



Girls Improving Resilience Through Livelihoods + Health (Girl-H) Program

EVALUATION MIDLINE REPORT FOR KENYA AND UGANDA

Prepared for Mercy Corps

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GAME CHANGERS





The GIRL-H program commenced in October 2020 and covers the pastoral areas of Kenya (Turkana, Marsabit, Isiolo, Garissa, and Wajir Counties) and Uganda (Moroto, Amudat, Kotido, and Kaabong Districts), and selected urban and rural areas of Lagos and Kano states in Nigeria.

This midline report highlights the changes in key outcome indicator measurements since the baseline and provides insights into areas of improvement for the program, based on data collected amongst program participants in Kenya and Uganda.

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...and finally, we would like to acknowledge the young people who are participating in the GIRL-H program, their parents/guardians and community leaders who took time to participate in this evaluation. We pledge to them that the findings of this evaluation will be used to improve the impactfulness of activities aimed at improving the well-being and resilience of the young people within GIRL-H and future programs.

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Enumerator with respondent in Wajir County

1. Summary of the midline study

The GIRL-H program is a three-year program which aims to build the capabilities of young women and girls, and to enhance their current and future well-being. The program commenced in October 2020 and finishes in September 2023. It targets people in pastoral lands of Kenya (in Turkana, Marsabit, Isiolo Garissa, and Wajir Counties) and Uganda (in Moroto, Amudat, Kotido, and Kaabong Districts), and selected urban and rural areas of Lagos and Kano states in Nigeria. The program aims to improve girls' well-being by arming them with critical life skills as well as linking them to educational and employment opportunities and encouraging change away from social norms that devalue and underestimate the capabilities of women within communities. This report covers midline findings in Uganda and Kenya.

1.1. Introduction

The evaluation will provide an opportunity to assess the GIRL-H program in terms of expected outcomes and impacts and generate evidence to inform program activities and planning, including providing learning for Mercy Corps to feed into the roll out of future programs. It complements internal activities within Mercy Corps that are tracking activities and outputs. The evaluation will answer a series of questions generated by Mercy Corps based on the program theory of change using a mix of methods.

The evaluation includes: -

- a. a baseline and an end of project quantitative survey amongst a longitudinal sample of GIRL-H program participants and a matching comparison group (non-participants of the program),
- b. a midline quantitative survey with a sub-sample of the participant group surveyed at baseline, and
- c. qualitative research at the midline and at the end of the program.

This document reports on the midline phase of the evaluation in Kenya and Uganda, conducted using a quantitative survey with 251 respondents in Kenya and 273 respondents in Uganda during September- October 2022. The midline respondents consisted of cycle one¹ program participants previously surveyed in the baseline, except for Kenya where 52% were new respondents sampled from cycle two participants. In addition, the midline included four focus group discussions (FGDs) with program participants and 10 in-depth interviews (IDIs) with community leaders and parents or guardians of program participants.

This report compares the midline and baseline measurements for the key outcome indicators of the GIRL-H program to show the indicator prevalence change and includes insights into areas of improvement for the program, based on the qualitative research.

1.2. Summary of baseline and midline measurements

This section summarizes data for each indicator, comparing the midline and baseline results for both Kenya and Uganda including the change between the two phases. Significant change has been marked using an **asterisk**. In the final columns of the table below a link is provided to the relevant report section which provides more details on each indicator. Note that health was covered in Kenya only at baseline, and that is why baseline data on health is missing for Uganda.

¹ Participants who were already enrolled in the program during baseline.

Table 1 Summary table of indicators

Results area	No	Indicator	Midline and baseline measurements						Link to detailed results
			Kenya			Uganda			
			Baseline	Midline	Change	Baseline	Midline	Change	
Impact 1. Adolescents and young people in Kenya, Uganda, and Nigeria are able to withstand shocks and stress	G.1.1	Confidence index – average	9.1	8.8	-0.3	8.7	10.9	2.2*	Link
	G.1.2	Life skills index	23.5	25.7	2.2	28.9	32.8	3.9	Link
Impact 2. The youth wellbeing is improved in Kenya, Uganda, and Nigeria	G.2.1	Average increased income among youth who transition to different pathways	Ksh.1,000	Ksh. 3,400	Ksh. 2,400	Ush. 31,000	Ush. 52,000	Ush. 21,000*	Link
	G.2.2	Youth wellbeing index	38.1	39.9	1.8	43.3	56.4	13.1*	Link
Outcome 1.1. Adolescents and youth (in Kenya, Uganda and Nigeria) have improved life skills through appropriate trainings and orientation	O.1.1.1	% change in life skills index	23.5	25.7	2.2	28.9	32.8	3.9	Link
	O.1.1.2	Financial literacy index score (out of a total of 5)	2.1	2.3	0.2	2.4	2.7	0.3	Link
	O.1.1.3	% currently saving	26	35	9*	25	35	10*	Link
Output 1.1.1. Adolescents and Youth have their capacity built on life skills and financial literacy	R.1.1.1.1	# of beneficiaries who participated in various sessions	To be tracked using internal monitoring data						
	R.1.1.1.2	% member of a savings group among those who have access	49	56	7	25	47	22*	Link
	R.1.1.1.3	% able to identify safe and unsafe ways of earning money.	66	52	-14*	61	81	20*	Link

Results area	No	Indicator	Midline and baseline measurements						Link to detailed results		
			Kenya			Uganda					
			Baseline	Midline	Change	Baseline	Midline	Change			
	R.1.1.1.4	% of beneficiaries with correct knowledge on life skills (tracked using internal monitoring data)								To be tracked using internal monitoring data	
	R.1.1.1.5	% of beneficiaries with correct knowledge on financial literacy (tracked using internal monitoring data)								To be tracked using internal monitoring data	
	R.1.1.1.6	Average score on knowledge around core life skills (tracked using internal monitoring data)								To be tracked using internal monitoring data	
Output 1.1.2. Participants have their interests to work match and pathways are created for OOS	R.1.1.2.1	% received business training in past 12 months	38	56	18*	59	67	8*	Link		
	R.1.1.2.2	# of beneficiaries matched to work intention (tracked using internal monitoring data)								To be tracked using internal monitoring data	
	R.1.1.2.3	% got information on how to search for a job (if not enrolled in school)	17	20	3	27	46	19*	Link		
	R.1.1.2.4	% received information on importance of staying in school (tracked using internal monitoring data)									To be tracked using internal monitoring data
	R.1.1.2.5	# of OOS youth who access vocational training (tracked using internal monitoring data)									To be tracked using internal monitoring data

Results area	No	Indicator	Midline and baseline measurements						Link to detailed results	
			Kenya			Uganda				
			Baseline	Midline	Change	Baseline	Midline	Change		
	R.1.1.2.6	# of OOS participants who are linked back to school (tracked using internal monitoring data)								To be tracked using internal monitoring data
	R.1.1.2.7	# of OOS participants in apprenticeship/internships (tracked using internal monitoring data)								To be tracked using internal monitoring data
Outcomes 1.2. Youth (in Kenya, Uganda and Nigeria) who have transitioned have increased income	O.1.2.1	Average of claimed income earned by youth (18+) per month.	Ksh.1,400	Ksh. 2,500	1,100	Ush. 50,000	Ush. 66,000	16,000*	Link	
	O.1.2.2	% youth receiving any income over 12 months.	28	44	16*	58	49	-9*	Link	
	O.1.2.3	Average number of sources of income to individual youth over the last 12 months.	1.8	4	2.2	2	3.3	1.3	Link	
Output 1.2.1. Youth are engaged in income generating activities	R.1.2.1.1	% youth who have transitioned and are involved in any income generating activities (tracked using internal monitoring data)								To be tracked using internal monitoring data
Output 1.2.2. Jobs opportunities are created through partnerships with the public and private sector	R.1.2.2.2	# of partnerships formed with the private and public sector (tracked using internal monitoring data)								To be tracked using internal monitoring data
	R.1.2.1.3	% with a life goal or plan	7	19	12*	8	11	3	Link	

Results area	No	Indicator	Midline and baseline measurements						Link to detailed results
			Kenya			Uganda			
			Baseline	Midline	Change	Baseline	Midline	Change	
Outcome 2.1. Adolescents and youth in Kenya have better access to ASRH health services	O.2.1.1	% Adolescents and youth linked to SRH services (tracked using internal monitoring data)	To be tracked using internal monitoring data						
	O.2.1.2	Knowledge of key sexual and reproductive health (SRH) issues index	4.8	4.9	0.1	-	5.3	-	Link
Output 2.1.1. Facilities and health workers are trained to offer adolescent & youth friendly services	R.2.1.1.1	% of beneficiaries reporting that facilities offered adolescent or youth friendly services (tracked using internal monitoring data)	To be tracked using internal monitoring data						
	R.2.1.1.2	# of health workers trained on adolescents and youth friendly services (tracked using internal monitoring data)	To be tracked using internal monitoring data						
	R.2.1.1.3	% service delivery points providing youth friendly services (tracked using internal monitoring data)	To be tracked using internal monitoring data						
	R.2.1.2.1	% increase in receipt of information on how to protect health	46	50	4	68	65	-3	Link
Output 2.1.2. Adolescents and youth have access to information for decision making related to their health	R.2.1.2.2	% Adolescents & Youth who know where to access SRH services – FP	35	43	8*	-	59	-	Link
	R.2.1.2.3	% Adolescents & Youth who know where to access SRH services – HIV counselling / testing	44	42	-2	-	66	-	Link

Results area	No	Indicator	Midline and baseline measurements						Link to detailed results
			Kenya			Uganda			
			Baseline	Midline	Change	Baseline	Midline	Change	
		Know where to access HIV services / what to do to know status	68	68	0	-	82	-	Link
Outcome 2.2. Social norms in the communities are improved through SBCC and the engagement of gate keepers and local champions	O.2.2.1	Score on gender norms index (minimum is -8, maximum is +16)	6.1	5.2	-0.9	3.8	6.2	2.4	Link
	O.2.2.2	% involvement of youth in decision making in household (any decision)	47	36	-11*	56	50	-6*	Link
	O.2.2.4	Score 7 ~ 10 on violence avoidance index (out of 10)	5.8	5.9	0.1	6.3	6.8	0.5	Link
Output 2.2.1. Communities are sensitized for the improvement of social norms and behaviour change	R.2.2.1.1	# of champion days conducted (tracked using internal monitoring data)	To be tracked using internal monitoring data						
	R.2.2.1.2	# of community influencers reached through champions days (tracked using internal monitoring data)	To be tracked using internal monitoring data						
Key: G: Goal indicator R: Output indicator O: Outcome indicator									

In Kenya, the GIRL-H program has significantly increased the proportion of participants with business skills, income, and savings. The program has also significantly increased the proportion of participants with a life goal and or a plan for achieving it, and awareness of where to get FP services.

In Uganda, the program has significantly increased the personal confidence and well-being of respondents. It has also significantly increased the proportion of participants with business skills, who know safe ways of making money and how to search for a job, who are members of a savings group and those who save regularly. The average monthly income among participants who have income has also increased significantly.

Topics that still require more focus in Kenya are safe ways of making money, gender norms and decision making, personal confidence, information or help on how to search for a job, how to protect health, where to get HIV services or what to do to know HIV status, and how to avoid or respond to violence. In Uganda, more focus should be on goal setting and planning, how to protect health, gender norms and decision making, and how to avoid or respond to violence.

Areas of improvement that should be considered by the program include time management at the Safe Spaces including shortening the sessions and having more frequent sessions instead; providing shelter, seats, refreshments and learning materials at the Safe Spaces; ensuring cleanliness of the Safe Space locations; reducing congestion in the Safe Spaces; controlling rowdiness among participants in the Safe Spaces; monitoring of mentor activities; centralisation of the Safe Space locations within the communities; providing start-up capital for transitioned participants; marketing of participants' crafts; expansion of the curriculum to include training on income generating activities such as handcraft; and having frequent Champion days.



Kaboong Uganda

2. The GIRL-H program

2.1. The GIRL-H program

The GIRL-H program is a three-year program with the overall goal of *improved wellbeing and increased access to educational, economic, and civic engagement opportunities*, contributing to individual resilience amongst adolescents and young people. The following are the specific objectives: -

- Objective 1: Adolescents and youth in the GIRL-H program use life skills and social capital for improved well-being and personal agency.
- Objective 2: Adolescent girls, boys and young women have increased access to educational opportunities, safe economic livelihoods, and/or civic engagement.
- Objective 3: Public, private, and civil sectors foster an enabling environment in which girls are valued to access their human rights and exercise their personal agency.

The program commenced in October 2020 and finishes in September 2023 and covers people in pastoral lands of Kenya (Turkana, Marsabit, Isiolo, Garissa, and Wajir Counties) and Uganda (Moroto, Amudat, Kotido, and Kaabong Districts), and in Nigeria, within selected urban and rural areas of Lagos and Kano states. The adolescents and youth across

the different locations covered by the GIRL-H program face diverse challenges and each have divergent capacity and ambitions.

The GIRL-H program documents explain that investing in girls improves their current situation and benefits them throughout their lives and those of their families. There is extensive evidence that educated and healthy girls stay in school longer, marry later, delay and space having children, have healthier children and earn higher incomes. Mercy Corps believes that the knowledge, choices, and opportunities afforded to adolescent girls around the world are instrumental in lifting themselves, their families, communities, and countries out of poverty. Because of their unequal position in households, girls get fewer opportunities than boys in education and work, and this in turn limits their ability to do well, and they end up spending more energy, labor and time compared with other family members when facing periods of crisis. Girls are also susceptible to being forced into early marriage or transactional sex when economic crises hit a household (Mercy Corps, n.d.).

These and other challenges facing girls have prompted Mercy Corps to launch their program to build resilience amongst girls in poor communities in Uganda, Kenya, and Nigeria over the past 5 years. In Kenya, Uganda, and Nigeria, the GIRL-H programs build on the work already done by the Livestock Market System (LMS) program, the USAID funded Apolou program, and the FCDO funded Educating Nigerian Girls in New Enterprises (ENGINE) program respectively. The program includes LMS, Apolou and ENGINE participants, among others.

2.2. Program activities

GIRL-H is building the capacity of girls, boys and young women and men, to decrease their vulnerability to identified shocks and stresses. Overall, GIRL-H expects to improve participants' well-being by:

- improving their life skills in the areas of health, numeracy, literacy, and financial literacy, and
- strengthening their pathways to formal education, economic opportunities, and civic engagement.

For this to succeed, the enabling environment is being strengthened through:

- educating communities to transform gender and social norms so that girls are valued and are able to access their basic human rights,
- working with the public and private sectors to foster opportunities for education, safe livelihoods, and financial inclusion, and
- collaborating with local community-based organizations and government to scale the model.

At a broad level, the key activities of the program involve the running of a 3 or 6 month “Safe Spaces” activities (Mercy Corps, GIRL-H Safe Space Curriculum), complementary community led initiatives to support Safe Spaces and engagement with the private sector to provide employment opportunities, strengthening the provision of health care services to adolescents and youth, and empowering participants through participation in health sessions. More information on activities is in the program implementation strategy (Mercy Corps, March 2021).

2.3. Theory of change

The theory behind the program is that:

IF adolescents and young women can strengthen their life skills including financial literacy, form positive interpersonal relationships that build their social capital, and access education and livelihood opportunities that enable them to build financial assets

AND

co-create solutions to strengthen their own resilience within an enabling and gender equitable environment at the household, community, and organizational levels

THEN

they will be able to:

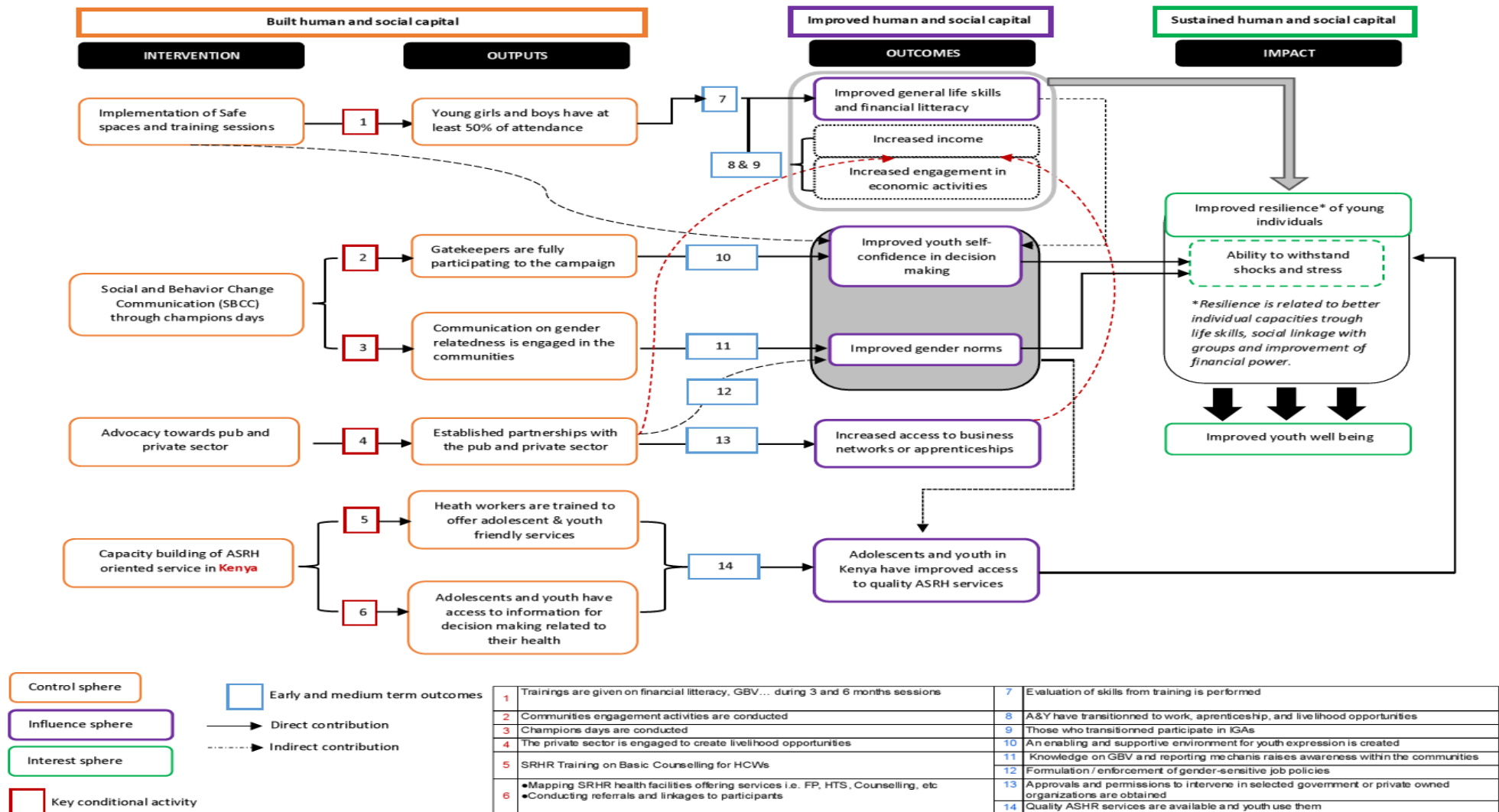
- *apply the knowledge and skills needed to improve their well-being,*
 - *benefit from more equitable gender and social norms, and*
 - *increase their social, human, and financial assets that contribute to improved individual and household resilience.*
-

This is illustrated diagrammatically in figure 1, below.

Figure 1: Program hypothesis



The diagram below provides the program's theory of change, which was adapted after the baseline study to respond to learnings (Mercy Corps, 2022).





An interview in progress, Lagdera Sub-County, Kenya

3. The evaluation purpose, objectives and scope

3.1. Evaluation goal and objectives

The evaluation provides an opportunity for Mercy Corps to assess the GIRL-H program in terms of the expected outcomes and impacts and generate evidence, insights and learning to inform program activities and planning, including documenting learning for Mercy Corps to feed into the roll out of future programs.

The evaluation will:

- test the validity of key assumptions informing the program theory,
- assess the effectiveness of the implementation of the program activities, and
- contribute to learnings about the model as a whole

As such it will:

- measure selected changes prompted by the program at the outcome levels, based on key indicators,

- provide learning about the strengths and weaknesses of the program,
- provide learning about the effectiveness of the overall model and specific areas of it as captured in the learning questions, so as to inform scale up an adoption of similar approaches elsewhere, and
- ensure Mercy Corps is a central contributor to valuable learning around working with adolescent and youth.

Thus, the objective of the midline is to measure indicator prevalence change at outcome level, and to provide insights for improvement of the program.

3.2. Learning questions

The following are the learning questions that the GIRL-H monitoring, evaluation and learning program aims to answer. These are a second set of questions issued in July 2022, which are an iteration on the first evaluation questions detailed at the start of the evaluation. These questions will be answered through a combination of information from the external evaluation and from internal data (Mercy Corps, 2022)².

- What is impact of the GIRL-H interventions (human, social and financial) on wellbeing (income, health and social) of adolescence girls, boys, and young people?
- What is the change in participant lives due to the GIRL-H interventions?
- Which individual (participants') and household characteristics are associated with higher levels of resilience and wellbeing among the beneficiaries?
- What is the effectiveness of specific components of the safe space sessions in delivering individual and youth wellbeing? (a) What are the critical contents and or components of the sessions that participants find useful and affect life skills and financial literacy? (b) What modules (and models) in the curriculum are essential to increase participant's efficacy and empowerment? (c) How do the differences in number of session attendance affect the participants' life skills and financial literacy skills?
- What are the viable (financial, gender and equity suitable and socially accepted) transitional pathways (economic livelihoods) preferred by adolescence girls, boys, and young people in GIRL-H areas?
- What is the impact of the health interventions plus other interventions on wellbeing of adolescence girls, boys, and young people in Kenya?

3.3. Evaluation scope

The evaluation is guided by a results framework which was initially developed by Mercy Corps based on the program indicators and evaluation questions (EQs) and methods, and then amended further after the baseline. The indicators have been summarized in the Executive Summary of this report. The quantitative survey covers only some indicators, the others are to be measured using monitoring data collected by the Mercy Corps team.

The evaluation looks at changes at the level of the young people involved in programming through the Safe Spaces program. It did not initially assess the effectiveness of the program

² Girls Improving Resilience through Livelihoods and Health (GIRL - H), Learning Plan, Dr Conrad Murendo, Program Learning Advisor (Global), Program Performance and Quality (PaQ) Unit, July 2022.

in stimulating private sector involvement role of Mercy Corps, and the effectiveness of community level activities in facilitating change in the community.

Whilst the program aims eventually to build the resilience of girls and young women, this is not expected to be achieved during the life span of the program. Thus, the evaluation focuses on measuring indicators that are steps towards this longer-term goal by building the individual skills, capacities and abilities of the adolescents and young people in the program. The qualitative element of the evaluation at midline and end of project is expected to provide more information about progress and answers to evaluation questions.



4. Evaluation methodology

4.1. Evaluation design

The evaluation design is quasi-experimental and includes a longitudinal survey with participant group and a similar comparison group at baseline and end-line, with difference in difference (DiD) and counterfactual analysis at end-line; a longitudinal survey with participant group only at midline to measure indicator prevalence change. It also includes focus group discussions with participants and in-depth interviews with key stakeholders at midline and endline.

4.2. Midline target sample

The GIRL-H program participants in Kenya and Uganda are enrolled into the program in three cycles (Mercy Corps, GIRL-H Cycle & Evaluation Calendars). Cycle one was recruited by GIRL-H staff and enrolled into the program before data collection for the baseline. Cycles two and three were recruited by Ipsos staff during the baseline. They participated in the baseline and were to be enrolled into the program later after the baseline.

At the time of midline, the cycle two and three recruited during the baseline had not been absorbed into the program. The cycle two in the program at the time of midline had been

recruited afresh by GIRL-H staff and did not include those that participated in the baseline. Cycle three were yet to be enrolled into the program at the time of midline.

The midline targeted only cycle one participants surveyed at baseline because they had just finished participating in the safe spaces and some of them had been transitioned to an economic activity or given a grant to start a business. Thus, the cycle one participants provided a better opportunity for the midline evaluation compared to the cycle two participants who had just been enrolled into the program and were still participating in the safe spaces.

However, the GIRL-H PMU team sought to have feedback from the cycle two participants at the same time, considering they were already participating in the program. As a result, a sample of the cycle two participants were included in the midline for Kenya. These cycle two respondents had not been surveyed in the baseline and had an impact on reducing the sample size for comparison with baseline in Kenya. In Uganda it was decided to go ahead and interview all the baseline cycle one participants.

Having been interviewed for the first time during the midline in Kenya, the cycle 2 results are being treated as baseline information and have been included in this report in that regard and with no corresponding midline results.

4.3. Midline sample sizes

In Kenya, a total of 251 respondents were interviewed in the midline. These consisted of 120 cycle one participants from 12 Safe Space groups and 131 cycle two participants from 10 Safe Space groups in Garissa, Isiolo, Marsabit, Turkana and Wajir Counties. Only the cycle one respondents were previously interviewed in the baseline.

In Uganda, the midline respondents were 273, and all were cycle one participants from 24 Safe Space groups in Amudat, Kaabong, Kotido and Moroto Districts. All were previously interviewed in the baseline.

The midline also included four focus groups with program participants and 10 interviews with community leaders and parents or guardians of participants.

4.4. Questionnaire and discussion guides

The midline quantitative questionnaire was adapted from the baseline questionnaire, based on the revised logical framework. For example, questions asking about household information were removed and questions on adolescent and youth friendly services, and to capture respondents' views on the GIRL-H program were also added. For Uganda, SRH questions were not asked in the baseline but were added in the midline questionnaire.

Discussion guides for the focus groups and in-depth interviews were developed by Ipsos and then reviewed and approved by Mercy Corps.

The questionnaire was translated into the following languages: Swahili, Turkana, Borana, Pokot, and Somali for Kenya and Pokot and Ankarimojong for Uganda. Ipsos scripted the questionnaires using proprietary iField software, incorporating all logic checks and interviewer instructions to ensure quality and consistency of the data. Scripts were extensively tested both in English and translated forms. In addition, the scripts were reviewed during training of the data collection staff and changes incorporated. The training

included a session of field practice which also provided an opportunity to further test the scripts. The final version of the questionnaire was approved by Mercy Corps.

4.5. Recruitment and training of data collection staff

In selection of data collection staff, priority was given to those who worked on the baseline. All were hired from the study regions to ensure smooth entrance into the communities and fluency in the relevant local languages. In Kenya, a centralized training of trainer session was held at Ipsos offices in Nairobi on 20th September 2022 and was attended by the field supervisors and quality control staff, facilitated by the project manager from Ipsos. This was followed by two days of interviewer training on 22nd and 23rd September 2022 across the five target counties. In Uganda, a centralized training of all data collection staff was held on 20th - 23rd September 2022 at Rapona Apartments Hotel in Moroto. The trainings in Kenya and Uganda included field practice followed by a debrief session. The overall objective of the training was to provide the data collectors with the necessary knowledge on the data collection tools and procedures to enable them collect high quality and reliable baseline data in accordance with the requisite research ethics and data confidentiality practices.

4.6. Supervision and quality control

Quality control measures in each country included close supervision, back-checks, listening to audio recordings of interviews, and quality checks on the data by Ipsos quality assurance team. In total, 20% of interviews were accompanied, 30% backchecked, 5% of the recordings reviewed, and data for 45% of the interviews reviewed. Where quality issues were noted, back-checks were done to validate the data and where necessary, the data was discarded.

4.7. Fieldwork dates

Quantitative data was collected on 26th September - 1st October 2022 in Kenya and on 1st - 6th October 2022 in Uganda. FGDs and IDIs were done on the same dates as the quantitative survey in Kenya, and on 12th - 15th October 2022 in Uganda.

4.8. Fieldwork challenges

Challenges during fieldwork in Kenya were: -

- Insecurity in Marsabit and Wajir counties leading to non-response and replacement of two groups,
- Difficult terrain and long distances between data collection sites leading to long hours of travel,
- Issues with mobilization of survey respondents to the central location sites by GIRL-H staff, particularly in Turkana, and
- Unavailability of respondents in some of the groups for example the Kili boy group in Isiolo which had become inactive and therefore had to be replaced.

In Uganda, fieldwork challenges were: -

- Missing phone contacts for some of the mentors and as a result the team was not able to liaise with the mentors in advance to mobilize respondents. Consequently, the team had to visit some of the villages more than once to achieve the targets.

- Long distances between data collection sites,
- Hilly and rough terrain,
- Some respondents had relocated because of cattle raids,
- Unavailability of respondents during market days mainly in Amudat,
- Unavailability of respondents because of the nature of their economic activities for example some go for days to where they make charcoal and this delayed completion of fieldwork in some areas.

4.9. Data processing and analysis

Data processing included formatting, labelling of variables and recoding of values to match the questionnaire; coding of the 'other specify' data; validation of data based on various checks such as questionnaire logic, missing values, and values that are out of range. Changes to the data were made after seeking clarification from the field team and where required, from respondents. The data was analysed descriptively and included calculation of specific indices based on variables of interest. Comparison of the baseline and midline data included a test of significance on all variables.

4.10. Ethical compliance

Mercy Corps received ethical approval for this study from the AMREF Ethics and Scientific Review Committee (ESRC). All the evaluation staff from Ipsos undertook an online research ethics training. They were also briefed on the Mercy Corps' child protection and safeguarding policy and signed a compliance form. All respondents provided voluntary informed consent to participate in the survey. For minors aged 10-17 years, voluntary consent from them was obtained after receiving voluntary informed consent from their parent or guardian.



5. Description of sample and context

To provide context and understanding of the midline results, this section provides a description of the respondents' profile and the challenges they and other adolescents and young people in the GIRL-H communities face.

5.1. Gender and age

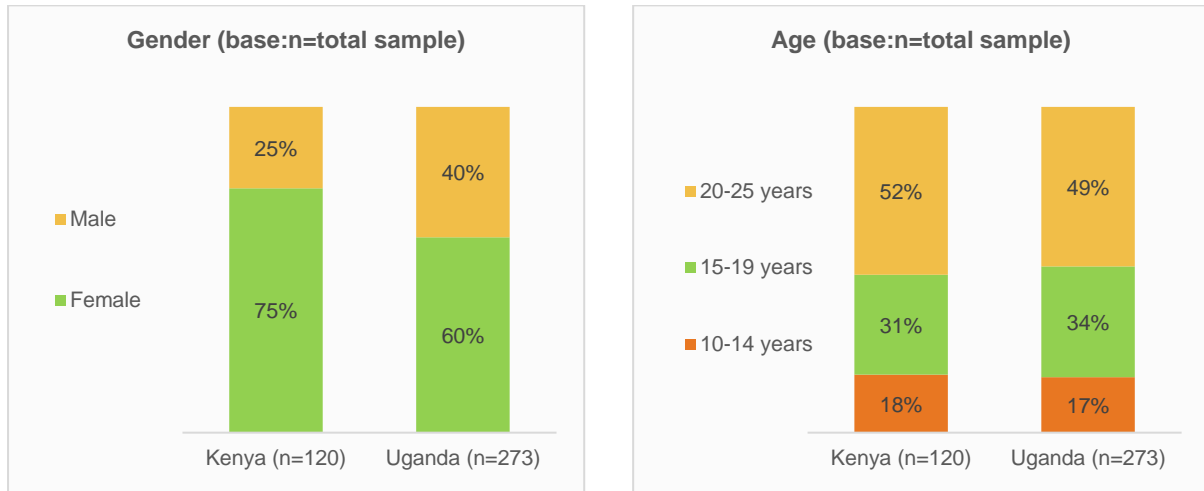
The midline respondents were 75% female and 25% male in Kenya and 60% female and 40% male in Uganda.

Overall, about half of the respondents (52% in Kenya and 49% in Uganda) were in the older cohort, aged 20-25 years. Those aged 10-14 years were 18% in Kenya and 17% in Uganda, while those aged 15-19 years were 31% in Kenya and 34% in Uganda.

In Kenya, respondents aged 10-14 years were 22% female and 3% male, those aged 15-19 years were 28% female and 40% male, and those aged 20-25 years were 50% female and 57% male.

In Uganda, respondents aged 10-14 years were 15% female and 20% male, those aged 15-19 years were 38% female and 29% male while those aged 20-25 years were 47% female and 51% male.

Figure 3: Gender and age of midline respondents



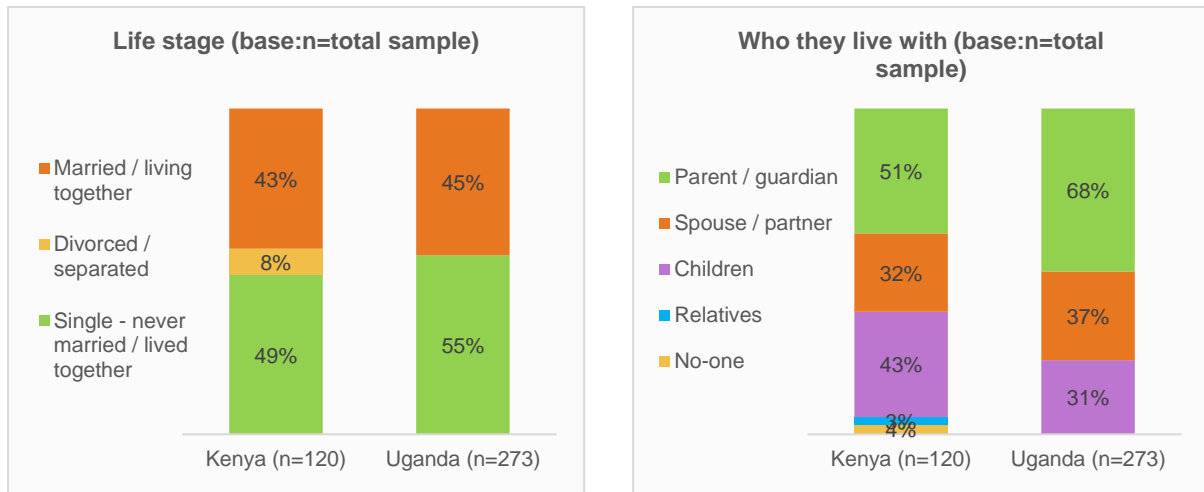
5.2. Life stage and who they live with

Respondents who were married or lived permanently together with a partner were 43% in Kenya and 45% in Uganda. Apart from 8% in Kenya who were divorced or separated, the rest were single and had never married or lived with a partner before.

A majority of those who were married or lived permanently together with a partner in both countries were the older respondents aged 20-25 years (63% in Kenya and 68% in Uganda). The rest were aged 15-19 years, meaning that around a third of those who were married were in this relatively young age group. However, none of the younger respondents aged 10-14 years was married.

Most of the respondents in both countries lived with a parent or guardian. Some of the respondents who claimed to be married or living permanently together with a partner (11% in Kenya and 8% in Uganda) were not living with their spouse or partner at the time of midline.

Figure 4: Life stage and who respondents live with



5.3. Education and literacy

Education level is correlated with overall life success and many aspects of well-being. Communities living in the GIRL-H program areas face economic hardship and barriers to school attendance. Indeed, participants were selected because they were out of school and as such would benefit from the program.

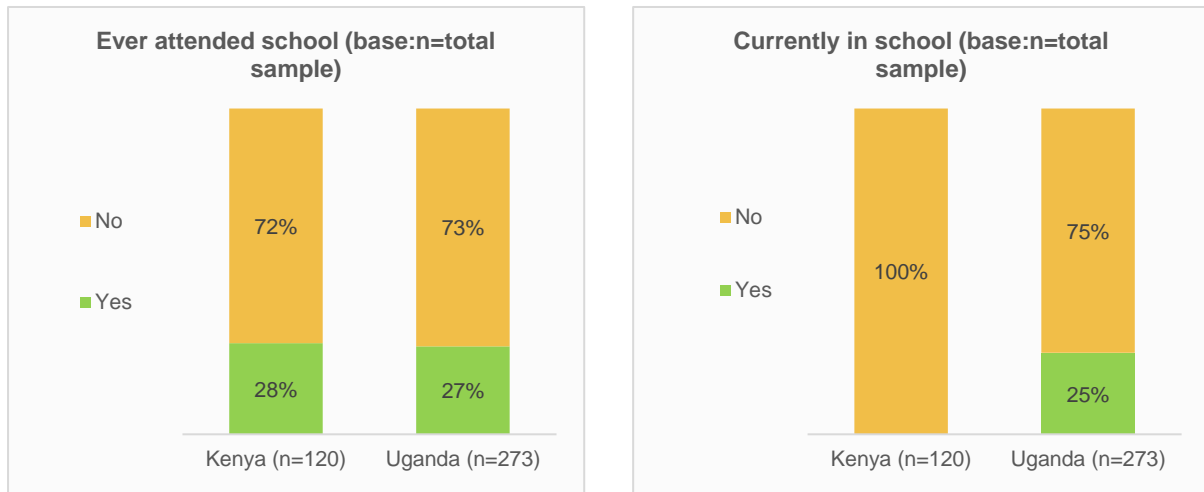
In the FGDs and IDIs with both parents and community leaders, illiteracy was cited as one of the main challenges affecting young people in the GIRL-H program areas, particularly in Uganda. This was attributed to a disregard for education, forced early marriages, poverty, child labour, lack of good nearby schools, and teenage pregnancies.

“High level of illiteracy is the greatest challenge we have in this community, and this is just because the parents in the community have not motivated their children to go to school and they also don’t embrace the education system and they even deny their children access to learning centers” **Community leader – Amudat District, Uganda**

“Illiteracy is a major challenge because most of them [youth] drop out of school due to pregnancy. That is for the girls. The boys drop out of school due to drugs. And most of these children are young. They chew khat here in the village and play cards” **Parent – Turkana County, Kenya**

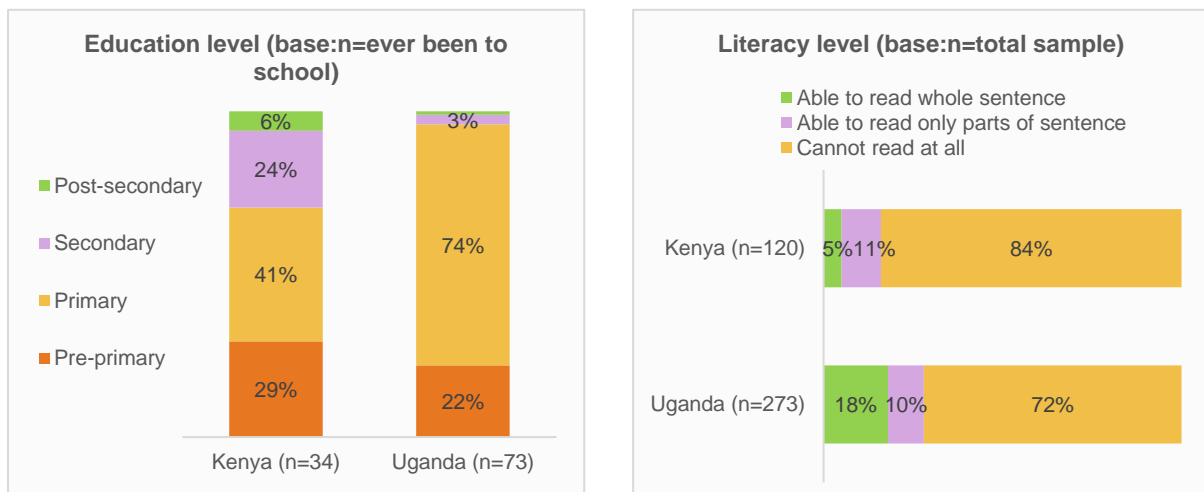
This is evident in the proportion of respondents who had **ever attended school** in both countries (28% in Kenya and 27% in Uganda). Those who were in school during the midline in Uganda were 25%, up from 0% in the baseline. This is explained by the fact that some of the participants in Uganda were out of school at the time of recruitment in the baseline because schools were closed due to Covid 19. During midline, schools had re-opened and therefore some young people returned to school. None of the respondents in Kenya were in school during the midline, the same as baseline.

Figure 5: Ever attended school and currently in school



Of the respondents who had been to school, a majority had not gone beyond the primary level of education (70% in Kenya and 96% in Uganda). This explains the very low literacy levels among the respondents in both countries. Only 18% of the respondents in Kenya and 5% in Uganda could read a whole sentence shown to them as part of the survey.

Figure 6: Education and literacy levels



The midline results show that GIRL-H participants, mainly in Uganda, were given basic literacy and numeracy skills as part of the GIRL-H Safe Space sessions. For example, they were taught how to read and write the alphabet and their names and how to count numbers. In addition, they were taught about the importance of education. Their parents and other community members were also sensitized on the importance of education during the champion days.

There was a slight increase in the percent of respondents who were able to read parts of or a whole sentence. Respondents who were able to read parts of a sentence increased from 5% to 10% in Kenya and from 9% to 11% in Uganda between baseline and midline. Those who were able to read a whole sentence also increased from 16% in the baseline to 18% in the midline for Kenya, and from 2% in the baseline to 5% in the midline for Uganda.

“They also teach us how to write letters [alphabets] and our names, and even right now I can write my name and that of my friend” **Participant - Kotido district, Uganda.**

“What I liked about the champion day is the sensitization that was given to the youth on continuing to embrace education and encouraging parents also to take the children to school” **Parent – Moroto district, Uganda.**

5.4. Challenges affecting youth in GIRL-H areas

Respondents cited several challenges, particularly in Uganda, that affect adolescents and young people in their communities. Besides the high levels of illiteracy already mentioned above, the youth in GIRL-H areas face a myriad of other challenges as described in this section.

Poverty is a major challenge in the GIRL-H communities and is caused by other challenges which include the perennial drought situation, and frequent cattle raids perpetrated by young men. The drought situation has caused famine, hunger, malnutrition, and even death within the communities. Cattle raids are the main cause of **insecurity** which is also a major challenge that has led to loss of lives and contributed to the poverty situation. The cattle raids were attributed to **unemployment, lack of reliable sources of income, lack of startup capital, and idleness** among the young men in these communities as well as a negative mindset that does not value peace.

“These youth also especially the males have negative attitudes towards peace, and you see most of them want to go for raids and most of them end up dying there and later those other communities retaliate and kill other community members” **Community leader – Kotido District, Uganda.**

Early marriages, which are mostly forced because some parents marry off their daughters in exchange for cattle. This has contributed to **school dropout** among girls, **gender-based violence, neglect of children** born to young mothers, and **maternal deaths** especially for the young girls.

“There is something very serious in my community; you find that parents force their children to marry at a tender age and to a man of the parents’ choice as long as the man has animals....and these early marriages have reduced school attendance here.” **Parent – Kaabong District, Uganda**

Child labour was widely mentioned as a challenge mainly in Uganda, and this is at the expense of education. Children are required to work to fend for their families.

“Child labour like carrying charcoal is also very common here... the youth do a lot of work in order to get money to buy food. In this community madam, it is children who feed their parents and that is why there is a lot of child labour” **Community leader – Moroto District, Uganda.**

Although the GIRL-H program has taught girls how to make their own sanitary towels using locally available materials such as cloths, **lack of sanitary towels** is still a challenge to the girls because sometimes it is hard to get these materials.

“It is very hard to afford a pad, all we do is just use clothes and make local pads the way Mercy Corps taught us but acquiring these local materials for making pads is also a challenge” **Participant - Amudat District, Uganda**

Rape of girls, for example, on their way to fetch firewood is another issue. According to some of the respondents, this has also affected attendance of Safe Spaces because of fear. As a result, the girls have been taught to walk in groups in order to stay safe.

“...especially for girls, they can get raped because of long distance walking from place to place... it is not safe to come back from Safe Space because we are all girls and boys keep interrupting us.” **Participant – Garissa County, Kenya**

Personal hygiene, especially during menstruation, is one of the things that participants have been taught in the Safe Spaces sessions. However, one of the challenges faced by the communities is **lack of water** and this makes it difficult to maintain hygiene.

Other challenges include **alcohol abuse and drunkenness** among young men particularly in Uganda, **conflict and violence, prostitution leading to HIV infections, disrespect to elders, female genital mutilation/cutting (FGM/C), lack of infrastructure such as roads, lack of government services such as healthcare, and diseases**. Respect for others is one of the things participants are taught in the Safe Spaces, and respondents including parents and community leaders especially in Uganda cited respect as one of the changes they have observed in the participants because of the program.

Key learnings:

GIRL-H is well aligned to the key challenges affecting the target group. Based on the midline results, the program is already focusing on some of these challenges through the safe spaces and the champion days.



6. Exposure to information

One of the ways in which GIRL-H aims to improve the resilience of the participants is by providing information or help on various topics and information to help them get through challenging life situations. The survey asked respondents whether they had received information or help on vocational skills, business skills, money management skills, apprenticeship/internship/work placement, how to search for a job, how to save money, equal rights for men and women, how to protect health, how to be listened to in the community, importance of staying in school, help to stay in school, and gender-based sexual or other form of violence.

The table below shows the proportion of respondents who received information or help on a variety of topics, and the average number of topics they received information or help on out of the total of 12.

The average number of topics participants received information on significantly increased from 4.6 to 5.3 in Kenya and from 6.0 to 7.1 in Uganda between the baseline and midline. The proportion of participants who received information on **five or more** of the topics also increased significantly in both countries, from 33% to 44% in Kenya and from 51% to 60% in Uganda within the same period.

Table 2 Number of topics respondents had received information on in the past 12 months

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
None	27	19	50	25	23	21	27
1 – 4	42	42	36	37	34	31	43
5+	33	37	13	38	44	50	30
Average	4.6	4.8	3.5	5.3	5.3	5.6	4.4
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
None	14	13	16	-	18	17	19
1 – 4	34	40	25	-	22	23	21
5+	51	48	59	-	60	60	59
Average	6.0	5.5	6.8	-	7.1	7.1	7.0
Notes: G9 In the past 12 months, did you 1. receive any vocational (job) or skills training?, 2. receive any business training – how to start or run a business, including how to manage business finances?, 3. receive training on how best to manage your money?, 4. go on an apprenticeship, do an internship or placement at a workplace?, 5. get information or help on how to search for a job? 6. get any information on how to save for the future? 7. get any information on equal rights for men and women? 8. get any information on how to protect your health? 9. how to be listened to in your community? 10. get information on the importance of staying in school? 11. get any help to stay in school? 12. Information about gender based, sexual or other violence?							

The tables below show the **types of information or help** respondents had received in the past 12 months.

In Kenya, the proportion of respondents who received information or help on eight out of the 12 topics increased between baseline and midline, except on importance of staying in school, help to stay in school, and how to be listened to in the community.

The topics with a significant increase are money management (+23%), business skills (+20%), how to save money (+18%), vocational or skills training (+11%).

Other topics that increased but not significantly, in order of highest to lowest percentage increase, are equal rights for men and women, how to protect health, how to search for a job, and apprenticeship/internship/work placement. The proportion of those who received information on gender-based sexual or other violence did not change between baseline and midline.

Table 3: Types of information or help received in the past 12 months - Kenya

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
vocational (job) or skills training	16	20	3	27	27	27	27
business training	23	28	10	47	43	44	40
training on how best to manage your money	23	30	0	50	46	51	30
apprenticeship, internship, or placement at a workplace	13	18	0	18	16	14	20
how to search for a job	17	22	0	18	20	20	20
how to save for the future	25	29	13	36	43	47	33
equal rights for men and women	34	36	30	35	43	47	33
how to protect your health	46	51	30	50	50	54	37
how to be listened to in your community	37	40	27	30	32	30	37
importance of staying in school	43	47	30	34	36	41	20
help to stay in school	24	26	20	18	19	22	10
Gender-based sexual or other violence	31	38	10	25	31	39	7
Notes: G9 In the past 12 months, did you 1. receive any vocational (job) or skills training? 2. receive any business training – how to start or run a business, including how to manage business finances? 3. receive training on how best to manage your money? 4. go on an apprenticeship, do an internship or placement at a workplace? 5. get information or help on how to search for a job? 6. get any information on how to save for the future? 7. get any information on equal rights for men and women? 8. get any information on how to protect your health? 9. how to be listened to in your community? 10. get information on the importance of staying in school? 11. get any help to stay in school? 12. Information about gender based, sexual or other violence?							

In Uganda, the percentage of respondents who received information or help on 10 out of the 12 topics increased in the midline, except on apprenticeship/internship/work placement, and how to protect your health.

The topics with a significant increase in Uganda in the midline are how to search for a job (+15%), vocational or skills training (+9%), equal rights for men and women (+9%), and business skills (+8%).

The other topics, in order of highest to lowest percentage increase, though not significant are money management, how to save, help to stay in school, gender-based sexual or other violence, importance of staying in school, and how to be listened to in the community.

Table 4: Types of information or help received in the past 12 months - Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
vocational (job) or skills training	29	29	28	-	38	41	32
business training	43	46	38	-	51	55	46
training on how best to manage your money	47	44	52	-	55	56	53
apprenticeship, internship, or placement at a workplace	14	11	18	-	11	9	13
how to search for a job	27	24	33	-	42	43	41
how to save for the future	54	52	57	-	62	65	56
equal rights for men and women	45	37	58	-	54	54	54
how to protect your health	68	64	74	-	65	65	65
how to be listened to in your community	42	36	50	-	44	41	49
importance of staying in school	60	52	73	-	62	59	68
help to stay in school	34	38	29	-	38	42	33
Gender-based sexual or other violence	51	48	56	-	54	55	53
Notes: G9 In the past 12 months, did you <ol style="list-style-type: none"> 1. receive any vocational (job) or skills training? 2. receive any business training – how to start or run a business, including how to manage business finances? 3. receive training on how best to manage your money? 4. go on an apprenticeship, do an internship or placement at a workplace? 5. get information or help on how to search for a job? 6. get any information on how to save for the future? 7. get any information on equal rights for men and women? 8. get any information on how to protect your health? 9. how to be listened to in your community? 10. get information on the importance of staying in school? 11. get any help to stay in school? 12. Information about gender based, sexual or other violence? 							

6.1.1. Information participants claimed to have received from the GIRL-H program

Respondents were also directly asked whether they had learnt something new from the GIRL-H program, and to specify what they had learnt.

Those who claimed to have learnt something new were 64% in Kenya (58% of cycle 1 and 69% of cycle 2) and 67% in Uganda.

The table below shows some of the new things that respondents had learnt from the program. In Kenya, these include business ideas and skills (36%), how to read and write the alphabet and their names (33%), how to save money (27%), how to associate/relate with others (12%) and personal hygiene (11%).

“I have acquired new and very strong skills of generating income. This is what helped me and my family in these tough times we are facing around like the drought....” **Participant – Wajir County, Kenya**

“Hygiene, we are educated about cleanliness more when we are in our periods. This gives us confidence as girls” **Participant – Garissa County, Kenya**

In Uganda, some of the new things respondents mentioned they had learnt from the program are personal hygiene especially during menstruation, and hygiene at home for example keeping the compound clean, building dish racks and toilets (47%), how to read and write the alphabet and their names (44%), business ideas and skills (34%), how to save money (26%), and how to respect others (12%).

“...at least I have learnt how to write my name...before, I didn’t even know how to handle a pen but now, I can write my name, I can now read my child’s book when I take the child to the hospital, I can identify my child’s book by reading out the name myself.” **Participant – Amudat District, Uganda”**

“... at least now I can take care of myself like cutting my nails, bathing and even sharing issues with my parents for example reminding them that all children both girls and boys should be at school.” **Participant – Kaabong District, Uganda**

“They also teach us how to use our money for trade and teach us how to handle our money very well and so like for me when I get my money from brewing, I use part of it keep the rest so that the brewing business can remain operational” **Participant – Kotido district, Uganda.**

Note: Mentions with less than 3% in both countries (less than 3% in Kenya and also less than 3% in Uganda) have been excluded in the table.

Table 5: New things that participants learnt from GIRL-H

	Kenya	Uganda
Base: n=those who learnt something new from GIRL-H	161	183
	%	%
Business ideas/skills	36	34
How to read/write	33	44
How to save money	27	26
About hygiene/sanitation	11	47
How to associate/work with others	12	3
How to respect parent/others	1	12
About HIV	7	0
How to prevent disease/improve health	7	0
Child rights/protection	6	2
Life goals	6	0
How to count/add numbers	4	8
About drug abuse	4	0
How to avoid/resolve conflicts	4	5

Importance of education	3	3
Sharing responsibilities in the home	3	1
Where to report crime/abuse	3	1

Key learnings:

Access to valuable information and life skills has gone up amongst participants, which should help them cope with the challenges and improve their wellbeing (Outcome 1.1). Especially business, money management, hygiene, and literacy skills.



7. Income and assets

7.1. Youth income

It is anticipated that the program will provide participants with enhanced economic opportunities through being transitioned to internships, informal mentorships or being able to develop small businesses. This is expected to lead to an increase in the proportion of youth receiving any income, an increase in average income and potentially an increase in income diversity. According to the GIRL-H pathway strategy, a fully transitioned participant is one who meets the following criteria:

- attains the minimum attendance requirements for the weekly intensive safe space sessions and has graduated from the programme,
- has been linked to opportunities of interest such as TVET/VTC, apprenticeship, business grant opportunities, or business mentors,
- has been linked to mentors beyond just business, and
- out-of-school boys and girls who have been fully facilitated to go back to school.

In Kenya, there was a significant increase in the proportion of youth who received any income in past 12 months from 28% to 44% and the average number of income sources from 1.8 to 4.0 between baseline and midline.

The average claimed income received in the past four weeks increased from Kshs 1,100 (USD 9) in the baseline to Kshs 2,300 (USD 19)³ in the midline.

Amongst survey respondents aged 18+, the average monthly income increased from Kshs 1,400 (USD 11) to Kshs 2,500 (USD 20) between baseline and midline.

Of those who had transitioned (linked to an economic activity or given a grant to start a business) and received income in past four weeks in Kenya, the average income was Kshs 1,000 (USD 8) in the baseline and Kshs 3,100 (USD 25) in the midline.

Table 6: Youth income – Kenya

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Youth with no income in past 12 months	73	67	90	58	56	53	63
Youth with any income in past 12 months	28	33	10	42	44	47	37
Youth with any income in past 3 months	18	23	3	26	29	31	23
Average number of youth income sources in past 12 months	1.8	1.8	1.7	3.7	4.0	3.4	5.9
Average youth income in past 4 weeks							
Base: n = those who had income	59	51	8	73	58	48	10
Average youth income in past 4 weeks	1,100	1,100	1,000	1,900	2,300	2,300	2,400
Average youth income in past 4 weeks (aged 18+)							
Base: n = those aged 18+ and had income	46	41	5	52	46	37	9
Average youth (18+) income in past 4 weeks	1,100	1,100	1,300	2,300	2,500	2,500	2,600
Average youth income in past 4 weeks (transitioned)							
Base: n = transitioned and had income	20	17	3	-	21	19	2
Average youth (transitioned) income in past 4 weeks	1,000	1,000	1,100	-	3,100	3,300	700

³ Exchange rate=0.0081 (Source: <https://www.exchangerates.org.uk/Kenyan-Shillings-to-Dollars-currency-conversion-page.html>)

Notes:

L1. We asked earlier about the sources of income to your household as a whole. I would now like to know if you personally have received income from any source in the last 3 months, 6 months, 12 months?

L2. Did you receive income from any of these sources in the past 12 months?

L3 How much money did you receive in total in the last 4 weeks that you earned from work (excluding gifts or loans)? Please provide the amount in local currency.

Q7. When you finished participating in the safe spaces, were you linked to a business activity or given a grant to start a business?

Note that Income is rounded to the nearest Kshs 100

In Uganda, the proportion of youth who received any income in past 12 months significantly reduced from 58% in the baseline to 49% in the midline. Some of the respondents were in school in the midline and therefore did not work to earn any income.

Of those who received any income, the average number of income sources increased from 2.0 to 3.3 within the same period. The average income also increased from Ushs 39,000 (USD 12) to Ushs 53,000 (USD 16)⁴ between baseline and midline.

The average monthly income amongst those aged 18+ in Uganda also increased from Ushs 50,000 (USD 15) in the baseline to Ushs 66,000 (USD 20) in the midline.

Of those who had transitioned (linked to an economic activity or given a grant to start a business) and had income in past four weeks in Uganda, the average income was Ushs 31,000 (USD 9) in the baseline and Ushs 45,000 (USD 14) in the midline.

Table 7: Youth income –Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Youth with no income in past 12 months	42	45	37	-	51	53	49
Youth with any income in past 12 months	58	55	63	-	49	47	51
Youth with any income in past 3 months	47	48	44	-	36	34	39
Average number of youth income sources in past 12 months	2.0	2.0	2.0	-	3.3	3.1	3.6
Average youth income in past 4 weeks							
Base: n = those who had income	192	99	93	-	246	146	100
Average youth income in past 4 weeks	39,000	39,000	38,000	-	53,000	43,000	68,000
Average youth income in past 4 weeks (aged 18+)							

⁴ Exchange rate=0.0003 (Source: <https://www.exchangerates.org.uk/Ugandan-Shilling-to-Dollars-currency-conversion-page.html>)

Base: n = those aged 18+ and had income	119	54	65	-	174	104	70
Average youth (18+) income in past 4 weeks	50,000	53,000	46,000	-	66,000	52,000	86,000
Average youth income in past 4 weeks (transitioned)							
Base: n = transitioned and had income	87	46	41	-	127	81	45
Average youth (transitioned) income in past 4 weeks	31,000	32,000	29,000	-	45,000	31,000	68,000
<i>Notes:</i>							
<i>L1. We asked earlier about the sources of income to your household as a whole. I would now like to know if you personally have received income from any source in the last 3 months, 6 months, 12 months?</i>							
<i>L2. Did you receive income from any of these sources in the past 12 months?</i>							
<i>L3 How much money did you receive in total in the last 4 weeks that you earned from work (excluding gifts or loans)? Please provide the amount in local currency.</i>							
<i>Q7. When you finished participating in the safe spaces, were you linked to a business activity or given a grant to start a business?</i>							
<i>Note that Income is rounded to the nearest Ushs 1,000</i>							

7.2. Productive assets

Asset ownership by the youth can increase their likelihood to recover from a shock in that they can dispose of those assets to raise funds or use them to increase or sustain income. This may have a negative longer-term effect, however, if the challenging situation requires them to dispose of assets that are or could be relied on to produce income.

As the GIRL-H program links participants to income generating activities and improves their ability to save, the participants are likely to purchase more assets in the longer term. The impact is unlikely to be felt over the lifetime of the program, since not enough time would have elapsed for respondents to get a job or establish a business, save money and purchase more assets.

However, the survey measured types of productive assets⁵ personally owned by respondents for information and for future follow up. They were presented with a list of productive assets and asked if they personally owned at least one of those assets.

In Kenya, the average number of asset **types** personally owned by respondents increased from 2.4 in the baseline to 4.5 in the midline.

Table 8: Productive asset types owned by the youth in Kenya

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Plough - oxen pulled	2	2	0	11	14	12	20

⁵ The Tango International approach measured all assets.

Mechanical plough	0	0	0	9	13	12	17
Farming tools e.g., Sickle, axe, shears, hoe, spade or shovel or other tool	16	20	3	41	38	40	30
Knapsack chemical sprayer	0	0	0	3	4	6	0
Mechanical water pump	0	0	0	8	6	6	7
Motorized water pump	0	0	0	10	7	6	10
Stone grain miller	0	0	0	10	8	7	13
Motorized grain mill	0	0	0	7	7	6	10
Tractor	0	0	0	5	6	3	13
Handheld motorized tiller,	0	0	0	6	6	4	10
Knapsack sprayer	2	2	0	8	8	7	13
Agricultural land	5	7	0	20	19	18	23
Oxen	0	0	0	9	9	9	10
Cattle	14	18	3	38	25	24	27
Goat	42	40	47	64	60	52	83
Sheep	23	24	17	55	34	30	47
Donkey/mule	14	17	7	22	25	24	27
Poultry	15	20	0	26	21	22	17
Camel	6	7	3	12	18	18	17
Horse	0	0	0	2	1	1	0
Honey bee hives	3	4	0	4	8	10	0
Average number of productive asset TYPES owned by youth	2.4	2.6	1.6	4.3	4.5	4.5	4.5
<i>Notes:</i>							
<i>E2. Do you personally own [MENTION ASSET]?</i>							

In Uganda, the average number of asset types owned by respondents increased from 2.3 in the baseline to 4.9 in the midline.

Table 9: Productive asset types owned by the youth in Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Plough - oxen pulled	11	10	13	-	30	24	39
Mechanical plough	0	0	0	-	3	2	4
Farming tools e.g., Sickle, axe, shears, hoe, spade or shovel or other tool	46	44	49	-	82	84	81
Knapsack chemical sprayer	0	0	0	-	5	4	6
Mechanical water pump	0	0	0	-	0	1	0
Motorized water pump	0	1	0	-	1	1	0

Stone grain miller	19	20	17	-	66	65	66
Motorized grain mill	0	1	0	-	2	1	3
Tractor	0	0	0	-	0	1	0
Handheld motorized tiller,	1	0	2	-	0	1	0
Knapsack sprayer	0	0	0	-	3	2	4
Agricultural land	16	15	19	-	73	72	75
Oxen	3	2	4	-	22	21	24
Cattle	9	8	10	-	35	31	42
Goat	12	11	14	-	40	35	48
Sheep	3	2	5	-	27	21	38
Donkey/mule	1	1	1	-	8	7	11
Poultry	21	24	17	-	55	56	54
Camel	0	0	1	-	4	2	8
Horse	0	0	0	-	1	1	1
Honey bee hives	3	2	4	-	11	8	16
Average number of productive asset TYPES owned by youth	2.3	2.3	2.3	-	4.9	4.5	5.5
<i>Notes:</i>							
<i>E2. Do you personally own [MENTION ASSET]?</i>							

Key learnings:

Average number of productive asset types and sources of income have gone up in both Kenya and Uganda, and so has the average monthly income.



8. Individual traits

8.1. Confidence index

The ultimate goals of the GIRL-H program are improved individual human, social and financial capacities, which is expected to lead to an increased ability of the young people who participate to withstand shocks and stress, and increased well-being over time. In terms of individual human capacities there is an expectation that young people will grow in self-confidence, self-efficacy, and agency. The survey covered a number of themes relating to this pillar. The ability of a person to adapt in the face of shocks and problems is based on their individual traits as well as on social and structural issues. These individual traits include their feelings of agency to make things happen, their confidence to adapt, whether or not they feel in control of their situation and whether or not they have aspirations to change. An overall combined index across questions relating to these factors has been created, with results shown in the table below. It is a combination of all relevant variables into a score that ranges from 0 to 14. The component variables are explained in the other sub-sections of this chapter.

The midline results show a significant change in the confidence index for respondents in Uganda, with an average score of 10.9 compared to 8.7 in the baseline. In Kenya, there was no significant change between baseline and midline.

Table 10: Indicator number G1.1 Confidence index - Kenya and Uganda

s	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
Overall aspirations, confidence, and control index average	9.1	9.2	8.8	8.9	8.8	8.8	8.7
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
Overall aspirations, confidence, and control index average	8.7	8.4	9.0	-	10.9	10.8	11.0
<i>Notes: Index based on an addition of all the variables in this section.</i>							

The confidence index is a summary of the following constructs.

8.1.1. Absence of fatalism

The belief in being able to make a difference in one's life is an important precursor to people making changes to prepare for or adapt to stresses. This is measured in terms of whether they believe that "each person is responsible for his or her own success or failure in life or if it is just a matter of destiny", and whether they believe "success depends on hard work or just luck"⁶. It also looks at whether they agree or disagree that "what is going to happen will happen" and "It is not always wise for me to plan too far ahead because many things turn out to be a matter of good or bad fortune". The GIRL-H project aims to build this confidence and feeling of empowerment and control. These results are shown in the tables below.

In Kenya, the average score on the absence of fatalism index was the same in baseline and endline, both at 2.9. There was no significant change in in the attribute scores except for those who believed that "to be successful, above all one needs to work very hard". More respondents in the midline compared to baseline believed that success is by luck.

Table 11: Absence of fatalism - Kenya

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Select one you agree most with:							

⁶ The belief in the future sub-index is not covered by the GIRL-H evaluation questionnaire .

Each person is primarily responsible for his/her success or failure in life.	77	72	90	80	72	71	73
One's success or failure in life is a matter of his/her destiny.	23	28	10	20	28	29	27
Select one you agree most with:							
To be successful, above all one needs to work very hard.	82	80	87	60	63	66	53
To be successful above all one needs to be lucky.	18	20	13	40	38	34	47
Strongly disagree, slightly disagree, or disagree with:							
My experience in life has been that what is going to happen will happen.	36	29	57	39	35	36	30
It is not always wise for me to plan too far ahead because many things turn out to be a matter of good or bad fortune.	29	25	36	21	17	16	23
Average score:							
Absence of fatalism index	2.9	3.0	2.8	2.8	2.9	2.9	2.9

Notes:

This index is created by combining questions H1 and H2, as follows.

H1. Please tell me which one of these two statements you most agree with "Each person is primarily responsible for his/her success or failure in life" - score of 1, "One's success or failure in life is a matter of his/her destiny" – score of 0; "To be successful, above all one needs to work very hard" – score of 1, and "To be successful above all one needs to be lucky" - score of 0. This is combined with:

H2. Now, please tell me to what extent you agree or disagree with each of the following statements. Respondents are given a score of 1 if they say they "strongly disagree", "disagree", or "slightly disagree" with "My experience in life has been that what is going to happen will happen" and "It is not always wise for me to plan too far ahead because many things turn out to be a matter of good or bad fortune".

This is then combined into an index where the maximum score is 10.

In Uganda, the average score on the absence of fatalism index in the midline was 2.9 compared to 1.8 in the baseline. The proportion of respondents who believed that they need to plan for the future significantly increased from 60% in the baseline to 78% in the midline.

There was also a significant difference in the proportion of respondents who believed that "one is primarily responsible for his/her success or failure in life". More respondents in the midline compared to the baseline believed that success or failure in life is a matter of destiny or that what is going to happen will happen.

Table 12: Absence of fatalism – Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Select one you agree most with:							
Each person is primarily responsible for his/her success or failure in life.	88	93	81	-	82	79	85
One's success or failure in life is a matter of his/her destiny.	12	7	19	-	18	21	15

Select one you agree most with:							
To be successful, above all one needs to work very hard.	81	79	83	-	82	79	86
To be successful above all one needs to be lucky.	19	21	17	-	18	21	14
Strongly disagree, slightly disagree, or disagree with:							
My experience in life has been that what is going to happen will happen.	49	43	58	-	41	42	39
It is not always wise for me to plan too far ahead because many things turn out to be a matter of good or bad fortune.	40	33	51	-	22	22	23
Average score:							
Absence of fatalism index	1.8	1.8	1.7	-	2.9	2.9	3.0
<i>Notes:</i>							
<i>This index is created by combining questions H1 and H2, as follows.</i>							
<i>H1. Please tell me which one of these two statements you most agree with "Each person is primarily responsible for his/her success or failure in life" - score of 1, "One's success or failure in life is a matter of his/her destiny" – score of 0; "To be successful, above all one needs to work very hard" – score of 1, and "To be successful above all one needs to be lucky" - score of 0. This is combined with:</i>							
<i>H2. Now, please tell me to what extent you agree or disagree with each of the following statements. Respondents are given a score of 1 if they say they "strongly disagree", "disagree", or "slightly disagree" with "My experience in life has been that what is going to happen will happen" and "It is not always wise for me to plan too far ahead because many things turn out to be a matter of good or bad fortune".</i>							
<i>This is then combined into an index where the maximum score is 10.</i>							

8.1.2. Confidence to adapt

As a person meets others and is exposed to other lifestyles and views, then that person may build knowledge and confidence to change. We measured confidence to adapt by combining results from willingness to move to improve life, communication, or engagement in economic activities with people outside of the village, getting together with other people to have food or drinks, attending a religious service, and having stayed outside the village or ward.

Based on the average score combined across these factors, there was no significant difference between baseline and midline for Kenya.

In Uganda, the midline score was 5.0 depicting a significant change from the baseline score which was 4.2. There was a significant positive change in all the factors. The proportion of respondents with a "strong confidence to adapt" increased from 47% to 76% between baseline and midline.

Table 13: Exposure to alternatives index - confidence to adapt - Kenya and Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
No confidence to adapt (score of 0)	6	7	3	13	9	9	10

Low confidence to adapt (score of 1 or 2)	27	29	23	22	32	30	37
Confident to adapt (score of 3 or 4)	45	43	50	32	37	40	30
Strong confidence to adapt (score of 5 or 6)	21	21	23	33	22	21	23
Average	3.4	3.4	3.4	3.7	3.2	3.2	3.3
UGANDA							
Base: n = total sample	273	165	108		273	165	108
	%	%	%	%	%	%	%
No confidence to adapt (score of 0)	2	3	1	-	0	0	0
Low confidence to adapt (score of 1 or 2)	13	18	6	-	2	3	1
Confident to adapt (score of 3 or 4)	37	35	41	-	21	22	22
Strong confidence to adapt (score of 5 or 6)	47	44	52	-	76	75	78
Average	4.2	4.1	4.4	-	5.0	4.9	5.1
<i>Notes:</i>							
<i>The confidence to adapt indicator is based on six variables regarding the degree to which the respondent is exposed to alternatives.</i>							
<i>Three binary variables each equal to 1 if the respondent:</i>							
<ul style="list-style-type: none"> • <i>Is willing to move somewhere else to improve his/her life (QH4)</i> • <i>Communicates regularly with at least one person outside of the village (QH5)</i> • <i>Engaged in any economic activities with members of other villages or clans during the week prior to the survey (QH6)</i> 							
<i>The remaining three variables are based on binary (dummy) variables to the following questions:</i>							
<ul style="list-style-type: none"> • <i>How many times in the past month have you gotten together with people to have food or drinks, either in their home or in a public place? (QH7)</i> • <i>How many times in the past month have you attended a church/mosque or other religious service? (QH8)</i> • <i>How many times in the past month have you stayed more than two days outside of this kebele? (QH9)</i> 							
<i>To create the binary variables: binary=1 if response > 1, otherwise binary=0.</i>							

8.1.3. Perceived control over their lives

For a person to be confident in their ability to change to avoid or cope with stresses and challenges, they need to feel in control of their own actions. Through the GIRL-H Safe Spaces program, it is expected that participants will improve the belief that they can control their lives. This is measured by asking respondents if they agree or disagree with:

- My life is chiefly controlled by other powerful people.
- I can mostly determine what will happen in my life.
- When I get what I want, it is usually because I worked hard for it.
- My life is determined by my own actions.

In Kenya, the results show no significant difference in the scores compared to the baseline except for respondents who believed that they can mostly determine what happens in their lives. This increased significantly from 62% in the baseline to 78% in the midline.

Table 14: Locus of control - Kenya

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
I feel like what happens in my life is mostly determined by other powerful people (% disagree + slightly + strongly disagree)	66	62	77	57	54	57	47
I can mostly determine what will happen in my life (% agree + slightly + strongly agree)	62	72	30	67	78	79	77
When I get what I want, it is usually because I worked hard for it' (% agree + slightly + strongly agree)	85	87	80	85	87	84	93
My life is determined by my own actions (% agree + slightly + strongly agree)	88	89	87	83	84	83	87
Index summary scores							
	%	%	%	%	%	%	%
No control (score of 0 or 1)	4	3	7	8	3	3	3
Low control (score of 2)	15	16	14	20	21	22	17
Medium control (score of 3)	51	45	69	41	45	42	53
High control (score of 4)	30	36	10	31	31	32	27
Average	3.1	3.1	2.8	3.0	3.0	3.0	3.0
Notes:							
The locus of control indicator is constructed from a 6-point agreement scale of four questions. For each question, a binary variable is created equal to 1 if the respondent reports they "strongly agree", "agree", or "slightly agree" with the question (QH3):-							
<ul style="list-style-type: none"> • My life is chiefly controlled by other powerful people. (reverse-code) • I can mostly determine what will happen in my life. • When I get what I want, it is usually because I worked hard for it. • My life is determined by my own actions 							

Like in Kenya, there was no significant difference in the average scores for midline and baseline in Uganda. Nevertheless, there was a significant positive change in the proportion of respondents who felt that they can mostly determine what happens in their lives, from 63% in the baseline to 73% in the midline. Similarly, respondents increasingly believed that their lives are determined by their own actions. This was 80% in the baseline and 88% in the midline indicating a significant change.

Table 15: Locus of control – Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
I feel like what happens in my life is mostly determined by other powerful people (% disagree + slightly + strongly disagree)	53	44	67	-	47	50	43
I can mostly determine what will happen in my life (% agree + slightly + strongly agree)	63	68	56	-	73	76	69
When I get what I want, it is usually because I worked hard for it' (% agree + slightly + strongly agree)	88	84	94	-	91	92	90
My life is determined by my own actions (% agree + slightly + strongly agree)	80	80	81	-	88	88	87
Index summary scores							
	%	%	%	%	%	%	%
No control (score of 0 or 1)	11	11	12	-	4	2	7
Low control (score of 2)	19	19	19	-	19	17	21
Medium control (score of 3)	42	52	26	-	50	52	47
High control (score of 4)	28	18	43	-	27	28	25
				-			
Average	2.9	2.8	3.0	-	3.0	3.1	3.0
Notes:							
The locus of control indicator is constructed from a 6-point agreement scale of four questions. For each question, a binary variable is created equal to 1 if the respondent reports they “strongly agree”, “agree”, or “slightly agree” with the question (QH3):-							
<ul style="list-style-type: none"> • My life is chiefly controlled by other powerful people. (reverse-code) • I can mostly determine what will happen in my life. • When I get what I want, it is usually because I worked hard for it. • My life is determined by my own actions 							

Key learnings:

The self-confidence of participants has increased, mainly in Uganda.

More respondents in Uganda now believe that they need to plan into the future and not leave things to fate.

In addition, more respondents in Uganda now feel confident to adapt to changes to improve their lives.

More respondents in both Kenya and Uganda now believe that they can mostly determine what happens in their lives, indicating an improved feeling of being in control of their lives.



9. Life skills

9.1. Average life skills index

The GIRL-H program aims to help adolescents and young people develop valuable life skills. Some of these skills were measured in the survey and have been developed into a combined index, based on whether or not they:-

- understand safe and unsafe ways of making money,
- know where or how to get an internship or an apprenticeship,
- have a clear life goal and plan,
- are a member of any group,
- personally received income in past 12 months, there are involved in household decision making,
- have knowledge of ways of staying safe from violence,
- have knowledge of the different types of violence and where to report or seek help in case of any form of violence,
- are confident to say no to unwanted sexual advances, and

- received any information or training on various topics including vocational or skills training, business training, money management, how to save for the future, how to search for a job, equal rights for men and women, how to protect their health, how to be listened to in their community, importance of staying in school, any form of violence, and whether they got any help to stay in school, got an apprenticeship, internship or placement at a workplace.

The life skills index results indicate a positive change between baseline and midline for respondents in both Kenya and Uganda, though not significant. The average scores were 23.5 in the baseline and 25.7 in the midline for Kenya, 28.9 in the baseline and 32.8 in the midline for Uganda.

Table 16 Indicator number 1.2: Life skills index

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
Average score on index	23.5	25.0	19.0	26.6	25.7	25.9	25.2
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
Average score on index	28.9	27.4	31.4	-	32.8	31.6	34.5

Notes: Index is based on,

G9. In the past 12 months, did you?

- receive any vocational (job) or skills training?
- receive any business training – how to start or run a business, including how to manage business finances?
- receive training on how best to manage your money
- go on an apprenticeship
- do an internship or placement at a workplace
- get information or help on how to search for a job
- get any information on how to save for the future
- get any information on equal rights for men and women
- get any information on how to protect your health
- how to be listened to in your community
- get information on the importance of staying in school
- get any help to stay in school
- Information about gender based, sexual or other violence

G10. Do you know where or how to get an internship or an apprenticeship? (Apprenticeship is when you do a job for a period in order to gain the skill in that job)

G11. Do you have a clear life goal and a plan of how to reach it? (A life goal is what you want to accomplish/achieve in your life. A life plan is a guide that helps you achieve your life goal) – both plan & goal, either a plan or a goal, none/refused

H11. Do you feel comfortable participating in community forums where decisions are made?

I8. Are you a member of any of these groups? - One group, more than one group, no group

L1c. if personally received income from any source in the last 12 months?

L2. Did you receive income from any of these sources in the past 12 months

L4. In the past 12 months, were you involved in making decisions on how income is used in your household? IF YES, how much input did you have in decisions on the use of income in your household?

L5. Are you able to identify safe and unsafe ways of earning money?

N1. Do you know any things you can do to stay safe from violence? DO NOT READ OUT. MULTIPLE RESPONSE

N2. Please name the three different types of violence that one person can do to another? DO NOT READ OUT. MULTIPLE RESPONSE

N3. If you or someone else you know is sexually violated, do you know where it should be reported?

N13. Have you received or had access to information about where to seek help if you or anyone you know experience any form of violence or harassment or how to prevent it?

N14. If you were to receive unwanted sexual advances from an older person in the future, how confident do you feel to be able to say no and put them off?

Impact indicator G.1.2

9.2. Life goal

The GIRL-H program helps participants to have a goal in life and a plan to get there. The data below is based on respondents' claims of whether they have a goal and / or a plan of how to reach it.

The percent of respondents with a life goal and / or a plan increased significantly for Kenya but not for Uganda. From 7% in the baseline to 19% in the midline for Kenya, and from 8% in the baseline to 11% in the midline for Uganda.

There was no significant difference in the average scores of the respondents on the life goal and/or plan index between baseline and midline in both Kenya and Uganda. The average score was 1.9 in the baseline and 1.7 in the midline for Kenya, 1.9 in the baseline and 1.8 in the midline for Uganda.

Table 17: Whether has a life goal and / or plan

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Has neither a goal or a plan	23	23	23	34	27	29	20
Has either a goal or a plan (not both)	7	6	10	12	19	22	10
Has both a life goal and a plan	70	71	67	53	54	49	70
Average score on index	1.9	1.9	1.9	1.8	1.7	1.7	1.9
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Has neither a goal nor a plan	40	41	39	-	44	48	39
Has either a goal or a plan (not both)	8	4	16	-	11	12	9
Has both a life goal and a plan	51	55	45	-	45	40	52
Average score on index	1.9	1.9	1.7	-	1.8	1.8	1.9
<i>Notes:</i> G11. Do you have a clear life goal and a plan of how to reach it? (A life goal is what you want to accomplish/achieve in your life. A life plan is a guide that helps you achieve your life goal) Life goal - if yes - value of 1 Life plan - if yes - value of 1 Create average							

9.3. Skills relating to income generation

9.3.1. Vocational skills

The GIRL-H program gives participants the opportunity to acquire vocational or practical skills by connecting them to specific economic activities where they get to learn and earn income.

In Kenya, respondents who claimed to have participated in an internship or apprenticeship were 13% in the baseline and 16% in the midline. In Uganda, the figures were 11% in the midline and 14% in the baseline. These results show no significant difference between baseline and midline for both Kenya and Uganda.

Table 18: Participated in internship or apprenticeship in the past 12 months

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Participated in internship or apprenticeship	13	18	0	18	16	14	20
Amongst those aged 18+							
Base: n = those aged 18+	77	54	22	89	80	58	23
	%	%	%	%	%	%	%
Participated in internship or apprenticeship	17	24	0	20	15	14	18
Amongst those who transitioned							
Base: n = those transitioned	49	39	10	-	49	39	10
	%	%	%	%	%	%	%
Participated in internship or apprenticeship	14	18	0	-	24	23	30
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Participated in internship or apprenticeship	14	11	18	-	11	9	13
Amongst those aged 18+							
Base: n = those aged 18+	145	75	70	-	187	114	73
	%	%	%	%	%	%	%
Participated in internship or apprenticeship	21	21	21	-	12	9	16
Amongst those who transitioned							
Base: n = those transitioned	144	92	52	-	144	92	52
	%	%	%	%	%	%	%

Participated in internship or apprenticeship	10	8	15	-	11	9	15
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Notes: G9. In the past 12 months, did you go on an apprenticeship? do an internship or placement at a workplace?
Output indicator 1.1.2.7

9.3.2. Received business training

The GIRL-H program also provides a range of knowledge and learning to participants around how to set up and run a business.

The following table shows the proportion respondents who had received business skills training in past 12 months. This is, however, of unspecified quality and from any source. At the end-line phase there is a need to include a question to help understand the source and quality of training received.

In Kenya, the proportion of respondents who had received business training significantly increased from 38% in the baseline to 56% in the midline. The situation was similar in Uganda where 59% of respondents in the baseline and 67% in the midline had received the training, indicative of a significant positive change.

Table 19: Received business training in the past 12 months

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Received business training	38	46	13	58	56	59	47
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Received business training	59	58	59	-	67	70	63

Notes: A combined variable created from G9. In the past 12 months, did you?
receive any vocational (job) or skills training? - value = 1
receive any business training – how to start or run a business, including how to manage business finances? - value = 1
receive training on how best to manage your money - value = 1
Output indicator 1.1.2.1

9.3.3. Being aware of safe and unsafe ways of making money

Participants in GIRL-H learn what are safe and unsafe ways of making money; unsafe being involvement in criminal activities, transactional sex or prostitution.

In both Kenya and Uganda, there was a significant difference in the proportion of respondents who claimed to know safe ways of making money at the midline and baseline. In Kenya, the figure was 66% in the baseline and 52% in the midline indicating a significant drop. In Uganda, it was a significant increase from 61% in the baseline to 81% in the midline. These are, however, claims and their knowledge may not be of the same nature as that conveyed to them as part of GIRL-H.

Table 20: Able to identify safe ways of making money

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Claims to know safe ways of making money	66	63	73	60	52	50	57
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Claims to know safe ways of making money	61	61	61	-	81	77	87
<i>Notes:</i>							
<i>Based on question L5. Are you able to identify safe and unsafe ways of earning money?</i>							
<i>Output indicator 1.1.1.3</i>							

9.3.4. Knowing how to search for and apply for a job

Knowing how to search for a job and apply to a job vacancy is challenging for young people in the program areas. Thus, the GIRL-H program provides this kind of training for participants.

Compared to the baseline, the midline results for Kenya and Uganda indicate a positive change in the proportion of respondents who received information or help on how to search for a job. Though the difference is not significant for Kenya where the baseline was 17% and the midline was 20%.

In Uganda, the difference was significant with 27% in the baseline and 46% in the midline amongst those who were out of school.

Table 21: Received information, training or help on searching for a job

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = not enrolled in school	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Received information, training or help on searching for a job	17	22	0	18	20	20	20
UGANDA							
Base: n = not enrolled in school	273	165	108	-	205	120	85
	%	%	%	%	%	%	%
Received information, training or help on searching for a job	27	24	33	-	46	47	46
<i>Notes:</i>							

Based on question G9. In the past 12 months, did you? get information or help on how to search for a job
Output indicator 1.1.2.3

9.3.5. Received information on the importance of staying in school

For those of school-age, staying in education is vital to their future prosperity and resilience. The GIRL-H program emphasizes the importance of going to school or staying in school and also provides assistance for youth to attend school in some cases.

The proportion of respondents who received information on the importance of staying in school or help to stay in school is not significantly different between midline and baseline for both Kenya and Uganda.

In Kenya, 36% in the midline and 43% in the baseline had received information on the importance of staying in school while 19% in the midline and 24% in the baseline had received help to stay in school.

For Uganda, 62% in the midline and 60% in the baseline had received information on the importance of staying in school, whereas 38% in the midline and 34% in the baseline had received help to stay in school.

Table 22: Received information on the importance of staying in school or received help to stay in school

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Got information on the importance of staying in school	43	47	30	34	36	41	20
Got any help to stay in school	24	26	20	18	19	22	10
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Got information on the importance of staying in school	60	52	73	-	62	59	68
Got any help to stay in school	34	38	29	-	38	42	33

Notes:

Based on question G9. In the past 12 months, did you? Get information on the importance of staying in school / or receive any help to stay in school?
Output indicator 1.1.2.4

9.4. Gender norms index

The GIRL-H program aims to change perceptions amongst participants around what is “normal” for men and women to do in life, and to encourage participants to be more active members in household and community decision-making.

The gender norms index has been created based on respondents' belief about who they think should be mainly responsible for different roles such as cooking meals, getting a job or work outside the home, speaking out at public meetings, and caring for children. Whether they believe it should be men and boys, women and girls, or both men and boys and women and girls equally. This was combined with the extent of agreement or disagreement with the following statements:

- “Women should have equal rights to a job as men”,
- “Women make as good business leaders as men”
- “Men and women are equally able to make good political leaders” and
- “A man should always have the final word about decisions in his home”

Scores range from minus 8 to plus 16. The average score in Kenya is 5.2 in the midline compared to 6.1 in the baseline. There are significant differences between the midline and baseline results for most of the attributes.

In Uganda, the average score increased from 3.8 in the baseline to 6.2 in the midline, also with significant differences in the results for most of the attributes.

Tables with the midline and baseline results for each attribute have been [appended](#).

Table 23: Gender norms index

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
Average score on gender norms index	6.1	6.4	5.5	6.0	5.2	5.0	5.6
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
Average score on gender norms index	3.8	3.4	4.4	-	6.2	6.1	6.5

Notes:

*This index which has a maximum score of 16 is created from M1 and M2 as follows:-
 M1. Thinking about families with children, in your opinion, who do you think should be mainly responsible for ... Cooking meals; Getting a job / work outside the home; speaking out at public meetings; caring for children. Answers were scored as follows: the men and boys in the home (value of 0), the women and girls (value of 0), or both men and boys and women and girls equally (Value of 2), or don't know (value of 1). Combined with M2: to what extent do you agree with the following statements? “women should have equal rights to a job as men”, “women make as good business leaders as men”, “men and women are equally able to make good political leaders” and “a man should always have the final word about decisions in his home”, with scoring of strongly agree (2), agree a bit (1), neither agree nor disagree (0), disagree a bit (-1) or strongly disagree (-2), except for the final statement which was reverse coded.
 Outcome indicator 2.2.1*

9.4.1. Beliefs about gender roles

In Kenya, the percentage of respondents who believed that women and girls are mainly responsible for **getting a job / work outside the home** significantly increased from 3% in the baseline to 11% in the midline.

In Uganda, the proportion of respondents who believed that men and boys are mainly responsible for **getting a job / work outside the home** significantly increased from 22% in

the baseline to 40% in the midline. The increase was significant amongst both female and male respondents. The percent of female respondents who believed that getting a job outside the home is mainly for women and girls significantly dropped from 24% to 3%, and the percent of male respondents who believed that the role is for both men and boys and women and girls equally also dropped from 75% to 56% between baseline and midline.

In Uganda, there was a significant increase in the proportion of male respondents who believed that women and girls are **mainly responsible for cooking meals**, from 68% in the baseline to 84% in the midline. Similarly, the proportion of male respondents who believed that both men and boys and women and girls are equally responsible for cooking meals significantly reduced from 31% in the baseline to 14% in the midline.

There was a significant increase in the percent of respondents who believed that men and boys were mainly responsible **for speaking out at public meetings**, from 21% in the baseline to 31% in the midline. The increase was significant amongst the female and not the male respondents. The proportion of respondents who believed that the role was for both men and boys and women and girls equally significantly dropped from 76% in the baseline to 67% in the midline.

The proportion of respondents who believed that women and girls are mainly responsible for **caring for children** significantly increased from 53% to 67%. The increase was significant amongst the female and not the male respondents. There was a significant drop in the percent of respondents who believed that the role was for both men and boys and women and girls equally, from 45% to 32%. This was also significant amongst the females and not the males.

9.4.2. Extent of agreement or disagreement with statements

In Kenya, there is a significant change in the proportion of respondents who agreed somewhat and strongly that **women should have equal rights to a job as men**. Those who agreed somewhat increased from 23% to 39% while those who strongly agreed dropped from 63% to 45% between baseline and midline.

Those who strongly agree that **women make as good business leaders as men** significantly reduced from 50% in the baseline to 35% in the midline,

The percent of respondents who agreed somewhat that **men and women are equally able to make good political leaders** significantly increased from 24% to 37%, while those who strongly agreed dropped from 52% to 22% between baseline and midline.

In Uganda, the percent of respondents who agreed a bit that **women should have equal rights to a job as men** significantly dropped, from 40% to 27% while those who strongly agreed increased significantly from 49% to 59%.

Those who strongly agreed that a man should **always have the final word about decisions in his home** significantly increased from 31% to 52%. The increase was significant amongst both the female and male respondents.

Respondents who agreed a bit that men and women are **equally able to make good political leaders** significantly dropped from 38% to 27%. This was significant amongst the male respondents only. In contrast, the proportion of men who strongly agreed with the statement increased significantly from 43% to 61%. Female respondents who disagreed a bit with the statement significantly went up from 4% to 10%.

9.5. Involvement in household decision making

Where decisions were made on how income is used in the household, the percent of respondents who had input into decision-making were 47% in the baseline and 36% in the midline for Kenya, and 56% in the baseline and 50% in the midline for Uganda. The difference between baseline and midline is significant for Kenya and not for Uganda.

Table 24: Involvement in household decision making

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = Where decisions were made	116	86	30	131	116	86	30
	%	%	%	%	%	%	%
No input	53	56	40	57	64	58	80
Input into very few decisions	24	18	40	17	22	25	10
Input into some decisions	15	14	20	12	3	4	0
Input into most decisions	3	4	0	8	6	4	10
Input into all decisions	5	7	0	6	5	7	0
UGANDA							
Base: n = Where decisions were made	235	140	93	-	262	157	105
	%	%	%	%	%	%	%
No input	44	49	36	-	50	58	40
Input into very few decisions	23	28	16	-	19	19	20
Input into some decisions	17	13	22	-	9	11	8
Input into most decisions	12	6	19	-	14	8	20
Input into all decisions	5	4	7	-	7	4	12
<p><i>Notes:</i> L4 In the past 12 months, were you involved in making decisions on how income is used in your household? IF YES, how much input did you have in decisions on the use of income in your household? No input (value of 0), Input into very few decisions (Value of 2), Input into some decisions (Value of 3), Input into most decisions (Value of 4), Input into all decisions (Value of 5), No decision made (Value of 1) Outcome indicator 2.2.2</p>							

Key learnings:

Gender norms improved in Uganda but not in Kenya. There is as yet no improvement in decision making involvement in both countries.



10. Well-being

One of the critical desired goals of the program is an improvement in the well-being of youth.

10.1. Youth well-being index

This has been captured in an index representing the way participants answered a range of questions in the survey, namely questions linked to the following indices. The individual questions for each index have been [appended](#):

- Good health and optimal nutrition index
- Connectedness, positive values and contribution to society index
- Safety and supportive environment index
- Learning, competences, education, skills and employability index
- Agency index

In Kenya, there was no significant change in the average score on well-being amongst the respondents. The scores were 38.1 in the baseline and 39.9 in the midline. In contrast, the average score on well-being of respondents in Uganda increased significantly from 43.3 in the baseline to 56.4 in the midline.

Table 25 Impact indicator G.2.2: Youth wellbeing index

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Average score on index	38.1	39.4	34.4	42.1	39.9	40.5	38.0
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Average score on index	43.3	41.2	46.5	-	56.4	55.2	58.3
Notes: Index is based on, -Good health and optimal nutrition index -Connectedness, positive values, and contribution to society index -Safety and supportive environment index -Learning, competences, education, skills, and employability index -Agency index Impact indicator G.2.2							

10.2. Hunger and nutrition

10.2.1. Experience of hunger

With increased income, it is believed that program participants will be able to buy food and therefore avoid or reduce the incidences of hunger. Thus, respondents were asked if, during the past 12 months, there was a time when they or others in their household were hungry but did not eat because there was not enough money or other resources for food.

In Kenya, the proportion of respondents reporting hunger was significantly higher in the midline at 70% compared to 50% in the baseline. In Uganda, there is no significant difference in the baseline and midline results which were 94% and 93% respectively. In other words, hunger was already high for these respondents in Uganda in the baseline and did not increase at the midline.

Table 26: Household went hungry in past 12 months

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Respondent or others in the household were hungry	50	58	27	58	70	72	63
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108

	%	%	%	%	%	%	%
Respondent or others in the household were hungry	94	92	96	-	93	93	94

Notes:
 F3.: During the past 12 months, was there a time when you or others in your household were hungry but did not eat because there was not enough money or other resources for food?

10.2.2. Number of meals per day

In the midline, respondents were asked the number of meals they ate per day. The question was not asked in the baseline and thus, the results presented in the table below are only for midline. On average, respondents in both Kenya and Uganda ate two meals per day.

The proportion of respondents who ate only one meal per day was considerably higher in Kenya (41%) compared to Uganda (27%).

Table 27: Number of meals per day

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	-	-	-	131	120	90	30
	%	%	%	%	%	%	%
One time	-	-	-	44	41	40	43
Two times	-	-	-	46	45	44	47
Three times	-	-	-	11	13	14	10
More than three times	-	-	-	0	1	1	0
Average number of meals per day	-	-	-	1.7	1.7	1.8	1.7
UGANDA							
Base: n = total sample	-	-	-	-	273	165	108
	%	%	%	%	%	%	%
One time	-	-	-	-	27	23	34
Two times	-	-	-	-	66	70	60
Three times	-	-	-	-	6	7	5
More than three times	-	-	-	-	1	1	1
Average number of meals per day	-	-	-	-	1.8	1.9	1.7

Notes:
 F5. Usually, how many times a day do you eat?

10.3. Experience of violence

An important goal of GIRL-H is to improve gender equity in project communities, with the longer-term goal being to reduce gender violence, and to improve women and girls' coping strategies. This is likely to take a long time to change given the need to change social norms and the beliefs and or behaviour of many individuals within the community.

10.3.1. Knowledge on response to violence index

One of the roles of the Safe Spaces program is to teach the youth how to reduce their exposure to violence, and where to seek help should it happen. Questions relating to these topics have been collated into an overall index, reported in the table below.

There is a positive change in the average scores between baseline and midline for both Kenya and Uganda. For Kenya, the change is not significant. In Uganda, the 6.8 score at midline is significantly higher than the baseline score at 6.3.

Table 28: Knowledge on response to violence index

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Score 0 - 3	10	9	13	12	17	16	16
Score 4 - 6	52	47	67	42	40	37	50
Score 7 - 10	38	43	20	46	44	47	33
Average score on avoiding / responding to violence index (maximum is 10)	5.8	6.1	5.0	6.0	5.9	5.9	5.7
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Score 0 – 3	12	16	8	-	6	7	6
Score 4 – 6	32	29	36	-	34	34	32
Score 7 – 10	56	56	56	-	60	58	62
Average score on violence coping / avoidance index (maximum is 10)	6.3	6.2	6.5	-	6.8	6.8	6.9

Notes: Based on the following questions:

N1. Do you know any things you can do to stay safe from violence? DO NOT READ OUT. MULTIPLE RESPONSES (Identify safe areas, identify someone you trust, Identify safe routes to travel, travel with others, other (Specify), don't know, refused - score of 1 if respondent mentions any of codes 1 through 4, and zero otherwise

N2. Please name the three different types of violence that one person can do to another? DO NOT READ OUT. MULTIPLE RESPONSE (Physical, emotional, sexual, don't know, refused - if 3 correct codes, score of 3, if 2, score of 2, if 1 score of 1, if none of those, score of zero.

N3. If you or someone else you know is sexually violated, do you know where it should be reported? If yes- value of 1

N5. How quickly would you report? DO NOT READ OUT. SINGLE RESPONSE - if "within 72 hours" - value of 1

N11. IF YES IN QUESTION N8 OR N9: Did you tell anyone about this unwanted sexual experience? - if yes - value of 1

N13. Have you received or had access to information about where to seek help if you or anyone you know experience any form of violence or harassment or how to prevent it?

N14. If you were to receive unwanted sexual advances from an older person in the future, how confident do you feel to be able to say no and put them off? (Very confident - value of 2, a little confident - value of 1, not sure - value of 0, don't know - value of 0, Refused, not confident at all - value of 0)
Outcome indicator 2.2.4

10.3.2. Reduction in experience of violence

Because the worst effect of lack of equity is actual violence against women and girls the proxy chosen to indicate this is a reduction in gender-based violence, which is also a particular focus of the program. This is measured via questions on the extent to which the respondents have been subject to the following types of violence in the past 12 months: -

- verbal abuse or threats.
- physical violence.
- inappropriate touching, kissing or attempted to force them to have sex even if did not succeed.
- forced to have sex.

As mentioned above, it could take a broad program focused on a range of individuals within the community over a significant period of time to make change in actual violence levels.

In Kenya, a majority (69%) of respondents at midline claimed not to have been subject to any of these forms of violence in the past 12 months, the same results as the baseline.

The average number of types of violence experienced by respondents is 2.2 in the midline compared to 1.8 in the baseline, indicating a slight upward change. There is no significant change in the proportion of respondents who encountered the different types of violence.

Physical and verbal abuse or threats are the most common types of violence at 24% and 23% respectively in the midline.

Table 29: Measures of violence in past 12 months – Kenya

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
None	69	64	83	75	69	68	73
One type of violence	13	14	10	11	12	13	7
Two types of violence	13	16	7	8	7	8	3
Three types of violence	1	1	0	3	6	7	3
Four types of violence	3	4	0	3	7	4	13
Reduced violence against women compound variable – average	1.8	1.9	1.4	1.9	2.2	2.1	2.9
Have you ever received any verbal abuse or threats? e.g been threatened, insulted, received negative comments or jokes about yourself, or	22	23	17	18	23	22	27

received unwanted sexual comments or deliberately been made to feel bad about yourself?							
Ever been subject to any physical violence? e.g. slapped, pushed, kicked, or hurt in any other physical way.	18	21	7	16	24	26	20
Ever touched your private parts, made you touch their private parts, touched you inappropriately, tried to kiss you, or tried to force you to have sex even if they didn't succeed.	10	13	0	10	13	11	17
Ever been made to have sex when you did not want to?	7	9	0	5	9	8	13
<i>Notes.</i>							
<i>Based on questions N6, N7, N8, N9</i>							

In Uganda, 59% of respondents in the midline and 49% in the baseline had been subject to any form of violence in the past 12 months.

The average number of types of violence encountered by respondents is 1.5 in the midline and 1.8 in the baseline, signifying a positive change.

Like in Kenya, physical and verbal abuse or threats are the most common types of violence. However, the proportion of respondents who encountered these types of violence is significantly smaller in the midline compared to baseline.

Those reporting verbal abuse or threats were 29% in the midline and 37% in the baseline while those reporting physical violence were 18% in the midline and 39% in the baseline.

Table 30: Measures of violence in past 12 months – Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
None	49	47	53	-	59	62	55
One type of violence	22	24	19	-	26	26	27
Two types of violence	21	20	22	-	10	7	14
Three types of violence	5	7	3	-	4	4	4
Four types of violence	3	2	3	-	1	1	1
Reduced violence against women compound variable – average	1.8	1.8	1.8	-	1.5	1.5	1.5
Have you ever received any verbal abuse or threats? e.g. been threatened, insulted, received negative comments or jokes about yourself, or	37	39	33	-	29	24	36

received unwanted sexual comments or deliberately been made to feel bad about yourself?								
Ever been subject to any physical violence? e.g. slapped, pushed, kicked, or hurt in any other physical way.	39	38	40	-	18	15	22	
Ever touched your private parts, made you touch their private parts, touched you inappropriately, tried to kiss you, or tried to force you to have sex even if they didn't succeed.	8	10	6	-	12	13	9	
Ever been made to have sex when you did not want to?	5	6	4	-	4	5	2	
<i>Notes.</i> Based on questions N6, N7, N8, N9								

Both the midline and baseline show that a majority of respondents in Kenya and Uganda are experiencing hunger, and this is aggravated by the drought situation in their areas as noted in the focus group discussions.

Awareness of how to avoid violence, and what to do should it happen improved in Uganda but not in Kenya.

Most common types of violence are physical and verbal abuse or threats, and the proportion of respondents who were subject to these types of violence significantly reduced in Uganda but not in Kenya.



11. Social capacities

Growing social capital helps people withstand the impact of shocks since it gives people the ability to lean on each other during times of need and makes it possible for people to get together to work on problems as a group.

11.1. Community groups

The first component of this is the availability of informal safety nets, which is measured through access to community groups in the community. It is hypothesized that capacity to respond to shocks is enhanced if groups **are available** in the community. Respondents were asked the number of **types** of community organizations in the community that were active in the 12 months prior to the survey. We asked about 10 group types, 11 including “other” types.

- Water or grazing land users group
- Credit or micro-finance group (giving out loans)
- Savings group (like a VSLA, merry-go-round, CHAMA)
- Income generating group (group together to invest in a business activity)
- Mutual self-help group (including burial societies)
- Civic group – to improve the community / community projects

- Religious related group
- Mothers group
- Youth group
- Sports group / team
- Other types of groups

In Kenya, respondents were able to mention two types of groups on average in the midline, and this was the same as the baseline. It should be noted that in effect this is a measurement of both actual existence of groups and the respondents' awareness of the existence of the group.

Respondents in Uganda seem to have access to a relatively higher number of community groups than the respondents in Kenya. In both the midline and baseline, they were able to mention an average of three types of groups available in their community.

Table 31: Availability of community groups

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
Number of groups:-	%	%	%	%	%	%	%
0	1	1	0	1	1	1	0
1	57	57	57	47	52	50	57
2	19	17	27	23	21	22	17
3	13	14	7	15	13	12	17
4+	11	10	10	16	14	14	10
Average number of group types in the village	1.9	1.9	1.8	2.1	2.0	2.1	1.9
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
Number of groups:-	%	%	%	%	%	%	%
0	2	1	4	-	2	1	3
1	27	35	16	-	30	30	30
2	25	23	27	-	19	19	19
3	29	24	36	-	28	28	29
4+	17	19	19	-	20	21	19
Average number of group types in the village	2.7	2.4	3.2	-	2.5	2.5	2.6
<i>Notes: 16. Are any people in your community organized into groups of any type (for example water users groups, savings groups, mothers groups, self-help groups, youth groups, sports groups, clan groups or other)? 17. What types or group exist in the area where you live? [READ OUT] MULTIPLE RESPONSE</i>							

On average, respondents are members of two groups in Kenya and three groups in Uganda. There are no significant differences in the midline and baseline results for both countries.

Table 32: Number of group types is a member of

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
Average number of group types is a member of (maximum is 9)	1.9	1.9	1.8	2.1	2.0	2.1	1.9
Number of group types:-	%	%	%	%	%	%	%
0	1	1	0	1	0	0	0
1	57	57	57	47	53	51	57
2	19	17	27	23	21	22	17
3	13	14	7	15	13	12	17
4+	11	10	10	16	14	14	10
UGANDA							
Base: n = total sample	273	165	108		273	165	108
Average number of group types is a member of (maximum is 9)	2.7	2.4	3.2	-	2.5	2.5	2.6
Number of group types:-	%	%	%	%	%	%	%
0	1	0	4	-	2	1	3
1	27	35	16	-	30	30	30
2	24	22	27	-	19	19	19
3	28	23	36	-	28	28	29
4+	18	20	19	-	20	21	20
<p><i>Notes: Based on questions 16/17. Are you a member of any of these groups? (for example water users groups, savings groups, mothers groups, self-help groups, youth groups, sports groups, clan groups o/r other)? [READ OUT] MULTIPLE RESPONSE.</i></p> <p><i>Note that results are the number of TYPES of groups the person is a member of, not the total number of groups though these are likely to be almost the same.</i></p>							

11.2. Bonding and bridging social capital

Bonding social capital

In our evaluation we are measuring “bonding” social capital looking at connections within the community⁷ at the household level.

⁷ “Linking” social capital to people or groups in positions of power and influence is not covered due to limited questionnaire space and the fact that it is less likely than bonding and bridging social capital to be an outcome of the GIRL-H program.

This is measured by asking if the household would be able to **get help from** or **give help to** people **within their community**, that is either from

- relatives,
- neighbours in the same ethnic group, or
- neighbours in another ethnic group.

The scores range from 0 to 6 depending on the number of groups they are able to get help from or give help to within their community.

In Kenya, the average score on the index in the midline and baseline is the same, both at 2.5. The average score for Uganda is higher in the midline at 3.4 compared to 2.8 in the baseline.

In both Kenya and Uganda, respondents are most likely to give or receive help from two or more groups. The results indicate a strong bonding social capital in both countries. It shows that people in these communities have supportive relationships with people who are not just their relatives.

Table 33: Bonding social capital index results

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
No one they could turn to or would help	3	3	0	5	6	4	10
One group that they could seek help from or give help to	3	3	0	5	8	8	10
Two groups that they could seek help from or give help to	65	62	73	62	58	54	70
Three or more groups that they could seek help from or give help to	31	31	26	28	27	33	10
Index average	2.5	2.5	2.5	2.5	2.5	2.7	2.1
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
No one they could turn to or would help	1	1	3	-	0	0	0
One group that they could seek help from or give help to	4	2	6	-	1	1	1
Two groups that they could seek help from or give help to	56	53	60	-	43	41	45
Three or more groups that they could seek help from or give help to	39	44	30	-	56	59	53
				-			
Index average	2.8	2.9	2.6	-	3.4	3.5	3.4
<i>Notes: This is based on two questions:-</i>							

Q11 Whether the household indicates it would be able to get help from various categories of people living WITHIN their community if they needed it
 Q 13 Whether the household indicates it would be able to give help to people living WITHIN their community who needed it
 An additive index ranging from 0 to 6 is calculated based on the responses to each of the two questions.

The concept of “**bridging social capital**” in contrast to “bonding social capital” as covered above, is the extent to which the household is able to rely on or help people **outside** of their own community including **relatives, neighbours in the same ethnic group, or neighbours in another ethnic group.**

The average score on the index is 2.4 in the midline and 2.6 in the baseline for Kenya, indicating no change. For Uganda, the midline score is 3.6 in the midline and 2.8 in the baseline, indicative of a positive change.

In Kenya, most (58%) of the respondents would give or receive support from two groups while in Uganda, most (62%) would give or receive support from three or more groups. Like bonding social capital, these results show a strong bridging social capital in both countries. However, the bridging social capital is stronger in Uganda than Kenya.

Table 34: Bridging social capital index - Kenya and Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
No one they could turn to or would help	0	0	0	7	7	6	10
One group that they could seek help from or give help to	0	0	0	10	11	11	10
Two groups that they could seek help from or give help to	67	63	77	59	58	56	67
Three or more groups that they could seek help from or give help to	34	37	24	24	24	28	13
Index average	2.6	2.7	2.6	2.4	2.4	2.4	2.1
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
No one they could turn to or would help	1	1	2	-	0	0	0
One group that they could seek help from or give help to	4	4	5	-	0	1	0
Two groups that they could seek help from or give help to	51	48	55	-	37	36	40
Three or more groups that they could seek help from or give help to	43	47	39	-	62	64	60

Index average	2.8	2.9	2.7	-	3.6	3.6	3.4
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Notes:

This index is based on the responses to two questions I2 and I4, whether the household indicated it would be able to get help from various categories of people living OUTSIDE OF their community if they needed it and whether the household indicated it would be able to give help to people living OUTSIDE OF their community who needed it. An additive index ranging from 0 to 6 is calculated based on the responses to each of the two questions, with “no one” = 0 and each of the other responses = 1.

11.3. Engagement with the community

The GIRL-H program encourages youth to engage with the community. Although not directly advocated for by the GIRL-H program, one of the survey questions relating to this asks whether the young person or anyone in their household has worked with others to benefit the village.

The proportion of respondents who had worked with others to benefit the community was greater in Uganda compared to Kenya. For Kenya, this was 28% in the midline and 27% in the baseline. In Uganda, it was 73% in the midline and 64% in the baseline representing a significant positive change. The difference between midline and baseline in Kenya was not significant.

Table 35: Worked with others to benefit the village

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Worked with others to benefit the village	27	29	20	24	28	23	40
UGANDA							
Base: n = total sample				-	273	165	108
	%	%	%	%	%	%	%
Worked with others to benefit the village	64	61	70	-	73	70	76

Notes: Based on question I5. In the last 12 months, have you or anyone in your household worked with others in your village to do something for the benefit of everyone in the village?

The social support network within the communities in both Kenya and Uganda is very strong because respondents' households are able to receive or give help from at least two groups for Kenya and three groups for Uganda - 1. relatives, 2. neighbours in the same ethnic group, 3. neighbours in another ethnic group.

Nearly all respondents are aware of at least one community group-type that is present in their community, and this is higher for Uganda than Kenya.

Engagement with the community has significantly gone up in Uganda, but no change in Kenya.



12. Financial capacities

12.1. Overall financial literacy index

The GIRL-H program aims to build financial literacy through the Safe Spaces program. An overall financial literacy index was created to measure this from whether the respondent or household regularly saves money, amount of savings, having a savings goal, knowing how to apply for a loan, and whether they received training or information on how to manage money or save for the future.

The average score on the financial literacy index in the midline is slightly higher than the baseline average for both Kenya and Uganda. For Kenya, the average was 2.1 in the baseline and 2.3 in the midline. For Uganda, it was 2.4 in the baseline and 2.7 in the midline.

Table 36: Overall financial literacy index

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30

Financial literacy index average (out of maximum of 5)	2.1	2.1	1.9	2.8	2.3	2.3	2.5
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
Financial literacy index average (out of maximum of 5)	2.4	2.5	2.4	-	2.7	2.7	2.8
<i>Notes: Index running from 0 to 5, based on a combination of:-</i> <i>Do you or any other household member regularly save money? - individual - value of 1</i> <i>About how much money do you individually currently have in savings? (NOTE: to be divided into two segments - high / low) - high - value of 1</i> <i>Do you have a clear savings goal – something you know you are saving up to buy or invest in? - yes - value of 1</i> <i>Do you know how to apply for a loan from a bank or micro-finance institution or any other formal financial institution? - yes - value of 1</i> <i>G9 receive training on how best to manage your money - yes - value of 1</i> <i>G9 get any information on how to save for the future - yes - value of 1</i> <i>Outcome Indicator 1.1.2</i>							

12.2. Financial access and behaviours

12.2.1. Saving habit

Savings can help individuals to cope with and recover from shocks. Savings can also increase both consumption and investment (Karlán et al., 2014a)⁸. If an individual has access to cash savings that they can fall back on in the face of a crisis, they are more likely to manage and go through it. Savings can also lead to access to credit which can be used to start or expand one's source of income and consequently improve welfare and resilience. Thus, the GIRL-H project is trying to strengthen the saving habit of participants.

The proportion of respondents who regularly save money increased significantly in the midline for both Kenya and Uganda. In Kenya, it was 26% in the baseline and 35% in the midline. In Uganda, it was 25% in the baseline to 35% in the midline.

Table 37: Percent of respondents who regularly save money - Kenya and Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Respondent regularly saves money	26	28	20	45	35	37	30
Average savings							
Base: n = those who regularly save	24	19	5	39	25	21	4
Average savings	6,698	7,294	4,790	2,629	5,198	5,236	5,000

⁸ Source: Scott, Lucy & Smith, William & Shepherd, Andrew. (2015). Enhanced Resilience through Savings and Insurance via Linkages and Digital Technology. 10.13140/RG.2.1.4212.2961. https://www.researchgate.net/publication/282605785_Enhanced_Resilience_through_Savings_and_Insurance_via_Linkages_and_Digital_Technology

UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Respondent regularly saves money	25	28	21	-	35	30	42
Average savings							
Base: n = those who regularly save	61	39	22	-	93	48	45
Average savings	88,449	50,600	138,915	-	101,416	60,410	145,156
<i>Notes: Based on QJ1 "Do you or any other household member regularly save money?" QJ2. About how much money do you individually currently have in savings?"</i>							

Looking at the participants' household as a whole (i.e. anyone in the household saving), the proportion increased to 47% in the midline from 35% in the baseline for Kenya. Similarly, there was an increase to 58% in the midline from 54% in the baseline for Uganda. However, the difference between the midline and baseline results for both Kenya and Uganda were not significant.

Table 38: Whether respondent or another member of the household regularly saves

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Either the respondent or another household member regularly saves	35	40	20	51	47	47	47
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Either the respondent or another household member regularly saves	54	52	57	-	58	56	61
<i>Notes: Based on QJ1 "Do you or any other household member regularly save money?"</i>							

12.2.2. Membership of a savings group

Membership of a savings group is encouraged by the GIRL-H program, and indeed the Safe Spaces groups in some cases have become savings groups.

The claimed existence of a savings groups in the community is much higher in Uganda (68%) than Kenya (40%) in the midline as it was at the baseline Among the respondents with access to a savings group, membership was higher in Kenya (56%) than Uganda (47%).

A similar trend was recorded in the baseline whereby 34% of respondents in Kenya and 78% in Uganda reported availability of a savings group in the community but membership among those aware was significantly higher in Kenya (49%) than Uganda (25%).

While the difference between the midline and baseline results for Uganda is significant, it is not the same case for Kenya.

Table 39: Membership of a savings group

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Savings group exists in respondents' village	34	41	13	36	40	46	23
Base: n = those who have access to a savings group	41	37	4	47	48	41	7
	%	%	%	%	%	%	%
Member of a savings group	49	54	0	45	56	59	43
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Savings group exists in respondents' village	78	73	85	-	68	66	72
Base: n = those who have access to a savings group	212	120	92	-	187	109	78
	%	%	%	%	%	%	%
Member of a savings group	25	29	18	-	47	39	56
Notes: 17. What types or group exist in the area where you live? 18. Are you a member of any of these groups? Output indicator 1.1.1.2							

12.2.3. Availability of savings or credit services

The midline results show that 59% of respondents in Kenya and 32% in Uganda did not have access to either credit or savings institutions. Those who had access to either were 38% in Kenya and 68% in Uganda. Only 3% in Kenya and none of the respondents in Uganda had access to both credit and savings institutions.

The midline and baseline results for Kenya are not significantly different. For Uganda, the proportion of respondents who did not have access to either and those who had access to both is significantly different between midline and baseline.

Table 40: Access to an institution that provides credit or savings support – Kenya and Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
None	66	59	87	63	59	53	77
One type of support (either savings or credit)	34	41	13	36	38	43	23
Both savings and credit	0	0	0	1	3	3	0
UGANDA							
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
None	21	26	14	-	32	34	28
One type of support (either savings or credit)	73	71	77	-	68	66	72
Both savings and credit	5	3	9	-	0	0	0
<i>Notes: Q17. What types or group exist in the area where you live? – Those who said yes to 'Credit or micro-finance group (giving out loans)' and/or Savings group (like a VSLA, merry-go-round, CHAMA)</i>							

12.2.4. Having a savings goal

Having a savings goal is important to encourage consistent and directed savings. Among the respondents who regularly saved money, 64% in the midline and 65% in the baseline for Kenya claimed to have a savings goal. The results were relatively higher in Uganda where 91% in the midline and 80% in the baseline had a savings goal.

Table 41: Has a savings goal

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = those who are saving	31	25	6	59	42	33	9
	%	%	%	%	%	%	%
Has a savings goal:	65	64	67	68	64	64	67
UGANDA							
Base: n = those who are saving	69	46	23	-	95	50	45
	%	%	%	%	%	%	%
Has a savings goal:	80	74	91	-	91	90	91
<i>Notes: J3. Do you have a clear savings goal – something you know you are saving up to buy or invest in?</i>							

Financial literacy has slightly improved in both Kenya and Uganda, with a significant increase in the proportion of respondents who regularly save money.

The percent of respondents with a savings goal increased in Uganda but not in Kenya.

While savings groups are more prevalent in Uganda than Kenya, membership levels among respondents who are aware of the existence of a savings group are higher in Kenya than Uganda.



13. Sexual and Reproductive Health

One of the overall goals of the GIRL-H program is to improve girl's well-being by improving their life skills in the area of health. Positive sexual and reproductive health (SRH) behaviours aid in mitigating for disease burden, and assist girls in controlling fertility. During baseline, this was covered in Kenya only. Midline covered both Kenya and Uganda.

The evaluation seeks to assess the effectiveness of the health component in strengthening access to and use of SRH services, and so contributing to overall resilience.

Among respondents who were sexually active in Kenya during the baseline, 26% had used FP services and 22% had used HIV counselling or testing services. All who had used these services in the baseline were female. Of the same respondents in the midline, 26% had used FP services and 39% had used HIV counselling or testing services including male respondents, indicating that use of HIV counselling services has increased.

Table 42: Use of HIV and FP services

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = those sexually active	54	48	6	-	54	48	6
	%	%	%	%	%	%	%
Ever used HIV services	22	25	0	-	39	42	17
Ever used FP services	26	29	0	-	26	29	0

13.1. Knowledge of where to access SRH services

13.1.1. Knows where to access FP services

In Kenya, the proportion of respondents who were aware of where to get FP services increased significantly from 35% in the baseline to 43% in the midline. Awareness levels were higher in Uganda where the question was asked for the first time during the midline and respondents who knew where to access FP services were 59%.

Table 43: Knows where to access FP services

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Knows where to access FP services	35	47	0	51	43	49	27
UGANDA							
Base: n = total sample	-	-	-	-	273	165	108
	%	%	%	%	%	%	%
Knows where to access FP services	-	-	-	-	59	59	59
<i>Notes</i>							
<i>O10. Do you know where to get the following services in your area? (Responded 'Yes' to child spacing/family planning/contraceptive services)</i>							
<i>Output indicator 2.1.2.2</i>							

13.1.2. Knows what someone can do / where to go to know their HIV status

Similarly, awareness of where to access HIV testing services was higher in Uganda (82%) than Kenya (68%) during the midline. Awareness among respondents in Kenya was the same in the midline and baseline.

Table 44: Aware of what to do to know HIV status / where to get HIV testing

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n= total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Aware of what to do to know HIV status / where to get HIV testing	68	64	77	75	68	70	63
UGANDA							
Base: n= total sample	-	-	-	-	273	165	108
	%	%	%	%	%	%	%
Aware of what to do to know HIV status / where to get HIV testing	-	-	-	-	82	79	85
<i>Notes</i>							
O7. What can someone do to know their HIV status? (Responded 'Test at a health facility', 'Test at a VCT', and 'Self-test at home')							
OR							
O10. Do you know where to get the following services in your area? (Responded 'Yes' for HIV counselling/testing)							
Output indicator 2.1.2.2							

Respondents who knew where to get HIV counselling/testing in their area were 44% in the baseline and 42% in the midline for Kenya. The results show no significant difference between baseline and midline. In Uganda, 66% of respondents were aware of where to get HIV counselling/testing.

Table 45: Knows where to access HIV counselling/testing

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Knows where to access HIV counselling/testing	44	41	53	47	42	46	30
UGANDA							
Base: n = total sample	-	-	-	-	273	165	108
	%	%	%	%	%	%	%
Knows where to access HIV counselling/testing	-	-	-	-	66	61	74

Notes

O10. Do you know where to get the following services in your area? (Responded 'Yes' for HIV counselling/testing)
Output indicator 2.1.2.2

13.2. Received information on how to protect health

The GIRL-H project aims to provide information on how young people can protect their health. In Kenya, the respondents who had received information on how to protect their health were 46% in the baseline and 50% in the midline. The proportion was higher in Uganda at 68% in the baseline and 65% in the midline. There are no significant differences between baseline and midline for the two countries.

Table 46: Received information on how to protect health

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n= total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Received information on how to protect health	46	51	30	50	50	54	37
UGANDA							
Base: n= total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Received information on how to protect health	68	64	74	-	65	65	65
G9. In the past 12 months, did you? (Responded 'Yes' to 'Get any information on how to protect your health') Output indicator 2.1.2.1							

13.3. Knowledge of key sexual and reproductive health issues index

Knowledge of key sexual and reproductive health (SRH) issues index has been calculated based on respondents' knowledge of HIV including ways of contracting and preventing HIV, knowledge of how they can know their HIV status, and whether they feel at risk of contracting HIV. In Kenya, the average score on this index is slightly higher in the midline at 4.9 compared to the baseline at 4.8, and higher in Uganda at 5.3 than Kenya.

Table 47: Knowledge of key SRH issues index

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	120	90	30	131	120	90	30
Average score on index	4.8	4.9	4.5	5.4	4.9	5.0	4.6
UGANDA							
Base: n = total sample	-	-	-	-	273	165	108
Average score on index	-	-	-	-	5.3	5.1	5.7
<i>Notes - Index is based on:</i> O1. Have you ever heard of HIV or an illness called AIDS? O3. How does one contract HIV? O4. How can someone prevent HIV? O5. Can a healthy-looking person have HIV? O6. Do you feel you are at risk of catching HIV? O7. What can someone do to know their HIV status? Outcome indicator O.2.1.2							

13.4. Adolescent and youth friendly services index

The GIRL-H program seeks to improve access to adolescent and youth friendly healthcare services, and this was measured in the midline for both Kenya and Uganda. Respondents were asked questions about the health facility that they most often visit in their area. The questions asked about ease of access to the facility, convenience of operating days and time, whether they are asked to pay for services and whether they still receive services even if they are not able to pay, whether they are able to receive the services that they go for, whether they are made to feel comfortable and respected, whether they are given time to ask questions, whether information is explained to them in a way they can understand, whether they see informational or educational materials on adolescent health topics at the facility, whether they are referred for services that are not available, and whether they feel that there is confidentiality and privacy.

An index has been developed based on the responses to these questions with a maximum average score of 38.

The average score on the index is 17.6 in Kenya and 21.5 in Uganda for the midline respondents.

Table 48: Adolescent and youth friendly services index

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA							
Base: n = total sample	-	-	-	131	120	90	30
Average score on index	-	-	-	17.1	17.6	18.2	15.6
UGANDA							
Base: n = total sample	-	-	-	-	273	165	108

Average score on index	-	-	-	-	21.5	21.4	21.7
<i>Notes - Index is based on:</i>							
<i>S1a. Is the health facility easily accessible on foot or by public transport?</i>							
<i>S1b. Are the operating days and hours of the health facility convenient for you?</i>							
<i>S1c. When you visit the health facility, are you asked to pay for the services?</i>							
<i>S1d. If you are asked to pay for the health services, are you able to pay?</i>							
<i>S1e. If you are not able to pay, do you still receive the services anyway?</i>							
<i>S1f. Have you ever visited the facility and not been able to receive the health service you wanted?</i>							
<i>S2a. During your visit to the health facility, are you made to feel comfortable by the service providers?</i>							
<i>S2b. Do the service providers treat you in a manner that makes you feel respected?</i>							
<i>S2c. Are you given enough time to ask the service provider everything you want to ask?</i>							
<i>S2d. Do the service providers explain things in a way you can understand?</i>							
<i>S2e. Do you see informational or educational materials on adolescent health topics at the health facility?</i>							
<i>S2f. Have you ever been referred to another facility for health services not available at the facility?</i>							
<i>S3a. Do you believe that the information you share with the service providers at the health facility is kept confidential?</i>							
<i>S3b. When you visit the health facility, do you believe that other clients are able to know the services you have gone for?</i>							
<i>S3c. When you are talking with the service providers, are other people able to hear your conversation?</i>							
Output indicator R.2.1.1.1							

The tables below show the percentage scores for each of the questions used to calculate the adolescent and youth friendly services index for Kenya and Uganda separately.

In Kenya, a majority of the respondents can easily access the health facilities that they most often visit, they are made to feel comfortable and respected by the service providers who also explain to them information in a way that they can clearly understand.

For those who did not receive the service that they were seeking at the facility, the main reason was unavailability of the service (68%). Those who did not receive the service because they were not able to pay for it were 20%.

Table 49: Respondents accessing adolescent and youth friendly services - Kenya

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	-	-	-	131	120	90	30
	%	%	%	%	%	%	%
Health facility is easily accessible on foot or by public transport	-	-	-	75	78	78	80
Operating days and hours of the health facility are convenient	-	-	-	64	66	68	60
Not asked to pay for services	-	-	-	74	63	63	63
Were able to receive health services they wanted at the facility	-	-	-	69	58	53	73
Are made to feel comfortable by the service providers	-	-	-	76	79	86	60
Are treated in a manner that makes them feel respected	-	-	-	74	77	81	63
Are given enough time to ask service provider everything they want to ask	-	-	-	70	69	74	53
Service providers explain things in a way they can understand	-	-	-	68	75	81	57
See informational or educational materials on adolescent health topics at the health facility	-	-	-	61	54	58	43

Have ever been referred to another facility for health services not available at the facility	-	-	-	47	53	60	30
Believe that information they share with service providers at the health facility is kept confidential	-	-	-	60	63	68	47
Believe that other clients are not able to know the services they have gone for	-	-	-	66	63	58	77
Believe that other people are not able to hear their conversation with service provider	-	-	-	64	59	54	73
<p>Notes - Index is based on:</p> <p>S1a. Is the health facility easily accessible on foot or by public transport?</p> <p>S1b. Are the operating days and hours of the health facility convenient for you?</p> <p>S1c. When you visit the health facility, are you asked to pay for the services?</p> <p>S1d. If you are asked to pay for the health services, are you able to pay?</p> <p>S1e. If you are not able to pay, do you still receive the services anyway?</p> <p>S1f. Have you ever visited the facility and not been able to receive the health service you wanted?</p> <p>S2a. During your visit to the health facility, are you made to feel comfortable by the service providers?</p> <p>S2b. Do the service providers treat you in a manner that makes you feel respected?</p> <p>S2c. Are you given enough time to ask the service provider everything you want to ask?</p> <p>S2d. Do the service providers explain things in a way you can understand?</p> <p>S2e. Do you see informational or educational materials on adolescent health topics at the health facility?</p> <p>S2f. Have you ever been referred to another facility for health services not available at the facility?</p> <p>S3a. Do you believe that the information you share with the service providers at the health facility is kept confidential?</p> <p>S3b. When you visit the health facility, do you believe that other clients are able to know the services you have gone for?</p> <p>S3c. When you are talking with the service providers, are other people able to hear your conversation?</p> <p>Output indicator R.2.1.1.1</p>							

Majority of the respondents in Uganda were very positive about the health facilities that they most often visit.

The proportion of respondents who were able receive the health service that they were seeking was particularly lower compared to the other attributes. Of those who did not receive the service, mostly it was because the service was not available (84%). Those who did not receive the service because they were not able to pay for it were 16%.

Table 50: Respondents accessing adolescent and youth friendly services - Uganda

	Baseline			Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	-	-	-	273	165	108
	%	%	%	%	%	%
Health facility is easily accessible on foot or by public transport	-	-	-	90	92	89
Operating days and hours of the health facility are convenient	-	-	-	94	93	96
Not asked to pay for services	-	-	-	63	64	62
Were able to receive health services they wanted at the facility	-	-	-	48	48	49
Are made to feel comfortable by the service providers	-	-	-	95	95	94
Are treated in a manner that makes them feel respected	-	-	-	92	88	96

Are given enough time to ask service provider everything they want to ask	-	-	-	95	95	95
Service providers explain things in a way they can understand	-	-	-	93	93	92
See informational or educational materials on adolescent health topics at the health facility	-	-	-	85	85	84
Have ever been referred to another facility for health services not available at the facility	-	-	-	74	75	71
Believe that information they share with service providers at the health facility is kept confidential	-	-	-	77	75	81
Believe that other clients are not able to know the services they have gone for	-	-	-	64	63	66
Believe that other people are not able to hear their conversation with service provider	-	-	-	68	68	68

Notes - Index is based on:

S1a. Is the health facility easily accessible on foot or by public transport?

S1b. Are the operating days and hours of the health facility convenient for you?

S1c. When you visit the health facility, are you asked to pay for the services?

S1d. If you are asked to pay for the health services, are you able to pay?

S1e. If you are not able to pay, do you still receive the services anyway?

S1f. Have you ever visited the facility and not been able to receive the health service you wanted?

S2a. During your visit to the health facility, are you made to feel comfortable by the service providers?

S2b. Do the service providers treat you in a manner that makes you feel respected?

S2c. Are you given enough time to ask the service provider everything you want to ask?

S2d. Do the service providers explain things in a way you can understand?

S2e. Do you see informational or educational materials on adolescent health topics at the health facility?

S2f. Have you ever been referred to another facility for health services not available at the facility?

S3a. Do you believe that the information you share with the service providers at the health facility is kept confidential?

S3b. When you visit the health facility, do you believe that other clients are able to know the services you have gone for?

S3c. When you are talking with the service providers, are other people able to hear your conversation?

Output indicator R.2.1.1.1

Young people have better access to health-related information (Outcome 2.1). Knowledge of where to access FP services, and the use of HIV services significantly increased in Kenya

A majority of respondents, particularly in Uganda were very positive about the health facilities that they most often visit- in terms of accessibility, information provided, the way they are treated, and privacy of services. Main area for improvement is availability of services.



14. Feedback on the GIRL-H program

This section contains information on respondent's participation and perception of the GIRL-H program including what they like about the program, what they do not like about the program, changes caused by the program and areas of improvement for the program.

14.1. Safe spaces

At the time of midline, 98% of respondents in Kenya (99% of cycle 1 and 98% of cycle 2) and 97% in Uganda were still participating in the program, while 74% in Kenya (78% of cycle 1 and 70% of cycle 2) and 88% in Uganda were part of a Safe Space.

Among the respondents who were part of a Safe Space, 78% in Kenya (70% of cycle 1 and 86% of cycle 2) and 24% in Uganda said the Safe Space had a savings group.

Of the total sample, 2% in Kenya (2% of cycle 1 and 3% of cycle 2) and 4% in Uganda said they had never attended the safe space sessions. In Uganda, respondents cited the following reasons for not attending the safe spaces: - there are no safe space sessions, lack

of communication about meetings, long distance to the safe space, and respondent was away from the village. The reasons are illustrated by the verbatims below from the survey.

“I only attended once, and we were told to always come early but we have never met again”
Participant, Uganda

“We have no safe space sessions, our mentor is engaged in other economic activities”
Participant, Uganda

“We don’t attend the safe space; we have never met as a group except when saving only”
Participant, Uganda

“I haven’t attended any. I was in Kenya, I just came back yesterday... my friends went ahead with the teachings in my absence, but I promise to be present this time round” **Participant, Uganda**

14.1.1. Factors affecting participation in the safe spaces

These include what respondents did not like about the safe spaces and the challenges they face with attending the safe spaces.

From the survey, 43% of respondents in Kenya (45% of cycle 1 and 42% of cycle 2) said there was nothing they did not like about the safe spaces. Of those who did not like something about the safe spaces, time management was the most common concern at 26%. This is mainly when the mentors and other participants arrive late for the sessions.

In Uganda, 20% of respondents said there was nothing they did not like about the safe spaces. Like in Kenya, for those who had something they did not like; the main issue was time management (18%).

Other notable issues are inconvenient timing and duration of the sessions which is very long for some of the respondents. The condition of the safe spaces is also a major issue mainly because of lack of shelter. Some of the safe spaces are in the open or under trees and therefore participants are exposed to the elements of the weather. When it rains, the sessions are disrupted, or they do not meet during the rainy season because the ground upon which they sit becomes wet. Some of the participants do not like it when the other participants make noise or argue during the sessions.

The table below shows what participants do not like about the safe spaces and excludes issues with less than 2% in both countries.

Some of the issues with less than 2% are: - unscheduled meetings, not being given enough time to express views, sometimes the mentor does not teach well, and no incentive for attending sessions.

Table 51: What respondents did not like about safe spaces

	Kenya	Uganda
Base: n=those who did not like something about the safe spaces	136	206
	%	%
Time management/delays/lateness	26	18
Timing/day is not convenient	21	4

It takes a lot of time	12	11
The condition of the safe space (dusty,dirty,bushy,cold,windy,sun,rain)	0	13
Noise making/shouting	1	12
Arguments/quarreling/fighting among members	6	11
Discrimination of some members	7	1
Lack of money to save	6	1
Absenteeism of members	4	1
It is far from where I live	4	2
Hunger	2	5
Some members do not save	2	1
Absenteeism of mentor	1	4
It is exposed/open place/no shade	1	7
It is not safe	1	4
No or few learning materials	1	9
No seats/seats are not enough	1	2
Overcrowding/congestion in the safe space	1	4
When mentor comes late	1	3
When mentor/members come drunk	1	2
Lack of privacy and confidentiality.	5	0
We were not given any money to start business	5	0
When the mentor is not teaching well	3	0
Decision is made by few people	2	0
Drug abuse by members	2	0
Disruption when it rains	0	5
Items like soap were not given to everyone	0	3
Abduction of girls on the way	0	2
Not being informed about the sessions	0	2

Respondents who encountered challenges with attending safe space sessions were 17% overall in Kenya (19% of cycle 1 and 15% of cycle 2) and 14% in Uganda.

The most common challenge in both countries is lack of time because of household tasks and other activities which leads to absenteeism or late reporting to the sessions.

Other common challenges in Kenya are: - the time management issues in the safe spaces which to some respondents is a waste of time, and the long distances from respondents' homes to the safe spaces and this makes some of the respondents to arrive late for the sessions.

In Uganda, sickness among respondents is a major challenge that affects participation in the safe spaces. In addition, when respondents are away from home it means they cannot attend the sessions and this is considered as a challenge by some of them, lack of communication about meetings, and absenteeism of mentors.

Table 52: Challenges with attending safe spaces

	Kenya	Uganda
Base: n= those who encountered challenges with attending safe spaces	42	38
	%	%
Lack of time	33	37
It is time wasting	24	0
Long distance to the safe space	21	5
Sickness	7	39
When away from home	7	16
Drought	7	0
Insecurity	5	0
Hunger	2	5
Did not understand some teachings	5	5
Not informed about meetings	0	13
Absenteeism of mentor	0	13
Disruption of sessions when it rains	0	5
Coldness of the safe space	0	5
Lack of learning materials	0	3
Fear of people	0	3
Contradicting information from mentor	0	3

14.1.2. Changes associated with Safe Spaces

Respondents were asked how participation in the Safe Spaces has changed their lives, if at all..

In Kenya, 17% claimed to have acquired business skills, another 17% know how to save, 16% have become more confident, 12% are able to interact with others, and 10% have a positive attitude towards life. Those who said they had not experienced any change were 16%.

In Uganda, 30% say they can now read or write, 22% can now manage personal hygiene, 17% said they had gained knowledge in different topics, 13% now know how to save money and 10% have learnt to respect other people. Those who did not experience any change were 5%.

“There is a girl here who was not able. When she was taken for trainings by GIRL-H and the funding, she has started her own shop and now she is able to provide for herself. Her life has changed. Before, she could not even get food and other needs...now she is able to provide for and feed herself” **Parent - Turkana, Kenya**

Table 53: Changes associated with safe spaces

	Kenya	Uganda
Base: n=those who participated in the safe spaces	245	263
	%	%
Able to read/write	6	30
Able to manage personal hygiene	4	22
Acquired business skills	17	7
Knows how to save	17	13
Has more confidence	16	0
Gained knowledge/skills in different topics	15	17
Able to interact with others	12	6
Has a positive attitude towards life	10	4
Has respect for others	0	10
Able to express herself/himself	8	6
Improved living standards	4	0
Understands how to participate in groups	2	0
Understands rights of women	2	1
Able to care for family	1	3
Can share secrets with others	0	4
Developed farming skills	0	2
Has more confidence	0	3
Understands oneself more	0	2
No change	16	5

14.2. Transitioned respondents

Respondents who claimed to have been transitioned (linked to an economic activity or given a grant to start a business) were 41% in Kenya and 53% in Uganda. Those linked to an economic activity were 25% in Kenya and 7% in Uganda.

Table 54: Transitioned respondents

	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
KENYA			
Base: n = total sample	120	90	30
	%	%	%
Linked to economic activity or given a grant	41	43	33
Linked to economic activity	25	27	20
UGANDA			
Base: n = total sample	273	165	108
	%	%	%

Linked to economic activity or given a grant	53	56	48
Linked to economic activity	7	7	6
<i>Notes</i> Q7. When you finished participating in the safe spaces, were you linked to a business activity or given a grant to start a business? R11. Have you been linked to a business/economic activity by the GIRL-H program?			

Amongst the respondents who were linked to an economic activity, 67% in Kenya and 61% in Uganda were linked to an economic activity of their choice, which is in line with the aims of the program which attempts to give the young person a choice of what they want to do.

However, 80% in Kenya and 67% in Uganda were experiencing challenges in implementing the economic activity they were linked to:

- In Kenya, the challenges include lack of capital, lack of transportation, prolonged drought, slow movement of products, lack of credit management skills e.g., how to keep a record of products sold on credit, lack of premises, competition, losses, mismanagement of business funds, insecurity, disease outbreak, lack of a role model, lack of confidence, poor communication skills, and lack of community support.
- Challenges cited in Uganda were fewer compared to Kenya, and included lack of capital, losses, fluctuating prices, competition, lack of credit management skills e.g., how to keep a record of products sold on credit, and slow movement of products.

Though based on a small number of respondents, the above challenges provide an indication on the types of challenges the transitioned respondents are likely to encounter in both countries. The GIRL-H program should consider incorporating the information or training on ways of handling these kinds of challenges to participants who are just about to transition from the safe spaces.

14.3. Suggestions for improvement of program

All the respondents were asked what they think can be done to make the GIRL-H program better for young people within their communities. The community leaders, parents and participants provided their views:

Timing and time management: Start safe space sessions on time, reduce time taken at the safe spaces, end the sessions early, the day and time should be convenient for participants, arrive on time for champion days.

“Everything is fine, but I am a bit sensitive with their timing. The meetings take a longer time than desired. I request if time factor can be taken into consideration. The meetings should take as little time as possible” **Community leader – Marsabit, Kenya**

“They should keep time. If they want to come in the morning, they should do so. If it is in the afternoon, they should do so. Not keeping us here waiting for them to come and they come late. we called in the morning, and we were told to stay here that visitors are coming. We stayed here until in the afternoon is when they came. When they came, they did not even stay for long. They just asked us questions and left. We were told it would be a big event, but we did not even get water” **Participant - Turkana, Kenya**

Materials and condition of the safe spaces: Provide shelter, seats, and refreshments/food, enough learning materials, and playing materials. Improve on cleanliness

of the safe spaces, reduce congestion in the safe spaces, control rowdiness among participants e.g., shouting and arguments during sessions, provide participants with uniform such as t-shirts.

“Build for us a classroom so that even if it rains our sessions are not disrupted and we don’t get wet” **Participant – Kotido, Uganda**

“Me I think they should bring chairs or benches on which we can sit on. At the moment, we have to sit on the bare ground. Our clothes get soiled while we learn about good hygiene” **Participant – Moroto, Uganda**

“They [mentors] mostly call the meetings from morning to evening, we are not given anything after the meetings. We stay here for a long time with no water or food. When we go back home, we are very hungry” **Participant - Turkana, Kenya**

“What I don’t like about the safe space is that there is no food; from the time you come in the morning till the time you go back home there is no food.... when we go to learn and play, we stay the whole day without eating something” **Participant – Kotido, Uganda**

Management of mentors: Resolve mentor lateness and absenteeism, monitor safe space activities, improve on motivation and support given to mentors, improve mentor attitude and behaviour.

“The Mercy Corps team should take time to resolve the problem of absenteeism of the GIRL-H teachers. We observed that these teachers were highly involved during the champion day, yet they had not been coming to teach these youth regularly.” **Parent – Moroto, Uganda**

“Their monitoring is almost inexistant, the program managers are very rarely seen, and they don’t come to the communities to monitor whether the mentors are instructing the participants or not and this is what’s making the program seem to be in its dying phase” **Community leader – Moroto, Uganda**

“There seems to be no facilitation for mentors because I frequently hear the mentors complain that they are not being paid so it has greatly demoralized the mentors from teaching” **Community leader – Moroto, Uganda**

“The mentors have a lot of work to do but when you look at the payment it is little, and they also delay payments.... That is the only bad thing” **Parent – Turkana, Kenya**

“The only problem is that the mentors are no longer teaching, they should continuously teach the youth because now I see they no longer teach like they used to do” **Parent – Moroto, Uganda**

“Some people miss out on sessions if their mentors are bad. For example, if the mentor shouts at them and insults them using bad language. They at times refer to the girls as adults who even know how to sleep with men and even push children. Once insulted this way they miss the next sessions” **Participant – Kotido, Uganda**

Location of safe spaces: Safe space should be in a central location within the community so that it is accessible to all participants, increase number of mentors and expand the program’s reach within the communities, have more safe space locations within the community.

“We do not have the meetings in a central place. Mostly they are done at the mentor’s home which is far for some people” **Participant - Turkana, Kenya**

Startup capital and marketing of participants’ crafts: Provide participants, especially the older ones with startup capital for business, and help participants to market their crafts.

“...the only thing I may say I don’t like from the program is that the program should have given something like a startup capital for income generation to these young people. But what I see is an exchange of knowledge only” **Community leader – Kotido, Uganda**

“At least let the program should help with the market for the beads and other crafts because they only give knowledge and know how to make the hand crafts, but I have not seen them marketing these items. The girls do this themselves and are often not successful, so some have been discouraged by this” **Parent – Kotido, Uganda**

Curriculum: Include training on income generating activities such as handicraft, art, beading, and basket making

“We should not concentrate on learning alone we should not be on books and theory alone. Most of these people are school dropouts, some hate class. We should also introduce handcraft, art, beading, basket making” **Community leader – Isiolo, Kenya**

Champion days: Make champion days more frequent, provide allowances or any other form of motivation such as branded t-shirts during the champion days, champion days should be held in a location that is close to the people, ideally in every village.

“In my opinion, during this kind of function [champion day], we leave all our household chores and attend the function. At the end of the day, we come home empty handed without bringing anything for our children who are hungry.... Therefore, I suggest we are given allowances for this kind of occasion” **Community leader - Marsabit, Kenya**

Duration of safe spaces: Make the safe space sessions more frequent and extend the duration to more than three months.

“The limited time won’t help the girls because only three months will not change someone’s life and make a big difference... the only thing my child gained from the program is that now she knows how to write down her telephone number. If the program continued then probably, she will have known how to write down her name too” **Parent - Wajir, Kenya**

Inclusivity: Allow freedom of speech for all during the sessions, the program should target all the people in the community regardless of the age, linking participants to businesses and funding should target all the young people who participated in the programme and not just some of them.

Benchmarking: Take the participants for benchmarking or visits to other groups somewhere else. This will not only provide exposure to the participants but also motivate them to stay in the program

The table below shows the suggestions for improvement according to the respondents interviewed in the quantitative survey. The table excludes mentions with less than 2% in both countries.

Table 55: Suggestions for improvement of safe spaces

	Kenya	Uganda
Base: n=those who mentioned an area for improvement	234	269
	%	%
Provide funds for starting a business	28	28
Provide more training/advice	23	9
Providing shelter/shade in the safe space	2	18
Provide enough learning materials	3	14
Make the sessions frequent	12	3
Visit / interact with other groups	8	0
Observe time	6	5
Allow freedom of speech	6	0
Encourage more members to join	4	1
Ensure privacy during sessions	4	0
Members/mentors should not come drunk	3	1
Provide support for education	3	1
Facilitate sports activities	2	0
Provide sanitary pads	2	1
Punish members who are stubborn/fight/make noise	2	2
Communication about meetings	1	3
Provide good/honest/committed mentors	1	4
Encourage farming	1	5
Promote unity among members	1	3
Provide food /refreshments	1	6
Start savings groups/encourage savings	1	8
Provide uniforms	0	2
Should have latrines	0	2
Reduce learning time	0	4
Introduce serial banking	0	2
Support the community e.g. with a borehole	0	2
Make the safe space clean	0	7
Members should follow mentor's instructions	0	2
Get a safe/secure area	0	4
Provide enough seats	0	3

14.4. Conclusion and recommendations

In Kenya, the GIRL-H program has significantly increased the proportion of participants with business skills, income, and savings. The program has also significantly increased the proportion of participants with a life goal and or a plan for achieving it, and awareness of where to get FP services.

In Uganda, the program has significantly increased the personal confidence and well-being of respondents. It has also significantly increased the proportion of participants with business skills, who know safe ways of making money and how to search for a job, who are members of a savings group and those who save regularly. The average monthly income among participants who have income has also increased significantly.

Topics that still require more focus in Kenya are safe ways of making money, gender norms and decision making, personal confidence, information or help on how to search for a job, how to protect health, where to get HIV services or what to do to know HIV status, and how to avoid or respond to violence. In Uganda, more focus should be on goal setting and planning, how to protect health, gender norms and decision making, and how to avoid or respond to violence.

Areas of improvement that should be considered by the program include time management at the Safe Spaces including shortening the sessions and having more frequent sessions instead; providing shelter, seats, refreshments and learning materials at the Safe Spaces; ensuring cleanliness of the Safe Space locations; reducing congestion in the Safe Spaces; controlling rowdiness among participants in the Safe Spaces; monitoring of mentor activities; centralisation of the Safe Space locations within the communities; providing start-up capital for transitioned participants; marketing of participants' crafts; expansion of the curriculum to include training on income generating activities such as handcraft; and having frequent Champion days.



Enumerator with respondent in Uganda

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16. Appendices

16.1. Acronyms and abbreviations

CAPI	Computer Assisted Personal Interviewing
DiD	Difference in Difference
EM	Evaluation Matrix
EQ	Evaluation Questions
ESRC	Ethics and Scientific Review Committee
FGDs	Focus Group Discussions
FP	Family Planning
GIRL	Girls Improving Resilience Through Livelihoods
GIRL-H	Girls Improving Resilience Through Livelihoods + Health
HDDI	Household Dietary Diversity Index
HIV	Human Immunodeficiency Virus
HH	Household
IDDI	Individual Dietary Diversity Index
LMS	Livestock Market System
FCDO	Foreign, Commonwealth & Development Office
ENGINE	Educating Nigerian Girls in New Enterprises
MEL	Monitoring, Evaluation, Accountability & Learning

PMU	Project Management Unit
PPI	Poverty Probability Index
REAL	Resilience Analysis, Research and Learning
RIM	Random Iterative Method
SPSS	Statistical Package for the Social Sciences

16.2. Components of the gender norms index

16.2.1. Beliefs about gender roles

Table 56: Beliefs about gender roles - Kenya

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Cooking meals							
Men and boys	2	2	0	6	4	4	3
Women and girls	93	91	97	79	91	92	87
Both men and boys and women and girls equally	6	7	3	14	5	3	10
Don't know	0	0	0	1	0	0	0
Getting a job / work outside the home							
Men and boys	58	56	67	40	53	54	47
Women and girls	3	3	3	17	11	11	10
Both men and boys and women and girls equally	37	39	30	44	37	34	43
Don't know	2	2	0	0	0	0	0
Speaking out at public meetings							
Men and boys	48	53	33	44	49	53	37
Women and girls	5	6	3	12	12	10	17
Both men and boys and women and girls equally	46	40	63	44	38	34	47
Don't know	1	1	0	1	2	2	0
Caring for children							
Men and boys	3	0	10	6	4	3	7
Women and girls	73	83	40	66	70	73	60
Both men and boys and women and girls equally	25	17	50	27	24	21	33
Don't know	0	0	0	1	2	2	0

Notes:

M1. Thinking about families with children, in your opinion, who do you think should be mainly responsible for ... [READ OUT ITEM]? Is it the men and boys in the home, the women and girls, or both men and boys and women and girls equally?

Table 57: Beliefs about gender roles - Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Cooking meals							
Men and boys	1	2	1	-	2	2	2
Women and girls	80	88	68	-	85	86	84
Both men and boys and women and girls equally	18	9	31	-	12	12	14
Don't know	0	1	0	-	0	0	0
Getting a job / work outside the home							
Men and boys	22	23	19	-	40	38	44
Women and girls	17	24	6	-	2	3	1
Both men and boys and women and girls equally	61	52	75	-	58	59	56
Don't know	1	1	0	-	0	0	0
Speaking out at public meetings							
Men and boys	21	22	19	-	31	32	30
Women and girls	1	1	2	-	1	1	2
Both men and boys and women and girls equally	76	75	78	-	67	67	69
Don't know	1	2	1	-	0	0	0
Caring for children							
Men and boys	1	1	0	-	1	1	1
Women and girls	53	56	50	-	67	72	61
Both men and boys and women and girls equally	45	42	49	-	32	27	38
Don't know	1	1	1	-	0	0	0

Notes:

M1. Thinking about families with children, in your opinion, who do you think should be mainly responsible for ... [READ OUT ITEM]? Is it the men and boys in the home, the women and girls, or both men and boys and women and girls equally?

16.2.2. Extent of agreement or disagreement with statements

Table 58: Extent of agreement or disagreement with statements - Kenya

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	120	90	30	131	120	90	30
	%	%	%	%	%	%	%
Women should have equal rights to a job as men							
Strongly disagree	7	8	3	2	9	10	7
Disagree a bit	4	3	7	6	4	3	7
Neither agree nor disagree	3	3	3	5	3	1	7
Agree a bit	23	24	17	39	39	32	60
Strongly agree	63	61	70	49	45	53	20
Women make as good business leaders as men							
Strongly disagree	2	1	3	3	3	1	10
Disagree a bit	5	6	3	6	4	2	10
Neither agree nor disagree	5	3	10	10	8	8	10
Agree a bit	38	33	53	44	49	48	53
Strongly agree	50	57	30	37	35	41	17
A man should always have the final word about decisions in his home							
Strongly disagree	9	11	3	8	4	6	0
Disagree a bit	17	20	7	21	18	16	27
Neither agree nor disagree	6	7	3	12	14	16	10
Agree a bit	28	29	27	29	35	37	30
Strongly agree	40	33	60	30	28	27	33
Men and women are equally able to make good political leaders							
Strongly disagree	7%	6%	10%	11	10%	12%	3%
Disagree a bit	11%	11%	10%	11	20%	17%	30%
Neither agree nor disagree	7%	7%	7%	11	12%	9%	20%
Agree a bit	24%	26%	20%	41	37%	37%	37%
Strongly agree	52%	51%	53%	26	22%	26%	10%
<i>Notes:</i>							
<i>M2. To what extent do you agree with the following statements? Do you strongly agree, agree a bit, neither agree nor disagree, disagree a bit or strongly disagree that...?</i>							

Table 59: Extent of agreement or disagreement with statements - Uganda

	Baseline				Midline		
	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male	Cycle 2 Total	Cycle 1 Total	Cycle 1 Female	Cycle 1 Male
Base: n = total sample	273	165	108	-	273	165	108
	%	%	%	%	%	%	%
Women should have equal rights to a job as men							
Strongly disagree	4	6	2	-	7	5	9
Disagree a bit	5	6	5	-	3	4	1
Neither agree nor disagree	1	2	0	-	4	5	2
Agree a bit	40	42	37	-	27	28	26
Strongly agree	49	44	56	-	59	57	62
Women make as good business leaders as men							
Strongly disagree	2	0	6	-	2	1	3
Disagree a bit	4	1	7	-	5	4	6
Neither agree nor disagree	8	12	3	-	7	7	6
Agree a bit	34	35	33	-	32	36	26
Strongly agree	52	53	51	-	55	51	60
A man should always have the final word about decisions in his home							
Strongly disagree	7	3	12	-	4	4	5
Disagree a bit	20	16	25	-	10	11	8
Neither agree nor disagree	7	10	3	-	4	6	2
Agree a bit	36	38	32	-	30	33	24
Strongly agree	31	33	28	-	52	46	61
Men and women are equally able to make good political leaders							
Strongly disagree	5	4	7	-	7	10	4
Disagree a bit	7	4	12	-	10	10	9
Neither agree nor disagree	4	6	1	-	5	5	4
Agree a bit	38	39	37	-	27	31	22
Strongly agree	45	47	43	-	51	44	61
<i>Notes:</i>							
<i>M2. To what extent do you agree with the following statements? Do you strongly agree, agree a bit, neither agree nor disagree, disagree a bit or strongly disagree that...?</i>							

16.3. Component of youth well-being index

Table 60: Youth well-being component questions

Index	Questions
Good health and optimal nutrition index	<ul style="list-style-type: none"> ○ K7. What type of toilet facility does your household mainly use? ○ F3. & F4. During the past 12 months, was there a time when you or others in your household were hungry but did not eat because there was not enough money or other resources for food? How many times did that happen?
Connectedness, positive values and contribution to society index	<ul style="list-style-type: none"> ○ H5. Do you communicate regularly with at least one person outside the village? ○ H7. How many times in the past month have you gotten together with friends, family, neighbours, etc. to discuss issues or share food/drinks, either in someone's home or in a public place? ○ H8. How many days in the past month have you attended a church/mosque or other religious service? ○ H9. In the last year, how many times have you stayed more than 2 days outside your village? ○ K9. Do you own your own personal mobile phone that is currently in working order and connected to a sim card / network? ○ K10. Do you have access to a mobile phone that you use can use when you want to? ○ I1. If your household had a problem and needed help urgently (e.g., food, money, labour, transport, etc.), who IN THIS VILLAGE could you turn to for help? ○ I3. Who INSIDE THIS VILLAGE would you help if they needed help urgently (e.g., food, money, labour, transport, etc.)? ○ H10. Do you feel like the community leaders are making decisions that help to improve your life/ are in your favour? ○ H11. Do you feel comfortable participating in community forums where decisions are made? ○ I5. In the last 12 months, have you or anyone in your household worked with others in your village to do something for the benefit of everyone in the village? ○ L1c. Personally received income in last 12 months
Safety and supportive environment index	<ul style="list-style-type: none"> ○ N1. Do you know any things you can do to stay safe from violence? ○ N3. If you or someone else you know is sexually violated, do you know where it should be reported?
Learning, competences, education, skills and employability index	<ul style="list-style-type: none"> ○ N13. Have you received or had access to information about where to seek help if you or anyone you know experience any form of violence or harassment or how to prevent it? ○ Gender norms index ○ Education/training - G7, G8, G9 ○ J5. Do you have your own personal MPESA / Airtel Money/ Mobile money connection? ○ L5. Are you able to identify safe and unsafe ways of earning money? ○ 4.1.1. Financial Literacy index score ○ G9. In the past 12 months, did you(whether respondent received training/information on a range of topics)? ○ H1a. Which one of these two statements do you agree with most: "Each person is primarily responsible for his/her success or failure in life" & "One's success or failure in life is a matter of his/her destiny"
Agency index	<ul style="list-style-type: none"> ○ Overall aspirations/confidence to adapt/locus of control index. ○ G11. Do you have a clear life goal and a plan of how to reach it? (A life goal is what you want to accomplish/achieve in your life. A life plan is a guide that helps you achieve your life goal) ○ H6. During the past week, have you engaged in any economic activities with other villages or clans? For example, farming, trading, employment, borrowing or lending money? ○ L2. Did you receive income from any of these sources in the past 12 months?