network	12	0.9	280	21.5
Friend/ Neighbour	1	0.1	20	1.5
Group/Samuha	-	-	13	1.0
Local Government	-	-	9	.7
Don't Know	42	3.2	106	8.1

Source: InPav Endline Study, 2022

In conclusion, efforts to target various services providers and WGWD related stakeholders and create awareness at community levels - targeted by Output 1.1, Output 1.2 and Output 1.3 are well appreciated, especially by service providers. Though the process of transformation is difficult to capture, references by KII and FGD participants of personal behavioral changes and efforts to transfer acquired knowledge are identified as positive. Service providers also speak of having their capacities developed to understand WGWDs' needs. The EET findings indicate Output 1.1 and Output 1.2 received comparatively more focus than Output 1.3 which aimed at the capacity development of WGWDs in advocating for their rights and prevent violence against WGWDs. Scattered nature of project, limited reach of the Focal Persons to grassroots level, absence of project mobilisers at grassroots level and restrictions brought about by the pandemic have categorically limited awareness at community levels and particularly among the WGWDs. The EET concludes a more balanced approach towards all three outputs – capacitating service seekers and service providers, would support the result chain leading to achieving the InPAV goal: WGWDs are supported, enabled and empowered in preventing and addressing violence and claiming their rights and justice in the event of it.

**Outcome 2: Strengthened governance and GBV mechanism (OCMC, GESI focal point, justice committee disability coordination committee, etc.) to mainstream gender and disability**

**Table 8. Outcome 2: Strengthened governance and GBV mechanism (OCMC, GESI focal point, justice committee disability coordination committee, etc.) to mainstream gender and disability**

Outcomes/Outputs and Indicators	Target	Achievement (Yr. 1- Yr. 3) (01/10/2019 – 31/03/2022)	Remarks
<b>Outcome 2: Strengthened governance and GBV mechanism (OCMC, GESI focal point, justice committee disability coordination committee etc.) to mainstream gender and disability.</b>			
<b>Outcome Indicator 2.1: Number of Governance and GBV mechanism (OCMC, GESI focal point, justice committee disability coordination committee etc.) at sub national level are strengthened and new established to mainstream gender and disability in sub national level program and policy.</b>	<b>11</b>	<b>11</b>	<ul style="list-style-type: none"> <li>Conducted 6 TOTs for reducing GBV in 6 provinces</li> <li>Conducted 5 TOTs for school teachers promoting gender and disability in 5 provinces.</li> <li>Plan to conduct the training on Trauma and Stress management,</li> </ul>

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professional counseling and OCMC in following quarter.

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**Output 2.1: Strengthen local justice and OCMC mechanism for improving access to inclusive, need specific, safe and accessible services to report, respond to and prevent VAWGWDs in selected municipalities and districts.**

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<b>Output Indicator 2.1: Review and build-in disability inclusiveness in current GBV programmes/ mechanisms including the OCMCs.</b>	3,492	27	Mentoring and counseling support to WGWDs at local levels
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With reference to output 2.1 indicator ‘Review and build-in disability inclusiveness in current GBV programmes/mechanisms including the OCMCs’, a total of 341 OCMCs and other GBV related representatives from the local level received training. This number also includes the OCMC assessment which took place across the provinces. While the effort to reach OCMCs across all 7 provinces have taken place, and the EET notes that inclusion of a separate data column to register VAWGWDs in a couple of OCMCs’ data register is a remarkable achievement. On the other hand, the target reached by NDWA is significantly low, and the EET duly notes it was not possible to locate the number of WGWDs counseled nor the mentorship which took place, and as such the data is not reflected in the achievement. This absence of documentation is a significant loss of information and may be attributed to the pandemic during which time priority was on reaching the needy rather than documentation. Moreover, since this evaluation covers data only up till March 2022 any further activity and data is also not included.

**Building-in disability inclusion in government’s GBV programs:** The OCMC Situational Assessment conducted in 27 OCMCs across 21 districts identified that ‘services were not disability inclusive in terms of communication for reporting of the case, lack in data disaggregation, lack of sign language interpreter facility, lack of disable-friendly physical infrastructure facilities, lack of equipment and lack of enough budget allocation for OCMCs with GESI and disabled perspectives’. The TOTs to OCMC team members as well as other relevant stakeholders such as government officials, police, teachers worked to address this gap.

**Strengthening governance and justice mechanisms:** 5-day TOTs to reduce GBV among WGWDs were conducted in 6 provinces (Province 1, Madesh Province, Gandaki Province, Lumbini Province, Sudurpaschim Province and Karnali Province). Altogether 144 participants participated in the TOT where 59% (n=85) were municipal representatives and remaining 41% (n=59) were WGWDs. Majority of the participants (131 out of 144) belonged to the age group 25-59 years. Upon receiving the TOT 41 local units reportedly conducted 1-day orientation regarding GBV to the elected representative along with community people where 1,154 people were aware about GBV’. Similarly, a ‘TOT in Bagmati Province focused

on promoting gender and disability concerns, where 24 participants from Judicial committee and disability coordination committee participated in the orientation.’

The EET found OCMC representatives appreciating the training - they spoke of an understanding of the need of persons with disabilities (PWDs), and gradually adopting disability-sensitive languages and behavior while providing services. In the case of 5 OCMCs - in Kathmandu, Lalitpur, Kanchanpur, Morang and Dang district respectively, the addition of a separate data column in their Data Registers, for highlighting type of disability of GBV survivors, were shared. This initiative may be attributed to InPAV contributions, though it was difficult to measure the level of attribution as NDWA and other CSOs may have been lobbying for it earlier also.

Police, Judicial Committee members, and CSOs also highlighted increased knowledge about contact persons and organizations related to PWDs when cases need to be referred.

The EET interviewed some [Total n= 21 (OCMC: 7; GoN: 4; Other stakeholders: 10- teachers, counsellors, CBOs)] of the trainees who participated in the orientations and they all expressed appreciation, elaborating on the importance of such inclusivity during trainings and orientation. The EET notes several interviewees, namely, NDWA and GTN interviewees, (5 NDWA central and district co-ordinators) said that budget has been allocated indicating InPAV also contributed in advocating for budgetary allocations from the local governments. The NDWA project Annual Report, Year 3 notes, ‘3 local units started to provide orientation about GBV through their own budget to community people’. However, it was not possible to determine which local governments these were, nor the level of InPAV attribution towards this end.

The EET further notes that despite these efforts it is difficult to determine their outreach to WGWDs and at grassroots levels. Many of the service providers and parents noted efforts to seek justice remains inadequate with many unaware of existing governance and justice mechanism. WGWDs possess limited awareness on their rights and this is a potential gap that demands to be bridged.

**Orientation to Service providers:** As per the annual report (Year 3) a total of 1,417 WGWD (target: 1400) stakeholder participants received orientation on measures for identifying and responding to WGWDs living with disabilities or residing in institutions. Orientation to government officers, police personnel, OCMC members and teachers is positively contributing for the rights of the WGWDs. While some of the interviewees (n=4) had difficulty recalling the content of the training, others underscored personal internalization of the WGWD issues which would directly and indirectly benefit WGWDs. The lack of frequent tracking of initiatives and the trainees is preventing a more coherent measurement of these orientations and their effectiveness. The EET notes the absence of follow up and refresher training/orientation within the project modality inhibited greater outreach to target women and girls.

In conclusion, InPAV efforts to strengthen government mechanisms, such as capacitating service providers, incorporating WGWD related data in OCMC registers is demonstrating positive results though it remains at a preliminary phase. The process of changing mindsets among services providers has been introduced by the project, with more advocacy efforts likely restricted by the pandemic. These initiatives however require sustained efforts, along with measures to harvest the outcomes so as to consolidate these for future strategizing. Taking into consideration the regular staff turnover in government bureaucracy, police

personnel, and OCMC representatives as well as forthcoming local elections leading to change in elected representatives the efforts targeted by Output 2.1 demand consistency and continuity to avoid memory loss, and must be supported by funding organizations in the future as well. Bearing in mind the limited outreach to WGWDs – as highlighted in Outcome 1, the EET concludes a more balanced outreach to both service seekers and service providers as essential to achieve the project goal.

**Outcome 3: Improved knowledge and evidence on VAWGWDs to influence policies and programs**

**Table 9. Outcome 3: Improved knowledge and evidence on VAWGWDs to influence policies and programs**

Outcomes/Outputs and Indicators	Target	Achievement (Yr. 1- Yr. 3) (01/10/2019 – 31/03/2022)	Remarks
<b>Outcome 3: Improved knowledge and evidence on VAWGWDs to influence policies and programmes</b>			
<b>Outcome Indicator 3.1: Research and studies to generate evidence and advocacy tools</b>	<b>119</b>	<b>119</b>	Conducted TOT to school teachers on “Promoting Gender and Disability” in 5 provinces - 119 teachers participated (female: 56%, n=67); male: 44%, n= 52).
<b>Output 3.1 Generate knowledge, skills, resources on VAW in communities for bridging gaps and documenting lessons learned.</b>			
<b>Output Indicator 3.1: Baseline and end line conducted and curriculum and IEC materials developed</b>	<b>37</b>	<b>8</b>	<ul style="list-style-type: none"> <li>• Baseline survey conducted; based on preliminary findings and OCMC report curriculum to be developed in following quarter.</li> <li>• Broadcast 3 types of radio jingles– 1.4 million people made aware</li> <li>• Distributed 178 visual aid (163 flex , 15 hoarding board) - 1780 persons reached</li> <li>• (10 persons/visual aid)4300 posters/stickers placed in 3 different themes – 12,900 persons reached.</li> </ul>

*Bridging evidence gaps and developing advocacy tools:* Output 3.1 results indicate InPAV efforts to undertake research to generate evidence and advocacy tools for advocacy purpose have been duly undertaken. The baseline and endline surveys, OCMC assessment, the curriculums development are pioneering in linking GBV with WGWDs. These are invaluable resources that will prove useful in the near future as well. Likewise, the EET notes the quality and type of IEC materials have been useful in raising awareness across various stakeholders.

A comparative look at the InPAV’s baseline and endline study findings reflect a changing trend in WGWD’s understanding of the VAWGWD terminology (see table below). There is an 18 percent increase in their recognizing psychological/emotional abuse as VAWGWDs, while a 26 percent decrease is visible in WGWDs claiming VAWGWD is forced marriage. Likewise, while WGWDs’ experiences of being forced to perform unwanted sexual acts has positively declined, those indicating occurrence of sexual violence during the past 12months reflects substantial increase. (see Table 10) On one hand the data is essential for assessing the project effectiveness and impact, on the other it is also the first of its kind in the country highlighting linkages between WGWDs and the types of GBV they encounter. These evidences allow NDWA and other related stakeholders in using evidence-based advocacy, lobbying and programming.

**Table 10. Comparative data of understanding of the terminology Violence against Women and Girls – InPAV baseline and endline survey findings**

Understanding of term ‘violence against women and girls’	Baseline		Endline		Percentage changed	
	N=1,294	%	N=1,302	%	%	Status
<b>Rape/sexual assault</b>	554	42.8	535	41.1	4 ▼	Decreased
<b>Physical violence</b>	909	70.2	924	71	1 ▲	Increased
<b>Violence by husbands against wives</b>	424	32.8	495	38	16 ▲	Increased
<b>Forced marriage</b>	206	15.9	154	11.8	26 ▼	Decreased
<b>Denial of resources/opportunities/services</b>	330	25.5	273	21	18 ▼	Decreased
<b>Psychological/emotional abuse</b>	534	41.3	634	48.7	18 ▲	Increased
<b>Child/early marriage</b>	-	-	101	7.8		
<b>Polygamy</b>	-	-	50	3.8		
<b>Don't know</b>	126	9.7	151	11.6	20 ▲	Increased

\*Multiple responses

\*\* Source: InPAV Endline Survey

**Table 11. Comparative data on participants experiencing physical violence by husband/intimate partner**

Sexual violence experienced from intimate partners	Baseline	Endline
<b>Forced to perform unwanted sexual acts</b>	13.4% (n=86)	6% (n=32)
<b>Occurrence of sexual violence during last 12 months</b>	Sometimes: 31% (n=27)	Sometime: 59% (n=19)

\* Source: InPAV Endline Survey

Findings from baseline were utilized to develop the curriculum for the health and educational professionals. Similarly, the OCMC Situational Assessment report supported in shaping the orientation to OCMC service providers for greater effectiveness. Responses from interviewees (n=21) reflect a positive feedback on the training sessions from the curriculum. Occurrence of behavioral and attitudinal changes - though gradual, within respective professions, namely, OCMCs, police, teachers, elected representatives, WGWDs can to a large extent be attributed to InPAV. Although organizations such as NDWA and others may have lobbied in the past as well, however, OCMC representatives who spoke of enhanced sensitivity in identifying and addressing needs of children with disabilities, knowledge sharing in classes and establishing linkages with disability related CSOs for referrals, and/or

interpreters when required, reflect the value of these knowledge products. The inclusion of separate data columns in OCMC Registers for capturing data on persons with disability initiated in 4 OCMCs (Morang, Lalitpur, Kathmandu, Dang, districts) underscore the significance and influence of research-based changes that can occur in a national level program.

**Development of resource materials:** Interviewees indicate NDWA team members have been closely engaged in the development of resource materials such as the IEC materials, curriculum and training resources. When required experts such as counselors were engaged for inclusion of counseling and GBV related sessions in the module, and counselor's responses reflect such collaboration has yielded more coherent and quality product that echo needs of WGWDs and service providers to ensure quality services to the former.

**TOT to teachers and academic institutions:** The TOT to teachers have been undertaken in the targeted 5 provinces; 140 was the target while 167 received training. Most teachers interviewed during the current evaluation note educational institutions are supportive of the initiative and sent teachers for the training sessions. The EET found that following the TOT some teachers recognized they gained confidence in talking about disability issues in classrooms, identifying needs of children with disabilities, and have even begun speaking of need for disability related infrastructure in one case. However, all six teachers interviewed during the evaluation faced difficulty recalling the training sessions they attended over a year back. This highlights the gap in monitoring and follow up, especially considering this was a TOT and the teachers were to train others and ensure a ripple effect. Upon returning to respective schools the teachers were left to work in isolation, with no linkages between InPAV Focal Persons or other relevant facilities. Teachers did share that after the training, they communicated the learning to their colleagues, though briefly. Lack of follow up limited their opportunity to confer on initiatives and management of cases, efforts to influence various school related committees (e.g. school management committees, parent teacher associations, etc.) and advocate for policy changes.

The project successfully created a basic understanding on WGWDs and GBV linkages, generating tremendous interest. However, difficulties in recalling the sessions and their impacts by interviewees underline the absence of regular follow up which would have further supported and sustained these efforts. Close and regular networking by InPAV Focal Persons with trainees could have built unity and solidarity – this gap has diluted the NDWA capacity to leverage trainees' newly acquired knowledge in future related activities, and reach out to serve WGWDs.

This is further reinforced by baseline and endline findings which indicate WGWDs' perception towards their vulnerabilities to various forms of VAWGWDs. In a query where participants were provided a total of six statements to gauge perceptions towards GBV experienced by WGWDs, findings indicate a marked increase in both 'strongly agree' and 'agree' across all statements. Responses reaffirm the increasing vulnerabilities of WGWDs while service providers' ability to reach them is yet to take place. Thus, while WGWDs are increasingly aware of the risks they face, the capacity of diverse service providers- whether in the health, education, judiciary and law enforcement systems have yet to keep up with WGWDs' needs. The EET concludes that while the InPAV project initiated the process for knowledge and skill building of service providers, it was not able to reach the WGWDs and influence programs for the prevention and protection from GBV.

The following table presents valuable evidences on GBV vulnerabilities of WGWDs as shared by WGWDs during the baseline and endline surveys:

**Table12: Comparative data on GBV Vulnerabilities of WGWDs as shared during baseline and endline surveys**

	Baseline		Endline	
	N	%	N	%
Women and girls with disabilities are more likely to experience gender-based violence than their counterparts do.				
<b>Strongly agree</b>	553	42.7	575	44.2
<b>Agree</b>	492	38.0	603	46.3
<b>Disagree</b>	12	0.9	37	2.8
<b>Strongly Disagree</b>	2	0.2	1	.1
<b>Don't know</b>	235	18.2	86	6.6
Impairment-specific difficulties (hearing, visual, and deaf, blind) in recognizing and avoiding danger make disabled women and girls an easy target.				
<b>Strongly agree</b>	303	23.4	560	43.0
<b>Agree</b>	585	45.2	599	46.0
<b>Disagree</b>	24	1.9	52	4.0
<b>Strongly Disagree</b>	3	0.2	3	.2
<b>Don't know</b>	379	29.3	88	6.8
Women and girls with psychosocial/ intellectual/ learning disabilities are especially vulnerable to sexual assaults.				
<b>Strongly agree</b>	388	30.0	592	45.5
<b>Agree</b>	554	42.8	581	44.6
<b>Disagree</b>	26	2.0	31	2.4
<b>Strongly disagree</b>	0	0.0	1	.1
<b>Don't know</b>	326	25.2	97	7.5
Women and girls with disabilities experience much higher levels of violence by family than their counterparts do.				
<b>Strongly agree</b>	256	19.8	338	26.0
<b>Agree</b>	572	44.2	653	50.2
<b>Disagree</b>	81	6.3	201	15.4
<b>Strongly disagree</b>	1	0.1	23	1.8
<b>Don't know</b>	384	29.7	87	6.7
Sexual and physical abuse often comes from family members, guardians, care givers/ personal attendants.				
<b>Strongly agree</b>	189	14.6	347	26.7
<b>Agree</b>	442	34.2	689	52.9
<b>Disagree</b>	154	11.9	165	12.7
<b>Strongly Disagree</b>	9	0.7	6	.5
<b>Don't know</b>	500	38.6	95	7.3
Women and girls with disabilities experience violence against them at home and outside				



<b>Strongly agree</b>	213	16.5	416	32.0
<b>Agree</b>	612	47.3	732	56.2
<b>Disagree</b>	20	1.5	62	4.8
<b>Strongly disagree</b>	1	0.1	1	.1
<b>Don't know</b>	448	34.6	91	7.0
<b>Total</b>	<b>1294</b>	<b>100.0</b>	<b>1302</b>	<b>100.0</b>

\* Source: InPAV Endline Survey, 2022

The EET found that while NDWA and GTN adopted due process for ensuring transparent selection of schools, the final selection of teachers was left to the schools themselves. Interviewee responses indicate that some of the teachers who attended were not teaching the subject most relevant for knowledge transfer to students, i.e., social studies. Thus, future initiatives require schools ensure relevant teachers are assigned for the training.

**Outcome 4: Strengthened governance mechanism and enhanced capacity of women and girls with disability to tackle the emergencies/ disaster situation like COVID-19 pandemic**

**Table 13. Outcome 4: Strengthened governance mechanism and enhanced capacity of women and girls with disability to tackle the emergencies/ disaster situation like COVID-19 pandemic**

Outcomes/Outputs and Indicators	Target	Achievement (Yr. 1- Yr. 3) (01/10/2019 – 31/03/2022)	Remarks
<b>Outcome 4: Strengthened governance mechanism and enhanced capacity of women and girls with disability to tackle in the emergencies/ disaster situation like COVID-19 pandemic.</b>			
<b>Outcome Indicator 4.1: 1,106 women and girls with disabilities are aware, prevented, responded rescued from negative impact including GBV during the critical situation of COVID-19 pandemic as well as in other emergency / disaster situation.</b>	<b>1,106</b>	<b>802</b>	
<b>Output 4.1: Output 4.1: Women and girls with disabilities are aware, prevented , responded rescued from negative impact including GBV during the critical situation of COVID-19 pandemic as well as in other emergency / disaster situation</b>			

<b>Output Indicator 4.1: Women and girls with disabilities are aware, prevented , responded rescued from negative impact including GBV during the critical situation of COVID-19 pandemic as well as in other emergency / disaster situation</b>	1106 (WGWDs ware and benefitted from humanitarian support)	664	<ul style="list-style-type: none"> <li>• Completed rapid assessment and disseminated to stakeholders</li> <li>• Distribution of relief materials to needy affected women and girls with disabilities,</li> <li>• Advocacy with government for inclusive emergency /crisis situation for the special provision</li> </ul>
<b>Output Indicator 4.2: Number of mass /social media are mobilized fro awareness raising about COVID-19 (in appropriate means of language like sign language</b>	2000 (number of people aware through mass media)	<b>138</b>	<ul style="list-style-type: none"> <li>• Awareness raising materials developed on occasion of International Disabilities Day focusing on GBV</li> <li>• Video made with sign language interpretation, and broadcast from YouTube</li> <li>• Awareness raising poster distributed via online media.</li> </ul>

**Advocacy initiatives at provincial and local levels:** The InPAV project worked to advocate for WGWDs and their GBV concerns primarily through the Focal Persons based at provincial levels. Considering the project came at a time decentralization in the country was taking place, placing them at provincial levels was a logical choice. However, during the COVID-19 period, the InPAV progress report (Year 3) documents they prioritized ‘mass awareness through short videos and posters on COVID-19’ instead of one-on-one interactions that were not possible due to mobility restrictions; similarly, ‘virtual meetings were conducted with stakeholders for improving prevention and response from responsible institutions’.

The EET found that, with the exception of those Focal Persons based at provincial headquarters for others coordination with local governments was a challenge. At provincial and federal levels, NDWA team members who have been advocating for WGWD concerns continued their efforts through InPAV also. During the pandemic the ownership and commitment of NDWA were well supported by the project through virtual influencing and awareness raising.

**Information dissemination through social media, and reducing vulnerability:** InPAV implementation commenced at the time COVID-19 pandemic spread. The pandemic led to challenges such as delay in implementation of activities, mobility restrictions challenging in-person

coordination and collaborations, and outreach to grassroots level. On the other hand, based on the demand side the project was able to extensively use the social media to reach out specifically to WGWDs. To design and implement emergency interventions as per WGWDs' needs, an Online Rapid Assessment was undertaken among WGWDs to identify their issues during lockdown. Based on the findings and information collected by NDWA, information on prevention and protection from COVID-19 and GBV, as well as information on available services were disseminated online. Although, the EET was unable to determine the exact number of WGWDs and other stakeholders reached directly and indirectly, information from the counsellors on the counseling support they provided reflect InPAV contributions during these difficult times as commendable.

**Reducing vulnerabilities resulting from COVID-19:** An important contribution by InPAV has been reducing vulnerabilities of WGWDs affected by COVID-19 pandemic. According to NDWA Progress Report (Year 2), 361 women and girls with disabilities affected from COVID-19 pandemic received relief packages comprising of relief materials, food, health and hygiene products (22 December 2020). Some 1,106 WGWDs are also documented as having been made aware, and rescued from the negative impacts of COVID-19. Although the exact nature of these different support could not be established through KIIs as direct WGWD recipients were not among the KII respondents, however, information from counsellors reflect the value of online counseling during COVID period which supported many during the pandemic. Here again, the EET could not establish the exact number of WGWDs who received counseling support. Such data gaps dilute the efforts of the implementing partners and underscore the need for establishing support tracking measures.

Such timely support, along with NDWA engagement in various COVID-19 related virtual programs and sharing of preventive measures, visits to different quarantine and isolation centre and influencing for disable-friendly services and infrastructure, referral of WGWD GBV survivors were all made possible through re-allocation of InPAV budget to COVID-19 response. Moreover, constant advocacy efforts resulting in National Women Commission developing the COVID-19 response protocol with gender and disability perspective and positive response from local government to prioritize WGWDs during relief the effectiveness of InPAV inputs during emergency periods. This is a success story for NDWA which can be replicated in the future also.

### **Findings and Lessons Learnt**

Findings indicate InPAV efforts to reach the goal of ensuring 'WGWDs are supported, enabled and empowered in preventing and addressing violence and claiming their rights and justice in the event of it' generated mixed results. The approach and strategy to reach service seekers and services providers is found more biased towards the latter. Although direct relief and counseling services reached some WGWDs in need according to the counsellors interviewed, the EET was unable to locate the exact number of WGWDs counseled underscoring the need for establishing and/or strengthening data management systems. Efforts to enhance community awareness and develop WGWD capacities to understand and claim their rights was identified primarily through trainings and IEC materials. While trainings were more targeted to service providers, with a few WGWDs, it is also difficult to determine the reach and impact of the IEC materials on WGWDs or their enhanced ability to combat violence. This is however justifiable considering the government's transition to federalism was creating uncertainties, the scattered nature of the project modality and the COVID pandemic which disturbed project implementation.

**Strengthening linkages between WGWDs and GBV:** The project supported to respond to WGWD. needs and the threats they potentially encounter from within family and society, across different age groups and among varied forms of disabilities. InPAV worked to highlight the concerns across government and non-government service providers, who as elaborated by one interviewee, they

were “uncertain about how to deal with WGWD-GBV survivors, their needs and existing support mechanisms for them.”

*“Elected representatives say that we need to do things for persons with disabilities and provide services as per their needs; but that’s just in words and not in action because nothing has been done.” KII Respondent, Surkhet*

**Need for focused programming and community participation:** InPAV provided inputs for building the capacity of its Focal Persons at provincial levels. The project encouraged the Focal Persons to reach out to government and non-government stakeholders, and community members and WGWDs to meet the needs of WGWDs. However, as per the Focal Persons the scattered geographic locations challenged their frequent coordination and collaboration impacting their effectiveness in reaching WGWDs and community members for seeking services, as well as local government for greater mainstreaming of GBV and disability.

**Strengthening government, GBV mechanisms, and CSOs:** By reaching out to government’s GBV related mechanisms (OCMC, disability coordination committee) and justice mechanisms (police, Judicial Committees), these mechanisms are gradually developing disability-friendly services, such as inclusion of WGWD information in OCMCs. Though the change may be gradual and difficult to capture in the form of data, voices of interviewees (n=11) reflect InPAV training/orientation is beginning to leading to some behavioral and attitudinal changes among police, OCMC doctors, elected representatives, and CSO service providers and promoting sensitivity to WGWDs and their needs. However, with the exception of some OCMCs these remain limited to individual levels, and institutionalization are yet to occur.

**Evidence based advocacy:** Nationwide data collected on WGWD and GBV they encounter is the first of this scale in Nepal and will prove critical in building the capacity of NDWA, and other organizations engaged in GBV to address WGWD needs. This will prove fundamental in advocating WGWD needs, and ensuring their constitutional rights. Availability of advocacy tools and their dissemination has underlined the need to prepare and build leadership for WGWD advocates, and the evaluation team assumes data generated from baseline and endline surveys will reinforce their advocacy capacity. Findings from FGDs indicate advocacy efforts at Palika levels is generating changes with budgetary allocations being realized in Morang and Kavre districts.

**Reducing vulnerabilities during emergency:** The UNTF flexibility in budget re-allocation to address the pandemic related needs underscores the value of such flexibility. This enabled InPAV to realize some of the major achievements in directly supporting WGWDs at risk and/or survivors of GBV such as through online counseling and relief support.

**In conclusion,** the evaluation team considers that the project, based on the numbers indicated in the InPAV reports achieved its targets. However, while Outcome 1 achievements indicate a higher number than the target these were not supported by data collected during FGDs and KIIs. Results under Outcome 2, in particular building in inclusiveness in OCMCs are well reflected in several OCMCs. While Outcome 3 total achievement is slightly under the targeted number, it is identified as effective and will be used in the coming days as well. Outcome 4, supported by data collected during FGDs/KIIs, underlines the project efficiency during the COVID period in reaching out to WGWDs with service providers such as counsellors.

## 9.2 Relevance:

This section addresses the evaluation question: To what extent do the achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls? It also looks into how appropriate and realistic the project strategies and interventions were considering the socio-economic and political environment in the country.

### 9.2.1 Observation of Changes

#### Community Level

When asked about change at community levels and their lives over the past years, the response was basically the same across all interviewee KII and FGD groups – InPAV inputs were yet to reach the grassroots levels, and the WGWDs therein. The scattered nature of the project with each Focal Person required to cover the province and around 11 Palikas on an average prevented their active engagement and outreach to community levels. In fact, even the WGWDs interviewed and who participated in data collection during the baseline survey claimed they did not receive services, nor had the opportunity to participate in other project activities. Interviewees follow the logic that community level changes require direct inputs at grassroots level where the project focus remained limited. Some of the efforts reported by NDWA include the following, however the EET was unable to capture changes at community levels:

- '21 women with disabilities who are members of disability coordination committee in 21 local units as stated in annual report of year 3.
- Transfer of knowledge by 41 local units through 1-day orientation to 1,154 community people
- Various awareness raising programs such as distribution of 'visual aid (flex and hoarding board) regarding the disability and service provided by government of Nepal to the persons/women with disability'
- Placement of 'posters/stickers regarding GBV' in 73 local units of InPAV working areas from which community people could obtain knowledge about GBV and rights of WGWDs, and sharing of information with their family.

Despite the commitment and ownership of most InPAV Focal Persons the scattered nature of project areas, the geographical difficulties and distance between the Palikas, limited human resources and budget and moreover the COVID-19 situation served as challenges. These have been shared primarily by project implementing partners and InPAV Focal Persons during KIIs.

In conclusion, as the project had a limited reach at community-level, and although WGWD have been reached through services, the evaluation team considers that this project had a low relevance to WGWDs at community-level.

**Municipality and District Levels:** InPAV is proving relevant to mainstreaming GBV and disability in the district health system. Palika authorities directly involved in planning and funding (e.g. elected representatives) consider the InPAV approach suitable to address WGWDs' health and GBV needs. Including various stakeholders and service providers together in orientation/training sessions is serving as a relevant entry point to improve WGWDs' GBV concerns and needs, and cultivating understanding among family members. The benefits of stakeholders working together for addressing inclusion of WGWDs is evidenced by interviewees appreciating the holistic nature of the training which have made possible further networking. While 21 percent (10 out of 47 total respondents) of the interviewees showed concerns about the absence of follow ups and refresher training for transfer of knowledge, the EET notes that 3 Palikas: Panauti, Kavre and Sundarharaicha and other few palikas in Morang district have been able to advocate and influence for budgetary allocations. It is difficult to measure the level of attribution of InPAV project in this regards – as

NDWA and other disability-based CSOs have been advocating for these earlier also, but InPAV has certainly given impetus to the advocacy effort.

83% (5 out of 6 total teachers interviewed) of the teachers interviewed who participated in the TOTs appreciated the benefits generated from the InPAV training at individual and school levels. Teachers interviewed during EET voiced gradual changes and claimed becoming more sensitive to needs of children with disabilities, promoting need to lobby for disability friendly infrastructure, and ensuring they receive their rights. Here again, absence of follow ups, monitoring and refreshers prevent measuring of knowledge transfer taking place,

Despite gradual and positive changes, there is a potential risk of WGWDs facing setbacks due to absence of InPAV exit plan. For instance, if they begin to advocate for their rights and there is no support system, if they are unable to collectively voice opinions, or have no technical or financial resources to backstop their initiatives there is a risk it will demotivate them. Inadequate strengthening and follow up of these platforms may also impact the roles the service providers initiated – teaching, counseling, and pressurizing policy makers. While some of the OCMC and police respondents noted they have a list of organizations they can reach out to, however, transfer of service providers may further set back these efforts.

### **Relevance of GBV Approach**

InPAV addressed an important national concern, namely, WGWDs and GBV. It supported the UNRCPD, Convention on the Elimination of All Forms of Discriminations Against Women (CEDAW), and the Constitution of Nepal, amongst others which make provisions for encouraging participation and elimination of gender discrimination, and ensuring WGWDs exercise their rights.

While the focus on GBV during the couple of decades has increased, the same level of effort on GBV among WGWD has been overlooked. Efforts to raise awareness and strengthen governance and GBV mechanisms have not supported the needs of the WGWDs. Thus, InPAV provided a valuable platform to link GBV with health (OCMC, counseling), governance, media, law enforcement, judicial committees and the academic institutions. The multi-disciplinary approach it adopted for promoting services to WGWD-GBV survivors is enhancing its contribution to the GBV domain and disability concerns as a whole. The EET finds that baseline and endline surveys undertaken by InPAV provide contextual information that will be relevant for future actions to any agency keen to support WGWD-GBV in the country. Similarly, advocacy efforts of InPaV also contributed in Supreme Court providing a stay order to Nepal government to rethink decision, and continue the allowance to concern persons without any discrimination.

The development of the training curriculum for undertaking awareness and training has incorporated perspectives of experts such as counsellors which is well appreciated by the latter. These will prove highly relevant in ensuring GBV nuances are duly addressed during training.

InPav project has ensured workforce diversity among their staff personnel and included WGWDs from different caste groups. Though there are still more Brahmin and Chhetri WGWDs compared to other caste groups effort towards inclusion is a beginning.

### **Extent and Forms of GBV**

Statements by respondents from various groups – elected representatives (1 out of 2), police ( 2 out of 2), OCMC representatives (9 out of 9), parents of WGWDs (1 out of 1) - reveal the prevalence of diverse forms of violence within families and communities. However, it was a challenge to determine the extent of violence within the four evaluation districts. 31 percent (23 FGD

respondents out of 75 respondents of 4 FGDs) and 60 percent (28 KII respondents out of 47) of FGD and KII respondents respectively, frequently mentioned GBV prevalence among WGWDs, especially some of the socially and economically marginalized groups. There is also a recognition the educated and wealthier families tend to keep GBV and those among WGWDs hidden for family honor. KII and FGD information from all 4 evaluation districts indicate GBV among WGWDs range from verbal, economic, mobility restriction, abuse of sexual and reproductive rights, mental torture and so forth. InPAV endline findings indicate 89 percent of the visually and 90 percent intellectually impaired are more vulnerable. Despite these their ability to demand for human rights, and seek services and justice remained low due to lack of awareness. Under such circumstances the InPAV was a very relevant intervention in highlighting GBV among WGWDs; nevertheless, the EET notes that targeting specific forms of violence via InPAV is not evident. The EET team further reiterates that InPAV strategy and activities did not specifically focus on addressing these.

*“I would say that the women and girls with disability are much more vulnerable. They do not have access to any services. Most of them lack awareness and are poor.” KII Respondent, Surkhet district.*

### **Coping Mechanisms, Community Interventions and Linkages with other GBV Programs**

The InPAV, through its awareness and interactions with service providers and CSOs created significant space for servicing WGWDs facing GBV. The EET notes OCMCs in 4 of the districts, namely Dang, Lalitpur, Kathmandu, Morang incorporated WGWD-specific information space in their data recording registers following InPAV training and advocacy, and are coordinating with various disability related CSOs to engage interpreters in case of hearing impaired survivors; police mentioned teachers, CSOs and counselors spoke of becoming more sensitive to WGWDs needs, and in the use of terminologies to address them. However, there is overwhelming acknowledgement from all interviewees that the number of WGWDs seeking services – whether health, law enforcement or other justice mechanisms – remain low. As earlier stated, while efforts to reach the supply side is commendable though requiring regular follow up, addressing the demand side, i.e., WGWDs, their parents and communities remained low. Focusing on both demand and supply side was essential to ensure and optimize the relevance of InPAV interventions.

Without in-depth and holistic strategy to reach the community level and WGWDs, many WGWDs at grassroots level remained unaware of InPAV and the referral points it was strengthening. Until and unless targeted efforts to empower WGWDs to voice opinion and demand their rights are ensured, there is a risk they will continue to hesitate accessing these services.

Along with government mechanisms, InPAV collaborated with various CSOs and included them in their training/orientation programs. Many of the CSOs are already those with whom NDWA has been collaborating with in the past, and were able to enhance the GBV/disability knowledge advocacy. Efforts to reach out to other CSOs and programs at Palika and district levels, with the exception of IEC dissemination, remained low. Addressing this gap would have generated wider knowledge promotion.

### **Major Concerns**

**Limited Information Dissemination:** WGWD-GBV awareness and advocacy was primarily based on short training sessions– from 1 to 5 days - among service providers and some WGWDs and their parents. Efforts at generating mass awareness has been undertaken via IEC materials, radio jingles, street dramas, as well as orientation by those who received TOT training. However, the EET could not track and evaluate the reach of these messages or the level of understanding generated. Service providers have started talking among themselves, and in a few cases referred WGWD-GBV cases,

e.g. to the National Women Commission, or a few others have reached out seeking services. The EET finds InPAV facing difficulty in adopting a balanced approach in identifying and addressing WGWD-GBV survivors and those vulnerable to other forms of discriminations and abuse. Without a balance between information dissemination between service seekers and service providers, there is a risk the former will refrain from accessing these services.

**Lack of a Holistic Approach and Support Mechanisms:** Addressing GBV survivors requires a multidisciplinary approach ranging from counseling (social, psychological and legal) and confidence building to economic measures. InPAV aimed to strategically address survivors' specific service needs for services, with efforts such as the assessment of OCMCs and its findings fine tuning needs to be addressed. Orientations which included a few WGDs in each training, training on linkages between GBV and WGWDs for committee members, efforts to address socio-cultural factors that affect WGDs and their mental, physical and social needs through service providers, including counselors of OCMCs and other CSOS are positive elements of the overall approach. However, without efforts to reach community mechanisms, WGDs and their families and immediate society – which remained inadequate, WGWDs' accessing support mechanisms at district levels may prove challenging. Moreover, with the absence of monitoring of messages transferred to community level-through IEC, flex, posters/stickers, mass information dissemination based on initial interpretations and without an explanation can become a risk factor to survivors, potential survivors and the community as well.

**Vulnerabilities of WGWDs and Sustainability of Interventions:** Service providers have been empowered to understand needs of the persons with disability and their vulnerabilities to various forms of GBV, and influenced to change the 'rule of the game' during planning, and programming. 12 KII Interviewees indicate increased understanding and empathy towards WGWDs' GBV needs and challenges they face in accessing resources for demanding and acquiring their rights. Demands for budgetary allocation for the persons with disability have been initiated in some of the Municipalities InPAV works. But this is not evident across others, and the exit of InPAV will undoubtedly impact achievements thus far, reducing their capacity to leverage and access funding. While NDWA and its provincial teams will undoubtedly continue advocating for the rights of WGWDs, focus on GBV within these needs remain uncertain– casting doubts on the sustainability of addressing GBV faced by WGWDs.

Politically, the federal structure has resulted in Palikas becoming a powerhouse for raising voices, and WGWDs can use the platform to discuss and strategically plan the way forward to address WGWDs-GBV needs, as well as ensuring their socio-economic rights for the way forward.

**Lack of Follow Up:** Support to service providers is a noteworthy InPAV contribution. However, a core finding of the EET has been the absence of follow-up and backstopping of trainees and TOTs trainees. This limitation stands out as a major challenge; InPAV should have addressed WGWD-GBV concerns through regular and consistent mobilisation of InPAV Focal Persons in the Palikas.

### **Individual interpretations**

The commitment and support for WGWDs' GBV concerns is commendable, as is the conceptual understanding on the need for addressing it, ensuring survivors' access to resources and decision-making power. However, the EET notes that government service providers will be transferred, and in some instances not necessarily to the same departments. While their knowledge will still be relevant in other areas it is essential to provide consistent technical support to other staff members. Moreover, without monitoring and evaluation of GBV messages and the impacts that have occurred,



InPAV was unable to ensure the quality of messages being diffused through its various catalytic agents.

### **InPAV Strategy**

Given the goals and areas of intervention of InPAV the impacts observed confirm that the project fits well into UNTF goals. It was contributing specifically to improving GBV services for the WGWDs through enhancement of service providers' capacities to understand and address their needs. Efforts to increase resilience of WGWDs to demand their rights and justice remains under-addressed, which is also a result of COVID-19 restrictions as well as the scattered nature of the project.

### **9.3 Efficiency**

This section of the evaluation addresses the question: To what extent was the project efficiently and cost-effectively implemented?

NDWA did not allocate budget for emergencies response activities. Large number of women faced domestic/gender based violence issue in the COVID-19 situation, as a result they learnt that budget allocation is required to plan emergencies response activities and for relief distribution. Goods and materials purchased for relief package, COVID-19 relief package were distributed in the field.

#### **9.3.1 Observations**

##### **9.3.1.1 Operational Performance**

#### **Central Level**

Central level: The EET found the InPAV team working under tremendous pressure, especially during Year I when COVID-19 pandemic delayed the implementation of most activities. Further challenges such as staff turnover at UNTF and GTN also contributed to delays. Despite these, measures to circumvent COVID-19 delays, adapting to the situation and addressing needs such as online counseling to WGWD-GBV survivors, and completion of activities are commendable. NDWA was also regularly undertaking advocacy and lobbying which demonstrated some of the following positive results:

- Advocacy against the decision to “discontinue social security allowance for single women and person with disability” – *resulted in* Supreme Court providing stay order to Nepal government to rethink the decision and continue the allowance to concern persons without any discrimination; Government of Nepal changed decision to continue social security allowance for single women and person with disability. (Source: Annual Report Year 1)
- Submitted memorandum to Ministry of Women, Children and Social Welfare to have a provision on basic requirements at safe houses and rehabilitation center established for women and girls with disabilities – *resulted in* Government of Nepal beginning to collect information to provide such basic requirements.
- Published short videos about GBV on social media - *resulted in* different forms of media covering cases of WGWD-GBV in their news. The television program “AnkhiJhyaal” addressed it to some extent and more than 1500 people reached and viewed TV program produced by NDWA on GBV prevention, and broadcast from different TV channels.<sup>10</sup>

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<sup>10</sup> Link: <https://www.youtube.com/watch?v=z57IYP-pcc> <https://youtu.be/fosyKyZVuI8> <https://www.youtube.com/watch?v=zMjmlM1aoho>

## District Level

The fact InPAV was welcomed at the provincial levels, and trainings/orientation were conducted with participation of government and CSO representatives, WGWDs and parents of WGWDs from district and Palika level, and there continues to be appreciation for the information even during the evaluation period – all reflect the approach to be highly accepted. The EET takes this as an indication for a good operational performance. Further, the EET found project implementers - staff and voluntary team members, as very committed, with an ownership of the WGWD-GBV issues and striving for better implementation even under difficult circumstances.

The EET found that despite the location of the InPAV Focal Persons being at Provincial levels, and hence unable to move to Palikas efficiently, there was a good team spirit in InPAV.

### 9.3.1.2 Workforce diversity at InPAV

Within the project itself, InPAV had taken efforts to ensure inclusivity among its staff members. This diversity in the workforce and working relation played a critical role in project success. The EET notes a good working relation between NDWA and GTN, with each appreciating their respective strengths and keen to synergise for the efficiency of the project implementation. A GTN respondent sharing, “personally learning and internalizing a lot of issues pertaining to WGWDs and the difficulties they encountered helped me understand the value of InPAV”, reinforces the learning and sharing taking place across the partners also. Moreover, workforce included a large number of WGWDs themselves, and the project ownership amongst the key personnel has undoubtedly enhanced the project efficiency of the project. A review of its team members reveals the following:

Table 14: InPAV Workforce diversity<sup>11</sup>

S.N	Organization /Designation	Gender	Caste/ Ethnicity	Disability type	District/Palika
1	Country Director/GTN	M	Brahmin/Chettri	NA	Kathmandu
2	Vice Chairperson/NDWA	F	Brahmin/Chettri	Physical	Kathmandu
3	Chairperson/ NDWA	F	Brahmin/Chettri	Physical	Kathmandu
4	General Secretary/ NDWA	F	Brahmin/Chettri	Physical	Kathmandu
5	GTN	F	Brahmin/Chettri	NA	Kathmandu
6	Province Coordinator/NDWA	F	Brahmin/Chettri	Disability related to vision	Province 3
7	Province Coordinator/NDWA	F	Brahmin/Chettri	Physical	Province 6
8	Province Coordinator/ NDWA	F	Brahmin/Chettri	Physical	Province 1
9	Field Coordinator/ NDWA	F	Brahmin/Chettri	Disability related to vision	Panauti/ Kavre
10	Field Coordinator/ NDWA	F	Dalit	Physical	Mandandepur/Kavre

<sup>11</sup> Names have been anonymised

11	Province Coordinator/ NDWA	F	Madeshi	Physical	Province 2
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### 9.3.1.3 Cost effectiveness of project implementation

The UNTF grant for project implementation included Focal Persons across the seven provinces. Reviewing information from them, the EET notes the project modality should have been either more focused in certain geographical areas depending on indicators such as areas where VAW against WGWD prevalence is higher, areas where NDWA has easier access/reach to Palikas, sample areas across the seven provinces or alternatively also included social mobilisers at community levels to realise greater reach at community levels. Trying to reach across the nation with 7 Focal Persons, and the trained participants of the TOTs may have reduced the cost – as having more Focal Persons or staff would inherently increase the project’s financial burden. However, having limited team members meant being more cost effective but this affected the project impact.

#### Major Findings

**Catalytic role of NDWA Personnel at central level and InPAV Focal Persons at provincial levels:** The NDWA central team with its past advocacy, networking and collaborative capacities played a catalytic role in operationalising initiatives at federal, provincial and Palika levels. These were further reinforced by InPAV Focal Persons, especially in some instances where they had closer reach to the Palikas and were able to coordinate more effectively.

Although support of InPAV and its team members has been instrumental in raising awareness among district level service providers, there is risk of information loss as it was already evident during the evaluation. While NDWA and its offices will continue the advocacy for WGWDs, an equal level of effort towards GBV as a core concern may become diluted.

**Monitoring:** 4 OCMCs have initiated disability-based data disaggregation (Prasuti Griha hospital, Kathmandu; Morang; Patan hospital, Lalitpur; Dang) of GBV cases. Such a good practice needs replication across other OCMCs. InPAV contributions to these efforts should not be in isolation, and need to be institutionalised.

Monitoring and tracking of InPAV inputs, whether in terms of training, TOT, orientation and follow up with the trainees is a missing link in the project that affected its efficiency. The project implementation strategy should have had a clearly defined follow up and monitoring mechanism supported by GTN based on its expertise that would reflect changes brought about by the project, and provide further support to teachers and services, WGWDs and parents when required.

**Exit plan was not visible:** The EET could not identify an exit plan prepared in a participatory manner. Although NDWA will continue to work in supporting WGWDs, directly or through other partner organizations, initiatives to sustain impact of training and orientations, as well as lobbying and advocacy for budgetary allocations are missing. The EET notes absence of plans for ensuring the training/orientation are systematized within government and non-government systems will impact their sustainability.

The EET further notes that while elected representatives have been included in training/orientation, inclusion of representatives from various political parties at the provincial and district levels could have helped reinforce monitoring as well as sustainability – they are local persons who would own the issue and lobby for them.

**Strengthening of demand and supply side:** Government training participants appreciated strengthening of service providers to understand and service WGWD-GBV survivors with positive attitude and behavior.

However, demand side strengthening through demand creation activities among WGWD-GBV groups was less at par. Unless WGWDs are capacitated to voice their needs and access services, service providers will not be able utilize their skills.

In conclusion, the evaluation team found that the project was implemented in an efficient and cost-effective manner to a certain degree such as TOTs which aimed at creating ripple effect in schools and OCMCs. However, certain areas such as constant follow up and monitoring of activities as well as holding dialogues and discourses could have been more developed to ensure its efficiency.

## 9.4 Sustainability

This section addresses the agreed question: To what extent will the achieved results, especially any positive changes in the lives of WGWDs (project goal level), be sustained after this project ends?

### 9.4.1 Sustainability of Results

The EET's analysis of the KIIs and FGDs from across the 4 evaluation districts and across the OCMCs in 7 provinces indicate:

- Orientation/training to service providers facilitated understanding of WGWDs' concerns, and those pertaining to GBV. Individual level internalisation on WGWD concerns will sustain and help gradual change in behavior and attitude. Teachers, police, government officials, CSO and OCMC representatives mentioning more empathy resulting from the orientations and training underscore this finding, though the recall bias demand continued efforts.
- Changes such as in GBV-related health mechanism (e.g. OCMC) which involved inclusion of WGWD documentation within 4OCMCs reflect a positive change that will sustain. This again will however require constant monitoring and support by organizations such as NDWA. Such a good practice demands advocacy for replication in other OCMCs, and consolidated data generation for further evidence-based advocacy.
- IEC materials and curriculum are effective advocacy tools that will be utilized by organizations engaged in addressing WGWDs and GBV. Awareness raising will be sustained through their utilization for other programs and activities. However, the process needs to ensure follow up and monitoring of message interpretations. The project mobilized volunteers to place the materials in public places like bus stop, schools, police station, etc. and also developed province-wise TV programs to raise the issues of WGWDs and broadcast from national television. These still require follow up explanations to ensure correct information is being reached.
- Nevertheless, sustainability of WGWD-GBV impacts is closely associated with the active role of NDWA and its core team members, and the Focal Persons being the invariable pillars for mobilization, who will play a key role in whether these activities sustain. NDWA is an umbrella organization addressing WGWD needs since the past two decades and is a recognized body by both government and non-governmental agencies. While the Focal Persons will no longer be remunerated, some are still within NDWA network and if NDWA adopts a strategy for identifying and focusing on key areas and stakeholders to be influenced through their other ongoing programs, interventions will likely sustain. Information from KIIs and FGDs reveal that training sessions facilitated by WGWD facilitators in collaboration with other experts, and which include WGWD participants can lead to greater internalization among participants due to the experience sharing that takes place. However, the brief training sessions highlight the risks of leaving target stakeholders with basic form of

knowledge, and at such a nascent stage current impacts will prevail, but only if more in-depth support and lobbying is ensured.

The EET reiterates the possibility for sustainability of InPAV inputs would have been enhanced through development and implementation of an exit plan. The following interventions might continue, even after project phase out:

**Table 15. Possibly Continuing Activities as Identified by the Evaluation Team**

Activity	Possibility measurement	Responsibility	Resource availability
Using/replicating IEC materials	High	NDWA and its provincial offices	NDWA and InPAV IEC materials
Service providers, teachers, elected representatives, etc. as GBV Champions	Medium	NDWA and its provincial offices	
Campaign on WGWDs and GBV	High	NDWA and CSOs	NDWA
Strengthening OCMC mechanism by mainstreaming gender and disability	Medium	OCMC, with follow up by NDWA and other CSOs	OCMC
Advocacy to allocate budget on WGWD	Medium	NDWA and related CSOs	Municipality
Justice mechanism and CSOs protect and promote WGWDs' access to justice	Low	NDWA, Elected representative	NDWA lobbying
Improved knowledge and evidence influence policies and programs (baseline and endline surveys, curriculum and resource materials)	High	NDWA and other stakeholders	NDWA
Reducing vulnerability during emergencies/disaster situations	High	NDWA and related stakeholders	NDWA

### Findings:

InPAV has successfully created a basic understanding on GBV and its linkages to WGWDs' health, and the need to screen for, and promote access to services for ensuring justice. Interest has been generated and positive behavioural and attitudinal changes occurring among some of the interviewees, i.e., among teachers, OCMC, doctors, police, elected representatives, WGWDs and some of the WGWD parents. Discussions and interactions on WGWD-GBV have been welcomed, and recognized as afflicting many WGWDs. Service providers' participation could be continued with support of local bodies, as some elected representatives have also been trained and could be mobilized for influencing purposes.

Linkages have been established with various CSOs and stakeholders such as police, counsellors, OCMC personnel and teachers. The intervention requires acceleration with a holistic and balanced approach targeting both service seekers and service providers, and the links established require further knowledge and support. Support for continuation of facilitation of WGWDs-GBV related orientations and social mobilisation could increase sustainability further.

There is a possibility to continue WGWD-GBV services through NDWA's other on-going programmes, as well as those of the Palikas. Moreover, the need to collaborate with other non WGWD-GBV related organizations, addressing the engagement of men and boys, and targeting diverse domains in the development sector will expand and sustain efforts.

### Major Lessons Learnt:

The following major lessons are learnt from the project:

- Preparation of an exit plan, jointly with partners and stakeholders, would have enhanced common understanding and commitment to retain successful attributes after project phase out.
- Synergy of regular lobbying and advocacy with Palika/district levels stakeholders and political leaders by the InPAV personnel, combined with awareness raising at community levels, especially among WGWDs and relevant stakeholders, would have motivated WGWDs to seek information and access services.
- InPAV Focal Persons' who were located near the Palikas facilitated lobbying service providers, elected representatives and enabled lobbying for fund allocation for WGWDs.
- Despite the short timeframe of training and orientations, the articulation and understanding of WGWD-GBV problems increased greatly underscoring service providers are effective entry points to introduce and address GBV faced by WGWDs.
- The interest and keenness shown by service providers during trainings and orientations, as evident during the evaluation interviews and the ability to support WGWDs during emergency period, offers potential and scope for addressing WGWDs and GBV as a major public health concern.

## 9.5 Impact

This section addresses the agreed question: To what extent has the project contributed to ending violence against women, gender equality and/or women's empowerment (both intended and unintended impact)?

The stakeholders, NDWA and GTN implementers interviewed by the EET were unanimously positive about benefits of mainstreaming gender and disability into education, health and governance systems and promoting awareness of service providers, WGWDs, their family and communities. Direct benefits mentioned were the reduced vulnerabilities of WGWDs due to the online counseling received during the COVID-19 emergency, and enhanced capacity of OCMC doctors and nurse, teachers, police, counsellors and CSO members to serve WGWDs with greater empathy and understanding as stated by OCMC doctors, teachers and counsellors, and the use of disability sensitive terminologies when addressing themes indicated by a couple of teachers during interviews. Service providers are developing closer relations with organizations serving WGWDs as shared during the KIIs and FGDs, and able to reach out to them when required such as when in need for interpreters in the case of hearing impaired WGWD-GBV survivors, or can refer WGWDs to relevant CSOs. All teachers' enhanced appreciation of the learning on GBV and disability is leading to knowledge sharing with students and other teachers. Some shared the training supported them in identifying and supporting children with disabilities, and lobby for necessary infrastructure in some instances. However, findings from KIIs and FGDs reveal the impact is inclined more towards understanding the overall discriminations and exclusions which WGWDs face; focus on specific forms of violence experienced by WGWDs with specific disabilities, or violence faced by the intersectionally marginalized such as WGWDs living in remote areas, or WGWDs from socially and economically marginalized caste groups, etc. demand greater focus.

The training on trauma healing has been overwhelmingly appreciated by its participants for the positive impacts on WGWDs facing trauma; there is a robust demand for follow up training. Data generated from baseline and endline are valuable evidences that can be utilized for advocacy and lobbying purposes beyond the InPAV project. IEC materials and curriculum developed for school teachers and professional working in the WGWD and GBV sector have been found highly beneficial for service providers such as doctors, teachers and counsellors and will benefit WGWDs beyond the project. The process of accessing benefits by WGWDs will be gradual but will undoubtedly stay.

The following tables present a comparative picture of the baseline and endline data on WGWDs' accessibility to various services:

The surveys explored the WGWDs' accessibility to primary services related to GBV, namely health, OCMC, police, legal services, and psycho-social counseling and ease or challenges experienced in accessing these services.

Review of the surveys indicate increase in participants' ability to easily access health services (Table 16) . There is an increasing rising from 28 percent in baseline to 37 percent in endline. However, some 26 percent continue to find it difficult, a rise from the baseline of 22 percent, identifying the services as too expensive (38%), too far away (36%), long wait to avail services (33%), and the absence of disability friendly building/lack of disability friendly toilets (31%) as key deterrents.

InPAV carried out numerous awareness interventions to promote WGWDs' knowledge and awareness about OCMCs (a national government program addressing GBV) and the services they provide. A major InPAV intervention was training OCMC personnel to promote their understanding and skills in servicing WGWDs' special needs. However, review of the survey findings suggest these interventions had no impact with 90 percent respondents reporting lack of knowledge when asked about their accessibility to OCMCs (Table 17).

However, on a positive note, the percentage of participants reporting easy accessibility to police has increased from the baseline of 19 percent to the 36 percent during the endline (Table 18). Despite this some 26 percent are still reporting a lack of knowledge during endline which has increased from the baseline of 21 percent. A comparative look at baseline and endline challenges while accessing police services indicated substantial decline in the challenges faced, namely, services being far away staff behave differently, services have long waiting times.

The EET notes an encouraging increase in number of participants reporting easy to access to legal services in case of violence (baseline: 12%, endline: 25%), though the number continues to remain low, with 34 percent of endline participants still reporting a lack of knowledge. Major challenges are identified as service being too far away, different behavior of staff to persons with disabilities, and long waiting time to access services (Table 19). Likewise, another encouraging finding is the percentage of endline participants reporting it is easy to access psycho-social services which has more than doubled from the baseline survey period (baseline: 7%; endline: 17%). Though researchers note this is still a small percentage and almost half the endline participants reported lack of knowledge about these services. (Table 20)

**Table 16. Accessibility of health services**

Accessibility of health services	Baseline		Endline	
	N	%	N	%
<b>Easy</b>	363	28.1	477	36.6
<b>Same like everybody else</b>	511	39.5	380	29.2
<b>Difficult</b>	285	22.0	343	26.3
<b>Don't know</b>	135	10.4	102	7.8
<b>Total</b>	<b>1294</b>	<b>100.0</b>	<b>1302</b>	<b>100.0</b>

**Table 17. Accessibility of OCMC**

	Baseline		Endline	
	N	%	N	%
Accessibility of OCMC				
<b>Easy</b>	42	3.2	35	2.7
<b>Difficult</b>	112	8.7	16	1.2
<b>Same as for everybody</b>	143	11.1	77	5.9
<b>Don't know</b>	997	77	1174	90.2
<b>Total</b>	1294	100.0	1302	100.0

**Table 18. Accessibility of Police**

	Baseline		Endline	
	N	%	N	%
Accessibility of Police				
<b>Easy</b>	244	18.9	469	36
<b>Difficult</b>	204	15.8	117	9
<b>Same as for everybody</b>	581	44.9	382	29.3
<b>Don't know</b>	265	20.5	334	25.7
<b>Total</b>	1294	100.0	1302	100.0

**Table 19. Accessibility of Legal Service**

	Baseline		Endline	
	N	%	N	%
Accessibility of Legal Service				
<b>Easy</b>	153	11.8	328	25.2
<b>Difficult</b>	189	14.6	201	15.4
<b>Same as for everybody</b>	460	35.5	335	25.7
<b>Don't know</b>	492	38	438	33.6

**Table 20. Accessibility of psychological counseling service**

	Baseline		Endline	
	N	%	N	%
Accessibility of psychological counseling service				
<b>Easy</b>	87	6.7	217	16.7
<b>Difficult</b>	216	16.7	213	16.4
<b>Same as for everybody</b>	308	23.8	247	19
<b>Don't know</b>	683	52.8	625	48
<b>Total</b>	1294	100.0	1302	100.0

### 9.5.1 Observations

A couple of OCMCs have incorporated columns in their Registers for maintaining data on GBV survivors with disability in their data management system. This will help institutionalise and



mainstream GBV and disability in their system but will require persistent follow up by organisations working with WGWDs.

In two Palikas (Panauti, Kavre district; Sundarharaicha, Morang district), InPAV contribution through advocacy and lobbying has led to budgetary allocation for conducting programs for WGWDs. Follow up will be required in the coming days for the initiative to endure.

Awareness of service providers serving WGWDs facing GBV, especially teachers, OCMC personnel, police, CSOs, counsellors, had increased as shared during the KIIs and FGDs.

The provision of online counselling during COVID-19 was an unintended impact of the project which directly benefitted WGWDs facing GBV and other forms of trauma. During discussion with the EET, NDWA counsellor identified online counselling as an approach that should be adopted to reach out to WGWDs who may not have easy access for in-person counselling.

The use of social media has helped support WGWDs with GBV related information. Though the exact number who benefitted could not be ascertained, nor information from community members available, it has undoubtedly reached many, especially during COVID-19 period during which they were able to access counselling and relief materials.

#### 9.5.2 Findings

Expected, as well as positive unintended impacts had materialised such as improved knowledge and evidence which can be used for lobbying and advocacy on WGWD and GBV.

As elaborated in the earlier sections, there was a plausible causal link with InPAV activities and outcomes.

It would be appropriate to make provisions for impact evaluation after two years.

### 9.6 Knowledge Generation

A number of knowledge products have been generated by InPAV, namely, IEC materials, curriculum for teachers training and baseline and endline data. Baseline and endline data on WGWDs in relation to GBV, with a sample of 1,294 respondents and 1,302 respectively, are the first of its kind with such a large number in the country. Findings will prove very useful to design future plans and programs.

The development process of resource materials directly engaged of WGWDs as well experts from respective fields, such as counsellors. There was appreciation for taking into account their perspectives and including feedback in the curriculum sessions. As stated by a counsellor, 'the InPAV team worked dedicatedly to ensure GBV concerns were duly incorporated'.

The quality of resource materials such as the IEC sharing information on types of disabilities are valuable resources that should be widely disseminated for mass understanding.

#### Observations:

The EET found that comparing the baseline and endline data was challenging. While the endline adopted the same questionnaire as that used in the baseline, with some slight revisions, in many instances baseline data did not generate disaggregated information, based on age, caste/ethnicity, disability, etc. This made comparisons difficult.

The version of the curriculum received by the EET was still in a draft version – this is a valuable resource that when finalized can be utilized through other programs; its finalisation should be expedited.

Dissemination of IEC materials at Provincial and Palika levels and their impacts could not be established as most interviewees could not recall or were unaware.

### **Findings:**

InPAV has developed valuable resources that can be widely disseminated and their impacts and influence measured. Strategic utilization of these resources through various stakeholders and mediums – such as social media, would have led to greater awareness level.

The curriculum for teachers is identified by interviewees as highly relevant for understanding and mainstreaming gender and disability in the education system. The EET could not determine any efforts to integrate it in the government’s curriculum, nor in the academic institutions reached out by InPAV for teacher selection.

Data from the baseline and endline can be used for preparation of a study report documenting different forms of GBV facing WGWDs. This would be a valuable study for policy influencing and programming at federal, provincial and local government levels.

The absence of follow up, monitoring and knowledge resource impact measuring tool within InPAV project is a missed opportunity. Incorporating the need for such support from GTN, from the project design phase, would have invariably highlighted InPAV impact at community and grassroots levels, which could not be visible to the EET.

## **9.7 Gender Equality and Human Rights**

InPAV has taken efforts to ensure human rights and gender responsiveness are incorporated across all project activities. The fact the project is implemented by NDWA – which came to life in order to address the needs of women and girls with disabilities, has facilitated the implementation and coordination process. The EET notes conscientious effort on the part of NDWA to ensure human rights with an intersectional approach of target groups are taken into consideration, beginning from development of knowledge products (IEC materials address the different forms of disabilities and indicate measures to ensure sensitivity while dealing and addressing them), ensuring workforce diversity (including WGWDs from different caste groups, although there are still more Brahmin/Chhetri WGWDs), selection of participants for the TOT for teachers (schools teaching children social studies which addresses human rights issues were invited), to training of diverse stakeholders directly and indirectly engaged with WGWDs.

Review of documents reveal both baseline and endline surveys have taken careful steps and time to ensure data collection process does not harm interviewees. Sessions were undertaken, with support from NDWA, to orient data collectors and sensitise them on gender and disability sensitive measures to be adopted. During data collection also reports indicate constant follow up to monitor the gender and disability sensitive nature of the process.

Resource materials and the approaches adopted for their development indicate discussions held with field experts and inclusion of their feedback, as well appreciated by the counsellor. Facilitators

engaged during the orientation/training sessions and efforts to ensure sensitivity – ensuring WGWDs had a voice during the training, providing platform for open and respectful and dignified sharing of WGWD cases, experiences, and method adopted were being repeatedly mentioned by trainees.

#### **Findings:**

**High level of commitment by implementing partners:** The EET notes and appreciates the effort on the part of NDWA and GTN to ensure gender sensitivity and human rights are ensured across all InPAV activities, beginning from baseline data collection where efforts to include WGWDs were included (despite the challenges) to selection of the EET team which is also a consortium of women led organizations.

**High quality IEC materials:** The quality and details in the IEC materials reflect the effort contributed to ensure they address the needs of women and girls with disability. These can be easily replicated and utilized in other WGWD related programs.

**Identifying GBV in resource materials:** Information from interviewees indicate training sessions well incorporated GBV concerns, with facilitators using personal and other WGWD stories to establish linkages. However, the EET notes the linkage between WGWDs and GBV are not as evident in IEC materials. The television program “AnkhiJhyaal” tries to address it to some extent. More than 1,500 people reached and views TV program produced by NDWA on GBV prevention, which is broadcast from different TV channels.<sup>12</sup>

**Data disaggregation:** Data disaggregation forms a core element to reflect the incorporation of gender and human rights perspectives within any project. The EET notes data disaggregation pertaining to the various intervention participants, and the target groups which benefitted are not always available.

## 10. Conclusions

### **Effectiveness**

- Review of data generated from baseline and endline surveys, OCMC assessment, Rapid assessment on impact of COVID on WGWDs, and information gathered from KIIs and FGDs reflect that WGWD related GBV project effectiveness can be ensured through a holistic and multi-pronged approach. On one hand the project reached service providers and decision makers to sensitively address the needs of WGWD-GBV survivors, and influence policy makers to promote WGWDs’ access to support and resources; on the other awareness raising was focused through various IEC materials, social media interventions. While evaluation KIIs and FGDs were not able to capture changes at community levels and among WGWDs, however, the comparative report of the baseline and endline underline changes taking place.
- Evaluation findings categorically highlight the effectiveness of InPAV interventions in capacitating government and non-government service providers on linking GBV and WGWD,

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<sup>12</sup>Link:<https://www.youtube.com/watch?v=Z57IYP-pcc> <https://youtu.be/fosyKyZVuI8> <https://www.youtube.com/watch?v=zMjmIM1aoho>

and empowering them to provide effective and disability/GBV sensitive services. Using evidences to tackle WGWD-GBV specific servicing are proving highly effective; however, without frequent refresher and monitoring to ensure institutionalization of these initiatives there is a risk of the capacities getting lost. Evaluation findings suggest inadequate awareness among communities and WGWDs and their families regarding services – hence, awareness raising on existing services and facilities must be consistently undertaken in order for service providers to support service seekers. The EET concludes a balance between demand and supply must be taken hand in hand.

- InPAV played a vital role in supporting WGWDs during the pandemic. Some of the major and effective outreach and support to WGWDs were made possible through flexible emergency support from UNTF and NDWA’s linkages and networking with various local and federal level policy makers.
- Efforts to reach WGWDs and ensure they have knowledge about and access GBV related services are less visible. A more balanced approach to enhance service seeking information and behavior, and establishing linkages with targeted service providers would generate concrete WGWD-GBV empowerment results.

**Relevance:**

- The EET concludes that prevalence of GBV among WGWDs is high, beginning from the family and communities. However, efforts to address various forms of GBV faced by WGWDs, including the intersectional aspect, remained hidden and nominal and InPAV has proven highly relevant in highlighting the need for its focus among service providers.
- Findings conclude access to services is a major challenge particularly for WGWDs, as people do not feel comfortable reaching out to the government or police, while most remain unaware of the OCMCs. InPAV has firmly established the significance of continued efforts in addressing GBV faced by WGWDs’, targeting stakeholders such as family, neighborhood and community members, society at large, service providers and policy makers. A more balanced approach to identify elements that challenge WGWDs’ in accessing services, and addressing them among WGWDs would have promoted access to services.

**Efficiency:**

- Organizations such as NDWA, already working on the WGWDs and with a large nationwide network and with a high level of ownership and commitment can be more efficient in outreach to other related stakeholders, both government and non-government.
- The ability to adapt to the emergency needs brought about by COVID-19, by UNTF, NDWA and GTN enabled emergency support to WGWDs who would otherwise have been overlooked.
- The EET concludes presence of InPAV Focal Persons at Palika levels would have categorically ensured greater influencing and accountability of policy makers, and service providers who received training, and closer networking and empowerment of WGWDs facing GBV or at risk of GBV. From a budgetary perspective this would have entailed higher costs, but an approach to collaborate with local governments and disability committees, or joint efforts with others CSOs could have made the project more effective.

**Sustainability:**

- The EET concludes many of the effective training/orientations to service providers and stakeholders, and IEC materials developed over the project period will sustain. While IEC materials can be utilized in other programs by NDWA and other government and non government CSOs, training input on stakeholders will need to be regularly followed up and refresher courses provided.
- Situating InPAV Focal Persons at Palika levels, or recruiting local personnel may have proven more cost effective, and more sustainable, due to the direct reach they would have had with local governments and WGWDs at community levels.
- The EET concludes that lack of an exit plan risks loss of gains that are still at a nascent stage, and which have been made through training and orientation among service providers, and awareness raising that have been initiated through various IEC materials. An exit plan involving close collaboration with local government and CSOs, especially those engaged with GBV would ensure sustainability of efforts.

#### **Impact:**

- The EET concludes there is increased awareness of various forms of GBV facing WGWDs among government and non-government service providers, immediate stakeholders, general mass and some WGWDs. InPAV has categorically highlighted the elevated risks and vulnerabilities of WGWDs from GBV, and the need for a holistic approach to address their challenges. The frequent demand from interviewees for refresher courses on training such as trauma healing which helped many WGWD-GBV survivor underscore the impact of such training.
- InPAV has demonstrated the interest and keenness among service providers to better understand the WGWD-GBV contexts and measures to support effectively.
- Social media and online counseling are effective means of reaching and impacting GBV needs of WGWDs – while maintaining confidentiality, and addressing some of their challenges in accessing available resources.

#### **Knowledge Generation:**

InPAV has generated invaluable resources pertaining to WGWD and GBV, some of which are pioneering, e.g., the baseline and endline comparative data, OCMC assessment from WGWD perspectives, curriculum for teacher training, etc. which can be widely disseminated for policy influencing and advocacy. NDWA and other GBV and WGWD related organizations will need to strategically optimise their utilization for the benefits of WGWDs.

#### **Gender Equality and Human Rights:**

The EET concludes InPAV has made conscious efforts to mainstream disability, human rights and gender across all its interventions. This is evidenced by sessions included in the orientation sessions, type of participants invited for training, and ensuring inclusivity while undertaking surveys. Nevertheless, the need for more caste diversity in their project workforce, as well as engaging men and boys to realize social transformation while addressing GBV should have been focused upon.

## **11. Key Recommendations**

### **a. Phasing out of InPAV (Timeframe: Immediate)**

Experiences of the InPAV highlight that WGWDs at grassroots levels, and the most disadvantaged among them face the risk of being overlooked or their empowerment process being diluted. It is recommended that a mapping be initially undertaken in collaboration with local governments to determine their conditions. Such a targeted approach for a limited timeframe, will ensure their empowerment and access to information on resources. Findings from the endline revealed many of the list with the local governments are incomplete or inadequate and require updating.

Provide following support through close collaboration local government and other local CSOs capacity building services to WGWDs. This would involve:

- Identifying locations and type of support required
- Establishing linkages with existing government and CSO programs for social, economic and legal empowerment and services
- Ensure adequate information is available on government social security facilities available and ensure their access

**b. Up Scaling of GBV Initiative (Timeframe: Immediate)**

The GBV component within the InPAV has generated a large interest among service providers and service seekers and should be continued. It has shown a potential for transforming unequal gender relations from a rights perspective. But InPAV experiences also highlight that exiting at the current stage is also a time wherein only basic understanding of GBV has been touched upon; focusing on awareness raising and the breaking of silence is a risk for both WGWD GBV survivors and their family members. The nascent stage of WGWD and GBV linkages and their understanding and advocacy highlights their vulnerabilities in the following areas:

- Potential risk of re-victimisation: WGWDs seeking services and justice without full support can leave them open to further stigma and discriminations
- Potential family conflict: Male and female family members, may begin to create hurdles when WGWDs begin speaking of their rights, which may result in further physical and mental violence
- Potential social disharmony: The knowledge CSOs such as NDWA are not there for guidance and support may empower perpetrators and derail some of the impacts.

To avoid these risks, it is recommended, (i) organizations at local levels with past GBV work experiences are engaged to scale up capacity of community knowledge GBV technical and institutional knowledge and existing available services (e.g. OCMC). Work can also be done through community based organizations such as mothers' groups, community forestry users' groups, among others. This would only be a small-scale support and could potentially be supported by local governments. (ii) The EET makes a robust recommendation that a GBV programme, encompassing WGWD is undertaken. Success, lessons learnt and impacts of the InPAV project should be used as the stepping-stone for the up scaling.

**c. Ensure accountability checks of OCMCs (Timeframe: Immediate)**

NDWA should establish linkages with other projects to support OCMCs in supporting WGWDs, either through referrals, refresher training, legal services and safe homes for WGWDs for continuation of InPAV initiatives.

**d. Ensure accountability checks of allocation of local bodies block grants (Timeframe: Immediate and long term)**

To ensure allocation of local bodies' grants to the WGWD and GBV sector make mandatory budgetary allocation by local bodies through different sectors. NDWA and related CSOs should regularly coordinate and lobby with local governments, especially prior to the budgetary planning sessions. Plans should include orientation to newly elected representatives. These platforms should be used to promote health, especially sexual and reproductive health, psycho-social support, education and economic empowerment of WGWDs.

**e. Possible replication of InPAV good practices (Timeframe: Immediate and long term)**

Explore possibilities to replicate InPAV good practices, such as engaging with diverse WGWD stakeholders through training, TOT to teachers, wide dissemination of WGWD and GBV related IEC materials, etc. Findings from the baseline and endline survey reports should be optimised to advocate against GBV faced by WGWDs.

f. Suggestions from WGWDs interviewed during the baseline and endline surveys for prevention and response to address GBV against WGWDs include the following:

**Table 21. Comparative data from InPAV baseline and endline survey findings to prevent and respond to VAWGWD**

	Baseline (n=1,294)		Endline (n=1,302)	
	N	%	N	%
Additional information useful for prevention and response of violence				
<b>Awareness activities (Street drama/folk songs etc)</b>	1181	91.3	626	48.1
<b>Campaign/message</b>	615	47.5	198	15.2
<b>Reporting of violence issues</b>	322	24.9	305	23.4
<b>OCCMC</b>	69	5.3	14	1.1
<b>Legal education</b>	312	24.1	148	11.4
<b>Police cell/Women, Children and Senior Citizen Service Center</b>	238	18.4	348	26.7
<b>GBV watch group activities</b>	123	9.5	36	2.8
<b>Rally/ mass meeting</b>		0.0	360	27.6
<b>Documentary/Audio/IEC materials</b>	1	0.1	585	44.9
<b>Legal access on legal service</b>		0.0	222	17.1
<b>Awareness program through TV Radio</b>	1	0.1	7	.5
<b>Training</b>		0.0	11	.8

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<b>Don't know</b>	47	3.6	114	8.8
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## 12. Annexes

### 1. Evaluation Matrix

Evaluation Criteria	Evaluation Questions	Indicators	Data Source and Data Collection Methods
Effectiveness	To what extent were the intended project goal, outcomes and outputs (project results) achieved and how?	<p><i>Project Goal:</i> WGWDs are supported, enabled and empowered in preventing and addressing violence and claiming their rights and justice in the event of it – InPAV has initiated the process which is in a nascent stage as interventions were disrupted by COVID-19, Nepal government’s transition to federal system and limited human resources at community level. Support to empower and enable them to prevent and address VAWGWDs demands continued support for this much needed intervention, as highlighted by the baseline/endline findings also.</p> <p>Outcome Indicator 1.1: Percentage of awareness level and knowledge of community will be increased on VAWGWDs, disability, GBV prevention and reporting mechanism – InPAV reporting indicate large scale community awareness on VAWGWD and wide dissemination of IEC materials; however, the evaluation could not confirm this.</p> <p>Output Indicator 1.1: Percentages of women and girls with disability who have the knowledge on all forms of GBVs – While IEC materials were shared, with training including WGWDs also, however, findings indicate information has not reached WGWDs as envisaged. This is primarily due to scattered nature of project, COVID-19 and limited staff.</p> <p>Outcome Indicator 1.2: Number of lobby and advocacy conducted at local level to mainstream gender and disability in policy and program – NDWA legitimacy and legacy has facilitated and ensured effective advocacy. Targets have been achieved.</p> <p>Output Indicator 1.2: Number of lobby and advocacy conducted at local level to mainstream gender and disability in policy and programs – NDWA team was able to effectively carry out their advocacy efforts across all 3 government tiers. Target achieved.</p> <p>Outcome Indicator 1.3: Capacity of WGWDs, their organizations and LGs officials developed to promote and act as GBV Champions - Achievement is slightly higher than target; NDWA has effectively initiated process of capacity building, especially of WGWD service providers. Increasing awareness and empathy towards WGWDs is starting to take place.</p> <p>Output Indicator 1.3: Developed capacity of WGWDs– WGWDs received capacity building training, and also received counseling support as well. However, knowledge transfer to WGWDs and the latter’s capacity building is not evident. Outreach of InPAV to community level remained limited – primarily due to COVID-19 and project modality, and transitioning Nepal government into federal system.</p> <p>Outcome Indicator 2.1: Number of Governance and GBV mechanism (OCMC, GESI focal point, justice committee</p>	<p><i>Document review, Data verification through KIIs, FGDS and Baseline and Endline survey findings</i></p> <p><i>Data verification through KIIs, FGDS and Baseline and Endline survey findings</i></p> <p><i>KIIs, FGDS, Baseline/Endline surveys, Review of annual and progress reports</i></p> <p><i>KIIs, FGDS, groups consultations</i></p> <p><i>KII, FGDS, and group consultations</i></p> <p><i>Baseline/Endline report review, KIIs and FGDS.</i></p> <p><i>Document review, KII, FGDS, and group consultations</i></p> <p><i>Document review, KII, FGDS, and group consultations</i></p>

		<p>disability coordination committee etc.) at sub national level are strengthened and new established to mainstream gender and disability in sub national level program and policy– Target of TOTs to health and education personnel have been achieved. Findings from baseline and OCMC assessment are employed to develop TOT materials.</p> <p>Output Indicator 2.1: Review and build-in disability inclusiveness in current GBV programmes/ mechanisms including the OCMCs - Effectivelyintegrated WGWD data column in 5 OCMC data management system. Local governments initiated GBV orientation following InPAV orientation.</p> <p>Outcome Indicator 3.1: Research and studies to generate evidence and advocacy tools – Conducted TOTs to teachers in 5 provinces and initiated the process for knowledge transfer in the education institutions. Target of TOT to teachers is achieved.</p> <p>Output 3.1 Generate knowledge, skills, resources on VAW in communities for bridging gaps and documenting lessons learned – Baseline/Endline reports, OCMC assessment report, IEC materials, audio-visual programs, etc. are the first of their type linking GBV and WGWD and will prove invaluable in coming days for advocacy and lobbying. The target remains to be completed; evaluation reviewed data till March 2022 only.</p> <p>Outcome Indicator 4.1: 1,106 women and girls with disabilities are aware, prevented, responded rescued from negative impact including GBV during the critical situation of COVID-19 pandemic as well as in other emergency / disaster situation – InPAV and UNTF flexibility enabled emergency support to WGWDs during COVID-19, including with mass awareness, online counseling, IEC materials, etc.</p> <p>Output Indicator 4.1: Women and girls with disabilities are aware, prevented , responded rescued from negative impact including GBV during the critical situation of COVID-19 pandemic as well as in other emergency / disaster situation – Rapid Assessment of WGWDs during COVID-19 and distribution of humanitarian relief materials, and advocacy with government which facilitated relief distribution</p> <p>Output Indicator 4.2: Number of mass /social media are mobilized fro awareness raising about COVID-19 (in appropriate means of language like sign language – Social media (Youtube, video with sign language mobilized for mass awareness on COVID-19) – Intervention initiated, remaining report not covered by evaluation.</p>	<p><i>Evaluation KIIs and FGDs, and Progress and Annual reports</i></p> <p><i>Baseline/Endline reports, Rapid Assessment report, OCMC report, Progress and Annual Reports, KIIs and FGDs</i></p> <p><i>Progress and Annual reports, KIIs</i></p> <p><i>KIIs, FGDs, annual and progress reports</i></p> <p><i>KIIs, FGDs, annual and progress reports</i></p> <p><i>KIIs, FGDs, annual and progress reports</i></p>
<b>Relevance</b>	To what extent do the achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls?	The project results are highly relevant to WGWDs. Baseline/Endline findings evidence the high prevalence of different forms of VAWGWDs at family and community levels. Findings indicate some of the InPAV efforts are pioneering (e.g. baselin/endline comparative data) which should be employed as powerful advocacy tools. Despite these, InPAV was not able to reach the community and WGWDs as envisioned due to challenges the project	Program documents; Document review, FGDs and KIIs.

		encountered. However, the the results achieved are highly relevant for continuity.	
<b>Efficiency</b>	To what extent was the project efficiently and cost-effectively implemented?	The project was delayed due to COVID-19. As such expenditures were also pushed back which led to some of the activities being rushed. Budget reallocation had to take place due to increasing VAWGWD faced by WGWDs within homes and other spaces, and for humanitarian relief.	<i>To be completed by the evaluator/s</i>
<b>Sustainability</b>	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?	InPAV successfully created basic understanding on GBV and its linkages to WGWDs' health, and the need to screen for, and promote access to services for ensuring justice. Interest has been generated and positive behavioural and attitudinal changes initiated among some service providers, i.e., teachers, OCMC, doctors, police, elected representatives, WGWDs and some of the WGWD parents. However, intervention requires continued support for some time and acceleration with a holistic and balanced approach targeting both service seekers and service providers. Linkages established require further knowledge and support else there is risk of efforts being diluted. Support for continuation of facilitation of WGWDs-GBV related orientations and social mobilisation could increase sustainability.	<i>Document review, KIIs, FGDs</i>
<b>Impact</b>	To what extent has the project contributed to ending violence against women, gender equality and/or women's empowerment (both intended and unintended impact)?	Service providers' education, health and governance systems were positive about promoting awareness of service providers, WGWDs, their family and communities. On the other hand, InPAV was able to support VAWGWD during COVID through direct online counselling. The intervention is still at a nascent stage and WGWDs are yet to be reached. Inclusion of WGWD information in OCMC data management system and TOT to teachers and judiciary and law enforcement agencies underlines efforts to ensure their data in the government GBV mechanisms. However continued, balanced and holistic effort is required to end VAWGWD.	<i>Document review, KIIs and FGDs</i>
<b>Knowledge generation</b>	To what extent has the project generated knowledge, promising or emerging practices in the field of EAW/G that should be documented and shared with other practitioners?	Training on trauma healing has been overwhelmingly appreciated by its participants for the positive impacts on WGWDs facing trauma; though it was initiated as a result of COVID-19 mobility restrictions this is a best practice as many WGWDs are unable to go to counseling centres due to mobility restrictions, social stigma and fear. InPAV has generated valuable Baseline and endline data on VAWGWD which are pioneering in nature and can be utilized as powerful advocacy and social mobilization tools for prevention and protection of WGWDs from violence. Findings should be linked with other stakeholders engaged in the development sector to mainstream WGWDs' needs.	<i>Document review, KIIs and FGDs</i>
<b>Gender Equality and Human Rights</b>	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.	InPAV has taken efforts to ensure human rights and gender responsiveness are incorporated across all project activities. Conscientious effort on the part of NDWA to ensure human rights with an intersectional approach of target groups are taken into consideration, beginning from development of knowledge products, ensuring workforce diversity, selection of participants for the TOT for teachers, training of diverse stakeholders directly and indirectly engaged with WGWDs, and undertaking of Endline and External Evaluation surveys led by GEDSI-sensitive teams.	<i>Document review, KIIs, FGDs.</i>

## 2. Beneficiary Data Sheet

<b>TOTAL BENEFICIARIES REACHED BY THE PROJECT</b>	<b>Expected Number</b>	<b>Achieved Number</b>
Total	15736	20637
Women with disabilities	3810	3810
Girls with disabilities	2290	2290
<b>TOTAL PRIMARY BENEFICIARIES REACHED</b>	<b>6100</b>	<b>6100</b>
Members of Community Based Organizations	77	77
Education Professionals (i.e. teachers, educators)	140	167
Government Officials (i.e. decision makers, policy implementers)	301	301
Health Professionals (doctors, nurses, medical practioners OCMC)	27	27
Journalists / Media	30	30
Legal Officers (i.e. Lawyers, prosecutors, judges)	27	27
Men and/ or boys	2830	7704
Uniformed personnel (i.e. Police, military, peace keeping)	54	54
<b>TOTAL SECONDARY BENEFICIARIES</b>	<b>9636</b>	<b>14537</b>
General Public	5748	13398

### 3. Evaluators'CVs

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#### Executive Profile

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I possess over two decades of extensive experience in the social development sector in Nepal. These cover a wide spectrum - human rights, gender equality, women's empowerment, gender based violence, child rights, social inclusion, reproductive health, peace building and conflict resolution, community mediation, good governance, LGBTQI rights, men and boys' engagement - which lay the foundation for my career. My primary focus remains ensuring gender equality and empowerment of women, youth and children, predominantly through prevention and protection from sexual and gender based violence, within households, in private and public sectors, and during times of conflict and disaster. In all these sectors ensuring evidence based data along with quality assurance of interventions and assignments have remained a primary focus. Strategic leadership and engagement in pioneering researches and studies on gender based violence, and gender equality and social inclusion within diverse sectors in Nepal have proven crucial in bringing to light these concerns, and mainstreaming it in policies, programs and lobbying with parliamentarians. Subsequently, translation of research findings and recommendations into conceptualizing and implementing successful interventions, from community to policy levels, and taking up challenging issues, bringing it to light and lobbying for the rights of survivors forms a fundamental focus of my passion and accomplishments – whether it is child victims of pedophilia, survivors of sexual and gender based violence (SGBV) during conflict, children born out of rape during conflict, uterine prolapse and its impacts on women, release of women imprisoned due to abortion, support of children orphaned by conflict, or women engaged in the formal of informal sectors. The sensitive nature of all these sectors consistently demand the need for highest level of effort and output, both individually and in the team efforts.

Robust analytical skills form a core professional niche and have been consistently utilized in monitoring and evaluation of development programs. In-depth and extensive grasp of the development sector, reinforced by assessment and social and gender audits - of government, non government and donor programs at macro, meso and micro levels [e.g. *Inter Party Women's Alliance, USAID's HamroSamman (anti human trafficking) project, GoN's National Action Plan on UNSCRs 1325 and 1820 (Drafting/Coordinator of second phase; First national Action Plan Monitoring Report, and Mid-term report), UNFPA Country Programme evaluation, GoN's One Stop Crisis Management Centres (OCMC), UN Women's project with the Ministry of Defence/Nepal Army, Women for Human Rights, JICA, Natural Resource Management Sector Assistance Program (NARMSAP), SDC's Rural Health Development Program (RHDP), Youth based Reproductive Health Programmes, USAID's core health program (H4L), post-earthquake BaliyoGhar, access to justice programs, USAID GESI analysis for upcoming Country Development Cooperation Strategy (2020 onwards)*], have fine-tuned my capacity to comprehend multiple layers of intervention impacts, and challenges therein. These experiences have proven useful in the present federal structure.

As an activist I believe it is critical to promote social transformation through coherent, consistent and quality knowledge transfer to diverse groups, particularly the young population – accordingly, I develop relevant training manuals, National Action Plan on UNSCRs 1325 and 1820, Phase II (draft), Standard Operating Procedures (e.g. GBV in Humanitarian Settings) and diverse IEC materials to foster transformation at macro, meso and micro levels. This passion and commitment is further fuelled through information gathered from community levels which is then translated through trainings, especially on gender equality and social inclusion (GESI), Reproductive Health, Sexual and Gender Based Violence, HIV/AIDS, conflict resolution and peace building - from grassroots to policy, community members, NGOs to senior government and security personnel. Learnings from these experiences are used to realize change at macro levels through relentless lobbying and advocacy, networking and alliance building.

### **Academic Background**

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Tribhuvan University, Kathmandu, Nepal

Islamabad College for Girls, Islamabad, Pakistan

St. Mary's High School, KTM, Nepal

Ecole International de Paris, Paris, France

St. Mary's High School, KTM, Nepal

### **Academic Qualifications**

Master of Arts (MA) - Tribhuvan University, Kathmandu

(major: Political Science - Diplomacy, International Relations, Nepalese Politics, Comparative Governments)

Bachelor of Arts (BA) - Islamabad College for Girls, Islamabad, Pakistan

(major: Political Science and English Literature)

Intermediate (IA) - Islamabad College for Girls, Islamabad, Pakistan

(major: Psychology, English Literature, Sociology and Civics)

School Leaving Certificate (SLC) - St. Mary's High School, Nepal

### **Professional Experience**

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Professionally I am recognized as a leading activist possessing in-depth knowledge of Nepal's development sector, and a comprehensive knowledge of women and children's rights especially from a sexual and reproductive health perspective, gender equality, human rights, non discrimination and SGBV from a national and global perspective, especially in humanitarian settings. As a self-motivated, committed, innovative and enthusiastic leader who analyzes and identifies novel concepts, I have effectively led numerous research teams and consortiums to strategically

accomplish complex assignments, and mentored team members from different programmatic sectors. I work under pressure with discipline, skills, and dedication to deliver tangible results on assignments for result oriented outcomes and transformation. Moreover, I am very comfortable to work in multi-disciplinary team, a factor reinforced by my global experiences – both while growing up as well as in my career. These contributions are recognized through my presence as a Board Member/Executive Member/Invitee in numerous national leading NGOs [e.g. Women Women Entrepreneur Development Committee/FNCCI, *Saathi*, *RUWDUC*, *Safe Motherhood Network Federation*], wherein I am a motivational force with robust advocacy, lobbying, and coordination skills to work with government and counterparts in various areas of expertise, in public and private domain.

### **Engagement in civil society organization (CSO) sector**

Personal engagement with the CSO sector commenced as a Program Officer in *RUWDUC* in 1996 providing me space to learn about some of the most remote districts and communities, and women and children in the country. Since then, with an agenda of transforming the lives of most marginalized women, youth and children, my work/activism remains focused on raising the unheard voices and needs such as violence against women and children, reproductive health needs, maternal mortality, uterine prolapse, child marriage through conceptualizing and designing proposals, and advocating for change in laws and policies. Eventually I was became engaged in other organisations such *FWEAN*, *Saathi*, *Safe Motherhood Network Federation*, and am also a Founder Member of *Samanata* – Institute for Social and Gender Equality - forerunners on gender equality and gender mainstreaming in the country, and have conducted numerous Gender Mainstreaming training for civil society organizations and external development partners. Engagement within the civil society organization has provided me a niche for close coordination and collaboration with various other CSO stakeholders, government personnel from policy to grassroots level, external development partners as well as general public.

### **Research, Analysis, and Monitoring & Evaluation**

Researches and studies I have led, or been involved in as a core team member have been both qualitative and quantitative. Majority of the researches, surveys and monitoring and evaluations have involved developing and finetuning concepts, guiding, supervising and mentoring team members, as well as implementing these socially complex researches across the nation. These diverse engagements have led to building a professional reputation Compilation and consolidation of the multifaceted qualitative and quantitative data through various software, a robust demonstrated ability to analyse survey data, and independently prepare high quality reports remains a key forte. Many of these researches have contributed significantly to the women, children and marginalized groups' movement in the country, effectively bringing to light contexts often invisible yet detrimental to poverty eradication(*can be made available upon request*). Moreover, my proficiency in English and Nepali (oral and written), as well close working relations with the civil society as well as government representatives, reinforced by an ability to effectively interact with various stakeholders –have made it possible to consolidate voices of the marginalized for transformation at policy and programmatic levels.

## **Freelance Consultant**

Experiences in the CSO sector facilitated the process to venture out as a freelance consultant. Freelancing with UN agencies, bi-lateral and multi-lateral organizations and INGOs - through research, monitoring and evaluations, gender and social auditing, training have enabled knowledge diversification with state-of-the-art information on global and national development goals, enhanced understanding of government programs implemented with development partner support, and made it possible to use donor-lenses to analyze program impacts and challenges.

## **Professional Affiliations**

- CEO and Founder, PSR Research and Consultancies
- Executive Board Member - Saathi (NGO)
- Member – FNCCI/Women Entrepreneurship Development Committee
- Board Member – Federation of Women Entrepreneurs Association of Nepal (FWEAN) (2020 – Dec 2021)
- RAMP UP Pvt Ltd.
- Board Member - Rural Women's Development and Unity Centre (RUWDUC) (NGO)
- Board Member - Safe Motherhood Network Federation, Nepal (NGO)
- Founder Member - SAMANATA - Institute for Social and Gender Equality
- Representative for 1325 Action Group for RUWDUC
- Executive Board Member – Family Planning Association of Nepal (FPAN) (former)

## **History of Employment**

- Freelance Gender and Human Rights Consultant
- RUWDUC – NGO, June 1996 onwards (*voluntary*): Program Management, proposal conceptualization and development, research and training (macro, meso and micro on youth, GESI, peace building), M&E and supervision, editing, co-ordination and liaison with related government & NGOs
- May 1997 - 2007: SAMANATA - Institute for Social and Gender Equality, Founder/Prog. Director
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## **Some Recent and Relevant Assignments**

- **Gender Equality and Social Inclusion and Gender Based Violence Consultant** – Orientation for Senior Management Team of Tanahun Hydro Power Limited, 8-9 August 2022
- **Gender and Gender Based Violence Expert** – For Saathi Project Utthan on Linking Private Sector with Adult Entertainment Sector to Protect Rights of the Vulnerable, 3 August 2022
- **Speaker for WEDC, FNCCI for GEFONT – Presentation on need to address Sexual Harassment in Workplace by Trade Unions, 2022**
- **Team Leader for ADB, Manila-** Baseline Survey of Awareness of Gender Based Violence Prevention and Gender-Based Violence Service Provision, April – December 2022
- **Consultant for ICRW** – Undertake stocktaking of policies, programs, initiatives, and practices of the government, civil society, private sector, and development partners in engaging men and boys for gender equality and women's empowerment (GEWE) in Nepal, March – September 2022
- **Sexual and Gender Minority Rights & GBV Expert for M&C Saatchi World Services** – Undertake high-level role in the Desk Review, support survey questionnaire design to reflect thematic and country contexts, support in the research training, report finalisation and policy brief, 8 September 2021 – March 2022
- **Moderator for the National Reconstruction Authority (NRA)** – Facilitate different panel sessions for the NRA's International Conference, 8-9 December 2021
- **Women, Peace and Security Expert for National Law College** – Facilitate orientation on the Women, Peace and Security Agenda in Nepal, and the national frameworks and challenges, 16



June 2021

- **GESI Expert for Federation of Women Entrepreneurs Association of Nepal (FWEAN) -** Conceptual Clarity on Gender Equality and Social Inclusion to to FWEAN Board Members and Staff, and Bank Personnel, 24 March 2021
- **Lead Researcher/Author for the WINROC International** – Undertake Assessment and Guidelines for Ensuring Safe Workplace Environment for USAID supported KISAN II team members, August – November 2021
- **Team Leader for The Asia Foundation** – Outcome Harvesting of Knowledge Products of the Subnational Governance Program, July – December 2021
- **Resource Person for FNCCI - To Address Violence and Harassment with Focus on Sexual Harassment in the World of Work in Nepal**– September – October 2021
- **Lead Researcher/Author for Saathi/The World Bank** – Detailed Mapping of Women Shelter and Referral Mechanisms, May-June 2021
- **Gender and GBV Expert for ING Group** – Orientation on Sexual Harassment in Workplace for teachers, students and staff of ING Conglomerate, 5 February 2021
- **Gender Analyst for GIZ** – Finalisation of the Gender Analysis Report of the Revenue Administration Support III Project, 2-10 February 2021
- **GESI Expert for GEOCE** – GESI Expert for the Environment and Social Management Service - Tanahu Hydropower Project, 1 January 2021 onwards
- **GESI Expert for GIZ** – Gender analysis for the follow-on project of the Support to the Health Sector Programme (S2HSP), 9 October – 30 November 2020
- **Lead Researcher/Author**–A Study on Child Sexual Abuse in Nepal□with Focus on Travel and Tourism Sector (based on Saathi’s available WATCH cases studies), 1 Feb. - 31 July 2020
- **Gender Equality and Social Inclusion Expert for CAMRIS International (USAID Nepal Monitoring and Evaluation (MEL) project, CAMRIS)** –GESI expert for USAID’s Mid Term Evaluation of HamroSamman project on Combating Trafficking in Persons, 17 April – 31 July 2020
- **Coordinator/Core Team Member for development of the Draft National Action Plan on UNSCRs 1325 and 1820 Phase II** – With specific focus on victims of conflict related sexual violence survivors, and working under the leadership of Ministry of Home Affairs, and supported by UNDP, October – December 2019
- **Gender Equality and Social Inclusion Expert for CAMRIS International (USAID Nepal Monitoring and Evaluation (MEL) project, CAMRIS)** –GESI expert for USAID’s Country Development Cooperation Strategy, September – April2020
- **Consultant for Global Network of Women Peacebuilders** - Research on the Intersections between Corruption, Human Rights and Women, Peace and Security in Nepal, October – December 2019
- **Team Leader for Saathi** – Project entitled Working Actively Together for Children (WATCH) which focuses specifically on sexual exploitation of children in the travel and tourism sector in the country, Sept 2019 – August 2020
- **Consultant for CARE Nepal** - Consultancy Service for Analysis and Development of the Impact Report of LEAD and NURTURE, 28 May 2019 to 28 June 2019
- **Gender Consultant for CARE Nepal** - GESI Mainstreaming documentation in Sustainable Action for Resilience and Food Security (Sabal) project, 6-20 March, 2019
- **Lead Researcher/Consultant for Children –Women in Social Service & Human Rights (CWISH)**– Research on ‘The Comprehensive Nature of Human Trafficking and Sexual Exploitation in Targeted Areas in Nepal and Responses of Duty Bearers’ for CWISH, SASANE and Anti Slavery International – Feb.-Aug. 2019
- **Consultant for Hotel Shambala** – Facilitation on Sexual Harassment in the Workplace, 8-11 January 2019
- **Consultant/Expert for Home Net South Asia** -A Research on Violence Against Women in the Context of Home-Based Work, October 2018
- **Consultant for Global Network on Women Peacebuilders** - Case Study on the implementation and impact of the Localization strategy in Nepal, Sept./October 2018

- **Gender Expert for Care Nepal** – Technical Review and Analysis of GESI Publication – July/August 2018
- **Gender Expert for Plan International/Rural Women’s Development and Unity Centre (RUWDUC)** – Support in Undertaking Gender Equality and Inclusion Self-Assessment for Plan International Nepal Office - April 2018
- **GESI Consultant for UNFPA** – National Report for the Mid-Term Review of The Sixth Asian and Pacific Population Conference, May/June 2018
- **GESI Expert for CAMRIS International [USAID Nepal Monitoring and Evaluation (MEL) project, CAMRIS]**– Facilitation at Adolescent Girls Empowerment Launching Report, and compilation of USAID technical group discussion report - January -April 2018
- **GBV Expert for WHO SEARO** - Review, update and validation of Country analysis on gender-based violence – November-December 2017
- **GESI Expert for RUWDUC for manual development and training to newly elected Judicial Committee members** – November 2017
- **Team Leader for Rule of Law and Human Rights/UNDP project on Strengthening Interface between Formal and Informal Justice Mechanism by Enhancing the Capacity of the Judicial Committee of the Local Authority (JudCom)** –August - December 2017
- **GESI Expert for CAMRIS International (USAID Nepal Monitoring and Evaluation (MEL) project, CAMRIS)** – Mid Term Evaluation of the USAID supported ‘BaliyoGhar’ project (reconstruction of houses post earthquake) project – September 2017
- **National Consultant for Nepal Red Cross Society** – Development of Gender Based Violence Standard Operating Procedure (SOP) in Humanitarian Settings in Nepal – August 2017
- **Paper Writer for Local Development Training Academy (LDTA)** - “Women’s participation in the context of local elections: Opportunities and challenges’ – July 2017
- **Gender Expert for USAID Nepal Monitoring and Evaluation (MEL) project** - Rapid appraisal on barriers to girls and boys education, health and safety to identify opportunities for the US Embassy to Invest and Improve Strategic Partnerships, Let Girls Learn Project/Adolescent Girls Empowerment, January – May 2017
- **Team Leader for I-Partner, India** – Assessment on Linkages between Impact of Earthquake and Entertainment Sector – Saathi/I-Partner, Jan. 2017 – April 2017
- **Paper Writer on Conflict Related Sexual Violence in Nepal**- UN Women Regional Office, Bangkok, February 2017
- **Facilitation on NAP 1325 and 1820 for Local Development Training Academy (LDTA)** – Participants comprised of government officers from all government ministries, September 2016
- **Consultant (Core Drafting Team Member) for Saathi /UN Women project** – Desk Review for A project “To support the Ministry of Peace and Reconstruction (MoPR) in the development of the National Action Plan (NAP) Second Phase On the Implementation of the United Nations Security Council Resolution 1325 & 1820 and its subsequent resolutions”; Aug. 2016 –2017
- **Team Leader for 1325 Action Group/Saathi/UN Women project** – A project “To support the Ministry of Peace and Reconstruction (MoPR) in the development of the National Action Plan (NAP) Second Phase On the Implementation of the United Nations Security Council Resolution 1325 & 1820 and its subsequent resolutions”; NAP II Drafting team members. Aug. 2016 – August 2017
- **Supervisor** of a Child Abuse and Sexual Exploitation (ChASE) project for Saathi (focusing on paedophilia), currently WATCH, supported by Terre des Hommes Netherlands, 2016 onwards - ongoing
- **Team Leader for Community Mediation – Technical Assistance Project (CM-TAP) for RUWDUC** – Project focusing on HaruwaCharuwa supported by Freedom Fund/Geneva Global, Jan.-Dec. 2016
- **Lead Investigator:** Baseline Survey on HaruwaCharuwa (marginalised community) for RUWDUC, 2016
- **Team Leader for Access to Justice for Women and Marginalised Communities (A2J-WOMCOM) for RUWDUC** – A Community Mediation project being implemented by a consortium of 3 leading

national organizations (RUWDUC, Pro Public and IGD) in 7 district (56 VDCs) across the nation; supported by Governance Facility (Jan. 2016 onwards – Dec. 2018)

- **GESI Specialist/Consultant for CAMRIS International**– Mid-Term Performance Evaluation of USAID/Nepal’s Health for Life (H4L) Core Project (Jan. 2016 – Mar.2016)
- **Co-Consultant/Researcher for MoWCSW**– Desk Review of Anti Trafficking Interventions of past decades (Aug. – Sep. 2015)
- **Independent Evaluator/Lead Consultant for Inter Party Women’s Alliance (IPWA)** – End Review of ‘Ensuring Women’s Equal Representation at all Policy and Decision Making Level’ (Apr.-Jul. 2015)
- **Thematic Expert for Sahavagi/DidiBahini/FEDO & UN Women** - Chapter writer on Violence Against Women (Nov. 2014 and Jun. 2015)
- **Lead Researcher/Consultant for UNODC** - Strengthening service provision for protection and assistance to victims of cross-border trafficking between Bangladesh, India and Nepal: Documentation and Development of Anti-Human Trafficking Prevention Program/Strategy in Nepal (December 2014 – Sep. 2015)
- **Consultant for Local Development and Training Academy, GoN**- Manual development and trainer on women, peace and security and gender responsive budgeting, with specific focus on UNSCRs 1325 and 1820 (Dec. 2014)
- **Lead Researcher for Burn Violence Survivors Nepal** -Baseline Survey on Burns Survivors in Specific districts of Nepal, 2014 - 2015
- **Evaluation Consultant for Care Nepal** - Gap Assessment of National Action Plan on Implementation of UNSCRs 1325 and 1820 Process for Care Nepal (Nov. 2014)
- **Monitoring and Evaluation Researcher/Resource Team Member for Saathi/Ministry of Peace and Reconstruction (MOPR)** - Preparation of the Mid-Term Monitoring Report 2014 on Nepal National Action Plan on Implementation of UNSCRs 1325 and 1820 (2013/2014)
- **Assessment Expert/Consultant for UN Women** - Assessment of “Promoting Gender Responsive Security Sector (PROGRESS): Towards Implementation of United Nations Security Council Resolutions 1325 and 1820” Project in the Nepal Army (Dec. 2013 to Jan. 2014)
- **Lead Trainer for Federation of Nepalese Chambers of Commerce and Industry, Employers Council** – Training on gender equality & sexual harassment to FNCCI members in various districts (Sept. 2013)
- **Lead Evaluator/Consultant for Nepal Health Sector Support Programme/Ministry of Health and Population** – Evaluate/Assess the performance of four hospital based OCMCs on providing and facilitating services to survivors of gender based violence, to identify constraints and gaps and make recommendations to improve their functioning (12 Jun. 2013 – 5 Aug. 2013)
- **Lead Researcher for Federation of Nepalese Chambers of Commerce and Industry Employers Council** – Baseline Survey on employers’ understanding towards gender equality, including sexual harassment in selected enterprises in production and services sectors (Mar. 2013)
- **External Review Expert for the Swiss Federal Department of Foreign Affairs/Embassy of Switzerland**– External review of rural health development project (RHDP) Phase VII (4 February – 30 March 2013)
- **Researcher/Consultant for UN Women** – Development of one pager on five key recommendations made by the assessment “Gender Based Violence during Armed Conflict and Transitional Period: Prevalence, Trend, Legal Recourse and Impact” (September 2013 – 15 days assignment)
- **Researcher/Consultant for UNODC India** – Undertake study on Existing status of Shelter Homes for Migrant Women Workers and trafficking survivors in Nepal (10-25 May 2012)
- **Gender Expert in UNFPA Nepal’s Evaluation Team** – Country Evaluation of UNFPA 6<sup>th</sup> Country Programme (Aug. 2011)
- **Lead Researcher** – Domestic Violence Act Survey, SAATHI (Jul. 2011)
- **Gender Review Expert/Consultant for World Bank** –Gender Review of World Bank Portfolios ranging from Road, Water Supply and Sanitation, Energy, Health Education, Poverty Alleviation &Irrigation Projects (Dec. 2010-May 2011)
- **Researcher/Consultant, FPAN** – Preparation of Position Paper on Early/Child Marriage (Oct. 2010)
- **Consultant, GoN**- Training to GoN Doctors and Nurses on GBV Case Management from the NGO Perspective (Sep. 2010)
- **Evaluation Expert/Consultant for CARE Nepal** – Project Completion Report for SAKCHAM Project (Jan. 2010)

- **Project Design and Facilitator, FNCCI** –Design and development of proposal and workshop facilitator (Jan. 2010)
- **Consultant, Homenet Nepal** – Baseline Survey of 35 organizations and Structure Study of 20 Selected Organizations within Kathmandu Valley and in Pokhara and Hetauda focusing on Home Based Workers. (Aug. 2009)
- **Principal Investigator, FPAN** - Baseline Survey on Girls Trafficking Programme for (May 2009)
- **Principal Investigator, UNIFEM** - Sexual and Gender Based Violence during Conflict and Transitional Phase in Jhapa and Morang Districts (Mar. 2008 onwards)
- **Principal Investigator, Family Planning Association of Nepal** - End of Project Evaluation of "Working Towards Safe Motherhood in South Asia: Combating Gender Based Violence during Pregnancy in Nepal and Bangladesh" (Nov. 2007 – Jan. 2008)
- **Principal Investigator, NHRC** - for Research on Gender Vulnerability to Trafficking due to Denial and Discrimination of Economic, Social and Cultural Rights for National Human Rights Commission (Nov. 2007)
- **Lead Investigator, UNFPA and SAATHI** -for Research on Sexual and Gender Based Violence During Conflict and Post Conflict Period (Aug. 2007)
- **Team Leader, Save the Children Norway** - Study on Impacts of Conflict Pushing Women and Girls into Sexual Exploitation and Sex Trade (2005)
- **Co-Investigator, SAMANATA** -for the Research "Linkages Between Pregnancy and Domestic Violence" (2003)
- **Coordinator, Samanata**– for a Training of Trainers manual for the project entitled "Linking HIV/AIDS & Violence Against Women: Addressing Reproductive Health Needs of Migrant Women, 2005" under the UN Trust Fund project of UN Women, 2005.
- **Research Coordinator and Co-Author** of the Research 'A Study on the Psycho-Social Impacts of Violence Against Women and Girls with Special Focus on Rape Incest and Polygamy' – SAATHI (2000)
- **Coordinator/ Team member, Saathi** – for the study "Situational Analysis on Violence Against Women and Girls in Nepal" (pioneering research in Nepal) (Jan. - May 1997)
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#### **Publications/Co-Publication**

- (2020) A Study on Child Sexual Abuse in Nepal with Focus on Travel and Tourism Sector (based on 7 years of Saathi/WATCH case studies)
- (2020) Intersections between Corruption, Human Rights and Women, Peace and Security in Nepal (Lead Author for GNWP)
- (2020) Research on Violence Against Women in the Context of Home-Based Work in Nepal (For HomeNet Asia)
- (2020) Reaching out for Justice. Overcoming barriers for child survivors of sexual exploitation and trafficking accessing justice in Nepal (Lead Author for CWISH/Anti Slavery International)
- (2017) A Case Study on Needs of Sexual Violence Survivors and Children Born Out of Rape (For UN Women)
- (2011) An Indicative Study on Implementation of Domestic Violence (Crime and Punishment) Act 2009). Saathi. Open Society Foundation. Nepal.
- (2006) Baseline Survey on Hearing Community Voices to Address Community Needs Against Trafficking of Girls in Nepal. LWF Nepal. Kathmandu.
- (2005) Uterine Prolapse: A Key Maternal Morbidity Factor Amongst Nepali Women. Safe Motherhood Network Federation, Nepal.
- (2005) A Study on Linkages between Domestic Violence and Pregnancy. SAMANATA-Institute for Social and Gender Equality. Kathmandu.
- (2001) A Study on the Psycho-Social Impacts of Violence Against Women and Girls with Special Focus on Rape, Incest and Polygamy. SAATHI. Kathmandu.

## **Professional Training and Involvement**

- Paper Presenter, Sexual Violence Research Institute Forum 2022, 19-23 September 2022, Cancun, Mexico
- Panellist, International Seminar on Combatting Child Sexual Exploitation: State of Play and Perspectives, Paris, France, 14-16 June 2022
- Research Presenter at Research launch Program of HomeNet South Asia, Kathmandu, 9 December 2020 (virtually)
- International Seminar on Combating Child Sexual Exploitation, Singapore on 18-21 June 2019.
- Panellist at High Level Review Meeting on UNSCR 1325, Nairobi, Kenya, 23-25 October 2018
- From Best Practice Example to a Standard Practice: Localization of UNSCR 1325 Conference, 8-10 February 2018, Nepal.
- Exposure Visit to Cambodia on “Non Judicial Reparation Mechanism through Digital Story Telling and Strategic Discussions”, 21-27 July 2017
- Paper Presenter at Expert Group Meeting on Impact of Conflict and Conflict Related Sexual Violence in Nepal – March 2017
- Panellist at Asia Pacific Regional Expert Group Meeting on Conflict Related Sexual Violence, January 2017, Bangkok, Thailand
- Panellist on Reflection of International Experiences Implementing Women, Peace and Security Obligations, First Ministerial Conference on “Women and Achieving Peace and Security in the Arab Region”, 4-5 September 2016, Cairo, Egypt
- Paper Presenter/Panellist, Workshop on Countering Violent Extremism, Kolkata, India – 14 Dec. 2015
- Paper Presenter at workshop on “Countering Terrorism and Violent Extremism”, National University of Singapore, 4 & 5 Dec. 2014, Singapore
- Presentation on Nepal National Action Plan on UNSCRs 1325 and 1820 at ‘Workshop on Women, Peace and Security in ASEAN,’ 9-10 Dec. 2013, Manila, Philippines.
- Regional participant for supporting Development of Mobilisers’ Module, N-Peace and The Inclusive Security, Bangkok, 2013
- Presentation on Nepal National Action Plan on UNSCRs 1325 and 1820 in Afghanistan, 2012
- Training of Trainers (7 days) on Peace Building, organized by N-Peace, UNDP’s Asia Pacific Regional Centre and Institute for Inclusive Security, 2011
- International Seminar on Gender-Responsive Policing in Post-Conflict Countries, Nepal - 8-10 Sep. 2010
- South Asia Forum IV (A Prestigious workshop for the Young Leaders) – “The New Security Agenda”, Wilton Park Conference, (England) July 2004
- Involving Young Men in the Promotion of Health and Gender Equity: A Regional Training Workshop (Nepal, India and Cambodia), 2003 (Nepal)
- Training Seminar on Women's Human Rights Advocacy & Documentation on VAW, 2000
- Youth Development and Reproductive Health, CEDPA, USA, 2000 USA
- Training on Advocacy organised by SAP-Nepal; Training of Trainers on Gender by GTZ; Gender Training by SAMANATA

**Foreign Languages:** Very good spoken & written knowledge of English and Nepali. Can converse and write in French and Hindi.

**Computer Proficiency:** Word, Excel, Power Point, etc.

**Travel:** Extensive travel within Nepal; Afghanistan, Bangladesh, Belgium, Cambodia, Egypt, France, Germany, India, Kenya, Luxembourg, Malaysia, Mexico, Philippines, Pakistan, Singapore, South Africa, Sri Lanka, Thailand, United Kingdom, USA and Zambia.

### **ANAMIKA PRADHAN (Co-Lead)**

Milan Marg ,Teku ,Kathmandu , Nepal  
Mobile: 9841304138  
E-Mail: [anamikapradhan@gmail.com](mailto:anamikapradhan@gmail.com)

#### **Professional Experience**

##### **Stock taking on men and masculinities for gender equality, Men Engage Alliance (March- May 2022)**

Major Responsibilities include:

- Identification of KII respondents in coordination with the consultant.
- Conduct selected number of KIIs-which would include scheduling, recording of interviews, detailed transcription of interviews and conduct interviews jointly with the consultant.
- Preparation of brief key notes as required.
- Overall management of data and recordings.
- Support in the report writing phase as required.

##### **Policy & Research Outcome Harvesting Assessment of Sub-National Governance Program (SNGP): The Asia Foundation (August 2021 – January 2022)**

Major Responsibilities include:

- To track the research and policy-related outcomes of the SNGP I, using Outcome Harvesting method.
- To document instances of use of research, studies and/or model policies, and practices leading to uptake of findings, and shifts in policy, strategy, laws or guidelines that can be interrelated to SNGP Phase I interventions.
- Determine evidence of uptake of the knowledge products (including model documents) in laws, policies, guidelines, strategies, and plans during SNGP Phase I
- Description of the reasons that (the uptake) took place, including how and why the uptake contributed to that specific change providing insight on the patterns of change and change processes
- Evidence of any changes resulting from policy/research uptake and interpret the outcomes achieved, intended and unintended, direct and indirect, as a result of policy and research uptakes
- Indication of effective channels for delivery of SNGP Phase 1 outputs and knowledge products (i.e., how were the outputs delivered to/received by those who used them)
- List of primary users of SNGP Phase I outputs and knowledge

##### **Orientation for Bank & FWEAN Staff: Conceptual Clarity on Gender Equality and Social Inclusion: Federation of Women Entrepreneur's' Association of Nepal, FWEAN (24 March 2021)**

Major Responsibilities include:

- Develop the training materials
- Conduct one day gender sensitization training for bankers and FWEAN staffs
- Prepare training report

**Gender Analysis for the follow-on project of the Health Sector Support Programme (S2HSP),GIZ, (6 October to 30 December 2020)**

Major Responsibilities include:

- Undertake current, qualitative and quantitative information and data on gender relations, equal rights, women's rights, gender sensitivity and competences and equality reviewed, updated and supplemented;
- Identified promotional approaches (in the sense of potentials) to strengthen gender equality and women's rights as well as possible unintended negative impacts that could emanate from the project;
- Development of new gender analysis, showing plausible derived, concrete and feasible measures that are geared to the project implementation in order to raise the identified promotional approaches/potentials and/or avoid/prevent unintended negative impacts and to design the project in a gender-sensitive manner and, wherever possible, in a gender transformative manner;
- Finalization of the report;

**Monitoring and Evaluation Specialist, Consultant, CAMRIS International/USAID, (September 19, 2019 through March 31, 2020)**

Major Responsibilities include:

- Undertake quality control of work produced by local consultants under the Project during the development and implementation of qualitative and quantitative evaluations or assessments, such tasks may include: Planning for data collections, Developing protocols, and Completing other technical evaluation and analytical tasks
- Manage and participate in both qualitative and quantitative data collections by small or large field teams
- Provide technical feedback on study and evaluation scopes of work from the client
- Join or oversee external teams in coding and analyzing qualitative data collected from the field
- Assist with the finalization of evaluation designs
- Undertake basic to moderate-level analysis of quantitative or qualitative data;
- Work across multiple sectors;
- Help liaise with external consultants (expat and Nepali), evaluators, subject matter experts, translators, and transcribers;
- Perform stakeholder mapping and coordination for field data collection;
- Perform administrative, logistic, and organizing tasks involving the studies, as assigned; and
- Provide deliverables as requested and regularly report on tasks assigned. Comments on Scopes of Work (SOWs) for evaluations and studies, consolidating comments, and assisting in finalizing the SOWs in consultation with the client;
- Screened and shortlisted consultants as per the SOWs;
- Reviewed draft reports and presentation of findings; and

**Field Team Leader, GESI Assessment of USAID/Nepal(19 Sep - 30 Dec 2020)**

Major Responsibilities include:

- Assist the assessment team by providing sector expertise and technical guidance
- Participate in a briefing about the work, including training on specific methods

- Coordinate closely with the Team Lead manage local Enumerators/Field Researchers and other team members
- Conduct field research to gather data through focus group discussions (FGDs) and key informant interviews (KIIs) with relevant stakeholders
- Support the assessment team in development and presentation of the preliminary findings, conclusions and recommendations to USAID/Nepal
- Support the design and pilot testing of data collection tools in the field
- Work closely with the assessment team in the process of drafting and finalizing the assessment design, work plan, data collection tools, assessment briefing(s), and the assessment report

**GESI Expert/Field Team Leader, Assessment of USAID/Nepal for a Democracy, Human Rights, and Governance (DRG) (26 July -31 Dec 2019)**

Major Responsibilities include:

- Take direction from and fully support the DRG assessment team throughout the assignment
- Provide GESI lens on issues related to Democracy, Human Rights, and Governance (DRG) in Nepal and give inputs accordingly during various stages of assessment
- Participate in a briefing about the work, including training on specific methods
- Assist the assessment team by providing sector expertise and technical guidance
- Work closely with the assessment team in the process of drafting and finalizing the assessment design, work plan, data collection tools, assessment briefing(s), and the assessment report;
- Execute the assessment schedule and field work in coordination and consultation with the team
- Support the design and pilot testing of data collection tools in the field
- Coordinate closely with the Team Lead manage local Enumerators/Field Researchers and other team members
- Conduct field research to gather data through focus group discussions (FGDs) and key informant interviews (KIIs) with relevant stakeholders
- Support the assessment team in development and presentation of the preliminary findings, conclusions and recommendations to USAID/Nepal
- Contribute to draft and final assessment reports
- Ensure quality and timely delivery of all work products
- Conduct any other tasks as required during the fieldwork

**GESI Expert/Field Team Leader and Analyst, Formative Assessment of USAID/Nepal Let Girls Learn ( 5 Jan- 10 May 2017)**

Major Responsibilities include:

- Supported the team in the development of the assessment design, workplan, tools to get better understanding of adolescent girls situation on issues like education, health and sanitation, migration,
- Reviewed the secondary data on adolescent's status and issues in the country, identified parameters that are impacting the adolescents, primarily the girls, identified the data gaps and areas of information for further research
- Worked as the team leader for the collection of data from the field by conducting focus group discussions and KII with various stakeholders at district and central level
- Supported the team in planning, coordinating and conducting the meetings at the central and district level to get detail information from relevant stakeholders regarding the



educational state of the adolescent girls and the problems faced by them in continuing their education

- Reviewed documents and summarized key lessons and information as per the research questions.
- Supported in the data coding process
- Provided support in the design and pilot testing of data collection tools in the field and also provided inputs in the finalization of tools after testing
- Supported the assessment team in development and preparation of presentations of the preliminary findings, conclusions and recommendations to USAID/Nepal
- Supported in the mapping of the I/NGOs in the sample districts so if required future collaboration could be established
- Ensured that the GESI approach is embedded in evaluation design and methodology
- Translation of data collection tools into nepali
- Preparation of daily field report
- Analysis of collected field data and report writing
- Review and revising the draft report
- Supported and provided inputs in finalizing the final report

**Facilitator and MC, “Women of Inspiration” Panel & Nepal Adolescent Girls ‘ Empowerment Report launch of USAID(20 Nov- 1 Dec 2018)**

Major Responsibilities include:

- Facilitated the breakout session during the report launch event with major focus on gender. The group comprised of participants working with various I/NGOs and donors. The session was conducted to get the feedback on the report and also to identify the intervention points to work for the betterment of the adolescent girls in Nepal.
- Prepared break out session report for USAID with detail feedbacks of the participants in the group discussion with recommendations for future programs and how USAID and other development organizations can collaborate to work more efficiently for better output on women and especially girls empowerment in Nepal.
- Master of ceremony for the event
- Supported the USAID team for the event management

**Gender Equality and Social Inclusion (GESI) Expert ,Evaluation of USAID/Nepal Strengthening Political Parties, Electoral and Legislative Processes Project (team member, 12 Sep – 18 Nov 2016)**

Major Responsibilities include:

- Provided support in designing and finalizing the evaluation design, workplan and tools
- Ensured that the GESI approach is embedded in evaluation design and methodology
- Worked as the team leader for the collection of data from the field by conducting focus group discussions and KII at district and national level with various stakeholders
- Provided support in the design and pilot testing of data collection tools in the field
- Supported the team in planning, coordinating and conducting the meetings at the central and district level.
- Reviewed the documents and analyzed.
- Supported the team in the preparation of the presentation at USAID.
- Daily and final field reports prepared.
- Supported the team in the preparation of the final evaluation report.

### **Communication Coordinator, Welthungerhilfe(Dec 2015 to May 2016)**

Major Responsibilities include:

- Develop and implement a communication strategy and action plan for the organization.
- Support and ensure quality of publications and reports.
- Collect and prepare case studies and publish as and when required.
- Support in the publication of training manuals for the farmers.
- Hold responsibility for producing the annual report and for maintaining the website and social media channels of Welthungerhilfe.
- Support the Country Director in press-related work, i.e. press releases, press conferences etc.
- Develop and maintain relationships with journalists and other media contacts, and facilitate journalist visits to the projects
- Provide editorial support to colleagues, specifically for selected articles and case studies, presentations, background notes, concept papers, training modules and reports.
- Organize and facilitate the donor visits to the project site.
- Assist HQ by providing the necessary details for the fundraising purpose.
- Design and prepare IEC materials as per the target audience.

### **Gender Focal Person/Reporting and Communication Officer United Nation Development Programme(UNDP) Electoral Support Project (Oct 2012 to Dec 2015)**

Major Responsibilities include:

Communication:

- Provide expert advice to implement the communication strategy for the Election Commission of Nepal and facilitate the consultation processes.
- Provide expert inputs and support to the spokesperson of the ECN while dealing with the media people.
- Supported in the preparations of daily election bulletin in CA Election 2013.
- Supported in the establishment of media center within ECN.
- Coordinate the implementation of the approved capacity building activities from a managerial and technical perspective. This will include the administration of pre and post training assessments and compilation of proceedings.
- Draft thematic briefing papers to keep stakeholders and donors informed.
- Several communication trainings organized for the ECN officials to strengthen their capacity.
- Prepared weekly report and annual reports.
- Several workshops conducted with the political parties including the youth leaders regarding the women's meaningful participation in the Electoral process.
- Several rounds of interaction conducted with electoral stakeholders such as political parties, CBOs, Ward Citizen forum and civil society organization for taking their feedback on the electoral code of conduct
- Supported in the "Analytical Report on Media Monitoring of the Constituent Assembly Election 2013" conducted and published by Nepal Peace Institute (NPI) through continuous feedback and quality assurance
- Supported in the "Voter Education Assessment" conducted in more than forty districts of Nepal
- Workshop conducted and facilitated at national for the ECN on "How to face media" conducted by the Thomson Reuters.
- Supported in the Voter education campaign for disable groups targeting the Deaf Association

- Voter Education Campaign targeting women in partnership with UN Women
- Production and dissemination of extensive civic and voter education materials including publication, printing and airing in all print and electronic media
- Strengthen Election Commission of Nepal(ECN) capacity in effective reporting and communication
- Support the communication work of ECN including the drafting, implementation and monitoring of ECN’s Communication Strategy
- Strengthen ECN capacity in liaising with and managing media relations
- Work with central and field offices of the ECN and ESP staff to develop advocacy materials for the project.
- Develop, implement and monitor a project communication and visibility plan, facilitating better understanding among partners about project progress, adhering to UNDP and development partner guidelines on communications and visibility
- Prepare and edit press releases, project related progress reports and documents
- Facilitate trainings to strengthen the capacity of ECN on reporting and communications

## **GESI**

- Gender Research conducted on “Study on Overcoming the Constraints in Political Participation of Women in Elected Offices in Nepal”. During research interviews and Focus Group Discussion was conducted with the members of various political parties.
- Address and implement all the gender related activities and work closely with ECN to mainstream Gender and Inclusion issues.
- Provide expert advice to implement the Gender Equality and Election Strategy for the Election Commission of Nepal and facilitate the consultation processes.
- Take lead in coordinating consultations with the Gender Equality Consultative Group for the ECN, comprising of gender experts, women representing different marginalized groups, ECN officials and other stakeholders and to seek feedback in relation to gender issues in the work of elections.
- Provide expert inputs to the Gender Focal Person within the ECN.
- Provide inputs on the gender and social inclusion in the annual work plan of the ECN, monitor actions and draft quarterly and annual reports.
- Document major achievements and challenges in promoting gender equality in the work of elections.
- Provide ECN with gender related information to generate sex-disaggregated data relevant to different electoral processes, to make descriptive analyses of central tendencies and distribution by sex, and to share knowledge through the official websites.
- Facilitate gender equality training sessions.

## **National Information Officer, Food and Agricultural Organization of United Nations (FAO)**

### **(August 2011- March 2012)**

Major Responsibilities include:

- Preparation of publication material.
- Preparation of audio visual material.
- Update and prepare material for the website.
- Prepare for the press meet and the press release.
- Prepare and organize the events of the organization.
- Plan, prepare and work for the visibility of the organization.
- Preparing reports.

- Prepare and publish proceedings of short term seminars, workshops, etc. when necessary;
- Undertake any other project tasks deemed necessary by the FAO Representative for successful implementation of the project /programme goals and objectives
- Closely coordinate and monitor the communication activities and review them when necessary;

**Program Coordinator/Media focal Person(2008-2011)**

HimRights (Himalayan HumanRights Monitors),InarPulchowk , Lalitpur.(HimRights has been working in the sector of protection and promotion of human rights with the focus on women and child rights)

Major Responsibilities include:

- Coordinate with the youths in the district who have been provided with the funding from OSI,New York so that they get an opportunity to start their own project
- To mentor Youth grantees
- To train the youths so that they become capable of preparing a complete proposal
- Conceptualize and prepare new proposal.
- Monitor and Evaluate the impact of the project in the district.
- To facilitate different trainings to be held in the district.
- Work as a key resource person in the production of radio programs for behavior change communication and policy influence on behalf of HimRights
- Advisory support in the design and production of audio-visual messages (IEC materials) to be broadcasted or printed in the media.
- Coordinate the youth project in HimRights and training and capacity building of district focal person
- Supervise the focal person, support them and provide regular monitoring and feedback for smooth implementation of the program
- Prepare annual progress and financial report along with the case studies and anecdotes from the field for the measurement of the impact in the target population
- Communicate, coordinate and negotiate with the donors on the projects and programs along with the financial matters

**Program Presenter / Producer (1997 – July 2012)**

**KantipurF.M ,Pulchowk , Lalitpur**

- Prepare, design and produce different type of shows for radio since last 14 years
- Have been doing shows related to women and children for more than ten years
- Pioneer in conducting the radio shows on women and their rights in Kantipur FM
- Have raised various social issues in media; particularly on women rights such as women’s reproductive rights, social rights, economic rights etc
- Media research with its impact on the target group and necessary amendments of the message etc

**Worked as the Program Coordinator for a year. (2005)**

- Communicate with different agency for the advertisements and program
- Design and produce new programs as per the need of the client
- Conceptualize and conduct various events

- Guiding the team well so that the outcome is good

### Research/Evaluation/Publication

- **Team Leader and Analyst, Formative Assessment of USAID/Nepal Let Girls Learn ( 5 Jan- May2017)**  
Involved as the team leader and analyst and led the team for the data collection from the field. Conducted several focus group discussion and key informant interview with various stakeholders e.g. Government Offices( Central and district), I/ NGOs.
- **Team Member: Evaluation of USAID/Nepal Strengthening Political Parties, Electoral and Legislative Processes Project (team member, 12 Sep – 18 Nov 2016)**  
Involved as the GESI expert in the evaluation team and worked as the team leader for the data collection from the field. Conducted several focus group discussion and key informant interview with various stakeholders e.g political parties, Election Commission.
- **Supervisor: Study on Overcoming the Constraints in Political Participation of Women in Elected Offices in Nepal (2014)**  
Involved in each stage of the study from design to the draft of the field guidelines and tools, data collection through in depth interviews, focus group discussion with several stakeholders such as staffs of Election Commission (Central and district), members of parliament, political parties, media and civil society organizations.
- **Team Member: “Voter Education Assessment” (2014/2015)**  
The assessment was conducted in more than forty districts of Nepal to assess the knowledge and awareness of voters on the overall electoral process and identify the gaps so that the future interventions could be designed to fill this gap and minimize the percentage of invalid votes. The assessment was instrumental in lowering the invalid votes substantially.
- **Media research: “Media coverage on anti women trafficking” for National HumanRightsCommission(NHRC) for their annual report(2006).**  
Research was conducted through collection of information through both the qualitative and quantitative research instruments. All the media houses remained as the source of information along with the secondary information and literatures on women trafficking and media coverage.
- **Her voice Her Choice “ Publication dedicated on women and election”(2014)**
- **Analytical Report on Media Monitoring of the Constituent Assembly Election 2013**

### Workshops/Seminars/Training

- Participated at the SAARC level meeting on women’s political participation jointly organized by UNDP Pakistan and Nepal, UNWOMEN and ECN in 2014
- Thomson Reuters Media training conducted by UNDP Nepal in 2012
- Rotary Group Study Exchange Scholar for 2012, attended various media related trainings in Seattle, USA.
- Training on Human Rights and Good Governance , Conflict Transformation , Restorative Justice, Strategic Peace building , organized by " The 15th Annual Summer Peace building Institute, Eastern Mennonite University, Harrisonburg, Virginia (2010)
- Workshop on research methodology organized by Calcutta University and KendriyaVidhyalaya (2009)

- Attended a seminar organized by Beyond Beijing Committee on women's reproductive health.(2009)
- Attended the policy level meeting on UN resolution1325/1820 organized by UNFPA.(2005)
- Attended seminars on role of media organized by NHRC(2004).

### **Education**

Masters in Rural Development (2009-2011)

Indira Gandhi Open University. Delhi, India

Bachelor's Degree in English (2003-2006)

Indira Gandhi Open University. Delhi, India

### **Skills**

Feature writing, report writing and reporting course conducted by International Institute of Journalism, Berlin, Germany (Nov. 2004)

E-Commerce (2001, Pentasoft Technologies Ltd, India)

### **Management Skills**

- Team worker
- Leadership quality
- Training and facilitation skill
- Decision making ability
- Negotiation/Coordination and Liaison skill

### **Language**

- Nepali
- English
- Hindi

### **References**

- Ms. ManoramaAdhikari  
Deputy Chief of Party at CAMRIS International, Inc.  
[manoramaa@gmail.com](mailto:manoramaa@gmail.com); 9860113773
- Ms. Seemaluitel  
Program Manager, Welthungerhilfe  
[Seema.luitel@welthungerhilfe.de](mailto:Seema.luitel@welthungerhilfe.de); 015552060

## **Annex 4 Final version of the Terms of Reference**

### **Terms of Reference**

#### **for Endline Survey and External Evaluation of the Project**

#### **“Inclusive Partnership Against Violence Among Women and Girls with Disability”**

**(Consortium project of Green Tara Nepal, Nepal Disabled Women’s Association, United Nations Trust Fund)**

### **1.0 Background and context**

Nepal Disabled Women Association (NDWA) was established in 2054 (1998) adopting the values of the fundamental rights and responsibilities provided by the constitution of Nepal in order to support Women with Disabilities (WWDs) to pursue their rights and provide them protection and livelihood support. Unless WWDs from all sections of the Nepalese community get understanding of their human rights, particularly as ensured by the UN Convention on Rights of Persons with Disabilities, and exercise them, their lives will not be bright and prosperous.

NDWA promotes the program to build the capacity of the WWDs living in both urban and remote areas of the country in order to make them capable and empowered so that they will be able to take initiative to exercise their rights. It is vital to empower women from other disadvantaged communities such as women with disabilities from Dalit and Madhesi to build their self- esteem and confidence. In this context, NDWA has an important role to advocate on the issues of WWDs, such as rights to education, health, employment, rehabilitation and social security. NDWA seeks to create and lead a nationwide network of self-help groups of WWDs to achieve its mission.

Green Tara Nepal (GTN), a non-governmental, apolitical and non-profit making organization, established in 2007. It works in research, publications, advocacy, training and social mobilization in a holistic community development approach. Green Tara Nepal works in collaboration and cooperation with community people, CBOs, NGOs, civil societies and, external development partners at national and international level and. It works in close coordination with the government sector at the federal, provincial, district and local level.

Nepal Disabled Women Association (NDWA) has been implementing “Inclusive partnership Against Women and Girls with Disability” (InPAV) project with Green Tara Nepal (GTN) funded by United Nations Trust Fund (UNTF). This is a three-year project starting from October 2019 till September 2022. The project focuses on advocacy related to violence among disabled women and girls. NDWA leads the advocacy and awareness raising activities among the communities with government counterpart coordination and stakeholders at local levels. GTN leads in assessments, studies, monitoring and evaluation of the project.

The project aims to support, enable and empower Women and Girls with disabilities in preventing and addressing violence and claiming their rights and justice in the event of it. A total of project beneficiaries is 22,890 women and girls with disability in 27 districts, 73 local governments. The project covers all the seven provinces of Nepal.

The main objectives of the project are

- To increase community awareness and capacity to combat violence against women and girls with disability
- To strengthened governance and GBV mechanism (one stop crisis management center (OCMC),gender equity and social inclusion (GESI) focal point, justice committee disability coordination committee) to mainstream gender and disability.
- To improve knowledge and evidence on violence against women and girls with disability(WGWDs) to influence policies and programs.

NDWA considers evaluation as an integral part of the implementation of interventions on the ground. This project will go through two independent evaluations (end/line survey and external evaluation). Thus, this TOR sets out the responsibilities of the consultant to analyse endline survey data, prepare report and end of project evaluation in different communities where project activities are implemented (27 districts).The objective of endline survey is to re assess the baseline data. The final evaluation will focus on the assessment of the implemented activities and whether the activities lead to the achievement of the planned results as well as to the project objectives. As a result of this evaluation, recommendations from the evaluator/s are expected to improve the quality of ongoing and future projects.

## 2.0 Summary of the Project

<b>Project name</b>	Inclusive Partnership against Violence (InPAV) project
<b>Thematic area</b>	Gender-Based Violence in Disability
<b>Project start and end date</b>	October 2019-September 2022,extended up to December 2022
<b>Donor name</b>	United Nations Trust Fund
<b>Organization</b>	Nepal Disabled Women’s Association (NDWA)
<b>Target district/Municipalities</b>	27 districts, 73 local governments
<b>Target groups (beneficiaries)</b>	A total of project beneficiaries is 22,890 women with disabilities
<b>Key partners involved in the project</b>	Green Tara Nepal



<b>Baseline Survey</b>	January - March 2021
<b>Overall goal of the project</b>	Women and girls with disability are supported, enabled, and empowered in preventing and addressing violence and claiming their rights and justice in the event of it.
<b>Expected results</b>	<ul style="list-style-type: none"> <li>• Outcome 1: Increased community awareness and capacity to combat violence against women and girls with disability (VAWGWDs)</li> <li>• Outcome 2: Strengthened governance and GBV mechanism (OCMC, GESI focal point, justice committee disability coordination committee etc.) to mainstream gender and disability.</li> <li>• Outcome 3: Improved knowledge and evidence on VAWGWDs to influence policies and programmes.</li> <li>• Outcome 4: Strengthened governance mechanism and enhanced capacity of women and girls with disability to tackle the emergencies/ disaster situation like COVID-19 pandemic.</li> </ul>
<b>Major activities</b>	<p><b>For Outcome 1</b> <i>Increased community awareness and capacity to combat Violence Against Women and Girls with Disability (VAWGWDs)</i></p> <ul style="list-style-type: none"> <li>• Raise awareness through TV/radio, street drama, IEC and IPC programme at community level</li> <li>• Orientation and capacity development trainings for WGWDs, communities and service providers inclusive of selected 73 LGs representatives to promote and act as women and girls anti GBV champions and liaison points in all provinces</li> <li>• Mobilization of GBV focal persons through province contact office</li> </ul> <p><b>For Outcome 2</b> <i>Strengthened governance and GBV mechanism (OCMC, GESI focal point, justice committee disability coordination committee etc.) to mainstream gender and disability.</i></p> <ul style="list-style-type: none"> <li>• Review and build- in disability inclusiveness in current GBV programmes/ mechanisms including the One-stop Crisis Management Centres (OCMC).</li> <li>• Strengthen governance and justice mechanisms of subnational government and civil society organizations to ensure protection and access to justice mechanisms, services, and facilities</li> <li>• Orientation to government officers and district OCMC members to identify and respond to VAWGWDs.</li> </ul>

	<p><b>For Outcome 3</b> <i>Improved knowledge and evidence on VAWGWDs to influence policies and programmes.</i></p> <ul style="list-style-type: none"> <li>• Conduct baseline, ongoing and endline data collection to bridge evidence gaps; design advocacy tools with multi sector actors and develop gender sensitive and disability-inclusive curriculum for health and educational professionals</li> <li>• Resource materials, curriculum and training resources are developed in collaboration with WGWDs and professionals working in the sector.</li> <li>• ToT to schoolteachers and academic institutions on promoting gender and disability</li> <li>• Dissemination of information on protection and GBV services in accessible formats</li> </ul> <p><b>For Outcome 4</b> <i>Strengthened governance mechanism and enhanced capacity of women and girls with disability to tackle the emergencies/ disaster situation like COVID-19 pandemic.</i></p> <ul style="list-style-type: none"> <li>• Undertake advocacy initiatives at Province and local levels to influence their system to make accessible to men and women and boys and girls with disabilities</li> <li>• Formulate ‘Girls and Women with Disabilities Specific General Guidelines against COVID-19 pandemic’</li> <li>• Uses of social media like you tube, face book, twitter, linked in and websites at their optimum for information dissemination on COVID-19 pandemic</li> <li>• Reduce vulnerability of men and women, girls and boys with disabilities from the effect of COVID-19 pandemic.</li> </ul>
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### **3.0 Purpose of Study**

#### **a) Endline Survey**

Endline survey aims to assess the quantitative differences of VAWG data including violence experiences, its reporting, knowledge on sources and services availability to address violence, attitude of community towards disability and violence before and after the interventions by the project in project area by comparing it with baseline.

#### **b) External Evaluation**

The final evaluation aims to understand why -and to what extent- the life of women and girls with disability changes in specific access to services, community support and policy.

Evaluation can inform planning, programming, budgeting, implementation, and reporting and can contribute to evidence-based policy making, development effectiveness and organizational effectiveness. By ensuring the evaluation process is inclusive, participatory, and respectful of all stakeholder's evaluation can be more gender responsive.

#### **4.0 Objectives**

##### **a) Endline Survey**

- To assess the level of knowledge, awareness, practices on GBV and service utilization among the targeted beneficiaries
- To evaluate/compare the project's achievements against the baseline status/ findings

##### **b) External Evaluation**

- To evaluate the entire InPAV project, October 2019-September 2022, against the effectiveness, relevance, efficiency, sustainability, and impact criteria, as well as the cross-cutting gender equality and human rights criteria.
- To identify key lessons and promising or emerging good practices in the field of ending violence against women and girls, for learning purposes
- To assess impact of the project

#### **5.0 Scope of Evaluation**

##### **a) Endline Survey**

This endline survey will be carried out in municipalities/rural municipalities/metropolitans cities of Nepal among the women and girls with disability. The selected individual consultant/firm is expected to deliver the following within the given timeframe.

**Timeframe:** This endline survey needs to cover post intervention time period of the project

**Geographical Coverage:** The endline survey should collect data from the selected 14 districts based on sampling methods as in baseline study

**Target groups to be covered:** The endline survey needs to cover all the sample population for quantitative survey and key informants for the qualitative survey similar to baseline study.

##### **b) External evaluation**

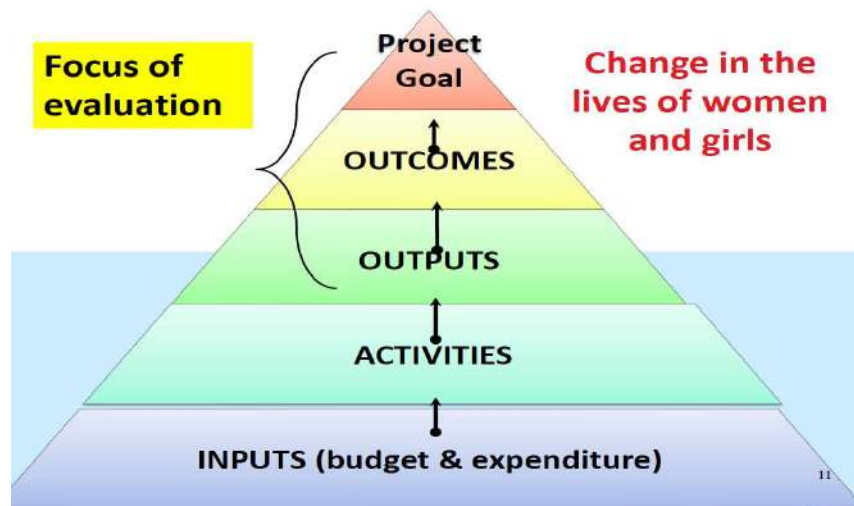
This external evaluation will be based on project's theory of change (ToC); its relevance to the overall country strategy; the appropriateness of its planned objectives in terms of funding and duration of the intervention; and its appropriateness of project design, intervention and needs of the beneficiaries. External evaluator is expected to deliver the followings.

**Timeframe:** This evaluation needs to cover the entire project duration.

**Geographical Coverage:** The evaluation should select data from all geographical regions i.e., hill, mountain and terai based on our sampling methods. One rural municipality/municipality of one district will be selected for evaluation. One stop crisis management center of each province will also be visited for evaluation

**Target groups to be covered:** This evaluation needs to cover the target primary and secondary beneficiaries as well as broader stakeholders. Evaluator should engage representative beneficiaries from each province.

## 6.0 Theory of change



## 7.0 Evaluation criteria

### a) For endline survey

- **Competency**  
Ensure the competency of data enumerators and data analyser
- **Data quality**  
Check for data transformation errors, empty values, follow appropriate methodology
- **Time**  
Timely collection of data based on the tentative plan
- **Writing standards**  
Report writing should follow standard for language and outline of report  
Report should be comparable with baseline report

### b) External evaluation

The project external evaluation aligning with the below UNTF criteria should broadly consider but not be limited to the following questions to discuss, provide conclusions and recommendations.

Evaluation Criteria	Mandatory Evaluation Question
Effectiveness	1. What are the intended and unintended, primary, and

<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>	<p>secondary effects produced by the intervention?</p> <ol style="list-style-type: none"> <li>2. To what extent were the intended project goal, outcomes and outputs (project results) achieved and how?</li> <li>3. What are the major factors influencing the achievement or non-achievement of outcomes?</li> </ol>
<p><b>Relevance</b> <i>The extent to which the project is suited to the priorities and policies of the target group and the context.</i></p>	<ol style="list-style-type: none"> <li>4. Was the project designed in a way that is relevant to reaching its goals?</li> <li>5. To what extent do the achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls?</li> </ol>
<p><b>Efficiency</b> <i>Measures the outputs - qualitative and quantitative - in relation to the inputs. It is an economic term which refers to whether the project was delivered cost effectively.</i></p>	<ol style="list-style-type: none"> <li>6. To what extent was the project efficiently and cost-effectively implemented?</li> <li>7. What was the strength, weakness, opportunities, and threats of the project implementation process?</li> <li>8. How can the project of similar nature enhance its efficiency to meet its objective?</li> </ol>
<p><b>Sustainability</b> <i>Sustainability is concerned with measuring whether the benefits of a project are likely to continue after the project/funding ends.</i></p>	<ol style="list-style-type: none"> <li>9. 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?</li> <li>10. What are the factors that contributed to or hindered in the sustainability of the project actions?</li> <li>11. What are the potential opportunities and cautions for replicating the project in other communities?</li> </ol>
<p><b>Impact</b> <i>Assesses the changes that can be attributed to a particular project relating specifically to higher-level impact (both intended and unintended).</i></p>	<ol style="list-style-type: none"> <li>12. What real difference has the activity made to the beneficiaries?</li> <li>13. To what extent has the project contributed to ending violence against women, gender equality and/or women's empowerment (both intended and unintended impact)?</li> </ol>
<p><b>Knowledge generation</b> <i>Assesses whether there are any promising practices that can be shared with other practitioners.</i></p>	<ol style="list-style-type: none"> <li>14. 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?</li> <li>15. To what extent has the project strengthened mechanisms and capacity to tackle effects from the COVID-19 pandemic</li> </ol>
<p><b>Gender Equality and Human Rights</b> <i>Cross-cutting criteria: the evaluation should consider the extent to which human rights based and gender responsive</i></p>	<ol style="list-style-type: none"> <li>16. How has the project considered gender aspects both in the project design and its implementation of activities?</li> </ol>

<p><i>approaches have been incorporated through-out the project and to what extent.</i></p>	
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## 8.0 Methodology

### a) For Endline Survey

**a.i) Methods:** Interviewing using semi structured questionnaire with 1294 women and girls with disability from 14 districts, 28 palikas

**a.ii) Study districts and Palikas:** 1) **Morang-** Sundardularipalika, Biratnagarmahanagar palika 2) **Dhankuta-** DhankutaMahanagarpalika, ChhatharJorpatiGaun Palika 3) **Dhanusa-**DhanusadhamPalika, BatesworGaun Palika 4) **Siraha-**SirahaPalika, LaxmipurPatariGaun Palika 5) **Kathmandu-**BudhanilakanthaPalika, GokarneshworPalika 6) **Kavre-**MadandeupurPalika, PanautiPalika 7) **Kaski-**PokharaLekhnathMaha Nagar Palika, MadhiGaun Palika 8) **Gorkha-**GorkhaPalika, Palungtar Palika 9) **Dang-**LamahiPalika, GadhawaGaun Palika 10) **Arghakhachi-**SandhikharkaPalika, Chhatra Dev Gaun Palika 11) **Surkhet-**Birendra Nagar Palika, ChingadGaun Palika 12) **Jumla-** ChandannathPalika, TatopaniGaun Palika 13) **Achham-**SanfebagarPalika, ChourpatiGaunPalika 14) **Kanchanpur-**BhimdhattaPalika, KrishnapurPalika

### b) For the External Evaluation

#### b.i) Proposed evaluation method

The literature review will include the project proposal, logical framework, interim/periodic reports, OCMC situation analysis report, baseline, endline study reports and other relevant documents and reports prepared by NDWA and GTN. They will provide all relevant key project documents for the comprehensive desk review.

Based on the literature review the consultant will develop the methodology for primary data collection for project evaluation. For primary data collection, the consultant will engage in the field and collect data from project beneficiaries, and other stakeholders as specified in the indicative schedule.

#### b.ii) Data sources

Primary data will be collected from face-to-face interviews and secondary data from desk review of documents.

#### b.iii) Proposed data collection methods and analysis

##### Methods

Face to face interview using semi-structured questionnaire

Focused Group Discussion (FGD)

##### Analysis

Data analysis will be done in Statistical Package for Social Sciences (SPSS version 22 or above)

Descriptive analysis of demographic variables will be done. Bivariate and multivariate analysis will be done as required.

#### **b.iv) Proposed sampling method**

To choose one rural municipality/ municipality of the project districts, a straightforward random selection approach will be used (4 out of total 14 districts). An additional 25% of local governments will be chosen at random (7 out of 28 local government). Key informants will be purposefully chosen for the interviews based on requirement; convenience based on project area's geography.

#### **b.v) Field visits**

On the project sites, there will be a total of 7 field visits. Field trips to each site won't last longer than two days. The first visit will last for two days, the third day will be used for travel, and days four and five will be spent on the second field trip of the week. The designated local government focal point will be contacted to make the necessary logistical arrangements for the visits. Within the 2 days already allotted for the field visit, interviews will be conducted at 7 one-stop crisis management centers on the project site.

#### **b.vi) Level of stakeholder engagement**

Stakeholder engagement will be at 4 levels.

**Informing:** It is about disseminating and sharing. Describing the issue, if the current practices are not producing desired outcomes explain reasons, discuss on adopting a different practice. Explain how it is relevant to multiple stakeholders

**Networking:** It is a two-way communication. Diverse group of stakeholders shares idea about potential root causes, current practices to address issue. Barriers that may impact ability to address the problem

**Collaborating/engaging:** It is about working together on the issue over time. Key groups of stakeholders work together to address if there is issue.

**Transforming/committing:** It is the foundation for deeper understanding of the issue, identifying the potential root causes and build consensus for change in practice

### **9.0 Quality and Ethical Standards**

During the evaluation, it should take all reasonable steps to ensure evaluation is designed and conducted to respect and protect the dignity, rights and welfare of the people, communities, stakeholders, and authorities involved and to ensure that the evaluation is technically accurate and reliable, is conducted transparently and impartially, and with full accountability.

The study standards are:

- **Utility:** The evaluation product must be useful as an organizational learning.
- **Feasibility:** Evaluation must be realistic, diplomatic, and managed in a sensible, cost-effective manner.
- **Ethics & Legality:** Evaluation must be conducted ethically and legally, with regard for the welfare of those involved in and affected by the evaluation.
- **Impartiality:** Evaluation should be impartial, providing a comprehensive and unbiased assessment that considers the views of all stakeholders.
- **Transparency:** Evaluation activities should reflect an attitude of openness and transparency.
- **Accuracy:** Evaluation should be technically accurate, providing enough information, analysis, and interpretation.
- **Participation:** Stakeholders should be consulted and meaningfully involved in the evaluation process when feasible and appropriate.
- **Collaboration:** During the evaluation, collaboration at different levels is expected. This will later improve the legitimacy and utility of the study.
- **Consent:** Taking formal consent of all the responders is must during the evaluation. The evaluator/s must put in place specific safeguards and protocols to protect the safety (both physical and psychological) of respondents and those collecting the data as well as to prevent harm. This must ensure the rights of the individual are protected and participation in the evaluation does not result in further violation of their rights.

The evaluator/s must have a plan in place to:

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

## 10.0 Key deliverables



**a. For endline survey and timeframe**

No.	Deliverables	Deadline	Remarks
1.	Proposal submission	21 <sup>st</sup> November 2022	This proposal should be submitted with application
2.	Finalize data collection tool	30 <sup>th</sup> November 2022	In consultation with GTN and NDWA expert groups
3.	Recruitment and training of data enumerators	1 <sup>st</sup> week of December 2022	
4	Data collection from the field	3 <sup>rd</sup> week of December 2022	
4.	Submission of dataset on KoBo toolbox	31 <sup>st</sup> December 2022	As soon as data collection is completed
3.	Submission of dataset on SPSS	31 <sup>st</sup> December 2022	As soon as data collection is completed
4.	Submission of first draft report of endline survey	15 <sup>th</sup> January 2023	Within 2 weeks after data collection
5.	Final report of endline survey	30 <sup>th</sup> January 2023	Incorporating all comments from the reviewers

**b. Forexternal evaluation and timeframe**

No.	Deliverables	Task Details	Deadline
<b>1</b>	Evaluation Inception Report	This report should be submitted by the evaluator within a week of starting the assessment. The inception report needs to meet the minimum requirements and structure specified in this guideline for UN Trust Fund's review and approval.	30 <sup>th</sup> November 2022
<b>2</b>	Field Work	Refer section eight for details	15 <sup>th</sup> January 2023
<b>2</b>	Draft Evaluation Report	In accordance with the timeline agreed with the evaluator hired by the grantee. The Draft Report needs to meet the minimum requirements and structure specified in this guideline for UN Trust Fund's review and approval.	30 <sup>th</sup> January 2023

<b>3</b>	Final Evaluation Report	No later than 3 weeks after the draft report. The Final Report needs to meet the minimum requirements and structure specified in this guideline for UN Trust Fund’s review and approval.	7 <sup>th</sup> February 2023
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## 11.0 Evaluation team composition

### a) Roles and responsibilities

#### i) Evaluator will gain insight

- Assess feasibility or practicality of a new approach for broader implementation
- Identify program related challenges and opportunities

#### ii) Evaluator will change practice or make improvements

Describe the extent to which a program has met its goals

- Enhance program operations by improving quality, effectiveness, and efficiency of activity
- Monitor activities for program management or routine reporting

#### iii) Evaluator will determine or assess effects

- Understand the relationship between program activities and certain effects or outcomes
- Demonstrate accountability to partners and/or funders
- Judge the value or worth of a program

### b) Required Competencies

- At least one female candidate within the evaluation team with the lead consultant with experience of at least 5 - 7 years 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 deliver 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 Nepal and its 7 provinces is required.
- Fluency in English and Nepali language is mandatory.

### 12.0 Proposal Evaluation Criteria

The technical and financial proposals will be evaluated separately and have 70% and 30% scores respectively. The proposals evaluation is based on the given criteria

SN.	Criteria	Score
<b>A.</b>	<b>Technical Proposal</b>	<b>70</b>
1	Understanding of Terms of Reference and Scope of Work	20
2	Proposed Methodology, approach, data analysis strategy and timeline	25
3	Experience	10
4	Quality of the sample report (Evaluation)	15
<b>B.</b>	<b>Financial Proposal (value for Money)</b>	<b>30</b>
	<b>Total</b>	<b>100</b>

### 13.0 Process for final evaluation

Stage of Evaluation	Key Task	Responsible	Expected days of working
<b>Inception stage</b>	Briefings of evaluators to orient the evaluators	Evaluation Task Manager	<b>2 working days</b>
	Desk review of key documents	Evaluator/s	
	Finalizing the evaluation design and methods	Evaluator/s	

	Submit draft <b>Inception report</b>	Evaluator/s	
	Review <b>Inception Report</b> and provide feedback	Evaluation Task Manager, Stakeholder Group and UNTF	<b>1 working days</b>
	Incorporating comments and revising the <b>inception report</b>	Evaluator/s	<b>1 working days</b>
	Submitting final version of <b>inception report</b>	Evaluator/s	
	Review final <b>Inception Report</b> and approve	Evaluation Task Manager, Stakeholder Group and UNTF	<b>1 working days</b>
<b>Data collection and analysis stage</b>	Desk research	Evaluator/s	<b>18days</b>
	In-country technical mission for data collection (visits to the field, interviews, questionnaires, etc.)	Evaluator/s	
<b>Synthesis and reporting stage</b>	Analysis and interpretation of findings	Evaluator/s	<b>3 weeks</b>
	Preparing a <b>first draft report</b>	Evaluator/s	
	Review of the draft report with key stakeholders for quality assurance	Evaluation Task Manager, Stakeholder Group and UNTF	<b>10 working days</b>
	Consolidate comments from all the groups and submit the consolidated comments to evaluation team	Evaluation Task Manger	
	Incorporating comments and preparing <b>second draft evaluation report</b>	Evaluation Team	<b>5 working days</b>
	Final review and approval of report	Evaluation Task Manager, Stakeholder Group and UNTF	<b>6 working days</b>
	Final edits and submission of the <b>final report</b>	Evaluator/s	<b>20 working days</b>

#### 14.0 Application Procedure

Interested firms and agencies meeting the above mentioned qualification should submit hard copy of sealed proposal to Green Tara Nepal Office at Lamtangin Marg-4/Bhakta Marg, Baluwatar, Kathmandu Telephone no 01-4532698(near to European Bakery) Google map at this link <https://goo.gl/maps/6PrjRS9BdsukCx7A9by> 12 noon of 21<sup>st</sup>November 2022. Please mention(**Proposal: InPAV End of Project Evaluationand End line Survey**)on envelope.

i) Letter of motivation (6pages max.) indicating

- The consultants' suitability for the assignment and match with previous work experience, qualifications etc.
- How the team will be composed and the division of work between team members.
- Discussion of the work methodology it will use.
- Draft work plan and suggested timetable.
- Economic offer and budget break down based on financial format given in annex i.

ii) Professional profile of the evaluating team/ company (CV of least lead consultant/team leader of consultancy team)

iii) A copy of previous **evaluation report** on the similar issue

iv) For firms/agencies following documents must be submitted:

- Valid certificate of company registration
- Valid copy of tax registration certificate
- Tax clearance certificate

## 15.0 Guideline for Proposal

### Annex-i: Technical Proposal Format

#### General Instructions:

All proposals should be a maximum of 10 pages (Excluding Title page and Annexes)

All budget figures must be presented in local currency (Nepali Rupees).

#### Required Proposal Format:

- 1.0 Title page (with name(s) of lead investigator(s), organization's name (if applicable), and contact details)
- 2.0 Applicant Qualifications and Experience to Undertake the Contract
- 3.0 Technical Approach
  - 3.1 Background
  - 3.2 Methodology: for Endline survey and final evaluation
  - 3.3 Plan for data entry and analysis
  - 3.4 Data quality assurance
  - 3.5 Foreseeable study limitations
- 4.0 Work Plan (with milestones deliverables and timeframes)
- 5.0 Technical collaborators (if any collaborators will be involved, indicate at what stage and in what capacity they will contribute to the process)
- 6.0 Annexes
  - List of team members specifying qualification, their roles and expected days of engagement
  - Summary of past work (within 3 years)
  - Curriculum vitae of Team Leader and Co-Team Leader.
  - Names and contact information of three professional references for the consultants/agency
  - Legal documents

**Annex-ii :Financial Proposal Format**

<b>Particular</b>	<b>Rate</b>	<b>Unit</b>	<b>Total amount</b>
<b>Human Resources</b>			
Per diem for consultants			
Per diem for enumerators			
Per diem for data manager (data cleaning, transferring to MS Excel and SPSS)			
<b>Travel</b>			
Travel cost for enumerators			
Travel cost for consultants			
<b>Accommodation</b>			
Enumerators accommodation and per diem			
Consultants accommodation and per diem			
<b>Training</b>			
Enumerators training expenses			
<b>Others</b>			
Printing and documentation expenses			
Communication			
Other indirect costs (PleaseSpecify)			
Miscellaneous (If any)			

## Annex 5 Data collection instruments

- Gov Official Tool
- OCMC Tool
- KII with InPAV staff, partners and donors
- Other Stakeholders
- FGD

### I. KII for Government officials

1. What is situation in terms of prevalence of GBV in your municipality/area?
2. What do you have to say regarding prevalence of GBV among different groups? In which types of population subsets there is higher prevalence and why?
3. What is the situation of GBV prevalence among the disabled population?
4. Do you have a record of all the disabled population in your municipality/area? Have they been getting the respective disability card and the facilities/services as provisioned by the government? If not, what are the measures to improve this situation?
5. Which organizations are working actively on prevention, protection, reporting of GBV?
6. Are you aware of the organizations working specifically on GBV among disabled population? If yes, could you let us know which ones are they?
7. Generally, what is the first point of contact in case of GBV?
8. How do you rate the role of police regarding GBV prevention, protection and reporting of disabled population? Are people comfortable reaching out to them? Whyyes/why No?
9. How do you rate the role of OCMC on GBV prevention, protection, and reporting of disabled population? Do you think people are aware about the services of OCMC? Have they been accessing OCMC while needed?
10. How do you rate the effectiveness of judicial committee on GBV prevention, protection, and reporting of disabled population? Lot of research show that disadvantaged population and women are not aware of judicial committee. What is your remarks?
11. How has the municipality been coordinating/has the plan to coordinate with other like minded organizations who provide GBV services for the disabled population?
12. What is your suggestion/recommendation for improving GBV prevention, protection, reporting and management?

### II. KII for OCMCs

1. What is situation in terms of prevalence of GBV in this area?



2. What do you have to say regarding prevalence of GBV among different groups? In which types of population subsets is there higher prevalence and why?
3. Which organizations are working actively on prevention, protection, reporting of GBV?
4. Are there any organizations working specifically on GBV among persons with disability population? If yes, could you let us know which ones are they? And how effectively are they working?
5. Generally, what is the first point of contact in case of GBV among GBV survivors, and among persons with disability?
6. How do you rate the role of police regarding GBV prevention, protection and reporting of persons with disability? Are persons with disability comfortable reaching out to them in case of GBV prevalence? Why yes/why No?
7. What kind of services have the people been getting from OCMC? If you have to self-assess the effectiveness of OCMC as GBV service provider, what would be your assessment? How well has it been functioning? How could its role and functions be further improved?
8. Are you aware of InPAV program and has it supported OCMC in any ways to address needs of violence among persons with disabilities?
9. Do you think people are aware about the services of OCMC? Do you think InPAV project has been able to increase support GBV survivors among persons with disability community? If yes/no describe how. What could be done to improve their accessibility of services through OCMC?
10. What are InPAV's main innovations (if any) and good practices in relation to OCMCs and how could they be scaled up further by the GoN and other donors in the future?
11. What are the areas of further improvement in the OCMC mechanism for effective prevention, protection, reporting and management of GBV among persons with disabilities?

### **III. KII with InPAV staff, partners and donors**

1. What are the main results/outcomes that the project has achieved and what were the success factors and actors? Could you elaborate on the key stakeholders engaged for this success?
2. Do you think InPAV strategy, approach and process has played a role behind this success? If yes, could you elaborate on the strategy, approach and process of InPAV? (eg: massive mobilization of community members, NDWA Networks, adolescents)
3. What are the other enablers and influencing factors behind the outcomes/results?
4. What are results that the project did not achieve or only partially achieve and so why?
5. What has been InPAV's role and influence in the preparation of the Local Government
6. planning and budgeting?
7. What can be said about the sustainability of the achievements in target districts and what are the pillars of sustainability? (Who is/will be working on gender-based violence against women with

disabilities in the community/district and how, following project exit? As a result of InPAV work (e.g. NDWA network, etc.) but also independently of InPAV.)

8. What are the main lessons learnt? Was there any missed opportunity/areas of improvement? If yes, could you elaborate?
9. Is there any difference in terms of results in high intensive and low intensive program areas or not and so why?
10. Would you say there was there a good coordination and collaboration with other institutions such as local government, OCMC, NGO/CBOs/Police and other service providers of GBV?
11. What are InPAV approaches that should be replicated and scaled up further? What is it that has worked at its best?
12. What are InPAV main innovations (if any) and good practices and how could they be scaled up further by the GoN and other donors in the future?

### **KII with Other Stakeholders**

1. What is situation in terms of prevalence of GBV in your municipality/area?
2. What do you have to say regarding prevalence of GBV among different groups? In which types of population subsets there is higher prevalence of GBV and why?
3. What is the situation of GBV prevalence among the disabled population?
4. Which organizations are working actively on prevention, protection, reporting of GBV?
5. Are you aware of the organizations working specifically on GBV among disabled population? If yes, could you let us know which ones are they? Are you aware of any awareness raising, capacity building programs targeting your communities? (e.g.TV/Radio programs, street drama, orientation programs, etc.)
6. What kind of GBV do the adolescent boys and girls been facing? Who is responsible for such situation? How could the situation be improved? Are adolescent girls with disability more vulnerable to GBV? Which type and by whom?
7. Generally, what is the first point of contact in case of GBV, and why? If you/your family member/friends experience violence, who do you talk to at the first instance?
8. How do you rate the role of police regarding GBV prevention, protection and reporting of persons with disability? Are people comfortable reaching out to them? Why yes/why No? Do you think police are skilled and have capacity to address GBV among women and girls with disability?
9. Have you/your family members/friends reached out to police in case of GBV? If not, why have they not reached out? Are you aware of any women and girls with disability who have sought help from police in a GBV related case? Please share your knowledge.
10. Are you aware of OCMC (One Stop Crisis Management Cenret)? What kind of services has it been providing? Have you/your family member/friends/acquaintances accessed OCMC while needed? If not, why not?
11. How do you rate the role of OCMC on GBV prevention, protection, and reporting of persons with disability? Are you aware of any girls and women with disability who have accessed OCMC support? Are they able to utilize its facilities? If yes/no, why?
12. How do you rate the effectiveness of judicial committee on GBV prevention, protection, and reporting of disabled population? Lot of research show that disadvantaged population and

women are not aware of judicial committee. What is your remarks?

13. What is your recommendation/suggestion for prevention, protection, reporting and management of GBV services for girls and women with disability?

#### **V. FGD Guideline (Community Girls/boys/men/women)**

1. What is situation in terms of prevalence of GBV in your municipality/area?
2. What do you have to say regarding prevalence of GBV among different groups? In which types of population subsets there is higher prevalence of GBV and why?
3. What is the situation of GBV prevalence among the disabled population?
4. Which organizations are working actively on prevention, protection, reporting of GBV?
5. Are you aware of the organizations working specifically on GBV among disabled population? If yes, could you let us know which ones are they?
6. What kind of GBV do the adolescent boys and girls been facing? Who is responsible for such situation? How could the situation be improved?
7. Generally, what is the first point of contact in case of GBV, and why? If you/your family member/friends experience violence, who do you talk to at the first instance?
8. How do you rate the role of police regarding GBV prevention, protection and reporting of disabled population? Are people comfortable reaching out to them? Why yes/why No?
9. Have you/your family members/friends reached out to police in case of GBV? If not, why have they not reached out?
10. Are you aware of OCMC? What kind of services has it been providing? Have you/your family member/friends been accessing OCMC while needed? If not, why not?
11. How do you rate the role of OCMC on GBV prevention, protection, and reporting of disabled population?
12. How do you rate the effectiveness of judicial committee on GBV prevention, protection, and reporting of disabled population? Lot of research show that disadvantaged population and women are not aware of judicial committee. What is your remarks?
13. What is your recommendation/suggestion for prevention, protection, reporting and management of GBV services?

## Annex 6 List of key stakeholders/partners consulted/interviewed

### KII Respondent List: Inclusive Partnership Against Violence Among Women and Girls with Disability (InPAV)

KII -OCMC					
S.N	Gender	Caste/Ethnicity	District/Palika	Organization /Designation	Interview Date
1	F	Brahmin/Chettri	Dang	OCMC coordinator	29 Dec 2022
2	F	Brahmin/Chettri	Kavre		9 Jan 2023
3	F	Madheshi	Morang		2 Jan 2023
4	F	Brahmin/Chettri	Surkhet	Staff Nurse	13 Dec 2022
5	M	Brahmin/Chettri	Surkhet		13 Dec 2022
6	F	Brahmin/Chettri	Kaski	Focal person	18 Jan 2023
7	F	Madheshi	Dhanusha	Focal person	21 Jan 2023
8	M	Brahmin/Chettri	Kanchanpur	Case Management	22 Jan 2023
9	F	Brahmin/Chettri	Patan Hospital, Lalitpur	Patan Hospital	25 Jan 2023
10	F	Janajati	Focal Person/ Prasutigriha hospital	PrasutiGriha, Kathmandu	26 Jan 2023

KII- Government Official					
S.N	Gender	Caste/Ethnicity	District/Palika	Organization /Designation	Interview Date
11	F	Brahmin/Chettri	Surkhet	Section Officer, Social Development Division	13 Dec 2022
12	F	Janajati	Morang, Sundarharicha	Deputy mayor	31 Dec 2022
13	F	Brahmin/Chettri	Morang	Social Development Division,	
14	F	Madhesi	Dhanushadham	Women and Children Section	30 Dec 2022
15	F	Janajati	Barahatal/ Surkhet	Health Post staff	30 Dec 2022
16	F	Madhesi	Dhanushadham	Social Mobilizer	30 Dec 2022
17	F	Brahmin/Chettri	Mandandeupur/Kavre	Social Development Officer(SDO)	24 Jan 2023
18	F	Janajati	Kathmandu	Police Officer	26 Jan 2023
19	F	Brahmin/Chettri	Kavre/ Mandandeupur	Deputy	18 feb 2023

				Mayor(former)	
20	F	Brahmin/Chettri	Kathmandu	Police	20 Feb 2023

<b>KII - InPav Partners District</b>					
S.N	Gender	Caste/Ethnicity	District/Palika	Organization /Designation	Interview Date
21	F	Brahmin/Chettri	Province 3	Provincial Coordinator(NDWA)	7 Jan 2023
22	F	Brahmin/Chettri	Province 6	Provincial Coordinator(NDWA)	7 Jan 2023
23	F	Brahmin/Chettri	Province 1	Provincial Coordinator(NDWA)	7 Jan 2023
24	F	Brahmin/Chettri	Panauti/ Kavre	Focal Person, Panauti NDWA	9 Jan 2023
25	F	Dalit	Mandandeupur/kavre	Focal Person, Madandeupur ,NDWA	9 Jan 2023
26	F	Madhesi	Province 2	Provincial Coordinator(NDWA)	21 Jan 2023

<b>KII - InPav Partners (Kathmandu)</b>					
S.N	Gender	Caste/Ethnicity	District/Palika	Organization /Designation	Interview Date
27	M	Brahmin/Chettri	Kathmandu	Country Director/Green Tara Nepal	27 Dec 2022
28	F	Brahmin/Chettri	Kathmandu	Green Tara Nepal	22 Jan 2023
29	F	Brahmin/Chettri	Kathmandu	Vice Chairperson/ Nepal Disabled Women's Association(NDWA)	30 Dec 2022
30	F	Brahmin/Chettri	Kathmandu	Chairperson / NDWA	30 Dec 2022
31	F	Brahmin/Chettri	Kathmandu	General Secretary/NDWA	30 Dec 2022

<b>KII-Other Stakeholder</b>					
S.N	Gender	Caste/Ethnicity	District/Palika	Organization /Designation	Interview Date
32	F	Brahmin/Chettri	Kavre /Panauti	Parent (Disable)	9 Jan 2023
33	F	Brahmin/Chettri	Sundarharaicha /Morang	Counselor/ WOREC Nepal	31 Dec 2022
34	M	Brahmin/Chettri	Biratnagar/ Morang	Samarth Samaj	2 Jan 2023
35	F	Brahmin/Chettri	Barahatal/ Surkhet	Counselor	1 Jan 2023
36	F	Brahmin/Chettri	Barahatal/ Surkhet	Director of Awaaj	2 Jan 2023
37	F	Brahmin/Chettri	SurkhetBirendranagar	Founder Aawaj	13 Dec 2022
38	F	Brahmin/Chettri	Surkhet	Lawyer,	13 Dec 2022

				Geetanjali law firm	
39	F	Brahmin/Chettri	Dhanusha	Disable coordination committee	21 Jan 2023
40	F	Madheshi	Dhanusha	Mukti Nepal	22 Jan 2023
41	M	Brahmin/Chettri	Surkhet training	Teacher, Annapurna School	24 Jan 2023
42	F	Janajati	Surkhet training	Teacher	24 Jan 2023
43	F	Brahmin/Chettri	Birendranagar ,Surkhet	Teacher	24 Jan 2023
44	F	Brahmin/Chettri	Kathmandu	Consultant Counselor	26 Jan 2023
45	F	Brahmin/Chettri	Kavre	Vice Chair, Spinal Cord Injury Association	19 Feb 2023
46	M	Madheshi	Bateswor/ Dhanusha	Teacher	19 Feb 2023
47	F	Brahmin/Chettri	Sundarharaicha/Morang	Teacher	19 feb 2023
48	F	Brahmin/Chettri	Biratnagar/Morang	Teacher	20 Feb 2023
<b>Total: 48, Male: 6, Female: 42, Brahmin/Chettri : 35, Dalit: 1, Madheshi:7, Janjati: 5</b>					

## **Annex 7 Documents reviewed/consulted**

Annual Report, Year 1(01/10/2019 - 30/09/2020):Nepal Disabled Women Association (NDWA).

Annual Report, Year 2(01/10/2020 - 30/09/2021):Nepal Disabled Women Association (NDWA).

REPORT ON Baseline Survey on Inclusive Partnership on Violence Against Girls and Women with Disability in Nepal: Nepal Disabled Women's Association (NDWA),October 2021.

Human Development Report 2020: United Nations Development Programme : The Gender Inequality Index is a composite measure reflecting inequality between women and men in three different dimensions: reproductive health (maternal mortality ratio and adolescent birth rate), empowerment (share of parliamentary seats held by women and share of population with at least some secondary education), and labour market participation (labour force participation rate).

Impact of COVID-19 on Women and Girls with Disabilities A Rapid Assessment, Research Report December 2020: Nepal Disabled Women Association (NDWA), supported by UNTF.

Nepal Demographic and Health Survey 2016, Ministry of Health - MOH/Nepal, New ERA/Nepal, and ICF.2017. Kathmandu, Nepal: MOH/Nepal, New ERA/Nepal, and ICF: Proportion of ever-partnered women age 15-49 experiencing intimate partner physical and/or sexual violence at least once in their lifetime. Link:<https://lawcommission.gov.np/en/wp-content/uploads/2021/03/Convention-On-The-Rights-Of-Persons-With-Disabilities.pdf>.

Progress Report, Year 1(01/10/2019 - 31/03/2020) : Nepal Disabled Women Association (NDWA).

Progress Report, Year 2(01/10/2020 - 31/03/2021) : Nepal Disabled Women Association (NDWA).

Progress Report, Year 3 (01/10/2021 - 31/03/2022): Nepal Disabled Women Association (NDWA).

Report on Inclusion Analysis of One-Stop Crisis Management Centres in Nepal: Nepal Disabled Women's Association (NDWA) supported by UNTF.

The Global Gender Gap Report 2021, World Economic Forum: The Global Gender Gap Index benchmarks national gender gaps on economic, political, education and health criteria.

Terms of Reference: GTN/NDWA.

The Constitution of Nepal (2015): Established Nepal as a federal democratic republic with three tiers of government – local, provincial and federal.

# Endline Survey and External Evaluation of the Project

## Inclusive Partnership Against Violence Among Women and Girls with Disability

ORGANISED BY:

PSR RESEARCH AND CONSULTANCIES IN CONSORTIUM WITH RAMP UP PVT.LTD

15 AND 16 DECEMBER 2022

## BACKGROUND

- ▶ The project entitled 'Inclusive Partnership Against Violence Among Women and Girls with Disability' (InPAV), 3 year project (October 2019 to September 2022). collaboratively implemented by Nepal Disabled Women Association (NDWA) and Green Tara Nepal (GTN), and financially supported by United Nations Trust Fund (UNTF).
- ▶ Project advocate, support, enable and empower women with disabilities to pursue their rights and exercise, addressing violence and claiming their rights and justice as per the UN Convention on Rights of Persons with Disabilities.
- ▶ Total project beneficiaries being 22,890 women and girls with disability in 27 districts, 73 local governments, the project covers all the seven provinces of Nepal.



## Objective: Project

- ▶ To increase community awareness and capacity to combat violence against women and girls with disability
- ▶ To strengthened governance and GBV mechanism (one stop crisis management center (OCMC),gender equity and social inclusion (GESI) focal point, justice committee disability coordination committee) to mainstream gender and disability.
- ▶ To improve knowledge and evidence on violence against women and girls with disability(WGWDs) to influence policies and programs.

## Objective: Endline Survey and External Evaluation

### **Endline Survey:**

- ▶ To assess the level of knowledge, awareness, practices on GBV and service utilization among the targeted beneficiaries
- ▶ To evaluate/compare the project's achievements against the baseline status/ findings

### **External Evaluation:**

- ▶ To evaluate the entire InPAV project, against the effectiveness, relevance, efficiency, sustainability, and impact criteria, cross-cutting gender equality and human rights criteria.
- ▶ To identify key lessons and promising or emerging good practices in the field of ending violence against women and girls, for learning purposes
- ▶ To assess impact of the project

## Purpose of Endline Survey and External Evaluation

### End line Survey:

- ▶ Assess the quantitative differences of VAWG data including violence experiences, reporting, knowledge on sources and services availability to address violence, attitude of community towards disability and violence before and after the interventions by the project.

### External Evaluation:

- ▶ Understand why -and to what extent- the life of women and girls with disability changes in specific access to services, community support and policy
  - ▶ Inform planning, programming, budgeting, implementation, and reporting, contribute to evidence-based policy making, development effectiveness and organizational effectiveness.
-

## Outcomes and Outputs

### Expected Results

▶ **Outcome 1: Increased community awareness and capacity to combat violence against women and girls with disability (VAWGWDs)**

Activities: (i) awareness through TV/radio, street drama, IEC and IPC programme at community level.

(ii) Orientation and capacity development trainings for WGWDs, communities and service providers (inclusive 77 Local Gov), promote and act as anti GBV champions

(iii) Mobilization of GBV focal persons through province contact office.

▶ **Output 2: Strengthened governance and GBV mechanism (OCMC, GESI focal point, justice committee ,disability coordination committee etc.) to mainstream gender and disability.**

Activities: (i) Review and build- in disability inclusiveness GBV programmes/ mechanisms including (OCMC).

(ii) Strengthen governance ,justice mechanisms ,civil society organizations to ensure protection ,access to justice mechanisms, services, and facilities

▶ (iii) Orientation to government officers and OCMC to identify and respond to VAWGWDs.

## Outcomes and Outputs

▶ **Output 3: Improved knowledge and evidence on VAWGWDs to influence policies and programmes.**

Activities:

(i) Baseline, endline survey to bridge evidence gaps; design advocacy tools with multi sector actors to develop gender sensitive & disability-inclusive curriculum ( health & education professionals)

(ii) Resource materials, curriculum and training resources developed in collaboration with WGWDs and professionals

(iii) ToT to schoolteachers and academic institutions on promoting gender and disability

(iv) Dissemination of information on protection and GBV services in accessible formats

## Outcomes and Outputs

- ▶ Output 4: Strengthened governance mechanism and enhanced capacity of women and girls with disability to tackle the emergencies/ disaster situation like COVID-19 pandemic.

### Activities:

- (i) advocacy initiatives at Province and local levels to influence system to make accessible to men, women , boys and girls with disabilities
- (ii) Formulate 'Girls and Women with Disabilities Specific General Guidelines against COVID-19 pandemic'
- (iii) Social Media use for information dissemination( you tube, face book, twitter, linked in , website)
- (iv) Reduce vulnerability of men ,women, girls and boys with disabilities from the effect of COVID-19 pandemic.

## Methodology and Data Collection

- ▶ **Purposive sampling approach** to be adopted for sampling methodology
- ▶ **KOBO application** to be used as the data collection software for collection of primary data
- ▶ Data collection will be conducted **using mobile applications and data from the assessment will be entered directly into mobile devices** and uploaded on a dashboard.

## Data collection Tools, Methods and Techniques

- ▶ **End line Survey** : Survey tools to be administered using KOBO toolbox by team of 14 trained enumerators.
- ▶ **External Evaluation:**
- ▶ Key Informant Interview(KII): 3 sets of questionnaire
  - ▶ (i)Government Officials
  - ▶ (ii) OCMCs
  - ▶ (iii) InPAV staff, partners and donors
- ▶ Focus Group Discussion(FGD): 1 set of questionnaire

## Target Area: Endline Survey

Province	District	Municipality
Province I	1. Morang 2. Dhankuta	Sundardulari palika, Biratnagar mahanagar palika Dhankuta Mahanagarpalika, Chhathar Jorpati Gaun Palika
Madhes Pradesh	1. Dhanusa 2. Siraha	Dhanusadham Palika, Bateshwor Gaun Palika Siraha Palika, LaxmipurPatari Gaun Palika
Bagmati Province	1. Kathmandu 2. Kavre	BudhanilakanthaPalika,Gokarneshwor Palika Madandeupur Palika, Panauti Palika
Gandaki Province	1. Kaski 2. Gorkha	Pokhara LekhnathMaha Nagar Palika, Madhi Gaun Palika Gorkha Palika, Palungtar Palika
Lumbini Province	1. Arghakhachi 2. Dang	Sandhikharka Palika, Chhatra Dev Gaun Palika LamahiPalika,Gadhawa Gaun Palika
Karnali Province	1. Surkhet 2. Jumla	Birendra Nagar Palika,Chingad Gaun Palika Chandannath Palika,Tatopani Gaun Palika
Sudurpashchim Province	1. Achham 2. Kanchanpur	Sanfebagar Palika, Chourpati Gaun Palika Bhimdhatta Palika, Krishnapur Palika

## Target Area: External Evaluation

Province	District	Municipality
Province I	1. Morang	Sundardulari palika, Biratnagar mahanagar palika
Madhes Pradesh	1. Dhanusa	Dhanusadham Palika, Bateswor Gaun Palika
Bagmati Province	1. Kathmandu 2. Kavre	BudhanilakanthaPalika,Gokarneshwor Palika Madandeupur Palika, Panauti Palika
Karnali Province	1. Surkhet	Birendra Nagar Palika,Chingad Gaun Palika

## Sampling Strategy

### End line:

- Research team to visit 14 District for Endline Survey
- ▶ Sample to include include **women and girls with disability**
- ▶ Special **attention to be paid to diverse population subsets and their representation** in the sample.
- ▶ In coordination with the provincial coordinator , team will select the respondents

## Sampling Strategy

### External Evaluation:

- ▶ Random selection approach will be used for external evaluation (4 out of total 14 districts) and additional 25% of local governments will be chosen at random (7 out of 28 local government).
- ▶ Visit InPAV district and assess the quality of services provided in response to the needs of the women with disabilities
- ▶ 5 Districts for External evaluation in all seven provinces.
- ▶ OCMCs, Judicial committee, police, gender focal person, community leaders, teachers, mayor/deputy, organizations working in disability sector, media,

## Focus Group Discussions

- ▶ 8 focus group discussions to be conducted in four selected districts(Kavre, Dhanusha, Morang, Surkhet)
  - ▶ **understand the nuances of GBV in the area**
  - ▶ **service seeking behaviour**
  - ▶ **status of services to GBV survivors**
  - ▶ **Survivor-centric investigation and case handling mechanism**
  - ▶ Questions to **seek information to inform specific design of community awareness and prevention activities.**

## Do No Harm

- ▶ Protect the rights of respondents, including privacy and confidentiality
- ▶ Participation for the interview should be voluntary
- ▶ Names of individuals consulted during data collection should not be made public
- ▶ Respondents can leave the interview anytime and the decision should be respected
- ▶ Anonymity /confidentially should be maintained

## Ethical Consideration

- ▶ All data collected will be treated confidentially. Recordings will be encrypted, and password-protected. No personal details will be recorded ,ethical considerations will be strictly adhered to during the survey period.
- ▶ Informed Consent: Informed consent will be taken from each and every respondent
- ▶ Respondents will be informed that interviews will be confidential and interview notes and transcripts will be coded so they remain anonymous.
- ▶ Respondents will be asked if they wish to waive anonymity to allow the possibility of paraphrasing or quoting them by position or other possibly identifying information.
- ▶ Fieldwork preparation will also involve training in systematic, confidential data collection and record management, and the quality assurance procedure will be embedded throughout as highlighted in various sections of the methodology. supervise data management throughout the process to ensure standards are adhered.
- ▶ No results will be published where individuals can be identified.
- ▶ Researchers will not share data outside the team.



## Referrals for in-need respondents

- ▶ Signs of violence, abuse, or mistreatment.
- ▶ How to behave in case they perceive at-risk survivors, e.g., if there are signs of violence, if a research participant divulges that they have been victims of abuse/violence.
- ▶ Referral to close-by One Stop Crisis Management Centres (OCMC), or counsellors, or relevant CSO to be identified.

## Type of Disability



## List of Researchers

S.No	Name of Researcher	Caste	Age	Education	Years of Experience	Mobile No.	Email
1	Manju KC	Brahmin / Chhetri	36	B.A. in Sociology	11 years	9849575579	manjum836@gmail.com
2	Kanchan Rokaha	Brahmin / Chhetri	37	B.A. in Education	9 years	9843772353	kanchanrokaha@gmail.com
3	Goma Lama	Janajati	45	B.A. in Education	6 years	9842848411	gomalama8888@gmail.com
4	Jamuna Rai	Janajati	41	B.A.	8 years	9841396068	rajamuna00@gmail.com
5	Sharmila Rijal	Brahmin / Chhetri	27	M.A. in Sociology	6 years	9842703435	sarurizal32@gmail.com
6	Pabitra Gurung	Janajati	33	Master's in Education	7 years	9864025533	pavgurung1@gmail.com
7	Mirina Gurung	Janajati	25	Bachelor's in Public Health	3 years	9805841502	grg.mirinana001@gmail.com
8	Tulashal Limbang	Janajati	25	Masters in Rural Development	8 years	9810114468	tulashalimbang12@gmail.com
9	Kriti Gautam	Brahmin / Chhetri	38	B.A. in Sociology	7 years	9843840349	kritigautam2018@gmail.com
10	Manju Lingthep	Janajati	24	B.A. in Sociology	11 years	9849133591	lingthepmanju97@gmail.com
11	Yam Kumari Gurung	Janajati	29	Masters in Rural Development	7 years	9843298825	yameeghotane39@gmail.com
12	Laxmi Lama	Janajati		Bachelor's in Journalism		9840571999	lamanorghyuma@gmail.com
13	Ruma Lingthep	Janajati	28	HSEB (+2)	5 years	9843695942	limburuma40@gmail.com
14	Sadiksha Bartaula	Brahmin / Chhetri	22	Diploma in Agriculture	5 years	9865102788	sadiksgabartaula2@gmail.com

Note: Highlighted ones are suggested to do Evaluation data collection along with Endline

## Field Schedule and Sample Size

S.N	District	Palika	Group	Researchers	Endline 1294 @ 92 per district	Evaluation		
						FGD	KII	In-D
1	Morang	Sundardulari palika, Biratnagar mahanagar palika	Group 1	Manju KC + Kanchan Rokaha	92	2	10	2
2	Dhankuta	Dhankuta Mahanagar palika, Chhathar Jorpati Gaun Palika				92		
3	Dhanusa	Dhanusadhama Palika, Bateshorw Gaun Palika	Group 2	Goma Lama + Jamuna Rai	92	2	10	2
4	Siraha	Siraha Palika, Laxmipur Patari Gaun Palika				92		
5	Kavre	Madandepur Palika, Panauti Palika	Group 7	Ruma lingthep + Sadiksha Bartaula Evaluation to be done by core team members in both districts	92	2	10	2
6	Kathmandu	Budhanilakantha Palika, Gokarneshwor Palika				92		
7	Kaski	Pokhara Lekhnath Maha Nagar Palika, Madhi Gaun Palika	Group 3	Mirina Gurung + Tulashal Limbang	92			
8	Gorkha	Gorkha Palika, Palungtar Palika				98		
9	Arghakhuchi	Sandikharka Palika, Chhatra Dev Gaun Palika	Group 4	Kriti Gautam + Manju lingthep	95			
10	Dang	Lamahi Palika, Gadhawa Gaun Palika				95		
11	Surkhet	Birendra Nagar Palika, Chingod Gaun Palika	Group 5	Sharmila Rijal + Pabitra Gurung	92	2	10	2
12	Jumla	Chandannath Palika, Tatopani Gaun Palika				92		
13	Achham	Sanfegagar Palika, Chourpati Gaun Palika	Group 6	Laxmi Lama + Yam Kumari Gurung	83			
14	Kanchanpur	Bhimdhatta Palika, Krishnapur Palika				95		
Total					1294	8	50	10

## Total number of days in Field

S.N	District	Palika	Group	Researchers	Endline 1294 @ 92 per district	Days / 8 survey per day per person	Evaluation			Evaluation Days	Total Days	Remarks
							FGD	KII	IDI			
1	Morang	Sundardulari palika, Biratnagar mahanagar palika	Group 1	Manju KC + Kanchan Rokaha	92	14	2	10	2	2	16	
2	Dhankuta	Dhankuta Mahanagarpalika, Chhathar Jorpati Gaun Palika			92							
3	Dhanusa	Dhanusadham Palika, Bateshwor Gaun Palika	Group 2	Goma Lama + Jamuna Rai	92	14	2	10	2	2	16	
4	Siraha	Siraha Palika, Laxmipur Patari Gaun Palika			92							
5	Kavre	Madandeupur Palika, Panauti Palika	Grey Area	Ruma lingthep + Sadiksha Bartaula	92	12	2	10	2	2		Core Team
6	Kathmandu	Budhanilakantha Palika, Gokarneshwor Palika			92				10	2		
7	Kaski	Pokhara Lekhnath Maha Nagar Palika, Madhi Gaun Palika	Group 3	Mirina Gurung + Tulashal Limbang	92	14					14	
8	Gorkha	Gorkha Palika, Palungtar Palika			98							
9	Arghakhachi	Sandhikharka Palika, Chhatra Dev Gaun Palika	Group 4	Kriti Gautam + Manju lingthep	95	14					14	
10	Dang	Lamahi Palika, Gadhawa Gaun Palika			95							
11	Surkhet	Biresdra Nagar Palika, Chingad Gaun Palika	Group 5	Sharmila Rijal + Pabitra Gurung	92	14	2	10	2	2	16	
12	Jumla	Chandannath Palika, Tatopani Gaun Palika			92							
13	Achham	Sanfegbar Palika, Chourpati Gaun Palika	Group 6	Laxmi Lama + Yam Kumari Gurung	83	14					14	
14	Kanchanpur	Bhimdhatta Palika, Krishnapur Palika			95							
					1294		8	50	10			

## Annex 9 Guideline

Endline Survey and External Evaluation of the Project:  
“Inclusive Partnership Against Violence Among  
Women and Girls with Disability”

**GUIDELINES**

PSR Research and Consultancies  
in consortium with RAMP UP

December 2022

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## I. सर्वेक्षणको उद्देश्य (Endline Survey Objective)

- परियोजना लक्षित समुदायहरूमा लैंगिक हिंसा सम्बन्धि ज्ञान, जागरुकता, अभ्यास, उपलब्ध सेवा र उपयोगको बारे सर्वेक्षण गर्न  
(To assess the level of knowledge, awareness, practices on GBV and service utilization among the targeted beneficiaries )
- आधार रेखाको (**baseline**) स्थिति/निष्कर्षको आधारमा परियोजनाको उपलब्धिहरूको मूल्याङ्कन/तुलना गर्न  
(To evaluate/compare the project's achievements against the baseline status/ findings)

## I.I सर्वेक्षणको उद्देश्य (External Evaluation Objective)

- InPAV परियोजनाको सम्पूर्ण ( अक्टोबर २०२२-सेप्टेम्बर २०२२), मूल्याङ्कन, प्रभावकारिता, सान्दर्भिकता, दिगोपन, प्रभाव, मानव अधिकार, लैंगिक समानताको आधारमा गरिने छ  
(To evaluate the entire InPAV project, October 2019-September 2022, against the effectiveness, relevance, efficiency, sustainability, and impact criteria, as well as the cross-cutting gender equality and human rights criteria)
- महिला तथा बालिका विरुद्ध हुने हिंसा अन्त्य गर्नका लागि भएका, सिक्न सकिने राम्रा अभ्यासहरू पहिचान गरिने छ  
(To identify key lessons and promising or emerging good practices in the field of ending violence against women and girls, for learning purposes)
- परियोजनाको प्रभावकारिताको मूल्याङ्कन गरिने छ  
(To assess impact of the project)

## II. जातजातियताहरु (Caste and Ethnicities)

क्र.सं.	जातिगत समूह	प्रमुख जातजातीहरु
1.	पहाडी दलित	१. गन्धर्व (गाईने) २. परियार (दमाई, दर्जी, सुचीकार, नगर्ची, ढोली, हुड्के) ३. बादी ४. विश्वकर्मा (कामी, लोहार, सुनार, ओड, चुनँरा, पार्की, टमाटा) ५. सार्की (मिजार, चर्मकार, भूल)
2.	मधेशी दलित	१. कलर २. दुसाध (पासवान, हजरा) ३. ककैहिया ४. धोवी (रजक) हिन्दू ५. कोरी ६. पत्थरकट्टा ७. खटिक ८. पासी ९. खत्वे (मण्डल, खङ्ग) १०. बाँतर ११. मुसहर १२. चमार (राम, मोची, हरिजन, रविदास) १३. चिडिमर १४. मेस्तर (हलखोर) १५. डोम (मरिक) १६. सरभङ्ग (सरवरिया) १७. तत्मा (ताँती, दास)
3.	पहाडी जनजाती आदीवासी	१. कुशवाडिया, बनकरिया, कुसुण्डा, राउटे, सुरेल, हायु, राजी, लेप्चा, २. चेपाङ, थामी, बोटे, दनुवार, बरामु, ल्होमी, माफी, दराई, सियार, थुदाम ३. सुनुवार, तामाङ, भुजेल, कुमाल, भोटे, पहरी, ताप्लेगोला, डोल्पो, फ्रि, मुगाल, लार्के, ल्होपा, दुरा, वालुङ ४. गुरूङ, मगर, राई, लिम्बु, छैरोतन, ताडवे, तिनगाउले थकाली, बाह्रगाउले, माफाली थकाली, शेर्पा, याक्खा, छत्त्याल, जिरेल, व्यासी, ट्योल्मो ५. नेवार, थकाली
4.	मधेशी जनजाती तथा आदीवासी	१. किसान, मेचे (वोडो) २. धानुक, भाँगड, सतार (सन्थाल) ३. थारू, राजवंशी, गन्नाई, धिमाल, ताजपुरिया
5.	पहाडी बाह्यमण तथा क्षेत्री	सबै पहाडी मूलका बाह्यमण, क्षेत्री र ठकुरी
6.	मधेशी बाह्यमण तथा राजपुत	भा, राजपुत, त्रिपाठी, मिश्रा, शुक्ला, कायस्थ
7.	मुस्लिम	मुस्लिम, चुरौटे
8.	पहाडी अन्य जाती	गिरी, पुरी, भारती, सन्यासी, योगी, कुँवर
9.	मधेशी अन्यजाती	यादव, तेली, कलवार, सुढी, कुमिर, कानु/हलवाई, हजाम/ठाकुर, बढही, राजभर, केवट, मल्लाह, नुनिया, कुम्हार, कहर, लोध, विड/विण्डा, गडेरी/भेडीहयार, माली, कामर, धुनिया, वराय, मुण्डा, बडाई, पञ्जावी, बंगाली, मारवाडी, नुराड, कायस्थ, जैन, बानिया, अमात, कशवानिया, राजवोध, कुशवाहा

### III. सुमुदायिक सदस्य पहिचान गर्ने प्रक्रिया (Steps for Identifying Community Members)

- Step 1: Local coordinator संग सम्पर्क राख्ने र छनौट गर्न सहकार्य गर्ने ।
- Step 2: वरिपरिका बढी हिंसा हुने स्थानहरुको समुदायबारे बुझ्ने ।
- Step 3: समुदायमा रहेका विभिन्न सरकारी तथा गैर सरकारी सेवा प्रदायक संस्थाहरु नाम र नम्बर लिने ।
- Step 4: Endline survey को लागी अपाङ्गता भएका महिला र बालिकाहरु संग अन्तरवार्ता लिने ।
- Step 5: समुदायमा गएर सर्वेक्षणले तोकिए बमोजिम आवश्यकता अनुसार अन्तरवार्ता लिने । अन्तरवार्ता कर्ता छनौट गर्दा दुइ वा दुइ भन्दा बढी समुदाय छनौट गर्ने ।
- Step 6: एकै घर, संगैको घर को नगर्ने र भिन्दाभिन्दैजात, धर्म, वर्ग, सिमान्तकृत समुदाय, इत्यादि संग अन्तरवार्ता लिई आवश्यक संख्या पुराउने ।
- Step 7: यदि कसैले अन्तरवार्तादिन नमानेको वा विचैमा रोकेको खण्डमा टिपोट गरी, अर्को अन्तरवार्तामा जाँदै आवश्यक संख्यार समुहपुराउने ।
- Step 8: अन्तरवार्ताहरु प्रत्येक दिन समीक्षा गरेर अन्तिम रुप दिई upload गर्ने । अवलोकनहरु पनि सबै टिपोट गर्ने ।
- Step 9: FGD/Consultations को निमित्त 6-8 जना अपाङ्गता भएका महिला र बालिकाहरु, विभिन्न जातजाति, धर्म, वर्ग, सिमान्तकृत समुदायका छनौट गर्ने , छलफल सहजीकरण गर्दै detail मा टिपोट गर्ने ।



**IV. लक्षित समुह संख्या, स्थान र अनुसन्धानकर्ताहरु  
(Sample Size, Locations and Researchers/Supervisors)**

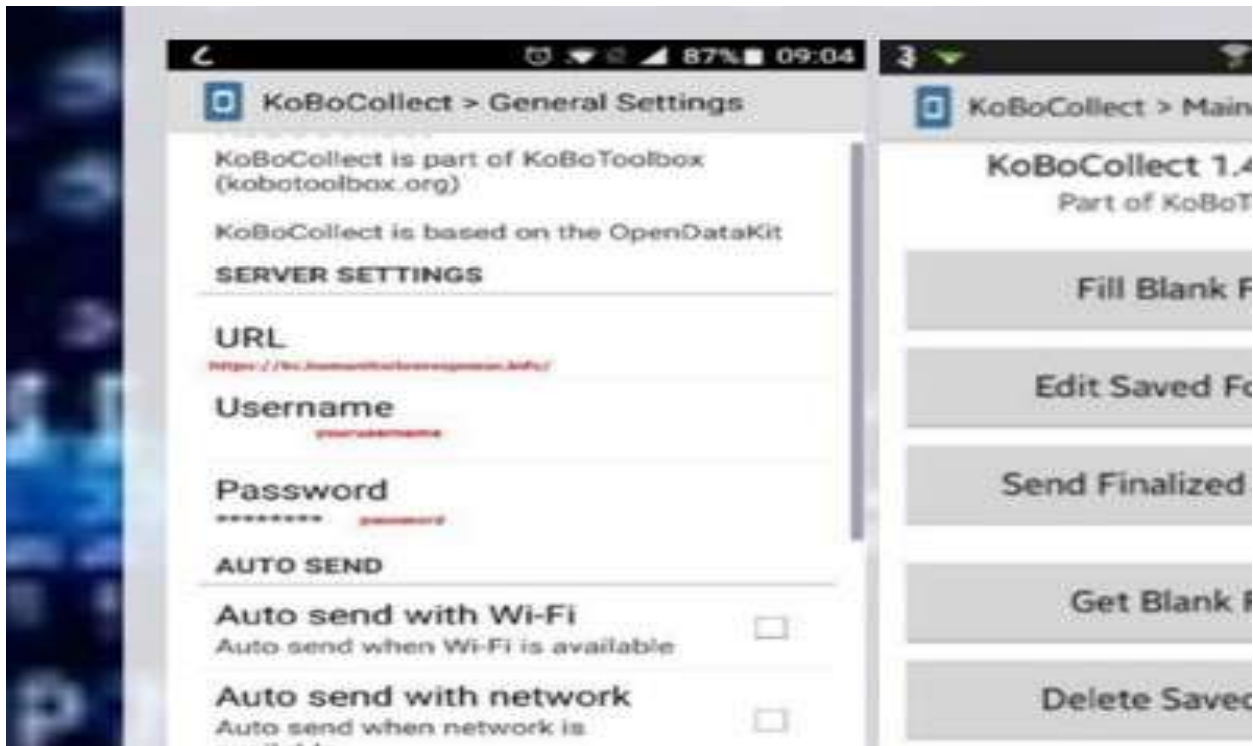
District	Municipality
<b>Province 1</b>	
Morang	Sundardulari palika, Biratnagar mahanagar palika
Dhankuta	Dhankuta Mahanagarpalika, Chhathar Jorpati Gaun Palika
<b>Province 2</b>	
Dhanusa	Dhanusadham Palika, Bateswor Gaun Palika
Siraha	Siraha Palika, LaxmipurPatari Gaun Palika
<b>Province 3</b>	
Kathmandu	Budhanilakantha Palika, Gokarneshwor Palika
Kavre	Madandeupur Palika, Panauti Palika
<b>Province 4</b>	
Kaski	Pokhara LekhnathMaha Nagar Palika, Madhi Gaun Palika
Gorkha	Gorkha Palika, Palungtar Palika
<b>Province 5</b>	
Arghakhachi	Sandhikharka Palika, Chhatra Dev Gaun Palika
Dang	LamahiPalika,Gadhawa Gaun Palika
<b>Province 6</b>	
Surkhet	Birendra Nagar Palika, Chingad Gaun Palika
Jumla	Chandannath Palika, Tatopani Gaun Palika
<b>Province 7</b>	
Achham	Sanfebagar Palika, Chourpati Gaun Palika
Kanchanpur	Bhimdhatta Palika, Krishnapur Palika

<b>A. Endline Survey</b>	
<b>Respondent Type</b>	<b>Sample Size</b>
Women & girls with disability	1294
Total 14 district and in each district	
Total sample size	1294
<b>B. External Evaluation</b>	
KII ( 10 *5)	50
FGD( 2 each district; women & girls with disabilities)	8
In-depth Interview (2*4)	8
Total sample size	66

## V. KOBO Tool सम्बन्धि जानकारीका

### KOBOचलाउने तरिका

- सबै भन्दा पहिले play storeमा गएर kobocollect install गर्ने
  - kobo ,Thenको होम pageदेखिन्छ
  - Homepageको माथि Kमा selectगरि add projectगरि Manually enter project details छान्नु होस्
- URL is
  - <https://kc.kobotoolbox.org/pks2022>
  - User=profile
  - Password=profile
  - Then ok



- गरे पछी ok गर्ने
- getblank form select ,Then गरेर select all प्रेस गर्ने र get selected गर्ने )यो बेला सम्म इन्टरनेट चाहिन्छ (
- Fill Blank Formबाट data collection गरिने form select गर्ने हो .जस्तो policeको हो गर्ने हो भने final working police वा communityको गर्ने हो भने final working communityलाई select गर्ने Offline ) गर्ने हो (
- Edit Saved Formबाट हामीले गरेको /भरेको formमा केहि थपघट edit/गर्न सकिन्छ . सबै भन्दा पहिले edit select गरेर कुन formमा काम गर्ने हो त्यो select गरि कुन प्रश्नमा edit गर्ने हो तेस्मा गएर edit गरि mobileको errow back गर्दा save changes or Ignore changes देखिन्छ .एदी change गर्ने हो भने save select गर्ने होइन भने Ignore गर्ने Offline ) गर्ने हो (
- ) Send Finalized form अब फेरी इन्टरनेट चाहिन्छ (

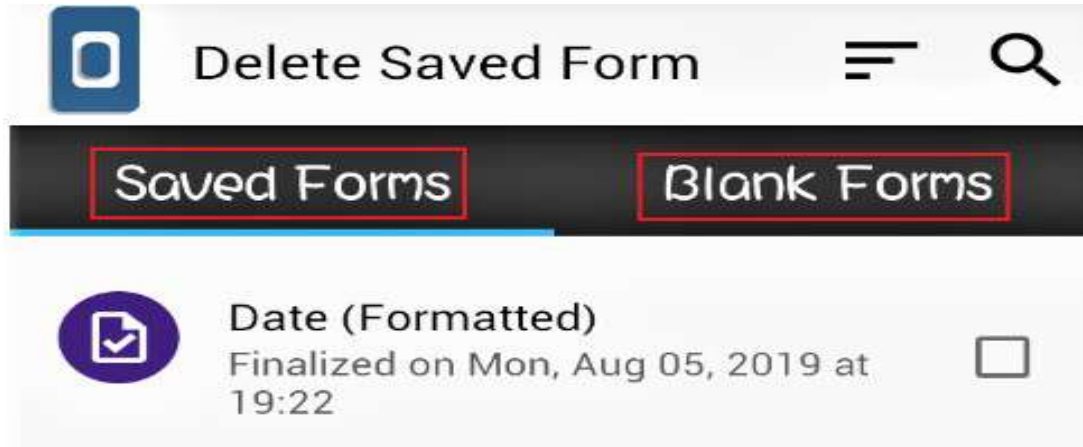
- यो select गरि कति पुरै भरिएका form send गर्न सकिन्छ ,



- यो फोटो मा editमा 4भएता पनि (1)complete form मात्रै हो 1 ,मात्रै Form send गर्न सकिन्छ ,तेस्को लागि send finalized select गर्ने अनि select all गरि send selected press गर्नु पर्छ र उक्त पठाएको form viewमा देखिन्छ तर send भै सके पछि edit गर्न मिल्दैन .

### Delete save form

- कहिले काँही नया form तान्नु पर्दा पहिले नै तानेको form delete गर्नु पर्छ



- तेसैले माथि चित्र मा देखाएको जस्तै दुवैमा) पालै पालो select (गरि पुरानो form delete गरेर नया तान्न फेरी get blank गर्ने )इन्टरनेट चाहिन्छ (

### GPS

GPS-लिन इन्टरनेट चाहिँदैन ,तर mobileको location on भएको हुनुपर्छ कृपया gps बाहिर लिनुहोस् )घर भित्र होइन(

**VI. वो जस संग समबन्धित पत्रिका (To Whom It May Concern Letter)**



# ग्रीन तारा नेपाल GREEN TARA NEPAL

दर्ता नं. ६३२/०६४/०६५ जि.प्र.का. काठमाण्डौ

स.क.प.द. : २४०७७

पा.नं.: ३०२८८०८१०

ठेगाना : का.जि.का.म.न.पा.-०४, बालुवाटार

Ref. No. १०३-२०७९/०८०



मिति: २०७९/०८/२६

## जो जस सँग सम्बन्धित छ

उपरोक्त सम्बन्धमा (i) फरक क्षमता भएका महिला र बालिकाहरुमाथि हुने हिंसा विरुद्ध आवाज उठाउन सामुदायिक चेतना र क्षमता अभिवृद्धि गर्ने (ii) सुशासन र GBV संयन्त्र (एक द्वारा संकट व्यवस्थापन केन्द्र), लैङ्गिक समानता र समावेशीकरण focal point, न्यायिक समिति, अपाङ्गता समन्वय समितिलाई लैङ्गिक र अपाङ्गता विषय मुलधारमा लैजान सस्कृत बनाउने, (iii) निति तथा कार्यक्रमलाई प्रभाव पार्न, ज्ञान तथा प्रमाणलाई बलियो बनाउने उद्देश्यकासाथ यू.एन.ट्रष्टको आर्थिक तथा प्राविधिक सहयोगमा नेपाल अपाङ्ग महिला संघ र ग्रीन तारा नेपालको साभेदारीमा “हिंसा विरुद्ध समावेशी साभेदारी” परियोजना २७ जिल्लाका ७३ स्थानीय तहमा तीन वर्षे परियोजना (अक्टोबर २०१९-सेप्टेम्बर २०२२) सञ्चालन गरिएको स्मरण गराउन चाहन्छु।

उक्त परियोजनाको अवधि समाप्त भई सकेको र परियोजनाको सान्दभिकता, नतिजा, प्रभावकारीता तथा निष्कर्षवारे अन्तिम सर्वेक्षण तथा बाह्य मूल्यांकनकोलागि सर्वेक्षण गर्न **PSR Research and Consultancies/RAMPUP Pvt. Ltd** लाई छनौट गरिएको र सर्वेक्षणको सिलसिलामा विभिन्न सरोकारवालाहरु (समुदायका अगुवाहरु, फरक क्षमता भएका महिला र बालिकाहरु, न्यायिक समिति, शिक्षक, आदि) सँग अन्तर्वार्ता तथा छलफल गरिने भएकोले उक्त संस्थावाट खटिई आउनुभएका आउनु भएका अनुसन्धानकर्ताहरुलाई आवश्यक सहयोग तथा समनवय गरिदिनु हुन अनुरोध गर्दछु।

सहयोगकोलागि धन्यवाद।

राम चन्द्र सिलवाल  
कार्यक्रम निर्देशक

## VII. अन्तरर्वाताको लागी सहमती (Consent Letter for Interviewing)

### समुहगत छलफलको लागी अनुमति फारम

हिंसा विरुद्ध समावेशी साझेदारी परियोजना (InPAV), नेपाल अपाङ्ग महिला संघ र ग्रिन तारा नेपाल द्वारा २७ जिल्ला र ७३ स्थानीय सरकारहरुमा कार्यान्वयन गरिएको तीन वर्षे परियोजना (अक्टोबर २०१९- सेप्टेम्बर २०२२) हो । परियोजनाका मुख्य उद्देश्यहरु, (i) अपाङ्गता भएका महिला र बालिकाहरु माथी हुने हिंसा विरुद्ध आवाज उठाउन सामुदायिक चेतना र क्षमता अभिवृद्धि गर्ने, (ii) सुशासन र GBV संयन्त्र (एक द्वारा संकट व्यवस्थापन केन्द्र), लैङ्गिक समानता र समावेशीकरण focal point, न्यायिक समिति, अपाङ्गता समन्वय समिति लाई लैङ्गिक र अपाङ्गता विषय मुलधारमा लैजान सस्कत बनाउने, (iii) निति तथा कार्यक्रमलाई प्रभाव पार्न, ज्ञान तथा प्रमाणलाई बलियो बनाउने ।

परियोजना सम्पन्न भएकोमा Endline Survey and External Evaluation, PSR Research and Consultancies/RAMPUP Pvt. Ltd द्वारा स्वतन्त्र रुपमा गरिने भएको छ । यो सर्वेक्षणको लागि विभिन्न सरोकारवालाहरु (समुदायका अगुवाहरु, अपाङ्गता भएका महिला र बालिकाहरु, न्यायिक समिति, आदि ) संग छलफल गरिने छ । यो सर्वेक्षण बाट परियोजनाका प्रभाव ,उपलब्धी र सीकाई पहिचान गर्न महत्वपूर्ण हुने छ ।

यसकारण तपाईं संग समुहगत छलफल गर्न, फोटोखिचन र छलफलको रेकर्डिङको (recording)लागि अनुमति जरुरी हुन्छ । यदितपाईंको अनुमति छ भने कृपया हस्ताक्षर गरी दिनुहोला।

धन्यवाद

नाम:

स्थान:

मिति:

हस्ताक्षर:



## VIII. ध्यान दिनै पर्ने नैतिक विषयहरु (Ethical Considerations)

- अन्तरवार्ता को क्रममा गोपनियतामा ध्यान पुराउने ।
- अन्तरवार्ता लिंदा संवेदनशील भाषा, शब्द प्रयोग गर्ने ।
- इमान्दारीता र पारदर्शिता का साथ सबै सूचना उतरदातालाई बताउने ।
- अन्तरवार्ता र फोटोको सहमतिलिएर मात्र अधि बढ्ने ।
- उतरदातालाई सबै सूचनागोप्य राखिनेछ भनि विश्वस्त गराउने ।
- अन्तरवार्ताकर्ताले कुनै तथ्यांक बाहिर दिने छैन ।
- कुनै हिंसा, दुर्व्यवहारको लक्षण देखेमा आवश्यक सम्प्रेषणको referral को नाम र नम्बर दिने ।
- अन्तरवार्ता लिंदा कसैले असहमतभएमा सम्मान पूर्वक व्यवहार गर्ने ।
- अन्तरवार्ताकर्ता आफैलाई कुनै अप्ठेरो आइ'परेमा तुरुन्त Coordinator (Reetu Dhoju Bade Shrestha 9841217563) संग वा Team Leader (Pinky Singh Rana 9841201897) संग सम्पर्क गर्ने ।

## IX. सर्वेक्षण टोलीको नाम र सम्पर्क (Name and Contact Number of Research Team Members & Province wise Coordinator)

### Researchers

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12	<u>Ruma Lingthep</u>	<u>9843695942</u>	<u>limburuma40@gmail.com</u>	
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### Province : Coordinator Detail

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Ganga Devkota	9849054238	4- Gandaki Province	Devganga45@gmail.com
Parbati Neupane	9844758052	5- Lumbini Province	Pravishrestha1993@gmail.com
Dhansara Shahi	9864735120	6-Karnali Province	Shahidhansara71@gmail.com
Anita Dhungana	9848715561	7-Sudurpashchim Province	Anitadhungana.ndwa@gmail.com