Evaluation Report

PTL Reducing Gender-based Violence Project Vanuatu Counselling Approach





Independent Evaluation completed by:

Patricia Fred, DFAT Vanuatu, Patricia.Fred@dfat.gov.au
Sam Obed, Independent Consultant, samobed24@gmail.com
Hellen Bani, Independent Consultant, hvbani@gmail.com
Johnnah Nahwo, World Vision Vanuatu, Johnnah.Nahwo@wvi.org
Megan Williams, CARE International in Vanuatu, Megan.Williams@careint.org,
Alina Meyer, Independent Consultant, alinameyer@gmail.com

Commissioned by World Vision Pacific and Timor-Leste

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About this Report

Megan Williams, Gender and Program Quality Manager

CARE International in Vanuatu

Prepared by

Alina Meyer, Independent Consultant

Field Survey

Date

Date

16 June 2018 to 24 June 2018

Status FINAL

Submitted

30 June 2018

Final report

approved by

Kendra Derousseau, Grants Acquisition and Program Quality Manager

Approval date of final

report

17 October 2018

Acknowledgement

The leading evaluators would like to acknowledge and thank the evaluation team members for their dedication, time and efforts in data collection and engagement in the process of the evaluation. We would also like to thank the faith and community leaders, their spouses, community and congregation members, service providers and other stakeholders who shared their time and stories with us and the World Vision Vanuatu REACH staff and volunteers for their invaluable organisational and logistical support and for sharing their individual stories with us.

We would also like to thank World Vision Vanuatu staff and consultants who have worked on this project for their dedication and commitment to the cause. We would particularly like to thank Kara Duncan-Hewitt (www.libertytrainingnz.com) and Pastor Fiama Rakau for their particular professional and personal dedication to building healthy families throughout Vanuatu. Finally, we would like to acknowledge the financial support of the Australian government and in particular Australian Aid through the Australian NGO Cooperation Program (ANCP).

Affirmation

Except as acknowledged by the references in this paper to other authors and publications, the evaluation described herein consists of original work, undertaken as a collaboration between World Vision Pacific and Timor-Leste and Megan Williams CARE International in Vanuatu and Alina Meyer Consulting. It is undertaken to guide future activities, describe and advance learning, and generate evidence of World Vision's development effectiveness as part of the requirements of World Vision's Learning, Evaluation, Accountability and Planning System.

Primary quantitative and qualitative data collected throughout the evaluation process remain the property of the communities and families described in this document, which World Vision retains as steward on those communities' behalf.

Kendra Gates Derousseau Programme Quality Manager, World Vision Vanuatu World Vision Pacific & Timor-Leste 17th October 2018

Glossary of Acronyms

The following acronyms are used in this report.

ANCP Australian NGO Cooperation Program

CHAT Community Hope Action Teams

CoH Channels of Hope

CBO Community Based Organisation

DFAT Australian Government Department of Foreign Affairs and Trade

DME Design Monitoring and Evaluation

DPA World Vision Development Programme Approach

F&CL Faith and Community leader

FGD/DG Focus Group Discussions/Discussion Groups

FPU Family Protection Unit **FPA** Family Protection Act **GBV** Gender-Based Violence

HH Household

IPV Intimate partner violence Key informant interview KII KSI Key stakeholder interview SCC Sanma Counselling Centre

STKH Stakeholder SP Service Provider

SRBJS Stretem Rod Blo Jastis mo Sefti program

ToC Theory of Change TOR Terms of Reference

VCC Vanuatu Christian Council

VDPA Vanuatu Disability Promotion and Advocacy Association

VSPD Vanuatu Society for People with a Disability

vwc Vanuatu Women's Centre WVA World Vision Australia

WV PTL World Vision Pacific & Timor-Leste

WV Staff World Vision Vanuatu Staff WVV World Vision Vanuatu



I. Executive Summary

PTL Reducing Gender-based Violence Project-Vanuatu Counselling Approach Efate and Santo, Vanuatu

Introduction and context

Vanuatu has one of the highest prevalence rates of violence against women and girls globally. The Vanuatu Women's Centre research in 2011 found that 60% of women with an intimate partner had experienced physical violence, 68% experienced emotional violence and 69% coercive behavioural control by men. I Male family members and boyfriends perpetrate most of the violence and it occurs in all provinces and islands, among all age groups, education levels, socio-economic groups and religions. It is higher in rural (63%) than in urban (50%) areas 2. Social values held by both women and men reinforce the acceptability of violence towards women and girls and 60% of women agree with at least one "reason" for men to beat their wives 3

In Vanuatu, violence is used as punishment and discipline and is accepted and condoned as 'normal' behaviour in many communities. This impacts both women and children. Women suffer short- and long-term impacts on their physical, mental and reproductive health. Children's emotional well-being, protection and schooling suffer, reducing their opportunities for development and pre-disposing them to also accept violence as normal.

World Vision's Response

The Counselling approach sits under the Vanuatu component of the PTL Reducing GBV Project which began between January and July 2015 in Vanuatu, Papua New Guinea, and Timor Leste. It has been addressing gendered social norms that undergird the high prevalence of violence while also

connecting the project's partners to services and information with the following expected outcomes: I) support community and faith leaders to become champions against gender-based violence; 2) strengthen links between communities and GBV and child protection service providers; and 3) support community and church action teams to increase awareness and change attitudes and behaviours related to GBV inside communities and churches. WV is utilising World Vision International's (WVI) Channels of Hope for Gender (CoHG), a faith-based approach to engage church leaders and church members in discussions about gender equality and GBV.

Duration:	Counselling Component from June 2016 –				
	June 2018				
Budget:	USD 856,000 for Counselling component of				
	project				
People sup-	[57 congregations in 35 villages or urban/				
ported by the	[57 congregations in 35 villages or urban/suburban areas, covering 21 different de-				
project:	nominations]				
	5,273 community members				

In Vanuatu, work has focused largely on working with faith leaders, community leaders, and their spouses to address violence. The project has built on the primary prevention focus of the World Vision International Channels of Hope for Gender methodology and is seeking to strengthen secondary prevention by working with faith and community leaders and their spouses to increase their understanding of GBV and their ability to help perpetrators accept responsibility for and take control over their actions, and assist survivors to develop safety plans and link them to services through counselling skills training. This training has a strong focus on working with men who use violence to accept responsibility for their actions, see violence as a choice, and provide practical tools and strategies to change their behaviour. Service providers including police and women's family violence services participated in Counselling Skills Workshops to strengthen the referral pathways

I Vanuatu Women's Centre, 2011, https://mjcs.gov.vu/images/research_database/Vanuatu_National_Survey_on_Womens_Lives_and_Family_Relationships.pdf,

National Survey on Women's Lives and Family Relationships

2 Molony, T. 2014 Desk Review Women's and Girl's Empowerment Program, CARE International in Vanuatu, p.21

3 Vanuatu Women's Centre, 2011, https://mjcs.gov.vu/images/research_database/Vanuatu_National_Survey_on_Womens_Lives_and_Family_Relationships.pdf

, National Survey on Women's Lives and Family Relationships, p. 55

to their services, build technical capacity (when appropriate) and develop an understanding of the faith-based approach to addressing GBV and family violence.

The evaluation

The evaluation of the Counselling Skills Approach is a summative impact evaluation, designed to determine the relevance and effectiveness of the Counselling Skills approach primarily for attendees and their families and to also identify if there has been any further impact on communities and congregations within the time-frame of the project.

The evaluation was guided by the following objectives:

- 1. Verify that the approach has achieved the stated knowledge, attitudes and practice changes
- 2. Establish the extent to which the project achieved its outcomes among disaggregated stake-holder groups (including gender)
- 3. Identify initial project impact among target populations
- 4. Evaluate the relevance of the intervention and appropriateness of implementation approaches used
- 5. Document promising practices, key lessons learned and recommendations to inform future project design
- 6. Identify strengths/weaknesses in the project design or implementation approach that facilitate/constrained change
- 7. Provide on-the-job learning and training to World Vision and Partner staff in evaluation methods
- 8. Provide needed information to World Vision (WV) Pacific and Timor-Leste and in the country programs to drive decisions about continuation of project.

The evaluation employed a mixed method approach and used purposive sampling of target groups to collect data on counselling skills participants and their communities/congregations, key service providers, other stakeholders, WV project staff and key informants as well as non-participating faith leaders. Field work was conducted over 10 days between Friday 15th June and Monday 25th June 2018. The team of 6 evaluators met with 131 people on two islands (Santo and Efate). The team was led by Megan Williams, Gender and Program Quality Manager CARE International in Vanuatu, and Alina Meyer, Independent Consultant. The team included partner and World Vision staff and independent consultants: Patricia Fred, DFAT Vanuatu, Johnnah Nahwo, World Vision Vanuatu, Sam Obed, Independent Consultant and Hellen Bani, Independent Consultant.

What Has Been Achieved Through the Counselling Approach - impact and outcomes



The counselling skills approach has achieved many of its stated **knowledge**, **attitude** and **practice changes** in its key target group – the faith and community leaders. 74% (59% male and

41% female) of all course participants, indicated that they personally had stopped using violence within their own families. The **impact** of this change on families has been reported as very positive and women in particular indicated that they were no longer being beaten and felt "100% better." Faith and community leaders and other course participants have **changed their attitudes to violence and gender equality** and some are **changing gender norms** in their households and communities - a considerable achievement.

At this early stage, the project has yet to achieve many of the desired attitude and practice changes in the targeted communities and congregations. It was possible to see some behaviour change in the form of a reduction in physical and sexual violence, but no clear attitudinal change. The impact that this has had on the community is that women are now feeling safer. The only **negative impact of the program is the possible use of non-physical forms of violence,** such as financial violence, towards women as a method to control behaviour in the absence of physical methods.

The evaluation team found that the counselling approach was both highly **relevant** and highly **appropriate** in the context of Vanuatu, particularly the use of the faith-based approach to change attitudes and beliefs towards violence and gender equality within the church. Engaging within the church context through a faith approach has a strong potential to shift attitudes and norms, as is evidenced by the changes in the individual faith and community leaders and other participants of the course.

Counselling skills attendees on the whole were **extremely positive about the course** and the approach, due to the significant personal changes it had prompted. Community members were **not as satisfied with the results** of the project as many did not receive any new messages from their faith or community leader following their engagement in the course.

"The counselling workshop helped me understand that (women should be treated equally)...I'm the head of the house but now I know that we should share our thinking and my wife has a right to make decisions" (F&CL I).

"Praise the Lord! He...[husband]... has changed in a big way. Now he has changed, he makes everything in the house - bathes the children, cooks, his mind has opened up about everything...In the past he would hit me every day. Now we share duties in the garden, resting and cooking. He has been changed since he did the course in 2016." Spouse of participating faith leader (F&CL 15).

"Physical and sexual violence has been reduced a lot...The impact is huge in the families" (MFG 12).

"The faith approach has helped the program to go well. Vanuatu is a Christian country - if you come and talk about something outside my faith and culture then it is hard to listen to: this program works well because of the faith-based approach. Right now faith leaders use approach and that is why they are with us" (WV staff 6).

Cross-cutting themes

Gender: The evaluation found that the program contributed to some transformative gender change in individuals, relationships, and power structures. This program has effected some changes in gender norms within two communities and within individuals with 25% of participating faith and community leaders now questioning and taking on different roles within the household. This is commendable. It is clear that this is one of the most difficult areas in which to achieve change. The evaluation found that where behaviour has changed in some communities, the attitudes that guide that behaviour have not changed and therefore the behavioural change may be unsustainable without continued longer-term engagement.

Disability: Women and girls with disabilities are most at risk to gender based violence and sexual assault. The evaluation found that the counseling skills project did not meaningfully integrate people living with a disability, and could have done more to foster the participation of and address the specific issues relating to violence for people living with disability. Recommendations for better addressing the developmental problem

- Continue conducting the courses that make up the Counselling Approach workshop series, as it is unique and effective
- 2) Conduct a participatory review of the course, structure, curriculum, name, timing and delivery methodology to support better transmission of the message to communities in both the rural and urban settings
- 3) Conduct a gender and disability power analysis specifically for the course model, and create strategies to:
 - ensure knowledge on gender equality, gender based violence and gender norms is an explicit key focus for the course and continues to be included within the course curriculum in a more overt manner
 - Incorporate violence risk factors and mitigation strategies for people with disability, particularly women and girls. Increasing understanding within the community of the concept of informed consent in the context of disability is particularly important
- 4) Ensure the current course facilitation team has a clear succession plan that is as respected and as effective as the current team
- 5) Develop a process for selection of course participants which considers influence/respect level within community, formal education, etc.
- 6) Conduct separate courses for youth participants as a primary violence prevention technique, helping them to be champions within their communities and the nation
- 7) Ensure there is a clear plan for post Counselling Course follow up focusing on support to and monitoring progress of course graduates
- 8) Develop and maintain relationships with partners to make the course more effective and sustainable
- 9) Ensure quality program development including a clear theory of change developed with course participants and community members and communicate stories of change
- 10) Connect the program to other World Vision Programs at national and regional level to share lessons
- 11) Consider taking the course national through engagement with the VCC and church leadership.

Conclusion



World Vision Vanuatu is to be commended for the development and implementation of an innovative and effective model which is both relevant and appropriate to the faith context of Vanuatu. The initial changes that have been brought about by this project in the short time that it has been operating are impressive and transformative for many individuals. There is a clear need for such a project and many opportunities to engage with the broader faith sector to spread the model and therefore the impact wider. Attitude and behaviour change in this context is challenging and is a long-term endeavour and the faith-based medium is ideal to support real change in the lives of women, men, girls and boys. With a more concerted focus on disability, this approach could also more effectively reach the most at risk members of society – women and girls with disabilities.

2. Project Background and Context

World Vision has been implementing the Reducing Gender-based Violence project across three Pacific Timor-Leste (PTL) countries (Solomon Islands, Timor-Leste and Vanuatu) to address high tolerance and prevalence of gender-based violence (GBV) across the three countries. Though all three countries have laws criminalising domestic and family violence and have ratified the CEDAW and the CRC, national studies indicate women experience higher incidence of intimate partner violence (IPV) than the international average. Studies have also found IPV is treated as normal by individuals, families and communities; many people use interpretations of cultural, social and faith discourse to reinforce the idea man is "boss" and can use violence to correct his wife's behaviours.

The PTL Reducing GBV Project began implementation between January and July 2015 and has been addressing gendered social norms that undergird the high prevalence of violence while also connecting the project's partners to services and information with the following expected outcomes: I) support community and faith leaders to become champions against gender-based violence; 2) strengthen links between communities and GBV and child protection service providers; and 3) support community and church action teams to increase awareness and change attitudes and behaviours related to GBV inside communities and churches.WV is utilising World Vision International's (WVI) Channels of Hope for Gender (CoHG) approach which is a faith-based approach to engage church leaders and church members in discussions about gender equality and GBV. CoHG is an appropriate approach in the country contexts where between 83% and 98% of the populations identify as Christian. CoHG supports leaders and church members to analyse common Faith texts that are used across certain denominations to support women's subordination and a husband's violence against his wife. In April 2018, the project underwent an evaluation in all three countries to determine relevance, effectiveness and sustainability of activities and impacts.

In Vanuatu, work has focused largely on working with faith leaders, community leaders, and their spouses to address violence. The project has built on the primary prevention focus of the CoHG methodology and is seeking to strengthen secondary prevention by working with faith and community leaders and their spouses to increase their understanding of GBV and their ability to help perpetrators accept responsibility for and take control over their actions, and assist survivors to develop safety plans and link them to services through counselling skills training. This training has a strong focus on working with men who use violence to accept responsibility for their actions, see violence as a choice, and provide practical tools and strategies to change their behaviour. Service providers including police and women's family violence services participated in Counselling Skills Workshops to strengthen the referral pathways to their services, build technical capacity (when appropriate) and develop an understanding of the faith-based approach to addressing GBV and family violence.

Concurrently within Vanuatu, DFAT has a strong bilateral program, Stretem Rod blong Jastis mo Sefti, (SRBJS) which seeks to assist the Vanuatu Government to implement its Family Protection Act (FPA). This includes trialling the FPA's Authorised Persons (AP) approach which empowers select community lay persons to issue temporary protection orders in the case of intimate partner violence (IPV) and other forms of domestic violence. The FPA also states that in order to implement this approach, there must also be a registered counsellor who has either formal counselling qualifications or experience in mediating domestic violence situations in the community to provide services to the perpetrator and the survivor. Beyond the Vanuatu Women's Centre which is currently working to capacity, there are no formal institutions in Vanuatu capable of placing registered counsellors in communities, creating a significant risk to the full implementation of the FPA.

Given that the counselling skills approach has been unique to Vanuatu within the World Vision regional project and given that it may potentially produce individuals who could be considered safe registered counsellors in line with the spirit of the FPA, WVV and DFAT's SRBJS program designed this joint evaluation of the approach to determine relevance and effectiveness.

3. Purpose and Scope of the Evaluation

This study is a **summative impact evaluation**, designed to determine the relevance and effectiveness of the Counselling Skills approach for attendees, their families and their communities and congregations. Results have been used to identify the extent to which the project has created positive or negative change in the lives of Counselling Skills recipients relative to if the project had not taken place. Results of this evaluation will also be used to refine and expand the methodology if appropriate.

4. Evaluation Objectives and Questions



The principle objectives of the evaluation are:

- 1. Verify that the approach has achieved the stated knowledge, attitudes and practice changes
- 2. Establish the extent to which the project achieved its outcomes among disaggregated stake-holder groups (including gender)
- 3. Identify initial project impact among target populations
- 4. Evaluate the relevance of the intervention and appropriateness of implementation approaches used
- 5. Document promising practices, key lessons learned and recommendations to inform future project design
- 6. Identify strengths/weaknesses in the project design or implementation approach that facilitate/constrained change
- Provide on-the-job learning and training to World Vision and Partner staff in evaluation methods
- 8. Provide needed information to World Vision (WV) Pacific and Timor-Leste and in the country programs to drive decisions about continuation of project.

The key questions that guided the evaluation are:

- 1. How did this project impact power relations between women and men? What are some of the positive impacts in gender relations? What was the negative impact or backlash, in any? What barriers did women and men face in accessing the project as separate groups? To what extent do women and men perceive they were able to direct programming (as separate groups)?
- 2. How did this project practice do no harm principles for women and children? What areas need to be strengthened in future programming?
- 3. To what extent has the Counselling Skills approach achieved its intended outputs at attendee, congregational/community, and systems (referrals) levels?
- 4. To what extent are Counselling Skills attendees, community members and stakeholders satisfied with the results of the project?
- 5. Have Counselling Skills attendees experienced any attitudinal shift towards well-known "exceptional reasons" for family violence such as adultery as a result of the approach?
- 6. How durable are the changes initiated by the approach?
- 7. What activities and recommendations would optimise sustainable changes for the approach in the future?
- 8. What design or implementation factors that were under project control accelerated or constrained outcomes?
- 9. What design or implementation factors outside project control accelerated or constrained outcomes?

5. Methodology

The evaluation employed a mixed method approach and used purposive sampling of target groups to collect data on counselling skills participants and their communities/congregations, key service providers, other stakeholders, WV project staff and key informants as well as non-participating faith leaders. The methodology was designed to gather evidence of changes in expected knowledge, attitudes and practice and to identify any impact, positive or negative, that these changes have had on the lives of the leaders (faith and community and their spouses), of people in the communities and on the work of service providers and other stakeholders. The tools were developed in a participatory manner with the evaluation team during the preparatory workshop. They included formal individual interview tools for faith and community leaders and spouses, service providers, key stakeholders, staff, key informants and non-participating faith and community leaders. Two focus group discussion tools were developed for men and women in target communities.

As the evaluation required analysis of the effectiveness of the counselling approach rather than the project as a whole, which had just recently been evaluated as part of the three country evaluation of the Channels of Hope Project, the lead evaluator was required to develop a theory of change and monitoring/evaluation questions for the counselling approach from available project documentation.4

4 See Annex A for Theory of Change

Counselling Course Participants 2016-2018 (Community & Faith Leaders, Spouses, Service Providers, Stakeholders)		Sample Size				Total			
	Male	Female	Total	Male		Female		Total	
Santo	53	50	103	10	19%	10	20%	20	19%
Vila	56	54	110	16	28%	13	24%	29	26%
Total	109	104	213	36	23%	23	22%	49	23%
Interviewee		Female		Male		Total			
Focus Group discussion		30		36		66			
Faith and community leaders		12		19		31			
Service providers		4		2		6			
Stakeholders		9		3		12			
Key informant		I		0		1			
WV Staff		10		3		13			
Non-participating faith leaders		0		2		2			
Total		66		65		131			

World Vision Fig. I: People Interviewed for

This was required to identify the expected outputs, outcomes and impact that the designers of the approach hoped to achieve in order for the evaluation team to ascertain if change had occurred in the expected way. The questions developed were used in interview and focus group discussion tools that the evaluation team created together. The focus group discussion tools were translated into Bislama and contain some different questions for women and men. All tools were designed to gather information that would allow the evaluation team to identify relevance, effectiveness, impact and sustainability of the approach with an added study of the crosscutting themes of gender and disability. The interview tools for service providers, stakeholders and staff were designed to gather information on their personal experience of participation in the course as well as questions to meet the evaluation objectives. A key informant tool was also developed to gather an outsider's perspective on change within target communities.

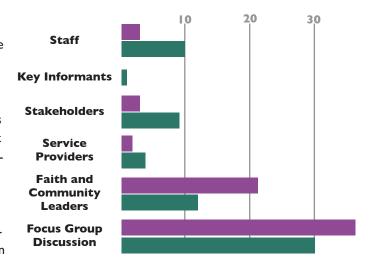
The evaluation team debriefed on a regular basis to clarify key themes during the process. Some amendments to the tools were made after testing with the first interviewees. The team participated in a two-day analysis workshop at the end of the field work to identify key themes and areas of change in the different groups interviewed and to compile and make preliminary recommendations. Data from the interviews was typed up in Microsoft Word and held centrally in a Microsoft Excel file that allowed analysis of the quantitative and qualitative data.

Sampling criteria for faith and community leaders included: location (island and urban or rural), participation or non-participation in the course, spouses where possible, participation

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Fig. 2: Types of People Interviewed



Congregation	Community	Island	Community /Faith leader/ Spouse		Focus Groups	
			Female	Male	Female	Male
Christian Mission Church, Neil Thomas Ministries, Praise and Worship, Presby- terian	Nakere	Santo	I	3	5	5
Praise and Worship	Sarete	Santo	2	2	5	5
Presbyterian	Wailapa	Santo	2	3	5	6
New Covenant Church	Anamburu	Efate	٧	I	5	5
Church of Christ	Teouma	Efate	I	I	5	5
Seventh Day Adventist	Blacksands	Efate	1	I	5	10
Total				- 11	30	36

in the recent evaluation, perceived efficacy as leaders. Sampling criteria for focus groups included: being in a community with a faith or community leader who has participated in the course, sex (i.e. male and female), and at least one or two community/congregation members who had been supported by the faith or community leader to manage family violence.

With each congregation, the team conducted separate focus groups for women and men and attempted at least 4 faith and community leader interviews however this was not always possible.

Interviews with key stakeholders included service providers (Police, Vanuatu Women's Centre, Sanma Counselling Centre, Vanuatu Family Health), the team from Stretem Rod blo Jastis mo Sefti, Vanuatu Christian Council, Anglican Mission, Seventh Day Adventist (SDA) Mission, Presbyterian Gender Officer, Corrections, Vanuatu Disability Promotion and Advocacy Association, Vanuatu Society for People with a Disability and a teacher from one of the rural communities in Santo. World Vision Vanuatu Program and Management Staff and consultants were also interviewed.

Field work was conducted over 10 days between Friday 15 June and Monday 25 June 2018. The team of six evaluators met with 131 people on two islands. Two workshops were conducted (preparatory and analysis) as part of the process.

6. Limitations of the Evaluation

The key limitations of the evaluation include:

Data Gaps: Gaps and inconsistencies in the data collected by the project team leading up to the point of the evaluation made it challenging to understand the correct makeup of the counselling skills participants or community members to be interviewed. There was no Theory of Change (ToC) for the counselling aspect of the project specifically, only one for the broader program outcomes. This broader ToC did not relate to the change the evaluation was interested in assessing, so the evaluators spent additional time creating a ToC for the counselling element in order to be able to develop pertinent questions and assess impact against expected outcomes. This delayed the preparation phase and reduced the time available for the team to prepare the tools for the evaluation.

The quality of the activity reporting was challenging as although there was some data available it did not provide useful qualitative information and hence was not helpful in gauging the progress of the counselling courses.

Limited Timing: The evaluators were restricted by time constraints. The tight schedule for the evaluation, coupled with the size of the work and the limited time available to prepare, meant

"Praise the Lord! He has changed in a big way. Now he has changed, he makes everything in the house - bathes the children, cooks, his mind has opened up about everything. Before he used to go to kava and lose money by spending too much on kava and smoking. He has given up kava and smoking from what he learnt in the course. In the past he would hit me every day. Now we share duties in the garden, resting and cooking. He has been changed since he did the course in 2016." Spouse of a faith leader (F&CL 15).

that the evaluators did not have ample time to develop and test the tools and hence missed the opportunity to make some key changes to questions that would have helped in the analysis of impact.

The data gaps referenced above placed additional time constraints on the evaluation, as the lack of clean data rendered it difficult to make any decisions prior to the evaluation, as it was difficult to fully assess the situation and have a proper sense of the communities and the people to be included in data collection. Better data would have informed the evaluator's understanding of the communities as well as the participants in the course, allowing the evaluators to propose a schedule prior to the evaluation. It was this related schedule issue which impeded a longer preparation phase for the evaluation.

Timing of Focus Group Discussions: Many Counselling Skills participants had many demands on their time: they



had full-time jobs, were working in their gardens, and had child care responsibilities, among other demands on their time, hence they did not have time to attend focus group discussions during the working week. This was particularly the case in Port Vila, however in the rural areas as well some interviewees were not available due to other commitments. This was mitigated by the evaluators being flexible with timings for interviews (some were conducted in the evening when interviewees were back from their other duties) while in Port Vila some interviews and focus group discussions were conducted on weekends (specifically after church) to capture those who work outside of the community during the week.

Make up of focus groups: In order to fully assess the effectiveness of the Counselling Skills approach, it was necessary to seek feedback from the experience of women and men who have been recipients of counselling (practical skills application). Community representatives were therefore asked to bring together a group of people from the congregation/community who were representative of typical community members but included people who had received support from the faith or community leader. In one case the focus group discussions for both male and female groups constituted leaders and not usual congregation members, hence the discussion did not reflect all aspects of the congregation.

7. Findings

Originally the evaluation sought to understand the impact of the program and the relevance and effectiveness of the approach for all program participants (faith and community leaders and their congregations/communities). Due to the short period of time that the program had been running, the team was requested to focus the evaluation primarily on changes in the faith and communi-

ty leaders themselves rather on changes that could be identified in the broader congregation/community as a result of the work of the course participants. In order to verify the knowledge, attitude and behaviour changes in faith and community leaders and to identify if there were any changes yet evident in congregations/communities, the evaluation team talked with a variety of stakeholders. This included speaking with both faith and community leaders, their spouses, and female and male representatives of their congregations/communities to ascertain if there was any evidence of impact or change as a result of the program. It also explored impact or change in the

"Violence has reduced, though not much. Swearing has reduced. Some people have changed and some have not" (WFG 3) yet the men in the same community indicated that the change was significant. "Physical and sexual violence has been reduced a lot...The impact is huge in the families" (MFG 12).

course participants – who were primarily faith and community leaders, as well as service providers, other stakeholders and World Vision staff. To judge effectiveness, the team also sought to assess the extent of achievement of the program's outputs and outcomes.

The findings are detailed below according to the most significant changes desired by the program —the impact on people's lives and changes discerned in knowledge, attitudes and practice (both expected and unexpected) as a result of program implementation.

Desired Impact

Women, girls and boys in target communities and congregations have increased wellbeing due to reduction in violence.

7.1 Impact on lives of individual course participants (Community and faith leaders, service providers, WV staff and other stakeholders)

"Previously I always abuse my children and husband. I hit my husband and always use abusive language to my husband and to my children... I am very happy that this workshop has helped me realised my bad behaviours and have changed the way I treated my husband." (STKH 8)

"I am changed 100%, I'm happy because before my husband used to punch me. I am more confident." (F&CL 20). "I used to beat my children and swear and argue a lot at home but now I've stopped doing that. It's more peaceful now in my home than before." (WV staff 8)

The counselling skills workshop series has resulted in some positive impact on the lives of women and children in the target areas. The most significant impact has been increased well-being in women, girls and boys through the reduction in the incidences of violence, both physical and emotional. The program has also managed to change gender norms and attitudes around gender equality which is a laudable achievement and has resulted in changes to the division of labour in some households, thereby relieving some of the burden of the large household/reproductive workload that women traditionally bear in Vanuatu. Another impact of the course has been the effect of the work of the faith and community leaders in two rural communities. The work of the faith and community leaders has reduced the practice of physical and sexual violence in the communities. The negative impact has been on the faith and community leaders where they have had to endure the psychological burden of hearing and intervening in cases of extreme abuse as well as the tensions, conflict of interest and potential security concerns that result from the role of the APs in reporting/granting protec-

tion orders to family and community members.

i. Increased well-being of women, men and children through reduction in physical and emotional violence

The most significant tangible impact of this program has been the **reduction in physical and emotional violence against women, men and children** by course participants (faith and community leaders, service providers, stakeholders and staff of World Vision) as a result of their personal learning from the counselling courses. Many participants said they had not realised that the way they disciplined their children was considered violence. 74% of all course participants interviewed (including faith and community leaders and their spouses, and also service providers, stakeholders and staff,) indicated that as a result of their increased awareness of violence, they were no longer beating their partners or their children and they now engaged in more positive forms of problem solving or discipline5.

ii. Improved well-being of women through the increased sharing of household labour and enhanced freedom of movement

With the increased awareness of gender equality and rights of women and children gained through the counselling course, male and female participants and spouses are reporting that some of the

If we consider just faith and community leaders and their spouses, then the percentage changes to 79% (68% male and 31% female) expressing significant change in violent behaviour.



men (25%) are more frequently sharing household/parenting tasks. "Now I respect my wife - I wash the clothes." (F&CL 9) Before the workshop, I was like a slave in the home, I did everything. Now after the workshop there is more balance in the house" (F&CL 20). "One time the men were sitting around waiting to get served their food by women- so I decided to get up and do it." (F&CL 13). Another impact of an enhanced understanding of gender equality has been the increased freedom of women to walk about and sit where they want (F&CL 14).

7.2 Impact on lives of community members

Although the pilot program has only been implemented for two years, it is possible to see some positive impact in two of the target communities at this stage, however this is coupled with some potential minor negative impacts. The positive impact has been a reduction in physical violence in two of the target communities. At the same time, men in one community have reported increased financial violence, possibly as method of controlling their wives in the absence of physical violence. This, however, was not raised as an issue by the women in that community.

7.2.1 Changes in violence practices

The men in one of the six communities reported that there had been a significant reduction in **physical violence against women** in that community. The women conceded that there had been a reduction in physical violence amongst some people but that others had not changed their behaviour. Men in another community indicated that before their faith or community leader had attended the World Vision course, they used physical violence often to solve issues in the house between husbands and wives, "...but today we use our Authorized Person and Pastor for help" (MFG 11).

With the decrease in physical violence in one of the rural communities, the men reported an **increase in the use of financial violence** to control or abuse the women in that community. This has resulted in an impact on women's access to financial resources through the restriction of access to the kava gardens. "Other violence has been reduced but the financial violence is still high... The effect of financial and emotional violence ends up in women no longer owning the family kava gardens" (MFG 12). The women, however, did not report an increase in financial violence as described by the men.

The women in another community reported that "previously, the community is not safe. We were too scared to go to the garden but **now we feel free to walk around** and go to the garden ourselves" (WFG 2). This is as a result of the work of the community and of the faith leader to reduce violent behaviour of men and boys in the community.

7.3 Key outcomes and outputs achieved

Faith and community leaders and other course participants

Output 1

Faith and community leaders and their spouses have increased understanding of the types/patterns/effects of and strategies to counter family violence and have awareness of their own attitudes and behaviour related to violence

Output 2

Faith leaders and their spouses have practical tools and strategies to change violent behaviour and increased knowledge in using the tools

a) Changes in Knowledge/Outputs

The program expected that as a result of doing the counselling courses, faith and community leaders and other stakeholders would have an understanding of the types, cycles and effects of violence; awareness of their own attitudes and behaviours towards violence; knowledge of the tools and how to use them to change violent behaviour.

The evaluation team found that on the whole, faith and community leaders had an increased understanding of the **types of violence**. 83% of faith and community leaders interviewed could name one or more types of violence (physical, spiritual, emotional, financial, sexual, mental, using others, minimising, denying, blaming). 52% could name between 1-3 different types and 30 % could name more than three (physical, verbal, emotional, financial, spiritual, sexual were the most common types cited). There was a significant focus on physical violence with 17 of the 24 mentioning physical violence. Few talked about the cycle of violence. 70% (47% female and 53% male) of faith and community leaders indicated **that violence had a negative effect** on families resulting in breaking up relationships (separation).

One of the key messages in the courses is that **violence can be controlled and is a choice** and 56% of participants (23% female and 77% male) indicated this unprompted.

83% of participants also mentioned that through the course they had become aware that their methods of disciplining children were violent.

Respondents who participated in the course were asked about the tools they could use to change violent behaviour and were able to cite the **different tools/strategies** to diffuse violence within themselves, including self-calming techniques such as Safe Time Out Please (STOP) and leaving the house, or going to the garden to avoid violent behaviour.

Participants indicated that they had learnt new messages or scripture to help them pass on messages of non-violence through their preaching, such as "no one is born to be abused", "no one was born to abuse", "All humans were created in God's likeness."



Short-term Outcome 1

Faith and community leaders and their spouses have changed their own attitudes to violence and have confidence in their ability to provide appropriate counselling and support the change in their own communities and congregations

Short-term Outcome 2

Faith and community leaders and their spouses have confidence in their ability to use these practical tools to work with perpetrators of violence to accept responsibility for their actions and see violence as a choice.

b) Changes in Attitudes/Outcomes

The program anticipated that as a result of doing the counselling courses participants would gain an increased knowledge about violence, an awareness of their own attitudes and behaviours, as well as practice in using tools to support change in their congregations and communities. The program, hoped that as a result of this participants would change their own attitudes to violence and have gained confidence to counsel people on violence and to support behaviour change. The program also predicted that if participants had increased knowledge in the use of tools and strategies to change violent behaviour, they would then have increased confidence to work with perpetrators of violence to change their attitudes.

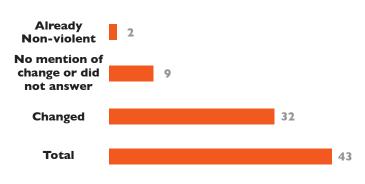
Respondents generally indicated that once they had participated in the courses, **their own attitudes to violence were considerably changed** as a result of the teachings in the course. "The course dissects your thinking." (F&CL 14). Many realised that the verbal and physical discipline they used with their children, which they believed followed the instructions of the Bible and were in the best interests of the child, was in fact abuse. 70% (41% female and 58% male) of faith and community leaders and spouses believed that there was **no justification for violence.** 16% (50% female 50% male) indicated that violence was justified in times of trespass on land or in disciplining children. No one mentioned adultery as a justification for violence.

One faith and community leader identified a different motivation for change in her behaviour, indicating that as a counsellor she could not be seen to be causing "...violence to my children because people will see me and my behaviour won't reflect what I'm saying" (F&CL 17).

For verification purposes, the evaluation team also interviewed non-participating spouses of faith and community leaders who had participated in the counselling program. Several women indicated that their husband's change had influenced them as well, but this was not always the case. For example, one spouse indicated that she had to whip children to correct them: "If we don't correct them then they will become naughtier or disobey" (F&CL 9). She also indicated that her husband had not shared very much information from the course with her. Another stated that no circumstances justified violence, however she referenced custom as a means to resolve problems: "It is not right to hit anyone. We use custom to sort out problems-fine, taro, chickens or money". (F&CL 15)

There has been a clear acceptance of **responsibility for violence** from people who participated

Fig. 3: Change in Behaviour: Family Violence



in the counselling skills course series with 74% (59% female, 41% male) indicating that they had changed their behaviour with their partner, children and grandchildren and stopped physical and emotional violence (5% were already non-violent and 21% did not indicate a change in behaviour or did not answer the question).

In terms of increased confidence to provide support to survivors and to use the tools to work with perpetrators of violence, 82% (37% female and 63% male) faith and community leaders interviewed indicated that they felt confident to use the tools and support people regarding issues of violence in their communities

and congregations: "The course gave me skills and tools to provide support" (F&CL 14). "I talk when I feel that I have to and I have become very confident. I am more confident now than before about talking about sex in a meeting" (F&CL 16).

"Normally women can't talk in front of men – women are not allowed to even walk in front of the church and stand in-front. Women would use the back door of the church and sit separately from men in the church. Through the ongoing awareness from the leaders, women are now preaching in church and women and men feel free to sit wherever they want in church (F&CL 17).

Before I was angry; I broke the door at the airport. Plenty of things I am doing differently now that I have looked through the eyes of my wife and children. I didn't help my wife. Now she can walk about as a free woman - she's independent - she is no slave (F&CL 14).

"The counselling workshop helped me understand that (women should be treated equally)...!'m the head of the house but now I know that we should share our thinking and my wife has a right to make decisions" (F&CL I).

Despite feeling confident because they are equipped with tools to counter justifications for violence, one faith leader indicated they were still reluctant to take the ideas to the congregation because of 'different views'. "Now I am equipped with more tools...Before I did not have the tools but today I have the Manual. I feel more confident and responsible to talk to them ... I am also using the learning in my preaching or sermons. I would love to run the lessons in my congregations but there are different views. I am giving out pieces of information example the Ten Forms of violence" (F&CL 10).

Other changes in attitudes that came about as a result of participation in the counselling courses relates to **gender equality and recognition that the power balance should change**. 58% of faith and community leaders (28% female and 72% male) participating in the course specifically mentioned gender equality principles in their interviews. "The counselling workshop helped me understand that (women should be treated equally)...I'm the head of the house but now I know that we should share our thinking and my wife has a right to make decisions (F&CL I). Another asserted that the "...training helped me understand that women and men are equal and that custom is not true and that the Bible says that we must give a hand to women" (F&CL 2).

A young community leader took his direction from the Bible to justify his changed attitude around gender equality saying that "... God created women out from a male from the side to be equal and not slaves...in my opinion chiefs are still holding on to this cultural idea that women are our wives and house workers, but we must change this mentality" (F&CL 22).



Long-term Outcome 1 Faith and community leaders and their spouses

have made changes in their own behaviour and are supporting violence survivors through appropriate counselling, the development of safety plans, linking to service providers and challenging unhelpful belief systems within their community/ congregation

Long-term Outcome 2 Faith and community leaders and their spouses

are working with perpetrators of violence to accept responsibility for their action and see violence as a choice

c) Changes in Behaviour/Outcomes

The expected changes in behaviour of faith and community leaders participating in the course include changes in their own behaviour as well as evidence of their practice of supporting survivors of violence, linking them to service providers, challenging beliefs in the community/congregation as well as working with perpetrators to change their thinking around violence.

It is possible to see **significant behaviour change** amongst the participating faith and community leaders and their spouses and non-participating spouses as well as among other course participants including stakeholders, service providers and WV staff. 74% (59% male and 41% female) of participating faith and community leaders and their spouses and non-participating spouses interviewed indicated that they had changed their behaviour and had stopped using violence. Three out of four spouses asked to confirm this assertion agreed. 5% of the leaders (50% female and 50% male) indicated that they were not violent in the first place. The remaining leaders did not mention

a change in their behaviour around perpetrating violence or did not answer the question. Of the nine WV staff participating in the course, 100% reported they had changed their behaviour with 89% stopping violence and 11% taking action to withdraw from a violent situation.

Several course participants indicated that they had changed their behaviour to avoid triggering violence in their partners. As a result of changing their behaviours, they were now experiencing less violence. This was not, however, changing the attitudes and behaviour of their partners but rather reducing the incidences of violence. "I have changed — I don't talk back to my husband so that I don't get more problems. I sing at home when he comes home so that he thinks I am happy and so then he is happy" (F&CL 6).

There is also evidence that **faith and community leaders have been providing support to survivors** of violence through counselling and linking to referral services. Three of the six women's groups (50%) reported that their pastor was providing support to survivors of violence and three (50%) indicated that their pastors were doing nothing to support the community. Of the men's groups, four of the six (66%) indicated that their leaders were active in support of the community in facing violence but two groups (34%) said their leaders were doing nothing. This indicated that 58% of communities are receiving support from their faith and

"I was a very violent person before the course but after I have changed a lot. I used STOP approach (Safe Time Out Please)" (F&CL 19).

This was verified by his spouse "Praise the Lord! He has changed in a big way" (F&CL 15).

"I can now manage my anger better than before... (I have changed the way)... I treat my children at home" (SH 6).

"I've changed my attitude towards teaching /disciplining my kids at home. It was challenging at first because it was a normal thing at home to discipline my kids by beating or smacking them. I tried to live what I learnt in the workshops but it was challenging at home at first" (WV staff 5).

community leaders to respond to violence and 42% indicate that there is no support being provided by their faith and community leaders.

This corresponds with the reporting by faith and community leaders on the referrals they make. 58% of faith and community leaders reported that they had been referring people to service providers (64% male and 36% female faith and community leaders). Women and men interviewed in the focus groups indicated that their pastors and community leaders were referring people to the Vanuatu Women's Centre, the Police, and the Vanuatu Family Health Association in Santo. In Santo, there had been 15 protection orders registered since the faith and community leaders had started as Authorised persons in January/February 2018 (STKH 1). This figure was for the whole of Santo but the program indicated that "...a lot of those came from South Santo" (STKH 1). One of the expected outcomes that was not realised fully was that only 2 out of 24 (8%) faith and community leaders interviewed mentioned that they had supported survivors to develop safety plans.

There were also indications that there may be cases that are not referred to service providers. In one community, the men reported that if a case is referred to elders in the church and "...if that person is a church leader, the case is well dealt with to ensure their reputation in not damaged" (MFG 9). In this same community, the men indicated that issues of violence would be dealt with internally until it happened three times and then the perpetrator would be reported externally. In response to a question about how problems are solved within a family, the men responded: "Apologise to the wife first, then to children and to the church. If the same issue happens more than three times then it can be referred to the law. The first process is to go through the chiefs. Church before it can go further to the courts" (MFG 9).

Faith and community leaders also reported that they were **challenging unhelpful belief systems** within their community/congregation, primarily through awareness, sermons and individual counselling. The main beliefs they were challenging relate to the position of women in their homes and in society (i.e. women's perception of their level in society- not considering themselves lower than men, equitable division of labour and gender roles, women's right to be heard at home and in the community, women standing at the front of the church and speaking or sitting where they want to, countering the idea of men's right to beat women because they have "bought" them through bride price).

They have also been challenging beliefs around the beating of children and how it is represented in the Bible. "It was awesome that they (leaders) were getting up and going against the tide. One was standing up to people about their attitude to violence against children and women. The whole village were disagreeing with him, so he was really strong. He has made amazing change in people" (WV staff 1).

There were only two faith leaders who stated that they have actively or subtly challenged strongly held cultural beliefs around separation."... I challenge people and some of the other pastors/elders don't agree with me – that separation is not necessarily against the Bible. That when you are married and you make the vow/ promises through good and bad times they must stay together. I ask them where it says that in the Bible. I disagree with them. That vow or promise is not good as it means that when a women is experiencing real violence then she can't leave a relationship – she must stay through the bad. It would mean that you could never separate and remove yourself from that violent situation. The congregation does not want to come and tell me straight that they disagree with me" (F&CL I). Another more subtly accepted that it is dangerous to women when some couples do get back together:"...originally I used to encourage them to get back together but now I'm not. I have learned from the training you can't put the victim back with the perpetrator, you leave them separate" (F&CL II).

50% of faith and community leaders (18% female and 82% male) have also made progress on working with perpetrators of violence, actively engaging with them to listen to them and counsel them on their behaviour, (F&CL 1, 2, 8, 13, 14); they have explained the law, human



rights and the effects of violence on children and family (F&CL 10, 11, 15, 16); and provided them with practical strategies on how to cool down (F&CL 4). They have prayed with them, shared Bible passages with them about marriage, explained how violence is against God's word and no one was made to be spoilt or abused (F&CL 16, 21).

Service providers

Output 3

Service Providers are starting to strengthen referral pathways to their services with relevant communities and congregations

a) Changes in Knowledge/Outputs

The expected outputs for service providers are that they be a) aware of and understand the faith-based approach that World Vision is using to address family violence and b) that there are relationships and connections established between service providers and faith and community leaders in the target communities. The service providers targeted by the evaluation included the Vanuatu Women's Centre in Santo and Port Vila, the Police Family Protection Unit and other Police staff and the Vanuatu Family Health Association in Santo. Other stakeholders interviewed included in Port Vila: Vanuatu Christian Council, Presbyterian Church Gender officer, Stretem Rod Blo Jastis mo Sefti program staff, Corrections staff, Staff of the Vanuatu Society for People with a Disability. In Santo: Vanuatu Disability Promotion and Advocacy Association, Anglican Mission, Police and Sanma Counselling Centre (sub-office of the Vanuatu Women's Centre).

Of the 14 stakeholders and service providers interviewed, 12 had participated in at least one of the three courses. II (73% female and 27% male) indicated an **understanding of the faith-based approach**: "The use of scripture to challenge people's views and attitudes around domestic violence" (STKH I) "it clarifies people's views and beliefs, behaviour and attitudes that are not in line with what the Bible says..." (STKH I). Two of the service providers indicated a concern that the Bible passages would be used to reinforce gender stereotypes and violent behaviour (SP 4&6). This was perhaps because neither had attended the full counselling program and so were expressing their concern from their previous experience of engaging with the church.

Service providers and leaders in at least two communities interviewed in Santo (33%) have **created connections** and developed strong relationships with each other – initially through meeting on the counselling course and then subsequently through working together on issues to resolve or prevent violence. In one community the SCC and the Police FPU "... have come to the village for awareness, they are now friends - we have a good relationship with them all" (F&CL 9). Service providers and communities or congregations in Vila have also made some connections. The VWC has connected with two communities in Port Vila (33%) where one faith leader is a board member of VWC. The remaining communities indicated no particular relationship had been developed.

The VWC, Police and Corrections staff indicated that the counselling program had provided them with **more tools and skills to do their job** in countering and responding to violence in the communities."...These workshops have equipped us with more skills to use...same as chiefs/ church leaders in the communities to step up, maybe we're not performing enough. It also causes a change in us personally." (SP I) As a result of participating in the course we have developed a "...new manual involving information from the WV counselling training...I am also...applying the training knowledge in my community too. I have helped people with violence issues, especially young couples" (STKH 5). The course "...helps me a lot in running the programs with the inmates. Through this counselling skills course, we have improved the Anger Management Module which will be used in the Correctional Centre and in other communities too. The information helped me to run awareness to the inmates on what are the causes of violence" (STKH 6).

Short-term Outcome 3

Service Providers are starting to strengthen referral pathways to their services with relevant communities and congregations

b) Changes in Attitudes and preliminary behaviour/Outcomes

The outcomes expected in the short term were strengthened referral pathways to services. 75% (67% male and 33% female) of the faith and community leaders indicated that they had or would **refer people in their communities in need of help to four main service providers** (Vanuatu Women's Centre, Police, Vanuatu Family Health Association and the hospital/clinic). The Vanuatu Women's Centre was the most frequently mentioned service provider with 78% followed by the Police (67%), Hospital/clinic (33%), and Vanuatu Family Health Association (5%).

Many of the leaders also talked about internal referral to a chief, pastor or other leaders within the community prior to making a referral to outside service providers. Some faith and community leaders reflected on the difficulties of engaging with the Vanuatu Women's Centre due to beliefs within the congregation about the service: "Men hate the Women's Centre, they give restraining orders. I don't refer people to VWC" (SPII). Four of the leaders also mentioned referral to the Authorised Persons who are present in the rural communities in South Santo.

The counselling course has initiated relationships between the service providers and the faith and community leaders in Santo. Both the leaders and the service providers cite incidents where they have engaged with and called upon each other for support or service provision. The service providers' presence (VWC, Police, VFHA) has provided solid back up, particularly for the work of the Authorised Persons. The faith and community leaders and the service providers developed their relationships through the counselling course, resulting in further engagement, such as VWC providing gender-based violence training to communities in rural Santo.

Another short–term change that has been identified by service providers and stakeholders who participated in the course relates to a **change in attitudes regarding gender equality.** Participants indicated that "The workshop is a challenge to people's...custom belief that...define roles for females and males but they're just beliefs ... men can also do the washing and women can also cut firewood" (SPI). "I used to think that violence was a normal happening of life, that the man was higher than the woman but now I see them more in equal terms" (SH6).

Long-term Outcome 3

Service Providers have developed strong connections with target communities and are providing services where requireds

c) Changes in Behaviour/Outcomes

The long term expected outcomes are that service providers have strong connections with the target communities and are regularly providing services. The findings indicate that **some strong relationships** have developed wherein leaders and service providers have engaged with and called upon each other for support or service provision, particularly in Santo's rural areas. The service providers' presence (VWC and Police,) has provided solid back up for the work of the



Authorised Persons. These relationships have also resulted in further engagement, such as the WVC conducting a training program on gender based violence within one of the target communities. This was not part of the World Vision program, however it resulted from relationships developed between community leaders and service providers during the counselling course.

In the urban areas, the VWC indicated that they had connections with two of the three urban communities in Vila. They indicated that these relationships have been developed outside of the course.

A small number of community members (both male and female) in the **target communities feel the VWC and the police are a threat to family** unity by supporting women to access restraining orders: "If you compare men and women, women have more rights than men and at the same time the VWC also stand and advocate women's right. It is also going against the Bible which says man is the head of the house." (MFG 7) Women in another focus group also indicated that they did "...not trust the Police and the justice system". They said that they felt that the courts could be unjust, making the "victims become worse victims" (WFG 5).

It is possible to see that the relationships developed between the Corrections staff and the World Vision staff has resulted in positive changes for inmates in the correctional system. As cited above in the outputs section, as a result of participation in the course, Corrections staff have increased knowledge, confidence and skills to do their work. They have enhanced a new Anger Management Module for their rehabilitation course based on the contents of the WV Counselling Course training (STKH 5&6). Staff indicated interest in developing the relationship with World Vision and the program further and in having more corrections staff attend the counselling courses.

It is clear that health, justice, counselling and protection **services are being provided to the communities** in South Santo. It is not clear from interviews whether there have been any services provided in the urban areas as a result of awareness or relationships developed through the program. Staff of the Stretem Rod Blo jastis mo Sefti program indicated that since the Authorised Persons program had begun at the start of 2018, 15 temporary protection orders have been given out and that many of those were from the three authorised persons in South Santo who had participated in the World Vision counselling program.

Survivors of violence

Output 4

SUPVIVORS of Violence are aware of their rights and ways to protect themselves and services available and how to access the

a) Changes in Knowledge/Outputs

The expected outputs for changes in survivors of violence include: increased awareness of the right to live free from violence, ways for survivors to protect themselves, and an awareness of available services, as well as how to access them.

Across all community focus groups interviewed, women and men were able to describe five different types of violence: physical, sexual, emotional, financial and spiritual. All 12 groups identified physical violence, five identified emotional violence (4 male, I female), five identified sexual violence (4 male, I female), two identified financial violence (I male, I female), and one identified spiritual violence (I female). 76% of women in the focus groups **identified that violence is against the laws of Vanuatu**, however the majority of women in the groups (83%) still struggled to identify which law dealt with family violence. Only one woman in each of the 5 groups (16%) had heard of the Family Protection Law and was able link this law with the Family Protection Unit and Vanuatu Women's Centre. However, the referral services identified by the women and men's focus

groups indicated that most **women were aware of different options for support available** when they experience violence. Three of the six men's groups did not answer the question. Responses included Police, Vanuatu Women's Centre, Chiefs, Authorised Persons, Registered Counsellors, hospital, faith and community leaders and the Court.

Groups indicated that the **process for accessing services** generally went through the community leaders, with five of the six women's groups citing the chief as the first person they would contact in an incident. Four out of the six women's groups said they would also contact the pastor, three out of the six groups indicated that they would call the police. One urban women's group said they would go straight to the VWC and another indicated that they would run to the neighbours to seek protection. One of the groups reported that even if they went directly to the police the police would often not arrive and so **alternative processes** were put in place. "Last week we had an incident of violence after church where a husband hit his wife's head with a building tool. We called the police, who did not show up so we also called the ambulance. She was taken to the hospital and soon after a report was filed. He was arrested very soon after, by the Police" (WFG 5).

The other side of that story demonstrates that no women's group had a **safety plan** and only two of the 24 faith and community leaders (8%) had worked on safety planning with their communities or congregations: "We do not have anything in place to help us in future situations. Sometimes I don't expect it to happen so I don't have a plan or strategy. For example at one time I was washing and my husband was drunk all night and came back home in the morning. He saw me washing and he just came straight to me and beat me up with no reason. I run away to my neighbour but he followed me and hit me again with a spade" (WFG 4).`

Short-term outcome 4

Survivors of violence are accepting that they should not be subjected to violence and are developing safety plans and becoming familiar with available services

b) Changes in Attitudes/Outcomes

The short term outcomes expected were: survivors accept that they should not be subjected to violence, develop safety plans, and are familiar with available services. Attitudes amongst women in the focus groups regarding justifications for violence are consistent with the national survey results conducted by the Vanuatu Women's Centre in 2011.6 56% of group members indicated that there are **times when a woman should be beaten** (compared with 60% national average). Women in two of the urban communities surveyed in Port Vila blamed women for drinking too much kava, clubbing and returning home late and said that their husband should teach them by beating them up (WFGD 5&6).

As discussed above, none of the women's groups or faith and community leaders reported having a formal or detailed **safety plan**. All groups indicated that they were **familiar with available services** citing the Vanuatu Women's Centre, Police and Authorised persons.

National Survey on Women's Lives and Family Relationships p. 55

⁶ Vanuatu Women's Centre, 2011, https://mjcs.gov.vu/images/research_database/Vanuatu_National_Survey_on_Womens_Lives_and_Family_Relationships.pdf,

Long-term outcome 4 Survivors of violenceare using safety plans and accessing services when required

c) Changes in Behaviour/Outcomes

As discussed above none of the communities interviewed indicated that women were **devel-oping formal safety** plans either supported or not by faith and community leaders. This was verified by faith and community leaders, most of whom did not mention formal safety plans. Many women indicated where they would go in the event of violence, however it was not a formal plan as described in the counselling course.

There is some evidence that women in some communities are **accessing service when required** however it is difficult to determine whether or not this is as a direct result of the course. In communities that have an Authorised Person, women are approaching those leaders to seek support."...(up to)...10 women who are victims of violence have come to seek help from... (the AP)...Women are coming to seek help" (MFG 12). Following the awareness provided in one community there has been an increase in reporting of violence."...after awareness more cases are popping out in the community" (F&CL 19).

Perpetrators of violence

Output 5

Perpetrators of violence are understanding that they are responsible for their actions and that violence is a choice

a) Changes in Knowledge/Outputs

The expected outputs for changes in perpetrators is an understanding of responsibility for their actions and the fact that violence is a choice. As discussed above, there has been significant acceptance within the participants of the counselling course of the responsibility for acts of violence against female and male partners and children. Within the broader congregations and communities where faith and community leader course participants live and work, people are indicating that they understand that violence is a choice. When asked if they thought that men could **choose to control their violence**, four of the six men's groups agreed. Two of the men's groups recorded no answer to the question and unfortunately the women's groups were not asked the question.

One group participant indicated that responsibility for violence was not so straightforward and that they felt there could be an **excuse for lack of control**: "Violence sometimes can happen very quickly in response to our home situations. Sometimes it will happen very quickly and a very short time" (MFG 7).

Community members highlighted a **lack of knowledge about the law and the different types of violence** and a fear of the Family Protection Act (MFG 12). Men in one of the focus groups indicated that they were aware of physical violence but were discovering that there were many other forms of violence, such as sexual violence (MFG 7). Men in one of the communities also indicated that they could not really answer the focus group questions because their faith and community leaders had not done any awareness following participation in the course: the "information covered in the counselling skills is not reaching the congregation's members" (MFG 10).

Short-term Outcome 5 Perpetrators of violence are accepting responsibility for their actions

b) Changes in Attitudes/Outcomes

The expected short—term outcomes for perpetrators is that they take responsibility for violent action. This has been possible to identify in course participants who realised their actions were violent and apologised to their family members for their behaviour, asked for forgiveness and committed to change. It is possible to see from the community focus groups to what extent there have been any changes in community attitudes around gender-based violence.

The evaluation team found that despite some individual change in two rural communities, **traditional attitudes persisted** across all men and women in target communities. These attitudes and norms include: control of women's behaviour through clothing restrictions, using women's dress as an excuse for violence, believing that the focus on women's human rights diminishes men's right to maintain the status quo, maintenance of traditional gendered roles, and the responsibility of the parent to discipline children through violence.

Men in one of the focus groups stated that his church preached gender equality but he then proceeded to explain that violence in their community resulted from the **way that women dressed:** "The church preaches unity; proper dressing also contributes a lot to reduce violence. (We)...need to address culture of dressing that leads to violence. The church has very strong policies in clothing... (and we)...ensure that they are respected" (MFG 8).

Women in one of the urban focus groups expressed the need to balance men and **women's rights**: "The women's flag seem to be flying so high this days ... (in reference to women's rights)... but we have to consider also the men's side of the story on an issue" (WFG 6). Women from one group asserted that within the home and family "...a man must know his position/duties in the home. The woman too must know her position and **role/responsibilities in the home.** Not knowing so results in problems" (WFG 5).

One woman from one of the urban focus groups said "I'll whip my child because I love them. Love has the action and teaching component. I have to whip them if they've gone too far. The whipping is only for the purpose of teaching" (WFG 5). "When **correcting children**, parents must correct with a good heart. There is a limit, train up a child 'use a stick to correct him/her'" (MFG 9).

Three of the six men's groups asserted that it was not ever right to use violence then qualified their statements that **violence could be justified** if there was trespass on land (MFG 12), discipline required (MFG 7) or simply that violence should be done with "...clear conscience" (MFG 9).

Two of the men's focus groups remained **suspicious of the Family Protection Act and the justice system**, indicating that they thought restraining orders provided "victims with the opportunity to separate from their partner (MFG 12) or "find a new partner during the order period (MFG 9). Another community, however, indicated that **perpetrators should go to jail** "...in order to learn from their mistakes and so that others will also learn from the process (MFG 11).



Long-term Outcomes 5

Perpetrators of violence are changing their behaviour and not using violence to solve problems

c) Changes in Behaviour/Outcomes

The expected outcome for long-term change is that people are no longer using violence. As identified above, 74% of all participants of the course interviewed indicated that they were no longer beating their partners or their children. The focus groups have indicated that there has been some change in the behaviour of community members in two rural communities as a result of the work of the faith and community leaders to change attitudes around violence. Within the other communities there is little evidence of any behavioural change in community members who haven't participated in the counselling program. Changes that can be seen in the two rural communities include: reduction in physical and sexual violence, potential increase in financial violence against women, increased use of the justice system through the Authorised persons and introduction of community by-laws on violence and increased use of service providers to respond to situations of violence.

One community reported that **physical and sexual violence had reduced** in their community due to the work of the faith and community leaders (WFG3, MFG 12). The men felt that the difference was significant, however the women indicated that the change had been minimal. Men in the same community indicated that there was **an increase in financial abuse against women** resulting in their loss of access to kava gardens (MFG 12). This was not mentioned by the women's group.

In another community, the women's groups reported that there has been a **significant change in family violence and the behaviour of perpetrators** in their community. "Previously there had been a lot of arguments but now there is no more... the community has become quiet. The use of marijuana has also reduced because the chief has destroyed the marijuana garden" (WFG 2). This same community has developed a set of community/village by-laws to regulate community behaviour. The women report that "Meanwhile the boys are already changing their bad behaviour because they know what's in the by-law" (WFG2).

Another change in behaviour noted in these two communities was the change in how disputes in the home are resolved. "Before we used physical violence a lot to solve home issues between husbands and wives but today **we use our Authorized person and pastor** for help" (MFGD II). Community members indicated that the formal justice system engaged effectively in only two of the six communities targeted. In all of the other communities only one other faith or community leader was reported to be passing on the information gained through the counselling course to congregants or community members.

8. Discussion

8.1 Relevance and appropriateness of the approach

The Counselling approach is **highly relevant** in the Vanuatu context due to a variety of factors. These include the extremely high levels of violence against women and family violence. They also include gender norms that value men's dominance over women and acceptance that men have the right to prescribe and control women's behaviour, coupled with persistent attitudes amongst women themselves that it is appropriate for women to be beaten. There is also an acceptance of corporal punishment as an appropriate, accepted and biblically endorsed tool for the disciplining

of children. The national gender equality policy imperative to reduce violence against women and girls, coupled with the difficulties many, especially those in rural areas, face in accessing protective, justice counselling and health services, are other factors contributing to the relevancy of this approach.

"The faith approach has helped the program to go well. Vanuatu is a Christian country - if you come and talk about something outside my faith and culture then it is hard to listen to: this program works well because of the faith-based approach. Right now faith leaders use approach and that is why they are with us" (WV staff 6).

The approach is highly appropriate in the Vanuatu context due to the high percentage of the population (83%) who follow the Christian faith. The influence of the church on community attitudes is strong, hence using a faith-based approach facilitates acceptance and engagement on gender issues. One of the key issues in responding to gender-based violence is the perceived endorsement in the Bible of men's control over women's behaviour, and both men and women's control over children's appropriate behaviour. Working with faith leaders is particularly key to changing cultural attitudes in Vanuatu. It is therefore highly appropriate that faith and faith leaders are utilised to break down these attitudes.

The approach uses strategies to engage both women and men together to create a healing environment. Traditional thinking on facilitation might cite that women would not feel safe or comfortable engaging with their partners on issues of violence. Since the process examines family violence as a whole, however, there is a more encompassing sense of perpetration and responsibility hence no one is singled out.

The approach is also appropriate as it utilises formal and informal community structures for dispute resolution, supporting leaders both male and female with increased skills, knowledge and tools to help their community and congregation make changes. It is also the only approach that supports men to stop perpetrating violence, engaging them as part of the solution to the problem as the most effective way to create change.

The counselling skills approach acknowledges the reality of absent or overloaded formal services, for women who have experienced violence. This is especially the case in rural communities. It takes into account the important role of faith and community leaders as initial counsellors, service providers and referral sources. The approach has worked to develop relationships between these faith leaders and professional service providers and to reduce suspicion around the motives of service providers, (in particular the VWC).

8.2 Effectiveness of the approach

There are many aspects of the approach that render it effective in achieving outcomes and impact. There has been clear positive personal change in most of the individuals who have participated in the course, as discussed in Section 7. Some of these faith and community leaders have also managed to influence change in the behaviour of their community/congregation members, creating increased well-being for women and children. The majority of faith and community leaders have not been able to translate the changes in themselves into similar changes within their communities, however the program is still in its infancy and with more time it might be possible.

Factors that render the approach effective include: the use of faith, the introduction of gender equality concepts in the context of the Bible, and engagement with the formal justice systems through the police and the Authorised Persons program. Other success factors include the targeting of both faith and community leaders and spouses as enablers of change in communities,



engagement with communities that have a clear system of authority or have one principal religious denomination, and the development of close relationships with service providers. Other factors include the skilling up of faith leaders in group facilitation, gender-sensitive interpretation of scripture, and simple counselling skills. Factors that make the approach ineffective include the lack of course participant selection processes which lead to training faith and community leaders who may practise violence themselves, training materials which are confusing or inaccessible to certain course participants, lack of transmission of the lessons to congregations or communities, and working in more complex, less homogenous environments.

Faith is utilised to connect people to the program and to engage them in questioning norms around gender equality and attitudes to violence, especially as represented in the Bible. Rooting the course in the Bible and faith validates it in the eyes of its key target group (faith and community leaders) and key impact groups (community members). Faith speaks to the course audience in a language and with concepts they connect with and that are relevant to their lives. It provides key support and tools to faith leaders to be able to respond to immediate issues within their congregations and communities. World Vision staff indicated that "...when our leaders come to participate each of them comes to understand that this is already what is happening in our churches all along, except the cultural norms, and the misinterpretations that are been preached for far too long in our churches" (WV staff 4).

The **engagement with the formal justice system** through the Authorised Persons program and police engagement has heightened awareness of the potential sanctions for physical violence. The men, women, faith and community leaders in these communities have indicated that people are frightened of the APs and the police. One of the faith and community leaders indicated that he felt that perpetrators of violence were now fearing retributions for violence more than in the past: "The physical violence may not have gone down, but men have fear and respect - they are thinking more. It is a small awakening around the issue. We still need more counselling." (F&CL 9).

This was verified by a spouse of a leader in the same community who indicated that "...some had changed their behaviour, some have only changed a little bit." (F&CL 15). The men's discussion group noted both a decrease in physical violence and a corresponding increase in financial violence in one community (not mentioned by the women's group in the community). If financial violence is occurring in replacement of physical violence, this could indicate that attitudinal change to power and control continues to require deep and sustained effort.

The counselling course has also been **beneficial to the participants of the AP program.** Some of the APs chosen were those who had already attended the WV counselling course. The skills they acquired in the course were beneficial to them in their new role: "The APs who have done the... (World Vision)...training get the concept quickly because the WV counselling course looks at changing values and that is important" (STKH I).

Another factor regarding program effectiveness has been the selection in the first round of individual **faith and community leaders** to participate in the pilot program. Leaders who are respected in their communities and perceived to be working hard and who have transformed their own behaviours and attitudes regarding violence have been more effective in engaging their communities in attitude and behaviour change. In other communities where the leaders are practising violence, not spreading positive messages through their sermons, and are not highly respected, few if any changes can be perceived. One key informant stated that there was nothing happening in the community due to the fact that no information was being shared nor action taken by those faith and community leaders who had attended the counselling workshop. They reported that the one faith leader who was taking action and sharing learning had been transferred to Port Vila. The evaluation team found that several of the leaders targeted had been transferred to another community as is common in the church. Pastors traditionally do not stay in one community more than a few years as it is part of their ministry to rotate out, hence there is no guarantee of long term leaders

who will continue to reinforce the messaging from the course.

The program has had a greater impact and effect in **structured communities** with clear lines of influence and authority. In urban areas, where the communities are more complex and less contained geographically and demographically, there has been less change observed. In rural areas with a village structure in place through which church and chiefs hold clear roles in conflict resolution, the impact of changes brought about by the counselling course are more clearly discernible. It appears to be easier for faith and community leaders to introduce concepts that challenge the status quo and social norms in rural areas. Urban areas are much more multi-faceted, with communities being made up of people from many islands and congregations. There is less clarity in terms of who has influence or authority over the behaviour of the community "...almost everybody is a so-called chief, which makes it very hard for our community to setup a services provider in terms of violence" (MFG7).

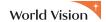
A key factor influencing program effectiveness has been the **development of close relation-ships with service providers.** This was enabled through the service providers and faith and community leaders participating in the counselling workshop series together and then maintaining and building on their relationship, working together to resolve issues of violence in their communities. This has been particularly effective in rural Santo, where further training of communities in gender based violence has resulted. Some relationships in the urban areas have resulted in positive change. For example, the Corrections Department utilised the knowledge and skills gained from the course and developed an Anger Management Module for their Rehabilitation Program for inmates citing much of the material from the World Vision counselling course. In Port Vila, the relationships between service providers and with communities have not been as clearly cooperative. For example, the evaluation found that many faith and community leaders continued to express suspicion towards the VWC. Leaders misunderstood and sometimes furthered the erroneous notion that the WVC was a "divorce office," and that the principal goal of the VWC was to encourage women to divorce their husbands.

The final factor influencing program effectiveness is the **capacity of individual leaders to pass on the messages** of the course. The education levels of the participants, their understanding of gender equality, and the quality of the course delivery and materials have all influenced this. World Vision included more information on gender and gender based violence to provide participants with a better understanding of the issues. Participants struggled with the Bislama translations in the early courses, which were improved over the next few courses. Most course participants indicated that they felt confident to share the messages of the course, whilst a couple expressed their concern that they were not confident to pass on the course messages. Over the period of the project, course materials have been improved to support participants.

8.3 Sustainability of the approach

The aspects of the approach that promote sustainable, durable change are: I) the focus on the fundamentals of major shifts in thinking around both gender relations and faith and how people interpret the messages relating to gender equality and violence within their faith, 2) the engagement with external actors and systems to provide both support to survivors and consequences to perpetrators, 3) seeing evidence of personal change within respected authority figures and 4) engaging the spouses of faith and community leaders in the process of change.

Challenging fundamental aspects of a person's identity, their cultural and social norms, and identifying new ways of thinking and behaving is the key to sustainable change. The counselling program focused on these issues throughout implementation, ensuring participants had a good understanding of gender norms in order for change to take place in both their thinking and behaviour. There has been evidence of many individual faith and community leaders (58% of leaders doing the course (28% female and 72% male)) adopting new attitudes to gender equality and rein-



forcing these ideas through the Bible, which has provided the "evidence" for gender equality. Unfortunately the leaders are struggling to shift gender norms within their communities or congregations where attitudes remain fairly entrenched.

As identified in the findings section, the approach has created considerable **transformational change in individuals** whose fundamental values and beliefs have been challenged and who have changed their behaviour. In some cases, this transformation from perpetrator to exemplar of gender equality and non-violence has demonstrated to members of a community/congregation that change is possible within their faith. (WFG 2) **Respected leaders who have transformed** and now practice gender equality in the home (showing respect for their wives, treating them as equal partners, not using violence in their own personal lives) have exemplified good behaviour to others.

As discussed above in the effectiveness section, however, there is some evidence that where the behaviour of faith and community leaders does not reflect the lessons they are preaching with regards to gender equality and non-violence, respect is lost, lessons lose their impact and change is not sustainable.

Discussing how the Bible does not condone violence and gender inequality has **reinforced the message on a regular basis** and has contributed to changed attitudes in congregations and communities. In one of the communities where significant change has occurred within the individual leaders and within the community members, two of the leaders suggested that having external trusted actors come to the community to talk about the issues would help to reinforce the message: "We need more workshops - need to come to the community to do the workshop. People are sick of listening to the same people - they need someone from outside to talk about it" (F&CL 15).

The program has also worked to reinforce the importance of not using violence to solve disputes within relationships, **by engaging with external support services** for survivors (counselling, health, and police). Engaging with external service providers brings these issues into the public sphere where behaviour is condemned and consequences are enforced.

The development of relationships between service providers and the faith and community leaders during the counselling workshops, particularly in Santo, has led to the development of an excellent working relationship between communities and service providers. This has resulted in more engagement including the conduct of a gender based violence workshop for community members by the Vanuatu Women's Centre (SP 5, F&CL 14).

Working with both faith and community leaders and their spouses has reinforced the message of gender equality and recognises, respects and builds upon the role spouses currently have in providing support to community members. Practically, it doubles the resource people available for those seeking support in a community, and gives women the option of having a woman to go if her faith and community leaders are male.

The **Counselling Approach model** itself involves three weeks of intensive personal change for participants over a period of approximately nine months and is facilitated by an international consultant with local staff. The program has had teething problems with translation and use of international examples but these have been resolved sufficiently as the program has continued. This model in its current form is only sustainable if current staffing and funding models continue.

The current lead facilitator and creator of the course, who is highly experienced in family violence counselling from a faith-based perspective, is one of the two key factors in the success of the program. The other factor is the co-facilitation of a highly respected Ni-Vanuatu Pastor with skills

in teaching and facilitation. Staff have been trialling different approaches with the idea of passing on the facilitation of the program to local staff, however this is a challenge due to the lack of qualified counsellors who have a clear understanding of gender and gender-based violence in Vanuatu. To promote sustainability of the model, a clear succession plan that involves replicating those skills, experiences, attitudes and respect is required.

Many stakeholders have suggested that in order to have greater reach and improve potential for sustainability, the **program should be included in Theology and Bible Colleges throughout Vanuatu** through the endorsement of the Vanuatu Christian Council and the head of individual denominations at the national level. This would allow the concepts to be embedded over a longer period of time and would allow engagement with potential new faith leaders early in their development. "We want to see the Counselling Skills Module be recognised... (by the)... Vanuatu Christian Council and run the program through the registered churches" (MFG 8).

Stakeholders also suggested working through the churches who have established violence and gender programs as another means to sustainability: "WV has the counselling approach which we do not have but we have the people, especially to sustain WV's program. WV could give us this part we're missing (counselling technical skills) and we could work together" (STKH 10).

8.4 Strengths and weakness in project design and implementation

The evaluation team noted the following strengths and weaknesses in project design and implementation:

One strength of the project design is its **adaptive programming** approach- CoHG did not initially include a counselling element, however the WV office in Vanuatu realised the need for this and developed a program geared towards faith and community leaders. A weakness in this plan was the lack of a clear theory of change for the approach in order to be able to measure progress on expected outcomes.

Another clear strength of the approach is that it **engages men**, in the form of faith and community leaders. There is a clear need, which is globally acknowledged, to engage boys and men on GBV issues, and this holds true for the Vanuatu context. Due to the fact that most faith and community leaders, who are the attendees of the workshop, are male, the counselling workshop engages a key group of influencers and norm changers. There is also no other counselling program in Vanuatu that the evaluators are aware of that works with men on norm and behaviour change. Engaging men in reducing GBV is key to this work; so the project should be applauded for this.

One weakness (which can also be a strength) of the program is the **reliance on volunteer roles.** This is a strength in that using faith and community leaders capitalizes upon their existing roles within the community, and on their clout as key opinion makers and influencers. The weakness of this approach is that these community leaders are already wearing many hats and may have limited time and energy to devote to implementing the teachings from the counselling skills workshop. Their multiple roles as community leaders and organisers can be both an advantage and a challenge to furthering this work.

One weakness of the project implementation is that it is hard to ensure **consistency of the messaging** after the course, as faith leaders might reinterpret or deliver the messages they received differently and potentially pass them on to their communities in ways that could be detrimental. Much trust is put in the leaders and course participants to relay the messages responsibly and appropriately, and this entails an assumption that they have properly absorbed and taken on board the messages from the counselling workshop.



Encompassing the above issue of consistency of the messaging, the question of ensuring **program fidelity** is a potential weakness in relation to project implementation- as only a small number of people (albeit community leaders) are being trained - and it is difficult to ensure the trickle down or ripple effect of such training to the wider community. The project's success is heavily reliant upon the faith and community leaders, and if they move on, change the messaging or do not take up the work, the project risks faltering in those communities.

The design element of **spousal engagement** should be commended, as it acknowledges the important role of spouses (usually female) of religious and community leaders in regards to GBV. The spouse of a religious or community leader can be the first port of call for a woman in the community who has experienced violence and is seeking anything from emotional support to legal remedy and access to formal services. Though these spouses are often approached, there was little formal acknowledgement of this informal role that they play in the community and in the provision of services in regards to GBV.

The evaluation found **limited participation in program design** of WV staff and community members or congregations. The evaluators recommend that the design of the next phase of the program should include more effective participation of WV staff and other stakeholders in process.

The project aimed to practice **do no harm principles** for women and children. The workshop organisers stated that there were no incidents that were disclosed to them and that they had articulated a duty of care to the participants. The course content included safety planning, and harm minimization, ensuring that the safety of women who have experienced violence should be the primary concern, emphasizing that this was not simply about women leaving. Course participants were taught to understand the cycle of violence and to recognize wind up signs in themselves, and given strategies to cool down to avoid violent behaviour.

These risk mitigation strategies formed part of the course learning but also part of the duty of care of the course organisers to the participants. They aimed to ensure the safety of those in the course and to avoid any potential for re-traumatization. The course facilitators and World Vision staff who attended the course met daily after the courses to discuss any issues that had come up during the day to try to mitigate any issues going forward. All staff attended the inception workshop as well as course transitions. Staff also stayed after the training to speak to participants and check in on how their day had gone in order to mitigate any potential problems. Confidentiality was paramount, and was reinforced throughout the course. A team of staff worked together to put the module and materials into Bislama and ensure they were appropriate.

Lack of a theory of change and detailed clean quantitative and detailed quantitative **monitoring information** has not provided a clear picture of the program progress for evaluators. The team should develop a theory of change and strong monitoring and evaluation information management system at the commencement of the next period.

8.5 Risks

Burnout for faith and community leaders is one risk for the project. Often the course participants are faith and community leaders who serve several leadership functions in the community. This is especially pertinent to the case of Authorised Persons. The counselling these leaders are providing and the difficult material they are dealing with can cause secondary trauma and burnout.

Related to the above risk, the **lack of professional support** for the leaders providing counselling training could result in burn out, vicarious trauma, and an inability for the leaders to keep supporting their community in regards to GBV or to providing spiritual leadership and pastoral care. WV has a duty of care to provide support to faith and community leaders.

Potential for danger to the leader, divided loyalties and **conflict of interest** are all real possibilities in small communities. This is especially true for the case of faith leaders who are authorised

persons and are known leaders in the community and related to many members of their village yet are responsible for providing restraining orders to members of their community, or to enabling victims of violence to access services (often accompanying these women themselves).

Also a challenge with regards to sustainability, the **potential lack of consistent messaging** in terms of what faith leaders then relay to their community, (i.e. the risk of the messages from the counselling workshop being diverted) is a real risk as it is impossible for WV staff members to ensure the messages from the training have been properly absorbed and are being responsibly passed on.

8.6 Disability and Gender

Disability: Throughout the Pacific region, women and girls with disabilities are disproportionately more likely to experience violence. They experience disproportionate levels of family violence, they are two to three times more likely to be victims of physical and sexual abuse, and ten times more likely if they have an intellectual disability. It is estimated that of girls with an intellectual disability between 40-70% will be sexually abused before age 18. Women with a disability are not only more vulnerable to violence and abuse, but also to neglect. Another tragic interplay between women and girls with disability and violence is that a number of women and girls become permanently disabled as a result of violence.

Comprehensive accessibility is fundamental for the full inclusion of people with a disability. Removing 'disabling' barriers and ensuring comprehensive access plays a significant role in creating opportunities for people with a disability to participate in development programs. The specific identification and removal of barriers (physical or environmental, social and attitudinal) is the essence of accessibility as a guiding principle.

The evaluation found that the counseling skills project did not fully integrate people living with a disability, and could have done more to foster the participation for people with a disability. It is important to keep in mind in any critique of the project's integration of disability, however, that these access and integration issues are much larger and some go beyond the project's remit. So-cio-cultural factors, prevailing norms and poverty all contribute to the continued marginalization of people with a disability, however the project could do more to mitigate these factors and in so doing, can help to change social norms not just around GBV but potentially also around persons with a disability.

Women and girls with disabilities are the most vulnerable to gender based violence and sexual assault. Some perpetrators simply take advantage of the inability of some women and girls with a disability, especially an intellectual disability, to consent to sexual activity. The evaluation found at least one incident of a faith leader who had an erroneous perception of consent by women with an intellectual disability. That faith leader said the rape of a women with an intellectual disability was not a rape because the sex was consensual. In one community, a community member had been arrested and jailed for sexually abusing a girl with a disability. This case appeared to be well known in the community.

Some communities said they did not have people with a disability in their communities but if they do have someone with a disability they invite them to join programming. The leaders and community members often said that though they are invited, the person with the disability usually stays in the house. Some community members said they visited homes of people with a disability as part of the church programming.

Some World Vision staff members stated that more people with a disability should be involved in the course. They suggested that the World Vision bus could pick up and drop off people with a disability so facilitate their participation in the course. When people with a disability are invited to the counselling workshop it's important that World Vision know what type of disability they have in order to ensure that the messaging is provided properly for them. World Vision should also look for venues that are accessible and comfortable for everyone including people with a disability.

Some course participants cited Bible passages which resonated and made the argument well



for the fact that everyone, including people with a disability have a right to be free from violence. Passages such as "we were all created equally in God's image" and "no one was born to be abused" were cited. Indeed one service provider who works on disability issues noted that many people with a disability are being discriminated against and face violence and abuse in their communities, and that violence can in fact cause death and disability. She also noted positive changes in her family as a result of the course. She spoke about the need for enhance collaboration between DPAs and the VWC/SCC, as currently her DPA is not referring cases to VWC/SCC. She proposed a joint workshop with SCC and DPA. The SCC/VWC staff could be better trained to support people with a disability.

Gender: Faith leaders and their spouses were invited to the workshop as an acknowledgement of the important leadership role that the spouses of faith leaders play in the community. The majority of the faith leaders in Vanuatu are male, and their spouses, female. This was reflected in the course participants. In some instances faith leaders attended but without their spouses. It is important to equip faith leaders, including male faith leaders, with counselling skills as they are key influencers, counsellors and opinion makers in the community. Frequently, however women often feel more comfortable seeking advice from another woman and so go to the spouse of the leader rather than the leader himself. It is therefore important that World Vision continue to encourage spouses of faith and community leaders to attend the course together.

The course should be commended in that it engages with men on GBV and related issues. Advice and support for men who use violence is limited, and this course engages with men in a way that is relatively unique to the Vanuatu context. The VWC has a program to develop male advocates, however it does not work with men to teach them skills to stop their own violence, and it focuses on the law. The counselling course is a strong example of adaptive programming, however there has been criticism that the organic development of the program has led to haphazard gender engagement.

To understand how the program is working towards transformative gender change, it is important to assess change in the areas of I) individual capacity development and agency, 2) changing relations and 3) transforming structures. This program is working to increase the capacity of faith and community leaders, female and male, to have increased knowledge, skills and capacities in gender equality, and understanding types and effects of violence and strategies to support change. It is working to instil high self-esteem, confidence and behaviour change amongst course participants, especially with regard to division of labour and gender roles.

The course aims to influence relationships, fostering respect between individuals (men and women), reducing blame and allowing both sexes the space to talk. The course's teaching around gender equality can encounter resistance by some members of the community who do not want to engage in discussions on women's rights. The course aims to foster communication and increased trust between husband and wife, hoping that if religious leaders can improve relationships within their own home, they can then role model and teach this behaviour to others. It also teaches the importance of voice in decision making for women.

In terms of external structures, the course aims to promote higher status and increased decision making for women in society, as well as good quality service provision for the protection of women and children. It aims to promote shared roles and responsibilities between women and men and between girls and boys and shared decision-making within the home and community. The course is working to instil the valuing of women as leaders in the community structure (including as Authorised Persons) and to giving voice and space to women. The overall societal and institutional structures, however, often remain very hierarchical and male dominated (especially Church and Correctional structures).

9. Conclusions

The evaluation team's conclusions according to the evaluation objectives and key questions:

9.1 Knowledge, attitude and practice changes (achievement of expected impact, outcomes and outputs)

The counselling skills approach has achieved many of its stated **knowledge, attitude** and practice changes in its key target group – the faith and community leaders. 74% (59% male and 41% female) of workshop participants indicated that they personally had stopped using violence within their own families. The impact of this change on families has been reported as very positive and women in particular indicated that they were no longer being beaten and felt "100% better." Faith and community leaders and other course participants have changed their attitudes to violence and gender equality and some are changing gender norms in their households and communities - a considerable achievement.

At this early stage, the project has yet to achieve many of the desired attitude and practice changes in the targeted communities and congregations. It was possible to see some behaviour change in the form of a reduction in physical and sexual violence, but no clear attitudinal change. The impact that this has had on the community is that women are now feeling safer. Several key factors have supported the behaviour change – the capacity and commitment of the faith and community leaders, their dual role as Authorised Persons, positive and active relationships with service providers and the more contained nature of a rural community with clear lines of authority.

One of the clear indications of change is the ability of the faith or community leader to pass on their knowledge through their role in the community. This was successful in two of the six communities, however in other communities the faith leader had not passed on his or her learning from the course. The only **negative impact** of the program is the possible use of non-physical forms of violence, such as financial violence, towards women as a method to control behaviour as a result of their reduction in physical violence.

Impact:

The project's impacts include:

- Increased well-being in families of counselling course participants due to a reduction in the use of physical and emotional violence. 74% (59% male and 41% female) of workshop participants indicated they had ceased using violence
- Reduction in household or reproductive labour for spouses of course participants as a result of gender norm change
- Women in two communities feel safer as a result of reduction in violent behaviour in the community.

The project's outputs and outcomes (changes in knowledge attitudes and practice) for the stakeholder groups include:



Faith and Community leaders and other course participants

Knowledge:

- · Increased understanding of types, pattern and effects of violence
- · Increased understanding of tools to diffuse violence and faith messages
- Attitudes:
- 70% (41% female and 58% male) cannot justify violence in any circumstances
- 16% (50% female and 50% male) can justify violence against trespassers or children. Adultery was not mentioned
- 87% have confidence to use the tools and strategies
- 58% identified they have a changed attitude to gender equality

Behaviour:

- 71% of faith and community leaders have stopped using violence (41% female and 59% male)
- 100% (75% female and 25% male) of World Vision staff who participated in the course have either stopped using violence (89%) or withdrawn from a violent situation (11%)
- 60% of service providers/stakeholders course participants (100% female) have stopped violent behaviour
- 58% of groups indicate their faith or community leader is providing support, 42% indicate their faith or community leader is providing no support
- 58% of faith and community leaders (36% female and 64% male) are making referrals
- People are being referred to the Women's Centre, Police, VFHA and some faith and community leaders are issuing protection orders
- Only 8% of faith and community leaders have provided support on the development of safety plans but no safety plans have as yet been developed

- Faith and community leaders are challenging unhelpful beliefs including beliefs around the position of women in society and the punishment of children
- 8% of faith and community leaders indicated they were questioning beliefs around separation
- 50% (50% female and 50 % male) indicated they were working with perpetrators
 of violence, providing counselling on the law, the effect of violence on children,
 strategies to prevent violence and the use of Bible messages of anti-violence.

Service Providers

Knowledge:

- 78% understand the faith-based approach
- 14% indicate concern that Bible passages would be used to reinforce gender stereotypes
- 33% of service providers created strong connections with communities, 33% created some limited connections and 34% indicated no particular relationship with communities
- · Increase skills to do their own work
- Module enhanced by Corrections Department on concepts taught at the counselling workshops

Attitudes:

- Have strengthened referral pathways
- 75% of faith and community leaders who are actively referring, are referring to
 the four main service providers 78% to VWC/SCC (despite the negative beliefs
 associated with the VWC/SCC and their role in temporary protection orders
 and legal support regarded as actions taken against men), 67% to Police, 33%
 to the hospital and 5% to the VFHA
- · Changed attitudes to gender equality among service providers and stakeholders

Behaviour:

- Strong relationships developed between service providers and communities in Santo resulting in further activities, including gender training for communities by the VWC/SCC
- Improvement of an Anger Management Module by Corrections staff
- Corrections staff counselling inmates on issues from the counselling course
- Services being provided on a regular basis in South Santo but not clear in other areas

Survivors of violence



Knowledge:

- Increased awareness of the laws around violence (76% of women know that violence is against the law and 83% struggled to identify the relevant law, the Family Protection Act
- No safety plans in place
- Women in communities and 50% of men's groups are aware of the options for support; three men's groups did not answer the question
- 83% of groups said the chief is the first point of contact for referral

Attitudes:

 Attitudes within the women's groups on whether there were times when beating a woman was justified were consistent with the national average (56% compared with 60% national average)

Behaviour:

- No safety plan either developed or used
- Women accessing services but not necessarily as a result of the course

Perpetrators of violence

Knowledge:

- 100% of men's groups agreed that men can choose to control their violence (only one group member indicated that there could be excuses for violence/loss of control).
- The men's groups did not know the different types of violence, stated that they
 did not know a great deal about the law but held a fear of what they had heard
 about the Family Protection Act

Attitudes:

- Traditional attitudes around gender, child discipline and justification for violence persisted in women and men's groups in most of the target communities despite some changes in behaviour
- Attitudes to violence from course participants considerably changed as identified above

Behaviour:

• 71% (59% male and 41% female) of faith and community leaders and their spouses interviewed indicated that they had changed their behaviour and had stopped using violence. 5% of the leaders (50% female and 50% male) indicated that they were not violent in the first place

- Changes were noted in the practice of violence in 33% of target communities (decrease in physical and emotional violence and increase in financial violence)
- By-law developed in one community to regulate behaviour around violence
- Method of dispute resolution has changed in two communities from responding with violence to going to the AP.

9.2 The Counselling Approach

The evaluation team found that the counselling approach was both highly **relevant** and highly **appropriate** in the context of Vanuatu, particularly the use of the faith-based approach to change attitudes and beliefs towards violence and gender equality within the church. Engaging within the church context through a faith approach, has a strong potential to shift attitudes and norms, as is evidenced by the changes in the individual faith and community leaders and other participants of the course.

The key issue, however, is how the messages are transmitted between the leader and his or her target group. Counselling skills attendees on the whole were extremely positive about the course and the approach, due to the significant personal changes it had prompted. Community members were **not as satisfied with the results** of the project as many did not receive any new messages from their faith or community leader following their engagement in the course. This could indicate that there is a real need to provide more detailed support to faith and community leaders during the transmission phase.

If the project can reinforce the messages through the medium of faith then the results will be more **durable.** To sustain change, these messages need to continue to be reinforced until they become habit and simply part of the usual practice of the communities and congregations. The current approach is not particularly sustainable and detailed planning on transition to a more **sustainable** method is required.

9.3 The Program

The evaluation team identified **strengths and weaknesses** in the project design and implementation that have either facilitated or constrained change.

The adaptive programming approach is a strength in that it allows flexibility to respond to the context. It has also meant that the key desired impact and outcomes, although clear in the minds of the course developer and program manager, were not confirmed and articulated in program documentation and no clear logic was developed to be able to gather monitoring information and track progress. The focus on engaging men around violence is key to successful behaviour change and a clear strength of the program. It is also important, however, to remember the role women have in counselling other women and ensure that women are always engaged in each step/aspect of the project. The reliance on volunteers is both a strength and a weakness in that the faith and community leaders are key influencers in the communities and an essential element of the behaviour change theory for the project. However they are also overburdened, and if they are not able to focus their attention on the project activities it will affect the implementation and result of the project. The consistency of messaging is a potential weakness if faith leaders decide to reinterpret the messages. Ensuring program fidelity is a potential weakness due to the small numbers trained and the potential for them to move on or not take up the work is a risk for the project. Spousal engagement is a strength as it acknowledges the important role of the spouse as a leader in the community. A weakness is the limited engagement of participants and staff in the design and implementation of the project. The project practices do no harm principles through the development of the course, course content and implementation. A weakness was the lack of detailed clean quantitative and detailed quantitative monitoring information.

9.4 The Evaluation Process



The **evaluation process itself** was designed to be as participatory as possible for the evaluation team in recognition of their key insights on context and their significant experience in other gender-based violence research processes. Some members participated in the design and facilitation of the initial preparation workshop. All team members were responsible for developing the questions for the tools together and translating them into Bislama. The team debriefed every day, identifying key trends/issues which arose. All team members participated in the analysis workshop where identification of key issues was facilitated. Team members provided feedback on the evaluation and identified that they had many new experiences and learnt much in the process – particularly tool design and creation and managing focus group discussions.

10. Recommendations

I) Continue conducting the courses that make up the Counselling Approach workshop series

The course is unique and effective and has had a significant impact on the lives of participants and their families and has started to influence some change in the broader community. It is important that the courses continue.

2) Conduct a participatory review of the course, inclusive of its structure, curriculum, name, timing and delivery methodology

It is important to consider how the course can be changed to support faith and community leaders to transmit the message to communities in both rural and urban settings. It is however an opportune time to conduct a review of all aspects of the program to improve its delivery and ensure sustainability, as well as participation of both faith and community leaders, and community members.

- Review of course curriculum: consider conducting a participatory curriculum review with stakeholders to understand how they would structure the course and more effectively transmit the messages to their communities and congregations
- Timing: consider reviewing the length of time for the workshop series particularly taking into consideration the opinion of previous participants
- Delivery methodology: consider different options for delivery of the course in rural and urban areas
- Review of course name: consider changing the name from "counselling" to dispel any confusion with of a professional qualification.
- 3) Conduct a gender and power analysis specifically for the course model, and create strategies to:
 - a) Ensure knowledge on gender equality, gender based violence and gender norms is an explicit key focus for the course and continues to be included within the course curriculum in a more overt manner; and

"We need some good counsellors and highly qualified and mature - we need them to be qualified to help us to cope with the stories. Sometimes you can't believe it is true - underneath it is broken bones." "It is hard to hear all of this - you need to take a step back to cope." (F&CL 9)

b) Incorporate violence risk factors and mitigation strategies for people with disability, particularly women and girls. The concept of informed consent is particularly important.

The program needs to better integrate the needs of people with a disability considering their higher levels of vulnerability to violence and so would benefit from clearly understanding the gender and disability challenges and outline strategies the program will



use to ensure it is effectively engaging on and incorporating gender and disability. Considering that women and girls with a disability are at severe risk of violence and abuse, it is important that faith and community leaders have an understanding of the challenges these groups face as well as an understanding of the concept of informed consent in order to better respond to the needs of women and girls with a disability.

In order to effect change in behaviour around gender-based violence, a change in attitudes about gender equality within the household is essential. It is important that participants of the course are starting off from the same page. To ensure consistency consider incorporating gender training into the course. More time spent in the course on challenging traditional gender norms would also be beneficial.

4) Ensure the course facilitation model has a clear succession planning

The current facilitation team is highly respected and clearly highly effective in leading people on a transformative journey. It is important that a clear staffing/succession plan is developed to ensure an effective and respected team is taking this work forward. Use of a local facilitator, or pairing a local facilitator with an international one, would also help to mitigate the issues of language and interpretation that were highlighted in the evaluation. It is also an opportunity to consider the suggestions of many people to seek endorsement of the course at the national level.

5) Develop a process for selection of participants

Develop a selection process for course participants, in order to select passionate strong, bold and neutral leaders who want to see change in their community. As part of this process, WV could include more participants with a disability, more female leaders and more female spouses of faith leaders.

6) Conduct separate courses for youth participants

The workshop series should be held separately for youth leaders and youth with the aim of making change early and helping them to be champions of their communities and the nation. WV could identify young people with passion and train youth to be champions.

7) Post Counselling Course follow up

There is a complexity of challenges that may arise for faith and community leaders once they are working with their communities on issues of abuse. It is important that they have access to professional support to provide guidance or feedback on how they handled a difficult or abusive situation. World Vision has a duty of care to provide support and to monitor how the individual course

graduands are coping.

- Consider ways to provide professional support and guidance on practice
- Ensure a clear monitoring system is developed
- Consider creating a network through towns, communities and villages to strengthen working relationships between the chiefs and pastors. The Peer Support Group is an attempt to address this need, however, there is still room for more to be done. There is also a need for more unity between the churches – the Peer Support Group can also work to unite different church leaders.
- World Vision could also develop pamphlets and information to leave at church for distribution to members.

8) Develop and maintain relationships with partners to make the course more effective and sustainable

There is a need to continue to constructively engage with the Vanuatu Women's Centre, the different churches and the Vanuatu Christian Council and other stakeholders on this work.

- Engage on the content of the course as there is a lack of understanding by some partners on what the WV course is trying to achieve.
- Develop MoUs between WVV and organisations such as the VCC, the churches, and WVC as this would aid in ensuring high-ranking church authorities and police are informed of the course and thereby release staff to attend training.
- Capacity training for pastors and church members would also help to further partnerships.
- World Vision could negotiate with VWC to have female faith leaders seconded to VWC offices to do practical and basic counselling.
- World Vision should learn what courses the churches are providing and consider partnership with them around GBV
- Engage with VCC and the heads of the churches to gain endorsement

9) Ensure quality program development

Ensure the program has a clear theory of change developed in a participatory manner with relevant stakeholders, especially program staff and participants, and a monitoring and evaluation plan that is linked to the theory of change. Improve the monitoring and data gathering processes. Collate and publish the stories of change to explain the value of the course to stakeholders.

10) Connect the Program to other World Vision Programs to improve mainstreaming of GBV.

The counselling course could be better connected to other WV programs, including the counselling skills in the youth church Family Life Program and the GFL program. The GFL program could be extended to 13-18 year olds as a youth program, though they would require training resources to support this.

II) Consider taking the course to the national level



In order to further expand the reach and impact of the program, there is a need for buy-in from both national and regional church leadership. The course and its faith-based approach could be taken to the national level, engaging with the VCC and church head offices to obtain their approval. The head of the VCC and others have made the recommendation to incorporate the training into the Bible and missionary college courses. This is in order to capture a larger market over a longer period of time. Other stakeholders have recommended accreditation for the counselling program through the Vanuatu Qualification Authority and VCC, with registered members only to deliver the training. Another possible scope for expansion is bringing the training to public servants and government offices.

Appendix A: Counselling Theory of Change

Appendix A: Counselling Theory of Change

Desired impact: Women, girls and boys in target communities and congregations have increased wellbeing due to reduction in violence

Long-term Outcome I Faith and community leaders and their spouses have made changes in their own behaviour and are supporting violence survivors through appropriate counselling, the development of safety plans, linking to service providers and challenging unhelpful belief systems within their community/ congregation

Short-term outcome I Faith and community leaders and their spouses have changed their own attitudes to violence and have confidence in their ability to provide appropriate counselling and support the change in their own communities and congregations

Output I Faith and community leaders and their spouses have increased understanding of the types/patterns/effects of and strategies to counter family violence and have awareness of their own attitudes and behaviour related to violence

Long-term Outcome 2 Faith and community leaders and their spouses are working with perpetrators of violence to accept responsibility for their action and see violence as a choice Short-term outcome 2 Faith and community leaders and their spouses have confidence in their ability to use these practical tools to work with perpetrators of violence to accept responsibility for their actions and see violence as a choice.

Output 2 Faith leaders and their spouses have practical tools and strategies to change violent behaviour and increased knowledge in using the tools

Long-term outcome 3 Service providers have developed strong connections with target communities and are providing services where required

Short-term outcome 3 Service providers are starting to strengthen referral pathways to their services with relevant communities and congregations

Output 3 Service providers have increased understanding of faith-based approach to addressing GBV & family violence & have developed connections with faith & community leaders

Long-term Outcome 4 Survivors of violence are using safety plans and accessing services when required

Short-term outcome 4 Survivors of violence are accepting that they should not be subjected to violence and are developing safety plans and becoming familiar with available services

Output 4 Survivors of violence are aware of their rights and ways to protect themselves and services available and how to access them

Long-term outcome 5 Perpetrators of violence are changing their behaviour and not using violence to solve problems

Short-term outcome 5 Perpetrators of violence are accepting responsibility for their actions

Output 5 Perpetrators of violence are understanding that they are responsible for their actions and that violence is a choice

Appendix B: Evaluation Terms of Reference and Evaluation Plan

Evaluation Terms of Reference

PTL Reducing Gender-based Violence Project – Vanuatu Counselling Approach

Version Date: 17 April 2018 (approved by DFAT, SRJ, and World Vision)

World Vision Pacific and Timor-Leste

Project Details

Project Numbers and	
Names	
Country:	Vanuatu
Location:	Port Vila, Shefa
	Luganville, Espiritu Santo
Start and End date of	1 August 2014 – 30 June 2018
Project:	
Date Baseline data	25 June 2017
completed:	
Total Project Budget:	USD 1,550,000
Source of funding:	DFAT ANCP
Beneficiaries (Direct):	
Women	457
Men	333
Girls	576
Boys	574
Total:	2,030
National Office	Kendra Gates Derousseau
Contacts	Program Quality Manager

i. Acknowledgements

The Terms of Reference for this evaluation was drafted by the Programme Quality Team of World Vision Solomon Islands, in consultation with the project and programme field teams. The content is based on review of the project design in accordance with World Vision's LEAP requirements.

The parties that contributed to the preparation of this document are:

Kendra Gates Derousseau, World Vision Vanuatu, Program Quality Manager

Amy Gardiner, World Vision Vanuatu, Gender and Social Work Technical Advisor

Ps. Fiama Rakau, World Vision Vanuatu, Faith and Engagement Mentor

Polly Walker, Stretem Rod blong Jastis mo Sefti,

Frida Sam, Stretem Rod blong Jastis mo Sefti,

Patricia Fred, Department of Foreign Affairs and Trade, Vanuatu Post

iii. Glossary

ANCP	Australian NGO Cooperation Program
CEDAW	Convention on the Elimination of all Forms of Discrimination against Women
CHAT	Community Hope Action Team
СОН	Channels of Hope
CoHG	Channels of Hope for Gender
СР	Child Protection
DFAT	Australian Department of Foreign Affairs and Trade
EVAW	Elimination of Violence Against Women
FBO	Faith-based Organisation
FPU	Family Protection Unit
FY	Fiscal Year
GBV	Gender-based Violence
IPV	Intimate Partner Violence
LEAP	Learning through Evaluation with Accountability and Planning
NGO	Non-Government Organization
M&E	Monitoring and Evaluation
MOU	Memorandum of Understanding
PTL	Pacific Timor-Leste
SV	Sexual Violence
VWC	Vanuatu Women's Centre
WV	World Vision
WVV	World Vision Vanuatu

Project Background

World Vision has been implementing the Reducing Gender-based Violence project across three Pacific Timor-Leste (PTL) countries – Solomon Islands, Timor-Leste and Vanuatu – to address the high tolerance and prevalence of gender-based violence (GBV) across the three countries.

Though all three countries have laws criminalising domestic and family violence and have ratified the CEDAW and the CRC, national studies indicate women experience higher incidence of intimate partner violence (IPV) than the international average. Studies have also found IPV is treated as normal by individuals, families and communities; many people use interpretations of cultural, social and religious discourse to reinforce the idea man is "boss" and can use violence to correct his wife's behaviours.

The PTL Reducing GBV Project implementation began between 1 January and 1 July 2015. The project has been addressing the gendered social norms that undergird the high prevalence of violence while also connecting the project's partners to services and information. The project in each country is seeking to achieve three outcomes: 1) support community and faith leaders to become champions against gender-based violence; 2) strengthen links between communities and GBV and child protection service providers; and 3) support community and church action teams to increase awareness and change attitudes and behaviours related to GBV inside communities and churches.

Across the project, WV is utilising World Vision International's (WVI) Channels of Hope for Gender (CoHG) approach. CoHG is a faith-based approach to engage church leaders and church members in discussions about gender equality and GBV. CoHG is an appropriate approach in the country contexts where approximately 92% of the population in Solomon Islands identify as Christian, 98-99% in Timor-Leste and 83% in Vanuatu. CoHG supports leaders and church members to analyse common religious texts that are used across certain denominations to support women's subordination and a husband's violence against his wife. In April 2018, the project will undergo an evaluation in all three countries to determine relevance, effectiveness and sustainability of activities and impacts.

In Vanuatu, work has focused largely on working with religious leaders and communities to address violence since religion is a strongly salient identity in communities – particularly in rural areas. The project has built on the primary prevention focus of CoHG and is seeking to strengthen secondary prevention by working with religious leaders and their spouses to increase their understanding of GBV, increase their ability to help violence survivors develop safety plans and link them to services through counselling skills training. This training has a strong focus of working with men and perpetrators of violence to accept responsibility for their action, see violence as a choice, and provide practical tools and strategies to change their behaviour. Service providers such as police and women's family violence services attended Counselling Skills Workshops as participants to strengthen the referral pathways to their services, build technical capacity (when appropriate) and develop an understanding of the faith based approach to addressing GBV and family violence.

Concurrently within Vanuatu, DFAT has a strong bilateral program, "Stretem Rod blong Jastis mo Sefti," which seeks to, among other things, assist the Vanuatu Government to fully implement its Family Protection Act (FPA). This includes trialling the FPA's Authorised Persons approach which empowers select community lay persons with the ability to issue temporary protection orders in the case of IPV and other forms of domestic violence. The FPA also states that in order to implement this approach, there must also be a Registered Counsellor who has either formal counselling qualifications or experience in mediating domestic violence situations in the community to provide services to the perpetrator and the victim. Beyond the Vanuatu Women's Centre which is currently working to capacity, there are no formal institutions in Vanuatu capable of producing these Registered Counsellors, creating a significant risk to the full implementation of the FPA.

Given that the counselling skills approach has been unique to Vanuatu within the World Vision regional project and given that it may potentially produce individuals who could be considered safe Registered Counsellors in line with the spirit of the FPA, WVV and DFAT's SRBJS program seek to design and implement a joint evaluation of the approach to determine relevance and effectiveness.

1. Project Goal, Outcomes, Outputs

The objectives of the overarching project are:

	Vanuatu Channels of Hope
Goal	To support faith-based organisations to reduce gender-based violence through training and awareness in 16 communities in Sanma, Tanna and Shefa provinces in Vanuatu by 2018.
Outcome 1	Faith and community leaders become champions to address gender-based violence and gender issues
Outcome 2	Partnerships built between communities and service providers in order to strengthen their capacity to address gender-based violence
Outcome 3	Community Hope Action Teams (CHATs) are empowered to facilitate behaviour change inside their communities concerning gender issues

The Counselling Skills approach was developed to provide concrete support to faith leaders and their spouses, complementing other activities under all three outcomes.

After successful completion of the Counselling Skills approach, participants are expected to be able to:

- Identify what constitutes family violence (e.g. psychological, emotional, sexual, spiritual, economic, etc.) and the impacts of this on victims, families and communities.
- Identify typical patterns of violence, understand that violence is never acceptable and is always a choice, and identify violence cover-up/minimizing tactics.
- Identify specific types of violence done to children and impacts of violence on children.
- Understand intergenerational effects of family violence, and how to break this cycle.
- Understand the value of equality between partners and how this is defined in a biblical context.
- Challenge unhelpful belief systems and old ways of being that support violence within their own lives and within their congregation/community through a reinterpretation of Bible passages.
- Identify simple and effective ways to bring positive change into their own lives.
- Develop healthy ways of communicating within their family and their congregation/community.
- Define personal strategies for how to implement these principles as faith leaders and spouses.
- Identify, promote and refer victims to referral services.
- Implement safety planning for victims of violence who may be in immediate danger or are in danger of repeat violence.
- Provide perpetrators of violence with practical tools to enable them to recognize, take responsibility for and change behaviors around violence.

2. Purpose the Evaluation

This study is to be a **summative impact evaluation**, determining the relevance and effectiveness of the Counselling Skills approach for attendees and their families/communities/congregations. Results will be used to interpret the extent to which the project has created positive or negative changes in the lives of Counselling Skills recipients relative to if the project had not taken place. Results will also be used to refine and expand the methodology if appropriate.

3. Evaluation Objectives

The principle objectives of the evaluation are:

- 1. Verify that the approach has achieved the stated knowledge, attitudes and practice,
- 2. Establish the extent to which the project achieved its outcomes among disaggregated stakeholder groups (including gender),
- 3. Identify initial project impact among target populations,
- 4. Evaluate the relevance of the intervention and appropriateness of implementation approaches used.
- 5. Document promising practices, key lessons learned and recommendations to inform future project design
- 6. Identify strengths/weaknesses in the project design or implementation approach that facilitate/constrained change
- 7. Provide on-the-job learning and training to World Vision and Partner staff in evaluation methods
- 8. Provide needed information to World Vision (WV) Pacific and Timor-Leste and in the country programs to drive decisions about continuation of project.

4. Guiding Evaluation Questions

- How did this project impact power relations between women and men? What are some of the
 positive impacts in gender relations? What was the negative impact or backlash, in any? What
 barriers did women and men face in accessing the project as separate groups? To what extent do
 women and men perceive they were able to direct programming (as separate groups)?
- How did this project practice do no harm principles for women and children? What areas need to be strengthened in future programming?
- To what extent has the Counselling Skills approach achieved its intended outputs at attendee, congregational/community, and systems (referrals) levels?
- To what extent are Counselling Skills attendees, community members and stakeholders satisfied with the results of the project?
- Have Counselling Skills attendees experienced any attitudinal shift towards well-known "exceptional reasons" for family violence such as adultery as a result of the approach?
- How durable are the changes initiated by the approach?
- What activities and recommendations would optimise sustainable changes for the approach in the future?
- What design or implementation factors that were under project control accelerated or constrained outcomes?
- What design or implementation factors outside project control accelerated or constrained outcomes?

5. Evaluation Personnel

Evaluation Team					
Lead Evaluators					
Mega 1. n Williams – Monitoring and Evaluation Specialist	Independent evaluation consultants	Support all stages of Evaluation Process	Provide advice and guidance on project evaluation process. Conduct preparatory		
2. Alina Meyer – Gender Technical Specialist			data collection training. Lead key informant interviews with partners. Develop tools for surveys and train teams to conduct FGDs. Receive and collate; all data via data collection framework. Data analysis and report write-up.		

Assistant evaluators				
2. Patricia Fred	Key Evaluation Facilitator – DME Technical support	Coordinate all staff and track data collection during data collection phase, provide WVVlead on data analysis and report writing	Facilitate Staff Evaluation Training Contribute sector guidance on defining desirable project outcomes	
3. Johnah Nahwo	World Vision Vanuatu	Support data collection. Input into data analysis	Coordinate FGD field work Coordinate all staff involved in data collection track.	
3. Frida Sam (TBD)	Stretem Rod Blong Jastis mo Sefti	Support data collection. Input into data analysis	Provide input on final report content	
4. Sam Obed	Independent	Support data collection. Input into data analysis	Provide input on final report content	

6. Proposed Evaluation Products and Milestone Dates

The following proposed dates will be subject to negotiation and revision, with the chosen candidate.

ACTIVITY	Time required Lead Evaluator	Time required support evaluator (GBV tech advisor)	Team Required	Proposed dates TBD (beginning around mid-June 2018)	Comments
Planning of work	1 day		Evaluators with input from evaluation team and WV staff		Done by one or both of the evaluators
Desk review	3 days	2 days	Evaluators		Done by one or both of the evaluators
Logistics	1 day		WV staff		This could be done by World Vision staff with briefing from evaluators
Preparation of tools and training for team	2 days	3 days	Evaluators		Done by one or both of the evaluators
Training of team	2 days		Evaluators and evaluation team		Done by both of the evaluators
FGD VILA with daily debrief	4 days		Evaluators and evaluation team		Weekend work
Travel	1 day		Evaluators and evaluation team		Half day to and half day back from Santo
FGD SANTO with daily debrief	3 days		Evaluators and evaluation team		During the week
Documentation2	days		Evaluation team/evaluators		All team members document all meetings
Prep analysis workshop	1 day	1 day	evaluators		Development of session design and tools for analysis workshop
Analysis workshop	2 days		Evaluators facilitate Evaluation team participate		Working with the team to identify key results from the focus group discussions and identifying themes
Write up of analysis workshop			WV staff		Done by WV staff
Write up of the evaluation	10 days	2 days	evaluators		To be done by lead evaluators
Total	32 days	8 days			World vision staff support beyond Eval team members – 3 days Lead evaluators- 30 days in total Evaluation team- 14 days – 8 days field work, 2 days training/prep, 2 days documentation, 2 days analysis workshop

Products Due date:

Develop Evaluation Design/Plan , including all data collection tools, i.e. survey, FGD and KII guiding questions	23 May 2018
Literature Review: country data, mid-term review, monitoring reports, etc.	19 April 2018
Proposed data collection dates (Subject to adjustment with lead evaluator): **Product will be: All data records whether in soft or hard copy e.g. transcripts, databases, spreadsheets, photographs: Photographs and audio data, by the last day of in-country work. Written and statistical documentation handed to WV Country Office	21 – 31 May as above
1st complete draft evaluation report:	20 June 2018
Review of draft returned to lead evaluator	30 June 2018
Final version evaluation report, incorporating feedback: (Final version to include an executive summary that can stand alone as a self-contained summary report)	15 July 2018
Share Findings with Communities	20 July 2018
Management Responses Completed	30 July 2018

7. Anticipated Limitations

Timing of Focus Group Discussions – Many Counselling Skills participants have full-time jobs and do not have time to attend focus group discussions during the working week. This is particularly true in Port Vila. The intended implementation modality would see field work being done on weekends (specifically after church) in Port Vila to capture those who work outside of the community during a week.

Safety and Confidentiality of receiving feedback from counselling service recipients: In order to fully assess the effectiveness of the Counselling Skills approach, it will be necessary to seek feedback from the experience of women/men who have been recipients of counselling (practical skills application). This type of questioning will almost always result in disclosures of violence so care needs to be taken on how questions are asked and the team will need to ensure that they have the ability to provide follow up support if necessary either directly or through referral. In order to minimise risk of backlash violence, faith leaders & spouses will be asked to invite a selection of families in their congregations/communities to participate in the evaluation, ensuring that at least 50% of those being invited have received counselling support. Following the method used during DFAT's GBV research in Malekula in 2016, enumerators will question men and women separately but in view of each other with men receiving a slightly different set of questions than women. This will reduce suspicion that women may be disclosing violence.



8. Budget

The evaluation is funded through the project budget under code **V201554** (94.01.05) which has already been approved. The budget will cover all associated costs of the evaluation, including the consultants' fee, travel and accommodation, field transport and evaluation supplies. It is anticipated that the total evaluation will cost approximately USD10,000.

9. Documents to be made available for evaluation preparation

Project design document: narrative, Counselling Skills approach curriculum Project monitoring reports, including annual progress reports and

Project baseline study (and data if applicable) Any external reviews of the project

Appendices

Attached are World Vision's recommended templates for evaluation products. These templates are suggested formats only and can be edited/updated to suit the specific evaluation context.

A. Evaluation Plan Template



B. Evaluation Report Template



C. Evaluation Quality Requirements

(inc. ethical guidenlines and BOND tool for evidence quality)



Appendix C: Survey Tools & Data Sources



Evaluation Terms of Reference

9

Appendix C: Survey Tools and Data Sources Tools

Evaluation of the Counselling Approach of the World Vision Channels of Hope Program

Interview Tool for Key Informants

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Intr	ากสม	ction	ŧΩ	tha	intal	rview:
11111	ouu	llululi	ιU	uic	III	I VIC VV.

My name is _____and I am part of the team for the Evaluation of the Counselling Approach of the World Vision Channels of Hope Program. Thank you so much for taking the time to talk with me. Our goal is to evaluate the effectiveness of the counselling approach to understand how it has met its planned outcomes and make recommendations for changes to improve the program. We are interviewing key informants who live in communities where the pastor and or chief and their spouses have done the course to understand your opinion of changes that may have happened in the community as a result of the participation of leaders in the course.

Everything you tell us will be used anonymously, we will treat your information with total confidence and no harm will come to you or anyone else from the information. All of the information you provide both positive and critical will help World Vision to improve their work.

We understand that some of the questions may feel sensitive or difficult. Violence is very common and the pain of the experience can resurface even years later. There is no shame in having experienced violence, being hurt by it or seeking help. If you feel anxious, you can always take a break. You can always step out for a moment. If you are uncomfortable with any of the questions you do not have to answer them. There is a list of support services that you can take with you if you like. The interview has approximately 10 questions and should take around 45 minutes. The information you provide will be analyzed with responses from other participants and we will make recommendations for program improvements. Can you confirm that you give your consent to be interviewed? Yes \square (evaluator to tick when consent given).

Date:	Interviewer:
Location:	Documentation:
Sex:	
Which key informant: teacher or health professional or other	

1.	Do you know if the faith or community leader in your community has attended the
	counselling skills training to try to stop violence in families?
	Yes #
	No #



Have you seen any changes in the community since the leaders in your community have attended the counselling? What is different? Do service providers such as the police or VWC/ Sanma counselling Service come to the community to reason due situations of violence?
, ,
community to respond to situations of violence?
Are people comfortable to contact service providers to respond to situations of violence?
What are people doing to protect themselves from violence if it happens? (safety)
Do people have a plan to keep themselves safe if they are experiencing violence? Yes # No # If yes, who helped develop the plan?

8. Are there any times that you feel a woman should be beaten?

Optional question if you have time:

9. What do you think people can do to stop violence against women and children?

ENDS/ Thank you!



Evaluation of the Counselling Approach of the World Vision Channels of Hope Program

Interview Tool for Key stakeholders

Introduction to the interview:						
My name isand I am part of the team for the Evaluation of the Counselling Approach of the World Vision Channels of Hope Program. Thank you so much for taking the time to talk with me. Our goal is to evaluate the effectiveness of the counselling approach to understand how it has met its planned outcomes and make recommendations for changes to improve the program. We are interviewing key stakeholders who work with World Vision to understand whether the counselling courses have had an effect on your common work.						
Everything you tell us will be used anonymously, we will treat your information with total confidence and no harm will come to you or anyone else from the information. All of the information you provide both positive and critical will help World Vision to improve their work.						
We understand that some of the questions may feel sensitive or difficult. Violence is very common and the pain of the experience can resurface even years later. There is no shame in having experienced violence, being hurt by it or seeking help. If you feel anxious, you can always take a break. You can always step out for a moment. If you are uncomfortable with any of the questions you do not have to answer them. There is a list of support services that you can take with you if you like. The interview has approximately 10 questions and should take around 45 minutes. The information you provide will be analyzed with responses from other participants and we will make recommendations for program improvements. Can you confirm that you give your consent to be interviewed? Yes \square (evaluator to tick when consent given).						
Date:	Interviewer:					
Location:	Documentation:					
Sex:						
Which stakeholder: VFHA, VCC, Malvatumauri, Sanma Council of chiefs, VSPD, Corrections						
Background Information Did you participate in any of the World Vision counselling courses? (check all that apply) 1. Foundational Counselling Skills						
2. Counselling Level 1 🗌 3. Counselling Level 2 🗍						
Peer Support Groups						
5. Men's Behavioural Change Workshop						
J. Men's behavioural change workshop						
IF THEY WERE A PARTICIPANT ANSWER THE NEXT 5 QUESTIONS IF NOT GO TO QUESTION 6						
 Can you tell me about what you learnt in the counselling course about violence? Tick if they mention the following but do not prompt: understanding the different types of violence understand that violence is a choice understand that violence has negative effects on everyone in the family 						



2) How have your attitudes and beliefs changed as a result of doing this course?	
 3) What are you doing differently in your own home or with your own family? Tick if they mention the following but do not prompt: practicing self-calming using no violence not using the bible to justify any form of violence 	
4) Do you feel there are any circumstances where violence is justified?	
5) How are you using the information and skills that you have learnt in the courses?	
IF THEY HAVE NOT PARTICIPATED IN THE COURSE START HERE:	
6) Can you tell me what you know about the World Vision Counselling workshops as part the Channels of Hope program? (what they cover, who is involved and what is their aim?)	of
7) How has your organisation engaged with World Vision on working to change attitudes and behaviour around family violence?	
8) What have you found effective about the Counselling program? Have you seen or heard about any changes in people's attitudes and behaviour as a result of the program?	l
9) What do you see are the most difficult barriers for organisations working to reduce family violence?	
10) If your organisation is responding to or working in family violence have you seen any changes in communities' behaviour since the course began – what sorts of changes? WI do you think these changes have occurred?	hy
11) Have you seen an increase in the referral to service providers in the communities that you work with? If so which ones and why do you think there has been a change?	

ENDS/ Thank you!



Evaluation of the Counselling Approach of the World Vision Channels

of Hope Program

Interview Tool for Faith and Community Lea	ders		
Introduction to the interview: Thank you so much for hosting us and helping u Community Leader) for your kind help in organi			
My name isand this is and we are eval Approach of the World Vision Channels of Hope to talk with us. Our goal is to support your community and ideas with us. The information gat World Vision in guiding their future projects to your community and other communities in Vanuary	Program. Thank you so much for taking the time nunity and we thank you for sharing your hered in this interview will be very important to work better and be more effective in helping		
Everything you tell us will be used anonymously confidence and no harm will come to you or any information you provide both positive and critic	one else from the information. All of the		
We understand that some of the questions may common and the pain of the experience can result having experienced violence, being hurt by it or take a break. You can always step out for a mome can take with you if you like.	orface even years later. There is no shame in seeking help. If you feel anxious, you can always		
The interview has approximately 12 questions a information you (please circle provide will be ar and we will make recommendations for program your consent to be interviewed? Yes [(evaluation) (evalua	nalyzed with responses from other participants in improvements. Can you confirm that you give		
Date:	Interviewer:		
Location:	Documentation:		
Sex:			
Faith Leader / Chief/spouse (please circle)			
Background Information			
Which workshops have you participated in? (ch	eck all that apply)		
1. Foundational Counselling Skills			
2. Counselling Level 1			
3. Counselling Level 2			
4. Peer Support Groups			
5. Men's Behavioural Change Workshop			
Personal Change			
2) Can you tell me about what you learnt in the	counselling course about violence?		
Tick if they mention the following but do not			
- understanding the different types of viol	ence 🗌		
- understand that violence is a choice			
 understand that violence has negative ef 	fects on everyone in the family		



2) How have your attitudes and beliefs changed as a result of doing this course?
 3) What are you doing differently in your own home or with your own family? Tick if they mention the following but do not prompt: practicing self-calming using no violence not using the bible to justify any form of violence
Changes in attitudes 4) Do you feel there are any circumstances where violence is justified?
5) Now that you have participated in the courses how are you feeling about providing support to people experiencing violence in your community/congregation? Do you feel that you have more skills and tools to provide support and how confident are you to use them?
Changes in practice 6) What sorts of support are you providing to survivors of violence? Tick if they mention the following but do not prompt: - safety plan development - referral to service providers -
 7) How are you engaging with people who use violence? What are you telling them? Tick if they mention the following but do not prompt: understanding the different types of violence that violence is a choice that violence has negative effects on everyone in the family
8) What are the beliefs that you are challenging in your congregation/community now that you have done the course? Tick if they mention the following but do not prompt: - that the bible condones it - it is justified in some circumstances, - violence is important to maintain unity and respect in the family, - violence is a sign of love, - some violence is proportional, - family harmony and unity always means keeping the family together,
Service providers 9) Are you linking people with referral services? Which ones? How do you link them? (step by step what they do to help people access service providers)

Optional questions if you have timea) What do you think people can do to stop violence against women and children?



b) Have you seen people who use violence start to accept responsibility for their behaviour? Can you give us an example of this? (this may be a man accepting responsibility or a woman accepting responsibility particularly in her violent actions towards her children)

Questions for Authorised persons

- 1) Do you know why you were approached to be an authorized person?
- 2) Can you tell me if you have done anything in your role as an authorized person and how was the experience?
- 3) Do you feel it positively or negatively affects your role as a faith or community leader?

ENDS/ Thank you!



Interview Tool for World Vision Staff

Introduction to the interview:	
My name isand we are evaluators for the Evaluators for the Evaluated Vision Channels of Hope Program. Thank Our goal is to evaluate the effectiveness of the comet its planned outcomes and make recommendare interviewing World Vision staff who have paunderstand how it has affected you personally a used anonymously, we will treat your information to you or anyone else from the information. All ocritical will help World Vision to improve their versions.	you so much for taking the time to talk with us. bunselling approach to understand how it has dations for changes to improve the program. We articipated in the counselling program to and your work. Everything you tell us will be on with total confidence and no harm will come of the information you provide both positive and
We understand that some of the questions may common and the pain of the experience can resultation and the pain of the experience can resultation and experienced violence, being hurt by it or take a break and step out for a moment. If you are do not have to answer them. There is a list of sullike.	urface even years later. There is no shame in seeking help. If you feel anxious, you can always re uncomfortable with any of the questions you
The interview has approximately 10 questions a information you provide will be analyzed with r make recommendations for program improvem to be interviewed? Yes \square (evaluator to tick wh	esponses from other participants and we will ents. Can you confirm that you give your consen
Date:	Interviewer:
Location:	Documentation:
Sex:	
World Vision staff which program:	
Background Information Which workshops have you participated in? (ch	neck all that apply)
 Foundational Counselling Skills	
3) Can you tell me about what you learnt in the Tick if they mention the following but do not	e counselling course about violence?



2) How have your attitudes and beliefs changed as a result of doing this course?
 3) What are you doing differently in your own home or with your own family? Tick if they mention the following but do not prompt: practicing self-calming using no violence not using the bible to justify any form of violence
4) Do you feel there are any circumstances where violence is justified?
5) How are you using the information and skills that you have learnt in the courses?
6) Have you seen an increase in the referral to service providers in the communities that you work with? If so which ones and why do you think there has been a change?
7) How were you involved in the design of the counselling skills component of the CoH program?
8) How did women and men in the congregations/faith leaders/chiefs/service providers engage with the program – were there any problems with engaging in the program?
9) How did the staff ensure that program participants were not harmed as a result of involvement in this program?
10) Were there any situations that arose during the design and implementation of the program that affected how it worked?
ENDS/ Thank you!



Interview Tool for Service Providers

Int					
Thevalue of the control of the contr	aluators for the Evaluation of the Counselling operam. Thank you so much for taking the time mmunities and we thank you for sharing your chered in this interview will be very important work better and be more effective in helping of	t to World Vision in guiding their future projects communities in Vanuatu. Everything you tell us ormation with total confidence and no harm will a. All of the information you provide both			
con hav tak can arc par	te a break. You can always step out for a mom n take with you if you like. The interview has a bund 45 minutes. The information you provid	rface even years later. There is no shame in seeking help. If you feel anxious, you can always ent. There is a list of support services that you approximately 10 questions and should take e will be analyzed with responses from other s for program improvements. Can you confirm			
_	ate:	Interviewer:			
	Location: Documentation:				
_		Documentation:			
S	ex:	Documentation:			
S		Documentation:			
S	ex: ervice Provider organisation: rsonal Change	ou learnt in the counselling training? What do prompt:			
So So	ervice Provider organisation: rsonal Change What were the most significant things that y you know now that you didn't know before? Tick if they mention the following but do not - understanding the different types of viol - understand that violence is a choice - understand that violence has negative ef	ou learnt in the counselling training? What do prompt:			

4. Do you feel there are any circumstances where violence is justified?



- 5. Who have you created connections with as a result of this training? How will that help you in your work?
- 6. Can you describe the change in the way you engage with communities since your participation in the counselling workshops? Why do you think it has changed?
- 7. How has your provision of service changed?
- 8. Has the number of referrals from faith leaders and chiefs increased since the course? If so why do you think this has happened? If not what do you see are the barriers?
- 9. **SANTO Service providers:** Can you see any other changes in the communities since the counselling workshops?
- 10. If you were redesigning this program what changes would you make and why those changes?

ENDS/ Thank you!



Focus Group Discussion Tool for Community Men

Introduction to the focus group:					
Thank you so much for hosting us and helping us and thank you very much to (Faith or Community Leader) for your kind help in organizing this discussion.					
My name isand this is and we are eva Approach of the World Vision Channels of Hope to talk with us. Our goal is to support your comment thoughts and ideas with us. The information gate to World Vision in guiding their future projects your community and other communities in Van	Program. Thank you so much for taking the time munity and we thank you for sharing your thered in this discussion will be very important to work better and be more effective in helping				
Everything you tell us will be used anonymously confidence and no harm will come to you or any information you provide both positive and critic	· · · · · · · · · · · · · · · · · · ·				
	urface even years later. There is no shame in seeking help. If you feel anxious, you can always nent. You don't have to answer any question that				
The interview has approximately 10 questions a information you provide will be analyzed with make recommendations for program improvem to be interviewed? Yes [] (evaluator to tick where the interviewed)	responses from other participants and we will nents. Can you confirm that you give your consent				
Date:	Interviewer:				
Location:	Documentation:				
Sex:					
Number of men:					
1. What is your understanding of the types of	of violence in your community?				
 Do you know if your faith or community letry to stop violence in families? Yes # No # 	eader has attended the counselling skills training to				

3. Have Faith Leaders or community leaders in your community helped you or someone you know with issues around family violence? What steps did they take to help resolve the

situation?



4.	Has anything changed in your family since the leaders in your community have attended the counselling?
5.	Is Family violence against the law in Vanuatu? Yes # No #
	Can you explain any Vanuatu laws that relate to violence in the family?
6.	Do you think there are any times where it is right to use violence to solve problems in a relationship? If yes, what are those times?
7.	Do you think men can choose to control their violence? If so how?
8.	How do you (men) resolve problems in your homes?
9.	What is the negative impact of violence in your family?
10.	What services are available to people who experience violence?
•	al if you have time What do you think people can do to stop violence against women and children?
ENDS/	Thank you!



Focus Group Discussion Tool for Community Women

and we are evaluators for the Evaluation of	izing this discussion. My name isand this is of the Counselling Approach of the World Vision for taking the time to talk with us. Our goal is to sharing your thoughts and ideas with us. The very important to World Vision in guiding their			
Everything you tell us will be used anonymously confidence and no harm will come to you or any information you provide both positive and critical				
We understand that some of the questions may feel sensitive or difficult. Violence is very common and the pain of the experience can resurface even years later. There is no shame in having experienced violence, being hurt by it or seeking help. If you feel anxious, you can always take a break. You can always step out for a moment. You don't have to answer any question that makes you feel uncomfortable. There is a list of support services that you can take with you if you like.				
The interview has approximately 10 questions information you provide will be analyzed with make recommendations for program improvem to be interviewed? Yes [(evaluator to tick where the content of the	responses from other participants and we will nents. Can you confirm that you give your consent			
Date:	Interviewer:			
Location:	Documentation:			
Sex:				
Number of women:				
1. What is your understanding of the types of violence in your community?				
 Do you know if your faith or community letry to stop violence in families? Yes #	eader has attended the counselling skills training to			
•	in your community helped you or someone you What steps did they take to help resolve the			

4. What do you think people can do to stop violence against women and children?



5.	Has anything changed in your family since the leaders in your community have attended the counselling?
6.	Is Family violence against the law in Vanuatu? Yes # No #
	Can you explain any Vanuatu laws that relate to violence in the family?
7.	What do people do if they experience violence in your community?
8.	Who do people go to, to respond to the violence? (service providers)
9.	What are people doing to protect themselves from violence if it happens? (safety)
10.	How do people protect themselves from further violence? (safety planning)
11.	Do people have a plan to keep themselves safe if they are experiencing violence? Yes # No # If yes, who helped develop the plan?
12.	Are there any times that you feel a woman should be beaten?
13.	What services are available to people who experience violence?
	al question if you have time: What do you think people can do to stop violence against women and children?
ENDS/	Thank you!

Appendices D & E: Achievement and Statistical Analysis References



Appendix D: Achievement and Statistical Analysis

Available on request

Appendix E: References

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