



Mawe Tatu II Programme

December 2019-November 2022

Final Evaluation of the Mawe Tatu II Programme

Organisations member of the consortium CARE NEDERLAND, CARE RDC, ADJ, COMEN, GEL and ZMQ

The provinces of North and South Kivu were included in the evaluation

North Kivu = Nyiragongo, Karisimbi, Goma and Mweso (control area)

South Kivu = Bagira, Ibanda, Kadutu, Lemera, Walungu and Kalonge (control area)



**Organisation pour le Développement et Assistance
à La Femme et Enfant "ODAFE/RDC"**

Contact: +243 992580465 / odaferdc2007@gmail.com

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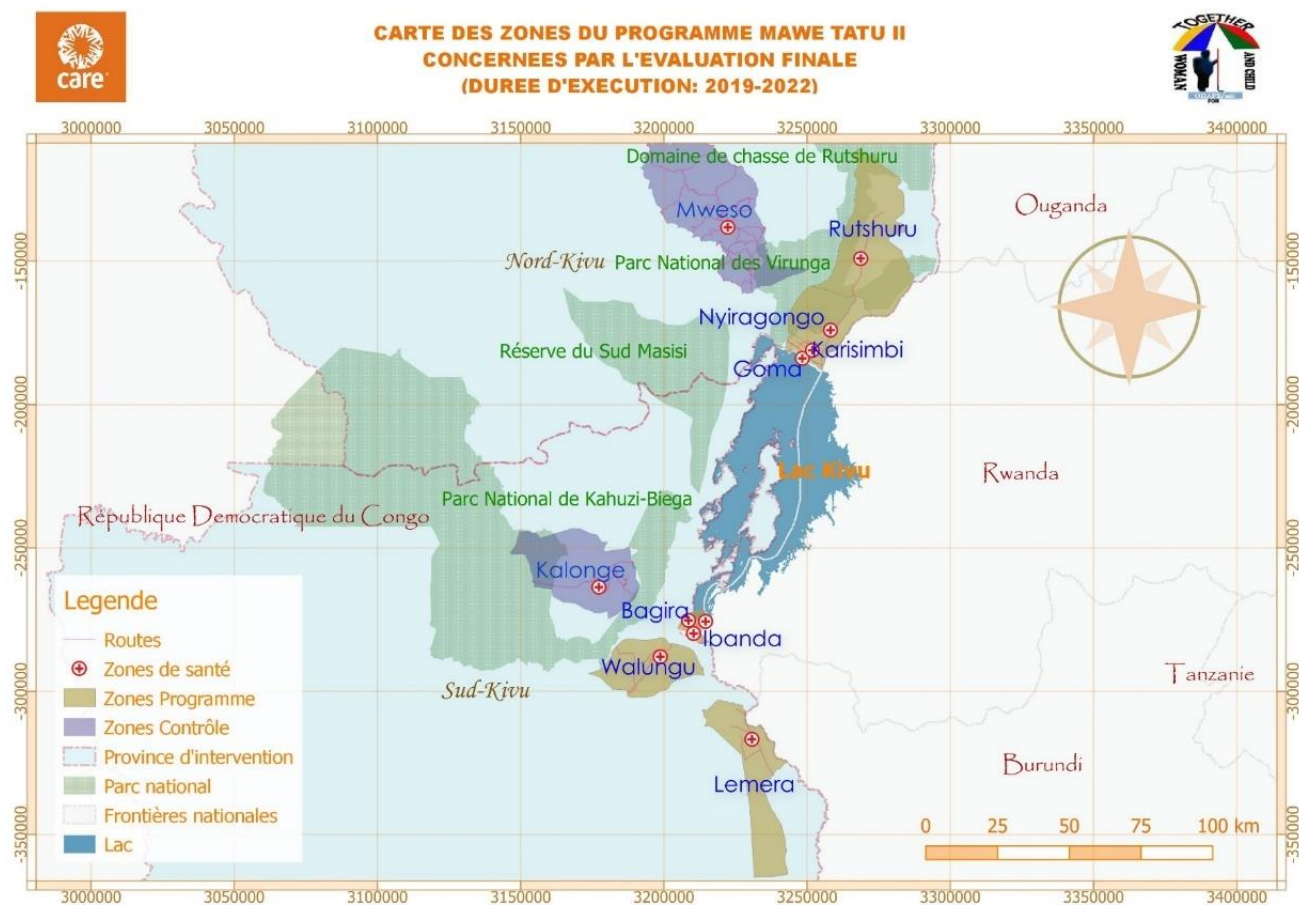
www.odaferdc.org

14, Av. Messenger, Q. le Volcans, Nord-Kivu/RD Congo

54, Boulevard du 30 juin, 3ème étage Immeuble

Gpè Tavernè, Gombe/Kinshasa

Consultants involved: Mr Aksanti Sauveur, Mr Chikuru Olivier and Mr Kagale Vianney



Map of the Mawe Tatu II programme zones concerned by the finale evaluation

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ACRONYMS AND ABBREVIATIONS

ADJ	Amis de la Justice
IGA	Income generating activity
VA	Village Agent
VSLA	Village Savings and Loan Association
VSLAN	VSLA Network
BDOM	Diocesan Office of Medical Works
CADECO	Saving Bank of Congo
CAFOD	Catholic agency for overseas development
CDJP	Diocesan Commission for Justice and Peace
COMEN	Congo Men Network
DFJ	Dynamique des Femmes Juristes
DQA	Data quality assurance
GEL	Guichet of Local Economy
GEM	Gender equality Men Scale
GEWEP	Gender Equality and Women's Empowerment Programme
GBV	Gender based violence
IES	Innovations and social entrepreneurship
MFI	Microfinance Institution
MEAL	Monitoring, Evaluation, Accountability and Learning.
SDGs	Sustainable Development Goals
UN	United Nations
PAIDEK	Pogram of support for economic development initiatives in Kivu
DRC	Democratic Republic of Congo
SCIAF	Scottish Catholic International Aid Fund
SGBV	Sexual Gender Based Violence
SRH	Sexual and Reproductive Health
ToC	Theory of Change
HZ	Health Zone

Acknowledgement

This final evaluation is the result of the combined efforts of several organizations, structures and individuals.

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We cannot end this page without thanking the Mawe II Programme Manager, the MEAL officer and advisor within CARE DRC for their tireless support in the preparation of the data collection of this study and in part of the analysis of the information collected in the structures, VSLAs and enterprises.

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May all those who have contributed directly or indirectly to the realization of this study find here the expression of our deep consideration.

For the evaluation team of the consultant ODAFE DRC,

1. Mr Kagale Vianney
2. Mr Aksanti Saviour
3. Mr Chikuru Olivier

Evaluation Summary

Mawe Tatu is a Swahili concept that translates to three pebbles. This name was chosen to illustrate the physics of dropping three pebbles into a pond to represent interventions related to women, men and youth as main components of society. As the pebbles fall, they have the immediate effect of moving the water. Each pebble also creates ripples that propagate and interact with those of other pebbles, in space and time. It is a metaphor that expresses, respectively, the short- and medium-term effects of the project as well as the long-term impact that will result in synergistic effects of Mawe Tatu's interventions. Like Mawe Tatu I, the programme works with women and youth and men to improve the socio-economic status of women and youth and their powers to influence decisions at the household and community levels.

The overall objective of this evaluation is to measure the progress and results of the programme based on the Theory of Change, to draw lessons (lessons learned) for future programmes.

To achieve this, the evaluation team used the mixed methodological approach (quantitative and qualitative) to collect data from programme participants, key informants and Mawe Tatu II programme documentation. A range of techniques were associated with this approach including: the document review to understand the logic of the Programme, focus group discussions with the participants of the Programme in the 8 health zones of the evaluated programme (Rutshuru excluded because of the context of the war between the M23 and the FARDC), a household survey which facilitated reaching several households in 9 health zones as well as 2 health zones and two control health zones. In addition, semi-structured interviews with key informants were conducted enriched by direct observations to identify different attitudes related to the evaluation questions.

Overall, this evaluation indicates that the Mawe Tatu II programme has had significant successes in terms of its 3 trajectories linked to the first Outcome, related to access (and control) to capital, knowledge, skills and entrepreneurial mindset, and the commitment of men, and other successes at the level of its other two trajectories (market access and sexual and reproductive health) as we have also noticed in the database of harvested Outcomes shared with us in the Mawe Tatu II programme documentation at the beginning of this final evaluation.

Programme participants testify that thanks to the training and awareness-raising activities in the VSLAs to which they have joined, they have made savings through which they access capital to launch their small to large businesses. Some women and young members of the few VSLAs have accessed loans in some MFIs although for MFIs and banks in general, the services do not yet offer financial services adapted to women and young entrepreneurs who are members of VSLAs and remain indifferent to cooperate and carry out business with VSLAs because they continue to find them less reliable because they lack collateral to give to taking credit. At the same time, mistrust of formal financial institutions, caused by the failures that entrepreneurs have witnessed in the past, has also created a barrier, which was not fully addressed during the programme, in the effective use of services and products.

In addition, there is an adoption by boys and men of behaviours and attitudes that promote gender equality and encourage entrepreneurship among women and young people¹. Examples include supporting female entrepreneurship, sharing tasks within the household, positive attitudes for women and girls to use modern contraceptives and other family planning methods.

This change in attitudes and behaviours is more observed among men who participated in the men & boys engage "reflection groups" on positive masculinity set up by COMEN.

Considering the information gathered in FGDs, the approach of engaging men in positive masculinity is really appreciated by communities although there is still strong resistance to these changes for some conservative leaders, gatekeepers of norms (church leaders, traditional leaders...) and for some women and girls who do not accept the rejection of violence by men and boys.

Although negative attitudes towards gender equality are observed in all areas assessed, we noted significant progress in reducing intimate partner violence compared to the situation presented in the baseline assessment and in the December 2022 GEM report, for example the acceptance by some communities that women and girls can now participate in the (albeit unfairly) sharing of inheritance once considered as an exclusive right to men and boys (practices adopted although sanctioned) by community members through rejection, negative discourse and that some boys remain resistant to this change considering it disfavours them.

These positive behaviours of men and boys combined with participation in VSLA activities and women's access to sexual and reproductive health information encourage women and young people to make informed decisions about their sexual and reproductive health for their well-being, their businesses and planning their travels, subsequent studies, etc.

In addition, the use of modern contraceptive methods is still a taboo for some members of the community in the supported areas. According to interviews with nurses in 5 health facilities supported in North and South Kivu, users of modern contraceptive methods prefer to use the methods in facilities where they are not known for fear of community considerations and disclosure of confidences by caregivers, which suggests that many users of the methods come from outside health areas. This is confirmed by the women and girls members of VSLA consulted during the FGDs who say they do not feel comfortable raising awareness among other women about the use of modern contraceptives and leave this task to community relays.

Despite advances in the use of modern contraceptive methods for family planning (comparison of baseline, mid-term and final data), nearly 30% of users (VSLAs) interviewed continue to blame the use of the methods subsequently for their side effects on the body. The few women and girls who want to use contraceptive methods say they admit to using natural (non-chemical) contraceptive methods because they have fewer side effects on the body although they are less effective and difficult to practice.

¹ The operational definition of Young is being between the age of 18 and 24 years.

It turns out that advocacy has had significant effects thanks to its influence on political-administrative and customary authorities, as well as on community leaders grouped through community structures to ensure the sustainability of the programme's achievements.

Although CARE's partnership standards were developed during the programme period, a few questions were asked to consortium member organizations to get an idea of the level at which these standards were applied. In practice, equitable partnership has been a reality throughout the implementation of the Mawe Tatu II Programme. Fairness in partnership is proven by consortium members through their participation in planning activities and review of the theory of change and mid-term adaptations by participating in consortium management meetings for joint planning and involvement in decision-making .

GENERAL INTRODUCTION

I.1. Presentation of the overview on the Mawe Tatu II Programme

Between December 2019 and November 2022, under funding from the Dutch government, the consortium that includes ADJ, COMEN, GEL, CARE DRC, CARE Nederland and ZMQ, implemented a "MAWE TATU II" programme in North and South Kivu, to produce changes in society through three outcomes, including: (1) Women and youth earn sustainable income through the products and services they sell in their businesses; (2) The adoption of positive masculinity by men and boys leads to the acceptance and support of women and young entrepreneurs, (3) Women and girls make informed decisions to achieve their reproductive intentions.

The Programme was funded in two successive phases (MAWE TATU I and MAWE TATU II), the first of which was carried out from December 2015 to May 2019 in the provinces of North and South Kivu and the second phase (concerned by the evaluation) implemented from December 2019 to November 2022 with the aim of reaching 2,500 girls (aged 13 to 17), 12,500 women (aged 18 to 49) organized into new Village Savings and Loan Associations (VSLAs). 27,000 women and girls in already existing VSLAs set up during Mawe Tatu I, 8000 men aged 25+, who could change through reflection groups and opt for positive masculinity, 2500 boys (aged 14-24) also organized in reflection groups to create a more egalitarian development model.

I.1.1. Les Outcomes du Programme

The theory of change has 3 Outcomes whose implementation was carried out by the consortium of 5 Organizations

Outcome 1: Women and youth have access to and control of resources for entrepreneurship; have entrepreneurial knowledge, skills and mindset and have access to the market (ADJ and GEL were responsible for this);

Outcome 2: Adoption of positive masculinity through the engagement of men and boys leads to acceptance and support of women and youth (on COMEN's responsibility)

Outcome 3: Women and girls make informed decisions to achieve their reproductive intentions, (CARE DRC was responsible.)

Advocacy is integrated in structural way to achieve lasting change across the consortium.

I.1.2. Evaluation coverage area

In accordance with the terms of reference, this assessment was carried out in North and South Kivu provinces specifically in 8 health zones (Nyiragongo, Karisimbi and Goma for North Kivu) and (Bagira, Ibanda, Kadutu, Walungu and Lemera, for South Kivu), the health zone of Rutshuru having been excluded from the study because of the context of the war between the M23 armed group and the FARDC. The Evaluation Team even interviewed participants in the programme displaced from Rutshuru from Nyiragongo territory where they are in the camp, of course with their consents to participate in the evaluation. The health zones of Kalonge in South Kivu and Mweso in North Kivu have been designated as control zones.

In addition to these implementation areas affected by this evaluation, two other Health Zones were identified as control zones to measure the Mawe tatu II programme's contributions to the change observed in the implemented areas.

1.1.3. Evaluation Purpose

The main objective of the Evaluation of the MAWA TATU II Programme is to measure progress and results achieved based on the Theory of Change, draw lessons (lessons learned) and formulate recommendations for future programmes.

1.1.4. Specific objectives

This evaluation provides evidence on how changes have occurred from interventions in the three Outcomes and advocacy axis.

It answered the following specific questions:

1. What programmatic approaches contribute to changes in women's and young people's (girls' and boys') decision-making within the household and in the community?
2. How does entrepreneurship encourage women and youth to participate in decision-making at household and community level?
3. What is the level of rejection of violence by men and boys? How have CARE's partnership standards been applied in the programme?

To these specific questions have been added evaluative questions based on OECD criteria such as: Effectiveness, Relevance, Sustainability, Impact, Coherence, Efficiency, as well as other cross-cutting issues: Human Rights; Gender, diversity and equality.

II. METHODOLOGY USED

In accordance with the terms of reference of this evaluation, approaches and techniques specific to different outcomes have been developed to facilitate our understanding of each of the trajectories of the MAWE TATU II Programme, its effects on the community and the level of sustainability of the Programme.

A mixed approach (quantitative and qualitative), using techniques to collect significant changes induced by the Programme, was applied throughout the mission.

Based on a mixed approach, the methodological approach took into consideration quantitative and qualitative data. Data from the literature review including the outcomes database, quantitative analysis through household surveys (indirect structured), qualitative data from focus groups with programme participants who are community members of the health zones targeted by MAWE TATU II in North and South Kivu and interviews (indirect and/or direct) with consortium members.

II.1. Estimation of sampling

The calculation of the sample was based on the direct participants of the MAWE TATU II Programme, considering the following statistical parameters:

N: study populations = 52.500 participants in the programme, reached until June 2022 by the Mawe Tatu II programme

z: Coefficient corresponding to the 95% confidence level = 1.96%

d: Margin of error = 4%.

p: Proportion of people who are considered favourable to the subject developed by the programme as it is not recognized = 50%;

f: Ration taking into account non-response = 1.05.

Using the formula below:

$$n = \frac{t^2 * p(1 - p) * N}{t^2 * p(1 - p) * (N - 1) * y^2} * f$$

After all calculations, it appears that the sample size n=623 persons to be surveyed in the MT II areas.

The sample size obtained, for Programme areas, an equal proportion in all areas was respected. More specifically, in each health zone, the respondents were made so that 75.2% of women, 15.2% of men, 4.8% of girls and 4.8% of boys were taken into account. Beyond this sample we surveyed 2 health zones as a control zone in which 147 people were added to the sample size representing respondents from areas not covered by the Mawe Tatu II programme. Thus, the grand total of the sample is estimated at 770 people, hence 70 respondents per health zone.

A particular focus was on 10% of respondents made up of marginalized people affected by the Programme (albinos, girl mothers, etc.) in both supported and control areas.

Table 1 Distribution of respondents by survey area by category.

Table 1: Sample estimate

(VSLA members)				Gpe d reflection	Total
Target	Women from 18 to 49 years old 39500 (75, 2%)	Girls aged 13-17 2500 (4, 8%)	Boy 13-17 years old 2500 (4, 8%)	Men over 25 8000 (15, 2%)	52500 (100%)
	Women VSLA members (80%)	Girls benefiting from advanced entreprene urship training, basic, AGR	Boys receiving advanced entreprene urship training, basic, AGR	Men who are not members of VSLA but have their wives (20%)	Men who participated in the different activities of the Positive Masculinity Programme
Sample	378	27	27	99	99

SOUTH KIVU	210	15	15	55	55	350
Zs Bagira	42	3	3	11	11	70
Zs Ibanda	42	3	3	11	11	70
Zs Kadutu	42	3	3	11	11	70
Zs Lemera	42	3	3	11	11	70
Zs Walungu	42	3	3	11	11	70
NORTH KIVU	168	12	12	44	44	280
Goma	42	3	3	11	11	70
Karisimbi	42	3	3	11	11	70
Nyiragongo	42	3	3	11	11	70
Rusthuru	42	3	3	11	11	70
Control area						
Areas	106	22	6	6	140	
Kalonge/South Kivu	53	11	3	3	70	
Mweso/North Kivu	53	11	3	3	70	
TOTAL	583	121	33	33	770	

In total, the collection of quantitative data reached 770 people, including 630 programme participants made up of 378 women and 27 girls, plus 140 respondents in the control area, 95 men trained on positive masculinity in the programme's area of intervention and 22 people from the control areas. In addition, 30 girls and 30 boys in the Programme areas and 6 girls and boys in the control areas were interviewed.

II.2. Survey methods

II.2.1. Literature review

The Mawe Tatu II consortium made available to the ODAFE consultant, necessary information related to the design, implementation and monitoring and evaluation of the programme (the full proposal, the theory of change and the different Terms of Reference and approach guides set up by the programme, the annual report of the programme, the Learning Agenda Research Report, the Outcomes Database, the Base Line and Midline Survey Report), which facilitated an in-depth analysis of the progress and change brought about by the Mawe tatu II programme.

II.2.2. Individual investigations

The targeting of persons to be investigated was based on the systematic random method taking into account the list of beneficiaries and members of the men's focus groups. To reach VSLA members, community facilitators/local village agents guided investigators to individuals selected from the list [VSLAs].

II.2.3. Focus group

Focus groups with target groups (direct participants in the programme) grouped in VSLAs, the categories taken into account are made up of homogeneous groups of men, women, girls and boys each made of 9 participants and a mixed group per health zone. The tools have been designed by Outcome to facilitate analysis.

Table 2 : Distribution of Focus Groups by categories organized by Province and ZS

Entity		Focus group category					
		Men >=25 years	Wives 18 to 49 years	Girls 13 to 17 years	Boys 14 to 24 years	H+F+f+g	Total
North Kivu	Goma	1	1	1	1	1	5
	Karisimbi	1	1	1	1	1	5
	Nyiragongo	1	1	1	1	1	5
	Rutshuru	1	1	1	1	1	5
South Kivu	Bagira	1	1	1	1	1	5
	Ibanda	1	1	1	1	1	5
	Kadutu	1	1	1	1	1	5
	Lemara	1	1	1	1	1	5
	Walungu	1	1	1	1	1	5
Total		9	9	9	9	9	45

5 FGDs were organized in each health zone due to one per category of participants or 9 FG per category of participants just in the intervention areas, the excluded control zones.

II.3. Semi-structured Key Informant Interview

Semi-structured interviews were conducted with key informants, both state and non-state officials in each of the provinces and health zones. (At least 24 key informants in North Kivu and 25 in South Kivu).

Table 3. Table of semi-structured interviews by key informant categories and by line of enquiry and province.

Entities		Semi-structured interviews												
		Div. Gender	Civil society	Woman Activist	Merchants	Head of Locality	IT (Full Nurse)	Neighbourhood Manager	Bank/Coopec.	Advisory Committee	Organization of MO	Health Division	Total focus group	
N	K	Goma	1	1	1				1	2		3	2	11

	Karisimbi			1	1			1		1			4
	Nyiragongo			1		1	1						3
	Rutshuru			1	1	1	1			1			5
	Mweso			1	1	1							3
SK	Bagira			1	1		1						4
	Ibanda	1	1	1				1	2	1			7
	Kadutu			1	1		1	1					4
	Lemara			1	1	1							3
	Walungu			1		1	1			1			4
	Kalonge			1	1	1							3
Total		2	2	11	7	6	5	4	4	4	4	2	51

We took the option of talking to the categories divided according to health zones. The diversification of the categories of key informants in each of the SPAs took into account the characteristics according to whether it is an urban or rural environment, city, territory or decentralized territorial entities and the informational importance on the basis of the role they played throughout the programme.

III. EVALUATION RESULTS

III.1. Socio-demographic characteristics of respondents

III.1.1 Respondent Profile

The quantitative survey covered 630 out of 623 of the planned sample in the Mawe Tatu II area. Of these surveys, it appears that 48.2% are women members of s VSLA, 29.4% of spouses who are not members of VSLA, 13% of girls and 9.4% of boys. As for the distribution of respondents by age group, it appears that 38% are in the 26-35 age group, 28.8% in the 36-49 age group, 20.1% in the 18-24 age group, 9.4% in the 50-over age group, and 3.1% are in the 13-17 age group. Overall, it appears that more than half of the respondents were women, 58% were women aged 25+ and 42%, the other categories including girls aged 18 to 24 19%, young boys 6%, men 17%. This disproportion of age and sex categories is justified by the fact that the distribution of respondents was based on the weight of beneficiaries affected by the programme by age category. For the control area, it appears that 58% of respondents are women against 42% of men.

II.1.2 Occupation of respondents

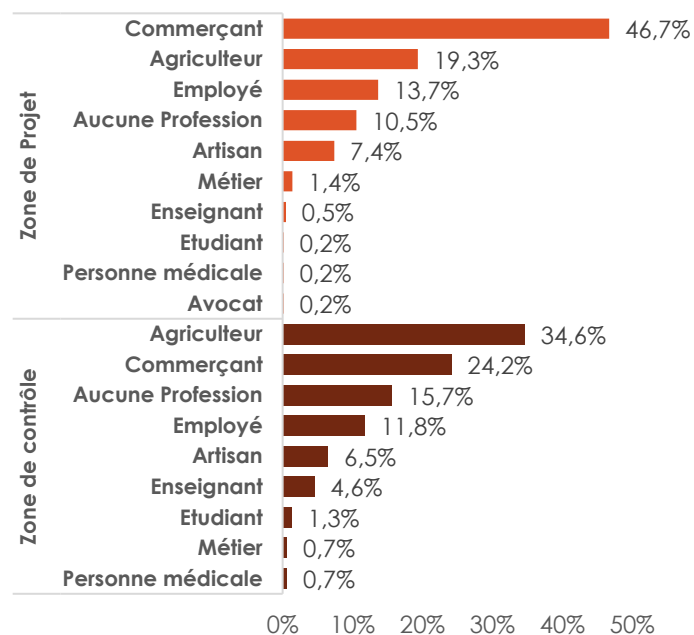


Figure n°1: Occupation of respondents

In this Fig. 46.7% of respondents are entrepreneurs (traders), 19.3% farmers against 10.5% without profession.

Compared to the results of the baseline, it turns out a decrease in the proportion of respondents without occupation from 16% at the mid-term evaluation to 10.2% compared to the final evaluation, which makes a difference of 5.8%. While in the control area this proportion did not significantly change 15% at baseline against 12% at the final evaluation. This confirms that the various training courses organised in basic and advanced entrepreneurship, as well as the ease of access to credit through VSLAs, have encouraged the community in

the programme areas to start businesses. We should also understand that the increase in the proportion of respondents entrepreneurs 46.7%, 45.8% at mid-term against 24% of the basic evaluation while fewer people compared to the initial results practice agriculture (25% against 18% of the initial). This observed change in activity confirms that programme participants are using market research data in selecting more profitable activities.

III. 2. Programme Progress

The key points of progress addressed in this final evaluation relate specifically to the standard criteria for evaluating Development Programmes, namely: relevance of the activities and underlying assumptions of the theory of change, coherence and coordination of the consortium (equitable partnership), effectiveness, efficiency, induced change and sustainability. In addition, in this chapter, a reflection on the added value of the advocacy strategy is included.

To achieve the three main outcomes, through the theory of change, the programme implemented the following key approaches: 1) Set-up of VSLAs combined with entrepreneurship training, 2) organising men and boys in reflection groups on positive masculinities, 3) awareness raising on SRH and training of health actors, 4) strategic advocacy towards a more enabling environment for entrepreneurs, 5) transformation of social norms.

A. Key achievements of the programme in terms of realisation of expected results.

With reference to the results of the baseline and midterm evaluation reports and reports of different activities of the programme on the promotion of youth and women's entrepreneurship, there are significant changes in households and in the community. Men and youth have effectively engaged in supporting women and girl entrepreneurs by developing supportive behaviour. Advocacy has been of paramount importance to this programme because it has facilitated the many observable changes.

(a) Capacity strengthening of women and youth participants for greater access, control of resources, knowledge and mindset and market access.

Basic and advanced entrepreneurship trainings were organized under the Mawe Tatu II programme to strengthen participants' capacity to manage (or start) their economic activities. This has enabled women and youth to improve their skills in market and risk analysis, as well as their business plan development skills.

The available information clearly indicates that women and young people have access to and control over resources. The movements in VSLAs (savings and loans) observed is proof of this. The start-ups of companies and the development of existing ones indicates is one of the proofs of success.

Even if the trajectory of market access has not shown significant progress, the improvement of knowledge and the change in mindset of women and youth have effectively influenced and promoted the development of changes.

One approach that has produced more impact in terms of the knowledge and mindset of women and youth is the inter-provincial experience exchange activity.

Thanks to this activity, several young people and women have managed to innovate their businesses by offering new products to their customers. We can cite for example workshops of the sewing cutters that currently make women's cases and reusable sanitary strips, others have innovated in their beauty salons by buying modern equipment, which makes their companies competitive at the level of their areas allowing them to attract customers.

Despite these advances noted by the evaluation team, it was noted that there is **a weak interconnection between different businesses to build efficient value** chains from the service provider (VSLA) to the producer to the last consumer to generate more profitability. Indeed, it is observed that most businesses work alone (without connection) when they had to be interconnected with each other to capitalize on efforts, especially those compatible and working in the same area.

Access to resources by women and young entrepreneurs through the products and services offered by their initiated micro-enterprises and access to financing through VSLA+ credits:

The VSLA+ approach, the target groups of the programme, especially women and girls, manage to save money weekly, which allowed women and young people to start businesses with funds obtained in VSLAs. In VSLAs, access to credit is easy by all VSLA members with an agreed and relatively bearable interest rate making it easy for many of the participants to invest in their businesses.

The contribution of capital received from microfinance institutions and banks has not been proven in this evaluation.

b) Ability of women and young entrepreneurs to plan (business plan) based on a market study.

The results in terms of income are the consequences of the knowledge and the ability developed allowing them to carry out market research as well as the development of business plan before launching a business. Women and girls themselves are aware that if you start a business without making a plan or a market study (having information about the point of sale, the preferences of your customers, etc.), there is a high chance for failure, in other words, if you follow these steps, the possibilities of bankruptcy are reduced. During an interview with an entrepreneur, he says: Today, women and young people evaluate certain factors by comparing market prices during supplies, transport, customers, goods in order to have

clear information that can help them in calculating profit. Women and young people now know what they can sell, where to sell, when and to whom to sell them (population) in order to have the profit but also in case of risks know how to overcome it. Those who have been able by GEL, respect the **4 Ps (Products, Price, Place & Promotion)** progress faster than the others. Taking these elements into account makes it possible to adapt its services to its customers and maximize the related benefits.

It was observed that the enterprises of women and girls progress better than those of boys. One young person we asked as a key informant states that he cannot find funds to save in VSLA, so he does not know how to take out a substantial loan to invest in the business.

c) Capacity of women and young people to participate in household expenses:

The gains in terms of results that go into the patrimony of the home are enormous, in this case we have to consider the fact that women and young people are becoming more and more able to meet their own needs and sometimes family needs.

This is the case of Mrs. Marie-Jeanne CHINOGERWA member of AVEC de Walungu who can no longer go into debt to meet the basic needs of her household in February 2021 thanks to the income she earns in her business.

This change is significant because the fact that women are beginning to stabilize the household economy to the point that they are able to meet basic needs without recourse to credit reflects the expectation of the programme that if the skills and mindsets of women and young people are improved. They are confident of taking a stand in their family and in society, linked to social norms that show that the decision on specific issues of family care belongs only to the man.

d) Engaging men and boys in positive masculinity

Women give testimonials that affirm that their husbands are committed to positive masculinity. "*Now my husband can help me with some housework,*" said a farmer in the Lemera SZ in South Kivu. A striking case seen the context.

One of the observed changes taken from the table of Outcomes and verified by us is that of Mr BASHIZI MAPENDO Floribert, a committed man member of the group of Bagira who began to involve his wife in the management of their household while taking into account his point of view in all financial decisions at the level of the family / household in August 2021.

This change is significant for the community/other women in Bagira who are observing the improvement in the well-being of the woman and her children. For the Mawe Tatu II programme, this reflects an evolution in the transformation of the social norm of women's participation in household decision-making and in the community. This adoption of positive masculinity by Mr Bashizi reflects an awareness of the importance of gender equality, in line with the ToC of the programme. Mr. Bashizi states that the other men tell him that he is already put in the bottle by his wife (to say that he is dominated by his wife) and remains insensitive to this social sanction.

e) Promotion of gender equality :

The participation of women and youth in VSLAs was a good opportunity for women and youth to learn about their rights and discover their capacities in decision-making. The table of Outcomes collected around the implementation of the programme shows observable successes in the community in terms of the participation of women and men in decision-making.

f) Freedoms and opportunities for women and girls to make informed decisions to achieve their reproductive intentions:

Through dialogues, sensitization by community health networkers organized by the programme, women and girls are able to reconcile their reproductive roles (motherhood) and their productive role (entrepreneurship).

According to the results of the focus groups with women, progress in birth spacing is observed among most VSLA members. Thanks to the various awareness-raising sessions carried out by community health networkers, women have understood the risks of non-spacing of birth on their businesses, a proof in this verified Outcome. In July 2020, Mrs. Louise CIRAGANE woman member of a VSLA in Bagira agreed to adhere to a family planning method. Ms. Louise accepted the advice of the caregiver not to put her life at risk through close deliveries, to have more time to take care of her business. Ms. Louise is happy to see her baby being breastfed longer, to have more time to take care of her business. This change is also important for the Mawe Tatu programme because it is in line with the theory that if women and girls have access to and use sexual and reproductive health information and services improves their socio-economic status of their families. This change was selected as significant because the majority of women do not agree to use a family planning method, either because their partner does not agree or because of the taboo that exists around these methods. Like Louise, many women have a high number of children at a young age and are mainly limited to exercising their reproductive role, having little time to explore their productive role. Now that she has started using a FP method, she can plan for possible more pregnancies and have more time to engage in entrepreneurship.

B. Some unexpected achievements within the programme

In all areas, Mawe Tatu II activities have produced unintended outcomes, either positive or negative, such as:

- Some women and girls trained by the programme, after discovering their entrepreneurial potential, went beyond and were able to initiate social enterprises, for example.
 - Rutshuru, Community-Based Organization Specializing in Agriculture and Maize Processing
 - A woman from Rutshuru, after training on leadership in her VSLA, creates an NGO and remains the coordinator.
- Some women who have emerged in their businesses and are already having superior means than their husbands sometimes abuse the man's commitment to positive masculinity by leaving them with household chores and addressing them inappropriate and degrading words, views supported by both women and men in FGDs.

C. The effectiveness of the Strategies and approaches used by target group to achieve results

Effectiveness of strategies and approaches used by target group.

Outcome	Target groups	Strategies	Feedback
Women and youth earn sustainable income through the products and services they sell in their businesses.	Women and youth	Training and Entrepreneurial Coaching 	<p>Within VSLAs, women and young people have benefited from training on different themes including (basic) entrepreneurship, leadership, participation, which has helped them to build self-esteem to the point of ensuring that they participate in local, family decision-making spaces. The statements of women and young people clearly prove this</p> <p>This basic entrepreneurship training helped women and youth to have clear ideas on how to conduct the market study and how to use market research data in their business. We did observe this in the companies visited.</p> <p>Looking at the Mawe Tatu II outcomes database, we understand that women and girls have gained a better position, even if sometimes to a certain extent, within families.</p>
		Set-up of and participation in VSLAs 	<p>The set-up of and participation in VSLAs is the strategy that programme participants estimated as a gateway for other activities in the Mawe Tatu II programme. In this context, village agents, multipliers and field agents work every week to train, inform members on specific entrepreneurship issues, individualized coaching on using existing savings, credit and business start-up capacities and/or business strengthening.</p> <p>It should be noted that the new VSLAs have complemented the number of existing VSLAs set up by the Mawe Tatu I programme.</p> <p>According to programme participants, the collaboration of VSLAs with microfinance institutions has not been easy. The latter do not provide a service adapted to young and female entrepreneurs because they are small earners, unable to find collateral which is often a requirement to obtain a loan.</p>
		Business plan competition and support 	<p>Each quarter, community facilitators identified VSLA members who had started businesses, based on a business plan. From this list, based on the predefined criteria, a team selects those who will benefit from advanced training who will then participate in the business plan competition. A number of selection criteria were defined to identify women and youth to be empowered and supported (being a member of a VSLA, demonstrating an entrepreneurial spirit, etc.).</p> <p>The entrepreneurial skills that the programme has developed among women and young people have enabled them to identify economic activities to undertake. Identification was carried out in all the areas of intervention of the programme, however, certain difficulties and limitations related to insecurity caused the non-coverage of certain areas of intervention such as Lemera in South Kivu.</p>
		Literacy 	<p>The strategy of organizing literacy circles is effective because some female VSLA members said that they are now able to read, calculate and count, which increases their effectiveness in VSLAs (dignity) and feel able to run their businesses well without being tricked.</p>
The adoption of positive masculinity by men and	Men and boys	Reflection Groups on Positive Masculinity and Responsible Sexuality	<p>Organizing boys and men into focus groups is a strategy to ensure that men and young people have acquired the necessary knowledge to engage in the promotion of gender equality.</p> <p>This strategy was effective because the evaluation found that men and boys engage in behaviour that rejects violence by more than 50%.</p>

<p>boys leads to the acceptance and support of women and young entrepreneurs;</p>	<div data-bbox="509 218 669 380"> </div> <p data-bbox="518 653 664 793">Multi-sectoral dialogue on transforming discriminatory social norms</p> <div data-bbox="493 837 609 953"> </div>	<p data-bbox="716 222 1469 415">Through outcome 3, it is visible that there are openings for women and girls to make informed decisions to realise their reproductive intentions. It is obviously acceptable for women/girls to undertake an entrepreneurial activity but their reproductive role is the most important. Many of the men and boys interviewed acknowledge the importance of discussing sexuality issues and the benefits of having responsible sexuality and/or planning births.</p> <p data-bbox="716 426 1469 619">A comparative analysis for women and girl entrepreneurs who use contraceptive methods versus those who do not use contraceptive methods shows that the businesses of contraceptive users/family planning are developing better than those who do not plan births. For them, both during key interviews and FGs, motherhood is an obstacle to the development of their business.</p> <p data-bbox="716 653 1469 972">The organization of community dialogues, dialogue between parents and young people and dialogues between entrepreneurs and local political-administrative authorities has allowed women and young people to have a voice in public spaces, to be listened to, to demystify certain norms and improved the framework for exchanges between decision-makers and entrepreneurs. For example, discussions between parents and young people made it possible to introduce the issue of sexuality without taboos and this revealed to many parents the importance of discussing on this topic. Women, girls, boys and men recognized the role that dialogues have played in reducing the weight of social norms in the communities targeted by the Mawe Tatu II programme.</p>
<p>Women and youth</p>	<p data-bbox="518 1073 680 1125">Sensitization / awareness raising</p> <div data-bbox="500 1178 618 1293"> </div>	<p data-bbox="716 1073 1469 1266">Community health networkers sensitized men and youth in reflection groups and women and youth in VSLAs to share information on sexual and reproductive health with the aim that women and young people can decide on their reproductive and productive situation (maternity-entrepreneurship). In sum, this strategy has succeeded because girls and women are actually talking to parents, deciding on the use of a contraceptive method and increasing their participation in VSLAs while investing in businesses.</p> <p data-bbox="716 1276 1469 1356">These findings are supported by statements by girl entrepreneurs in FGDs that compare themselves to others who already have children. Their businesses have experienced regressions because of motherhood.</p> <p data-bbox="716 1367 1469 1476">Although none of the respondents replace the reproductive role with the productive role, the statements converge towards the direction of reconciling the two to ensure that motherhood is not a brake on the development of the business and vice versa.</p>
<p>Women and girls make informed decisions to achieve their reproductive intentions.</p>	<p data-bbox="550 1514 634 1535">Training</p> <div data-bbox="483 1577 618 1692"> </div>	<p data-bbox="716 1514 1469 1623">Training to health care providers on Family Planning (techniques) and situational analysis of social norms on FP have enabled caregivers to embrace the SRH approach and reduce rumours around family planning and the use of modern contraceptive methods.</p> <p data-bbox="716 1633 1469 1713">Trained community health workers worked with communities to share the correct information on sexual and reproductive health in VSLAs, reflection groups, during mass activities and during home visits.</p> <p data-bbox="716 1724 1469 1770">Overall, communities in 5 health areas benefited from the correct sexual and reproductive health information.</p>



The health structures supported have provided both a framework for the sharing of sexual and reproductive health information and the administration of modern contraceptive methods. Ongoing collaboration has been observed between the consortium and health facilities to ensure that communities are satisfied with the provision of sexual and reproductive health services.

D. Sustainability of Mawe Tatu II results

To ensure the sustainability of the programme's achievements, the consortium has empowered the steering committee, local political-administrative authorities, advisory committees, village agents and local organizations to ensure that both women and young people continue with VSLA activities, steps towards gender equality in reflection groups are shared in communities, businesses are supported, structures continue to share the correct information on sexual and reproductive health.

For the participants in our FGDs and key interviews, the achievements of the Mawe Tatu II programme have remained in the community, belong to us, we will ensure that this continues to have an effect on our development.

Furthermore, to ensure the good functioning of VSLAs, the consortium should strengthen the link between VSLAN and VSLAs and the link between VSLANs and MFIs/banks.

The implementation of the programme was based on a participatory process that placed the target groups at the centre of the intervention strategy. Women, young people, men gathered in groups, religious leaders, local authorities are all involved and empowered. This involvement ensures that the various stakeholders have a good knowledge of the objectives of the programme, which promotes their active engagement and participation.

Mawe Tatu II governance and added value

At the beginning of the programme the consortium set up a governance structure that will promote the participation of all to increase the effectiveness and relevance of interventions by integrating learning outcomes into strategic planning and implementation. It is structured in the way that includes the coordinators/directors of the member organizations of the consortium, the programme managers of the member organizations, the advocacy team within a structure called **Management Meeting**. The strategic management of the Mawe Tatu II programme was the role of this structure that met on a monthly basis.

This structure collaborated with two other structures, the steering committee and the advisory committee.

The steering committee composed of the heads or delegates of the gender, plan, health, youth divisions and the delegate of the governor's office had the role of planning and closely monitoring, steering in the true sense of the term the implementation of activities in the health zones. A report of the follow-up points was made each quarter and was used in the planning of the following quarter.

The advisory committee is one of about twenty participants in the programme including 10 women, 8 young people and 3 men to represent the members of VSLAs, the reflection groups in the quarterly meetings to monitor the implementation of the programme.

Measuring the performance of the governance structure

In discussions with key informants and GF participants, it is evident that the steering committees visited activities in the health zones several times and advice, guidance, suggestions were given on both sides to ensure improvements in the implementation and sustainability of the programme's achievements. The members of the advisory committee have indeed been a real bridge between the participants in the programme and the coordination of the programme.

It should be noted that local and international non-governmental organizations working in the areas of intervention of the programme have also been involved in some programme coordination activities in order to try to study the elements that constitute the obstacle to the achievement of objectives through the learning agenda and to seek to what extent the problems identified can be solved on the basis of the needs of programme participants.

E. Partnership Standards

Level of application of CARE International's Partnership Standards.

Description of the standard	Expected behaviour	What worked	Lesson learned/Recommendations
<p>1. Co-ownership</p> <p>Our relationship is based on the co-creation of equitable partnerships, based on a common vision and expected results in gender equality, local development and humanitarian action.</p>	<p>We create spaces for co-creation and shared decision-making, including operational co-design, joint implementation and co-responsibility in reviewing, learning and evaluating the impact of programmes.</p>	<p>The collaboration between the staff of CARE NEDERLAND (white and lead) and CARE RDC (consortium management) and the other members of the consortium (mainly local NGOs) was good, no frustration observed, mutual sharing of capacities, preparation, implementation, monitoring and evaluation of actions together.</p> <p>Good collaboration between local actors was observed (example) ADJ and GEL all worked in VSLAs, there was no overlap of activities, it was coordinated and complementary.</p>	
<p>2. Shared Risk Management</p> <p>Our relationships take joint responsibility for risk management and mitigation, through up-to-date, well-resourced strategies and actions that are guided by partners with knowledge of the context.</p>	<p>We accept that risks (including financial risks) are inherent in our work, so we adopt a culture of openness to talk about them, while prioritizing the safety of CARE staff/partners and the communities we work with.</p> <p>We understand that risks change over time and have a different impact on organizations/individuals. As a result, we are committed to conducting joint reviews that allow for timely and mutually agreed upon adaptations to mitigate risks.</p>	<p>In several circumstances, all the members of the consortium shared the risks and challenges related to the implementation of the activities in order to find together the appropriate solutions. Each played its role independently and, where appropriate, in collaboration with all the other actors of the consortium to achieve the objectives of the programme.</p> <p>At the beginning of the Programme, the staffs were empowered on personal safety. Before going into the activities, the organizations of the consortium to ensure the combination of movements and ensure the safety of the personnel. CARE RDC's security shared security information with their staff and collaborators to adapt action plans to the security context. Only for a security management circumstance, bias was manifested (case of the evacuation of Rutshuru during the M23 and FARDC atrocities).</p>	<p>Discuss all issues of risk in advance and define joint coping strategies to prevent frustration.</p> <p>Safety standards must be harmonized in a consortium.</p>

<p>3. Collaborative Compliance Our relationships honour our commitments to all stakeholders. In addition, our actions are guided by a sense of "proportionality" when negotiating requirements, and by an openness to different ways of demonstrating how requirements are met.</p>	<p>Due diligence is guided by a mutually agreed upon policy and practices that respect organizational identities, while enabling all partners to fulfil their multiple responsibilities. Deliverables are agreed taking into account the minimum requirements of donors and partners. These are reviewed regularly, and the agreed changes meet these minimum requirements.</p>	<p>Although it is a consortium, the administrative and financial procedures were not imposed, each of the organizations remained independent. The clauses of the signed contracts have been agreed and respected. The deliverables were well agreed upon in advance.</p>	<p>No</p>
<p>4. Adequate investment Our relationship recognizes inequalities in capacity and access to resources. We appreciate the different contributions of all partners and believe that they are all equally essential to achieve our common goals.</p>	<p>Due diligence is guided by a mutually agreed upon policy and practices that respect organizational identities, while enabling all partners to fulfil their multiple responsibilities. Deliverables are agreed taking into account the minimum requirements of donors and partners. They are reviewed regularly, and the agreed changes meet these minimum requirements.</p>	<p>Local organizations feel that they have received several trainings/capacity sharing that has enabled them to achieve results and improve their knowledge; The financial investment enabled them to achieve the programme's outcomes. Knowledge in terms of professional/technical experience was one of the keys to success. During the periodic planning of activities, the partners/consortium members of the programme were involved several times to give their proposals for the allocation of budgets and/or costs of activities to be implemented during well-defined periods. They were also responsible for developing terms of reference that would enable them to bring together all the necessary means to carry out the activities: financial, logistical and technical. It is in this context that the financing of Mawe Tatu II had contributed to the payment of rent and communication, to part of the salary of some positions.</p> <p>Nevertheless, some organizations feel that the topic of cost-sharing was not discussed in a direct manner.</p>	<p>The topic of cost-sharing should be clearly discussed during project/programme design</p>
<p>5. Intentional Learning & Accountability Our relationships create explicit and intentional mechanisms for mutual learning and accountability. These mechanisms promote transparent and equitable access to information and</p>	<p>We invest time and resources in sharing knowledge and information, prioritizing participation in communities of practice or similar spaces for reflection. We address strategic or technical themes of common interest, with learning questions to explore collaboratively.</p>	<p>The consortium has developed a robust learning agenda with key learning themes to ensure improvements and/or lessons learned are integrated into strategic planning. In terms of information sharing, all members were involved in discussions including the preparation of communication messages with the donor. The consortium used a common toll-free line, which meant that feedback from programme participants was taken into account in strategic planning every quarter. Apart from learning discussions in monthly management meetings, an almost annual</p>	<p>Organization of the digitization of the data in such a way as to give access to each member of the consortium to the visualization or even the modification. Increase the opportunity for the exchange of experiences and direct them in such a</p>

spaces for common reflection	We proactively offer and seek honest feedback, being open to discuss critical issues and committed to effectively managing conflict, while acting on the feedback received in a timely manner.	framework included everyone working on the project for a monthly learning event. All databases were managed by CARE without any possibility for consortium members to visualize at their level.	way that all actors express themselves
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III.3. Programme performance

The table below shows the analysis of the indicators of the different trajectories in relation to the control areas and the Baseline, Midline and Endline as well as the progress and contribution of the programme.

Indicators	Control area			Programme Area					Target
	Base Line	Endline	Progress	Baseline	Midline	Endline	Progress	Contribution	
	has	b	B-A (x)	c	d	E	E-C (Y)	y-x (z)	
% of women and youth who can cope with unexpected expenses of about \$50 without having sold productive household assets	1.6%	10.0%	8.4%	18.2%	22.0%	27.2%	9.0%	0.6%	<i>A progress of 9% is noted on this indicator in the project area. Nevertheless, there is a less significant difference between progress in the control area and the project area (+0.6%)</i>
% of women who say they are confident to speak openly about their entrepreneurial aspirations within their family and community	1.6%	5.0%	3.4%	5.7%	6.0%	14.5%	8.8%	5.4%	<i>An increase of 8.5% is noted on this indicator in the project area with a difference of +5.4% between the control area and the project area.</i>
% of women and young people who have increased the profitability of their businesses (net profit)	47.4%	6.9%	-40.5%		18.0%	20.1%	2.1%	42.6%	<i>A progress of 2.1% is noted on this indicator in the project area with a difference of +42.6% between the control area and the project area.</i>

% of women and young people who are aware of the official services available to them	45.9%	39.0%	-6.9%	68.2%	75.0%	87.9%	19.7%	26.6%	An improvement of 19.7% compared to baseline can be noted on this indicator in the project area. This gives a difference of 26.6%
Number and % of women and youth actively using financial services (formal and informal) on their name		41	NA		81	485	NA	404	An improvement of 33% with a difference of 17% compared to the baseline results can be noted on this indicator in the project area.
	23.0%	39.0%	16.0%	58.0%	87.0%	91.0%	33.0%	17.0%	
% of women and youth who requested successful or unsuccessful formal financial services	13.1%	36.6%	23.5%	26.4%	31.0%	53.9%	27.5%	4.0%	There is a significant increase of 27.5% for this indicator, with a difference of 4% compared to the control area.
% of women and youth who received the loan to invest in their businesses from a formal financial service and who repaid	9.8%	75.0%	65.2%	23.2%	85.7%	45.0%	21.8%	-43.4%	There is an improvement in this indicator, 21.8% difference compared to the baseline situation for this indicator.
% of men who recognize women's right to (a) control their fertility, (b) work outside the home, (c) control their own income, (d) make decisions about their capital and assets, and (e) inherit property.	29.2%	43.4%	14.2%	36.9%	33.8%	38.2%	4.4%	-9.8%	There is an improvement of 4.4% for this indicator compared to the baseline for this indicator.
Average total number and proportion of weekly hours spent on unpaid domestic and care work	3	4	-1	5.3	3	5	0.3	1.3	A slight improvement is observed 0.3 hours on average for this indicator from which the difference is 1.3% compared to the control areas
% of men who do not accept violence (referring to perceptions given with the GEM questionnaire by type of violence)			NA		74.0%	59%	-15.0%	NA	Indicator not specified in the baseline

% of parents who engage in dialogues on SRH between parents and adolescents		12.0%	NA		42.0%	51.0%	9.0%	NA	An improvement of 9% compared to midline is observed for this indicator
% of men support their partners' reproductive health practices	6.6%	22.0%	15.4%	4.2%	35.0%	34%	29.8%	14.4%	An improvement of 29.8% compared to the baseline for this indicator. A significant difference of 14.4% compared to the control area
Proportion of women aged 15 to 49 who make their own informed decisions about sex, contraceptive use and reproductive health care about their own informed decisions about sexual relations	1.6%	0%	-1.6%	2.0%	3.0%	1.7%	-0.3%	1.4%	A slight regression of -0.3% compared to the baseline but also a slight positive difference of 1.4% compared to the control zone
% of women and youth reporting GBV reduction	8.2%	6.5%	-1.7%	8.3%		4.4%	-3.9%	-2.2%	There is a regression of -3.9% compared to the baseline and a difference of 2.2% compared to the control area
% of women and youth participating in local decision-making (conflict resolution and other types of decision-making) and report that they are able to influence decisions	26.2%	8.0%	-18.2%	21.6%		46.0%	24.4%	42.7%	A significant improvement of 24% compared to the baseline. And a significant difference of 42.7% compared to the control area.

According to the participants in the discussions, the induced changes in the activities generated fall within the three main outcomes of the Programme's Theory of Change. As a reminder, the main results are related to (1) the entrepreneurship of women and youth through access and control of resources; knowledge, abilities and state of mind; and market access, (2) positive masculinity through the engagement of men and youth, and (3) sexual and reproductive health.

In the following subsections, we present the results in addition to the results previously presented on the evaluative questions, while giving suggestions for future programming, this section reviews the changes produced from the interventions at the level of the target groups (Performance Questions). In this exercise, the study compares the results obtained during the baseline study for the indicators selected for

the mid-term evaluation. The results are presented according to the specific outcomes and objectives of the programme's Theory of Change.²

III.3.1. Outcome I: Entrepreneurship of women and youth (girls and boys)

3.1. Outcome I: Women and youth are able to earn sustainable income through the products and services they sell in their businesses.

Entrepreneurship activities were carried out in all Mawe Tatu II intervention zones. Activities are divided into three trajectories, namely: (Outcome I.1) women and youth have control over resources to invest in their businesses; (Outcome 1.2) women and youth have the knowledge, skills and spirit to grow their businesses; (Output 1.3) Women and young entrepreneurs have access to spaces and channels to sell their products and services.

The final evaluation shows that women's and youth entrepreneurship has taken its place in households and communities in the health zones of the programme's intervention. Through this programme, women and girls and boys benefited from entrepreneurship trainings, which in turn enabled them to develop skills to control their financial resources, and to build savings in terms of savings. Nevertheless, access to credit is still problematic because most participants do not collaborate with banks and MFIs due to strict the requirements of financial institutions. The majority prefer to join the VSLAs due in particular to the easy access to credit and the interest rate too low.

Indicator 1: % of women and youth able to meet unexpected expenses of about \$50 without having to sell productive household assets

The information in the table below shows that 635 women and girls participated in the study and responded to our questionnaire, among the majority of entrepreneurs, unplanned spending remains a factor that limits the progress of their businesses.

Table 4: % of women and girls face unexpected expenses of at least \$50 without taking out a loan.

What would be your attitude towards an unexpected expense of at least \$50 (n=635)?				
Terms	Basic study:	Mid-term evaluation	Programme Area (n=530)	Control area (n=105)
<i>I would ask for a loan</i>			48,5%	20,0%
<i>I would bear them without worry</i>	18,2%	22,1%	27,2%	10,5%
<i>I would ask for help from pets</i>			12,8%	26,7%
<i>I would sell some assets in my household</i>			4,0%	7,6%
<i>I would resign myself</i>			2,3%	15,2%
<i>No response</i>			3,2%	5,7%
<i>I would sell some of my household's non-performing assets</i>	8,6%	1,1%		
<i>Other (please specify)</i>	5,7%	0,9%		
Total	100,0%	100,0%		
<i>If supported by yourself, where do the means come from (27.2% of 635 women and young people surveyed can bear without worry)</i>				

² Ultimate Recipients of the Programme of the Programme Mawe Tatu II: women, girls and boys, men and other stakeholders: authorities, community, religious and traditional leaders

<i>Small business</i>	27,3%	54,5%
<i>Salary</i>	18,2%	21,7%
<i>Trade in agricultural products</i>	18,2%	7,7%
<i>Other (specify)</i>	27,3%	4,9%
<i>Handicrafts/Small trades</i>	0,0%	4,9%
<i>Field work</i>	9,1%	2,8%
<i>Breeding</i>	0,0%	1,4%
<i>Market gardening</i>	0,0%	1,4%
<i>Rental income</i>	0,0%	0,7%
<i>Total</i>	100,0%	100,0%

In parallel with the previous mid-term evaluation, there are variations that can be attributed to the different interventions of the programme according to the participants in the FGDs. This indicator has improved since the beginning of implementation, because at mid-term only 22% beneficiaries could satisfy favourably the spending of about \$ 50 without having sold household assets while more than half or 53% would have to resort to borrowing. At present, 27.2% of women and girls arrive without having sold their household assets and a decrease of 4.5% of women who no longer resort to loans to meet them by the fact that they advance in their businesses. On the other hand, we note that 48.5% of women and girls continue to use loans.

This percentage is that of women and girls registered for formal or informal loans to meet unplanned expenses, which undoubtedly reflects the low economic power of a large part of women and girls. This reality remains a major challenge that should be improved in future interventions in intervention areas and capitalized with particular attention in new areas as far as possible.

Highlighting the words of women and young people from FGDs organized in the different health zones. The few people who can meet this need are largely made up of programme participants who put into practice the orientations resulting from different entrepreneurship trainings and who are concerned about the progress of their businesses.

There has been a significant advance in this indicator, despite the expenditure that women make for their needs, is sufficient proof of their ability to meet them without resorting to the sale of their valuables.

Indicator 2: % of women who say they are confident to talk openly about their entrepreneurial aspirations within their family and community

The table below, containing the above-mentioned indicator, reports on the attitudes of women and girls with IGAs towards a request for financial assistance from a relative, friend or family member (small or extended). Out of a total of 580 women and girls directly contacted in North and South Kivu in the 11 areas targeted by the assessment, 491 women were sampled in the Mawe Tatu II Programme areas, and 89 in the Control Areas.

Table 6: Women's Statement of Household Demands from Financial Services that may hinder the progress of their IGAs or Enterprises

<i>Are there times when someone in your household asks you for a financial service for some need that can cause your business or AGR to progress? (n=580 women and girls)</i>		
<i>Modalities observed</i>	<i>Control Area (n=89)</i>	<i>Programme Area</i>

		(=491)
Yes	67,4%	60,3%
No	25,8%	37,9%
No response	6,7%	1,8%
Grand Total	100,0%	100,0%
<i>If so, what is your attitude to this request? (n = 14.5% of 580 women and girls)</i>		
<i>I partially respond to their request</i>	46,7%	51,4%
<i>I do what they ask me</i>	41,7%	28,7%
<i>I oppose the idea of meeting this need.</i>	5,0%	14,5%
No response	6,7%	5,4%
Total	100,0%	100,0%

The table shows that 60.3% of women and girls surveyed in Programme areas testify to having family requests for financial services that can cause the non-progress of their businesses, compared to 37.9% who say they have not received any. Most of the demand is of order: school fees, illnesses of relatives, debt payment consumed by a friend or relative, etc. Responses to these unpremeditated demands could hinder the progress of women's businesses.

Of those who say they have received requests from financial services for any needs that may limit their businesses or IGAs from progressing, more than half of them (51.4%) say they have responded partially; 28.7% say they have responded completely and only 14.5% have opposed the idea of responding favorably to these requests or needs in the areas of intervention of the programme. However, there is a lower percentage in the control area where women who oppose reach only 5%.

What we deduce from this table shows a wave that goes from baseline, midline and end line because at the baseline stage **5.7%** of women said they were confident to talk openly about their entrepreneurial aspirations within their families and communities by opposing financial demands that could prevent their companies or AGRs from progressing; At midterm there is **6%** and at the end of the programme there is a value close to the percentage of the baseline (i.e. **14.5%**). Taking into consideration the value of the control area (5%), as a factual witness, we find that this value is slightly lower than the mid-term value because the mid-term evaluation also explains that at that stage entrepreneurship activities were not yet set up in all the intervention areas. These arguments sufficiently explain that this may not be a normal tendency.

Thus, it is understandable that progress in the sense that during the mid-term evaluation 6% was achieved and at this stage the indicator has exceeded its double (i.e. 14.5%)

This progression currently represents women and girls who have internalized the gains on financial education and savings and entrepreneurship. They have a certain self-confidence and can declare and speak openly about their entrepreneurial aspirations within their families and communities. The progress recorded with regard to this indicator is the result of the combined efforts of consortium members through multiple training, awareness-raising, various technical and financial support, the accompaniment of men and boys as well as the motivation of some women and girls to participate in the implementation are all strategies used by the consortium to advance this indicator, as reported by FG and interview participants.

Indicator 3: % of women and youth who have increased the profitability of their business (net profit)

The objective for some of the activities implemented by the Mawe Tatu II programme in the intervention areas was to strengthen the entrepreneurial capacities of women and girls with a view not only to empowering them but also to open up opportunities for them to save and progress significantly in their enterprises. Currently, women and girls are undertaking activities that provide them with significant benefits, although the majority of them still face constraints related to competition, taxes and other threats of the same categories.

Table 8: % of women and young people who have increased the profitability of their business (net profit)

What is your assessment of the evolution of your company over the past 6 months? (n=635)		
Modalities	Control Area (n=105)	Programme Area (n=530)
<i>Medium improvement</i>	58,6%	66,1%
<i>Significant increase</i>	6,9%	20,1%
<i>Average decrease</i>	0,0%	2,9%
<i>Significant decrease</i>	0,0%	2,7%
<i>No improvement</i>	34,5%	8,1%
<i>Total</i>	100,0%	100,0%

It appears from the table that at this stage of the end of the Programme, 66.1% of women and girls prove that they have seen their businesses improve moderately, 20.1% prove that they have seen their businesses improve significantly against the minority (6.9%) in the areas of control.

The interpretation of this table indicates that 20.1% of women and girls interviewed testify that their businesses improved significantly against 9.1% at the start stage of the programme and 18% at the implementation stage against 6.9% in the implementation areas. This reality suggests that there are significant advances in improving the entrepreneurial activities of women and girls. Although the upward evolution curve and standard deviation is high, the difference between the mid-term percentage and that of the final evaluation is smaller. This leads us to understand that there is certainly progress, unfortunately at a lower percentage.

The testimonies of the focus group discussions indicate that the women and young entrepreneurs who participated in the programme, put into practice the different entrepreneurial strategies through the Mawe Tatu II Programme in order to make their production significantly profitable. These women and girls already know how to compete in the market, they are already learning how to make a business plan before launching their entrepreneurial activities. This gives them the opportunity to see their entrepreneurial activities improve exponentially.

However, this indicator remains an insignificant figure and this because of the various factors that block women entrepreneurs as reported by the participants in the focus groups, these include family responsibilities that include children's schooling, health care...; currency fluctuation, strong competition caused by untrained women entrepreneurs and sometimes with low turnover, etc.

After analysing this change, there is a great need to extend activities to a significant number of young people and women. It is important to continue advocacy, especially at the level of financial institutions,

so that they have access to credit to enable them to set up qualified businesses, and intensify mentoring activities for young people and women in other areas that have not been covered by the programme.

Indicator 4: % of women and youth who are aware of the formal financial services available to them

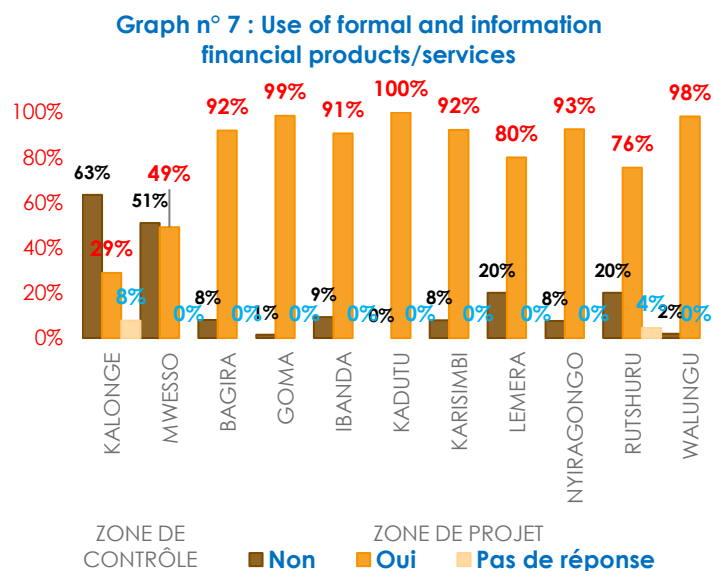
Table 10: Knowledge of formal and/or official financial services

<i>If you need money, do you know of a formal/formal financial service to focus on (n=635 women and youth)</i>			
Modalities observed	No	Yes	No response
Control Area(n=105)	57,1%	39,0%	3,8%
Kalonge	63,5%	28,8%	7,7%
Mwesso	50,9%	49,1%	0,0%
Programme Area (n=530)	11,5%	87,9%	0,6%
Bagira	2,0%	98,0%	0,0%
Goma	34,3%	65,7%	0,0%
Ibanda	1,9%	98,1%	0,0%
Kadutu	10,7%	89,3%	0,0%
Karisimbi	12,5%	87,5%	0,0%
Lemera	5,0%	95,0%	0,0%
Nyiragongo	5,0%	93,8%	1,3%
Rutshuru	20,0%	75,6%	4,4%
Walungu	11,1%	88,9%	0,0%
Total	19,1%	79,8%	1,1%

The table shows that 87.9% of women and young people are aware of the formal and/or informal financial services they can turn to in case of need for money, compared to 39.0% in the areas of control.

With regard to this table, it can be seen that at present, 87.9% of women and young people are already aware of the financial services available to them to which they can use to access credit, compared with 75% at mid-term and 74.4% at the start of the Programme in both North and South Kuvu, the data relate significantly whereas in the two provinces, in the control areas, these indicators remain below half (49.1%) in Mweso and (28.8%) in Kalonge.

Indicator 5: Number and % of women and youth actively using financial services (formal and informal) on their names



As introduced in the previous paragraphs, a large number of women, young people and some men use VSLAs rather than formal financial institutions to access credit. It should be noted that in all Programme Areas, the term VSLA has currently become popularized to all levels of communities. It should then be noted that in the majority of areas of the programme have achieved the majority of effectiveness in relation to this indicator, the results are distributed respectively as follows: 100%, 99%, 98%, 93%, 92%, ... in Kadutu, Goma, Waungu, Nyiragongo, Bagira and Karisimbi, etc. women and youth who use formal and

informal financial services. However, in the specific case of this evaluation, it is understood that since the large part of women and young people do not have effective access to banks and MFIs due to the reasons already mentioned in the previous section, these women and young people largely use VSLAs (informal financial services) in which they are members in order to avoid interest costs on bank and MFI loans and inaccessibility to credit because of strict requirements.

At this stage, 485 (91%) of women and young people use formal and/or informal financial services on their behalf, compared to 81 (87%) at mid-term and 58% at the start of the programme compared to 41 (or 39%) in the control areas. In addition to these results, some realities were shared during the focus group and key informant interviews. The most used financial services are the non-formal among which we can mention: VSLAs, MUSOs..., others in reduced numbers use formal financial services in their name.

Those who use informal financial services largely do not access formal services because "*MAWE TATU came to us, strengthened our capacities on entrepreneurship, SRH and sensitized our husbands on the commitment to positive masculinity in order to empower us*", testify all the women who participated in the focus groups. It is important, however, that in future interventions at the level of this programme to develop approaches that can bring women and young people (boys and girls) to effectively develop a mindset that enable them to take initiatives on their own to link with formal financial services.

Indicator 6: % of women and youth who requested formal financial services (successful or not)

One of the previous indicators reported on the "% of women and youth who are aware of the formal financial services available to them", at this level, 466 women and youth in the Programme area compared to 41 in the control area represent the threshold reached for this indicator; they are aware of these services although they may or may not have requested any assistance. Wanting to measure change based on data collected pre-programme and during the programme, the following indicator "% of women and youth who requested formal financial services (successful or not)" allows us to understand the level of collaboration between Programme participants and the financial institutions at their side. As already pointed out in the previous paragraphs, there is a large proportion of women and young people surveyed who are aware and many use informal financial services (91%). Out of a total of 466 women and young people covered by this indicator, 46.1% say they have never asked for any service in a formal financial

institution compared to 53.9%. Among the latter, the analyses claim that several services were at the basis of this collaboration; This is the opening of account for a large part, credit application, request for information, various transactions.

Table 13: % of women and youth who requested successful and unsuccessful formal financial services

Have you ever requested a service from at least one of these institutions (n=635 women and youth)?		
	Control areas (n=41)	Programme Areas (n=466)
No	63,4%	46,1%
Yes	36,6%	53,9%
Grand Total	100,0%	100,0%

The table shows that 53.9% of women and young people say that they have at least once addressed a formal financial institution to request a service, compared to 46.1% who have never even requested a service from a formal institution against 32.6% who have addressed at least once the request for financial services to a formal financial institution.

The results we have from the table indicate that currently thanks to the Mawe Tatu II programme, more than half (or 53.9%) of women and young people have applied for financial services in formal financial institutions and compared to 46.1% who have never even requested a service from a formal institution against 31% of women and young people at the mid-term stage. It should be noted that the indicator has advanced significantly because in North Kivu, a cooperative has testified that it receives members of VLSA set up by the Mawe Tatu II programme for financial services. Nevertheless, in future interventions CARE International and consortium members should strengthen advocacy seeking to promote access to formal financial institutions.

Indicator 7: % of women and youth who received the loan to invest in their businesses from a formal financial service and who repaid

Following the previous indicators, women and young people who responded to our questionnaire, were familiar with financial services and submitted applications in the last ones from which some were successful. Thus, this indicator seeks to know whether those whose applications have been successful have been able to repay these credits. The data are shown in the following table:

Table 15: Repayment of loans invested in enterprises to formal financial services.

Have you already repaid the said credit? (Taken for investment reasons)		
Answer	Control area	Programme Area
Not yet reimbursed	0%	17%
Yes, partially refunded	25%	37%
Yes, fully refunded	75%	45%
Grand Total	100%	100%

Here, half (45%) of women and young people who had received loans from formal financial services who were able to repay them in full, 37% repaid them partially and 17% who did not repay them. From his analyses it is understood that the credits taken are reimbursed by women and young people in whole or in parts. This reality does not reassure the sustainability of this strategy. On the other hand, it should be noted that in the control areas, the large part, i.e. 75% of women and young people who had received

loans repaid them in full, against a quarter or (25%) who repaid them partially. Thus, it is important to point out that the credibility observed among debtors in control areas is due to the fact that in these areas, credits are given on the basis of collateral. Thus, for fear of seeing its collateral be retained at the level of financial services, debtors fully repay the credits within the deadline.

The analysis of this table reflects a certain credibility of women and young entrepreneurs from the areas of the Programme because 45% are those who have finished repaying the loans, while there are still 37% who are in the process of repaying all credits but who have already repaid part of their credits, emphasize field observations. In addition, a few others who have not yet repaid are still at the beginning of the repayment term of the credit. Nevertheless, we cannot reject the inability of some women and young people who are unable to repay their loans, observations of focus groups in the areas of the Programme.

Summary of indicators on financial operations

Table 17: Summary of indicators

Summary of indicators	Programme Staff/Area	%
<i>Number of young people and women who have formal service available to them</i>	466	87,9%
<i>Number of women and youth who have ever applied for a loan at a formal financial institution</i>	284	53,9
<i>Number of women and youth who applied for a loan from a formal financial institution for investment reasons</i>	75	26,4
<i>Number of women and youth who received the loan to invest in their businesses from a formal financial service and who repaid</i>	34	45%

It appears from this table that of the 789 beneficiaries interviewed, 466 (or 59%) of women and young entrepreneurs testify that they know the services available to them. Of these women and young entrepreneurs who are familiar with the financial services available to them, 284 (60.9%) have applied for a loan from a formal financial institution. Then, of all these women and young people who have ever applied for a loan in a formal financial institution, 75 (or 26.4%) were able to apply for a loan in a formal financial institution for investment reasons. Finally, of these women and young people who were able to apply one day for a loan in a formal financial institution, 34 (45%) received loans from a formal financial service to invest in their businesses and repaid them.

III.3.2. Outcome 2: The adoption of positive masculinities by men and boys leads to the acceptance and support of women and young entrepreneurs

Outcome 2 was under the responsibility of COMEN with a trajectory of change leading to the intermediate outcome: Men and boys are aware and recognize the importance of gender equality. While ZMQ, a social enterprise, has piloted the use of digital technologies through interactive stories with the aim of adding value to offline interventions on changing attitudes and behaviour and monitoring and evaluation.

Indicator 9: Number and % of men who recognize women's right to (a) control their fertility, (b) work outside the home, (c) control their own income, (d) Make decisions about their capital and assets, (e) inherit property

Table 18: Recognition of the rights of women and girls by men and boys

Women's rights	Control Area (CC) or Programme (ZP)	No (disagree)	Yes (agree)	No response
	<i>A woman must decide when to give birth and how many children to give birth</i>	Controlled Area	82,8%	15,6%
	Programme Area	80,7%	14,5%	4,8%
<i>A woman does not need her husband's permission when she wants to work outside the home</i>	Controlled Area	89,1%	10,9%	0,0%
	Programme Area	69,7%	26,2%	4,1%
<i>A woman should have her own control over her income</i>	Controlled Area	50,0%	50,0%	0,0%
	Programme Area	60,0%	37,9%	2,1%
<i>A woman should make decisions about her capital and assets</i>	Controlled Area	45,3%	53,1%	1,6%
	Programme Area	59,3%	36,6%	4,1%
<i>A woman should be able to inherit land and property</i>	Controlled Area	12,5%	87,5%	0,0%
	Programme Area	23,4%	75,9%	0,7%

The difference in control area and programme area figures indicates in some way the effectiveness of programme interventions in bringing about change in communities.

Table 19 : Number and % of men who recognize women's rights

Women's rights	Control area	Programme Areas		
		Baseline	Midline	Endline
<i>A woman must decide when to give birth and how many children to give birth</i>	15,6%	-	13%	14,5%
<i>A woman does not need her husband's permission when she wants to work outside the home</i>	10,9%	-	21%	26,2%
<i>A woman should have her own control over her income</i>	50,0%	-	30%	37,8%
<i>A woman should make decisions about her capital and assets</i>	53,1%	-	28%	36,6%
<i>A woman should be able to inherit land and property</i>	87,5%	-	77%	75,9%

Number (#)	-	-	-	3 549
Averages (%)	(43,4)	-	(33,8%)	(38,2%)

The table shows that there have been significant advances in recognizing the rights of women and girls to control their fertility, work outside the home, control their own income, make decisions about their capital and assets, and inherit land and property. This assessment indicates that at present, 38.2% or 3549 of 10500 men (8000 men and 2500 boys) agree that women have the right to control their fertility, to work outside the home, to control their own income, to make decisions on their capital and assets as well as to inherit land and property through the Mawe Tatu II programme.

Obviously, the activities of reflection groups [BARAZA BABA BADILIKA] is taking its place and having an impact on men's behaviours or attitudes towards women's rights. Moreover, the same tendency is experienced in the areas of control by the fact that according to the observations made, some NGOs, whose names are not revealed, have had to intervene in these areas on the subject of engaging men in positive masculinity. It should be added that these interventions stated at the same period as COMEN's interventions, which indeed justify their rise in relation to the intervention areas of the Mawe Tatu II programme by the fact that the process of change requires time. These various improvements to the programme can then be attributed to the activities implemented in the context of raising awareness among men and boys to support women and girls. The gaps are still there because women's rights should be fully recognized. It should be noted that small variations will be considered significant since the obstacles to development are social norms, habits and customs.

Hence, the Mawe Tatu II consortium as well as all stakeholders should reassure themselves that local structures put in place are able to ensure continuous monitoring, continuity of advocacy activities, organization of focus groups and sharing of experience between groups of target participants aimed at the adherence of the majority of the male category to commit to positive masculinity. Approach community leaders more to maximize the chance to break the cycle of misguided habits, customs and teachings of some community leaders (customary chiefs, religious, customary chiefs and community executives in this case village chiefs, avenue chiefs and neighbourhood chiefs) to the detriment of women and girls. The strategies would be to broaden awareness on radio and television, billboards, leaflets summarizing the "Engaged Man" booklet, printing or multiplying the "Engaged Man" booklet to be distributed to all the different participants of the programme, recording small successful films to be broadcast to the whole community, etc.

According to statements by women, girls, men and boys in focus groups, norms disfavouring women and girls still exist, although they are gradually weakening. Some of the men who participated in the focus group show a well-observable change in the community. *"In my household, before I started participating in the reflection group with the men in my neighbourhood, I was really violent and more than violent because no one could do a simple thing without telling me, my wife and children regardless of gender, had to associate me and the majority of my answers were 'NO' when I did not identify in their business or decisions. My wife was not allowed to do anything, now, after following the sessions of the notebook of [the engaged man] or on [POSITIVE MASCULINITY], my wife does her business, my children are doing quite well, and I support them. Besides, sometimes when I wash my clothes because my wife is at the market, passers-by start filming me; currently I am called "Male Champion" and I participate with the*

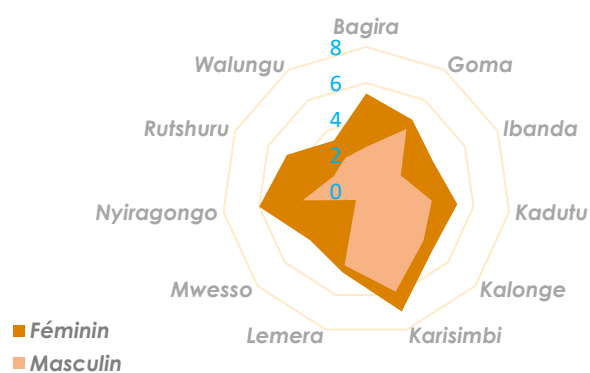
other [male champions], If we could have 100 male champions in our neighbourhood, our women and girls would be well regarded in the community" about a champion man in the Bagira Health Zone.

Indicator 10: Average total number and proportion of weekly hours spent on unpaid domestic and care work

Table 20: Average total number and proportion of weekly hours concentrated on paid domestic and care work.

Sex/ Age range	Bagira	Goma	Ibanda	Kadutu	Kalonge	Karisimbi	Lemera	Mwesso	Nyiragongo	Rutshuru	Walungu	Total
Female	5	5	4	5	5	7	5	4	6	5	6	5
13-17 years		4	3		4		9			2		4
18-25 years	5	4	5	5	5	9	4	3	5	5	3	5
26-35 years	6	4	4	4	5	6	5	5	6	6	3	5
36-49 years	5	5	3	6	5	7	4	5	7	3	3	5
50+ years	7	6		6	5	8	6	3	3	2	4	5
Masculine	2	4	2	4	4	6	4	1	4	2	2	3
13-17 years					3			1				2
18-25 years	3	3	2	3	2	7	5	2	4	1	2	3
26-35 years	2	2	2	5	4	4	4	1	0	3	2	3
36-49 years	3	7	2	4	5	7	4	1	5	2	2	3
50 years+			2	3	5	5	4	1			2	3
Total	4	5	3	5	5	7	5	3	6	5	3	4

Graphique n°8 : Average hours spend on non-remunerated domestic work



The table shows that women and girls spend more time on unpaid domestic and care work compared to men and young people according to the ratio of 3 hours for men to 5 for women. This reality is experienced in the same way in all the health zones of intervention of the Mawe Tatu II programme as in the control zones.

However, data from control areas are alarming especially in Mwesso where women spend 4 hours of time while men spend only 1 hour on unpaid domestic and care work.

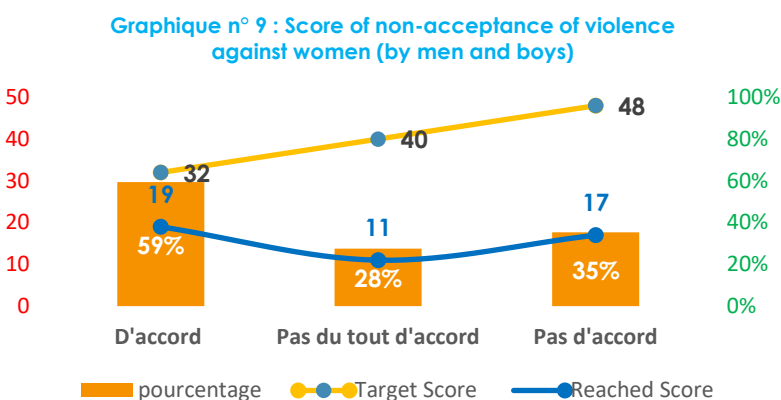
In this case, we report significant differences in some health zones with the ratio of man/female hours of 2/5 in Bagira, 1/4 in Mwesso, 2/5 in Rutshuru. It was noted that young people aged 13-17 do not spend many hours on unpaid work except in Kalonge, Kalonge, Goma, Ibanda and Rutshuru and this is mainly young girls.

This reality may also justify the progress of the entrepreneurial activities of young people compared to those of women.

Indicator 12: % of men who do not accept violence (referring to perceptions given with the GEM questionnaire by type of violence)

This indicator is calculated on the basis of the Gender Equality Men (GEM) questions according to whether men and boys agree or disagree that certain (violent) acts are really violent or not towards women and girls. To achieve this, a scale of values developed by COMEN of the programme was taken into account. The scale is three-tiered; Okay, strongly disagree or disagree. The levels are coded from 1 to 3 depending on whether the proposal goes from negative to positive. The proposals are for example (1) The most important role of the woman is to take care of her home and cook; (2) Men need sex more than women, (3) Men don't talk about sex, they just do etc .

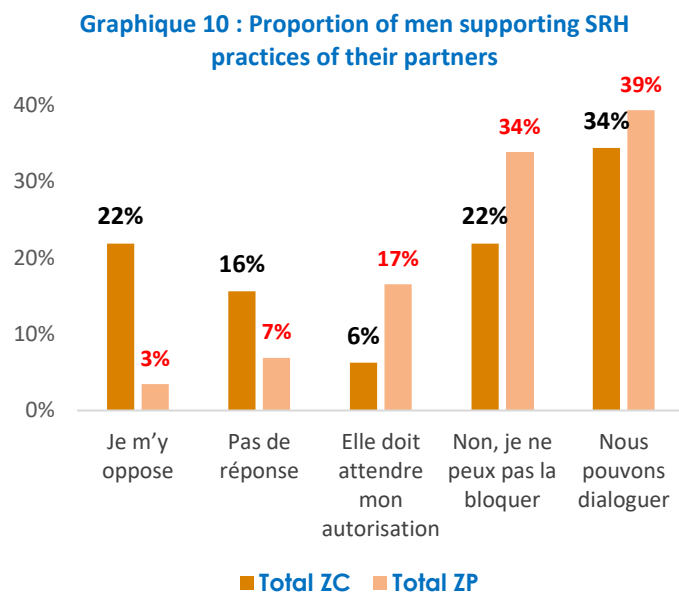
Thanks to these proposals and scales, the maximum score is defined for each modality. They are then distributed in this way, agree (the maximum is estimated at 32), strongly disagree = (the maximum is 40) and disagree = (its maximum equals 48). In practice, the score of each individual or respondent was first calculated and then the analysis of averages by modality was calculated. After analysis, the data represented led to the following results:



The graph shows that 19/32 (59%) of men and boys benefiting from the Mawe Tatu II programme do not accept violence against women and girls and 11/40 (28%) strongly disagree. On the other hand,

17/48 (or 35%) continue to support these types of violence.

III.3.3. Outcom3: Women and girls make informed decisions to achieve their reproductive intentions.

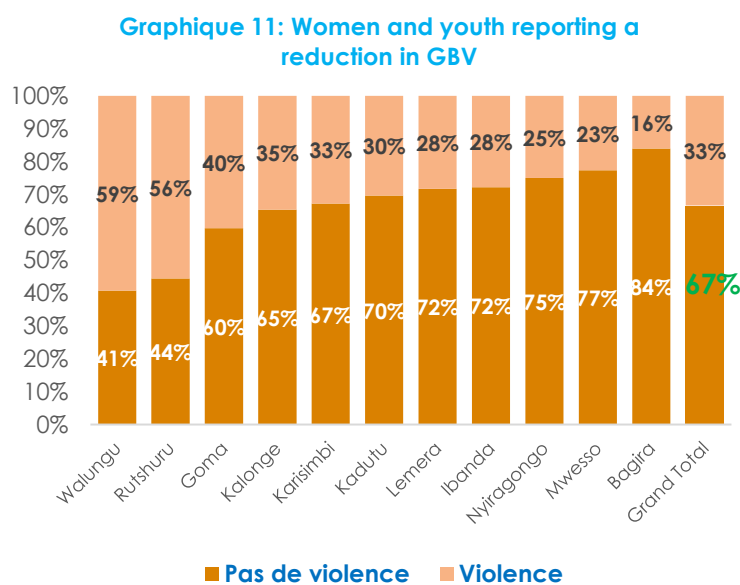


According to the results of this study as shown in this graph, 39% of men and boys who were interviewed said they would opt for dialogue before allowing their partners to use contraceptive methods. The result of the final evaluation notes that 34% of males could not block their partners if they wanted to use contraceptive methods. On the other hand, 17% are sceptical of this practice and argue that they should wait for their authorization. However, only 3% categorically oppose it.

Information from focus groups suggests acceptance of certain women's rights, including the use of contraceptive methods, but they should only involve their husbands. However, by analysing the

data of the control zones, we note that, compared to the areas accompanied by the MAWE TATU II programme, this right of women is not supported because 22% of young people and women oppose it.

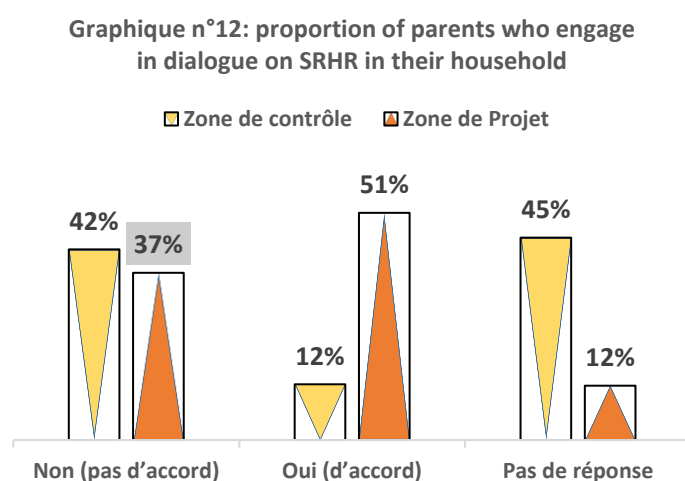
% of women & youth reporting a reduction in GBV



Data collected during household surveys, which support data from focus groups and interviews with key personnel, report that in the 12 months prior to the day of collection, 67% of our respondents have not recorded any case of violence in any form against them, compared to 33%. Reading on this same graph, certain areas seem to be the most exposed to different forms of violence. This state of affairs can be justified by various factors including insecurity in rural areas and urban banditry, clashes between armed groups, poverty, the non-schooling of children who suffer from it.

In Walungu and Rutshuru Health Zones where only (41%) and (44%) of young people and women surveyed reported that they had not experienced violence, compared to 59% and 56% who do. It is clearly established that Rutshuru comes first in relation to the exposure of women and youth to different forms of violence, this is due to the presence of active armed groups and forces.

% of parents who engage in dialogues on SRH between parents and adolescents



This graph shows that 51% of programme participants hold dialogues with their children (girls and boys) of adolescent age, speaking openly about sexual and reproductive health, compared to 37% who have never done so. Some members of the community continue to consider this subject to be taboo, a subject that cannot be shared with children, as is the case in control areas where only 12% speak this theme, compared to 42% who are not interested. This low level of interest in the area of control implies a low level of

knowledge about the sexual and reproductive health rights of young people and women in some households. It is possible to take this area in future planning.

% of women and young people participating in local decision-making (conflict resolution and other types of decision-making) and stating that they are able to influence decisions

Table 21: Participation of women and youth beneficiaries of the programme in decision-making in the community

Respondent's participation in decision-making in the community		
	Control area	Programme Area
No participation	78%	34%
Yes, but I couldn't express my opinion freely	14%	20%
Participates and expresses opinions	8%	46%
Total	100%	100%

The results of this table show that in Programme areas, 46% of women and young people can participate in decision-making and influence certain decisions. This assertion is effectively verified by certain focus group statements according to which women and young people currently compete equally for the occupation of decision-making positions within the community (neighbourhood chief, avenue leader, ...). In addition, 20% participate but cannot express their opinions. And 34% of women and young people surveyed, beneficiaries of the Programme say they have never participated. Starting from the different community resistances of women and young people to position themselves always under dependence on men. This level, although insignificant, is attributable to the various awareness-raising and empowerment

activities of women and young people on different themes as well as the advocacy carried out for their benefit at the level of the different structures and authorities.

Nevertheless, it is necessary to strengthen actions in order to integrate more women and young people into decision-making bodies.

III.3.4. Programme performance

1) Relevance

The Mawe Tatu II programme is the result of evaluations made during the implementation of Mawe Tatu I and formalised the final evaluation/baseline study of Mawe Tatu I.

In addition to the results achieved in the past, Mawe Tatu II has gone beyond with a strong focus on women's and youth entrepreneurship and the transformation of social norms that block gender equality.

Like its predecessor, Mawe Tatu II worked with women, men and youth to improve the socio-economic status of women and youth and their powers to influence decisions at the household and community levels.

This assurance allowed the acceptance of the programme in the communities (intervention areas) because the needs were real and the majority of the community was aware of this reality.

2) Coherence

The Mawe Tatu II programme took into account the local context and the guidelines of development interventions.

It is part of several Sustainable Development Goals: (1) Eradication of poverty, (2) fight against hunger and food, (3) Access to health, (5) Gender equality, (7) access to decent jobs, (10) reduction of inequalities, (12) Responsible consumption (16) promotion of peace and (17) partnerships.

Added to this is the alignment of the programme with national, provincial and local development policies.

It should be noted that all organizations in the consortium under the programme have also aligned themselves with the principles and policies of the donor EKN and subsequently with those of CARE, the lead consortium in an equitable partnership.

3) Community Involvement

Participants in the Mawe Tatu II programme were composed of people from intervention health zones in consideration of the following social groups: women, men and youth (girls and boys) without any form of tribal, ethnic, racial, religious, sexual discrimination or some physical, mental, moral and social disability.

Women and youth were organized in VSLAs through which the activities of the Mawe Tatu II programme among others entrepreneurship and financial support to businesses of women and youth (girls and boys) to ensure their autonomy and access to decision-making in the household and within the community.

Men and boys were organized into focus groups on engaging positive masculinity for preventing inequalities and addressing different forms of GBV.

Women, youth and men were organized in spaces of dialogue for the promotion of sexual and reproductive health rights.

The communities were organized into advisory committees for project evaluation meetings thus promoting the sharing of suggestions/feedback and complaints.

Local political and administrative authorities and divisions formed an advisory committee and actively supported the design and implementation of the Mawe Tatu II programme.

4) Effectiveness

The various reports of the project indicate that the target has been reached. The data collected in the community effectively informs about the organization of women and young people in VSLAs, men's commitment to positive masculinity, and facilitating access to information on sexual and reproductive health.

5) Efficiency

This evaluation did not provide an in-depth analysis of the efficiency of the Mawe Tatu II programme due to the fact that the final evaluation team did not access the programme's financial information. It was noted by CARE International that a parallel audit evaluation will be done by another organization to inform this part and determine at what level the programme has been efficient.

However, the team at its level is seeking to collect some community testimonials and consortium collaborating members who inform the elements that go with the efficiency of the programme.

The results indicate that the programme was efficient in that the activity schedule was followed by the CARE team and adhered to with great rigour. Working with organizations that have qualified staff in the various areas of the programme has maximized costs that would require the enormous resources to be effective.

6) Learning and accountability

The programme ensured honest feedback, being open to discuss critical issues and engaged to effectively manage misunderstandings if there are any.

In the Mawe Tatu II programme, workshops with the advisory committees and visits to the participants by the steering committee were organized, where all the points to improve were discussed and the documented suggestions to be shared in the management meeting.

The programme set up and installed suggestion boxes in the community, it also shared a toll-free phone number and email address to allow the collection of suggestions, complaints and information from the community. The planning of activities, the realization of activities, the sharing of achievements and the development of suggestions and recommendations for future meetings and meetings were done jointly.

7) Impact

The Mawe Tatu II Programme has had a significant positive impact on the socio-economic life of the target groups in the intervention area.

Combined efforts have yielded significant results ranging from on-the-job training in VSLAs, training on equality to behavioural change in families and participation in decision-making bodies.

Within the communities, there are replications of the achievements of the programme, men and boys who have not participated in COMEN activities begin to adopt a gender-friendly behaviour, groups of VSLA+ multiply following the model of Mawe Tatu II.

Local commitments are observed to ensure the sustainability of these achievements.

8) Sustainability

To ensure the sustainability (ownership) of the results of the programme after closure, the Mawe Tatu II programme has carried out an arsenal of activities.

Through meetings with VSLA managers, representatives of programme participants, concerted action plans were defined with the communities.

The steering committee visited all health zones to discuss with target groups how the programme's achievements will be sustained.

Resources have been made available to the steering committee to monitor some actions in health zones.

The accountability of the programme was at the centre of the action from the beginning to the end of the Mawe Tatu II programme, which reassures the sustainability of the actions.

Participants and consortium members (local NGOs) indicated that despite the end of the programme, they will continue to:

- (a) Provide advice to the VSLANs to effectively accompany VSLAs
- (b) Supporting young and women entrepreneurs in need of support
- (c) Support reflection groups that have decided to continue to meet through local initiatives

Comparative analysis of results in Programme and Control Areas

The entrepreneurship of women and young people (girls and boys) in the areas of the programme is successful because they have succeeded in developing businesses in the communities. This evaluation shows that women and young people who are grouped in VSLAs, who have benefited from entrepreneurship trainings and much more those whose husbands or brothers have been trained on positive masculinity easily control their resources to invest in their businesses.

The entrepreneurship training provided to women and young people has enabled them to acquire the knowledge, skills and spirit necessary to develop businesses such as processing, livestock and handicrafts.

Thanks to this, women and young people have been able to access spaces and channels to sell their products and services by becoming able to make business plans before entering the market. This has given them a personality that gives women and young people (girls and boys) a space to express ideas in the community and within the family.

A comparison of the data collected in the programme and control areas shows that in the control areas, some women (5% compared with 14% in the programme area) share their entrepreneurial aspirations with their husbands or parents. Profitability in the control areas was 6.9% compared to 20.1%.

In terms of positive masculinity, obviously, men and boys have adopted positive masculinity and feel proud to confirm that before, they were ignorant unlike the control areas which lack basic knowledge of positive masculinity.

In relation to sexual and reproductive health (SRH) in both intervention and control areas, men who agree that women can use contraceptive methods believe that couples should go through a dialogue to decide what type of contraceptive methods to use, which is ample evidence that the woman already has a space to express their contraceptive decisions.

On the other hand, in the control zones, dialogues on sexual and reproductive health between parents and young people (girls and boys) do not actually take place. Only 12% do so compared to 51% in control areas.

III.3.5. Lessons learned in programme implementation.

- A security risk analysis involving all stakeholders in the project must be carried out during the design process in order to allow the members of the Consortium to be able to define together the strategies and means to be implemented by each partner in terms of safety and security, for example in the event or period of evacuation of staff, case of Rutshuru.

- According to the guidelines of the heads of MFIs / banks it is important that the members of VSLAs and / or entrepreneurs form networks (RAVEC) to apply for solidarity credits.

- Sexual and reproductive health information and the use of modern contraceptive methods are negatively influenced by discriminatory social norms of women and girls. In addition to supplying structures with SRHR inputs, it is more important to have several dialogues between young people, between young people and parents and between young people and health professionals.

- Particular emphasis should be placed on the importance of an approach that consists of working simultaneously with couples, i.e. man and woman by organizing discussions (men and women) in order to exchange on all issues related to GBV and SRH, decision-making on sexual intercourse, the use of modern contraceptive methods decision-making on the management of financial and material resources within the household, the participation of women and girls in all decision-making bodies...), it can help to overcome the resistance that some women face when they want to use modern contraceptive methods and make informed decisions to achieve their reproductive intentions.
- An economic justice programme (support for entrepreneurs) should invest in supporting the obtaining of legal documents delivered by the Single Window for Business Creation (guichet unique de création des entreprises) and enabling it to compete in competitive markets.
- Programmes that implement activities to support entrepreneurs will have to acquire the content of the law on entrepreneurship in the Democratic Republic of Congo, including **Ordinance-Law No. 22/030 of 08/09/2022** on the promotion of entrepreneurship and start-ups in order to know who classifies the types of companies of less than 10.00 USD and less than 5 employees in VSEs (very small enterprises). This harmonizes the language for each type of entrepreneur that can be supported.

Conclusion and suggestions

A. Conclusion

The results of the final evaluation of the Mawe Tatu II programme show considerable successes. In all project areas, the majority of women, young people and men are aware of gender equality, entrepreneurship of women and young people, the importance of the participation of women and girls in local decision-making bodies and in the family, the link between the reproductive role and the productive role. Considerable changes are visible and witnessed in communities for the majority of the programme's theory of change trajectories.

This was made possible by the flagship activities of the programme including the organisation of women and young people in VSLAs, on-the-job and advanced training in entrepreneurship and other cross-cutting themes, support for the business plans of some entrepreneurs, the Boys' and men's reflection groups on positive masculinity, dialogues/discussions on social norms prioritized at the beginning of the programme, and the provision of reproductive health services in health centres.

ADJ, through village agents and field agents organized women and young people in VSLAs, identified participants in former VSLAs and train on the practical modalities of the functioning of a VSLA, savings and credits, training on cross-cutting themes including entrepreneurship, women's leadership, conflict management, Family planning, gender, equity and diversity, climate change and social norms.

GEL accompanies women and young people in on-the-job training in basic entrepreneurship and select women and young people participating in advanced entrepreneurship training, identify women and young

people who have started businesses to support them individually through trained multipliers and coach trainers.

The open collaboration between ADJ and GEL for work in VSLAs has enabled women to improve their socio-economic status and influence decisions affecting their households and communities.

The work of ADJ and GEL was supported by the activities of COMEN which organized men and boys in reflection groups on positive masculinity (equality, gender, equity and diversity, division of labour in the household, socialization, common vision for the household, management of family resources, etc.) and discussions on the social norms identified in the implementation of the programme. This adoption of positive masculinities by men and boys has effectively led to increased acceptance and support from women and young entrepreneurs.

CARE, in addition to coordinating the activities of the consortium, was in charge of activities related to sexual and reproductive health in health areas. They also organized together with ADJ and COMEN community dialogues on issues related to sexual and reproductive health and social norms around reproduction and entrepreneurship. Significant changes have been observed within the community.

Women and men demonstrate men's and boys' support for entrepreneurship and confirm their participation in decisions within households and somewhat in the community.

The programme has been positive with regard to the equitable partnership. The collaboration between the staff of CARE NEDERLAND (white and lead) and CARE DRC (consortium management) and the other members of the consortium (mainly local NGOs) was very good, no frustration, mutual sharing of capacities, preparation, implementation, monitoring and evaluation of actions together. Good collaboration between local actors was observed (example) ADJ and GEL all worked in VSLAs, there was no overlap of activities, it was coordinated and complementary.

In several circumstances, all consortium members shared the risks and challenges related to the implementation of the activities to find together the appropriate solutions. Each played its role independently and, where appropriate, in collaboration with all the other actors of the consortium to achieve the objectives of the programme.

Although it is a consortium, the administrative and financial procedures were not imposed, each of the organizations remained independent. The clauses of the signed contracts have been agreed and respected. The deliverables were well agreed upon in advance.

Local organizations feel that they have received several trainings/capacity sharing that has enabled them to achieve results and improve their knowledge. The financial investment enabled them to achieve the programme's outcomes. Knowledge in terms of professional/technical experience was one of the keys to success.

In short, the Mawe Tatu II partnership was a learning experience, a sharing of capacities that helped all members to become competitive in the research market for funding.

B. Recommendations and suggestions

a) To the members of the consortium

- ✓ A programme aimed at transforming social norms like the Mawe Tatu II programme will have to put more investment in media awareness to ensure that more participants are reached and thus create debates around the social norms that build gender inequalities.
- ✓ The literacy strategy for women and girls grouped in VSLAs must focus primarily on numeracy and writing to enable women and young people to know how activities are carried out during the VSLA cycle process (sharing of costs and calculation of interest), because some VSLA members who do not know how to calculate and read well are victims of extortion by other, literate, members.
- ✓ To facilitate access to credit, the programme should encourage VSLA members to VSLA networks so that they receive solidarity credits, the only means declared by MFI managers to grant credit to entrepreneurs.
- ✓ In collaboration with local authorities, consortium members and programme participants, discuss the criteria for selecting contractors for the business plan competition and communicate them to the various programme participants above all, reassure respect for the principle of accountability and community participation and avoid suspicion within the project target
- ✓ To empower women and youth and community and political support in making informed SRH decisions, advocacy and lobbying should be done at the levels (national, provincial and local) and with relevant sectoral ministries, the Ministry of Gender, Public Health, youth and EPST and at the provincial level with the involvement of all provincial stakeholders and at the local level with the direct involvement of community leaders, traditional authorities and religious leaders who are among the main guardians of norms against sexual and reproductive health

b) To the Congolese State

- ✓ Vulgarize the new law on entrepreneurship in the Democratic Republic of Congo including Ordinance-Law No. 22/030 of 08/09/2022 on the promotion of entrepreneurship and start-ups;
- ✓ Secure the different areas in order to allow humanitarian actors to intervene well and access all target groups;
- ✓ Include in the course of Civic, Moral and Gender Education at the primary and secondary school level in order to introduce young boys and girls from an early age to respect the principles of gender promotion

- ✓ The Ministry of Education should include the introduction to entrepreneurship at the secondary school level in the secondary and technical education curriculum in order to prepare our youth and in turn boost the development of Congolese society;
- ✓ The Ministry of Youth Entrepreneurship (girls and boys) by providing them with a business environment exempting them from certain taxes for a certain number of years at the start and facilitating their access to microcredits.