

TERMS OF REFERENCE

For End of Project Evaluation (joint programme)

“Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors”

1. Background and Context

UNFPA and UNICEF are jointly implementing the two-year project since April 2010. The main objective of the project is to support sustainable peace by improving access to transitional justice and other peace building activities for survivors of sexual and gender based violence in most conflict affected districts. This project is funded by the United Nations Peace Fund for Nepal (UNPFN).

The project aims at ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process by documenting conflict-related sexual violence incidents through the provision of comprehensive services to women and girl survivors. In Nepal’s decade long armed conflict which ended in 2006, women and girls experienced sexual violence perpetrated by both sides: Government security forces and the Maoist Army. Although many other forms of human rights violation have been documented, information on the use of sexual violence as a tool of conflict has been scarce. As a result, the incidents of sexual violence have not been officially recognized by the Government¹, and survivors remain silent and continue to suffer from physical and psychological effect of the violence. Survivors of sexual violence often face severe stigmatization. There is a strong culture of silence and a sense of shame, which prevents victims from speaking up.

The project operates in a unique way to document cases of sexual and gender based violence, using reproductive health camps for women and girls as the entry point to potential survivors. These camps offer an environment where confidentiality and safety are ensured and survivors can access psycho-social and legal counselling services in addition to medical services. To date, over 20,000 women and girls have benefitted from mobile reproductive health camps in 14 of the most conflict affected districts of the country (Saptari, Siraha, Dhanusa, Mahottari, Bardiya, Dang, Kalikot, Rolpa, Rukum, Surkhet, Achham, Bajura, Kanchanpur and Kapilvastu.)

The project deploys two multi-disciplinary teams consisting of four different NGOs to areas which have been identified as most conflict affected. Each team conducts mobile reproductive health camps (6 days initially and follow-up camp for 4 days) in two VDCs in each district. Clients and survivors who participate in the camps are referred to various services based on their needs, encompassing psychosocial and legal support, shelter and rehabilitation and uterus prolapse surgeries.

The project also has additional components including policy and media advocacy. Through three civil society organization partners, radio interviews, radio dramas and TV serials are being aired in order to raise awareness on the issue of sexual and gender based violence.

The mobile camps will be completed in February 2012.

¹ Sexual violence survivors are among two categories of victims who are not included as beneficiaries of the Government Interim Relief and Rehabilitation programme.

The Project management intends to commission an independent consultancy to conduct a final evaluation of the aforementioned project. This Terms of Reference (ToR) sets out the process and expected outcomes of the end of project assessment as well as planned content for the final report.

2. Purpose of the Evaluation

The main purpose of this study is to assess the extent to which the project activities, outputs contributed to the outcomes;

- a. To assess the relevance, efficiency, effectiveness, impact and sustainability of the project.
- b. To document lessons learnt and recommendations in assessing the project's contribution to the Nepal's peace process and also to feed into future project programming

3. Scope of Evaluation

An evaluation will cover the last month of the implementation (February 2012), including assessing some on-going mobile camps, completed camps as well as project activities which are outside of the camp settings. The mobile camps will be completed by the end of February, and the project will end in April 2012. The evaluation will be carried out based on the **OECD/DAC** criteria including relevance, effectiveness, efficiency, impact, sustainability, and management systems.

4. Objectives of the Evaluation and specific questions

Objective 1: To assess the effectiveness of the project in terms of progress made towards the outcomes within the given timeframe;

- ✓ How and to what extent clients benefitted from the medical, psychosocial, legal, documentation, shelter, livelihood and referral services?
- ✓ What are the perspectives of stakeholders if any project components can be replicated?
- ✓ Are there any good examples (case studies) of women and girls who have benefitted from the project?

Objective 2: To assess the project relevance in line with Nepal's peace process, national Plans, UNFPA/ UNICEF goals, and beneficiaries needs;

- ✓ To what extent do the outputs and outcomes contribute towards the achievement of Nepal transitional justice process, national strategies and National Action Plan on 1325?
- ✓ To what extent the project utilized the comparative advantage of the UN?
- ✓ How appropriate and realistic were the programme strategies and activities in terms of socio-economic and political environment in which this project operates? What are the major risks and constraints faced by the project?
- ✓ To what extent the modality of programme implementation (partnership) worked well? What practical difficulties, challenges faced during the implementation as well as opportunities?
- ✓ How did the project contribute to the United Nations Security Council Resolution 1612, 1882, 1325 and 1820 goals as well as other current relevant global policies? How did the project improve participation and protection of women and the delivery of services to conflict affected areas?

Objective 3: To assess the efficiency of the project:

- ✓ To what extent have the programme inputs (human, technical, and financial) been used efficiently? How and where could improvements have been made to improve efficiency without compromising quality?
- ✓ To what extent the project adopted the conflict sensitive approach and gender consideration in the project design and implementation?

Objective 4: To assess the programme impact:

- ✓ What were the major strengths of the project? What have been its major achievements (was there any changes in the lives of women, girls who participated in the camp? Any changes in the knowledge of service providers observed?). Were there any unintended outcomes – positive and negative?

Objective 5: To analyze the sustainability of the results achieved and the strategies used by the project:

- ✓ To what extent and in what ways the project contributed to enhance national capacities in government, civil society and NGOs to deliver effective service?
- ✓ To what extent is the programme owned, willing to continue by other partners (government, INGO, UN)? What has been the exit strategy for UNFPA support to the programme?

Objective 6: To analyze the overall project management

- ✓ To what extent did management support/hinder the progress of implementation of the project?
- ✓ Were joint M&E activities undertaken with partner agencies? How appropriate and effective was the programme monitoring and evaluation?

5. Methodology

It is expected that the study team will collect data from multiple sources to ensure accuracy and that all affected people and stakeholders are considered. The study will involve both quantitative as well as qualitative research methods including document review, workshops, in-depth interviews; focus group discussions; client exit interviews, household interviews; and facility inventories as applicable.

Final methods to be selected must match the study questions above. It is expected that the technical proposal will per objective:

- a) Identify methodology and sample (please address sampling limitations)
- b) Facilitate stakeholders participation

The team is also expected to **triangulate data** to cross check quantitative and qualitative data and different types of data sources. Submissions by interested organizations must propose specific methodologies deemed most practical, efficient and accurate.

The confidentiality, privacy, safety, and well-being of survivors must be a top priority at all times when collecting the data. It is required to abide by the “Do No Harm” approach and the guideline, *Ethical and Safety Recommendations*² set by the World Health Organization.

5.1 Stakeholders Involvement

² WHO Ethical and Safety Recommendation for Researching, Documenting and Monitoring Sexual Violence in Emergencies www.who.int/gender/documents/OMS_Ethics&Safety10Aug07.pdf

Concerned stakeholders are to be consulted at various levels and in all stages of the study process to ensure their ownership and accountability towards programme inputs and desired results. The consultancy firm should, therefore, involve following stakeholders of the proposed programme ensuring their participation through human rights-based, gender-sensitive and socially-inclusive approaches:

- Project Steering Committee members (Ministry of Peace and Reconstruction, Ministry of Health and Population, Department of Women and Children, Department of Education)
- District government line offices (DHO, WCO, DEO and other relevant organizations)
- Camp Management Committees and volunteers
- Implementing Partners (ADRA Nepal, Himalayan Health and Environmental Services Solukhumbu, TPO, Advocacy Forum, Save the Children, CWIN, Saathi, Sancharika Samuha, BBC World Service Trust, Himrights)
- UNPFN
- Project beneficiaries

At the phase of the design and review of the finding, UNICEF and UNFPA as well as other implementing partners should be involved and closely consulted.

5.2 Location

The desk review and meetings with relevant national level stakeholders will take place in Kathmandu. Other data collection processes will take place in the selected VDCs of project districts.

6. Management and activities

Under the overall guidance of UNICEF and UNFPA, the Consulting Firm/Consultant will carry out the evaluation. Since this is a joint programme and the assessment will be done jointly. The Evaluation Reference Committee (ERC) will be formed to ensure the quality standards of the assessment. The ERC will select the assessment firm/consultant through a transparent process and on the basis of competence.

ERC will be responsible for the following:

- Select and debrief evaluation team
- Approve the inception report and the final evaluation report
- Monitor the progress and quality of evaluation reports
- Review and comment on draft reports
- Approve evaluation reports
- Draw the dissemination plan, ensure the dissemination
- Follow up on the management response

7. Evaluation Ethics

This assessment will be conducted legally, ethically, and with due regard for the welfare of those involved in the evaluation, especially women, children, and members of other vulnerable or disadvantaged groups, and in accordance with the UNEG's Ethical Guidelines for Evaluation.³ Also in line with UN Ethical Guidelines for Evaluation include informed consent of participants. The purpose of the evaluation will be clearly informed to government counterparts and other

³ www.unevaluation.org/ethicalguidelines.

stakeholders. Target groups and sites for the evaluation will be informed of the evaluation purpose, rights and obligations of participating in the evaluation and agree to participate voluntarily. Key informants and other stakeholders, including programme beneficiaries will have the right to refuse interview.

8. Deliverables

The performance-based principles are applied to the management of the evaluation contract. The performance-based contract payment schedule, by milestone is as follows:

- 20% initial deposit, which covers up to the delivery of inception report that is acceptable to the Project Managers; (after 1 week)
- 40% second payment to cover field work phase up to delivery of a field work report/accountability; (after 4 weeks)
- 40% payable on receipt of a final report (edited and print ready) (after 6 weeks)

9. Use of assessment results

- a) Direct users are programme officers of UNFPA, UNICEF, staff of implementing partners, members of project steering committee members (government) and UN Peace Fund. The information and data will be used to plan future programming.
- b) Secondary users are the target communities and other stakeholders including the government, civil society and development partners working on SGBV at the national and district levels.

10. Work plan

The assessment should be completed within 3 months from the date of signing the contract. It is expected that the report in approved format will be submitted to UNICEF and UNFPA by no later than March 31, 2012. A detailed work plan for achieving the expected deliverables will be proposed by the consultancy firm which will be finalized jointly and agreed mutually.

11. Assessment (evaluation) Team

This comprises of the evaluators. Short bios should be provided for each evaluator. The evaluator's team will be a mix of gender-balanced and well-versed in local language and customs. Evaluators who will directly interact with clients of the project should be women. In addition to the relevant qualifications and experiences, the team will have a proven track record and technical expertise in their relevant field and should meet the following specific requirements:

- a) Experience:
 - Knowledge and demonstrated experience in gender, sexual and gender based violence and conflict related issues
 - Technical knowledge and demonstrated experience related to information gathering methods, data analysis and reporting
 - Experience in conducting evaluation of similar projects
 - Demonstrated experience in working successfully as a multidisciplinary team
 - Knowledge of participatory methods
 - Knowledge and experience with paralegal committee
 - Knowledge and experience in working with the UN
- b) Skills:
 - Language skills (English, Nepali) and any other language specific to location with strong written skills in English
 - Interviewing skills, especially in interviewing different target audiences

- Facilitation skills, especially in working with groups of different target stakeholders (i.e. beneficiaries, including women and girls, persons belonging to different caste/ethnic groups; central, district and village government officers; non-governmental organisations; civil society)
- c) Abilities:
 - Data analysis taking into consideration different perspectives
 - Financial analysis
 - Understanding of diversity, including cultural and gender awareness
- d) Personal ethics
 - Respect the United Nations Evaluation Group (UNEG) Code of Conduct
 - Be sensitive to beliefs, manners and customs and act with integrity and honesty in their relationship with all stakeholders, and in accordance with human rights norms, including sensitivity to different cultures and beliefs, sensitivity to gender, inequalities disabilities, ages and caste/ethnicity
 - Protect the anonymity and confidentiality of institutions and individual informants
 - Be responsible for their performance and products

Enclosed with TOR:

- Project Document

Annex: Template for the Final Assessment/Evaluation Report

<i>Title page</i>	Should contain name of project being assessed; place of project; name of the organization to which the report is submitted; names and affiliations of the evaluators; and date.
<i>Table of Contents</i>	
<i>Acknowledgements</i>	Identify those who contributed to the evaluation
<i>List of acronyms</i>	
<i>Executive summary</i>	A self-contained paper of 1-3 pages, summarizing essential information on the subject being evaluated/assessed, the purpose and objectives of the evaluation, methods applied and major limitations, the most important findings, conclusions and recommendations in order of priority.
<i>Introduction</i>	Describe the project being evaluated, including the problems being addressed by the interventions. Summarize the assessment/evaluation purpose, objectives, and key questions. Describe the structure of the report.
<i>Methodology</i>	Describe the methodology employed to conduct the evaluation/assessment. Explain and provide rationale for the sampling, selection of respondents, data collection methods, and analytical approaches. Explain the triangulation and the quality assurance measures taken to increase reliability and validity of the findings. Mention about measures to ensure the ethical issues into consideration. Mention the consultation process with stakeholders and the roles played by the evaluation management structure - the Evaluation Reference Committee, UNFPA CO.
<i>Findings and conclusions</i>	State findings based on the evidence derived from the information collected. To the extent possible measure achievement of results in quantitative and qualitative terms, and analyze the linkages between inputs, activities, outputs, outcomes and, if possible, impact. Discuss the relative contributions of stakeholders to the achievement of results. Conclusions should be substantiated by the findings and be consistent with the data collected, and must relate to the evaluation objectives and provide answers to the evaluation questions.
<i>Lessons learned</i>	Based on the evaluation findings and drawing from the evaluator(s)' overall experience in other contexts, if possible, provide lessons learned that may be applicable in other situations as well. Include both positive and negative lessons.
<i>Recommendations</i>	Formulate relevant, specific and realistic recommendations that are based on the evidence gathered, conclusions made and lessons learned. List proposals for action to be taken (short and long-term) by the person(s), unit or organization responsible for follow-up in the order of priority levels, including suggested time lines and cost estimates (where relevant) for implementation.
<i>Annexes</i>	Attach Terms of Reference for the evaluation; Members of the Evaluation Reference Committee, list persons interviewed, sites visited; list documents reviewed (reports, publications); data collection instruments (e.g., copies of questionnaires, surveys, etc.); web links.

Distribution of respondents by VDC according to district

<u>District</u>			
Saptari	Name of VDC		Number of respondents
	1	Bamangamakatti	18
	2	Koiladi	39
	3	Shankarpura	1
	4	Rampura	2
		Sub-total	60
Dhanusa			
	1	Baramajhiya	48
	2	D. Govindapur	4
	3	Kachurithera	1
	4	Labatoli	2
	5	Raghunathpur	1
	6	Dhanushadham	4
		Sub-total	60
Kapilvastu			
	1	Birpur	22
	2	Hathausa	38
		Sub-total	60
Rolpa			
	1	Mijhing	33
	2	Sirpa	1
	3	Jaimakasala	7
	4	Budagaun	8
	5	Khumel	1
	6	Khungri	1
	7	Fagaam	1
	8	Rangsi	1
	9	Tewang	5
	10	Bhirul	1
	11	Siuri	1
		Sub-total	60
Surkhet			
	1	Bidyapur	26
	2	Babiyachaur	31
	3	Salkot	3
		Sub-total	60
Kanchanpur			
	1	Pipaladi	44
	2	Tribhuvanbasti	16
		Sub-total	60
		Grand Total	360

NOTE: In 5 VDCs interviewers went to respondents' village while in Rolpa the respondents were recruited for interview at the RH camp site in Shiluchaur village of Mijhing VDC.

DOCUMENTS AND REPORTS REVIEWED

- ADRA. 2012. **UN Peace Fund SV Project Lessons Learnt Workshop**. PowerPoint Presentation. March.
- ADRA. 2011. **A Brief Report of UN Peace Fund on Sexual Violence Project: Lessons Learnt Workshop**. Kathmandu. August 4- 5.
- Advocacy Forum. 2012. **UN Peace Fund SV Project Lessons Learnt Workshop. Linking with project output and outcome**. PowerPoint Presentation. March.
- Berryman, E. 2002. Trip Report Nepal. 16-28 June 2002. Conflict and Health in Nepal. Save the Children, UK, Kathmandu, Nepal
- CBS. 2011. **Preliminary Results of National Population Census 2011**. NPC. Govt/N. Kathmandu. September.
- CWIN. 2012. **UN Peace Fund SV Project Lessons Learnt Workshop. Documentation of SGBV Survivors**. PowerPoint Presentation. March.
- Dawadee, B. 2003. **Human Rights Violation in Armed Conflict Areas and its Impact on Women**. Women Rehabilitation Centre (WOREC), Kathmandu, Nepal
- Gorkhaptra**. April 3, 2012. Nepali Daily Newspaper. Kathmandu, Nepal.
- HHESS. 2012. **UN Peace Fund SV Project Lessons Learnt Workshop**. PowerPoint Presentation. March.
- HHESS. 2010. **A Report of Resource Mapping**. Submitted to UNFPA. October.
- Informal Sector Service Centre (INSEC), 2003. Nepal Human Rights Yearbook 2003.
- Interagency Gender Working Group (IGWG) of USAID. 2006. **Addressing Gender-based Violence through USAID's Health Programs: A Guide for Health Sector Program Officers**. Washington, D.C.
- Ministry of Health and Population (MOHP) [Nepal], New ERA, and ICF International Inc. 2012. **Nepal Demographic and Health Survey 2011**. Kathmandu, Nepal: Ministry of Health and Population, New ERA, and ICF International, Calverton, Maryland.
- Ministry of Peace and Reconstruction. 2011. **National Action Plan: On Implementation of the UN Security Council Resolutions 1325 & 1820, 2011/12-2015/16**. Government of Nepal, Singha Durbar, Kathmandu. February 1.
- National Planning Commission, GoN, Kathmandu. 2010. **Three Year Plan Approach Paper (2010/11 - 2012/13)**
- OECD. 2008. **Principles for Evaluation of Development Assistance**. Development Assistance Committee. Paris. Reprint.
- Roma Bhattacharya. 2003. *Trafficking in South Asia in emerging Context of Globalization, HIV/AIDS and Conflict. A Human Poverty Approach*. In **Violence against Women in South Asia - A Regional Analysis**. In Asian Forum of Parliamentarians on Population and Development, Bangkok, Thailand and UNFPA Bangladesh and Country Technical Services Team for south and West Asia, Kathmandu
- Ruchira Tabassum Naved. 2003. *A Situation Analysis of Violence against Women in South Asia*. In **Violence against Women in South Asia - A Regional Analysis**. In Asian Forum of Parliamentarians on Population and Development, Bangkok, Thailand and UNFPA Bangladesh and Country Technical Services Team for south and West Asia, Kathmandu
- SAVE THE CHILDREN. 2012. **UN Peace Fund SV Project Lessons Learnt Workshop**. PowerPoint Presentation. March.
- SAATHI. 1997. **A National Survey on Violence against Women and Girls in Nepal**. Kathmandu, Nepal.
- SAATHI/UNFPA. 2008. *Situational Analysis of Gender-Based Violence in Surkhet and Dang Districts Nepal*.
- UNICEF. 2001. **A Reference Kit on Violence Against Women and Girls in South Asia**. Kathmandu: UNICEF, ROSA.
- UNICEF. **Project Proposal. Sexual and Gender Based Violence**. no date.
- UNICEF. 2012. **FGD Report of SGBV Project**. Pulchok. Kathmandu.
- UNPFN. 2010. **Project Status Update**. Kathmandu. November.
- UNPFN. 2010 and 2011. **Quarterly Reports**. Kathmandu, Nepal.
- UNPFN. 2011. **Annual programme- Narrative progress report Reporting period: 1 January – 31 December 2011**. "Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors/survivors"
<<http://daccessdds.un.org/doc/UNDOC/GEN/N05/439/59/PDF/N0543959.pdf?OpenElement>>
<http://www.un.org/children/conflict/_documents/SC-RESOLUTION1882-2009.pdf>
http://www.iwraw-ap.org/committee/pdf/49_concluding_observations/Nepal.pdf

**List of people consulted
Kathmandu**

Government:

Name	Designation	Organization
Sadhu Ram Sapkota,	Joint Sectary	Ministry of Peace and Reconstruction
Sharada Pandey	Under Secretary	MOHP

UN Agencies:

Name	Designation	Organization
Anne-Sophie LE BEUX	Program Specialist	UN Peace Fund
Lach Ferguson	Adviser	UN Peace Fund
Radha Gurung	Program Coordinator	UNICEF
Bhawana Subedi	Program Coordinator	UNICEF
Philippe Clerc	Adviser	UNFPA
Sudha Panta,	Gender Program Manager	UNFPA
Upama Malla,	Gender Program Officer	UNFPA

I/NGOs:

Name	Designation	Organization
Chandeswori Tamrakar	Program Manager	ADRA
Anup Poudel	Project coordinator	TPO
Kopila Adhikari	Program coordinator	Advocacy Forum
Amrita Shrestha	Documentation Officer	CWIN
Saradha Rijal	Documentation Officer	CWIN
Sumit Shah	Program coordinator	SAVE
Nigma Sherpa	Chairman	HHESS
Him Lal Gyawali	Camp coordinator	HHESS
Anjana Shakya		HimRights
Arjun Adhikari		HimRights
Babita Basnet	President	Sancharika Samuha

Kapilvastu

Name	Designation	Organization
Shree Prasad Shrestha	Administrative Chief	DPHO
Sankar Bahadur Gautam	Sectional Officer	DEO
Rukiya Katun	Sectional Officer	WCO
Bimala Gotame	Surgeon (Halдар)	District Police Office (DPO)
Bishnu Prasad Bhusal	Chairman	Radio Samanta (FM)
Baburam Acharya	Camp management committee Member	Batkawa SHP
Gopal Banjade	Community Leader	Sanjibani Samudaik Hospital

Rolpa:

Name	Designation	Organization
Dr. Om Prakash Pathak	Medical Officer	DHO
Surendra Raman Puri	Non Gazetted Officer	DEO
Ms. Gharti Magar	Sub-Inspector, Women Cell	DPO
Shanti Kumari Basnet	Acting WCO	WCO
Pipala Gharti Magar	Camp management Committee Chairman	Suryadaya Ma. Vi. School, Sulichaur
Anram BK	Community Leader	Sulichaur PHC Management Committee Member

Saptari:

Name	Designation	Organization
Ambika Oli	PHN	DPHO
Sunil Kumar Prasad	Sectional Officer	DEO
Sanju Kumari Kewat	Assistance Female Police	DPO
Sushila Chaudary	Supervisor	WCO
Bhupendra Mandal	Member	Bharkuwa FM
Ganga Prasad Yadav	Camp Management Committee, Member	PHC, Topa
Pappee Kumari Sing	Community Leader	Shree Rajendra Devki Ma.Vi.

Dhanusha:

Name	Designation	Organization
Ghanshyam Gohit	Cheif	DPHO
Raj Dev Yadav	Sectional Officer	DEO
Usha Mahato	Social mobilizer	WCO
Ghana Shyam Kumar Mishra	Station In charge	Radio Madesh FM
		District Police Office
Binod Yadav	Camp management committee Chairman	Samaj Kalyan Yuba Samaj
Rosan Deep Dhakal	Community Leader	Local Social Worker

Surkhet:

Name	Designation	Organization
Ganga Prasad Ghimire	Public Health Officer	DPHO
Renu Singh	PHN	DPHO
Dipa Hamal	Under Secretary	DEO
Pan Kumari Khadka	Sectional Officer	WCO
Birendra Yadav	Inspector	DPO
Dil Kumari Buda	Haladar	DPO
Amar Karki	Chairman	Garmin Ekata Yuba Sanjal FM
Bir Bahadur Tarami	Camp Management Committee, Member	SHP, Babiyachaur
Amrita Sunar	Community Leader	Dalit Mahila Sang

Kanchanpur

Name	Designation	Organization
Shiva Datta Bhatta	Cheif	DPHO
Shiva Raj Upreti	Cheif	DEO
Puspa Bom	Sectional Officer	WCO
Kalawati Joshi	Assistance Female Police	DPO
Dammar Raj Joshi	Reporter	Suklafata FM
Bishnu Datta Joshi	Camp Management Committee, Member	Shiva Shankar Ma.Vi., School, Pipladi
Hem Raj Pandey	Community Leader	Local Leader

Confidential, information to be used for research purposes only

“Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors”.

Study conducted by

THE PHD GROUP

INDIVIDUAL INTERVIEW QUESTIONNAIRE FOR WOMEN AND GIRLS

Form No.

Time interview started: Hour: ____ Minute: ____

INTRODUCTION AND CONSENT

Namaste! My name is _____. I am from The PHD Group, which is conducting a study for the project supported by UNICEF and UNFPA. The project has been providing education and services on reproductive health (RH), sexual and gender based violence (SGBV), psychosocial, livelihood and legal supports to women and girls in this district. We are here to find out about the services and education provided by the project and how satisfied are you with the project. We would very much appreciate your participation in this study. This information will be considered while developing RH and SGBV related programs in future in the country. The interview usually takes around half an hour. I assure you that your name will not be shared with anyone else and your answers to my questions will be combined with answers from many other people so that no one will know that the answers you give me today belong to you. Your privacy is protected, and I assure that your answers will be kept confidential.

Your participation in this study is voluntary and you can choose not to answer any individual question or all of the questions. However, we hope that you will participate in this study since your views are important.

May I proceed with the questions?

RESPONDENT:

AGREES TO BE INTERVIEWED

1
↓

DOES NOT AGREE TO BE INTERVIEWED

2 → END.

Name of interviewer:

Date (d/m/y).....

“Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors”.

UNFPA/UNICEF AND THE PHD GROUP

(FGD Guideline)

INTRODUCTION AND CONSENT

Two persons conducting it: Moderator and note taker

Introduction

Hello. My name isand my friend is We are from the Population, Health and Development Group, which is conducting a study for UNICEF and UNFPA. UNICEF and UNFPA have been implementing a project in this district with the aim of helping women and girls to improve their health and wellbeing. We are here to find out how this project has been helping women and girls in your community. We would very much appreciate your participation in this study. This information will help the Government of Nepal to improve its program in the country. The study usually takes around half an hour. I assure you that your name will not be shared with anyone else and your answers to my questions will be combined with answers from many other people so that no one will know that the answers you give me today belong to you. Your privacy is protected, and I assure that your answers will be kept confidential.

My friend will try to take notes of major things that you express. However, it would be difficult to remember everything and take notes that you say during the discussion. For this reason we would like to use a tape recorder. This will capture all your ideas. I hope you would not mind us using tape recorder.

To moderator: Make sure that the participants do not have objection against the use of tape recorder. If they give their consent please continue, if not thank them and stop here.

“Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors”.
UNFPA/UNICEF AND THE PHD GROUP
GENERIC INTERVIEW GUIDE

Form No.

Time discussion started: Hour: _____ Minute: _____

INTRODUCTION AND CONSENT

INTRODUCTION AND CONSENT

Namaste! My name is _____. I am from The PHD Group, which is conducting a study for the project supported by UNICEF and UNFPA. The project has been providing education and services on reproductive health, sexual and gender based violence, psychosocial, livelihood and legal supports to women and girls in this district. We are here to find out about the services and education provided by the project and how satisfied are you with the project. We would very much appreciate your participation in this study. This information will help to improve the project in the country. The interview usually takes around half an hour. I assure you that your name will not be shared with anyone else and your answers to my questions will be combined with answers from many other people so that no one will know that the answers you give me today belong to you. Your privacy is protected, and I assure that your answers will be kept confidential.

Your participation in this study is voluntary and you can choose not to answer any individual question or all of the questions. However, we hope that you will participate in this survey since your views are important.

May I proceed with the questions?

RESPONDENT:

AGREES TO BE INTERVIEWED 1 DOES NOT AGREE TO BE INTERVIEWED 2 → END.

Name of interviewer:

Date (d/m/y).....

District sample survey data tables

Table 3.1 Mean and median ages of respondents by district

District	Mean	N	Std. Deviation	Median	Minimum	Maximum
Saptari	32.6	60	14.91	29	15	70
Dhanusa	30.4	60	13.45	30	11	64
Kapilvastu	38.1	60	13.37	37	16	69
Rolpa	31.6	60	13.55	30	10	65
Surkhet	35.7	60	13.31	34	17	70
Kanchanpur	31.6	60	13.32	30	13	65
Total	33.3	360	13.83	32	10	70

Table 3.2 Percent distribution of respondents by education according to district

District	No education	Primary	Some secondary	SLC and above	Total
Saptari	70.0	21.7	8.3	0.0	100.0
Dhanusa	66.7	16.7	13.3	3.3	100.0
Kapilvastu	38.3	36.7	20.0	5.0	100.0
Rolpa	53.3	28.3	15.0	3.3	100.0
Surkhet	43.3	40.0	13.3	3.3	100.0
Kanchanpur	43.3	20.0	20.0	16.7	100.0
Total %	52.5	27.2	15.0	5.3	100.0
Total n	189	98	54	19	360

Table 3.3 Percent distribution of respondents by marital status according to district

District	Never married	Married	Separated	Divorced	Widowed	Total
Saptari	10.0	78.3	0.0	0.0	11.7	100.0
Dhanusa	10.0	73.3	0.0	5.0	11.7	100.0
Kapilvastu	10.0	76.7	0.0	0.0	13.3	100.0
Rolpa	6.7	91.7	1.7	0.0	0.0	100.0
Surkhet	6.7	88.3	0.0	0.0	5.0	100.0
Kanchanpur	20.0	65.0	0.0	0.0	15.0	100.0
Total %	10.6	78.9	0.3	0.8	9.4	100.0
Total n	38	284	1	3	34	360

Table 3.4 Mean and median age at first marriage of respondents by district

District	Mean	N	Std. Deviation	Median	Minimum	Maximum
Saptari	14.3	54	2.777	15	10	21
Dhanusa	15.3	54	2.613	15	10	23
Kapilvastu	15.7	54	3.854	17	5	23
Rolpa	17.6	56	2.181	17	13	22
Surkhet	16.6	56	2.825	16	11	26
Kanchanpur	15.6	48	3.065	16	8	25
Total	15.9	322	3.084	16	5	26

Table 3.5 Mean and median age at first birth of respondents by district

District	Mean	N	Std. Deviation	Median	Minimum	Maximum
Saptari	17.1	47	2.54	16	13	27
Dhanusa	18.1	44	3.28	17	13	28
Kapilvastu	19.8	53	2.83	20	15	28
Rolpa	19.6	45	2.17	20	16	24
Surkhet	18.5	55	2.93	17	15	27
Kanchanpur	18.9	46	2.90	18	14	27
Total	18.7	290	2.92	18	13	28

Table 3.6 Percent distribution of respondents by mean number of children ever born and mean

number of children dead according to district

District of respondent		Children ever born	Children dead
Saptari	Mean	2.53	0.68
	N	60	60
	Std. Deviation	1.9	1.631
Dhanusa	Mean	2.28	0.23
	N	60	60
	Std. Deviation	1.914	0.533
Kapilvastu	Mean	3.22	0.62
	N	60	60
	Std. Deviation	1.941	1.427
Rolpa	Mean	2.72	0.40
	N	60	60
	Std. Deviation	2.565	0.887
Surkhet	Mean	3.42	0.40
	N	60	60
	Std. Deviation	2.011	0.807
Kanchanpur	Mean	2.23	0.33
	N	60	60
	Std. Deviation	1.75	0.705
Total	Mean	2.73	0.44
	N	360	360
	Std. Deviation	2.065	1.078

Table 3.7 Percent distribution of respondents by occupation according to district

Occupation	District						Total
	Saptari	Dhanusa	Kapilvastu	Rolpa	Surkhet	Kanchanpur	
Farmer	26.7	3.3	46.7	53.3	93.3	40.0	43.9
Paid employment	0.0	0.0	3.3	1.7	0.0	1.7	1.1
Business	1.7	1.7	10.0	6.7	1.7	1.7	3.9
Daily wage earner	30.0	21.7	5.0	10.0	0.0	3.3	11.7
Housewife	33.3	61.7	30.0	25.0	1.7	31.7	30.6
Student	5.0	11.7	5.0	3.3	3.3	20.0	8.1
Disabled	1.7	0.0	0.0	0.0	0.0	0.0	0.3
Unemployed	1.7	0.0	0.0	0.0	0.0	1.7	0.6
Total %	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total n	60	60	60	60	60	60	360

Table 3.8 Percent distribution of respondents by religion according to district

District	Religion				Total
	Hindu	Buddhist	Muslim	Christian	
Saptari	96.7	0.0	3.3	0.0	100.0
Dhanusa	93.3	0.0	6.7	0.0	100.0
Kapilvastu	93.3	0.0	6.7	0.0	100.0
Rolpa	98.3	1.7	0.0	0.0	100.0
Surkhet	96.7	0.0	0.0	3.3	100.0
Kanchanpur	90.0	1.7	5.0	3.3	100.0
Total %	94.7	0.6	3.6	1.1	100.0
Total n	341	2	13	4	360

Table 3.9 Percent distribution of respondents by caste/ethnicity according to district

District	Caste/ethnicity						Total
	Terai Middle Castes	Chhetri	Bahun	Janjati	Dalit	Muslim	
Saptari	38.3	0.0	0.0	10.0	48.3	3.3	100.0

Dhanusa	58.3	1.7	5.0	13.3	18.3	3.3	100.0
Kapilvastu	10.0	5.0	38.3	36.7	3.3	6.7	100.0
Rolpa	0.0	36.7	6.7	33.3	23.3	0.0	100.0
Surkhet	0.0	28.3	16.7	5.0	50.0	0.0	100.0
Kanchanpur	0.0	26.7	28.3	31.7	13.3	0.0	100.0
Total %	17.8	16.4	15.8	21.7	26.1	2.2	100.0
Total n	64	59	57	78	94	8	360

Table 3.10 Percent distribution of respondents by income according to district

District	Annual income of family				Total	
	Less than Rs. 60,000	Rs. 60,000 to Rs.79,999	Rs. 80,000 to Rs.99,999	Rs. 1,00,000 or more	%	n
Saptari	16.4	27.3	27.3	29.1	100.0	55
Dhanusa	34.5	27.6	15.5	22.4	100.0	58
Kapilvastu	3.4	29.3	8.6	58.6	100.0	58
Rolpa	25.4	30.5	15.3	28.8	100.0	59
Surkhet	21.1	24.6	17.5	36.8	100.0	57
Kanchanpur	37.5	25.0	8.3	29.2	100.0	48
Total %	22.7	27.5	15.5	34.3	100.0	335

Table 3.11 Mean family size of respondents according to district

District		Number of family members (Total)	Number of family members (Male)	Number of family members (Female)
Saptari	Mean	6.1	2.9	3.2
	N	60	60	60
	Std. Deviation	2.159	1.388	1.447
Dhanusa	Mean	6.3	3.1	3.3
	N	60	60	60
	Std. Deviation	2.884	1.789	1.684
Kapilvastu	Mean	6.0	2.9	3.1
	N	60	60	60
	Std. Deviation	2.474	1.351	1.761
Rolpa	Mean	6.3	3.2	3.1
	N	60	60	60
	Std. Deviation	3.049	1.824	1.751
Surkhet	Mean	5.3	2.6	2.7
	N	60	60	60
	Std. Deviation	1.871	1.155	1.326
Kanchanpur	Mean	7.5	4.0	3.6
	N	60	60	60
	Std. Deviation	3.938	2.368	1.978
Total	Mean	6.3	3.1	3.2
	N	360	360	360
	Std. Deviation	2.868	1.736	1.678

Table 3.12 Distribution of respondents by type of service received at RH camps

Type of service	RH	Psycho-social	Legal	Livelihood	Total
Gynae	115	0	0	0	115
Gynae and psycho	0	50	0	0	50
Uterine prolapse	27	0	0	0	27
Obstretic	25	0	0	0	25
Psycho-social	0	22	0	0	22
Gynae+psycho+legal	0	0	21	0	21
Gynae+legal	0	0	14	0	14

Psycho+Obstretic	0	13	0	0	13
Psycho & UP	0	12	0	0	12
Gynae+UP	7	0	0	0	7
Psycho+Legal	0	0	7	0	7
UP & Legal	0	0	6	0	6
Gynae+UP+Psycho	0	6	0	0	6
Legal	0	0	4	0	4
Gynae+Livelihood	0	0	0	4	4
Psycho+Livelihood+Gynae	0	0	0	4	4
Legal+Psycho+UP	0	0	3	0	3
Livelihood	0	0	0	2	2
Livelihood+UP	0	0	0	2	2
Psycho+Legal+obstretic	0	0	2	0	2
Legal+Livelihood+Gynae	0	0	0	2	2
Obstretic+Gynae	2	0	0	0	2
Obstretic+UP	2	0	0	0	2
Psycho+livelihood+obstretic	0	0	0	1	1
Psycho+Legal+Livelihood+UP+Gynae	0	0	0	1	1
Legal+Obstretic	0	0	1	0	1
Obstretic+UP+Psycho	0	1	0	0	1
Livelihood+Obstretic	0	0	0	1	1
Legal+Livelihood	0	0	0	1	1
Legal+Livelihood+Psycho+Gynae	0	0	0	1	1
Psycho+legal_Livelihood	0	0	0	1	1
Total	178	104	58	20	360

Table 3.13 Distribution of respondents by four major types according to detailed service received

RH service	Saptari	Dhanusa	Kapilvastu	Rolpa	Surkhet	Kanchanpur	Total
<u>Gynae services</u>							
Free medicines	18	13	47	9	10	15	112
HIV testing	0	0	0	2	1	0	3
Free health checked-up	8	7	1	5	0	1	22
Got health information	4	3	10	4	0	12	33
Quick health service; no long queue	0	0	0	3	0	0	3
Got advice to keep private parts clean	0	0	0	0	0	1	1
Got advice to take rest	0	0	1	0	0	0	1
Got advice to use FP methods	0	0	0	0	0	1	1
Sub-total	18	13	48	9	11	16	115
<u>UP services</u>							
Pelvis floor exercise	0	0	0	1	0	2	3
Ring pessary insertion	1	0	2	0	1	2	6
Got referral slip for UP surgery	2	1	2	0	2	1	8
Got medical prescription/medicines	1	1	1	0	10	1	14
Sub-total	2	2	5	1	13	4	27
<u>Obstretic services</u>							
Iron tablets /vitamins	1	1	0	1	0	0	3
Free medicines	0	0	0	20	0	2	22
Health checked-up at free of cost	1	0	0	20	0	0	21
Learned about health problems	0	0	0	4	0	1	5
Got advice to take nutritious foods	0	0	0	1	0	0	1
Had blood test	0	0	0	0	0	1	1
Sub-total	1	1	0	21	0	2	25
<u>UP+gynae</u>							
Free medicines	0	2	1	3	0	1	7
Free health checked-up	0	0	0	3	0	0	3
Got health information	0	1	0	2	0	1	4
Got advice to do physical exercise	0	0	1	0	0	0	1
Sub-total	0	2	1	3	0	1	7

<u>Obs+gynae</u>							
Free medicines	0	0	0	2	0	0	2
Free health checked-up	0	0	0	2	0	0	2
Quick health service; no long queue	0	0	0	1	0	0	1
Sub-total	0	0	0	2	0	0	2
<u>Obs+UP</u>							
Free medicines	0	0	0	2	0	0	2
Free health checked-up	0	0	0	2	0	0	2
Learned about health problems	0	0	0	1	0	0	1
Sub-total	0	0	0	2	0	0	2
Total	21	18	54	38	24	23	178

Table 3.14 Percent distribution of respondents by level of satisfaction when receiving gynaecological service at the camp according to district

District	Poor	Satisfactory	Good	Very good	Total
Saptari	0.0	33.3	61.1	5.6	100.0
Dhanusa	0.0	0.0	84.6	15.4	100.0
Kapilvastu	4.2	6.3	77.1	12.5	100.0
Rolpa	0.0	0.0	88.9	11.1	100.0
Surkhet	27.3	0.0	72.7	0.0	100.0
Kanchanpur	18.8	18.8	50.0	12.5	100.0
Total %	7.0	10.4	72.2	10.4	100.0
Total n	8	12	83	12	115

Table 3.15 Percent distribution of respondents by level of satisfaction when receiving uterine prolapse service at the camp according to district

District	Poor	Satisfactory	Good	Very good	Total
Saptari	0.0	0.0	100.0	0.0	100.0
Dhanusa	0.0	0.0	100.0	0.0	100.0
Kapilvastu	0.0	20.0	60.0	20.0	100.0
Rolpa	0.0	0.0	100.0	0.0	100.0
Surkhet	15.4	7.7	76.9	0.0	100.0
Kanchanpur	75.0	25.0	0.0	0.0	100.0
Total %	18.5	11.1	66.7	3.7	100.0
Total n	5	3	18	1	27

Table 3.16 Percent distribution of respondents by district according to type of person shared the problems with

Psych-social problems shared with before camp (Multiple responses)	District						
	Saptari	Dhanusa	Kapilvastu	Rolpa	Surkhet	Kanchanpur	Total
Shared with husband	27.3	31.8	25.0	33.3	11.1	5.0	22.1
Shared with other family members	22.7	31.8	0.0	16.7	16.7	35.0	24.0
Shared with friends	72.7	31.8	75.0	38.9	55.6	35.0	48.1
Consulted traditional healer	0.0	4.5	0.0	5.6	0.0	0.0	1.9
Went to awareness center	0.0	0.0	0.0	0.0	5.6	0.0	1.0
FCHV	0.0	0.0	25.0	0.0	0.0	0.0	1.0
Did not talk to anybody	4.5	18.2	0.0	22.2	22.2	30.0	18.3
Co-wife/daughter in law/Parents	0.0	9.1	0.0	0.0	0.0	0.0	1.9
Total n	22	22	4	18	18	20	104

Table 3.17 Percent distribution of respondents by district according to feelings after mentioning psycho-social problems at camp

Feelings after mentioning psycho-social problems at camp	District						
	Saptari	Dhanusa	Kapilvastu	Rolpa	Surkhet	Kanchanpur	Total
Camp assured to help,	18.2	4.5	0.0	0.0	61.1	0.0	15.4

hopeful							
Got relief/satisfaction	72.7	95.5	75.0	100.0	44.4	95.0	81.7
Encouraged to talk to husband	0.0	4.5	0.0	0.0	0.0	0.0	1.0
Felt no difference	4.5	0.0	25.0	0.0	0.0	5.0	2.9
Headache	4.5	0.0	0.0	0.0	0.0	0.0	1.0
Felt that the advice was good	0.0	0.0	0.0	5.6	5.6	0.0	1.9
Total n	22	22	4	18	18	20	104

Table 3.18 Percent distribution of respondents by district according to psycho-social counselling and service received at camp

Psycho-social advice and service received from camp	District						Total
	Saptari	Dhanusa	Kapilvastu	Rolpa	Surkhet	Kanchanpur	
Got advice to send girl to school	0.0	0.0	0.0	0.0	5.6	0.0	1.0
Got message that camp gives financial assistance	9.1	0.0	0.0	5.6	38.9	0.0	9.6
Take rest/do not fear/do physical exercise	22.7	50.0	75.0	88.9	33.3	75.0	53.8
Did not give suggestions	4.5	4.5	0.0	5.6	5.6	0.0	3.8
Got advice to take medicines regularly	13.6	9.1	25.0	27.8	0.0	0.0	10.6
Got advice to talk to husband/parents	13.6	0.0	0.0	11.1	0.0	5.0	5.8
Got advice to live in harmony with family members	27.3	0.0	0.0	0.0	5.6	10.0	8.7
Got advice to go for health check-up	9.1	18.2	0.0	0.0	0.0	0.0	5.8
Study well	13.6	0.0	0.0	0.0	0.0	5.0	3.8
Avoid child marriage	4.5	0.0	0.0	0.0	0.0	0.0	1.0
Got advice to do income generating activities	4.5	0.0	0.0	0.0	0.0	0.0	1.0
Not to take loan to live	0.0	0.0	0.0	0.0	0.0	5.0	1.0
Work for children's future	4.5	0.0	0.0	5.6	0.0	5.0	2.9
Drink plenty of water	4.5	0.0	0.0	11.1	0.0	0.0	2.9
Forget problems & work	9.1	0.0	0.0	0.0	0.0	0.0	1.9
Got good advice	18.2	4.5	25.0	61.1	16.7	55.0	29.8
Not to lift heavy load	0.0	4.5	0.0	0.0	0.0	0.0	1.0
Got medicines free	4.5	18.2	0.0	0.0	0.0	0.0	4.8
Provider was suspicious of me	0.0	0.0	0.0	0.0	0.0	5.0	1.0
Total n	22	22	4	18	18	20	104

Table 3.19 Percent distribution of respondents rating psycho-social service at camp according to district

District	Rating of psycho-social service				Total
	Poor	Satisfactory	Good	Very good	
Saptari	4.5	0.0	90.9	4.5	100.0
Dhanusa	0.0	4.5	63.6	31.8	100.0
Kapilvastu	0.0	0.0	100.0	0.0	100.0
Rolpa	0.0	11.1	83.3	5.6	100.0
Surkhet	5.6	5.6	83.3	5.6	100.0
Kanchanpur	5.0	10.0	85.0	0.0	100.0
Total %	2.9	5.8	81.7	9.6	100.0
Total n	3	6	85	10	104

Table 3.20 Percent distribution of respondents by district according to legal service/advice received at camp

Legal service/advice from the camp (Multiple responses)	District						Total
	Saptari	Dhanusa	Kapilvastu	Rolpa	Surkhet	Kanchanpur	
Got advice to lodge a complain	61.5	57.1	100.0	-	-	69.2	47.4
Got advice to go to other place for	84.6	57.1	50.0	-	27.3	23.1	45.6

service							
Got a referral slip to go elsewhere	7.7	-	-	-	27.3	-	7.0
Provider did not give any advice after listening to my problems	-	14.3	-	100.0	18.2	-	14.0
Provider committed to help later	-	-	-	-	54.5	-	10.5
Got advice to talk to women group	-	7.1	-	-	-	-	1.8
Got good advice	-	-	-	-	-	15.4	3.5
Total n	13	14	2	4	11	13	57

Table 3.21 Percent distribution of respondents by district according to actions taken after receiving legal service/advice at camp

Legal actions taken/empowered legally	District				Total	
	Saptari	%	%	Kanchanpur	%	n
Lodged a complain in Police	80.0	20.0	-	-	100.0	5
Empowered to claim my right	72.7	9.1	-	18.2	100.0	11
Developed confidence	64.3	7.1	7.1	21.4	100.0	14
Total %	56.0	17.0	6.0	22.0	100	18

Table 3.22 Percent distribution of respondents by district according to type of livelihood support promised at camp

About livelihood support	District				Total	
	Saptari	Dhanusa	Surkhet	Kanchanpur	%	n
Got assurance for help	14.3	42.9	28.6	14.3	100.0	7
No support provided	0.0	25.0	50.0	25.0	100.0	8
I was told that sewing training would be given	33.3	33.3	0.0	33.3	100.0	3
Advised to join literacy class	100.0	0.0	0.0	0.0	100.0	1
Got advice to raise livestock	100.0	0.0	0.0	0.0	100.0	2
Total %	20.0	30.0	30.0	20.0	100.0	20

Table 3.23 Percent distribution of respondents rating overall camp services according to district

District	Poor	Satisfactory	Good	Very good	Total %	Total n
Saptari	0.0	5.0	93.3	1.7	100.0	60
Dhanusa	0.0	0.0	61.7	38.3	100.0	60
Kapilvastu	3.3	8.3	76.7	11.7	100.0	60
Rolpa	0.0	10.0	85.0	5.0	100.0	60
Surkhet	8.3	11.7	70.0	10.0	100.0	60
Kanchanpur	23.3	13.3	58.3	5.0	100.0	60
Total	5.8	8.1	74.2	11.9	100.0	360

Table 3.24 Percent distribution of respondents giving reasons for finding RH camp good by district

Reasons for finding camp good (multiple responses)	District						Total
	Saptari	Dhanusa	Kapilvastu	Rolpa	Surkhet	Kanchanpur	
Free health check-up	17.5	66.7	69.8	75.9	70.8	28.9	55.8
Did not hesitate to share health problems with lady doctor	3.5	23.3	22.6	70.4	16.7	10.5	25.2
Free medicines	31.6	33.3	35.8	81.5	50.0	39.5	45.2
Got good counselling	75.4	10.0	3.8	27.8	27.1	71.1	34.2
Not so long queue	1.8	1.7	0.0	18.5	4.2	0.0	4.5
Good provider behaviour	1.8	1.7	1.9	3.7	4.2	5.3	2.9
Got sufficient quantity of medicines	0.0	6.7	0.0	0.0	0.0	0.0	1.3
Health improved	7.0	0.0	9.4	0.0	0.0	0.0	2.9
Got referral service	0.0	0.0	0.0	0.0	0.0	2.6	0.3
Received free surgery	3.5	3.3	0.0	0.0	0.0	0.0	1.3
Camp appropriate for sharing problems	1.8	1.7	0.0	1.9	0.0	0.0	1.0
Camp arranged for treatment even outside the camp	0.0	0.0	0.0	0.0	2.1	0.0	0.3

Got assurance for financial assistance	0.0	0.0	0.0	0.0	12.5	0.0	1.9
Did not have to go far for treatment	0.0	0.0	0.0	3.7	6.3	2.6	1.9
Total n	57	60	53	54	48	38	310

Table 3.25 Percent distribution of respondents giving suggestions for improvements of camp service

Suggestions for improvements (multiple responses)	District					Total %
	Saptari	Kapilvastu	Rolpa	Surkhet	Kanchanpur	
Provide quality health services	100.0	33.3	50.0	50.0	31.8	40.4
Give effective medicine	0.0	0.0	16.7	25.0	13.6	14.9
Give good counselling	0.0	0.0	33.3	16.7	31.8	23.4
Provide financial assistance to the poor	0.0	16.7	0.0	8.3	22.7	14.9
Camp should be conducted from time to time	0.0	16.7	0.0	25.0	18.2	17.0
Surgical facility should be available in the camp	0.0	33.3	33.3	25.0	31.8	29.8
Side effects of medicines need to be mentioned	0.0	0.0	0.0	0.0	4.5	2.1
Camp should be conducted for a long time	0.0	0.0	0.0	8.3	0.0	2.1
Total n	1	6	6	12	22	47

Table 3.26 Percent distribution of respondents by district according to source of information informing about camp

Source of camp information (Multiple responses)	District						Total
	Saptari	Dhanusa	Kapilvastu	Rolpa	Surkhet	Kanchanpur	
Friend/Neighbour	73.3	71.7	88.3	76.7	65.0	86.7	76.9
FCHV	76.7	45.0	98.3	30.0	75.0	86.7	68.6
Miking	76.7	45.0	50.0	1.7	5.0	36.7	35.8
FM radio	51.7	8.3	38.3	66.7	35.0	13.3	35.6
Health provider	15.0	6.7	50.0	1.7	3.3	30.0	17.8
TBA	5.0	0.0	23.3	0.0	1.7	30.0	10.0
Student	13.3	15.0	3.3	0.0	3.3	18.3	8.9
Street drama	23.3	1.7	8.3	1.7	5.0	8.3	8.1
Posters/pamphlet	13.3	5.0	11.7	5.0	3.3	3.3	6.9
VDC representative	11.7	3.3	6.7	0.0	0.0	5.0	4.4
NGO worker	5.0	1.7	10.0	0.0	0.0	6.7	3.9
TV	0.0	0.0	10.0	1.7	1.7	1.7	2.5
Paper/Magazine	3.3	0.0	5.0	0.0	0.0	1.7	1.7
Husband	0.0	0.0	0.0	1.7	0.0	0.0	0.3
Total n	60	60	60	60	60	60	360

Confidential, information to be used for research purposes only

“Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors”.
Study conducted by
THE PHD GROUP
INDIVIDUAL INTERVIEW QUESTIONNAIRE FOR WOMEN AND GIRLS

Form No.			
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Time interview started: Hour: ____ Minute: ____

INTRODUCTION AND CONSENT

Namaste! My name is _____. I am from The PHD Group, which is conducting a study for the project supported by UNICEF and UNFPA. The project has been providing education and services on reproductive health (RH), sexual and gender based violence (SGBV), psychosocial, livelihood and legal supports to women and girls in this district. We are here to find out about the services and education provided by the project and how satisfied are you with the project. We would very much appreciate your participation in this study. This information will be considered while developing RH and SGBV related programs in future in the country. The interview usually takes around half an hour. I assure you that your name will not be shared with anyone else and your answers to my questions will be combined with answers from many other people so that no one will know that the answers you give me today belong to you. Your privacy is protected, and I assure that your answers will be kept confidential.

Your participation in this study is voluntary and you can choose not to answer any individual question or all of the questions. However, we hope that you will participate in this study since your views are important.

May I proceed with the questions?

RESPONDENT:

AGREES TO BE INTERVIEWED 1 DOES NOT AGREE TO BE INTERVIEWED 2 → END.

Name of interviewer:

Date (d/m/y).....

IDENTIFICATION			
1) Name of District of respondent:			
2) Name of VDC/Municipality of respondent:			
3) Ward Number of respondent:			
4) Name of Village of respondent:			
5) Name of organization conducting/conducted RH camp:			
6) Name of the RH camp site:			
7) Ward number of the place of the RH camp site:			
8) Name of VDC/Municipality of the place of the RH camp site:			

Section 1: Respondent's Background

Interviewer: Now I would like to ask some questions about you and your household

Q. No	Questions	Codes	GO TO Q.
101	How old are you?	Age (in completed years):	
102	What is your educational Status?	Grade (write completed grade): Literate (without attending school) 96 Illiterate 97	
103	What is your marital status?	Never married..... 1 → 105 Married 2 Separated 3 Divorced..... 4 Widowed 5	
104	How old were you when you first married?	Age at first marriage (write completed age):.....	
105	Have you ever given birth?	Yes 1 No 2 → 110	
106	How old were you when you gave birth to your first child?	Age at first birth (write completed age):	
107	How many sons? And how many daughters? If NONE, RECORD '00'	Sons..... Daughters.....	
108	Have any of your children died?	Yes 1 No 2 → 110	
109	How many sons have died? And how many daughters have died? If NONE, RECORD '00'	Sons dead Daughters dead	
110	What is your occupation?	Farmer 1 Service 2 Business 3 Daily wage earner..... 4 Housewife 5 Other (specify) _____	
111	What is your religion?	Hindu 1 Buddhist 2 Muslim 3 Kirat 4 Christian 5 Other (specify) _____	
112	What is your caste/ethnicity?	Caste/ethnicity.....	
113	What is your approximate monthly income ?	Rs. No income 9998 No answer 9999	
114	What is the approximate monthly income of your household?	Rs. No income 9998 No answer 9999	
115	Including yourself, how many persons live in your household? (INCLUDE SERVANTS TOO)	Total Male: Female:.....	

Q. No	Questions	Codes	GO TO Q.
116	Who usually makes decisions about household matters?	Self 1 Husband..... 2 Both 3 Someone else..... 4 Other (<i>specify</i>)	

Section 2: Service Sought at RH Camp

Interviewer: Now I would like to ask some questions about the RH camp(s) you attended

Q. No	Questions	Codes	GO TO Q.
201	How many times did you attend RH camps?	.....times	<input type="text"/>
202	When did you last attend the RH camp?	Day..... Month..... Year.....	<input type="text"/> <input type="text"/> <input type="text"/>
203	What type of service did you receive there? (More than one answers possible)	Obstetrics (ANC, PNC, delivery) 1 → 204 Gynecological (FP, STD/HIV/AIDS, RTI, infertility, abortion) 2 → 301 Uterine prolapse 3 → 401 Psychosocial support 4 → 501 Legal support 5 → 601 Livelihood support 6 → 701	
Client seeking obstetric related service (ANC, PNC, delivery)			
204	Can you tell me what obstetric related problem(s) did you mention at the last RH camp you attended?	..... .....
205	What service did you receive for that problem?	..... .....
206	Did the provider prescribe you medicines?	Yes 1 No 2	
207	Did the provider advise you to go to some other place for services?	Yes 1 No 2	
208	Did the provider also give you a referral slip?	Yes 1 No 2	
209	Did you go to the place you were referred?	Yes 1 No 2 → 214	
210	Where did you go for service?	Name of service centre..... District	
211	How was the service you received?	<u>Would you say it was:</u> Poor 1 → 212 Satisfactory..... 2 → 212 Good 3 → 217 Very good..... 4 → 217	
212	You said it was “poor”/ “satisfactory”; Can you give any suggestions to improve the service/counseling?	Yes 1 No 2 → 217	
213	How can the service improved?	<input type="text"/> → 217
214	You said you did not go to the place you were referred; why did you not go there?	..... .....

Q. No	Questions	Codes	GO TO Q.
215	You said you did not go to the place you were referred; where did you go for service?	Name of service centre:..... District: Did not go anywhere..... 97 Other (specify).....	→ 217
216	How was the service you received in that place?	<u>Would you say it was</u> Poor 1 Satisfactory..... 2 Good 3 Very good..... 4	
217	How was the obstetric service or advice you received at the camp?	<u>Would you say it was:</u> Poor 1 Satisfactory..... 2 Good 3 Very good..... 4	→ 220 → 220
218	You said the service was “poor”/ “satisfactory”; Can you give any reasons for being only poor or satisfactory?	..... .....
219	How can the services be improved?	..... .....
220	How is your condition/situation now after you received the services?	Improved 1 No improvement 2 Deteriorated 3	
221	Can you tell me how you have improved or no improvement or deteriorated?	..... .....
Gynecological (FP, STD/HIV/AIDS, RTI, infertility, abortion) service			
301	Can you tell me what gynecological related problem(s) did you mention at the last RH camp you attended?	..... .....
302	What service did you receive for that problem?	..... .....
303	Did the provider prescribe you medicines?	Yes 1 No 2	
304	Did the provider advise you to go to some other place for services?	Yes 1 No 2	
305	Did the provider also give you a referral slip?	Yes 1 No 2	
306	Did you go to the place you were referred?	Yes 1 No 2	→ 308
307	If no, why did not you go to the place referred by the provider?	..... .....
308	How was the gynecological service or advice you received at the camp?	<u>Would you say it was:</u> Poor 1 Satisfactory..... 2 Good 3 Very good..... 4	→ 311 → 311
309	You said the service was “poor”/ “satisfactory”; Can you give any reasons for being only poor or satisfactory?	..... .....
310	How can the service be improved?	..... .....

Q. No	Questions	Codes	GO TO Q.
311	How is your condition/situation now after you received the services?	Improved 1 No improvement 2 Deteriorated 3	
312	Can you tell me how you have improved or no improvement or deteriorated?	..... .....
Uterine prolapse			
401	Can you tell me what uterine prolapse related problem(s) did you mention at the last RH camp you attended?	..... .....
402	Have you also shared this problem with anybody before coming to the camp?	Yes 1 No 2 → 404	
403	Who did you first share this problem with?	Husband 1 Mother in law 2 Sister in law 3 Sister 4 Friends 5 Other (specify)	
404	What service/advice did you receive at the camp for that problem?	Pelvis floor exercise 1 → 414 Ring pessary insertion 2 → 414 Got referral slip for UP surgery 3 Got medical prescription/medicines 4 → 414 Others (Specify)..... 5 → 414	
405	Did you go to the place you were referred?	Yes 1 No 2 → 410	
406	Where did you go for service?	Name of service centre District	
407	How was the service you received?	<u>Would you say it was:</u> Poor 1 → 408 Satisfactory 2 → 408 Good 3 → 414 Very good 4 → 414	
408	You said it was “poor”/ “satisfactory”; Can you give any suggestions to improve the service/counseling?	Yes 1 No 2 → 414	
409	How can the service improved?	..... .....	→ 414
410	You said you did not go to the place you were referred; why did you not go there?	..... .....
411	You said you did not go to the place you were referred; where did you go for service?	Name of service centre:..... District: Did not go anywhere..... 97 → 414 Other (specify).....	
412	How was the service you received in that place?	<u>Would you say it was</u> Poor 1 Satisfactory 2 Good 3 Very good 4	
413	If no, why did not you go to the place referred by the provider?	..... .....

Q. No	Questions	Codes	GO TO Q.
414	How was the uterine prolapse service or advice you received at the camp?	<u>Would you say it was:</u> Poor 1 Satisfactory..... 2 Good 3 → 417 Very good..... 4 → 417	
415	You said the service was “poor”/ “satisfactory”; Can you give any reasons for being only poor or satisfactory?	..... .....
416	How can the service be improved?	..... .....
417	How is your condition/situation now after you received the services?	Improved 1 No improvement 2 Deteriorated 3	
418	Can you tell me how you have improved or no improvement or deteriorated?	..... .....
Psychosocial support			
501	Before coming to the camp how were you coping with the feelings you had?	Shared with husband..... 1 Shared with other family members..... 2 Shared with friends 3 Consulted with traditional healer 4 Other (Specify)	
502	How did you feel after expressing/ sharing your inner feelings/ problem at the camp?	..... .....
503	What service/support did you receive for that problem?	..... .....
504	How was the service/advice you received at the camp?	<u>Would you say it was:</u> Poor 1 Satisfactory..... 2 Good 3 → 506 Very good..... 4 → 506	
504	You said the service was “poor”/ “satisfactory”; Can you give any reasons for being only poor or satisfactory?	..... .....
505	How can the service be improved?	..... .....	} → 507
506	You said the service/support was “good”/“very good”, why did you say? (Probe for coping mechanism)	..... .....
507	How is your condition/situation now after you received the services?	Improved 1 No improvement 2 Deteriorated 3	
508	Can you tell me how you have improved or no improvement or deteriorated?	..... .....
509	How did you find the behaviour and attitude of the psychosocial counsellor towards you?	Helpful and polite 1 She did not listen to you well 2 Other (Specify)	
Legal support			
601	Before coming to the camp did you share your legal problems with anybody?	Yes 1 No 2 → 603	

Q. No	Questions	Codes	GO TO Q.
602	If yes, who did you share your problem with?	..... .....
603	What legal service/advice did you receive at the camp?	Got advice to lodge a complain 1 Got advice to go other place for service..... 2 Got a referral slip to go elsewhere 3 Other (specify)	
604	Did the legal service/advice that you received at the camp help you sort out your legal problems?	Yes 1 No 2 → 609	
605	If yes, in what ways service/advice received at the camp help you to sort out your legal problems?	Lodged a complain in Police 1 Empowered to claim my right 2 Developed confidence 3 Other (specify)	
606	How did you find the behaviour and attitude of the lawyer towards you?	Helpful & polite 1 She didn't listen to me well..... 2 Other (specify)	
607	From the camp service, were you able to learn something about "women's rights" and " law on violence against women"?	Yes 1 No 2	
608	If yes, to what extent?	Fair enough 1 Moderately..... 2 Quite well 3 Not at all 4	
609	Why do you think the service/advice that you received at the camp did not help you?	..... .....
610	Do you have any suggestion to improved the service/advice?	..... .....
Livelihood support			
701	Before coming to the camp how were you coping with your daily life?	..... .....
702	What type of livelihood support did you receive through the camp?	..... .....
703	Did the support provided by the camp help you to cope with your livelihood?	Yes..... 1 No 2 → 705	
704	If yes, in what ways the support received at the camp help you to cope with your livelihood?	..... .....
705	Do you think the livelihood support would really help you to bring some good changes in your current trend of life?	Yes 1 No 2 → 707	
706	Why do you think the support you received through the camp was not helpful?	..... .....	→ 901
707	Do you have any suggestion to improved livelihood support services?	..... .....
RH Camp			

Q. No	Questions	Codes	GO TO Q.
901	How was the service you received in the last RH camp you attended?	<u>Would you say it was</u> Poor..... 1 → 902 Satisfactory..... 2 → 902 Good..... 3 → 902 Very good..... 4 → 902	
902	Can you tell me why you were not satisfied with the service you received in the last RH camp?	..... .....
903	You said it was “poor”/ “satisfactory”; Can you give any suggestions to improve the service/counseling?	Yes 1 No 2 → 1001	
904	How can the service/advice improved?	..... .....	] → 1001
905	You said the last RH camp you attended was “Good”/ “Very Good”; why do you say so; can you tell me the reasons?	..... .....	] → 1001

Q. No	Questions	Codes	GO TO Q.																																																		
Information on BCC																																																					
1001	(CHECK Q102 ABOVE, If literate ask) Do you read from a newspaper or magazine almost every day, at least once a week, less than once a week or not at all?	Almost every day..... 1 At least once a week..... 2 Less than once a week..... 3 Not at all..... 4																																																			
1002	Do you watch television almost every day, at least once a week, less than once a week, or not at all?	Almost every day..... 1 At least once a week..... 2 Less than once a week..... 3 Not at all..... 4																																																			
1003	Do you listen to the radio almost every day, at least once a week, less than once a week, or not at all?	Almost every day..... 1 At least once a week..... 2 Less than once a week..... 3 Not at all..... 4																																																			
1004	From where do you get information on RH camp? Circle all responses which the mother mentions unprompted. Then ask, "Is there any other else." Then, read each question and circle "2" for "yes" or "3" for "no."	<table border="1"> <thead> <tr> <th rowspan="2">Unprompted</th> <th colspan="2">Prompted</th> </tr> <tr> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1 FCHV</td> <td>2</td> <td>3</td> </tr> <tr> <td>2 TBAs</td> <td>2</td> <td>3</td> </tr> <tr> <td>3 NGO workers</td> <td>2</td> <td>3</td> </tr> <tr> <td>4 Other health personnel</td> <td>2</td> <td>3</td> </tr> <tr> <td>5 TV</td> <td>2</td> <td>3</td> </tr> <tr> <td>6 FM Radio</td> <td>2</td> <td>3</td> </tr> <tr> <td>7 Miking</td> <td>2</td> <td>3</td> </tr> <tr> <td>8 Posters/pamphlets</td> <td>2</td> <td>3</td> </tr> <tr> <td>9 Friends / Neighbours</td> <td>2</td> <td>3</td> </tr> <tr> <td>10 Street dramas</td> <td>2</td> <td>3</td> </tr> <tr> <td>11 VDC Office/ Representatives</td> <td>2</td> <td>3</td> </tr> <tr> <td>12 School</td> <td>2</td> <td>3</td> </tr> <tr> <td>11 Newspaper/Magazine</td> <td>2</td> <td>3</td> </tr> <tr> <td>12 Other (specify): _____</td> <td></td> <td></td> </tr> <tr> <td>13 Nowhere</td> <td>7</td> <td></td> </tr> </tbody> </table>	Unprompted	Prompted		Yes	No	1 FCHV	2	3	2 TBAs	2	3	3 NGO workers	2	3	4 Other health personnel	2	3	5 TV	2	3	6 FM Radio	2	3	7 Miking	2	3	8 Posters/pamphlets	2	3	9 Friends / Neighbours	2	3	10 Street dramas	2	3	11 VDC Office/ Representatives	2	3	12 School	2	3	11 Newspaper/Magazine	2	3	12 Other (specify): _____			13 Nowhere	7		
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Time interview ended: Hour: ____ Minute: ____

Thank you very much for your cooperation.

“Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors”.

UNFPA/UNICEF AND THE PHD GROUP

(FGD Guideline)

INTRODUCTION AND CONSENT

Two persons conducting it: Moderator and note taker

Introduction

Hello. My name isand my friend is We are from the Population, Health and Development Group, which is conducting a study for UNICEF and UNFPA. UNICEF and UNFPA have been implementing a project in this district with the aim of helping women and girls to improve their health and wellbeing. We are here to find out how this project has been helping women and girls in your community. We would very much appreciate your participation in this study. This information will help the Government of Nepal to improve its program in the country. The study usually takes around half an hour. I assure you that your name will not be shared with anyone else and your answers to my questions will be combined with answers from many other people so that no one will know that the answers you give me today belong to you. Your privacy is protected, and I assure that your answers will be kept confidential.

My friend will try to take notes of major things that you express. However, it would be difficult to remember everything and take notes that you say during the discussion. For this reason we would like to use a tape recorder. This will capture all your ideas. I hope you would not mind us using tape recorder.

To moderator: Make sure that the participants do not have objection against the use of tape recorder. If they give their consent please continue, if not thank them and stop here.

IDENTIFICATION

1) Name of District:			
2) Name of VDC/Municipality:			
3) Ward Number:			
4) Name of Village/Tole:			
5) Name of organization conducting/conducted RH camp:			
6) Name of the RH camp site:			
FGD FACILITATOR (Name).....			
NOTE TAKER (Name).....			
Date FGD conducted (d/m/y).....			
Time FGD started: Hour: ___ Minute: ___			

Before starting our discussion, can each of you please give me some personal information?

1. Background information						
SN.	Name of Participants	Completed Age	Ethnicity	Marital Status	Education	Occupation
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

Thank you very much. It is alright. Let us now start our discussion.

Topics for discussion

Warming-up

- Talk about farming season
- Talk about the weather

It is nice to know more about each of you. We are interested to talk more with you all. That is why we are here in your area. We have a lot of ground to cover, so let us move onto the subject. During discussion if you want to add anything, you can stop me.

To FGD moderator: Encourage every participant to respond to every query.

- (To FGD moderator: Take what you get and probe :)
 - ▶ What about that?
 - ▶ Can you explain that?
 - ▶ How do you feel about that?
 - ▶ Tell me more about that.
 - ▶ (Probe why, why, why or why not.)

2. Reproductive Health Issues in the Community

2.1 Generally what types of RH and related problems are commonly found among girls and women of this community?

Probe for each of the following:

- Obstetric
- Gynecological
- Uterine prolapsed
- Sexual and gender based violence
- Psychosocial
- Legal
- Livelihood

Probe: Among each of the RH and related problems you just mentioned, which problems are commonly found among – young or old? Married or not married? Rich or poor? Excluded or not excluded groups? Specific caste/ethnic group?

Probe: what do they understand by sexual and gender based violence, Etc.....?

2.2 What do girls and women usually do or where do they usually go for treatment/advice when they have such problems?

probe: visit nearest health facility for consultation or treatment/ go to district hospital, go to traditional healer, Sudeni, FCHV etc? do nothing?

3. Participant's opinion on RH camps

3.1 Let me now ask you about the RH camp organized by ADRA/HHESS that you attended last time. In your opinion, how relevant was the camp to address the RH problems faced by the girls and women of this area/community?

Probe: If it was relevant, how?

(there was no RH services available in this area/community before the camp, available service in the community was not affordable, it tried to address major RH issues of girls and women, timely organized? etc.....?)

Probe: If it was not relevant, why not?

(the timing was not right, did not address real RH issue faced by girls and women, etc.....?)

3.2 In your opinion, how effective was the camp in addressing the RH problems faced by the girls and women of this area/community?

Probe: If it was effective, how?

(the camp did manage to reach most women – age, ethnicity, poor, non-poor etc - with RH problems? Camp was run by skilled health personnel? Service providers were friendly/ helpful? It was fully equipped with medicine/supplies? Etc.....?)

Probe: If it was not effective, why not?

(the camp did not reach most women – age, ethnicity, poor-non poor etc - with RH problems? could not manage to sensitize women on RH issues? Camp was run by not so skilled health personnel? Service providers were not friendly/ helpful? It was not fully equipped with medicine/supplies? Etc.....?)

3.3 In your opinion, what was the impact of the camp in the lives of girls, women and people in general in the context of RH issues of this area/community?

Probe: If the impact was good, how?

(Camp managed to sensitize girls, women, and people in general on RH problems? RH is now taken as a rights issue? Improved RH status of women and girls? RH issue is no longer a taboo in the community? Etc.....?)

Probe: If the impact was not good, why not?

(Camp could not manage to sensitize girls, women, and people in general on RH problems? RH status of women and girls is still poor? RH issue is still a taboo in the community? Etc.....?)

3.4 How do you assess the management/efficiency of the camp in providing services to girls and women and like you who visited the camps to get services?

Probe: If the management/efficiency of the camp was good, how?

(Camp location was good – easily accessible etc? Services provided at the designated periods? No confusing environment inside the camp? IEC/BCC materials were effective? did not had to wait for a long time to see the service provider? The logistic/support services was good – drinking water, toilet facility etc was available? Privacy was maintained? All service providers were female? Etc.....?)

Probe: If the management/efficiency of the camp was not good, why not?

(Camp location was not suitable – too far etc? Service was not provided at the designated periods? Confusing environment inside the camp? IEC/BCC materials were not effective? Had to wait for a long time to see the service provider? The logistic/support services was not good – drinking water, toilet facility etc was not available? Privacy was not maintained? All service providers were not female? Etc.....?)

4. Many health camps are organized in different places and I am sure some of you or most of you have attended those camps. You have also attended the RH camp. What was special about the RH camp compared to the other camps you have attended or have heard of? Please give me three main features of the RH camp you attended unlike the other camps.

1).....

2).....

3).....

5. Suggestion and Recommendations

What recommendations do you have for the organization of similar RH camps in the community in future?

Probe: Information about such camps should be provided in the community well in advance? Needs to be more frequently organized? More focus on particular RH issue? Service should be more affordable? More follow up camps are needed? Should try to reach more poor and excluded people in the community? Etc...?

Do you have anything more to tell us besides what we discussed?

Thank you very much for your help. We appreciate your concerns and frankness.

0 Namaste.

Time interview ended: hourminute

Confidential, information to be used for research purposes only

“Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors”.
UNFPA/UNICEF AND THE PHD GROUP
GENERIC INTERVIEW GUIDE

Form No.

Time discussion started: Hour: _____ Minute: _____

INTRODUCTION AND CONSENT

INTRODUCTION AND CONSENT

Namaste! My name is _____. I am from The PHD Group, which is conducting a study for the project supported by UNICEF and UNFPA. The project has been providing education and services on reproductive health, sexual and gender based violence, psychosocial, livelihood and legal supports to women and girls in this district. We are here to find out about the services and education provided by the project and how satisfied are you with the project. We would very much appreciate your participation in this study. This information will help to improve the project in the country. The interview usually takes around half an hour. I assure you that your name will not be shared with anyone else and your answers to my questions will be combined with answers from many other people so that no one will know that the answers you give me today belong to you. Your privacy is protected, and I assure that your answers will be kept confidential.

Your participation in this study is voluntary and you can choose not to answer any individual question or all of the questions. However, we hope that you will participate in this survey since your views are important.

May I proceed with the questions?

RESPONDENT:

AGREES TO BE INTERVIEWED 1 DOES NOT AGREE TO BE INTERVIEWED 2 → END.

Name of interviewer:

Date (d/m/y).....

IMPACT

- a) What were the major strengths of the project?
- b) What have been its major achievements (was there any changes in the lives of women, girls who participated in the camp?
- c) Any changes in the knowledge of service providers observed?.
- d) Were there any unintended outcomes – positive and negative?
- e) What were the shortcomings of the programme?

Probe: Were there any unintended outcomes –in terms of gender relation positive or negative?

RELEVANCE

- a) To what extent do the outputs and outcomes contribute towards the achievement of Nepal transitional justice process, national strategies and National Action Plan on 1325?
- b) To what extent the project utilized the comparative advantage of the UN?
- c) How appropriate and realistic were the programme strategies and activities in terms of socio-economic and political environment in which this project operates? What were the major risks and constraints faced by the project?
- d) To what extent the modality of programme implementation worked well? What practical difficulties, challenges faced during the implementation as well as opportunities?

- e) How did the project contribute to the United Nations Security Council Resolution 1612, 1882, 1325 and 1820 goals as well as other current relevant global policies?
- f) How did the project improve participation and protection of women and the delivery of services to conflict affected areas?

EFFECTIVENESS

- a) How and to what extent clients benefitted from the medical, psychosocial, legal, documentation, shelter, livelihood and referral services?
- b) What are the perspectives of stakeholders if any project components can be replicated?
- c) Are there any good examples (case studies) of women and girls who have benefitted from the project?
- d) To what extent have the planned outputs and outcomes been achieved as per the project document?

Probe: What policy changes and improvements in the national indicators/at the district level have been made in RH and SGBV during the programme period?

Probe: To what extent are these changes attributable to project efforts and what will be the implications of them in terms of the future programmes responding to issues related to gender equality?

Probe: Can you provide specific examples of how the project modality worked effectively?

Probe: To what extent do the outputs and outcomes meet acceptable standards of quality?

Reproductive health

What RH services were provided by the programme, and to what extent did these meet the needs of the people?

Probe: To what extent did it reach those most in need?

What different or special strategy used to address the different RH needs of men and women?

Probe: What lessons were learned from the RH programmes implemented during the project cycle?

Psychosocial support

What types of support/ services were provided by the programme to the SGBV victims, and to what extent did these meet the needs of the women and girls?

Probe: To what extent did it reach those most in need?

Probe: What lessons were learned from the SBV programmes implemented during the project cycle?

Legal support

What psychological and legal support/ services were provided by the programme, and to what extent did these meet the needs of the people?

Probe: To what extent did it reach those most in need?

Probe: What lessons were learned from the RH programmes implemented during the project cycle?

Livelihood support

What types of livelihood support/ services were provided by the programme, and to what extent did these meet the needs of the women and girls?

Probe: To what extent did the programme reach those most in need?

Probe: What lessons were learned from the programme implemented during the project cycle?

EFFICIENCY

- a) To what extent have the programme inputs (human, technical, and financial) been used efficiently? How and where could improvements have been made to improve efficiency without compromising quality?
- b) To what extent the project adopted the conflict sensitive approach and gender consideration in the project design and implementation?

MANAGEMENT

- a) To what extent did management support/hinder the progress of implementation of the project?
- b) Were joint M&E activities undertaken with partner agencies?
- c) How appropriate and effective was the programme monitoring and evaluation?
- d) Was the M&E efficiently utilized to report?

SUSTAINABILITY

- a) To what extent and in what ways the project contributed to enhance national capacities in government, civil society and NGOs to deliver effective service?
- b) To what extent is the programme owned, willing to continue by other partners (government, INGO, UN)? What has been the exit strategy for UNFPA support to the programme?

SUMMARY

Do you have any recommendations for project's strategic directions for future?

Confidential, information to be used for research purposes only

“Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors”.
Study conducted by
THE PHD GROUP
PSYCHOSOCIAL SUPPORT – CASE STUDY GUIDE

Case No.		
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Time discussion started: Hour: _____ Minute: _____

INTRODUCTION AND CONSENT

Namaste! My name is _____. I am from The PHD Group, which is conducting a study for the project supported by UNICEF and UNFPA. The project has been providing education and services on reproductive health, sexual and gender based violence, psychosocial, livelihood and legal supports to women and girls in this district. We are here to find out about the services and education provided by the project and how satisfied are you with the project. We would very much appreciate your participation in this study. This information will help to improve the project in the country. The interview usually takes around half an hour. I assure you that your name will not be shared with anyone else and your answers to my questions will be combined with answers from many other people so that no one will know that the answers you give me today belong to you. Your privacy is protected, and I assure that your answers will be kept confidential.

Your participation in this study is voluntary and you can choose not to answer any individual question or all of the questions. However, we hope that you will participate in this study since your views are important.

May I proceed with the questions?

RESPONDENT:

AGREES TO BE INTERVIEWED 1 DOES NOT AGREE TO BE INTERVIEWED 2 → END.

↓

Name of interviewer:

Date (d/m/y).....

<u>IDENTIFICATION</u>				
1) Name of District of respondent:	<table border="1" style="width: 100%; height: 20px;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			
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4) Name of supporting organization:				

[INSTRUCTIONS TO INTERVIEWER: MAKE SURE THAT WHEN YOU DISCUSS WITH THE WOMAN THE FOLLOWING ISSUES ARE NOT LEFT OUT]

1. Occupation
 1. Farming
 2. Wage earning
 3. Remittance
 4. Pension

2. Age

3. Literacy

4. Education
5. Caste/ethnicity
6. Family size – number of family members
7. Marital status
8. Number of living children

Psychosocial Support

9. I understand that at the camp you had the opportunity to express/share your inner feelings/ problems. How did you cope with your feelings before coming to the camp?

10. After you mentioned your inner feelings at the camp what did the person there advice you to do?
11. Do you think the advice you got was helpful?
12. If yes, how, can you describe it to me?
13. What service/support did you receive for your problem?
14. Were you also referred to go elsewhere for advice/service?
15. If yes, where did you go?
16. How was the advice/service there?
17. Was the person giving you advice polite and helpful?
18. Are you now coping with your feelings better after the camp visit?
19. If not, why?
20. What were you expecting?
21. Any suggestions to prevent women and girls from getting into such problems?
22. Any suggestions to improve support/service to women and girls facing psychosocial problems?

Time discussion ended: Hour: _____ Minute: _____

Thank you very much for your cooperation.

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“Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors”.
Study conducted by
THE PHD GROUP
LEGAL SUPPORT – CASE STUDY GUIDE

Case No.

Time discussion started: Hour: _____ Minute: _____

INTRODUCTION AND CONSENT

Namaste! My name is _____. I am from The PHD Group, which is conducting a study for the project supported by UNICEF and UNFPA. The project has been providing education and services on reproductive health, sexual and gender based violence, psychosocial, livelihood and legal supports to women and girls in this district. We are here to find out about the services and education provided by the project and how satisfied are you with the project. We would very much appreciate your participation in this study. This information will help to improve the project in the country. The interview usually takes around half an hour. I assure you that your name will not be shared with anyone else and your answers to my questions will be combined with answers from many other people so that no one will know that the answers you give me today belong to you. Your privacy is protected, and I assure that your answers will be kept confidential.

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May I proceed with the questions?

RESPONDENT:

AGREES TO BE INTERVIEWED 1 DOES NOT AGREE TO BE INTERVIEWED 2 → END.

↓

Name of interviewer:

Date (d/m/y).....

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4) Name of supporting organization:					

[INSTRUCTIONS TO INTERVIEWER: MAKE SURE THAT WHEN YOU DISCUSS WITH THE WOMAN THE FOLLOWING ISSUES ARE NOT LEFT OUT]

- 23. Occupation
 - 5. Farming
 - 6. Wage earning
 - 7. Remittance
 - 8. Pension
- 24. Age
- 25. Literacy
- 26. Education

- 27. Caste/ethnicity
- 28. Family size – number of family members
- 29. Marital status
- 30. Number of living children

Legal Support

31. I understand that at the camp you had the chance to talk about your legal needs. How did you cope with your legal problems before coming to the camp?

- 32. After you mentioned your legal problems at the camp what did the person there advice you to do?
- 33. Do you think the advice you got was helpful?
- 34. If yes, how, can you describe it to me?
- 35. What service/support did you receive for your problem?
- 36. Were you also referred to go elsewhere for advice/service?
- 37. If yes, where did you go?
- 38. How was the advice/service there?
- 39. Was the person giving you advice polite and helpful?
- 40. Are you now coping with your problems better after the camp visit?
- 41. If not, why?
- 42. What were you expecting?
- 43. Any suggestions to prevent women and girls from getting into legal problems?
- 44. Any suggestions to improve support/service to women and girls facing legal problems?

Time discussion ended: Hour: _____ Minute: _____

Thank you very much for your cooperation.

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“Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors”.
Study conducted by
THE PHD GROUP
LIVELIHOOD SUPPORT – CASE STUDY GUIDE

Case No.		
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Time discussion started: Hour: ____ Minute: ____

INTRODUCTION AND CONSENT

Namaste! My name is _____. I am from The PHD Group, which is conducting a study for the project supported by UNICEF and UNFPA. The project has been providing education and services on reproductive health, sexual and gender based violence, psychosocial, livelihood and legal supports to women and girls in this district. We are here to find out about the services and education provided by the project and how satisfied are you with the project. We would very much appreciate your participation in this study. This information will help to improve the project in the country. The interview usually takes around half an hour. I assure you that your name will not be shared with anyone else and your answers to my questions will be combined with answers from many other people so that no one will know that the answers you give me today belong to you. Your privacy is protected, and I assure that your answers will be kept confidential.

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May I proceed with the questions?

RESPONDENT:

AGREES TO BE INTERVIEWED DOES NOT AGREE TO BE INTERVIEWED → END.

↓

Name of interviewer:

Date (d/m/y).....

<u>IDENTIFICATION</u>				
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4) Name of supporting organization:				

[INSTRUCTIONS TO INTERVIEWER: MAKE SURE THAT WHEN YOU DISCUSS WITH THE WOMAN THE FOLLOWING ISSUES ARE NOT LEFT OUT]

- 45. Occupation
 - 9. Farming
 - 10. Wage earning
 - 11. Remittance
 - 12. Pension
- 46. Age
- 47. Literacy
- 48. Education

- 49. Caste/ethnicity
- 50. Family size – number of family members
- 51. Marital status
- 52. Number of living children

Livelihood Support

53. I understand that at the camp you had the opportunity to talk about livelihood needs. How did you cope with your livelihood before coming to the camp?

- 54. After you mentioned your livelihood needs at the camp what did the person there advice you to do?
- 55. Do you think the advice you got was helpful?
- 56. If yes, how, can you describe it to me?
- 57. What service/support did you receive for your needs?
- 58. Were you also referred to go elsewhere for advice/service?
- 59. If yes, where did you go?
- 60. How was the advice/service there?
- 61. Was the person giving you advice polite and helpful?
- 62. Is the livelihood support you received sufficient for your living?
- 63. Are you now coping with your problems better after the camp visit?
- 64. If not, why?
- 65. What were you expecting?
- 66. Any suggestions to prevent women and girls from getting into desperate problems?
- 67. Any suggestions to improve support/service to women and girls facing desperate problems?

Time discussion ended: Hour: _____ Minute: _____

Thank you very much for your cooperation.

Confidential, information to be used for research purposes only

“Ensuring recognition of sexual violence as a tool of conflict in the Nepal peace building process through documentation and provision of comprehensive services to women and girl survivors”.
Study conducted by
THE PHD GROUP
RH (PROLAPSE) – CASE STUDY GUIDELINE

Case No.

Time discussion started: Hour: ____ Minute: ____

Namaste! My name is _____. I am from The PHD Group, which is conducting a study for the project supported by UNICEF and UNFPA. The project has been providing education and services on reproductive health, sexual and gender based violence, psychosocial, livelihood and legal supports to women and girls in this district. We are here to find out about the services and education provided by the project and how satisfied are you with the project. We would very much appreciate your participation in this study. This information will help to improve the project in the country. The interview usually takes around half an hour. I assure you that your name will not be shared with anyone else and your answers to my questions will be combined with answers from many other people so that no one will know that the answers you give me today belong to you. Your privacy is protected, and I assure that your answers will be kept confidential.

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May I proceed with the questions?

RESPONDENT:



Name of interviewer:

Date (d/m/y).....

<u>IDENTIFICATION</u>					
1) Name of District of respondent:	<table border="1" style="width: 100%; height: 20px;"> <tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr> </table>				
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4) Name of supporting organization:					

[INSTRUCTIONS TO INTERVIEWER: MAKE SURE THAT WHEN YOU DISCUSS WITH THE WOMAN THE FOLLOWING ISSUES ARE NOT LEFT OUT]

- 68. Occupation
 - 13. Farming
 - 14. Wage earning
 - 15. Remittance
 - 16. Pension

69. Age

70. Literacy

71. Education
72. Caste/ethnicity
73. Family size – number of family members
74. Marital status
75. Number of living children

Reproductive health (Uterine prolapse)

About Prolapse

76. How old was she when she first experienced signs and symptoms of UP.

77. After which delivery she first experienced signs and symptoms of UP.
78. During that delivery did she do any physical work
79. After how many days' of delivery did she do the physical work
80. What type of work did she do
 - Carrying loads (bhari bokne)
 - Digging farm field (bari kharne)
 - Lifting utensils/materials (gagri bokne, tauilo uchalne, doko/thunchhe bokne, taukoma bhari halera bokne, etc)
81. What does she think that she experienced the signs and symptoms of UP
 - What could be the reason
82. Did she discuss her UP problem with anybody?
83. If yes, after how long she first experienced signs and symptoms of UP, she discussed the problem with that person
84. Who did she mention the problem first
85. What was the response of that person
 - Positive
 - Negative
86. How is her relation with her husband after she had the UP problem?
87. (If her relationship is not very good) what could be the reasons for that?
88. Did she seek treatment for her UP problem
89. If yes, who did she consult first
90. Did she go to a health facility or camp
91. If yes, after how many years of having the problem she sought treatment at health facility or camp

92. What advice did the camp give her for the treatment of UP?
93. What type of treatment she got
94. Where did she get the treatment?
95. Did she have to pay for the treatment?
96. If yes, how much did she pay?
97. How is she now after the treatment?
98. Would she recommend other women of her village to go for treatment?
99. How do women in your village/community manage UP, can she describe them
- What do they do
100. How did you manage your UP before coming to the camp
- Can you describe that
101. In your village/community do many women have UP
102. How is the life of women suffering from UP in her community ?
- (husband hates, society hates, embarrassing, etc)

103. What kind of never forgetting life experience have you had because of UP
- Can you describe that
104. Any suggestions to prevent UP in her village? Does she have any advice to the women in the community?
105. Any suggestions to improve support/service to women suffering from UP!!

Time discussion ended: Hour: _____ Minute: _____

Thank you very much for your cooperation.