

## **IMPACT EVALUATION RESEARCH PROTOCOL**

---

**TITLE: Impact Evaluation of the Rethinking Power Program in South East Haiti**

### **Table of Contents**

<b><u>A.</u></b>	<b><u>SPECIFIC AIMS</u></b> .....	<b>3</b>
<b><u>B.</u></b>	<b><u>BACKGROUND AND SIGNIFICANCE</u></b> .....	<b>3</b>
<b><u>C.</u></b>	<b><u>PRELIMINARY STUDIES</u></b> .....	<b>6</b>
<b><u>D.</u></b>	<b><u>RESEARCH DESIGN AND METHODS</u></b> .....	<b>8</b>
<b><u>E.</u></b>	<b><u>STUDY POPULATION</u></b> .....	<b>18</b>
<b><u>F.</u></b>	<b><u>HUMAN SUBJECTS</u></b> .....	<b>19</b>
<b><u>G.</u></b>	<b><u>RISKS AND SIDE EFFECTS</u></b> .....	<b>20</b>
<b><u>H.</u></b>	<b><u>BENEFITS</u></b> .....	<b>30</b>
<b><u>I.</u></b>	<b><u>OUTSIDE CONSULTANTS/COLLABORATORS</u></b> .....	<b>31</b>
<b><u>J.</u></b>	<b><u>CONTRACTUAL AGREEMENTS</u></b> .....	<b>31</b>
<b><u>K.</u></b>	<b><u>COSTS TO SUBJECTS</u></b> .....	<b>31</b>
<b><u>L.</u></b>	<b><u>CONFLICTS OF INTEREST</u></b> .....	<b>31</b>
<b><u>M.</u></b>	<b><u>CONFIDENTIALITY</u></b> .....	<b>31</b>
<b><u>N.</u></b>	<b><u>SUBJECT COMPENSATION</u></b> .....	<b>32</b>
<b><u>O.</u></b>	<b><u>FACILITIES AND EQUIPMENT</u></b> .....	<b>32</b>
<b><u>P.</u></b>	<b><u>REFERENCES &amp; LITERATURE CITED</u></b> .....	<b>33</b>

<b><u>Q. ANNEXES</u></b> .....	<b>35</b>
<b>Annex 1: Project Logframe</b> .....	<b>36</b>
<b>Annex 2: Data Collection Tools</b> .....	<b>41</b>
<b>Annex 3: Consent Forms</b> .....	<b>107</b>
<b>Annex 4: Site Permission Letters</b> .....	<b>123</b>
<b>Annex 5: Available Referral Services for Survivors of Violence</b> .....	<b>128</b>
<b>Annex 6: TOR for local survey consultant</b> .....	<b>132</b>
<b>Annex 7: Novo Foundation Grant</b> .....	<b>135</b>
<b>Annex 8: Curriculum Vitae of Dr. Manuel Contreras (PI)</b> .....	<b>136</b>
<b>Annex 9: Sample Training Agenda</b> .....	<b>143</b>
<b>Annex 10: Training Materials – Identifying and supporting distressed participants</b> .....	<b>145</b>

## RESEARCH PLAN

### **A. Specific Aims**

The principle aim of this study is:

- To evaluate the combined effectiveness of the *SASA!* and *Power to Girls* methodologies on preventing violence against women and girls (VAWG) and sexual and reproductive health (SRH) risk behaviors, as implemented by Beyond Borders (BB) in Haiti.

This research will utilize a quasi-experimental design (including a household survey and qualitative interviews and focus groups) that will aim to measure the impact of the Rethinking Power (RP) model by assessing which strategies are (or are not) successful, how results are achieved, and the circumstances or conditions that determine its effectiveness.

The evaluation will aim to answer the following research questions:

- Does the program model result in a reduction of social acceptance of gender inequality?
- Does the model result in a reduction of social acceptance of VAWG – particularly intimate partner violence (IPV) and sexual abuse of women and girls?
- Does the model result in a reduction of experiences of IPV among women?
- Does the model result in a reduction of experiences of sexual abuse of women and girls?
- Does the model result in an increase in girls' sense of safety in public spaces?
- Does the model result in an increase of girls' sense of freedom to make decisions?
- Does the model result in a decrease in HIV/SRH risk behaviors among women and girls?

To further detail the level of success of the program, the evaluation will also measure change on a number of outcome level indicators (including changes in knowledge, attitudes and behaviors) within the community. See the project logframe in Annex 1 for further details.

### **B. Background and Significance**

#### *The magnitude*

A 2013 World Health Organization (WHO) report on the global and regional prevalence of violence against women measures that 35% of women have experienced physical and/or sexual violence at the hands of an intimate partner or a non-partner at some point in their lives (Ellsberg, 2014). In countries that have experienced crises such as natural disasters or civil conflict, the effects of IPV are even more devastating. Prior to the 2010 Haitian earthquake, an estimated 1 in 3 Haitian women has experienced sexual, domestic, or other type of violence (Institut Haïtien de l'Enfance, 2002). The 2010 earthquake that destroyed Port-au-Prince and nearby areas intensified the poverty and political instability experienced by Haitians and augmented the consequences of IPV for Haitian women (Gage et al, 2006; Schuller et al., 2012).

In addition, many children under the age of 18 also experience violence in Haiti. One population-based survey that examined the prevalence of violence against children (VAC) (aged 13-24), the Violence Against Children Survey in Haiti conducted by the CDC and partners, found that 1 out of 4 girls and 1 out of 5 boys having experienced at least one incidence of sexual abuse prior to 18 years of age. The same survey found that almost two-thirds of both girls and boys experienced physical violence and almost one-third experienced emotional violence by an adult household member or other authority figure in the community during childhood. In addition, according to the 2003 Caribbean Youth Health Survey, nearly one in two (47.5%) girls reported that their first sexual experience was forced (Halcon et al., 2003). These results demonstrate a significant need for programming targeting girls and youth.

VAWG is both a driver and a consequence of HIV (UNAIDS et al., 2004; AMFAR, 2005), with catastrophic implications for the entire country: Haiti's HIV rate is the highest in the Caribbean, with nearly 140,000 infected, 56.4% of whom are women over 15 years of age (UNAIDS, 2014). One USAID study indicates that young Haitian women between the ages of 15 and 24 have twice the risk of contracting HIV as their male counterparts (USAID, 2010). Compounding the well-documented biological risks that link them, VAWG and HIV are also linked through gender inequality, or power imbalances between women and men – also known globally as the root cause of VAWG (AMFAR, 2005).

Social norms promoting power imbalance and condoning VAWG are widespread in Haiti. A 2012 survey of youth in Haiti revealed that nearly half of all girls and 2 out of 5 boys aged 13-17 years old believed that a man is justified in beating a woman for one or more reasons (Government of Haiti et al, 2012) Similarly, surveys conducted by Beyond Borders (BB) in and around the southeastern town of Jacmel found that such attitudes were common among the general population, most alarmingly among duty bearers and thought leaders. Changing these norms and curbing the cycle of VAWG in Haiti is an important step toward ensuring healthier, more productive, and safer communities in Haiti.

### ***The Intervention***

Interventions to prevent and respond to VAWG use multiple approaches to reduce violence. Recent reviews suggest that programs involving community mobilization are among the most promising and show significant evidence of reducing rates of IPV (Ellsberg et al. 2014). Community mobilization interventions aim to reduce violence at the population level through changes in public discourse, behaviors, and social norms regarding gender and violence. This approach involves complex interventions that engage multiple stakeholders at all levels (e.g. community men and women, youth, religious leaders, police, teachers, and political leaders). Community mobilization interventions incorporate many strategies, from group training to public events and advocacy campaigns. Due to their complex design, very few rigorous assessments of community mobilization programs have been completed (Ellsberg et al., 2014). However, an evaluation of the program *SASA!*, a phased community mobilization approach to prevent VAWG and HIV, showed promising results in Uganda.

*SASA!*<sup>\*</sup>, originally created by Raising Voices and implemented in a number of countries, consists of a series of community mobilization activities that address the balance of power in intimate partner relationships and broader community dynamics, as well as SRH risk behaviors (Abramsky et al. 2014). Guiding the community through four steps – *Start, Awareness, Support, and Action* – stakeholders from all levels of the community participate in each step of the intervention. The aim of this approach is to create an enabling environment and ultimately develop a critical mass to change knowledge, attitudes and behaviors that perpetuate harmful gender norms and contribute to levels of HIV. A rigorous evaluation of the impact of the *SASA!* approach on participating communities in Kampala, Uganda, demonstrated the methodology’s effectiveness in preventing both VAWG and risk behaviors related to HIV transmission (Abramsky et al. 2014). See Section C for details on this evaluation.

*SASA!* was adapted to the cultural and language context of Haiti between 2010-2015, making the training modules and tools available to Haitian organizations and communities in Haitian Creole. BB implemented the methodology in their intervention communities and continues to train other organizations to implement it in their own. Internal assessments found that this first phase of *SASA!* in Haiti resulted in a significant shift in social norms in participating communities. Through discussions with these communities, BB learned that while community activists, religious leaders, and other key stakeholders saw their communities experience positive change, they also saw that the changes impacting women’s lives were not always reaching the lives of their daughters.

In response to this need and conversations with participating communities, the *Power to Girls* methodology was born out of collaboration with Haitian girls’ group leaders and the communities in the Southeast Department of Haiti. Created by BB, *Power to Girls* is the first guide of its kind to employ a phased community mobilization approach to specifically address violence against girls (VAG). Using the Stages of Change theory<sup>†</sup> also applied in *SASA!*, *Power to Girls* seeks to work with parents, girls and boys in schools and communities to rethink power imbalances between boys, girls, men and women. The program, which was designed to complement *SASA!* but can also be implemented alone, focuses on girls’ safety (living without violence) and freedom to make decisions.

The Rethinking Power program, a community mobilization program developed by BB, combines the *SASA!* and *Power to Girls* methodologies. The first component, *SASA!*, of this combined methodology includes a phase-based series of activities that address the balance of power in intimate partner relationships and broader community dynamics. The second component, *Power to Girls*, consists of girl-centered programming that includes strategies aimed at parents and caregivers. This component involves phase-based activities implemented in schools, in the community and in girls’ groups. Through this combined methodology, the RP program promotes community-level change to achieve community impact with the following goals: 1) to decrease the prevalence of IPV among women and the sexual abuse of girls; 2) to reduce the social

---

<sup>\*</sup> <http://raisingvoices.org/sasa/>

<sup>†</sup> *SASA!* is organized into four phases based on the Stages of Change Model, Adapted from: Prochaska J., DiClemente C., Norcross J., (1992). In search of how people change—applications to addictive behaviors, *American Psychologist*, 47(9), 1102-1114.

acceptance of gender inequality, IPV and sexual abuse of women and girls; 3) to increase girls' sense of safety and freedom to make decisions; and 4) to decrease HIV/SRH risk behaviors in women and girls.

### ***The Evaluation***

BB is the planning stages to implement Rethinking Power in the Southeast Department of Haiti. This presents an opportunity to further develop the evidence base of the *SASA!* program, in addition to examining the experiences and impact of the new methodology on girls. The Global Women's Institute at the George Washington University (GWI) will expand on the original *SASA!* study to examine the experiences and measure the impact of both methodologies not only on IPV but also on girls' experiences of different types of violence.

Overall, this evaluation will make critical contributions to the global knowledge-base on preventing VAWG through community mobilization interventions that aim to transform social norms. These contributions include:

- Testing the *SASA!* methodology in a new community/setting, to test its adaptability and build the evidence base on its impact;
- Contributing to future evaluations by developing an instrument and methodology for evaluating *SASA!* and *Power to Girls* that is based on the original *SASA!* logic model and was revised and expanded to incorporate the new focus on girls;
- Developing the research base for a community mobilization methodology dedicated to preventing violence against girls and strengthening linkages between violence against women (VAW) and violence against children (VAC) approaches;
- Rigorously evaluating the impact of the RP model, which includes the *SASA!* and *Power to Girls* methodologies, and assessing which strategies are (or are not) successful, how results are achieved, and the circumstances or conditions that determine effectiveness;
- Measuring the value of adding a specific component for girls and evaluating the extent to which these combined methodologies together produce an attributable and significant change on the situation of VAWG and SRH risk behaviors, with the goal of future scale-up and sustainability;
- Strengthening the capacities of local researchers and practitioners on programmatic and research skills to prevent VAWG and to ensure the sustainability of this intervention in Haiti; and
- Disseminating widely findings among a variety of local, national, and international stakeholders to use evidence to promote changes at the programmatic and community levels that aim to eliminate VAWG.

## **C. Preliminary Studies**

GWI began work on this project in 2015 in partnership with BB. Since then, a year of intensive preparatory work, preliminary assessments, and planning discussions has taken place to ensure a full understanding of the context of the program and evaluation.

GWI conducted a research assessment mission in March 2016. The objectives of the mission were to: 1) explore the practicalities of potential evaluation design options for impact evaluations of the Rethinking Power project; 2) meet potential local research partners for the evaluation; and 3) gain a deeper understanding of the Rethinking Power project through discussions with staff and previous program participants. The information gathered during this mission, as well as follow-up discussions with GWI, BB and local researchers, informed the design of the evaluation, including the selection and development of the study population, the sampling strategy, and research tools now being submitted in this IRB application. In addition, GWI and BB have set up and are continuing to grow a local Technical Advisory Group (TAG) made up of international and Haitian researchers and program specialists to inform the evaluation design as well as interpret and disseminate findings to inform future programs.

The original *SASA!* methodology underwent a rigorous evaluation, led by the London School of Medicine and Tropical Hygiene, during its implementation in Uganda, demonstrating its impact on reducing experiences of IPV for women and changing social norms. The study measured the impact of the program in a total of eight communities randomized into treatment and control groups in a pair-matched cluster design from 2007 to 2012 (Abramsky, et al. 2014). Statistically significant results were observed in the decrease in acceptability of physical IPV among women and a reduction in past year concurrent sexual male partners. Statistically significant improvements were also observed among both men and women regarding the acceptability that a woman can refuse sex. In addition, improvements were observed in appropriate community responses to survivors of IPV. In terms of IPV experience among participating women, *SASA!* resulted in a 52% reduction in risk of physical violence and a 33% reduction in risk of sexual violence.<sup>‡</sup> These results demonstrate that *SASA!* was effective in changing underlying attitudes and norms and shows promise in reducing levels of IPV in the Ugandan context (Abramsky, et al. 2014; Kyegombe et al. 2014).

The *SASA!* methodology was adapted and implemented in the context of Haiti by BB. Tools for the full cultural and language adaption were tested and piloted for the *SASA!* Activist Kit for Haiti and published in 2014. The program was then implemented in BB's intervention communities and through other organizations trained by BB. A mid-term evaluation using a random convenience sample of 700 surveys and 5 focus groups across five participating communities found a 52% decrease in the number of people who believed a man has the right to beat his wife when he learns she has HIV. In addition, improvements in men's attitudes surrounding the use of violence against their partners and SRH were observed. 20% more men agreed that insulting/belittling someone is a form of violence than recorded at baseline, and the percentage of men who agreed that cheating

---

<sup>‡</sup> While a large effect was observed, changes were not statistically significant. Evaluators observed an increase in variations of physical IPV levels among control sites at follow-up compared to baseline. This reduced the power to observe statistical significance when analyzed by cluster.

increases the risk of transmitting HIV to their wives increased 25%. The number of people who reported speaking out about violence in their communities increased by 16%. Despite these results, qualitative research led to the identification of a gap in the program's impact: the positive changes experienced by women were not always experienced by girls in the community.

The *Power to Girls* toolkit was developed by BB in collaboration with Haitian girls groups, community activists, school personnel and education advisors, students, graphic artists, and others. The tools have been revised and tested for easy use by mentors, community network members, and school personnel. As BB implements *SASA!* in tandem with the all new *Power to Girls* methodology in eight new localities over a three year period, GWI will conduct a comprehensive evaluation to measure the effectiveness of both the *SASA!* adaptation in Haiti and the impact of the RP program on girls.

## **D. Research Design and Methods**

### ***Theory of Change***

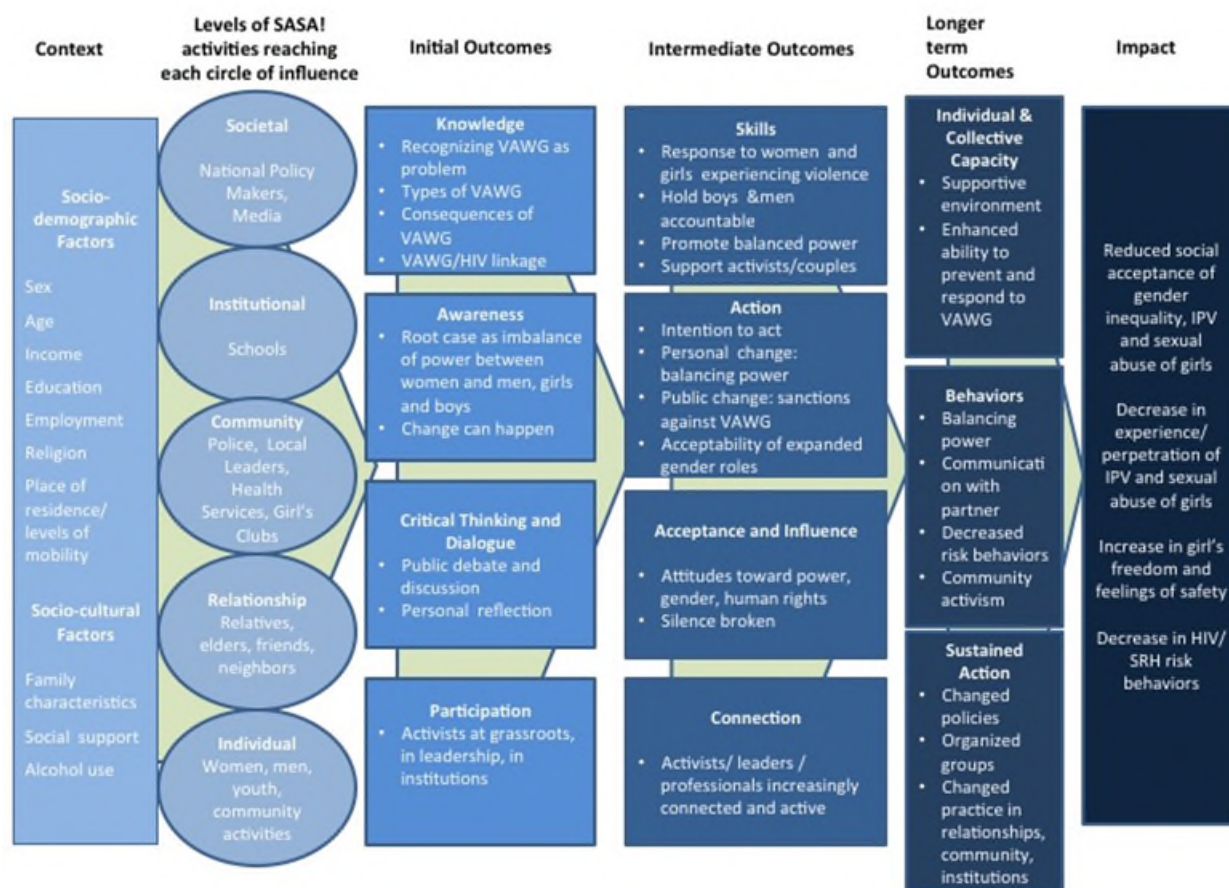
The original *SASA!* methodology and *Power to Girls* were developed based on the perspective that IPV and other forms of VAWG are the result of multiple causal layers. The framework, originally developed by Urle Bronfenbrenner (1994) and since adapted by Lori Heise for VAWG (1998), presents the causes of IPV at the macro social, community, interpersonal, and individual levels. At the community level, imbalance of power is manifested in inequitable norms and harmful practices. These norms are often perpetuated by religious or cultural justification, which deters action by stakeholders who are crucial to preventing violence. Lori Michau and colleagues argue that inequitable norms can be addressed through education and capacity building, which fosters collective action (Michau et al., 2014). This approach allows participants to feel empowered to contribute to an enabling environment in which a significant part of the population practices and advocates for gender equality. Using a similar approach, norms that perpetuate gender inequality and drive violence can be addressed in the healthcare sector by carrying out educational and behavior change interventions among health care professionals and other stakeholders (Gennari, 2014).

Community mobilization interventions are successful in transforming harmful gender norms because they guide community members at all levels of the ecological framework through gradual and sustainable change. This approach is founded in the transtheoretical model of behavior change. According to this model, there are six key stages through which behavior changes occurs: precontemplation, contemplation, preparation, action, maintenance, and termination (Prochaska, 1997). Community mobilization efforts informed by this framework assist individuals and communities as they move through these six stages in an organic and empowering manner. The RP intervention is based on this model. *SASA!*'s four steps take stakeholders from all levels of the community through each step of the intervention, changing over time their knowledge, attitudes, and behaviors that perpetuate harmful gender norms and creating an enabling and empowering environment that supports safety, non-violence and the dignity of women, men, girls and boys.



## Rethinking Power Model

In order to conceptualize the theory of change of the Rethinking Power project, the evaluation and project teams reviewed the original *SASA!* logic model and the complementary *Power to Girls* to identify which areas were still applicable for the expanded project and where additions needed to be made to incorporate the new focus on girls. These are detailed in the model below.



The Rethinking Power model details the logical progression that the *SASA!//Power to Girls* approach employs to reduce violence. It begins first by detailing some of the most important factors that need to be considered when designing a program aimed at reducing violence and providing an overview of how the approach seeks to influence these factors at multiple levels. It then describes the initial, intermediate and long term outcomes of the program approach, as well as the final impact RP seeks to achieve.

The model begins by noting some of the most important risk factors for VAWG that should be considered when implementing the program. These include socio-demographic factors (such as sex, age, income, education, employment, religion, residence, etc.) and socio-cultural factors (such as family characteristics, social support, and alcohol use). For example, education levels correlate

with the likelihood of experiencing VAWG. As such, RP may work to increase the safety of girls on school grounds, as well as to advocate for family/community acceptance of girls' education. Each of these interventions may increase girls' educational attainment and subsequently reduce their risk of experiencing VAWG. Conversely, these factors may provide contextual knowledge that help improve program delivery. An example of this would be to determine the primary employment or income generating activities are used in an area may change how the program approaches its activism (such as: where and when to hold activities and which key business leaders or other informal sector employees to engage).

The model then presents a visual of the ecological model approach that informs the RP program, describing the different levels that the methodology seeks to impact. As can be seen in the model, the RP methodology addresses each of these inter-linked drivers of violence by working with community activists to change gender norms at multiple levels with a variety of groups. The initial outcomes expected from the program include increased knowledge of community members (male and female) of the types and consequences of VAWG and the linkages between violence and HIV. The program also expects to increase community awareness of the root cause of VAWG (an imbalance of power) and build consensus that it is possible to achieve change within a community. It also hopes to promote critical thinking, dialogue and the development of community activists who can facilitate further community level change among men, women, girls and boys.

The initial outcomes give way to intermediate outcomes that take longer to develop. This includes building skills on appropriately responding to women and girls who experience violence, holding men and boys accountable for their actions, and promoting a balance of power. In addition, changes in individual and community behaviors will begin to occur, along with changes in attitudes on concepts such as power, gender, and human rights. Parallel to these achievements, the program will continue to strengthen and build its community activist network that drives these changes within the community.

These intermediate outcomes lead to long-term outcomes including increased capacity that support longer-term behavior change and sustained action to reduce VAWG. At this level, there will be improved individual and collective capacity to prevent and respond to incidents of violence within the community. Behavior change will also continue at the community (e.g. increased community activism) and individual levels (reduced risk behaviors, balanced power, improved partner communications). In addition, larger societal and community level transformations will take place to provide a more supportive environment for women and girls (e.g. improved policies, transformed institutions and community groups, etc.)

Together, these initial, intermediate and longer-term outcomes will facilitate a number of expected program impacts. As detailed in the above model, these include: 1) reducing the social acceptance of gender inequality, IPV and the sexual abuse of girls; 2) decreasing experiences of/perpetration of IPV and the sexual abuse of girls; 3) increasing girls' freedom and feelings of safety; and 4) decreasing SRH/HIV risk behaviors.

This model will guide program and evaluation design for the RP program.

### ***Evaluation Design***

GWI will be conducting an impact evaluation of the RP program in Southeast Haiti. As part of the design process, the research team considered both a randomized control trial and quasi-experimental design for the evaluation. Because the RP program is a multi-level community based program (including program implementation through media campaigns, schools, churches and other services points that draw from multiple communities), there is strong potential for contamination of control communities in a RCT design. To address this, the BB program team considered a program model where large buffer zones between communities were established to minimize potential contamination. However, the program team did not have the logistic or financial resources to expand their implementation zone to a wide enough area that would allow them to efficiently implement the RP while simultaneously minimizing contamination between control and intervention sites. Therefore the research team decided that the evaluation will employ a quasi-experimental design that will include both intervention and comparison communities. However, the comparison communities will be selected from a different Commune (approximately equivalent to an American county), from the same Department (similar to a US state), than the intervention communities – thereby minimizing the potential for contamination.

For the quasi-experimental design, BB has selected eight program implementation areas in LaValle Commune in the South East Department that will receive the full RP program. Eight comparison communities will be selected from another Commune that has similar characteristics such as size, population density, access to nearby cities, etc. to the intervention communities. Data will be collected in all sites – implementation and comparison – before, during and after the program (baseline, midterm and endline) to track progress. Any changes over time among participants in the RP program communities will be compared against changes within the comparison group to establish the impact of the RP program.

### ***Data Collection Methodologies***

The evaluation design will employ a mixed methods approach that utilizes both quantitative and qualitative methodologies to allow for the triangulation of findings by gathering data using multiple forms of enquiry, giving more depth and certainty to conclusions made from the data. It will also provide opportunities to collect information on and explore complex issues that are not easy to quantify. Finally, a mixed-methods approach will provide additional insights that will increase understanding about the ways in which impact was achieved and the factors and conditions that influenced them. The evaluation will employ three complementary components that together will measure the impact of the RP program. In order to measure overall community-level impact of the overall RP program – including both the *SASA!* and *Power to Girls* methodologies -- a community population-based household survey will be conducted. See below in Component 1 for details on this approach. In order to document the contribution of the *Power to Girls* program component of the wider RP program, two smaller data collection activities will take place. See details below under Component 2 and 3.

### **Component 1- Measuring Overall Community Impact:**

- *Quantitative:* A repeated cross-sectional population-based household survey with both women and men aged 15-64 will be undertaken at three time points – baseline, midterm, and endline – in both intervention and comparison communities. In addition, qualitative data will be collected to complement the data collected via these surveys.
- *Qualitative:* Participatory focus group discussions (FGDs) with women and men in the community and semi-structured key informant interviews with stakeholders such as service providers, police, community leaders, representatives of women's organizations, community activists, etc.

Component 2 – Understanding the effect of RP on Girls Club Participants:

- *Quantitative:* In order to better understand the program's effect on girl's participating in RP's Girl's Groups, a cross-sectional survey will be employed with participants in the clubs. This survey will be implemented at both baseline and endline (repeated cross-sectional surveys).
- *Qualitative:* Participatory FGDs will be undertaken with girls club participants to better understand the effect of this intervention on their lives. Key informant interviews will also be undertaken with Girls Club leaders.

Component 3 – Understanding the effect of RP on School-based Participants:

- *Quantitative:* The second component specifically designed to better understand the effect of the *Power to Girls* methodology is a self-administered questionnaire with boys and girls who are enrolled in schools where the *Power to Girls* curriculum is being employed. This will also occur at baseline and endline (repeated cross-sectional surveys).
- *Qualitative:* Participatory FGDs will be undertaken with school age girls and boys as well as (separately) teachers and school stakeholders to understand the effect of this intervention on their lives. Key informant interviews will be undertaken with school administrators and other school-based stakeholders.

**Research Tools**

Specifically, the data collection tools that the evaluation will utilize are detailed below.

*Quantitative:*

Component 1

- Community-based Survey: A cross-sectional community survey will be employed at baseline, midterm and endline of the program. This questionnaire has been developed based on the tools used in the original SASA! RCT study undertaken by the London School of Tropical Hygiene and Medicine. The survey will measure community members' (both men and women - aged 15-64) knowledge, attitudes and behaviors on key indicators related

to VAWG. Survey questions will be drawn from indicators related to both *SASA!* and *Power to Girls*. Overall knowledge, attitudes, skills and behaviors will be measured for the community at large, but with a large enough sample size to understand the experiences of violence of both women and girls.

### Component 2

- Girls Club Survey: As part of component 2, a separate smaller survey will be employed with girls (aged 10-19) who participate in RP girls clubs. This survey will specifically focus on changes in knowledge, attitudes and behaviors related to the *Power to Girls* methodology (e.g. empowerment, self-esteem, gender norms, etc.). Participants will not be asked about their own experiences of violence in the home or community.

### Component 3

- School-based Survey: As part of component 3, a self-administered survey will be employed with girls and boys (aged 10-19) enrolled in schools used in the *Power to Girls* curriculum. This will be similar to the survey used with girls clubs and specifically used to measure knowledge, attitudes and behaviors of this sub-group, specifically related to the newly created *Power to Girls* methodology. Participants will not be asked about their own experiences of violence in the home or community.

### Qualitative:

#### Components 1, 2 & 3

- Focus Groups Discussions: Focus group discussions will focus on three specific groups. First general community focus groups (targeting men and women separately) will be held to validate and contextualize the findings of the community based survey. Secondly, school and girl group focus groups (engaging girls as well as key stakeholders) will gather further information on the experience of girls, particularly in relation to their experience with the *Power to Girls*. In addition, focus groups with parents will deepen and contextualize our understanding of any change in their attitudes or behaviors related to girls. These groups will utilize interactive and participatory methods such as free-listing, open ended stories, role playing, community mapping, etc. These discussions should take no longer than 2 hours and the draft tools can be found in Annex 2.
- Key Informant Interviews: Key informant interviews will be held with women, girls, community activists, school administrators, teachers, community leaders, and service providers. This data will help contextualize and triangulate the findings from the community-based and stakeholder surveys. Semi-structured interview guides have been developed to give a general framework for the interviews and include opening questions that will help guide the conversation towards answering the research questions, but still

allow flexibility in the conversation.

## ***Sample Size***

### *Quantitative:*

*Component 1 - Community based Survey:* The goal of the study is to assess the effectiveness of the RP program in preventing VAWG. In order to achieve this, the primary outcome of interest in which the sampling strategy is based is a reduction in IPV in a 12 month period. Based on available national statistics and knowledge of the area, the research team expects that the true prevalence of physical IPV in the program area is 20% in the past 12 months. Over the course of the program, it is anticipated that this rate will be reduced to at least 14%. Therefore, the sample size has been calculated to ensure each arm of the study has sufficient power to detect this change. Based on this, an overall total sample of at least 615 completed surveys per arm has been determined. After adjusting due to the expected intra-cluster correlation and expected non-response, the final sample will be 1,500 (1000 women and 500 men) households per arm – for a total of 3,000 households overall in the survey.

*Component 2 - Girls Club Survey:* In order to provide complementary information to the main community-based survey, a smaller survey of girls clubs participants will be undertaken. The program expects to target approximately 320 girls (16 clubs with approximately 20 participants per group – aged 10-19). Given the limited number of girls enrolled in girl's clubs, the research team will attempt to survey all participants for an estimated sample of 320.

*Component 3- School-based Survey:* In addition a self-administered questionnaire will be given to a sample of participants in 3 schools in the intervention area where the RP program is being employed as well as 3 schools from the comparison community (matched on characteristics such as size, student composition, state/private, etc). The average number of pupils in schools in the area is 200 students. The research team will randomly select 3 classes within each school to administer the questionnaire – for a total of sample size of 120 per school. The questionnaire will be administered in 3 schools per arm for a total of 720 questionnaires across the entire study (360 per arm).

### *Qualitative:*

*Components 1, 2 & 3:* For all qualitative data collection, purposeful sampling will be used to ensure a wide breadth of knowledge and experience. Additional respondents may be found through snowball sampling if required. It is expected that the focus groups will include specific groups of women, men, girls and boys. Key informant interviews will focus on stakeholders including community activists, teachers, girls clubs leaders, community leaders and service providers.

## **Table 1: Maximum Number of Participants for Qualitative Research**

#	Sites	Groups	Participatory Focus Groups (6-12 participants per group)		# of key informant interviews (individual)
			Total # Groups	Total # Participants	Total # Participants
<b>1 Intervention Communities</b>					
<i>Component 1 - Community based Survey:</i>					
	Community members		10	120	0
	Community Stakeholders (Community leaders, Service sector representatives, NGOs)		0	0	13
<i>Component 2 - Girls Club Survey:</i>					
	Girls Group Participants		2	24	0
	Grils Group Adminstrators		0	0	2
<i>Component 3 - School-based Survey:</i>					
	School Teachers/Administrators		2	24	0
<b>2 Comparison Communities</b>					
<i>Component 1 - Community based Survey:</i>					
	Community members		10	120	0
	Community Stakeholders (Community leaders, Service sector representatives, NGOs)		0	0	15
<i>Component 3 - School-based Survey:</i>					
	School Teachers/Administrators		2	24	0
<b>Total:</b>			<b>26</b>	<b>312</b>	<b>30</b>

## Data Analysis

### *Quantitative*

*Components 1, 2 & 3:* The quantitative data from the study will be analyzed using descriptive statistics as well as bivariate and multivariate statistical methods. Descriptive statistics will be used to present the data on social norms, VAWG and exposure to the program. Bivariate (t-tests, chi-square) and multivariate regression will be used to compare the situation in the intervention and comparison communities at baseline, midterm and endline. For each endpoint our main analytic model will use a difference-in-difference specification:

$$Y_{ij} = \beta_0 + \beta_1 \text{Time1}_{ij} + \beta_2 \text{Time2}_{ij} + \beta_3 \text{Treat}_j + \beta_4 \text{Treat}_j * \text{Time1}_{ij} + \beta_5 \text{Treat}_j * \text{Time2}_{ij} + X_{ij} \gamma + u_j + e_{ij}$$

Where  $i$  indexes the individual and  $j$  indexes the community; Time1 and Time 2 are dummy indicators of midling and endline (baseline serves as the reference); Treat is a dummy indicator of being an intervention as opposed to control community;  $X$  is a vector of individual-level control variables including age, marital status, parity, and household wealth; and  $u_j$  is a cummunity fixed effect. The coefficients  $\beta_4$  and  $\beta_5$  measure the extent to which the expected value of  $Y$  increased

more in intervention than in control communities between baseline and midline and between baseline and follow-up.

### *Qualitative*

Components 1, 2 & 3: Interviews and FGDs from the qualitative study will be captured by note takers, translated and transcribed. The data analysis will be carried out by GWI using the software, Atlas.ti. GWI researchers will use a combination of a priori and grounded theory to develop and assign codes to the data. The information gathered through the interviews and FGDs will allow the researchers to further document the situation of women and girls in Southeast Haiti as well as the impact of the RP program.

### ***Participatory and Gender Approach***

The evaluation will apply a participatory approach that will involve beneficiaries – women and girls in the intervention communities, in particular – in the design and implementation of the research, as well as in the interpretation and dissemination of findings. GWI, BB, and local partners have been working closely on the development of the research protocol and data collection tools, both to ensure that the design is relevant in the local context, and to strengthen local capacity. Local stakeholders, community-based organizations, and local authorities will be involved in the planning and implementation stages through the creation of a TAG, which will be invited to provide input during each stage of the process.

The following principles will also be adhered throughout the evaluation process: 1) engage women and girls who reflect the diversity of the primary beneficiaries; 2) engage community members and researchers in a join process in which each will contribute equally; 3) facilitate a co-learning process; 4) involve systems development and local capacity building; 5) facilitate an empowering process that validates participants' experiences, ideas and opinions and through which they can increase control over their lives; and 6) achieve a balance between research and action.<sup>§</sup> This approach will ensure that the data and findings are relevant and useful not only for the program evaluation, but also to local stakeholders and program managers.<sup>\*\*</sup>

The evaluation will also apply a gender approach to achieve the ultimate goal of the program: to transform the underlying roots of gender inequality. Following Patton<sup>††</sup>, this evaluation will have five components that characterize a broadly defined gender approach. These include: 1) a central focus on gender inequalities; 2) the conceptualization of inequality based on gender as systemic

---

<sup>§</sup> Ellsberg, M; Heise, L. (2005). *Researching Violence against Women: A Practical Guide for Researchers and Activists*. Washington, D.C.: PATH, WHO.

<sup>\*\*</sup> An example of how we have put these principles into action is found in the following article: Ellsberg, M. et al. (2009). *Using Participatory Methods for Researching Violence Against Women: An experience from Melanesia and East Timor*. The article is attached to this proposal.

<sup>††</sup> Patton, M. (2002). *Qualitative Research and Evaluation Methods*. Thousand Oaks, California: SAGE Publications.



and structural; 3) the recognition that information and knowledge are powerful resources; 4) the acknowledgement that the evaluator is not “neutral” but brings specific experiences, sensitivities, awareness, and perspectives; and 5) the acknowledgement that evaluation is not merely a technical activity but is political.

### ***Research Uptake***

The aim of the research uptake strategy for this study is to ensure the translation of research to action. To ensure that the results of this evaluation inform not only the RP model, but also future adaptation and implementation of community mobilization interventions, GWI will consult with BB, the TAG, and other stakeholders and end users of our research to develop effective communications and dissemination activities. Such activities include online communications and media, conferences, working groups, and mass media campaigns.

Adequate attention must be given to disseminating results at the local, national and international levels. This process will include initial reports of baseline results, regular six-month reports of the process and a final report, which includes strategies for scaling up and adaptation to other settings. Products could also include articles in peer-reviewed journals, policy notes, working papers, and other informative documents disseminated both in print form and electronically. Presentations (workshops, conferences, seminars, etc.) at the national and international levels should also be considered. These may include presentations at the Commission on the Status of Women, appropriate global seminars and international events on prevention, community safety, women’s rights, children’s rights, and urban planning, governance and safety, as well as through regional events organized by local networks working in VAWG and public safety.

***Table 2: Plan of Activities***

Activities	Prep	Project Year 1				Project Year 2				Project Year 3				Project Year 4			
Planning undertaken	X																
Research Protocol and data collection tools development	X	X															
Dissemination of Research Findings																X	
<i>Component 1- Community based Survey</i>																	
Baseline Survey – Training of data collectors and piloting		X															
Baseline Survey – Data Collection		X															
Baseline Survey – Data Analysis, Report Drafting			X														
Midterm Survey – Refresher training of data collectors							X										
Midterm Surveys – Data Collection								X	X								
Midterm Survey – Data Analysis, Report Drafting									X	X							
Final Evaluation – Training of data collectors															X		
Final Evaluation – Data Collection															X		
Final Evaluation – Data Analysis, Report Drafting																X	

Activities	Prep	Project Year 1	Project Year 2	Project Year 3	Project Year 4
<i><u>Component 2 – Girls Club Survey</u></i>					
Baseline Survey – Training of data collectors and piloting		X			
Baseline Survey – Data Collection		X			
Baseline Survey – Data Analysis, Report Drafting			X		
Final Evaluation – Training of data collectors					X
Final Evaluation – Data Collection					X
Final Evaluation – Data Analysis, Report Drafting					X
<i><u>Component 3 – School-based Survey:</u></i>					
Baseline Survey – Training of data collectors and piloting		X			
Baseline Survey – Data Collection		X			
Baseline Survey – Data Analysis, Report Drafting			X		
Final Evaluation – Training of data collectors					X
Final Evaluation – Data Collection					X
Final Evaluation – Data Analysis, Report Drafting					X

## **E. Study Population**

The program and evaluation will be implemented in LaValle Commune and a comparison community. La Valle Commune has a population of approximately 34,000 people in 18 Habitations and 193 localities (neighborhoods). It comprises of one small town (population: 1,500) and the remaining area is rural. The commune chosen for comparison will also be located in Southeast District and be similar to LaValle on a number of considerations, including:

- Size (approximate);
- Existence of secondary schools;
- Type of zone (urban/rural);
- Main sources of livelihoods (farming, service employees, etc.) and other measure of socioeconomic status; and
- A gap in GBV prevention programming within the commune.

Within these communities, there will be two girls' groups for each of the eight intervention areas—one for girls age 10-14 and the other for girls age 15-19. To select specific girls for these groups, a short community assessment process will be conducted by implementation staff to identify which segments of girls are of most need of assistance in the community (e.g. out of school girls, young mothers, girls acting as domestic servants, etc). Finally, also from these communities, in school youth (aged 10-19) enrolled in one of 6 local primary and secondary schools will be engaged in the research.

## **F. Human Subjects**

### ***Sources of Research Material***

All data collected over the course of both the qualitative and quantitative portions of the study will be collected via self-reported data either through participation in household surveys or interviews/focus group discussions. All data that are collected will be used exclusively for research purposes and only compiled, non-identifiable results will be shared with programmatic partners.

### ***Recruitment and Consent***

#### *Quantitative*

Component 1- Community based Survey: For the community-based survey, a multi-stage cluster sampling methodology will be used to select individual households for inclusion in the cross-sectional survey. Due to the random nature of selection for the survey, no recruitment materials will be distributed. Before beginning the survey, an informed consent statement will be read to the potential participant (see Annex 3) informing the participant on the general nature of the survey as well as potential risks and benefits. Prior to the section explicating asking about experiences of violence, the data collector will again obtain consent to proceed with the questionnaire.

Component 2 - Girls Club Survey: For the girl's club survey, a census approach will be taken with all girls selected to participate in the girl's clubs recruited for the survey. Active verbal consent procedures will be used with all girls participating in the clubs. It will be explained that this exercise is optional and that they still participate in the club's without being interviewed in the survey. As the literacy rate for Haiti is less than 50% (UNICEF, 2015), and girl's clubs target vulnerable girls (domestic workers, out of school girls, etc) in the communities, no written recruitment material will be used.

Component 3 - School-based Survey: For the school-based questionnaire, schools have been selected by the BB program to participate in their intervention based on the interest and commitment of their administration in the program. Schools in the comparison communities will be selected to ensure comparability (see the research design for future information) and invited to participate. Within each school, the research team will randomly select approximately 3 classes to administer the questionnaire. On the day the questionnaire is administered, a member of the research team will explain to the class the purpose of the survey and explain that choosing to not participate will not affect their grades or standing in the school. Children will give verbal consent before filling in the questionnaire (Annex 3). Children who decline to participate will be requested to pass back a blank questionnaire – so other children in the classroom are not aware who choose to take the survey and who didn't to protect the privacy of respondents.

## *Qualitative*

### Components 1, 2 & 3:

For the FGDs and key informant interviews, participants will be identified through Beyond Borders. In order to recruit community members and stakeholders, BB staff will work with community leaders, whom they already have working relationships with, to identify potential participants through their networks and partners.

For all participants in the FGDs and key informant interviews, the staff of our local partners will provide a brief introduction on the background and objectives of the research study, explain why the potential participant was selected. Focus groups and in-depth interviews will take place in settings that ensure privacy such as a school, NGO or local community group's office or community center. Verbal consent will be obtained for all participants (see Annex 3).

## **G. Risks and Side Effects**

### *Conducting Research on VAWG*

Since the 1995 United Nations Fourth World Conference on Women's Platform for Action recommended "research and data collection on the prevalence of different forms of violence against women, especially domestic violence, and research into the causes, the nature and the consequences of violence against women," <sup>††</sup> population-based research on the topic has become an important international priority. Some of the most high-profile efforts include the World Health Organization's Multi-Country Study on Violence Against Women (which has been conducted in over 25 countries, with more than 50,000 women), the Demographic and Health Surveys (where the module on Domestic Violence has been conducted in 59 countries), the European Union's Survey on VAWG and CDC-led Violence Against Children Survey.

Ethical considerations are of considerable importance when conducting research on VAWG. In the past 20 years, a wide variety of international experts and researchers have documented a number of best practices and ethical guidelines for conducting research on VAWG. GWI's research team regularly consults this literature base and has developed this research protocol to be inline with these best practices - including ensuring privacy and confidentiality, availability of support services for survivors of violence, and utilizing empathetic and non-judgment interviewers (Ellsberg, Heise, Peña, Agurto, & Winkvist, 2001; Ellsberg & Heise, 2002; Ellsberg & Heise, 2005; World Health Organization, 1999).

When these appropriate ethical standards are met, population based research on VAWG has often been described as beneficial by participants. A review of respondent satisfaction with participants

---

<sup>††</sup> 1995 United Nations Fourth World Conference on Women – Platform for Action

in the WHO multi-country study found that between 60-95% of women interviewed said at the end of the interview that they felt “good or better”, irrespective of their experiences of violence. (Garcia Moreno, Watts, Jansen, Ellsberg, & Heise, 2003; H. Jansen, 2010; H. A. F. M. Jansen, Watts, Ellsberg, Heise, & Garcia-Moreno, 2004). GWI’s ongoing research studies on VAWG are finding similar rates with 90% of respondents in GWI’s South Sudan and Nicaraguan prevalence studies reporting that they felt the same or better after the interview. Additionally, VAWG research may have other un-intended positive implications – such as helping participants think about their situation and find solutions to leaving violent situations. For example in a longitudinal population-based study in Leon, Nicaragua, of the 229 women who had been previously exposed to violence in the study, 41 (18%) reported that being asked about abuse in the baseline interviews conducted three years earlier had assisted them in their process to be free of partner abuse (Salazar, Valladares, Ohman, & Hogberg, 2009). The specific potential risks of this study and the research teams mitigation plans can be found below.

### ***Risks and Side Effects***

#### *Participants and Researchers/Fieldworkers in Quantitative Data Collection*

##### *Component 1- Community based Survey:*

- **Risk 1: Distress/Re- traumatization:** Numerous studies on the effect of trauma research, including a systematic review of 46 relevant studies have found no evidence of long-term harm of asking respondents about traumatic events (Cromer & Newman, 2011; Fontes, 2004; Griffin, Resick, Waldrop, & Mechanic, 2003; Jorm, Kelly, & Morgan, 2007). In most studies a minority of participants became distressed during or immediately after participation, particularly those who had experienced traumatic events, but reported feeling better soon afterwards. No evidence was found of adverse impacts as a result of talking about the events. This was found to be true even in the case of participants who were highly symptomatic for PTSD, or who had experienced acute domestic or sexual assaults within the previous three weeks (Griffin et al., 2003). Responses from participants, even those who experienced distress, were overwhelmingly positive, and regret for participation was low. (Hlavka, Kruttschnitt, & Carbone-Lopez, 2007; Johnson & Benight, 2003; Wagman, Francisco, Glass, Sharps, & Campbell, 2008) These studies suggest that a clear distinction should be made between experiencing feelings of sadness or distress, and re-traumatization, which is not nearly as common as was formerly believed.

In fact, the CITI training module on human subject research (2014) mandated by GW specifically discusses the ethical implications of VAWG research and notes that re-traumatization has not been found to be a particular concern for research on violence and abuse. The module states:

*Often it is assumed that the very nature of the research inquiry can pose risk of harm to subjects. For instance, when reviewing research plans that involve asking subjects questions about trauma or abuse, IRB members may be concerned about re-traumatization. However, current research findings indicate that when appropriate protections are built into the study design, such as ensuring that interviewers are trained to ask questions in a supportive, respectful manner and respond to subjects' reactions appropriately, very few subjects were upset. In fact, most subjects, including those who may have experienced fleeting negative emotions, reported feeling good about taking part in the study.*  
~ Citi Training Module 2014

While distress is possible for anyone who participates in surveys on violence, special consideration may be needed for children under the age of 18 who participate in studies on violence. Violence against children has proved to be a major concern in Haiti with 61% of girls experiencing physical and 26% of girls reporting experiencing sexual violence before the age of 18.<sup>§§</sup> Asking children (age 13 and older) about their experiences of violence in population-based surveys has been a common practice in public health, most notably through the Center for Disease Control, UNICEF and Together for Girls' Violence against Children Survey (VACS) that has been undertaken in 8 countries to date, including Haiti.

This study also acknowledges the risk of vicarious trauma for researchers and fieldworkers. Researchers who are interviewing participants on sexual and intimate partner violence are often exposed to personal and sometimes upsetting accounts of participants' experiences of violence (SVRI, 2015). While emotional engagement can be a tool for researchers to provide a safe and comforting environment for participants, it can also carry an emotional cost for the researcher. More information on vicarious trauma can be found in *Guidelines for the prevention and management of vicarious trauma among researchers of sexual and intimate partner violence* published by the Sexual Violence Research Institute (SVRI). The PI of this study was part of the core writing group for these guidelines.

- **Risk 2: Breach of confidentiality and/or privacy - leading to increased household violence or peer judgment/ridicule:** There is a possibility that study participants who are currently in an abusive relationship may be subjected to violence as a result of their participation in the survey, if their abusive partner finds out that they reported violence or answered questions about violence during a survey (due to a breach of confidentiality and/or privacy). While this risk exists, many studies on VAWG have not found significant increases in violence due to participation in surveys on the subject. For example, Jewkes and Sikweyiya conducted an ethnographic study of men and women who participated in a study on VAWG in South Africa. The concern mentioned most frequently by both men and women with regard to the survey was a breach in confidentiality that could lead to

---

<sup>§§</sup> VACS Haiti Report

embarrassment or violence. However, no respondents reported having experienced violence as a result of the study. The same researchers addressed adverse effects in a two-year randomized control study to evaluate the impact of an educational intervention Stepping Stones, on HIV incidence and intimate partner violence in South Africa (Sikweyiya & Jewkes, 2012; Sikweyiya & Jewkes, 2013). The study deviated from typical VAWG ethical guidelines in that it was not possible to keep the intervention subject confidential as participants were enrolled in an intervention on VAWG, so family members were more likely to find out the topic of the interviews. On the third interview, at 24 months, the participants (over 2000 men and women) were asked how they felt about being part of the study and whether they had had any negative experiences as a result of the study. 97.9% of women and 97.6% of men said that the interviews “really helped” them and less than 1% of men and women reported violence resulting from the study.

***Components 2 & 3 (Girls Club Survey & School-based Survey):*** In general, the risks for participants in the girl’s club and school based data collection activities are the same as those who participate in the community-based survey under component 1. However, participants in these surveys are not being asked about violence in the home or community, which will lessen the risk for these participants. In addition the risks related to breaches of confidentiality and privacy have particular relevance for students and younger participants, who may be made fun of for their beliefs if their answers are disclosed to their peers. As such particular care must be taken with this group to ensure confidentiality and privacy of data collection

#### *Participants in Qualitative Data Collection*

***Components 1, 2 & 3:*** The risks for participants in the qualitative data collection are generally the same as those in the quantitative data collection. As the interviews may address sensitive topics, there is a risk, as in the quantitative data collection, of distress of the participants. However, as participants in the key stakeholder interviews and FGDs will speak about the problems of women and girls in general in their communities and will not discuss their own specific experiences, it is expected that risks of distress/re-traumatization or violence from participating in this study would be less compared to participants in the quantitative. Also, participants (particularly younger participants) who are part of focus groups may experience social derision or ridicule due to the opinions they express during focus groups.

**Table 3: Risk Matrix**

Risks	Severity	Timing
Common (21-100/100)		
None		
Occasional (5-20/100)		

Participant distress due to discussing sensitive subjects such as experiences with VAWG.	Medium	Immediate/Prompt
Breaches of confidentiality and/or privacy lead to increased intimate partner violence due to their participation in the research or social ridicule by peers	Medium	Immediate/Prompt
Rare (<5/100)		
None		

### ***Mitigating Potential Risks***

In light of the risks inherent to VAWG research, the WHO has set forth eight recommendations for conducting safe, ethical research on violence against women and girls. Seven of these eight recommendations have direct bearing on this evaluation and will be incorporated into evaluation planning:

- The safety of respondents and the research team is paramount, and should guide all project decisions.
- Prevalence studies need to be methodologically sound and to build upon current research experience about how to minimize the underreporting of violence.
- Protecting confidentiality is essential to ensure both women and girl's safety and data quality.
- All research team members should be carefully selected and receive specialized training and on- going support.
- The study design must include actions aimed at reducing any possible distress caused to the participants by the research.
- Fieldworkers should be trained to refer women and girl's requesting assistance to available local services and sources of support. Where few resources exist, it may be necessary for the study to create short-term support mechanisms.
- Researchers and donors have an ethical obligation to help ensure that their findings are properly interpreted and used to advance policy and intervention development.



In addition, there are specific considerations for conducting violence research with men (as developed by the Medical Research Council of South Africa) that also need to be considered and addressed. Key recommendations from this group include not referring to the study as “perpetration research”, training of field workers to be non-judgmental and, where available, referring men to support services to reduce perpetration.

Based on these guidelines and the research team’s own experience in conducting research of this nature, the following risk mitigation strategies will be used to address the key risks laid out in the previous section:

*Participants and Researchers/Fieldworkers in Quantitative Data Collection*

**Risk 1: Distress/Re-traumatization:**

*Component 1- Community based Survey:*

- **Selection and Training of Fieldworkers:** The research team will take particular care when recruiting fieldworkers, specifically looking for people who are able to display empathy for research participants and believe in gender equity. Female fieldworkers will be recruited to conduct interviews with women while male fieldworkers will conduct interviews with men. Fieldworkers will not only be trained on provision of the survey itself but also on wider concepts such as gender equity and VAWG. In addition, the training will include participatory sessions on supportive, non-judgmental listening skills – which will minimize the risk of participants experiencing distress during the interview itself. Finally, field workers will go through a specific module on identifying and managing cases of minimal distress and referring cases of severe distress should they occur during the course of the research. See Annex 9 for a sample of the training materials on this subject. The training will include both classroom modules and practice sessions to ensure that all fieldworkers are comfortable applying the lessons learned during the training.
- **Construction and Piloting of the Questionnaire:** As the purpose of this research is to evaluate the impact of a VAWG prevention program, the questionnaire will include questions to assess the prevalence of VAWG. However, these series of questions on experiences of violence will only be a small sub-set of the wider questionnaire, which will focus more broadly on drivers of VAWG – such as questions of female empowerment, gender roles, decision-making in the household, communication strategies within relationships – and activism within communities. The research team has made a concerted effort to include the minimum number of questions specifically on experiences of violence needed to accurately calculate prevalence. Before the section on violence is begun, the fieldworker will re-gain the consent of the participant to ensure that they understand that they will be answering questions on their personal experiences of violence. If participants decline to participate in the section on violence, they will be skipped over this section. At

any point during the section on violence (or at any point during the survey) participants can choose to stop the survey. In addition, the research team will pilot the questionnaire prior to beginning data collection. This process will ensure that the questions are worded in ways that are appropriate and understandable to the Haitian context.

- **Provision of Psychosocial Support for Participants in Distress:** Fieldworkers will be trained to identify and provide basic psychosocial support for participants who display distress during the interview. For respondents who demonstrate minimal symptoms of distress (for example crying) the fieldworkers will provide immediate support. If symptoms continue or escalate, the participant will be referred to support services in the community. Supervisors will be available to ensure that any participant who needs immediate support are able to access available psychosocial support services within the community (see Annex 5 for support services available in each community).
- **Referrals to Support Services:** All female participants in the household, whether they disclose experiences of violence or not, will be given information on available support services in the community. Referral cards with contact information for local psychosocial, health and/or legal services in the local community will be offered to participants (though they can refuse if they think having the card would increase their risk of violence). In addition all primary referral services are located within the commune of the interviews – which is either in walking distance or accessible via local transport systems commonly used by residents of commune. Additional support services are available, including a support group specifically for men, are available in the main population center of Jacmel. Specifically for children, if ongoing child abuse is disclosed or the respondent is in immediate danger to themselves or someone they know, they will be referred to Haitian child protective services and/or police services. See Annex 5 for information on the available referral services in the communities.
- **Training and Support of Researchers to Prevent and Minimize Vicarious Trauma:** Fieldworkers and research staff will be provided with on-going support, including basic psychosocial care, regular check-ins, and weekly debriefing sessions throughout the duration of data collection to minimize any distress on their part as a result of listening to participants' experiences of violence.

In addition to on-going support, fieldworker training will include a session focusing on vicarious trauma and self-care for researchers. This session will be developed based on the SVRI guidelines on preventing and managing vicarious trauma, which will be facilitated by the PI.

### Component 2 - Girls Club Survey:

- **Selection and Training of Fieldworkers:** Fieldworkers for the girls club surveys will go through the same selection and training process as workers for the community based survey (on supportive listening, managing and referring distress, etc.). In addition, their training will specifically focus on interacting with younger populations including efforts to address potential power imbalances between children and adults such as speaking in simple language, allowing considerable time for questions, respect of children, etc. Female field workers will administer the questionnaire. Fieldworkers will be trained to emphasize the voluntary nature of the survey and explain to children that participating in the survey (or choosing not to participate) will have no effect on their ability to participate in the girl's group.
- **Construction and Piloting of the Questionnaire:** The girls club survey will not ask about experiences of violence. It will instead focus on issues such as girl's empowerment, gender norms, and participation in school and community activities related to gender. The language will be very simple due to the age range of participants to ensure comprehension. Children aged 10-14 will answer the least amount of questions, with questions regarding more sensitive topics, such as opinions on sex, only asked of children 15-19. In addition, the research team will pilot the questionnaire prior to beginning data collection to ensure comprehension of the children. This process will ensure that the questions are worded in ways that appropriate and understandable to the target population.

As this questionnaire will not ask about experiences of violence, it is not expected that participants will experience distress or re-traumatization. However, as the same pool of fieldworkers will be administering both this and the community-based survey, all field workers will have had training on managing and referring cases of distress, and have full knowledge of available referral services, in case the need arises.

Component 3 - School-based Survey:

- **Selection and Training of Fieldworkers:** As this is a self-administered questionnaire, less training is required for fieldworkers. However, as the process will be administered by the same cadre of fieldworkers as the community-based survey, they will be prepared to provide support in the case of distress or other negative reactions. Fieldworkers will be trained to emphasize the voluntary nature of the survey and explain to children that participating in the survey (or choosing not to participate) will have no effect on their grades or standing at the school. They will also learn how to address children to minimize potential power imbalances between adults and children during the course of the research.
- **Construction and Piloting of the Questionnaire:** The school questionnaire will be very simple to adhere to the reading level of the target population. It will not cover topics of violence but instead focus on issues such as girl's empowerment, gender norms, and participation in school and community activities related to gender. In addition, the research

team will pilot the questionnaire prior to beginning data collection to ensure comprehension by children.

### *Qualitative Data Collection*

#### Components 1, 2 & 3:

- **Selection and Training of Fieldworkers:** Fieldworkers for the qualitative data collection will go through the same selection and participate in relevant training modules (on supportive listening, managing and referring distress, etc.) along with workers for the quantitative data collection. In addition, fieldworkers will be trained to maintain order during focus groups to ensure a supportive environment, particularly for younger participants. They will also learn to emphasize the importance of participants keeping what is said in the focus group within the group and not speaking to others in the community about what is said during the research to minimize any social derision for opinions expressed during the group.
- **Construction and Piloting of the Questionnaire:** As the qualitative data collection will not ask about specific experiences of violence, it is not expected that participants will experience distress or re-traumatization. However, fieldworkers will have received training on managing and referring cases of distress, and have full knowledge of available referral services, in case the need arises.

**Risk 2: Breaches of confidentiality and/or privacy - leading to increased household violence or peer judgment/ridicule**

### *Quantitative Data Collection*

#### Component 1- Community based Survey:

- **Ensuring Privacy and Confidentiality:** In order to minimize the risks of increased household violence due to participation in the survey, the research team will ensure strict privacy and confidentiality efforts. First, in the general community and with local community leaders, the survey will be described as focusing on Women and Girl's Life Experiences to reduce general community awareness of any sensitive nature of the subject matter. On the survey forms themselves this research is referred to under this title and it is how it will be described during the consent process.

In addition, during the fieldworker training, fieldworkers will discuss and practice how to manage when partners interrupt the survey, when others enter the room or try to listen in, when others ask about the survey in the community, etc. If privacy and confidentiality cannot be assured at the time, the fieldworker will offer to move locations with the respondent or come back at a later time that is more convenient. Dummy questions will

available for fieldworkers to refer to if they happen to be in a sensitive section of the questionnaire when interrupted by a suspicious partner.

Only one participant per household will be interviewed to make sure no one else in the household is aware of the research. A sampling interval of 5-10 households will be used to ensure that direct neighbors are not aware of the contents of the survey. In addition, separate cluster starting points will be used for the administration of the men's and women's surveys with buffer zones in within each cluster to avoid any crossover between communities being sampled. No written material will be given to participants as part of any recruitment efforts that would potentially put the participant at risk if their partner is violent.

Fieldworkers are not being recruited from the communes that will be surveyed, therefore it is not expected that fieldworkers would sample a household where they know the respondent. In any cases where fieldworkers happen to have a pre-existing relationship with the household, they will be instructed to get their supervisor who will conduct the interview.

- **Monitoring for Adverse Events:** Due to both confidentiality concerns, as well as reporting capacity, the research team does not have access to the clinical records or statistics on women seeking services for violence. In addition, after having provided information and referrals to GBV services to several thousand women during the course of the household survey, many of whom may not have previously known about the available services prior to the survey, it is expected that service uptake may actually increase in the aftermath of the study. Therefore, even if an increase in service utilization takes place, it would not likely indicate adverse effects of the study. The research team will ask local service providers, 2 weeks after the survey begins, if they are receiving higher than usual reports of IPV – and if so if they think the reason behind this increase is participation in the survey. The GWI team will monitor all adverse events (defined as any situation that indicates that physical or psychological harm to a respondent may have occurred as a result of participation in the study) and will report these incidents to the IRB board within 5 days of receiving notification that the event occurred.

Component 2 - Girls Club Survey:

- **Ensuring Privacy and Confidentiality:** As with the community survey, the purpose of this survey will be described as documenting girl's life experiences in Haiti. The survey will be administered in a central location (where the girls typically would meet for their club), but with each interview conducted in a private room or private space away from the other girls. Girls will be asked not to talk about their responses with each other – or to ask what other girls spoke about. No names or specific addresses will be recorded. Finally, this survey does not include about questions about experiences of violence – which should reduce participant's risk.

Component 3 - School-based Survey:

- **Ensuring Privacy and Confidentiality:** Similar to other components of the research, the purpose of this survey will be described as documenting the lives of boys and girls in Haiti. The survey will be self-administered within a classroom setting. Participants will be asked to not talk about their responses with each other. No names or specific addresses will be recorded on the questionnaire. Finally, this survey does not include about questions about experiences of violence – which should reduce participant’s risk.

*Qualitative Data Collection*

Components 1, 2 & 3:

- **Ensuring Privacy and Confidentiality:** All qualitative interviews will take place in settings that ensure confidentiality such as stakeholder offices, women’s centers, etc. As with the quantitative questionnaire the general purpose of the qualitative data collection will not be publicized in the community and no names will be recorded during data collection to protect the privacy of participants. In addition, for components 2 & 3, the research team will advise teachers and girl's club leaders to be on the look out for any negative consequences of participation in the groups (such as being made fun of for the beliefs expressed during the research).

More information on confidentiality can be found in Section M.

## **H. Benefits**

Overall the expected benefits to the women and girls are expected to outweigh any potential risks to subjects. The results of the evaluation will be used to directly improve the implementation of future iterations of SASA! and Power to Girls in Haiti. In addition, as the SASA! methodology is currently being adapted in over 20 countries and 60 organizations throughout the world, and therefore the results of this evaluation will be used to improve and affirm adaptations in these locations. In addition, this evaluation will contribute to the international community’s understanding on what works to address intersections between VAW and VAC, building evidence base for prevention of VAWG interventions, and offering primary prevention model to the world of adolescent girls prevention work that many organizations in Haiti have already undertaken. There are no monetary benefits associated with the research though any participant who is identified to be a survivor of VAWG will be referred to support services, which will allow women and girls who may not be aware of support services to access needed help. As the risks to participants in the research are generally low, the value to the future program recipients in Haiti and throughout the world outweighs any individual risk.

## **I. Outside Consultants/Collaborators**

GWJ will be collaborating with two organizations: Beyond Borders (BB) and a local research institution. The local research institution is a Haitian research group with significant experience conducting research in Southeast Haiti. They will be responsible for identification and recruitment of participants, data collection, and translation. BB will provide technical assistance for the research and facilitate access to the program implementation and comparison sites. In addition to the research design, GWJ will oversee all research efforts, assist in data collection, and contribute to the training efforts.

## **J. Contractual Agreements**

The contract from the funding organization, the Novo Foundation, will be annexed. Please see Annex 6 for the terms of reference for the contracts for the local research partner.

## **K. Costs To Subjects**

There is no cost to subjects to participate in the research.

## **L. Conflicts Of Interest**

We declare no conflicts of interest.

## **M. Confidentiality**

The fieldworkers and the rest of the research team will take every precaution to ensure all answers are kept strictly confidential. No full names or addresses will be collected for any of the research. Different confidentiality procedures will be used for the quantitative and qualitative portions of the research. No photographs or audio-recordings will be taken.

### **Components 1, 2 & 3:**

- *Quantitative Data Collection:* Field workers will collect only initials of survey participants in order to ensure random selection from all eligible participants in a household. Fieldworkers will not keep any records of names or other personally identifiable information. All completed questionnaires will be collected from fieldworkers at the end of each day and securely stored in locked storage spaces. All computers containing data will be password protected. The only exception to these procedures will be when an ongoing case of child abuse is discovered or it is found that the respondent is an immediate

threat to themselves or others. In this case, the supervisor will be notified who will bring the case to Haitian Child Protective services and/or the local police as relevant.

- *Qualitative Data Collection:* Fieldworkers will not keep any records of names or other personally identifiable information. All notes will be securely stored in locked storage spaces. If individual quotes are used in the final paper, no personally identifiable information will be provided along with the quote. During focus group sessions, facilitators and note-takers will have to pay particular attention to maintaining confidentiality. Facilitators will ask participants not to discuss any personal experiences with violence or mention anyone by name and to refrain from discussing anything from the focus group with those outside of the group.

#### **N. Subject Compensation**

No monetary compensation will be given for participants.

#### **O. Facilities and Equipment**

School facilities will be used for the school based component of this research. They will be identified before field work begins.



## **P. References & Literature Cited**

1. Abramsky, T., Devries, K., Kiss, L., Nakuti, J., Kyegombe, N., Starman, E., Cundill, B., Francisco, L., Kaye, D., Musuya, T., Michau, L., Watts, C. (2014). Findings from the SASA! Study: a cluster randomised controlled trial to assess the impact of a community mobilisation intervention to prevent violence against women and reduce HIV risk in Kampala, Uganda. *BMC Medicine*, 12(12).
2. Cromer, L. D., & Newman, E. (2011). Research ethics in victimization studies: Widening the lens. *Violence Against Women*, 17(12), 1536-48; discussion 1549-58. doi:10.1177/1077801211436365 [doi]
3. Ellsberg, M., Arango, D. J., Morton, M., Gennari, F., Kiplesund, S., Contreras, M., Watts, C. (2014). "Prevention of Violence against Women and Girls: What Does the Evidence Say?" *The Lancet*, A Special Series on Violence against Women and Girls.
4. Ellsberg, M., & Heise, L. (2002). Bearing witness: Ethics in domestic violence research. *Lancet*, 359(9317), 1599-604.
5. Ellsberg, M., & Heise, L. (2005). *Researching violence against women: A practical guide for researchers and activists*. Geneva, Switzerland: Program for Appropriate Technology in Health, World Health Organization,.
6. Ellsberg, M., Heise, L., Peña, R., Agurto, S., & Winkvist, A. (2001). Researching domestic violence against women: Methodological and ethical considerations. *Studies in Family Planning*, 32(1), 1-16.
7. Fontes, L. A. (2004). Ethics in violence against women research: The sensitive, the dangerous, and the overlooked. *Ethics & Behavior*, 14(2), 141-174. doi:10.1207/s15327019eb1402\_4 [doi]
8. Garcia Moreno, C., Watts, C., Jansen, H., Ellsberg, M., & Heise, L. (2003). Responding to violence against women: WHO's multi-country study on women's health and domestic violence. *Health and Human Rights*, 6(2), 112-127.
9. Griffin, M. G., Resick, P. A., Waldrop, A. E., & Mechanic, M. B. (2003). Participation in trauma research: Is there evidence of harm? *Journal of Traumatic Stress*, 16(3), 221-227. doi:10.1023/A:1023735821900 [doi]
10. Hlavka, H. R., Kruttschnitt, C., & Carbone-Lopez, K. C. (2007). Revictimizing the victims? interviewing women about interpersonal violence. *Journal of Interpersonal Violence*, 22(7), 894-920. doi:22/7/894 [pii]
11. Jansen, H. (2010). *Swimming against the tide lessons learned from field research on violence against women in the solomon islands and kiribati*. Suva, Fiji: UN populations fund.

12. Jansen, H. A. F. M., Watts, C., Ellsberg, M., Heise, L., & Garcia-Moreno, C. (2004). Interviewer training in the WHO multi-country study on women's health and domestic violence. *Violence Against Women*, 10(7), 831-849.
13. Johnson, L. E., & Benight, C. C. (2003). Effects of trauma-focused research on recent domestic violence survivors. *Journal of Traumatic Stress*, 16(6), 567-571. doi:10.1023/B:JOTS.0000004080.50361.f3 [doi]
14. Jorm, A. F., Kelly, C. M., & Morgan, A. J. (2007). Participant distress in psychiatric research: A systematic review. *Psychological Medicine*, 37(7), 917-926. doi:S0033291706009779 [pii]
15. Kyegombe, N., Abramsky, T., Devries, K. M., Starman, E., Michau, L., Nakuti, J., Musuya, T., Watts, C. (2014). "SASA! is the Medicine That Treats Violence. Qualitative Findings on How a Community Mobilisation Intervention to Prevent Violence against Women Created Change in Kampala, Uganda." *Global Health Action* 7.
16. Salazar, M., Valladares, E., Ohman, A., & Hogberg, U. (2009). Ending intimate partner violence after pregnancy: Findings from a community-based longitudinal study in nicaragua. *BMC Public Health*, 9, 350-2458-9-350. doi:10.1186/1471-2458-9-350 [doi]
17. Schenk, K. & Williamson, J. (2005). *Ethical Approaches to Gathering Information from Children and Adolescents in International Settings: Guidelines and Resources*. Washington, DC: Population Council.
18. Sikweyiya, Y., & Jewkes, R. (2012). Perceptions and experiences of research participants on gender-based violence community based survey: Implications for ethical guidelines. *PloS One*, 7(4), e35495. doi:10.1371/journal.pone.0035495 [doi]
19. Sikweyiya, Y., & Jewkes, R. (2013). Potential motivations for and perceived risks in research participation: Ethics in health research. *Qualitative Health Research*, 23(7), 999-1009. doi:10.1177/1049732313490076 [doi]
20. Wagman, J., Francisco, L., Glass, N., Sharps, P. W., & Campbell, J. C. (2008). Ethical challenges of research on and care for victims of intimate partner violence. *The Journal of Clinical Ethics*, 19(4), 371-380. Retrieved from <http://search.ebscohost.com/login.aspx?direct=true&db=cmedm&AN=19189769&site=ehost-live>
21. World Health Organization. (1999). Putting women's safety first: Ethical and safety recommendations for research on domestic violence against women. ( No. WHO/EIP/GPE/99.2). Geneva, Switzerland: Global Programme on Evidence for Health Policy, World Health Organization.

## **Q. Annexes**

## Annex 1: Project Logframe

At highest level, the project and evaluation team have identified a number of key indicators to measuring the project's overall impact. Each indicator will be assessed at baseline, midterm and endline to assess the change in attitudes and behaviors of community members. These can be found in Table 1.

**Table 1: Impact**

Objective	Indicators	Means of Verification
To decrease prevalence of IPV among women and to decrease prevalence of sexual abuse of girls	% of female respondents (aged 15-64) who report experiencing an act of physical or sexual violence by an intimate partner in the past 12 months (among women who have had an intimate partner in the past 12 month)  % of female respondents (aged 15-18) who report experiencing sexual abuse over the past 12 months	Question or series of questions in baseline, midterm, and endline surveys
To reduce social acceptance of gender inequality, IPV and sexual abuse of women and girls	% of respondents who agree that it is the entire community's responsibility to prevent violence against women and girls  % of respondents who agree that women and men, girls and boys have equal value and should have equal power  % of respondents who agree that violence against women or a girl is never justified	Question or series of questions in baseline, midterm, and endline surveys
To increase girl's sense of safety and freedom to make decisions	% of girls who report feeling safe at home, school and in their communities  % of girls who are willing to report unwanted sexual activity  % of girls who are able to make decisions regarding their own lives	Question or series of questions in baseline, midterm, and endline surveys
To decrease HIV/SRH risk behaviors in women and girls	% of respondents (aged 15-64) who had more than one sexual partner in the past 12 months who report using a condom during their last sexual intercourse	Question or series of questions in baseline, midterm, and endline surveys

To contribute to the above overall goal and impact level indicators, community level change in knowledge, attitudes, skills and behavior is needed. The project will examine the following measures at baseline, midterm, and endline surveys to detect change in community knowledge, attitudes, skills and behavior.

**Table 2: Community Level Outcomes**

Level	Indicators	Means of Verification
Knowledge	% of respondents who can correctly identify the types of violence girls and women may experience (physical, sexual, economic, psychological) % of respondents who know at least one negative consequence for women, girls and the community when violence occurs % of respondents who know that the girls and women's lack of power increases their risk for HIV and other STIs	Question or series of questions in baseline, midterm, and endline surveys
Attitudes	% of respondents who agree that it benefits the whole community if women and girls live free of violence % of respondents who believe that educating girls and boys is equally important % of respondents who believe that men and women should share household tasks	Question or series of questions in baseline, midterm, and endline surveys
Skills	% of respondents can correctly identify community resources and services for survivors of violence % of respondents who feel they are able to speak to girls about sensitive subjects such as money, sexual health or violence	Question or series of questions in baseline, midterm, and endline surveys
Behaviors	% of respondents who report intervening in a case of violence in the past 12 months % of respondents who report speaking out in the community about violence in the past 12 months % of respondents who report that tasks in their household are equally shared by males and females	Question or series of questions in baseline, midterm, and endline surveys

Similarly, the next three tables review the key knowledge, attitudes, skills and behaviors that will be assessed among **key stakeholder** groups at baseline, midterm, and endline. The evaluation team will assess the change in each indicator to determine how successful the Rethinking Power methodology has been with each subgroup of: school/girls' club stakeholders, girls and boys, and parents.

**Table 3: School/Girls Club-based Stakeholders (Teachers, Girl Club Leaders Outcomes)**

Level	Indicators	Means of Verification
Knowledge	<p>Stakeholders can correctly identify the types of violence girls and women can experience (physical, sexual, economic, psychological)</p> <p>Stakeholders can name at least 3 negative consequences for girls who experience violence</p> <p>Stakeholders know that girls receive less resources than other groups in the community</p> <p>Stakeholders know that youth and women's programs often do not meet the unique needs of girls</p>	Focus group discussions with stakeholders
Attitudes	<p>Stakeholders agree that girls should be educated about their bodies, sex and how to protect themselves from pregnancy and HIV</p> <p>Stakeholders believe that girls and boys are equally intelligent and capable of learning all subjects</p> <p>Stakeholders believe that girls should be encouraged to express their opinions and voices</p>	Focus group discussions with stakeholders
Skills	<p>Stakeholders can correctly identify community and school resources and services for survivors of violence</p> <p>Stakeholders know the school procedures on where to report sexual abuse when they observe a case</p>	Focus group discussions with stakeholders
Behaviors	<p>Stakeholders have signed relevant codes of conduct regarding violence against girls</p> <p>Stakeholders report intervening with parents who were withdrawing their daughters from school before graduation</p>	Focus group discussions with stakeholders

Table 4: School Girls/Girls' Group based Outcomes

Level	Indicators	Means of Verification
Knowledge	% of girls who can correctly identify the types of violence girls and women may experience (physical, sexual, economic, psychological) % of respondents who know that the girls and women's lack of power increases their risk for HIV and other STIs % of girls who know that they are not to blame for sexual harassment by a male teacher or student	Question or series of questions in baseline, midterm, and endline surveys
Attitudes	% of girls who believe that girls are equally as intelligent and capable of success in all subjects as boys % of girls who believe that girls can attain any profession if they work hard enough % of girls who report that they feel respected by boys.	Question or series of questions in baseline, midterm, and endline surveys
Skills	% of girls who feel able to speak to their parents about continuing education, etc. % of girls who know where to go to for support if they ever experience violence	Question or series of questions in baseline, midterm, and endline surveys
Behaviors	% of girls who have identified safe spaces in their communities. % of girls who regularly participate in community activities (clubs, groups, church activities, sports, etc.) % of girls who report speaking out against violence in their communities	Question or series of questions in baseline, midterm, and endline surveys

**Table 5: Parent based Outcomes**

Level	Indicators	Means of Verification
Knowledge	Parents know that the model they provide their children can affect their children's decisions later in life Parents know that when girl's needs are not met, it negatively affects the community Parents know the most common types of violence girls experience Parents know where to access support if a girl tells them they have experienced sexual violence	Focus group discussions with parents

Level	Indicators	Means of Verification
Attitudes	<p>Parents agree that girls have something important to contribute if they are listened to</p> <p>Parents believe educating boys and girls is equally important</p> <p>Parents believe that girls and boys should have equal levels of freedom</p>	Focus group discussions with parents
Skills	<p>Parents report they are engaged in building the skills of their children to address power differentials in the community (teaching boys to respect girls, telling their daughters they can succeed in education, etc.)</p> <p>Parents report that they have spoken to their daughters about their bodies, how to prevent pregnancy and how to say no to sex</p>	Focus group discussions with parents
Behaviors	<p>Parents report they are engaged in efforts to reduce gender discrimination in the community</p> <p>Parents report they are sending both their daughters and sons to school</p>	Focus group discussions with parents



**Annex 2: Data Collection Tools**

**Rethinking Power Evaluation**

**Baseline Survey – Female**

*George Washington University and Beyond Borders*

Administration Form				
<b>ID Number:</b>				
Interviewer Visits				
		<b>Visit 1</b>	<b>Visit 2</b>	<b>Visit 3</b>

	<b>Result:</b>			
<b>Data Collector Name:</b>				
<b>Result:</b>				
<b>Final Visit Result:</b>				
	<b>Result Codes</b>			
<b>QUESTIONNAIRES COMPLETED?</b>	Refused (specify): _____			
			11	
	Dwelling vacant or address not a dwelling		12	
[ ] 1. None completed	Dwelling destroyed		13	
⇒	Dwelling not found, not accessible		14	
	Entire HH absent for extended period		15	
	No HH member at home at time of visit		16⇒Need to return	
	HH respondent postponed interview		17⇒Need to return	
	Entire HH speaking only foreign language		18	
[ ] 2. HH selection form (and in most cases HH questionnaire) only	Selected woman refused (specify): _____			
⇒			21	
	No eligible woman in household		22	
	Selected woman not at home		23⇒Need to return	
	Selected woman postponed interview		24 ⇒Need to return	
	Selected woman incapacitated		25	
	Selected woman speaks foreign language		26	
	Selected woman does not want to complete due to fear of harm for participating		27	
[ ] 3. Woman's questionnaire partly	Does not want to continue (specify) : _____			
⇒			31	
	Rest of interview postponed to next visit		32 ⇒Need to return	
<b>IF MORE THAN ONE HH IN SELECTED DWELLING: FILL OUT SEPERATE HH SELECTION FORM FOR EACH ONE</b>				
<b>Household Selection Form</b>				
Hello, my name is _____. I am visiting your household on behalf of the George Washington University. We are conducting a survey in Haiti to learn about the lives of women and girls.				
A.	Please can you tell me how many people live here, and share food?  PROBE: Does this include children (including infants) living here? Does it include any other people who may not be members of your family, such as domestic servants, lodgers or friends who live here and share food? MAKE SURE THESE PEOPLE ARE INCLUDED IN THE TOTAL		TOTAL NUMBER OF PEOPLE IN HOUSEHOLD [ ][ ]	
B.	Is the head of the household male or female?		MALE ..... 1 FEMALE ..... 2 BOTH	
	FEMALE HOUSEHOLD MEMBERS	RELATIONSHIP TO HEAD OF HH	RESIDENCE	AGE
C.	Today we would like to talk to one woman or girl from your household. Would you please give me the initials of all girls or women who usually live in your household (and share food).	What is the relationship of this person to the head of the household.* (USE CODES BELOW)	Does this person usually live here? SPECIAL CASES: SEE (A) BELOW. YES NO	How old is this person?
				SEE CRITERIA BELOW (A +B)  YES NO

1			1 2		1 2
2			1 2		1 2
3			1 2		1 2
4			1 2		1 2
5			1 2		1 2
6			1 2		1 2
7			1 2		1 2
8			1 2		1 2
9			1 2		1 2
10			1 2		1 2
CODES 01 HEAD 02 WIFE (PARTNER) 03 DAUGHTER 04 DAUGHTER-IN-LAW 05 GRANDDAUGHTER		06 MOTHER 07 MOTHER-IN-LAW 08 SISTER 09 SISTER-IN-LAW 10 OTHER RELATIVE 11 ADOPTED/FOSTER/STEP DAUGHTER		12 DOMESTIC SERVANT 13 LODGER 14 FRIEND 15 OTHER NOT RELATIVE: _____	
<p><b>(A) SPECIAL CASES TO BE CONSIDERED MEMBER OF HOUSEHOLD:</b></p> <ul style="list-style-type: none"> <li>• DOMESTIC SERVANTS IF THEY SLEEP 5 NIGHTS A WEEK OR MORE IN THE HOUSEHOLD.</li> <li>• VISITORS IF THEY HAVE SLEPT IN THE HOUSEHOLD FOR THE PAST 4 WEEKS.</li> </ul> <p><b>(B) ELIGIBLE:</b> ANY <u>WOMAN BETWEEN 15 AND 64 YEARS</u> LIVING IN HOUSEHOLD.</p> <p><b>MORE THAN ONE ELIGIBLE WOMEN IN HH:</b></p> <ul style="list-style-type: none"> <li>▪ <b>RANDOMLY SELECT ONE ELIGIBLE WOMAN FOR INTERVIEW.</b> TO DO THIS, WRITE THE LINE NUMBERS OF ELIGIBLE WOMEN ON PIECES OF PAPER, AND PUT IN A BAG. ASK A HOUSEHOLD MEMBER TO PICK OUT A NUMBER – SO SELECTING THE PERSON TO BE INTERVIEWED. [OPTIONAL: USE KISH TABLE]</li> <li>▪ <b>PUT CIRCLE AROUND LINE NUMBER OF WOMAN SELECTED.</b> ASK IF YOU CAN TALK WITH THE SELECTED WOMAN. IF SHE IS NOT AT HOME, AGREE ON DATE FOR RETURN VISIT.</li> <li>▪ <b>CONTINUE WITH HOUSEHOLD QUESTIONNAIRE</b></li> </ul> <p><b>NO ELIGIBLE WOMAN IN HH:</b>  <b>SAY “I cannot continue because I can only interview women 15-64 years old. Thank you for your assistance.” FINISH HERE.</b></p>					
<b>DATE OF INTERVIEW: day [ ][ ] month [ ][ ] year [ ][ ][ ][ ]</b>					
<b>Section 1: Demographics and Socio-economics</b>					
1.	How old are you?	ENTER NUMBER [ ][ ]  Don't know (do not read).....888 Refused to answer (do not read).....999			
2.	Can you read and write?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
3.	Have you ever attended school?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			⇒Q5
4.	What is the highest level of education that you have achieved?	Primary.....1 Secondary.....2 Higher Level.....3 Don't know (do not read).....8 Refused to answer (do not read).....9			
5.	What do you do mainly for work?	Not working.....1 Professional/Technical/Managerial.....2 Clerical.....3 Sales and services.....4 Skilled manual.....5			

		Unskilled manual.....6 Domestic service.....7 Agriculture.....8 Fishing.....9 Other (Please specify).....10 Don't know (do not read).....88 Refused to answer (do not read).....99	
6.	What is the main source of income for you and your household?	No income.....1 Money from own work.....2 Support from husband/partner.....3 Support from other relatives.....4 Pension.....5 Social Services/Welfare.....6 Support from parents.....7 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99	
7a.	What is your main source of fuel for cooking?	Wood.....1 Grass/leaves.....2 Charcoal.....3 Kerosene/paraffin.....4 Animal dung.....5 Gas.....6 Electricity.....7 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99	
7b	What are the main material used in the roof?	Roof from natural materials.....1 Rudimentary materials (plastic/carton/tarp).....2 Tiled or concrete roof.....3 Corrugated iron.....4 Tent.....5 Other (Please specify).....6 Don't know (do not read).....8 Refused to answer (do not read).....9	
8	Are you currently married or living together with a man as if married?	Yes, currently married.....1 Yes, living with a man.....2 No, don't have husband or regular partner.....3 Refused to answer (do not read).....9	⇒Q12 ⇒Q12
9	Are you currently involved in a relationship with a man without living together (a boyfriend or partner)?	Yes, involved with a man without living together.....1 No, don't have a boyfriend or partner...2 Refused to answer (do not read).....9	⇒Q12
10	In the past 12 months, have you been married or lived with a man as if married?	Yes, was married.....1 Yes, was living with a man.....2 No, did not have husband or regular partner or boyfriend.....3 Refused to answer (do not read).....9	⇒Q12 ⇒Q12
11	In the past 12 months, have you been involved in a relationship with a man without living together (a boyfriend or partner)?	Yes, was involved with a man without living together.....1 No, did not have a boyfriend or partner.2 Refused to answer (do not read).....9	⇒Q13 ⇒Q13
12	How old were you the first time you got married/lived with man?	ENTER NUMBER [ ] [ ]  Don't know (do not read).....888 Refused to answer (do not read).....999	⇒Q13

12a	What was your approximate age?	<15.....1 15-19.....2 20-24.....3 25-29.....4 30-34.....5 35-39.....6 40-44.....7 45-49.....8 50-54.....9 55-56.....10  Don't know (do not read).....88 Refused to answer (do not read).....99				
13	Do any of your birth family live close enough by that you can easily see/visit them?	Yes.....1 No.....2 Living with family of birth.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
14	When you need help or have a problem, can you usually count on members of your family for support?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
<b>Section 2: Children and SRH</b>						
15	How many children do you have, including all children who live in your household (wards, dependents), who are alive now?	ENTER NUMBER [ ][ ]  No Children.....777 Don't know (do not read).....888 Refused to answer (do not read).....999	⇒Section 3			
16	How many of those children are boys?	ENTER NUMBER [ ][ ]  No Boys.....777 Don't know (do not read).....888 Refused to answer (do not read).....999				
17	How many of those children are girls?	ENTER NUMBER [ ][ ]  No Girls.....777 Don't know (do not read).....888 Refused to answer (do not read).....999	⇒Q22			
18a	How old is your youngest daughter?	ENTER NUMBER [ ][ ]  No Girls.....777 Don't know (do not read).....888 Refused to answer (do not read).....999				
18b	How old is your oldest daughter?	ENTER NUMBER [ ][ ]  No Girls.....777 Don't know (do not read).....888 Refused to answer (do not read).....999				
<b>IF HAS DAUGHTER/WARD BETWEEN AGE OF 10-19 ⇒ Q19</b>  <b>IF NO DAUGHTER/WARDS BETWEEN AGE OF 10-19 ⇒ Filter for Q20</b>						
19	Are you comfortable or uncomfortable talking about the following with your daughter/wards:	Comfortable	Not Comfortable	Don't Know	NR	
a	their education	1	2	7	8	
b	what happens to kids as they grow up (puberty)	1	2	7	8	
c	sex	1	2	7	8	

d	how to avoid getting pregnant	1	2	7	8	
e	HIV	1	2	7	8	
f	violence	1	2	7	8	
<b>IF HAS DAUGHTER/WARD ⇒ Q20</b>						
<b>IF NO DAUGHTER/WARDS ⇒ Filter for Q22</b>						
20	What do you do if your daughters misbehave?  <i>Multiple Responses Allowed</i>	Talk to them.....1 Shout at them.....2 Spank them.....3 Hit them.....4 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99				
21	What does your husband do if your girls misbehave?  <i>Multiple Responses Allowed</i>	Talk to them.....1 Shout at them.....2 Spank them.....3 Hit them.....4 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99				
22	What do you do if your sons misbehave?  <i>Multiple Responses Allowed</i>	Talk to them.....1 Shout at them.....2 Spank them.....3 Hit them.....4 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99				
23	What does your husband do if your boys misbehave?  <i>Multiple Responses Allowed</i>	Talk to them.....1 Shout at them.....2 Spank them.....3 Hit them.....4 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99				
<b>Section 3: HIV</b>						
<b>IF ever partnered ⇒ Continue with Section 3</b>						
<b>IF never partnered ⇒ Skip to Section 4</b>						
HIV/AIDS IS A PROBLEM IN OUR COMMUNITIES. WE WOULD LIKE TO UNDERSTAND MORE ABOUT HOW HOUSEHOLDS LIKE YOURS ARE COPING WITH THE EPIDEMIC.						
24	In the last 12 months (last 12 months of your most recent relationship), do (did) you and your husband/ partner/ most recent partner discuss the following topics together?	Yes	No	NR		
a	condom use	1	2	9		
b	fidelity	1	2	9		
c	partner violence	1	2	9		
d	HIV/AIDS	1	2	9		
e	your risk for HIV	1	2	9		
f	how to protect your family from HIV infection	1	2	9		
g	getting tested for HIV	1	2	9		

25	I don't need to know the results, but have you ever been tested for HIV?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	⇒Q27 ⇒Q27			
26	I don't need to know the results, but have you been tested for HIV in the last 12 months?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
27	Has your husband/ partner/ most recent partner ever been tested for HIV?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	⇒Q29 ⇒Q29			
28	Has (was) your husband/ partner/ most recent partner been tested for HIV in the last 12 months?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
Thinking about your husband/ partner / most recent partner:						
29	Have (did) you use(d) a condom in the last 12 months (last 12 months of your most recent relationship)?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	⇒Q31			
30	If not, why not?	Wanted to have a child.....1 Didn't have a condom.....2 Man didn't want to use.....3 Woman didn't want to use.....4 Was in a monogamous relationship.....5 Don't know (do not read).....8 Refused to answer (do not read).....9				
31	As far as you know, has your husband/partner/ most recent partner had a sexual relationship with any other women in the last 12 months (last 12 months of your most recent relationship), while being with you?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
32	Have you had a sexual relationship with any other man in the last 12 months (last 12 months of your most recent relationship), while being with your husband/ partner/ most recent partner?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
IF YES to either Q31 or Q32 ⇒Q33 IF No to both Q31 or Q32 ⇒Section 4						
33	Did you use a condom the last time that you had sex?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
<b>Section 4: Knowledge and Attitudes</b>						
34	Do you agree or disagree with the following statements:	Agree	Disagree	DK	NR	
a	Changing diapers, giving a bath and feeding kids is mainly the mother's responsibility	1	2	8	9	
b	A woman's role is taking care of her home and family	1	2	8	9	

c	A man should have the final word about decisions in his home	1	2	8	9	
d	Women and men should share authority in the family	1	2	8	9	
35	Do you agree or disagree with the following statements:	Agree	Disagree	DK	NR	
a	Boys should spend as much time as girls doing household chores	1	2	8	9	
b	Girls should be allowed to socialize outside the home just as boys do	1	2	8	9	
c	Boys have more of a need to go to school than girls do	1	2	8	9	
d	Girls should be allowed to choose when to get married	1	2	8	9	
36	Do you agree or disagree with the following statements:	Agree	Disagree	DK	NR	
a	Violence between husband and wife is a private matter and others should not intervene	1	2	8	9	
b	A woman should tolerate violence to keep her family together	1	2	8	9	
c	If a woman is raped, she usually did something careless to put herself in this situation	1	2	8	9	
d	It is the entire community's responsibility to prevent men from beating their wives	1	2	8	9	
37	Do you think it is violence if:	Yes	No	DK	NR	
a	A man insults his wife/girlfriend or makes her feel bad about herself	1	2	8	9	
b	A man humiliates his wife/girlfriend in front of other people	1	2	8	9	
c	A man pushes or slaps his wife/girlfriend	1	2	8	9	
d	A man takes his wife/girlfriend's money against her will	1	2	8	9	
38	What are some of the consequences for a woman or girl who experiences violence in her home?  <i>Multiple Responses Allowed</i>	Injury.....1 Death.....2 HIV/STI.....3 Drop out of school.....4 Pregnancy.....5 Early/Forced marriage.....6 Psychosocial distress.....7 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99				
39	Are women who experience violence from a partner at higher risk of HIV infection	Yes.....1 No.....2 Don't know (do not read).....8				



	than those who do not experience violence?	Refused to answer (do not read).....9				
40	In your opinion, can a woman refuse to have sex with her partner if:	Yes	No	DK	NR	
a	She doesn't want to	1	2	8	9	
b	He is drunk	1	2	8	9	
c	She suspects he is unfaithful	1	2	8	9	
d	She knows/suspects he is HIV positive	1	2	8	9	
e	He refuses to use a condom	1	2	8	9	
41	In your opinion, is a husband justified in hitting or beating his wife or girlfriend in the following situations:	Yes	No	DK	NR	
a	If she goes out without telling him?	1	2	8	9	
b	If she neglects the children?	1	2	8	9	
c	If she argues with him?	1	2	8	9	
d	If she refuses to have sex with him?	1	2	8	9	
e	If he suspects she is having an affair with another man	1	2	8	9	
42	Do you feel that you have a right to live without violence?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
<b>Section 5: Gender Norms - Empirical and Normative expectations</b>						
43	In your community, do most women/girls take primary responsibility for chores (taking care of the children, washing dishes, cleaning clothes) in their household?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
44	In your opinion, in your community are:	Most women are beaten by their husbands...1 Some women are beaten by their husbands...2 Few women are beaten by their husbands.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
45	If a man in this community helped around the house with household chores such as taking care of children, washing dishes or cleaning clothes, do you think most people in your community would:	Approve of his action.....1 Disapprove of his action.....2 Think it is none of their business.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
46	If a man in this community beat his wife because she disobeyed him, do you think most of people in your community would:	Approve of his action.....1 Disapprove of his action.....2 Think it is none of their business.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
47	Do you agree or disagree with the following statement:	Agree	Disagree	DK	NR	
a	If a man does household chores (eg. taking care of the children, washing dishes, cleaning	1	2	8	9	

	clothes) other men in the community will think that he is less of a man					
b	If a husband does not beat his wife when she disobeys him, other men in the community will think less of him	1	2	8	9	
<b>Section 6: Intimate Partner Experiences</b>						
	<b>IF ever partnered ⇒ Continue with Section 3</b> <b>IF never partnered ⇒ Skip to Section 4</b>					
48	I would now like you to tell me a little about your current/most recent husband/partner. How old is he now? [IF EXACT AGE IS NOT KNOWN, ESTIMATE. IF MOST RECENT PARTNER IS DEAD ENTER THE AGE THAT HE WOULD BE NOW IF HE WERE ALIVE]	ENTER NUMBER [ ] [ ]  Don't know (do not read).....888 Refused to answer (do not read).....999				⇒Q49
48a	Is (was) your husband/partner/most recent partner older, younger, or the same age as you?	Older.....1 Younger.....2 Same age.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
49	Can he read and write?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
50	Did he ever attend school?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				⇒Q52
51	What is the highest level of education that he achieved?	Primary.....1 Secondary.....2 Higher Level.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
52	Is he now (or was he at the end of your relationship) working, looking for work or unemployed, retired, or studying?	Not working.....1 Professional/Technical/Managerial.....2 Clerical.....3 Sales and services.....4 Skilled manual.....5 Unskilled manual.....6 Domestic service.....7 Agriculture.....8 Fishing.....9 Other (Please specify).....10 Don't know (do not read).....88 Refused to answer (do not read).....99				
53	What kind of work does he normally do?	No income.....1 Money from own work.....2 Support from husband/partner.....3 Support from other relatives.....4 Pension.....5 Social Services/Welfare.....6 Support from parents.....7 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99				

54	How often does/did your husband/partner drink alcohol?	Every day or nearly every day.....1 Once or twice a week.....2 1-3 times a month.....3 Occasionally, less than once a month..4 Never.....5 Don't know (do not read).....8 Refused to answer (do not read).....9			
55	Does/did your husband/partner ever use drugs (e.g. cocaine)? How often?	Every day or nearly every day.....1 Once or twice a week.....2 1-3 times a month.....3 Occasionally, less than once a month..4 Never.....5 Don't know (do not read).....8 Refused to answer (do not read).....9			
56	Since you have known him, has he ever been involved in a physical fight with another man?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			⇒Q58
57	In the past 12 months, has this happened once or twice, a few times, many times or never?	Once or twice.....1 A few times (3-5).....2 Many times (more than 5).....3 Never.....4 Don't know (do not read).....8 Refused to answer (do not read).....9			
58	Has your current/most recent partner had a relationship with any other women while being with you?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
59	As far as you know, was your most recent husband/partner himself hit or beaten regularly by someone in his family, when he was a child?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
<p>When two people marry or live together, they usually share both good and bad moments. I would now like to ask you some questions about how your current (or most recent) husband/partner treats (treated) you. Some of the questions will ask you if your current (or most recent) husband/partner committed violence against you. I understand that the things that we will discuss may be quite difficult for you to talk about. If it gets too difficult or you seem to be experiencing significant distress, we will stop the interview. You will also be provided with referrals for counseling after our interview. If you do not understand a question, please ask me to explain it to you. If you do not want to answer a question, please let me know and we will skip the question and go to the next question, or you can decide you want to stop participating at any time. Answering these questions could possibly put you at risk if your husband finds out. If anyone interrupts us, I will change the topic of conversation. If we cannot guarantee privacy, I will stop the interview. Do you wish to continue with the interview?</p>					
60	I am now going to ask you about some situations that are true for many women. Does your current or most recent husband/partner generally do any of the following?:	Yes	No	NR	
a	Does not permit you to meet your female friends	1	2	9	
b	Try to limit contact with your family?	1	2	9	
c	Insist on knowing where you are at all times?	1	2	9	
d	Get jealous or angry if you talk with another man?	1	2	9	

e	Frequently accuse you of being unfaithful?	1	2	9	
f	Expects you to ask his permission before seeking health care for yourself and/or your children	1	2	9	
g	Does not trust you with any money	1	2	9	
h	Checks your cell phone logs to see who you have called/who has called you	1	2	9	
<b>IF YES to ANY Q60a-h ⇒Q61</b> <b>IF NO to ALL Q60a-h ⇒Q62</b>					
61	Has this [refer to the actions noted above] the happened in the past 12 months?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
62	Does your current or most recent husband/partner/boyfriend ever do any of the following?	Yes	No	NR	
a	Prohibits you from getting a job, going to work, trading, earning money or participating in income generating projects	1	2	9	
b	Takes your earnings from you against your will	1	2	9	
c	Refuses to give you money you needed for household expenses even when he has money for other things (such as alcohol and cigarettes)	1	2	9	
<b>IF YES to ANY Q62a-c ⇒Q63</b> <b>IF NO to ALL Q62a-c ⇒Q64</b>					
63	Has this [refer to the actions noted above] the happened in the past 12 months?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
64	The next questions are about things that happen to many women, and that your current partner may have done to you. Has your current husband/partner/boyfriend ever....	Yes	No	NR	
a	Insulted you or made you feel bad about yourself?	1	2	9	
b	Belittled or humiliated you in front of other people?	1	2	9	
c	Done things to scare or intimidate you on purpose (e.g. by the way he looked at you, by yelling and smashing things)?	1	2	9	
d	Verbally threatened to hurt you or someone you care about	1	2	9	
<b>IF YES to ANY Q64a-d ⇒Q65</b> <b>IF NO to ALL Q64a-d ⇒Q66</b>					

65	Has this [refer to the actions noted above] the happened in the past 12 months?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9							
66	The next questions are about things that happen to many women, and that your current partner may have done to you. Has your current husband/partner/boyfriend ever....	A. Did this ever happen?		B. IF YES: Has this happened in the past 12 months?		C. IF YES: In the past 12 months would you say that this has happened once, a few times or many times?			
		Yes	No	Yes	No	O	F	M	
a	Slapped you or thrown something at you that could hurt you?	1	2	1	2	1	2	3	
b	Pushed you or shoved you or pulled your hair?	1	2	1	2	1	2	3	
c	Hit you with his fist or with something else that could hurt you?	1	2	1	2	1	2	3	
d	Kicked you, dragged you or beaten you up?	1	2	1	2	1	2	3	
e	Choked or burnt you on purpose?	1	2	1	2	1	2	3	
f	Threatened with or actually used a gun, knife, or other weapon against you?	1	2	1	2	1	2	3	
67	The next questions are about things that happen to many women, and that your current partner may have done to you. Has your current husband/partner/boyfriend ever....	A. Did this ever happen?		B. IF YES: Has this happened in the past 12 months?		C. IF YES: In the past 12 months would you say that this has happened once, a few times or many times?			
		Yes	No	Yes	No	O	F	M	
a	Ever force you to have sexual intercourse when you did not want to, for example by threatening you or holding you down? IF NECESSARY: We define sexual intercourse as vaginal, oral or anal penetration.	1	2	1	2	1	2	3	
b	Ever have sexual intercourse you did not want to because you were afraid of what your partner or any other husband or partner might do if you refused? For example, because you were intimidated by him or afraid he would hurt you?	1	2	1	2	1	2	3	
c	Ever force you to do anything else sexual that you did not want or that you found degrading or humiliating?	1	2	1	2	1	2	3	
<b>IF HAD PHYSICAL OR SEXUAL VIOLENCE ⇒Q68</b> <b>IF NO PHYSICAL OR SEXUAL VIOLENCE ⇒Q72</b>									

68	Are there any particular situations that tend to lead to (or trigger) your husband/partner's behaviour? REFER TO ACTS OF VIOLENCE MENTIONED BEFORE. PROBE: Any other situation? MARK ALL MENTIONED	No particular reason.....1 When drunk.....2 Money problems.....3 Difficulties at work.....4 When he is unemployed.....5 No food at home.....6 Problems with his or her family.....7 She is pregnant.....8 He is jealous of her.....9 She refuses sex.....10 She is disobedient.....11 He wants to teach her a lesson.....12 He wants to show her he is boss.....13 Other (specify).....14 Don't know (do not read).....88 Refused to answer (do not read).....99			
69	Whom have you told about his behaviour? MARK ALL MENTIONED  PROBE: Anyone else?	No one.....1 Friends.....2 Mother.....3 Father.....4 Brothers or sisters.....5 Uncle or aunt.....6 Husband/Partner's family.....7 Children.....8 Neighbors.....9 Police.....10 Doctor/Health worker.....11 Priest/Religious leader.....12 Counsellor.....13 NGO/Women's Organization.....14 Community leader.....15  OTHER (specify):.....16 Don't know (do not read).....88 Refused to answer (do not read).....99			
70	Did you ever go to any of the following for help? READ EACH ONE	Yes	No	NR	
a	Police	1	2	9	
b	Hospital/Health Centre	1	2	9	
c	Legal advice center/lawyer/court	1	2	9	
d	Community leader	1	2	9	
e	Women's organization	1	2	9	
f	Priest/Religious leader	1	2	9	
g	Elsewhere (specify)	1	2	9	
71	In the last 12 months:	Yes	No	NR	
a	Has your husband/partner initiated a discussion with you about the violence?	1	2	9	
b	Has anyone else you know initiated a discussion with you about dealing with your husband/partner's violence?	1	2	9	
c	Have you become aware of legal action that you could take	1	2	9	

	to prevent violence against you and/or your children?				
72	Do you know of place a girl/woman could go for help if someone hit her?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	⇒Q74		
73	Where could a person go for help if this occurred?	Family.....1 Police.....2 Health Services.....3 Local leaders.....4 Women's Group.....5 School.....6 Friends.....7 Other.....8 Don't know (do not read).....88 Refused to answer (do not read).....99			
<b>Section 7: Other HH Experiences</b>					
74	Did you ever witness your father use violence against your mother as a child?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
75	Were you ever badly beaten by your parents as a child?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
76	Were you ever badly beaten by someone else as a child?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
<b>Section 8: Non partner assault</b>					
77	In the past 12 months, has any male person except any husband/male partner ever forced you into sexual intercourse when you did not want to, for example by threatening you, holding you down, or putting you in a situation where you could not say no.  Remember to include people you have known as well as strangers. Please at this point exclude attempts to force you. IF NECESSARY: We define sexual intercourse as penetration (when a man puts his penis, other body part, or an object inside) of a vagina, mouth or anus.	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
78	In the past 12 months, has a man who was not a husband or boyfriend ever forced you to have sex with when you were too drunk or drugged to refuse?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
79	In the past 12 months, have you been forced or persuaded to have sex against your will with more than one man at the same time?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			

<b>IF EXPERIENCE NON PARTNER ASSUALT Part A ⇒Q83</b> <b>IF DID NOT EXPERIENCE NON PARTNER ASSUALT ⇒Q80</b>			
80	Do you know of a place to go for help if someone has tried to have sex with a girl/woman when she did not want to?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	
81	Where could a person go for help if this occurred?	Family.....1 Police.....2 Health Services.....3 Local Leaders.....4 Women's Group.....5 School.....6 Friends.....7  OTHER (specify):.....8 Don't know (do not read).....88 Refused to answer (do not read).....99	
82	If someone tried to have sex with you when you didn't want it, would you be willing to report it? (Refer to groups noted above)	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	⇒Q87 ⇒Q87 ⇒Q87 ⇒Q87
83	Who did this to you [MENTION ACTS ABOVE]?  PROBE: Anyone else? How about a relative? How about someone at school or work? How about a friend or neighbor? A stranger or anyone else?	Parent.....1 Parent-in-law.....2 Sibling.....3 Other family member.....4 Someone at work.....5 Friend/Acquaintance.....6 Complete stranger.....7 Teacher.....8 Doctor/Health Staff.....9 Religious leader.....10 Police/soldier.....11  OTHER (specify):.....12 Don't know (do not read).....88 Refused to answer (do not read).....99	
I am now going to ask you about your most recent experience of forced sex.			
84	Did you tell anyone in your family about the incident? Anyone else, such as a friend or neighbour?	No one.....1 Friends.....2 Mother.....3 Father.....4 Brothers or sisters.....5 Uncle or aunt.....6 Husband/Partner's family.....7 Children.....8 Neighbors.....9 Police.....10 Doctor/Health worker.....11 Priest/Religious leader.....12 Counsellor.....13 NGO/Women's Organization.....14 Community leader.....15	



		OTHER (specify):.....16 Don't know (do not read).....88 Refused to answer (do not read).....99			
85	How did they respond? Anything else?  <i>Multiple Response Allowed</i>	Blamed me for it.....1 Supported me.....2 Were indifferent.....3 Told me to keep it quiet.....4 Advised me to report it to police.....5  OTHER (specify):.....6 Don't know (do not read).....88 Refused to answer (do not read).....99			
86	Did you ever go to any of the following for help? READ EACH ONE	Yes	No	NR	
a	Police	1	2	9	
b	Hospital/Health Centre	1	2	9	
c	Legal advice center/lawyer/court	1	2	9	
d	Community leader	1	2	9	
e	Women's organization	1	2	9	
f	Priest/Religious leader	1	2	9	
g	Elsewhere (specify)	1	2	9	
87	Again, I want you to think about any male person. FOR WOMEN WHO EVER HAD A PARTNER ADD: except your husband/male partner. Apart from anything you may have mentioned, can you tell me if, in the past 12 months, any male person has done the following to you? Remember to include people you have known as well as strangers.	Yes	No	NR	
a	Attempted but NOT succeeded to force you into sexual intercourse when you did not want to, for example by holding you down or putting you in a situation where you could not say no?	1	2	9	
b	Touched you sexually when you did not want them to. This includes for example touching of breasts or private parts?	1	2	9	
c	Made you touch their private parts against your will?	1	2	9	
<b>IF EXPERIENCE NON PARTNER ASSUALT Part B⇒Q88</b> <b>IF DID NOT EXPERIENCE NON PARTNER ASSUALT ⇒Q89</b>					
88	Who did this to you [MENTION ACTS ABOVE]?	Parent.....1 Parent-in-law.....2 Sibling.....3			

	<p>PROBE: Anyone else? How about a relative? How about someone at school or work? How about a friend or neighbor? A stranger or anyone else?</p>	<p>Other family member.....4  Someone at work.....5  Friend/Acquaintance.....6  Complete stranger.....7  Teacher.....8  Doctor/Health Staff.....9  Religious leader.....10  Police/soldier.....11</p> <p>OTHER (specify):.....12  Don't know (do not read).....88  Refused to answer (do not read).....99</p>			
89	<p>Now, I want you to think about any male or female person. FOR WOMEN WHO EVER HAD A PARTNER ADD: except your husband/male partner.</p> <p>Apart from anything you may have mentioned, can you tell me if, in the past 12 months, any person has done the following to you?</p>	Yes	No	NR	
a	Asked you to perform sexual acts against your will in order to get a job or keep your job, or to get promoted?	1	2	3	
b	Asked you to perform sexual acts against your will in order to pass an exam or get good grades at school?	1	2	3	
c	Groped, sexually touched or had someone rubbing against you in the bus or another public space?	1	2	3	
d	Sent you personal electronic messages with sexual content (e.g. remarks, invitations, pictures) that were hurtful to you or made you feel uncomfortable? For example, via Facebook, Tinder, cell phone, e-mail, excluding spam	1	2	3	
90	<p>Who did this to you [MENTION ACTS ABOVE]?</p> <p>PROBE: Anyone else? How about a relative? How about someone at school or work? How about a friend or neighbor? A stranger or anyone else?</p>	<p>Parent.....1  Parent-in-law.....2  Sibling.....3  Other family member.....4  Someone at work.....5  Friend/Acquaintance.....6  Complete stranger.....7  Teacher.....8  Doctor/Health Staff.....9  Religious leader.....10  Police/soldier.....11</p>			

		OTHER (specify):_____12 Don't know (do not read).....88 Refused to answer (do not read).....99					
<b>Section 9: Behavior</b>							
91	If you disregard the help you receive from others, how do you divide the following tasks:	Women/ girls	Men/ boys	Both	NR		
a	Washing clothes	1	2	3	9		
b	Preparing food	1	2	3	9		
c	Daily care of child/children	1	2	3	9		
92	Most of the time in your household:	Women/ girls	Men/ boys	Both	NR		
	Who spends more time on household chores?	1	2	3	9		
93	In the past 12 months, have you talked to any of the following people about violence against women and girls?	Yes	No	NR			
a	Your family	1	2	9			
b	Your friends	1	2	9			
c	Someone you did not know	1	2	9			
94	In the past 12 months, have you provided support to anyone experiencing or perpetrating partner violence?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9					
95	In the past 12 months, to what extent have you felt able to:	Very able	Somewhat able	Not very able	Not at all able	NR	
a	Support a woman experiencing violence to make her own decisions about safety	4	3	2	1	9	
b	Tell men using violence that it is not okay	4	3	2	1	9	
c	Spoken out in your community about violence	4	3	2	1	9	
d	Take action to prevent violence against women and girls in the community	4	3	2	1	9	
<b>IF EVER PARTNERED⇒Q96</b> <b>IF NEVER PARTNERED⇒Section 10</b>							

96	In general, do (did) you and your (current or most recent) husband/partner/boyfriend discuss the following topics together:	Yes	No	NR		
a	Things that have happened to him in the day	1	2	9		
b	Things that happen to you during the day	1	2	9		
c	Your worries or feelings	1	2	9		
d	His worries or feelings	1	2	9		
97	Who in your family or relationship usually has the final say in how you spend money on:					
a	Food and clothing	Yourself.....1 Partner/Husband.....2 You and partner/husband jointly.....3 Someone else.....4 You and someone else jointly.....5 NA.....9				
b	Regarding spending time with family, friends or relatives	Yourself.....1 Partner/Husband.....2 You and partner/husband jointly.....3 Someone else.....4 You and someone else jointly.....5 NA.....9				
NOW, IF IT IS OKAY WITH YOU, I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT HOW YOU FEEL (FELT) IN YOUR RELATIONSHIP WITH YOUR HUSBAND/PARTNER/MOST RECENT PARTNER.						
98	In the last 12 months (last 12 months of your most recent relationship), have you felt/did you feel:	Yes	No	NR		
a	Emotionally close to your partner?	1	2	9		
b	Valued by your husband/partner/most recent partner?	1	2	9		
c	Respected by your husband/partner/most recent partner?	1	2	9		
99	In the past 12 months, how often have you felt:	Often	Sometimes	Rarely	Never	NR
a	safe from violence in your relationship	4	3	2	1	9
b	confident in your ability to discuss issues of equality with your partner	4	3	2	1	9
<b>Section 10: Empowerment and Sense of Safety</b>						
<b>IF FEMALE AGED 15-19⇒Q100</b>						

IF OTHER⇒Section 11					
100	How confident do you feel in your ability to make decisions that would improve your life?	Very Confident.....1 Somewhat Confident.....2 Not Very Confident.....3 Not All Confident.....4 Don't know (do not read).....8 Refused to answer (do not read).....9			
101	Do you agree or disagree with the following statements:	Agree	Disagree	NR	
a	I can choose how I spend my free time	1	2	9	
b	I can choose who I want to be friends with	1	2	9	
c	I can choose to participate in clubs, sports, other activities that interest me	1	2	9	
102	How confident do you feel in your ability to make decisions that would improve your life?	Very Confident.....1 Somewhat Confident.....2 Not Very Confident.....3 Not All Confident.....4 Don't know (do not read).....8 Refused to answer (do not read).....9			
103	Do you have any female friends your own age outside your family?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
104	Apart from someone in your family, do you have a female figure in your community you can go to with your problems on a regular basis?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9			
105	Most of the time, do you:	Yes	No	NR	
a	Feel safe at home	1	2	9	
b	Feel safe at school	1	2	9	
c	Feel safe at your friend's homes	1	2	9	
d	Feel safe walking in your community	1	2	9	
<b>Section 11: Awareness</b>					
106	In the past 12 months, have you heard about ways to promote equality between men and women in your community? IF YES, from whom/what source?	No one.....1 A neighbor/other community member.....2 Religious leader.....3 Health care provider.....4 Local government.....5 Police.....6 Radio.....7 Television.....8 Newspaper.....9 Don't know (do not read).....88 Refused to answer (do not read).....99			
107	In the past 12 months, have you heard about ways to reduce violence between men	No one.....1 A neighbor/other community member.....2 Religious leader.....3			

	and women in your community? IF YES, from whom/what source?	Health care provider.....4 Local government.....5 Police.....6 Radio.....7 Television.....8 Newspaper.....9 Don't know (do not read).....88 Refused to answer (do not read).....99	
--	---	---	--

**Rethinking Power Evaluation**

**Baseline Survey – Male**

*George Washington University and Beyond Borders*

**Administration Form**

<b>ID Number:</b>		

**Interviewer Visits**

		<b>Visit 1</b>	<b>Visit 2</b>	<b>Visit 3</b>
--	--	----------------	----------------	----------------

	<b>Result:</b>				
<b>Data Collector Name:</b>					
<b>Result:</b>					
<b>Final Visit Result:</b>					
	<b>Result Codes</b>				
<b>QUESTIONNAIRES COMPLETED?</b>	Refused (specify): _____	11			
	Dwelling vacant or address not a dwelling	12			
[ ] 1. None completed ⇒	Dwelling destroyed	13			
	Dwelling not found, not accessible	14			
	Entire HH absent for extended period	15			
	No HH member at home at time of visit	16⇒Need to return			
	HH respondent postponed interview	17⇒Need to return			
	Entire HH speaking only foreign language	18			
[ ] 2. HH selection form (and in most cases HH questionnaire) only ⇒	Selected man refused (specify): _____	21			
	No eligible man in household	22			
	Selected man not at home	23⇒Need to return			
	Selected man postponed interview	24⇒Need to return			
	Selected man incapacitated	25			
	Selected man speaks foreign language	26			
	Selected man does not want to complete due to fear of harm for participating	27			
[ ] 3. Man's questionnaire partly completed⇒	Does not want to continue (specify) : _____	31			
	Rest of interview postponed to next visit	32⇒Need to return			
<b>IF MORE THAN ONE HH IN SELECTED DWELLING: FILL OUT SEPERATE HH SELECTION FORM FOR EACH ONE</b>					
<b>Household Selection Form</b>					
Hello, my name is _____. I am visiting your household on behalf of the George Washington University. We are conducting a survey in Haiti to learn about the lives of people in your community.					
A.	Please can you tell me how many people live here, and share food?  PROBE: Does this include children (including infants) living here? Does it include any other people who may not be members of your family, such as domestic servants, lodgers or friends who live here and share food? MAKE SURE THESE PEOPLE ARE INCLUDED IN THE TOTAL		TOTAL NUMBER OF PEOPLE IN HOUSEHOLD [ ] [ ]		
B.	Is the head of the household male or female?		MALE ..... 1 FEMALE ..... 2 BOTH		
	MALE HOUSEHOLD MEMBERS	RELATIONSHIP TO HEAD OF HH	RESIDENCE	AGE	ELIGIBLE
C.	Today we would like to talk to one man or boy from your household. Would you please give me the initials of all men or boys who usually live in your household (and share food).	What is the relationship of this person to the head of the household.* (USE CODES BELOW)	Does this person usually live here? SPECIAL CASES: SEE (A) BELOW. YES NO	How old is this person?	SEE CRITERIA BELOW (A +B)  YES NO



1			1 2		1 2
2			1 2		1 2
3			1 2		1 2
4			1 2		1 2
5			1 2		1 2
6			1 2		1 2
7			1 2		1 2
8			1 2		1 2
9			1 2		1 2
10			1 2		1 2
CODES	06 FATHER	12 DOMESTIC SERVANT			
05 HEAD	07 FATHER-IN-LAW	13 LODGER			
06 HUSBAND	08 BROTHER	14 FRIEND			
(PARTNER)	09 BROTHER-IN-LAW	15 OTHER NOT RELATIVE:			
07 SON	10 OTHER RELATIVE				
08 SON-IN-LAW	11 ADOPTED/FOSTER/STEP SON				
05 GRANDSON					

**(A) SPECIAL CASES TO BE CONSIDERED MEMBER OF HOUSEHOLD:**

- DOMESTIC SERVANTS IF THEY SLEEP 5 NIGHTS A WEEK OR MORE IN THE HOUSEHOLD.
- VISITORS IF THEY HAVE SLEPT IN THE HOUSEHOLD FOR THE PAST 4 WEEKS.

**(B) ELIGIBLE: ANY MAN BETWEEN 15 AND 64 YEARS LIVING IN HOUSEHOLD.**

**MORE THAN ONE ELIGIBLE MEN IN HH:**

- **RANDOMLY SELECT ONE ELIGIBLE MAN FOR INTERVIEW.** TO DO THIS, WRITE THE LINE NUMBERS OF ELIGIBLE MEN ON PIECES OF PAPER, AND PUT IN A BAG. ASK A HOUSEHOLD MEMBER TO PICK OUT A NUMBER – SO SELECTING THE PERSON TO BE INTERVIEWED.  
[OPTIONAL: USE KISH TABLE]
- **PUT CIRCLE AROUND LINE NUMBER OF MAN SELECTED.** ASK IF YOU CAN TALK WITH THE SELECTED MAN. IF HE IS NOT AT HOME, AGREE ON DATE FOR RETURN VISIT.
- **CONTINUE WITH HOUSEHOLD QUESTIONNAIRE**

**NO ELIGIBLE MAN IN HH:**  
**SAY “I cannot continue because I can only interview men 15-64 years old. Thank you for your assistance.”**  
**FINISH HERE.**

**DATE OF INTERVIEW: day [ ][ ] month [ ][ ] year [ ][ ][ ][ ]**

**Section 1: Demographics and Socio-economics**

1.	How old are you?	ENTER NUMBER [ ][ ]	
		Don't know (do not read).....888	
		Refused to answer (do not read).....999	
2.	Can you read and write?	Yes.....1	
		No.....2	
		Don't know (do not read).....8	
		Refused to answer (do not read).....9	
3.	Have you ever attended school?	Yes.....1	<b>⇒Q5</b>
		No.....2	
		Don't know (do not read).....8	
		Refused to answer (do not read).....9	
4.	What is the highest level of education that you have achieved?	Primary.....1	
		Secondary.....2	
		Higher Level.....3	
		Don't know (do not read).....8	
		Refused to answer (do not read).....9	
5.	What do you do mainly for work?	Not working.....1	
		Professional/Technical/Managerial.....2	
		Clerical.....3	
		Sales and services.....4	
		Skilled manual.....5	

		Unskilled manual.....6 Domestic service.....7 Agriculture.....8 Fishing.....9 Other (Please specify).....10 Don't know (do not read).....88 Refused to answer (do not read).....99	
6.	What is the main source of income for you and your household?	No income.....1 Money from own work.....2 Support from husband/partner.....3 Support from other relatives.....4 Pension.....5 Social Services/Welfare.....6 Support from parents.....7 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99	
7a.	What is your main source of fuel for cooking?	Wood.....1 Grass/leaves.....2 Charcoal.....3 Kerosene/paraffin.....4 Animal dung.....5 Gas.....6 Electricity.....7 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99	
7b	What are the main material used in the roof?	Roof from natural materials.....1 Rudimentary materials (plastic/carton/tarp).....2 Tiled or concrete roof.....3 Corrugated iron.....4 Tent.....5 Other (Please specify).....6 Don't know (do not read).....8 Refused to answer (do not read).....9	
8	Are you currently married or living together with a woman as if married?	Yes, currently married.....1 Yes, living with a woman.....2 No, don't have wife or regular partner.....3 Refused to answer (do not read).....9	⇒Q12 ⇒Q12
9	Are you currently involved in a relationship with a woman without living together (a girlfriend or partner)?	Yes, involved with a woman without living together.....1 No, don't have a girlfriend or partner...2 Refused to answer (do not read).....9	⇒Q12
10	In the past 12 months, have you been married or lived with a woman as if married?	Yes, was married.....1 Yes, was living with a woman.....2 No, did not have wife or regular partner or girlfriend.....3 Refused to answer (do not read).....9	⇒Q12 ⇒Q12
11	In the past 12 months, have you been involved in a relationship with a woman without living together (a boyfriend or partner)?	Yes, was involved with a woman without living together.....1 No, did not have a girlfriend or partner.2 Refused to answer (do not read).....9	⇒Q13 ⇒Q13
12	How old were you the first time you got married/lived with a woman?	ENTER NUMBER [ ] [ ]  Don't know (do not read).....888 Refused to answer (do not read).....999	⇒Q13

12a	What was your approximate age?	<15.....1 15-19.....2 20-24.....3 25-29.....4 30-34.....5 35-39.....6 40-44.....7 45-49.....8 50-54.....9 55-56.....10  Don't know (do not read).....88 Refused to answer (do not read).....99				
13	Do any of your birth family live close enough by that you can easily see/visit them?	Yes.....1 No.....2 Living with family of birth.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
14	When you need help or have a problem, can you usually count on members of your family for support?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
<b>Section 2: Children and SRH</b>						
15	How many children do you have, including all children who live in your household (wards, dependents), who are alive now?	ENTER NUMBER [ ][ ]  No Children.....777 Don't know (do not read).....888 Refused to answer (do not read).....999				⇒Section 3
16	How many of those children are boys?	ENTER NUMBER [ ][ ]  No Boys.....777 Don't know (do not read).....888 Refused to answer (do not read).....999				
17	How many of those children are girls?	ENTER NUMBER [ ][ ]  No Girls.....777 Don't know (do not read).....888 Refused to answer (do not read).....999				⇒Q22
18a	How old is your youngest daughter?	ENTER NUMBER [ ][ ]  No Girls.....777 Don't know (do not read).....888 Refused to answer (do not read).....999				
18b	How old is your oldest daughter?	ENTER NUMBER [ ][ ]  No Girls.....777 Don't know (do not read).....888 Refused to answer (do not read).....999				
<b>IF HAS DAUGHTER/WARD BETWEEN AGE OF 10-19 ⇒ Q19</b>  <b>IF NO DAUGHTER/WARDS BETWEEN AGE OF 10-19 ⇒ Filter for Q20</b>						
19	Are you comfortable or uncomfortable talking about the following with your daughter/wards:	Comfortable	Not Comfortable	Don't Know	NR	
a	their education	1	2	7	8	
b	what happens to kids as they grow up (puberty)	1	2	7	8	
c	sex	1	2	7	8	

d	how to avoid getting pregnant	1	2	7	8	
e	HIV	1	2	7	8	
f	violence	1	2	7	8	
<b>IF HAS DAUGHTER/WARD ⇒ Q20</b>						
<b>IF NO DAUGHTER/WARDS ⇒ Filter for Q24</b>						
20	What do you do if your daughters misbehave?  <i>Multiple Responses Allowed</i>	Talk to them.....1 Shout at them.....2 Spank them.....3 Hit them.....4 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99				
21	What does your wife do if your girls misbehave?  <i>Multiple Responses Allowed</i>	Talk to them.....1 Shout at them.....2 Spank them.....3 Hit them.....4 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99				
22	What do you do if your sons misbehave?  <i>Multiple Responses Allowed</i>	Talk to them.....1 Shout at them.....2 Spank them.....3 Hit them.....4 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99				
23	What does your wife do if your boys misbehave?  <i>Multiple Responses Allowed</i>	Talk to them.....1 Shout at them.....2 Spank them.....3 Hit them.....4 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99				
<b>Section 3: HIV</b>						
<b>IF ever partnered ⇒ Continue with Section 3</b>						
<b>IF never partnered ⇒ Skip to Section 4</b>						
HIV/AIDS IS A PROBLEM IN OUR COMMUNITIES. WE WOULD LIKE TO UNDERSTAND MORE ABOUT HOW HOUSEHOLDS LIKE YOURS ARE COPING WITH THE EPIDEMIC.						
24	In the last 12 months (last 12 months of your most recent relationship), do (did) you and your wife/ partner/ most recent partner discuss the following topics together?	Yes	No	NR		
a	condom use	1	2	9		
b	fidelity	1	2	9		
c	partner violence	1	2	9		
d	HIV/AIDS	1	2	9		
e	your risk for HIV	1	2	9		
f	how to protect your family from HIV infection	1	2	9		
g	getting tested for HIV	1	2	9		

25	I don't need to know the results, but have you ever been tested for HIV?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	⇒Q27 ⇒Q27			
26	I don't need to know the results, but have you been tested for HIV in the last 12 months?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
27	Has your wife/ partner/ most recent partner ever been tested for HIV?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	⇒Q29 ⇒Q29			
28	Has (was) your wife/ partner/ most recent partner been tested for HIV in the last 12 months?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
Thinking about your wife/ partner / most recent partner:						
29	Have (did) you use(d) a condom in the last 12 months (last 12 months of your most recent relationship)?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	⇒Q31			
30	If not, why not?	Wanted to have a child.....1 Didn't have a condom.....2 Man didn't want to use.....3 Woman didn't want to use.....4 Was in a monogamous relationship.....5 Don't know (do not read).....8 Refused to answer (do not read).....9				
31	As far as you know, has your wife/partner/ most recent partner had a sexual relationship with any other women in the last 12 months (last 12 months of your most recent relationship), while being with you?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
32	Have you had a sexual relationship with any other woman in the last 12 months (last 12 months of your most recent relationship), while being with your wife/ partner/ most recent partner?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
IF YES to either Q31 or Q32 ⇒Q33 IF No to both Q31 and Q32 ⇒Section 4						
33	Did you use a condom the last time that you had sex?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
<b>Section 4: Knowledge and Attitudes</b>						
34	Do you agree or disagree with the following statements:	Agree	Disagree	DK	NR	
a	Changing diapers, giving a bath and feeding kids is mainly the mother's responsibility	1	2	8	9	
b	A woman's role is taking care of her home and family	1	2	8	9	

c	A man should have the final word about decisions in his home	1	2	8	9		
d	Women and men should share authority in the family	1	2	8	9		
35	Do you agree or disagree with the following statements:	Agree	Disagree	DK	NR		
a	Boys should spend as much time as girls doing household chores	1	2	8	9		
b	Girls should be allowed to socialize outside the home just as boys do	1	2	8	9		
c	Boys have more of a need to go to school than girls do	1	2	8	9		
d	Girls should be allowed to choose when to get married	1	2	8	9		
36	Do you agree or disagree with the following statements:	Agree	Disagree	DK	NR		
a	Violence between husband and wife is a private matter and others should not intervene	1	2	8	9		
b	A woman should tolerate violence to keep her family together	1	2	8	9		
c	If a woman is raped, she usually did something careless to put herself in this situation	1	2	8	9		
d	It is the entire community's responsibility to prevent men from beating their wives	1	2	8	9		
37	Do you think it is violence if:	Yes	No	DK	NR		
a	A man insults his wife/girlfriend or makes her feel bad about herself	1	2	8	9		
b	A man humiliates his wife/girlfriend in front of other people	1	2	8	9		
c	A man pushes or slaps his wife/girlfriend	1	2	8	9		
d	A man takes his wife/girlfriend's money against her will	1	2	8	9		
38	What are some of the consequences for a woman or girl who experiences violence in her home?  <i>Multiple Responses Allowed</i>	Injury.....1 Death.....2 HIV/STI.....3 Drop out of school.....4 Pregnancy.....5 Early/Forced marriage.....6 Psychosocial distress.....7 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99					
39	Are women who experience violence from a partner at higher risk of HIV infection	Yes.....1 No.....2 Don't know (do not read).....8					

	than those who do not experience violence?	Refused to answer (do not read).....9				
40	In your opinion, can a woman refuse to have sex with her partner if:	Yes	No	DK	NR	
a	She doesn't want to	1	2	8	9	
b	He is drunk	1	2	8	9	
c	She suspects he is unfaithful	1	2	8	9	
d	She knows/suspects he is HIV positive	1	2	8	9	
e	He refuses to use a condom	1	2	8	9	
41	In your opinion, is a husband justified in hitting or beating his wife or girlfriend in the following situations:	Yes	No	DK	NR	
a	If she goes out without telling him?	1	2	8	9	
b	If she neglects the children?	1	2	8	9	
c	If she argues with him?	1	2	8	9	
d	If she refuses to have sex with him?	1	2	8	9	
e	If he suspects she is having an affair with another man	1	2	8	9	
<b>Section 5: Gender Norms - Empirical and Normative expectations</b>						
43	In your community, do most women/girls take primary responsibility for chores (taking care of the children, washing dishes, cleaning clothes) in their household?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
44	In your opinion, in your community are:	Most women are beaten by their husbands...1 Some women are beaten by their husbands...2 Few women are beaten by their husbands.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
45	If a man in this community helped around the house with household chores such as taking care of children, washing dishes or cleaning clothes, do you think most people in your community would:	Approve of his action.....1 Disapprove of his action.....2 Think it is none of their business.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
46	If a man in this community beat his wife because she disobeyed him, do you think most of people in your community would:	Approve of his action.....1 Disapprove of his action.....2 Think it is none of their business.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
47	Do you agree or disagree with the following statement:	Agree	Disagree	DK	NR	
a	If a man does household chores (eg. taking care of the children, washing dishes, cleaning clothes) other men in the community will think that he is less of a man	1	2	8	9	

b	If a husband does not beat his wife when she disobeys him, other men in the community will think less of him	1	2	8	9	
<b>Section 6: Intimate Partner Experiences</b>						
<b>IF ever partnered ⇒ Continue with Section 3</b> <b>IF never partnered ⇒ Skip to Section 4</b>						
48	I would now like you to tell me a little about your current/most recent wife/partner. How old is she now? [IF EXACT AGE IS NOT KNOWN, ESTIMATE. IF MOST RECENT PARTNER IS DEAD ENTER THE AGE THAT HE WOULD BE NOW IF HE WERE ALIVE]	ENTER NUMBER [ ] [ ]  Don't know (do not read).....888 Refused to answer (do not read).....999				⇒Q49
48a	Is (was) your wife/partner/most recent partner older, younger, or the same age as you?	Older.....1 Younger.....2 Same age.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
49	Can she read and write?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
50	Did she ever attend school?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				⇒Q52
51	What is the highest level of education that she achieved?	Primary.....1 Secondary.....2 Higher Level.....3 Don't know (do not read).....8 Refused to answer (do not read).....9				
52	Is she now (or was she at the end of your relationship) working, looking for work or unemployed, retired, or studying?	Not working.....1 Professional/Technical/Managerial.....2 Clerical.....3 Sales and services.....4 Skilled manual.....5 Unskilled manual.....6 Domestic service.....7 Agriculture.....8 Fishing.....9 Other (Please specify).....10 Don't know (do not read).....88 Refused to answer (do not read).....99				
53	What kind of work does she normally do?	No income.....1 Money from own work.....2 Support from husband/partner.....3 Support from other relatives.....4 Pension.....5 Social Services/Welfare.....6 Support from parents.....7 Other (Please specify).....8 Don't know (do not read).....88 Refused to answer (do not read).....99				
58	Has your current/most recent partner had a relationship with	Yes.....1 No.....2				



	any other men while being with you?	Don't know (do not read).....8 Refused to answer (do not read).....9	
59	As far as you know, was your most recent wife/partner herself hit or beaten regularly by someone in his family, when she was a child?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	
<p>When two people marry or live together, they usually share both good and bad moments. I would now like to ask you some questions about how you treat your current (or most recent) wife/partner. I understand that the things that we will discuss may be quite difficult for you to talk about. If it gets too difficult or you seem to be experiencing significant distress, we will stop the interview. You will also be provided with referrals for counseling after our interview. If you do not understand a question, please ask me to explain it to you. If you do not want to answer a question, please let me know and we will skip the question and go to the next question, or you can decide you want to stop participating at any time. If anyone interrupts us, I will change the topic of conversation. If we cannot guarantee privacy, I will stop the interview. Do you wish to continue with the interview?</p>			
60	I am now going to ask you about some situations that are true for many men. Do you generally do any of the following [to your current or most recent partner/wife]:	Yes      No      NR	
a	Do not permit your wife to meet her female friends?	1      2      9	
b	Try to limit her contact with her family?	1      2      9	
c	Insist on knowing where she is at all times?	1      2      9	
d	Get jealous or angry if she talks to another man?	1      2      9	
e	Frequently accuse her of being unfaithful?	1      2      9	
f	Expect her to ask permission before seeking health care	1      2      9	
g	Do not trust her any money	1      2      9	
h	Check her cell phone logs to see who she has called/who has called her	1      2      9	
<p><b>IF YES to ANY Q60a-h ⇒Q61</b>  <b>IF NO to ALL Q60a-h ⇒Q62</b></p>			
61	Has this [refer to the actions noted above] the happened in the past 12 months?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	
62	Do you ever do any of the following [to your current or most recent partner/wife]:	Yes      No      NR	
a	Prohibit her from getting a job, going to work, trading, earning money or participating in income generating projects	1      2      9	
b	Take her earnings from her against her will	1      2      9	
c	Refuse to give her money she needed for household expenses even when you have money for other things	1      2      9	
<b>IF YES to ANY Q62a-c ⇒Q63</b>			

<b>IF NO to ALL Q62a-c ⇒ Q64</b>									
63	Has this [refer to the actions noted above] the happened in the past 12 months?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9							
64	The next questions are about things that happen to many people and that <u>you may have done</u> to your most recent/current wife/partner(s).	Yes	No	NR					
a	Insulted her or made her feel bad about herself?	1	2	9					
b	Belittled or humiliated her in front of other people?	1	2	9					
c	Done things to scare or intimidate her on purpose?	1	2	9					
d	Verbally threatened to hurt her or someone she cares about	1	2	9					
<b>IF YES to ANY Q64a-d ⇒ Q65</b> <b>IF NO to ALL Q64a-d ⇒ Q66</b>									
65	Has this [refer to the actions noted above] the happened in the past 12 months?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9							
66	The next questions are about things that happen to many people. Now I will ask a few more questions about things <u>you may have done</u> to your most recent wife/partner. Have you ever....	A. Did this ever happen?		B. IF YES: Has this happened in the past 12 months?		C. IF YES: In the past 12 months would you say that this has happened once, a few times or many times?			
		Yes	No	Yes	No	O	F	M	
a	Slapped her or thrown something at her that could hurt her?	1	2	1	2	1	2	3	
b	Pushed her or shoved her or pulled her hair?	1	2	1	2	1	2	3	
c	Hit her with your fist or with something else that could hurt her?	1	2	1	2	1	2	3	
d	Kicked her, dragged her or beat her up?	1	2	1	2	1	2	3	
e	Choked or burnt her on purpose?	1	2	1	2	1	2	3	
f	Threatened with or actually used a gun, knife, or other weapon against her?	1	2	1	2	1	2	3	
67	Now I will ask a few more questions about things <u>you may have done</u> to your most recent wife/partner. Have you ever....	A. Did this ever happen?		B. IF YES: Has this happened in the past 12 months?		C. IF YES: In the past 12 months would you say that this has happened once, a few times or many times?			

		Yes	No	Yes	No	O	F	M	
a	Did you ever force her to have sexual intercourse when she did not want to, for example by threatening her or holding her down? IF NECESSARY: We define sexual intercourse as vaginal, oral or anal penetration	1	2	1	2	1	2	3	
b	Did you ever have sexual intercourse when she did not want to, but she may have been afraid of what you might do if she refused? For example, because you intimidated her or threatened to hurt her.	1	2	1	2	1	2	3	
c	Did you ever force her to do anything else sexual that she did not want or that she may have found degrading or humiliating?	1	2	1	2	1	2	3	
<b>IF HAD PHYSICAL OR SEXUAL VIOLENCE ⇒Q68</b> <b>IF NO PHYSICAL OR SEXUAL VIOLENCE ⇒Q72</b>									
68	Are there any particular situations that tend to lead to (or trigger) your behaviour? REFER TO ACTS OF VIOLENCE MENTIONED BEFORE. PROBE: Any other situation? MARK ALL MENTIONED	No particular reason.....1 When drunk.....2 Money problems.....3 Difficulties at work.....4 When he is unemployed.....5 No food at home.....6 Problems with his or her family.....7 She is pregnant.....8 He is jealous of her.....9 She refuses sex.....10 She is disobedient.....11 He wants to teach her a lesson.....12 He wants to show her he is boss.....13 Other (specify).....14 Don't know (do not read).....88 Refused to answer (do not read).....99							
71	In the last 12 months:	Yes	No	NR					
a	Has your wife/partner initiated a discussion with you about the violence?	1	2	9					
b	Has anyone else you know initiated a discussion with you about dealing with the violence?	1	2	9					
72	Do you know of place a girl/woman could go for help if someone hit her?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9							⇒Q74
73	Where could a person go for help if this occurred?	Family.....1 Police.....2 Health Services.....3 Local leaders.....4 Women's Group.....5 School.....6 Friends.....7							

		Other.....8 Don't know (do not read).....88 Refused to answer (do not read).....99	
<b>Section 7: Other HH Experiences</b>			
74	Did you ever witness your father use violence against your mother as a child?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	
75	Were you ever badly beaten by your parents as a child?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	
76	Were you ever badly beaten by someone else as a child?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	
<b>Section 8: Non partner assault</b>			
77	In the past 12 months, have you forced anyone [except your wife/partner] into sexual intercourse when they did not want to, for example by threatening them, holding them down, or putting them in a situation where you could not say no.  Remember to include people you have known as well as strangers. Please at this point exclude attempts to force someone.  IF NECESSARY: We define sexual intercourse as penetration (when a man puts his penis, other body part, or an object inside) of a vagina, mouth or anus.	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	
78	In the past 12 months, you forced anyone [except your wife/partner] to have sex when they were too drunk or drugged to refuse?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	
79	In the past 12 months, have you forced or persuaded a woman [except your wife/partner] to have sex against her will with more than one man at the same time?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	
80	Do you know of a place to go for help if someone has tried to have sex with a girl/woman when she did not want to?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9	
81	Where could a person go for help if this occurred?	Family.....1 Police.....2 Health Services.....3 Local Leaders.....4 Women's Group.....5 School.....6 Friends.....7	

		OTHER (specify):_____8 Don't know (do not read).....88 Refused to answer (do not read).....99			
87	Again, I want you to think about any female person. FOR MEN WHO EVER HAD A PARTNER ADD: except your wife/female partner. Apart from anything you may have mentioned, can you tell me if, in the past 12 months, you have done the following? Remember to include people you have known as well as strangers.	Yes	No	NR	
a	Attempted but NOT succeeded to force a woman into sexual intercourse when she did not want to, for example by holding her down or putting her in a situation where she could not say no?	1	2	9	
b	Touched a woman sexually when she did not want them to. This includes for example touching of breasts or private parts?	1	2	9	
c	Made a woman touch their private parts against her will?	1	2	9	
89	Now, I want you to think about any female person.  FOR MEN WHO EVER HAD A PARTNER ADD: except your wife/female partner.  Apart from anything you may have mentioned, can you tell me if, in the past 12 months, you have done the following?	Yes	No	NR	
a	Asked a woman to perform sexual acts against her will in order to get a job or keep job, or to get promoted?	1	2	3	
b	Asked a woman to perform sexual acts against her will in order to pass an exam or get good grades at school?	1	2	3	
c	Groped, sexually touched or rubbed against a woman in the bus or another public space?	1	2	3	

d	Sent personal electronic messages with sexual content (e.g. remarks, invitations, pictures). For example, via Facebook, Tinder, cell phone, e-mail, excluding spam	1	2	3		
<b>Section 9: Behavior</b>						
91	If you disregard the help you receive from others, how do you divide the following tasks:	Women/ girls	Men/ boys	Both	NR	
a	Washing clothes	1	2	3	9	
b	Preparing food	1	2	3	9	
c	Daily care of child/children	1	2	3	9	
92	Most of the time in your household:	Women/ girls	Men/ boys	Both	NR	
	Who spends more time on household chores?	1	2	3	9	
93	In the past 12 months, have you talked to any of the following people about violence against women and girls?	Yes	No	NR		
a	Your family	1	2	9		
b	Your friends	1	2	9		
c	Someone you did not know	1	2	9		
94	In the past 12 months, have you provided support to anyone experiencing or perpetrating partner violence?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
95	In the past 12 months, to what extent have you felt able to:	Very able	Somewhat able	Not very able	Not at all able	NR
a	Support a woman experiencing violence to make her own decisions about safety	4	3	2	1	9
b	Tell men using violence that it is not okay	4	3	2	1	9
c	Spoken out in your community about violence	4	3	2	1	9
d	Take action to prevent violence against women and girls in the community	4	3	2	1	9

IF EVER PARTNERED⇒Q96						
IF NEVER PARTNERED⇒Section 10						
96	In general, do (did) you and your (current or most recent) wife/partner/girlfriend discuss the following topics together:	Yes	No	NR		
a	Things that have happened to him in the day	1	2	9		
b	Things that happen to you during the day	1	2	9		
c	Your worries or feelings	1	2	9		
d	His worries or feelings	1	2	9		
97	Who in your family or relationship usually has the final say in how you spend money on:					
a	Food and clothing	Yourself.....1 Partner/Wife.....2 You and partner/wife jointly.....3 Someone else.....4 You and someone else jointly.....5 NA.....9				
b	Regarding spending time with family, friends or relatives	Yourself.....1 Partner/Wife.....2 You and partner/wife jointly.....3 Someone else.....4 You and someone else jointly.....5 NA.....9				
NOW, IF IT IS OKAY WITH YOU, I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT HOW YOU FEEL (FELT) IN YOUR RELATIONSHIP WITH YOUR WIFE/PARTNER/MOST RECENT PARTNER.						
98	In the last 12 months (last 12 months of your most recent relationship), have you felt/did you feel:	Yes	No	NR		
a	Emotionally close to your partner?	1	2	9		
b	Valued by your wife/partner/most recent partner?	1	2	9		
c	Respected by your wife/partner/most recent partner?	1	2	9		
99	In the past 12 months, how often have you felt:	Often	Sometimes	Rarely	Never	NR
a	confident in your ability to discuss issues of equality with your partner	4	3	2	1	9
<b>Section 11: Awareness</b>						
106	In the past 12 months, have you heard about ways to	No one.....1 A neighbor/other community member.....2				

	promote equality between men and women in your community? IF YES, from whom/what source?	Religious leader.....3 Health care provider.....4 Local government.....5 Police.....6 Radio.....7 Television.....8 Newspaper.....9 Don't know (do not read).....88 Refused to answer (do not read).....99	
107	In the past 12 months, have you heard about ways to reduce violence between men and women in your community? IF YES, from whom/what source?	No one.....1 A neighbor/other community member.....2 Religious leader.....3 Health care provider.....4 Local government.....5 Police.....6 Radio.....7 Television.....8 Newspaper.....9 Don't know (do not read).....88 Refused to answer (do not read).....99	

## **Rethinking Power Evaluation**

### **Baseline Survey – Girls Clubs**

*George Washington University and Beyond Borders*



<b>Administration Form</b>			
<b>ID Number:</b>			
<b>DATE OF INTERVIEW: day [ ][ ] month [ ][ ] year [ ][ ][ ][ ]</b>			
<b>Section 1: Demographics and Socio-economics</b>			
1.	How old are you?	ENTER NUMBER [ ][ ] Don't know (do not read).....888 Refused to answer (do not read).....999	
2.	Have you ever attended school?	Yes.....1 No.....2 Don't know (do not read).....88 Refused to answer (do not read).....99	
3.	What is the grade you completed?	Primary 1.....1 Primary 2.....2 Primary 3.....3 Primary 4.....4 Primary 5.....5 Primary 6.....6 Secondary 1.....7 Secondary 2.....8 Secondary 3.....9 Secondary 4.....10 Secondary 5.....11 Secondary 6.....12 University.....13 Don't know (do not read).....88 Refused to answer (do not read).....99	
4.	Who lives at home with you?	Mother.....1 Father.....2	

		Both mother and father.....3 Other (Please specify).....4 Don't know (do not read).....88 Refused to answer (do not read).....99	
5.	Aside from your regular household chores, have you ever worked for money or any other payment?	Yes.....1 No.....2 Don't know (do not read).....88 Refused to answer (do not read).....99	
6.	What type of work have you done in the past 12 months for money or any other payment?	None.....1 Work in shop.....2 Housekeeping for another family.....3 Child care for another family.....4 Farm work.....5 Construction.....6 Handicrafts.....7 Collecting firewood.....8 Small business.....9 Other (Please specify).....10 Don't know (do not read).....88 Refused to answer (do not read).....99	
7.	Aside from your regular chores, what kind of work have you done in the past 12 months for which you were not paid?	None.....1 Work in shop.....2 Housekeeping for another family.....3 Child care for another family.....4 Farm work.....5 Construction.....6 Handicrafts.....7 Collecting firewood.....8 Small business.....9 Other (Please specify).....10 Don't know (do not read).....88 Refused to answer (do not read).....99	

**Section 2: Household Gender Dynamics**

8.	Who usually does the following tasks in your family?	Usual ly mot her	Usual ly fathe r	Both mot her and fathe r shar ed equa lly	Usual ly you	Othe r (spe cify)	Don 't kno w	No rpon se	If Usually you, skip to Q10
a	Prepare food	1	2	3	4	5	8	9	
b	Clean the house	1	2	3	4	5	8	9	
c	Clean the bathroom or toilet	1	2	3	4	5	8	9	
d	Wash clothes	1	2	3	4	5	8	9	
e	Care for younger siblings or other relatives	1	2	3	4	5	8	9	
f	Fix or repair something in your house	1	2	3	4	5	8	9	
9.	Have you done any of the following activities or chores in your home in the last 12 months?	Yes	No	Don't know	No response				
a	Prepare food	1	2	8	9				
b	Clean the house	1	2	8	9				
c	Clean the bathroom or toilet	1	2	8	9				
d	Wash clothes	1	2	8	9				
e	Care for younger siblings or other relatives	1	2	8	9				

f	Fix or repair something in your house	1	2	8	9				
10.	Do you have any brothers?	Yes.....1 No.....2 Don't know.....8 No response.....9				⇒ Q11			
11.	Has/have your brother(s) done any of the following activities or chores in your home in the last 12 months?	Yes	No	Don't know	No response				
a	Prepare food	1	2	8	9				
b	Clean the house	1	2	8	9				
c	Clean the bathroom or toilet	1	2	8	9				
d	Wash clothes	1	2	8	9				
e	Care for younger siblings or other relatives	1	2	8	9				
f	Fix or repair something in your house	1	2	8	9				
12.	Who in your family:	Mot her	Fath er	Both mot her and fathe r shar ed equa lly	You	Othe r (spe cify)	Don 't kno w	No resp onse	
a	Has the final say in how you spend money on food and clothing?	1	2	3	4	5	8	9	
b	Has the final say regarding spending time with family, friends or relatives?	1	2	3	4	5	8	9	
<b>Section 3: Knowledge</b>									
13.	Do you think it could be called violence if a boyfriend does the following to his girlfriend:								
a	Insults her or makes her feel bad about herself	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9							
b	Humiliates her in front of other people	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9							
c	Pushes or slaps her	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9							
d	Takes money from her against her will	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9							
14. a	Does using a condom protect against sexually transmitted infections?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9							

b	Can you get HIV by kissing, eating from the same plate, or using the same bathroom as a person who has HIV?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
c	Can you get HIV from oral sex?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9				
15.	In your opinion, does a man have a good reason to hit his partner if:	Yes	No	Don't know	No response	
a	He suspects she is unfaithful.	1	2	8	9	
b	She does not take good care of the children.	1	2	8	9	
<b>Section 4: Attitudes</b>						
16.	In general, do you think:	Yes	No	Don't know	No response	
a	Boys are more intelligent than girls	1	2	8	9	
b	A woman's role is taking care of her home and family	1	2	8	9	
c	A man should have the final word about decisions in his home	1	2	8	9	
d	It is more important that boys go to school compared to girls	1	2	8	9	
e	If they work hard, girls can do any job they want when they are older	1	2	8	9	
<b>Section 5: Support Systems – Empowerment - Safety</b>						
19.	Do you agree or disagree with the following statements:	Agree	Disagree	DK	NR	
a	I feel I have a number of good qualities.	1	2	8	9	
b	I feel that I am a failure.	1	2	8	9	
c	I am able to do things as well as most other people.	1	2	8	9	
d	I feel I have much to be proud of.	1	2	8	9	
e	I take a positive attitude towards myself.	1	2	8	9	
f	On the whole, I am very satisfied with myself.	1	2	8	9	
g	I wish I could have more respect for myself.	1	2	8	9	
h	I feel useless at times.	1	2	8	9	
i	I often feel lonely, with no one to talk to.	1	2	8	9	
j	I feel respected by boys my age.	1	2	8	9	
20.	For each of the following, I want you to tell me if you think that way never, some of the time, or most of the time.	Never	Some	Most	No response	
a	I think that I am doing pretty well.	1	2	3	9	

b	I can think of many ways to get the things in life that are most important to me.	1	2	3	9	
c	I have the same ability to succeed as other girls/boys my age.	1	2	3	9	
d	When I have a problem, I can come up with lots of ways to solve it.	1	2	3	9	
e	I think the things I have done in the past will help me in the future.	1	2	3	9	
f	Even when others want to quit, I know I can find a way to solve the problem.	1	2	3	9	
21.	In general:	Yes	No	No response		
a	Can you choose how to spend your free time?	1	2	9		
b	Can you choose who you want to be friends with, without your parents' interference?	1	2	9		
c	Can you choose to participate in clubs, sports, other activities that interest you?	1	2	9		
d	If you want to go to school, do your parents/caregivers make every effort to support you?	1	2	9		
22.	Most of the time, do you:	Yes	No	No response		
a	Feel safe at home?	1	2	9		
b	Feel safe at school?	1	2	9		
c	Feel safe at your friends' homes?	1	2	9		
d	Feel safe walking in your community?	1	2	9		
23.	Do you know of a place a girl/woman could go for help if someone hits her?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (Do not read).....9				
24.	Are you comfortable or uncomfortable talking about your education with your parent(s)/caregiver(s)?	Comfortable.....1 Uncomfortable.....2 Don't know (do not read).....8 Refused to answer (Do not read).....9				
25.	Are you comfortable or uncomfortable talking to your parent(s)/caregiver(s) about what you want to do for work in the future?	Comfortable.....1 Uncomfortable.....2 Don't know (do not read).....8 Refused to answer (Do not read).....9				
26.	Are you comfortable or uncomfortable talking about how to avoid getting pregnant with your parent(s)/caregiver(s)?	Comfortable.....1 Uncomfortable.....2 Don't know (do not read).....8 Refused to answer (Do not read).....9				
27.	When you do something wrong, usually what do your parents do to discipline you?	Talk to me.....1 Have me sit quietly.....2 Yell at me.....3 Spank me.....4 Hit me.....5				

		Other (specify).....6 Don't know (Do not read).....8 Refuse to answer (Do not read).....9					
28.	How often do you do the following?	Never	At least once a year	At least once a month	Don't know	No response	
a	Play sports	1	2	3	8	9	
b	Attend club meetings	1	2	3	8	9	
c	Attend church activities	1	2	3	8	9	
d	Play with friends	1	2	3	8	9	
29.	Do you have any female friends your own age outside your family?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (Do not read).....9					
30.	How much do you talk to your friends about important things?	A lot.....1 A little.....2 Not very much.....3 Not at all.....4 Don't know (do not read).....8 Refused to answer (Do not read).....9					
31.	Apart from someone in your family, is there someone in the community you can go to with problems on a regular basis?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (Do not read).....9					
32.	Is there a place in the community where you feel comfortable spending time with other girls?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (Do not read).....9					
33.	In the past 12 months, have you talked to any of the following people about violence?	Yes		No			
a	Your family	1		2			
b	Your friends	1		2			
c	Someone you did not know	1		2			
<b>Section 6: SUPPLEMENT – ONLY FOR USE WITH PARTICIPANTS WHO ARE AT LEAST 15 YEARS OLD</b>							
34.	In general, do you think:						
a	Do you think it is OK for someone to force their girlfriend/boyfriend to have sex, even when they don't want to?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9					
b	Do you think it is OK for a man to refuse to use protection when having sex with his girlfriend?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9					
35.	If a woman experiences violence from her husband, does this increase her risk for contracting HIV?	Yes.....1 No.....2 Don't know (do not read).....8 Refused to answer (do not read).....9					
36.	In your opinion, does a man have a good reason to hit his partner if:	Yes	No	Don't know	No response		
a	She refuses to have sexual relations with him.	1	2	8	9		
37.	In general, do you think:	Yes	No	Don't know	No response		

a	If a boy wants to have sex with his girlfriend, she should say yes even if she does not want to	1	2	8	9	
b	Women who have sex before marriage do not deserve respect	1	2	8	9	
c	It is the man who has the final word about whether or not he uses a condom	1	2	8	9	
38.	In general, do you think that:	Yes	No	Don't know	No response	
a	Girls like it when they are sexually harassed?	1	2	8	9	
b	It is usually a girl's fault when she is sexually harassed?	1	2	8	9	
c	When a woman is raped, she usually did something careless to put herself in that situation?	1	2	8	9	
d	When a girl is sexually abused by a man, she usually did something to put herself in that situation?	1	2	8	9	

# **Rethinking Power Evaluation**

## **Baseline Survey – Schools**

*George Washington University and Beyond Borders*

### **Administration Form**

<b>ID Number:</b>		
<b>DATE OF INTERVIEW:</b> day [ ][ ] month [ ][ ] year [ ][ ][ ][ ]		



Section 1: Background Information		
1.	How old are you?	Please enter your age here: [ ] [ ]
2.	What is the grade you completed?	Primary 1..... <input type="checkbox"/> Primary 2..... <input type="checkbox"/> Primary 3..... <input type="checkbox"/> Primary 4..... <input type="checkbox"/> Primary 5..... <input type="checkbox"/> Primary 6..... <input type="checkbox"/> Secondary 1..... <input type="checkbox"/> Secondary 2..... <input type="checkbox"/> Secondary 3..... <input type="checkbox"/> Secondary 4..... <input type="checkbox"/> Secondary 5..... <input type="checkbox"/> Secondary 6..... <input type="checkbox"/> University..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>
3.	Who lives at home with you?	Mother..... <input type="checkbox"/> Father..... <input type="checkbox"/> Both mother and father..... <input type="checkbox"/> Other: _____ <input type="checkbox"/> Don't know..... <input type="checkbox"/>
4.	Aside from your regular household chores, have you ever worked for money or any other payment?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>
5.	What type of work have you done in the past 12 months for money or any other payment?	<i>Check all that apply:</i> None..... <input type="checkbox"/> Work in shop..... <input type="checkbox"/> Housekeeping for another family..... <input type="checkbox"/> Child care for another family..... <input type="checkbox"/> <i>Check all that apply</i> Farm work..... <input type="checkbox"/> Construction..... <input type="checkbox"/> Handicrafts..... <input type="checkbox"/> Collecting firewood..... <input type="checkbox"/> Small business..... <input type="checkbox"/> Other: _____ <input type="checkbox"/> Don't know..... <input type="checkbox"/>
6.	Aside from your regular chores, what kind of work have you done in the past 12 months for which you were not paid?	<i>Check all that apply:</i> None..... <input type="checkbox"/> Work in shop..... <input type="checkbox"/> Housekeeping for another family..... <input type="checkbox"/> Child care for another family..... <input type="checkbox"/> Farm work..... <input type="checkbox"/>

		Construction..... <input type="checkbox"/> Handicrafts..... <input type="checkbox"/> Collecting firewood..... <input type="checkbox"/> Small business..... <input type="checkbox"/> Other: _____ <input type="checkbox"/> Don't know..... <input type="checkbox"/>					
<b>Section 2: Household Gender Dynamics</b>							
7.	Who usually does the following tasks in your family?	Mother	Father	Both mother and father shared equally	You	Other <i>Please specify</i>	Don't know
a	Prepare food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
b	Clean the house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
c	Clean the bathroom or toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
d	Wash clothes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
e	Care for younger siblings or other relatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
f	Fix or repair something in your house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
8.	Have you done any of the following activities or chores in your home in the last 12 months?	Yes	No	Don't know			
a	Prepare food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
b	Clean the house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
c	Clean the bathroom or toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
d	Wash clothes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
e	Care for younger siblings or other relatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
f	Fix or repair something in your house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9.	Do you have any brothers?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>					
10.	Has/have your brother(s) done any of the following activities or chores in your home in the last 12 months?	Yes	No	Don't know			

a	Prepare food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
b	Clean the house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
c	Clean the bathroom or toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
d	Wash clothes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
e	Care for younger siblings or other relatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
f	Fix or repair something in your house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11.	Do you have any sisters?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>					
12.	Has/have your sister(s) done any of the following activities or chores in your home in the last 12 months?	Yes	No	Don't know			
a	Prepare food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
b	Clean the house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
c	Clean the bathroom or toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
d	Wash clothes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
e	Care for younger siblings or other relatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
f	Fix or repair something in your house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13.	Who in your family:	Mother	Father	Both mother and father shared equally	You	Other <i>Please Specify</i>	Don't know
a	Has the final say in how you spend money on food and clothing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
b	Has the final say regarding spending time with family, friends or relatives?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
<b>Section 3: Knowledge</b>							
14.	Do you think it is violence is a boyfriend does the following to his girlfriend:	Yes	No	Don't know			
a	Insults her or makes her feel bad about herself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

b	Humiliates her in front of other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c	Pushes or slaps her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d	Takes money from her against her will	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. a	Does using a condom protect against sexually transmitted infections?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>		
b	Can you get HIV by kissing, eating from the same plate, or using the same bathroom as a person who has HIV?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>		
c	Can you get HIV from oral sex?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>		
16.	In your opinion, does a man have a good reason to hit his partner if:	Yes	No	Don't know
a	He suspects she is unfaithful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b	She does not take good care of the children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Section 4: Attitudes</b>				
17.	In general, do you think:	Yes	No	Don't know
a	Boys are more intelligent than girls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b	A woman's role is taking care of her home and family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c	A man should have the final word about decisions in his home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d	It is more important that boys go to school compared to girls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e	If they work hard, girls can do any job they want when they are older	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Section 5: Support Systems – Empowerment - Safety</b>				
18.	Do you agree or disagree with the following statements:	Agree	Disagree	Don't know

a	I feel I have a number of good qualities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b	I feel that I am a failure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c	I am able to do things as well as most other people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d	I feel I have much to be proud of.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e	I take a positive attitude towards myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f	On the whole, I am very satisfied with myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g	I wish I could have more respect for myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h	I feel useless at times.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i	I often feel lonely, with no one to talk to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j	I feel respected by boys my age.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	For each of the following, I want you to tell me if you think that way never, some of the time, or most of the time.	Never	Some	Most
a	I think that I am doing pretty well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b	I can think of many ways to get the things in life that are most important to me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c	I have the same ability to succeed as other girls/boys my age.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d	When I have a problem, I can come up with lots of ways to solve it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e	I think the things I have done in the past will help me in the future.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f	Even when others want to quit, I know I can find a way to solve the problem.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	In general:	Yes	No	
a	Can you choose how to spend your free time?	<input type="checkbox"/>	<input type="checkbox"/>	
b	Can you choose who you want to be friends	<input type="checkbox"/>	<input type="checkbox"/>	

	with, without your parents' interference?		
c	Can you choose to participate in clubs, sports, other activities that interest you?	<input type="checkbox"/>	<input type="checkbox"/>
d	If you want to go to school, do your parents/caregivers make every effort to support you?	<input type="checkbox"/>	<input type="checkbox"/>
21.	Most of the time, do you:	Yes	No
a	Feel safe at home?	<input type="checkbox"/>	<input type="checkbox"/>
b	Feel safe at school?	<input type="checkbox"/>	<input type="checkbox"/>
c	Feel safe at your friends' homes?	<input type="checkbox"/>	<input type="checkbox"/>
d	Feel safe walking in your community?	<input type="checkbox"/>	<input type="checkbox"/>
22.	Do you know of a place a girl/woman could go for help if someone hits her?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>	
23.	Are you comfortable or uncomfortable talking about your education with your parent(s)/caregiver(s)?	Comfortable..... <input type="checkbox"/> Uncomfortable..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>	
24.	Are you comfortable or uncomfortable talking to your parent(s)/caregiver(s) about what you want to do for work in the future?	Comfortable..... <input type="checkbox"/> Uncomfortable..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>	
25.	Are you comfortable or uncomfortable talking about how to avoid getting pregnant with your parent(s)/caregiver(s)?	Comfortable..... <input type="checkbox"/> Uncomfortable..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>	
26.	When you do something wrong, usually what do your parents do to discipline you?	<i>Check all that apply:</i> Talk to me..... <input type="checkbox"/> Have me sit quietly..... <input type="checkbox"/> Yell at me..... <input type="checkbox"/> Spank me..... <input type="checkbox"/> Hit me..... <input type="checkbox"/> Other: _____ Don't know..... <input type="checkbox"/>	

27.	How often do you do the following?	Never	At least once a year	At least once a month	Don't know
a	Play sports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b	Attend club meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c	Attend church activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d	Play with friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28.	Do you have any friends your own age outside your family?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>			
29.	Are these friends mostly girls, boys, or a mix of both?	Girls..... <input type="checkbox"/> Boys..... <input type="checkbox"/> Mix..... <input type="checkbox"/>			
30.	How much do you talk to your friends about important things?	A lot..... <input type="checkbox"/> A little..... <input type="checkbox"/> Not very much..... <input type="checkbox"/> Not at all..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>			
31.	Apart from someone in your family, is there someone in the community you can go to with problems on a regular basis?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>			
32.	Is there a place in the community where you feel comfortable spending time with other girls?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>			
33.	In the past 12 months, have you talked to any of the following people about violence?	Yes	No		
a	Your family	<input type="checkbox"/>	<input type="checkbox"/>		
b	Your friends	<input type="checkbox"/>	<input type="checkbox"/>		
c	Someone you did not know	<input type="checkbox"/>	<input type="checkbox"/>		
<b>Section 6: SUPPLEMENT – ONLY FOR USE WITH SECONDARY SCHOOL CLASSROOMS WHERE PUPILS ARE AT LEAST 15 YEARS OLD</b>					
34. a	Do you think it is OK for someone to force their girlfriend/ boyfriend to have sex,	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>			

	even when they don't want to?			
b	Do you think it is OK for a man to refuse to use protection when having sex with his girlfriend?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>		
35.	If a woman experiences violence from her husband, does this increase her risk for contracting HIV?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>		
36.	In your opinion, does a man have a good reason to hit his partner if:			
a	She refuses to have sexual relations with him.	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>		
37.	In general, do you think:			
a	If a boy wants to have sex with his girlfriend, should she say yes even if she does not want to?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>		
b	Women who have sex before marriage do not deserve respect?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>		
c	It is the man who has the final word about whether or not he uses a condom?	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>		
38.	In your opinion, does a man have a good reason to hit his partner if:			
a	She refuses to have sexual relations with him.	Yes..... <input type="checkbox"/> No..... <input type="checkbox"/> Don't know..... <input type="checkbox"/>		
39.	In general, do you think that:	Yes	No	Don't know
a	Girls like it when they are sexually harassed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b	It is usually a girl's fault when she is sexually harassed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c	When a woman is raped, she usually did something careless to put herself in that situation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



d	When a girl is sexually abused by a man, she usually did something to put herself in that situation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	--	--------------------------	--------------------------	--------------------------

## **Rethinking Power Haiti - - QUALITATIVE FACILITATORS' GUIDES**

### **FACILITATORS' GUIDE - PARTICIPATORY FOCUS GROUP DISCUSSIONS COMMUNITY MEMEBERS**

This next guide will be used for focus group discussions with *community members*.

#### **Introduction (10 minutes)**

1. Personal introductions

Go around and have everyone introduce themselves.

2. Complete consent process.

#### **Exercise 1: Free-listing (20 minutes)**

**OBJECTIVE:** To create a list of the types of violence that exist in the relevant community.

*Steps for facilitator:*

- 1) Write down on sticky notes main places where violence can occur:
  - a. Community
  - b. Home
- 2) Ask participants about all the types of violence in the community and at home.
- 3) Place the sticky notes with the different types of violence according to the two locations. Place on top those that are most common or relevant. If a specific type of violence occurs in multiple places, simply re-write the type of violence on another sticky note and place it under both places.
- 4) Ask who are most affected for each type of violence, boys/men or girls/women. Write it down in the sticky note (or use sticky notes with different colors).
- 5) Ask about the locations where these types of violence occur (e.g. market, school, street, etc.)
- 6) At the end, if possible take a picture.

#### **Exercise 2: Myths & Truths about Violence (30 minutes)**

**OBJECTIVE:** To challenge existing beliefs about violence and to identify areas of consensus and disagreement within the group.

*Steps for facilitator:*

- 1) Place three signs up around the room, one with the words “I AGREE”, one with “I DISAGREE”, and one with “DON’T KNOW”.
- 2) Read out loud the following statements and ask participants to move to stand by the sign that represents their opinion about the statement. Ask a few participants on each side to explain their opinion. The facilitator may ask questions to stimulate discussion, but it is not necessary to provide “correct” answers.
  - It is important that sons have more education than daughters.
  - Women should leave politics to the men.
  - A woman’s main role is taking care of her home and family.
  - A man should have the final word about decisions in his home.
  - There are times when a woman deserves to be beaten.
  - Violence is usually due to alcohol.
  - A man has the final word on whether or not he uses a condom during sex.
  - If a neighbor knows that violence was happening in a home near his, he should ignore it.

### **Exercise 3: Open-ended Stories & Venn Diagrams (1 hour)**

**OBJECTIVE:** To fill in a hypothetical story to determine community reactions to violence, and help-seeking behaviors, services available, and consequences of survivors.

*Steps for facilitator:*

- 1) Begin this session by explaining the method, “I’m going to read to you the beginning of a story about a woman and a girl in a community” and that participants will help in filling in their stories with what would happen to them if they were in your community.
- 2) Write the name of the person in the story on a sticky note and paste in on the center of the board.
- 3) People will identify services, institutions or people where the woman/girl in the story will seek for help. You write them down and paste them on the board. The more helpful/accessible the service/people, the closer to paste it to the name of the person in the story.
- 4) If possible take a picture at the end.

#### **Story #1:**

Introduction	<p><i>I’m going to read to you the beginning of a story about a girl in a community like yours. I want your help in filling in her story with what would happen to her if she were in your community.</i></p> <p><i>Esther is 14 years old. She is unmarried and has no children. One day, she was walking back from (the market/school/collecting water/other option that makes sense in the community) and an armed man who she did not know forced her to have sex with him. This is the first time this has happened to Esther.</i></p>
--------------	---

<i>Q: What would Esther do? Who (if anyone) will Esther tell about what happened to her?</i>	
<i>Q: What do you think the responses of the people she told would be? Were they helpful?</i>	
<i>Q: Will Esther try to go anywhere to get help? Will she try to access any services? If so, what are they?</i>	
<i>Q: What will happen to Esther when she gets to the services? Will she be satisfied with these services and how she is treated?</i>	
<i>Q: Why wouldn't Esther go to?</i>	
<i>Q: What do you think will happen to Esther?</i>	
<i>Q: Where should Esther have gone? Why couldn't she go to (name of service that they mention)? What services do you think she could have received if she could go there?</i>	
Alternate scenarios (depending on time)	<i>Q: How would this have change if Esther were married and had 3 children?</i>  <i>Q: How would this change if Esther were a boy? Would he have told anyone? What would happen to him?</i>

**Story #2:**

Introduction	<p><i>I'm going to read to you the beginning of a story about a woman in a community like yours. I want your help in filling in her story as if she were in your community.</i></p> <p><i>Vanessa is 25 years old. She is married and has three children. Vanessa and her husband argue often and he has beaten her several times, sometimes very severely. Her neighbors have overheard on a few occasions and know this is happening.</i></p>
<i>Q: What would Vanessa do? Who (if anyone) will Vanessa tell about what happened to her?</i>	
<i>Q: What do you think the responses of the people she told would be? Were they helpful?</i>	
<i>Q: Will Vanessa try to go anywhere to get help? Will she try to access any services? If so, what are they?</i>	
<i>Q: What will happen to Vanessa when she gets to the services? Will she be satisfied with these services and how she is treated?</i>	
<i>Q: Why wouldn't Vanessa go to?</i>	
<i>Q: What do you think will happen to Vanessa?</i>	
<i>Q: Where should Vanessa have gone? Why couldn't she go to (name of service that they mention)? What services do you think she could have received if she could go there?</i>	

## **Conclusion**

Thank the participants for coming to the session.

## **Rethinking Power Haiti - QUALITATIVE FACILITATORS' GUIDES**

### **FACILITATORS' GUIDE - SEMI-STRUCTURED INTERVIEWS**

This guide will be used for in-depth semi-structured interviews with key stakeholders, such as *community leaders, health service providers, legal authorities and other stakeholders representing international, national and local organizations.*

#### **Introduction**

1. Personal introductions
2. Complete consent process.

#### **TOPIC 1: SITUATION OF WOMEN AND GIRLS IN THE COMMUNITY**

Which are the main problems that women face in the community? What about girls – what problems do they face?

How are girls treated in the community? How is their situation compared to that of boys?

Are there specific programs/resources for girls? How do they compare to programs/resources for boys?

How can you tell that girls are succeeding in your community?

#### **TOPIC 2: VIOLENCE AGAINST WOMEN AND GIRLS IN THE COMMUNITY**

What types of violence do you hear occur in your community?

Does this violence affect men, women, boys, girls, or all?

Which ones are the most common? Which are the most severe?

What happens to a woman if she experiences violence? What about girls?

In your view, what are the main causes of violence against women and girls in your community?

#### **TOPIC 3: POLICIES, PROGRAMS AND OTHER INTERVENTIONS**

##### ***FOR LOCAL GOVERNMENT REPRESENTATIVES/FOR COMMUNITY LEADERS:***

Have you heard of cases where women report violence? What happens? What about when girls report violence?

What are the main programs or actions established in the community to respond or to prevent violence against women and girls? What are the main challenges they face?

***FOR HEALTH PROFESSIONALS:***

What types of health services are available to women or girls who experience violence?

What types of violence do you normally see reported at the hospital/clinic?

What do you think might prevent women from accessing these services? What about girls?

***FOR WOMEN'S GROUPS:***

What are the main programs or actions established in the community to respond or to prevent violence against women and girls? What are the main challenges they face?

Do girls know about the services are available? What may prevent them from accessing these services?

***FOR SCHOOL STAKEHOLDERS:***

How do boys and girls interact within the school?

What do you think prevents girls from being able to succeed in school?

What policies/services are in place to protect girls in your school? Do girls know about them?

**TOPIC 4: FINAL QUESTIONS**

Is there anything that could be done to help provide better services to these women and girls?

What would you recommend to prevent violence against women?

## **Rethinking Power Haiti - QUALITATIVE FACILITATORS' GUIDES**

### **FACILITATORS' GUIDE - PARTICIPATORY FOCUS GROUP DISCUSSIONS GIRLS GROUPS/SCHOOL CHILDRE**

This next guide will be used for focus group discussions with *girls groups/school children*.

#### **Introduction (10 minutes)**

1. Personal introductions

Go around and have everyone introduce themselves.

2. Complete consent process.

#### **Exercise 1: Community Mapping (30 Minutes)**

OBJECTIVE: To identify spaces in which girls feel unsafe and to determine the causes and consequences underlying their sense of safety.

*Steps for facilitator:*

- 1) Ask a participant to draw a map of their community using markers and large sheets of paper.
- 2) As the map is taking shape, encourage other group members to get involved in the drawing.
- 3) Once the map is completely finished, ask the participants to identify on the map key areas where they feel safe using a specific colored marker or pen.
- 4) Ask participants to identify on the map key areas where they feel safe using a different color marker or pen.
- 5) The facilitator may ask questions to gain additional information that would be useful to interpret the map and to stimulate further discussion.
- 6) Take a photograph of the finished map.

#### **Exercise 2: Myths & Truths about Violence (20 minutes)**

OBJECTIVE: To challenge existing beliefs about violence and to identify areas of consensus and disagreement within the group.

*Steps for facilitator:*

- 3) Place three signs up around the room, one with the words "I AGREE", one with "I DISAGREE", and one with "DON'T KNOW".



- 4) Read out loud the following statements and ask participants to move to stand by the sign that represents their opinion about the statement. Ask a few participants on each side to explain their opinion. The facilitator may ask questions to stimulate discussion, but it is not necessary to provide “correct” answers.
- Boys are more intelligent than girls.
  - A woman’s main role is taking care of her home and family.
  - Daughters should have the same chance to work outside the home as sons.
  - A man should have the final word about decisions in his home.
  - It is important that sons have more education than daughters.
  - There are times when a woman deserves to be beaten by her husband.
  - A woman who has sex before she marries does not deserve respect. (14-19)
  - It is usually a girl’s fault if she is sexually harassed. (14-19)

### **Exercise 3: Role Playing (1 hour)**

OBJECTIVE: To

*Steps for facilitator:*

- 1) Divide the group into subgroups of 3 or 4 people.
- 2) Ask each subgroup to develop a very short role-play showing ways in which boys and girls treat each other in three different environments. Each group should portray a different environment:
  - a. At home
  - b. In school
  - c. In their communities
- 3) Ask each group to present their role-play to the entire group.
- 4) After each role-play has finished, ask the characters to stay in their roles for a few minutes while you invite the rest of the group to ask questions of the characters.
- 5) After each group has presented, it is important to de-role. Go around and have each participant say their name and make a statement about themselves in real life, e.g. their favorite fruit or their favorite activity.

Questions for discussion after each role-play:

1. How does she feel when he does this? What does she fear?
2. Why does he do this? How does he feel?
3. Who else is there? Who is involved in it? How do they feel?
4. What does the girl do? Why does she respond in this way?
5. What can a person do to help him/herself when he or she experiences such problems?

### **Conclusion**

Thank the participants for coming to the session.



**Annex 3: Consent Forms****CONSENT – HOUSEHOLD SURVEY -Women****Research**

I am a local researcher conducting a survey in your community for *The George Washington University* in the United States. The purpose of the research is to better understand the situation women and girls face here. The questionnaire will include questions on how women and men interact in your community as well as your health and life experiences including incidents of violence. We will ask questions about your family including some difficult things to talk about – such as how your spouse/partner treats you.

The interview will take approximately one hour and we would like to begin immediately. I will conduct the interview and we will look for a quiet place so that your responses remain confidential. Please let us know if you have questions, concerns, complaints, or think you have been harmed. You can contact us at [Insert local phone number for the research team] or through the Beyond Border's office in Jacmel if you want to speak to us at a later date/time. In addition, we will be giving you a list of local services that can help women and girls in your area after we talk – you can also contact them if you are feeling bad or need additional support.

**Voluntary participation**

Your participation in this interview is completely voluntary. You have the right to stop the interview at any time, or to skip any questions that you don't want to answer. There are no right or wrong answers. Some of the topics may be difficult to discuss, but many people have found it useful to have the opportunity to talk.

**Risks**

We don't want you to feel under any pressure to talk to us, especially if you're worried that it might be risky for you. Please take a few moments to consider whether talking to us may increase your risk of violence, whether at home or in your community.

Since we are asking you to share with us some very personal and confidential information, you may feel uncomfortable talking about some of the topics. If you do not wish to answer a question or if you would like to take a break between questions, please let me know and we will skip that question. You do not have to tell us why you don't want to respond to a question, or why you don't want to take part in the survey. We will ask you through the survey whether you wish to continue. If it seems like you are having trouble answering a question or are becoming really upset, we will stop the interview. In addition, participating in the research may draw attention to you within your community. This may have unknown risks.

**Benefits**

There is no compensation or any other direct benefits for participating in the survey. However, your answers will help us better understand the lives of women here in Haiti.

**Privacy/Confidentiality**

You have been chosen by chance to participate in this study. I will collect data on your age and Commune of your residence. I will not keep a record of your name or full address. We will not tell anyone that you participated in this survey and your answers will be kept confidential. If anyone enters the room while we are talking, we may stop the interview or change questions. The only exception to this confidentiality is if you tell me about child abuse currently happening within your household or that you are an immediate danger to yourself or to someone else. In these cases, we will need to notify the local authorities (Child Protective Services or the Haitian Police).

We limit the sharing of your responses to people who need to review it. The George Washington University Institutional Review Board and other representatives of this organization may inspect and copy the information you provide.

There is a small chance that someone not on our research team could find out that you took part in the study or somehow connect your name with the information we collect about you. To reduce this we: do not collect your full name, address or contact information, a random number will be assigned to identify your questionnaire, all data is being stored on password protected phones, all data will be deleted off these phones as soon as they are synched with a computer, all data will be stored on password protected computers and raw data will only be viewed by members of research team.

Do you have any questions?

Are you 15 years old or older?

<b>1. Authorization to be marked by facilitator:</b>	<b>Yes</b>	<b>No</b>
--	------------	-----------

Do you agree to participate?

<b>2. Authorization to be marked by facilitator:</b>	<b>Yes</b>	<b>No</b>
--	------------	-----------

## **CONSENT – HOUSEHOLD SURVEY -Men**

### **Research**

I am a local researcher conducting a survey in your community for *The George Washington University* in the United States. The purpose of the research is to better understand the situation women and girls face here. The questionnaire will include questions on how women and men interact in your community as well as your health and life experiences including incidents of violence. We will ask questions about your family including some difficult things to talk about – such as how you treat your spouse/partner.

The interview will take approximately one hour and we would like to begin immediately. I will conduct the interview and we will look for a quiet place so that your responses remain confidential. Please let us know if you have questions, concerns, complaints, or think you have been harmed. You can contact us at [Insert local phone number for the research team] or through the Beyond Border's office in Jacmel if you want to speak to us at a later date/time. In addition, we will be giving you a list of local services that can help women and girls in your area after we talk – you can also contact them if you are feeling bad or need additional support.

### **Voluntary participation**

Your participation in this interview is completely voluntary. You have the right to stop the interview at any time, or to skip any questions that you don't want to answer. There are no right or wrong answers. Some of the topics may be difficult to discuss, but many people have found it useful to have the opportunity to talk.

### **Risks**

We don't want you to feel under any pressure to talk to us, especially if you're worried that it might be risky for you. Please take a few moments to consider whether talking to us may increase your risk of violence, whether at home or in your community.

Since we are asking you to share with us some very personal and confidential information, you may feel uncomfortable talking about some of the topics. If you do not wish to answer a question or if you would like to take a break between questions, please let me know and we will skip that question. You do not have to tell us why you don't want to respond to a question, or why you don't want to take part in the survey. We will ask you through the survey whether you wish to continue. If it seems like you are having trouble answering a question or are becoming really upset, we will stop the interview. In addition, participating in the research may draw attention to you within your community. This may have unknown risks.

### **Benefits**

There is no compensation or any other direct benefits for participating in the survey. However, your answers will help us better understand the lives of women and men here in Haiti.

### **Privacy/Confidentiality**

You have been chosen by chance to participate in this study. I will collect data on your age and Commune of your residence. I will not keep a record of your name or full address. We will not tell anyone that you participated in this survey and your answers will be kept confidential. If anyone enters the room while we are talking, we may stop the interview or change questions. The only exception to this confidentiality is if you tell me about child abuse currently happening within your household or that you are an immediate danger to yourself or to someone else. In these cases, we will need to notify the local authorities (Child Protective Services or the Haitian Police).

We limit the sharing of your responses to people who need to review it. The George Washington University Institutional Review Board and other representatives of this organization may inspect and copy the information you provide.

There is a small chance that someone not on our research team could find out that you took part in the study or somehow connect your name with the information we collect about you. To reduce this we: do not collect your

full name, address or contact information, a random number will be assigned to identify your questionnaire, all data is being stored on password protected phones, all data will be deleted off these phones as soon as they are synched with a computer, all data will be stored on password protected computers and raw data will only be viewed by members of research team.

Do you have any questions?

Are you 15 years old or older?

<b>1. Authorization to be marked by facilitator:</b>	<b>Yes</b>	<b>No</b>
--	------------	-----------

Do you agree to participate?

<b>2. Authorization to be marked by facilitator:</b>	<b>Yes</b>	<b>No</b>
--	------------	-----------

## **CONSENT – GIRL’S CLUB SURVEY - GIRLS- Aged 15-19**

### **Research**

I am a local researcher conducting a survey for *The George Washington University* in the United States. The purpose of the research is to better understand the situation girls face here. For example, we would like to ask some questions about your experiences going to school, thoughts and feelings, and relationships with other girls and boys your age, and adults here. We know that girls may experience a number of different challenges living here, and we will ask you some questions about those experiences and challenges, and about feelings of safety and well-being. We will also ask you about your hopes and plans for the future, and about the services available for girls.

The interview will take approximately 30 minutes and we would like to begin immediately. I will conduct the interview and we will look for a quiet place so no one can hear your answers. Please let us know if you have questions, concerns, complaints, or think you have been harmed. You can contact us at [Insert local phone number for the research team] or through the Beyond Border’s office in Jacmel if you want to speak to us at a later date/time. In addition, we will be giving you a list of local services that can help women and girls in your area after we talk – you can also contact them if you are feeling bad or need additional support.

### **Voluntary participation**

It is your choice to participate in this survey. You can stop the interview at any time, or skip any questions that you don’t want to answer. There are no right or wrong answers. You can still participate in the girl’s club, even if you choose not participate in this survey.

### **Risks**

We don’t want you to feel under any pressure to talk to us, especially if you’re worried that it might be risky for you. Please take a few moments to consider whether talking to us may increase your risk of violence, whether at home or in your community. In addition, participating in the research may draw attention to you within your community. This may have unknown risks.

If you do not wish to answer a question or if you would like to take a break between questions, please let me know and we will skip that question. You do not have to tell us why you don’t want to respond to a question, or why you don’t want to take part in the survey. If it seems like you are having trouble answering a question or are becoming really upset, we will stop the interview.

### **Benefits**

There is no compensation or any other direct benefits for participating in the survey. However, your answers will help us better understand the lives of girls here in Haiti.

### **Privacy/Confidentiality**

You have been chosen to participate in this study because you are a member of a girl’s group. I will collect data on your age and Commune of your residence. I will not keep a record of your name or full address. We will not tell anyone that you participated in this survey and your answers will be kept confidential. If anyone enters the room while we are talking, we may stop the interview or change questions.

We limit the sharing of your responses to people who need to review it. The George Washington University Institutional Review Board and other representatives of this organization may inspect and copy the information you provide.

There is a small chance that someone not on our research team could find out that you took part in the study or somehow connect your name with the information we collect about you. To reduce this we: do not collect your

full name, address or contact information, a random number will be assigned to identify your questionnaire, all data is being stored on password protected phones, all data will be deleted off these phones as soon as they are synched with a computer, all data will be stored on password protected computers and raw data will only be viewed by members of research team.

Do you have any questions?

Are you 15-19 years old?

<b>1. Authorization to be marked by facilitator:</b>	<b>Yes</b>	<b>No</b>
--	------------	-----------

Do you agree to participate?

<b>2. Authorization to be marked by facilitator:</b>	<b>Yes</b>	<b>No</b>
--	------------	-----------



## **CONSENT – Girl's Club SURVEY – Aged 10-14**

### **Research**

My name is [name]. I work with a university in the United States (the George Washington University). We are working on a project to learn more about the lives of girls and boys in your community. For example, we would like to ask some questions about your experiences going to school, thoughts and feelings, and relationships with other girls and boys your age, and adults here. We know that girls may experience a number of different challenges living here, and we will ask you some questions about those experiences and challenges, and about where you feel safe. We will also ask you about what you might do when you grow up and about where you go in the community if you need help.

We will talk for about 30 minutes now somewhere quiet, where no one can overhear us. If, after this interview, you feel you need to talk to anyone about what our conversation your girls group leader will know how to get you help. Or you can contact us at [insert local phone number of research team] or through Beyond Borders in Jacmel if you have any questions or problems.

### **Voluntary participation**

If you don't want to talk to me you can say no now. If, after we begin, you would like to stop talking just let me know. You don't have to tell me why you don't want to talk to me or why you want to stop the interview. There are no right or wrong answers. You can still participate in the girl's club, even if you choose not to talk to me.

### **Risks**

We don't want you to feel under any pressure to talk to us, especially if you're worried that it might get you in trouble at home. Talking to me may also draw attention to you within your community, which may cause you problems. Please take a few moments to consider whether talking to us may cause you any problems at home or in your community

If, for any reason, you think it might be unsafe for you to talk to me you can say no or ask to skip questions you do not want to answer. You do not have to tell us why you don't want to answer any question, or why you don't want to talk to me. If it seems like you are having trouble answering a question or are becoming really upset, we will stop talking.

### **Benefits**

We cannot give you anything for talking to me today. However, your answers will help us better understand the lives of girls here in Haiti.

### **Privacy/Confidentiality**

I am asking to talk to you because you are a member of a girl's group. I will ask about your age and where you live (your commune). I will not write down your name or full address. We will not tell anyone that you spoke to me and we will not tell anyone your answers. If anyone enters the room while we are talking, we may stop talking or change questions.

We will only share your answers with people who need to review them to understand the situation of girls in here in Haiti. Other people from our university may also look at your answers

There is a small chance that someone could find out that you spoke to me or somehow find out your answers to my questions. To avoid this as best as possible— we don't write down your full name, address or telephone number. The phone I am using assigns a number to your information – so we won't know your name when we are looking at your answers. We make sure the phones and computers we use have passwords on them and only the people who need to look at your answers will be able to.

Do you have any questions?

Are you 10-14 years old?

<b>Authorization to be marked by facilitator:</b>	<b>Yes</b>	<b>No</b>
---	------------	-----------

Do you agree to participate?

<b>Authorization to be marked by facilitator:</b>	<b>Yes</b>	<b>No</b>
---	------------	-----------

## **CONSENT –SCHOOL SURVEY – Aged 15-19**

### **Research**

I am a local researcher conducting a survey for *The George Washington University* in the United States. The purpose of the research is to better understand the situation boys and girls face here. We will be giving you a questionnaire to fill out about your life and how girls and boys interact in your community.

It will take approximately 30 minutes to complete the questionnaire. Please let us know if you have questions, concerns, complaints, or think you have been harmed. . You can contact us at [Insert local phone number for the research team] or through the Beyond Border's office in Jacmel if you want to speak to us at a later date/time. In addition, we will be giving you a list of local services that can help women and girls in your area after we talk – you can also contact them if you are feeling bad or need additional support.

### **Voluntary participation**

It is your choice to complete this questionnaire. You can stop at any time, or skip any questions that you don't want to answer. There are no right or wrong answers. Your participation will not affect your grades or be included in your school records.

### **Risks**

We don't want you to feel under any pressure to complete the questionnaire, especially if you're worried that it might be risky for you. Please take a few moments to consider whether talking to us may increase your risk of violence, whether at home or in your community. In addition, participating in the research may draw attention to you within your community. This may have unknown risks.

If you do not wish to answer a question or if you would like to take a break between questions, you can skip that question. You do not have to tell us why you don't want to respond to a question, or why you don't want to complete the questionnaire. If it seems like you are having trouble answering a question or are becoming really upset, you can stop completing the questionnaire.

### **Benefits**

There is no compensation or any other direct benefits for completing the questionnaire. However, your answers will help us better understand the lives of boys and girls here in Haiti.

### **Privacy/Confidentiality**

You have been chosen to participate in this study because you go to this school. I will collect data on your age and Commune of your residence. I will not keep a record of your name or full address. We will not tell anyone that you participated in this study and your answers will be kept confidential.

We limit the sharing of your responses to people who need to review it. The George Washington University Institutional Review Board and other representatives of this organization may inspect and copy the information you provide.

There is a small chance that someone not on our research team could find out that you took part in the study or somehow connect your name with the information we collect about you. To reduce this we: do not collect your full name, address or contact information, a random number will be assigned to identify your questionnaire, all data will be stored on password protected computers and raw data will only be viewed by members of research team.

Please let the facilitator know if you have any questions.

Are you 15-19 years old?

<b>Yes</b>	<b>No</b>
------------	-----------

Do you agree to participate?

<b>Yes</b>	<b>No</b>
------------	-----------

**CONSENT –SCHOOL SURVEY – 10-14****Research**

My name is [name]. I work with a university in the United States (the George Washington University). We are working on a project to learn more about the lives of girls in your community. We will be giving you a questionnaire to fill out to learn about how girls and boys live here.

It will take about 30 minutes for you to complete the questionnaire. If, after you complete the form, you feel you need to talk to anyone about your answers, your teacher will know how to get you help. You can contact us at [insert local phone number for research team] or through Beyond Borders in Jacmel if you have any questions or concerns.

**Voluntary participation**

If you don't want to complete this questionnaire, you don't have to. You can stop at any time, or skip any questions that you don't want to answer. There are no right or wrong answers. Completing or not completing the questionnaire will not affect your grades or be included in your school records.

**Risks**

We don't want you to feel under any pressure to complete the questionnaire, especially if you're worried that it might get you in trouble at home. Completing the questionnaire may draw attention to you within your community, which may cause you problems. Please take a few moments to consider whether completing the questionnaire may cause you problems at home or in your community.

If, for any reason, you think it might be unsafe for you complete the questionnaire you do not have to fill it in or can skip questions you do not want to answer. You do not have to tell us why you don't want to respond to a question, or why you don't want to complete the questionnaire. If it seems like you are having trouble answering a question or are becoming really upset, you can stop completing the questionnaire.

**Benefits**

We cannot give you anything for completing the questionnaire. However, your answers will help us better understand the lives of boys and girls here in Haiti.

**Privacy/Confidentiality**

We are asking you to complete this questionnaire because you go to this school. The questionnaire will ask you about your age and Commune where you live. It will not ask about your name or full address. We will not tell anyone that you spoke to me and we will not tell anyone your answers.

We will only share your answers with people who need to review it to understand the situation of girls in here in Haiti. People from our university may look at your answers to the questions.

There is a small chance that someone could find out that you completed this questionnaire or will somehow connect your name with the information you write down. To make this less of a chance – we don't write down your full name, address or telephone number. A number will be assigned to identify your questionnaire - so we won't know your name when we are looking at the information later. We make sure the phones and computers we use have passwords on them and only the people who need to look at your answers will be able to.

Do you have any questions?

Are you 10-14 years old?

Yes	No
-----	----

Do you agree to participate?

<b>Yes</b>	<b>No</b>
------------	-----------

## VERBAL CONSENT – IN-DEPTH INTERVIEWS

*This form should be clearly read to all participants before data collection.*

### Research

I am a local researcher conducting a survey for *The George Washington University* in the United States. The purpose of the research is to better understand the situation girls face here. During the interview, we will talk about how women and men/girls and boys interact in your community.

The interview will take approximately 1 hour and we would like to begin immediately. I will conduct the interview and we will look for a quiet place so no one can hear your answers. If after this interview you feel you need to talk to someone about the emotions you are feeling please contact [ ] who can help you. Please let us know if you have questions, concerns, complaints, or think you have been harmed. You can contact us at [ ] if you want to speak to us at a later date/time.

### Voluntary participation

It is your choice to participate in this interview. You can stop the interview at any time, or skip any questions that you don't want to answer. There are no right or wrong answers. You can still participate in the Rethinking Power Program, even if you choose not participate in this survey.

### Risks

We don't want you to feel under any pressure to talk to us, especially if you're worried that it might be risky for you. Please take a few moments to consider whether talking to us may increase your risk of violence, whether at home or in your community.

### Benefits

There is no compensation or any other direct benefits for participating in the survey. However, your answers will help us better understand the lives of girls here in Haiti.

### Privacy/Confidentiality

I will collect data on your age and Commune of your residence. I will not keep a record of your name or full address. We will not tell anyone that you participated in this interview and your answers will be kept confidential. If anyone enters the room while we are talking, we may stop the interview or change questions.

We limit the sharing of your responses to people who need to review it. The George Washington University Institutional Review Board and other representatives of this organization may inspect and copy the information you provide.

There is a small chance that someone not on our research team could see your answers to the study questions or somehow connect your name with the information we collect about you, however the following steps are being taken to reduce this risk: your name, address, contact information or any identifiable information is not being collected as part of this research, all notes will be transcribed into a password protected computer by a member of our research team and the originals destroyed and raw data will only be viewed by members of research team.

Do you have any questions?

Do you agree to participate?

<b>1. Authorization to be marked by facilitator:</b>	<b>Yes</b>	<b>No</b>
--	------------	-----------



## VERBAL CONSENT – FOCUS GROUP DISCUSSIONS

*This form should be clearly read to all participants before data collection.*

### Research

I am a local researcher conducting a survey for *The George Washington University* in the United States. The purpose of the research is to better understand the situation women and girls face here. During the interview, we will talk about how women and men/girls and boys interact in your community.

The discussion will take approximately 1 hour and we would like to begin immediately. If after this interview you feel you need to talk to someone about the emotions you are feeling please contact

[ ] who can help you. Please let us know if you have questions, concerns, complaints, or think you have been harmed. You can contact us at

[ ] if you want to speak to us at a later date/time.

### Voluntary participation

It is your choice to participate in this discussion. You can stop at any time, or skip any questions that you don't want to answer. There are no right or wrong answers. You can still participate in the Rethinking Power program, even if you choose not participate in this survey.

### Risks

We don't want you to feel under any pressure to talk to us, especially if you're worried that it might be risky for you. Please take a few moments to consider whether talking to us may increase your risk of violence, whether at home or in your community.

### Benefits

There is no compensation or any other direct benefits for participating in the discussion. However, your answers will help us better understand the lives of women and girls here in Haiti.

### Privacy/Confidentiality

I will collect data on your age and Commune of your residence. I will not keep a record of your name or full address. We will not tell anyone that you participated in this interview and your answers will be kept confidential. If anyone enters the room while we are talking, we may stop the interview or change questions.

We limit the sharing of your responses to people who need to review it. The George Washington University Institutional Review Board and other representatives of this organization may inspect and copy the information you provide.

There is a small chance that someone not on our research team could see your answers to the study questions or somehow connect your name with the information we collect about you, however the following steps are being taken to reduce this risk: your name, address, contact information or any identifiable information is not being collected as part of this research, all notes will be entered into a password protected computer by a member of our research team and the originals destroyed and raw data will only be viewed by members of research team.

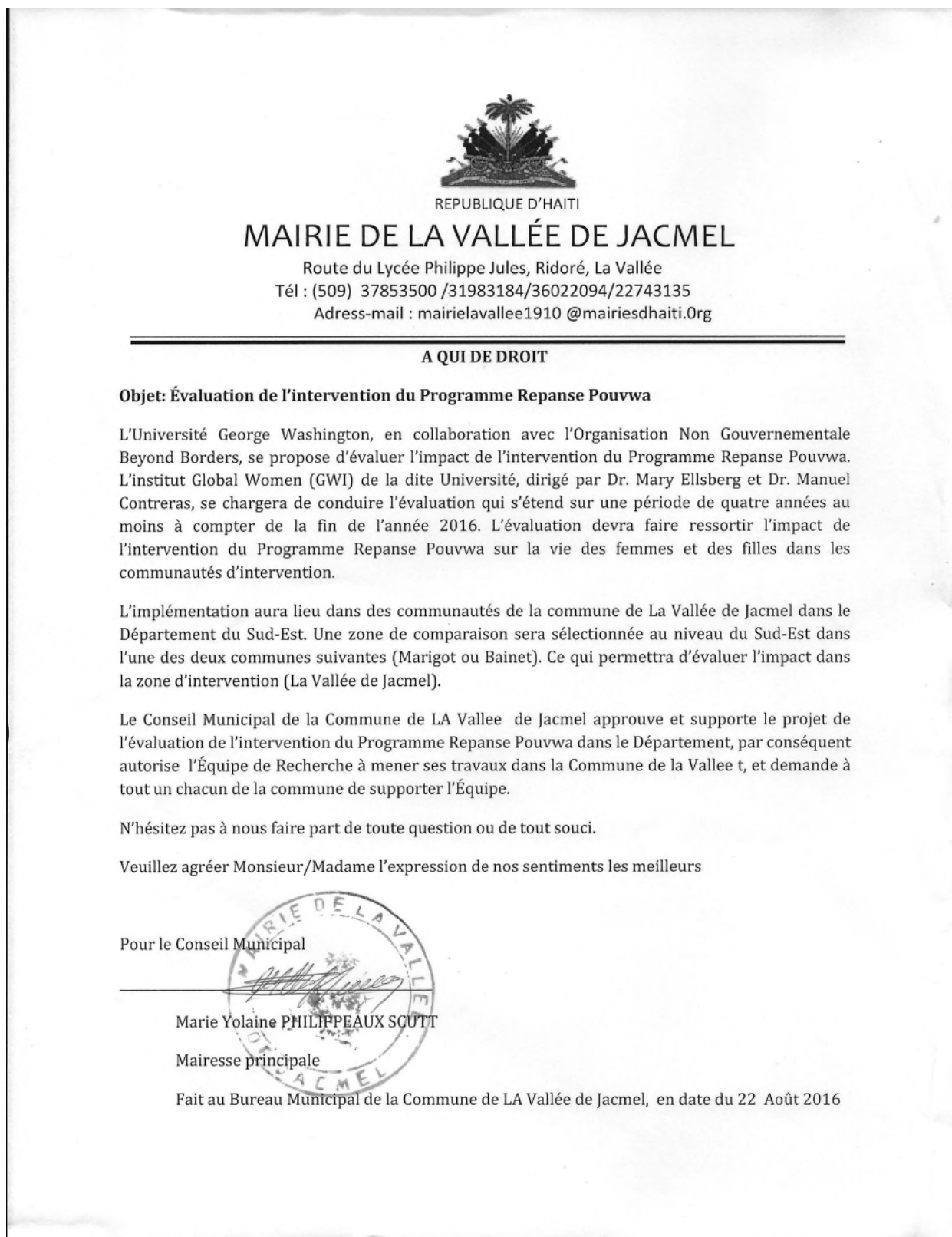
While we cannot guarantee the privacy of the focus group discussion, we request that all present respect the group by not telling anyone outside the group what is said.

Do you have any questions?

Do you agree to participate?

<b>1. Authorization to be marked by facilitator:</b>	<b>Yes</b>	<b>No</b>
--	------------	-----------

#### Annex 4: Site Permission Letters



#### Translation – Site Permission Letter 1:

**Republic of Haiti**  
**Mayoral Office of La Valle of Jacmel**  
**Philippe Jules School Street, Ridore, La Valle**  
**Telephone number: (509) 37853500/ 31983184/ 36022094/ 22743135**  
**Email: mairielavallee1910@mairiesdhaiti.org**

To whom it may concern:

Objective: Evaluation of the Rethinking Power Program

The George Washington University, in collaboration with the Haitian NGO Beyond Borders, is conducting an evaluation of Beyond Border's program *Rethinking Power*. The evaluation will be conducted by the George Washington University's Global Women's Institute, led by Dr. Mary Ellsberg and Dr. Manuel Contreras and will take place over a four year time period beginning in late 2016. The evaluation will focus on how the *Rethinking Power* program impacts the lives of women and girls in the targeted area.

The program will be implemented in selected communities within LaValle Commune in the South East Department. A comparison commune will be selected from with the South East Department (Marigot or Bainet). This will allow us to evaluate the impact of the program in the implementation areas (La Vallee of Jacmel).

The Municipal Council of La Vallee commune approves and supports the evaluation of the Rethinking Power program in the Department, and consequently authorizes the research team to work in the La Vallee Commune and asks that everyone in the commune supports the team.

Do not hesitate to let us know if there are any questions or concerns.

Sincerely mister/madam we express our best sentiments.

For the Municipal Council.

Marie Yolaine Phillipeau  
Principal Mayor

Made in the Municipal Bureau of La Valle Commune of Jacmel, on the date 22<sup>nd</sup> August 2016



**REPUBLIQUE D'HAÏTI**  
**MAIRIE DE MARIGOT**  
**RUE DU PORT ET MAGLOIRE, PHONES : (509)-3659-5173/ 3772-1397 /3395-9417**  
EMAIL : [mairiemarigot\\_adm@yahoo.fr](mailto:mairiemarigot_adm@yahoo.fr)

*Marigot, le 25 Juillet 2016*

**À qui de droit,**

Objet:Évaluation de l'intervention du Programme Repanse Pouvwa

L'Université George Washington, en collaboration avec l'Organisation Non Gouvernementale Beyond Borders, se propose d'évaluer l'impact de l'intervention du Programme Repanse Pouvwa. L'institut Global Women (GWI) de la dite Université, dirigé par Dr. Mary Ellsberg et Dr. Manuel Contreras, se chargera de conduire l'évaluation qui s'étend sur une période de quatre années au moins à compter de la fin de l'année 2016. L'évaluation devra faire ressortir l'impact de l'intervention du Programme Repanse Pouvwa sur la vie des femmes et des filles dans les communautés d'intervention.

L'implémentation aura lieu dans des communautés de la commune de La Vallée de Jacmel dans le Département du Sud-Est. Une zone de comparaison sera sélectionnée au niveau du Sud-Est dans l'une des deux communes suivantes (Marigot ou Bainet). Ce qui permettra d'évaluer l'impact dans la zone d'intervention (La Vallée de Jacmel).

Le Conseil Municipal de la Commune de Marigot approuve et supporte le projet de l'évaluation de l'intervention du Programme Repanse Pouvwa dans le Département, par conséquent autorise l'Équipe de Recherche à mener ses travaux dans la Commune de Marigot, et demande à tout un chacun de la commune de supporter l'Équipe.

N'hésitez pas à nous faire part de toute question ou de tout souci.

Veuillez agréer Monsieur/Madame l'expression de nos sentiments les meilleurs.

Fait à Marigot, Le 08 Août 2016



**Translation – Site Permission Letter 3:**

**Republic of Haiti**  
**Mayoral Office of Bainet**  
**Carmagnole, Bainet**  
**Telephone number: (509)-37368651/ 48008316/ 38867295**

To whom it may concern:

Objective: Evaluation of the Rethinking Power Program

The George Washington University, in collaboration with the Haitian NGO Beyond Borders, is conducting an evaluation of Beyond Border's program *Rethinking Power*. The evaluation will be conducted by the George Washington University's Global Women's Institute, led by Dr. Mary Ellsberg and Dr. Manuel Contreras and will take place over a four year time period beginning in late 2016. The evaluation will focus on how the *Rethinking Power* program impacts the lives of women and girls in the targeted area.

The program will be implemented in selected communities within LaValle Commune in the South East Department. A comparison commune will be selected from within the South East Department (Marigot or Bainet). This will allow us to evaluate the impact of the program in the implementation areas (La Vallee of Jacmel).

The Municipal Council of Bainet commune approves and supports the evaluation of the Rethinking Power program in the Department, and consequently authorizes the research team to work in the Bainet Commune and asks that everyone in the commune supports the team.

Do not hesitate to let us know if there are any questions or concerns.

Sincerely mister/madam we express our best sentiments.

Done in Municipal Palace of Bainet , 26th August 2016

For the Municipal Council

Victor Dominique Clive MC CALLA - Principal Mayor



REPUBLIQUE D'HAÏTI

## MAIRIE DE BAINET

Carmagnole, Baint

Tél : (509) 37368651 /48008316/38867295

### A QUI DE DROIT

#### Objet: Évaluation de l'intervention du Programme Repanse Pouvwa

L'Université George Washington, en collaboration avec l'Organisation Non Gouvernementale Beyond Borders, se propose d'évaluer l'impact de l'intervention du Programme Repanse Pouvwa. L'institut Global Women (GWI) de la dite Université, dirigé par Dr. Mary Ellsberg et Dr. Manuel Contreras, se chargera de conduire l'évaluation qui s'étend sur une période de quatre années au moins à compter de la fin de l'année 2016. L'évaluation devra faire ressortir l'impact de l'intervention du Programme Repanse Pouvwa sur la vie des femmes et des filles dans les communautés d'intervention.

L'implémentation aura lieu dans des communautés de la commune de La Vallée de Jacmel dans le Département du Sud-Est. Une zone de comparaison sera sélectionnée au niveau du Sud-Est dans l'une des deux communes suivantes (Marigot ou Baint). Ce qui permettra d'évaluer l'impact dans la zone d'intervention (La Vallée de Jacmel).

Le Conseil Municipal de la Commune de Baint approuve et supporte le projet de l'évaluation de l'intervention du Programme Repanse Pouvwa dans le Département, par conséquent autorise l'Équipe de Recherche à mener ses travaux dans la Commune de Baint, et demande à tout un chacun de la commune de supporter l'Équipe.

N'hésitez pas à nous faire part de toute question ou de tout souci.

Veuillez agréer Monsieur/Madame l'expression de nos sentiments les meilleurs.

Fait au Palais Municipal de Baint, en date du 26 Août 2016

Pour le Conseil Municipal

Victor Dominique Clive MC CALLA  
Maire principal



**Annex 5: Available Referral Services for Survivors of Violence****Violence against women and girls referral list: LaValle, Marigot and Bainet****LaValle**

<b>Institution/ Organization</b>	<b>Services offered</b>	<b>Address</b>	<b>Contact Person (if applicable )</b>	<b>Hours of Operatio n</b>	<b>Pricin g</b>	<b>Contact number (if availabl e)</b>
Fanm Lakay	Accompaniment/ advocacy, emotional support	Mizak (Bonika)	Amide Milfort ki gen ti non madan yòyòl	7 days/wee k	Free	362854 46/474 79237
SOFA	Accompaniment/ advocacy, emotional support	Desplanti	Sonia Jean Louis	Monday through Friday	Free	
Mizak Health Post	Emergency, for sexual and physical violence they give referrals.	Mizak near entrance to the IPEF school	Nurse Dabady Odille and Nurse Mikaelle Jean Louis	7 days/wee k	Free	366741 97
Clinic of Paul Prevot	Maternal health/ labor and delivery. Referral to Jacmel Hospital.	Mizak II	Director of HR Clinic Director: Fabiola Chery	7 days a week	Fee for service	378029 74 363519 38
Fanm Deside/ LaValle cel	Receive complaints, Accompaniment/Advocacy, Emotional support	Mizak		7 days a week	Free	
Fanm Vanyan	Accompaniment/Advocacy & Emotional support	Mizak abitasyon lozye	Immacula Contant	7 days a week	Free	310595 13
LaValle Police Station	Receive reports	Ridore	Commissio ner Charmant and Inspector Duval Rosny	7 days a week	Free	222669 11



Mizak Kazèk's (local official that takes domestic violence complaints) office	Conflict resolution, referrals to police	Mizak Social Center (same space as Gov't School)	Tanius Frederik	Monday through Friday	Free	36187186
Loti Women's Organization (OFL)	Accompaniment/advocacy	Loti	Ladouceur Molène	Monday through Friday	Free	
LaValle Hospital	All health services	Ridore	Dr Luc Antoine/ Administrator: Claudette Payen	24/7	Small fee for consultation, etc.	36815531
Southeast Women in Solidarity/ Fanm Solidè Sidès (FSS)	Accompaniment/Advocacy & Emotional support	Jan Rabèl	Fabre Mirtha	Monday-Friday	Free	36337768
Volunteer Women's Association of Tif/ Asosyasyon Fanm Volontè tif (AFVT)	Accompaniment/Advocacy & Emotional support, and other community development activities	Tif	Fernande Bouguillon	Meetings each Monday	Free	37742082
Private clinic	Consultations, maternity, etc.	Tènye (Bouk 18)	Dr Africot	Monday through Friday	Fee for service	
Clinic and pharmacy	Sell medicines, take blood pressure, first aid	Tènye (Jan rabèl)	Dr. Antoine Joseph	7 days a week	Fee for service	
LaValle Mayor's office/ City Hall	Take community complaints	Ridore (nan mari)	Marie Yolène Philipo	Monday-Friday 9am-4pm	Free	37853500
Tènye Kazèk's (local official that takes domestic violence complaints) office	Conflict resolution, referrals to police	Tènye (Bouk 18)	Appolon Alexandre	Monday-Friday	Free	37402647

**Marigot:**

<b>Institution/ Organization</b>	<b>Services offered</b>	<b>Address</b>	<b>Contact Person (if applicabl e)</b>	<b>Hours of Operation</b>	<b>Pricing</b>	<b>Contact number (if available)</b>
Fanm Kibwo	Accompaniment of female survivors of violence Accompaniment /advocacy, shelter, emotional support, legal support	Marigot town	Pascal Carmelle	Monday through Friday	Free	
Fanm Vayan	Accompaniment /advocacy, emotional support, sometimes shelter, women's groups	Marigot town before the community bank Resous Konfyans	Rosenie Gustave	Monday through Friday	Free	
SOFA (Solidarity for Haitian Women)	Accompaniment /advocacy, emotional support,	Marigot town	Joceline Pierre	Monday through Friday 8am-4pm	Free	
Marigot health center	PEP, EC, STI medication, other medicines, health care, medical certificate provision	Marigot town below the police station before the "Konjirèl" beach		Monday through Friday 9am-4pm or 24/7, for emergency cases	Free	
Peredo (town) health post	First aid, with referrals to Marigot Health Center	By the Peredo Market		Monday through Friday 9am-4pm or 24/7, for emergency cases	Free	
Seguin (area) health post	First aid, with referrals to nearby doctors	Seguin town		9am-4pm	Free	
Seguin police outpost		Seguin town				
Marigot police outpost		By the main road in Marigot town				

Marigot mayor's office/ city hall		Left side of the bridge, Marigot town				
-----------------------------------	--	---------------------------------------	--	--	--	--

**Bainet**

<b>Institution/ Organization</b>	<b>Services offered</b>	<b>Address</b>	<b>Contact Person (if applicable)</b>	<b>Hours of Operation</b>	<b>Pricing</b>	<b>Contact number (if available)</b>
Benait mayor's office/ city hall	Community development	Benè (Kanponyòl)	Succès Widny, Macala	Monday-Friday 9am-4pm	Free	38867295
Benait Police Station	Receive reports	Benait town, behind the public plaza	Enspektè Agenord	24/7	Free	
Benait Health Center	First aid, some services. Referrals to LaValle.	Bawo	Dr Africot	7 days a week	Fee for service	
MOPLAB	Accompaniment /advocacy, emotional support	9th Section Habitation Gayaba	Madam Jean Gilles		Free	
Women's Peasant Movement/ Mouvman peyizan fanm	Accompaniment /advocacy, emotional support	9th Section of Kayanwond	Genecide Jeannot		Free	
KOFAB	Accompaniment /advocacy, emotional support	9th section of Koray Labe	Madam Paul Mireille fabien		Free	
OREK	Accompaniment /advocacy, emotional support	Benait town	Mamaille Jean Louis		Free	

**Annex 6: TOR for local survey consultant****TERMS OF REFERENCE***Impact Evaluation of the Rethinking Power Program in Southeast Haiti***Scope of Work**

The Local Partner will be responsible for the following activities:

<b>Program Description</b>	<b>Means of Verification of Activities</b>	<b>Milestones of Objectives</b>
<b>Objective 1:</b> To conduct the quantitative data collection for the Rethinking Power Impact Evaluation		<ul style="list-style-type: none"> <li>• Full master database, cleaned and completed with household and individual weights, in SPSS format</li> <li>• Codebook and questionnaire</li> </ul>
<b>Activity/Output 3.1:</b> Review and provide input on the research protocol (including research tools and consent forms)	<ul style="list-style-type: none"> <li>• Documents commented</li> </ul>	
<b>Activity/Output 3.2:</b> Provide input on the documents needed to obtain approval from the GW's IRB	<ul style="list-style-type: none"> <li>• IRB approval</li> </ul>	
<b>Activity/Output 3.3:</b> Hire and supervise local staff (fieldwork coordinators and enumerators)	<ul style="list-style-type: none"> <li>• Staff registrar</li> </ul>	
<b>Activity/Output 3.4:</b> Coordinate with GWI to organize 1 week trainings for all fieldworkers	<ul style="list-style-type: none"> <li>• Agenda for training sessions</li> </ul>	
<b>Activity/Output 3.5:</b> Work with GWI to pilot survey instruments	<ul style="list-style-type: none"> <li>• Household survey questionnaire reviewed</li> <li>• Girls Club survey reviewed</li> <li>• School-based self administered questionnaire reviewed</li> </ul>	
<b>Activity/Output 3.6:</b> Provide local staff with the necessary materials and transportation for survey implementation	<ul style="list-style-type: none"> <li>• Materials</li> </ul>	
<b>Activity/Output 3.7:</b>	<ul style="list-style-type: none"> <li>• Community maps</li> </ul>	

Provide technical input for the development of sample frames, including obtaining/developing maps and updating where necessary	<ul style="list-style-type: none"> <li>• Sample frame</li> </ul>	
<b>Activity/Output 3.8:</b> Conduct the community-based survey	<ul style="list-style-type: none"> <li>• 3000 households visited (including an estimated 20% non response rate) to conduct the community-based survey</li> </ul>	
<b>Activity/Output 3.9:</b> Conduct Girl's Club survey	<ul style="list-style-type: none"> <li>• 320 girls surveyed at their Girl's Clubs</li> </ul>	
<b>Activity/Output 3.10:</b> To Facilitate a self-administer school based survey at 6 schools	<ul style="list-style-type: none"> <li>• 720 completed self-administered questionnaires</li> </ul>	
<b>Activity/Output 3.12:</b> Provide weekly updates to GWI on the progress of data collection (including challenges faced)	<ul style="list-style-type: none"> <li>• Meeting minutes</li> </ul>	
<b>Activity 3.13:</b> Oversee translation, data entry, data cleaning, and processing of survey results	<ul style="list-style-type: none"> <li>• Database in SPSS format</li> </ul>	
<b>Activity 3.14:</b> Provide feedback on the final research reports.	<ul style="list-style-type: none"> <li>• Final reports</li> </ul>	
<b>Objective 2:</b> To conduct the qualitative data collection for the Rethinking Power Impact		<ul style="list-style-type: none"> <li>• Narrative report of activities</li> <li>• Data transcribed and translated into English</li> </ul>
<b>Activity/Output 4.1:</b> Review and provide input on the qualitative research protocol (including research tools and consent forms)	<ul style="list-style-type: none"> <li>• Documents commented</li> <li>• Meeting notes</li> </ul>	
<b>Activity/Output 4.2:</b> Provide input on the documents needed to obtain approval from the GW's IRB	<ul style="list-style-type: none"> <li>• IRB approval</li> </ul>	
<b>Activity/Output 4.3:</b> Hire and supervise local staff (fieldworkers)	<ul style="list-style-type: none"> <li>• Staff registrar</li> </ul>	
<b>Activity/Output 4.4:</b>	<ul style="list-style-type: none"> <li>• Agenda for training sessions</li> </ul>	

Coordinate with GWI to organize 1-2 day trainings for all fieldworkers		
<b>Activity/Output 4.5:</b> Coordinate with BB to identify and recruit participants	<ul style="list-style-type: none"> <li>List with number of participants (gender, age)</li> </ul>	
<b>Activity/Output 4.6:</b> Conduct a maximum of 26 FGDs (with community members) using participatory methods) and 30 in-depth interviews (with stakeholder) in 2 communes	<ul style="list-style-type: none"> <li>Photographs of participatory methods</li> <li>Interview sheets</li> </ul>	
<b>Activity/Output 4.7:</b> Transcribe and translate information into English	<ul style="list-style-type: none"> <li>Data transcribed and translated into English</li> </ul>	
<b>Activity/Output 4.8:</b> Provide feedback on final research reports	<ul style="list-style-type: none"> <li>Final reports</li> </ul>	

## Annex 7: Novo Foundation Grant



August 19, 2016

Sylvia Hzekilova  
Associate Director, Sponsored Projects  
The George Washington University  
2121 I Street NW  
Suite 601  
Washington, DC 20052

Grant ID: 16-02396

Dear Sylvia:

NoVo Foundation ("NoVo") is pleased to award The George Washington University with a Project Support grant in the amount of \$550,000.00 (the "Grant") for the period from October 1, 2016 to October 1, 2020 (the "Grant Period") in response to Global Women's Institute proposal "Rethinking Power (Research): Evaluating Impact of Community Mobilization Intervention to Prevent VAWG" and accompanying budget dated July 28, 2016 (the "Proposal"). This letter (the "Grant Agreement") summarizes the terms and conditions under which NoVo has awarded this Grant to you.

**Tax-Exempt Status.** You confirm that under the United States Internal Revenue Code of 1986 (the "Code"), The George Washington University is exempt from federal income tax under section 501(c)(3) of the Code and is not a private foundation within the meaning of section 509(a) of the Code. You also confirm that you are not a Type III supporting organization that is not "functionally integrated" as described in section 4943(c)(5) of the Code. If you have questions about what this means, please contact us. You agree to advise us immediately if there is any change in your organization's exempt status during the term of this grant.

**Use of Grant Funds.** You agree to use the Grant funds only for the activities and objectives described in your proposal, in furtherance of purposes that are consistent with your organization's tax-exempt status, and in a manner consistent with the terms and conditions of this Grant Agreement. Any funds not so used must be promptly returned to NoVo. You further agree that NoVo's Grant funds will not be used to influence the outcome of any public election or to support or oppose any candidate for public office.

**Notification of Key Personnel Changes.** The George Washington University will notify NoVo of any change in the staffing of any key position included (in whole or in part) in the budget submitted as part of The George Washington University's Proposal. NoVo retains the right to unilaterally revise the terms and conditions of this Grant Agreement if there is a change in the chief executive officer or other key position.

535 Fifth Avenue, New York, NY 10017 • 212.808.5400 • [novofoundation.org](http://novofoundation.org)

## **Annex 8: Curriculum Vitae of Dr. Manuel Contreras (PI)**

**Manuel Contreras-Urbina**

(202)400-0575 or (202)994-9394

E-mail: contrerasur@gwu.edu or manuelcu@gmail.com

---

### **QUALIFICATIONS SUMMARY**

Gender specialist with 20 years of national and international experience in gender and reproductive and sexual health research and programs. Areas of technical expertise include violence against women and girls (VAWG), social change in gender norms, men and masculinities and reproductive and sexual health (RSH). Specialization in formative and operational quantitative and qualitative research and in design, monitoring and evaluation (M&E) and management of evidence-based programs.

### **PROFESSIONAL EXPERIENCE**

**The George Washington University (GWU) - Research Project Director** 2014 – Present

Supporting the establishment of a robust portfolio of interdisciplinary research for the Global Women's Institute (GWI) and building a strong network of partners. Providing senior research services and technical leadership on gender equality, with an emphasis on VAWG.

Illustrative activities:

- Coordinate the research, the research uptake and the capacity building of some of the components of the program “What works to prevent VAWG in conflict and humanitarian emergencies” in collaboration with the International Rescue Committee (IRC). In particular, providing technical leadership to the study “Prevalence, forms and patterns of VAWG in conflict and humanitarian emergencies: a mixed-methods study in South Sudan”.
- Provision of technical support for VAWG studies in the Pacific Islands, Central America and the Caribbean.
- Develop a technical report for the World Health Organization (WHO) that identify indicators on VAWG for possible inclusion as part of the Post 2015 agenda
- Provide technical advice to different GWI research, programs and activities
- Contribute to the development of local capacities through lecturing and assessing student's products.
- Collaborate in the institution strategic planning process.
- Develop and teach the online course ‘Researching VAWG’.

**United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women) –**  
Programme Officer of the Sub-regional Office for Mexico, Central America, Cuba and Dominican Republic 2012 – 2014



Supervising and leading the development, execution, monitoring and evaluation and effective delivery of UN Women Programme/projects in Mexico, Central America, Cuba and Dominican Republic in accordance with UN Women global, regional and sub-regional strategic plans, rules and accountability framework.

Illustrative activities:

- Acted as Officer in Charge in the absence of the Office Director.
- Ensured programmatic and technical support and advice on issues related to women rights and gender equity as needed to governmental counterparts, non state actors and UN Agencies.
- Oversight the implementation of audit and evaluations programmatic recommendations.
- Coordinated the review of project proposals and strategic planning documentation to ensure that they are gender sensitive and conform to UN Women's funding requirements.
- Designed and implemented required research for formulating appropriate interventions, preparing TOR, identifying consultants, and providing appropriate guidance for project identification, formulation, monitoring, and evaluation missions.
- Ensured the proper application of a monitoring system to track progress on programmatic results and indicators.
- Led the designing and implementing monitoring frameworks for the SRO programmes including visits to project sites and discussion with project personnel.
- Supported the implementation of advocacy and resource mobilization strategies to achieve programmatic outcomes.
- Oversight of the production of knowledge products to meet UN Women's needs and standards of quality.

**International Center for Research on Women (ICRW) - Gender and Public Health Specialist 2009 – 2012**

Coordinating the strategic management and business development of the Gender, Violence and Rights portfolio. Programming and research services and technical leadership on gender, with emphasis on VAW and men and masculinities.

Illustrative activities:

- Coordinated the multi-country project International Men and Gender Equality Survey (IMAGES).
- Provided technical leadership on M&E of projects related to prevention of VAW such as the multi- country UN-WOMEN Safe Cities Global Programme in India, Rwanda, PNG, Ecuador and Egypt and the CARE Balkans Young Men's Initiative Program.
- Supported the building of capacities of in-country partners in the design and M&E of VAWG programs through the facilitation of trainings and the development of tools and curriculums.
- Coordinated country assessments of the situation of VAWG in Fiji, PNG, Solomon Islands, Vanuatu and Timor-Leste.
- Provided technical expertise to international organizations on the integration of gender on programs and in the analysis of data from a gender perspective.
- Supported the coordination of the MenEngage Alliance.

**United Nations Population Fund (UNFPA)- Research Collaborator 2006-2008**

Providing programming and research services in gender and population and development for the Country Support Team for Latin America & the Caribbean (CST-LAC).

Illustrative activities:

- Participated in technical assistance strategic missions in the area of men and masculinities in Peru, El Salvador, Costa Rica and Mexico.
- Developed a systematization of lessons learned and experiences gained produced by programs focused on men and masculinities supported by UNFPA in LAC.
- Supported the elaboration of UNFPA's global and regional strategic plans 2008-2011.
- Supported the programmatic process of UNFPA country offices reviewing and commenting programmatic reports as member of the Quality Assurance and Programme Monitoring Group.
- Supported the design and implementation of the tool guide "Analysis of the Situation on Population" as part of UNFPA's regional strategy in the area of population and development.
- Contributed to the development of a course certificate to consultants for their training in UNFPA's mandate and thematic areas.
- Conducted research from secondary data to support the development of strategic advocacy reports.

**United Nations Population Fund (UNFPA)- Research Assistant 1999-2000**

- Providing research services for CST-LAC including:
- Conducted demographic and statistical analysis of household and individual demographic and health surveys.
- Collaborated in the development of a book on the RSH situation of adolescents in LAC.

**National Autonomous University of Mexico (UNAM)- Research Assistant 1996-1997**

- Providing research services for the Institute of Economy (IIEc) including:
  - Conducted demographic and statistical analysis of household and individual economic surveys.
  - Collaborated in the development of a book on women and labour force in Mexico.

**CONSULTANT ASSIGNMENTS**

**Sexual Violence Research Initiative (SVRI) 2009**

- Developed the report *Sexual violence in LAC*.

**United Nations Population Fund (UNFPA) 2009 Regional Office for Latin America and the Caribbean**

- Reviewed baselines, targets, indicators and means of verification corresponding to Latin American and the Caribbean Regional Programme and Action Plan 2008-2011.

United Nations Development Fund for Women (UN-WOMEN) 2009 HQ Office

- Reviewed concept notes submitted by the UNCTs, cross-regional and country level applicants, as per the criteria and format developed by the United Nations Trust Fund to End Violence Against Women.

United Nations Population Fund (UNFPA) 2009 Mexico Country Office

- Developed the design of the National Strategy on prevention of dating violence in Mexico.

El Colegio de México 2002-2006

- Coordinated fieldwork of the study “Contraception, Abortion and Fertility Management”.
- Developed a report on the “men’s” section of the National Survey of Reproductive and Sexual Health 2003.
- Collaborated on the analysis of the RSH situation in Mexico. Elaborated an article based on a national survey of RSH for the population covered by the National Health Service conducted in 1998.

Loma Linda University 2004-2005-School of Public Health

- Coordinated research on Western male clients of sex workers in Thailand with implications for sexual violence and HIV.

## **EDUCATION**

2005 Ph.D. in Population and Health

London School of Hygiene and Tropical Medicine, University of London

Dissertation: “Conflict within intimacy: a socio-demographic analysis of male involvement in intimate partner violence in Mexico.”

1999 M.A. in Demography El Colegio de México

Thesis: “El comportamiento reproductivo de los varones. Un análisis a través de la perspectiva de género.”

1995 B.A. in Actuarial Science

B.A. in Mathematics

National Autonomous University of Mexico (UNAM)

Thesis: “Análisis socio-demográfico de la mujer profesionista”

## **AWARDS**

National Autonomous University of Mexico (UNAM)  
Research Fellowship, 2005  
National Council for Science and Technology of Mexico (CONACyT)  
Scholarship awarded for master and doctoral studies, 1997-2004  
Department for International Development (DFID)  
Grant doctoral research project, 2002  
El Colegio de México  
Grant doctoral research project, 2002  
Simon Population Trust  
Grant doctoral research project, 2001  
Parkes Foundation Trustees  
Grant doctoral research project, 2001

## SKILLS

Languages: Spanish (native). English (fluent). Portuguese (elementary).  
Computer proficiency: Microsoft Office. Statistical software: SPSS, STATA, CSPro. Qualitative methods software: Nudis\*t. Bibliographic databases software: Endnote, Refman. Enterprise Resource Planning software: Unanet, Atlas.  
Research: Quantitative, Qualitative and Participatory Methods.

## PUBLICATIONS

Contreras, J.M.; Heilman, B.; Von Au, A.K.; Hill, A.; Puerto-Gómez, M.; Zelaya, J.; Arango, D. (2016). *Community-based approaches to intimate partner violence: a review of evidence and essential steps to adaptation*. Washington, D.C.: The Global Women's Institute and The World Bank.

Murphy, M.; Arango, D.; Hill, A.; Contreras, J.M.; MacRae, M.; Ellsberg, M. (2016). *What works to prevent and respond to violence against women and girls in conflict and humanitarian settings? What Works to Prevent Violence*. UK: UKAid, The Global Women's Institute, International Rescue Committee.

Hill, A.; Contreras, J.M.; Backe, E. (2015). *School-based interventions to prevent violence against women and girls*. Open Square Summit: The Global Women's Institute.

Ellsberg, M.; Arango, D.; Morton, M.; Gennari, F.; Kiplesund, S.; Contreras, J.M.; Watts, C. (2014). "Prevention of violence against women and girls: what does the evidence say?". *The Lancet*. Series Violence against women and girls. DOI: 10.106/S0140-6736(14)61703-7.

Levtov, R.; Barker, G.; Contreras, J.M.; Heilman, B.; Verma, R. (2014). "Pathways to Gender-equitable Men: Findings from the International Men and Gender Equality Survey in Eight Countries". *Men and masculinities*. DOI: 10.1177/1097184X14558234.

Barker, G.; Verma, R.; Crownover, J.; Segundo, M.; Fonseca, V.; Contreras, J.M.; Heilman, B.; Pawlak, P. (2012). "Boys and Education in the Global South: Emerging Vulnerabilities and New Opportunities for Promoting Changes in Gender Norms". *Thymos. Journal of Boyhood Studies*. Vol 6. Issues: 1-2. USA: Men's Studies Press.

Betron, M; Barker, G.; Contreras, J.M.; Peacock, D. (2012). *Men, masculinities and HIV/AIDS: strategies for action*. Washington, D.C.: International Center for Research on Women (ICRW), Instituto Promundo, MenEngage Alliance, Sonke Gender Justice Network.

Contreras, J.M.; Heilman, B.; Barker, G.; Singh, A.; Verma, R.; Bloomfield, J. (2012). *Bridges to Adulthood. Understanding the Lifelong influence of Men's Childhood Experiences of Violence*. Washington, D.C.: International Center for Research on Women (ICRW) and Instituto Promundo.

Ellsberg, M.; Heilman, B.; Namy, S.; Contreras, J. M.; Hayes, R. (2012). *Violence Against Women in Melanesia and Timor-Leste*. Canberra, Australia: International Center for Research on Women (ICRW) and AusAID.

Contreras, J. M. (2011). *Sex Work and Life with Dignity: Sex Work, HIV, and Human Rights Program in Peru*. Case Study Series. Arlington, VA: USAID's AIDS Support and Technical Assistance Resources, AIDSTAR-One, Task Order 1.

Contreras, J. M.; Singh, A.; Heilman, B.; Barker, G.; Verma, R. (2011). "Connections between early childhood experiences of violence and intimate partner violence". *Early Childhood Matters: Hidden violence: protecting young children at home*. 116. The Hague, Netherlands: Bernard Van Leer Foundation.

Contreras, J. M.; Ellsberg, M.; Barker, G.; Husain, S. (2011). *UN Women Safe Cities Free of Violence Against Women and Girls Global Programme (2010-2015): Impact Evaluation Strategy*. New York: UN WOMEN.

Barker, G.; Contreras, J. M.; Heilman, B.; Singh, A. K.; Verma, R. K.; Nascimento, M. (2011). *Evolving Men: Initial Results from the International Men and Gender Equality Survey (IMAGES)*. Washington, D.C.: International Center for Research on Women (ICRW) and Instituto Promundo.

Contreras, J. M.; Bott, S.; Guedes, A.; Dartnall, E. (2010). *Sexual violence in Latin America and the Caribbean: A desk review*. Sexual Violence Research Initiative (SVRI), IPAS, UNFPA LACRO and PAHO.

Contreras, J. M. (2008). "La legitimidad social de la violencia contra las mujeres en la pareja. Estudio cualitativo con varones en la Ciudad de México". *Estudios sobre cultura, género y violencia contra las mujeres*. R. Castro; I. Cacique (Eds.). Cuernavaca, México. Centro Regional de Investigaciones Multidisciplinarias, Universidad Nacional Autónoma de México (UNAM).

Rushing, R.; Contreras, J. M. (2008). "Fatal attraction: a qualitative study of Western male clients of sex workers in Thailand". *Masculinidades: a lo que juegan los hombres*. J. C. Ramírez (Ed.). Guadalajara, México. Programa Interdisciplinario de Estudios de Género, Universidad de Guadalajara (UdeG).

González, S.; Contreras, J. M. (2008). "La violencia conyugal en la población derechohabiente del IMSS. Análisis de la ENSARE 98". *Salud Reproductiva y Condiciones de Vida en México*. S. Lerner; I. Szasz (Coord.). México, D. F. El Colegio de México.

Contreras, J. M. (2006). "El comportamiento reproductivo de los varones residentes en entidades federativas con altos niveles de marginación". *Ser padres, esposos e hijos: prácticas y valoraciones de varones mexicanos*. J. G. Figueroa; L. Jiménez; O. Tena (Eds.). México, D. F. El Colegio de México.

Guzmán, J. M.; Rodríguez, J.; Martínez, J.; Contreras, J. M.; González, D. (2006) “La démographie de l'Amérique latine et de la Caraïbe depuis 1950”. *Population*. Vol. 61. Núm. 5-6. France. INED.

Contreras, J. M. (2004). “El riesgo de ejercer violencia física contra la pareja: cuándo y por qué. Hallazgos de un estudio con varones trabajadores en la Ciudad de México”. *Género y Salud en Cifras*. Vol. 2. Núm. 2. México, D. F. Secretaría de Salud.

Guzmán, J. M.; Hakkert, R.; Contreras, J. M.; Falconier, M. (2001). *Diagnóstico sobre salud sexual y reproductiva de adolescentes en América Latina y el Caribe*. México, D. F. United Nations Population Fund (UNFPA).

Contreras, J. M. (2001). “Mujeres y hombres profesionistas y su participación laboral en los noventa”.  
*¿Esto es cosa de hombres? Trabajo, género y cambio social*. J. A. Cooper (Ed.). México, D. F. Programa Universitario de Estudios de Género (PUEG), Universidad Nacional Autónoma de México (UNAM).

González, M.; Rodríguez, H.; Contreras, J. M. (1997). *Impacto de la Crisis 1993-1995. Estadísticas sobre el mercado de trabajo femenino*. México, D.F. Instituto de Investigaciones Económicas (IIEC), Universidad Nacional Autónoma de México (UNAM).

## REVIEWER FOR:

*Asian Women*. Research Institute of Asian Women, Sookmyung Women's University, Seoul, Korea.  
*BMC International Health and Human Rights*. BioMed Central.  
*Demographic and Urban Studies Journal*. El Colegio de Mexico.  
*Global Health Action*. Umea Centre for Global Health Research.  
*Global Public Health Journal*. Taylor & Francis Group.  
*Health Policy and Planning Journal*. Oxford University Press.  
*Interagency Gender Working Group* publications.  
*International Journal of Masculinities Studies*. Autonomous University of Puebla.  
*International Journal of Men's Health*. Centre for Men's health. Leeds Metropolitan University.  
*Journal of Human Development and Capabilities*. Human Development and Capability Association.  
Taylor & Francis Group.  
*Public Health Reports*. U.S. Public Health Service.  
*Reports in Health Science*. Fundação de Ensino e Pesquisa em Ciências da Saúde, Distrito Federal Government, Brasil.  
*Reproductive Health Matters*. London, UK.  
*Social Science and Medicine*. Elsevier.  
*Studies in Family Planning*. Population Council.

**Annex 9: Sample Training Agenda**

<b>Day #</b>	<b>Topic(s)</b>	<b>Activities</b>
1	<p>Welcome</p> <p>Introduction to the Survey</p> <ul style="list-style-type: none"> <li>- Purpose</li> <li>- Phases of Study</li> <li>- Population and locations</li> <li>- Methods</li> </ul> <p>Overview of Training Objective and Agenda</p> <p>Introduction to VAWG.</p> <ul style="list-style-type: none"> <li>- Definitions and types.</li> <li>- Causes and consequences of VAWG</li> </ul>	<p>Presentation/lecture</p> <p>Q&amp;A</p> <p>Group exercises</p>
2	<p>Overview of ethical issues of research</p> <p>Introduction to consent forms, confidentiality and privacy.</p> <p>Review of and practice with questionnaires</p>	<p>Presentation/lecture</p> <p>Q&amp;A</p> <p>Group exercises</p>
3	<p>Review of and practice with questionnaires</p> <p>Introduction to supporting participants in distress</p>	<p>Presentation/lecture</p> <p>Q&amp;A</p> <p>Group exercises</p>
4	<p>Review of and practice with questionnaires</p> <p>Referral Mechanisms</p> <p>Review of interviewing skills</p>	<p>Presentation/lecture</p> <p>Q&amp;A</p> <p>Group exercises</p>
5	<p>Review of and practice with questionnaires</p> <p>Practical session- Practicing scenarios with participants in distress</p>	<p>Presentation/lecture</p> <p>Q&amp;A</p> <p>Group exercises</p>
6	<p>Review of Household Selection Methodology</p> <p>Review of consent forms, confidentiality, privacy and handling distress.</p> <p>Introduction to vicarious trauma and discussion on managing distress and psychosocial support</p>	<p>Presentation/lecture</p> <p>Q&amp;A</p> <p>Group exercises</p>

7	Field Piloting of questionnaires	Presentation/lecture Q&A Group exercises
8	Field Piloting of questionnaires	Field Work
9	Field Piloting of questionnaires	Field Work
10	Field Piloting of questionnaires	Field Work



## Annex 10: Training Materials – Identifying and supporting distressed participants



### X. Special considerations for interviewing trauma survivors

Based on materials provided by Liyam Eloul, MA, from the Center for Victims of Torture

### Supporting women reporting violence

- Your role as an interviewer is:
  - To record women's responses to questions
  - *Not* to provide counseling or advice
- However, it is important for you to understand and be able to identify potential signs of distress or retrauma and to be able to respond appropriately.
- ALWAYS contact your supervisor immediately if a respondent shows any signs of acute distress and refer to the referral pathway cards to contact the appropriate authorities

2

## Gathering information

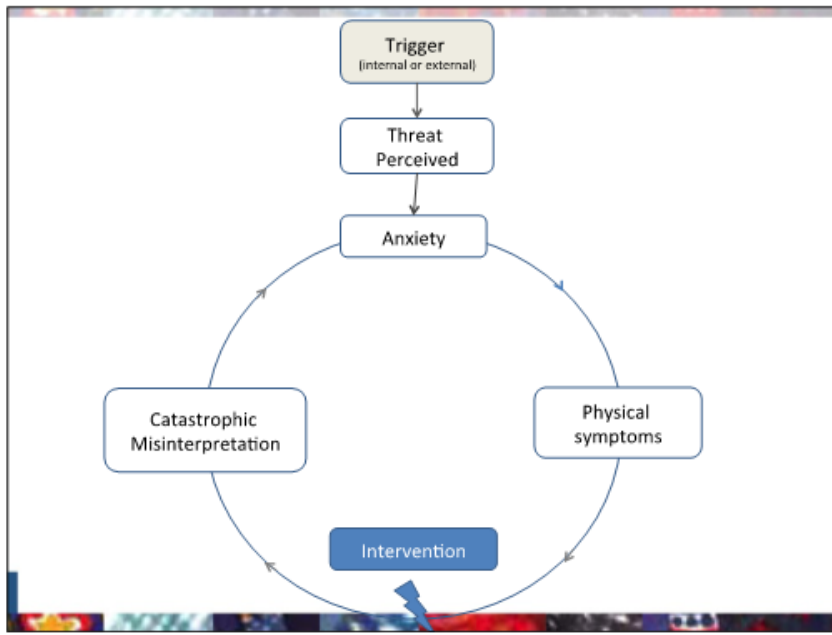
- Ask questions calmly and slowly. Don't insist.
- Be thoughtful about what you ask
- Let people talk at their own pace
- Many people begin by sharing a problem in behavior i.e. I have a headache, my child refuses to go to school. Ask for details.
- Be patient with the feelings that come up, encourage expression of feelings
- Stay calm
- Provide comfort and support

## SPECIAL CONSIDERATIONS

Triggers

Panic

Dissociation



## Hyperarousal and Panic Attacks

- Hyperarousal can present at different levels
  - From tense body, sweating, startle response up to panic
- The interviewer response to panic is appropriate for all levels of hyperarousal
- Panic attacks can be alarming to those who witness them because we feel helpless
- It is important to remember that they are **NOT** life-threatening, and they will pass
- We can help them pass faster and be less distressing
- Anyone can help a person recover from an acute panic attack
- The **MOST** important thing we can do is **stay calm**

## What is a Panic Attack?

- A sudden and repeated spike of arousal/fear that lasts for several minutes, up to an hour
  - Panic attacks rarely last longer because the body does not physically have enough energy to panic for that long
- It is a state of peak arousal caused by a flood of the hormones cortisol and adrenaline, released from the adrenal glands
  - Triggered by the mind preparing for a false fight or flight mode due to perceived danger (real or not)
- Can be connected to flashbacks or re-experiencing of trauma
- Many panic attacks don't have a clear cause or the person panicking is not consciously aware of what the cause is
  - Because of this, determining the cause may not be realistic: If the person doesn't know why, take their word for it. DO NOT CONTINUE ASKING

## Primary Symptoms of Hyperarousal

- Palpitations or chest pain
- Racing heart rate
- Hyperventilating
- Headaches
- Backaches
- Trembling
- Tingling in fingers or toes
- Sweating
- Dry mouth
- Difficulty swallowing
- Dizziness/lightheadedness/feeling faintness (this is usually from hyperventilating)
- Nausea
- Abdominal cramping
- Hot flashes or chills
- Fainting is possible

\*It is important to note that the signs and symptoms of a panic attack can be similar to those of a heart attack, and emergency medical help may be necessary if the person has no history of panic attacks, has a history of heart disease (or asthma) and if the symptoms continue without changing for over 10 minutes\*

## Steps to Help

- **Step 1: End the interview and get help!**
- If the respondent becomes distressed, ask if he/she would like to stop for a while, get a glass of water to calm down, or end the interview. If he/she becomes shows signs of having a panic attack, hyperarousal, or dissociation, **call your supervisor and ask for help.** In the meantime, you can take the following actions to help the person calm down.
- **Step 2. Help the person feel safe.**
  - Get down so that you are in their line of sight, and do NOT stand over them as this may feel threatening and triggering
  - Say: "It seems like you are having a panic attack. I know you are scared, but you are safe. It will be over soon, I am [we are] here for you."
- **Step 3: Ground them.** Speak in a calm, firm, reassuring manner, cue them that they are ok, and where they are
  - Touching the person in a calm way may also be appropriate (not patting, not restraining). You can ask them to focus on the feeling of your hand on their arm. Use your judgment whether this is appropriate for the respondent.
    - If the person has a history of abuse or interpersonal torture, do NOT touch them.
  - Many panic attacks can be accompanied by feeling hot, especially around the neck and face. A cold object, like a wet washcloth, can often help reduce this symptom and ground the person.
- Optional: Suggest an activity that can help them focus. This can be something as simple as lifting their arms up and down. Once they start getting tired (or bored with the repetitiveness), their mind will be less focused on the panic.

## Steps to Help

- **Step 4: Help them Reality-Check**
  - Asking the question in a calm and neutral way "Are you reacting to what's going on right now or to something in the past?" may help the client organize his or her thoughts enough to recognize flashbacks versus immediate danger signals.
    - Listen and accept whatever answer is given, even if you suspect differently.
  - If their fears are not grounded in reality and they're reacting to the past, providing some specific reality checks can help, such as having them focus on your face or on the colors in the room.
  - **Do NOT pressure the client.** We want to MINIMIZE stress levels: This is not the time to force the client to come up with answers or to do things that will make their anxiety worse. Don't insist they figure out what caused their attack. Listen supportively and don't judge.
  - **Do not dismiss their fears.** Saying things like "there's nothing to worry about," or "it's all in your mind," or "you're overreacting" will make the problem worse. The fear is very real to them at that moment, and the best you can do is help them cope.

## Steps to Help

### Step 5: Encourage them to try to control and slow their breathing

- Regaining control of their breathing will help reduce symptoms and will shift the somatic signals being sent to the brain, which will help calm the client down. Many people hyperventilate (take short, rapid breaths) when they are panicking, and some people hold their breath. This reduces the oxygen intake which will cause the heart to race.
  - Try asking the individual to breathe in and out on your count. Do not make a dramatic shift. Start your count just a little bit slower than how they are currently breathing, and keep slowing it down. For example, begin by counting aloud, encouraging the individual to breathe in for 2 and then out for 2, gradually increase the count to 4 and then 6 if possible until their breathing has slowed down and is regulated.
  - Get them to breathe in through the nose and out through the mouth, using the flower-candle exercise.
  - If available, you can ask them to breathe into a paper bag. This should be done by alternating 10 breaths into and out of the bag, followed by breathing without a bag for 15 seconds. It is important not to overdo the bag breathing in case carbon dioxide levels rise too high and oxygen levels fall too low, causing other more serious medical problems.

## Steps to Help

- **Step 6: Do NOT leave them alone.** Stay with them until your supervisor has arrived and/or they have recovered from the attack. Never leave someone who is struggling to breathe. Even if you do not feel helpful, know that you are a sense of distraction for the client. If they were left alone, all they would have is themselves and their thoughts and it would be harder to get out of the cycle of adrenaline release. You just being there is helpful to keep them grounded in the real world.
- **Step 7: Wait it out.** Though it may seem like a long time (to you, but especially to the individual), the episode *will pass*. General panic attacks tend to peak at around 10 minutes and get better from there on a slow and steady decline. Be patient and remain calm. Normalize afterward.
  - It is important to empower the client by helping him/her focus on his/her resilience and capacity to recover from the experience. Say: "I know that that was a very frightening experience, but look how well you were able to manage it and calm yourself down."

## Dissociation

- The major characteristic of all dissociation is that it is a detachment from reality
  - Range of experiences from mild detachment from immediate surroundings to more severe detachment from physical and emotional experience
  - In mild cases, dissociation can be regarded as a coping mechanism or defense mechanisms in seeking to minimize or tolerate stress, often due to triggers
- Can be related to the re-experiencing cluster of PTSD symptoms
  - The Individual may be experiencing a flashback or intrusive memory

## What does dissociation look like?

- Client will often lose focus in eyes, appear to be elsewhere or lost in thought
- Client's body might become rigid or tense without apparent reason
- Client might become unresponsive to verbal cues



## Steps to Help

- **Step 1: Call your supervisor and ask for help.** Inform the individual that your supervisor is nearby and will help get him/her professional support.
- **Step 2: Help them Reality-Check**
  - Asking the question in a calm and neutral way: "Are you reacting to what's going on right now or to something in the past?"
    - This may help the client organize his or her thoughts enough to recognize flashbacks versus immediate danger signals.
- **Step 3: Reorient them to current environment**
  - Speak in a calm, firm, reassuring manner, cue them to where they are in reality (e.g., "you are in the IRC office in the Juba POC Camp, it is March 1, 2016")

## Steps to Help

- **Step 4: Ground them using sensory cues**
  - Ask them to find three things of a certain color in the room
  - Ask them to put their hand on something cool (e.g., a metal part of a chair) or rub their feet against the floor
  - If they are not responding to your voice, use a different sensory cue
    - Try to move your face into their line of vision, if this is not possible, slowly put a hand in their line of vision
    - Gently touch their arm
    - Drip a little cool water on their hand
    - Spray some perfume in the room



## Review and Decision Flow

- If you see **low-level** symptoms and suspect trauma but the person is able to complete the interview, refer the person to the support services on your referral pathway card and inform your supervisor immediately.
- If you see **medium-level** symptoms but are able to use the skills we have reviewed to help the person maintain in the interview, call your supervisor to help assess the situation, and call the 24 hour IRC hotline to speak to the case manager on call for guidance.
- If you see **high-intensity** symptoms which prevent the person from being able to complete the interview, STOP, call you supervisor and the 24 hour IRC case manager, and make arrangements for the individual to be referred urgently to the appropriate services (IRC, Juba Teaching Hospital, local NGO, Police, etc.)

## CONDUCTING QUALITATIVE INTERVIEWS FOR SURVIVORS OF VIOLENCE

### STRATEGIES FOR MINIMIZING RETRAUMATIZATION

## General Principles

- Interviews in which a torture or war trauma victim recounts the events of his/her abuse are extremely stressful for the victim.
  - Potentially retraumatizing; sometimes cannot be prevented or avoided, only minimized and managed
  - Want to make the interviews as empowering for the client as possible, giving them control, choice and the ability to set comfortable boundaries
- Listening to accounts trauma can be very stressful for the interviewer as well. There is strong potential for secondary traumatization.
  - Self-care is vital
- It often takes multiple sessions with a torture or war trauma survivor to establish rapport and to elicit a complete history.

## General Principles

- Variability in the degree of physical and psychological signs, symptoms, or consequences trauma survivor will manifest
- Variability in behavior of trauma survivors in interviews and in recounting their abuse
  - From extremely emotional to calm and detached
- Variability in the amount and detail of information that trauma survivors will recall with regard to the events of the trauma
  - Trauma memory, loose sense of time and place

## Barriers to Communication: Environmental

- Lack of privacy
- Comfort of interview setting
- Inadequate time for the interview
- A physical setting that emphasizes differences in power and control between the interviewer and survivor, such as the interviewer sitting behind a big desk or using a higher chair
- Other aspects of the environment that may be reminiscent of the torture experience, such as bright lights or having to wait a long time before seeing the interviewer or seeing uniforms/guards

## Barriers to Communication: Physical

- Pain or other discomfort the survivor may be experiencing as a result of his/her abuse, such as difficulty sitting for long periods of time
- Fatigue
- Sensory deficits, such as partial blindness or deafness
- Head trauma and closed head injuries (brain injuries) have a very high prevalence in refugee and torture survivor populations

## Barriers to Communication: Psychological

- TRAUMATIC MEMORIES ARE STORED IN THE BRAIN PRIMARILY AS FRAGMENTS OF SENSATION, NOT ORGANIZED WORDS
- Lack of trust
- Lack of hope
- Symptoms of Post-traumatic Stress Disorder and Depression, such as flashbacks, avoidance of traumatic memories, fear/anxiety, excessive guilt, inability to recall important aspects of the trauma, etc.
- Cognitive deficits, such as attention/concentration difficulties and memory lapses (these are also part of PTSD and Depression)
- Shame (central to the torture experience)
- Fear of being overwhelmed/flooded with painful memories/feelings

## Barriers to Communication: Sociocultural

- Cultural issues
- Language issues, especially appropriateness and accuracy of interpreter
- Interviewer's age, gender, social class, ethnicity, nationality, etc. Gender is particularly important for survivors of sexual violence.

## Introduction & Building Rapport

- Providing Information: Explaining your role and the process/goals of the interview; Explaining relevant aspects of the the informed consent procedures, as outlined in the protocol; Clarifying information that needs to be obtained; Negotiating priorities, such as issues regarding time limitations; Encouraging questions; emphasizing that the interview is completely voluntary and he/she can end the interview at any time, and can skip any question he/she does not want to answer, with no explanation.
- Handling Emotions: Opening the interview and greeting the survivor in a respectful manner, being sensitive to cultural issues; Recognition/ acknowledgment of the difficulties of talking about what happened; Giving the survivor as much of a sense of control as possible, such as asking if he/she is ready to begin and giving permission to withhold information he/she is not ready to divulge
  - Examples: “We don’t have to talk about it all today.”
    - “We’ll talk about it for these reasons: x, y, z”
    - “We’ll decide together how much to talk about it.”
- Gathering Information: Detecting and addressing barriers to communication

## Eliciting the Story (qualitative interviews)

- Providing Information: Minimal clarifications as needed
- Handling Emotions: See above (recognize, acknowledge, empathize, validate, normalize, etc.). Check-in with the survivor and allow emotional breaks. If the survivor bursts out with the story in a pressured way you may need to help moderate the pace. If the survivor is struggling with re-experiencing the trauma during the interview, it can be helpful to redirect him/her, to remind a survivor of the immediate circumstances and contrast these with what they have survived.
- Gathering Information: Establish a narrative thread by allowing the survivor to tell the story in his/her own words, initially with as few interruptions as possible. Use open-ended questions. Asking specific questions too early in the interview may bias the information received or shut the survivor down – consider: why would they want to tell you if you communicate that you already know or that you’ve already drawn your conclusions? Gently inquire into past trauma and avoid going into unnecessary detail. Offer to rephrase difficult or confusing questions.

## Concluding the Interview

- Providing Information: Explaining the subsequent process; Making appropriate referrals or giving relevant instructions/expectations
- Handling Emotions: Provide closure: *Do not let a survivor walk away with open emotional wounds from an interview.* Leave enough time at the end to talk about non-traumatic topics and allow the survivor to compose him/herself and make the transition back into the present. Recognize/acknowledge that it may be difficult to talk about the past and then go back out into the world: check-in as to whether the survivor is O.K., has somewhere to go or someone to be with, etc. Validate and normalize the manner in which the survivor conducted him/herself during the interview (e.g., “it is normal and understandable to be upset about these things”). Communicate your respect for the humanity of the interviewee, regardless of your opinions or the probable outcome of the interview.
- Gathering Information: Elicit further information and questions. Clarify whether there is anything else the survivor wishes you to know.

Children

## SPECIAL CONSIDERATIONS

## Core Concepts of Interviewing Children

- Create a comfortable, safe-feeling environment
  - Facilitates communication
  - Interviewer wants to avoid creating anxiety in the child
- Be aware of implicit signs of authority
  - Children do not respond well to direct questioning
  - Do not sit directly face-to-face with the child; sit beside the child or at an angle
  - Get on child's level; do not sit above them
  - Match the child's body language to appear less threatening
  - Parallel activity softens the directness of the conversation and can elicit more information
    - E.g., drawing while talking, playing with Legos, etc.
- Taking language development and developmental stages into account
  - Use open-ended questions that are short and direct
  - Use concrete concepts
  - Use active listening which validates child's perspective and is not judgmental
  - Maintaining cultural awareness

## Children and Trauma

- Traumatized children experience an increase in emotion, agitation, and have difficulty trusting others
- Trauma in children often causes behavioral regression
  - Children begin acting younger than their age
- Common feelings of helplessness, powerlessness, anxiety, and distress lead to social isolation and difficulty communicating
  - Withdrawn or aggressive
- When interviewing a child who has been traumatized, it is therefore important to recognize and build upon the child's strengths
  - Clear, fact-based questioning
  - Baseline of easily-answered, factual questions allows a child to gain confidence in his/her answers and increases willingness to answer future questions
- Rapport to elicit honesty



## **PREVENTING AND MANAGING VICARIOUS TRAUMA**

STRATEGIES FOR RESEARCHERS AND FIELDWORKERS

1

### **Individual Strategies for Responding to Vicarious Trauma**

- Maximise collegiality and support from colleagues to avoid isolation.
- Plan workload, allowing space and time in between exposure to traumatic materials.
- Adopt a healthy lifestyle to ensure physical wellness (diet and exercise).
- Learn about the topic of the research and explore one's own personal attitudes towards victims and perpetrators.
- Reflect on personal experiences with the topic.
- Find the 'humour' in situations to alleviate stress and tension.
- Know that this work will affect researchers and learn how to identify early warning signs of vicarious trauma and emotional distress.
- Know that this is a normal reaction to doing work on traumatic material.
- Develop and employ self-care strategies, including personal debriefing and safety plans

2



## Training Scenarios – Identifying and supporting distressed participants

### *Facilitator Guidance for Exercise*

Practice: How to Help Survivors in Distress

Note: This exercise is to be completed after the training on “How to help Participants who Experience Distress” has been reviewed with data collectors/field workers.

#### *Preparatory Work:*

- Members of the facilitation team will be leading each small group – in preparation for the day give each small group leader a copy of each of the scenarios and practice them as a group

#### *Instructions for Day:*

- *Introduce the Session:*
  - “In this session, we are going to practice what you learned during the previous session on how to identify participants who appear to be upset or in distress during the interview. We are going to now break into small groups and practice the following materials. For each scenario, your small group facilitator will ask that one group member volunteers to act as the interviewer – your facilitator will act as the person being interviewed. Remember that this is a learning experience and that we are all learning together.”
- Instruct the participants to break into small groups
- Make sure each small group facilitator has the scenario guide and debriefing key points
- Have a data collector volunteer to conduct the interview
- Have the data collector begin administering questions. Pretend they are already in the middle of the survey (having already completed the consent process and the first sections of the questionnaire). Have the data collector use Sections 3 (Relationship with her husband/partner) and Section 4 (Other experiences during lifetime) for this practice exercise.
- Small group facilitators debrief after each session using the key points in the scenario guide
- Small group facilitators have the relaxation exercise sheet with them

---

### *Scenario Guide*

*Note: The scenarios presented here are for the small group facilitator. They should not be read aloud to participants.*

#### *1. Practice Session 1 – Crying*

*Small group facilitator: “In this role play, we will learn how we can help a participant when they begin to cry.”*

*Scenario:* During the course of the interview, the participant (small group facilitator) begins to cry. After the data collector has completed about a page of the questionnaire, the participant should begin to cry. He/she should continue answering questions while crying until the interviewer intervenes.

#### *Key Points for Debrief:*

- Always remain calm.
- If the participant begins to cry the interview should be paused.
- Offer a tissue or cloth
- Offer to step outside or allow the participant to go to another room to collect herself
- Speak in calm tones and acknowledge that they may be feeling some distress.
- Offer to conduct a relaxation exercise with the participant.
- Ask if the participant would like to continue the interview – you may offer to come back later if the participant would like more time to consider if she wants to continue
- If the participant gives permission to continue, check in again after a few questions and confirm that the interview is ok and would still like to continue
- If the participant begins to cry again repeat the same procedure
- If the participant begins to cry uncontrollably and is not comforted after a break of 5 minutes – get your supervisor to bring in additional support

#### *2. Practice Session 2 – Hyperarousal and Panic attacks*

*“In this role play, we will learn about some of the signs that someone with mild hyperarousal might experience and the steps that we can take to help them.”*

*Scenario:* During the course of the interview, the participant (small group facilitator) presents signs of mild hyperarousal. For this scenario – the participant is only experiencing a minor case of hyperarousal and not a full panic attack. As such, start adding in your reactions slowly. After a number of questions are asked, start presenting some signs of hyperarousal such as:

- Tense your body
- Tingling in fingers/toes (shake your finger and toes as if they are feeling tingling)
- Trembling
- Headaches (start touching and rubbing your forehead)
- Nausea
- Dizziness

*Key Points for Debrief:*

- The data collectors should always remain calm.
- Review the primary symptoms of hyperarousal;
  - Palpitations or chest pain
  - Racing heart rate
  - Hyperventilating
  - Headaches
  - Backaches
  - Trembling
  - Tingling in fingers or toes
  - Sweating
  - Dry mouth
  - Difficulty swallowing
  - Dizziness/lightheadedness/feeling faintness (this is usually from hyperventilating)
  - Nausea
  - Abdominal cramping
  - Hot flashes or chills
  - Fainting is possible
- If these symptoms are seen or suspected, immediately stop the interview and check in with the participant.
- Help the person feel safe - ask if they are alright, need to step outside for fresh air, or would like a glass of water.
- Speak in a calm, firm, reassuring manner, cue them that they are ok, and where they are
- Make eye contact
- Make sure that you are at eye level and that you are not standing over them, as this can lead to making them feel unsafe
- Offer to conduct a relaxation exercise with the participant (use the handout provided to guide them through one).
- Ask if they would like you to call for a supervisor for additional support
- If the symptoms are mild and pass after a break in the process, you can continue the interview if permission is given by the respondent.
- If the participant gives permission to continue, check in again after a few questions and confirm that the interview is ok and would still like to continue
- If the symptoms re-emerge, stop the interview and get help from you supervisor. Do not complete the interview.

### *3. Practice Session 3 – Hyperarousal and Panic attacks*

*“In this role play, we will learn about some of the signs that someone with a full panic attack might experience and what we can do to help them.”*

*Scenario:* During the course of the interview, the participant (small group facilitator) has a full panic attack. After a number of questions are asked (at least 2 pages of the questionnaire), the participant has a panic attack – including hyperventilation, shaking, and dizziness for several minutes.

*Key Points for Debrief:*

- The signs of a panic attack are similar to those of hyperarousal but more extreme
- Panic attacks are not life-threatening, and they will pass

- The most important thing to do is stay calm
- If these symptoms are seen immediately stop the interview
- Help the person feel safe – offer to take them to the office or nearest service provision point (see your local referral pathway)
- Get down so that you are in their line of sight, and do NOT stand over them
- Acknowledge that they are having a panic attack and tell them it will be over soon and that you are there to support them.
- Ground them- Speak in a calm, firm, reassuring manner, cue them that they are ok, and where they are
- Offer to get water or a cool towel, make sure that they are ok with you leaving them alone. Otherwise, wait until the panic attack subsides to get it for them.
- Suggest an activity that can help them focus – such as lifting their arms up and down
- Speak in a calm, firm, reassuring manner, cue them that they are ok, and where they are
- Ask if they are reacting to what's going on right now or to something in the past
- Listen and accept whatever answer is given
- Do not pressure the participant
- Do not dismiss their fears
- Encourage them to try to control and slow their breathing
- Call your supervisor immediately and ask that a Social Worker is sent for to bring in additional support
- Do not restart the interview. Wait with them (or have your supervisor wait) until the Social Worker arrives.

#### *4. Practice Session 4 – Dissociation*

*“In this role play, we will learn about some of the signs that someone with dissociation might experience and what we can do to help them.”*

*Scenario:* During the course of the interview, the participant (small group facilitator) experiences dissociation. After a number of questions are asked (at least 2 pages of the questionnaire), the participant experiences dissociation:

- Lose focus in eyes, appear to be elsewhere or lost in thought
- Body becomes rigid or tense without apparent reason
- Becomes unresponsive to verbal cues

*Key Points for Debrief:*

- Stay calm
- Call for your supervisor immediately to bring in additional support.
- Help the participant reality-check – ask in a calm and neutral way if they are reacting to what's going on right now or to something in the past
- Reorient the participant to current environment - Speak in a calm, firm, reassuring manner, cue them to where they are in reality
- Ground them using sensory cues
- If they are not responding to your voice, use a different sensory cue
- Remain with the participant until the Social Worker arrives.
- Do not restart the interview.

#### *5. Practice Session 5 – Avoidance*

*Scenario:* During the course of the interview, the participant (small group facilitator) begins to avoid answering the questions that they are asked. After a number of questions are asked (at least 1 page of the questionnaire), the participant who experiences avoidance:

- Begins discussing something unrelated to the question
- Disengages from the interview (gets more easily distracted or finds other ways to change the topic)
- Gets up abruptly after a question is asked and says they need to tend to something

*Key Points for Debrief:*

- Stay calm
- Offer to step outside or allow the participant to go to another room to collect herself
- Speak in calm tones and acknowledge that they may be feeling some distress and that this is a normal reaction.

- Ask if the participant would like to continue the interview – you may offer to come back later if the participant would like more time to consider if she wants to continue
- Remind the participant that they can choose to not answer any question that they find too uncomfortable to discuss
- If the participant gives permission to continue, check in again after a few questions and confirm that the interview is ok and would still like to continue
- If participant begins to show signs of avoidance again, stop the interview and inform the participant that you are going to call for your supervisor to bring in additional support.

*Closing:*

Ask if anyone has any questions. Facilitators should communicate that this exercise could be difficult/challenging and to end on a positive note a quick relaxation exercise will be done to wrap up the session (facilitators choose a relaxation exercise from the list and guide data collectors through it).