

Reintegration opportunities for vulnerable households of ex-combatants demobilized through PNDDR:

An overview of the socioeconomic situation of pilot project beneficiaries two years following project closure

Maniema, Democratic Republic of Congo

Working Paper No. 3

May 2013





The International Bank for Reconstruction and Development / The World Bank
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Washington, DC 20433
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First published April 2013
www.logica-wb.net

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Acronyms

CAAFAG	Children Associated with the Armed Groups and Armed Forces
COOPCEDE	Cooperative de Credit et d'Epargne pour le Developpement
D&R	demobilization and reintegration
DRC	Democratic Republic of Congo
GBV	gender-based violence
GLR	Great Lakes region
IGA	income-generating activity
LEAP	Learning for Equality, Access, and Peace
LOGiCA	Learning on Gender and Conflict in Africa
M&E	monitoring and evaluation
MDRP	Multi-country Demobilization and Reintegration Program
MECREKI	Mutuelle d'Epargne et de Cr�dit de Kindu
MSF	M�decins Sans Fronti�res
NGO	nongovernmental organization
PNDDR	Programme National de D�sarmement, D�mobilisation, et R�insertion
SGBV	sexual and gender-based violence
STD	sexually transmitted disease
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund

Introduction

The Learning on Gender and Conflict in Africa (LOGiCA) program aims to increase gender-specific programming in postconflict countries in Sub-Saharan Africa, with a focus on demobilization and reintegration (D&R) in the Great Lakes region (GLR), and gender-specific issues arising from armed conflict. Specific objectives are: (i) to increase gender-sensitive programming in D&R operations in the GLR by better addressing the gender-differentiated needs of male and female combatants; and (ii) to generate knowledge and good practices on how to address gender and conflict issues, with a focus on learning initiatives addressing sexual and gender-based violence (SGBV), vulnerable women, and young men at risk in Sub-Saharan Africa. This study pertains to generating knowledge on gender sensitivity in D&R programming.

A pilot project was conducted in the Democratic Republic of Congo (DRC) in Kindu, Maniema, between 2008 and 2009, titled “Strengthening socio-economic reintegration opportunities for vulnerable households of ex-combatants demobilized through the PNDDR.” The project was implemented under the Learning for Equality, Access and Peace (LEAP) program as part of the Multi-country Demobilization and Reintegration Program’s (MDRP’s) efforts to strengthen the impact of D&R programming from a gender perspective. The LOGiCA program was then launched in 2009 as a stand-alone initiative based upon the lessons of the LEAP program and significant interest from the international community.

LOGiCA initiated a study to assess how beneficiaries of the pilot project were faring—in relation to the rest of their communities and in light of the support they had received—24 months after the program’s closure.

The pilot project aimed to respond to the specific constraints on socioeconomic reintegration faced by female ex-combatants and child-mothers.

Many mothers have difficulty meeting their children’s basic health and education needs. In addition, women face barriers stemming from a series of complex socioeconomic and cultural factors that include a perception of women’s social status as being lower than men’s. Ex-combatants in particular are stigmatized. Communities and families are often unable or unwilling to accept the return of young female ex-combatants, especially if they return with children. Reinforcing such patterns are women’s own assumptions of how they will be perceived upon returning to their communities. Aware of the stigmatization and barriers they may encounter, they might choose to marginalize themselves. It is generally accepted that these specific prejudices result in a sub-group of particularly vulnerable ex-combatants, disproportionately affected by conventional barriers to socioeconomic reintegration.

Implemented by CARITAS, the pilot project targeted a total of 200 beneficiaries: 140 vulnerable ex-combatants and children associated with the armed forces and armed groups (CAAFAG) and 60 additional vulnerable individuals in the community. Specific vulnerability criteria were developed and applied for the identification of beneficiaries. The pilot project activities included: (i) support for income-generating activities; (ii) basic skills and management training, including basic literacy and numeracy training, “enterprise management training,” and household budget management/microcredit management; (iii) support for the creation and strengthening of associations; and (iv) GBV information, referral, and sensitization.

Purpose of the Study

The study aimed to determine: (i) the extent to which the results of the intervention had been sustained by individual beneficiaries and associations, (ii) the related role of support provided through the pilot project, and (iii) the well-being of beneficiaries relative to the rest of the community, more

specifically in comparison with ex-combatants supported by the Programme National de Désarmement, Démobilisation, et Réinsertion (PNDDR) but not eligible for participation in the pilot project.

Methodology

A semi-structured questionnaire was designed to replicate the key elements of the baseline survey conducted prior to the pilot project's start in 2008. Three questionnaires were employed, one tailored to the project beneficiary group and a second to the control group (consisting of nonbeneficiary female ex-combatants demobilized through the PNDDR; they received related D&R support through the national program but did not benefit from additional assistance through this pilot project). The third and final questionnaire was applied to a group of community peers to serve as a point of reference. Questionnaires can be found in annex 1.

A 95 percent confidence level and 5 percent confidence interval were the established parameters for sampling. The study included a total of 283 respondents, including 119 pilot project beneficiaries and 115 female ex-combatants who benefited from the PNDDR program but did not participate in the pilot project. The control group respondents were randomly selected from lists provided by provincial PNDDR staff. An additional 49 community peer respondents were surveyed as a nonrepresentative reference group.

Radio messaging was used to reach out to respondents who were interviewed in a central location; direct home visits were made thereafter to ensure the entire sample was reached.

Ninety-two percent of endline respondents were female; this reflects the fact that men were only eligible for inclusion from the community member group and that only females were screened from the ex-combatant group.

Limitations and Challenges

This study is low-cost, modest in scope, and aims to identify promising approaches to supporting vulnerable ex-combatants. The methodology

employed for the research and monitoring and evaluation (M&E) framework adopted for project implementation does not allow causality to be established, but rather provides an indication of sustainability prospects and promising practices for replication.

Thus, conclusions drawn from the study can be generalized only across the pilot project beneficiary population. Inferences regarding the female ex-combatant and community peer control groups are only valid for the group of respondents in this study. Furthermore, the baseline study conducted in 2008 did not include control group respondents; therefore comparisons with the control groups are only valid for the point in time that the new research was conducted. Analysis over time is limited to the pilot project beneficiary population only.

While the female ex-combatant control group was randomly selected, it is important to note that this group is less likely to have displayed the set of vulnerability criteria established by the pilot project, as this was used to screen ex-combatants and community members for inclusion in the pilot. Since not all ex-combatants were originally screened, this may have an impact on the results. In addition, the third group of community peer respondents was established to counter such effects.

Significant challenges were encountered in identifying project beneficiaries given the time lapse since project closure and related follow-up by CARITAS. This was compounded by difficult security conditions and a tight time frame ahead of the 2011 elections. Thus 119 beneficiary respondents were reached compared to the target of 132 set by the sampling parameters. This nonetheless allowed for a confidence level of 95 percent and a confidence interval of 5.7 percent, which were considered adequate and valid for the purposes of this research.

Standard limitations apply in the case of this research; it is possible that respondents assume that they may preclude themselves from any additional assistance if they respond positively to the questions asked of them.

Specific methodological recommendations for further research can be found in annex 2.

Project Description

The pilot project consisted of four key components. Each component described below includes a summary of the related outputs, as reported by the implementing agency.

Sensitization to GBV

These activities include: (i) the design of radio spots, which were broadcast locally, (ii) messages disseminated through posters and banners within the community, and (iii) training of identified “sensitization agents” in collaboration with other local nongovernmental organizations (NGOs). All materials and radio spots were in Swahili, the principal local language in Kindu and in the Maniema province more broadly.

Outputs

- Three messages were promoted: “raping a woman is like raping your own sister, your own mother,” “we say no to violence against women and girls,” “sexual violence causes sexually transmitted disease (STD), psychological disorders, divorces, unplanned pregnancies, poverty . . . together, let us fight this plague.”
- The three local radio stations broadcasted each message three times a day until the end of February 2009.

Literacy and Numeracy

Three centers (Tokolete, Kasuku, Mikelenge) were opened to ensure literacy and basic calculation lessons to beneficiaries, with two trainers in each center.

Outputs

- More than half of the beneficiaries, or 104 individuals, participated.

Income-Generating Activity and Budget Management

This component provided for the distribution of goods in relation to the income-generating activity (IGA) selected by the beneficiary. Specifically, the beneficiaries selecting petty trade received (depending on the trade chosen) iodized salt, palm oil, sugar, fry, wheat flour, soda lime, hens and ducks, nails, and petrol. Fisheries involved the delivery of nets, breeding the distribution of goats and pigs, agriculture the distribution of inputs, and tailoring the distribution of one sewing machine each. The distribution of goods was complemented with basic accountant training, for example, in financial documentation such as bookkeeping. Accounts were opened for beneficiaries across three cooperatives selected by the implementation partner: COOPEC IMARA, Cooperative de Credit et d’Epargne pour le Developpement (COOP-CEDE), and Mutuelle d’Epargne et de Crédit de Kindu (MECREKI).

Outputs

- Eight interdependent groups were created by 200 women and girl ex-combatants in association with members of the community.
- Seventy-nine percent of the 200 beneficiaries had saved an average of \$50 in their accounts by the close of the project.

Childcare Services

Three centers were equipped to host beneficiaries’ children three times a week while they attended the literacy and IGA/budget management trainings.

Outputs

- Three centers were equipped and six “edu-

cators” recruited to staff the centers. Nearly 60 children were looked after and fed three times a week between the hours of 08:00 and 17:00.

Project Limitations

Beneficiaries were very mobile, especially female ex-combatants. The constant change of address made communication and related follow-up by the implementation partner challenging. Agents actively sought out where beneficiaries had moved by consulting with community members and us-

ing radio messaging to make contact.

- The literacy training component remained incomplete four months after project close due to the high number of beneficiaries that opted to participate in this activity. The component was nonetheless completed because CARITAS Congo was successful in mobilizing additional resources from CARITAS Norway.
- The M&E activities were challenging to implement adequately due to problems of access: Kindu’s remote location, harsh terrain, and insecurity.

High-Level Analysis

Globally, the results show an improvement in the indicators compared to the baseline survey, primarily at the economic level. The female ex-combatants group show “positive differences” overall, again particularly at the economic level. With regard to the social impact of the project, the results are less clear about (i) a significant improvement in the beneficiaries’ situations and (ii) the contribution of the activities themselves to improvements in specific areas. Nevertheless, indicators are positive, including enhanced “quality of relationships” and an increased membership in credit groups visible among project beneficiaries.

Key Results

- Eighty-five percent of the beneficiaries are still running the activity initiated during the project, the majority in the agricultural sector.
- Household ownership among project beneficiaries has increased by 23 percentage points since the baseline study was conducted.
- Beneficiaries cook more meals for their children than at the beginning of the project; there is a 17 percentage point increase in the number of respondents cooking two or three times a day.
- Beneficiaries own 28 percent more assets than the female ex-combatant nonbeneficiaries—the three indicators being mosquito nets, mattresses, and radios. Among those, the number of mosquito nets shows a significant increase: 73 percent of beneficiaries owned one compared to 55 percent in 2008. These strong differences, both between baseline/endline and beneficiaries/nonbeneficiaries indicate that the project may have contributed to the ability of beneficiaries to purchase assets and property.
- The level of confidence in others displayed by project beneficiaries improved since the baseline survey, from 4 percent to 10 percent by the end of the project. More specifically, the

level of trust in other ex-combatants within the community, including male ex-combatants, increased by 44 percent from the beginning of the project in 2008.

- Indicators show that project beneficiaries are more informed about SGBV and related services than the nonbeneficiary ex-combatants.

With 85 percent of the beneficiaries still running the activity initiated through the project, the study indicates that 24 months after project closure, prospects for sustaining the selected IGA is promising. Economic indicators such as home ownership as well as assets per household showed a global increase compared to the baseline in 2008, and a significant positive difference over the nonbeneficiary female ex-combatants group. In particular, the number of respondents belonging to a credit or savings group since the start of the project jumped up 47 percentage points (compared to a 22 percentage point increase among nonbeneficiaries). This suggests an improvement in both economic and social life.

Despite sharing some traits with nonbeneficiaries (for example, medicine purchases, number of meals/day eaten by children, and literacy rates), the number and type of improved economic indicators among the beneficiaries suggests that their economic performance is better overall.

With regard to SGBV, the level of information dissemination is positive, with high rates of information dissemination and sensitization conducted during project implementation. But there are no discernible differences between perceptions of the “normality” of domestic violence before and after the project or between beneficiaries and nonbeneficiaries.

The percentage of beneficiaries who used the childcare services offered by the project, at 24 percent, is relatively low in view of the fact that all had at least one child at home. Very positive feedback was received from those who used the service.

Data Set Results and Analysis

A total of 119 pilot project beneficiaries were surveyed, including 102 ex-combatants and 17 community members (72 percent and 28 percent of the total respondents, respectively). The following results and analysis largely refer to the beneficiary population as a whole without distinction between ex-combatants and community members. This is in light of two considerations: (i) the small, non-representative number of community members, and (ii) the primary goal of the study, to assess project beneficiaries' well-being 24 months after project closure.

Key Demographics and Core Indicators

- *Sex.* Ninety-two percent of respondents were female and 8 percent male.
- *Marital status.* Sixty-three percent were married, 26 percent were widows, less than 1 percent were separated, and one respondent was single.
- *Age.* Approximately 27 percent of the sample was made up of respondents over 50 years old, 36 percent between 40 and 49 years, 28 percent between 30 and 39 years, and 9 percent between 25 to 29 years.
- The above proportions across sex, age and marital status were largely similar across the baseline and endline, as well as in the nonbeneficiary female ex-combatants group. *Literacy.* Project beneficiaries displayed significantly higher levels of literacy at project completion (66 percent) than at the baseline (44 percent). The control groups' rates, however, were broadly similar: 65 percent of female ex-combatants and 67 percent of the peer community group. Thus, the specific effect of the literacy training provided is not clear. The last available literacy rate of the general popula-

tion of Maniema was 48.9 percent in 2005.¹ It is possible that the increase displayed by the beneficiary population reflects an increase in the literacy of the population as a whole due to factors external to the pilot project. It is nonetheless positive that the beneficiary population—identified as a particularly vulnerable group—had literacy rates comparable with community peers. *Health.* Data on health status remain inconclusive. The study revealed that 76 percent of the beneficiaries visited a health professional between one and three times during the previous six months, which represents an increase of 5 percentage points between the start and end of the project. This percentage is significantly higher than the rest of the community (a 61 percent rate for the female ex-combatants group and 59 percent for the peer community control group). While this suggests positive health effects for project beneficiaries, the number of doctor's visits made by respondents' children was largely similar across beneficiaries and control groups. Among the 24 percent of beneficiaries that did not visit health professionals, more than half indicated they had not been ill over this period, 12 respondents explained it was too expensive, and 3 reported having free access to health services through (i) health zone membership, (ii) Médecins Sans Frontières (MSF) free health-care services, and (iii) access through a spouse's work.

Project Activities and Sustainability Prospects

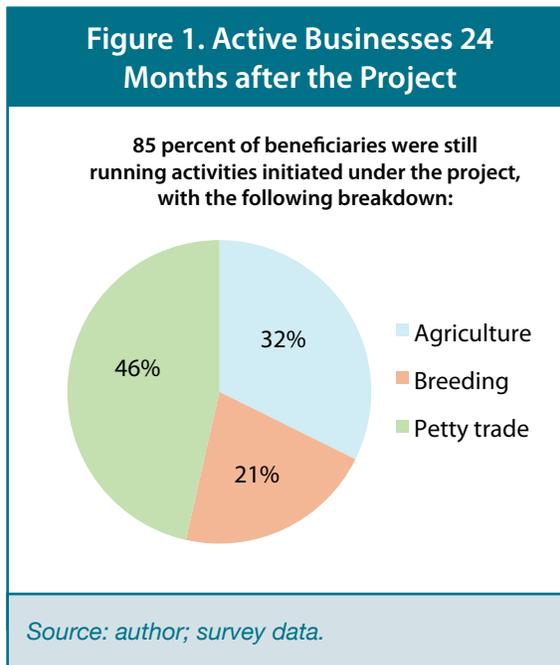
Activities chosen by project beneficiaries were as follows: agriculture 29 percent, breeding 23 per-

1 Institut National de la Statistique, Rapport de l'enquête 1-2-3 sur l'emploi, le secteur informel et la consommation des ménages de 2004 – 2005.

cent, and petty trade 45 percent. Twenty-four months after project completion, 85 percent of beneficiaries had continued with the IGA initiated through the project. Figure 1 illustrates the activities (percentages) that remain active.

While the relatively large proportion of active IGAs are in petty trade, this simply reflects the large number of beneficiaries who initially selected this activity. But the percentage of dropouts in each category indicates a particularly strong retention rate in the agricultural sector. Indeed, 91 percent of beneficiaries who chose agriculture; 87 percent who chose petty trade; and 75 percent who chose breeding still run their activity. This serves to contribute to the validity of the hypothesis that agriculture poses the most effective and sustainable reintegration opportunities.

With regard to the childcare services provided through the project, 24 percent of respondents used them. Given average household size in the DRC generally (6.4), and in Maniema more specifically (7.2), the low utilization rate may be explained by the tradition of younger children being cared for by older siblings and subsequent resistance to the provision of childcare services outside the family or community.



Economic Reintegration

The study measured the economic status of respondents through a range of indicators including: home and land ownership, purchasing capacity, and household assets. Overall, results indicate that beneficiaries fared better following the completion of the project, with a significant increase in several economic indicators. Beneficiaries owned more household assets and were more likely to own homes than the control group, but there were no discernible differences across other indicators such as food consumption or land ownership.

Specifically, with regard to home and land ownership:

- Fifty-one percent of beneficiaries own their home compared to 36 percent of nonbeneficiary ex-combatants.
- Fifty-two percent own a piece of land, among which 16 percent own more than one hectare. While the ex-combatant control group displays a lower percentage of land ownership in total, at 45 percent, a higher proportion of those landowners have more than one hectare, at 33 percent.
- Thirty-four percent of beneficiaries have use of or rent land. Among those, 16 respondents (26 percent) were also landowners.

With regard to purchasing power, 62 percent of the beneficiaries bought an object above \$20 over the last year against 53 percent of the nonbeneficiary female ex-combatants.

Mosquito net and cell-phone ownership showed the highest increase compared to the baseline, at 19 percent and 18 percent, respectively. Ownership of mattresses and radios, however, did not show any change over time among beneficiaries. But a comparison of beneficiaries and the control group puts beneficiaries out ahead, with a positive difference of 37 percentage points for mosquito nets, 22 percentage points for radios, and 26 percentage points for mattresses. On the other hand, ex-combatants were slightly more likely to

own a cell phone, with a difference of 9 percentage points.

Levels of food consumption are also a standard economic indicator. The questionnaire asked respondents how many times per day they cooked for their children. Results pointed to an improvement when compared to the baseline, with an increase of 17 percentage points in beneficiaries who provide two or three meals per day to their children. But there is little difference to be seen in a comparison with the control groups: 12 percent of project beneficiaries and 13 percent of female ex-combatants cook three times a day; 47 percent and 49 percent, respectively, cook twice a day. Results under this indicator are therefore unclear, particularly when analyzed against other economic indicators such as assets owned, home ownership, or number of visits to a health practitioner (for the child). There was no correlation between these indicators and whether beneficiaries cooked once a day or three times a day.

With regard to modes of transport, there is negligible difference between those used by project beneficiaries and control groups. Meanwhile, the number of beneficiaries using a mode of transport other than walking (bicycles, motorbikes) increased from 5 percent at the baseline to 19 percent.

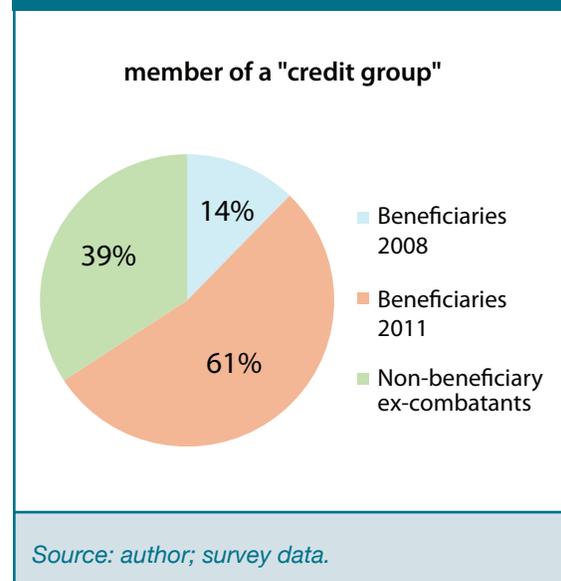
Management of Household Expenses

Questions pertaining to household expenses were asked of the 75 beneficiary respondents reported to be married. Results indicate a gain in beneficiaries' empowerment at the household level; many respondents reported that finances were equally managed by both spouses. Sixty-eight percent reported joint management compared to 45 percent at the baseline, 11 percent reported their husbands managed all the finances compared to 35 percent at the baseline, and 20 percent reported they were the sole manager of the finances compared to 16 percent at the baseline. This is quite similar to the ex-combatant control group p; nonetheless, the large increase from the baseline remains a significant finding in and of itself.

The significant increase in reported joint management of household finances is consistent with the significant decrease in the proportion of households where finances were reported to be managed by the husband alone. Of further significance is the fact that of those who jointly managed household finances, 80 percent were members of an economic-related group. Conversely, among respondents who reported that their husband managed the finances, only 25 percent were members of economic-related groups.

The study shows that beneficiaries' membership in a community group increased by 47 percentage points from the baseline and indicates a significant positive difference when compared with the non-beneficiary ex-combatants. Sixty-one percent were members of a credit group (figure 3), 28 percent of a group related to economic issues, and 7 percent (or, one woman) of a sports group.

Figure 2. Credit and Savings Group Membership



Social Reintegration

Welfare perception was assessed 24 months after project completion to obtain complementary qualitative information. Such data were not col-

lected at the baseline and thus inferences over time could not be made. Comparisons between the beneficiary and control groups were broadly similar, with 9 percent of beneficiaries reporting their satisfaction with life as “good” or “excellent” compared to 8 percent of nonbeneficiaries; 22 percent reporting it to be “fair” compared to 18 percent of nonbeneficiaries; and 69 percent reporting it as “bad” or “rather bad” compared with 74 percent of nonbeneficiaries.

The key finding here is that the overwhelming majority of respondents—beneficiaries and nonbeneficiaries alike—rate their satisfaction with life at the lowest end of the scale. These results are somewhat ambiguous, however, when examined in light of beneficiary satisfaction with the project: 93 percent indicated that the project helped them. The economic situation (including access to health and education) is generally mentioned as a key point of improvement; the quality of relationships and community integration also featured significantly in responses. Indeed, 68 percent of respondents who indicated that the project had been helpful rated their satisfaction with life as “bad” or “rather bad.” There are two possible explanations for such results: (i) the point of reference remains very low for beneficiaries, and despite recognizing some improvement in relation to project support, beneficiaries still consider their situation as fairly negative; (ii) respondents considered the question in terms of comparing their current situation to an absolute ideal condition and (iii) responses may have been influenced by hopes of gaining additional support—either by indicating that the project was helpful, or by describing their situation as dire.

With regard to non-ex-combatant beneficiaries, all indicated that the project was helpful. Six of the 17 surveyed furthermore mentioned that the project helped them to improve the perception they had of ex-combatants and their relationship with them.

Respondents who rated their satisfaction with life to be “good” or “excellent” also performed more favorably against quality-of-life and social reinte-

gration indicators:

- All respondents owned their own house or a piece of land.
- All reported to have purchased medication in the last six months.
- All of those married rated their relationship with their husband a 5 on a scale from 1 to 5.
- Among those married, the money was managed by both husband and wife.
- Levels of confidence in the rest of the community (including all categories, such as elders, ex-combatants, government officials, and so on) were significantly higher than that of the other respondents.

Confidence Levels

Overall, results indicate that project beneficiaries show good levels of confidence in others within their community. The level of confidence placed in those outside the community was at 7 percent (showing less trust), whereas confidence in those who had recently arrived in the community was at 22 percent and trust in the government was at 33 percent (table 1). Results were similar across beneficiaries and nonbeneficiaries. But the level of confidence in newcomers in the community, although low at 22 percent, increased by 9 percentage points from the project baseline.

It is worth noting that some respondents, unprompted, commented that the project had helped them be accepted by the community (in the case of ex-combatants) or be accepted and live in peace with ex-combatants (among community members).

Results also indicated low levels of confidence in health practitioners and teachers, but rates of confidence were significantly lower among nonbeneficiary respondents than beneficiaries, which might suggest the efficacy of literacy and SGBV trainings.

Table 1. Comparative Table of Confidence Levels

	Beneficiaries 2008 (%)	Beneficiaries 2011 (%)	Female ex- combatants (%)
Trust the government completely	39	33	31
Trust the chief of their area completely	63	72	60
Trust the elders completely	78	86	65
Trust the other women of the community completely	59	76	68
Trust the men of the community completely	52	50	56
Trust the women ex-combatants in the community completely	13	79*	83
Trust the men ex-combatants in the community completely	6	52	72
Trust people recently arrived in the community completely	13	22	28
Trust people outside the community completely	6	7	16
Trust health practitioners completely	93	83	59
Trust teachers completely	85	78	63

Source: author; survey data.

*Note: *This figure includes ex-combatants only, as all the members of the community answered "a little" to this question.*

Relationships

Marital Relationships

Married project beneficiaries reported good-quality marital relationships: 84 percent rated their relationship as “excellent” or “good.” Sixty-three percent of married beneficiaries reported their marital relationship as “excellent,” an increase compared to 55 percent at the baseline. Results show a higher proportion of respondents rating their relationship as excellent among beneficiaries compared to the control group of ex-combatants. It is, however, important to understand what is perceived to constitute a “good” or “excellent” relationship. Further light is shed on this topic with cross-analysis on SGBV responses: of the 84 percent who reported their relationships as “good” or “excellent,” all respondents indicated “yes” or “it

depends on the reason” to the question “is it justified that a husband beats his wife?” This perspective has remained relatively unchanged since the start of the project, across beneficiaries and non-beneficiaries alike.

The significant increase in the marital relationship perception since the baseline and when compared with nonbeneficiary ex-combatants, points to a possible contribution of project activities to gender sensitization.

Relationships with the Family

Beneficiaries and nonbeneficiaries alike report positive relationships with their own parents and in-laws. Relationships with parents remained positive from the start of the project; 100 percent of beneficiaries with parents still alive reported excellent or good relationships compared with 97

percent in 2008. Beneficiaries also experience good relationships with their in-laws: 79 percent reported that they maintain excellent, good, or fair relationships with them. These results are broadly similar to those reported by nonbeneficiaries, thus no discernible effect could be ascertained on relationships with the extended family.

Relationships between Community Members and Ex-Combatants

Results pointed to good levels of integration between community members and ex-combatants among both beneficiaries and nonbeneficiaries. Ninety-one percent of ex-combatant beneficiaries stated that their children played with other children (of non-ex-combatants) in the community, and 95 percent of ex-combatant nonbeneficiaries indicated the same trend. Thus no link to project activities is discernible. Levels of acceptance of children born in active combat were reported to be fair or excellent. Of the 49 percent to which this situation applied, only one respondent reported a lack of acceptance of the child by her husband. It is worth noting, however, that only 13 percent of those reporting high levels of acceptance report that the child's father is not their current husband.

Sexual and Gender-Based Violence (SGBV)

Data indicate community awareness of SGBV issues; 55 percent of respondents reported that their community is aware of SGBV and 59 percent believe that their community understands these issues. Results further indicate that a greater number of respondents were reached by SGBV sensitization efforts during the course of the project, and a lower yet significant number continued to be reached after project close. Meanwhile, among nonbeneficiaries, 78 percent had been reached in the last 3 years and 62 percent in the last 12 months. This difference is significant. The sexual violence awareness component of the project targeted the community as a whole though radio and print materials in areas where both beneficiaries and other female ex-combatants live. It can thus

be assumed that the end of the project corresponds to the decrease in exposure to sexual violence issues for both groups, and therefore that the project successfully targeted the wider community. But awareness-raising and sensitization efforts were not maintained following project closure.

While data on community members' general awareness of SGBV issues—despite their discontinuation—are promising, they seem to have had a rather superficial effect. Data indicate that attitudes and practices remain broadly unchanged since the baseline. Of beneficiaries 63 percent believe a husband is justified in beating his wife, compared to 65 percent at the time of the research. Among nonbeneficiaries this percentage is only negligibly higher, at 69 percent. Further qualitative research would allow further exploration of these issues, especially in regard to the degree of male engagement in related activities. Nonetheless, the time required to achieve a measurable change in attitudes is an important consideration in the context of this pilot operation.

Conclusions

Overall, the study shows a positive experience in providing additional support to vulnerable female ex-combatants and their community peers, with particularly promising prospects for sustainability. Results point to an improvement in key indicators, primarily at the economic level compared to the baseline and in comparison to nonbeneficiary control groups of both ex-combatants and community peers. The data also point to some improvement in social indicators and generally reflect success in promoting social reintegration and trust building among both ex-combatants and community members. Results on economic performance tend to be more prominent, as reflected by home and assets ownership indicators among others. Several areas (such as key health and literacy indicators) remain mixed, with no clear differences between beneficiaries and nonbeneficiaries. For example, the significant increase in beneficiary literacy rates since the start of the project may reflect general improvements in the population; similar trends were observed across both beneficiary and nonbeneficiary groups 24 months after project

closure. Indeed, it is important to recall that this study does not allow causality to be established, but simply provides an indication of prospects for sustainability and promising approaches.

Project beneficiaries reported high levels of satisfaction with the intervention, with 93 percent indicating that the project had specifically improved their situation. But the point of reference remains very low: 68 percent of these respondents rated their overall satisfaction with life as “bad” or “rather bad.”

Recommendations

The positive overall performance of project beneficiaries and sustainability of project activities indicated by the research suggest that the project could successfully be replicated in other areas of the DRC.

Providing additional complementary support to

D&R programs for particularly vulnerable groups appears to be effective in strengthening socioeconomic reintegration in this context. In particular, targeting both ex-combatants and community members, based on standard vulnerability criteria, to promote reconciliation emerges as a promising practice.

SGBV activities should (i) complement sensitization efforts with referrals to treatment and care providers and (ii) establish links with longer-term initiatives that aim to change attitudes and practices and include men—both during and after project closure.

The provision of childcare services is an emerging promising practice. Awareness of the value of such services could be raised by explaining the potential negative effects on school attendance if older children spend too much of their time caring for their younger siblings.

Annex 1a.

Questionnaire (Project Beneficiaries: Female Ex-Combatants and Community Members)

PROJET DE REINSERTION SOCIOECONOMIQUE DE 200 FEMMES A KINDU

(EX-COMBATTANTES et COMMUNAUTE)

Bénéficiaires du projet : (200 – 140 femmes ex-combattants et 60 membres de la communauté)

Fiche bénéficiaire N°..... (1 à 200)

NOM Membre de la Communauté

Ex-combattant

(Ne pas poser la question, juste cocher la case à l'avance)

N°	QUESTIONS	Cocher	REPONSES
1	Quel est votre état-civil ?	<input type="checkbox"/>	Célibataire
		<input type="checkbox"/>	Marié(e)
		<input type="checkbox"/>	Divorcé(e)
		<input type="checkbox"/>	Veuf(ve)
		<input type="checkbox"/>	Séparé(e)
01a	Depuis quand ? (<i>indiquer durée</i>)	_ _ mois _ _ années	
01b	Si veuf (ve), avez-vous bénéficié de votre droit à l'héritage ?	<input type="checkbox"/>	Oui
		<input type="checkbox"/>	Non
2	Savez-vous lire ?	<input type="checkbox"/>	Oui
		<input type="checkbox"/>	Non
3	Savez-vous écrire ?	<input type="checkbox"/>	Oui
		<input type="checkbox"/>	Non
4	Est-ce que vous avez eu un enfant depuis le début du projet ?	<input type="checkbox"/>	Oui
		<input type="checkbox"/>	Non
04a	Cet enfant est-il bien accepté par la communauté ? <i>(Pour les ex-combattantes seulement)</i>	<input type="checkbox"/>	Oui
		<input type="checkbox"/>	Non
5	Combien de fois avez-vous rendu visite à un médecin pour vous-même sur les 6 derniers mois ?	<input type="checkbox"/>	0 fois
		<input type="checkbox"/>	Entre 1 et 3 fois
		<input type="checkbox"/>	Jamais

05a	Si 0 ou jamais, pouvez-vous expliquer pourquoi ? Plusieurs choix possible	Pas malade
		Trop loin de chez moi
		Je ne sais pas où aller
		Trop cher
		Mauvais accueil du personnel de santé
		Autres : Expliquer :
6	Combien de fois avez-vous emmené vos enfants voir un médecin sur les 6 derniers mois ? (maladie, vaccinations)	0
		Entre 1 et 3 fois
		Jamais
06a	Si 0 ou jamais, pouvez-vous expliquer pourquoi ? Plusieurs choix possible	Pas malade
		Trop loin de chez moi
		Je ne sais pas où aller
		Trop cher
		Mauvais accueil du personnel de santé
7	Avez-vous acheté des médicaments cette année si vous ou vos enfants avez été malades ?	Oui
		Non
		Pas malades
07b	Si Non, pouvez-vous expliquer pourquoi ?	Trop loin de chez moi
		Trop cher
		Autre :
		Expliquer :
8	Combien de fois par jour vos enfants mangent-ils ?	1 fois
		2 fois
		3 fois
9	Est-ce que vos enfants s'entendent bien avec les autres enfants de la communauté ?	Oui
		Non
10	Est-ce que vos enfants jouent avec les enfants d'Ex-combattants ? (pour les membres de la communauté seulement ?	Oui
		Non

11	Faites-vous partie d'un groupe ou association sportifs ou de divertissements ?		Oui
			Non
11a	Si oui, depuis quand ? Indiquer durée		_ _ mois _ _ années
11b	Si oui, est-ce que ce groupe est composé de femmes ou d'hommes seulement ?		Femmes seulement
			Hommes seulement
			Les deux
11c	Si oui, est-ce qu'il y a aussi des ex-combattants dans le groupe ?		Oui
			Non
			Ne sait pas
12	Etes-vous membre d'un groupe d'épargne ou de crédit ? (en dehors du projet)		Oui
			Non
12a	Si oui, depuis quand ? Indiquer durée		_ _ mois _ _ années
12b	Si oui, est-ce que ce groupe est composé de femmes ou d'hommes seulement ?		Femmes seulement
			Hommes seulement
			Les deux
12c	Si oui, est-ce qu'il y a aussi des ex-combattants dans le groupe ?		Oui
			Non
			Ne sait pas
13	Est-ce que vous faites partie d'une association qui traite des activités économiques, d'entrepreneuriat, ou de gestion ?		Oui
			Non
13a	Si oui, depuis quand ? Indiquer durée		_ _ mois _ _ années
13b	Est-ce que cette association est composée de femmes ou d'hommes seulement, ou des deux ?		Femmes seulement
			Hommes seulement
			Les deux
13c	Si oui, est-ce qu'il y a aussi des ex-combattants dans le groupe ?		Oui
			Non
			Ne sait pas
14	Si vous deviez la noter, à quel point vous estimez-vous content/satisfait de votre vie sur une échelle de 1 à 5, à l'heure actuelle ? (le niveau 1 représentant le niveau le plus bas de satisfaction)		1
			2
			3
			4
			5

15	Avez-vous des amis parmi les membres de la communauté qui ne soient pas ex-combattants ? <i>(pour les ex combattantes seulement)</i>		Oui
			Non
16	Avez-vous des amis parmi les ex-combattants ? <i>(pour les membres de la communauté seulement ?)</i>		Oui
			Non
17	A quel point faites-vous confiance aux personnes suivantes ?		
A	Les fonctionnaires du gouvernement ?		Complètement
			Un peu
			Pas d'avis
			Pas beaucoup
			pas du tout
B	Le chef de votre quartier		Complètement
			Un peu
			Pas d'avis
			Pas beaucoup
			pas du tout
C	Les aînés de votre communauté		Complètement
			Un peu
			Pas d'avis
			Pas beaucoup
			Pas du tout
D	Les femmes de cette communauté		Complètement
			Un peu
			Pas d'avis
			Pas beaucoup
			Pas du tout
E	Les hommes de cette communauté		Complètement
			Un peu
			Pas d'avis
			Pas beaucoup
			Pas du tout
F	Les femmes ex-combattantes de cette communauté		Complètement
			Un peu
			Pas d'avis
			Pas beaucoup
			Pas du tout
G	Les hommes ex-combattants de cette communauté		Complètement
			Un peu
			Pas d'avis
			Pas beaucoup
			Pas du tout

H	Les gens qui ont rejoint récemment la communauté	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup
		Pas du tout
I	Les gens en dehors de la communauté	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup
		Pas du tout
J	Les professionnels de la santé (médecins, aides-soignants, infirmiers(ères))	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup
		Pas du tout
K	Enseignants	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup
		Pas du tout
18	Est-ce que vous êtes au courant de projets menés par la ville ?	Oui
		Non
19	Est-ce que vous êtes au courant de projets menés par le quartier où vous habitez ?	Oui
		Non
20	Comment-vous déplacez vous habituellement dans la ville ?	A pied
		A vélo
		Avec les transports
		Voiture
21	Avez-vous acheté un nouvel objet pour votre maison/activité, d'une valeur de plus de 20\$, depuis que vous avez commencé le projet ?	Oui
		Non
22	Est-ce que l'un des membres de votre ménage possède l'un des objets suivants (acheté par votre ménage)? Ecrire le nombre pour chaque objet	Radio
		Téléphone portable
		Matelas
		Moustiquaire
		Vélo
23	Êtes-vous (votre ménage) propriétaire de votre logement ?	Oui
		Non
24	Possédez-vous un terrain ?	Oui
		Non
24 a	Si oui, quelle taille fait votre terrain ?	0 à 250 ares
		250 à 500 ares
		1 Ha et plus

25	Si vous louez ou utilisez un terrain, quelle est sa superficie ?	0 à 250 ares
		250 à 500 ares
		1 Ha et plus
26	Au sein de votre ménage, qui gère les dépenses de la maison ?	Moi
		Mon mari / ma femme
		Nous deux
		Autre
26a	<i>Si Autre, merci de préciser qui</i>	
27	Si vous deviez la noter, à quel point vous estimez-vous content/satisfait de votre relation avec votre mari sur une échelle de 1 à 5, à l'heure actuelle ?	1
		2
		3
		4
		5
		Pas approprié
28	Si vous deviez la noter, à quel point vous estimiez-vous content/satisfait de votre relation avec vos propres parents sur une échelle de 1 à 5, à l'heure actuelle ?	1
		2
		3
		4
		5
		Pas approprié
29	Si vous deviez la noter, à quel point vous estimiez-vous content/satisfait de votre relation avec votre belle-mère sur une échelle de 1 à 5, à l'heure actuelle ?	1
		2
		3
		4
		5
		Pas approprié
30	Si vous deviez la noter, à quel point vous estimiez-vous content/satisfait de votre relation avec votre belle-famille sur une échelle de 1 à 5, à l'heure actuelle ?	1
		2
		3
		4
		5
		Pas approprié
31	A votre avis, est-il justifié qu'un mari frappe sa femme ?	Oui
		Non
		Cela dépend
31a	Si cela dépend, quelles raisons sont acceptables ?	Infidélité
		Négliger les tâches ménagères
		Négliger les enfants
		Sortir de la maison sans permission
		Autre

31b	<i>Si Autre, merci de préciser</i>	
32	Est-ce que vous sortez voir des amis sans votre époux/se de temps en temps ?	Oui
		Non
33	Est-ce que vous pensez que ce projet vous a aidé ?	Oui
		Non
33a	Si oui, de quelle manière ?(économiquement, socialement, humainement, etc).	
33b	Si non, pourquoi exactement ? (Qu'est-ce qui aurait pu être amélioré ou qu'a-t-il manqué pour que le programme vous aide vraiment ?)	

Fait à Kindu, le / /

Enquêteur _____

Annex 1b.

Questionnaire (Control Groups: Female Ex-Combatants and Community Members)

PROJET DE REINSERTION SOCIOECONOMIQUE DE 200 FEMMES A KINDU

Groupe Contrôle non bénéficiaire du Projet – Ex-Combattantes

Fiche Ex-combattantes N°.....(GC1 à GC 100)

NOM

N°	QUESTIONS	Cocher	REPONSES
1	Quel est votre état-civil ?		Célibataire
			Marié(e)
			Divorcé(e)
			Veuf(ve)
			Séparé(e)
01a	Depuis combien de temps ? (indiquer durée)	_ _ mois _ _ années	
01b	Si veuf (ve), avez-vous bénéficié de votre droit à l'héritage ?		Oui
			Non
2	Savez-vous lire ?		Oui
			Non
3	Savez-vous écrire ?		Oui
			Non
4	Est-ce que vous avez eu un enfant depuis Janvier 2009 ? (un enfant âgé de moins de deux ans et demi)		Oui
			Non
04a	Cet enfant est-il bien accepté par la communauté ?		Oui
			Non
5	Combien de fois avez-vous rendu visite à un médecin pour vous-même sur les 6 derniers mois ?		0 fois
			Entre 1 et 3 fois
			Jamais

05a	<p><i>Si 0 ou jamais, pouvez-vous expliquer pourquoi ?</i></p> <p>Plusieurs choix possible</p>	Pas malade
		Trop loin de chez moi
		Je ne sais pas où aller
		Trop cher
		Mauvais accueil du personnel de santé
		Autres : Expliquer :
6	Combien de fois avez-vous emmené vos enfants voir un médecin sur les 6 derniers mois ? (maladie, vaccinations)	0
		Entre 1 et 3 fois
		Jamais
06a	<p><i>Si 0 ou jamais, pouvez-vous expliquer pourquoi ?</i></p> <p>Plusieurs choix possible</p>	Pas malade
		Trop loin de chez moi
		Je ne sais pas où aller
		Trop cher
		Mauvais accueil du personnel de santé
7	Avez-vous acheté des médicaments cette année si vous ou vos enfants avez été malades ?	Oui
		Non
		Pas malades
07b	Si Non, pouvez-vous expliquer pourquoi ?	Trop loin de chez moi
		Trop cher
		Autre :
		Expliquer :
8	Combien de fois par jour vos enfants mangent-ils ?	1 fois
		2 fois
		3 fois
9	Est-ce que vos enfants s'entendent bien avec les autres enfants de la communauté (qui ne sont pas ex-combattants) ?	Oui
		Non
		Non

10	Faites-vous partie d'un groupe ou association sportifs ou de divertissements ?	Oui
		Non
10a	Si oui, depuis quand ? Indiquer durée	_ _ mois _ _ années
10b	Si oui, est-ce que ce groupe est composé de femmes ou d'hommes seulement ?	Femmes seulement
		Hommes seulement
		Les deux
10c	Si oui, est-ce qu'il y a aussi des ex-combattants dans le groupe ?	Oui
		Non
		Ne sait pas
11	Etes-vous membre d'un groupe d'épargne ou de crédit ? (en dehors du projet)	Oui
		Non
11a	Si oui, depuis quand ? Indiquer durée	_ _ mois _ _ années
11b	Si oui, est-ce que ce groupe est composé de femmes ou d'hommes seulement ?	Femmes seulement
		Hommes seulement
		Les deux
11c	Si oui, est-ce qu'il y a aussi des ex-combattants dans le groupe ?	Oui
		Non
		Ne sait pas
12	Est-ce que vous faites partie d'une association qui traite des activités économiques, d'entrepreneuriat, ou de gestion ?	Oui
		Non
12a	Si oui, depuis quand ? Indiquer durée	_ _ mois _ _ années
12b	Est-ce que cette association est composée de femmes ou d'hommes seulement, ou des deux ?	Femmes seulement
		Hommes seulement
		Les deux
12c	Si oui, est-ce qu'il y a aussi des ex-combattants dans le groupe ?	Oui
		Non
		Ne sait pas
13	Si vous deviez la noter, à quel point vous estimez-vous content/satisfait de votre vie sur une échelle de 1 à 5, à l'heure actuelle ? (le niveau 1 représentant le niveau le plus bas de satisfaction)	1
		2
		3
		4
		5
14	Avez-vous des amis parmi les membres de la communauté qui ne soient pas ex-combattants ?	Oui
		Non
15	A quel point faites-vous confiance aux personnes suivantes ?	

A	Les fonctionnaires du gouvernement ?	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup pas du tout
B	Le chef de votre quartier	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup pas du tout
C	Les aînés de votre communauté	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup Pas du tout
D	Les femmes de cette communauté	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup Pas du tout
E	Les hommes de cette communauté	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup Pas du tout
F	Les femmes ex-combattantes de cette communauté	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup Pas du tout
G	Les hommes ex-combattants de cette communauté	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup Pas du tout
H	Les gens qui ont rejoint récemment la communauté	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup Pas du tout

I	Les gens en dehors de la communauté	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup
		Pas du tout
J	Les professionnels de la santé (médecins, aides-soignants, infirmiers(ères))	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup
		Pas du tout
K	Enseignants	Complètement
		Un peu
		Pas d'avis
		Pas beaucoup
		Pas du tout
16	Est-ce que vous êtes au courant de projets menés par la ville ?	Oui
		Non
17	Est-ce que vous êtes au courant de projets menés par le quartier où vous habitez ?	Oui
		Non
18	Comment-vous déplacez vous habituellement dans la ville ?	A pied
		A vélo
		Avec les transports
		Voiture
19	Avez-vous acheté un nouvel objet pour votre maison/activité, d'une valeur de plus de 20\$, depuis que vous avez commencé le projet ?	Oui
		Non
20	Est-ce que l'un des membres de votre ménage possède l'un des objets suivants (acheté par votre ménage)? Ecrire le nombre pour chaque objet	Radio
		Téléphone portable
		Matelas
		Moustiquaire
		Vélo
21	Etes-vous (votre ménage) propriétaire de votre logement ?	Oui
		Non
22	Possédez-vous un terrain ?	Oui
		Non
22 a	Si oui, quelle taille fait votre terrain ?	0 à 250 ares
		250 à 500 ares
		1 Ha et plus
23	Si vous louez ou utilisez un terrain, quelle est sa superficie ?	0 à 250 ares
		250 à 500 ares
		1 Ha et plus

24	Au sein de votre ménage, qui gère les dépenses de la maison ?	Moi
		Mon mari / ma femme
		Nous deux
		Autre
24a	<i>Si Autre, merci de préciser qui</i>	
25	Si vous deviez la noter, à quel point vous estimez-vous content/satisfait de votre relation avec votre mari sur une échelle de 1 à 5, à l'heure actuelle ?	1
		2
		3
		4
		5
		Pas approprié
26	Si vous deviez la noter, à quel point vous estimiez-vous content/satisfait de votre relation avec vos propres parents sur une échelle de 1 à 5, à l'heure actuelle ?	1
		2
		3
		4
		5
		Pas approprié
27	Si vous deviez la noter, à quel point vous estimiez-vous content/satisfait de votre relation avec votre belle-mère sur une échelle de 1 à 5, à l'heure actuelle ?	1
		2
		3
		4
		5
		Pas approprié
28	Si vous deviez la noter, à quel point vous estimiez-vous content/satisfait de votre relation avec votre belle-famille sur une échelle de 1 à 5, à l'heure actuelle ?	1
		2
		3
		4
		5
		Pas approprié
29	A votre avis, est-il justifié qu'un mari frappe sa femme ?	Oui
		Non
		Cela dépend
29a	<i>Si cela dépend, quelles raisons sont acceptables ?</i>	Infidélité
		Négliger les tâches ménagères
		Négliger les enfants
		Sortir de la maison sans permission
		Autre
29b	<i>Si Autre, merci de préciser</i>	

30	Est-ce que vous sortez voir des amis sans votre époux/se de temps en temps ?	Oui
		Non
31	Est-ce que vous pensez que le programme (PNDDR) vous a aidé ?	Oui
		Non
31a	<i>Si oui, de quelle manière ?</i>	
31b	<i>Si non, pourquoi exactement ? (Qu'est-ce qui aurait pu être amélioré ou qu'a-t-il manqué pour que le programme vous aide vraiment ?)</i>	

Fait à Kindu, le / /

Enquêteur _____

Annex 2.

Methodological Recommendations for Further Research

- This questionnaire could be replicated on a representative sample of members of the community to serve as an additional control group (although this was considered for the present study, the time frame restricted this possibility).
- Results from certain sections of the questionnaire would be further reinforced by an additional qualitative phase, for example, those around sexual and gender-based violence (SGBV) knowledge, attitudes, and practice and perspectives on childcare services.
- Details on access to information obtained through the questionnaire (questions 19 and 20) would be further enhanced through the addition of questions on the following: (i) the precise channels of information and (ii) the type of projects that respondents were aware of.
- Awareness of SGBV issues could be further raise by adding a subquestion to understand exactly through what mechanism respondents became aware of such issues. Focus group discussions could also be added to understand further the relatively high rate of awareness versus a low shift in perceptions of domestic violence as a “norm.”
- With regard to childcare services, focus group discussions would be valuable to further understand the low utilization rates in relation to the high levels of satisfaction for those who made use of the services.
- Responses with regard to access to health services could be further strengthened by providing a list of specific options to select from and additional space to allow for more specific explanations for “other.”
- In light of some unexpected results in relation to the question on land ownership and rental—that several respondents reported to be both owners and renters of an additional land—it would be of value to further explore such findings through focus group discussions.



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