Challenging Gender Based Violence in Pakistan Program -

Independent Evaluation Report

## FINAL REPORT

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**Acronyms**

ABAD Association for Betterment And Development of Human Beings

ACT Aiming Change for Tomorrow

AHC Australian High Commission

AF Aurat Foundation

AFP Australian Federal Police

CA Community Activist

CSR Corporate Social Responsibility

DFAT Department of Foreign Affairs and Trade

DID Disability Inclusive Development

DIG Deputy Inspector General

DNH Do No Harm

DPO Disabled People’s Organisation

EVAW Ending Violence Against Women

EVAWG Ending Violence Against Women and Girls

GBV Gender Based Violence

GRC Gender Resource Centre

HRCP Human Rights Commission of Pakistan

ICT Islamabad Capital Territory

KP Khyber Pakhtunkhwa

LRC Learning Resource Centre

M&E Monitoring and Evaluation

MEL Monitoring, Evaluation and Learning

MOU Memorandum Of Understanding

NCSW National Commission on the Status of Women

NWFP North-West Frontier Province

NET Noor Education Trust

NGO Non Governmental Organisation

NOWPDP National Organisation Working with People with Disabilities in Pakistan

NPB National Police Bureau

PCSW Provincial Commission on the Status of Women

PDHS Pakistan Demographic and Health Survey

PKR Pakistani Rupees

PVDP Pakistan Village Development Program

SAC Shazia Abbasi Consulting

SASA! Start Awareness Support Action (Behaviour Change Methodology)

SDS Sindh Development Society

SOP Standard Operating Procedure

SPO Strengthening Participatory Organisation

TOC Theory of Change

UNHCR United Nations High Commissioner for Refugees

WISE Willful Initiative for Social Empowerment

WPC Women’s Parliamentary Caucus

WWC Women Welfare Centre

VAW Violence against women

Executive Summary

The *Challenging Gender-Based Violence in Pakistan program* (‘the GBV Program’) is a four-year Australian Government aid investment (2014-18, AUD 7.5m) to reduce violence against women and girls in targeted districts of the Sindh and Khyber Pakhtunkhwa (KP) provinces. The investment, managed by Irish non-government organisation (NGO) Trócaire, takes a comprehensive, holistic and integrated approach covering quality services, prevention, advocacy and capacity building of local partners. Ending violence against women (EVAW) is one of the three priority areas under DFAT’s *Gender Equality and Women’s Empowerment Strategy (2016)*, and the Pakistan GBV Program is one of a series of EVAW investments under the Australian Aid Program.[[1]](#footnote-1)

This independent evaluation was undertaken in November – December 2016 to assess progress to date, identify lessons learnt and provide recommendations for the remainder of the investment to improve outcomes and sustainability.[[2]](#footnote-2) **Overall, the GBV Program is progressing well against objectives.** It is supporting critical services for female survivors of violence and there is evidence of both attitudinal and behavioural change at the community level in targeted areas. Two aspects of the program are particularly challenging - the advocacy component and efforts to re-integrate survivors back into the community through the provision of vocational training and ‘hand-holding’ support. In both cases the issues are primarily due to an unrealistic jump in logic in the design of the investment, rather than weaknesses in implementation.

In 2016, based on lessons learnt, Trócaire made significant changes to its partners and strategy to refine the program for the remaining two years. In particular, the program has shifted emphasis to provincial level advocacy partners, invested resources in adapting and implementing the Start Awareness Support Action (‘SASA!’) behaviour change model for community mobilisation for violence prevention, and made changes to the vocational training component. It is recommended that Trócaire document the revised theory of change (program logic), including lessons learnt and assumptions, that now underpin the remainder of the investment. This document should include a more sophisticated understanding of the linkages between disability and violence and strategies to address this. Furthermore, with only 18 months remaining there are risks to efficiency and effectiveness of further changes - additional changes in partners, strategies and other GBV program components should therefore now be left for a potential next phase. The Monitoring and Evaluation (M&E) Strategy is sound and delivering timely progress data. A greater emphasis on outcome reporting in progress reports is recommended, along with ensuring unintended consequences are captured under the Results Framework.

**Objective One** (To strengthen GBV survivor’s access to quality support services from selected partners in KP and Sindh).

This Objective involves support for private and government women’s shelters, assists survivors of violence to access legal, counselling and medical support as well as vocational training, and provides training for police, judiciary and medico-legal officers to improve understanding of Gender Based Violence (GBV) and how best to respond. The private shelters (the Association for Betterment And Development of Human Beings (ABAD) shelter in Hyderabad and the Noor Education Trust (NET) shelter in Peshawar) are providing much needed and high quality services, although ongoing efforts are required to improve referral networks and access, and both shelters currently rely on Australian Government funding to operate, raising sustainability concerns. Close collaboration with the Pakistan Government-run shelters known as *Darul Amans* and privately run Women’s Crises Centres (WCCs) is important to ensure more survivors have access to quality support services, and to improve sustainability of this investment.

There is very little evidence that providing vocational training to survivors is assisting them to re-integrate into society following their stay at a shelter. Avicenna Consulting (‘Avicenna’) has delivered quality training services, but it is unrealistic to expect a few training sessions to lead to economic independence and re-integration of survivors of violence into the community, even with the ‘hand-holding’ element. Most women in the shelters are in greater need of counselling and basic literacy rather than vocational training (particularly in Peshawar, where half of the shelter residents are registered Afghan refugees, referred by the United Nations High Commissioner for Refugees (UNHCR). Survivors should continue to have access to vocational training if desired (see Objective 2), but emphasis should remain on counselling and literacy/life skills. Small grants should continue on a needs basis. Capacity building of police and judiciary should continue, with an emphasis on police at the district level.

**Objective Two** (To promote reduced tolerance to Gender-Based Violence and actions to address violence against women among women, men and community leaders).

This Objective involves support to local NGO partners to work with community groups and leaders to reduce tolerance of GBV. The three NGOs involved in the prevention work (SDS, ACT and PVDP) are skilled at community mobilisation, and there is significant evidence of both attitudinal and behavioural change among men, women and girls in the communities visited (noting this was only a small sample). As the team was unable to meet with boys involved in the Program, attitudinal and behavioural change among boys should be addressed in the next progress report and verified through monitoring visits. Women and girls are being empowered through this program, but close attention needs to be paid to monitoring and mitigating the risks associated with their greater mobility and speaking out about their rights. The current approach of involving men and boys, including religious and community leaders, is appropriate, but it is recommended that a specific qualitative indicator be included in the Results Framework to track unintended consequences such as potential increases in violence from altered power dynamics at the household level.

The SASA! behaviour change methodology, which involves recruiting voluntary male and female Community Activists from each community, only began implementation in June 2016. Trócaire is investing significant resources into this approach and all stakeholders interviewed are very optimistic about it, but this evaluation is unable to make an assessment of its effectiveness. Given this is the first time SASA! has been implemented in Pakistan, a review of effectiveness is recommended at the end of the four stages, noting that this will be after the completion of the current phase of Australian Government funding.

All prevention partners expressed the need for a ‘tangible hook’ to encourage community members to be active participants in meetings on GBV. Providing some vocational training in communities is endorsed by this evaluation (particularly as an incentive for female Community Activists), but active monitoring is required to ensure that the GBV program does not move too far towards a livelihoods program and lose its focus on GBV. SDS is at particular risk of losing focus. Survivors in shelters should have access to this training if desired. With different NGOs trialling different models, this is a prime opportunity to bring partners together before the end of the program to discuss lessons learnt in this area. A specific lessons learnt workshop on the vocational training/women’s economic empowerment component of the investment would be a valuable contribution to this discussion both within Pakistan and internationally, and is highly recommended.

**Objective Three** (To support advocacy efforts with key stakeholders to enable passage and full implementation of key legislations related to addressing GBV).

This Objective aims to bring about legislative and policy change in the area of GBV. Advocacy work is a long-term endeavour that requires persistence and flexibility, and outcomes are often unpredictable and non-linear. As currently stated, this objective is both unrealistic and unachievable within the timeframe of the investment. In 2016, based on lessons learnt from the first two years, Trócaire made a decision to engage provincial level advocacy partners, moving away from the national level approach. Greater emphasis on the provincial level is endorsed given the decentralised environment, but there have been significant delays identifying partners and this has affected performance in this area. Trócaire has just identified a new partner in Sindh, and there is now an urgent need to engage a partner in KP. It is important to ensure that advocacy and media partners at the various levels link up and leverage off each other’s work for maximum impact. Overall, realistic expectations are required, along with a long-term partnership approach that builds capacity, networks and the ability to respond quickly to windows of opportunity that may arise. It is a challenging area of work, but outcomes in this area are critical if the investment is to have broader impacts beyond the target districts.

**Objective Four** (To improve partners’ capacity to support sustainable change in target communities).

This Objective involves working closely with the five implementing partners (ABAD, Sindh Development Society (SDS), NET, Aiming Change for Tomorrow (ACT) and the Pakistan Village Development Program (PVDP) to build their capacity to improve effectiveness and sustainability. All partners have strong ownership of the GBV agenda and are very committed. This component is progressing well, with the partners receiving relevant, targeted training and mentoring in areas such as financial management, disability inclusion, monitoring and evaluation, security and risk management. Trócaire has been very responsive to partners’ capacity needs and there is strong evidence that partners are using the skills gained. For example, partners are implementing disability action plans, but ongoing messaging is required from the Australian High Commission (AHC) and Trócaire to ensure disability inclusiveness remains a priority. Furthermore, there is significant scope for implementing partners to learn from each other and Trócaire should actively identify opportunities to bring partners together for this purpose. There are ongoing issues with NET senior management, which need to be actively managed.

Trócaire and partners all have sustainability action plans and are actively taking measures to improve sustainability. Significant opportunities exist to partner with philanthropists and the private sector (e.g. through corporate social responsibility (CSR) funds) to leverage greater impact and sustainability. For example, Trócaire should explore opportunities to partner with telecommunications company Zong to fund operating costs of the Hyderabad helpline. Overall, risks are managed well, but an ongoing emphasis on security and Do No Harm is required. Regular communication with the AHC on management of risks is also required.

There are some strong linkages with government at different levels, but there are also significant gaps at federal, provincial and district levels. Greater effort is required overall to build linkages with government and for greater coordination and leveraging. The Program Manager at the Australian High Commission (AHC) requires dedicated time to play this role, as do Trócaire staff, to ensure maximum value-add. There is a general need to increase sharing of information between Trócaire and the AHC, as well as between the different program partners/contractors and stakeholders in the sector. Improving linkages at all levels and leveraging partnerships and influence for greater impact are key recommendations of this evaluation.

Trócaire is clearly a valued partner – it is delivering results, and is receptive to partner needs. The organisation has attracted high quality staff and has a strong performance-based management culture. It has strong systems that deliver accountability, efficiency and value for money. There are many short-term technical contracts, which create a management burden for Trócaire staff. While delivering on short-term targets, these contracts have arguably affected longer-term outcomes by weakening the partnership approach. Longer-term partnership approaches are often preferable in EVAW programs, given the long timeframes and transformative goals. A longer-term partnership approach should be taken with the new provincial advocacy partners, but also potentially with organisations advocating for people with disability and other advocacy bodies.

**The contexts of Sindh and KP are significantly different, but in both provinces, there are male and female champions in government, civil society and private sector and with time community members appear to be receptive to gender equality and anti-GBV messages. While numerous barriers exist to quality service provision and the full implementation of laws across the country, there is momentum in Pakistan to address violence against women and girls. Against this backdrop, the Challenging GBV Program in Pakistan is highly relevant, is delivering results, and has significant potential for impact and scale up.**

Introduction

In late 2016, the Australian Government undertook an evaluation mission to assess progress of the GBH Program (see Annex A for detailed Terms of Reference). An in-country data collection mission was undertaken from 20 November to 2 December 2016 (see Annex B for Evaluation Plan, Annex C for itinerary and Annex D for list of documents). During this period, the two-member evaluation team[[3]](#footnote-3), accompanied by staff from the Australian High Commission (AHC), met with a range of stakeholders in Islamabad, Sindh and KP. An Aide Memoire prepared for Government of Pakistan stakeholders in December 2016 is at Annex E.

The evaluation findings, recommendations and lessons learned presented in this report will be used to improve the Program in the remaining period of the investment. Throughout the report, recommendations have been highlighted in bold; they are also summarised in the Recommendations chapter at the end of the report. Lessons learnt are integrated in the text and summarised in a list at the end of the report. Areas recommended for additional follow up are highlighted throughout the report.

Purpose and Methodology

## Purpose

* To assess progress against objectives
* To identify lessons learnt and recommendations to inform the remainder of the investment, and
* To begin scoping for a potential next phase of Australian support for EVAW in Pakistan.

This report focuses on the first two purposes of the evaluation. As agreed with the AHC, a separate internal paper has been developed to inform a potential next phase of Australian support following program completion.

## Evaluation Questions

Findings have been structured based on the four Program objectives, plus additional sections on cross-cutting issues and governance and management arrangements, focussing on Trócaire’s management of the program, disability inclusiveness, and the role of the AHC. In each section, the evaluation questions, covering efficiency, effectiveness, monitoring and evaluation, risk management, gender equality and sustainability, have been addressed (see Annex B Evaluation Plan for evaluation questions). Findings have been structured in this way to aid utilisation, and both the AHC and Trócaire have endorsed this approach.

## Methodology and Limitations

The evaluation methodology involved desk review and document analysis (see Annex D for a complete list of all reference documents), together with meetings, interviews and small group discussions with program partners, beneficiaries and stakeholders in Islamabad, Sindh and KP over a two week period. The evaluation was conducted by a DFAT Performance and Gender Specialist (team leader) and a Pakistani Gender Specialist consultant. The team utilised a strength-based approach, whereby the evaluation team provided opportunities for stakeholders to reflect upon and discuss progress, lessons, challenges and strategies going forward.

The key limitation of the evaluation was the short time frame for in-country meetings and field visits. Over the two-week period, the evaluation team travelled to Islamabad (three days), Sindh (three days) and KP (two and a half days). Security considerations limited the time available for discussion with partners and beneficiaries. Due to both logistical and security restrictions, the team did not travel to Swat district in KP. It met instead with PVDP staff and male program beneficiaries in Islamabad, but as a result the team was unable to meet with any female beneficiaries from Swat. The team did not have sufficient time to meet with some of the technical partners (Rozan) or previous partners (AMAL, SEHER) and some stakeholders (National Commission on the Status of Women (NCSW), KP Provincial Commission on the Status of Women (PCSW), KP Police, etc.). Additional days were included in the contract of the Pakistani consultant following the two-week in-country mission, to allow for follow-up meetings to fill information gaps and for data triangulation. Any areas that could not be comprehensively assessed during the timeframe are flagged in this report for further follow up.

The other key limitation was that the evaluation team mainly met with people associated with the investment, meaning there was no ‘control group’ included in the sample. While not ideal, this was unavoidable given the short timeframe of the evaluation. Positive bias has also been factored into the evaluation findings, given most respondents were identified by Trócaire and program implementing partners ahead of the evaluation visit.

Significant attention was given to Do No Harm considerations to ensure the evaluation team’s visit did not increase the risks for program staff and beneficiaries, particularly when visiting the two shelters. Actions taken included:

* close consultation with NGO partners and survivors living in shelters regarding their level of comfort around the evaluation team visit; and
* reducing the size of the evaluation team and police escorts to minimise the profile of the team while not compromising on security.

It should be noted that although Australian Government funding commenced in May 2014, Trócaire had already been implementing the Program since 2008 with funding from Irish Aid (with a strong focus on GBV since 2012). A scoping mission undertaken by the Australian Government in 2013 shortlisted Trócaire as it had a strong existing GBV program. In some cases the outcomes achieved by the program to date and outlined in this report are therefore the result of an eight-year intervention (six years funded by Irish Aid, and two years funded by Australian Government).

Furthermore, this independent evaluation was originally planned to occur between late 2015 and early 2016 as a mid-term review to inform the last two years of the investment. However, due to unforeseeable circumstances, the evaluation was delayed and the implementing partner Trócaire had to make programming decisions about the remainder of the investment without the evaluation findings to guide these decisions. New contracts and partnerships were therefore put in place in 2016, under what Trócaire refers to as ‘Phase Two’.

Context

## Violence against women and girls in Pakistan

“93 percent of all women in Pakistan face violence. What is the payment for a Jirga? It is a woman.” – DIG Police, Hyderabad

The Government of Pakistan has adopted a number of key international commitments on gender equality and women’s human rights. Despite these and its own national commitments, Pakistan’s ranking on gender equality remains one of the lowest in the world, with the Global Gender Gap Report 2016[[4]](#footnote-4) ranking Pakistan 143 out of 144 countries in its gender inequality index. Compounding the extremely poor gender equality indicators are social norms and customs that relegate women to a second-rate status in society. Pakistan is also one of the few countries in the world with a greater proportion of males to female.

The *2012-2013* *Pakistan Demographic and Health Survey* (PDHS)[[5]](#footnote-5) found that approximately one-third of women aged 15 to 49 had experienced physical violence at least once and 19 percent had experienced physical violence within the 12 months prior to the survey. Approximately 40 percent of women were subject to spousal abuse at some point in their life and the most common form of violence was emotional violence, reported by about 32 percent of women. It was reported that 52 percent of the women who experienced violence never sought help or ever told anyone about the violence they had experienced. Overall 34 percent of rural women experienced physical violence as compared to 28 percent of urban women.

The *2015 Annual Report of the Human Rights Commission of Pakistan* (HRCP)[[6]](#footnote-6) cites that: 939 women were victims of sexual violence; 279 of domestic violence; 143 women were attacked with acid or were set on fire; 833 women were kidnapped; and 987 were victims of ‘honour crimes’. The report further states that, despite the number of cases, the rate of prosecution remains low.

It is expected that these prevalence rates are severely underestimated. Pakistani newspaper reports often cite 92 percent. According to Thomas Reuters Foundation around 90 percent of Pakistani women face domestic abuse while thousands of women get killed in the name of honour each year.[[7]](#footnote-7)

The NCSW in collaboration with the Pakistan Bureau of Statistics, was to undertake a national survey on violence against women in 2016 but this was delayed and is now expected to be undertaken in 2017. **It is recommended that Trócaire be part of the NCSW national survey on violence against women through collaboration with the implementing agencies, where it can provide technical input, as well as provide access to data from its implementing partners, particularly the shelters.**

Despite efforts in recent years to enact legislation protecting women from violence (refer to Annex F for a listing of national and provincial laws related to women and GBV), women and girls continue to be denied equality and protection under the law.[[8]](#footnote-8) Alongside the criminal justice system, there is also the Council of Islamic Ideology, a constitutional body established in 1962 that provides non-binding advice to the Parliament on whether or not a certain law is in accordance with Islam. Whilst its decisions are non-binding the Federal *Shariat* Court established in 1982 under the Pakistan Constitution has the power to examine and determine whether Pakistani laws against god (including those that provide for women’s protection from rape) comply with *Sharia* laws. The greatest power remains with the *Jirga* system, an informal, local decision-making body at the community level comprised of male elders. This is stronger than the formal justice system throughout much of the country, but it often rules against the interests of women.

WCCswere established by the government in 1997 to provide support services for women and girl survivors of violence. The purpose of the centres is to operate as a first stop drop-in referral facility offering immediate and independent legal aid, medical aid, temporary shelter in the case of emergencies, social and psychological counselling, and linkages with law enforcement agencies and telephone helplines. Most are only open Monday to Friday, 9am – 5pm.

GBV survivors requiring shelter can also access government run shelters for women known as *Darul Aman*. Admission to these shelters, and permission to leave, is through court order. There are multiple concerns and issues surrounding *Darul Amans* - some of these have been documented in a 2007 survey.[[9]](#footnote-9) Most provincial governments have revised the Standard Operating Procedures (SOPs) for the *Darul Amans* to focus on improving working relations between law enforcement agencies and relevant government line departments. However, there is considerable need to reform and integrate the existing WCCs with the *Darul Amans,* linking them with other services provided by provincial governments, particularly police, hospitals and judicial court systems.

Overall, there are structural, procedural and capacity gaps in government support services for the protection of GBV survivors compounded by a shortage of financial and human resources. Private (NGO) shelters are few in number and their funding streams are unreliable, as they do not receive annual Government funding. Given the prevalence of GBV in Pakistan, there are a number of donors and international NGOs working in this space, including UN Women, Oxfam, the United States Agency for International Development (USAID) and the Asia Foundation.

### Sindh

Compared to the rest of Pakistan, Sindh province has a more open and enabling environment with less resistance from the community to working with women, and this is coupled with a more progressive provincial government. Sindh prides itself on a strong policy and legislative environment where a number of pro-women laws exist such as the *Domestic Violence (Prevention and Protection) Bill 2013*. There is also the *Sindh Child Marriage Restraint Act (2014),* and an Anti-Harassment law (see Annex F) along with a PCSW,[[10]](#footnote-10) and it is the only province to have its own separate Human Rights Commission. However, despite all of these achievements, implementation of the laws remains weak and there is a high prevalence of violence against women and girls in the province. According to 2012-2013 PDHS, the prevalence rate of physical violence against women in Sindh is 25 percent.[[11]](#footnote-11) Honour killings, rape, gang rape, kidnappings, acid crimes, child and early forced marriages, and forced conversions with marriages of Hindu girls to Muslim boys are all common occurrences throughout the province, tied to a predominantly feudal system. *Jirgas* are common in Sindh.

There is a significant culture of activism at the individual level with informal safe houses, mediation and referral systems for GBV survivors. Examples of this include a progressive landlord providing a safe house for women in his area and women academics at universities in Hyderabad facilitating women who have suffered from abuse and physical violence.[[12]](#footnote-12) Overall, the province presents plenty of opportunities for significant scale-up of GBV programming.

### Khyber Pakhtunkhwa

KP is one of the more challenging provinces to work in on issues related to GBV. There is opposition and resistance to the passing of pro-women laws, a high prevalence of violence, and poor mobility for women and girls. The 2012-2013 PDHS stated that KP has the highest percentages in the country for women who have ever experienced physical and/or emotional violence at 57 percent.[[13]](#footnote-13) Seventy-six percent of rural women in KP agreed that a husband is justified in beating his wife for at least one of the stated reasons in the survey.[[14]](#footnote-14)

Many different forms of violence exist in the province including the practice of *swara,[[15]](#footnote-15)* honour killings and kidnappings, and it is a common practice for *jirgas* to hand over women to settle disputes. The province has a culture of strong local customs that negatively affect women and, in addition, there is a strong suspicion of NGOs and their ‘western agenda’. Terrorism and security environment also have an ongoing impact in KP. The province has also been dealing with a range of issues relating to Afghan refugees and internally/temporary displaced persons - many of the women from these vulnerable populations face GBV and have no access to safe havens or legal recourse.

The Government of KP was the first province to set up a Provincial Commission on the Status of Women in May 2010, which is a statutory body established under the *North-West Frontier Province (NWFP) Act XIX (2009),* and is responsible for performing similar functions as the NCSW at the provincial level. The province also has an active Eliminating Violence Against Women and Girls (EVAWG) Alliance that is chaired on a rotating basis by NGOs and is a provincial chapter of the national Alliance. In 2013, the KP Provincial Assembly passed legislation against the forced marriage of women - *Elimination of Custom of Ghag Act (2013)*[[16]](#footnote-16). In December 2015, the KP Provincial Assembly elected its first female Deputy Speaker, Meher Taj Roghani, and KP is home to Pakistan’s first all-women *jirga* known as *Khwendo Jirga*.[[17]](#footnote-17)

## Overview of the Challenging GBV in Pakistan Program

The Australian Government-funded GBV Program ($7.46 million, 2014-18) takes a holistic, integrated approach to reducing violence against women and girls, involving close collaboration between the Government of Pakistan and civil society organisations. The program, managed by Irish NGO Trócaire, has four objectives:

* To strengthen GBV survivors’ access to quality support services for selected partners in Khyber Pakhtunkhwa and Sindh (Quality Services / Protection)
* To promote reduced tolerance to GBV and action to address violence against women, among women, men and youth (Prevention)
* To support advocacy efforts with key stakeholders to enable passage and implementation of key legislation relating to GBV (Advocacy / Policy), and
* To improve program partners’ capacity to support sustainable change in targeted communities (Building Partner Capacity)

See Annex G for details of budget allocation and expenditure for the program.

Trócaire, founded in 1973, is the official overseas development agency of the Catholic Church in Ireland, and a member of Caritas Internationalis. Trócaire works across more than 17 countries in Africa, Asia and Latin America and has been supporting projects in Pakistan since 1973. Trócaire’s work in Pakistan focuses on four key areas: preparing for and responding to humanitarian situations; challenging GBV; protecting bonded labourers; and securing water rights for farmers.

Trócaire partners with five Pakistani NGOs to implement the GBV Program in three districts in Sindh and five districts in KP – these core partnerships have been in place since the start of the program.[[18]](#footnote-18) The program has a range of other former, current and future partners – most of these changes occurred at the beginning of ‘Phase Two’ in mid-2016. They include: Aurat Foundation (AF), AMAL, SEHER, National Organisation Working with People with Disabilities in Pakistan (NOWPDP) (former); Avicenna, Shazia Abbasi Consulting (SAC), Rozan (current); Strengthening Participatory Organisation (SPO), Women’s Parliamentary Caucus, and Raising Voices (future)[[19]](#footnote-19). The role and performance of these partners will be addressed in detail in the body of the report.

Trócaire has six full-time staff working on the GBV Program, with other members of the Trócaire Pakistan and headquarters based staff providing technical, financial and administrative support on a needs basis. Trócaire has faced several challenges during implementation of the Program, including:

* ongoing security issues especially in KP, which has hindered implementation and monitoring (e.g. through Trócaire’s inability to obtain No Objection Certificates for travel)
* the time and cost implications of operating and supporting partners in two provinces that are far apart
* building community trust and ownership of the GBV agenda takes time, particularly in new operational districts and with new partners like ACT
* changes in short-term technical partners which has led to additional management burden for the Trócaire team, and
* performance issues with a minority of partners, in particular NET senior management.

Three main changes were made in ‘Phase 2’ of the Program (mid 2016) based on lessons learnt from Phase I that were identified by Trócaire and the five implementing partners:

1. Introduction of SASA! as the model for community mobilisation and behaviour change under Objective 2;
2. Shifting from national level advocacy partner (Aurat Foundation) to provincial level advocacy partners (Sindh: SPO; KP: TBD) under Objective 3; and
3. Changes to the vocational training model.

Trócaire is to be commended for acting upon lessons learnt, but **the resulting changes to the Theory of Change (TOC or Program Logic) need to be documented** to demonstrate how the various activities under each Objective are expected to achieve the long-term outcomes, and add up to more than the sum of the parts. **The lessons learnt and assumptions underpinning these assertions should be clearly articulated**.

Evaluation Findings

## Implementation Progress

### Outcome Area 1: Quality Support Services

*Strategic Objective 1 - To strengthen GBV survivors’ access to quality support services for selected partners in KP and Sindh.*

#### Private Shelters and Darul Amans

“Women receive respect here that they haven’t received in their own homes.” - Supervisor in ABAD Shelter, Hyderabad

The investment supports two privately managed and run women’s shelters – one in Hyderabad, Sindh run by ABAD, and one in Peshawar, KP, run by NET. The location of the shelters is kept secret for the safety of survivors. In both shelters, women requiring medical aid or travelling to court are accompanied by shelter staff and police escort for their safety. Both private and NGO-run shelters are providing critical, quality services to survivors of violence and support should continue. The GBV Program should continue to work to improve access for survivors and to aid sustainability of both shelters.

Both shelters have different issues regarding access, and addressing this should be prioritised by Trócaire and the two implementing partners. The ABAD shelter, for example, has strong links with the police and *Darul Aman* in Hyderabad, and is therefore receiving referrals from Government services. It does however, only cover a small radius and it is recommended that ABAD expand its reach to make the shelter available to women survivors from further afield. The NET shelter currently has fewer inhabitants, but they have come from across the province (for example Chitral, a district in the north of KP and at a distance of almost 400 kilometres (km) from Peshawar) largely via other NGO and/or *pro bono* lawyer referrals. However, its links with government departments and government run shelters are weaker. The profile of NET shelter survivors is also quite different to ABAD shelter survivors. NET provides shelter for very high-0risk cases (women who will most certainly be killed if they are located by family or community members), and also about 50 percent are registered Afghan refugee women who have been referred by the UNHCR under an memorandum of understanding (MoU) signed recently. ABAD survivors mostly have legal cases in progress, whereas NET survivors do not.

“It is very peaceful here and it is a nice comfortable place. I have no fear here of any kind.” – Survivor of violence, ABAD shelter, Hyderabad

**UNHCR referrals are a positive outcome and this development should be portrayed as such. Details of numbers of refugees accessing shelter services should be tracked and details should be included in progress reports.** Trócaire and the AHC should consider leveraging the relationship with UNHCR for institutional support to the NET shelter. Currently the UNHCR provides 8,000 PKR (Pakistani Rupees) per survivor per month but this is insufficient to cover the cost of housing survivors at the shelter and providing them with quality services. According to NET shelter staff, they were close to signing a similar agreement with the International Federation of Red Cross and Red Crescent Societies but this was not approved by the Government of Pakistan – this should be followed up by Trócaire and documented as it is evidence that the shelter has a good reputation and is taking steps to increase referrals.

The NET shelter has strong systems in place and competent staff. The NET project staff member responsible for M&E regularly collects data and visits the shelter every 15 days to assess the situation by using a ‘survivors satisfaction tool’; she also visits when a new survivor is registered. There is a data sheet for admission of each survivor maintained at the shelter in English and the two ‘house mothers’ also maintain records of each survivor in Urdu. The evaluation team viewed the SOPs and found them to be satisfactory.

There have been concerns by Trócaire for some time about NET senior management engagement in the GBV Program, and failure of NET shelter to meet targets. Trócaire has taken action with the NET Board of Trustees, but access to senior management has not improved.[[20]](#footnote-20) Despite these issues, the evaluation found that NET is providing a quality and much-needed service, and on this basis, support should continue at least until the end of the current program (2018). **Trócaire should continue to set clear timeframes and targets to NET regarding the need to better link with government to increase government referrals. NET should be informed that, if these matters are not addressed, funding may be withdrawn.** In addition to the three-member Board of Trustees, NET also has a Members Advisory Committee comprising five people representing different organisations, and Trócaire should attempt to advocate for improved communications through this body. NET did not meet the vocational training targets under Phase 1 of Avicenna support, and as a result is not receiving vocational training support under Phase 2. Given the profile of survivors in the NET shelter, it is understandable that demand for training is low. Survivors should, however, be given the option of attending training free of charge that is provided by PVDP through Avicenna support (see section below on vocational training).

ABAD has strong links with the Hyderabad *Darul Aman* and this is a very positive development. Although the relationship appears to have made a difference to the quality of services provided there (e.g. water dispenser, children’s furniture and toys provided by Australian support), there remains a distinct difference in the quality of services provided by the private and government run shelters in Hyderabad. Of concern, the *Darul Aman* supervisor was unable to provide the evaluation team with a copy of the SOP manual and had little information and/or knowledge of other government services available. In Peshawar, NET has recently undertaken an assessment of the WCCs (which works as a *Darul Aman*), at the request of the Director of the Directorate of Social Welfare and the EVAWG Alliance. This is a positive development, but engagement is only in initial stages and needs to be strengthened. **Priority should continue to be given to strengthening links between the private and government shelters (*Darul Aman* and WCCs) in both provinces.**

#### Helplines

The GBV Program is supporting the establishment and running costs of two helplines, one in Hyderabad and one in Peshawar. **Different models have been established in each province and these models, together with learnings, should be documented before the end of the investment.** **ABAD, ACT and relevant government officials should also be supported financially to visit each other’s helplines to study and learn from the different approaches.** Other helpline models also exist in Pakistan that could be included in these exposure visits.

In Hyderabad, ABAD has used its strong linkages with the Deputy Inspector General (DIG) Sindh Police Hyderabad to establish a helpline within the existing police helpline. The ABAD Madadgar GBV Helpline, which was launched in August 2016, is housed in the Hyderabad police helpline office. Two ABAD female staff (helpline coordinator and helpline counsellor) are employed by the Program to record cases and refer survivors to services such as legal aid or counselling. They are physically present 9am-5pm Monday-Friday, but are able to take the mobile phone home and take calls 24/7. The approach is new, but so far the arrangement appears to be working well, with the strong support of the Deputy Inspector-General (DIG) Hyderabad and the‘15’ police assistant sub inspector in charge of the helpline office. The ABAD helpline receives approximately 12 to 15 calls per week. **When not receiving calls, efforts should be made to work with male operators of the ‘15’ helpline to sensitise them to GBV and the best ways to handle and refer cases. Trócaire should also use its links with the large private cellular telephone company Zong at the national level to see if the company would be prepared to become a corporate sponsor, making the hotline a toll-free number.**

In Peshawar, ACT is working with the Directorate of Social Welfare and Women’s Empowerment KP to set up a helpline to be housed within the Directorate’s premises. This is a 24-hour toll-free helpline to be launched in December 2016. Importantly, this helpline will be a portal for all services provided by the Social Welfare Department, not just for survivors of violence. It will be able to link people with disabilities to the relevant department of Government and inform them of available services. ACT will need to ensure that the focus on GBV survivors is not lost. Due to cultural norms, female helpline operators will only be engaged for the daytime shift; men will operate the helpline for the evening and night shifts. This has significant potential negative implications for the effectiveness of the helpline, as female survivors of violence, will be reluctant to disclose information and seek help from a male operator. If female operators are unable to physically be present at the helpline office due to cultural norms, **Trócaire and ACT should consider pursuing options that allow female operators to work from home, either by providing laptops or mobile phones.** This is critical for the effectiveness of the helpline in assisting women survivors of violence.

Both helplines are closely linked to government services, which is very positive in terms of sustainability. In both cases, an MOU has been signed with the relevant authorities (DIG Police in Hyderabad and the Directorate of Social Welfare in Peshawar), which include a commitment from Government to fund the continuation of the helpline following the conclusion of the investment. **Trócaire and the two partners should strongly advocate for Government funds to be allocated for the helplines in the next budget for 2017-18 to ensure ongoing operation and sustainability of this component post program completion.**

There are various helplines in Pakistan that can refer survivors of violence to services such as legal aid and counselling. NET has its own helpline in the form of a mobile number, which is passed between NET staff via a roster system. NET also has linkages with the Ministry of Human Rights ‘Helpline for Legal Advice on Human Rights Violations’ which is a 24 hour toll free helpline. **Care is needed to ensure efforts are not being duplicated, and there is appropriate coordination between the helpline providers. Trócaire can facilitate this process by bringing the different stakeholders together.**

#### Legal Aid and Medico-Legal Support

Both NET and ABAD have strong links with lawyers and are able to provide survivors of violence with free legal aid. In Hyderabad, two lawyers work full-time at the ABAD Legal Aid Centre, and ABAD is able to draw on *pro-bono* lawyers from the District Bar Council when required. ABAD also has good links with hospitals and medical providers, although the evaluation team did not meet with any medical providers. In Peshawar, NET relocated its legal aid office to the District Courts in March 2016, a location which is more accessible by public transport. This Drop-In Centre has made it easier for NET to register cases, have access to the *pro bono* lawyers (NET has access to 45 *pro bono* lawyers in 12 districts of KP) and it provides increased access for clients seeking legal advice and referrals. However, it is a very male-dominated environment and very few women were seen in the District Courts premises. **It will be important to track numbers of women accessing legal aid in the Drop In Centre, to assess the efficacy of this move**. In November 2016, NET signed an MOU with the Peshawar District Bar Council, which provides *pro bono* lawyers and space for training and events that can (and should) be accessed by both Trócaire and NET. The evaluation team met with 12 male *pro bono* lawyers who were clearly committed to assisting survivors of violence, although they did mention they were often significantly out of pocket and increased assistance in covering court costs would be appreciated.

Under the Program, Trócaire undertook an Assessment of medico-legal services from a Gender Perspective, in collaboration with the Ministry of Human Rights and the NCSW. The report was published in 2015 and launched in collaboration with the Women’s Parliamentary Caucus. AF developed linkages with health regulatory authorities and trained medico-legal officers in district hospitals, as well as Provincial Health Authorities. NET has undertaken research on medico-legal policy and practices in KP, but it is not clear how this research is being used by NET and other program partners. **It would useful to report on the outcomes of this training and research in an upcoming progress report, given the evaluation team was unable to meet with any medico-legal officers.**

#### Police and Judiciary

In 2014, AF conducted a study on the implementation of legislation under the *Anti-Women Practices Act 2010.* One major gap identified was poor knowledge and capacity of police and judiciary. To address this, specific training was developed to build the capacity of police and judiciary at district and provincial levels by ABAD, ACT and PVDP, and MoUs with the National Judicial Academy and National Police Bureau (NPB) were signed to deliver training at the national level. Under AF’s MOU with the NPB’s Gender Crime Section, a compilation of data on GBV cases over the last five years was undertaken which has been widely utilised in the absence of survey data.

AF also developed a *Criminal Justice System Handbook* in 2015, a comprehensive guide complete with activities, which it used in trainings under the GBV Program for both police and lawyers trainings. This resource has been translated into Urdu and disseminated to police training academies, federal and provincial judicial academies and medico-legal officers in KP, Sindh and Islamabad. AF’s training targeted senior police and focussed on the implementation of laws. AF undertook nine capacity-building trainings in KP, Sindh and Islamabad for police, judiciary, legal-medico staff. However, it is unclear whether the resource continues to be actively used.

A police training manual was also developed by SEHER for police at the local (*thana*) level, which focussed on changing police behaviour to manage survivors’ cases more sensitively. Rozan has recently been contracted to revise this police training manual, translate it into Urdu, and undertake training of 30 additional police in each province to test the manual before finalising it. Both SEHER and Rozan have worked with partners to build their capacity in training police. Various police trainings have been provided by the NGO partners at the district level. The Australian Federal Police (AFP) is also linking with the Program to provide leadership training to female police officers. **It is important that training continue to be provided by partners to police at the district level, as these are the people with the least access to training opportunities, but who are often the first responders to GBV cases.**

Building capacity and changing attitudes and behaviour of police, judiciary and medico-legal officers is a long-term objective, so expectations need to be realistic around outcomes in this area over the life of the investment. That said, relevant data needs to be collected (beyond numbers of people trained) to test the program logic and methods in place. There is very little evidence available of progress towards objectives of this component. Community members interviewed remain fearful and distrustful of the police in both KP and Sindh. **Including development of Individual Action Plans (IAPs) in Police/Judiciary trainings would assist trainees to translate learnings into concrete actions, and would also allow for follow up 6 months or one year later, which would provide evidence of whether training is actually leading to increased capacity and changed behaviour. Ideally, the IAPs should also include police and judiciary/lawyers who have received training, to see if the plans are being implemented.** Without this process, it is difficult to assess the effectiveness of the training and contribution towards long-term outcomes. **Progress towards outcomes (beyond numbers trained) and challenges of this component should be addressed in an upcoming progress report.**

#### Vocational Training and Reintegration of Survivors

The vocational training component was part of the design of the Program to give GBV survivors skills that would allow them to be financially independent and re-integrate into society. Avicenna was contracted to build the capacity of partners to deliver vocational training and to improve the quality of training provided. Providing skills to assist women to transition out of the shelters is a sound idea, but it is a big ask to expect vocational training and ‘handholding’ to help survivors fully re-integrate into society. Accordingly, this component has been problematic as it involved a big jump in logic from training to re-integration. For example, survivors living in the shelters were expected to undertake the vocational training, and this was the basis for determining targets. However, many women were more focussed on their court cases and personal circumstances and did not attend the training. In the NET shelter, although it was expected that training opportunities would provide a welcome distraction, in reality these women are traumatised and are focused on their survival. The result was some pressure on the shelter staff and survivors by Avicenna to meet agreed targets.

Of the few women who were ‘reintegrated’ (i.e. living off their own income having left the shelter), those met by the evaluation team were making a living from skills other than those taught through the vocational training program. The evidence available suggests that these women are entrepreneurial to begin with, and the vocational training, handholding, and providing linkages to the market provided by the GBV Program made little or no difference to their re-integration. It should be noted that this is not a result of underperformance by Avicenna or shelter staff, but rather a problem with the theory of change (TOC). In the remaining two years, the Program should not expect to see strong evidence of survivors using skills obtained from vocational training to become economically independent. That said, such opportunities could be life-changing for a few women, and **therefore shelter survivors should continue to have access to the training that is being provided by partners as part of the community mobilisation work (Objective 2).** This will be discussed more in the next section. **Consideration should be given to moving the vocational training component under Objective 2 in the new iteration of the TOC. Shelters should continue their focus on literacy and life skills.**

### Outcome Area 2: Prevention and Community Mobilisation

*Strategic Objective 2: To promote reduced tolerance to GBV and action to address violence against women, among women, men and youth*

#### Community Mobilisation Efforts

“I have learnt now how to raise my voice on issues and can raise awareness on violence against women”- Female member of community group, Jamshoro

The three prevention partners (SDS, ACT and PVDP) all have slightly different community mobilisation for social norm change models, that are worthy of comparison to extract lessons learnt before the end of the investment. There is strong evidence of attitude and behavioural change among target groups in all communities visited (men, women and girls in SDS and ACT, men in PVDP). This component of the Program is progressing very well towards objectives. The evaluation team did not, however, meet with any boys except for one young community activist in SDS who was a student. All partners have provided figures for number of boys involved in community outreach, but the evaluation team is unable to assess the impact of these efforts. **Given the importance of engaging with boys to prevent violence against women (VAW), this is an area for follow up and this evaluation recommends specific focus on boys in Trócaire’s next progress report.**

SDS implements the GBV Program in Jamshoro district in Sindh. It established 10 Learning Resource Centres (LRC) at the village level, to provide a space for community mobilisation efforts where women, men, boys and girls groups meet. The LRCs were also used for the delivery of vocational training. With the introduction of SASA!,[[21]](#footnote-21) one of the LRCs has been turned into the Gender Resource Centre (GRC), a ‘hub’ for SDS’s GBV activities and vocational training courses. SASA! mobilisation is still occurring at the nine remaining LRCs, but all vocational training is now taking place at the GRC. (SASA! is discussed in more detail below).

The evaluation team met with a women’s/girls group at the LRC in village Imam Buksh Shahano, Taluka Kotri, district Jamshoro. The LRC is a room in the house of a SDS Community Development Officer (female) and Community Activist (male). SDS, through Trócaire, has been supporting GBV prevention work in this community since 2012, and there is significant evidence of empowerment among the women and girls interviewed.

“Now we know about violence and we can relate to it – we too have been victims. Change takes time, but what we can’t do, the next generation [of girls] will do.” - Member of women’s group, Jamshoro

Examples were provided where members of the group are now sending their girls to school, and have acted on GBV cases. The women and girls were aware of their rights and provided examples of how they were raising GBV in discussions within their families and communities. **The risks associated with women increasingly speaking out should continue to be closely monitored and a specific conflict sensitivity indicator in the M&E framework is recommended to track any unintended consequences of the intervention.** The key mitigation strategy for a potential increase in violence is to involve men (community and religious leaders) in the discussions – this approach is endorsed by the evaluation team.

“I am the first girl to go beyond class 5. There was initially a lot of resistance from the community, but now I can go outside with my parents’ trust.” - Member of girls group, Jamshoro, age 19

The team also met with male members of the SDS GBV groups, who likewise provided examples of where they had intervened to stop GBV. For example, one man had intervened in a slavery case, reporting it to police; the woman is now at the local *Darul Aman*. A male religious leader in Swat recalled how he has intervened to stop an underage marriage, and spoken about child marriage and inheritance rights at the Friday prayers.

“I’m taking small actions. Initially I was also in denial about GBV but now I preach against anti-women practices in the Jirga” – Nazim (Union Council Head), Swat

ACT, which implements the GBV Program in Mardan, Nowshera and Swabi districts of KP, has formed Willful Initiative for Social Empowerment (WISE) groups of women, men, girls and boys. The team visited a women’s WISE group (members of a girls WISE group were also present) in Rehmanabad village near Nowshera and, while the community was clearly suspicious of NGOs to begin with, ACT had earned their trust. The women were very outspoken and were clearly aware of GBV and their rights. One girl provided an example of how she now walked alone to school, and if she was harassed, she felt confident in warning the harasser that it was against the law. **As above, risks associated with attitude and behaviour change need to be closely monitored and mitigated.** The meeting with the evaluation team was nearly called off as the police had ‘barged in’ to undertake a ‘sweep’ of the compound earlier in the day. The men of the village had wanted to call it off but the women convinced them to let it go ahead. The older women who hosted the meeting in her house said that this should be viewed as a major achievement of ACT’s work in the area.

PVDP operates in Swat district, KP. While the evaluation team was unable to travel to Swat due to security and time constraints, they met with staff and male community members in Islamabad. Women did not travel to meet with the evaluation team as their mobility is very restricted. The male community members, of varying ages and backgrounds, all spoke confidently about women’s rights and GBV. They were all members of *Bar Aks* (a Tehsil level chapter of the EVAWG Alliance) and spoke of PVDP’s strong presence in their communities. These groups now all hold events and meetings related to the 16 Days of Activism, which was previously unheard of. The male community members expressed that PVDP was implementing a project based on the community’s needs and in accordance with Islam, and that it was very important for girls to know their rights and get their due inheritance.

PVDP has opened WWCs at the village level, which act as women friendly spaces for community mobilisation work. Like SDS, PVDP convenes separate groups for women, men, girls and boys, and provides vocational training to women through the GBV Program.

Furthermore, through the Program ACT has supported students in four public sector universities in KP to undertake action research on GBV – **this is an area for follow up as this evaluation was unable to assess the quality or impact of these activities**.

#### SASA! Behaviour Change Methodology

“Everyone has some form of power. How are you using yours?” - SASA! Poster in Jamshoro LRC

Based largely on concerns about sustainability of the community mobilisation work and a desire to move away from a cycle of continuous awareness raising, Trócaire decided to introduce a new, evidence-based approach to social norm change, which began implementation in mid-2016. Trócaire has adapted the materials to the Pakistan context and translated them into Urdu. It has also hired a SASA! Officer and devoted significant resources to this new approach. Raising Voices, which originally developed the SASA! approach, is playing a mentoring role and is interested to learn about SASA! adaptation and implementation in Pakistan. The four stages of SASA! will not be completed by the end of the GBV Program, but Trócaire expects to be able to fund it through to completion if Australian funding does not continue.

Implementation of the SASA! approach only began in June 2016, so it is not yet possible to make an assessment of its effectiveness. However, the three NGO partners involved in the prevention component were highly enthusiastic about the new approach, as they believe it will be a more effective and sustainable form of community mobilisation to prevent GBV. Partners were particularly positive about the structured approach, and the identification and training of male and female community members as Community Activists (CAs). SDS intends to mainstream SASA! modules into its Oxfam-funded project in 3 districts of Sindh, which is evidence of their commitment to the approach. Retaining CAs and keeping up the momentum will be a challenge; consideration should be given to providing female CAs with incentives such as vocational training and/or training of trainer’s opportunities (see recommendation below).

#### Vocational Training

Under the Program, training has been increasingly included as an incentive to bring women in to the community mobilisation work. The evaluation team heard repeatedly that a tangible incentive (such as vocational training) was required for women to justify the time spent away from other household tasks to attend meetings organised by the Program. This is a valid use of funds under the GBV Program, as economic empowerment is a critical part of a gender transformative approach that the Program is aiming to achieve. **ACT should be provided with the vocational training component if requested. However, care needs to be taken to ensure partners do not lose the focus on GBV and start to turn the Program more into a livelihoods activity.** For example, men have also requested training opportunities under the Program, but this is not appropriate under this investment. SDS risks losing some of its focus on GBV survivors by moving the vocational training to the GRC and introducing a fee structure, if this means training is no longer physically accessible by women with mobility restrictions and is now unaffordable for poorer women who arguably need it most. Moving training to a central location also means it can no longer be used as a concrete incentive to involve women in community mobilisation work. The fee structure was introduced as part of SDS’s sustainability strategy, and these efforts are commendable, but there needs to be a middle ground whereby the training remains physically and financially accessible to survivors of violence.[[22]](#footnote-22) **SDS/Trócaire should ensure survivors of violence have access to the training, free of charge, if requested.**

The experience of the GBV Program provides useful lessons for Australia’s future support to the EVAW sector in Pakistan, and to the international community, which is also grappling with these issues. To what extent should economic empowerment be part of EVAW programming? **The GBV Program has several partners (SDS, PVDP, NET, ABAD, ACT) implementing slightly different models, and before the end of the investment these partners should be brought together to share and document learnings. Close monitoring of this component is also required, to ensure the focus remains on GBV survivors.**

A variety of training manuals have been developed by Avicenna, and emphasis should now be placed on training of trainers within the partner NGOs so that they can independently roll out the training on a needs basis. **There is very little evidence that handholding support is effective; this component should be phased out. Trócaire should ensure that the five NGO partners have access to all training manuals and materials. In the past, NGO staff from SDS have travelled to PVDP in Swat for train the trainer (ToT) workshops - Trócaire should capitalise on such visits to provide staff from the partner NGOs an opportunity to meet each other and see each other’s work.**

The Phase 2 contract with Avicenna includes ambitious targets for the number of *Darul Aman* survivors to be trained. The Avicenna Coordinator in Sindh has expressed reservations about meeting these targets in the short timeframe (by March 2017). Given the findings above**, consideration should be given under the current contract with Avicenna to opening training opportunities up to SASA! Community activists (CAs) working with SDS, PVDP and ACT, in particular female CAs as they could then train other women in their communities.**

### Outcome Area 3: Advocacy

*Strategic Objective 3 - To support advocacy efforts with key stakeholders to enable passage and implementation of key legislation relating to GBV.*

The advocacy component is struggling to achieve its objective. In general, advocacy work requires sustained effort over a long period, and outcomes are often unpredictable. Given this, the objective as stated is both unrealistic and unachievable in the timeframe. Trócaire has adjusted targets to account for this, but fundamentally this objective was too ambitious and reveals a significant gap in the Program logic and design of the Program. Initially, Trócaire engaged AF to undertake advocacy work at the national level. The Program also engaged with the NCSW, which was active until end 2015 and has recently been reactivated in October 2016. However, the Program has been unable to see significant progress under this objective.

In early 2016, based on lessons learnt from Phase One, Trócaire decided to adjust its strategy to focus on provincial level advocacy. Trócaire ended the partnership with AF, and began a process to engage provincial level advocacy partners. This process has taken a significant period of time, meaning very little progress has been made on this objective in 2016. The national NGO SPO has been to undertake the advocacy work in Sindh, and this partnership agreement will be signed by the end of 2016. In KP, Trócaire was hopeful of securing a partnership with the PCSW, but this does not look likely to eventuate (there is no current Chair appointed, and there are technical challenges such as lack of separate bank account through which to channel funds). Trócaire is currently undertaking a mapping exercise of other potential NGO advocacy partners. **Trócaire** **should move to appoint a KP advocacy partner/s as soon as possible.**

A number of studies have been conducted under the program, which have directly informed advocacy strategies. For example, the research on fatherhood by AMAL was used by partners to design specific interventions on engaging men in GBV prevention, and to develop public service messages in various media on engagement of fathers to address GBV.

In future, the GBV Program should have a variety of advocacy partners and strategies. In hindsight the partnership with AF should perhaps have continued while Trócaire identified alternative partner/s so as not to lose the momentum in this area. **For advocacy work, it is generally recommended to support a range of actors over the longer-term to form networks and coalitions for change and to have the capacity to act quickly when a window of opportunity arises.**

#### Media Advocacy

Trócaire engaged Shazia Abbasi Consulting (SAC) to undertake media advocacy work in Phase 1 and a new agreement has been signed with SAC from November 2016 for 18 months. Phase I involved launching a comprehensive campaign against GBV at the national level entitled *Pur Azm* (*our commitment*). During Phase One, SAC worked closely with the ABAD shelter staff and survivors in Hyderabad after Trócaire had made the necessary introductions. According to SAC, it was a successful campaign run with substantial outreach and value for money, however, while outreach figures are available, it is not possible to assess the full impact of the *Pur Azm* campaign in this evaluation.

SAC learnt a number of lessons from Phase One, including that the campaign should be closer to the partners and beneficiaries, and these have fed into the workplan of Phase 2. Accordingly, Phase Two will focus at the district level and involve closer collaboration with the NGO implementing partners - an example of this is how SAC is currently working with ACT in Peshawar on the launch of the helpline. This shift in approach is supported by the evaluation findings.

At the district level, all five NGO partners are actively engaged in media advocacy work; they have developed district level advocacy networks and are undertaking comprehensive campaigns using various forms of media (SMS, social media, radio, cable tickers, pamphlets etc.), but the evaluation team was unable to verify the full outreach or impact of these campaigns. **Further analysis of the impact of the *Pur Azm* campaign and advocacy work of the five implementing partners is recommended prior to the end of the investment.** **Trócaire should ensure there is a clear link and coordination between SAC, the provincial advocacy partners and the five local implementing partners’ media work, for maximum impact.**

#### Parliamentarians and Local Body Representatives

AF worked to build capacity of parliamentarians at the national level in Phase 1. For example, AF worked with parliamentarians on the anti-rape bill and anti-honour killing bill. Trócaire will shortly be signing an agreement with the Women’s Parliamentary Caucus (WPC) to undertake various advocacy events. **This partnership has significant potential, but some of the proposed events are more relevant than others and** **close collaboration is required to ensure GBV remains front and centre to achieve advocacy outcomes. Trócaire should consider conducting awareness raising and capacity building activities with parliamentarians on GBV. Greater focus on provincial parliamentarians and local government representatives is recommended as part of the advocacy strategy, as well as greater linkages with the Provincial Women’s Parliamentary Caucuses in Sindh and KP.** ACT and PVDP already work with local government representatives at the district, Tehsil and Union Council level in KP.

### Outcome Area 4: Partner Capacity

*Strategic Objective 4 - To improve program partners’ capacity to support sustainable change in targeted communities.*

#### Assessment of Performance and Capacity

Priorities for capacity building are identified and agreed following discussions during partner review and planning meetings, meetings with NGO senior management, and Trócaire monitoring visits. IAPs are agreed with each partner. Follow up support to ensure plans are being implemented is provided by Trócaire and/or the training provider.

Significant progress has been made in developing the capacity of the five NGO implementing partners and training has been well received. All partners have strong ownership of the GBV agenda and are committed partners. Overall, they have good capacity and strong systems. There is ample evidence that Trócaire has been responsive to partner needs and requests for capacity building. For example, Trócaire has facilitated training on risk management, monitoring and evaluation, sustainability and Disability-Inclusive Development (DID). The disability-Inclusiveness training was particularly well received, with all partners now implementing disability action plans. All partners are looking forward to the security training scheduled for December 2016. All partners requested increased opportunities to meet with other program partners at learning events – see recommendation below.

**ABAD** was founded by a husband-wife team of lawyers in 2001 and was formally registered in 2005. ABAD has strong systems in place, has strong links with the police and *Darul Aman* in Hyderabad and provides high quality services for survivors, including vocational training. The NGO is not implementing any other projects so its reliance on the GBV Program is self-evident, raising concerns of the sustainability of shelter services post 2018. However, the NGO is working hard to strengthen links with district government for effectiveness and sustainability purposes. ABAD has been successful in negotiating government funding of the Hyderabad helpline post 2018.

**SDS** is a large Sindh NGO working in 13 districts with 38 permanent staff. It was formed in 1991 and formally registered in 1994. It was running a women’s economic empowerment program prior to its involvement in the GBV Program. The NGO appears to have lost some focus on GBV in the current phase and risks being perceived as a women’s economic empowerment program as opposed to an EVAW program – see discussion above on vocational training and re-integration of survivors. SDS has requested financial assistance in strengthening security measures, including surveillance cameras, giving examples of street demonstrations in Jamshoro when they had to call volunteers to guard the office. The upcoming security training that Trócaire is providing in December 2016 is timely and well targeted. SDS also expressed a need for assistance revising its internal policies.

**NET** ran the *Mera Ghar* shelter in Peshawar and also undertook advocacy and prevention activities under the GBV Program funded by Irish Aid. In 2014, Trócaire decided to engage ACT for the prevention and advocacy components, leaving NET to focus purely on the shelter. There have been longstanding issues with NET senior management – in particular securing engagement from the founder/CEO who is consistently unavailable to meet with Trócaire. Despite the senior management problems there are strong systems in place in the shelter with competent and professional staff. NET staff have requested assistance from the Program in linking with other potential donors for the sustainability of the shelter beyond 2018.

NET is building a purpose-built shelter on the outskirts of Peshawar to ensure they have a permanent shelter and to avoid rental costs. NET has purchased land for this building with its own funds and construction is underway through donations and philanthropy. The new shelter facility demonstrates NET’s long-term commitment to GBV survivors.

**ACT** is a new NGO, which was formally registered in March 2012. It is currently working in seven districts in KP and five districts in the Federally Administered Tribal Agencies (FATA). ACT became a GBV Program partner in 2014, when it took over prevention and advocacy activities from NET in Mardan, Nowshera and Swabi districts. ACT runs a very effective operation and keen to receive support for vocational training.

**PVDP** is a well-established community development NGO operating in KP and implementing the GBV Program in Swat district. Although the evaluation team did not visit Swat, they met with seven members of the PVDP staff in Islamabad, and were impressed by their capacity and commitment. The NGO has strong systems in place. PVDP expressed a need for SASA! to be translated into Pushto.

### Cross-Cutting Issues

#### Gender Equality and Women’s Empowerment

The GBV Program effectively promotes gender equality and women’s empowerment throughout the various components. The Program takes a gender transformative approach, particularly in the community mobilisation component with SASA!’s focus on power and agency. While the primary focus of the Program is on EVAW, the Program also promotes women’s leadership and women’s economic empowerment (the other two priority areas under DFAT’s Gender Strategy), particularly through the community mobilisation and livelihoods components. Trócaire and implementing partners are conscious of promoting gender equality internally within their organisations (for example, Trócaire has a crèche inside the office). All partner organisations have a good balance of male and female staff, including representation in leadership positions. **It is recommended that the MEL framework include specific indicators to track promotion of gender equality and women’s empowerment internally within the Program partner organisations**, to ensure they have a strong ‘demonstration effect’ and are ‘practising what they preach’ with regards to gender equality.

#### Disability Inclusion

Significant work is happening at the local level to mainstream disability inclusiveness within the Program, however this is quite recent. All five partners have disability action plans which they are implementing following training that was provided by NOWPDP. This training was very well received, with several partner staff saying it ‘opened their eyes’ to the issues faced by people with disabilities. In KP, the floods, earthquake and conflict have resulted in a high number of people with disability. For example, ACT office has recently installed a ramp and marked International Day of Persons with Disabilities, NET adjusted the angle of its ramp in plans for the new shelter building, both NET and ABAD shelters have accessible rooms on the ground floor and wheelchairs for survivors with physical disabilities, and partners have invited people with disability as guest speakers at events. Trócaire is looking to ensure they have people with disability on staff.

At the national level, AF undertook joint advocacy on rights of people with disability with Government at Islamabad Capital Territory (ICT) level and attempted to draft legislation on disability with the Special Education Directorate in ICT. Through the National Forum for Disability AF also connected disabled peoples organisations. AF has also written case studies on people with disability.

**Given the clear links between violence and disability (violence causes disability, and people with disability are more likely to be victims of violence), the Program should ensure disability considerations are integrated throughout the Program, and not just as an add-on. Support from DFAT Canberra DID Section is recommended to assist with this. Ongoing messaging is required from Trócaire and AHC to ensure DID remains a focus. Partnerships with disabled people’s organisations are highly recommended to ensure people with disability are informing actions taken, and to expand understanding of disability inclusiveness beyond physical access considerations. Disability-disaggregated data should be consistently collected. The disability indicator in the Results Framework may be more meaningful if changed to ‘partners can cite two to three actions taken to mainstream disability’, similar to the HIV mainstreaming indicator.**

Governance and Management Arrangements

### Financial Management, Efficiency and Value for Money

Overall Trócaire has efficient and stringent financial systems with several checks and balances in place. There is a quarterly financial reporting system in place for partners, with the Trócaire Finance Officer making quarterly monitoring visits to each of the five partners. The monitoring visits include capacity building of the partners’ financial staff where required. Trócaire’s accounts are audited annually and the GBV Program accounts are separately audited annually.

Trócaire uses tender processes to identify contractors, and, although this adds to the management burden, it is a good indicator of value for money. Policies are followed closely for all Trócaire and partners’ procurements and the partners’ procurement policies are aligned with Trócaire’s, ensuring the entire process is transparent. When budgets are prepared they are reviewed to see how realistic they are to ensure value for money, if the costs are justifiable and if there is an alternative way to ensure value for money. The management fee is good value for money at seven percent.

### Risk Management

Overall, risks are managed well – capacity and processes for managing risk are adequate and appropriate. Partners undertake an annual process of risk assessment and mitigation, which feeds into the Trócaire program-level risk matrix. **Trócaire should not hesitate in involving DFAT in discussions around risk, and prior to taking major decisions that affect the Program.** For example, Trócaire could have been more forthcoming in raising issues with DFAT Program Manager about changes in strategy, partners, and issues with NET management.

Security is a real concern and an ongoing focus on security is required. The upcoming security training is a good investment. Partners manage security risks well and security measures at both shelters seem appropriate. Positive consideration should continue to be given to reasonable requests from partners to upgrade security measures in both shelters and NGO offices (e.g. security cameras in SDS office).

The application of the Do No Harm Principle in relation to survivors, partner staff, especially staff working at shelters, and other beneficiaries needs to be kept at the forefront the GBV Program at all times. **Trócaire and NGO staff should ensure that consent is actively sought from survivors in shelters ahead of any future monitoring and/or field visits. Convoy size and police escorts should be kept to a minimum. Informed consent for photographs should also be sought by all staff (including *Darul Aman* staff). Child protection and safeguard policies are in place, but follow-up training in these areas is recommended for GBV Program partners and stakeholders.**

### Partnerships

Many of the ‘partners’ in the Program are short-term contractors rather than long-term partners. There are currently five partners – the five Pakistani NGOs implementing the Program at the provincial and district level - and overall these partnerships are strong and effective. Trócaire intends to add two more partners to this list: SPO as the new Sindh provincial advocacy partner; and another NGO to be determined later, as the KP provincial advocacy partner. Other partnerships are better described as short-term consultancies as agreements are based on short-term technical inputs or work plans. For example, the partnership with AF was terminated in May 2016 after two years, due to lack of focus on provincial level advocacy and not meeting targets. While this approach of short-term contracts allows for flexibility, gap-filling and strong performance-based management, it risks affecting effectiveness and sustainability over the longer term by affecting capacity building of local partners. Rozan, for example, was originally a partner but withdrew from the Program in 2014; Rozan has now been contracted for 3 months (November 2016 to January 2017) to update the police training manual originally developed by SEHER, test it in police trainings in both provinces, and translate it into Urdu. **As a general rule, for EVAW programs a longer-term partnership approach with local NGOs is recommended over short-term contracts, provided the necessary checks and balances are in place to manage risks associated with this approach.**

There has been significant turnover of partners since the beginning of the investment. This has impacted on effectiveness and efficiency and has created a significant additional management burden on both Trócaire and partners/contractors. The one-year project cycle, while understandable from a risk management perspective, creates an additional management burden. **Where possible such requirements should be minimised in keeping with a partnership approach.**

### Linkages between partners and stakeholders

A significant part of Trócaire’s value-add is to link partners and stakeholders to facilitate cross-learning and foster networks and coalitions of actors working in the GBV space. While program staff do play this role to some extent, more can be done in this area. **Additional efforts should be made by Trócaire to link the various partners/stakeholders with the five implementing partners, to increase impact and decrease duplication. The Pakistan EVAWG Alliance potentially has a greater coordination role to play here. There is a need for more opportunities for the five implementing partners to physically come together to share models, approaches, experiences, challenges, and lessons.** For example, ACT and ABAD should physically visit each other’s helpline set up to explore advantages and disadvantages of the different models. At present, partners come together annually in Islamabad for the planning and review workshop, but inadequate time is spent on sharing and discussing approaches, strategies and lessons. **Before the end of the investment, a two to three day specific lessons learnt workshop should be held to ensure lessons are shared and documented. Specific time should be set aside for SDS, PVDP and ACT to explore their experiences and lessons in implementing the SASA! approach, and for SDS and PVDP to reflect on the role of vocational training as a tangible ‘hook’. ABAD should share its experience and the process it adopted of linking with the *Darul Aman* in Hyderabad with NET and PVDP. Partners and technical consultants should jointly strategise around media/advocacy approaches; this will become increasingly important as the two new advocacy partners take on their respective provincial roles in 2017. Additional opportunities to harmonise with other key stakeholders and donor investments in the EVAW sector should be actively explored. As noted above, a specific indicator to track Trócaire’s performance in this area would be valuable.**

### Role of the Australian High Commission

The AHC is very active in promoting gender equality and women’s empowerment in Pakistan, led by a proactive High Commissioner and supported by a dedicated team. The AHC (particularly DFAT and Australian Federal Police to some extent) is already playing an important linking, leveraging and convening role in the EVAW sector, but these efforts could be strengthened**. In particular, DFAT should ensure the Program Manager (Gender) has adequate time to devote to the GBV Program, including connecting with the AFP. There should be increased information sharing between Trócaire and the AHC and it is recommended that a quarterly minuted meeting be held to discuss outstanding program related issues and advocacy opportunities. Trócaire should strategically engage AHC to utilise its convening power and leverage when required, particularly for fostering linkages with relevant Government Ministries, Departments and Commissions. If the Australian Government is to continue support for this GBV program beyond program completion, planning should commence by mid-2017 to ensure there is no gap between the current phase and next phase, as this would have significant impact on effectiveness and efficiency.**

## Monitoring, Evaluation and Learning (MEL)

### Theory of Change

As outlined above, there are weaknesses in the original TOC (in particular on advocacy, and reintegration of survivors), but Trócaire has demonstrated that it is actively using lessons learnt to inform programming decisions and address some of these weaknesses. However, with 18 months remaining, there are risks to effectiveness and efficiency of further changes to partners or strategies. **All changes in strategy or partners, the basis for these changes and the underlying assumptions should be clearly documented.**

### Monitoring and Evaluation Strategy and Results Framework

Overall, the M&E system is strong, with clearly articulated short-term and long- term outcomes, as well as clear strategies for collecting and verifying data. The M&E Strategy enables Trócaire to provide DFAT with timely quantitative progress data against indicators under the four outcome areas. The weakness of the current system is its ability to report at the outcome level and demonstrate that the individual components are adding up to ‘more than the sum of the parts’. **One way to improve this is to include a substantial comment about progress towards outcomes under each Outcome area in progress reports, in addition to reporting against individual targets or indicators.**

Several MEL indicators and targets have recently been revised (June 2016) and this is appropriate active management of the Results Framework.In some cases, current indicators are unable to provide a good indication of progress towards an outcome area (see TOC section above). For example, the number of police officers trained (indicator 1.5.1) does not necessarily lead to improved capacity to sensitively handle GBV cases (Short-term Outcome 1.5) – progress on implementation of action plans 6 months after the training would be a reasonable additional indicator and would assist in making an assessment of outcomes in this area.

**Furthermore, Trócaire should take** **care to ensure that achievement of targets and numbers are not over-emphasised in agreements with partners at the expense of qualitative evidence of longer-term progress. It is recommended that the Results Framework (and Knowledge, Attitudes and Practices Survey) include tracking of unintended consequences (both positive and negative), including conflict sensitivity indicators to ensure the investment is not exacerbating conflict/violence against women in target communities. Corporate indicators to track and give value to areas of Trócaire management (e.g. gender equality indicators, linking and leveraging indicators) are also recommended.**

## Sustainability

### Partner Capacity and Sustainability Plans

Sustainability of the Program is clearly a key concern, but Trócaire and partners are actively addressing this by addressing capacity gaps and incorporating sustainability strategies into annual work plans. For example, both ABAD and ACT have MoUs with government to ensure helpline funding is included in government budgets post-2018. ABAD is increasing efforts to work with the *Darul Aman* in Hyderabad, and PVDP continues efforts to engage with the Swat *Darul Aman.* It is crucial that NET improve its linkages with government.

It is hoped that the SASA! approach now being implemented by ACT, SDS and PVDP will be a more effective strategy to achieve sustained change within communities. Social mobilization requires intensive efforts to build trust and ownership that could eventually lead to behavioral and attitudinal change and it is a positive sign that under SASA! male and female CAs are embedded within their communities and will have the capacity to continue to work for social change after the investment ends.

### Private Sector / Corporate Social Responsibility (CSR) / Philanthropy

**Significant opportunities exist to partner with philanthropists and the private sector through CSR and corporate sponsorship to leverage greater impact and assist with sustainability.** For example, a male community activist in Jamshoro (SDS) lobbied Novartis Pharma (Pakistan) Limited, a global healthcare company, to provide 40 wheelchairs to community members with disabilities. As discussed above, opportunities to partner with Zong to cover helpline costs in Hyderabad should be explored by Trócaire.

### Linkages with Government, especially provincial Government

There are some very strong linkages with government at different levels, but there are also significant gaps at federal, provincial and district levels. At the federal level, NET has linkages with provincial presence of Ministry of Human Rights, Trócaire has linkages with the NCSW and Women’s Parliamentary Caucus (WPC), but there are currently no linkages with the NCHR.

At the provincial level, ACT has strong linkages with Social Welfare KP. In Sindh, linkages with the provincial government are weak – all linkages are at the district level. **Program partners should consider linking with the Sindh Human Rights Commission, which is active in the area of GBV.** There are currently no linkages with Provincial Women’s Parliamentary Caucuses in Sindh or KP.

**Greater effort is required overall to build linkages with government and for greater coordination and leverage.** For example, PVDP is having some trouble engaging with the Social Welfare Department at the district level in Swat to work with the *Darul Aman*, and **Trócaire could be more proactive in using ACT’s relationship with the Social Welfare Department in KP to leverage outcomes at the district level**. **At the provincial level,** **there is a need for more constructive and strategic engagement, proactive networking and strengthened collaboration with the Social Welfare and Women Development Departments by Trócaire and potentially the AHC**.

**Government linkages are often based on individuals and there is significant staff turnover. Trócaire needs to proactively cultivate other relationships for ‘pipeline planning’ and sustainability purposes. Furthermore, Trócaire needs to continue to work at the policy level and identify the actors and issues, which are the barriers to approval of pro-women legislation, particularly in KP.** The evaluation teams recognises that this work is challenging and resource intensive, and is occurring within an increasingly difficult environment for NGOs. **Consideration should be given to increasing Trocaire’s resources in this area in a potential next phase of the program.**

# Key Lessons Learnt

Key learnings from the Pakistan EVAW program include:

* A holistic, integrated approach, working in long-term partnership with NGOs, government and private sector is an effective model for EVAW programs.
* Working with men and boys, religious and community leaders is critical to achieve long-term change to prevent violence against women and girls.
* Ongoing effort to build and maintain relationships and partnerships with Government at different levels is critical for effectiveness and sustainability of EVAW programs.
* Care should be taken to manage expectations around the extent to which an EVAW program can assist with economic/livelihood opportunities to help reintegrate women survivors of violence back into their communities and/or society.
* Advocacy work is a long-term endeavour that requires persistence and flexibility, and outcomes are often unpredictable and non-linear. Overall, realistic expectations are required, along with a long-term partnership approach that builds capacity, networks and ability to respond quickly to windows of opportunity that may arise.
* Big dividends can potentially be gained by the implementing partner (Trócaire) actively playing a linking and leveraging role. There are opportunities to strategically engage the AHC to support efforts in this regard.

# Summary of Key Recommendations

## For Trócaire and Implementing Partners

* Develop a revised TOC that clearly articulates how the changes in Phase Two are expected to lead to program outcomes, including assumptions and lessons learnt from Phase 1.
* Revise the M&E Strategy to ensure the Results Framework (and Knowledge, Attitudes and Practices Survey) tracks unintended consequences (both positive and negative); including conflict sensitivity indicators to ensure the investment is not exacerbating conflict/violence against women in target communities. Include corporate indicators for Trocaire and partners in areas such as gender equality and linking/leveraging (e.g. include specific indicators to track promotion of gender equality and women’s empowerment internally within the organisations). Include greater emphasis on outcome reporting in progress reports.
* Collect data on UNHCR referrals and report on Afghan survivors in shelters in progress reports, in consultation with the AHC.
* Progress discussions with UNHCR around increasing institutional support for NET shelter.
* Continue to set clear timeframes and targets with NET management regarding the need for regular senior management engagement with the Program and for better linkages with government to increase government referrals to the shelter. NET should be informed that, if these matters are not addressed, funding might be withdrawn.
* Priority should continue to be given to strengthening links between the private and government shelters (*Darul Aman* and WCCs) in both provinces, and improving the quality of services in Government shelters.
* Trócaire and the two partners should strongly advocate for Government funds to be allocated for the helplines in the next budget for 2017-18 to ensure ongoing operation and sustainability of this component post-2018.
* Consider moving the vocational training component under Objective 2 as a tangible incentive for female community activists involved in community mobilisation work. ACT should be provided with the vocational training component if requested. However, care needs to be taken to ensure partners do not lose the focus on GBV and start to turn the Program more into a livelihoods activity. Shelters should focus on literacy and life skills rather than vocational training, but shelter survivors should continue to have access to vocational training if requested. Handholding support should be phased out.
* The risks associated with women and girls increasingly speaking out should continue to be closely monitored. A specific ‘conflict sensitivity’ indicator in the M&E framework is recommended to track any unintended consequences of the intervention.
* Trócaire should move to appoint a KP advocacy partner/s as soon as possible. Trócaire should ensure there is a clear strategy and coordination between SAC, the provincial advocacy partners and the five local implementing partners’ media work, for maximum impact. Further analysis of the impact of the *Pur Azm* campaign and advocacy work of the five implementing partners is recommended prior to the end of the investment.
* Consider conducting awareness raising and capacity building of parliamentarians on GBV. Greater focus on provincial parliamentarians and local government representatives is recommended as part of the advocacy strategy, as well as greater linkages with the Provincial Women’s Parliamentary Caucuses in Sindh and KP.
* Ensure disability considerations are integrated throughout the Program. Ongoing messaging is required from Trócaire and AHC to ensure DID remains a focus. Partnerships with disabled people’s organisations are highly recommended to ensure people with disability are consulted in identifying actions to be taken, and to expand understanding of disability inclusiveness beyond physical access considerations.
* On ongoing focus on security, safeguards and Do No Harm is essential. Trócaire and NGO staff should ensure consent is actively sought from survivors in shelters ahead of any future monitoring and/or field visits. Convoy size and police escorts should be kept to a minimum. Proper consent for photographs should be sought by all staff (including *Darul Aman* staff).
* Additional efforts should be made by Trócaire to link the various partners/stakeholders with the five implementing partners, to increase impact and decrease duplication. The Pakistan EVAWG Alliance potentially has a greater coordination role to play here.
* Greater effort is required overall to build linkages with government and for greater coordination, linking and leveraging by Trócaire. At the provincial level, there is a need for more constructive and strategic engagement, proactive networking and strengthened collaboration with the Social Welfare and Women Development Departments. Program partners should consider linking with the Sindh Human Rights Commission, which is active in the area of GBV.
* Additional opportunities to harmonise with other key stakeholders and donor investments in the EVAW sector should be actively explored.
* There is a need for more opportunities for the five implementing partners to physically come together to share models, approaches, experiences, challenges, and lessons. Before the end of the investment, a two to three day specific lessons learnt workshop should be held to ensure lessons are shared and documented. Specific time should be set aside for SDS, PVDP and ACT to explore their experiences and lessons in implementing the SASA! approach, and for SDS and PVDP to reflect on the role of vocational training as a tangible hook. ABAD should share its experience and the process it adopted of linking with the *Darul Aman* in Hyderabad with NET and PVDP.
* Significant opportunities exist to partner with philanthropists and the private sector through CSR and corporate sponsorship to leverage greater impact and assist with sustainability, e.g. cellular telephone company Zong as a possible corporate sponsor for the Hyderabad hotline.
* Greater information sharing between Trócaire and AHC is recommended. Trócaire should involve DFAT in discussions around risk, and prior to taking major decisions that affect the Program. Trócaire should strategically engage the AHC to leverage Australian relationships to progress EVAW program objectives and advocacy efforts.
* In upcoming progress reports, Trócaire is requested to specifically cover the following areas:
  + Post-training assessments and broader outcomes of training of police, judiciary and medico-legal officers (beyond numbers trained)
  + Outcomes of engaging with boys for prevention of GBV
  + Outcomes of support to students in four public sector universities in KP to undertake action research on GBV.

## For the Australian High Commission / DFAT

* Consider supporting the 2017 NCSW national survey on violence against women in Pakistan.
* Provide consistent messaging around the importance of disability inclusiveness, and link Trócaire to support provided by DFAT Canberra.
* Ensure the DFAT program manager has adequate time to dedicate to the EVAW program. A quarterly minuted meeting is recommended to discuss strategic approach, program-related issues and advocacy opportunities.
* Continue efforts to advocate for EVAW through Australia’s diplomatic and public diplomacy work in Pakistan.
* If the Australian Government is to continue support for this GBV program beyond 2018, planning should commence mid-2017 to ensure there is no gap between the current phase and next phase, as this would have significant impact on effectiveness and efficiency.

1. Gender Based Violence (GBV) and Ending Violence Against Women (EVAW) are used interchangeably in this report. Australian Government Policy documents use EVAW, but the investment under review is called the Pakistan GBV Program, and the program stakeholders in Pakistan use GBV. [↑](#footnote-ref-1)
2. The evaluation was originally planned as a mid-term review in late 2015, but was delayed on two occasions due to unforeseen circumstances. [↑](#footnote-ref-2)
3. The evaluation team consisted of:

   - Ulla Keech-Marx, Performance and Gender Specialist, Australian Department of Foreign Affairs and Trade

   - Rukhsana Rashid, Development Consultant (Gender Specialist)

   The team was accompanied at times by the following staff from the Australian High Commission Islamabad:

   - Stacey Greene, First Secretary (Development Cooperation)

   - Najma Khan, Program Manager, Gender

   - Humaira Ibrahim, Program Manager, Performance and Quality. [↑](#footnote-ref-3)
4. World Economic Forum (2016) *The Global Gender Gap Report.* [↑](#footnote-ref-4)
5. National Institute of Population Studies (2013) *Pakistan Demographic and Health Survey 2012-13* (Available at <http://nips.org.pk/abstract_files/PDHS%20Final%20Report%20as%20of%20Jan%2022-2014.pdf>) [↑](#footnote-ref-5)
6. The Human Rights Commission of Pakistan (2015) *Annual Report 2015: State of Human Rights in Pakistan*, April 2016. (Available at <http://www.newsmedialive.com/hrcp-annual-report-2015-state-hman-rights-pakistan/>) [↑](#footnote-ref-6)
7. The Express Tribune (2011) *‘Pakistan Ranks 3rd on List of Most Dangerous Countries for Women.’* Reuters. (Available at <http://tribune.com.pk/story/189294/pakistan-ranks-3rd-on-list-of-most-dangerous-countries-for-women/>). [↑](#footnote-ref-7)
8. In 2010, decentralisation was introduced in Pakistan and became part of the Constitution, meaning responsibility and resources were transferred to the provinces. GBV laws must now also be passed at the provincial level. [↑](#footnote-ref-8)
9. Medecins du Monde (2007) Dar-Ul-Aman Survey, *Healing the Wounds of Domestic Violence Project,* Médecins du Monde Pakistan, February 2007. (Available at <http://www.medecinsdumonde.org/en/news/publications>). [↑](#footnote-ref-9)
10. The Law has been passed for Sindh PCSW but the Chairperson and members have not yet been appointed. [↑](#footnote-ref-10)
11. PDHS 2012-13, page 222. [↑](#footnote-ref-11)
12. Evidence collected from a meeting with Afiya Zia, member Women’s Action Forum, Karachi, Nov 16. [↑](#footnote-ref-12)
13. PDHS 2012-2013 pages 221 to 224. [↑](#footnote-ref-13)
14. PDHS 2012-2013 page 210. (Available at <http://nips.org.pk/abstract_files/PDHS%20Final%20Report%20as%20of%20Jan%2022-2014.pdf>). [↑](#footnote-ref-14)
15. *Swara* is a Pashto word denoting a child marriage custom in tribal areas, which is tied to blood feuds between different tribes where young girls are given in marriage to members of different tribes to settle feuds. [↑](#footnote-ref-15)
16. Ashfaq, M (2008) *‘KP Assembly bans forced marriage under ghag’ January 8, 2008* inDawn, (Available at <http://www.dawn.com/news/777316>. *Ghag* is defined as a custom, usage, tradition or practice whereby a person forcibly demands or claims the hand of a woman, without consent. [↑](#footnote-ref-16)
17. Tabassum Adnan received the US State Department's 2015 International Women of Courage Award and following the publicity she had to relocate to another city due to anonymous threats. Amnesty International UK, <https://www.amnesty.org/en/countries/asia-and-the-pacific/pakistan/report-pakistan/> [↑](#footnote-ref-17)
18. The five NGO partners are:

    - Association for Betterment And Development of Human Beings (ABAD) – Sindh

    - Noor Education Trust (NET) – KP

    - Sindh Development Society (SDS) - Sindh

    - Aiming Change for Tomorrow (ACT) – KP

    - Pakistan Village Development Program (PVDP) – KP [↑](#footnote-ref-18)
19. Strengthening Participatory Organisation (SPO), Women’s Parliamentary Caucus (WPC) and Raising Voices formally became program partners in early 2017, following the evaluation mission. [↑](#footnote-ref-19)
20. The evaluation team was unable to meet the head of NET in Peshawar. Trocaire has provided evidence of email communications sent to NET’s Board of Trustees and staff regarding these ongoing issues. [↑](#footnote-ref-20)
21. SASA! was developed in the Ugandan context as a revolutionary approach to reducing VAW and HIV through a focus on the imbalance in power relations. SASA! stands for Start, Awareness, Support, Action which are the four stages of the program. [↑](#footnote-ref-21)
22. SDS has since made changes to the fee structure based on concerns raised. For example, reduced fees and scholarships have been introduced to ensure training remains financially accessible. [↑](#footnote-ref-22)