

Annex B: IRF Results Framework

Country name: Bougainville						
Project Effective Dates: March 2015- August 2016						
PBF Focus Area: (Priority Area 2): Promote coexistence and peaceful resolution of conflicts: (2.3) Conflict prevention/management						
IRF Theory of Change: If communities have access to alternative localized gender based violence and trauma healing processes led by experienced community actors and are further empowered through local level community plans and initiatives aimed to prevent gender based violence, and if communities have access to coordinated support services, then communities will feel safer and more cohesive, resort to less frequent violence, and will be able to move on from past grievances and focus on the future.						
Outcomes	Outputs	Indicators	Means of Verification	Year 1	Year 2	Milestones
Outcome 1: Community-wide support for and commitment to women and girls human rights and ending gender based violence.		Outcome Indicator 1 a The proportion men who reported committing incidents of gender based violence in the last 12 months	Baseline survey Evaluation			Completion of community conversations at the VA level.
		Baseline: To be determined as part of baseline study Target: 15% reduction of men reporting committing GBV in the last 12 months				
		Outcome Indicator 1b Proportion of women who experienced physical violence from an intimate partner in the past 12 months				
		Baseline: To be determined as part of baseline study				

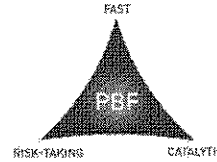
		Target: 15% reduction								
		Outcome Indicator 1c The level of awareness of GBV as a health issue Baseline: To be determined Target: 20% increase in awareness	Baseline survey Evaluation Community Conversation reports			10%	30%			Completion of community conversations at the VA level.
	Output 1.1 Widespread understanding of the relationship between human rights, peace building, trauma and gender based violence in target communities.	Output Indicator 1.1.1 Proportion of men and women who believe that a husband can punish his wife. Baseline: (from P4P survey) Men 60% Women 45% Target: Men 50% Women 35%	Baseline survey Evaluation Community Conversation reports							Completion of community conversations at the VA level.
		Output Indicator 1.1.2 Proportion of men and women who believe that a woman cannot refuse to have sex with her husband. Baseline: (from P4P survey)	Baseline survey Evaluation Community Conversation reports							Completion of community conversations at the VA level.

		Men 60% Women 45%						
		Target: Men 50% Women 30%						
		Output Indicator 1.1.3 The number of participants attending two or more community conversations Target: 50%	Community Conversations attendance lists Community Conversation reports					
		Output Indicator 1.1.4 The proportion of community conversation participants who have taken some action (speaking out or otherwise) against gender based violence by the end 12 months. Baseline: To be determined as part of baseline study. Target: 20% increase	Baseline survey Evaluation Community Conversation reports		10%	30%		Completion of community conversations at the VA level.
	Output 1.2 Improved access to community level support services for GBV and trauma	Output Indicator 1.2.1 The number of volunteer community counsellors trained Target: 25	Training reports Community counsellor reports		25			Completion of community counselling training

		<p>Output Indicator 1.2.2 The number of counselling sessions provided by volunteer community counsellors in 12 months</p> <p>Target: 100</p>	Community counsellor reports			40	100		
		<p>Output Indicator 1.2.3 The proportion of women and men who have depressive symptoms in target area</p> <p>Baseline: (From P4P survey) Women 33% Men 26%</p> <p>Target: Women 25% Men 20%</p> <p>Baseline: Target:</p>	Baseline survey Evaluation						
	Output 1.3 Local governance structure responsibility for peace building and GBV	<p>Output Indicator 1.2.1 The number of Council or Elders that have incorporated gender based violence and trauma in Council of Elder responsibilities</p> <p>Baseline: 0 Target: 2</p>	<p>Council of Elder minutes</p> <p>Council of Elder Plans, By-laws</p>				2		COE planning activities

Outcome 2: Improved institutional mechanisms to support women and girls who have experienced gender based violence.		<p>Output Indicator 1.2.2 The number of Village Assemblies that have incorporated gender based violence and trauma in Village Assembly responsibilities</p> <p>Baseline: 0 Target: 5 (25% of Village Assemblies participating in project)</p>	<p>Village Assembly minutes Village Assembly Plans, Activities</p>					COE planning activities
		<p>Outcome Indicator 2 a The number of referrals between gender based violence support services</p> <p>Baseline: Target: 30% increase</p>	Dept. of Health records	10%	30%			
		<p>Outcome Indicator 2 b The level of awareness of women and girls of district level gender based violence support services available</p> <p>Baseline: to be determined through baseline data</p>	Baseline survey Monitoring survey	20%	50%			

		community counselling Baseline: Women: 1 Men: 0 Target: 15 Women: 8 Men: 7							
		Output Indicator 2.2.2 The number of supervision hours provided to community counsellors by the female and male trainers for community counselling over 12 months Target: 80 hours	Supervision reports by trainers			20 hours	80 hours		



PEACEBUILDING FUND
Annex C - M&E Plan

Purpose: The M&E plan supports the oversight functions of the JSC, Fund recipient agencies and PBSO with the timely collection and analysis of data for internal performance assessments and the substantive reporting on results. The M&E plan - elaborated at the level of the Priority Plan and for each IRF project which is subject to an independent evaluation - determines HOW indicators will be tracked for the measuring of results, and by WHEN and WHOM monitoring activities have to be undertaken. The M&E Plan must be fully consistent with the Priority Plan or Project Results Framework.

Outcomes / outputs	Indicator per result	Means of verification / method of data collection	Frequency of data collection / analysis and timeline	Responsibilities for: - data collection / analysis - reporting - performance assessment
<p><u>Priority Plan:</u> Outcome 3: Community social cohesion and security in Bougainville are strengthened through opportunities to deal with conflict-related trauma effectively and resolution of local disputes peacefully as well as through better access to information to access appropriate post-conflict services/support.</p>	<p><u>Priority Plan:</u> Reduction of violence communities Increase community perceptions of social cohesion and reconciliation</p>	<p>Many of the indicators can be collected from the same primary or secondary data sources.</p>	<p>Outcome indicators: Annual Output indicators: Half year</p> <p>Data collection time-bound with respect to deadlines for reporting - RUNOS: Half year (15 July) and annual reporting (30 April) JSC Annual Review (1 Dec)</p>	<p><u>Reporting:</u> Coordinator in close collaboration with focal point of RUNOs</p> <p><u>Internal performance assessment:</u> JSC / RUNOS with support of Technical Commission/PBF Secretariat</p> <p><u>External performance assessment:</u> Final evaluation of Priority Plans to be led and funded directly by PBSO</p>

<p><u>IRF project:</u> Outcome 1: Community-wide support for and commitment to women and girls human rights and ending gender based violence. Output 1.1: Wide understanding of the relationships between human rights, peacebuilding, trauma and gender based violence in target communities Output 1.2: Improved access to community level support services for gender based violence and trauma Output 1.3 Local governance structures responsible for peace building and gender based violence</p>	<p><u>IRF project:</u> Outcome indicator 1.1 The proportion of men who reported committing incidents of gender based violence in the last 12 months 1.2 The proportion of women who experienced physical violence from an intimate partner in the past 12 months 1.3 The level of awareness by women and men of GBV as a health issue</p> <p>Output indicator 1.1.1 The proportion of community conversation participants who have taken some action (speaking out or otherwise) against gender based violence at the end of 12 months 1.1.2 The proportion of men and women who believe that a husband can punish his wife 1.1.3 The proportion of men and women who believe that a woman cannot refuse to have sex with her husband 1.1.4 The number of participants who attended two or more community conversations</p>	<p><u>Primary data sources:</u> Baseline survey Evaluation Data analysis disaggregated by: sex; age; location (COE & VA)</p> <p><u>Primary data sources:</u> Baseline survey Evaluation Community conversation reports Data analysis disaggregated by: sex; age; location (COE & VA)</p>	<p><u>Frequency:</u> Annual</p> <p><u>Frequency:</u> Half year</p>	<p><u>Data collection and analysis:</u> Survey collectors (collection) UN Women P4 (analysis) M&E expert PBF secretariat (analysis)</p> <p><u>Data collection and analysis:</u> Community facilitators (collection) NCFR Reporting Officer (collation) NCFR Project manager (analysis) M&E expert PBF secretariat (analysis)</p>
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<p>Outcome 2: Improved institutional mechanisms to support women and girls who have experienced gender based violence</p> <p>Output 2.1: Improved coordination between support services for women and girls</p>	<p>1.2.1 The number of volunteer community counsellors</p> <p>1.2.2 The number of counselling sessions provided by volunteer community counsellors in 12 months</p> <p>1.2.3 The proportion of women and men who have depressive symptoms in the target area.</p>	<p><u>Primary data sources:</u></p> <p>Training reports</p> <p>Community Counsellor reports</p> <p>Baseline survey</p> <p>Evaluation</p> <p>Data analysis disaggregated by: sex; age; location (COE & VA)</p>	<p><u>Frequency:</u></p> <p>Half year</p>	<p><u>Data collection and analysis:</u></p> <p>NCFR Reporting Officer (collation)</p> <p>NCFR Project manager (analysis)</p> <p>M&E expert PBF secretariat (analysis)</p>
	<p>1.3.1. The number of Council of Elders who have incorporated gender based violence and/or trauma in their responsibilities</p> <p>1.3.2 The number of Village Assemblies who have incorporated gender based violence and/or trauma in their responsibilities.</p>	<p><u>Secondary data sources</u></p> <p>Council of Elder and Village assembly minutes, by-laws and plans</p>	<p><u>Frequency:</u></p> <p>Half Year</p>	<p><u>Data collection and analysis:</u></p> <p>UN Women P4 (analysis)</p> <p>M&E expert PBF secretariat (analysis)</p>
	<p>Outcome indicator</p> <p>2.1 The number of referrals between gender based violence support services</p> <p>2.2. The level of awareness of women and girls of district level gender based violence support services available</p>	<p><u>Primary data sources:</u></p> <p>Baseline survey</p> <p>Evaluation</p> <p>Data analysis disaggregated by: sex; age; location (COE & VA)</p>	<p><u>Frequency:</u></p> <p>Annual</p>	<p><u>Data collection and analysis:</u></p> <p>M&E expert PBF secretariat (analysis)</p>

<p>who experience gender based violence Output 2.2: Increased capacity to provide support services.</p>	<p>2.3 Proportion of women who were asked about physical and sexual violence during a visit to a health unit.</p> <p>Output indicator</p> <p>2.1.1 The number of hours worked by staff and volunteers in the Buka Family Support Centre per week</p> <p>2.1.2 The number of health workers who have received psychosocial training</p> <p>2.1.3 The number of FSC and other health services with at least two staff or volunteers trained to care for and refer gender based violence survivors</p> <p>2.1.4 The proportion of women and girls who have experienced and disclosed recent violence who were appropriately cared for at the health center.</p> <p>2.2.1 The number of female and male trainers for community counselling</p> <p>2.2.2 The number of supervision hours provided to community counsellors by the female and male trainers for community counsellors over 12 months.</p>	<p><u>Secondary data sources</u></p> <p>Department of Health reports</p> <p><u>Secondary data sources</u></p> <p>Rosters and timesheets from FSC</p> <p>Health Centre reports on staffing, capacity and training.</p> <p><u>Primary data sources:</u></p> <p>Training reports</p> <p>Supervision reports</p>	<p><u>Frequency:</u></p> <p>Half year</p> <p><u>Frequency:</u></p> <p>Half year</p>	<p><u>Data collection and analysis:</u></p> <p>M&E expert PBF secretariat (analysis)</p> <p><u>Data collection and analysis:</u></p> <p>M&E expert PBF secretariat (analysis)</p>
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Budget allocation for M&E plan (in the table below, list all the types of data collection inputs and their cost):

Budget for M&E Plan by categories	Costs in US \$
(1) Baseline survey <ul style="list-style-type: none"> - Establishment of M&E framework - Baseline data collected Subtotal:	\$32,000* \$3,600 \$35,600
(2) Monitoring and internal performance assessments: <ul style="list-style-type: none"> - Field visits by UNICEF and UN Women on project sites (3 days half yearly) - NCFR and UN Women meeting to assess implementation status of project implementation (2 days quarterly) - RUNO meeting (monthly, quarterly) to assess implementation status of projects Subtotal:	\$7,500 <i>(includes all travel costs)</i> \$6,000 <i>(includes all travel costs)</i> \$13,500
(3) Reporting: <ul style="list-style-type: none"> - Reporting Officer salary - Half year - Annual reporting Subtotal:	\$11,700 <i>(for 18 months)*</i> <i>Contribution from PBF towards half yearly and annual reporting</i> \$11,700
(4) Independent evaluation to form part of the program evaluation <ul style="list-style-type: none"> - final Subtotal:	\$10,000
TOTAL	\$70,800*

* Supported by Partners 4 Prevention

Annex D: Consultations for Proposal Development

The Project Design Consultant spent thirteen (13) days (1-13 November, 2014) based at the Nazareth Centre for Rehabilitation at Chabai, Bougainville, with travel to Awara, Buin and Buka. Consultation occurred with the following people:

Name	Position and Organization	Contact Details
St Lorraine Garasu (CSN)	Director, Nazareth Centre for Rehabilitation	71758835 nazarethcentre@gmail.com
Priscillar Hukasa	Secretary, Siwai Women Human Right Defender Network	7218 6741
Joyline Kenso	Chair Lady, Siwai Women Human Right Defender Network	7296 7152
Wilmoa Kuitai	Director, Kisim Back Culture and Custom	7202 8269
Peter Hiro	Male advocate	70775255
Anne Aisa	President, Buin District Women Federation	7265 0888
Alphonse Pemuko	Men's Desk coordinator, NCFR	7918 1173
Susan Pakoi	Chair, Buin FSVAC sub-committee; Community Counsellor	71666310
Esther Morrie	Health Worker, Tabumo Clinic Buin	72470339
Laura Ampa	v/ president, Buin FSVAC Previous regional member for South Bougainville Former Minister for Community development, women, youth, churches, sports and disabled	73220522
Cathy Kalobo	President, Buin Women Human Right Defender Network	71387909
Dr Anthony Pumpara	Secretary, Department of Health	70042188 pumparaanthony@gmail.com
Alois Pukienei	Director, Public Health	71749308 Alois.pukienei@gmail.com
Sr Essah Barnabas	Buka Family Support Centre	71884796 Essahbarnabas@outlook.com
Sebastian Robert	Technical Advisor Gender and Men's Health National Dept. of Health	73777353 Sebastian.robert@live.com
Charmaine McBrearty	AVI Volunteer – social worker / counsellor	72462827
Elizabeth Hicks	VSA Volunteer - Organizational management advisor	73427886
Agnes Titus	UN Women Buka	70309438 agnes.titus@unwomen.org
Anthony Agyenta	UNDP Buka	anthony.agyenta@undp.org

In Port Moresby the following people were consulted with:

Name	Position and Organization	Contact
Asefa Tolessa Dano	Chief of Child Protection, UNICEF	atdano@unicef.org
Hennie Kama	UNICEF	hkama@unicef.org
Walter Mendonca Filho	Representative, UNFPA	mendonca-filho@unfpa.org
Anou Borrey	UNDP	anou.borrey@undp.org
Julie Bukikun	UNDP	julie.bukikun@undp.org
Jorg Schimmel	UNDP	jorg.schimmel@undp.org
Signe Poulsen	OHCHR	signe.poulsen@undp.org
Elizabeth Cox	Consultant, Family and Sexual Violence	sabetcox.png@gmail.com
Jeffrey Buchanan	UN Women	jeffrey.buchanan@unwomen.org

Consultation occurred via skype and email communication with:

James Lang	Partners for Prevention	james.lang@one.un.org
Kathy Taylor	Manager, Partners for Prevention	kathy.taylor@one.un.org

Annex E: Letter of Support from Nazareth Centre for Rehabilitation



Oscar Fernandez-Torres
Assistant Secretary General for Peacebuilding Support

13 November 2014

Support for application to the Gender Promotion Initiative II: *Piavin Save, Kamap Strongpelo*

The Nazareth Centre for Rehabilitation has a strong history of working in communities across Suva and surrounding areas supporting peacebuilding initiatives and working with individuals and communities to address trauma through a process of individual counselling and group therapy to facilitate healing and recovery.

From November 1-13 2014 we worked in close collaboration with the Project Design Specialist to develop the details of the project design for the *Piavin Save, Kamap Strongpelo* project. This was done in consultation with relevant government officers, NCR staff and many volunteers who have been trained by the Nazareth Centre for Rehabilitation as women human rights defenders and male advocates, drawing on their local knowledge of the ongoing issues surrounding trauma, gender based violence and peace building.

The Nazareth Centre for Rehabilitation is well placed to deliver community-based education around gender, human rights, peace building and trauma as we have developed extensive curriculum addressing these topics and have many years experience in running community trainings. Our extensive networks of community volunteers and established relationships with all levels of government will ensure effective and efficient implementation of the project.

The Centre also has previous experience of implementing large projects with international agencies, including the UN, Australian and New Zealand Aid.

I am happy to be contacted to provide further details if required.

Sister Lorraine Barasu, CSN
Director, Nazareth Centre for Rehabilitation