# Mercy Corps' Girls Improving Resilience through Livelihood and Health (GIRL-H) Program

# Columbia University, School of International and Public Affairs (SIPA)

# **Capstone Project**

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# ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome		
ASRH	Adolescent Sexual and Reproductive Health		
ENGINE	Educating Nigerian Girls in New Enterprises		
FGD	Focus Group Discussion		
GBV	Gender-based Violence		
GDI	Gender Development Index		
GDP	Gross Domestic Product		
GIRL-H	Girls Improving Resilience through Livelihood and Health		
HIV	Human Immunodeficiency Virus		
HDI	Human Development Index		
ID	Identification		
IPSOS	Independent Polling System Of Society		
KPI	Key Performance Indicators		
LMS	Livestock Market Systems		
SIPA	School of International and Public Affairs		
SRH	Sexual and Reproductive Health		
STD	Sexually Transmitted Disease		
STI	Sexually Transmitted Infection		
TOC	Theory of Change		
UN	United Nations		
UNDP	United Nations Development Programme		
UNFPA	United Nations Population Fund		
USD	United States Dollar		

### **EXECUTIVE SUMMARY**

The Girls Improving Resilience through Livelihood and Health (GIRL-H) program, implemented by Mercy Corps, aims to build the resilience of adolescents and young people in Haiti, Kenya, and Uganda. By improving well-being and strengthening access to pathways to formal education, economic opportunity, and civic engagement, Mercy Corps aims to ensure that adolescents and young people will have improved individual and household resilience. Spanning from 2021 through 2023, with a \$10 million USD grant, Mercy Corps aims to reach 77,000 individuals in targeted areas in Haiti, Kenya, and Uganda in partnership with local actors.

GIRL-H is currently being adapted to local contexts in Haiti, Kenya, and Uganda. In partnership with Columbia University's School of International and Public Affairs (SIPA), Mercy Corps has tasked a cohort of Masters of Public Administration students to provide a technical review of the existing program to advance a data-driven, needs-based, and sustainable approach to improve the resilience and self-sufficiency of adolescents and young people in Haiti, Kenya, and Uganda. Through a three-phase approach, we conducted literature reviews and 19 focus group discussions and key informant interviews with Mercy Corps program staff, treatment, and control groups of youth in Haiti, Kenya, and Uganda.

This report provides a succinct analysis and recommendations based on the three main learning questions for this scope of work, which include: 1) To what extent does this program address the needs of targeted populations and catchment areas? 2) To what extent does the program design and implementation align with the Theory of Change and does the monitoring and evaluation framework capture this alignment?; and lastly, 3) In what ways can GIRL-H strengthen alignment and collaboration with local actors to ensure sustainability and locally-led design and implementation?

In close collaboration with Mercy Corps, we provided technical insights and recommendations to advance localization, adaptability of programming, and fidelity of implementation. Notably, we recommend that Mercy Corps review catchment areas and participant targeting, taking into consideration recent geopolitical and socio-cultural shifts since the design and inception of the program. Additionally, there are notable differences in each country's context in terms of urban versus rural communities, access to essential services, and viable employment opportunities in both the public and private sectors that have implications for the feasibility and relevance of the Theory of Change. Secondly, we recommend that Mercy Corps revisit the Theory of Change and monitoring and evaluation framework for strengthened cohesion and alignment. Currently, the Theory of Change is holistic but beyond the scope and timeframe of the GIRL-H program. We recommend that Mercy Corps also reconsider the structure of the logic framework model to eliminate duplicative outcomes and outputs and streamline the key performance indicators. Additionally, we recommend Mercy Corps align their key performance indicators with national strategic plans, United Nations Sustainable Development Goals, and international benchmarks. Lastly, we recommend that Mercy Corps work more closely with local partners in the design, adaptation, and implementation of the GIRL-H program for a sustainable transition. We aim to support Mercy Corps' efforts to ensure a data-driven, needs-based, and sustainable approach to improving gender and resilience programming in Haiti, Kenya, and Uganda.

# INTRODUCTION

The Girls Improving Resilience Through Livelihoods and Health (GIRL-H) program, implemented by Mercy Corps, aims to build the resilience of 77,000 adolescents and young people in Haiti, Kenya, and Uganda between 2021 and 2023. By improving well-being and strengthening access to pathways to formal education. economic opportunity, and civic engagement, Mercy Corps aims to ensure that adolescents and young people will have improved individual and household resilience. Mercy Corps is currently adapting GIRL-H to local contexts in Haiti, Kenya, and Uganda. In partnership with Columbia University's School of International and Public Affairs (SIPA), Mercy Corps has tasked a cohort of Masters of Public Administration students to provide a technical review of the existing program. While Mercy Corps has contracted Independent Polling System Of Society to conduct the baseline, midline, and endline as an external party, SIPA's added value is to highlight findings from the field to provide updates since the inception of the program. Thus, this report aims to provide a technical review of the targeting, Theory of Change, monitoring and evaluation framework, and sustainability while highlighting findings from key informant interviews and focus group discussions. We aim to support Mercy Corps' efforts to ensure a data-driven, needs-based, and sustainable approach to improving gender and resilience programming in Haiti, Kenya, and Uganda.

# **METHODOLOGY AND APPROACH**

Our approach included a desk review of program documents and situational analysis of country contexts and details of the GIRL-H program to make recommendations about the program's impact and aid Mercy Corps in strengthening their programmatic design, implementation, and monitoring and evaluation of the GIRL-H program. We hope that our three-phase approach ultimately supports Mercy Corps in locally adapting GIRL-H and informing a data-driven, sustainable model. First, we undertook a research phase to better understand the country contexts, program landscape, and stakeholders of the GIRL-H program. Second, we reviewed program materials and conducted interviews to understand the program's targeting, implementation, pain points, and opportunities. Finally, we synthesized our findings and provided recommendations surrounding the targeting, theory of change, monitoring and evaluation framework, and sustainability of design and implementation of the GIRL-H program in a written report.

#### PHASE 1

The SIPA team undertook a situational analysis based on research of national data and sociocultural determinants related to the program's technical objectives. This analysis ensured that GIRL-H implementation has the most recent data on its assessments, contextualized the problem statement within the three countries, and examined the barriers and opportunities to scaling resilience programming. This step includes but is not limited to assessments, secondary literature, and academic literature. Understanding these factors and their effect on the program objectives allowed us to identify any existing gaps between the environment and the intervention plan. Furthermore, given that GIRL-H originates from a global model, this analysis is an opportunity to test its adaptability while localizing program implementation.

In addition, the SIPA team conducted a rapid landscape assessment and stakeholder analysis of sector/cluster partners, government entities, UN agencies, and community-based organizations to gain insight on Mercy Corps' position in relation to other stakeholders influencing the program objectives. A landscape assessment provides a fresh look two years into the COVID pandemic on which actors (local, national, international, or nonprofit) are working to address these issues and where there may be room for collaboration and/or capacity building. Ultimately, this research aims to supplement the work of identifying resources to meet the needs of the targeted communities and showcase where Mercy Corps is best situated to address them.

#### PHASE 2

Phase 2 consisted of researching the existing program to understand Mercy Corps' strategy, including reviewing and understanding the implementation of the curriculum. The SIPA team identified pain points and opportunities for the GIRL-H program by collecting data and interviewing stakeholders. We analyzed the outreach strategy to understand to what extent the participants align with the targeted demographic. We also analyzed implementation to learn about the modality of implementation and how effective it is in achieving the results delineated in the theory of change.

#### PHASE 3

In the final phase, the SIPA team examined how the GIRL-H program can strengthen its Theory of Change through a data-driven and adaptable approach as well as provide recommendations on the learning agenda, the program's overall efficiency, impact, scope, and sustainability. One core area of focus in this phase is local and international complementarity. While Mercy Corps has already identified key stakeholders (e.g., the Kenyan government, Uganda regional government, media houses in Kenya, and members of the private sector), we seek to identify local actors who can bring in their expertise and sense of pressure points, to strengthen the link between local, regional, and international bodies.

First, we investigated Mercy Corps' theory of change for the GIRL-H programspecifically, (i.) the alignment of interventions and (ii.) the validity of the relationship between outputs and outcomes (i.e., presumed impact). We will use our findings from phases 1 and 2 in order to parse through the program's interventions and highlight the most localized and adaptable. We assessed the validity of the relationship between outputs and outcomes. Finally, we assessed the sustainability of the GIRL-H program.

#### CHALLENGES AND LIMITATIONS

There were several challenges and limitations in our process. First, we completed this project and report with the materials that Mercy Corps made available to us by request, which were also in the process of being refined during our project. Second, focus group discussions only included participants over the age of 18, making our findings, analysis, and recommendations most relevant to older cohorts of the GIRL-H program. Limitations of focus group discussions included language barriers between interviewers and program participants and the virtual format of the conversations. This may have inhibited full communication during the focus group discussions and decreased participants' openness and trust when sharing their perspectives. During discussions with treatment and control groups, we relied on simultaneous translation to English, which may have implications on the fluidity of conversation and communication of ideas when translated from one language to another. In addition, the privilege and power dynamics inherent in our position as Americans, students at Columbia University, and various other identities, may have introduced additional pressures on program participants and shaped their responses. Lastly, when discussing sexual and reproductive health, GBV, and other sensitive topics, shame and cultural norms may have influenced the extent to which participants were comfortable and willing to share during the focus groups discussions.

# **DISCUSSION AND ANALYSIS**

### I. LEARNING QUESTION ONE: ASSESSMENT OF TARGETING AND LOCALIZATION

#### **COUNTRY PROFILES:**

#### <u>HAITI</u>

Haiti is situated in the Caribbean Sea, with a population of approximately 11.4 million people. Over the past thirty years, Haiti's human development index (HDI) has increased 24.39% from 0.41 to 0.51.<sup>1</sup> Conversely, the country has seen a 3.34% decrease in economic growth in the last thirty years-with a current GDP per capita of 14,508.22 (USD)<sup>2</sup>—and a 2.17% decrease in its gender development index (GDI) in the last 10 years.<sup>3</sup> The country's declining GDP per capita and GDI have adversely affected women and children. Within the current percentage of the Haitian population who live below the international poverty line (58.50%), 25.7% of women above the age of 15 live in poverty (as compared to the 20.40% of men who live in poverty). Regarding unemployment, the recorded unemployment rate for women (16.25%) was 5.34% higher than the men's (10.91%) in 2019.<sup>4</sup> Youth unemployment was highest with 29.67% of young individuals (ages 15 to 24) unemployed in 2019.<sup>5</sup> Lastly, in addition to the impact of earthquakes on insecurity,<sup>6</sup> or the risk/exposure of interpersonal violence, chronic gang activity in Haiti has resulted in heightened school dropout rates,<sup>7</sup> physical and sexual violence, and the abduction of more than 100 children and women in the first eight months of 2021.8

GIRL-H is operating in two densely-populated arrondissements—Port-au-Prince (population of approximately one million people) and Cap Haitien (population of 286,745 people).<sup>9</sup> In the first nine months of 2021, more than 13,900 people (including 5,695

https://www.theglobaleconomy.com/Haiti/.

https://www.unicef.org/press-releases/alarming-spike-abductions-women-and-children-haiti-unicef. <sup>9</sup> OCHA. (2022). Haiti Population Statistics. Retrieved from

<sup>&</sup>lt;sup>1</sup> UNDP. (2020). *United Nations Development Programme Human Development Reports: Haiti.* Retrieved from <u>https://hdr.undp.org/en/countries/profiles/HTI</u>.

<sup>&</sup>lt;sup>2</sup> The Global Economy. (2022). *Haiti Economic Indicators*. Retrieved from <u>https://www.theglobaleconomy.com/Haiti/</u>.

<sup>&</sup>lt;sup>3</sup> UNDP. (2020). United Nations Development Programme Human Development Reports: Gender Development Index (GDI). Retrieved from https://hdr.undp.org/en/indicators/137906.

<sup>&</sup>lt;sup>4</sup> The Global Economy. (2022). *Haiti Economic Indicators*. Retrieved from

<sup>&</sup>lt;sup>5</sup> Ibid.

<sup>&</sup>lt;sup>6</sup> Human Rights Watch. (2021). *Haiti: Protect Women, Girls in Quake Response*. Retrieved from <u>https://www.hrw.org/news/2021/08/24/haiti-protect-women-girls-quake-response#</u>.

 <sup>&</sup>lt;sup>7</sup> UNICEF. (2021). *Increasing number of schools in Haiti targeted by gangs*. Retrieved from <u>https://www.unicef.org/lac/en/press-releases/increasing-number-schools-haiti-targeted-gangs-unicef</u>.
 <sup>8</sup> UNICEF. (2021). *Alarming spike in abductions of women and children in Haiti*. Retrieved from

https://data.humdata.org/dataset/haiti-population-statistics-country-level.

women and 5,984 children) were forced to flee their homes in the capital city—Port-au-Prince.<sup>10</sup> As a result of violence and forced displacement, the lethality rate of COVID-19 increased from 1.95% to 2.15% within a two-month time frame as patients were prevented from receiving oxygen and emergency treatment.<sup>11</sup> Within the capital's eight informal displacement sites (comprised of schools, stadiums, and churches), women and girls reported experiencing sexual violence and harassment in the overcrowded and unsanitary shared spaces.<sup>12</sup> Given that gang violence is particularly rampant in Port-au-Prince (the capital of Haiti), it is especially important that GIRL-H operates in this arrondissement and addresses the specific shocks and stresses in the lives of Haitian girls.

# <u>KENYA</u>

Kenya is situated in East Africa, with a population of over 52 million people.<sup>13</sup> Between 1948 and 2000, Kenya's urban population increased from 5% to 34.8%, and nearly 19.5 million people are considered poor. While predominantly urban, 13 million reside in rural areas, and 4.2 million people live in informal settlements.<sup>14</sup> Over the past thirty years, Kenya's human development index increased by 24.7% to 0.601, life expectancy by 9.3 years, average years of school by 2.8 years, and expected years of schooling by 2.3 years <sup>15</sup>. Kenya's gross domestic product is 101.1 billion, with a GDP per capita of \$4,577. Nearly one-third of Kenya's GDP is based on agriculture, and the sector contributes to the livelihoods of over 75% of the population.<sup>16</sup> While Kenya has experienced positive developments, it is estimated that nearly 100 million Kenyans still live below poverty on less than \$1.90 per day.<sup>17</sup>

GIRL-H is currently operating in Garissa, Marsabit, Turkana, Isiolo and Wajir counties. The program is targeting 26,180 participants, consisting of 70% girls (16,940)

<sup>13</sup> World Bank. (2020)

<sup>15</sup> UNDP. (2020). Human Development Index. Retrieved from

https://hdr.undp.org/sites/default/files/Country-Profiles/KEN.pdf

<sup>16</sup> USAID. (2022). Retrieved from

<sup>&</sup>lt;sup>10</sup> UNICEF. (2021). *Haiti: about 8,500 women and children displaced by 'urban guerrilla' in two weeks.* Retrieved from

https://www.unicef.org/press-releases/haiti-about-8500-women-and-children-displaced-urban-guerrilla-two-weeks.

<sup>&</sup>lt;sup>11</sup> Ibid.

<sup>&</sup>lt;sup>12</sup> OCHA. (2021). *Thousands stranded and exposed as insecurity worsens in Port-au-Prince*. Retrieved from <u>https://reliefweb.int/report/haiti/thousands-stranded-and-exposed-insecurity-worsens-port-au-prince</u>.

<sup>&</sup>lt;sup>14</sup> IPC. (2020).Kenya: Acute Food Insecurity Situation August - September 2020 and Projection for October - December 2020 Retrieved from

https://www.ipcinfo.org/ipc-country-analysis/details-map/en/c/1152915/?iso3=KEN

https://www.usaid.gov/kenya/documents/kenya-country-development-cooperation-strategy

https://www.usaid.gov/kenya/documents/kenya-country-development-cooperation-strategy

<sup>&</sup>lt;sup>17</sup> World Poverty Clock. World Data Lab. Retrieved from https://worldpoverty.io/map

and 30% boys (9,240).<sup>18</sup> The populations of the counties range from approximately 268,000 in the smallest county (Isiolo) to 926,000 in the largest county (Turkana). The average household size in these counties falls between 5 and 6 persons and the gender distribution is approximately 53% male, 47% female, and less than 1% intersex.<sup>19</sup> Natural disasters including droughts have recently affected some of the targeted counties in Kenya.<sup>20</sup> Violence has also been a pervasive issue for these communities. Specifically, Isiolo has experienced violent extremism in the past several years<sup>21</sup> and the armed group, al-Shabab, killed nearly 150 people in a violent attack on a university in Garissa in 2015.<sup>22</sup> The widespread poverty, low levels of education, and issues like violence and natural disasters that lead to shocks in the community provide justification for focusing the GIRL-H program in these locations. These stressors have a significant impact on program participants and will be important to consider throughout our analysis.

# <u>UGANDA</u>

Uganda is a Southeast African country with a population of 45.74 million. An estimated 34 million people live in rural areas, with urban areas holding the remaining 25%. However, according to projections from the World Bank, Uganda's urban population will surpass its rural population by 2060<sup>23</sup>. Between 1990 and 2019, Uganda's human development index increased by 70%, up from 0.320 to 0.544.<sup>24</sup> This position puts the country in the low human development category, at 159 out of 189 countries and territories. Over the past thirty years, life expectancy at birth has increased by 17.5 years, average schooling years increased by 3.4 years, and gross national income rose by 138.5%. Uganda's gross domestic product is 37.37 million dollars, with a GDP per capita of 822 USD.<sup>25</sup> With 77 percent of the population under

https://data.humdata.org/dataset/kenya-population-per-county-from-census-report-2019

https://issafrica.org/iss-today/violent-extremists-find-fertile-ground-in-kenyas-isiolo-county<sup>22</sup> BBC. (2015). Kenya attack: 147 dead in Garissa University assault. *BBC*. Retrieved from <a href="https://www.bbc.com/news/world-africa-32169080">https://www.bbc.com/news/world-africa-32169080</a>.

<sup>&</sup>lt;sup>18</sup> Mercy Corps. (2021). *Girls Improving Resilience Through Livelihoods* + *Health (GIRL-H): PROGRAMME IMPLEMENTATION STRATEGY* (pp. 1–29).

<sup>&</sup>lt;sup>19</sup> OCHA. (2019). *Kenya: Population Per County and sub county from Census Report*. The Humanitarian Data Exchange. Retrieved from

<sup>&</sup>lt;sup>20</sup> UNICEF. (2017). *Kenya Humanitarian Situation Report*. United Nations Children's Fund. Retrieved from <u>https://reliefweb.int/sites/reliefweb.int/files/resources/UNICEF%20Kenya%20Humanitarian%20Situation%</u>20Report%20-%204%20November%202017.pdf.

<sup>&</sup>lt;sup>21</sup> Turi, G. C. (2020). *Violent extremists find fertile ground in Kenya's Isiolo County*. Institute for Security Studies Africa. Retrieved from

 <sup>&</sup>lt;sup>23</sup> World Bank (2020). Tackling the Demographic Challenge in Uganda. https://openknowledge.worldbank.org/handle/10986/34676

 <sup>&</sup>lt;sup>24</sup> UNDP (2020). <u>https://hdr.undp.org/sites/default/files/Country-Profiles/UGA.pdf</u>
 <sup>25</sup> World Bank (2020).

https://data.worldbank.org/indicator/NY.GDP.PCAP.CD?end=2020&locations=UG&start=1960&view=chart

the age of 30, Uganda has one of the youngest age structures in the world. 16.6% of the country's youth are not in school or employed, and 2.8 percent of the working-age population are unemployed.

Mercy Corps is implementing the GIRL-H program in four districts situated within the Karamoja region of Uganda. Residents of Karamoja rely on pastoralism as a primary source of livelihood, a vulnerable way of life due to climate change. According to the UNFPA, 61% of the population lives in poverty. In addition, the average age is 15 vears old and half of the population in Karamoja is female.<sup>26</sup> Karamoja has higher fertility rates relative to the national average of 5.4 children and a large share of the population are child dependents. More than 70% of the Karamoja population older than 10 years old have never attended school, with a majority in this category being women. In comparison to Kampala where women have a literacy rate of 94%, 60% of women in Karamoja are unable to read or write. Despite interventions from the government and partners, high levels of poverty remain persistent in the region and Karamoja accounts for less than 1 percent of Uganda's total GDP. Given this background, investing in the region's youth as well as addressing gender disparities are important considerations for the GIRL-H program.<sup>27</sup> Given the low education levels, poverty rate, and limited economic opportunities in this region, GIRL-H is positioned to address aspects of the community's needs.

# **DISCUSSION**

The needs highlighted by the treatment and control groups across each country varied, and the socioeconomic and political dynamics of the countries have shifted since the initial conception of the GIRL-H program. In all contexts, accessibility of curriculum materials is a key consideration. Specifically, Mercy Corps must consider literacy rates of program participants when deciding the format of curriculum materials. Materials intended for participants who can read and write may not be effective in many of the GIRL-H cohorts given the aforementioned low literacy rates in some of the targeted regions. Visualizations and spoken exercises may be the best method in some cases.

In Kenya, food insecurity is a significant challenge. As one program and research officer stated, "We cannot completely trace participants from the first cycle. Participants have nothing to eat and would prefer to get firewood and sell it for food instead of attending sessions on time. The sessions have long begun by the time the girls sell the firewood and eat." The girls have no choice but to drop out of the program in order to

<sup>&</sup>lt;sup>26</sup> UNFPA. (2018). Leaving No One Behind in Karamoja. Retrieved from

https://uganda.unfpa.org/sites/default/files/pub-pdf/Issue%20Brief%207.%20Leaving%20no%20one%20behind%20in%20Karamoja.pdf

feed themselves and their families. The mentors in Kenya have also pointed out several challenges while participating in the program. In addition to lack of money stipulation, the mentors said there is an expectation from the mentees that the mentors provide food and snacks. Mentors suggested paying higher stipends to increase their motivation to support the mentees who heavily depend on them. They also suggested moving the safe space sessions to inside rather than having these sessions under the trees to be more comfortable during the sessions. The mentors also highlighted that they sometimes have difficulty understanding technical terms in the curriculum; at times they need to search words and phrases in order to understand the terms, but the region sometimes does not have adequate services for them to use the internet. To address these issues, they would like Mercy Corps to supplement the training they have received from officers with additional refresher trainings on the curriculum.

The Haiti office expressed that the country's context needs to be taken more into consideration for the GIRL-H program. If the program evaluates the political and social factors of the country, the program can better serve the participants and achieve the expected outcomes. Further, the officers also pointed out the need to improve the capacity of mentors - participants often lack concentration during safe space sessions and it is challenging to keep them focused because there are too many participants for each safe space session. Participants are also not motivated to be part of the safe space sessions; the officers suggested more interactive and engaging activities to be implemented to interest the participants.

One program officer based in Uganda stated that insecurity has prevented officers and mentors from accessing participants. In the Kotido District, both insecurity and the pastoral nature of the communities force participants to shift from one village to another. This constant mobility makes participant reach and retention difficult.

A Project Manager of Adolescent Girls Community of Practice from the Population Council (Pop Council) shared guidance on how to ensure local adaption of programs. The manager stated, "We don't treat girls as a homogenous group. For example, if we are looking at girls in the age range of ten to 14, we ask, 'Which girls lie within this age range?' We want to be specific and understand the unique experiences of each girl. We also want to understand the community because girls don't operate alone. We ask, 'What/who exists for them but doesn't serve them?'" While resources may be abundant in the community, they don't always go towards the population that needs them the most. Pop Council utilizes social cartography- the use of visuals and mapping to understand where programs should be implemented. For example, the DREAMS HIV Project<sup>28</sup> implemented in Mozambique used visuals and mapping to

<sup>&</sup>lt;sup>28</sup> DREAMS. (2021). *DREAMS Overview: Mozambique*. Retrieved from <u>https://www.state.gov/wp-content/uploads/2020/06/MOZAMBIQUE\_DREAMS-Fact-Sheet-2020.pdf</u>.

revise program targeting. By identifying hot spot geography, social cartography ensures that there is full coverage of the girls who need the most help. Mercy Corps has incorporated a similar approach called the "I AM HERE" approach, which uses cartography to target girls and a real-time monitoring dashboard to track changes in participants' capital, social, and health assets. It is unclear whether the named approach has informed, guided, or been directly implemented into targeting and localization of the GIRL-H program. If the approach has been directly implemented into the GIRL-H program, it is also unclear which components of the approach (e.g., front end visual mapping or back end monitoring) have been incorporated.

# **RECOMMENDATIONS**

- We recommend that Mercy Corps prioritize adaptation of the GIRL-H curriculum and strategy based on current geopolitical systems, and individual, community and structural situations that need to be taken into greater consideration. In all contexts, this includes prioritizing accessibility and adapting program materials to meet the literacy rate of program participants. In Kenya, this includes violence and lack of education and viable job opportunities. In Uganda, major considerations are political violence, food insecurity, and water insecurity. In Haiti, this includes widespread unemployment, pervasive gang violence and criminal action, and displacement. For example, Mercy Corps could adapt the GIRL-H curriculum to the challenge of forced displacement by identifying mentors who are on the move alongside program participants and could continue delivering program content in coordination with the organization.
- We recommend that Mercy Corps incorporate **best practices**, **such as social cartography and hot spot geography**. The adolescent girls who are affected by gang violence and internal displacement may not have the opportunity to be a part of program reach. For girls who are not in displacement camps, yet live in areas rampant with gang violence, these girls may face security threats and psychological stress, which skews program access. Best practices should be used to identify and assess adverse structural situations before program implementation begins.
- We recommend that Mercy Corps explicitly state how the "I AM HERE" approach has been used in the GIRL-H program- for instance, whether it informed, guided, or has been directly implemented into the program- and, if implemented, which components of the approach (e.g., front end visual mapping or back end monitoring) have been incorporated.

• We recommend that Mercy Corps incorporate practices and toolkits that are designed to address displaced girls or partner with organizations that have implemented projects focused on displaced communities. Although violence and peace building has been integrated into the GIRL-H curriculum, we did not come across specific practices and toolkits that Mercy Corps has used to reach and retain participants in both migrating (pastoral) and displaced communities. Regarding the latter, displacement as a result of gang violence/armed conflict makes it difficult to achieve program retention (see Haiti's country profile under the Target Setting and Localization Findings section). Women in Displacement<sup>29</sup>-an online platform that was created to introduce (to existing partners) participatory data collection tools that were developed to facilitate engagement with displaced women, girls, boys and men as well as at-risk groups- has been utilized by the International Organization for Migration, The Norwegian Refugee Council, and the Women's Refugee Commission to help locate and protect displaced girls and women.

#### II. LEARNING QUESTION TWO: ALIGNMENT OF PROGRAM DESIGN AND IMPLEMENTATION WITH THEORY OF CHANGE AND MONITORING AND EVALUATION FRAMEWORK

# A. THEORY OF CHANGE

The GIRL-H program aims to:

- 1. Improve well-being of adolescents and young people, and
- 2. Increase access to:
  - a. Educational
  - b. Economic, and
  - c. Civic engagement opportunities

The rationale guiding the theory of change is as follows:

<sup>&</sup>lt;sup>29</sup> Women in Displacement. Purpose of the Toolkit. *International Organization for Migration (IOM) and Women's Refugee Commission (WRC)*. Retrieved from <u>https://www.womenindisplacement.org/toolkit</u>.



#### **DISCUSSION**

Mercy Corps' Theory of Change assumes that adolescent girls, boys, and young people will be able to learn life skills and financial literacy, form social capital, and access education and livelihood opportunities. However, based on our research and focus group discussions, it is evident that the situational context of Haiti, Kenya, and Uganda differ significantly. There are key differences that contribute to program access based on if individuals are from urban versus rural communities, pastoral communities, and/or communities under the poverty line. For example, we observed that individuals in Haiti were able to access education and had the basic skills required to participate in life skills and financial literacy programs. However, education attainment varied substantially in Kenya and Uganda catchment areas. Additionally, while participants in Haiti originated from urban areas with more opportunities to forge social capital, rural and pastoral communities in Kenya and Uganda required significant commutes to access opportunities to strengthen social capital. Lastly, across all three country contexts, we observed substantial barriers to individuals accessing education and livelihood opportunities due to financial constraints and safety concerns. Even if pathways were to be established, young people lacked the financial means to afford safe transportation and tuition to access education degrees that gualified them for gainful employment. Additionally, in all three countries, participants reiterated the lack of viable employment opportunities in both the public and private sectors in their communities. Thus, the current assumptions of what skills and access participants have in the Theory of Change required deeper contextualization and potential modifications.

Additionally, the second stage of the Theory of Change states that participants will 'co-create' solutions. While admirable, and ultimately ideal, for young people to have decision-making power, this requires young people to have access to interlocutors in their communities and structural systems that determine well-being, health, safety, livelihoods, and educational services and opportunities. However, Mercy Corps would benefit from more robust engagement with targeted stakeholders in the GIRL-H

program, including local leaders and public and private sector stakeholders, across all programmatic levels and contexts. Additionally, a platform for girls and adolescents to exercise their agency as stakeholders in the co-creation process is still missing.

Lastly, the first segment of the Theory of Change states that beneficiaries will be able to apply knowledge and skills, benefit from equitable gender norms, and increase social, human, and financial assets for improved reliance. The GIRL-H TOC assumes that participants have the individual readiness, community enabling environment, and structural access to achieve these outcomes. However, by targeting young people who may also be illiterate, individual 'readiness' to acquire life skills and financial literacy requires a tailored approach to remediate the absence of foundational literacy and numeracy skills. Additionally, there is an assumption that the market exists and needs individuals with lesser academic credentials. Lastly, there is a larger assumption that the scope of this program aims to change the behavior and mindset of families toward female empowerment, yet families are not primary beneficiaries of this program. On a structural level, structures, systems, and government entities pertaining to health, education, employment, safety, and transportation are not currently engaged as primary stakeholders.

#### RECOMMENDATION

The GIRL-H Theory of Change, while holistic, is vast and potentially beyond the scope of what Mercy Corps aims to address and is technically positioned to accomplish in terms of content and timeframe. Thus, we recommend that Mercy Corps consider the appropriateness of utilizing the same Theory of Change in each country's context, given the contextual, structural, and geopolitical differences in each catchment area.

After reviewing the original TOC, we also identified that the sequencing could be reorganized to more clearly highlight the impact of the program. **If** Mercy Corps' GIRL-H program teaches life skills and financial literacy, builds social capital, and fosters access to education and livelihood opportunities, **then** adolescent and young people with increased knowledge and skills, trusted networks, and improved social, human, and financial assets, **will** create solutions to strengthen their own resilience within an enabling and empowering environment at the household, community, and organization levels.

We recommend that the Theory of Change be revised to:

If Mercy Corps' GIRL-H program:				
		3.) fosters access to		
1.) teaches life skills and		education and livelihood		
financial literacy	2.) builds social capital	opportunities		
Then adolescents & young people with:				
1.) increased knowledge		3.) improved social, human,		
and skills	2.) trusted networks	and financial assets		
will create solutions to strengthen their own resilience within an enabling and				
empowering environment at the household, community, and organizational levels				

### **B. MONITORING AND EVALUATION FRAMEWORK**

#### **FINDINGS**

The GIRL-H program has two main goals, thirteen outcomes under the two goals, and each outcome has 1-7 indicators. Additionally, there are a total of fourteen outputs with 1-4 indicators. Mercy Corps conducted a baseline analysis in 2021 and plans to conduct a midline in 2022 and endline in 2023. The midline will include interviews with external stakeholders and also look at implementation.

### **DISCUSSION**

After reviewing the TOC and monitoring and evaluation framework, we identified differences in how the TOC, goals, outcomes, outputs, and indicators are defined and labeled. Additionally, while the Theory of Change illustrates impact, longer term goals, medium term goals, and outputs, the program indicator labeling and definitions do not illustrate a time-bound differentiation between the indicators. For example, the gender indicators at the outcome level are helpful metrics for measuring gender equality, however, their timing and frequency needs greater elaboration because the outcomes they intend to measure may be beyond the scope, time, and resources of the GIRL-H program.

The GIRL-H program has two goals, thirteen outcomes, and fourteen outputs. Each outcome has 1-7 indicators. Additionally, there are a total of fourteen outputs with 1-4 indicators. However, there are key aspects of the TOC that are missing from the logic framework and indicators. For example, while the TOC mentions increasing access to education, there are no outcomes related to formal education pathways. Additionally, there are numerous outcomes and outputs that are duplicative, with a disproportionately higher number of indicators that also concurrently measure similar information. In particular, there are four outcomes related to financial stability and four outcomes related to health.

At the highest level, the current two goals of the program are beyond the scope and timeframe of the GIRL-H program. A key informant interview also highlighted that the scope of the GIRL-H program in achieving 'resilience' is beyond the timeframe of the program, yet Mercy Corps has designed the program goals to be achievable in three years. Thus, it is worth considering what are tangible output and outcome level indicators that are helpful metrics to measuring progress towards the goal of resilience.

Given Mercy Corps' plans to sustain and scale the GIRL-H program, it would be helpful to include outcomes that measure fidelity of implementation, partnerships, systemic transformations, which will ultimately advance the young peoples' resilience in their communities.

Mercy Corps conducted a baseline analysis in 2021 and plans to conduct a midline in 2022 and endline in 2023. The midline will include interviews with external stakeholders and also look at implementation. At the baseline of the GIRL-H program, external partners and government entities were not consulted to inform the baseline study design or answer questions.

### **RECOMMENDATIONS**

- We recommend that Mercy Corps ensure greater **alignment between all internal documents** in language and metrics.
- We recommend that Mercy Corps ensure that all indicators use **consistent numeric labeling and vocabulary** in wording, and that the **timing of data collection be aligned** with the level of output, outcome, and goal metrics being measured.
- We recommend **reducing the number of outcomes and outputs**, and prioritizing indicators with clear metrics that are most useful to measure and monitor progress.
- We recommend that Mercy Corps **reconsider the current logical framework and indicators** to better align and reflect the outcomes of the intended TOC.
- We recommend that Mercy Corps **reframe goals to be measurable and achievable** within the timeframe and resources available.

- We recommend that Mercy Corps **integrate a correlation indicator** between metrics to help identify problem areas or consistent patterns.
- We recommend that Mercy Corps **engage with external stakeholders and government entities** to ensure alignment in monitoring and evaluation indicators and maximize data utilization and findings for sustainable partnership.
- We recommend that Mercy Corps align indicators with individual countries' national strategic plan key performance indicators and international metrics from the UN Sustainable Development goals given longer-term goals of sustainability and scalability.

# C. DESIGN AND IMPLEMENTATION

Prior to presenting an analysis and recommendations to Mercy Corps on the targeting, Theory of Change, monitoring and evaluation framework, design and implementation, and sustainability, we have summarized our key findings from interviews and stakeholders below. While Mercy Corps has contracted IPSOS to conduct the baseline, midline, and endline as an external party, it was highlighted that SIPA's added value is to highlight findings from the field to provide updates since the inception of the program. Thus, the below sub-sections briefly discuss stakeholder observations and country-specific focus group discussions of both treatment and control groups for males and females.

### FINDINGS: MERCY CORPS STAFF

The SIPA team conducted interviews with Mercy Corps staff who engage with the GIRL-H program to gain insight into how the program was designed and how implementation is currently progressing. Several notable challenges and recommendations emerged during interviews with Mercy Corps staff. Significant barriers within program implementation were identified. For example, participants from all three countries reported lack of access to regular food and/or water supplies, requiring them to move or relocate to find supplies. Many participants expressed an expectation that the program would provide supplies or find solutions to this issue. The program staff motivates the participants by letting them know that the program is an opportunity to do exciting activities that they would not normally participate in. Another challenge that the program staff raised is data collection during the program. They envisaged that they could upload collected data to their central database, CommCare, but they have found it easier to take in manually while on the ground. In addition, high staff turnover was identified as one of the key challenges to ensure the program is operating successfully

in Haiti. Lastly, they highlighted the need to improve the capacity of mentors so that safe space sessions can be more interactive and engaging.

One of the program's top challenges reported by staff was program retention. M&E officers from Uganda and Kenya stated that families were constantly on the move due to food insecurity and the nomadic lifestyle of their communities. High mobility is especially prevalent during the rainy season, wherein the need to migrate and secure food makes program retention even more difficult. In Haiti, instability in the participants' physical and political environment has continued to impair program retention. As a result of gang violence and armed conflict, approximately 6,000 Haitian children have been forced to seek refuge in the capital city's eight informal displacement sites. The involvement of parents and guardians helps ensure the retention of participants. The officers suggested that Mercy Corps involve participants in the program design phase to ensure that they have more input into the program. In addition, the officers suggested that additional supporting materials be provided to participants since they face many difficulties when starting a business. They highlighted the importance of subsequent support to ensure the participants utilize the skills they've gained from the program and build resilience. Lastly, the curriculum is lengthy (around 200 pages), and the mentors must complete the curriculum in six months. They must also translate the entire curriculum since the training is meant to be offered in local languages. Mercy Corps staff later stated that the curricula is translated to local languages to bridge interpretation gaps using picture codes and role plays.

The local experts in Uganda raised network coverage as a primary challenge when working directly with community members and mentors. They highlighted that poor network coverage in the region makes it difficult to contact the participants and mentors when the officers need to get in touch with them. In addition, officers shared that participants' lack of interest in learning was an issue in program implementation. They mentioned that 96% of the participants have not gone to school and suggested that Mercy Corps find ways to increase active engagement and ensure that participants are interested in learning. Further, being exposed to early marriage and GBV negatively affected safe space learning for the participants.

The Haiti team raised concerns specific to their country's context. They raised the need to consider the reality of the country's challenges, and potential implications for the program. They suggested that perhaps Mercy Corps can create a unique tool for Haiti that recognizes political and social factors of the country. Staff members also highlighted language as an area for improvement. Program documents need to be translated from English to French, and French to Creole. Multiple translations can lead to missing the essence of stories the country office wished to convey. The staff members expressed that involvement with the community members is one of the key strengths of the current

GIRL-H program implementation in Haiti. Meeting with parents, local leaders, community-based organizations, and other stakeholders allowed for the receipt of feedback to improve the program. Another key strength of the program is that the participants are able to share what they have learned from safe space sessions with other community members. However, the Haiti team raised that the program needs to prioritize resilience and sustainability so that participants can continue to use the skills they have learned after they graduate from the program.

### FINDINGS: FOCUS GROUP DISCUSSIONS

# 1. HAITI GROUPS

#### Participants – Female

The female participants in Haiti were between the ages of 18 - 24. They pointed out several challenges, including premature marriage, insecurity, daily violence, and depression that cause them to feel unsafe. The girls stated that they want vocational and practical occupational training. Several highlights that girls mentioned about curriculum takeaways were improvements in self-confidence, self-esteem, empathy, tolerance, resilience, and they also believed they were more empowered that they felt more equal to men. They also had the opportunity to learn about investing and getting loans.

### Participants – Male

The male participants in Haiti were between the ages of 18 - 24. Challenges that the boys stated were wanting more education, not having financial means, and not having enough support from the government. When asked about the curriculum takeaways, the boys said, "I now know how to behave," "I have changed," "I fight for what I believe." "Before, I was ignorant, violent, trying to do something and failed." Further, improvements in self-esteem, learning civic engagement, and knowing how to behave themselves safely were other curriculum takeaways for boys. One of the participants said, "I want MC to be available for my kids and the next generation." "We have no dissatisfaction [with MC or the GIRL-H program]. Everything is fine." They stated they didn't get this type of training while they were in school for 14 years. The boys said they are interested in business but not sure if Mercy Corps can offer this opportunity. They have to create their own opportunities since finding one is difficult. Truck drivers and investment in selling animals are some of the desired jobs that boys articulated.

#### Control — Female

The girls from the control group (ages 18 to 24) repeatedly mentioned lack of support from the community as a top challenge. For example, one girl said, "I want to be independent, but I cannot do that," and another said, "Sometimes you want to work, but you have no support to move forward." Another great challenge the girls expressed, related to lack of community support, was the feeling of being uncomfortable or unsafe.

#### Control — Male

For the boys from the control group (ages 18 to 24), their greatest challenges included food insecurity, political instability, and lack of formal connections and social capital. The boys desire financial/economic opportunities and noted specific jobs, such as doctor, mechanical engineer, diplomat, ambassador, and civil engineer. Although there was an awareness of such jobs and one's skills, the boys pointed to structural barriers as the leading cause of unemployment. As one boy said, "I would like to be taken care of as a young man, but I am denied by the government. We don't have much support from them." Another said, "Only a few benefit from the system. Most of the population gets nothing [because] only friends of the government benefit." Political instability has heightened the boys' concerns and has made them feel as if the sacrifices they have made to attend school and learn skills may be in vain.

#### 2. Kenya Groups:

#### Participants — Female

The treatment group of females in Kenya were between the ages of 18-24 years of age and 18 young women participated in the control group interview. Notably young female Kenyans highlighted that water shortages, price of goods, health and access to medical facilities were key structural challenges in their communities. Additionally, female Kenyans in the control FGD highlighted familial and gender challenges with forced marriage, gender based violence, and a lack of support from families to engage in the public sphere. Participants highlighted that they volunteer but lack information about economic opportunities and finances. Interestingly, within the treatment group, females also highlighted a lack of financial literacy skills, in addition to lack of basic numeracy and literacy skills.

In regard to program design, the young female Kenyan participants highlighted challenges relating to both program design and implementation. Firstly, individuals shared they lacked basic literacy and numeracy skills, which served as a barrier to deeper engagement and participation in the program. Additionally, mentors highlighted that their stipends were too low and that because no food and water was provided, they were often hungry and late. Further, the participants highlighted that while they gained skills in business management and life skills, they "need start-up capital for business". Lastly, participants highlighted that there were benefits from participating in the GIRL-H program, including increased literacy including being able to write their name.

#### Participants — Male

Male participants in Kenya were between the ages of 18 and 24. Participants described several challenges and opportunities in their experience in the GIRL-H program. The boys listed several ways in which they benefited from the program. including learning to overcome peer pressure, building social capital by spending time with peers in safe spaces, decreasing their drug use, and keeping them occupied instead of engaging in harmful activities. The boys shared lessons learned from the GIRL-H curriculum with friends, family, and others in their community. They also discussed potential additions to the program that they would like to see in the future, including livelihood opportunities, support for returning to school, business empowerment lessons, business grants, more soccer balls for recreational activities, and transition pathways to education and/or career opportunities. Challenges that boys reported experiencing outside of the program include lack of employment opportunities, alcoholism and drug use, droughts affecting pastoralist families, conflict within their community, and diseases. In general, the boys discussed feeling neglected by their community, and this feeling extended to the GIRL-H program design. They felt that the program had been designed for girls and that they were receiving less support.

#### Control — Male

The male control group was between the ages of 15 and 17. The boys discussed many structural issues that affect their daily lives. Their challenges included a lack of long-term labor opportunities, lack of trust and corruption within the government, droughts causing many deaths in their community, and the border with South Sudan causing security concerns. Regarding long-term labor, boys reported only being able to get jobs for "minutes, not even hours" and being paid in coins. The security concerns interfered with their education and required a feeling of needing a gun and security escort to safely get around. Additional challenges that boys discussed included widespread unemployment amongst male youth in their communities and having no money or savings, with one participant asking "how do you have money if you don't have a job?" Boys also noted that the land in their communities is community-owned and lived on, and they felt trust in the missionaries who provide services to communities, including Muzungus, Kenyans, and Nigerians. The boys shared that

available jobs include being a teacher, nurse, chief, village administrator, or construction worker. The skills they desired are carpentry, masonry, and cooking, and their career aspirations included being a teacher, nurse, and priest. The boys also shared that men and women engage in casual labor, and sometimes meet their spouses in these roles.

#### 3. UGANDA GROUP

#### Participants — Female

Uganda female participants, ages 16- 24 years old, shared several ways they benefited from participating in the GIRL-H program. They named acquiring knowledge on menstrual hygiene, financial literacy, and potential business opportunities as the positive aspects of the program. One of the participants appreciated the program for exposing her to the "world of rights" and awareness of familial responsibilities. To the girls, "GIRL-H means knowledge. It means skills. It means knowing my rights". The girls desired to make a positive impact in their community and at home using the knowledge they gained at GIRL-H. Through participation in the program, they have also received high standing in their community. They described feeling empowered enough as activists to speak at community dialogues.

In addition to these positive experiences, the girls shared several challenges they experienced at the quotidian level. They lacked access to basic necessities, such as clothing to wear during their menstrual period, and face food insecurities, which hindered their learning capabilities. One participant during the focus group discussion shared that she went through a miscarriage due to hunger she experienced while pregnant; she "only had water for a long period of time..." There was an expectation that in joining GIRL-H they would receive water and snacks to help alleviate their hunger, but the girls said, "it has been difficult to provide them these things as a program." Structural issues also seem to exacerbate their lack of access to basic necessities. The girls reported security issues that prevent them from obtaining and selling firewood as one of their biggest challenges. After receiving financial education from GIRL-H, the girls said they lacked the financial support necessary to start businesses that sustain livelihood; in other words, "they have not been able to transition these concepts into money or money-making business yet."

In response to their challenges, the girls want to improve their livelihood skills, saving capacity, and ensure it continues even after the program ends. They also want to expand their savings group and for GIRL-H implementation to reach additional adolescents in their community.

#### **DISCUSSION**

The outreach strategy for program participants relies largely on existing participant cohorts and community leaders. One program officer based in Uganda stated that Mercy Corps has been leveraging existing structures already in place and building off past projects, such as the Apolou Project.<sup>30</sup> In Kenya, various actors held meetings to discuss the specifics of the GIRL-H program. These meetings included national government representatives, elders, and community members. As one project manager based in Kenya stated, "we didn't go to schools or institutions, but directly to communities, working closely with elders to identify participants."

Program and curriculum design relies largely on international expertise. Mercy Corps recruited services and engaged international consultants to design the GIRL-H program.<sup>31</sup> As one Kenya-based program manager explained, "after the PMs and consultants design the curriculum, the PMs send over the curriculum, which is then used to train program officers who then train mentors for their own teachings to the girls." These consultants did not reinvent the wheel; as expressed by one project manager, the consultants had existing documents on information regarding the needs of various categories of GIRL-H program participants. Furthermore, the GIRL-H team provided these consultants with information from a desk review of pre-existing curriculum used by the LMS program in Kenya, the Apolou program in Uganda, and ENGINE and other programs in Nigeria. The team also reviewed curriculum used by other partners like Care, IRC, and the Population Council.

While the GIRL-H program is a model that Mercy Corps has previously implemented in other country contexts, we recommend that Mercy Corps engage local partners and stakeholders in the development of scope and materials prior to implementation. According to the Project Manager from Pop Council, a good design asks the following questions: "Who needs us the most? Who are the most appropriate targets? Who are the most reachable targets? What are the right assets that these targets need? What are the right hot spots at the sub-national level?" A human-centered design approach requires that the program staff have really collected information in a thoughtful way through the eyes of participants. Genuine community engagement requires working at two levels- a girl-level and a community-level. A human-centered design approach may be particularly helpful in revisiting the male curriculum to address

<sup>&</sup>lt;sup>30</sup> USAID. (2017). *Apolou Activity: October 1 to December 31, 2017*. Retrieved from <u>https://pdf.usaid.gov/pdf\_docs/PA00ST8J.pdf</u>.

<sup>&</sup>lt;sup>31</sup> Mercy Corps conducted a gender assessment and leveraged lessons learning from Apolou and LMS implemented in Uganda and Kenya. Mercy Corps worked with country teams and experts to revise key topics and adopt curriculum.

current frustrations. Male participants in Kenya expressed a perceived sidelining in the GIRL-H program, referring to female participants as "over-empowered" and male participants as "left behind." Focusing on seeing the GIRL-H program "through the eyes" of male participants may help address this perception. Such an approach also strengthens the capacity that communities already have. As the Pop Council Project Manager expressed, "We don't build capacity because that means that there was nothing there to begin with."

Project Manager from Pop Council also highlighted that a major hindrance to the successful implementation of a program is men and boys. Boys' participation must be incorporated in a way that does not take away from the participation of girls; therefore we asked, "How do you gain the boys' buy-in without detracting funding from girls or diverting all the resources to boys? Which boys are the ones who are most important to engage?" In response, Pop Council Project Manager explained that when implementing a program, it is important to incorporate simple solutions that make girls feel like they are important. "These simple things can go a long way in resource-low communities. For example, in one program, [Pop Council] gave girls fake passports, and the girls valued them because these passports were the only form of ID that they had ever possessed. The passports gave these girls a sense of security and place."

Participants shared several highlights and key takeaways from the GIRL-H curriculum. Using the curriculum Table of Contents included in Annex 5, we analyzed which content was most salient, and which content was not mentioned by participants. In general, content in the Life Skills; Gender, Power, Violence, and Staying Safe; and Employability Skills and Financial Management modules was most frequently noted as key takeaways and content within the Transferrable Skills module was less frequently noted. Specifically, participants highlighted content from every session in the Life Skills module and every session in the Employability Skills and Financial Management module, with the exception of Session 10: Customer Service. In the Gender, Power, Violence, and Staying Safe, participants highlighted lessons around violence, manhood, GBV scenarios and responses, how to report GBV, how to prevent unwanted advances, and taking a stand against violence. Participants did not discuss the difference between gender and sex, work and its value, power, discrimination, and safety planning when sharing what they have learned from the GIRL-H curriculum, indicating that certain parts of this module may be sticking more than others. Lastly, participants shared very few takeaways from the Transferrable Skills module, only mentioning the concepts of personal responsibility and leadership. Additional discussions with program participants may be helpful in exploring what makes certain aspects of the program stick with participants more than others.

Regarding program timing, one program manager explained that the program consists of two sets of cycles: a three-month cycle and a six-month cycle. The latter is for participants who had dropped out of school and require an extra three months of learning in order to catch-up. Given this timing, a Kenya-based program manager stated that the current curriculum places a heavy burden on mentors. It is important to note that although the curriculum has been adopted by past projects and is, in effect, accessible, this does not mean that individual mentors themselves are automatically equipped to deliver the curriculum effectively.

We recommend considering several key elements in program design. A comprehensive program must be age-graded. It should also include asset-building exercises that allow girls to identify the assets they desire. The task of the GIRL-H program is to then identify, assess, and teach the most practical avenues for girls to obtain these assets. As Pop Council Project Manager explained, "Girls want to be taken out of their community for these assets, but at the Population Council, we believe that there is great value in girls occupying spaces that have not yet been occupied by women." Pop Council has an intentional design model, which includes ten steps that guide partners on how to select girls, where to work, with whom they should work with, what to deliver, and how to measure what they are delivering. As recommended above, if Mercy Corps has incorporated a similar approach, such as the "I AM HERE" approach, into the GIRL-H program, the components of the approach should be made more explicit.

We also recommend several logistical improvements. First, proper implementation requires meeting girls where they are, both physically and emotionally. We recommend that Mercy Corps prioritize providing transportation for participants when needed, and provide food and water for participants during all safe space sessions. As the Project manager at Pop Council stated, "There is a huge misunderstanding about how walkable communities are and to understand this means knowing where girls feel safest or least safe in their communities." In Tanzania, Pop Council began one program by mapping where the girls felt safest in their community. At ages 11 or 12, the girls felt safest in one part of the region, and by the time they turned 20, the box that they had originally identified reduced in size, while the box for the boys grew in size as they got older: "The boys' world was getting bigger while the girls' world was getting smaller."

### **RECOMMENDATIONS**

• We recommend **robust partnership with local stakeholders and program participants** in order to support long-term sustainability of the GIRL-H program. We recommend that Mercy Corps increase their utilization of local expertise in designing scope, program, and curriculum materials, and decrease their reliance on international consultants for these services. Mercy Corps should also engage the participants themselves. For example, asset-building exercises would provide an opportunity for participants to identify the assets that they most need and desire, and additional focus groups with program participants would provide an opportunity to further explore what makes curriculum content stick. In particular, we recommend that Mercy Corps engage local stakeholders to revisit the male curriculum, centering gender equity in social and cultural norms when framing the content in order to prevent male participants from feeling sidelined by the GIRL-H program. Given that long-term sustainability requires a deep understanding of the environment and how to maximize resources within a specific context, we believe local experts and participants are better positioned than international consultants to shape the program.

- We recommend that Mercy Corps continue to identify innovative solutions for barriers to desired outcomes. For example, Mercy Corps could leverage pre-existing structures within participants' communities, such as gaining buy-in from local business owners, so that girls do not have to leave their communities in order to find potential jobs or start their businesses.
- We recommend that Mercy Corps **continue to identify and address gaps in program implementation**, such as program reach and retention (see third recommendation under 'Target Setting'), the allocation of budget to food, water, and other necessities, and the lack of funds for girls to start businesses.
- We recommend that Mercy Corps prioritize providing transportation for participants when needed, and provide food and water for participants during all safe space sessions.
- We recommend that Mercy Corps address the issue of migrating communities by identifying a few potential mentors who are also on the move (alongside program participants) that could continue delivering program content in coordination with the organization. We also recommend increasing the stipends mentors receive to match this new role and providing them with certifications for technical training they have completed.
- We recommend that Mercy Corps **provide additional training to program officers on documentation and dissemination of progress and success stories**. Documentation is critical, as it can magnify the impact of the work program staff are doing and be shared with external stakeholders. Mercy Corps should also support its program officers in utilizing the organization's social media handle and creating a template for reporting.

 We recommend that Mercy Corps consider whether it is the best-positioned organization to continue providing health and livelihoods programming in Haiti, Kenya, and Uganda. While deeper partnerships with local stakeholders will set the GIRL-H program up for improved sustainability, Mercy Corps could also consider engaging with local actors including government, community-based NGOs, and other international NGOs working towards similar goals in these regions in order to better understand their unique contribution in this space. We also recommend that Mercy Corps explore the creation of a transition strategy that moves towards international NGO presence decreasing over time, while the values inherent in the GIRL-H program remain with communities.

#### D. GIRL-H Health Component in Kenya: Findings, Discussion, and Recommendations

#### **FINDINGS**

Throughout our research, several findings related to the sexual and reproductive health (SRH) component emerged. On a broad level, the GIRL-H program has been able to create a link between health facilities, hospitals, and clinics. As one SRH officer stated, "These hospitals and clinics follow up on the specific health issues that the program targets face and seek help for. GIRL-H works closely with these health facilities to be able to increase the number of participants who are able to access healthcare."

Interviews with local partners included health workers in Kenya, who are tasked with delivering the sexual and reproductive health components of the curriculum and offering referral services. The main topics that the health workers listed when describing their curriculum content were HIV/AIDS prevention, STD/STI prevention, child care, treatment, immunization, and family planning. They also noted that they taught men about the consequences of GBV. They shared that their work has led to reduced rates of HIV and early marriage in communities.

Health workers shared their perspective of takeaways from the program. In their view, the most important takeaways for participants include prevention of STDs/STIs, prostitution, and child marriage, and sensitizing girls to rape and GBV in their communities. The most effective services that health workers offered were HIV testing and GBV counseling, which includes reporting, care, and checkups. Health workers felt that family visits and group training with participants were the most effective methods of content delivery. Family visits involve going to households and advising families on domestic issues with all family members present. They noted that girls had become agents of change in their community, saying "girls have supported these health workers by volunteering and handling the mistreatment of other girls," and shared that

participants were intervening to report instances of GBV, sexual assault, and forced marriage in their communities and encouraging follow up. Health workers shared two additional needs that they would like to see from the GIRL-H program, including increased support in rural villages (specifically, Ruiru and Kapenguria) and increased capacity building for community health workers. Health workers in Kenya shared that other NGOs doing similar work in the region include Amref Health Africa and the Red Cross.

Female participants in Kenya also shared their perspective on the SRH component of the GIRL-H program. Participants highlight being exposed to HIV/AIDs, early pregnancy, and a lack of knowledge about hygiene and sanitation needs as main challenges for their health. Participants shared that the family planning portion of the curriculum included important takeaways. One participant noted that before the training, she did not know about birth control and family planning measures, and now she knows how to access them. Another participant noted that before the SRH training, she did not know that she could use pads during menstruation. She shared that in GIRL-H, she had learned about her options for menstrual hygiene, saying "now I know I can use locally available pads, use local materials to sew one, or purchase one to keep myself clean."

Lastly, health workers shared several barriers to implementation, including boys refusing to use condoms, and fear and misinformation surrounding family planning methods. Fear and misinformation are fueled by anecdotes of individuals experiencing side effects of family planning methods spreading around the community. Health workers shared that limited doctors, nurses, and transportation in the region are major barriers to healthcare access, so community health workers have been helpful in increasing access. In addition, it is important to note that local partners and program participants in Uganda shared that they had discussed menstrual hygiene and embraced practices surrounding "menstrual management" even though the SRH curriculum is only currently being implemented in Kenya. Overall, health workers felt that content they were delivering in the GIRL-H program was critical, saying "in order for a girl to ask for help, she needs the knowledge and information to speak up for herself," and sharing that without the program, this information would not be available.

#### DISCUSSION

Our findings indicate that female participants in Kenya are benefitting from the SRH component of the GIRL-H program. Participants and health workers highlighted different pieces of the curriculum as main takeaways, with participants highlighting family planning and menstrual hygiene and health workers highlighting prevention of HIV/AIDS, STDs/STIs, prostitution, and child marriage, and sensitizing girls to rape and

GBV in their communities. The inclusion of SRH topics in Uganda despite the health component not yet being implemented in Uganda indicates that the safe spaces may already be used to discuss these topics as needed by program participants. In addition, participants are benefitting from the referrals to health services resulting from the GIRL-H program. Staff Associate and Project Manager of Adolescent Girls Community of Practice at Pop Council noted that Mercy Corps can ensure that the linkages they are building through the GIRL-H program are sustained by supporting the creation of formal contracts between communities and health facilities.

Regarding barriers, misinformation and refusal to use condoms are key issues preventing better adoption of SRH practices in communities. Given that health workers identified family visits as an effective method of content delivery, these visits may serve as useful forums to discuss misinformation and safe sex practices with all family members present. In addition, highlighting the importance of condom usage and STD prevention in the GIRL-H curriculum for male participants would support wider adoption of these practices. Lastly, the success of community health workers in increasing access to healthcare and improving outcomes points to an increased need for local health interventions.

According to an interview with a Senior Advisor at the Women's Refugee Commission (WRC), there are several ways to support the success of health programming for adolescents. First, it is crucial to avoid viewing all adolescents as a monolith and to consider the wide variation in age, gender, socio-economic status, and other identities of adolescents. Second, it is important to situate health programming for adolescents within systems. WRC stated "At a younger age, we want to promote autonomy and navigate complexities of their lives and take a systems-level view of who else to engage in programming (family members, teachers, peers, healthcare workers), considering who has influence on adolescents' lives" and she highlighted the importance of "not putting a lot of burden on adolescents themselves to make changes." In describing key stakeholders to include in health programming, WRC echoed the community health workers' emphasis on community, saying stakeholders are "context-dependent in terms of what type of community structures and leaders are in place. In some contexts, religious leaders are the most influential. In other places, teachers or village leaders are." Third, WRC highlighted that drawing on local capacities and the history of health programming for adolescents is key, as socio-cultural determinants of health are primary drivers in health outcomes and interventions must center these determinants. Lastly, WRC recommended utilizing toolkits like the

Adolescent Sexual and Reproductive Health (ASRH) Toolkit for Humanitarian Settings<sup>32</sup> for additional guidance on how to design effective health programming for adolescents.

# RECOMMENDATIONS

As Mercy Corps plans for expansion of the SRH component of the GIRL-H program, we recommend prioritizing the following next steps:

- Hold **additional focus group discussions** that aim to understand why certain aspects of the curriculum stand out more than others, and how to make more of the curriculum stick.
- Ensure that the curriculum is designed with a **systems perspective** and includes **adapted modules** specific to the age of participants and each country's socio-cultural factors.
- Use **family visits**, **group training**, **and other community forms** to combat misinformation surrounding family planning methods and disseminate other key SRH information in settings where all family members are engaged.
- Emphasize condom usage and safe sex practices in the curriculum for male participants in order to **create shared buy-in and shared responsibility** for safe sex practices.
- Support **expansion of community health interventions** by expanding geographic reach of the SRH component and funding capacity building for community health workers.

### **III. LEARNING QUESTION THREE: SUSTAINABILITY**

### **FINDINGS**

Prior to Mercy Corps' implementation of GIRL-H, USAID sponsored a similar adolescent program in Kenya and Uganda. After the program ended, Mercy Corps reached out to funders to continue this model. The program examines the

<sup>&</sup>lt;sup>32</sup> Inter-Agency Working Group on Reproductive Health in Crises. (2021). Adolescent Sexual and Reproductive Health (ASRH) Toolkit for Humanitarian Settings: 2020 Edition. *IAWG*. Retrieved from <u>https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-setting s-2020-edition</u>.

socio-ecological drivers of behavioral change to create an impact. The high-level outcome is for adolescents to use life skills and social capital for improved well-being. According to a Mercy Corps staff member, GIRL-H operates at three levels: individual, community, and systems to achieve this goal. At the individual level, Mercy Corps engages participants in safe space programming that focuses on socio-cultural issues, such as female genital cutting, child marriage, and early pregnancy. At the community level, Mercy Corps uses champion days, an aspect of safe space programming, to bridge gaps in communication within the community. Systems-level operations involve working with the council and district members to strengthen the enforcement of laws and policies relevant to GIRL-H's main objectives.

We found several barriers to achieving sustainable impact through the GIRL-H program during our review process. As detailed above, retention is a challenge since rural, pastoral communities will "move where the water is" (see Target Setting and Localization Findings section for more). Mercy Corps currently addresses this challenge by involving stakeholders like parents and guardians and emphasizing to participants the exciting activities GIRL-H provides, which is an opportunity to do things they do not normally have access to. At the end of the program, Mercy Corps aims to transition participants into viable pathways, however, there are several challenges to accomplishing this goal (see Program Design and Implementation Findings section for more). Midway through the three-month or six-month training, Mercy Corps maps opportunities in the community using a strengths assessment, which could lead to vocational training or receiving a start-up grant to expand a business. However, in multiple interviews with participants and with staff, we heard of structural limitations that prevent fully realizing these opportunities such as lack of financial resources, security concerns, limited job opportunities, and increased business competition due to over-saturation of similar vendors within the market. To address this, we heard from staff that Mercy Corps is planning to begin the process of identifying business opportunities sooner and on a rolling basis.

Other challenges to achieving sustainability revolve around human resources. In Haiti, high staff turnover rates prevent adequate streamlining of implementation; and in Kenya, mentors spoke of having less motivation to carry out their roles due to the low stipend they received (see **Program Design and Implementation Findings**). The community was regarded as a key resource and stakeholder. In interviewing the Haiti team, we heard from staff that "All the resources that [they] use when [they] want to organize safe spaces are from the community." To organize meetings, Haiti seeks out schools and churches near to communities and continually engages with leaders of community-based organizations. As a comparison, in an interview with Mercy Corps staff in Kenya, we learned that "Mercy Corps' sustainability plan includes integrating activities into school and youth clubs at church and looking at existing structures within the community such as church and mosques ...[so participants] can continue to pass on what they learn in a safe space into their normal life."

Asked what happens after participants transition out of the program, Haiti staff commented on the "need to consider the resilience and sustainability of the program." From the perspective of participants, they want to see future generations and other young people from their communities benefiting from the GIRL-H program. In response to where she sees participants in five years, a Mercy Corps staff member replied, "[participants] should have been grounded in whatever it is they have acquired, grounded enough to flourish not only in the sense of doing well but also bringing in others from their community to be part of their venture. Be considered someone that's well-respected in their community and mentor others in their community." She continued by stating that "the private sector initiative they've started will have expanded and participants integrated into value chains, then coming together, more resilience to shocks and stressors, marrying and having children when they want to have children, and more women representation, enforcement of laws around FGM and early marriage."

In Uganda, a local implementing partner stated that the most effective area of the program is in facilitating community dialogues on gender-norm changes. According to one of the experts, when conducting community dialogues, "Women and girls now have a voice" and "after the progressive activity of gender-norm advocacy, people have come out to talk about domestic violence." In addition, local partners have witnessed participants gaining confidence in themselves through what they learn from the curriculum. The use of mentors also showcases young people as community leaders which have made "parents very happy to see their own children carrying out decisions." The space that GIRL-H creates by bringing young people across cultural barriers is "one of a kind."

### **DISCUSSION**

Our findings suggest a gap between Mercy Corps' high-level goals (improving resilience and access to educational, economic, and civic engagement opportunities) and the program's impact. The program is designed to move participants through phases: safe space programming  $\rightarrow$  pathway placement  $\rightarrow$  community mentorship. This process aims to foster income-generating activities, but our review suggests that GIRL-H is primarily successful in delivering content but is less so in linking participants to tangible livelihood opportunities. Some participants that we spoke with appeared to still be undergoing the safe space programming so this may change once participants transition into the livelihood aspect of the program. Focus group discussions across the

three countries revealed participants took seriously the learnings they have acquired from the program. For example, in Haiti, the male treatment group spoke of behavioral changes, a rise in self-esteem, and learning to take personal responsibility as benefits of the program. Similar highlights stood out from focus group discussions with female and male participants in all three countries. However, participants were eager to transfer the skills they have learned from the safe space programming into income-generating opportunities.

In focus group discussions with participants across genders and different country contexts, participants expressed interest in starting a business (see Focus Group **Discussion Findings**). Their interest originates from skills they have learned from the GIRL-H program, and as a next step, they would like business opportunities to transfer those skills. However, they lacked "business grants," "start-up capital," or "financial support" necessary to start businesses that build sustainable livelihoods. According to a Senior Evaluation Officer, there is a difference between a "need" and a "want" entrepreneur. Starting a business may not actually be of interest to a participant but could be seen as the most viable pathway. We suggest that the GIRL-H program differentiate the two among participants. While the program also has components of apprenticeship, these options may not lead to sustainable income-generating opportunities given the feedback participants provided on the lack of job opportunities available in their communities. As discussed in the Theory of Change section, the GIRL-H program hypothesis assumes that adolescent girls, boys, and young people will be able to learn life skills and financial literacy, form social capital, and access education and livelihood opportunities. However, differences in implementation settings and the lack of viable employment opportunities in the communities challenge this assumption. Against this background, it remains unclear what the next step is for participants after the safe space programming and how Mercy Corps plans to respond if pathways of interest do not exist.

From interviews with Mercy Corps staff, we noted plans to sustain the intervention administered through the GIRL-H program, however, we did not receive an indication of plans to sustain the program's impact. Assuming that adolescents and young people gain the ability to recover from stressors or shocks, how will they retain this measure of resilience once Mercy Corps transitions from their communities? Answering this question is as important but fundamentally different from a solution to scale the program to the national level or other contexts. Sustaining impact requires a responsible transition strategy for current participants of the program. Mercy Corps aims to facilitate pathways after the safe space programming. These should provide tangible linkages to education or livelihood opportunities. In Mercy Corps' sustainability plan, there should be concrete steps towards sustaining what has been achieved. The

program should also have contingency plans for participants that do not arrive at the level of impact assumed by the Theory of Change. These plans should be created and made transparent from the onset of the program and align with the program's Theory of Change.

Sustaining the impact of the GIRL-H program is also a long-term outcome. In order to arrive at this level of impact, there should be links to steps and activities outlined in the Theory of Change supported by the Monitoring and Evaluation framework. Some of these steps, which involve developing partnerships with community members and leaders, and engaging with the public and private sectors are already included in Mercy Corps' GIRL-H documents. However, these steps do not link clearly to sustainable impact as an outcome. The advantage of clearly defining steps towards sustaining the impact of the program is to clarify Mercy Corps' transition strategy after the three years of program implementation.

According to a Mercy Corps staff member, "The primary focus [of GIRL-H] is to strengthen resilience at the foundational level. Once it's strengthened it will reinforce itself over the years..." In order to arrive at this level of impact, we suggest asking the following **individual level** questions:

- 1. Where does resilience already exist at the foundational level?
- 2. What can participants achieve in three to six months? What can they achieve in 3 years?
- 3. How do we support participants that do not achieve program goals as intended?
- 4. Which pathways are the most tangible? If there's a gap between participants' interests and opportunities, how can we fill this gap or ground our scope to be more realistic?

At the **programmatic level**, we also suggest asking which networks can help sustain the program's impact at the three to six-month interval, one-year interval, and three-year interval. For example, our findings suggest that the community is a key partner and there might be room to grow in partnership. Considering the overall finding from our review is that the goals of Mercy Corps' GIRL-H program are out of scope, we suggest leading with sustainability as a next step by routinely asking these questions.

# RECOMMENDATIONS

• Define what sustainable impact means for the GIRL-H program and incorporate strategies for achieving this impact into the Theory of Change and Monitoring and Evaluation framework.

- Consider developing a sustainable transition strategy for Mercy Corps and participants in collaboration with local partners to ensure a thoughtful and gradual transition to locally-led and sustained implementation.
- Form referral pathways with local technical and vocational training centers to sustain financial literacy components.
- Conduct a market assessment to understand the challenges faced by employers in surrounding communities and the skills participants need to acquire.
- Leverage resources to support local partners and communities in **advocating for structural changes** to provide education, livelihood, and civic engagement opportunities for adolescents and young people.
- Assess the feasibility of publicly sharing gathered data from the GIRL-H program to inform national-level public policy within the countries of implementation.

# CONCLUSION

The GIRL-H program aims to build the resilience of adolescents and young people in Haiti, Kenya, and Uganda. By improving well-being and strengthening access to pathways to formal education, economic opportunity, and civic engagement, Mercy Corps aims to ensure that adolescents and young people will have improved individual and household resilience. GIRL-H is currently being adapted and localized for implementation in Haiti, Kenya, and Uganda. In close collaboration with Mercy Corps, we provided technical insights and recommendations to advance localization, adaptability of programming, and fidelity of implementation. This report aimed to provide a technical review of program targeting, Theory of Change, monitoring and evaluation framework, and sustainability, while highlighting findings from key informant interviews and focus group discussions.

Overall, we have provided findings and recommendations per the three main learning questions. We recommend that Mercy Corps review their target setting based on changes in geopolitical, economic, and environmental shifts since the program design and inception, to best address the needs of adolescents and young people. Additionally, we recommend that program content be reviewed and aligned with supply and demand needs of beneficiaries and the education, economic, and civic engagement pathways and opportunities that are available in the catchment areas. In regards to the theory of change, we recommend that Mercy Corps ensure a coherent and realistic scope. The monitoring and evaluation framework, while extensive, requires greater alignment with the theory of change. We recommend that Mercy Corps reduce the number of outcomes, outputs, and indicators that are redundant. Lastly, we recommend that Mercy Corps integrate sustainability within the program design and consider means of strengthening local engagement throughout the implementation, monitoring and evaluation, and assessments of the GIRL-H program.

We aim to support Mercy Corps' efforts to ensure a data-driven, needs-based, and sustainable approach to improving resilience programming in Haiti, Kenya, and Uganda. While we have documented key findings and recommendations, we recognize that the GIRL-H program has only recently launched and the inception of the program was impacted by COVID-19. We hope these findings will be helpful for Mercy Corps as they continue to adapt and localize programming, and design the midline evaluation.

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# Annexes

# Annex 1: Mercy Corps' Learning Agenda: Analysis and Recommendations

<u>Learning Question One</u>: How effective are adolescents' and young people's life skills and financial literacy in improving their individual and household resilience?

- 1. Learning question: Recommend reframing the question to capture outcomes capacity within the scope of the GIRL-H program. Currently the research question captures impact that requires larger structural change and greater engagement of households and community members.
- 2. Evidence that exists: Given the objective of this learning question, we recommend that Mercy Corps specifically delineate what evidence-driven findings from previous GIRL-H implementation served as the foundation for the expansion of the program in Haiti, Uganda, and Kenya. Additionally, we recommend that Mercy Corps reference research studies and programmatic impact evaluations that have informed the program design and localization. Lastly, we recommend that Mercy Corps reference a specific form of research methodology that aligns with the type of technical domains, data collection, and data analysis to ensure that it is the most suitable and aligned means to tackle the first learning question.
- 3. **Data Collection**: It is recommended that baseline data be captured to assess the impact. Additionally, given the scope and impact level of the question, this potentially exceeds the immediate scope of the 3-year GIRL H program. We recommend that Mercy Corps consider a longer-term longitudinal study to identify longer term and higher-level individual and household resilience impacts of the program. Additionally, even though implementation has commenced, a baseline starting point is critical, thus, we recommend Mercy Corps identify a realistic timeline for a baseline, midline, and end line that is not necessarily coordinated by the annual year of programmatic implementation.
- 4. **Data Utilization**: Recommend including a row that illustrates what data will be utilized for. For learning question one the longer-term impact of the GIRL-H program on individual and household resilience could have concrete implications for continuation of the program, scalability, and potential adaptation in other country contexts. However, this research question, learning, and data collection goes beyond the performance period of the three-year GIRL H program.

<u>Learning Question Two</u>: What is the effectiveness of specific components of the safe space sessions in delivering individual and household resilience?

- What are the critical contents of the sessions that affect life skills and financial literacy?
- What modules (and models) in the curriculum are essential to increase
- How do the differences in number and mode of session attendance affect the participants' life skills and financial literacy skills?

- How practical are the various technological innovations in enhancing life skills and eventually resilience?
- 1. Learning Question: Learning question two is critical to Mercy Corps implementation and has the potential to inform how the program continues during years two and three of implementation and in the future expansion or scalability of the program within and beyond the three countries. This learning question also has the potential to provide a data-driven approach to Mercy Corps either scaling back on specific pillars of implementation or expanding depth and breadth based on what has proven to have greater outcomes and relevancy for the country context.
- 2. Evidence that exists: Even if Mercy Corps has not previously looked at component-specific assessments, we recommend that Mercy Corps consider best practice and data-driven assessment models to inform the development of this question and data collection and analysis. In particular, we recommend Mercy Corps consider technical reviews about quality and relevancy of content and materials in life skills and financial literacy, fidelity of implementation, and outcomes of implemented activities. Moreover, we recommend Mercy Corps identify key inputs to test and evaluate which had the greatest impact on strengthening life skills and financial literacy. This could include looking at the content of the curriculum, modality of training, duration and frequency of training implementation, skillsets and experience of mentors, readiness of participants, and other situational context factors.
- 3. **Data Collection**: Currently the data collection methodology for the learning question two reads exactly like the learning question number one.
- 4. **Data Utilization**: Recommend including a row that illustrates what data will be utilized for. The findings of this learning question can be used by Mercy Corps to identify which aspects of the program have the greatest impact on achieving the goals of the GIRL-H program. Additionally, findings on implementation and quality can inform internal planning, pivoting, and adaptations. However, this research question, learning, and data collection goes beyond the performance period of the three-year GIRL H program.

# <u>Learning Question Three</u>: Which transition pathways are most accessible, and which ones are most effective in improving the participants' well-being?

- 1. **Learning Question**: This learning question is critical to understanding the impact and effectiveness of the GIRL-H program. We recommend that Mercy Corps also consider understanding the challenges or barriers to establishing pathways and what factors create enabling environments to establish pathways.
- 2. **Evidence that exists**: Given the program's emphasis on transition pathways, we recommend conducting a market assessment prior to the design and implementation and integrating it to the theory of change to further ground the scope of Mercy Corps' intervention. We also recommend that in addition to understanding which pathways are most effective and accessible, Mercy Corps identifies pathways that are missing from catchment areas. This step should

involve robust engagement with the adolescent population to identify gaps between their interests and opportunities available.

- 3. **Data Collection**: A market assessment should be collected before implementation and inform the program design. Engaging with the youth can be an ongoing process that informs the learning agenda of the program.
- 4. **Data Utilization**: Since Mercy Corps' GIRL-H spans three levels, data from this learning agenda can be utilized for community and system level interventions while drawing from the individual level engagement with the adolescent population.

<u>Learning Question Four:</u> Which individual (participants') and household characteristics are associated with higher levels of resilience among the beneficiaries?

- 1. Learning Question: This learning question is an important assessment of Mercy Corps' impact at the individual and household levels. However, we recommend that timing include pre-implementation as the base period. Doing so would allow Mercy Corps to strengthen resilience where it already exists despite differences in measure. Additional assessments at the midline and endline will then serve as a map of interventions that proved the most or least effective. Mercy Corps should also consider other factors associated with both household characteristics and levels of resilience affecting outcomes. For example, a pastoral lifestyle is a characteristic that affects resilience and impact of Mercy Corps' programming. Waiting to conduct an analysis of characteristics during program implementation could lead to ineffective design.
- 2. **Evidence that exists**: We recommend using the baseline individual and household characteristics that Mercy Corps already has available to check the levels of resilience, then compare it to current data available. Moving forward, there should already be baseline data from pre-implementation for comparison.
- 3. **Data Collection**: We support the use of qualitative research to track changes. Regarding the use of regression analysis, we recommend that Mercy Corps consider other correlated factors that would affect the characteristic and resilience measure as mentioned above. To strengthen this statistical analysis, Mercy Corps could design the data analysis as panel rather than cross-sectional. In other words, collecting data from the same identified participants periodically, e.g. every 3 months for 3 years or collecting data for the same categorical characteristic periodically.
- 4. **Data Utilization**: We agree with Mercy Corps' use of the data internally to improve performance. The data should also be used to determine the scalability of the program in specific contexts.

**Learning Question Five:** How effective was the health component in complimenting the overall participant's resilience? [Kenya Only]

1. Learning Question: We agree that a health component is an important complement to adolescent programming and support incorporating it into GIRL-H. A bundled approach is ideal but could lead to undermining focus of other key elements of the program's goals, such as creating transition pathways. Therefore, we recommend that GIRL-H design health implementation around

capacity sharing with local partners. Rather than designing and implementing health related activities, Mercy Corps should continue directing resources to local facilities and organizations and act as a referral source.

- 2. Evidence that exists: As studies show, addressing sexual and reproductive health supports resilience. Mercy Corps should seek to understand various mechanisms within the scope of the GIRL-H program to support this positive impact.
- 3. **Data Collection**: We recommend tracking referrals and service utilization made to local facilities and health program implementation partners. In addition, Mercy Corps should collect feedback from these partners on what they identify is the highest need from participants in order to inform how Mercy Cops directs resources.
- 4. **Data Utilization**: This learning should inform systems level changes focused on the health outcomes of individuals and households in the GIRL-H catchment areas.

### Annex 2: Roles and Responsibilities

- Project Manager: Nisha Maya Chojar (<u>nmc2174@columbia.edu</u>)
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- Client Liaison: Hannah Choi (jc5448@columbia.edu)
- Fieldwork Coordinator: Juliet Ihediohanma (jni2106@columbia.edu)
- Presentation Materials Editor: Mia Ashley Chin (<u>miachin.nyc@gmail.com</u>)
- Written Report Editor: All team members

#### **Annex 3: Interview Schedule**

#### March 10th, 2022

8:00am-9:00am: GIRL-H Overview (Mercy Corps Staff)

#### March 21st, 2022

7am-8am: Interview with MEL/PaQ Team 8:30am-9:30am: Interview with GIRL-H MEL Team 2:00pm-3:00pm: Interview with Julianne Deitch, Senior Advisor of Adolescent Health & Protection at Women's Refugee Commission

#### March 22nd, 2022

8:30am-9:30am: Interview with Mercy Corps Team

#### March 23rd, 2022

7:00am-8:00am: Interview with 15 Girls Treatment Group (Kenya) 9:00am-10:00am: Interview with Girls Control Group (Kenya) 9:30am-10:30am: Interview with Melissa Baker, External Evaluator from IPSOS

#### March 24th, 2022

7:00am-8:00am: Interview with Boys Treatment Group (Kenya) 8:00am-9:00am: Interview with Boys Control Group (Kenya) 9:30am-10:30am: Interview with Mercy Corps Haiti Team

#### March 25th, 2022

7:00am-8:00am: Interview with Mentors (Kenya) 8:00am-9:00am: Interview with Health Workers (Kenya)

#### March 28th, 2022

7:00am-8:00am: Interview with treatment group (Uganda) 9:00am-10:00am: Interview with Mercy Corps 2PM, 4POs and SRH Officer 2:00pm-3:00pm: Safe space interviews Boys Treatment Group (Haiti) 3:30pm-4:30pm: Safe space interviews with Girls Treatment Group (Haiti)

#### March 29th, 2022

2:00pm-3:00pm: Safe space interviews with boys control group (Haiti) 3:30pm-4:30pm: Safe space interviews with girls control group (Haiti)

#### April 4th, 2022

8:00am-9:00am: Interview w/ local experts (Uganda) 10:00am-11:00am: interview with Sophie Saores, Project Manager & Staff Associate at Pop Council

#### April 8th, 2022

2:00pm-3:00pm: Interview with Kevin Hong, Senior Evaluation Officer at Wellspring Philanthropic Fund & Lecturer at Columbia School of International and Public Affairs

#### Annex 4: Questionnaire Templates

#### **Guiding Questions - Treatment Focus Group**

- 1. Have you been a part of another program like GIRL-H?
- 2. What do you think this program is supposed to do for you?
- 3. Why did you decide to join GIRL-H?
- 4. Can you share what your day looks like as a participant?
- 5. What is one of your biggest challenges? Individually and within the community?
- 6. What has been the best thing about participating in GIRL-H? And what's been less good?
- 7. How do you think you've changed while participating in the program?
- 8. How do you use what you've learned from the program? Have you shared what you've learned at home?
- 9. What else do you want from the program?

#### **Guiding Questions - Control Focus Group**

- 1. What do you normally do during the day? Are you in school or are you working?
- 2. Can you write your name?
- 3. Do you have any money at home?
- 4. Do you know how to write your name? How did you learn to write your name?
- 5. What are the things/skills that you would like to learn?
- 6. Who in your household is working?
- 7. What are your responsibilities at home?
- 8. What jobs are available to you where you live?
- 9. What are your biggest challenges?
- 10. How do you deal with these challenges?

# Annex 5: GIRL-H Curriculum Table of Contents (6 Months - Young People) TABLE OF CONTENTS

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Session 8: Drug & Substance Abuse
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## Annex 6: M&E Framework Recommendations

Soal: contribute to individual and household	resilience of adolescents and young people through increased		
	to educational, economic, and civic engagement opportunities.		
	Indicator		
Longer Term Outcome 1: Well Being of adolescence and young people improved.			
Medium Term Outcome 1.1: Adolescence and young people decision-making ability improved (2.3)	% of beneficiaries reporting that they can decide on matters affecting them? (2.3.1) % of beneficiaries who report that they can make decisions regarding income-generating activities within their households (2.3.2)		
	<ul><li>% of beneficiaries who agree they can make decisions around their health choices (2.3.3)</li><li>% of beneficiaries who resist pressure to participate in risky</li></ul>		
Medium Term Outcome 1.2: Adolescence and young people application of life skills ncreased (2.6)	<ul> <li>behaviour such as taking drugs, consuming alcohol and prostitution (self-affirmation) (2.6.2)</li> <li>% of beneficiaries who are able to defend/stand for their point of view such as a decision to stay or move on (self-affirmation) (2.6.3)</li> <li>% of beneficiaries who stay with the project until a goal is achieved (perseverance) (2.6.4)</li> </ul>		
Longer Term Outcome 2a: Adolescence and y opportunities increased.	youth access to education, economic, and civic engagement		
Medium Term Outcome 2.1: Adolescence and young people (Recommend adding an outcome on education)			
Medium Term Outcome 2.1: Adolescence and young people application of financial literacy increased (2.7) (Recommend making an outcome)	% of beneficiaries who report using any of the cash-flow management systems (record keeping, budget, financial, timely bill payment. (2.7.1) % of beneficiaries who report saving money in the last month, three		
	months, and six months (2.7.2) % of beneficiaries who would consider taking a loan from different sources (2.7.4)		
	% of beneficiaries who make financial decisions based on information from credible financial sources (2.7.6)		
Output 2.1.1 Adolescence and young people have improved knowledge on life skills and financial literacy (3.02)	% of beneficiaries with the correct knowledge on life skills (3.02.1) % of beneficiaries with the correct knowledge on financial literacy (3.02.2)		
	Average score on knowledge on core life skills (3.03.3)(Recommend		

	deleting, redundant indicator)	
	% of beneficiaries who report they know where to access internships	
	(2.5.1)	
Medium Term Outcome 2.2: Adolescence	% of beneficiaries who report they know where to access	
and young people's access to internships,	apprenticeships (2.5.2)	
business networks, or apprenticeships	% of beneficiaries who report having accessed apprenticeships in the	
increased (2.5)	last 6 months (2.5.3)	
	% of beneficiaries who report having accessed internship in the last	
	6 months (2.5.4)	
Output 2.2.1 Beneficiaries correctly		
matched to their interest to work (3.03)	# of beneficiaries matched to work opportunities (3.03.1)	
Output 2.2.2 Pathway created for out of		
school youth to access vocational training		
(3.05)	# of OOS youth who access vocational training (3.05.1)	
Medium Term Outcome 2.3: Adolescence	% of beneficiaries engaging in any income generating activity (2.2.1)	
and young people engagement in economic	(recommend specify income generating activity)	
activities increased (2.2)	% of beneficiaries engaging in new income generating activity within	
	the last three months (2.2.1) (recommend specifying the type of	
	income generating activity)	
[missing outputs]		
Median Term Outcome 2.4: Increased		
ownership of income-generating assets		
(2.8)	% of beneficiaries who own income-generating assets (2.8.1)	
[missing outputs]		
	% of beneficiaries who express their willingness to engage in	
Output 2.5.1 Civic engagement events,	community level activities (2.4.1)	
campaigns, an projects developed by youth	# of initiatives (events, campaigns, projects) developed by the	
(3.08)	program (3.08.1)	
Output 2.5.2 Community influencers		
reached by the champions day (3.09)	# of community influencers reached through champion days (3.09.1)	
Longer Term Outcome 2b: Adolescence and	youth access to health services increased	
Medium Term Outcome 2b.1: Improved	% of female participants who report the ability to monitor their	
health outcomes (2.13)	periodic cycle using "moon beads" (2.13) (recommend making this	
	an output indicator and revising the outcome level indicator)	
Output 2b.1.1 Improved social norms and	% of beneficiaries who believe that traditional leaders are actively	
attitudes around health services and	working to solve community needs (2.10.1)	
products (2.10 <- recommend making into	% of adolescents who agree that delaying first pregnancy is essential	
output)	in their lives (2.10.2)	
	% of beneficiaries who correctly perceive themselves to be at risk of	
Output 2b.1.2 Increased risk perception to	HIV infection (2.11.1)	
	% of beneficiaries who correctly perceive themselves to be at risk of	
<- recommend making into output)	unwanted pregnancy (2.11.2)	
Longer Term Outcome 3: Improved gender e	quality among the beneficiary community	

Medium Term Outcome 3.1: Improved gender norms (2.9)	The average score for gender norms (2.9.1)
	% of beneficiaries who agree that men and women make equal
	political leaders (2.9.2)
	% of beneficiaries who agree that women have the same rights as
	men (2.9.3)
	% of beneficiaries who agree that men and women should have
	equal rights to a job (2.9.4)
	% of beneficiaries agree men should not have more rights to a job
	than women (2.9.5) (recommend deleting)
	% of beneficiaries who agree that men and women make equal
	business executives (2.9.6) (recommend deleting)
	% of beneficiaries who agree that vocational training is essential to
	both a man than a woman (2.9.7)
Output 3.1.1 Increase in gender-specific	# of gender-specific co-created solutitons developed for economic
co-created solutions (3.4)	engagement (3.04.1)
Longer Term Outcome 4: Sustaining the pro	gram
Recommend adding an outcome on sustainability	
Output 4.1.1 Media housed provide free	# of sessions for activation messages provided by media stations
sessions for activation messages (3.10)	(3.10.1)
Output [missing outcome] MOUs signed	
with various private sector players (3.11)	# of formal partnerships with various private sector players (3.11.1)
Output [missing outcome] Advocacy on	
issues touching livelihoods and wellbeing	
advocacy activities for beneficiaries (3.12)	# of advocacy activities implemented (3.12.1)
	% of beneficiaries reporting that facilities offered adolescent-friendly
Output [missing outcome] Facilities offer	services (3.13.1)
adolescent and youth friendly services	% of beneficiaries reporting that facilities offered youth-friendly
, ,	, , , , ,

services (3.13.2)

(3.13)