# Using End-line Evaluations to Measure the Added Value of Gender Transformative Approaches

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#### **Overview of Presentation**

- Overview of Framework Program and its Learning Question
- Quantitative Process
- Lessons for Programming
- Challenges
- Lessons learned for M&E
- Questions about the role of learning



#### **Overview of Framework Program**

"Claiming Rights - Promoting Gender Equality:
Women's Empowerment and male engagement for
gender transformation in post-conflict and
chronically food-insecure settings"

Ethiopia, Nepal, Uganda 2013-2015

Funded 80% by ADA, 20% by CARE Austria

Phases I and II ran from: 2007-2009 and 2010/2012 in Burundi, Uganda,

Nepal under the name "Claiming Rights – Promoting Peace: Women's

Empowerment in conflict-affected countries



#### Result Areas for Framework Program Phase III

ER 1 – "AGENCY": Women have equitable access and control over production assets to ensure their livelihood security

ER 2 - "RELATIONS": Transforming key socio-cultural norms, relations, attitudes of women, men, girls and boys for gender equality

ER 3 - "STRUCTURE": Meaningful representation & Participation of women at all levels

ER4 Research, Learning and International Advocacy Component

Previous phases had separate results for psychosocial outcomes and advocacy outcomes



#### Framework Program Cross-Country Learning Agenda

Meant to foster learning across COs and partner organizations

#### •Budget:

- time of 3 Technical Advisors from CARE Austria at various percentages;
- small additional budget to support one learning conference and support to CI publications
- •Kick-Off Meeting in June 2013



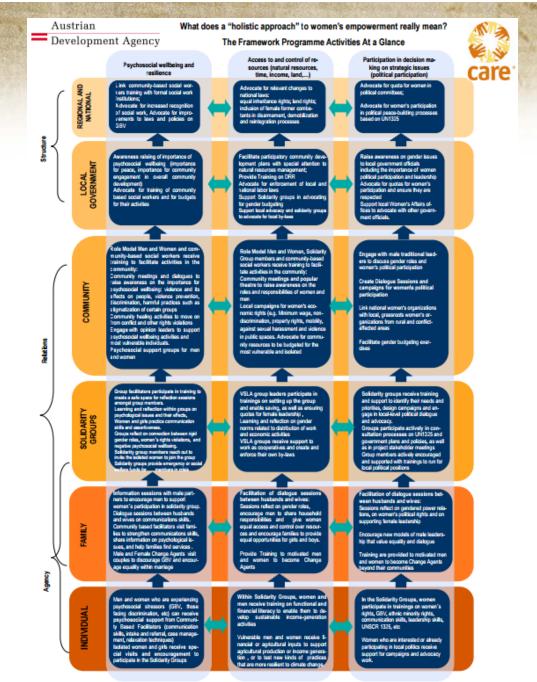
# Framework Program Cross-Country Research and Learning Question

"What are the synergies between different interventions within the holistic model for women's empowerment, particularly focusing on engaging men and boys for gender equality and psychosocial interventions and their improvement and scale-up?"



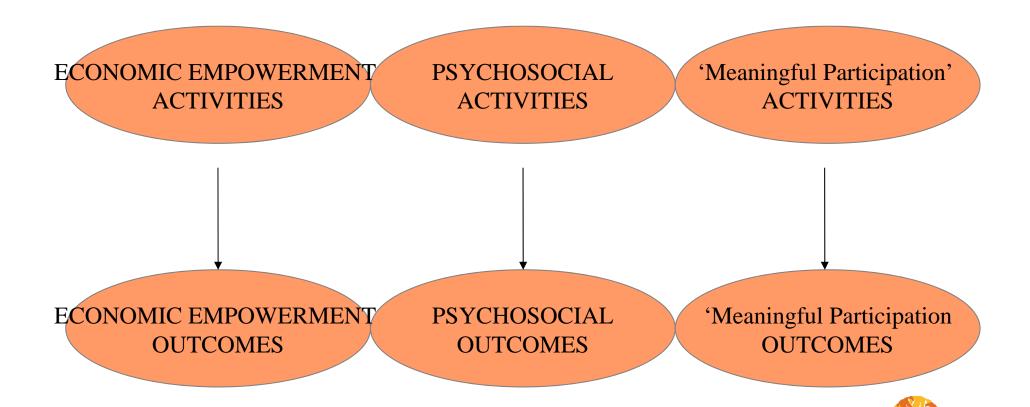
#### **PROCESS: What we did**

- Definition of "holistic model"
- Breaking down further the learning question
- Qualitative techniques to explore question initially
- Literature review to see value added
- Baseline and Endline data: looking for opportunities

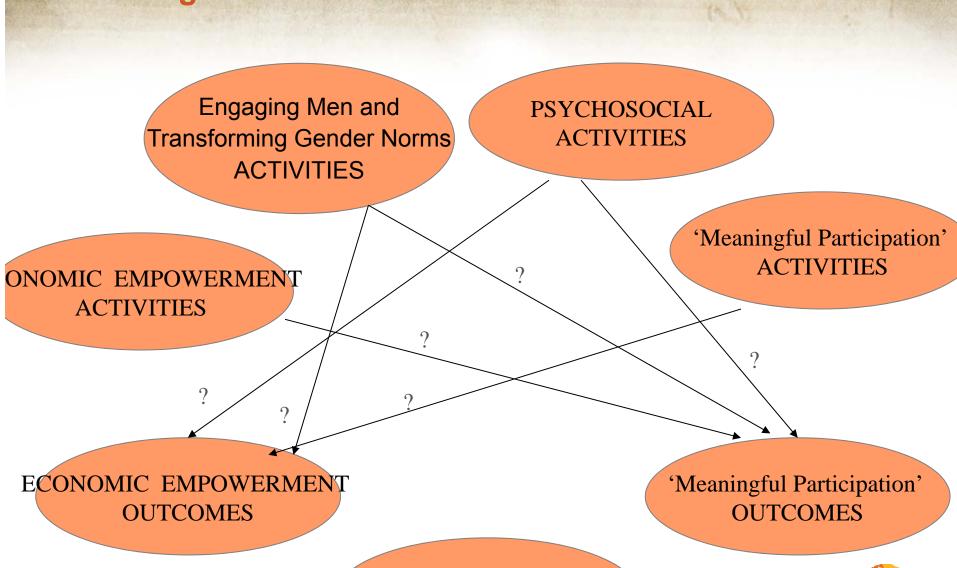




#### **Traditional logframe approach**



#### **Learning Sub Questions**



PSYCHOSOCIAL OUTCOMES



#### **Qualitative: Some Lessons Learned on Process**

- •FGDs with partner staff confirmed sense of interrelated aspects of holistic approach
- •Challenge to get documentation to the level needed for publications, of rich detail from focus group discussions
- Most Significant Change process: very time consuming and hard to document or follow up on learning that came out; often got confused with "Human Interest Stories"
- •However, many of the "human interest stories" (whether called MSC or not) demonstrate without meaning to, the synergies between different interventions of the holistic approach... likely because staff have been trained to be very thorough and get a lot of information from the participant



#### Quantitative: What we did

- •External consultant to look at baselines/endlines from previous phases and give recommendations
- •Learnings:
- Some Baseline/endline general comparisons without controlling for differences in samples
- Some Endlines not distinguishing outcomes for participants vs non-participants
- Even when above happens, not controlling for sociodemographic differences between participants and non-participants
- After this, we did a "dry run" on the Nepal Phase II endline dataset to see what kinds of conclusions could be found within that would answer the learning question



#### Misleading Figures...

	Near target	ted wards	Within targeted wards		
Education of Respondent	Female (%)	Male (%)	Female (%)	Male(%)	
	%	%	%	%	
Illiterate	28	24	72	76	
Simple literate	26	27	74	73	
Completed primary level of education	25	27	75	73	
Completed their school education level	39	38	61	62	
Completed Grade 12	48	47	52	53	
Studied/completed higher education	68	59	32	47	



#### **RESULTS**

#### COLORS/ LINKS

**ACTIVITIES** 

STATISTICALLY STRONG POSITIVE (99%)

STRONG NEGATIVE

STATISTICALLY WEAK POSITIVE (95%)

**WEAK NEGATIVE** 

**OUTCOMES** 



#### **Misleading Figures...**

#### Raw

DOLITICAL VALUES	WON	1EN	MEN		
POLITICAL VALUES	TREATMENT	CONTROL	TREATMENT	CONTROL	
ACTIVEELECTIONS	0.95	0.95	0.95	0.92	
PASIVEELECTIONS	0.97	0.96	0.98	0.96	
CANTGOSCHOOL	0.09	0.22	0.09	0.19	
CANTDECIDE	0.09	0.16	0.09	0.14	
MENDECIDE	0.53	0.56	0.47	0.52	
WOMHOME	0.15	0.16	0.09	0.17	

#### Refined

DOLITICAL VALUES	WOM	1EN	MEN		
POLITICAL VALUES	TREATMENT	CONTROL	TREATMENT	CONTROL	
ACTIVEELECTIONS	0.95	0.95	0.95	0.95	
PASIVEELECTIONS	0.97	0.97	0.02	0.02	
CANTGOSCHOOL	0.09	0.26	0.09	0.26	
CANTDECIDE	0.09	0.08	0.09	0.08	
MENDECIDE	0.53	0.52	0.45	0.53	
WOMHOME	0.14	0.17	0.08	0.09	



#### Quantitative: What we did

- Setting up "comparison groups" in northern Uganda
- Looking at timing of roll-out of various activities in Ethiopia to get "comparison groups"
- •Using administrative data for sampling in Nepal to also get "comparison groups"
- •Revision of the baseline questionnaires to include questions about participation in specific activities; refinement of the "who decides?" questions
- •Endline process; supplementary data analysis
- •Use of different kinds of regression analysis to control for differences between groups (e.g. "all activities" or "some activities"



#### **Uganda: Roco Kwo**

- •Comparing outcomes for women in VSLA with women not in VSLA
- Women whose households were served by a Role Model Man versus those who were not
- •Comparing women in nearby areas not served by CARE: women in VSLA with women in CARE supported VSLAs
- •Tried to also compare general opinions or behavior of women not in VSLAs, from communities supported by CARE to communities not supported by CARE. To see how attitudes, behaviors and norms might be "diffusing". Small differences, small sample size
- Testing of psychosocial wellbeing indicators



#### Sample findings: Roco Kwo

ECONOMIC LIFE	WOMEN				
ECONOMIC LIFE	TREATMENT	CONTROL	-		
IDECIDEWORK	0.54	0.52			
IDECIDESPENDMO~Y	0.56	0.55			
SUBS	0.87	0.89			
DIVERS	0.49	0.42			
TOTFIX	1.37	1.30			
SELLFIX	0.16	0.14			
TOTWORKING	2.73	2.71			
SELLWORKING	1.11	1.13			
IHAVECASH	0.44	0.53			
ICANUSELAND	0.46	0.42			
IHAVEBANK	0.08	0.01			
IHAVEMOBIL	0.19	0.11			
IGOTLOAN	0.81	0.61			
USELOANALONE	0.57	0.78			
IHAVEBUS	0.47	0.33			
IDECIDENEEDMONEY	0.52	0.54			
IDECIDEABOUTWORK	0.64	0.67			
CANTSENDSCHOOL	1.90	2.16			



#### Nepal: Sakcham III

- •By endline, most activities had been rolled out in most areas, making it hard to find "comparison" groups
- •Some differences, e.g. Male Campaigners not operational everywhere.
- Trainings of certain religious leaders not everywhere
- •Analysis will try to look for differences in outcomes based upon those areas
- •Updating/ running new correlation analyses on the previous analysis from Sakcham II, which compared outcomes for women in women's groups not supported by CARE with women in CARE supported women's groups



#### **RESULTS SAKCHAM II (previous phase)**

# PSYCHOSOCIAL ACTIVITIES and PARTICIPATION ACTIVITES

Q4

- Participate in Non- CARE Women's group
- Participate in CARE's Women group



- Participation in village meetings regarding social issues
- Participation in village meetings regarding development issues
- Participation in village meetings regarding how to expend resources
- Voting in Assembly
- Obtaining services from VDC



### RESULTS

		Non-CARE women's groups	CARE women's groups
Participation in village meetings regarding social issues  Participation in village meetings regarding development issues  Participation in village meetings regarding how to expend resources	vities		
Voting in Assembly Obtaining services from VDC			



#### **Ethiopia: Berchi**

#### Participation (yes/no) in activities

- Monthly couples discussions in the VSLA groups
- •Health worker or religious leader in the area got a training on psychosocial wellbeing
- •Role Models operating in the area
- •SAA (mostly gatekeepers/ opinion leaders) group operating in the area
- Membership in women's only group
- Female –chaired VSLA
- Women and Men's Answers



#### Preliminary (Not yet validated!) Findings: Berchi Opinions on Women's Leadership Based Upon Access to Certain Activities

	Manual	Saa	Pstot	Hew	R. Mod.	Chair F.	Only W.	Wom
Wom good supervising								
Wom good taking decisions								
Wom don't know about comm.								
Wom with many resp can also partic.								
Wom willing to express ideas								
Wom good manager skills						> <		
Wom should have more lead, opp.						$\nearrow$		
Wom not able to write can lead								
Wom L.ship improved 3Y				> <				



# Some Sample Lessons for Programming Based Upon this Process

- "Holistic approach" gives great outcomes on many aspects of women's economic empowerment and meaningful participation and we can prove it with relatively rigorous data. The staff's intuition and participants stories were "right"
- •Targeting/ Special Outreach to vulnerable through community based facilitators in Uganda also shows great outcomes and we can also see that targeting in Nepal is getting the "poorest of poor"
- •Role Model Men approach leads to great outcomes (Uganda, and couples in Ethiopia). Need further documentation on how it is working especially in terms of fixed capital, children's school attendance.
- •Some findings indicate that women in CARE programming may not be feeling they can take decisions independently about money; we need further exploration of staff attitudes and program approaches that emphasize ,joint decision making' in financial matters and the implications of these messages

#### Some common baseline and endline challenges

- •simple baseline/endline table comparisons without controlling for sociodemographic variables between the two groups;
- •not keeping track of household locations for baseline so that we could use a smaller dataset at endline and get clearer pictures, and ensure that samples were the same kinds of people!
- •not having translations of questionnaires in local language, or in English
- no time for testing and revising questionnaires,
- not having 'activity dosage' questions in questionnaires
- Not having household questionnaire and male/female questionnaire linked
- •not having administrative data organized in a way that could help cross-check or give better information for certain analyses
- •Having too many questions in the survey!



#### Challenges in the learning question process

- •hard to have staff fully engaged throughout the process
- Geographical distances across the four countries involved
- •few assigned persons in member, Country Office, partners
- Diversities in M&E skills levels
- •challenges in getting everyone on board with the learning question when so much other workload
- •Challenges when very few face to face meetings budgeted across the country office staff
- •Diversity of understandings of expectation around how much CARE staff should be involved in endlines (as compared to consultants having full control over the process)
- Turnover of PQL staff and coordination of learning agenda
- •procurement processes mean we often use different consultants at baseline and endline (lose historical memory)
- •Context specificity of programming in each context required lots of "translation" between various persons involved... what got lost in this chain?



#### Challenges in the process

- •We lacked clear idea of methodologies needed and resources available when we settled quickly on a learning question
- 'Program approach': multiple donors, multiple members, multiple interests and multiple timelines
- •External consultants: companions in our learning, or deliverers?
- •Challenges to simply disseminate baseline and endline results in an accessible way (downward accountability)
- •Challenges to find who is best placed to write about findings related to learning question, to reflect upon and disseminate findings in an accessible way



#### **MOVING FORWARD:** Learning about M&E

- •Many recommendations for improving baselines and endlines and M&E systems came out of this process, but... how usable is what we learned, ultimately, for others? Constantly changing messages on value of accountability and/or learning from donors, in terms of resources for learning
- •Ethics and accountability questions: Endlines, quantitative data, and power (between CARE members and COs, CARE and donors, impact group members and partners and CARE)....
- •We need better methods to track progress on women's 'access' and 'control' over resources. What hides behind "mutual decision making?"
- •Psychosocial wellbeing indicators, as defined by women themselves, WORK to measure program impact



# **MOVING FORWARD:**Learning about Learning Questions

- Leadership and ownership at highest levels is key to ensuring that learning about the "learning question" remains a priority
- •Time to be together and sort through questions, methodologies, tools, processes and ultimate aim
- Human resources for learning in Members and COs
- •External consultants as companions in our learning; opening up this companionship!
- Multi-member learning questions?
- •How to disseminate learnings?



#### Thank You!

- CARE Nepal
- CARE Ethiopia
- CARE Uganda
- CARE Norway,
- CARE Canada, CARE USA, CARE Australia



