

SUMMARY of the results from the endline study

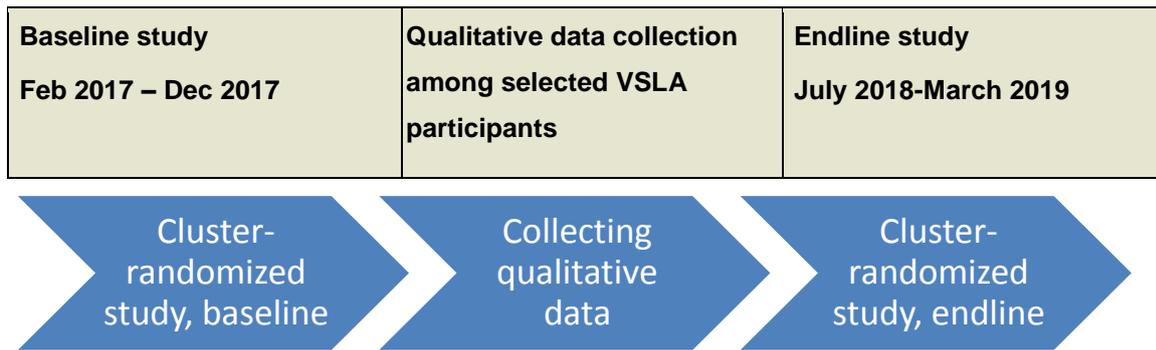
This summary presents key findings of the endline study conducted to evaluate the effectiveness of the "Mawe Tatu" (M3) program in North and South Kivu Provinces of the Democratic Republic of Congo. The M3 project was implemented to improve the **household economy** of vulnerable groups, to reduce gender-based violence through improving **equity in gender relations**; and to improve **sexual and reproductive health** among women, men, and youth.

Guiding questions included:

1. **Did the household economy, and the socio-economic situation of women improve as a result of the introduction of VSLAs?**
2. **Did men get successfully engaged to support women's economic autonomy, to reduce gender-based violence, and to support women in their decisions about their sexual and reproductive health?**
3. **Were young women and men empowered to take healthy decisions for their sexual and reproductive life?**

In order to gather data to evaluate the program effectiveness, a cluster randomized longitudinal study was conducted in the health zones of Bagira, Goma, Ibanda, Kadutu, Karisimbi, Nyirangongo, Rutshuru, and Walungu. In selected places of the same areas, qualitative data was collected in addition. A total of 120 villages were selected, 80 in the intervention area, 40 villages in adjacent health zones were included as controls. Participants included in the baseline study were followed up and re-interviewed again. Of the initial 2143 participants in the cluster-randomized controlled study, 1009 persons were followed up and interviewed a second time, 797 of them were members of a VSLA and 212 were controls. Loss to follow-up was minimally higher than the 50% we had anticipated. 89% of the respondents were women, and 21% of them were head of household.

Qualitative methods included >20 Focus Group Discussions and >60 individual interviews among VSLA members, among men participating in peer groups, and with youth (analysis not yet fully completed).



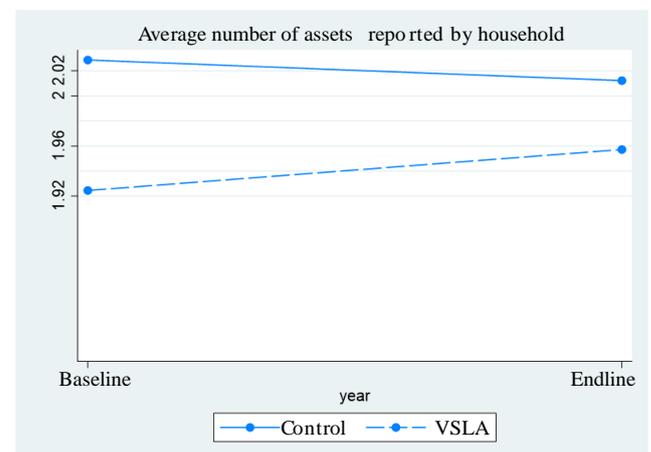
The study results are summarized by the three outcomes.

Outcome 1: 23,900 women were organized in 1400 VSLA and VSLAN. Assets, food security, and number of income-generating activities increased more in the intervention group than in the control group.

Overall 1400 AVECs were set up throughout the project in the two provinces of North and South Kivu. The data obtained from the monitoring and from the cluster-randomized study both indicated that the majority of the participants belonged to the third- and second-lowest wealth quintile, while fewer were found to be extremely poor. It must be considered that participation of the poorest households in a VSLA is limited by their inability to access cash. The poorer participants were also less likely to complete their participation in a VSLA: in the sample of participants in the cluster-randomized study, 7% of the initial VSLA participants ended their participation. Overall, about one third of the VSLA participants had set a premium of 500 FC, which represents the lowest premium and reflects the most vulnerable group among the VSLA participants.

Those individuals who could participate in a VSLA and completed at least one full cycle benefitted economically. Figure 1 Average number of assets (TV, radio, mobile phone, computer) shows the change from baseline to endline in the average number of specific assets (TV, radio, mobile phone, computer) for both the VSLA and the control group. **VSLA participants increased their household assets** (TV, radio, mobile phone, computer) more than the control households after taking into consideration differences in education, marital status and degree of urbanisation between the intervention and control areas.

Figure 1 Average number of assets (TV, radio, mobile phone, computer)



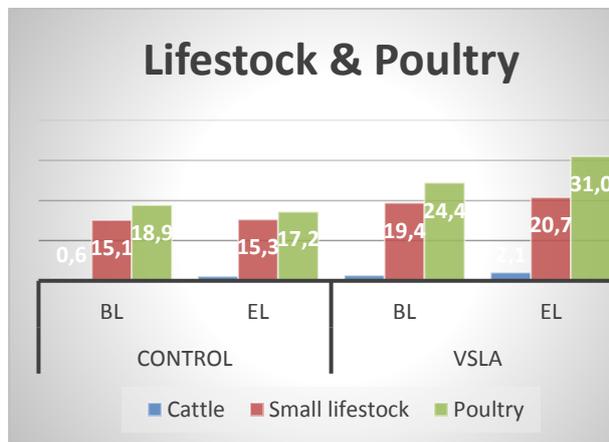
Over the course of the project, the household income increased more among VSLA participants than in the control group. (

Figure 3) Overall, **51% of the VSLA households reported an increase in their household income of over 15%**. The source of this additional income was often due to an **uptake of additional income-generating activity** in the informal sector (petty-trade) and in agriculture: an increase was observed in the number of income-generating activities (

Figure 4), in the proportion of participants reporting to be newly **self-employed**, and in the number of VSLA participants who had **poultry** (

Figure 3) which had increased more in the VSLA group. Overall, only one in ten

Figure 3 Ownership of livestock, small ruminants and poultry



participants had a permanent employment, which hadn't change since the baseline.

Figure 2 Average monthly income at baseline and endline (logarithmic scale)

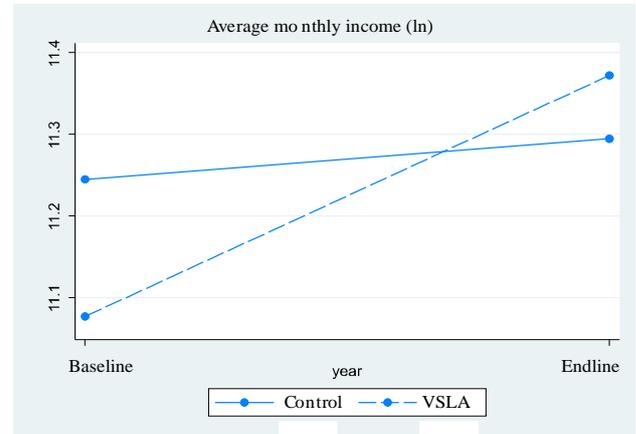
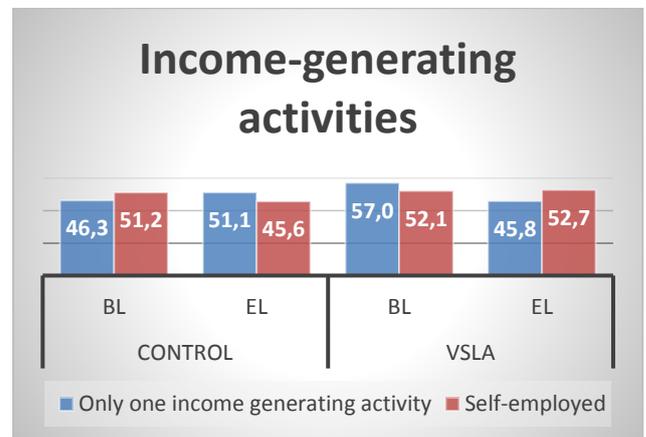


Figure 4 Income-generating activities

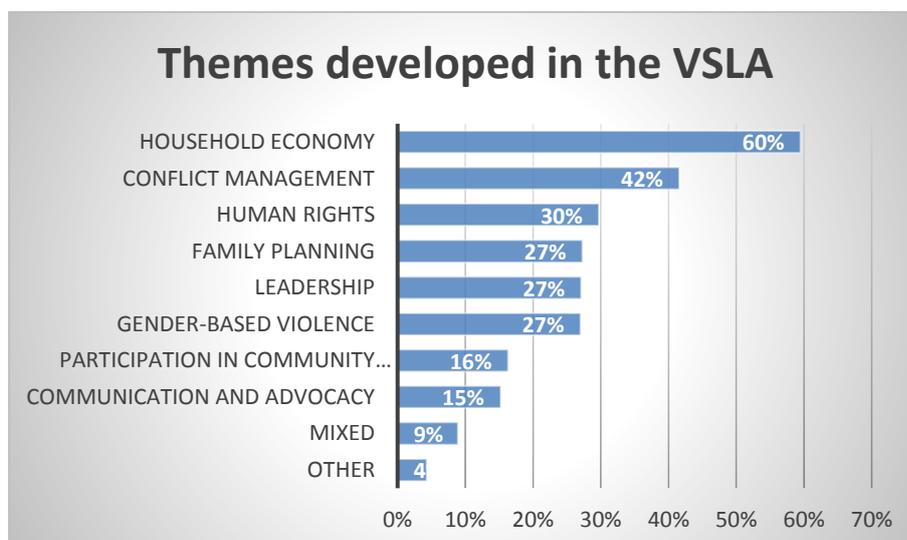


Formal social protection mechanisms could add to poverty alleviation, in addition to the VSLA program. However the survey revealed that only 5.7% of the participants had a health insurance, and 4.7% received cash transfers in the context of an ongoing program. Mostly households depended on themselves and their social network to get by.

The qualitative interviews largely confirmed the quantitative findings: Participants who could manage to participate in a VSLA gained opportunities for new income-generating activities, but also used the savings to pay large bills, such as school-fees or to pay for healthcare.

Generally, participating in a VSLA improved **household resilience**, which we here define mainly as financial resilience reflecting that the individual is able to draw on appropriate resources to maintain a stable equilibrium (Salignac 2019). Four dimensions are considered: (1) economic resources; (2) financial products and services; (3) financial knowledge and behaviour; and (4) social capital. In our setting, we may consider the availability of cash as the economic resources and the VSLA as the financial product, while the program includes also capacity building on financial knowledge and behavior. At last, social capital can be understood as the capacity to mobilize the social network for financial support (Figure 5).

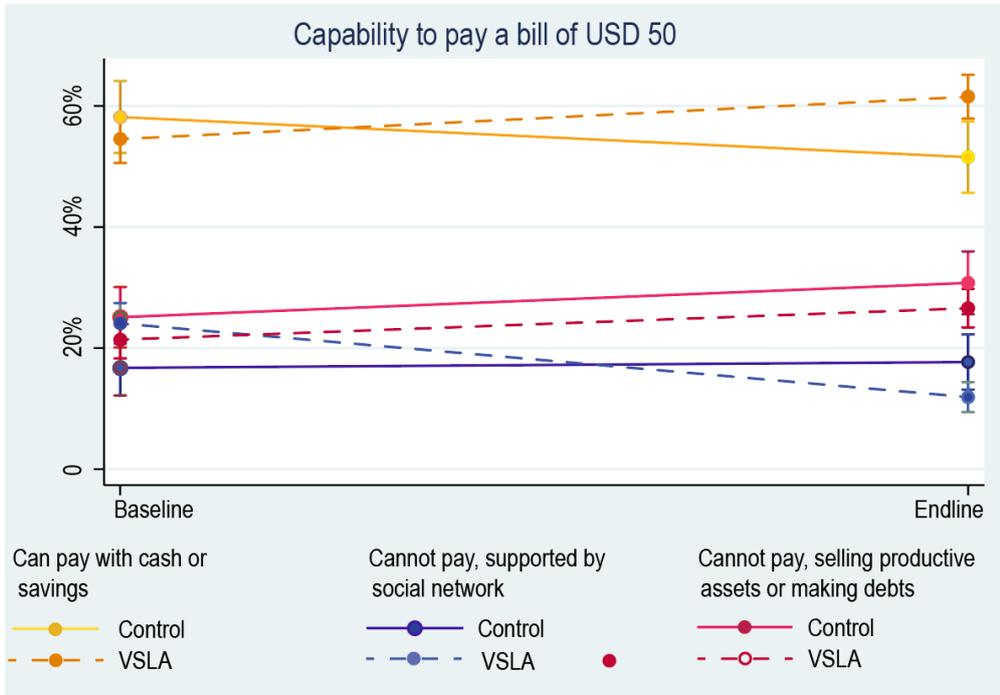
Figure 5 Percentage of respondents who participated in sessions in the VSLA groups on themes around household economy, conflict management, leadership, gender and rights, sexual and reproductive health.



The cluster-randomized study suggests that **some dimensions of resilience increase, while others decrease**. Economic resources in form of availability of cash and savings increased in our cluster-randomized intervention sample, as has financial knowledge and behavior (the latter was demonstrated with the monitoring data). However, a part of the VSLA participants didn't report to have more cash and savings available at the time the endline took place. Instead they more often reported that they would have to rely on the sale of productive assets as compared to the baseline, or that they would have to make debts (Figure 6). In other words, the ability to pay a 50\$ bill increased among some VSLA participants, especially among those

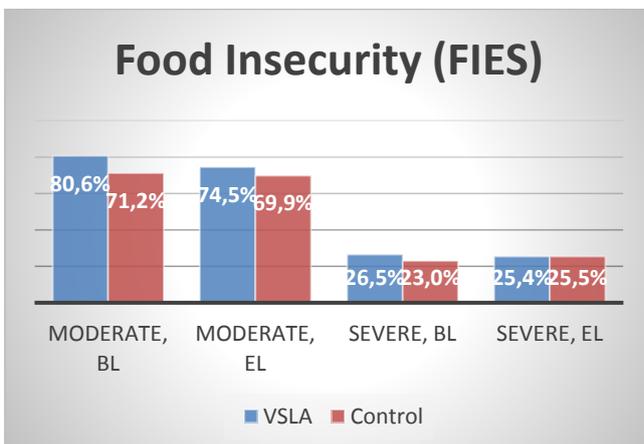
who already had sufficient financial capital to pay a high amount of cash at the beginning of the VSLA cycle. At the same time, there was less reliance on the social network of the VSLA participants observed. This suggests that the most deprived benefit less from VSLA.

Figure 6 Capability to pay a large bill of USD 50



In addition to financial resilience, household food security was investigated. The percentage of participants reporting moderate to severe **food insecurity** showed a decline over time in the intervention group. This is in line with the improved household economy observed among most, but not all VSLA participants. Indeed, moderate food insecurity decreased significantly more among the VSLA participants, while severe food insecurity remained unchanged (Figure 7). This supports the hypothesis that VSLA are likely to have a greater effectiveness, which materializes in the household economy, if households are not extremely poor

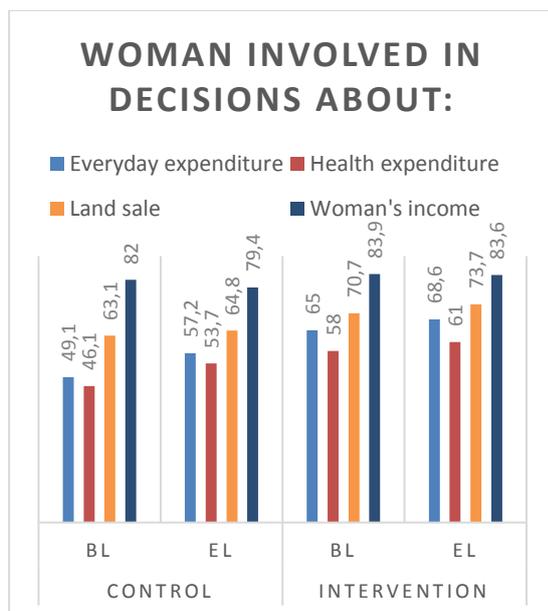
Figure 7 Food insecurity (Food Insecurity Experience Scale)



Outcome 2: Women's empowerment and rights

Women's ability to participate in decision-making is a premise for women's empowerment. A small change was observed towards more inclusion of women in decisions, which was more expressed in the intervention group, however only in North Kivu (Figure 8). However, no change was observed in women's involvement in decision-making at the community-level.

Figure 8 Participation of women in household decision-making



Despite the increasing involvement of women in decision-making, some other findings point towards the adoption of more stereotype gender roles as a consequence of the thematic discussions on gender and rights in the community (

Figure 9,
Figure 10).

This is also supported by qualitative data, showing that after the thematic discussions on gender and rights, men are expected to support women, but women in turn are still expected to put the reputation of the family first and to be silent in case of domestic violence. The latter was more common in the VSLA group than among the controls.

Figure 9 Tolerance of gender-based violence

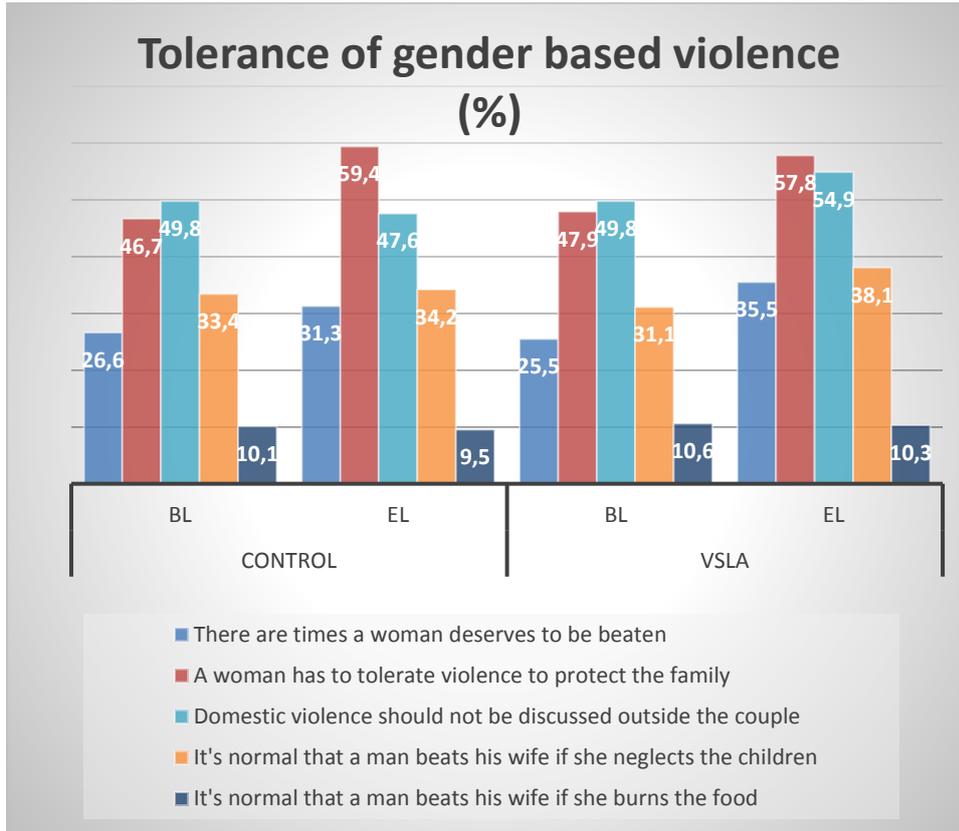
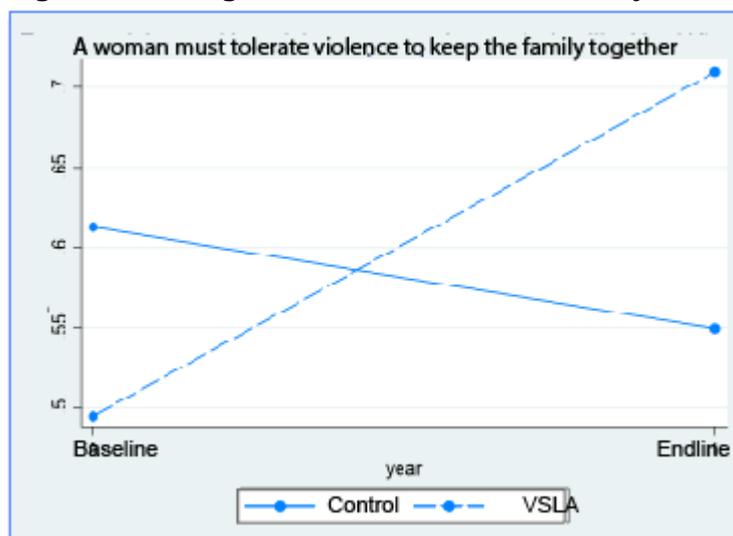


Figure 10 Change of tolerance of violence, adjusted for socioeconomic factors

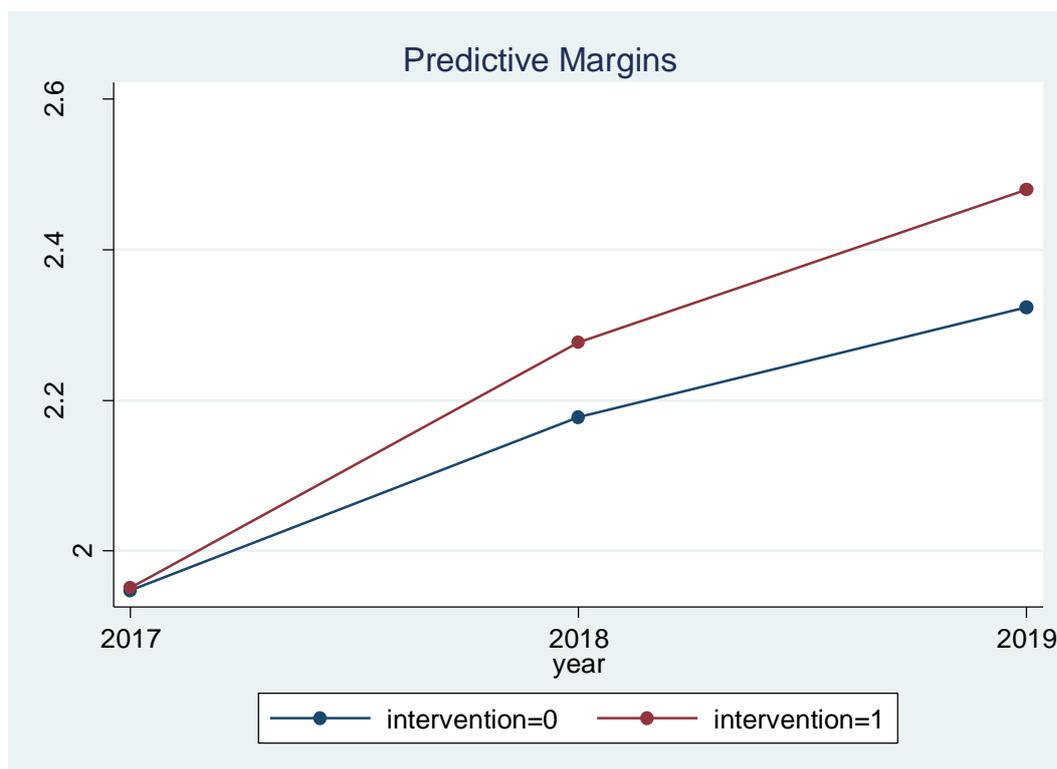


It was further observed that only in a minority of households the men participated in the VSLA.

Outcome 3: Jeunesse et santé sexuelle et reproductive

In- and out-of school young people were exposed to messages about sexual and reproductive health through the M3 program components. Knowledge improved in most areas, and improved more in the intervention area (Figure 11)

Figure 11 Comparison of the average score of knowledge about the body over the years, South Kivu



The reaction and attitude of the young people themselves towards the course generally seemed to be very positive among the girls. Everyone considered it as an important and interesting subject. It is considered by some girls as kind of a preparation for future life. But despite the improvement of knowledge and the interest in the topic, some doubts were raised about the quality of the comprehensive sexuality education that was provided, including the quality of the teaching. Some of the girls mentioned that professors feel ashamed to talk about sexuality and family planning. The discomfort can be so big that the teachers sometimes didn't show up for the EVF class.

P: I think during the previous year there was no teacher for the EVF course. When there was on the schedule Education for Life, the teacher did not come. Even if we find basic education at home, at school too we need education. If the teacher does not have the courage to come and teach this class, many girls

Another problem seemed to be that some professors were hiding information. Some respondents thought the teachers deliberately withheld information related to EVF subjects from them.

P: He can only talk to them openly. We are mature people. It's no longer important that he hide things from us. It may even happen that we know more than him. That's why he has to be open and talk about everything and nothing. (ID12_M)

The gender of the professor of the EVF course was often addressed as well. The majority of respondents said they preferred a woman for EVF lessons. Opinions about a gender segregated class differed from each other. Some respondents mentioned that they did not dare ask questions when the boys were sitting in the room as well.

Some girls mentioned that the teachers were not well enough trained and had the impression to have a greater knowledge about some EVF topics than the teacher himself. For them the information seems too superficial.

The quantitative assessment showed no change in the use of contraceptives between the baseline and endline.

Conclusions

- Overall, the VSLA were effectively supporting poor households to improve their household economy. This was less effective if the households were very poor. In this case, an additional support of these very deprived households would be needed to allow them to participate in the program.
- Synergies between Outcome 1 and Outcome 2 were limited because only few male partners of women participating in VSLA joined the sensitization groups. New strategies to involve men more are needed.
- Women's economic and negotiation skills could be successfully improved by the program, but it was at the same time observed that gender stereotypes were more commonly brought up in the endline than in the baseline. This part of the program may have some counterreaction.
- The school-based intervention relied on teachers who were sometimes ill-trained or not willing to provide the CSE training. Information sessions by experts should be considered.