

Final External Project Evaluation Report

Deinstitutionalize and End Violence against Women
with Disabilities in Custodial Institutions

Location: Republic of Serbia

January 2016-January 2018



Client: Mental Disability Rights Initiative of Serbia

Donor: The United Nations Trust Fund to End Violence against Women

Prepared by: Tatjana Lazor Obradović

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This Evaluation Report has been developed by an independent evaluator. The analysis presented in this report reflects the views of the author and may not necessarily represent those of MDRI-S, its partners or the UN Trust Fund.

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0 List of Acronyms and Abbreviations

APV – Autonomous Province of Vojvodina

CSOs – Civil Society Organizations

CEDAW - Committee on the Elimination of Discrimination against Women

CRPD Convention on the Rights of Persons with Disabilities

HRC Human Rights Committee

MDRI-S – Mental Disability Rights Serbia

MP – Member of Parliament

MLEVSA – Ministry of Labour, Employment, Veterans and Social Affairs

NPM – National Prevention Mechanism for Torture

OHCHR - The Office of the United Nations High Commissioner for Human Rights

OHMR - Office for Human and Minority Rights

PwDs – People with disabilities

UPR Universal Period Review

UNTF – The United Nations Trust Fund to End Violence against Women

VAW – Violence Against Women

1 Executive Summary

1.1. Context and description of the project

Project “Deinstitutionalize and End Violence against Women with Disabilities in Custodial Institutions” has been implemented by the Mental Disability Rights Initiative of Serbia MDRI-S and it has been funded by the United Nations Trust Fund to End Violence against Women (UNTF), with additional support of Disability Rights International (DRI).

The project duration was two years (from January 2016 to January 2018). The project had a national scope and was implemented in the Republic of Serbia. It addressed violence perpetrated or condoned by the State, namely custodial violence, forced sterilization/pregnancy/abortion and generally violence that women with mental disabilities in custodial and psychiatric institutions in Serbia survive.

The project aimed to improve mechanisms and measures to end violence against women in custodial institutions and ensure that measures target intersectional discrimination. The expected project results were that women with disabilities in custodial institutions are better protected from violence, throughout raised awareness about the scope and forms of violence perpetrated against them, formulated policy responses, improved legislation and policies, and improved services to women survivors of violence by incorporating gender and disability-specific measures.

Primary beneficiaries of the project were women and girls with disabilities (100), especially those with intellectual, cognitive, and psychosocial disabilities of very low socio-economic status who reside in custodial and psychiatric institutions (in urban and rural areas) in the Republic of Serbia.

Secondary beneficiaries are 40 civil society organizations (Disabled Persons Organizations – DPOs, mainstream human rights organizations, service providers, women’s organizations), social workers, Government officials (decision-makers, policy implementers), and Parliamentarians.

The project applied human rights approach, social inclusion principles, observations on intersectional discrimination, and analysis of multiple disparities facing women with disabilities in custodial institutions.

1.2. Purpose and Objectives of the Evaluation

The evaluation has covered the entire project duration (from January 2016 to January 2018). It has been focused on activities and impact in the region of Serbia, and has taken into account effects and success of international partnerships and international advocacy actions and their effects on the national program as well. The evaluation has covered the target primary and secondary beneficiaries as well as

broader stakeholders, including key partners (Protector of Citizens/National Preventive Mechanism (NPM), service providers of supported living) and selected external consultants/experts that took part in the project.

Purpose of the evaluation

The evaluation results will be used by The UNTF to assess the overall impact of the project. In addition, it will be used by MDRI-S management team in understanding the achieved outcomes, positive effects and aspects, and negative circumstances or side-effects. It will be used for planning the continuation of the program to deinstitutionalize and end violence against women with disabilities in custodial institutions in Serbia.

Evaluation results will support MDRI-S team in designing further activities and programs based on perspectives of primary and secondary beneficiaries. The project team will decide on strategy for advocacy and capacity building activities, especially in designing new training programs for women and disabilities and service providers.

The overall objectives of the evaluation were to:

- a) evaluate the entire project in terms of effectiveness, relevance, efficiency, sustainability and impact, with a strong focus on assessing the results at the outcome and project goals;
- b) generate key lessons and identify promising practices for learning;
- c) identify prospective innovative approaches and strategies to end violence against women with disabilities in custodial institutions in Serbia.

The audience and beneficiaries of the evaluation, therefore, are The UNTF, MDRI-S as well as key partners and stakeholders defined by the project: Protector of Citizens/National Preventive Mechanism (NPM), service providers, government officials, parliamentarians, and primary beneficiaries.

1.3. Description of evaluation methodology

Evaluation methodology involved process and outcome evaluation design adjusted for a small grant. The key questions that needed to be answered by this evaluation were divided into five categories of analysis. The five overall evaluation criteria – relevance, effectiveness, efficiency, sustainability and impact - were applied for this evaluation. The evaluator applied interviews and focus groups with the project team, primary beneficiaries and secondary beneficiaries, as well as questionnaire for secondary beneficiaries (training participants).¹

The main data sources

The data analysis included confirmation of findings across different sources (triangulation).

Quantitative data sources: the MDRI-S project proposal and project reports to The UNTF, the MDRI-S Goal baseline data reports, the MDRI-S training reports (4 trainings for service providers and 1 training for National Preventive Mechanism for Torture (NPM) representatives), data from the evaluation

¹ Please refer to Annex 9.6. Lists of respondents/participants in the evaluation process

questionnaire for service providers, reports of the Republic Institute for Social Protection

Qualitative data sources: group in-depth semi structured interviews with the members of the project team and MDRI-S staff, group in-depth semi structured interviews with primary beneficiaries, individual in-depth semi structured interviews with the representatives of the parliament, government officials and NPM, focus group with service providers and additional in depth semi structured interviews with service providers, MDRI-S project reports, NPM and Protector of Citizens reports, publications created as products of the project, other relevant external and online documents²

Major limitations

As a limitation in the planning and implementation of an external evaluation methodology, a short period of time available for the implementation of data collection and analysis was recognized. National holidays and low availability of representatives of national institutions and authorities have influenced efficiency in data collection. In realization of the focus group with service providers, due to the low response, additional interviews with service providers proposed by MDRI-S were conducted, by using guide for the focus group.

1.4. Main findings

It can be concluded that the project outcomes and outputs were achieved to the great extent: the project brought the perspective of women with disabilities to the table of decision makers, made it visible to those who can transfer it into the institutional change. Based on data collected from stakeholders (secondary beneficiaries and donor) MDRI-S did excellent work in collecting and presenting voice of women with disabilities in an ethical manner, safe manner and manner that respect their dignity and rights. The project goal has been partially achieved, mainly due to the fact that ambitious project plan and external factors contributed to the obstacles in obtaining changes in policies and protection mechanisms. On the other hand, having in mind long-term character of the goal, it is expected that follow up effects will contribute to the achievement of the goal.

The project reached more than targeted number of primary and secondary beneficiaries by implementing planned activities. In total, 115 primary beneficiaries were reached by information and capacity building activities, and 332 of secondary beneficiaries were reached by advocacy and capacity building activities. The project has brought changes in lives of primary beneficiaries who were directly involved in the project activities. The changes in lives of women with disabilities are visible in women who were directly involved in the project activities. The project has brought changes in lives of primary beneficiaries who were directly involved in the project activities. Their perspective has changed in comparison to the base-line data when complete lack of awareness on protection mechanisms was found: they are aware on protection mechanisms, know whom to address although need more capacity building in order to take concrete steps and use protection mechanisms. They are willing to work further on bringing their voice closer to policy makers, service providers and to the wider public. The changes in lives of other women who were not directly involved in the project activities (workshops, trainings) is difficult to discuss or measure. Interviewed women did not confirm that they shared their experience

² Please refer to the Annex 9.7 „List of Supporting Documents Reviewed“

and knowledge gained on workshops with other women in their institution, or women with whom they share living facilities in the supported living and who were not involved in the project.

MDRI-S team managed to utilize positive factors that were present in environment and combine them with their own approach in delivering project outputs and outcomes. The advocacy based on strong evidence produced in the first stage of the project by implementing baseline study and presenting situation of women with disabilities in custodial institutions was effective, especially due to the fact that this kind of evidence was presented to the public for the first time in the country. The lack of availability and accessibility of protection mechanisms influenced the achievement of the output related to the filling complaints, in terms that the MDRI-S team learned the lessons from the context and managed to adjust their approach, do no harm to primary beneficiaries and considered developing alternative solutions

The project successfully advocated for policy changes, however the results of the advocacy are not fully visible yet. Having in mind that MDRI-S opened completely new topic by this project, and brought completely invisible issue up to the public agenda, it is expected that full effects of this advocacy becomes visible in the following period, at least during next 3 years due to the fact that at least two years were needed for MDRI-S to put this topic on the agenda of the policy makers and that 2018 is a year when many policies are waiting for the revision/adoption (Law on Gender Equality, Family law, Social Protection Law etc). The main achievement of the advocacy, beside the changes in these policies is the fact that MDRI-S explored, collected and presented comprehensive issue of GBV against women with disabilities in custodial institutions in front of international and national stakeholders.

The project has motivated significant number of service providers to widen their services and programs and support women with disabilities in custodial institutions: at least 8 of them³ took concrete steps toward improvement of their services and at least 2 of them claimed that they would work further in that direction.

According to the evaluation findings, the project strategy and activities are relevant to the needs of women with disabilities in custodial institutions: it provided package of information and capacity building for 110 women with disabilities in custodial institutions and women who have experience of living in custodial institutions. The publications and advocacy activities brought voice of these women in front of the policy makers, service providers and opened space for future advocacy for protection of women with disabilities from GBV and exploration of possibilities for establishing and developing more available and accessible services for these women. As evidenced from the project reports and evaluation process, more intensive and continual programs are needed to be implemented in order to ensure access of these women to services and protection mechanisms, especially to women who still live in the institutions: program that target service providers, program that target policy makers and program that target women directly.

The project will continue to be relevant in the future period, since a) process of deinstitutionalization has not been implemented yet; b) the policy changes in relation to GBV and violence against women in custodial institutions are not fully in compliance with international treaties and not being implemented; and c) there is need for continual and intensive direct work with women with disabilities – in terms of

³ Among them, one organization was not directly involved in the project activities but was informed about the project by the external consultant

education, psychological empowerment; d) there is need for support to service providers in order to develop more available and accessible services to women with disabilities victims of violence.

Although some activities were completed with slight delays, the project outputs and outcomes were timely delivered. Part time engagement of the project team members might have had influence on burnout of the project staff.

The sustainability of this project has high perspective having in mind that the products of the project are highly relevant and quality and initiated cooperation with various stakeholders has good ground. The unintended consequences of the project are generally positive and have potential as basis for follow up plans. By increasing visibility of the GBV against women with disabilities in custodial institutions at the national and international level, the also became visible and recognized as women organization and this is the basis for further developing of the advocacy initiatives but also initiative directed toward group of women with mental and intellectual disabilities as heterogeneous group.

The main lessons learned can be grouped into the following: lessons related to the advocacy activities (presentation of testimonies of primary beneficiaries showed to be of great importance); lessons related to the direct work with beneficiaries (difficult access to women in custodial institutions); lessons related to the service providers: the data on capacities of civil society organizations and custodial institutions as service providers are important for designing the whole project approach, beside training program). The project has significant multiplication potential and these good practices should be shared with other similar organizations at the national level but also in the region. The practices that can be shared are related both, to primary and secondary beneficiaries. Continual working on improving approach, exploring and testing alternative solutions became part of the organizational culture; and their experiences in advocacy approach with participation of primary beneficiaries, ethical codes, and adjusted approach to primary beneficiaries can be multiplied beyond national level.

1.5. Key Recommendations

MDRI-S should continue advocacy activities by presenting testimonies of women with disabilities in front of policy makers and international stakeholders who could support them in future activities. Beside advocacy on GBV against women with disabilities, overall advocacy for deinstitutionalization which would support efforts in improving position of women in custodial institutions would be good strategy.

The women with disabilities who were directly involved in the project activities should experience further support by MDRI-S and it's partners-civil society organizations but also other service providers which act at the local level mostly (for example, centers for social work). The reach out of women in custodial institutions can be improved by further building partnerships between institutions and community based service providers, as well as through education and sensitization of professionals who are employed in these institutions. As for the service providers, monitoring effects of the trainings for service providers, including custodial institutions is recommended, as well as additional training programs and possible continual mentoring or supervisory support to service providers, in different ways, for targeted number of motivated CSOs which have initial capacities to develop their services or establish additional, adjusted services for women in custodial institutions but also for women with disabilities who use other services as pointed out in one of the MDRI-S reports.

MDRI-S is recommended to continue to work with NPM and independent bodies on developing accessible and available protection mechanisms/complaint procedures for women with mental and intellectual disabilities, and on production of the separate monitoring report with specific reference to GBV violence against women in custodial institutions.

The advocacy activities could be more more precisely targeted to the executive government and MPs from the ruling parties. Repeat monitoring visits to custodial institutions in order to monitor and potentially measure the nature and scope of changes as potential effects of the project implementation

MDRI-S should ensure burnout prevention and stress management support programs for project and whole MDRI-S staff and working on further development of the strategic framework of the organization. Also, MDRI-S should transfer direct work with primary beneficiaries to the service providers empowered by MDRI-S and supervised by MDRI-S. Continued networking with women organizations and their sensitization towards GBV against women with disabilities is recommended as well as continued networking with organizations of PwDs who support general population of PwDs and sensitize them for gender aspect of disability, violence in general and GBV against women in custodial institutions.

2 Context of the Project

2.1. Background and Context

The Republic of Serbia is the country with population of 7 186 8624, of which 51,31% are women. The main demographic characteristics are depopulation and ageing of population. According to the Report of the Republic Institute for Social Protection⁵, although there is trend of depopulation, the number of beneficiaries in the system of social protection is continually increasing. In 2016 the number of beneficiaries was 724.411 (53,8 % of them were women), which is 14,7%. more than in 2012.

In March 2011, the new **Law on Social Protection** was adopted that fully allowed application of the principles of the social protection reform: social protection system based on respect for human rights; participation of beneficiaries in the creation of services and decision-making; the right of beneficiaries to choose the range of services and providers of services; respect for the dignity and interests of users; equal access to services; partnerships between public, nongovernmental and private service providers; encouragement of local initiatives in social protection; and respect for the right to live in a natural environment. The principal directions of the system reform were related and still relate to the establishment of a network of services, institutionalization, and decentralization, but also to the empowerment of social actors who can provide services and establish partnerships among them. Law significantly expands the scope of beneficiaries of financial assistance, whereas, on the other hand, it envisages the development of community based services, beside placement in custodial

⁴ The Census of Population, Households and Dwellings in the Republic of Serbia 2011. Statistical Office of the Republic of Serbia <http://popis2011.stat.rs/>

⁵ „Adult Beneficiaries in Social Protection System“, Republic Institute for Social Protection, 2017 <http://www.zavodsz.gov.rs/PDF/izvestaj2017/PS%20Punoletni%20korisnici%20u%20sistemu%20socijalne%20zastite%202016.pdf>

institutions. Social protection services or community services are defined in Law on Social Protection as the activities of support and assistance to citizens and their families to improve, and preserve the quality of life, eliminate or reduce the risk of adverse life circumstances as well as the development of potential of beneficiaries for independent living in the community.

The groups of services as defined by Law:

- 1) Services of assessment and planning:** assessment of needs, current state of affairs, strengths and risks in beneficiary and his/her closest environment; assessment of custody, foster and adoptive parents, creation of individual or family plan of services and social protection and legal protection measures. This group of services is mainly implemented by Center for social work;
- 2) Daily care community services:** day care center, home care, drop in centers and other;
- 3) Services to support independent living:** supported housing, personal assistance, independent living training and other;
- 4) Counseling-therapeutic and social-educational services** (support to families in crisis, counseling, family therapy, mediation, SOS helplines and the like);
- 5) Accommodation services:** custodial accommodation, foster care, shelters, and other.

The services defined by this Law that cannot be provided by local self-government or cannot be provided in needed scope, should be contracted through public procurement procedure. *The law is clear about the services that cannot be purchased through procurement: the assessment and planning services, urgent intervention, the institutions for accommodation of children and youth, institute for social protection, foster care-they can only be provided by public institutions established by national/regional/local government.* The services that can be purchased, local self-government must purchase only from the licensed organizations by public and transparent procurement procedure.

There is no definition to make distinction between local social protection services and community based services in Serbia. These two terms, in the social welfare system, are synonyms. According to the research implemented by TRAG Foundation in Serbia, the civil society organizations deliver almost a third of local social services. Public and civil sector are dominant in delivery of social services and there are no for-profit deliverers. The main reason for such situation is the fact that there is no market of services in Serbia, since in most cases there is only one deliverer of one service in most of the municipalities. The second reason is that the system of funding the services through public calls and tenders hasn't been established yet. Also, more than one research confirms the fact that, when it comes to financing, local governments finance more the public sector - 77% of all costs of public service deliverers, as opposed to 41% for CSOs, so CSOs are forced to diversify their sources of income, mainly relying on the national budget and grants.⁶

According to the Law on Social Protection, service providers can be only licensed institutions/organizations/private entities⁷. In order to apply for the license, the

⁶ https://www.tragfondacija.org/media/PDF/Research_Eng.pdf, page 4

⁷ Private entities are not individual persons but registered private agencies, companies, private homes for elderly etc., registered according to national regulations.

institution/organization/private entity has to fulfill national standards of quality of social protection services. In the lights of above written, it has to be emphasized that service providers of community based/local social services can be custodial institutions established by the government - among them custodial institutions where women with mental and psychosocial disabilities are placed. In practice, they do provide local services, such are supported living which has been developed through projects supported by the Government, for example Open Arms project.

According to the data of the Republic Institute for Social Protection⁸, although there is trend of decreasing of number of adult beneficiaries with disabilities in custodial institutions, the service of custodial placement is dominant among other social services. Gender segregated data are given only in summarized reports on number of beneficiaries. On 31.12.2016. there were 11.188 adults with disabilities in custodial institutions within social protection system. All of these institutions belong to public sector, and are established by the Government. During 2016, 53,6% of adult beneficiaries of social protection system who have disability were placed in institutions for adults and elderly (gerontology centers, homes for elderly), and 36,24% were placed in special institutions for people with disabilities (among them, were dominant: 72,2%). Among special institutions for people with disabilities, the number of persons with intellectual and psychosocial disabilities is continually dominant: In 2016 72%, in 2015-72% and in 2014 73%. If percent of beneficiaries with „multiple”⁹ disability is added to these, we come to the conclusion that between 92 and 95% of beneficiaries in these institutions are people who have intellectual and psychosocial disability, and only 5-8% are those with physical or pervasive disabilities.

According to the **Synthetized report on annual reports of 15 custodial institutions for people with disabilities in the system of social protection**¹⁰, during 2016, there were total of 4.401 beneficiaries placed in these facilities. Out from this number, 72% of them are persons with intellectual and psychosocial disabilities. Among them there were 47,47% of women with disabilities. Looking at the period 2014-2016, there is slight decrease of the number of beneficiaries.

| Year | Women | Men | Total |
|------|-------|------|-------|
| 2016 | 2089 | 2312 | 4401 |
| 2015 | 1954 | 2293 | 4415 |
| 2014 | 2168 | 2285 | 4453 |

⁸ “Report on Adult Beneficiaries in the System of Social Protection in 2016”, Republic Institute for Social Protection, September 2017

<http://www.zavodsz.gov.rs/PDF/izvestaj2017/PS%20Punoletni%20korisnici%20u%20sistemu%20socijalne%20zastite%202016.pdf>

⁹ „Multiple“ („višestruki“) is the term which is being used for persons who have several difficulties, but almost always include intellectual or mental disability as well

¹⁰Synthetized report on the work of institutions for persons with disabilities in Serbia in 2016, Republic Institute for Social Protection 2017 <http://www.zavodsz.gov.rs/PDF/izvestaj2017/IT%202016..pdf>

Table 1: *Women and men with disabilities in 15 custodial institutions for persons with disabilities in Serbia 2014-2016*¹¹

On the other hand, the annual number of beneficiaries who are placed in the institution is not decreasing over the years: in 2014 there were 250 of newly accommodated, in 2015-273 and in 2016-271.

Unfortunately, the main reason of leaving these institutions remains death of beneficiaries, over the years: in 2014, 79%, in 2015-71% and in 2016-84%. Since the reports of the republic Institute for social protection didn't consistently present the data in the same way¹², it was not possible to compare absolute numbers, but the trend is obvious, very small percent of beneficiaries leaves the institutions due to returns to families or community based services. As repeated in these reports, *“long placement, rare to no-existing contact with family and very sporadic leavings from institutions are characteristics of institutional placement in this types of institutions”*. The Reports refer to the cases of violence, as well. In the report it is said that among 15 institutions, 11 of them have established internal team for protection of beneficiaries from violence, and 4 institutions haven't. In 2016, only 4 institutions reported cases of violence against 8 beneficiaries, conducted by other beneficiaries. The situation was similar in 2015 (5 reported cases), and 2014 (8 reported cases of violence). During these 3 years, there was no reported case of violence against beneficiaries conducted by staff, and no gender sensitive data. In the report for 2016, the Republic Institute for Social Protection says *“In some of the narrative reports, it has been noted that there are violence of beneficiaries over employees in institutions, and this is an aspect on which greater attention should also be payed”*¹³. Also, all of these 3 reports emphasize need for education and raising awareness of employees on violence.

According to the MDRI-S project proposal submitted in 2015, there are almost 6000 persons in custodial institutions in Serbia, and almost half of them are women (most of them have mental disabilities) and there are additional 3000 persons with psychosocial disabilities in five big psychiatric institutions. Statistics is not gender-specific, so there are no precise data available about the number of women and type of difficulties they have. Main characteristics of institutionalization are abuse and neglect, isolation and physical restraint, deprivation of legal capacity, and deprivation of liberty, involuntary placement and involuntary treatment. Besides lack of comprehensive report on their position, another critical gap is in the provision of services to women with disabilities victims of violence and functionality of the available mechanisms to prevent or react to violence against women with disabilities in custodial institutions. The process of deinstitutionalization in Serbia has been put highly on the government's agenda, but it is a slow process filled with many obstacles and problems. Persons with disabilities are, as a rule, the last one to be ensured community living.

¹¹ Synthetized report on the work of institutions for persons with disabilities in Serbia in 2014

<http://www.zavodsz.gov.rs/PDF/izvestaj2015/USTANOVE%20ZA%20ODRASLE%20I%20STARIJE%20-%20OSI.pdf>, 2015

<http://www.zavodsz.gov.rs/PDF/izvestaj2016/izvestaj%20o%20radu%20ustanova%20za%20odrasle%20i%20starije%20sa%20invaliditetom%20za%202015.pdf> and 2016 <http://www.zavodsz.gov.rs/PDF/izvestaj2017/IT%202016..pdf>, Republic Institute for Social Protection

¹² The report for 2014 presents data in figures and percent's, and for 2015 and 2016 only in percent's

¹³ Similar formulations can be found in the reports for 2015 and 2014

MDRI-S had recognized several key opportunities for the implementation and success of the project. Serbia has ratified all major human rights treaties; the process of Serbia's accession to the European Union as an opportunity to harmonize the current legislation with international standards and ensure oversight of its implementation; and major policies referring to gender equality and protection from violence were in the process of update during 2015/2016, which was considered as a good timing to incorporate protection measures for women with disabilities in custodial institutions.

2.2. Description of the project

2.2.1. The Project duration, project start date and end date

The project duration was two years (from January 2016 to January 2018).

2.2.2. Description of the specific forms of violence addressed by the project

The project addressed violence perpetrated or condoned by the State, namely custodial violence, forced sterilization/pregnancy/abortion and generally violence that women with mental disabilities in custodial and psychiatric institutions in Serbia survive. Women with disabilities, especially those with intellectual, cognitive and psychosocial disabilities, who live in custodial institutions (custodial institutions, psychiatric hospitals, prison wards) are exposed to multiple forms of violence, abuse, and exploitation. These women are one of the most vulnerable, marginalized, and stigmatized in Serbian society and yet, before this project started, there were no data on their position in custodial institutions and no comprehensive research or analysis has been done to have the insight into the scope of the problem of violence.

2.2.3. Importance, scope and scale of the project, including geographic coverage

The project aimed to improve mechanisms and measures to end violence against women in custodial institutions and ensure that measures target intersectional discrimination. The expected project results are that women with disabilities in custodial institutions are better protected from violence, throughout raised awareness about the scope and forms of violence perpetrated against them, formulated policy responses, improved legislation and policies, and improved services to women survivors of violence by incorporating gender- and disability-specific measures.

The project had a national scope and it has been implemented in the Republic of Serbia.

2.2.4. Main objectives of the project

The overall project goal was: Women and girls with disabilities in custodial institutions (custodial and psychiatric) in Serbia experience greater support for their right to live a life free of violence and have access to services by December 2017.

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

The project applied human rights approach, social inclusion principles, observations on intersectional discrimination, and analysis of multiple disparities facing women with disabilities in custodial institutions. The project had a national scope and it was implemented in Serbia.

The project took strong advocacy approach in all aspects, and it focused on advocacy and empowering primary beneficiaries in the area of prevention of violence through changing attitudes and knowledge. In order to support change of attitudes and improved community and institutional responses, the project included improvement of service delivery by building partnerships. In addition, the project supported implementation of multisector policies in the areas of prevention of gender and disability-specific violence and discrimination by monitoring the implementation, conducting research and advocacy activities.

The fundamental approach was based on human rights of women with disabilities by exploring and reacting to intersectional discrimination and cross-cutting issues. The project explored multiple disparities facing women with disabilities in custodial institutions, namely violence (and risk of violence) on the grounds of gender, age, locality (e.g. difference between community living and institutionalization). The research included desk research of the current legislative and policy framework, international standards and obligations, existing services, and best practice examples (at the national and international level). The second part of the research included focus groups and in-depth interviews with women with disabilities who live in custodial institutions or have a history of institutionalization. The research applied qualitative approach (including life stories) and participative methodology. The findings are presented in two publications.

Simultaneously, advocacy team worked on awareness-raising and advocacy activities, including distributing policy brief, holding meetings with relevant stakeholders, sending written submissions to international human rights treaty bodies and employing available advocacy venues. Capacity-building of primary and secondary beneficiaries included 4 trainings for service providers, 1 training for members of the National Preventive Mechanism for Torture (NPM), and workshops with women with disabilities. Capacity-building methodology was based on adult-learning and peer support approach with the use of different instruments, such as discussions, presentations, workshops, individual work, work in pairs, etc.

Outcome 1: Authorities improve policies (procedures, protocols, guidelines, etc.) to protect rights of women with disabilities from custodial violence by December 2017.

Output 1.1. Policy-makers are better informed about forms of violence women with disabilities are facing in custodial institutions.

Activities for output 1.1.

- 1.1.1. *Conducting research on violence against women with disabilities in custodial institutions (desk-research according to disparities observed, in-depth individual and groups discussions with women survivors of custodial violence)*
- 1.1.2. *Formulating and distributing policy brief to policy-makers about violence against women with disabilities in custodial institutions*
- 1.1.3. *Publishing report on the research findings*
- 1.1.4. *Conference on violence against women with disabilities in custodial institutions*
- 1.1.5. *Targeted meetings with policy-makers (advocacy activities)*

Output 1.2. Procedures for ending violence against women with disabilities in custodial institutions are made available to inform policy-making;

Activities for output 1.2.

- 1.2.1. *Legal and policy analysis and recommendations on measures for protection of violence women in custodial institutions are exposed to proposed by the Expert group*
- 1.2.2. *Formulation of Guidelines for ending violence against women with disabilities in custodial institutions*
- 1.2.3. *Publishing guidelines*
- 1.2.4. *Hearing by the Parliamentary committees*
- 1.2.5. *Advocacy activities (sending statements, releases, policy briefs, submissions to human rights treaty bodies (CRC, CRPD, CEDAW))*

Output 1.3. NGOs and National Preventive Mechanism for torture who conduct monitoring and reporting improve knowledge about rights and specific forms of custodial violence women with disabilities are exposed to custodial institutions.

Activities for output 1.3.

- 1.3.1. *Two-day training for members of NPM and human rights organizations about monitoring human rights of women with disabilities in custodial institutions*
- 1.3.2. *Monitoring visits to custodial institutions as part of NPM*
- 1.3.3. *Written submissions to reports of NGOs on human rights in Serbia*

Outcome 2: Women with disabilities survivors of custodial violence know their rights and have improved access to services by December 2017.

Output 2.1. Women with disabilities participating in the project activities have better knowledge and accessible information about available mechanisms for protection against violence.

Activities for output 2.1.

- 2.1.1. *Preparation of info guides about available support mechanisms for women who have experienced custodial violence*
- 2.1.2. *Dissemination of written material about available support mechanisms for women who have experienced custodial violence*
- 2.1.3. *Direct support to women in filing complaints and use reaction measures*
- 2.1.4. *Building capacities of women to form self-support groups*

Output 2.2. Service providers participating in training programs are informed and have better knowledge about specific position and forms of violence against women with disabilities in custodial institutions.

Activities for output 2.2.

2.2.1. Four two-day trainings for service providers and social workers about the scope of violence against women with disabilities

2.2.2. Follow-up consultative activities with service providers participating in the project activities on developing disability-specific protection measure

2.2.6. Description of targeted primary and secondary beneficiaries as well as key implementing partners and stakeholders

Primary beneficiaries of the project were women and girls with disabilities, especially those with intellectual, cognitive, and psychosocial disabilities of very low socio-economic status who reside in custodial and psychiatric institutions (in urban and rural areas) in the Republic of Serbia. Total target # of primary beneficiaries: 100.

Secondary beneficiaries were 40 civil society organizations (Disabled Persons Organizations – DPOs, mainstream human rights organizations, service providers, women’s organizations), 40 social workers, 10 Government officials (decision-makers, policy implementers), and 50 Parliamentarians. Total target # of secondary beneficiaries: 140.

2.2.7. Key assumptions of the project

In Serbia, there is no comprehensive analysis of the situation of women with disabilities who are placed in residential institutions, and this project is also an initiative for further research, studies, and discussions on this topic. At the same time, we want to contribute to existing international research that shows that women with disabilities in institutions are victims of intersectional discrimination and that they are at greater risk of surviving physical, emotional, and sexual violence from employees and other users. Their situation and exposure to violence is not visible or recognized in public policies in Serbia. MDRI-S work on this project is an effort to emphasize the need to urgently work on deinstitutionalization in Serbia, ensure adequate and sustainable services in the local community, and create conditions for women and girls with disabilities to have the choice and right to decide on their life.

The project team had assumed the position of women with disabilities in custodial institutions is very difficult and that it is not visible and recognised at all. Women with disabilities in custodial institutions are subjected to higher risk of abuse and violence on the part of other residents as well as members of staff (this includes the violation of privacy, acts of restraint, undressing, isolation, rape, forcible abortion or sterilization). In Serbia, before this project implementation, there were no comprehensive, disaggregated and reliable data on the position of and violence against women with disabilities in custodial institutions. It was assumed that in custodial institutions, right to privacy is often highly disregarded and people lack individual spaces where they can engage in intimate behavior.

Serbia has ratified most UN human rights instruments and several national laws were adopted in recent years in line with the country's international obligations. However, the project team assumed human rights oversight and enforcement mechanisms do not respond to the needs of this particularly vulnerable group, while on the other hand, service providers lack capacity and knowledge to support women with disabilities victims of violence in custodial institutions; that service providers (state-run and civil society organizations – shelters, psychological support, helpline, group counselling, legal aid, etc.) lack sufficient information and knowledge, but also empowerment, to support women with mental disabilities. They do not fully comprehend the concepts of accessibility and availability, especially for women from marginalized social groups. Service providers might also lack capacity in terms of expert staff (staff usually works on voluntary basis), financial capacity, organizational.

Policy-makers do not show interest in DI process and they also do not put enough importance of gender equality, especially equality of women from marginalized groups. Recommendations from international human rights treaty bodies are not perceived as opportunity to improve overall policy and practice, but as an obligation that has been imposed on the government. Current institutional framework in Serbia lacks capacity for comprehending, planning, and implementing activities to protect women with disabilities from GBV, harmonize legislation with international standards, and introduce protection mechanisms.

The patriarchal and stereotyped roles of men and women in Serbia negatively affect already difficult position of women with disabilities. They are discriminated in all areas of public and private life. They are invisible in public life, encounter obstacles to education, health and social protection; they are poorer and more often unemployed than men with disabilities, they are victims of psychological, physical, sexual, economic, and institutional violence, and there are stereotypes and prejudices related to their gender roles, especially regarding marital and family relationships and parenting. Women with intellectual, cognitive or psychosocial disabilities are in additionally vulnerable situation and at higher risk of violence, especially if they are in closed institutions. Their statements about the experiences of violence are questioned, they are not believed, and are often assumed to be unaware of the violence they suffer, or that they cannot recognize it.¹⁴

2.2.8. Key implementing partners and stakeholders

There were no official partners to the project, but key partners were Protector of Citizens (National preventive mechanism for torture), organizations supporting persons with disabilities (especially supported living service), and self-advocacy groups of persons with disabilities. MDRI-S cooperated with different independent experts and consultants in gender-based violence, rights of women with disabilities, and with civil society organizations working on these issues in Serbia.

2.2.9. Budget and expenditure of the project

Estimated total project budget was USD 131,874, while the funding from The UN Trust Fund to End Violence against Women was USD 105,630. The MDRI-S contribution was USD 26,244.

¹⁴ This section is contribution of the MDRI-S project team, formulated by the Project Coordinator

2.3. Purpose and Objectives of the Evaluation

This is a mandatory final project evaluation required by the UN Trust Fund to End Violence against Women. It is also final evaluation of the MDRI-S program to deinstitutionalize and end violence against women with disabilities in custodial institutions in Serbia.

The evaluation results will be used by the UN Trust Fund to End violence against Women to assess the overall impact of the project. In addition, it will be used by MDRI-S management team in understanding the achieved outcomes, positive effects and aspects, and negative circumstances or side-effects. It will be used for planning the continuation of the program to deinstitutionalize and end violence against women with disabilities in custodial institutions in Serbia.

Evaluation results will support MDRI-S team in designing further activities and programs based on perspectives of primary and secondary beneficiaries. The project team will decide on strategy for advocacy and capacity building activities, especially in designing new training programs for women and disabilities and service providers.

Evaluation has covered the entire project duration (from January 2016 to January 2018). It has been focused on activities and impact in the region of Serbia, and has taken into account effects and success of international partnerships and international advocacy actions and their effects on the national program as well. The evaluation has covered the target primary and secondary beneficiaries as well as broader stakeholders, including key partners (Protector of Citizens/NPM, service providers of supported living) and selected external consultants/experts that took part in the project.

The overall objectives of the evaluation were to:

- d) evaluate the entire project in terms of effectiveness, relevance, efficiency, sustainability and impact, with a strong focus on assessing the results at the outcome and project goals;
- e) generate key lessons and identify promising practices for learning;
- f) identify prospective innovative approaches and strategies to end violence against women with disabilities in custodial institutions in Serbia.

Key challenges and limits of the evaluation

As a limitation in the planning and implementation of an external evaluation methodology, a short period of time available for the implementation of data collection and analysis was recognized. National holidays and low availability of representatives of national institutions and authorities have influenced efficiency in data collection. In realization of the focus group with service providers proposed by MDRI-S, due to the low response, additional interviews with service providers were conducted, by using guide for the focus group. Also, beside the interviews with 2 MPs, short questionnaire for the MPs was distributed but only president of one parliamentary committee filled it, so these responds had to be considered as representative for the group of parliamentarians who were targeted by the project.

Since the number of MPs who were directly targeted (were present on public hearings for example) is significantly lower than those targeted indirectly (distributed printed materials for example), the sample

of 3 MPs as approx 30% of those directly involved had to be considered as representative. If the evaluation had been conducted in another period of the year and longer period for data collecting had been possible, the accessibility of MPs and other government officials would be less challenging factor. Due to the above mentioned circumstances, the representativeness and reliability of data and relevance of conclusions based on information from these sources might be considered as field for additional confirmations/explorations.

3 Description of Evaluation Consultant

Tatjana Lazor Obradović, a special educator- rehabilitator and Master in Social Policy, was engaged for the realization of the external evaluation. Tatjana has expertise in the area of social protection, support to providers of services for people with disabilities, and she is well aware of the context in which the project takes place at the national, provincial (AP Vojvodina) and local level. In addition, she has experience in project cycle methodology and monitoring and evaluation, including projects funded by The UNTF.

As only member of the project evaluation team, she conducted all external evaluation activities and procedures:

1. Evaluation design and overall management of the project evaluation
2. Technical input and preparation of all technical reports (inception report, and evaluation report)
3. Design of the external evaluation instruments
4. Consultation with the project team in all stages of the process of evaluation
5. Desk research
6. Conducting in-depth interviews and focus groups
7. Data analysis

Brief description of the work plan

| Activities | Deadlines |
|---|-------------------|
| <ul style="list-style-type: none"> ▪ Consultations with project team members ▪ Analysis of the project and other relevant documentation | 31.12.2017. |
| <ul style="list-style-type: none"> ▪ Preparation and presentation of the Draft Inception Report ▪ Feedback on the Draft Inception Report ▪ Finalizing Inception report with final methodology plan | 03-15.01. 2018 |
| <ul style="list-style-type: none"> ▪ Focus group with service providers ▪ Interview with project team members | 22.01.2018. |
| <ul style="list-style-type: none"> ▪ Group interview with women with disabilities | 23.01.2018. |
| <ul style="list-style-type: none"> ▪ Individual in depth interviews with project stakeholders | 23.01-31.01. |
| <ul style="list-style-type: none"> ▪ Preparation of the Draft External Evaluation Report | 15.02.2018. |
| <ul style="list-style-type: none"> ▪ Feedback on Draft External Evaluation Report | 20.02.2018 |
| <ul style="list-style-type: none"> ▪ Finalizing and submitting Final External Evaluation Report | 26.02.2018. |

4 Evaluation Questions

Effectiveness

- 1) To what extent were the intended project goal, outcomes and outputs achieved and how?
- 2) To what extent did the project reach the targeted beneficiaries at the project goal and outcome levels? How many beneficiaries have been reached?
- 3) To what extent has this project generated positive changes in the lives of targeted (and untargeted) women and girls in relation to the specific forms of violence addressed by this project? Why? What are the key changes in the lives of those women and/or girls? Please describe those changes.
- 4) What internal and external factors contributed to the achievement and/or failure of the intended project goal, outcomes and outputs? How?
- 5) To what extent was the project successful in advocating for legal or policy change? Explain why.
- 6) To what extent was the project successful in motivating service providers to widen their programs and support women with disabilities?

Relevance

- 1) To what extent was the project strategy and activities implemented relevant in responding to the needs of women and girls with disabilities in custodial institutions?
- 2) To what extent do achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls with disabilities in custodial institutions?

Efficiency

How efficiently and timely has this project been implemented and managed in accordance with the Project Document?

Sustainability

How are the achieved results, especially the positive changes generated by the project in the lives of women and girls at the project goal level, going to be sustained after this project ends?

Impact

What are the unintended consequences (positive and negative) resulted from the project?

Knowledge Generation

- 1) What are the key lessons learned that can be shared with other practitioners on Ending Violence against Women and Girls?
- 2) Are there any promising practices? If yes, what are they and how can these promising practices be replicated in other projects and/or in other countries that have similar interventions?

5 Evaluation Design and Methodology

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| <p>Description of evaluation design</p> | <p>Evaluation methodology involved process and outcome evaluation design adjusted for a small grant. The evaluation design included pre and post-test without control group, having in mind that most of the baseline data were obtained and provided by MDRI-S. The process of evaluation was realized by combination of content analysis and field work:</p> <ol style="list-style-type: none"> 1) Document review 2) In depth group and individual interviews 3) Focus group 4) Survey <p>In addition to these, consultations with the MDRI-S and secondary beneficiaries was conducted in order to validate collected data.</p> <p>The data analysis included confirmation of findings across different sources (triangulation). The content analysis was conducted in order to establish basis for evaluation report on the project relevance, qualitative and quantitative data on its outputs and outcomes as well as on efficiency. The findings from the analysis were compared to the data collected by field work.</p> <p>The key questions that needed to be answered by this evaluation were divided into five categories of analysis. The five overall evaluation criteria – relevance, effectiveness, efficiency, sustainability and impact - were applied for this evaluation. The evaluator applied interviews and focus groups with the project team, primary beneficiaries and secondary beneficiaries, as well as questionnaire for secondary beneficiaries (service providers).¹⁵</p> <p>The majority of quantitative data were collected by document analysis due to the fact that there were available documents¹⁶ produced by the project team during the project, also from the external sources¹⁷. The qualitative data were collected also from the existing project documents, from evaluation questionnaire survey for service providers, interviews with representative of the parliament, interviews with government officials, interview with the project team and MDRI-S staff, interviews and focus</p> |
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¹⁵ Please refer to 9.6. Lists of respondents/participants in the evaluation process

¹⁶ Please refer to 9.7. List of supporting documents reviewed

¹⁷ Mainly for the purpose of the overall context presentation

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| | <p>group with service providers and interview with primary beneficiaries-women with disabilities. The field work and in-depth interviews were conducted in order to gain insight into stakeholder’s perspectives and opinions, attitudes and experiences in relation to the project and regarding key evaluation questions.</p> <p>Estimation of the level of precision and reliability of these data is high, since for most of them the source is MDRI-S, and for the evaluation questionnaire the level of precision and reliability should also be high since they were filled by the representatives of the service providers who were training participants. Data from the Republic Institute for Social Protection are based on the official annual reports of the 15 custodial institutions and are also estimated as medium to highly precise and reliable, since some of the data were presented in different manner from year to year¹⁸.</p> |
| <p>Data Sources</p> | <p><i>Quantitative data sources:</i></p> <ul style="list-style-type: none"> • The MDRI-S project proposal and project reports to The UNTF • MDRI-S Goal baseline data reports • MDRI-S training reports (4 trainings for service providers and 1 training for National Preventive Mechanism for Torture (NPM) representatives) • Data from the evaluation questionnaire for service providers • Reports of the Republic Institute for Social Protection <p><i>Qualitative data sources</i></p> <ul style="list-style-type: none"> • Group in-depth semi structured interviews with the members of the project team and MDRI-S staff • Group in-depth semi structured interviews with primary beneficiaries • Individual in-depth semi structured interviews with the representatives of the parliament, government officials and NPM • Focus group with service providers and additional in depth semi structured interviews with service providers • MDRI-S project reports • NPM and Protector of Citizens reports • Publications created as products of the project¹⁹ |

¹⁸ Data on number/percent of beneficiaries who leave institutions

¹⁹ Please refer to the Annex 9.7 „List of Supporting Documents Reviewed“

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| <p>Description of data collection methods and analysis</p> | <p>In the evaluation process, the following evaluation methods and techniques have been applied:</p> <ul style="list-style-type: none"> - Content analysis (overview of program documents and records, review of administrative data). The analysis was applied mainly in order to provide information, statistics and other data on the project strategy, relevance, project results (realized activities and achieved short-term results) and project efficiency. - Focus group with service providers. The focus group was applied to provide information and insight into the opinions of secondary beneficiaries about project performance, project sustainability and its effects on beneficiaries. The focus group was also meant to be an instrument for understanding the potential impact of the project on the community as a whole. - In-depth interviews with government officials, members of the Parliament, external consultant, project team members and MDRI-S staff, and service providers. Semi-structures interviews were used to provide an insight into the perspective of the project's stakeholders on project results, sustainability and impact, as well as to provide recommendations for continuing activities aimed at protecting women with disabilities from violence in custodial institutions and in general the protection of women with disabilities from violence. <p>-In addition to the interviews and focus group, a questionnaire survey for service providers who participated MDRI-S trainings was created in order to measure the changes in their attitudes/behaviors and practices and compare to the baseline data on services available for women with disabilities in custodial institutions.</p> <p>Also, a questionnaire for members of the Parliament was additionally created in order to collect more quantitative data on the effects of the public hearings that MDRI-S conducted for the members of the Parliament. Since this questionnaire was filled only by the president of the Parliamentary Committee for Human and Minority Rights and Gender Equality on behalf of the whole Committee, this response was not enough for quantitative analysis but having in mind the credibility of the person who responded, provided qualitative information on the perspective of MPs.</p> <p>In order to deliver the results of the evaluation, special attention was paid to identifying and presenting lessons learned and examples of good practice.</p> <p>Codes used for the qualitative data analysis included:</p> <ol style="list-style-type: none"> 1) Knowledge about the project |
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| | <ol style="list-style-type: none"> 2) Assessment of project relevance for women with disabilities in custodial institutions 3) The current situation regarding the availability of protection services 4) Assessment of the impact, benefits and / or obstacles for women with disabilities related to the acquisition of benefits from the project and project results 5) Get recommendations for increasing the accessibility and availability of services for women from vulnerable groups 6) Project activities in which they were involved and assessment of their effects 7) Assessment of the current situation regarding violence against women with disabilities in custodial institutions at the national / potentially provincial²⁰ level 8) Current situation regarding violence against women with disabilities in custodial institutions at the national / provincial level 9) Changes in the quality of life of women with disabilities at the individual level (as far as possible) 10) Efficiency of the project (management and coordination, mechanisms for monitoring, resources) 11) Recommendations <p>These codes were used according to the group of respondents, not all were asked each question). The details on which code was used for which group can be seen in the Annex 9.5 “Data Collection instruments”</p> <p>The evaluation process was participatory: MDRI-S and donor were consulted and involved in the planning stage. In the realization stage, beside MDRI-S, project primary and secondary beneficiaries were involved, in focus groups, in-depth interviews and survey.</p> <p>The methods of evaluation</p> <p><i>The focus group</i> was implemented with service providers who were involved in training and involved in other project activities. From this group of actors, representatives of CSOs of persons with disabilities, women's CSOs, CSOs that are generally dealing with human rights, and then custodial institutions will be represented. Number of targeted users was:</p> |
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²⁰ Provincial level: the level of the Autonomous Province of Vojvodina, northern region of the Republic of Serbia with 2 million population and provincial government.

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| | <p>7-9. Due to the low response of service providers (only 3), additional 5 persons, representatives of 3 service providers, were interviewed.</p> <p><i>In-depth interviews with representatives of different target groups.</i></p> <p>There were two types of interviews: groups interviews and individual interviews.</p> <p>Group semi-structured interviews with women with disabilities involved in the program through various activities. Total number of women included: 13. Interviews should have provided an understanding of the benefits of these women from the project and the obstacles they had in making better use of the project results.</p> <p>Group semi-structured interviews with project team members and MDRI-S staff (5) in order to get a comprehensive overview of project results at all levels, including the management component.</p> <p>Individual interviews</p> <p>The interviews were conducted with secondary beneficiaries groups in order to overview the attitudes and opinions of the key stakeholders on the relevance, effects, sustainability and impact of the project, as well as recommendations for continuing activities aimed at combating violence against women with disabilities in custodial institutions. They involved:</p> <ul style="list-style-type: none"> • external consultants engaged on a project that will give both an external and an internal perspective both in terms of the effects of specific project activities on user groups and in terms of policy impact: 2 • representative of NPM mechanism - 1 • representatives of key public institutions – Coordination body for Gender equality, The Office for Human and Minority Rights • representatives of the Parliament - 3 <p>Good practice examples can refer to the approaches implemented by the project leader in strengthening the capacities of women with disabilities, strengthening the capacity of service providers, linking different stakeholders, approaches in public advocacy, and introducing innovative elements into existing practices.</p> |
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Description of sampling

The sample for the evaluation was chosen in cooperation with MDRI-S, and concrete representatives of particular secondary beneficiary's group's were proposed by the MDRI-s. In case of the evaluation questionnaire for service providers the only criteria was participation on the MDRI-S trainings. Territorial criteria was not of relevance in case of selection of the sample since the project itself didn't use this criteria in defining target groups.

Focus group participants were targeted in order to include both, civil society and public sector service providers. The concrete participants of the focus group were delegated by their managers. Additional interviews in order to get more quality information from service providers were conducted with individuals who were proposed by the MDRI-S project team. As for the social workers, since they belong to the service provider's organizations/institutions, 3 social workers who were interviewed are considered as representatives of 2 secondary beneficiary's groups: service providers and social workers.

The government officials who were directly contacted and with whom MDRI-S had more intensive communication were selected and proposed to be involved in the interview, baring in mind that they have information about the project. Among members of the parliament, 5 of them were directly involved in communication with MDRI-S and had information about the project and 2 interviewees were selected from his group. One MP filled the questionnaire on behalf of the Parliamentary Committee for Labor, Social Affairs, Social Inclusion and Poverty Reduction, as not being able to devote time for the interview. Others were one-time participants on presentations held during the project (public hearings, other public events).

The group interview with women with disabilities was organized in two locations, in Čurug and in Belgrade. Among 13 women, 12 of them live in supported living: 4 of them in Čurug where the service is provided by the custodial institution from which they left, and 8 of them live in Belgrade in supported living provided by CSO Association for Promotion of Inclusion. One women lives in custodial institution in Čurug. The sample of women was created on proposal of MDRI-S and the main criteria was that women were directly involved in some of the project activities.

| The group | Criteria |
|-------------------------------------|---|
| Interview with government officials | <ul style="list-style-type: none"> • Knowledge on the project • Had direct communication with MDRI-S team |

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| | | <ul style="list-style-type: none"> • Participated in project activities (conference, presentation etc) • For the member of NPM: employed with NPM |
| | Interview with members of the parliament | <ul style="list-style-type: none"> • Knowledge on the project • Had direct cooperation with MDRI-S team/preferably active role in preparation and realization of events in the parliament • Participated in public hearings |
| | Focus group with service providers | <ul style="list-style-type: none"> • Participated on MDRI-S training • Motivated for future cooperation • CSO representatives • Public sector representatives |
| | Interviews with women with disabilities in custodial institutions | <ul style="list-style-type: none"> • Was interviewed for the baseline • Involved in the capacity building workshops • Participated trainings for the service providers |
| | External consultants | <ul style="list-style-type: none"> • Involved in key project activities: survey, preparation of publications |
| <p>According to the structure and number of targeted primary and secondary beneficiaries, the structure of the evaluation sample was selected, in cooperation with MDRI-S project team:</p> <p><u>Primary beneficiaries sample:</u></p> <ul style="list-style-type: none"> • The 13 women with disabilities were interviewed, which makes 11,82% of the total number of reached primary beneficiaries (110), but 13% of total targeted number and 32,5% of those who were directly involved in the project activities <p><u>Secondary beneficiaries</u></p> <ul style="list-style-type: none"> • 18 organizations/institutions-service providers (12 respondents to the evaluation questionnaire, 3 interviewed and 3 participants of the focus group) with 20 individuals who represented them, which makes 18% from the total reached number of organizations and 23% of total reached number of individuals | | |

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| | <ul style="list-style-type: none"> • 3 members of the Parliament which makes 3,8 % of total number of directly and indirectly²¹ reached MPs but 60% of those who were directly reached. • 3 government officials – 6,7 % of all people who were directly or indirectly reached by project activities • 1 NPM member – 20% of NPM employees²² or 5,5% of NPM training participants |
| <p>Description of ethical considerations in evaluation</p> | <p>During her work, the evaluator:</p> <ul style="list-style-type: none"> • <i>took efforts to guarantee the safety of the respondents and her own safety.</i> The interviews with stakeholders and especially primary beneficiaries were appointed by MDRI-S staff, the meetings were held in safe environment in terms of physical safety: the interview with project team members and MDRI-S staff as well as the focus group with service providers was held in premises of MDRI-S in Belgrade, additional interview with service providers in Novi Sad was held in the office of the service provider, and the other one in the office of local partner organization. The group interviews with primary beneficiaries were held in the apartments in which they live: one in Čurug and one in Belgrade. The interviews with primary beneficiaries didn't contain any private data requests, and were based on questions which were to collect data on their common experience and knowledge that they gained during workshops and other project activities, so that they could discuss among themselves during the interview. They were fully informed about the nature and purpose of the evaluation by MDRI-S and evaluator. Interviews with other stakeholders were held via telephone or Skype, according to their preferences. • <i>implemented protocols to ensure anonymity and confidentiality for respondents.</i> The evaluator developed protocols for interviews and focus groups (please refer to Annex 9.5), and in preparing interview with primary beneficiaries the document developed by MDRI-S during the project Interviewing women with disabilities in custodial institutions or having the experience of institutionalization was consulted. Women with disabilities who were interviewed signed the letters of consent by which they approved the recording of the interview. The lists of participants in focus groups and interviews with project team and MDRI-S staff as well as service which were made as source of verification are safely stored in the archive of the evaluator and will be submitted to the MDRI-S upon the final report |

²¹ According to the inputs from the Project Coordinator, not all MPs were present on public hearings but were distributed printed materials and informed by MPs who were in direct contact with MDRI-S

²² The NPM office employees 5 persons, and the training for NPM members involved civil society organizations who are joined partners of the NPM. The interview was conducted with the employee of the NPM in order to get relevant information on key project activities in which NPM was involved

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| | <p>on evaluation is completed. All the participants in the process of evaluation were clearly informed that their names and personal data will not be published in any of materials that will be presented to public, and that they will be represented by their roles/functions (such as “representative of...”).</p> <ul style="list-style-type: none"> • <i>ensured that evaluation procedures take place in accordance with national regulations</i> – The evaluator signed contract with MDRI-S by which obliged to conduct activities in accordance to the ToR requests, and requests of the contract which is in line with national regulations. All data collected during the evaluation process were marked by codes, safely stored in the evaluators computer which is protected by password, has legal software and is used only by evaluator. The meetings which were recorded (focus group with primary beneficiaries, interview with the project team and MDRI-S staff, and one interview with primary beneficiaries) were recorded upon their approval, and recorded materials were erased after the transcripts of interviews were produced. |
| <p>Limitations to the methodology used</p> | <p>As a limitation in the planning and implementation of an external evaluation methodology, a short period of time available for the implementation of data collection and analysis was recognized. National holidays and low availability of representatives of national institutions and authorities have influenced efficiency in data collection. In realization of the focus group with service providers proposed by MDRI-S, due to the low response, additional interviews with service providers were conducted, by using guide for the focus group. Also, beside the interviews with 2 MPs, short questionnaire for the MPs was distributed but only president of one parliamentary committee filled it, so these responds had to be considered as representative for the group of parliamentarians who were targeted by the project.</p> <p>Since the number of MPs who were directly targeted (were present on public hearings for example) is significantly lower that those targeted indirectly (distributed printed materials for example), the sample of 3 MPs as approx 30% of those directly involved had to be considered as representative. If the evaluation had been conducted in another period of the year and longer period for data collecting had been possible, the accessibility of MPs and other government officials would be less challenging factor. Due to the above mentioned circumstances, the representativeness and reliability of data and relevance of conclusions based on information from these sources might be considered as field for additional confirmations/explorations.</p> |

6 Findings and Analysis per Evaluation Question

| Evaluation Criteria | Effectiveness |
|--|---|
| Evaluation Question 1 | To what extent were the intended project goal, outcomes and outputs achieved and how? |
| Response to the evaluation question with analysis of key findings by the evaluation team | <p>Project Goal: Women and girls with disabilities in custodial institutions (custodial and psychiatric) in Serbia experience greater support for their right to live a life free of violence and have access to services by December 2017.</p> <p>Indicator 1: <i>Perspectives of women and girls with disabilities in custodial institutions about availability and accessibility of mechanisms for protection from custodial violence</i></p> <p>Two group interviews with 13 women with disabilities were held. Among them, 12 women live in supported living service provided by 2 service providers (one NGO and one custodial institution), and one of them lives in custodial institution. The data in baseline study are presented in qualitative manner, and according to the baseline, there were no data on availability and accessibility of services for women and girls with disabilities placed in custodial institutions before this project was initiated. Baseline study highlighted low or complete lack of knowledge on protection mechanisms and procedures and services.²³ Women and girls with disabilities in custodial institutions and women who have experience of living in custodial institutions (who are now living in supported living facilities) interviewed during evaluation (10 women), thanks to the workshops they attended during the project, claim that they now know what forms of</p> |

²³ The baseline study was conducted in the second half of 2016 and the report was made on the basis of 13 individuals, semi-structured interviews with women with disabilities living in institutions or having a history of institutionalization and group interviews with women in three custodial institutions in Serbia. No woman they talked to had heard of an internal team to prevent violence. MDRI-S researchers either did not see any public information on the internal violence prevention team in any of the institutions they visited. The conclusions of the baseline study. Due to the inaccessible mechanisms for protection against violence outside the custodial institution, as well as the non-functional internal mechanism, women with disabilities in institutions are at greater risk of violence, and violence remains invisible. All women say that they have never talked to anyone about violence in the institution, how to protect themselves or react when violence occurs. Some of them mention the names of caregivers with whom they are close, but there is an evident absence of any organized approach to this topic in form of an individual or group discussion. Information about protection depends on a good relationship with employees or on personal ability to manage in this environment.

violence they were exposed to, that they have right to address service providers and that they are likely to contact professionals (social workers employed by service provider) in cases of violence.

During evaluation interview, 2 interviewed women said that they would address MDRI-S in cases of violence, since they know persons from MDRI-S. Three of them showed printed materials they got from MDRI-S (information about protection mechanisms-whom to address, CRPD text) and said that they have read the headlines, looked at the pictures and are familiar with the content. The 4 of them can list the protection mechanisms that are available to them, and all of them put service coordinator as the trusted person on the first place, then social workers (in centers for social work), police, protector of citizens. As for the internal protection mechanisms (inside institution) one woman who lives in institution said that she would contact her social worker in institution first. Asked if they communicated with other women in their environment (supported living facilities) about the knowledge on violence and protection mechanisms they gained or shared printed materials, among 13 interviewed women. 2 of them openly claimed that they did not, 1 woman who still lives within custodial institution also said that she did not talk about the prevention/protection from violence with her friends.

According to the MDRI-S final project report, based on 13 baseline interviews, and another 5 women whose views were collected in the last 6 months of the project duration, there is also complete lack of accessible mechanisms for protection and reaction to GBV in custodial institutions. The 3 professionals employed in 2 custodial institutions²⁴ who were interviewed during evaluation said that they are in process of changes of internal procedures for protection from violence; in one institution the list with contacts of internal team for protection from violence was put on the public place to be visible by beneficiaries, and both of the institutions started to redesign their rulebooks for procedures in cases of incident situations. According to data from the Republic Institute for Social Protection²⁵ there were only 6 reported cases of violence

²⁴ It is important to note that service providers who were interviewed (described in the methodology section) are civil society organizations who provide general community based services for women victims of violence, but also professionals who are employed in custodial institutions. Among them, there are 3 professionals who were interviewed as providers of the supported living service, and this service is provided by custodial institutions. According to the law on social protection in the Republic of Serbia, custodial institutions established by the government can also provide community based services, and during the previous period (last 4 years) there were national projects implemented within which service of supported living was initiated by custodial institutions as part of the process of transformation of custodial institutions. Therefore, 3 professionals who were interviewed and who are employees in custodial institutions, at the same time are providers of supported living service for women with disabilities. Five women with disabilities who were interviewed during the evaluation process and who were involved in project activities as primary beneficiaries use the supported living service provided by one custodial institution.

²⁵ „The Annual Report on the Work of Social Protection Institutions for Persons with Mental, Intellectual, Physical and Sensorial Disabilities for 2016“ Republic Institute for Social Protection, Belgrade, 2017 <http://www.zavodsz.gov.rs/PDF/izvestaj2017/IT%202016..pdf>

in custodial institutions in Serbia, all cases were reports of violence among beneficiaries, none about violence conducted by staff. The data for 2017. have not been issued yet. Interviewed women (13 of them) during evaluation did not claim any case of violence or situation that they needed to address any protection mechanism. But, one of them who is member of the self-advocacy group formed within Association for Promotion of Inclusion, said: *“ If I reported violence and no one responded within my service provider, I would go further...to the police, to my social worker, to the protector of citizens...before, we could not make decisions for ourselves, and now we can.”*

Also, one of the women interviewed in Čurug told that after the workshop she initiated and insisted that the names and contact list of the members of internal team for protection of violence should be exposed on visible place in the institution, so that everybody can see whom to address in case of violence.

Indicator 2: Number and type of services available to women and girls with disabilities placed in custodial institutions.

Base-line study conducted by MDRI-S with 23 CSOs-service providers showed that none of the service providers reported women with disabilities addressed them for custodial violence. 120 women with disabilities used psychological and legal aid services, but the number might be higher because disability is not recorded as a personal characteristic. Only one organization said that it provided support to a woman with disabilities placed in local institution.

By the end of the project, 3 CSOs reported concrete initiatives in adjusting their services for women. According to the project reports, two service providers decided to create programs to support women with mental disabilities who survive custodial violence. Based on evaluation questionnaire with 13 service providers and focus group and interviews with representatives of 6 service providers²⁶, one NGO involved 10 women into their psychological workshops, one NGO informed their beneficiaries that they can refer their women relatives to this organization if a woman live in custodial institution, and one NGO created plan together with custodial institution to adjust their psychological counselling service, SOS hot line and gynecological examinations for women who live in custodial institution. By the end of the project, only 1 of these organizations actually provided service to women in custodial institution, and 2 are in the process of adjustment.

Outcome 1: Authorities improve policies (procedures, protocols, guidelines, etc.) to protect rights of women with disabilities from custodial violence by December 2017.

Indicator 1.1: Number and type of policy provisions (provincial, national, sectoral level)

²⁶ Among them 2 custodial institutions

having reference to protection from violence of women with disabilities in custodial institutions (by the end of project)

The outcome of document review and interviews with relevant stakeholders (policy makers, external project consultants and project team) indicated that there were 2 policy provisions that resulted directly from the project implementation. On the other hand, having in mind that the issue that the project put on the public agenda is completely new for policy makers, that violence against women with disabilities in custodial institutions was not visible at all not only in national but also international framework, all interviewed individuals highly agree that these results are of high importance for further advocacy initiatives:

MDRI-S gave comments and amendments during the process of public debate on the content of the National strategy for improving position of people with disabilities adopted in 2017 with action plan, as well as in process of adoption of the Criminal Code:

1. Adopted changes of the Criminal Code: provision for "Sexual intercourse with a helpless persons" - the prison sentence equated with criminal act of "rape."
2. Draft National Strategy on Improving the Position of Persons with Disabilities by 2020 and accompanied Action Plan has important references in line with CRPD, CEDAW, and CAT

Beside these, the Law on preventing domestic Violence was adopted in 2017– although it does not have specific reference to women with disabilities in custodial institutions, but it will improve protection of these women. Draft Law on Gender equality has a reference to women with disabilities and women exposed to multiple discrimination (section GBV); it is not adopted yet²⁷.

Indicator 1.2: Types of provisions in new/revised policies are in compliance with CRPD and CEDAW

1. Adopted changes of the Criminal Code: provision for "Sexual intercourse with a helpless persons" - the prison sentence equated with criminal act of "rape." - changes are now in line with the CRPD.
2. Draft National Strategy on Improving the Position of Persons with Disabilities by 2020 and accompanied Action Plan has important references in line with CRPD, CEDAW, and CAT but operational goals and measures are still too general.

These documents (the second one not adopted) refer to women with disabilities but not particularly to women with disabilities in custodial institutions neither violence against them. The Criminal Code (national legislation) has changed and previously, so-called "sexual intercourse with helpless person" was a criminal act with lower prison punishment than criminal act of rape, but the amended legislation now provisions the

²⁷ From The Final Project Report, MDRI-S, December 2017

same prison punishment for these two criminal acts. Although MDRI-S advocated that rape of a woman with disabilities be provisioned as qualified rape with higher prison sentence, this amendment was not approved. As for the National Strategy on Improving Position of Persons with Disabilities by 2020, Draft Action plan has two important measures: 1) mainstreaming gender in disability policies, and 2) protection from violence, abuse, and exploitation. MDRI-S find these references as important but not operationalized enough and without concrete implications on the position of women with disabilities in custodial institutions.

Output 1.1. . Policy-makers are better informed about forms of violence women with disabilities are facing in custodial institutions

Indicator 1.1.1. Number of policy-makers exposed to project activities on human rights and forms of violence against women with disabilities in custodial institutions

According to the documents reviewed during the external evaluation, and given by interviewed persons (MP, consultants, project team), there are 78 parliamentarians and 45 government officials of policy makers that were exposed to the project activities: National Office for Human and Minority Rights, Ministry for Labor, Employment, Veterans and Social Affairs, Ministry of Justice, Republic Institute for Social Protection, Provincial Institute for Social Protection, Protector of Citizens (including NPM), Commissioner for Equality of the RS, MPs-members of the Parliamentary committee for human and minority rights and gender equality; and Parliamentary committee for labor, social affairs, social inclusion and poverty reduction, Social Inclusion and Poverty Reduction Unit (SIPRU). The NPM representatives were directly involved in the project activities (monitoring visits), one conference²⁸ organized by MDRI-S and 1 training organized by MDRI-S. The government officials were involved as participants on one MDRI-S conference, 5 trainings organized by MDRI. Among 78 MPs, 5 of them were directly involved by providing support in organizing public hearings in the parliamentary committees, participating on MDRI-S conference, others were present as audience during presentations in the parliament.²⁹

Based on the interview with the project donor representative³⁰, MDRI has delivered what they committed: *"...they have brought voice of women with disabilities to eyes and ears of decision makers-amazing success concerning the context they are operating, especially women in institutions are voiceless. We definitely consider this project as great achievement in voicing concerns and bringing perspective of women with disabilities to the places that it is questionable if it whether ever happen"*.

²⁸ Conference "Protecting women with mental disabilities from violence" for policy-makers, governmental bodies, and international organizations; Belgrade, 20 June 2017

²⁹ Since these events were hosted by the parliamentary committees: Committee on Labor, Social Affairs, Social Inclusion and Poverty Reduction, and Committee on Human and Minority Rights and Gender Equality

³⁰ The UNTF Portfolio Manager

Indicator 1.1.2. Number and type of responses received from policy-makers

There were 10 policy responses from policy makers, according to the MDRI-S reports: Response from Office For Human and Minority Rights (on forced treatments), Commissioner for Protection of Equality and Ministry of Justice (on changes of Criminal Code), Protector of Citizens and National Preventive Mechanism for Torture (on monitoring gender-based violence in custodial institutions, publishing report on this issue), commitment from Coordination body for gender equality (involved in the conference organized by MDRI-S, and according to the interview provided by 1 representative of the Coordination body, they highly acknowledge MDRI_S project initiative and want to involve in follow up activities), Commissioner for Protection of Equality and Ministry of Justice (support in submitting amendments for Criminal Code), Parliamentary Committee for Human and Minority Rights and Gender Equality and Parliamentary Committee for Labor, Social Affairs, Social Inclusion and Poverty Reduction (support in organization of public hearings in the parliament), for keeping VaW with disabilities on the agenda and cooperating in the following period, and contact (but not yet commitment) with Parliamentary Committee on Health and Family.

It has to be emphasized that, by the end of the project implementation, MDRI-S provided 2 reports on the position of women and girls in custodial institutions and their exposure to custodial violence (please see footnote references on this page), as first of this kind in the RS, but also wider at international level. The approach that was chosen, to give qualitative and not only statistics overview, was highly appreciated and recognized by all interviewed and questioned persons during the evaluation process. MDRI-S organized 1 event³¹ and used 6 other occasions to present two reports: "Here, the Walls Have Ears Too"³² and "Violence Against Women with Disabilities in Custodial Institutions-Base Line Study"³³.

Beside that, the MDRI-S addressed number of national and international bodies by policy documents. All these activities resulted with some concrete and less concrete but not less important reactions.

Establishing basis for advocacy by providing clear and data based information, the chance for changing in attitudes of policy makers is high. This approach appears to be highly relevant in sensitization of policy makers to whom the issue of custodial violence against women with disabilities was absolutely invisible before the project started. Therefore, the commitment given by the Office for Human and Minority Rights was direct result from the project activities. Although representatives of the Office gave very short response to the external evaluator (*saying that they don't have enough knowledge on the overall project but they acknowledge its high importance,*

³¹ Conference "Protecting women with mental disabilities from violence" for policy-makers, governmental bodies, and international organizations; Belgrade, 20 June 2017

³² <https://www.mdri-s.org/wp-content/uploads/2018/02/Publikacija-ingleski.pdf>

³³ <https://www.mdri-s.org/wp-content/uploads/2018/01/Istrazivanje-knjizni-blok.pdf>

relevance and potential for further development) it is clear that they have high respect to the MDRI-S initiative by this project.

Two parliamentary committees mentioned above directly supported MDRI-S by formulating amendments to the Criminal Code based on MDRI-S recommendations and argumentation. One MP (who is woman with disability) presented the project before the National Assembly and elaborated their amendments to the Criminal Code. The amendment related to the need to widen the definition of "rape" in accordance with Istanbul Convention was adopted, and the other - having "rape of a woman with disabilities" as a qualified criminal act with higher prison sentence was not adopted. Women's Parliamentary Group was also approached and informed, but by the end of the project implementation did not respond. According to the evaluation interview with MP who concretely supported MDRI-S in this process, there is also a Parliamentarian group for empowerment of people with disabilities within the Parliament which was established as part of an previous USAID project, but this group is not operational. The one of the interviewed MP believes that MDRI-S could try to activate this group and that this might have positive effect on MDRI-S advocacy efforts.

³⁴

Output 1.2. Procedures for ending violence against women with disabilities in custodial institutions are made available to inform policy-making;

Indicator 1.2.1. Existence of Guidelines for protection from violence against women with disabilities in custodial institutions

In the December 2017, the "Guidelines for protection from violence against women with disabilities in custodial institutions" were finalized by external expert engaged by the project.

Indicator 1.2.2. Status of the Guidelines

The "Guidelines for protection from violence against women with disabilities in custodial institutions" are uploaded on MDRI-S web site by the end of February 2018 and available on <https://www.mdri-s.org/wp-content/uploads/2018/02/Smernice-knjizni-blok.pdf>

³⁴ The interviewed MP did not have more information about this project, but on the web site of the USAID it can be viewed general information about their project, among them projects with aim to strengthen accountability of key democratic institutions. The Serbian version of the web-news gives more information, including initiative to strengthen the ability to oversee the work of the Parliament, as well as the participation of young politicians, women and members of minorities in the work of the Parliament. Serbian version: <https://www.usaid.gov/sr/serbia/democracy-human-rights-and-governance>. English version: <https://www.usaid.gov/serbia/democracy-human-rights-and-governance>

Output 1.3. NGOs and National Preventive Mechanism for torture who conduct monitoring and reporting improve knowledge about rights and specific forms of custodial violence women with disabilities are exposed to custodial institutions.

Indicator 1.3.1. % of training participants who report better understanding and knowledge about the rights and specific forms of VaW with disabilities in custodial institutions

The MDRI-S delivered 4 trainings for 73 representatives of service providers and 1 training for the 18 NPM representatives.

The service providers were: civil society organizations (women organizations, organizations of people with disabilities, basic human rights organizations), public institutions (custodial institutions).

The NPM representatives were: employees in the office of the NPM department of the Protector of Citizens, and representatives of the CSOs who are partners of the NPM.

| Trainings for service providers | | | | | |
|---------------------------------|----------------|-----------------------------------|-----------------------------------|---------------------------|----------------------------|
| | Date | # of Participants 1 ³⁵ | # of Participants 2 ³⁶ | # of pre-test respondents | # of post-test respondents |
| 1 | 28-29.11.2016. | / ³⁷ | 17 | 17 | 13 |
| 2 | 24-25.04.2017 | 28 | 22 | 22 | 23 |
| 3 | 29-30.06.2017. | 27 | 17 | 20 | 18 |
| 4 | 14-15.12.2017. | 29 | 17 | 13 | 14 |
| | Total | / | 73 | 72 | 68 |

There were 72 pre-training evaluation forms, and 68 post-training evaluation forms filled by service providers-training participants.

Pre-training evaluation forms of service providers show that training participants generally support claims that women with disabilities in institutions are more exposed to specific forms of violence, due to the fact that they are institutionalized (83,45% of respondents), while post-training evaluation shows increase in the understanding of this issue: 92,76% of respondents.³⁸

In pre-training evaluation, 64,43% of respondents don't agree that women with disabilities are equally exposed to the violence as man with disabilities which shows

³⁵ Training participants including trainers, organizers, women with disabilities, translators, photographer, trainees.

³⁶ Training participants: only trainees

³⁷ No data in the training report

³⁸ This question was evaluated for 59/54 respondents since the question analysis was not included in the training report 4

significant level of awareness on the risk/fact of gender related violence, and after the training this percent increased to 88,33% which can be directly related to the results of the training.

Before the training, 85,5% of training participants think that human rights of PwDs in Serbia are generally respected. Post-training evaluation showed that there was no significant improvement in the attitude towards respect of human rights of PwDs in Serbia: almost equal percent of participants think that human rights of PwDs are generally respected: 85%.

The training made slight effect to their attitudes toward risk of violence that women with disabilities face with, in comparison to women without disabilities: in both (pre-training and post training) evaluation forms the percent's of confirming answers was high: 91,5% (pre-training) and 94,5% (post-training).

Upon the training, 86% of training participants who responded the evaluation questions claimed that they are completely clear about position of women with disabilities in institutions, but also, 82% of the emphasized that they need additional education on providing services for women with disabilities.

According to the evaluation survey (8 persons interviewed and/or being part of the focus groups and 12 responses to the questionnaire sent to trained service providers), it was clear that all respondents have understanding of specific forms of violence that women with disabilities in custodial institutions are exposed to and they highly appreciate the training but also other MDRI-S project activities that put this issue on the public agenda. On the other hand, they again emphasized need for further support and training in order to improve their services. More elaboration on their needs can be found in section on the motivation of service providers to improve/develop their services.

| Training for NPM | | | | |
|------------------|---------------------|---------------------|---------------------------|----------------------------|
| Date | # of Participants 1 | # of Participants 2 | # of pre-test respondents | # of post-test respondents |
| 15-16.12.2016. | 28 | 18 | 18 | 16 |

When it comes to the members of NPM, participants of the training held in December 2016, the results of the evaluation show following figures:

Pre training forms were filled by 18 participants and post training 16 of them. At the beginning of the training, only 78% of NPM members, training participants agreed that women with disabilities are in higher risk from violence comparing to women without

disabilities. After the training, all of them, 100% acknowledged that fact.

Following statements were also offered to them:

- Human rights of PwDs in Serbia are generally respected: percent of participants who don't agree with this decreased from 78% before training to 63% after the training, while percent of those who are uncertain increased from 22% on 31%.

MDRI-S team emphasized that this post-training result on uncertainty/lack of attitude towards respect of human rights of PwDs was worrying, especially the fact that 6% of NPM participants kept the attitude that human rights of PwDs in Serbia are respected, even after the training was conducted.

- Women with disabilities are in better social position than men with disabilities: the percent of those who didn't agree with this statement before training 72% increased to 94%.
- Women with disabilities are exposed to the same level of violence as men with disabilities statement was not agreed by 50% of NPM participants before the training, and 60% of them after the training. Still, high percent of them showed "worrying lack of awareness on gender aspect in this issue."³⁹
- Women with disabilities are in lower risk of sexual violence than women without disability: before training 67% didn't agree, and after the training 93%
- Women with disabilities in custodial institutions are exposed to specific forms of violence, due to the fact that they are institutionalized: before training 62% agreed, and after the training 71% agreed, which is slight improvement. After the training even 29% of NPM training participants still didn't agree with this statement.

Also, the NPM training participants showed lack of acknowledgement of deinstitutionalization as priority: after the training even 27% of them was unsecure on this, and 6% of them agreed. The percent of those without attitude is the space for further work with NPM on their sensitization.

Indicator 1.3.2. Number and type of NGO/NPM reports having reference to violence in custodial institutions

Total # according to the MDRI-S project reports: 8

- 2 individual opinions of NPM for particular custodial institutions; reference in the annual report of Protector of Citizens⁴⁰,

³⁹ Quoted from the training report „Deinstitutionalize and End Violence against Women with Disabilities in Custodial Institutions” held for NPM members 15-16.12.2016.

⁴⁰ http://www.ombudsman.rs/attachments/article/5191/Introduction_2016%20Annual%20Report.pdf

- reference in Human Rights in Serbia 2016 report of Belgrade Centre for Human Rights⁴¹, and
- 4 individual opinions and recommendations for 4 custodial institutions about violence issued by NPM (the reports from the visits to Institution for adults with intellectual disabilities Othon in Stara Moravica⁴², Institution for adults and elderly “Gvozden Jovančičević” in Veliki Popovac⁴³, Institution for adults Kulina⁴⁴, Institution for persons with sight disabilities “Zbrinjavanje” in Pančevo⁴⁵).

Indicator 1.3.3. Number and type of recommendations issued by the NPM

NPM had specific reference to GBV in 2 custodial institutions (individual reports on institutions) - one about administration of contraceptives without consent (see footnote reference 17, page 12-13), one about prohibiting isolation of women (see footnote reference 18, page 34). There is also one report/reference to transformation of the institution Othon⁴⁶ where grave violation of rights was recognized. The report contains 17 conclusions with concrete recommendations that refer to violation of the rights of persons placed in the institution; related to health protection rights, isolation and restraints, right to privacy etc.

The interview with 1 representative of the NPM confirmed finding that NPM did not consider that they should produce separate report with specific reference to GBV against women with disabilities in custodial institutions. The NPM representative claimed that individual reports produced on monitoring visits in institutions are the products they committed to deliver within cooperation with the MDRI-S.

Outcome 2 Women with disabilities survivors of custodial violence know their rights and have improved access to services by December 2017.

Indicator 2.1: Number of women with disabilities who filed a complaint to authoritative institution/body on prevention from violence

Zero

According to the findings from the document review but also from interviews with project team members, women with disabilities and staff in custodial institutions who were training participants, knowing about being exposed to violence, and about

⁴¹ <http://www.bgcentar.org.rs/bgcentar/wp-content/uploads/2013/04/Ljudska-prava-u-Srbiji-2016.pdf>

⁴² <http://npm.rs/attachments/article/712/Dom%20Otthon%20final.pdf>

⁴³ <http://npm.rs/attachments/article/676/Izvestaj%20Dom%20V.%20%20Popovac.pdf>

⁴⁴ <http://npm.rs/attachments/article/675/Izvestaj%20Dom%20Kulina%203.pdf>

⁴⁵ Report on monitoring visit to Institution for persons with disabilities “Zbrinjavanje” in Pančevo conducted in November 2016: <http://npm.rs/attachments/article/677/Izvestaj%20Dom%20Zbrinjavanje%20Pancevo.pdf>

Report on monitoring visit to Institution for adult persons with disabilities in Kulina conducted in July 2016: <http://npm.rs/attachments/article/675/Izvestaj%20Dom%20Kulina%203.pdf>

⁴⁶ <http://npm.rs/attachments/article/712/Dom%20Otthon%20final.pdf>

existence of prevention and protection mechanisms is insufficient to motivate women with disabilities to fill the complaints. Women with disabilities themselves claim to have trust in MDRI-S and more likely to contact them or known service providers or even social workers in institutions in situations of violence, then existing authoritative bodies/institutions. The project team acknowledged this issue during the project implementation and concluded that this indicator was too ambitious in this stage of empowerment but also advocacy for prevention and protection of women with disabilities against custodial violence. This intervention was relevant to the context and timely communicated with donor. Having in mind that preventive mechanisms are not available and accessible enough to women with disabilities in custodial institutions, there is still need to work more on this issue in order to sensitize responsible bodies and institutions, align with pressures on institutions themselves to develop internal preventive procedures, but also to work further on empowerment of women through direct work with them.

It has to be noted here that during the interview with social worker from the institution for persons with mental disabilities in Čurug, evaluator got information that, after the MDRI-S capacity building workshop in which 6 women from this institution were involved, there was one report on the violence perpetrated by an employee, but this case was not successfully resolved due to the fact that the violence had happened much earlier (several years ago) and that there were no adequate willingness/capacities within the institution to consistently work on processing this report. But, this example, according to the interviewee, is good illustration on how information and education of women can contribute to their empowerment and on the other hand, how there is need to put more pressure on institutions/service providers to improve their complaint procedures and make them available and accessible for women with disabilities.

Indicator 2.2: Number and type of services provided to women with disabilities by service providers participating in the project

In total, 1 new service was provided, and 4 initiatives/plans for development of new services were created:

- OUT OF CIRCLE BELGRADE organization involved 10 women with disabilities in custodial institution in Belgrade into the three-month cycle of their psychological workshops for women with disabilities in custodial institution in Belgrade, and they did the workshops in the facilities of the institution due to the lack of transport possibilities. Also, they provided psychological counselling for 1 woman with disability from the custodial institution in Belgrade.
- ...OUT OF CIRCLE VOJVODINA is one of the service providers that took concrete measures: The representatives of this organization attended MDRI-S training twice, and the made concrete plan by the end of the training

| | |
|--|---|
| | <p>sessions together with women with disabilities and staff employed in institution in Čurug. They agreed to work on adaptation of their SOS service for women victims of violence by informing women in institution about the existence of the SOS hotline and types of services they can provide for them. Also, they agreed with the institution staff to allocate one laptop on a private place in the institution in order to open online connection available for women with disabilities who could contact the via Skype, but also to ensure that women can contact them via phone. This organization pointed out that they concluded through direct contact with women with disabilities who were involved in the project that they, beside support as victims of violence, need psychological support in situation when they have other problems (for example, one women lost close family member and was in crisis for months-she needed psychological support and counselling in order to process her feelings related to the lost she experienced). Therefore, they agreed with the institution staff that the provide transport of women with disabilities to the facilities of OUT OF CIRCLE Vojvodina in order to involve them in face to face counselling services. So far, the institution in Čurug took women with disabilities to the local health center in municipality of Žabalj but they were not satisfied by the quality of health service. Since OUT OF CIRCLE VOJVODINA organizes gynecological examinations, they also agreed to provide preventive examinations in Novi Sad health center, and the transport will be provided by the institution. At last, but not least, this organization made concrete plan with timelines on organization od education workshops with the institution staff about. They also took small information campaign on their web portal, by publishing two articles about the topics that MDRI-S project put on the agenda.</p> <ul style="list-style-type: none"> • One service provider (NGO “Jeleče”) took steps to inform public in their municipality, especially their existing service users, to motivate them to address organization if they have women relatives who are placed in institutions. • The employees in institution in Čurug who were involved in training for service providers claimed that they initiated process of analysis of their own procedures in the institution and that they will work on the improvement of procedures for prevention and protection of women with disabilities from violence. The also initiated horizontal learning among staff in their institutions. Since these individuals have established two local CSOs, during interviews they gave to the external evaluator, they are terminated to work on both sides: as CSOs working on advocacy for deinstitutionalization and within institutions with their beneficiaries and colleagues. • Representative of institution in Stara Moravica (Othon) claim that they initiated reorganization of the system of procedures for prevention of violence, and they decentralized the work of the professional team in a way |
|--|---|

that each pavilion has dedicated team of staff members to talk with beneficiaries about violence but also all other needs of their beneficiaries. She also claimed that they made available and transparent information on contacts of the internal team for prevention of violence for beneficiaries.

The project coordinator also said that one organization, Autonomous Women's Centre from Belgrade (one of the organizations who were involved in baseline study and informed about the project, but not involved in the training for service providers) contacted them in order to consult on adjusting service of support to women victims of family violence (mother and daughter, both of them are women with disabilities). These two women are not placed in custodial institution, but project Coordinator said that this is good sign that organization which provide services for women victims of violence didn't refer women who addressed them to a "specialized" organization or institution, but put efforts to adjust their approach to women with disabilities.

Output 2.1. Women with disabilities participating in the project activities have better knowledge and accessible information about available mechanisms for protection against violence.

Indicator 2.1.1. Number of women participating in the project exposed to information about the protection measures

According to the project reports, in total 110 women with disabilities were exposed to information about the protection measures: 13 women were informed directly during interviews for the purpose of the baseline study together with women involved in 3 group interviews (around 30 of them in total according to the project coordinator), 21 women were involved in the workshops on GBV protection mechanisms and in the workshops in which they discussed about content of the easy-to read and easy-to-understand materials, 6 women were involved in trainings for service providers and presentations, and approx. 70 women were informed about GBV and protection mechanisms via service providers (MDRI-S distributed printed materials about violence and protection mechanisms via employees in custodial institutions). Since some of these women were involved in more than one activity, the total sum of primary beneficiaries is not simple addition of individual figures, but the total number is calculated from the project reports.

Indicator 2.1.2. Perspectives of women participating in the project about available mechanisms.

According to the baseline study conducted in 2016 with 13 women with disabilities in custodial institutions, they were completely unaware on protection mechanisms that should be available for them.

Evaluation interview with the 2 groups of women with disabilities in custodial institutions was conducted in January - February 2018, with 5 women. The first group

of 5 women are beneficiaries of the custodial institution which provides supported living at the same time: 4 of them are living in supported living facilities and one of them is still living in the institution. The second group of 8 women live in supported living facilities provided by CSO. According to the data given by women, 3 of them were involved in the interviews conducted for the purpose of the baseline study. All of 13 women were involved in MDRI-S workshops on violence against women with disabilities, and 4 of them were involved in workshops on adjusting printed materials on VAW in custodial institutions into easy-to-read format. Among these 13 women, 6 of them know which are protection mechanisms available to them in cases of violence (they listed employees of their service provider, center for social work, police, Protector of citizens) and they have read the printed materials distributed by MDRI-S. Two women listed only social worker who works in their institution (one of these women is living in institution and another is in supported living facility provided by the same institution). In comparison to the baseline data, the knowledge of 8 women (who were interviewed by evaluator) on the existence of protection mechanisms has been increased. Namely, they know that they can address social/welfare workers in their service provider, they know that there are people in national institutions that are obliged to provide support to them.

Since material which was distributed to 70 women in custodial institutions was distributed indirectly, via employees in these institutions, it is difficult to assess the perspectives of these women. There are no concrete data on their names, and the situation of women who still live in custodial institutions and effects of this project on their position is difficult to measure.

Output 2.2. Service providers participating in training programs are informed and have better knowledge about specific position and forms of violence against women with disabilities in custodial institutions.

Indicator 2.2.1 % of service providers who participated at the training have better knowledge about disability-specific measures

Please refer to elaboration of the indicator 1.3.1. and in addition it can be emphasized that according to the training reports 80% of training participants claimed to be more informed and have better understanding on specific position of women in custodial institutions comparing to the position of other women with disabilities and PwDs in general. Also, the number of those who believe that PwDs should not be placed in institutions increased by 13,5%.

According to the evaluation survey with service providers - training participants, 100% of respondents to the questionnaire claimed that there is high awareness on specific measures needed to be taken in order to prevent and protect women with disabilities from gender based and custodial violence: the training effect was still strong in January

2018 when they responded about their impressions and changes in their knowledge. The most permanent insights and knowledge reported in questionnaires were:

- Knowledge on various and specific forms of violence that women with disabilities in custodial institutions are exposed to, inhuman living conditions
- Awareness on absence of deinstitutionalization process in our country, as well as absence of power, political will of the system to protect women with disabilities in custodial institutions from violence.
- The fact that, even when women with disabilities in custodial institutions recognize their exposure to violence, they have no access to support and protection
- Insight into the fact on the level of ignorance among policy makers'/government officials, service providers and public in general about the situation of women with disabilities in custodial institutions.

According to the interview with the project team and MDRI-S staff, service providers who participated training were shocked by presentation on the position of women with disabilities in custodial institution. Among participants there were also staff employed by custodial institutions, and 3 of them (social workers) were interviewed during evaluation. All 3 of them claimed that the training provided them with insight in how high level of violence is present in institutions. One person said that, before the training, she was never looking at beneficiaries from the gender perspective, and that she is sure that other staff members in her institutions were the same, and that they lack gender aspect in their approach to persons who live in the institutions they are employed in. One social worker said: *"It was like I woke up from a dream in which something I thought was normal was actually grave violence...I was shocked by insights I got during the training, about the nature and level of gender based violence in custodial institutions...what happened during the training-everybody was attacking me and I think it is important to sit together and talk about how we can help together..."*

Indicator 2.2.2. Number and type of programs developed for women with disabilities

Please refer to elaboration of Outcome Indicator 2.2:

One organization developed and provided concrete service (psychological workshops with 10 women with physical disabilities in custodial institution in Belgrade and individual psychological counselling for one woman who lives in the same institution).

Four service providers (one CSO and 2 custodial institutions) made concrete plan and preparatory activities to improve/develop programs for women with mental disabilities in custodial institutions, and one CSO shared information among their service users to address them if they have relatives – women with disabilities in custodial institutions.

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| | <p>Indicator 2.2.3. Number of women survivors of custodial violence using newly-developed service</p> <p>11 by one service provider, 21 by MDRI-S:</p> <p>The representative of OUT OF CIRCLE BELGRADE (CSO that participated training for service providers) informed evaluator⁴⁷ that they developed a new program (3-months cycle of psychological workshops) for 10 women with disabilities placed in custodial institution in Belgrade (Bežanijska kosa) into the Also, 1 woman from the same custodial institution was coming to the individual psychological counselling into the OUT OF CIRCLE BELGRADE facilities but stopped because of the lack of transport.</p> <p>According to the MDRI-S report, 21 women used empowerment workshops provided by MDRI-S. This service was provided by MDRI-S during the project.</p> |
| <p>Quantitative and/or qualitative evidence gathered by the evaluation team to support the response and analysis above</p> | <p>Qualitative Evidence</p> <p>The analysis of project documents and products provided by the project team: project progress and interim reports, final project report, training reports, goal baseline analysis data, project publications. Analysis of data provided by participants in evaluation process: focus groups, interviews and questionnaires.</p> <p>Quantitative evidence:</p> <p>13 interviewed women with disabilities, 72 pre-training and 68 post-training respondents, 8 persons representatives of service providers interviewed and/or being part of the focus groups and 12 responses to the questionnaire sent to trained service provider</p> |
| <p>Conclusions</p> | <p>It can be concluded that the project outcomes and outputs were achieved to the great extent: the project brought the perspective of women with disabilities to the table of decision makers, made it visible to those who can transfer it into the institutional change. Based on data collected from stakeholders (secondary beneficiaries and donor) MDRI-S did excellent work in collecting and presenting voice of women with disabilities in an ethical manner, safe manner and manner that respect their dignity and rights. The project goal has been partially achieved, mainly due to the fact that ambitious project plan and external factors contributed to the obstacles in obtaining changes in policies and protection mechanisms. On the other hand, having in mind long-term character of the goal, it is expected that follow up effects will contribute to the achievement of the goal.</p> <p>The project reached more than targeted number of primary and secondary beneficiaries by implementing planned activities. In total, 115 primary beneficiaries were reached by information and capacity building activities, and 332 of secondary beneficiaries were reached by advocacy and capacity building activities.</p> |

⁴⁷ In evaluation questionnaire distributed to service providers who participated training and additional clarification interview conducted with one representative of the organization

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| | The project has brought changes in lives of primary beneficiaries who were <u>directly involved</u> in the project activities. Their perspective has changed in comparison to the base-line data when complete lack of awareness on protection mechanisms was found: they are aware on protection mechanisms, know whom to address although need more capacity building in order to take concrete steps and use protection mechanisms. They are willing to work further on bringing their voice closer to policy makers, service providers and to the wider public. |
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| Evaluation Criteria | Effectiveness | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|---------------------------|----------------------|-------------|-------------------------------------|-------------------------------------|---------------------------|----------------------|-------------------------------|--|-----|-----|-----|----------------------------------|--|--|------------|------------|---|--------------------------------|----|--|-----|-------------------------------|--|--|----|--|--|----|--|----|------------------|--|----|--|----|------------------------|--|----|--|----|------------------------------------|--|------------|----------|------------|
| Evaluation Question 2 | To what extent did the project reach the targeted beneficiaries at the project goal and outcome levels? How many beneficiaries have been reached? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Response to the evaluation question with analysis of key findings by the evaluation team | <p>The project has reached the planned beneficiaries in terms of numbers.</p> <table border="1"> <thead> <tr> <th colspan="2" rowspan="2">Beneficiary group</th> <th rowspan="2">Target data</th> <th colspan="2">The number of beneficiaries reached</th> </tr> <tr> <th>At the project goal level</th> <th>At the outcome level</th> </tr> </thead> <tbody> <tr> <td colspan="2">Women/girls with disabilities</td> <td>100</td> <td>115</td> <td>110</td> </tr> <tr> <td colspan="2">Primary Beneficiary Total</td> <td></td> <td>115</td> <td>110</td> </tr> <tr> <td rowspan="2">Civil society organizations(including NGOs)</td> <td>Number of institutions reached</td> <td>40</td> <td></td> <td>100</td> </tr> <tr> <td>Number of individuals reached</td> <td></td> <td></td> <td>86</td> </tr> <tr> <td colspan="2">Government officials (i.e. decision makers, policy implementers)</td> <td>10</td> <td></td> <td>45</td> </tr> <tr> <td colspan="2">Parliamentarians</td> <td>50</td> <td></td> <td>78</td> </tr> <tr> <td colspan="2">Social/welfare workers</td> <td>40</td> <td></td> <td>23</td> </tr> <tr> <td colspan="2">Secondary Beneficiary Total</td> <td>140</td> <td>0</td> <td>332</td> </tr> </tbody> </table> | Beneficiary group | | Target data | The number of beneficiaries reached | | At the project goal level | At the outcome level | Women/girls with disabilities | | 100 | 115 | 110 | Primary Beneficiary Total | | | 115 | 110 | Civil society organizations(including NGOs) | Number of institutions reached | 40 | | 100 | Number of individuals reached | | | 86 | Government officials (i.e. decision makers, policy implementers) | | 10 | | 45 | Parliamentarians | | 50 | | 78 | Social/welfare workers | | 40 | | 23 | Secondary Beneficiary Total | | 140 | 0 | 332 |
| Beneficiary group | | | | | Target data | The number of beneficiaries reached | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | At the project goal level | At the outcome level | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Women/girls with disabilities | | 100 | 115 | 110 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Primary Beneficiary Total | | | 115 | 110 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Civil society organizations(including NGOs) | Number of institutions reached | 40 | | 100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Number of individuals reached | | | 86 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Government officials (i.e. decision makers, policy implementers) | | 10 | | 45 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Parliamentarians | | 50 | | 78 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Social/welfare workers | | 40 | | 23 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Secondary Beneficiary Total | | 140 | 0 | 332 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Quantitative and/or qualitative evidence gathered by the evaluation team to support the response and analysis above | <p>Quantitative data</p> <ul style="list-style-type: none"> 12 service provider’s questionnaires 13 interviewed women for the purpose of the case study 70 women with disabilities in custodial institutions whom printed materials were distributed to 21 women with disabilities participants of capacity building workshops, 6 women participants of trainings for service providers 73 participants, representatives of service providers 23 CSOs addressed for the purpose of the goal baseline study 18 NPM representatives - training participants | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| | <p>78 MPs reached by advocacy activities-public hearings, MDRI-S conference in June 2017</p> <p>45 government officials reached by advocacy activities- MDRI-S conference in June 2017, 5 other events organized by other organizations, targeted meetings, policy briefs etc. (according to the project reports and interview with project coordinator),</p> <p>Five MDRI-S project team and staff members interviews</p> <p>Five training reports reviewed</p> <p>23 social workers</p> <p>Qualitative data</p> <p>Review of the project reports, training reports, review of the baseline reports, interviews with project team and secondary beneficiaries, questionnaire for service providers</p> |
| Conclusions | <p>The total number of primary beneficiaries reached by the project is achieved in 115% (115 in comparison to targeted 100) at the goal level, and 110% at the outcome level, based on the MDRI-S project reports and evaluation qualitative and quantitative survey. Among these, 40-45 women were directly involved in the project activities (baseline interviews, workshops, trainings, etc.) while others (70) were reached indirectly by distributing printed materials on violence.</p> <p>The total number of secondary beneficiary's number was also reached, only the number of social workers was lower, mainly due to the fact that not only social workers are employed in service provider's organizations/institutions. Social welfare/protection workers group include social workers but also psychologists, pedagogues and other professionals from humanistic sciences. MDRI-S project coordinator confirmed in interview that they compensated this number by increased number of service providers who were involved in their trainings, so instead of 40 civil society organizations they reached 100. The number of government officials and MPs who were directly reached is lower than those who were indirectly involved, and the number of MPs is calculated from the project reports-there were no lists of participants during the form the events in the parliament so the number is approximation of the project team.</p> |

| Evaluation Criteria | Effectiveness |
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| Evaluation Question 4 | To what extent has this project generated positive changes in the lives of targeted (and untargeted) women and girls in relation to the specific forms of violence addressed by this project? Why? What are the key changes in the lives of those women and/or girls? Please describe those changes. |
| Response to the evaluation question | The project has produced changes in lives of women who were <u>directly involved</u> in the project activities. The comparison of base-line data (none of the women interviewed |

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| <p>with analysis of key findings by the evaluation team</p> | <p>were aware on protection mechanisms) and data gained from evaluation interviews (8 interviewed women clearly aware on protection mechanisms, and all of 13 of them declare that they would never return to the institution) clearly shows that at least 13 women in MDRI-S project have experienced positive changes in their lives, being empowered to communicate more competently about their experience of being victims of violence, recognizing forms of violence, sources of violence and protection mechanisms.</p> <p>According to the project reports, women with mental disabilities who have history of institutionalization or live currently in custodial institutions and who attended workshops on gender-based violence assessed workshops as very useful (7 of them have never attended workshop/training on violence before), because they could reflect on personal experience, use new knowledge to understand their situation better, and they listed realistic barriers and difficulties for protection against violence in custodial institutions.</p> <p>Also, during the evaluation interviews 7 of them reported that they are aware of the obligation of state and service providers to prevent and protect them from violence. However, they are not empowered to use these mechanisms, and need more capacity building in order to be able to address external mechanisms (police, protector of citizens etc.). During evaluation interview with 13 women with disabilities, they stated that they tend to address their social workers i.e. professionals who are employed in their service providers for any violence they recognize although procedures for prevention and protection from violence in institutions are not effective. 8 women who were interviewed in Belgrade are members of self advocacy group and 4 of them during evaluation interview said that they are able to speak about violence against women with disabilities in public and they want to share information they learned about violence and protection mechanisms with other women, and with professionals, and with wider public. They said that they find important to speak about supported living as well, because institutional placement is violence as well.</p> <p>All of them said that they want to continue cooperation with MDRI-S⁴⁸ and believe that these activities will contribute to the quality of their lives.</p> <p>According to the interviews with project team and MDRI-S staff (5 of them) and 2 consultants, involvement of women with disabilities in trainings for service providers gave them opportunity to speak for themselves and empowered them to speak about violence with professionals in their institutions and service providers in supported living. According to the project reports (training reports) 6 women with disabilities</p> |
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⁴⁸ All of them know the MDRI-S name and know the names of associates who directly worked with them during the project (mostly Maja and Marijana)

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| | <p>were involved in delivery of the training for service providers. They were given floor to present themselves, discuss with training participants about their experiences, although, according to the project assistant's and project coordinator's words from the evaluation interview, project team took care not to expose women with disabilities to the attention and questions that they are not obliged to answer (related to their privacy), but women were talking about their experience of living in institution in general. Also, 6 women with disabilities actively participated in parts of trainings when service providers were developing their plans to adjust services for women with disabilities in custodial institutions. During these trainings sessions, women with disabilities commented these plans, gave their comments and recommendations to service providers in terms what could and what could not work.</p> <p>In terms of quantity, it can be concluded that 21 (19,1%) of 110 women who were reached by the project at the level of outcome, experienced changes in their lives thanks to the project activities, and these are women who were involved in project workshops and trainings for service providers. The main changes are in the aspect of knowledge and attitudes (knowledge on violence, protection mechanisms, motivation to share knowledge, motivation to form self-support group, motivation to speak in public about violence, concrete ideas on needs for future activities), less in behavior (no complaints to protection mechanisms but spoke in public (in front of training participants)).</p> |
| <p>Quantitative and/or qualitative evidence gathered by the evaluation team to support the response and analysis above</p> | <p>Quantitative 13 interviewed women interviewed during evaluation process</p> <p>Qualitative: Analysis of project reports, interviews with the project team</p> |
| <p>Conclusions</p> | <p>The changes in lives of women with disabilities are visible on women who were directly involved in the project activities. The project has brought changes in lives of primary beneficiaries who were <u>directly involved</u> in the project activities. Their perspective has changed in comparison to the base-line data when complete lack of awareness on protection mechanisms was found: they are aware on protection mechanisms, know whom to address although need more capacity building in order to take concrete steps and use protection mechanisms. They are willing to work further on bringing their voice closer to policy makers, service providers and to the wider public.</p> <p>The changes in lives of other women who were not directly involved in the project activities (workshops, trainings) is difficult to discuss or measure. Interviewed women did not confirm that they shared their experience and knowledge gained on workshops with other women in their institution, or women with whom they share</p> |

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| | <p>living facilities in the supported living and who were not involved in the project. This could be a space for follow up activities with them, however, responsibility for multiplication of this knowledge should not be bared by women with disabilities but service providers and government. The effects of trainings with service providers who developed plans for services for women in custodial institutions, and also those who are employed in institutions who initiated changes in internal procedures and approach to women with disabilities who live in these institutions, could be seen as potential for positive changes of these women as well.</p> |
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| Evaluation Criteria | Effectiveness |
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| <p>Evaluation Question 5</p> | <p>What internal and external factors contributed to the achievement and/or failure of the intended project goal, outcomes and outputs? How?</p> |
| <p>Response to the evaluation question with analysis of key findings by the evaluation team</p> | <p>Following external and internal factors that contributed to the project are recognized during the process of external evaluation:</p> <ul style="list-style-type: none"> • Strong commitment and motivation of the project team and whole MDRI-S staff which was acknowledged by project stakeholders was important factor for the achievement of the project outcomes. In communication with all interviewed stakeholders, they said that MDRI-S staff was very dedicated to the project and that their commitment was recognized widely. • The MDRI-S initiative to put issue of custodial violence against women with disabilities brought to recognition of the project at international level and support from international actors contributed to the visibility of advocacy efforts. In interview with the project team the Executive Director mentioned that the project was presented in front of the UN officials and that, having in mind that the topic of violence against women in custodial institutions was rarely addressed globally, the project brought new topic on the international agenda. She even mentioned that MDRI-S project might have had influence on including women with disabilities as target group in The UNTF call for proposals that followed international presentation of the project. At the national level this innovation in terms of target group and topic of gender based violence in custodial institution is also emphasized by all interviewed MPs and government officials during evaluation: everybody confirmed that they have never thought about this topic before the project. • The approach chosen: to build strong evidence based basis for capacity building and advocacy initiatives highly contributed to the achievement of outcomes and outputs. The MDRI conducted research in the first stage of the project, and by the end of the project published and presented two reports |

on violence against women with disabilities in custodial institutions. The report “Here, the Walls Have Ears Too” are testimonies of women with disabilities who live or have experience of living in custodial institution and resulted from the interviews with women in custodial institutions during joint monitoring visits with NPM. As MDRI-S stated in foreword, this publication was published “...so that the voice of women with mental disabilities are heard outside of the institution’s walls”. By presenting these testimonies to 45 government officials, 87 parliamentarians, MDRI-S brought the voices of women with disabilities in custodial institutions in front of the policy makers. The second report, “Violence Against Women with Disabilities in Custodial Institutions-Base Line Study” has also brought data on the position of women with disabilities in custodial institutions. The aim of this study was to examine whether and to what extent are women with disabilities who are placed in custodial institutions protected from violence, through review and analysis of the international and national legal framework and public policies. In addition to the review of legal regulations, the research involved the analysis of available investigations, reports and studies in this area in order to better understand the position of women and girls with disabilities in custodial institutions, the difficulties they face during their life in the institution including their exposure to violence. The study was divided into four large components: violence against women; position of women with disabilities; violence in custodial institutions; and the gender aspect of violence in custodial institutions. This report was also presented to policy makers. In interviews with two MPs, member of the Coordination Body for Gender Equality during evaluation process, they claimed that data given by MDRI-S were completely new for them and that are important material for future initiatives in changing policies and practices. The representative of the Office for Human and Minority Rights said, in evaluation interview, the representative of the Office for Human and Minority Rights told that she consulted with the director and that they think this project is very serious and that presentation of the testimonies of women with disabilities left impression on her. In the long-term, this approach provides MDRI-S with basis for further successful advocacy activities.

- Formal and informal partnerships built during the project are also contributing factor, especially the partnership with NPM in conducting monitoring visits and commitment to producing joint report referring to situation of women in custodial institutions. The MDRI-S and NPM signed agreement on cooperation, by which MDRI-S was enabled to enter custodial institutions together with NPM; conduct monitoring visits and talk to women with disabilities who live there. If not being able to enter institutions, MDRI-S would lack direct contact with women who live in institutions, or at least they would have had to put much more efforts or go through complicated

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| | <p>bureaucratic procedures in order to get permissions to talk to women in custodial institutions. Informal partnership was established with API Serbia-Association for Promotion of Inclusion, civil society organization that provides supported living service for persons with intellectual disabilities in Belgrade for 14 years. MDRI-S established communication with them at the beginning of the project and approached the group of women who are members of self-advocacy group established by API Serbia. These women were included in baseline interviews, but also in capacity building workshops for primary beneficiaries and trainings for service providers. They also provided important inputs to MDRI-S in the process of creation of easy-to-read materials for women with disabilities.</p> <ul style="list-style-type: none"> • Involving women with disabilities who live/have experience of living in custodial institutions in trainings for service providers was one of the most effective strategies, in combination with producing separate report with testimonials of women highly contributed to the visibility of situation of women with disabilities in custodial institutions, and gender aspect of custodial violence. This factor is partially elaborated in previous paragraph (publication with testimonies). Involvement of women with disabilities in trainings for service providers gave opportunity for direct communication between them. As representatives of one of the CSO-s said during evaluation interviews; <i>“...This is one of the few trainings we have been talking about and thought about a lot when we came home. We got a new perspective, information about the life of women in institutions... It was precious to hear in live, it's not the same as reading. It opens up space to think of what we can do from our role, how to adjust our programs. We decided to go to twice to the training because the beneficiaries were not present on the first training. It was particularly useful to meet these women. At the level of the organization, we were trying to adjust the services before, but in practice we had minimum of women from custodial institutions among beneficiaries...we did not know how to make the services available, we always sit down and thought - we could do this or that...and this was the first time we were sitting with them and talking, for example, about how information can come to them. These are basic things - do you have a phone booth, cell phone... they do not have credit on their cell phone, they do not have a phone booth, they do not have privacy when they call ... then you make a plan with them how it's possible to really adapt the service”</i>. As most permanent impression from the training, according to the questionnaire filled by 13 service providers, the direct contact with women with disabilities was claimed by 6 (46%) of them), and other 7 (54%) wrote that it was specific position and violence they are exposed to. Among 13 respondents to questionnaire and 6 interviewed/participated in focus group, only 3 service providers told that they do not plans to work on adjusting their services for women with |
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| | <p>disabilities in custodial institutions. All others told that they do.</p> <ul style="list-style-type: none"> • The strong support provided by UN WOMEN Serbia and UNTF was recognized by MDRI-S team as important positive factor. The approach of The UNTF in terms of capacity building provided to MDRI-S empowered them and improved their managerial capacities. • Two MP-s had particular interest in the project and continually supported the MDRI-S project during the whole implementation. They are members of the Parliamentary Committee for Labor, Social Affairs, Social Inclusion and Poverty Reduction and they helped MDRI-S to organize public hearings in front of the other members of their committee, as well as of the Parliamentary Committee for Human and Minority Rights And Gender Equality; • Two custodial institutions that have been empowered through previous EU project⁴⁹ have opened more to the cooperation and their employees established civil society organization with mission to work on deinstitutionalization. These are institutions that provide supported living service as well. Their employees (5 of them) participated trainings for service providers conducted by MDRI-S. Three of them were interviewed during the evaluation. All of them said that after the trainings they initiated changes in their institutions in terms of changing procedures for protection of women against violence, but also they were motivated to work further at the community level in establishing and providing community based services for women through their newly established CSO-s <p>On the other hand, some external and internal factors had negative effect on the project achievements:</p> <ul style="list-style-type: none"> • The women with disabilities in custodial institutions as well as women who left institutions and now live in supported living facilities are still not empowered to use complaint mechanisms: either internal mechanisms within service providers organizations, nor existing mechanisms of independent institutions such are Protector of Citizens or Commissioner for Equality; they are afraid of consequences and on the other hand independent institutions procedures are not accessible to women with intellectual disabilities. By the end of the project there were no formal complaints by women with disabilities and MDRI-S took efforts to protect them from such consequences by changing their approach toward this issue, and decided to work further on developing alternative solutions in order to contribute in making the protection mechanisms available to women with disabilities. • High commitment and motivation of the project team, in combination with |
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⁴⁹ Open Arms, funded by EU: <https://europa.rs/eu-support-to-persons-with-mental-difficulties-2/?lang=en>

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| | <p>small number of the MDRI-S staff might have brought them to the risk of burnout. It was recognized during the interview with the project team members who were engaged part time on this project and also on other projects which were implemented at the same time.</p> |
| <p>Quantitative and/or qualitative evidence gathered by the evaluation team to support the response and analysis above</p> | <p>Quantitative: The questionnaire filled by 13 service providers, interview with 4 service providers, focus group with 3 service providers 5 service providers Interview with 2 MP-s Pre-training and post-training tests with 72 training participants Interview with 5 representatives of MDRI-s (project team and staff)</p> <p>Qualitative: analysis of the project and training reports, interview with project team members, interview with the donor representatives</p> |
| <p>Conclusions</p> | <p>MDRI-S team managed to utilize positive factors that were present in environment and combine them with their own approach in delivering project outputs and outcomes. The advocacy based on strong evidence produced in the first stage of the project by implementing baseline study and presenting situation of women with disabilities in custodial institutions was effective, especially due to the fact that this kind of evidence was presented to the public for the first time in the country. The lack of availability and accessibility of protection mechanisms influenced the achievement of the output related to the filling complaints, in terms that the MDRI-S team learned the lessons from the context and managed to adjust their approach, do no harm to primary beneficiaries and considered developing alternative solutions</p> |

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| <p>Evaluation Criteria</p> | <p>Effectiveness</p> |
| <p>Evaluation Question 6</p> | <p>To what extent was the project successful in advocating for legal or policy change? Explain why.</p> |
| <p>Response to the evaluation question with analysis of key findings by the evaluation team</p> | <p>The MDRI-S team, firstly, produced, as mentioned above, highly relevant and quality evidence based materials⁵⁰ as basis for competent and efficient advocacy. They recognized and addressed 45 government officials and 78 parliamentarians which is more than targeted.</p> <p>MDRI-S used both, national and international opportunities to put pressure on national policy makers, first by informing them about the problem and secondly, by presenting demands from them.</p> |

⁵⁰ They were already mentioned in previous chapters:

<https://www.mdri-s.org/wp-content/uploads/2018/01/Istrazivanje-knjizni-blok.pdf>

<https://www.mdri-s.org/wp-content/uploads/2018/02/Publikacija-engleski.pdf>

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| | <p>They took more important actions during the advocacy campaign:</p> <ul style="list-style-type: none"> ● submission to the European Commission related to Serbia's Progress Report 2017, ● participated at two meetings at the Delegation of the European Union to Serbia regarding pre-accession chapters 23 (Judiciary and fundamental Rights) and Chapter 19 (Social Policy), ● submission to Human Rights Council related to Serbia's Universal Period Review (3rd cycle) highlighting GBV in custodial institution, ● submission to Human Rights Committee in the event of review of Serbia's implementation of ICCPR, ● meeting with Special Rapporteur on Torture during his visit to Serbia and emphasized institutional violence perpetrated by the State against women with disabilities in custodial institutions, ● contact with Special Rapporteur for Persons with Disabilities, ● written submissions to reports of NGOs on human rights in Serbia (Belgrade Center for Human Rights, Helsinki Committee for Human Rights, Human Rights Watch, Amnesty International), ● organized public hearings in front of the Parliamentary Committee for Human and Minority Rights and Gender Equality; and Parliamentary Committee for Labor, Social Affairs, Social Inclusion and Poverty Reduction, and Committee for Health and Family, ● mobilized civil society organizations by organizing capacity building trainings, distributing information on the project activities and testimonies of women with disabilities to at least 100 civil society organizations, ● presence in media: on internet, TV and printed media <p>Activities implemented with/for MPs</p> <p>Changes of the Criminal code - https://www.mdri-s.org/press-releases/discrimination-against-women-with-disabilities-sexual-intercourse-with-a-helpless-person-or-rape/</p> <ol style="list-style-type: none"> 1. Submitting an initiative to the Constitutional Court to rule out that unequal prison punishment for the criminal act of rape and criminal act of sexual intercourse with helpless person, including women with disabilities (which was lower by the law); 2. Advocacy activities to follow: Initiative supported/endorsed by the Commissioner for Protection of Equality (we have a letter of support), several NGOs and individuals; 3. Advocacy and lobby to the National Parliament: initiative sent to Women's Parliamentary Network, and three MP groups (Democratic party, Movement Dosta je bilo, Social-democrat league of Vojvodina); communication |
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| | <p>continued with MP Ljupka Mihajlovska to write down amendments to the changes of the Criminal Code and present them before the Parliament at the session dedicated to the changes of this law; MP Marinika Tepic agreed to support the amendment;</p> <p>4. Approved/changed: prison punishments for both criminal acts are now the same;</p> <p>Advocacy for deinstitutionalization and prevention of violence against women with disabilities:</p> <p>Meeting/public hearing (in August 2017) with the Parliamentary Committee for human and minority rights and gender equality and Parliamentary Committee for labor, employment, social inclusion and poverty reduction. Not all members of the committees were present at the meeting, but the invitation and minutes were distributed to everyone. Besides MPs, other actors joined the meeting (representative of UN Women Serbia, representative of OHCHR Serbia); press release published on the National Parliament website⁵¹</p> <p>Follow-up of these activities: commitment to produce main findings and recommendations so that the committees can issue recommendations to the Government (reported by the project coordinator, and interviewed MPs)</p> <p>Advocacy for the changes of the Draft Law on medical aid – related to medical aid and medical experiments against persons deprived of legal capacity. Relevance for this project – our argument was that it is not allowed for legal guardian to decide on medical aid and medical experiments against persons under guardianship (contrary to human rights) and it puts women with disabilities under guardianship at higher risk of unwanted/forced administration of contraceptives (including IUDs).</p> <p>Initiative/intervention for supporting MDRI-S claims sent to the Committee for human and minority rights and gender equality;</p> <p>MDRI-S Executive director presented key recommendations before the Committee on Health and Family;</p> <p>According to the project team interview, interview with the donor representative and external experts interview as well as MPs but also based on the project reports, in terms of advocacy MDRI-S not only achieved what they committed but they went beyond. <i>“Despite the fact that they have experience, once they started mapping</i></p> |
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http://www.parlament.gov.rs/Omerovi%C4%87_istakao_neophodnost_multisektorske_saradnje_u_re%C5%A1av_anju_problema_osoba_sa_mentalnim_invaliditetom.32052.941.html

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| | <p><i>concerns on position of women with disabilities, they found out more perspectives, aspects and scope of the problem that they didn't assume</i>⁵²</p> <p>One of the MPs interviewed pointed out that stronger media campaign and visibility in front of the wider public could contribute to the pressures on the parliament but also that, in the future, intensive advocacy towards MPs from ruling parties, as well as executive government (ministries and relevant government bodies), could bring more positive effects in terms of policy changes. The pressure on the government to implement existing control and monitoring mechanisms (inspection for example) was also recommended by one MP, in order to initiate more concrete changes within custodial institutions. Also, the interviewed representative of the Office for Human and Minority Rights mentioned that contribution of the MDRI-S project could contribute to the future work of the Office in dealing with discrimination issues in regard to women with disabilities in custodial institutions.</p> |
| <p>Quantitative and/or qualitative evidence gathered by the evaluation team to support the response and analysis above</p> | <p>Quantitative: Interviews with 2 MPs, 2 external consultants, and 2 government official Analysis of 4 project reports</p> <p>Qualitative: Review of the MDRI-S reports, policy briefs, publications Interviews with project team, donor representative</p> |
| <p>Conclusions</p> | <p>The project successfully advocated for policy changes, however the results of the advocacy are not fully visible yet. The concrete success in terms of adopting/changing policies are related to already described Criminal Code and National Strategy for Improving position of People with Disabilities by 2020. Having in mind that MDRI-S opened completely new topic by this project, and brought completely invisible issue up to the public agenda, it is expected that full effects of this advocacy becomes visible in the following period, at least during next 3 years due to the fact that at least two years were needed for MDRI-S to put this topic on the agenda of the policy makers and that 2018 is a year when many policies are waiting for the revision/adoption (Law on Gender Equality, Family law, Social Protection Law etc). The main achievement of the advocacy, beside the changes in these policies is the fact that MDRI-S explored, collected and presented comprehensive issue of GBV against women with disabilities in custodial institutions in front of international and national stakeholders.</p> |

⁵² From interview with donor representative

| Evaluation Criteria | Effectiveness |
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| Evaluation Question 6 | To what extent was the project successful in motivating service providers to widen their programs and support women with disabilities? |
| Response to the evaluation question with analysis of key findings by the evaluation team | <p>MDRI-S project has motivated service providers to work on widening of their services and support women with disabilities.</p> <p>According to the evaluation questionnaire filled by 12 service providers, 10 of them claimed that they will work on the adjustment of their services or develop new services for women with disabilities in custodial institutions.</p> <p>One service provider⁵³ created concrete plan with participation of women with disabilities, and two custodial institutions representatives said during evaluation interviews that they initiated internal changes in their procedures on protection of women who live in institutions from violence.</p> <p>The motivation of the representatives of custodial institutions as service providers can be illustrated by their answers provided in questionnaires:</p> <ol style="list-style-type: none"> 1. Women's Centre Kikinda: <i>"In an organization where I am employed, there is no special program for working with women with disabilities, because very few women from this population address us. I believe that the reason for this is not only that there is no custodial institution in our city, but also insufficient information among women, inaccessibility of service, fear to ask for help Considering the capacity of our organization, at this moment we can provide service via SOS telephone and for this kind of work I feel sufficiently strengthened and informed, to a large extent thanks to the fact that I attended the MDRI training"</i>. 2. <i>"Since I am employed in the Home for persons with mental disabilities "Čurug", after the training we analyzed the situation in our institution and the possibilities for changes in the direction of greater protection of the beneficiaries against violence. We corrected certain regulations and began to react even to the least attempts of violence"</i>. 3. Out of Circle-Belgrade: <i>"We included a group of women with physical disabilities placed in a residential institution in the three-months cycle of psychological workshops"</i>. 4. NGO "Jeleče": <i>"As our association helps vulnerable groups, we have expanded our program to let relatives of women with disabilities who are placed in institutions and who are suffering violence, and advised them to consult with us on whom to contact and how to approach the problem. We as the association do not have access to the closest institution in which women with disabilities live..."</i> 5. <i>"My task as a representative of the "Oasis of safety" at this training was to convey my knowledge and impressions on this topic, which I am sure</i> |

⁵³ (OUT OF CIRCLE VOJVODINA-and it has been already described above)

contributed the sensitization of our associate and it will certainly affect the quality of our services delivery in the future”

6. *“The Legal clinic⁵⁴ still does not have direct contact with the victims of this type of violence, but students who attended MDRI-S training are striving to share the knowledge among other students and thus increase awareness on this problem.”*
7. *The home for persons with intellectual disabilities Othon: “Since I was the only one from this organization at the seminar, I tried to tell my colleagues everything that I heard and what impressed me. Furthermore, we tried to work with the beneficiaries through individual and group work, on identifying violence and developing mechanisms for signaling and prevention of violence. The plan is to change the internal team procedures in the institution and to further work with beneficiaries and employees.”*
8. *SOS Women’s Centre Novi Sad: “We have transferred experiences and information to other volunteers in our organization”.*

In addition to the questionnaires, representatives of the institution in Čurug as providers of the supported living service reported during the interview following: “We really started talking about this topic. So far, this was not a special topic. All of us have been shaken up by the the content of the training, the effects are very visible. We really started to work on changing the procedures in our institution: the rulebook on incident situations, the rules on complaints of beneficiaries’ and rulebook of the work of the internal expert team. The training made us aware of these topics, and also gave us the impression that we are not alone in everything, that we need to do some things ... Afterwards, it happened that we reported that there was physical violence in the institution by an employee for the first time... but this was report on violence that had happened a long time ago, it happened during night, there were no witnesses... we didn’t manage to complete the process. We did not like the fact that the person who was a victim had to go to a psychiatrist for a conversation, and the perpetrator was not. Our initiative was not to consult a psychiatrist every time, but we did not push it enough, and we will continue to work on it. Now, we we are working hard to empower beneficiaries to recognize and report violence. We conduct workshops with beneficiaries on the subject of violence, with women primarily. but something was started, and it's been started with employees. Before the MDRI-S training, we had some initiatives where there was physical violence by the beneficiaries, we called the police, and the policeman laughed and did not want to intervene, so this is the space where further work is needed, the cooperation with the police”.

One of the external consultants during the external evaluation interviews also said: “...From my perspective, I think yes, the information and motivation of organizations is improved...I do not know how objective am I now, because I was involved in the project itself. My impression is that my own knowledge and my awareness have increased, although I am close to this topic. But, there is increase of awareness on a wider scale,

⁵⁴ Legal clinic is the program of the Law Faculty at the University of Belgrade

the information about the project and about the research findings were shared via mailing lists especially among women organizations... What I personally did was that at the meeting of the Network of Women in Black, where 60-70 organizations and institutions from the region participated, I presented some findings from the MDRI-S research and I know that after that, a really big discussion has developed, that the majority declared that it was the first time encountered with this topic, with the fact there are such institutions at all, and such position of women with disabilities. I am in touch with different people from LGBT organizations and I talked to them about people who were marginalized in many ways, so I opened up these topics...I was in communication with one organization from Croatia, from Osijek...

I was contacted by an organization in Serbia that provides support to lesbians, and on their initiative, after the conversations we had on this topic, they called me to a meeting and we talked about how it might look like, the support for women who are lesbians and have intellectual disability ... so, somehow, they have seen this as a significant topic, but they are still not sure which way to go. But they are interested and open to go in that direction, want to learn, to go further in that direction."

All organizations that were involved in the evaluation process, however, pointed out that they need further stronger support in terms of education, mentor support, networking and share of best practices examples in order to improve their capacities and be more competent to provide services for women with disabilities in custodial institutions. Concretely, the answers of 12 service providers on question what would be needed to them as service providers show that they are not only elaborating their needs in order to improve their own services, but they also think wider, at the community, inter-sectoral level and policy level:

- *It is necessary to make the services accessible to all women with experience of violence. Women with disabilities should be encouraged to recognize and report violence, and this is not possible if at the same time no one works on increase the sensitivity of employees in custodial institutions (for example, to motivate them to work through workshops, trainings, through increasing the number of employees, etc.). In addition, employees in custodial institutions need continuous training and improvement on the topic of work with women with disabilities and their families*
- *Education, clear and applicable rules, an accelerated deinstitutionalization process*
- *Strengthening of human resources, financial sustainability of services, experience in working with women with intellectual disabilities, educational and informative workshops on violence.*
- *The organizations from the civil society sector which provide services should have better access to residential institutions.*
- *The civil society sector, together with the local government in each city where there are such types of institutions, should make closer cooperation with these institutions, so that the civil society organizations can visit women in institutions and help them at various levels. The CSOs can influence the public opinion, by more frequent pointing at the issue, and its presentation, to the*

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| | <p><i>local government, to start deinstitutionalization faster and understand its necessity.</i></p> <ul style="list-style-type: none"> • <i>It seems to me that trainings are of great importance. Informing CSOs and joint projects are the best instruments to combat this problem.</i> • <i>It is very important that there is cooperation among all sectors, both governmental and non-governmental, within the social protection system and among various providers. It is very important that the nongovernmental sector offers human resources and their capabilities to improve the general attitude towards violence and to provide support to beneficiaries in custodial institutions in recognizing and preventing various forms of violence. It is very important that more work is done with the social protection institutions; the fact is that they exist and that there are a large number of women living there, and that the employees are not sufficiently sensitized or referred to certain procedures and procedures.</i> • <i>It is necessary to maintain a constant contact with women who have had experience with custodial institutions or still live in them, monthly or even more often, to talk with women and workers in institutions. I also believe that internal control of employees in institutions should be introduced in order to make reports based on this and thus put pressure on the responsible persons of the institutions. Very often, these employees in institutions are those that women with disabilities who live there are most in contact, it would not be effective to work only from outside, but certain pressure and work inside institutions would be needed..</i> • <i>To provide better access to women with disabilities in institutions in order to provide them with appropriate training and make them aware that they are not left on their own, that they do not have to suffer any violence or abuse...and material things that would make life easier for them in these institutions</i> • <i>organizing workshops for women with disabilities in custodial institutions, for example on the topic of recognition and protection of (different forms) of violent behavior and contribute to their empowerment to think about life outside the institution and/or begin to live in an open environment. It is also important to ensure <u>continuity</u> in the processes of education, empowerment of women with disabilities, psychological and counseling support, which requires a finalized financial support from the relevant ministries, domestic and foreign donors...improvement of the sensitivity of all actors and work on their networking and mutual cooperation (centers for social work, custodial institutions, service providers, civil society organizations, donors).</i> • <i>Cooperation with institutions, a workplace adapted for people with disabilities... we as CSO – service providers need better understanding of their needs and ways of accessing them.</i> • <i>First, cooperation with the local community and relevant institutions. Engagement of a large number of professional associates, cooperation with organizations from the country and the environment for the exchange of experiences and realizations.</i> <p>One interviewee from custodial institution said also: <i>“We would need a lot of supervision and advisory work, as employees in the institutions. There is very important</i></p> |
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| | <i>support in some practical activities, administrative procedures, and there is still a conflict between the social and medical model, both on a personal level and at the level of the institution itself. Topics on sexuality and violence should continue. NGOs have limited access to institutions, so this is a little problem, it seems to me that they are not yet strong enough to get into institutions and the public sector, they need education, but they should work on cooperation between them”.</i> |
| Quantitative and/or qualitative evidence gathered by the evaluation team to support the response and analysis above | <p>Quantitative</p> <p>12 evaluation questionnaires filled by service providers</p> <p>4 interviewed representatives of service providers, 3 service providers participants of focus group</p> <p>Qualitative</p> <p>Audit of the project documents (project reports, publications), interviews with secondary beneficiaries (project external consultants, service providers) and analysis of the evaluation questionnaire for service providers.</p> |
| Conclusions | <p>The project has motivated significant number of service providers to widen their services and programs and support women with disabilities in custodial institutions: at least 8 of them⁵⁵ took concrete steps toward improvement of their services and at least 2 of them claimed that they would work further in that direction. Women’s organizations committed to develop more adjusted services to women with disabilities in institutions, while organizations of PwDs which deal with general population of PwDs didn’t show such level of commitment: 2 such organizations reported that they would need more financial support by the government in order to widen their services and build material capacities of their organizations. The additional achievement is motivation of staff employed in 2 institutions to work on internal changes, and take more proactive role in advocacy both for deinstitutionalization and protection of women with disabilities from custodial violence. However, most of them (all 12 who filled questionnaire, 3 participating focus group and 1 interviewed) emphasized that additional support is needed in order to keep this motivation and continue on widening or developing services for women with disabilities.</p> |

| Evaluation Criteria | Relevance |
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| Evaluation Question 1 | To what extent was the project strategy and activities implemented relevant in responding to the needs of women and girls with disabilities in custodial institutions? |

⁵⁵ Among them, one organization was not directly involved in the project activities but was informed about the project by the external consultant

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| <p>Response to the evaluation question with analysis of key findings by the evaluation team</p> | <p>The project strategy was based on 3 pillars:</p> <ol style="list-style-type: none"> 1) Empowerment of women with disabilities 2) Advocacy towards changes in policies towards women with disabilities in custodial institutions 3) Capacity building of service providers <p>Although very demanding for the project team, this strategy showed to be highly relevant, having in mind that the project initiated completely new, before that invisible issue.</p> <p>MDRI-S proved the high relevance of the problems and needs of women with disabilities in custodial institutions by preparing and presenting findings from the qualitative researches implemented in the first stage of the project.</p> <p>By implementing baseline study, MDRI-s produced materials for 2 publications: “Here the Walls Have Ears, Too”⁵⁶ and “Violence against women with disabilities in residential institutions”.</p> <p>The first publication are testimonies of women with mental and intellectual disabilities on gender based violence in residential institutions. These testimonies were used during presentations in front of 45 government officials and 78 members of the parliament (according to the project reports). The testimonies of interviewed women who live in custodial institutions or have experience of living in institutions showed that high level of violence is present and that women with disabilities are not aware neither use protection mechanism, due to the lack of their availability but also due to the lack of their capacities/knowledge how to use them. This publication presented and reported violation of the right to privacy and disrespecting person’s identity, deprivation and restriction of movement, treatment of partner and sexual relationships in residential institutions: forced Interventions and increased risk of violence against women. It described vertical violence: violence that women survive from employees and horizontal violence (among beneficiaries) including: sexual harassment and abuse, partner violence, violence of the rights in the field of reproductive health (problematic practices conducted against women in institutions-administration of contraceptives without informed consent, forced abortions, forced sterilization). Also, the report presented the analysis on prevention and protection from violence: accessibility of protection mechanisms, physical and architectural accessibility, informational accessibility, financial accessibility.</p> <p>Some of the women’s testimonies that were presented in the publication are:</p> <ul style="list-style-type: none"> • <i>“Our rights were violated. We could not set our goals and make our decisions, fight for us and others. It was not possible. Caregivers loudly bang with keys</i> |
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⁵⁶ <https://www.mdri-s.org/wp-content/uploads/2018/02/Publikacija-engleski.pdf>

to wake us up, as if they cannot say it nicely. They bang as if we were some animals. That was the procedure in the institution. We couldn't do anything about it.(E.)"

- *"Institution is not the same as your own apartment. No one throws you in a cage, it's not like that, but you have no freedom. I had some fear in myself there. When I arrived, I said "oh, this is a hospital." I was scared, and I said, "I don't want to be here." It was terrible when I came. I cried and cried all the time, until I got used to it. (F, former client of a big residential institution)"*
- *"Here, a person cannot satisfy basic physiological needs when he/she wants, but when there is a scheduled time for that." (M)*

As noted by one of the members of the MDRI-S monitoring team: "A caregiver helped in showering and dressing, and she worked like on the conveyor belt. A woman in wheelchair was completely naked, wet, and she sat so uncovered in the hallway and crying. She waited for the caregiver to dry and dress her. She was crying all the time. We had the impression that she was cold"

- *"They don't allow me to go to the shops or in the village. And I would really like to go to the village sometimes."*
- *"Relationships in residential institution are not allowed. If a woman and a man were in love, they could see each other secretly in the backyard, behind the building." (Z)*
- *"If you get angry, you are given an injection, or some pill and you are calm as a plant." (A)*
- *"Stronger, bigger men beat you in the institution. And tell you bad words." (Z.).*
- *"Sometimes, a guy has three women here. Everybody knows. But, they allow us that here; employees don't say anything."*
- *"The moment you come to institution, they insert you with intrauterine device. And that's it." (S.)*
- *"If a girl gets pregnant, they call her 'mommy', say bad things about her, act badly towards her. And then, they do an abortion to her." (D.)*
- *"If someone bullies me, I turn my head and keep quiet." (JE)*
- *We could report it, if it's worth it. And sometimes it doesn't matter, because they [management] listen to what the staff says, not clients. (F, former client)*

Before this research, there were no such evidences on the specific violence that women with disabilities in custodial institution face with, as said in the publication: "In Serbia, there is no comprehensive analysis of the situation of women with disabilities who are placed in residential institutions, and this publication is also an initiative for further research, studies, and discussions on this topic".

Based on this baseline, the MDRI-S created and conducted a series of 3 workshops

with 21 women with disabilities, on gender based violence and protection mechanisms. Also, they conducted 4 trainings for service providers and 1 training for NPM members in order to bring voices of these women closer to them. Public presentations to government officials and members of the parliament also contained testimonies of these women. Women involved in the capacity building workshops gave their contribution⁵⁷ in creation of the easy to read material for women in custodial institution that was produced by the end of the project⁵⁸. This material contains information for women with disabilities on the forms of violence, and mechanisms for prevention and protection that they are entitled to, as well on how to use them.

The baseline survey conducted with service providers showed that most of the civil society organizations don't have accessible and available services for women with disabilities in custodial institutions, that they are not aware on custodial violence that women with disabilities are exposed to. The baseline questionnaire was sent to 70 addresses (to CSOs, centers for social work, police, prosecution offices), and 23 of them, all CSOs, responded. According to the report, most organizations in the year before the project started did not provide services for women with disabilities who are accommodated in one of the residential institutions, while one NGO states that it has several beneficiaries who occasionally stayed at the Psychiatric Diseases Clinic in Belgrade and that they used psychosocial services by an expert from this organization. Several organizations (most often NGOs that provide SOS telephone services) state that they do not know if they are conceived by a woman who lives in the institution or has a history of institutionalization, regardless of whether it is a matter of partner violence or violence that happens in the institution. Only one organization intervened in the case of a woman who was placed in an institution (her children were taken away and placed in a foster family). One organization stated that they had been contacted by the center for social work for consultations regarding the violence against a woman who was housed in the home of the elderly. After consultations, the center for social work did not contact them anymore, nor did they have information on what was being done in that case, nor what the outcome was....

The main obstacles and challenges in providing services to women with disabilities are architectural accessibility of organizations and institutions (police, centers for social work, safe houses ...), financial difficulties in providing specialized services (e.g. sign language translators, info packages in a Braille letter or custom format ...), financial (non)sustainability of services, lack of human resources and sensible experts in institutions, misunderstanding of local self-governments and non-acceptance of NGOs providing support and assistance to women with experience of

⁵⁷ For that purpose, 4 workshops were held with same women who participated capacity building workshops

⁵⁸ <https://www.mdri-s.org/wp-content/uploads/2018/02/easy-to-read.pdf>

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| | <p>violence.⁵⁹</p> <p>Based on findings from this survey, MDRI-S designed training program for service providers. The impressions and results of the trainings are described in this Report section on the project Effectiveness.</p> <p>As part of the baseline, MDRI-S conducted analysis of policy framework and published the report on “Violence Against Women with Disabilities in Custodial Institutions-Base Line Study” in December 2017. The report provides comprehensive analysis of international standards and national legislation/policy with overview of the available international research. This analysis showed that national policies were not in line with CRPD and CEDAW, that there is lack of systematic institutional recognition and response to the VAW with disabilities in custodial institutions and absence of available prevention and protection mechanisms. The publication will serve as basis for further advocacy activities toward policy makers at national level.</p> <p>Based on the project team experience from direct work with service providers and policy makers in relation to the accessibility and availability of protection mechanism, MDRI-S team engaged external expert to develop guidelines with recommendations for changes of legislation and policies at the national level, but also precise recommendations and a model for preventing and reacting to GBV against women with mental disabilities at different service providers. As reported in final project report to The UNTF, the Guidelines⁶⁰ are completely in line with international and national standards and they can be fully incorporated in the work of service providers.</p> <p>Important insight of the project team was that, due to the complete isolation of women in custodial institutions in combination with unavailability of protection mechanisms, the strategy of widening existing services is not enough to ensure access of these women to services and protection mechanisms. The project team therefore decided to change the strategy and work on development of new approaches in order to provide women in custodial institutions with more intensive support (such are outreach teams). One of the interviewed staff in the custodial institutions also told that it is not enough just to educate women with several workshops, but it is needed to keep continual communication with them, to know them in person and be familiar with them, keep trust and ensure programs that will continually be implemented for them both within institutions and in community. Mobilizing staff of custodial institutions can be one of the strategies, by using resource persons who proved to be open for cooperation and learning. These</p> |
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⁵⁹ The MDRI-S Report on Goal Baseline Survey with Service Providers,

⁶⁰ <https://www.mdri-s.org/wp-content/uploads/2018/02/Smernice-knjizni-blok.pdf>

persons, three of them were also participants of the MDRI-S training, can be initiators of further changes within institutions, toward transformation and deinstitutionalization actions⁶¹. The interviewed members of the project team emphasized that their intention is not only to improve service delivery to women with mental disabilities who survive GBV in custodial institutions but also those who have experience of institutionalization as they can also be victims of violence at different providers of community based services.

Training reports (especially pre-training and post-training evaluation forms analysis) and interviewed project primary beneficiaries and stakeholders confirmed that activities that project implemented were based on clearly recognized and presented problem of violence that women with disabilities in custodial institutions are exposed to.

According to the interview with 1 member of the Coordination Body for Gender Equality: *"The findings of the MDRI-S studies indicate that violence against women with disabilities in general, and especially in residential institutions, is a very serious problem in Serbia. In the concrete case of the Coordination Body for Gender Equality, the project played a significant role. In particular, the organization of the Conference⁶² and the presentation of the study contributed to drawing attention to the difficult position of women in residential institutions and women with disabilities in general, because generally there is little talk about this issue. As for the project itself, it was particularly good to talk about concrete examples, about the experiences of women in residential institutions, which gave a honest picture of the problem and the necessary concreteness and identification with the problem. I think that we should further work on raising the visibility of the problems (media campaigns, roundtables, workshops) about their position, on the findings of the study, on the recommendations for overcoming the problems and finding the most effective ways for their implementation with the participation of all relevant actors. A continuation of the project is needed in order to realize all this and to achieve certain results in terms of implementation of the findings. I see the role of the project as very important, although underutilized. The Coordination Body for Gender Equality did not specifically deal with the position of women in residential institutions. That is why the reports produced by MDRI-S were useful and important, and given that Coordination Body for Gender Equality does not have its own budgetary resources and that it has limited human resources, it is somewhat exceptional. We are not, and we could work together on this in the next period. No, as I said Coordination Body for Gender Equality does not follow this problem*

⁶¹ All of these 3 persons were interviewed during evaluation, and confirmed that they are committed to the process of deinstitutionalization. The MDRI-S project reports also have references on this topic.

⁶² "Protecting women with mental disabilities from violence" for policy-makers, governmental bodies, and international organizations; Belgrade, 20 June 2017

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| | <p><i>enough, it needs to be made more visible, and it is evident that it requires a coordinated approach.”</i></p> <p>The president of the Parliamentary Committee for Human and Minority Rights and Gender Equality emphasized that the thanks to the meeting held between MDRI-S and members of the Committee on August 2017⁶³ was very useful for members of the Committee: <i>“the information they gained during the meeting will be used in further work of the Committee, along with information we gain from other independent institutions, bodies and civil society organizations”</i> and that <i>“increase of the visibility of women with disabilities in custodial institutions in media is needed, as well as education of employees in residential institutions in order to make them understand specific position of women with disabilities in these institutions”</i></p> <p>One of the 2 MPs who were interviewed, and who is a member of the Committee Parliamentary Committee on Labor, Social Affairs, Social Inclusion and Poverty Reduction said also that <i>“the targeted work with members of the parliament who come from the ruling political parties is also needed...the most responsive MPs in our committee were members of the opposition parties, and mostly women. The written materials I got from MDRI-S were very useful to me for my future actions in writing amendments and law proposals, but since most of the proposals initiated by the opposition are not being adopted in the Parliament, I ma not sure what will be the effects in the future.”</i>. Also, the same MP told: <i>“What will happen next, I don’t know... even some of the topics that we face daily, it is a very slow and long way from some idea to a law and regulation...it is necessary that people are well informed and form their own attitude. I expect it will be very slow, but I do not believe there will be opponents to this initiative. The influence of the media is very important, and the influence of public opinion on the work of the assembly is very important, it is enough to produce a little interest from the citizens in order to exert pressure on the Parliament. I think that research should be presented equally to representatives of the executive government, more information to the same people in order to motivate the executive government to change a law. It would not be bad if any changes were discussed in the executive. At the moment, there are some regulations that are not bad and are not implemented and respected: they should be controlled by inspections in institutions, and this has to go through the executive government... if we have no environment in which we can change laws or write new ones, then the existing ones should be applied, in this way many changes can be brought as well”</i></p> |
| Quantitative and/or qualitative evidence gathered by the | Quantitative: 13 women with disabilities interviewed 1 MPs interviewed, 1 responded to the questionnaire |

⁶³ Meeting was held on topic "Deinstitutionalization: Roadmap to respecting human rights and protection from violence in residential institutions."

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| <p>evaluation team to support the response and analysis above</p> | <p>5 MDRI-S project team and staff members interviewed 1 representative of the Coordination Body for Gender Equality interviewed 4 MDRI-S project reports to The UNTF</p> <p>Qualitative</p> <p>Review of the project documents (reports, publications), interview with project team, project external consultants, interviews and focus group with service providers, and questionnaire for service providers.</p> |
| <p>Conclusions</p> | <p>According to the evaluation findings, the project strategy and activities are relevant to the needs of women with disabilities in custodial institutions: it provided package of information and capacity building for 110 women with disabilities in custodial institutions and women who have experience of living in custodial institutions. At the level of services, the project worked on sensitization and empowering of 100 civil society organizations in order to motivate them to improve and/or develop new services for women with disabilities victims of GBV in custodial institutions, but also in other service providers organizations, and at least 10 of these organizations were motivated to work on this in the future. The publications and advocacy activities brought voice of these women in front of the policy makers, service providers and opened space for future advocacy for protection of women with disabilities from GBV and exploration of possibilities for establishing and developing more available and accessible services for these women. As evidenced from the project reports and evaluation process, more intensive and continual programs are needed to be implemented in order to ensure access of these women to services and protection mechanisms, especially to women who still live in the institutions: program that target service providers, program that target policy makers and program that target women directly.</p> |

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| <p>Evaluation Criteria</p> | <p>Relevance</p> |
| <p>Evaluation Question 2</p> | <p>To what extent do achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls with disabilities in custodial institutions?</p> |
| <p>Response to the evaluation question with analysis of key findings by the evaluation team</p> | <p>The achieved results continue to be relevant to the needs of women and girls with disabilities in custodial institutions due to the following facts:</p> <ul style="list-style-type: none"> • There are no data that the level of custodial violence against women with disabilities has been decreased, and the process of deinstitutionalization has not yet been clearly set by the government in terms of the strategy and political commitment. |

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| | <ul style="list-style-type: none"> • Following previous paragraph, the RS has not fulfilled all the obligations taken by signing SRPD and CEDAW. Also, there are many other relevant policies that are not drafted/adopted yet, and are important for the issue of GBV against women with disabilities including women in custodial institutions: the Strategy (and action plan) for the rights of persons with disabilities is not adopted, Strategy for preventing GBV is not adopted), Law on gender equality not adopted yet, Strategy on Deinstitutionalization not drafted at all, the status of changes of the Law on Family is unknown, the Law on Social Protection is not revised although it is in the process of revision for two years now). • The group of 21 women⁶⁴ that were empowered directly through the project show high motivation to involve in further activities and to work more proactively on practicing their rights. Continuation of intensive work with them has shown as relevant action having in mind their claims on the needs for concrete further activities (education workshops, self-help groups, self-advocacy groups). • Motivation and plans of the 11 service providers (4 interviewed and 7 respondents to the evaluation questionnaire) involved in the project to improve/widen their services and programs and support women with disabilities in custodial institutions. As described in section on motivation of service providers, they reported specific needs in capacity building and cooperation, in order to further improve their services to women with disabilities. • The products of the project⁶⁵ have shown as highly relevant and resourceful for policy makers, as emphasized by interviewed MP-s, and member of the Coordination Body for Gender Equality, and will be used in future actions within the parliament. Two member of the parliament emphasized that written materials produced by the MDRI-S are very important for them and will be used in drafting amendments and law proposals. |
| Quantitative and/or qualitative evidence gathered by the evaluation team to support the response and analysis above | <p>Quantitative</p> <p>13 women interviewed during the evaluation process</p> <p>18 service providers responded during the evaluation process</p> <p>4 project reports to The UNTF</p> <p>Qualitative</p> <p>Review of the project documents (reports, publications), interview with project team, project external consultants, interviews and focus group with service providers, and questionnaire for service providers.</p> |

⁶⁴ Among them 13 women interviewed during evaluation, but according to the project reports, 21 who were involved in capacity building workshops are motivated for further empowerment and cooperation

⁶⁵ The publications that were already described in previous sections of this report

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| Conclusions | The project will continue to be relevant in the future period, since a) process of deinstitutionalization has not been implemented yet; b) the policy changes in relation to GBV and violence against women in custodial institutions are not fully in compliance with international treaties and not being implemented; and c) there is need for continual and intensive direct work with women with disabilities – in terms of education, psychological empowerment; d) there is need for support to service providers in order to develop more available and accessible services to women with disabilities victims of violence. |
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| Evaluation Criteria | Efficiency | | | | | | | | | | | | | | | | | |
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| Evaluation Question 1 | How efficiently and timely has this project been implemented and managed in accordance with the Project Document? | | | | | | | | | | | | | | | | | |
| Response to the evaluation question with analysis of key findings by the evaluation team | <table border="1"> <thead> <tr> <th data-bbox="464 798 727 877">Expected outcomes</th> <th data-bbox="740 798 1062 877">Expected outputs</th> <th data-bbox="1068 798 1205 877">Planned</th> <th data-bbox="1211 798 1406 877">Completed</th> </tr> </thead> <tbody> <tr> <td data-bbox="464 886 727 1869" rowspan="3"> OUTCOME 1 Authorities improve policies (procedures, protocols, guidelines, etc.) to protect rights of women with disabilities from custodial violence by December 2017 </td> <td data-bbox="740 886 1062 1222"> Output 1.1. Policy-makers are better informed about forms of violence women with disabilities are facing in custodial institutions </td> <td data-bbox="1068 886 1205 1222"> Year 2 PQ 3 </td> <td data-bbox="1211 886 1406 1222"> Year 2 PQ 4 </td> </tr> <tr> <td data-bbox="740 1230 1062 1516"> Output 1.2. Procedures for ending violence against women with disabilities in custodial institutions are made available to inform policy-making </td> <td data-bbox="1068 1230 1205 1516"> Year 2 PQ 4 </td> <td data-bbox="1211 1230 1406 1516"> Year 2 PQ 4 </td> </tr> <tr> <td data-bbox="740 1524 1062 1869"> Output 1.3. NGOs and National Preventive Mechanism for torture who conduct monitoring and reporting improve knowledge about rights and specific forms of </td> <td data-bbox="1068 1524 1205 1869"> Year 2 PQ 4 </td> <td data-bbox="1211 1524 1406 1869"> Year 2 PQ 4 </td> </tr> </tbody> </table> | Expected outcomes | Expected outputs | Planned | Completed | OUTCOME 1 Authorities improve policies (procedures, protocols, guidelines, etc.) to protect rights of women with disabilities from custodial violence by December 2017 | Output 1.1. Policy-makers are better informed about forms of violence women with disabilities are facing in custodial institutions | Year 2 PQ 3 | Year 2 PQ 4 | Output 1.2. Procedures for ending violence against women with disabilities in custodial institutions are made available to inform policy-making | Year 2 PQ 4 | Year 2 PQ 4 | Output 1.3. NGOs and National Preventive Mechanism for torture who conduct monitoring and reporting improve knowledge about rights and specific forms of | Year 2 PQ 4 | Year 2 PQ 4 | | | |
| Expected outcomes | Expected outputs | Planned | Completed | | | | | | | | | | | | | | | |
| OUTCOME 1 Authorities improve policies (procedures, protocols, guidelines, etc.) to protect rights of women with disabilities from custodial violence by December 2017 | Output 1.1. Policy-makers are better informed about forms of violence women with disabilities are facing in custodial institutions | Year 2 PQ 3 | Year 2 PQ 4 | | | | | | | | | | | | | | | |
| | Output 1.2. Procedures for ending violence against women with disabilities in custodial institutions are made available to inform policy-making | Year 2 PQ 4 | Year 2 PQ 4 | | | | | | | | | | | | | | | |
| | Output 1.3. NGOs and National Preventive Mechanism for torture who conduct monitoring and reporting improve knowledge about rights and specific forms of | Year 2 PQ 4 | Year 2 PQ 4 | | | | | | | | | | | | | | | |

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| | | custodial violence women with disabilities are exposed to custodial institutions | | |
| | OUTCOME 2 Women with disabilities survivors of custodial violence know their rights and have improved access to services by December 2017. | Output 2.1 Women with disabilities participating in the project activities have better knowledge and accessible information about available mechanisms for protection against violence. | Year 2 PQ 4 | Year 2 PQ 4 |
| | | Output 2.2 Service providers participating in training programs are informed and have better knowledge about specific position and forms of violence against women with disabilities in custodial institutions | Year 2 PQ 4 | Year 2 PQ 4 |
| <p>The project team implemented monitoring and reporting procedures according to the standards agreed with the donor. The UNTF organized capacity building workshop for the organization in order to strengthen their ability to measure their progress, invested a lot of time in refining their framework, as basic management and monitoring tool to achieve expected results of their intervention⁶⁶.</p> <p>The reporting was implemented on six-month basis to The UNTF. Internal reporting procedures were implemented regularly in terms of producing reports and notes on implemented activities: training reports, meeting reports. Sources of verification in terms of correspondence, lists of participants, photo materials, invoices...were regularly collected and presented to the donor.</p> | | | | |

⁶⁶ Given by donor representative during evaluation interview

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| | <p>The project team took special attention to ethical aspect of implementation of the project activities which addressed women with disabilities: they developed protocols for interviews with women with disabilities and took measures to protect women with disabilities from over-exposure during trainings for service providers (they prepared women with disabilities for participation, prepared training participants, and organized safe environment for the implementation of these activities).</p> <p>According to the interviewed project team and MDRI-S staff members, the delays in the production of easy-to-read material for women with disabilities was learning process for them. They organized 4 workshops with women with disabilities in order to be sure that the material is resourceful and useful for women with disabilities.</p> <p>The financial management was conducted by the MDRI-S staff and although part of the accounting and financial tasks were outsourced, according to the donor and MDRI-S staff, these activities were undertaken in the adequate manner. They managed to raise additional funds (from OHCHR) and print the publication which was produced (“Violence Against Women with Disabilities in Residential Institutions”).</p> <p>The management team consisted of 3 persons, and each of them took part time position. According to the all interviewed staff (team members and others from MDRI-S) the whole organization was committed and involved in implementation of the project and they invested a lot of time and energy in this project which is very important for them. According to the findings from the interview with the donor representatives, one external consultant and the MDRI-S, the level of commitment, and scope of the activities might have contributed to burnout of the project team members and associates. Upon completion of the project, two key persons have left MDRI-S i.e. took position in another organizations/offices: executive director moved to the regional DRI office in London and Project Coordinator established her own local CSO. Although they will stay close to the MDRI-S, this change in the organizational management team is significant.</p> |
| <p>Quantitative and/or qualitative evidence gathered by the evaluation team to support the response and analysis above</p> | <p>Quantitative:</p> <ul style="list-style-type: none"> Four MDRI-S project reports Interview with 3 project team members and 2 MDRI-S staff members Two donor representatives interviewed One external consultant <p>Qualitative:</p> <ul style="list-style-type: none"> Review of the project documents (reports, publications), interview with project team and external consultants, interview with donor |
| <p>Conclusions</p> | <p>Although some activities were completed with slight delays, the project outputs and outcomes were timely delivered. The project team implemented management</p> |

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| | procedures according to The UNTF requirements and by investing additional resources in the implementation of the activities. Part time engagement of the project team members might have had influence on burnout of the project staff. |
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| Evaluation Criteria | Sustainability |
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| Evaluation Question 1 | How are the achieved results, especially the positive changes generated by the project in the lives of women and girls at the project goal level, going to be sustained after this project ends? |
| Response to the evaluation question with analysis of key findings by the evaluation team | <ul style="list-style-type: none"> • The targeted number of primary beneficiaries that were reached by the project was achieved. Approx. 40 of them were involved directly in the project activities, and 21 of them were empowered through capacity building workshops. Among these women there are at least 13 of them who are motivated to involve in self advocacy activities in the follow up of the project, and at least 13 of them who want to share their knowledge and experience with other women with disabilities. This change in knowledge and behaviors of primary beneficiaries brings certain responsibility to the MDRI-S to continue working with the group of women that were empowered during the project either provide opportunities for other programs offered to these women, which is their expectation. • The project has stimulated at least 10 civil society organizations to plan and work on their services either in terms of improving services either in terms of developing new services for women with disabilities. Also, the MDRI-S has been recognized as organization for women for the first time since it was established and this is a good basis for further cooperation with women's organizations and networks. • Estimated level of improvement of mechanisms for protection of women and girls living in custodial institutions from violence is low, which is reported in the project reports and confirmed by evaluation findings through interviews with project team, secondary and primary beneficiaries. On the other hand, the level of support provided by key stakeholders to prevent and protect women and girls with disabilities living in custodial institutions from violence is significant, MDRI-S reported commitment from 3 parliamentary groups, NPM, Coordination Body for Gender Equality, The Office for Human and Minority Rights but also from international stakeholders including The UNTF. |
| Quantitative and/or | Project team interview, stakeholders interviews, review of project documents |

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| <p>qualitative evidence gathered by the evaluation team to support the response and analysis above</p> | |
| <p>Conclusions</p> | <p>The sustainability of this project has high perspective having in mind that the products of the project are highly relevant and quality and initiated cooperation with various stakeholders has good ground. If MDRI-S raise sufficient funds and engage human resources for follow up activities, create strong and clear advocacy plan and make decisions on which activities will continue and which activities will multiply as know how to the service providers, the long-term achievements are expected.</p> |

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| <p>Evaluation Criteria</p> | <p>Impact</p> |
| <p>Evaluation Question 1</p> | <p>What are the unintended consequences (positive and negative) resulted from the project?</p> |
| <p>Response to the evaluation question with analysis of key findings by the evaluation team</p> | <p>Some of the consequences that resulted from the project are:</p> <ul style="list-style-type: none"> • By conducting baseline study in the first year of the project, MDRI-S collected important data as basis for the advocacy, brought the voice of women with disabilities in front of the policy makers but also this study opened the aspects and perspectives of the problem that they had have not assumed before: the level of isolation of women within custodial institutions, complete lack of protection mechanisms, complete lack of knowledge and awareness among service providers from civil society sector, independent institutions and policy makers about the situation of women with disabilities in custodial institutions that required much more education and sensitization. • The MDRI-S implemented advocacy campaign on GBV against women with disabilities and shared information on the project among women civil society organizations (two interviewed persons –one external consultant and one focus group participant mentioned that they shared project information to more than hundred of women organizations in the country and in the region –the network Women against violence and Network of Women in black) as well as by implementing training programs for service providers. MDRI became visible among women organizations and recognized as organizations that is protecting the rights of women. • Women with disabilities were not willing to file complaints to different complaint mechanisms, because they were afraid of consequences and risking more difficult position in residential institution. In addition, |

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| | <p>independent institutions fully supported protection of these women, but they are slow in making their complaint mechanisms and departments more open and adaptable to reach women in custodial institutions. Service providers were not strengthened enough and they lack capacity to provide support to women with mental disabilities, although several of them started working on that issue.</p> <ul style="list-style-type: none"> • The MDRI-S has been awarded by “Anđelka Milić” award for the introduction or encouragement of practices that significantly contribute to the establishment of gender equality in organizations, institutions or local communities, based on cognitive insights obtained through feminist research and critical masculinity studies - for activities and publication “Here the Walls Have Ears, Too”⁶⁷ • Although MDRI-S is not directed towards support to custodial institutions, due to the fact that some of the employees in custodial institutions have established CSOs and participated trainings for service providers, the effects of the training are visible inside institutions, at least having in mind findings from the interviews with them. • According to the project reports and interview with the project team members and donor representatives, this project initiated topic that was not recognized neither at national nor international level enough. That way, the violence against women with disabilities in custodial institution was addressed as new and significant issue that should be worked on globally, and The UNTF has included women with disabilities as one of the target groups in one of their calls, which could improve access to funds for organizations who work with and for women with disabilities globally. • The organizations of women with disabilities involved in trainings for service providers’ opened a new perspective in terms that they started viewing women with disabilities, including women with mental and intellectual disabilities in custodial institutions as more heterogeneous group, who need adjusted and not only special programs provided by special organizations. LGBT organizations showed interest and motivation to work on developing support to lesbian women with mental disabilities in custodial institutions, which is significant effect of the project. |
| <p>Quantitative and/or qualitative evidence gathered by the evaluation team to support the response and</p> | <p>Quantitative 4 project reports, 5 training reports 5 project team members interview,</p> <p>Qualitative Interviews with project stakeholders, consultants, project team. Review of project</p> |

⁶⁷ <http://sefem.org/nagrada-andelka-milic/2018/dobitnici-nagrade-andelka-milic-2018/>

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| analysis above | documents |
| Conclusions | The unintended consequences of the project are generally positive and have potential as basis for follow up plans. By increasing visibility of the GBV against women with disabilities in custodial institutions at the national and international level, the also became visible and recognized as women organization and this is the basis for further developing of the advocacy initiatives but also initiative directed toward group of women with mental and intellectual disabilities as heterogeneous group. |

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| Evaluation Criteria | Knowledge Generation |
| Evaluation Question 1 | What are the key lessons learned that can be shared with other practitioners on Ending Violence against Women and Girls? |
| Response to the evaluation question with analysis of key findings by the evaluation team | <p>Key lessons:</p> <ul style="list-style-type: none"> • Providing quality evidence based data including testimonials of women and girls with disabilities in custodial institutions proved to be very effective approach in raising awareness and sensitization of both service providers and policy makers. • Building partnerships with independent bodies in order to enter custodial institutions, and joint monitoring visits contributed both, effectiveness and efficiency of the project implementation. • Capacity building of women and girls with disabilities in custodial institutions about GBV and protection mechanisms are proved to be of help in empowering women to speak for them selves and increase their motivation for further work on improving quality of their lives. On the other hand, there are legal obstacles in direct approach to women in custodial institutions: 1) women deprived of legal capacity (under guardianship) cannot decide on the service and treatment without guardian's consent; 2) staff of the institution is forbidden to leave survivor of violence to be interviewed by outside parties meaning that when women survive violence by staff member, there is very little room for outside action and protection. Therefore, alternative approaches could be trainings and sensitization of employees in institutions, development of partnerships between institutions and community based CSO service providers. • Due to complete isolation and unawareness about protection mechanisms from one side, and inaccessible services from the other side, only making existing services accessible for women with disabilities proved not be enough to ensure access to protection mechanisms and services for women and girls in custodial institutions. The project team therefore worked on exploring alternative solutions, in cooperation with civil society |

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| | <p>organizations and NPM, and according to the project reports and interviews with the project team that is the process which is ongoing: they are considering plans for outreach teams - teams of skilled and trained women who will go to residential institutions, talk to survivors, and provide support.</p> <ul style="list-style-type: none"> • Creating easy to read and easy to understand materials for women with disabilities, including consultation with women with disabilities, is long lasting and challenging process which gives high quality results and products. The MDRI-S team organized 4 workshops with women with disabilities in order to analyze the material that was prepared for women with disabilities in custodial institutions: women gave important suggestions and corrections toward higher accessibility of the content and although the process took time, the result was material which is combination of text and pictures and therefore more understandable for women with intellectual and mental disabilities. • The level of awareness and knowledge of government officials, independent institutions capacities of NPM i.e. the level of their competences and knowledge has to be assessed in order to prepare and adjust public presentations and the content of the training to their needs. • The suggestions from 2 interviewed MPs were related to the overall visibility of the project; the project could have been more visible in public if it had used more of social networks and particular media. • There are employees in custodial institutions that are open to cooperation and show certain level of flexibility and readiness to learn and change things inside institutions. Such persons can be the resource for further actions towards institutions. In their interviews (3 persons) they said that they are motivated to continue to cooperate with MDRI-S, to share knowledge and information they gained during trainings with other colleagues within the institution. One institution has established cooperation with one CSO (both of them were MDRI-S training participants) and they agreed that CSO will conduct education of other staff in the institution about gender based violence. |
| <p>Quantitative and/or qualitative evidence gathered by the evaluation team to support the response and analysis above</p> | <p>Quantitative:</p> <ul style="list-style-type: none"> 18 service providers responded to the evaluation questionnaire, interview and focus group 4 project reports to The UNTF 5 members of the project team interviewed 2 MPs interviewed, 3 representatives of custodial institutions interviewed <p>Qualitative</p> <p>Interviews with project team, MPs, service providers, donor representatives and</p> |

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| | review of project documents |
| Conclusions | <p>The main lessons can be grouped into the following:</p> <ul style="list-style-type: none"> • lessons related to the advocacy activities: presentation of testimonies of primary beneficiaries showed to be of great importance and had significant effect on policy makers and all stakeholders on the project. Visibility activities and communication with the project stakeholders showed to be important both, to the MDRI-S and policy makers. • lessons related to the direct work with beneficiaries: difficult access to women in custodial institutions due to the legal constraints can affect potential plans for developing or improving services for these women, and they can be overcome by establishing partnerships with institutions. Women with disabilities are the most important resource in planning services for them, as proved by involving them in the project activities. • Lessons related to the service providers: the data on capacities of civil society organizations and custodial institutions as service providers are important for designing the whole project approach, beside training program. It depends very much on the capacities of local CSOs who quality and accessible services can be developed and sustained. |

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| Evaluation Criteria | Knowledge Generation |
| Evaluation Question 2 | Are there any promising practices? If yes, what are they and how can these promising practices be replicated in other projects and/or in other countries that have similar interventions? |
| Response to the evaluation question with analysis of key findings by the evaluation team | <ul style="list-style-type: none"> • Organizing advocacy events in the facilities of policy makers instead of organizing events in hotels/other places has proved as an approach that ensures higher participation of individuals such as MPs. • Involving women with disabilities in custodial institutions or who have experience of living in custodial institutions as speakers on the capacity building trainings for service providers has strong and striking effect on the service providers and can contribute to their motivation to involve in providing services for women in custodial institutions • Also, involving women with disabilities as a source of expertise in planning and developing services for them proved to be an excellent strategy in two ways: in empowering them to see themselves as subjects and not objects of services and programs, and in ensuring that developed services and programs are really a response to their needs in various aspects. Participative creating of the information materials for women with disabilities was the learning process |

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| | <p>for MDRI-S: they learned about informational package, its accessibility in terms of distribution, possibilities to reach women, possibilities for keeping the material, language, format of information, etc. All these aspects of the process were carefully considered and adopted as MDRI-S know how.</p> <ul style="list-style-type: none"> • Preparing <u>easy-to-read and easy-to-understand materials for MPs and government officials</u> (not only for women with disabilities): short and clear, with concrete addresses and clear demands and guidelines what to do and how, are good practice when communicate with officials and policy makers who find the topics too abstract and extensive, or don't have time to devote to studying extensive materials. • Bringing perspective of this specific target group to the table of decision makers, make it visible, who can transfer it into the institutional change. According to the donor, MDRI did excellent work in collecting and presenting voice of women with disability in ethical manner, safe manner and manner that respect their dignity and rights. |
| <p>Quantitative and/or qualitative evidence gathered by the evaluation team to support the response and analysis above</p> | <p>Quantitative</p> <p>13 women with disabilities interviewed 4 project reports to The UNTF 5 members of the project team interviewed 2 MPs interviewed, 3 donor representatives interviewed.</p> <p>Qualitative</p> <p>Interviews with project team, donor, women with disabilities, project stakeholders Review of project reports</p> |
| <p>Conclusions</p> | <p>The project has significant multiplication potential and these good practices should be shared with other similar organizations at the national level but also in the region. The practices that can be shared are related both, to primary and secondary beneficiaries. Continual working on improving approach, exploring and testing alternative solutions became part of the organizational culture; and their experiences in advocacy approach with participation of primary beneficiaries, ethical codes, and adjusted approach to primary beneficiaries can be multiplied beyond national level.</p> |

7 Conclusions

| Evaluation Criteria | Conclusions |
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| Overall | <ul style="list-style-type: none"> It can be concluded that the project outcomes and outputs were achieved to the great extent: the project brought the perspective of women with disabilities to the table of decision makers, made it visible to those who can transfer it into the institutional change. Based on data collected from stakeholders (secondary beneficiaries and donor) MDRI-S did excellent work in collecting and presenting voice of women with disabilities in an ethical manner, safe manner and manner that respect their dignity and rights. The project goal has been partially achieved, mainly due to the fact that ambitious project plan and external factors contributed to the obstacles in obtaining changes in policies and protection mechanisms. On the other hand, having in mind long-term character of the goal, it is expected that follow up effects will contribute to the achievement of the goal. |
| Effectiveness | <ul style="list-style-type: none"> The project reached more than targeted number of primary and secondary beneficiaries by implementing planned activities. In total, 115 primary beneficiaries were reached by information and capacity building activities, and 332 of secondary beneficiaries were reached by advocacy and capacity building activities. The project has brought changes in lives of primary beneficiaries who were <u>directly involved</u> in the project activities. Their perspective has changed in comparison to the base-line data when complete lack of awareness on protection mechanisms was found: they are aware on protection mechanisms, know whom to address although need more capacity building in order to take concrete steps and use protection mechanisms. They are willing to work further on bringing their voice closer to policy makers, service providers and to the wider public. The total number of primary beneficiaries reached by the project is achieved in 115% (115 in comparison to targeted 100) at the goal level, and 110% at the outcome level, based on the MDRI-S project reports and evaluation qualitative and quantitative survey. Among these, 40-45 women were directly involved in the project activities (baseline interviews, workshops, trainings, etc.) while others (70) were reached indirectly by distributing printed materials on violence. The total number of secondary beneficiary's number was also reached, only the number of social workers was lower, mainly due to the fact that not only social workers are employed in service provider's organizations/institutions. Social welfare/protection workers group include social workers but also psychologists, pedagogues and other professionals from humanistic sciences. MDRI-S project coordinator |

confirmed in interview that they compensated this number by increased number of service providers who were involved in their trainings, so instead of 40 civil society organizations they reached 100. The number of government officials and MPs who were directly reached is lower than those who were indirectly involved, and the number of MPs is calculated from the project reports-there were no lists of participants during the form the events in the parliament so the number is approximation of the project team

- The changes in lives of women with disabilities are visible on women who were directly involved in the project activities. The project has brought changes in lives of primary beneficiaries who were directly involved in the project activities. Their perspective has changed in comparison to the base-line data when complete lack of awareness on protection mechanisms was found: they are aware on protection mechanisms, know whom to address although need more capacity building in order to take concrete steps and use protection mechanisms. They are willing to work further on bringing their voice closer to policy makers, service providers and to the wider public. The changes in lives of other women who were not directly involved in the project activities (workshops, trainings) is difficult to discuss or measure. Interviewed women did not confirm that they shared their experience and knowledge gained on workshops with other women in their institution, or women with whom they share living facilities in the supported living and who were not involved in the project. This could be a space for follow up activities with them, however, responsibility for multiplication of this knowledge should not be bared by women with disabilities but service providers and government. The effects of trainings with service providers who developed plans for services for women in custodial institutions, and also those who are employed in institutions who initiated changes in internal procedures and approach to women with disabilities who live in these institutions, could be seen as potential for positive changes of these women as well.
- MDRI-S team managed to utilize positive factors that were present in environment and combine them with their own approach in delivering project outputs and outcomes. The advocacy based on strong evidence produced in the first stage of the project by implementing baseline study and presenting situation of women with disabilities in custodial institutions was effective, especially due to the fact that this kind of evidence was presented to the public for the first time in the country. The lack of availability and accessibility of protection mechanisms influenced the achievement of the output related to the filling complaints, in terms that the MDRI-S team learned the lessons from the context and managed to adjust their approach, do no harm to primary beneficiaries and considered developing alternative solutions

- The project successfully advocated for policy changes, however the results of the advocacy are not fully visible yet. The concrete success in terms of adopting/changing policies are related to already described Criminal Code and National Strategy for Improving position of People with Disabilities by 2020. Having in mind that MDRI-S opened completely new topic by this project, and brought completely invisible issue up to the public agenda, it is expected that full effects of this advocacy becomes visible in the following period, at least during next 3 years due to the fact that at least two years were needed for MDRI-S to put this topic on the agenda of the policy makers and that 2018 is a year when many policies are waiting for the revision/adoption (Law on Gender Equality, Family law, Social Protection Law etc). The main achievement of the advocacy, beside the changes in these policies is the fact that MDRI-S explored, collected and presented comprehensive issue of GBV against women with disabilities in custodial institutions in front of international and national stakeholders.
- The project has motivated significant number of service providers to widen their services and programs and support women with disabilities in custodial institutions: at least 8 of them⁶⁸ took concrete steps toward improvement of their services and at least 2 of them claimed that they would work further in that direction. Women’s organizations committed to develop more adjusted services to women with disabilities in institutions, while organizations of PwDs which deal with general population of PwDs didn’t show such level of commitment: 2 such organizations reported that they would need more financial support by the government in order to widen their services and build material capacities of their organizations. The additional achievement is motivation of staff employed in 2 institutions to work on internal changes, and take more proactive role in advocacy both for deinstitutionalization and protection of women with disabilities from custodial violence. However, most of them (all 12 who filled questionnaire, 3 participating focus group and 1 interviewed) emphasized that additional support is needed on order to keep this motivation and continue on widening or developing services for women with disabilities.
- According to the evaluation findings, the project strategy and activities are relevant to the needs of women with disabilities in custodial institutions: it provided package of information and capacity building for 110 women with disabilities in custodial institutions and women who have experience of living in custodial institutions. At the level of services, the project worked on sensitization and empowering of 100 civil society organizations in order to motivate them to improve and/or develop new services for women with

⁶⁸ Among them, one organization was not directly involved in the project activities but was informed about the project by the external consultant

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| | <p>disabilities victims of GBV in custodial institutions, but also in other service providers organizations, and at least 10 of these organizations were motivated to work on this in the future. The publications and advocacy activities brought voice of these women in front of the policy makers, service providers and opened space for future advocacy for protection of women with disabilities from GBV and exploration of possibilities for establishing and developing more available and accessible services for these women. As evidenced from the project reports and evaluation process, more intensive and continual programs are needed to be implemented in order to ensure access of these women to services and protection mechanisms, especially to women who still live in the institutions: program that target service providers, program that target policy makers and program that target women directly.</p> |
| Relevance | <ul style="list-style-type: none"> • The project will continue to be relevant in the future period, since a) process of deinstitutionalization has not been implemented yet; b) the policy changes in relation to GBV and violence against women in custodial institutions are not fully in compliance with international treaties and not being implemented; and c) there is need for continual and intensive direct work with women with disabilities – in terms of education, psychological empowerment; d) there is need for support to service providers in order to develop more available and accessible services to women with disabilities victims of violence. |
| Efficiency | <ul style="list-style-type: none"> • Although some activities were completed with slight delays, the project outputs and outcomes were timely delivered. The project team implemented management procedures according to The UNTF requirements and by investing additional resources in the implementation of the activities. Part time engagement of the project team members might have had influence on burnout of the project staff. |
| Sustainability | <ul style="list-style-type: none"> • The sustainability of this project has high perspective having in mind that the products of the project are highly relevant and quality and initiated cooperation with various stakeholders has good ground. If MDRI-S raise sufficient funds and engage human resources for follow up activities, create strong and clear advocacy plan and make decisions on which activities will continue and which activities will multiply as know how to the service providers, the long-term achievements are expected |
| Impact | <ul style="list-style-type: none"> • The unintended consequences of the project are generally positive and have potential as basis for follow up plans. By increasing visibility of the GBV against women with disabilities in custodial institutions at the national and international level, the also became visible and recognized as women organization and this is the basis for further developing of the advocacy initiatives but also initiative directed toward group of women with mental |

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| | and intellectual disabilities as heterogeneous group. |
| Knowledge Generation | <p>The main lessons can be grouped into the following:</p> <ul style="list-style-type: none"> • lessons related to the advocacy activities: presentation of testimonies of primary beneficiaries showed to be of great importance and had significant effect on policy makers and all stakeholders on the project. Visibility activities and communication with the project stakeholders showed to be important both, to the MDRI-S and policy makers. • lessons related to the direct work with beneficiaries: difficult access to women in custodial institutions due to the legal constraints can affect potential plans for developing or improving services for these women, and they can be overcome by establishing partnerships with institutions. Women with disabilities are the most important resource in planning services for them, as proved by involving them in the project activities. • Lessons related to the service providers: the data on capacities of civil society organizations and custodial institutions as service providers are important for designing the whole project approach, beside training program. It depends very much on the capacities of local CSOs who quality and accessible services can be developed and sustained. • The project has significant multiplication potential and these good practices should be shared with other similar organizations at the national level but also in the region. The practices that can be shared are related both, to primary and secondary beneficiaries. Continual working on improving approach, exploring and testing alternative solutions became part of the organizational culture; and their experiences in advocacy approach with participation of primary beneficiaries, ethical codes, and adjusted approach to primary beneficiaries can be multiplied beyond national level. |

8 Key Recommendations

As the project had no formal partners, the most of the recommendations are addressing MDRI-S. The recommendations addressing stakeholders are indirect and probably need MDRI-S interventions.

| Evaluation Criteria | Recommendations | Relevant Stakeholders | Suggested timeline |
|---------------------|---|--|---|
| Overall | <ul style="list-style-type: none"> MDRI-S should continue advocacy activities by presenting testimonies of women with disabilities in front of policy makers and international stakeholders who could support them in future activities. Beside advocacy on GBV against women with disabilities, overall advocacy for deinstitutionalization which would support efforts in improving position of women in custodial institutions would be good strategy. | <p>MDRI-S as a whole</p> <p>Civil society organizations as partners</p> | <p>At least next 3 years</p> |
| Effectiveness | <ul style="list-style-type: none"> The women with disabilities who were directly involved in the project activities should experience further support by MDRI-S and its partners-civil society organizations but also other service providers which act at the local level mostly (for example, centers for social work). The workshops on topics such are: sexuality and partner relations, family issues, employment and economic empowerment, reproductive and health in general, supported living are reported by needed by women themselves. They want more informal meetings and communication with MDRI S (as they possibly see MDRI S as representative organization on behalf of other service providers, although MDRI S is not service provider) on topics. Women with disabilities also gave clear | <p>MDRI-S</p> <p>Followed by Civil society organizations-service providers</p> | <p>As direct continuation of the project, and following years, at least 3</p> |

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| | <p>suggestions in terms of what kinds of information materials they want: clear, with big letters, more pictures (they were analyzing materials they got). Also, they want possibility to communicate via phone, conduct self support groups, have open channel of communication and visits to their families.</p> <ul style="list-style-type: none"> • The reach out of women in custodial institutions can be improved by further building partnerships between institutions and community based service providers, as well as through education and sensitization of professionals who are employed in these institutions. If MDRI-S directs advocacy towards relevant ministries in order to activate control mechanisms, and also develops more intensive communication and cooperation with the Republic and Provincial Institutes for Social Protection, the educational and monitoring work within custodial institutions can be conducted by them, since this is their mandate. • As for the service providers, additional training programs are recommended, for targeted number of motivated civil society organizations which have initial capacities to develop their services or establish additional, adjusted services for women in custodial institutions but also for women with disabilities who use other services as pointed out in one of the MDRI-S reports. Having in mind overall lack of available services and low level of knowledge on available services and | <p>The MLEVSA (social inspection department)</p> <p>Republic and Provincial Institute for Social protection</p> <p>MDRI-S</p> | <p>Next 3 years</p> <p>By the end of 2018</p> |
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| | <p>protection mechanisms.</p> <ul style="list-style-type: none"> Continual mentoring or supervisory support to service providers, in different ways: organizing events with the purpose of knowledge sharing, case conferences, consultancy for civil society organizations and conduct this in partnership with civil society organizations which proved to have capacities to involve. Work with NPM and independent bodies on developing accessible and available protection mechanisms/complaint procedures for women with mental and intellectual disabilities Advocacy activities more precisely targeted to the executive government and MPs from the ruling parties, as recommended by one of the MPs might effect with higher response from the relevant ministries | <p>MDRI-S NPM CSOs Republic and Provincial Institute for Social Protection</p> <p>MDRI-S, NPM, Protector of Citizens, Commissioner for Equality</p> <p>MDRI-S Partner civil society organizations, members of NPM</p> | <p>By the end of 2018</p> <p>During next 3 years at least</p> <p>By the end of 2018</p> |
| Relevance | <ul style="list-style-type: none"> Advocacy for creation and adoption of the Deinstitutionalization Strategy Monitoring effects of the trainings for service providers, including custodial institutions. Repeat monitoring visits to custodial institutions in order to monitor and potentially measure the nature and scope of changes as potential effects of the project | <p>MDRI-S, CSOs as partner</p> <p>MDRI-S</p> <p>MDRI-S, NPM</p> | <p>Next 2 years</p> <p>Next 3 years</p> <p>In 2019</p> |

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| | <p>implementation</p> <ul style="list-style-type: none"> • Creation of the separate monitoring report with specific reference to GBV violence against women in custodial institutions | NPM, MDRI-S | By September 2018 & Repeated report by the end of 2019 |
| Efficiency | <ul style="list-style-type: none"> • Ensure burnout prevention and stress management support programs for project and whole MDRI-S staff • Financial strategy and fundraising plan should be developed and include plans for this project • Conduct capacity assessment of the organization, stakeholder analysis and create updated strategic plan with advocacy strategy for DI and GBV against women with disabilities in institutions | MDRI-S MDRI-S | During next 4 months (by Summer Holidays) By the end of 2018 |
| Sustainability | <ul style="list-style-type: none"> • MDRI-S should transfer direct work with primary beneficiaries to the service providers empowered by MDRI-S and supervised by MDRI-S | MDRI-S | By the end of 2018 |
| Impact | <ul style="list-style-type: none"> • Continue networking with women organizations and their sensitization towards GBV against women with disabilities. Also, continue networking with organizations of PwDs who support general population of PwDs and sensitize them for gender aspect of disability, violence in general and GBV against women in custodial institutions | MDRI-S | Next three years, in line with advocacy activities |

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| Knowledge Generation | <ul style="list-style-type: none">• The long term communication and visibility plan both for the whole MDRI-S and project itself should be created | MDRI-S | By the end of 2018 |
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9 Annexes

9.1. Final Version of Terms of Reference (TOR) of the evaluation

Terms of Reference for External Evaluation

1. Background and Context

1.1. Description of the project

Project “Deinstitutionalize and End Violence against Women with Disabilities in Custodial Institutions” has been implemented by Mental Disability Rights Initiative of Serbia MDRI-S and it is funded by United Nations Trust fund to End Violence against Women, and Disability Rights International. Mental Disability Rights Initiative Serbia (MDRI-S) was founded in 2008 as an advocacy non-profit organization with the aim of protecting the human rights and promoting full participation of persons with mental disabilities. MDRI-S focuses on equal recognition of persons with mental disabilities before the law, deinstitutionalization and community living.

The project duration is two years (from January 2016 to January 2018). The project is in its final implementing phase.

The project has a national scope and it is implemented in Serbia. It addresses violence perpetrated or condoned by the State, namely custodial violence, forced sterilization/pregnancy/abortion and generally violence that women with mental disabilities in custodial and psychiatric institutions in Serbia survive.

Primary beneficiaries of the project are women and girls with disabilities (100), especially those with intellectual, cognitive, and psychosocial disabilities of very low socio-economic status who reside in custodial and psychiatric institutions (in urban and rural areas) in the Republic of Serbia. Secondary beneficiaries are 40 civil society organizations (Disabled Persons Organizations – DPOs, mainstream human rights organizations, service providers, women’s organizations), social workers, Government officials (decision-makers, policy implementers), and Parliamentarians.

Strategies used for project implementation are advocacy in preventing violence, creating and enhancing multisectoral referral systems for improving service delivery, supporting implementation of multisectoral policies and national action plans, conducting research, data collection, and analysis for strengthening institutional responses.

The project aims to improve mechanisms and measures to end violence against women in custodial institutions and ensure that measures target intersectional discrimination. The expected project results are that women with disabilities in custodial institutions are better protected from violence, throughout raised awareness about the scope and forms of violence perpetrated against them, formulated policy

responses, improved legislation and policies, and improved services to women survivors of violence by incorporating gender- and disability-specific measures.

The project applies human rights approach, social inclusion principles, observations on intersectional discrimination, and analysis of multiple disparities facing women with disabilities in custodial institutions.

1.2. Strategy and Theory of Change

The project takes strong advocacy approach in all aspects, and it focuses on advocacy and empowering primary beneficiaries in the area of prevention of violence through changing attitudes and knowledge. In order to support change of attitudes and improved community and institutional responses, the project includes improvement of service delivery by building partnerships. In addition, the project supports implementation of multisector policies in the areas of prevention of gender- and disability-specific violence and discrimination by monitoring the implementation, conducting research and advocacy activities.

The fundamental approach is based on human rights of women with disabilities by exploring and reacting to intersectional discrimination and cross-cutting issues. The project explores multiple disparities facing women with disabilities in custodial institutions, namely violence (and risk of violence) on the grounds of gender, age, locality (e.g. difference between community living and institutionalization). The research included desk research of the current legislative and policy framework, international standards and obligations, existing services, and best practice examples (at the national and international level). The second part of the research included focus groups and in-depth interviews with women with disabilities who live in custodial institutions or have a history of institutionalization. The research applies qualitative approach (including life stories) and participative methodology. The findings are presented in two publications.

Simultaneously, advocacy team worked on awareness-raising and advocacy activities, including distributing policy brief, holding meetings with relevant stakeholders, sending written submissions to international human rights treaty bodies and employing available advocacy venues. Capacity-building of primary and secondary beneficiaries included four trainings for service providers, one training for members of the National preventive mechanism for torture (NPM), and workshops with women with disabilities. Capacity-building methodology is based on adult-learning and peer support approach with the use of different instruments, such as discussions, presentations, workshops, individual work, work in pairs, etc.

Primary beneficiaries – women with disabilities – have been involved throughout the whole project implementation in order to empower them for further actions, but also to ensure participation, legitimacy and accountability of advocacy objectives. Overall, the advocacy activities are framed throughout 'agenda setting' theory within the theory of change. Current political, social, and economic circumstances in Serbia create opportunities for at least two streams of policy processes.

1.3. Geographic Context

The project has a national scope and it has been implemented in the Republic of Serbia.

1.4. Total resources allocated for the intervention

Estimated total project budget is USD 131,874, while the funding from the UN Trust Fund to End Violence against Women is USD 105,630.

1.5. Key partners

There are no official partners to the project, but key partners are Protector of Citizens (National preventive mechanism for torture), organizations supporting persons with disabilities (especially supported living service), and self-advocacy groups of persons with disabilities. MDRI-S cooperated with different independent experts and consultants in gender-based violence, rights of women with disabilities, and with civil society organizations working on these issues in Serbia.

2. Purpose of the evaluation

This is a mandatory final project evaluation required by UN Trust Fund to End Violence against Women. It is also final evaluation of the MDRI-S program to deinstitutionalize and end violence against women with disabilities in custodial institutions in Serbia.

The evaluation results will be used by the UN Trust Fund to End violence against Women to assess the overall impact of the project. In addition, it will be used by MDRI-S management team in understanding the achieved outcomes, positive effects and aspects, and negative circumstances or side-effects. It will be used for planning the continuation of the program to deinstitutionalize and end violence against women with disabilities in custodial institutions in Serbia.

Evaluation results will support MDRI-S team in designing further activities and programs based on perspectives of primary and secondary beneficiaries. The project team will decide on strategy for advocacy and capacity building activities, especially in designing new training programs for women and disabilities and service providers.

3. Evaluation objectives and scope

3.1. Scope of Evaluation

Evaluation needs to cover the entire project duration (from January 2016 to January 2018). It is focused on activities and impact in the region of Serbia, but takes in account effects and success of international partnerships and international advocacy actions and their effects on the national program.

This evaluation needs to cover the target primary and secondary beneficiaries as well as broader stakeholders, including key partners (Protector of Citizens/NPM, service providers of supported living) and selected external consultants/experts that took part in the project.

3.2. Objectives of Evaluation

The overall objectives of the evaluation are to:

- a) evaluate the entire project in terms of effectiveness, relevance, efficiency, sustainability and impact, with a strong focus on assessing the results at the outcome and project goals;
- b) generate key lessons and identify promising practices for learning;
- c) identify prospective innovative approaches and strategies to end violence against women with disabilities in custodial institutions in Serbia.

4. Evaluation Question

The key questions that need to be answered by this evaluation include the following divided into five categories of analysis. The five overall evaluation criteria – relevance, effectiveness, efficiency, sustainability and impact - will be applied for this evaluation.

| Evaluation criteria | Mandatory evaluation questions |
|----------------------|---|
| Effectiveness | 1) To what extent were the intended project goal, outcomes and outputs achieved and how? 2) To what extent did the project reach the targeted beneficiaries at the project goal and outcome levels? How many beneficiaries have been reached? 3) To what extent has this project generated positive changes in the lives of targeted (and untargeted) women and girls in relation to the specific forms of violence addressed by this project? Why? What are the key changes in the lives of those women and/or girls? Please describe those changes. 4) What internal and external factors contributed to the achievement and/or failure of the intended project goal, outcomes and outputs? How? 5) To what extent was the project successful in advocating for legal or policy change? Explain why. 6) To what extent was the project successful in motivating service providers to widen their programs and support women with disabilities? |
| Relevance | 1) To what extent was the project strategy and activities implemented relevant in responding to the needs of women and girls with disabilities in custodial institutions? 2) To what extent do achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls with disabilities in custodial institutions? |
| Efficiency | How efficiently and timely has this project been implemented and managed in accordance with the Project Document? |
| Sustainability | How are the achieved results, especially the positive changes generated by the project in the lives of women and girls at the project goal level, going to be sustained after this project ends? |
| Impact | What are the unintended consequences (positive and negative) resulted from the project? |
| Knowledge Generation | 1) What are the key lessons learned that can be shared with other practitioners on Ending Violence against Women and Girls? |

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| | 2) Are there any promising practices? If yes, what are they and how can these promising practices be replicated in other projects and/or in other countries that have similar interventions? |
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5. Evaluation Methodology

Evaluation methodology should involve process and outcome evaluation design adjusted for small grant. Process design includes evaluation of inputs for activities to achieve outputs that should all lead to widening the evaluation to include outcome design (evaluating short, medium-term outcomes of the project). For process evaluation, MDRI-S team collected program documents and information to what extent and how consistently the program has been implemented. For process evaluation, the selected evaluator will have to:

- Review program documents and records;
- Review administrative data;

After identifying thematic necessities together with project team and relevant stakeholders, selected evaluator will conduct interviews and focus groups with the project team, primary beneficiaries, secondary beneficiaries (at least one person/institution from each group). The analysis includes confirmation of findings across different sources (triangulation).

Outcome evaluation should identify the results and effects of a program, and measure program beneficiaries' changes in knowledge, attitude(s), and/or behavior(s) that result from a program.

MDRI-S team will provide selected evaluator(s) with following data sources:

- Results of pre- and post-training questionnaires for service providers who attended the training (4 trainings, one combined report);
- Results of pre- and post-training questionnaires for members of the National preventive mechanism for torture who participated at the training (one training, one report);
- Results/reports on individual interviews with primary beneficiaries (13 interviews, one combined report);
- Data collected from survey for service providers implemented at the beginning of the project, and follow-up report on selected service-providers implemented in the project final phase;
- Documents review (to which extent national legislation/policies are in line with Convention on Elimination of Discrimination Against Women and Convention on the Rights of Persons with Disabilities).

This is just an overall approach and method for conducting the evaluation, data sources and tools that should yield the most reliable and valid answers to the evaluation questions. Final decisions about the specific design and methods for the evaluation will emerge from the consultations among the project team, the evaluator, and key stakeholders to meet the evaluation purpose and objectives and answers the evaluation questions.

6. Evaluation Ethics

For interviewing primary beneficiaries of the project, evaluator have to consult and use Ethics and Safety document developed by MDRI-S for interviewing women with disabilities in custodial institutions. This document will be provided to the evaluator by the organization.

The evaluation must be conducted in accordance with the principles outlined in the UN Evaluation Group (UNEG) ‘Ethical Guidelines for Evaluation’

<http://www.unevaluation.org/ethicalguidelines>

It is imperative for the evaluator(s) to:

- Guarantee the safety of respondents and the research team.
- Apply protocols to ensure anonymity and confidentiality of respondents.
- Ensure compliance with legal codes governing areas such as provisions to collect and report data, particularly permissions needed to interview or obtain information about children and youth.
- Store securely the collected information.

The evaluator(s) must consult with the relevant documents as relevant prior to development and finalization of data collection methods and instruments. The key documents include (but not limited to) the following:

- World Health Organization (2003). *Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence Against Women*. www.who.int/gender/documents/violence/who_fch_gwh_01.1/en/index.html
- Jewkes, R., E. Dartnall and Y. Sikweyiya (2012). *Ethical and Safety Recommendations for Research on the Perpetration of Sexual Violence*. Sexual Violence Research Initiative. Pretoria, South Africa, Medical Research Council. Available from www.svri.org/EthicalRecommendations.pdf
- Researching violence against women: A practical guide for researchers and activists November 2005; http://www.path.org/publications/files/GBV_rvaw_complete.pdf
- World Health Organization (WHO), ‘Ethical and safety recommendations for researching documenting and monitoring sexual violence in emergencies’ 2007, http://www.who.int/gender/documents/OMS_Ethics&Safety10Aug07.pdf

7. Key Deliverables of evaluators and timeframe

This section describes the key products the evaluation team will be accountable for producing and submitting to the grantee organization.

| | Deliverables | Description of expected deliverables | Timeline |
|---|---|---|-----------------|
| 1 | Evaluation inception report (in Serbian language) | Proposed methods, proposed sources of data and data collection/analysis procedures. The inception report must include a proposed schedule of tasks, activities | 15 January 2018 |

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| | | and deliverables, designating a team member with the lead responsibility for each task or product. | |
| 2 | Draft Evaluation Report (in Serbian language) | Evaluators must submit draft report for review and comments by all parties involved. The report needs to meet the minimum requirements specified in the annex of TOR. The grantee and key stakeholders in the evaluation must review the draft evaluation report to ensure that the evaluation meets the required quality criteria. | 15 February 2018 |
| 3 | Final Evaluation Report (in English language) | Relevant comments from key stakeholders must be well integrated in the final version, and the final report must meet the minimum requirements specified in the annex of TOR. The final report must be disseminated widely to the relevant stakeholders and the general public. | 26 February 2018 |

8. Evaluation team composition and required competencies

8.1. Roles and responsibilities of evaluator

For conducting final project evaluation, MDRI-S seeks for one **national evaluator**.

He/she will be responsible for undertaking the evaluation from start to finish and for managing the evaluation process under the supervision of evaluation task manager from the MDRI-S, for the data collection and analysis, as well as report drafting and finalization in English language.

8.2. Required competencies

To be selected, evaluator should fulfil the following requirements and have the following competencies and experience:

- Evaluation experience of at least five 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 with the focus on women and girls with disabilities;
- Specific evaluation experiences in the areas of ending violence against women and girls;
- Experience in collecting and analyzing quantitative and qualitative data;
- In-depth knowledge of gender equality and women's empowerment;

- A strong commitment to delivering timely and high-quality results, i.e. credible evaluation and its report;
- 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;
- Country experience and knowledge: in-depth knowledge of social protection system, protection of gender-based violence in custodial institutions in Serbia is required;
- Language proficiency: Serbian language and fluency in English language.

9. Management arrangements

| Name of group | Roles and responsibilities | Actual name of staff responsible |
|-------------------------|---|--|
| Evaluator | External evaluators/consultants to conduct an external evaluation based on the contractual agreement and the Terms of Reference, and under the day-to-day supervision of the Evaluation Task Manager. | External evaluator |
| Evaluation Task Manager | <p>Managing the entire evaluation process under the overall guidance of the senior management, to:</p> <ul style="list-style-type: none"> • lead the development and finalization of the evaluation TOR in consultation with key stakeholders and the senior management; • manage the recruitment of the external evaluators; • lead the collection of the key documents and data to be share with the evaluator at the beginning of the inception stage; • liaise and coordinate with the evaluator, the reference group, the commissioning organization and the advisory group throughout the process to ensure effective communication and collaboration; • provide administrative and substantive technical support to the evaluator and | <p>Biljana Janjic, Project Manager Maja Popovic, Project Assistant from MDRI-S</p> |

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| | <p>work closely with the evaluator throughout the evaluation;</p> <ul style="list-style-type: none"> • lead the dissemination of the report and follow-up activities after finalization of the report | |
| Commissioning organization | <p>Senior management of the organization who commissions the evaluation (grantee) – responsible for: 1) allocating adequate human and financial resources for the evaluation; 2) guiding the evaluation manager; 3) preparing responses to the recommendations generated by the evaluation.</p> | <p>Members of the management board of MDRI-S Dragana Ciric Milovanovic, Executive director Masa Pavlovic, Financial and administrative coordinator Snezana Lazarevic, Board member</p> |
| Reference group | <p>Primary and secondary beneficiaries, partners and stakeholders of the project who provide necessary information to the evaluator and to reviews the draft report for quality assurance;</p> | <p>Women with disabilities Service providers Protector of citizens (NPM) Civil society organizations Policy-makers (government officials and member(s) of the Parliament) External experts/consultants</p> <p>Final number and structure will be agreed at the beginning of the evaluation process</p> |
| Advisory group | <p>Focal point from the UN Women Regional Office and the UN Trust Fund Portfolio Manager to review and comment on the draft TOR and the draft report for quality assurance and provide technical support if needed.</p> | <p>Jelena Milovanovic, UN Women Regional Office Serbia Vesna Jaric, UN Trust Fund Portfolio Manager</p> |

10. Timeline of the entire evaluation process

This section lists and describes all tasks and deliverables for which evaluator(s) or the evaluation team will be responsible and accountable, as well as those involving the commissioning office, indicating for each the due date or time-frame (e.g., work plan, agreements, briefings, draft report, final report), as well as who is responsible for its completion.

| Stage of evaluation | Key tasks | Responsible | Number of working days required | Timeframe |
|------------------------------------|--|--|---------------------------------|--------------------------|
| Preparation stage | Preparing and finalizing ToR with key stakeholders | Commissioning organization and evaluation task manager | 10 | 1/09/2017 to 1/10/2017 |
| | Compiling key documents and existing data | | 7 | 1/10/2017 to 1/11/2017 |
| | Recruitment of external evaluator | | 3 | 1/11/2017 to 1/12/2017 |
| Inception stage | Briefings of evaluator, orienting evaluator | Evaluation task manager | 2 | 1/12/2017 to 01/01/2018 |
| | Desk review of key documents | Evaluator | 2 | 1/12/2017 to 01/01/2018 |
| | Finalizing evaluation design and methods | Evaluator | 1 | 1/12/2017 to 01/01/2018 |
| | Preparing an inception report | Evaluator | 2 | 1/12/2017 to 01/01/2018 |
| | Review Inception report and provide feedback | Evaluation task manager, Reference group, Advisory Group | 8 | 2/01/2018 to 10/01/2018 |
| | Submitting final version of Inception report | Evaluator | | 15/01/2018 |
| Data collection and analysis stage | Desk research | Evaluator | 2 | 15/01/2018 to 05/02/2018 |
| | In-country technical mission for data collection | Evaluator | 4 | 15/01/2018 to 05/02/2018 |
| Synthesis and reporting stage | Analysis and interpretation of findings | Evaluator | 2 | |
| | Preparing a draft report | Evaluator | 3 | 15/02/2018 |
| | Review of the draft report with key stakeholders for quality assurance | Evaluation task manager, Reference group, | 5 | 20/02/2018 |

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| | | Commissioning organization Board, Advisory group | | |
| | Consolidate comments and submit the consolidated comments to evaluator | Evaluation task manager | 2 | 22/02/2018 |
| | Incorporating comments and revising the evaluation report | Evaluator | 2 | 22/02/2018 to 26/02/2018 |
| | Submission of the final report | Evaluator | | 26/02/2018 |
| | Final review and approval of report | Evaluation task manager, Reference group, Commissioning organization Board, Advisory group | 2 | 28/02/2018 |
| Dissemination and follow-up | Publishing and distributing the final report | Commissioning organization led by evaluation manager | 5 | 01/03/2018 to 01/04/2018 |
| | Prepare management responses to the key recommendations of the report | Commissioning organization led by evaluation manager | 5 | 01/03/2018 to 01/04/2018 |
| | Organize learning events (to discuss key findings and recommendations, use the findings for planning of following year) | Commissioning organization | 7 | 01/04/2018 to 01/05/2018 |

11. Budget

The total budget for this assignment for the evaluator is USD 2,800 (gross), namely USD 1,500 for collection and analysis of monitoring data / review meetings with primary and secondary beneficiaries, and USD 1,300 for final evaluation report. MDRI-S and Evaluation Task Manager will provide premises and technical support in the evaluation process.

12. Application and selection procedure

Interested expert should send her/his cover letter and CV by **20 November 2017** at email addresses mdri.serbia@gmail.com and bjanjic@driadvocacy.org. Short-listed experts will be contacted during November, and the final decision will be made on **27 November 2017**.

9.2. Evaluation Matrix (Annex 4A)

| Evaluation criteria | Evaluation question | Indicators | Metode i tehnike | Izvori podataka |
|---------------------|---|--|--|--|
| Effectiveness | To what extent were the intended project goal, outcomes and outputs achieved and how? | <p>Perspective of women and girls with disabilities in custodial institutions on availability and accessibility of mechanisms for protection from violence in custodial institutions</p> <p>Number and nature of services available to women and girls with disabilities in custodial institutions</p> <p>Number and nature of legislations/procedures related to protection of women and girls with disabilities custodial institutions at national, provincial or local level adopted)</p> <p>Coherence of adopted legislations/procedures with CRPD and CEDAW</p> | <p>Document analysis</p> <p>Group interview with primary beneficiaries</p> <p>Interview with project team members</p> <p>Interviews with the consultants engaged in project</p> <p>Focus groups with service providers</p> | <p>Relevant strategies and policies</p> <p>Project documents (Baseline reports, project progress and final report, project publications)</p> <p>Transcripts/notes from interviews and focus groups</p> |
| | To what extent did the project reach the targeted beneficiaries at the project goal and outcome levels? How | Number of women and girls with disabilities in custodial institutions a) included in project activities, and b) who increased knowledge on mechanisms and services which are introduced or | <p>Document analysis</p> <p>Interview with project team members</p> | Project documents (Baseline reports, project progress and final report, project publications) |

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| | <p>many beneficiaries have been reached? ishoda? Koliko korisnika je dosegnuto?</p> | <p>improved during the project; and c) who addressed relevant bodies/institutions with complaints</p> <p>Number of secondary beneficiaries involved in project activities</p> <p>Level of information/opinion of secondary beneficiaries on the level of increase/change of their knowledge/attitudes and practices thanks to the project activities</p> | <p>Interviews with the consultants engaged in project</p> <p>Focus groups with service providers</p> <p>Interviews with key project stakeholders (relevant bodies/institutions representatives)</p> | <p>Transcripts/notes from interviews and focus groups</p> |
| | <p>To what extent has this project generated positive changes in the lives of targeted (and untargeted) women and girls in relation to the specific forms of violence addressed by this project? Why? What are the key changes in the lives of those women and/or girls? Please describe those changes.</p> | <p>Perspective of women and girls with disabilities in custodial institutions on availability and accessibility of mechanisms for protection from violence in custodial institutions</p> <p>Opinion of women and girls with disabilities in custodial institutions, project team members and secondary beneficiaries on:</p> <p>a) changes in lives of primary beneficiaries resulting from the project implementation;</p> | <p>Document analysis</p> <p>Group interview with primary beneficiaries</p> <p>Interview with project team members</p> <p>Interviews with the consultants engaged in project</p> <p>Focus groups with service providers</p> | <p>Project documents (Baseline reports, project progress and final report, project publications)</p> <p>Transcripts/notes from interviews and focus groups</p> |

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| | <p>What internal and external factors contributed to the achievement and/or failure of the intended project goal, outcomes and outputs? How?</p> | <p>Opinion and attitudes of project team members on factors that influenced project achievements at the level of goal, outcomes and outputs</p> <p>Opinion and attitudes of key project stakeholders - secondary beneficiaries on factors that influenced project achievements at the level of goal, outcomes and outputs</p> | <p>Document analysis</p> <p>Interview with project team members</p> <p>Interviews with the consultants engaged in project</p> <p>Focus groups with service providers</p> <p>Interviews with key project stakeholders (relevant bodies/institutions representatives)</p> | <p>Project documents (Baseline reports, project progress and final report, project publications)</p> <p>Transcripts/notes from interviews and focus groups</p> |
| | <p>To what extent was the project successful in advocating for legal or policy change? Explain why.</p> | <p>Number and nature of changed/improved/produced documents resulting from the project implementation</p> <p>Attitudes of key project stakeholders- secondary beneficiaries and project team members on success of the project in terms of advocacy</p> | <p>Document analysis</p> <p>Interview with project team members</p> <p>Interviews with the consultants engaged in project</p> <p>Focus groups with service providers</p> <p>Interviews with key project stakeholders (relevant</p> | <p>Policies/strategies/relevant documents improved/produced by relevant bodies/institutions,</p> <p>Project documents (project progress and final report, project publications)</p> <p>Transcripts/notes from interviews and focus groups</p> |

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| | | | bodies/institutions representatives) | |
| | To what extent was the project successful in motivating service providers to widen their programs and support women with disabilities? | <p>Number and nature of changes in programs and services for women and girls with disabilities in custodial institutions resulting from the project implementation</p> <p>Number of newly established services resulting from the project implementation</p> <p>Number and structure of service providers who improved their services/procedures resulting from the project implementation</p> <p>Perspective of the project team and service providers on project contribution in changing/improving services for women with disabilities who live in custodial institutions</p> | <p>Document analysis</p> <p>Interview with project team members</p> <p>Interviews with the consultants engaged in project</p> <p>Focus groups with service providers</p> | <p>Project documents (project progress and final report, project publications)</p> <p>Transcripts/notes from interviews and focus groups</p> |
| | | | | |
| Relevance | To what extent was the project strategy and activities implemented relevant in responding to the needs of women | The level of coherence between identified problems, project goals and activities | <p>Document analysis</p> <p>Interview with project team members</p> | Project documents (project progress and final report, project publications) |

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| | and girls with disabilities in custodial institutions? | Perspective of primary beneficiaries on quality and utility of activities they were involved in and on services they possibly used by the end of the project implementation | Interviews with the consultants engaged in project Interviews with primary beneficiaries | Transcripts/notes from interviews and focus groups |
| | To what extent do achieved results (project goal, outcomes and outputs) continue to be relevant to the needs of women and girls with disabilities in custodial institutions? | Perspectives of women and girls with disabilities in custodial institutions on the nature and scope of the project influence on their future plans Perspective of the project consultants and secondary beneficiaries who were in direct contact with primary beneficiaries on the nature and scope of the project influence on their future plans | Interview with primary beneficiaries Interview with project team members Interviews with the consultants engaged in project Focus groups with service providers | Project documents (project progress and final report, project publications) Transcripts/notes from interviews and focus groups |
| | | | | |
| Efficiency | How efficiently and timely has this project been implemented and managed in accordance with the Project Document? | Opinion of the project team members and relevant stakeholders on efficiency of the project coordination mechanisms Quality of reporting mechanisms and mechanisms for monitoring of activities and outputs Quality of the organizational structure at the level of the project team and at the | Document analysis Interview with project team members Interviews with the consultants engaged in project and with relevant project stakeholders | Project documents (project progress and final report, project publications) Transcripts/notes from interviews and focus groups |

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| | | <p>level of cooperation with partner institutions</p> <p>Existence of the mechanisms for monitoring and control of the project resources utilization</p> <p>Number and nature of measures undertaken to ensure efficient resources utilization</p> | | |
| | | | | |
| Sustainability | <p>How are the achieved results, especially the positive changes generated by the project in the lives of women and girls at the project goal level, going to be sustained after this project ends?</p> | <p>Estimated number of primary beneficiaries which are enabled to use information, mechanisms and services that resulted or were stimulated by the project implementation</p> <p>Estimated level of improvement of mechanisms for protection of women and girls living in custodial institutions from violence</p> <p>Estimated level of support provided by key stakeholders to prevent and protect women and girls with disabilities living in custodial institutions from violence</p> | <p>Document analysis</p> <p>Interview with project primary beneficiaries</p> <p>Interview with project team members</p> <p>Interviews with the consultants engaged in project and with relevant project stakeholders</p> <p>Focus group with service providers</p> | <p>Policies/strategies/relevant documents improved/produced by relevant bodies/institutions,</p> <p>Project documents (project progress and final report, project publications)</p> <p>Transcripts/notes from interviews and focus groups</p> |
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| Impact | What are the unintended consequences (positive and negative) resulted from the project? | Number and nature of unintended consequences (positive and negative) resulted from the project: a) At the level of national or provincial or local legislations/policies and practices b) At the level of service providers in terms of changes in service provision c) In terms of changes in information/knowledge and in terms of availability and accessibility of services addressing primary beneficiaries | Document analysis Interview with project primary beneficiaries Interview with project team members Interviews with the consultants engaged in project and with relevant project stakeholders Focus group with service providers | Project documents (project progress and final report, project publications) Transcripts/notes from interviews and focus groups |
| | | | | |
| Knowledge Generation | What are the key lessons learned that can be shared with other practitioners on Ending Violence against Women and Girls? | Nature and number of lessons learned which are related to: a) approaches in providing services to women and girls with disabilities in custodial institutions; b) advocacy component c) other | Document analysis Interview with project team members Interviews with the consultants engaged in project and with relevant project stakeholders Focus group with service providers | Project documents (project progress and final report, project publications) Transcripts/notes from interviews and focus groups |
| | Are there any promising practices? If | Nature and number of innovative/promising practices | Document analysis | Project documents |

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| | <p>yes, what are they and how can these promising practices be replicated in other projects and/or in other countries that have similar interventions?</p> | <p>Potential for multiplication of the project results</p> | <p>Interview with project team members</p> <p>Interviews with the consultants engaged in project and with relevant project stakeholders</p> <p>Focus group with service providers</p> <p>Interview with primary beneficiaries</p> | <p>(project progress and final report, project publications)</p> <p>Transcripts/notes from interviews and focus groups</p> |
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9.3. Annex 4B: Results Monitoring Plan with actual baseline and end line data

| A. Statement of Project Goal, Outcomes and Outputs | B. Indicators for measuring progress towards achieving the project goal, outcomes and outputs | C. Data collection methods | D. Baseline data | E. Timeline of baseline data collection | F. End line Data | G. Timeline of end line data collection |
|---|---|--|---|--|--|--|
| Project Goal | 1: Perspectives of women and girls with disabilities in custodial institutions about availability and accessibility of mechanisms for protection from custodial violence | Document analysis Group interview with primary beneficiaries Interview with project team members Interviews with the consultants engaged in project Focus groups with service providers | Only one woman reports to have knowledge of protection mechanisms (but unable to access it), while 12 women with intellectual and psychosocial disabilities have never heard of protection mechanisms while they have been institutionalized. Not one woman reported that she had known about the Internal team for protection of violence. | PY 1 PQ2 | The situation on availability and accessibility of protection mechanisms has not been significantly improved, except in the aspect of information available to women in custodial institutions: 21 women (among them 13 interviewed by the evaluator) who were involved in the project declare increased knowledge on available mechanism but do not use them | January 2018 |
| | 2: Number and type of services available to women and girls with disabilities placed in custodial institutions | Document analysis Interview with project team members Focus groups and questionnaire for service providers Interviews with key project stakeholders (relevant bodies/ institutions representatives) | None of the service providers reported women with disabilities addressed them for custodial violence. 120 women with disabilities used psychological and legal aid services, but the number might be higher because disability is not recorded as a personal characteristic. | PY 1 PQ1 | By the end of the project, 3 CSOs reported concrete initiatives in adjusting their services for women. According to the project reports, two service providers decided to create programs to support women with mental disabilities who survive custodial violence. Based on evaluation questionnaire with 13 service providers and focus group and interviews with representatives of 6 service | January 2018 |

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| | | | | | providers ⁶⁹ , one NGO involved 10 women into their psychological workshops, one NGO informed their beneficiaries that they can refer their women relatives to this organization if a women live in custodial institution, and one NGO created plan together with custodial institution to adjust their psychological counselling service, SOS hot line and gynecological examinations for women who live in custodial institution. By the end of the project, only 1 of these organizations actually provided service to women in custodial institution, and 2 are in the process of adjustment | |
| Outcome 1 | Indicator 1.1: Number and type of policy provisions (provincial, national, sectoral level) having reference to protection from violence of women with disabilities in custodial institutions (by the end of project) | Document analysis Interview with project team members Interviews with the consultants engaged in project and key stakeholders | CRPD Concluding observations to Serbia was the only document having clear references and recommendation to protection from VaW with disabilities in custodial institutions. 2015 Annual reports of the Commissioner for Protection of Equality and the Protector of citizens also have such references, but they are not regarded as legislation. | PY 1 PQ1 | There were 2 policy provisions that resulted directly from the project implementation. 3. Adopted changes of the Criminal Code: provision for "Sexual intercourse with a helpless persons" - the prison sentence equated with criminal act of "rape." 4. Draft National Strategy on Improving the Position of Persons with Disabilities by 2020 and accompanied Action Plan (although not adopted yet) | December 2017-February 2018 |
| | 1.2: Types of provisions in new/revised policies are in compliance with | Content analysis of new/revised policies | National strategy on gender equality with Action plan (2016-2020) takes into account | PY 1 PQ1 | 3. Adopted changes of the Criminal Code: provision for "Sexual intercourse with a helpless persons" - the prison sentence equated with criminal | January-February 2018 |

⁶⁹ Among them 2 custodial institutions

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| | CRPD and CEDAW | | <p>intersectional discrimination of women with disabilities, but specific measures for protection of women with disabilities in custodial institutions are not listed in the strategy.</p> | | <p>act of "rape." - changes are now in line with the CRPD.</p> <p>4. Draft National Strategy on Improving the Position of Persons with Disabilities by 2020 and accompanied Action Plan has important references in line with CRPD, CEDAW, and CAT but operational goals and measures are still too general.</p> <p>These documents (the second one not adopted) refer to women with disabilities but not particularly to women with disabilities in custodial institutions neither violence against them. The Criminal Code (national legislation) has changed and previously, so-called "sexual intercourse with helpless person" was a criminal act with lower prison punishment than criminal act of rape, but the amended legislation now provisions the same prison punishment for these two criminal acts. Although MDRI-S advocated that rape of a woman with disabilities be provisioned as qualified rape with higher prison sentence, this amendment was not approved. As for the National Strategy on Improving Position of Persons with Disabilities by 2020, Draft Action plan has two important measures: 1) mainstreaming gender in disability policies, and 2) protection from violence, abuse, and exploitation. MDRI-S find these references as important but not operationalized enough and without concrete implications on the position of women with disabilities in custodial institutions.</p> <p>There were also responses in terms of acknowledgement and commitment to future cooperation provided by Office for human and minority rights (forced treatments), Commissioner for Protection of Equality, Ministry of Justice (on changes</p> | |
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| | | | | | of Criminal Code), National Preventive Mechanism for Torture (on monitoring gender-based violence in custodial institutions and publishing report on this issue). | |
| Outcome 2 | 2.1: Number of women with disabilities who filed a complaint to authoritative institution/body on prevention from violence | Project documents analysis Interviews with primary beneficiaries, project team and service providers | | PY 1 PQ1 | 0 Although the level of information among project primary beneficiaries was increased, they tend not to fill complaints, being concerned about possible consequences of such acts | January 2018 |
| | 2.2: Number and type of services provided to women with disabilities by service providers participating in the project | Project documents analysis (baseline study) Interviews with primary beneficiaries and project team Focus groups and interviews with service providers Questionnaire for service providers | The contact was established with 13 service providers. All 13 reported providing services (psychological individual and group support, free legal aid) to women with disabilities in the previous year (about 120 women out of 6000 women-beneficiaries), but none of them contacted in regard to custodial violence experienced in the institution. | | In total, 1 new service was provided, and 4 initiatives/plans for development of new services were created: <ul style="list-style-type: none"> • OUT OF CIRCLE BELGRADE organization involved 10 women with disabilities in custodial institution in Belgrade into the three-month cycle of their psychological workshops for women with disabilities in custodial institution in Belgrade, and they did the workshops in Also, they provided psychological counselling for 1 woman with disability from the custodial institution in Belgrade. • ...OUT OF CIRCLE VOJVODINA is one of the service providers that took concrete measures: The representatives of this organization attended MDRI-S training twice, and the made concrete plan by the end of the training sessions together with women with disabilities and staff employed in institution in Čurug. They agreed to work on adaptation of their SOS service | December 2017- February 2018 |

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| | | | | | <p>for women victims of violence by informing women in institution about the existence of the SOS hotline and types of services they can provide for them. Also, they agreed with the institution staff to allocate one laptop on a private place in the institution in order to open online connection available for women with disabilities who could contact the via Skype, but also to ensure that women can contact them via phone. This organization pointed out that they concluded through direct contact with women with disabilities who were involved in the project that they, beside support as victims of violence, need psychological support in situation when they have other problems (for example, one women lost close family member and was in crisis for months-she needed psychological support and counselling in order to process her feelings related to the lost she experienced). Therefore, they agreed with the institution staff that the provide transport of women with disabilities to the facilities of OUT OF CIRCLE Vojvodina in order to involve them in face to face counselling services. So far, the institution in Čurug took women with disabilities to the local health center in municipality of Žabalj but they were not satisfied by the quality of health service. Since OUT OF CIRCLE VOJVODINA organizes</p> | |
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| | | | | | <p>gynecological examinations, they also agreed to provide preventive examinations in Novi Sad health center, and the transport will be provided by the institution. At last, but not least, this organization made concrete plan with timelines on organization of education workshops with the institution staff about. They also took small information campaign on their web portal, by publishing two articles about the topics that MDRI-S project put on the agenda.</p> <ul style="list-style-type: none"> • One service provider (NGO “Jeleče”) took steps to inform public in their municipality, especially their existing service users, to motivate them to address organization if they have women relatives who are placed in institutions. • The employees in institution in Čurug who were involved in training for service providers claimed that they initiated process of analysis of their own procedures in the institution and that they will work on the improvement of procedures for prevention and protection of women with disabilities from violence. They also initiated horizontal learning among staff in their institutions. Since these individuals have established two local CSOs, during interviews they gave to the external evaluator, they are terminated to work on both sides: as CSOs working on advocacy for deinstitutionalization and within | |
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| | | | | | <p>institutions with their beneficiaries and colleagues.</p> <ul style="list-style-type: none"> • Representative of institution in Stara Moravica (Othon) claim that they initiated reorganization of the system of procedures for prevention of violence, and they decentralized the work of the professional team in a way that each pavilion has dedicated team of staff members to talk with beneficiaries about violence but also all other needs of their beneficiaries. She also claimed that they made available and transparent information on contacts of the internal team for prevention of violence for beneficiaries. | |
| Output 1.1. | 1.1.1. Number of policy-makers exposed to project activities on human rights and forms of violence against women with disabilities in custodial institutions | Review of project documents, Content analysis of new/revised policies | 0 | PY 1 PQ1 | <p>Government officials: 45, MPs: 78</p> <p>According to the documents reviewed during the external evaluation, and given by interviewed persons (MP, consultants, project team), there are significant number of policy makers that were exposed to the project activities: National Office for Human and Minority Rights, Ministry for Labor, Employment, Veterans and Social Affairs, Ministry of Justice, Republic Institute for Social Protection, Provincial Institute for Social Protection, Protector of Citizens, Commissioner for Equality of the RS, MPs-members of the Parliamentary committee for human and minority rights and gender equality; and Parliamentary committee for labor, social affairs, social inclusion and poverty</p> | December 2017-February 2018 |

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| | | | | | reduction, Social Inclusion and Poverty Reduction Unit (SIPRU). | |
| | 1.1.2. Number and type of responses received from policy-makers | Review of project documents, Content analysis of new/revised policies | 0 | PY 1 PQ1 | <p>1. Adopted changes of the Criminal Code: provision for "Sexual intercourse with a helpless persons" - the prison sentence equated with criminal act of "rape." - changes are now in line with the CRPD.</p> <p>2. Draft National Strategy on Improving the Position of Persons with Disabilities by 2020 and accompanied Action Plan has important references in line with CRPD, CEDAW, and CAT but operational goals and measures are still too general.</p> <p>Acknowledgement and commitment to future cooperation provided by Office for human and minority rights (forced treatments), Commissioner for Protection of Equality, Ministry of Justice (on changes of Criminal Code), National Preventive Mechanism for Torture (on monitoring gender-based violence in custodial institutions and publishing report on this issue).</p> | December 2017-February 2018 |
| Output 1.2. | 1.2.1. Existence of Guidelines for protection from violence against women with disabilities in custodial institutions | Review of project documents | Zero | PY1 PQ1 | In the December 2017, the "Guidelines for protection from violence against women with disabilities in custodial institutions" were finalized by external expert engaged by the project | December 2017-February 2018 |
| | 1.2.2. Status of the Guidelines | Review of project documents | No guidelines | PY1 | The "Guidelines for protection from violence against women with disabilities in custodial institutions „ are uploaded on MDRI-S web site by the end of February | December 2017-February 2018 |

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| | | | | | 2018 and available on https://www.mdri-s.org/wp-content/uploads/2018/02/Smernice-knijzni-blok.pdf | |
| Output 1.3. | 1.3.1. % of training participants who report better understanding and knowledge about the rights and specific forms of VaW with disabilities in custodial institutions | Review of project documents Analysis of the training reports Evaluation questionnaire for service providers, interviews and focus group with service providers | 10% | PY1 | <p>According to the evaluation findings, all training participants who responded to the evaluations survey (18 service providers) reported better understanding and knowledge.</p> <p>As per specific questions in training evaluation forms before and after the training, changes in their knowledge and attitudes were measured:</p> <p>Pre-training evaluation forms of service providers show that training participants generally support claims that women with disabilities in institutions are more exposed to specific forms of violence, due to the fact that they are institutionalized (83,45% of respondents), while post-training evaluation shows increase in the understanding of this issue: 92,76% of respondents.⁷⁰</p> <p>In pre-training evaluation, 64,43% of respondents don't agree that women with disabilities are equally exposed to the violence as men with disabilities which shows significant level of awareness on the risk/fact of gender related violence, and after the training this percent increased to 88,33% which can be directly related to the results of the training.</p> <p>Before the training, 85,5% of training participants think that human rights of PwDs in Serbia are generally respected. Post-training evaluation showed that there was no significant improvement in the attitude towards respect of human</p> | December 2017-February 2018 |

⁷⁰ This question was evaluated for 59/54 respondents since the question analysis was not included in the training report 4

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| | | | | | <p>rights of PwDs in Serbia: almost equal percent of participants think that human rights of PwDs are generally respected: 85%.</p> <p>The training made slight effect to their attitudes toward risk of violence that women with disabilities face with, in comparison to women without disabilities: in both (pre-training and post training) evaluation forms the percent's of confirming answers was high: 91,5% (pre-training) and 94,5% (post-training).</p> <p>Upon the training, 86% of training participants who responded the evaluation questions claimed that they are completely clear about position of women with disabilities in institutions, but also, 82% of the emphasized that they need additional education on providing services for women with disabilities.</p> | |
| | 1.3.2. Number and type of NGO/NPM reports having reference to violence in custodial institutions | Review of project documents Content analysis of the available public reports and documents | NPM reports has general reference to violence, but not specific about VaW with disabilities in custodial institutions | PY1 PQ1 | <p>Total # according to the MDRI-S project reports: 8</p> <ul style="list-style-type: none"> • 2 individual opinions of NPM for particular custodial institutions; reference in the annual report of Protector of Citizens⁷¹, • reference in Human Rights in Serbia 2016 report of Belgrade Centre for Human Rights⁷², and • 4 individual opinions and recommendations for 4 custodial institutions about violence issued by NPM (the reports from the visits to Institution for adults with intellectual disabilities Othon in | December 2017-February 2018 |

⁷¹ http://www.ombudsman.rs/attachments/article/5191/Introduction_2016%20Annual%20Report.pdf

⁷² <http://www.bgcentar.org.rs/bgcentar/wp-content/uploads/2013/04/Ljudska-prava-u-Srbiji-2016.pdf>

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| | | | | | Stara Moravica ⁷³ , Institution for adults and elderly “Gvozden Jovančičević” in Veliki Popovac ⁷⁴ , Institution for adults Kulina ⁷⁵ , Institution for persons with sight disabilities “Zbrinjavanje” in Pančevo ⁷⁶). | |
| | 1.3.3. Number and type of recommendations issued by the NPM | Review of project documents Content analysis of the available public reports and documents | NPM reports have general reference to violence, but not specific about VaW with disabilities in custodial institutions | PY1 PQ1 | NPM had specific reference to GBV in 2 custodial institutions (individual reports on institutions) - one about administration of contraceptives without consent (see footnote reference 17. page 12-13), one about prohibiting isolation of women (see footnote reference 18, page 34). There is also one report/reference to transformation of the institution Othon ⁷⁷ where grave violation of rights was recognized. The report contains 17 conclusions with concrete recommendations that refer to violation of the rights of persons placed in the institution; related to health protection rights, isolation and restraints, right to privacy etc. | December 2017-February 2018 |
| Output 2.1. | 2.1.1. Number of women participating in the project exposed to information about the protection measures | Review of project documents Interview with the project team | Zero | PY1 PQ1 | According to the project reports, in total 110 women with disabilities were exposed to information about the protection measures: 13 women were informed directly during interviews for the purpose of the baseline study together with women involved in 3 group interviews (around 30 of them in total according to | December 2017-February 2018 |

⁷³ <http://npm.rs/attachments/article/712/Dom%20Otthon%20final.pdf>

⁷⁴ <http://npm.rs/attachments/article/676/Izvestaj%20Dom%20V.%20%20Popovac.pdf>

⁷⁵ <http://npm.rs/attachments/article/675/Izvestaj%20Dom%20Kulina%203.pdf>

⁷⁶ Report on monitoring visit to Institution for persons with disabilities “Zbrinjavanje” in Pančevo conducted in November 2016: <http://npm.rs/attachments/article/677/Izvestaj%20Dom%20Zbrinjavanje%20Pancevo.pdf>

Report on monitoring visit to Institution for adult persons with disabilities in Kulina conducted in July 2016: <http://npm.rs/attachments/article/675/Izvestaj%20Dom%20Kulina%203.pdf>

⁷⁷ <http://npm.rs/attachments/article/712/Dom%20Otthon%20final.pdf>

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| | | | | | the project coordinator), 21 women were involved in the workshops on GBV protection mechanisms and in the workshops in which they discussed about content of the easy-to read and easy-to-understand materials, 6 women were involved in trainings for service providers and presentations, and approx. 70 women were informed about GBV and protection mechanisms via service providers (MDRI-S distributed printed materials about violence and protection mechanisms via employees in custodial institutions). Since some of these women were involved in more than one activity, the total sum of primary beneficiaries is not simple addition of individual figures, but the total number is calculated from the project reports. | |
| | 2.1.2. Perspectives of women participating in the project about available mechanisms | <p>Review of project documents</p> <p>Interview with the project team</p> <p>Interview with women with disabilities in custodial institutions</p> | <p>Zero:</p> <p>Data about perspectives of women with disabilities in custodial institutions have never been collected</p> | PY1 PQ2 | <p>Evaluation interview with the group women with disabilities in custodial institutions was conducted in January 2018, with 5 women. Among them, 4 of them are living in supported living facilities and one of them is still living in the institution. Their perspective has changed in comparison to the baseline data in following aspects: they are aware on being exposed to custodial and GBV, but due to deep isolation and maltreatment, they still lack full awareness and trust (justified) in protection mechanisms. Namely, they know that they can address social/welfare workers in their institution, they know that there are people in national institutions that are obliged to provide support to them, but are not fully aware on potential benefits. Objectively, the potential benefits are very few because of lack of transparency and accessibility of these</p> | December 2017-February 2018 |

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| | | | | | mechanisms, and consequently, their low availability. | |
| Output 2.2. | 2.2.1 % of service providers who participated at the training have better knowledge about disability-specific measures | Review of project documents Interview with the project team Focus group , interview and questionnaire for service providers | 10% | PY1 PQ2 | <p>Please refer to elaboration of the indicator 1.3.1. and in addition it can be emphasized that according to the training reports 80% of training participants claimed to be more informed and have better understanding on specific position of women in custodial institutions comparing to the position of other women with disabilities and PwDs in general. Also, the number of those who believe that PwDs should not be placed in institutions increased by 13,5%.</p> <p>According to the evaluation survey with service providers - training participants, 100% of respondents to the questionnaire claimed that there is high awareness on specific measures needed to be taken in order to prevent and protect women with disabilities from gender based and custodial violence: the training effect was still strong in January 2018 when they responded about their impressions and changes in their knowledge. The most permanent insights and knowledge reported in questionnaires were:</p> <ul style="list-style-type: none"> • Knowledge on various and specific forms of violence that women with disabilities in custodial institutions are exposed to, inhuman living conditions • Awareness on absence of deinstitutionalization process in our country, as well as absence of power, political will of the system to protect women with disabilities in custodial institutions from violence. • The fact that, even when women with disabilities in custodial institutions recognize | December 2017-February 2018 |

| | | | | | | |
|--|--|--|------|------------|--|-----------------------------|
| | | | | | <p>their exposure to violence, they have no access to support and protection</p> <ul style="list-style-type: none"> Insight into the fact on the level of ignorance among policy makers'/government officials, service providers and public in general about the situation of women with disabilities in custodial institutions. | |
| | 2.2.2. Number and type of programs developed for women with disabilities | <p>Review of project documents</p> <p>Interview with the project team</p> <p>Focus group, interview and questionnaire with service providers</p> | 0 | PY1 PQ2 | <p>Please refer to elaboration of Outcome Indicator 2.2: <u>One organization developed and provided concrete service</u> (psychological workshops with 10 women with physical disabilities in custodial institution in Belgrade and individual psychological counselling for one woman who lives in the same institution).</p> <p><u>Four service providers</u> (one CSO and 2 custodial institutions) made <u>concrete plan and preparatory activities</u> to improve/develop programs for women with mental disabilities in custodial institutions, and one CSO shared information among their service users to address them if they have relatives – women with disabilities in custodial institutions.</p> | December 2017-February 2018 |
| | 2.2.3. Number of women survivors of custodial violence using newly-developed service | Review of project documents | Zero | PY1 PQ2 | <p>11 by one service provider, 21 by MDRI-S:</p> <p>The representative of OUT OF CIRCLE BELGRADE (CSO that participated training for service providers) informed evaluator⁷⁸ that they developed a new program (3-months cycle of psychological workshops) for 10 women with disabilities placed in custodial institution in Belgrade</p> | December 2017-February 2018 |

⁷⁸ In evaluation questionnaire distributed to service providers who participated training and additional clarification interview conducted with one representative of the organization

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| | | | | | <p>(Bežanijska kosa) into the Also, 1 woman from the same custodial institution was coming to the individual psychological counselling into the OUT OF CIRCLE BELGRADE facilities but stopped because of the lack of transport.</p> <p>According to the MDRI-S report, 21 women used empowerment workshops provided by MDRI-S. This service was provided by MDRI-S during the project</p> | |
|--|--|--|--|--|---|--|

9.4. Annex 4C: Template for Beneficiary Data Sheet

| Beneficiary group | | The number of beneficiaries reached | |
|--|--------------------------------|-------------------------------------|----------------------|
| | | At the project goal level | At the outcome level |
| Women/girls with disabilities | | 115 | 110 |
| Primary Beneficiary Total | | 115 | 110 |
| Civil society organizations(including NGOs) | Number of institutions reached | | 100 |
| | Number of individuals reached | | 86 |
| Government officials (i.e. decision makers, policy implementers) | | | 45 |
| Parliamentarians | | | 78 |
| Social/welfare workers | | | 23 |
| Secondary Beneficiary Total | | | 332 |

9.5. Data Collection Instruments

Guide for The Group Interview with Primary Beneficiaries

The aim of the interview:

Get insight into the level of empowerment of women and girls with disabilities in custodial institutions/have experience of living in custodial institutions, in terms of information, knowledge and use of protection mechanisms

Target group: women with disabilities who have experience of living in custodial institutions; women with disabilities that were interviewed for the base-line, women who were involved in the workshops and trainings for service providers

Number of participants: 5-7

For the purpose of interviewing of primary beneficiaries, the evaluator will consult MDRI-S guide on ethics and safety that was developed during the project.

Specific objectives of the interview:

- Better understanding of the effects, benefits and/or obstacles that women with disabilities had related to the benefiting from the project
- Get recommendations for increasing of availability and accessibility of services for women with disabilities in custodial institutions

Topics to discuss:

1. Knowledge about the project
2. Assessment of project relevance for women with disabilities in custodial institutions
3. The current situation regarding the availability of protection services
4. Assessment of the impact, benefits and/or obstacles for women with disabilities related to the acquisition of benefits from the project and project results
5. Get recommendations for increasing the accessibility and availability of services for women from vulnerable groups

Introduction:

- Introduction of the evaluator
- Introduction of women participating in the interview
- Introduction of the purpose of the interview:

This meeting is related to the MDRI-S project *“Deinstitutionalize and End Violence against Women with Disabilities in Custodial Institutions”*. You remember that the project aimed to improve mechanisms and measures to end violence against women in custodial institutions and ensure that measures target intersectional discrimination. The expected project results were that women with disabilities in custodial institutions are better protected from violence, throughout raised awareness about the scope and forms of violence perpetrated against them, formulated policy responses, improved legislation and policies,

and improved services to women survivors of violence by incorporating gender and disability-specific measures. This interview will help that MDRI-S better work in the future on prevention and protection of women from violence. Your recommendations will be of great importance. Everything you say will be carefully kept, your names will not be published anywhere and if you agree, the conversation will be recorded. After I finish the report, the record will be erased. Please, do sign your consent so that we have joint understanding on the way we are going to work and that I have obligation to conduct this conversation with you according to the promised above.

Questions:

1. How familiar are you with this project that we are discussing today (*remind them if necessary on key activities that they were involved*)? In what activities did you specifically participate? What is your opinion on the project, in general, as well as the activities in which you participated?
 2. What in particular was the most useful to you (trainings, printed materials, informal meetings, workshops)? How?
 3. Do you think that the trainings and workshops were useful to you? What did you like the most about them?
 4. What do you think you learned during the training/workshop (*refer to the questions from Goal baseline, reminding them*)?
 5. *For women who participated training for service providers:* What, on the other hand, do you think professionals (social workers, people from non-governmental organizations etc.) learned from you during the training that you participated in together? What did you say to them? How did that look? Would you share with me some of your examples?
 6. Did you in some way apply the knowledge and information acquired during the project (*again refer to the questions from the Goal baseline*)?
 7. Have you communicated some of the information and new skills that you learned to your friends/friends in institutions? If yes, what and how? How did they react? How did the employees in the institutions/ organizations that provide you with services respond? If not, why?
 8. What do you think, is there any need for continuing workshops? What topics would you need to include or deepen in the workshops?
 9. Is there anything else you would like to be involved, except workshops? What are the activities you like in particular? What kind of services do you like (reminding them on some of the known services) which could help you to protect you from violence, or to speak against violence?
 10. What do you expect from the MDRI-S team in the future, what can they provide to you? What do you expect from the professionals who provide support to you?
 11. What are your plans for your future life-what would you like to do? If something prevents you from achieving this, what is it? How do you think it could be solved, who should do it and how?
- Do you have any other comments, suggestions or questions? Would you like to share something more with me?

Closing of the interview:

Respecting the willingness of the interviewed to participate in the conversation. Informing about continuing activities, giving feedback and information on using data. Take contacts and ask for an open option to contact again if additional information is needed.

Guide for The Focus Group with Service Providers

The main objectives of the focus group:

1. Assessment of the improvement of the quality of service providers for women/women with disabilities in terms of changing attitudes/practices/behaviors when it comes to women with disabilities in custodial institutions.
2. Getting recommendations for future activities in combat violence against women with disabilities in custodial institutions

Participants: Service providers who were involved in the project training activities. Among them, 5 CSO representatives and 2-3 public institutions representatives

Duration: 90-120'

Introduction (15-20 '):

- Welcome by moderator: *Welcome to the focus group organized as part of the evaluation of the project "Deinstitutionalize and End Violence against Women with Disabilities in Custodial Institutions" implemented by MDRI-Serbia with the financial support of the UNTF.*

The project aimed to improve mechanisms and measures to end violence against women in custodial institutions and ensure that measures target intersectional discrimination. The expected project results were that women with disabilities in custodial institutions are better protected from violence, throughout raised awareness about the scope and forms of violence perpetrated against them, formulated policy responses, improved legislation and policies, and improved services to women survivors of violence by incorporating gender and disability-specific measures.

The strategies used in the implementation of the project were public advocacy in the prevention of violence, the creation and improvement of multi sectoral referral systems for improving service delivery, support for implementation of multi sectoral policies and national action plans, conducting research, data collection and analysis to strengthen institutional responses.

Service providers are an important link in establishing a sustainable system for protecting women with disabilities from violence, especially in custodial institutions, and because of that we invited you to attend this focus group and to help assess the success of the project in which you participated. Thank you in advance for your contribution.

Introduction of participants

- Individual introductions
- Defining rules of the focus group and agreement on common understanding of these rules.

Asking for the consent to record the focus group, emphasizing that the recorded material will be erased after the report is written, and that their participation will be reported only through their roles on the project i.e. they will remain anonymous.

Questions

I

- What is your opinion on the project, in general, as well as about the activities in which you participated?
- Do you think that the trainings were helpful? What did you like most about training?
- Keeping in mind your professional capacities, what do you think, what are the consequences / results of the training?
- Do you see some obstacles that existed in the implementation of the training?
- What do you think, is there any need for continuing training? What topics should be included or extended by trainings? Which way of learning, besides training, would you prefer?

II

Now we would like to hear some information related to your everyday work and the work of your organization / institution while providing services to women with disabilities.

- Have you started to think differently about some aspects of the lives of women with disabilities in general, and women with disabilities living in custodial institutions after taking part in training or some other project activity within this project? If so, what was that? Have you and how have you communicated with your colleagues? If not, why?
- Did you initiate some changes in your organization after taking part in the training? If so, what were the changes? How did other colleagues respond to these initiatives? How did the beneficiaries react to the changes? If you have not initiated them, why, what prevented you?
- Have you and in what way specifically worked to improve some of the mechanisms for protecting women with disabilities from violence within your organization? If not, why?
- How, after training, do you ensure the accessibility of your services to women with disabilities? Have you developed programs for reaching women with disabilities? If so, what are the programs? If not, do you ever think to start them?

III

- Given the amount of information you have on the project, what is your attitude about the benefits that women with disabilities in custodial institutions have since implementing the project? Do you have an example of your practice that you can claim? Did this project lead to any changes in the lives of women with disabilities living in custodial institutions?⁷⁹ What kind?
- If you do not have a concrete insight into benefits, what is your view on the potential benefits that program of empowering women with disabilities, trainings & workshops and advocacy can bring to women with disabilities?
- What do you think is the greatest success of this project? What external factors, in your opinion, contributed to the success of this project?

Closing of the focus group

Thank and appreciation for their time and contribution. Keep contact of the participants in order to open space for potential additional questions, and feedback on evaluation.

⁷⁹ Being aware that many of service providers for women with disabilities with experience of living in custodial institutions or still live in these institutions, are public custodial institutions established by the government

Guide for The Interview with Key Project Actors

Objectives of organizing interviews:

1. Assessment of the effects of the project in the advocacy component and contribution to the improvement of protection women with disabilities in custodial institutions against violence.
2. Getting recommendations for future activities in combat violence against women with disabilities in custodial institutions

Duration: up to 60'

Participants

- External consultants on the project who will give both, external but also internal perspective from the aspect of associates who were engaged by the project team, on the effects of project activities on women with disabilities and on the effects of the advocacy (3 persons)
- Government officials: Representatives of the key public institutions: Coordination body for gender equality (1 person), the Office for Human and Minority Rights (1 person), member of NPM (1 person).
- Members of the Parliament (2).

Total number: 9

Introduction

Introduction of evaluator, introduction of the project (general information)

Thank you for your decision to talk to me about the project "Deinstitutionalize and End Violence against Women with Disabilities in Custodial Institutions" implemented by MDRI-Serbia with the financial support of The UNTF. As you know, the project aimed to improve mechanisms and measures to end violence against women in custodial institutions and ensure that measures target intersectional discrimination. The expected project results were that women with disabilities in custodial institutions are better protected from violence, throughout raised awareness about the scope and forms of violence perpetrated against them, formulated policy responses, improved legislation and policies, and improved services to women survivors of violence by incorporating gender and disability-specific measures. I am looking forward to hear from you your opinion and experiences, as well as recommendations that will help MDRI-S to plan their future activities towards prevention and protection of women with disabilities in custodial institutions from violence

Emphasizing that all information shared with evaluator will remain anonymous, and that their privacy will be safe: their participation will be reported only through their roles on the project or in the institution/organization they come from.

Specific objectives of the interview:

- Find out if there were any changes in the context - the attitudes and practices of decision-makers and policy makers when it comes to violence against women with disabilities in custodial institutions, came out as a result of the project

Topics to discuss:

1. Project activities in which they were involved and assessment of their effects
3. Assessment of the current situation regarding violence against women with disabilities in custodial institutions at the national / potentially provincial⁸⁰ level
4. Recommendations

Questions

1. MDRI-Serbia conducted a project for the last 2 years, the main topic of which is violence against women with disabilities in custodial institutions. How much and what do you know about this project? How did you / your institution have been involved / linked to the project?
2. For Government officials, members of parliament and NPM: Do you have the impression that in the past period (two years) knowledge and awareness about violence against women with disabilities in custodial institutions has increased in Your institution? In what way? What is the contribution of the Project to this increase in knowledge? What was particularly good, and what is not in terms of the influence of the project on increasing knowledge and awareness?
3. How do you generally see the role of national and provincial authorities as well as independent bodies in reducing violence against women with disabilities in custodial institutions?
4. How do you assess the efforts of your institution and the results achieved in preventing and reducing violence? According to your knowledge, what was done so far done by your institution? What is the contribution of the project to the efforts of your institution? Can you give specific examples?
5. What was your role in those actions? Were there any changes in your practices, did you work on changes to some of the procedures and/or documents? Have you used the resources (products) that the project made available (documents, surveys ...), which and how?
6. According to your knowledge, how do you assess the capacities and motivation of custodial institutions and professionals working in them to work on improving practices in preventing and protecting women with disabilities against the violence in custodial institutions? How much, according to you, this project contributed to this and in what way? Please explain? What, in your opinion, would have required these practices to be more effective? Which, in your opinion, are the main obstacles to making this process even more efficient?
7. Do you think positive changes (if any) will be able to last / survive regardless of external support/project support? If it will be able, how? If it can not, why? How would your institution help to ensure the sustainability of the changes that have so far occurred?
8. What, in your opinion, should be done in the next few years in order to continue work on preventing and reducing violence against women with disabilities in custodial institutions and in general? Who

⁸⁰ Provincial level: the level of the Autonomous Province of Vojvodina, northern region of the Republic of Serbia with 2 million population and provincial government.

should be involved and how? How do you see your role and role of your institution in this process? What are the main barriers to that?

9. How would you assess the approach that this project has applied in public advocacy when it comes to protecting women with disabilities in custodial institutions from violence? What would you particularly like to be successful? Would something else have to be done to make the success of advocacy initiatives greater? What, how?

10. The same question as 9: to assess approaches in capacity building of service providers, and empowering of women with disabilities.

Do you have any other comment, proposal or question regarding violence against women with disabilities in custodial institutions; would you like to share something with us?

Closing of the interview

Thank and appreciation for their time and contribution. Keep contact of the interviewed person in order to open space for potential additional questions, and feedback on evaluation

Guide for Interview with the Members of the Project Team

Objectives of organizing interview:

1. Assessment of the effects of the project in all project components.
2. Getting recommendations for continuing activities to combat violence against women with disabilities in custodial institutions

Duration:

Individual interview option: approx 60 min

Group interview option: approx 120 min

Participants: Project team members (project coordinator, project assistant, financial manager) and also other staff of the MDRI-S who were involved in some of the project activities (executive director, recently employed new associate) Number: 5 persons

Specific objectives of the interview:

- Find out if there were any changes in the context - the attitudes and practices of decision-makers and policy makers when it comes to violence against women with disabilities in custodial institutions, came out as a result of the project
- Find out if there were any changes in the attitudes / knowledge and behavior of service providers / professionals when it comes to violence against women with disabilities in custodial institutions, came out as a result of the project
- Find out what experiences and lessons learned about project design and the management aspect of the project
- Get recommendations for further work

Topics to discuss:

1. Current situation regarding violence against women with disabilities in custodial institutions at the national / provincial level
3. Changes in the quality of life of women with disabilities at the individual level (as far as possible)
4. What should be done, who and how - recommendations

Questions:

1. Do you have the impression that the knowledge and awareness on violence against women with disabilities in custodial institutions have increased in the past two years? How do you assess: which institutions/bodies have the biggest benefit of your project? In what way, in what sense? Could the effects on some institutions/bodies be greater/different? What was particularly good, and what was not in terms of the influence of the project on increasing knowledge and awareness?
2. How would you evaluate the effects of your project on informing women with disabilities in custodial institutions when it comes to protection against violence in general, the mechanisms and services that are available to them (if any)? What exactly, from your experience, has changed? What would you do

differently in the coming period when the work on informing and educating women with disabilities in custodial institutions?

3. How would you evaluate the effects of your project on the information of service providers / professionals when it comes to protecting women with disabilities in custodial institutions from violence? What exactly, from your experience, has changed? What would you do differently in the coming period when it comes to work on information and education of service providers?

4. How would you assess the approach that your project has applied in public advocacy when it comes to protecting women with disabilities from violence? What would you particularly find as successful? Can you give specific examples of the effects of the project on changes in the policies and practices of decision-makers / policy-makers. Would something else have to be done to make the success of advocacy initiatives greater? What, and how?

5. How would you assess the approach that your project has applied in empowering women with disabilities to use mechanisms and services when it comes to protecting women with disabilities from violence? What would you particularly find as successful? Can you give specific examples of the effects of the project on changes in the use of services/mechanisms for the protection of women with disabilities in custodial institutions from violence? Would something else have to be done to make the success of these initiatives greater? What how?

6. How would you assess the approach that your project has applied in strengthening the capacity of service providers for women with disabilities when it comes to protecting women with disabilities from violence? What would you particularly like to be successful? Would something else have to be done to make the success of these initiatives greater? What how?

Project management

7. How would you assess the coordination of project activities over the past two years? What, in your opinion, was particularly successful, what are you satisfied with? What was your particular problem? Please list the external obstacles you faced in implementing the project, by components? Were there any internal obstacles/challenges? What? How did you overcome them? What did you learn from that, what would you have done differently?

8. When it comes to the efficiency of using resources, is there something that you would arrange differently to do more and better (in terms of material and non-material)? What exactly and how?

9. What do you think should be done in the next few years in order to continue work on preventing and reducing violence against women with disabilities in custodial institutions? Who should be involved and how? How do you see your role in this process? What are the main barriers to that?

Do you have any other comment, proposal or question? Would you like to share something with us?

Closing of the interview

Thank and appreciation for their time and contribution. Keep contact of the interviewed person in order to open space for potential additional questions, and feedback on evaluation

The Interview with Donor Representatives

The purpose is to improve understanding of effects of the project on enhancing prevention and protection from violence of women with disabilities in residential institutions in Serbia.

Specific objectives of the interview:

- Assessment of the results, efficiency and impact of the project
- Assessment of the coordination role and cooperation among project team and partners
- Lessons learned

Topics to be discussed:

1. Results of the project: expected and unexpected; what was planned but not achieved (if any)
2. Efficiency of the project resource-wise and actions that were taken to secure the efficiency – if any
3. Impact of the project – in what extent in comparison to planned, why and how
4. Coordination of the project
5. Cooperation among project team
6. Lessons learned and recommendation for future actions

Questions: *Please note that some of the questions are particularly related to the concrete project management. Your answers will be needed in the aspects and to the level on which you have information/knowledge about these topics. While preparing answers, please also bare in mind the 1) advocacy component of the project, 2) component of empowerment of primary beneficiaries and 3) capacity building of service providers.*

According to your knowledge:

1. How would you assess the results of the project? Are you satisfied? With what you are most satisfied?
2. In what extent (and which) results that were planned were achieved? Were there any unexpected results that you were happy about?
3. Are there any planned, but not achieved results? Why did it happen?
4. How would you assess the project efficiency? Were there any obstacles for which the project team decided to engage additional resources? How did they cope according to your knowledge?
5. How would you illustrate the impact of the project? What good practice and improvements would you rank as “top three” as a project impact? What was the most visible impact, to your opinion?
6. If you would compare planned and achieved impact – what would be your assessment of the success? Why and how did it happen?
7. How much are you satisfied with the cooperation with the project team? What didn’t work well and why? Were there any actions taken to improve the cooperation, if needed?
8. In your opinion, what should be next steps in combating violence against women with disabilities in residential institutions? What should be done in year/ three years from now? Who should do it and how? What would you recommend to MDRI S?

Any other comments, suggestions or issues related to this topic that you would like to share with us?

THANK YOU!

Questionnaire for Service Providers/Training Participants

Dear colleagues,

This questionnaire has been developed for the purpose of the external evaluation of the project “Deinstitutionalize and End Violence against Women with Disabilities in Custodial Institutions” implemented by MDRI-Serbia with the financial support of the UNTF.

The objective of this questionnaire is to help in collecting data on improvements in quality of services for women with disabilities in custodial institutions in terms of changes in attitudes/practises/behaviors in service providers. You and your colleagues participated the trainings “Prevention of violence against women with disabilities in custodial institutions”. Please give us Your opinion on effects of the training from the today perspective.

Thank You!

| | |
|--|--|
| Name of the service provider | |
| City | |
| Please shortly describe services that your organization/institution provides: | |
| | |
| Which impression from the MDRI-S training is the most permanent? | |
| Was there any impressions and reactions from the side of other participants, according to your knowledge? Please describe shortly. | |
| Have you, and in what way, work on the improving/adjusting your services for protection of women with disabilities in custodial institutions from violence? Please describe. | |
| According to You, what would be additionally needed to service providers (what forms and types of support) in order to improve/adjust their services for protection of women with disabilities in custodial institutions from violence ? | |
| Other comments/suggestions? | |

9.6. Lists of persons and institutions interviewed or consulted and sites visited

| INTERVIEWS | | | |
|---|-------------------------------|--|---|
| | Name | Institution | Function |
| 1 | Dragana Ćirić Milovanović | MDRI-S | Executive Director |
| 2 | Biljana Janjić | MDRI-S | Program Associate |
| 3 | Maja Popović | MDRI-S | Project Assistant |
| 4 | Maša Pavlović | MDRI-S | Administration and Finance Officer |
| 5 | Lazar Stefanović | MDRI-S | Project Associate |
| 6 | | n/a | External Consultant/CSO activist |
| 7 | | n/a | External Consultant |
| 8 | | National Assembly of the Republic of Serbia | Member of the Parliament and member of the Committee on Labor, Social Issues, Social Inclusion and Poverty Reduction |
| 9 | | National Assembly of the Republic of Serbia | Member of the Parliament and member of the Committee on Labor, Social Issues, Social Inclusion and Poverty Reduction |
| 10 | | National Assembly of the Republic of Serbia | Parliamentary Committee for Human and Minority Rights and Gender Equality |
| 11 | | Coordination Body for Gender Equality | Member |
| 12 | | The Office for Human and Minority Rights | Staff member |
| 13 | | Protector of Citizens, National Preventive Mechanism | Member of the NPM |
| 14 | Jelena Milovanović | UN WOMEN Serbia | UN Women Technical Project Analyst in Serbia |
| 15 | Vesna Jarić | UN WOMEN | UN Trust Fund Portfolio Manager |
| 16 | Fareen Walji | UN WOMEN | UN Trust Fund Portfolio Manager |
| GROUP INTERVIEW WITH WOMEN WITH DISABILITIES | | | |
| | 13 women with disabilities | 4 women with disabilities who live in supported living service provided by Home in Čurug | |
| | | 1 woman with psychosocial disability who lives in the custodial institution - Home in Čurug | |
| | | 8 women with with disabilities who live in supported living service provided by Association for Promotion of Inclusion-Belgrade | |
| FOCUS GROUPS /INTERVIEWS with service providers | | | |

| | Name | Institution | Function |
|---|--|--|------------------------------|
| 1 | | Home for Persons with Psychosocial Disabilities Čurug | Social worker |
| 2 | | Home for Persons with Psychosocial Disabilities Čurug | Social Worker |
| 3 | | ...OUT OF CIRCLE VOJVODINA | Executive Director |
| 4 | | ...OUT OF CIRCLE VOJVODINA | Activist, SOS hotline worker |
| 5 | | Association for Promotion of Inclusion Serbia | Associate |
| 6 | | Network of women against violence | Independent member, activist |
| 7 | | Initiative for Inclusion "Veliki Mali" | Activist |
| 8 | | Home for Persons with Psychosocial Disabilities Othon in Stara Moravica | Social worker |
| QUESTIONNAIRES for service providers –names of the organizations | | | |
| 1 | Center For Support to Women Kikinda, NGO | | |
| 2 | Deinstitucionalizator, NGO | | |
| 3 | ...OUT OF CIRCLE VOJVODINA, NGO | | |
| 4 | OUT OF CIRCLE KRAGUJEVAC, NGO | | |
| 5 | PŠ, individual | | |
| 6 | Association for Children's and Cerebral Palsy, Serbia | | |
| 7 | SOS women's Center, NGO | | |
| 8 | Association of paraplegics of Serbia | | |
| 9 | Roma association of women, NGO | | |
| 10 | Law Faculty, University of Belgrade, Legal Clinics for Discrimination issues | | |
| 11 | Institution for persons with disabilities "Othon" Stara Moravica | | |
| 12 | NGO "Jeleče" | | |
| 13 | NGO Oasis of Safety, Kragujevac | | |

9.7. List of supporting documents reviewed

- Project proposal "Deinstitutionalize and End Violence Against Women with Disabilities in Custodial institutions"
- Three Project Progress Report and Final Project Report
- Publications "Here the Walls Have Ears, Too", and "Violence Against Women With Disabilities in Custodial Institutions"
- Results of questionnaires before and after training for service providers who attended training (4 trainings, one combined report);
- Results of questionnaires before and after training for members of the National Preventive Mechanism for Torture who participated in training (one training, one report);
- Results/report on individual interviews with primary beneficiaries(13 interviews, one combined report);
- Data collected from the survey for service providers applied at the beginning of the project, as well as the subsequent report on selected service providers;
- Submission to Human Rights Committee on ICPPR implementation in Serbia
- Policy brief - Violence Against Women with Disabilities in Custodial Institutions -international standards
- Submission to Human Rights Council on Universal Periodic Review (Third cycle) of the Republic of Serbia -policy paper
- United Nations Evaluation Group (UNEG), 'Ethical Guidelines for Evaluation', June 2008.
- World Health Organization (2003). Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence Against Women.
- Jewkes, R., E. Dartnall and Y. Sikweyiya (2012). Ethical and Safety Recommendations for Research on the Perpetration of Sexual Violence. Sexual Violence Research Initiative. Pretoria, South Africa, Medical Research Council.
- Researching violence against women: A practical guide for researchers and activists November 2005
- World Health Organization (WHO), 'Ethical and safety recommendations for researching documenting and monitoring sexual violence in emergencies' 2007

9.8. CV of evaluator who conducted the evaluation