**Mid-Term Review of World Vision Solomon Islands  
Gender Programming:**

* **Community Channels of Hope (for Gender)**
* **Gender Equality Project**

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**Date:** *v2, 6 June 2021*

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1. **Acknowledgement**

The collection of data and this resulting report would not have been possible without the generous contribution of time and insight from the people of the Solomon Islands. We would like to thank all community members, chiefs, and other duty bearers for their participation in this review.

Many thanks to the World Vision staff who collected data; and thank you to those who provided valuable feedback on the draft versions of this report.

Elise James, Programme Quality Consultant

1. **Affirmation**

Except as acknowledged by references in this paper to other authors and publications, the report described herein consists of original work, undertaken in collaboration between World Vision Solomon Islands (WVSI) and Elise James. It is undertaken to guide future activities, describe and advance learning, and determine the current situation for WVSI’s programming. Primary data collected throughout the process remains the property of the participants themselves, which WVSI as an entity retains on their behalf.

1. **Glossary**

| **Acronym** | **Definition** |
| --- | --- |
| ANCP | Australian NGO Cooperation Program |
| CCC | Christian Care Centre |
| CCOH | Community Channels of Hope |
| CHAT | Community Hope Action Team |
| COHG | Channels of Hope for Gender |
| DFAT | Department of Foreign Affairs and Trade (Australia) |
| FPA | Family Protection Act (2014) – came into effect 1 April 2016 |
| FSC | Family Support Centre |
| GBV | Gender-Based Violence |
| GEP | Gender Equality Project |
| MWYCFA | Ministry of Women, Youth, Children, and Family Affairs |
| NGO | Non-Government Organisation |
| RSIPF | Royal Solomon Islands Police Force |
| SIPPA | Solomon Islands Planned Parenthood Association |
| VAW | Violence Against Women |
| WVA | World Vision Australia |
| WVSI | World Vision Solomon Islands |

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# **Executive Summary**

World Vision Solomon Islands (WVSI) operates a number of projects under its gender sector portfolio. Two of these are Community Channels of Hope (CCOH), and the Gender Equality Project (GEP). Each project operates in two different locations, covering four of WVSI’s area programs, using the Channels of Hope for Gender (COHG) methodology with some contextual adaptation and additions. The purpose of this review is to assess the period of implementation for both CCOH and GEP, from 1 July 2018 to 31 December 2020. The mid-term review aims to assess the continued relevance of the two projects, and the progress made towards achieving their planned objectives. The review is expected to provide an opportunity to make modifications to ensure the achievement of these objectives within the lifetime of the projects. The review is utilisation-focused, with WVSI as the primary audience.

The mid-term review focused on those groups that the two projects have interacted with the most: active/involved community members, youth, CHAT groups and faith leaders, and in-country project partners. Given the resources available for the reviews, the status of activity implementation, and the need for this to provide informed perspectives for WVSI’s implementation as a priority (rather than percentage tracking against indicators, with explanations for underachievement), a qualitative approach to data collection was chosen. To this end, 53 focus group discussions and 9 key informant interviews were conducted, with community/faith leaders and Community Hope Action Teams (CHATs), active/engaged community members, and youth, as well as stakeholders including the Royal Solomon Islands Police Force (RSIPF), care centres and refuges, other non-government organisation stakeholders and government partners.

Key findings from **Community Channels of Hope** include:

* There is an increased knowledge and awareness of gender issues and gender-based violence in CCOH communities;
* There are mixed perceptions of behaviour change in communities;
* The project has resulted in improved relationships within the community, particularly with youth (community cohesion);
* People with disability were singled out for *not* benefitting/being impacted by the project. Despite the fact that there is no clear line of implementation in the program design that is specific for disability, CCOH will ensure it share the data with authorities concern for future references and development. WVSI COH staff ensure that good community practices of helping people with disability are maintained even the project come to an end.
* While some communities and community members do believe that CCOH is addressing a gap, community priorities tend more towards tangible support towards community plan of actions, including sanitation and water projects as their most pressing needs;
* The project is strong in its partnership with churches in communities, and in promoting community cohesion, while being known for its training and awareness raising;
* The project is supported by its management and works to see improvement in: organisation and planning, time management, and financial management, from the perspective of communities. With World Vision’s system in place the communities’ needs to work in collaboration with the team to ensure clear dissemination of information reaches the community in regards to implementation and preparation.
* A faith-based approach is appropriate and welcomed by communities – but a *kastom* approach could be, too;
* Referral mechanisms are generally known, but difficult to access and use. Community members want these services strengthened, not just to know about them. Referral agencies themselves agree with this;
* There is anecdotal evidence for decreased violence in some households and groups, from the perspectives of men. WVSI’s Conflict Resolution training has also been an effective tool in helping people manage their anger.
* However, some female focus groups and female respondents in mixed focus groups appear to hold responsibility for incidents of violence committed by men. There is a sense of women taking responsibility not to “anger” men, through committing to “stay silent,” and a fear of the consequences to them of their partner going to jail for committing violence; and,
* There are mixed responses to whether communities can access World Vision’s resources to do things themselves. Community members identify issues with the literacy levels and level of English required to make use of World Vision’s tools.

Key findings from **Gender Equality Project** include:

* The project has resulted in somewhat increased knowledge and awareness of gender issues and gender-based violence: but a lot more is needed in terms of information
* Respondents are aware of the Family Protection Act (FPA) and other potential mechanisms available to them; however, fear is associated with some services (i.e. police);
* Communities in South Malaita have observed improved gender relations between men and women; but specific trainings to improve gender relations must be prioritized in Honiara;
* Despite being a specific target group of GEP, there is priority areas in which youths can be able to participate in the project;
* Community priorities tend more towards tangible sanitation and water projects as being their key gap, and believe this to be more important than trainings and awareness;
* World Vision’s partnerships with service providers has been touted as both a strength, and a weakness;

As with CCOH, GEP needs support in its management: organisation and planning, time management, and financial management, from the perspective of communities. World Vision need to work in collaboration with the communities to disseminate information.

* Referral mechanisms are being utilised, and communities mention them often: however, many cases are being resolved at the community and (faith) committee level, as well as with chiefs;
* Men perceive that there is still lot more room for improvements in terms of reducing violence in some households. However, this tends to look more like denying the existence of *any* violence;
* However, although women are yet to experience decreases in violence. There needs improvement in the harmful coping mechanisms that are likely causing further trauma;
* The effectiveness of WVSI’s Conflict Resolution training as a tool in helping people manage their anger is somewhat mixed;
* There are mixed responses to whether communities can access World Vision’s resources to do things themselves. Some felt very comfortable with the local office and staff – particularly Afio in South Malaita – as well as clear collaboration with staff in Honiara
* Communities want to see more participatory work with youth, better planning and coordination, and more support to women.

By and large, World Vision’s gender-based violence programming has successfully raised awareness of gender-based violence in communities of implementation. **Communities value this increase in knowledge and awareness, and largely credit that to World Vision’s work.** Respondents to this mid-term review also valued an increase in community cohesion, and strengthened relationships between different groups in communities, particularly youth.

However, the mid-term review has raised improvements around the quality of content being implemented in communities. Partnerships with external service providers is an area that also appears under-utilised. Communities see there is still areas of improvement with World Vision’s capacity in project management, and both projects could be strengthened through investing in staff capacity to implement, and a greater targeting of interventions to maximise impact.

Recommendations arising from this review for the gender programme portfolio as a whole are:

* Assess and re-scope the projects. Make decisions on whether COHG is the right model for the Solomon Islands;
* There needs an ongoing refresher training for staff on COHG once the methodology is to continue to be used;
  + Alternative recommendation/in tandem: explore/develop a uniquely Solomon Islands approach to weaving *kastom* and faith for addressing gender-based violence;
* Identify potential mentor/peer support partnerships across WVSI for the GEP and CCOH project team leads/managers, to provide ongoing assistance with project management, time management, financial management and communications;
* Decide on the extent to which youth will be a focus of the projects – and how this can best be achieved (i.e. through drama and sports, rather than IMPACT+ clubs);
* Seek support for mainstreaming disability inclusion, including practical strategies for how implementing staff could do this on top of regular work (if possible), and develop associated tools (if required);
* Map out, formalise, and focus on how World Vision can strengthen services, and be a bridge between communities and services; and,
* Following the re-scope and identification of when staff facilitator training can realistically be completed (given COVID-19 pandemic restrictions), create a detailed implementation plan for the remaining 1-2 years of both projects, with realistic targets and a map to get there. Adjust the logframe, Indicator Tracking Table and other monitoring tools as required. Spend time workshopping these with implementing staff to ensure everyone feels confident to carry it out, and that suggestions for changes are taken into account.

# **Introduction**

## Background, Purpose and Scope

World Vision Solomon Islands (WVSI) operates a number of projects under its gender sector portfolio. Two of these are Community Channels of Hope (CCOH), and the Gender Equality Project (GEP). Each project operates in two different locations, covering four of WVSI’s area programs, using the Channels of Hope for Gender (COHG) methodology with some contextual adaptation and additions.

CCOH Phase III is a four-year programme funded by the Australian Government, under the Pacific Women Shaping Pacific Development (Pacific Women) program. The CCOH project is in its third cycle, after originally commencing in 2014. CCOH Phase III is being implemented in Temotu and Weathercoast (Guadalcanal).

The programme employs the World Vision COHG methodology to promote gender equality and non-violence, drawing upon Christian teachings and people’s faith to influence understanding and behaviour. It engages communities in faith-based dialogue that challenge and change traditionally held norms and knowledge that undermine human rights, non-violence and equality.

This phase of the CCOH programme builds on the achievements of the investment to date and draws heavily upon the original CCOH Theory of Change, recognising the need to maintain the integrity of the COHG methodology whilst making only minor adjustments to implementation.

The project goal and outcomes are listed below:

**Goal:** Reduced violence against women in target communities

**Outcome 1**: Target communities and churches demonstrate more respectful behaviours that value men, women, boys and girls.

**Outcome 2**: Survivors of violence against women (VAW) have improved community support and improved access to government and non-government support services.

**Outcome 3:** Target communities better address substance abuse or other triggers for VAW.

The project has been designed to add new communities each year, creating a rolling baseline approach. The most recent baseline update occurred in June of 2020.

WVSI’s GEP is a five-year project that will assist communities in Honiara and South Malaita to address gender-based violence (GBV) by targeting the root causes of gender inequality. The project aims to reach 4,167 people with positive gender messaging by 2023. The project is funded by the Australian Government through ANCP, with World Vision Australia (WVA).

The project continues implementation of World Vision’s COHG model, which works through community faith networks and leaders to promote gender equality and address GBV. COHG explores power relationships leading to GBV, while supporting activities led by communities and service providers.

The project supports Community Hope Action Teams (CHATs) and local churches to conduct awareness raising activities in project and neighbouring communities and refer GBV survivors to support services. Relationships with provincial assemblies and Women’s Desk Officers of the Ministry of Women, Youth, Children and Family Affairs (MWYCFA) strengthen communities’ connection with government to address GBV. Trainers from MWYCFA will inform project communities of gender-related national policies.

The goal and outcomes of the GEP are listed below:

**Goal:** Women, men, boys and girls with or without disabilities in Honiara and Malaita are protected and treated equitably by 2023.

**Outcome 1:** Parents and caregivers raise their children without violence.

**Outcome 2:** Male and female youth treat each other with respect and do not use violence.

**Outcome 3**: Key leaders demonstrate positive cultural norms toward women and children.

The purpose of this review is to assess the period of implementation for both CCOH and GEP, from 1 July 2018 to 31 December 2020. The mid-term review aims to assess the continued relevance of the two projects, and the progress made towards achieving their planned objectives. The review is expected to provide an opportunity to make modifications to ensure the achievement of these objectives within the lifetime of the projects. The review is utilisation-focused, with WVSI as the primary audience. The original terms of reference for the review are included in Annex 1.

## Review Approach & Methodology

CCOH is being implemented in Temotu and Weathercoast. GEP is being implemented in South Malaita and Honiara. These four locations present very different contexts, strengths, challenges and opportunities. While CCOH and GEP follow similar methodologies, the two project designs also have some differences.

The mid-term review focused on those groups that the two projects have interacted with the most: active/involved community members, youth, CHAT groups and faith leaders, and in-country project partners. Given the resources available for the reviews, the status of activity implementation, and the need for this to provide informed perspectives for WVSI’s implementation as a priority (rather than percentage tracking against indicators, with explanations for underachievement), a qualitative approach to data collection was chosen.

To this end, **53 focus group discussions** and **9 key informant interviews** were conducted:

* 17 focus group discussions with faith leaders/CHATs (11 mixed groups, 3 male, 3 female)
* 18 focus group discussions with community members (4 mixed, 7 male, 7 female)
* 18 focus group discussions with youth (6 mixed, 6 male, 6 female)
* 4 interviews with the Royal Solomon Islands Police Force (RSIPF), one in each province
* 2 interviews with Family Support Centre (FSC)
* 1 interview with the Christian Care Centre (CCC)
* 1 interview with the Ministry of Women, Youth, Children and Family Affairs (MWYCFA)
* 1 interview with the Solomon Islands Planned Parenthood Association (SIPPA)

In total, GEP reached 197 people in focus group discussions (see section 1.3 for breakdown), and CCOH achieved 223 people in focus group discussions. Each focus group took on average 2-3 hours; indicating a total collection of data from 420 people across approximately 106 hours.

This review aimed to:

* assess the **impact** that CCOH and GEP have had on individuals, families and communities as contributors to reduction in violence;
* assess the extent to which CCOH and GEP are **relevant** and responsive to the needs of communities as a tool for reducing violence – and in particular, the underlying use of faith;
* assess the **effectiveness** of CCOH and GEP, in particular the usefulness of trained community leaders;
* assess the **sustainability** of CCOH and GEP;
* present **lessons learned** from the different groups, as well as WVSI staff; and,
* Present **recommendations** to strengthen all aspects of the projects, moving forward.

The mid-term review plan made against the terms of reference, and in consideration to the above, is included in Annex 2. The quality of the review was assessed against the Bond Evidence Principles Tool: see Annex 3.

## Sampling Strategy

Communities were selected randomly by WVSI staff members. For CCOH, this included four communities in Temotu, and four communities in Weathercoast. For GEP, this included three communities in South Malaita, and three in Honiara. A total of 14 communities across four provinces were sampled for this review; CCOH currently works with 20 communities, and GEP currently works with 10.

Within communities, volunteer sampling was employed, selecting community members who were willing to participate in focus group discussions. Staff were asked to aim for between 5-8 participants in each focus group. Table 1 shows the breakdown of focus group discussion participants across projects and provinces.

**Breakdown of focus group discussion participants across projects and provinces**

| **Focus Group Discussion Participants** | **Community Channels of Hope Temotu** | **Community Channels of Hope Weathercoast** |
| --- | --- | --- |
| Leaders/CHATs – male | 27 | 22 |
| Leaders/CHAT - female | 16 | 9 |
| Community members – male | 24 | 6 |
| Community members – female | 50 | 9 |
| Youth – male | 36 | 4 |
| Youth – female | 16 | 4 |
| *FGD size range and average* | *Range: 3 to 18* | *Unknown – community-by-community data not provided* |

*Table 1: Focus group discussion participants*

**Breakdown of focus group discussion participants across projects and provinces**

| **Focus Group Discussion Participants** | **Gender Equality Project South Malaita** | **Gender Equality Project Honiara** |
| --- | --- | --- |
| Leaders/CHATs – male | 15 | 2 |
| Leaders/CHAT - female | 17 | 10 |
| Community members – male | 26 | 7 |
| Community members – female | 31 | 13 |
| Youth – male | 29 | 11 |
| Youth – female | 24 | 12 |
| *FGD size range and average* | *Range: 3 to 12* | *Range 1 to 8* |

*Table 2: Focus group discussion participants*

## Data Processing & Analysis

The qualitative data was initially checked by WVSI Programme Quality staff before being provided on an as-received basis to the consultant. The first batch of data was received on 27 April, with the last focus group discussion notes being received on 17 May.

The consultant mapped responses (which were recorded in a mix of Excel and Word) back to the original questions and compiled them in a transcript book: see Annex 4. The consultant completed manual thematic coding of the data to extract key themes.

A deductive approach to data analysis was used, to test the existing theory of change. The consultant developed a coding framework from a broad set of themes, and after an initial review of the collected data, identified more detailed codes to come under this. This was then sent to WVSI for verification and review. The coding framework is included in Annex 5 for reference.

A latent approach to data analysis was also applied, as in becoming more familiar with the data, some interpretation and reading of the sub-text of responses was required in order to sort the data into its most appropriate theme. Therefore, as in all qualitative research, the consultant’s interpretations have emerged in the context of her own experiences, including several years living in the Solomon Islands and 10 years’ working in programme quality and gender programming in broader Melanesia.

## Ethical Considerations

Staff carrying out the review were responsible for ensuring that participants were fully informed of its purpose, how the information they provided will be used, and their rights regarding information they provided. Every FGD and KII led with an opening paragraph, informing participants of this, and that they may end their engagement at any time. Staff were asked to ensure that FGD and KII participants had the opportunity to explicitly consent to taking part, by signing an attendance record that included a consent form. The tools used for this review are included in Annex 6.

The review collected data related to gender-based violence. Therefore, the review was designed with the World Health Organisation’s “Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence Against Women” guidelines in mind. The following actions were adhered to throughout the course of the review:

* The safety of the participants and the research team is paramount, and guided all project and review decisions.
* As the review is seeking to help establish current prevalence of violence, and the tendency is for participants to under-report their experiences, all tools were designed adhering to current research experience about how to minimise under-reporting. Loaded terms (“abuse,” “rape,” “violence”) were avoided. The review planned for only female staff to ask women about experience of violence (e.g. in focus groups), and ideally female staff that were more relatable (e.g. when discussing marital violence, female staff who are older and married themselves, rather than young, single women). However, in practice, when some staff became sick while in the field, note-taking was done by males (and females for male groups). This may have impacted on responses.
* Confidentiality is being protected. Names were not recorded, and staff received refresher training on the importance of maintaining confidentiality. Information presented in the report is sufficiently aggregated so that no one individual person can be identified. Only community names and KII categories (e.g. “RSIPF” – not the name of the police officers interviewed) are identified in the qualitative data book (Annex 4).
* The research team were specially selected by WVSI management and programme quality staff. The research team were made aware of how they can access support, including counselling, if required.
* Staff were advised to refer participants requesting assistance to available local services (e.g. police, calling 999) and sources of support.

## Limitations

The lead consultant for this review is not located in the Solomon Islands, and designed and supported this review remotely. This reduced opportunity for knowledge transfer between staff and the consultant, as there were only occasional interactions via Skype calls before and after the review. While the lead consultant has visited two of the four provinces covered under this review, she has never been to Temotu or Weathercoast; each area of the Solomon Islands presents uniquely different contexts and challenges, and this lack of geographical experience may have lead to misinterpretations of the data. This is being mitigated through a thorough review of the report by WVSI staff, and a management response to the review, which can provide opportunities for clarity: see Annex 7.

The tools were designed in English. WVSI staff stated that translation before going out into the field was unnecessary; however, in communities, questions were asked in Solomon Islands Pidgin, translated on the spot. Pidgin is often the second, third, or fourth language spoken by communities and staff; there are chances that some questions were misunderstood or lost in the translation process. There was an attempt to mitigate this before data collection teams deployed to the islands, by spending several hours going through the tools question by question. Again, however, the lead consultant was remotely based, and so less able to read reactions and determine whether there was a common understanding present.

Other general limitations of the review included:

* Selection of respondents. Communities and individual participants were chosen by WVSI staff, which may have resulted in a bias towards those who were already known to have been positively impacted by project interventions, or communities where the intervention had been generally welcomed.
* Lack of generalisation. A qualitative approach was specifically chosen to increase potential utilisation of the review, seeking to gather an understanding of reasons and motivations, asking “why”, “how” and “what”. The sample consists of a smaller number of non-representative cases, when compared to quantitative review methods. This review cannot be statistically generalised across the wider population in the four provinces, which is a limitation; however, it was felt that this was worth sacrificing, to gain a deeper understanding of trends in opinion to inform implementation going forward.
* Transcriptions. Due to the volume of qualitative data being gathered, and limitations in both staff and consultant time, it was decided to summarise responses during interviews and provide those as notes, rather than record, transcribe, and translate more than 100 hours of interviews and discussions. This does compromise somewhat the quality of the qualitative data, without being able to capture direct quotes.
* Challenges in the urban context. Honiara is unique, in that it is by far the largest “city” in the Solomon Islands, with a population of an estimated 92,000 people (the next closest town in size, Auki, has approximately 7,900 people).[[1]](#footnote-2) Urban programming and engagement is vastly different to rural programming and engagement. The entire province of Temotu, which had the greatest number of FGD participants in this review, has a total population of around 25,000, less than just Honiara. Temotu is considered the most remote of Solomon Islands’ provinces, with just fortnightly ships, and twice-weekly scheduled flights that are frequently cancelled; and yet, their participation shows great improvements and effective engagement. Although it might be challenging to work in the Urban setting yet limitations are considered and can be improved.

# **Findings & Analysis: Community Channels of Hope**

## Impact

* Assess the **impact** that CCOH has had on individuals, families and communities as contributors to a reduction in violence.
  + What types of changes do participants in the project attribute to World Vision’s programming?
  + To what extent do participants in the project report knowledge and behaviour change? And what evidence is there to support this?
  + What impact is CCOH having on marginalised groups in the community (e.g. people with disabilities)? How could this be improved?

Through World Vision, we have increased  
our knowledge in areas we don’t know in the past. Especially in the areas around gender-based  
violence, or violence.

*Leaders & CHATs focus group discussion, Temotu*

* **Increased knowledge and awareness of gender issues and gender-based violence.**

The CCOH has changed the community’s way of thinking. The CCOH make our youth change,   
and started working together… There has been a reduction in and improvement of violence in the  
family and community.

*Community members focus group discussion, Weathercoast*

There was general consensus amongst leaders, CHATs, community members and youth that there has been an increase in knowledge and awareness of gender issues and gender-based violence in the communities, or within their sub-group in particular. This ranged from community members saying they now had lots of awareness and needed something else (i.e. services), to people conceding there was a “little bit” of awareness, but that more was still needed. Training and awareness were most commonly mentioned as things that World Vision did, and that were resulting in more people knowing about gender-based violence. **All 29 focus groups** (223 members) **explicitly said that the increase in knowledge and awareness on gender-based violence was because of World Vision’s work there.**

* **Mixed perceptions of behaviour change in communities.**

However, the idea that there was behaviour change in relation to violence in communities was not universal. While most communities saw significant changes, with many attributing this to the CCOH programme and World Vision’s work explicitly (see left), others gave specific reasons for why this might not be the case:

“I think the project timeframe is very short. We cannot fully see the real impact of the project as compared to other communities.”

*– Youth focus group, Weathercoast*

Attitudes and behaviour changes takes time. It did not happen overnight, or as expected with a specific given time frame. It takes years of work, trainings, assessment, reflection, and on-going monitoring and active engagement with the communities with the goal of reducing violence against women and girls in target communities.

There was one reference to use of the options available under the Family Protection Act, through a woman taking out a Police Safety Notice:

* “There is a case just recently, we report the case to the police and the husband received 21 days safety notice. After receiving the notice, we don’t hear any complaints from her, and her spouse also change his attitude.” – *Leaders & CHATs focus group, Temotu*

Unfortunately, it was not explored whether sufficient follow-up support was being provided; whether counselling had been made available to both parties; and whether the environment was truly safe to result in “no further complaints.” Around 70% of women who obtain Police Safety Notices are satisfied with the service, while others face difficulty because violence continues: follow-up is essential.[[2]](#footnote-3)

A lack of behaviour change in communities was also shown through past practices being observed as still being the norm:

*(How do people respond to family and sexual violence, especially violence against women and girls, in your community?)*

* “Resolve issues through compensation (money), if the first time.” – *Female focus group, Temotu*
* “Some people just remain silent and never to react.” – *Community members focus group, Weathercoast*

Youths started to show respect and behave well in the community…  
(There is a) good relationship  
between youths and leaders.

*Youth focus group discussion,   
Weathercoast*

How communities manage and resolve violence involves deeply entrenched cultural norms, and change in this area is typically slow. It is also false to assume that knowledge change will directly lead to behaviour change.[[3]](#footnote-4) Channels of Hope for Gender as it was designed should address attitudes and behaviours, but only a few staff were trained on the model. Another COH training should be organized for new staff to be equipped with knowledge to facilitate COH In the communities. The last staff Training of Trainers in the Channels of Hope methodology was in 2018. Of four staff members in Temotu, only one had been engaged on the project then; and of the four staff members in Weathercoast, only two were present in 2018. This means that more capacity building should focus for the new staff to implement COHG.

I have noticed that that the way people in the community manage family violence has changed as result of the CCOH programme and involvement of other training programmes.

*Youth focus group discussion, Weathercoast*

* **Improved relationships within the community, particularly with youth (community cohesion).**

(CCOH) changed the attitudes of youths.  
Youths stop destroying things.

*Female youth focus group discussion,   
Temotu*

One change that participants attribute to World Vision’s gender programming is improved relationships within communities, particularly with youth, coming from both community members and youth focus group discussion participants.

Community cohesion was a common theme throughout:

* “Here, divided by churches we are members of. Through WV we can now come together, share our opinions, word. Together. We are free.” – *Leaders & CHATs focus group, Temotu*
* “I see few changes within our community life as compared to before. As the mind-set and attitude of people started to change, people in the communities started to come together and work as a team.” – *Community members focus group, Weathercoast.*

There is a) good relationship between youths and leaders… Youth started to involve in the community work and now come together for decision-making. The community is becoming so good.

*Leaders & CHATs focus group discussion,   
Weathercoast*

Since the CCOH come into the community,   
community members have experienced major changes… The level of family violence started  
to reduce… (there is a) good relationship between youths and leaders.

*Community members focus group discussion, Weathercoast*

Seven of the focus groups also specifically mentioned learning about healthy relationships and finding this beneficial. A focus on trainings and awareness that are about connections between different people and groups has apparently had a positive impact on community members. Communities largely felt that this had, in turn, led to an improvement in cohesion in communities, with people feeling more willing to work together.

* **People with disability were inclusive in the programs however, there needs more awareness to parents and caregivers to include people with disability in the program.**

During focus group discussions, all participants were explicitly asked, “Are there people in your community who have *not* benefitted from World Vision’s work? Who, and why?” Answers included:

* “Not all. Some who are not participating do not benefit. Disable ones.” *– Leaders & CHATs focus group, Temotu*
* “Community members who are ignorant to the World Vision activities and are not participating. Disable one – not benefitting.” *– Female community focus group, Temotu*
* “Benefit. Youths, community members. Only those who don’t participation (sic). Disabled people*– Female youth focus group, Temotu*
* “Everyone in the community benefit of that project. Except for one thing, the project should also help the community so that the disability will feel part of the project.” – *Community focus group, Weathercoast*

As well as key informant interviews:

* “But those who did not attend to our work/awareness are not benefitted and those who are disabled.” *– Family Support Centre, Temotu*
* “Vulnerable people like old age group and person with disability maybe they have feeling of not been part of the programs or awareness.” *– Family Support Centre, Weathercoast*

The mainstreaming of inclusion of people with disability has not been implemented successfully in CCOH.

The National Coalition for Rural Advancement Government has reviewed the Solomon Islands National Disability Policy (2005-2010). This policy is now known as the Solomon Islands National Policy on Disability Inclusive Development Policy.

**Issues**:

Non-Ratification of the Convention on the Rights of Persons with Disabilities (CRPD) – Of the twenty three accepted recommendations on persons with disabilities which was given by seven countries called on the Solomon Islands Government to ratify the CRPD.

Due to the above issue NGO’s like World Vision as well as People with Disabilities Solomon Islands could not implement activities when it comes to disability inclusiveness. Implementation is likely to only ticking the boxes. There needs to be financial relevance to the convention. Most of the activities were on awareness and lobbying to the National Government for the recognition to ratify the convention.

**Recommendations:**

The complete review and validation of the Solomon Islands Inclusive Policy will begin in August to September 2022. After all, there will be clear roles for implementation and alignment of activities by World Vision and People with Disability Solomon Islands as well as other partners. If CCOH is to meaningfully mainstream disability inclusion, significant investment in capacity development will be required. Staff need to feel confident in their ability to deliver without doing harm, and to have the tools to facilitate with communities. Even with this capacity, extra time would need to be carved out of the project, in order for staff to be able to bring communities along on the learning journey.

## Relevance

As Assess the extent to which approaches used in CCOH are relevant and responsive to the needs of communities as a tool for reducing violence.

* Has CCOH helped to address a particular need/gap the communities see?
* What are the key strengths and weaknesses of the project?
* Are leaders and communities comfortable with the underlying faith approach, or do they have other ideas?
* Are leaders comfortable with referral mechanisms/support services available, and are they using them?
* Do community members know any referral mechanisms/support services available, and are they using them?

(This) does not meet our community need, which is sanitation. There is no balance (with) what we  
really need to have in our community. Though the community members are increasing knowledge on violence against women/gender-based violence, there is still (a) health risk to the people.

*Female community members focus group  
discussion, Temotu*

* **Community priorities tend more towards tangible sanitation and water projects – however, some do believe that CCOH is addressing a gap.**

A recurring theme throughout was a mention of other projects that World Vision either previously had implemented, or that the community wanted World Vision to implement. These often centred around water and sanitation. For those communities that had had a previous water and sanitation project, there were often complaints about the number of tanks and other tangible materials that they had or hadn’t received; for communities that had not had any type of water and sanitation programming (that staff could recall) before, this was often framed as a request.

Aligning grant-funded project implementation with World Vision International’s area development programme-based ideas, that are born out of the ability to receive very long-term funding commitments and therefore make those commitments to communities, is difficult to achieve. However, the selection of communities for gender-based violence programming does not appear to be based on a holistic development model: as per the project design, CCOH for this phase was to be implemented in existing communities, and to “spread the model to new communities,” through determination by current communities (“these current communities will be consulted to determine which neighbouring communities they have strong relationships with and which ones they feel would have good potential for spreading the model”). As per the project design, the five key questions that were being asked of communities to opt into this project, did not include whether there were *other, more pressing needs* that the community would prefer to be addressed first, and which could hinder the willingness of community members to participate, and ability to benefit from the model.[[4]](#footnote-5)

CCOH should be the first programme to be implemented in all communities,  
 because it helps the mind-set.

*Leaders & CHATs focus group discussion,   
Weathercoast*

Despite this, some community members did feel that CCOH was an appropriate first project for communities engaging with World Vision: indicating that **CCOH is addressing a particular need/gap in communities, and that the approach is relevant**.

The church and World Vision work together. World Vision bring good things through  
other projects; bring information to us.

*Female community focus group discussion,   
Temotu*

* **The project is strong in its partnership with churches in communities, and in promoting community cohesion. It is known for its training and awareness raising.**

(World Vision) opens the mind of many people, and they come together and work together.

*Youth focus group  
discussion, Weathercoast*

Leaders work together (more) than before. Unite with churches, church programme increases (more) than before, youth take the lead (more) than before. Community clean ups increase.

*Male community members focus group discussion, Temotu*

The **key strength** of CCOH appears to lie in its promotion of partnership and community cohesion, as well as being strong in providing trainings (meaning that the trainings are being delivered regularly, and that communities recognise World Vision as an agency that provides training).

*Q: What do you think is the best/strongest part of World Vision’s work here?*

World Vision does teaching or workshop for community people. They bring the information right into our community.

*Leaders & CHATs focus group discussion,   
Temotu*

* **Improvements should focus on the organisation and planning, time management, and financial management.**

*Q: What do you think is the worst/weakest part of World Vision’s work here?*

Delay of payment of rentals. There is a need for improvement in the payment of the projects… Sometimes do not inform or give out notice in time for community to prepare.

*Leaders & CHATs focus group discussion,  
Weathercoast*

*Q: What do you think is the worst/weakest part of World Vision’s work here?*

Short notice, short days implementation… Weak link with World Vision Temotu and World  
Vision in Honiara… Delays due to World Vision processes

*Male community member focus group discussion, Temotu*

*Q: What do you think is the worst/weakest part of World Vision’s work here?*

To have a vision on the outcome of the project.

*Community members focus group discussion, Weathercoast*

When we CHAT develop our Plans of Action and the money given to us, has been cut.  
This lowers our morale to make the Plan of Action for activities in the community.  
When there is slow response World Vision finance, there has to be clear communication to us.

*Leaders & CHATs focus group discussion,  
Temotu*

* The **key weakness** of CCOH appears to be in World Vision’s own internal processes. Communities are critical of WVSI’s ability to manage the project, to the point where they feel that WVSI are causing delays to progress.

This is a basic, but important part of implementation to ensure that the project is relevant and responsive to meeting the needs of communities.

The teachings on gender are based on (a) faith approach. This is helpful to us, as we are Christians. This makes us see the concepts as not separated from the faith we have.

*Leaders & CHATs focus group discussion, Temotu*

* **A faith-based approach is appropriate and welcomed by communities – but a *kastom approach could be too.***

The majority of the population of the Solomon Islands are Christian; it is therefore unsurprising that **communities feel that a faith-based approach is appropriate**.

Most of the cases are solved at the level of chiefs. This is handled at the community level.

*Female community members focus group discussion, Temotu*

If anyone make or cause any problem with any girl or women we normally seek help from the chief to assist in addressing the issues. Chiefs are the once who have right in any community issues.

*Leaders & CHATs focus group  
discussion, Weathercoast*

However, at the same time, the majority of respondents in focus groups mentioned chiefly leadership. Often, the chief is the first port of call, not faith leaders or CHAT groups. WVSI’s own research – the 2015 evaluation of WVSI’s gender-based violence prevention programming – highlighted the importance of, “more prominently acknowledging the centrality of chiefs in interrupting violence, settling disputes, delivering justice and informing and enforcing norms in the approach/design.”

We have a challenge that we as CHAT members are not given the same recognition as the chief in  
our community. We sometimes find it hard to carry out our roles because people turn to give the chief the highly recognition for leadership lead (sic)

*Leaders & CHATs focus group discussion, Temotu*

The fact that CHAT groups and faith leaders are defaulting to the chiefly system for resolutions, and that CHAT members feel that their effectiveness is something that needs focus on due to a greater recognition of the authority of chiefs over faith leaders, there is strong justification for exploring a *kastom*-based approach.

* **Referral mechanisms are generally known, but difficult to access and use. Community members want these services strengthened. There needs to be a firm partnership with the service providers for service delivery. The challenge is due to the geographical location of the islands that are also contributing factor. Referral agencies themselves agree.**

Our community location is very far from Lata. Survivors cannot access these services from our community. They have to travel by boat. Some of us don’t know where they are located.

*Female community members  
focus group discussion, Temotu*

In general, with the increase in awareness on gender-based violence, most people are also aware of what referral mechanisms are available in the Solomon Islands; however, due to geographical and resource constraints, this does not always translate to referral mechanisms being available *to these communities.*

(The) location of the service providers are far away  
from the community… The transportation to reach them is very expensive for the community members…  
Here in the community, we don’t refer many cases to  
the services. The only one we can refer cases to is the police. But their responses are very slow and sometimes they never solve the cases we refer to them.

*Leaders& CHATs focus group  
discussion, Temotu*

People reported they were using referral services occasionally compared to no use at all (baseline attitude). There is a danger that only more visible abuse is being noticed, reducing the effectiveness of prevention by targeting and addressing emotional, spiritual, financial, psychological and social abuse.

Currently, services available are Family Support  
Centre, Police and Medical… These services need  
more resources to function…  
*(Do you feel there is an uptake (increased use) of  
services for survivors of violence over the past few  
years?)*  
Not really increased.

*Key informant interview with Family  
Support Centre, Weathercoast*

There was an underlying frustration from those communities who did attempt to use police services in particular, at the lack of responsiveness from police. The police themselves acknowledge that community members can waste their time and money travelling to the police for assistance, as they are too severely under-resourced to cover their full jurisdiction.

Police (are) sometimes effective, sometimes not when  
it comes to their duties… Only some victims might  
have turn up for seek for support, while others not.

*Community members focus group  
discussion, Weathercoast*

Research in the Solomon Islands has shown that women who receive services from care and refuge centres – namely, Christian Care Centre, Seif Ples, and Family Support Centre – were generally satisfied with those services.[[5]](#footnote-6) However, these services are typically also under-funded, or on short-term funding that hinders long-term planning. Staff of the newly-established Temotu Christian Care Centre said, “our service is newly established, so not many people heard or know about us… Currently we receive funding from UN Women, and the funding ends this year.” In Weathercoast, staff of the Family Support Centre said, “services need more resources to function… The Family Support Centre in Marau want to work with World Vision in the future and be partners or stakeholders working together for betterment of our people.”

Have enough information already. Just to have a system that supports this is lacking.

*Leaders & CHATs focus group  
discussion, Temotu*

Only communities close to Lata (provincial town capital) can access the police service. But only those who are confident to come to us. When I reach communities I can hear stories about cases that are not reported, but these are very serious cases. Sometimes, the people came to seek our support, but since only one staff, the staff is busy, cannot hear them. They return to their communities and wasted their money to come all the way. So the transportation to access us is quite expensive, (and) limited staff also affect our work.

*Key informant interview with RSIPF, Temotu*

2.3 Effectiveness

* Assess the **effectiveness** of the approaches.
  + Has CCOH contributed to decreased violence in households or communities? Is it quantifiable?
  + Which tools/resources from CCOH do community members or leaders utilise the most to improve their behaviour and decrease violence?
  + What are the key strengths and weaknesses of using faith-based approaches?
* **There is anecdotal evidence for decreased violence in some households and groups, from the perspectives of men. WVSI’s Conflict Resolution training has been an effective tool in helping people manage their anger.**

*Q: If you personally feel yourself getting  
angry, or upset – how do you manage or control your behaviour? What do you do?*

Self-control. Shouting to release anger, walk away, speak out your heart.

*Q: How do you know to do that?*

Conflict Resolution training.

*Male community members focus group  
discussion, Temotu*

To manage anger I should go out from the house or walk away from where you can calm your anger down. World Vision teach us how to manage anger.

*Male youth focus group  
discussion, Temotu*

Amongst some groups – leaders, CHATs, male community members and male youth in particular – a decrease in violence has been noted. Some attribute this to their own learnings and experiences; **others directly reference World Vision’s work in providing Conflict Resolution training**, which is widely acknowledged throughout the review as being valuable.

In the past I beat my wife when I am angry, then  
one day I almost killed her then I stopped. I am a changed man now, I don’t do anymore beating when  
I am angry, but walk away and go calm myself and return to the house. I learn through my own experience.

*Leaders & CHATs focus group  
discussion, Temotu*

In the past few years, level of domestic violence is very high, but due to the CCOH programme, I have noticed that domestic violence decrease.

*Leaders & CHATs focus group  
discussion, Weathercoast*

* **However, some female focus groups and female respondents in mixed focus groups appear to hold responsibility for incidents of violence committed by men. There is a sense of women taking responsibility not to “anger” men, through committing to “stay silent,” and a fear of the consequences to them of their partner going to jail for committing violence.**

Throughout the review, there appears to have been a lack of effective messaging on violence being a choice on behalf of the perpetrator. Channels of Hope for Gender sends the message that violence is a choice that abusers make (i.e. that no one “makes” you commit violence), and that no-one was made to be abused. The reaction from women – that they have developed strategies to avoid being the victim of abuse – It is concerning that some contribute their coping mechanisms and strategies to learnings from CCOH.

2.4 Sustainability

Assess the sustainability of the approaches.

* What are the key factors that have enabled CCOH approaches to be sustained in the communities?
* What support do communities need to continue in the long term?
* How easy is it for communities or community leaders to access the resources required to run the different CCOH approaches?
* **There are mixed responses to whether communities can access World Vision’s resources to do things themselves. Community members identify issues with the literacy levels and level of English required to make use of World Vision’s tools.**

Yes, we youth sometimes access World Vision resources when trainings in the community, resources like exercise books, pens, handouts, manuals.

*Male youth focus group  
discussion, Temotu*

Throughout the responses, community members were occasionally seemingly needing clarity about what it meant to be able to access World Vision’s resources if they wanted to. Some stated yes, some stated no, some stated that they didn’t know that was an option.

World Vision started implementing in our community last year, in October. And they introduce 3 manuals. These manuals are for permanent employers. Manual not at our level of literacy (community people). The manuals should be more simplified version for us community leaders. This will be helpful for us…

Simplify manuals for us, maybe translate to Pidgin…

Simplify the manuals to our level of literacy, or maybe in Pidgin, for us to have confidence to lead sessions  
in our community.

*Leaders & CHATs focus group discussion, Temotu*

One clear issue arising out of Temotu in particular, but likely to apply to all Solomon Islands communities, was about the pitch of the resources that are being distributed to communities to assist with implementation. These contain technical jargon in English. Distributing these to communities can be demoralising – at no point should WVSI be undermining the confidence of community members to own their development. A review of what materials are given to communities, and ensuring that what is given is either in Pidgin/Pijin at the very least, local language at best if that language is documented, and as visual as possible, should be done as soon as possible to begin to make headway in sustainability.

# **Findings & Analysis: Gender Equality Project**

## 3.Impact

Assess the impact that GEP has had on individuals, families and communities as contributors to a reduction in violence.

* What types of changes do participants in the project attribute to World Vision’s programming?
* To what extent do participants in the project report knowledge and behaviour change? And what evidence is there to support this?
* What impact is GEP having on marginalized groups in the community (e.g. people with disabilities)
* How could this be improved?

In the past, we do not understand gender and  
gender issues. This time we understand gender and gender-based violence. One of the trainings was Conflict Resolution. Today, organisations are reaching out to the communities, like World Vision. Information is reaching out to the communities.

*Leaders & CHATs focus group discussion, Malaita*

* **Somewhat increased knowledge and awareness of gender issues and gender-based violence:**

There was some consensus that knowledge and awareness of gender issues and gender-based violence had increased in South Malaita and Honiara communities, as a direct result of World Vision’s work. Twelve out of 24 focus groups agreed that there had been a general increase in awareness; six of these attributed this increase in awareness to World Vision, and another one attributed it to both World Vision and other partners and NGOs.

However, the other focus groups tended to express that more awareness and knowledge was needed, that there should be an ongoing awareness in the communities. When asked, “do you feel there is an increased awareness of violence against women and girls in your community? Why/why not? What do you think the reasons for this are? Can you give examples?” Communities answered:

* + “Need increase of information; some of us don’t really understand the concept.” – *Female Leaders & CHAT focus group, South Malaita*

No violence happens in the community.  
No case to report.

*Male community members focus group discussion, South  
Malaita*

* + “Not enough information; need different trainings… Some parents are illiterate.” *– Female community members focus group, South Malaita*
  + “Need more awareness because sometimes gender-based violence always happened, because people don’t control their anger.” – *Community members focus group, Honiara*
  + “Not sure, awareness has not increased, *– Male youth focus group, South Malaita*

A not insignificant number of focus groups declared that there was no violence in their community. Gender-based violence is pervasive in the Solomon Islands, with one of the highest rates of sexual and family violence in the world.[[6]](#footnote-7) It is highly statistically unlikely that an entire community has no occurrences of gender-based violence; indicating that there is still a long way to go in ensuring that gender-based violence is noticed, recognised, and responded to appropriately.

During World Vision partnership with our community, I find my children gain fear and respect. That is respect for us parents and also for elderly people in our community.

*Female community members focus group discussion, South Malaita*

* **Respondents are aware of the Family Protection Act (FPA) and other potential mechanisms available to them; however, fear is associated with some services (i.e. police).**

The Family Protection Act, or FPA, was more frequently mentioned amongst communities in Honiara and South Malaita, when compared with the CCOH project. Services were also more likely to be explicitly named. However, it is notable that “fear” was mentioned across groups and communities – including children feeling fear.

* + “Legal laws are already in place. World Vision help us strengthened these laws, especially the FPA.” – *Male Leaders & CHAT focus group, South Malaita*
  + “Partnership and networking, where World Vision brings with them important people like police, health workers, and faith leaders to talk about their roles, responsibilities, and services they provided, including processes and who to see in case of family violence or violence against women and girls.” – *Male Leaders & CHAT focus group, South Malaita*
  + “Violence was normal; women were beaten, have bruised, it’s normal in the past. Now that we have gained knowledge of the response mechanism, no violence in the families because (they) have fear of the FPA.” – *Female Leaders & CHAT focus group, South Malaita*
  + “We fathers turn not to kill or (commit) violence (to) our children since this project enters our community. Gradually, violence reduces in our community because of the so many trainings we have with the project. This happens because we are afraid of the imposed fines, punishments and imprisonment if we cause violence in our homes.” – *Male community members focus group, South Malaita*
  + “In the past don’t have understanding of FPA and laws. When World Vision come and provide awareness, I have knowledge, and my son – 18 years of age – has (been) sent to prison, because of forms of abuse in the family.” – *Female community members focus group, South Malaita*
  + “Community already have referral pathways, like churches, leaders, women’s groups, chiefs, and the SAFENET, like the police, Christian Care Centre…” – *Community members focus group, Honiara*
  + “People reach out to police during violence, and during injury people reach out for medical help… it (use of services) increase but not reach out to community level. It is available only in urban centres like Auki, Afio, and Honiara… Sometimes police not responding if communities request for help.” – *Female youth focus group, South Malaita*
  + “People in the community know the services that provided in the country for survivors from Family Protection Act; awareness conducted by World Vision and police in the community.” – *Youth focus group, Honiara*

There appears to be a greater awareness of services in South Malaita and Honiara; however, the issue of seeing services (i.e. police) with fear rather than as a source of assistance and positive change is concerning.

Before, in every committee, I only see men involved in decision-making. But now I see  
gender balance in decision making in our community.

*Female Leaders & CHATs focus group  
discussion, South Malaita*

* **Communities in South Malaita have observed improved gender relations between men and women; but needs more to improve building better relationships in Honiara due to the influence of the city.**

In the past, household work is done mostly by women. Due to continuous trainings provided by World Vision, people tend to work together, and husband and wife share roles and responsibilities.

*Male Leaders & CHATs focus group discussion, South Malaita*

GEP respondents in South Malaita recall (prompted by a general question on experiences only) significant changes in recent years in the gender dynamics within households. **A greater sharing of household responsibility between men and women is attributed to World Vision’s work there.**

However, these same observations do not hold true for Honiara. Communities in Honiara are extremely diverse, sometimes fractured; often settlements, which are communities that lack formal land tenure and/or many basic services. Programming in urban environments in the Pacific presents a different set of challenges and opportunities to programming in rural environments, and the same approach should not be assumed to work in both. World Vision has previously partnered with the Australian National University on research into the experiences and priorities of settlement residents in Honiara, which recommended community-based financial education and supportive community-based networks to help combat violence against women in the urban environment.[[7]](#footnote-8) This has come across somewhat in the responses from Leaders/CHATs (e.g. “strengthened community committees” as the best part of World Vision’s work), but not from community members and youth.

Trainings impact on young couples; violence, not much.

*Leaders/CHATs focus group discussion, Honiara*

* **Despite being a specific target group of GEP, youth are seen to be “missing out” on the project.**

GEP was designed to particularly impact youths. Under Outcome 2, the project is working towards seeing male and female youth treat each other with respect, and not to use violence. The age range for youths in Solomon Islands is 14 to 29. The challenge for youths not participating fully in the project is most of the youths attended formal education that result in limited participation of youths.

“Youths and children, most time they left out. Conduct trainings for them during times they present inside the community. Example, during holidays.” – *Male Leaders/CHATs focus group, South Malaita*

* “Need to actively engage youths in the programs… Need more active and participatory activities to be integrated into the programme example sports, singing competition, and so forth.” – *Male Leaders/CHATs focus group, South Malaita*
* “Youths to have more information on forms of abuse… Focus on youths to gain knowledge from all trainings… Provide same trainings for youths to raise happy family in the future.” – *Female Leaders/CHATs focus group, South Malaita*
* “Involve or have youth activities as well… Youth programs should be in place.” *– Leaders/CHATs focus group, Honiara*
* “Include social activities like sports, singing contest in your monthly implementation/activities. This is especially for our youths.” – *Male community members focus group, South Malaita*
* “World Vision provides nice foods and other supports to our community. However, World Vision does not provide any tangible projects that will engage all the youths into. Youths are stranded alone. I want to see projects that youths can busy and engage in. This could, I believe will help address most of the challenges youths face in our community.” – *Male youth focus group, South Malaita*
* “Include youths. Make sure timing for programs includes everyone, mainly youths/students.” – *Female youth focus group, South Malaita*
* “World Vision was always concentrate on parents …..We youth need more trainings on behaviour and mindset.” – *Youth focus group, Honiara*

Through the staff outcome mapping exercise, some staff appear keen to implement another World Vision project model, IMPACT+. While IMPACT+ is targeting youth, it was originally designed by a foundation in Romania, with the goal of developing youth as competent and compassionate agents of change. Undertaking the full curriculum is a project in and of itself, and has the potential to detract away from the implementation of COHG and focus on gender-based violence that GEP has.

Lessons from CCOH and suggestions from communities themselves on how to better engage youth under GEP need to be considered.

## Relevance

Assess the extent to which approaches used in GEP are relevant and responsive to the needs of communities as a tool for reducing violence:

* Has GEP helped to address a particular need/gap the communities, see?
* What are the key strengths and weaknesses of the project?
* Are leaders and communities comfortable with the underlying faith approach, or do they have other ideas?
* Are leaders comfortable with referral mechanisms/support services available, and are they using them?
* Do community members know any referral mechanisms/support services available, and are they using them?

There are other areas expected to materialise in our community development. This must be priority to avoid violence in homes and in our community. Example, creating conducive water supply, proper sanitation, access to more available foods etc. This practice will help in reducing violence from the antisocial disturbances existing in our community.

*Male community members focus group  
discussion, South Malaita*

World Vision deals only with awareness/trainings which is good but we people also want to see tangible things as well such as sanitation, water tank, community hall, and others. Not just trainings and awareness only.

*Female community members focus group  
discussion, South Malaita*

Training is good but we also need things like sanitation.

*Male youth focus group  
discussion, South Malaita*

* **Community priorities tend more towards tangible sanitation and water projects, and believe this to be more important than trainings and awareness.**

Leaders and CHAT groups in both South Malaita and Honiara articulated that their visions and goals for their communities were to see a reduction in violence, for their communities to be safe environments, for families to be happy and for the community to live in peace. However, in South Malaita in particular, community members were more likely to highlight that they need tangible development that meets basic needs, going so far as to say that prioritising those basic needs would help reduce violence in homes (see right).

* **World Vision’s partnerships with service providers has been touted as both a strength, and a weakness.**

World Vision is good at networking and partnering especially in bringing of experts  
with skills and linking of communities to service providers.

*Male Leaders/CHATs focus group  
discussion, South Malaita*

The strongest part of World Vision’s work in the centre is we are strong partners and the centre really appreciate the work that have been done for the past few years by World Vision, and looking forward to build close and strong partners. The Centre and World Vision like working towards one goal to reduce the violence in the family, community and the country as a whole.

*Q: do you think is the best/strongest part of  
World Vision’s work here?*

Training on Men as Partners provided by SIPPA.

*Female youth focus group  
discussion, South Malaita*

Strongest part is advocacy and trainings. Another area is  
strong networking and partnership with other stakeholders.

*Key informant interview with SIPPA, South Malaita*

Not enough strategic and logistic arrangements.

*Key informant interview with RSIPF,  
South Malaita*

Need to restrengthen the partnership in terms of our mapping to see or identify gaps where we can work together.

*Key informant interview with MWYCFA, Honiara*

*Q: Do you have any ideas on how we could build on what we are currently doing?*

Yes. Signing of MOUs not only with SIPPA but with other partners as well. This helps guide us in our partnering and implementations.

*Key informant interview with SIPPA, South Malaita*

As with CCOH, training and awareness were generally labelled as World Vision’s strength – as well as the “only thing” that World Vision does. However, several groups noted that World Vision’s strengths were in networking and partnering, especially in linking some communities with the service providers. Service providers themselves also noted the strength of World Vision’s partnership approach.

Need to bring more partners from other organisations during trainings.

*Male Leaders/CHATs focus group  
discussion, South Malaita*

However, conversely, partner linkages were also labelled as a weakness by other communities, and some service providers noted that this could be stronger, and/or wider (i.e. more partners).

There was an unusually large number of responses that said World Vision’s strength was food (e.g. “Kakai/food. World Vision is supporting the program with provision of food – *Female community members focus group, South Malaita*), or other tangible items. 2020 was a significant disruption in programming in the face of a global pandemic, and regular programming has had to coexist with response work, which involves more “handout” activities. Communities’ perceptions of what World Vision does can shift during this time. There may need to be a reset of expectations and revisiting partnership agreements with communities to ensure implementation is well-aligned with both community needs and expectations.

* **Referral mechanisms are being utilised, and communities mention them often: however, many cases are being resolved at the community and (faith) committee level, as well as with chiefs.**

The recall of different types of services available came through strongly in the focus group discussions. South Malaita and Honiara communities likely have better access to a greater range of services than communities under CCOH, which are more remote and removed from central services.

However, there was also a trend of issues being “solved” in the community – which may not be a solution at all (see right). Communities, and the CHAT groups, are well-intentioned and have some knowledge; but lack the tools and skills required to be able to provide counselling for trauma, and an ongoing safe, protective environment for survivors of violence. They also lack the tools and skills to address the behaviour of perpetrators, and are not consistently referring these to the police and other services – only in “severe” cases.

* + “First committee to intervene, including chief and pastor/priest or village elders. If committee cannot solve the issue, it is best to contact the police Afio or Auki.” *– Male Leaders/CHATs focus group, South Malaita*
  + “In the past violence is not our business now that we have knowledge we help out when there is violence within homes.” *– Female Leaders/CHATs focus group, South Malaita*
  + “Talk to the people, call the police… Community responds by calling the police, chiefs; families deal with it themselves.” *– Leaders/CHATs focus group, Honiara*
  + “Community always responds to gender-based violence because of information from training from World Vision.” *– Community members focus group, Honiara*
  1. “If the situation is severe, I will call the police and other responsible authorities to help settle the issue.” *– Male youth focus group, South Malaita*Effectiveness

Assess the **effectiveness** of the approaches.

* + Has GEP contributed to decreased violence in households or communities? Is it quantifiable?
  + Which tools/resources from GEP do community members or leaders utilise the most to improve their behaviour and decrease violence?
  + What are the key strengths and weaknesses of using faith-based approaches?
  + What other tools/resources do community members or leaders utilise to improve their behaviour and decrease violence?
* **There is some anecdotal evidence for decreased violence in some households and groups, particularly from the perspectives of men. However, this tends to look more like denying the existence of *any* violence (see: Impact).**

Violence is not obvious here in our community. Same as violence inside the family. It is reduced in our community  
since World Vision came and work with us.

*Male Leaders/CHATs focus group  
discussion, South Malaita*

For some communities, particularly in the focus groups with men and male leaders, there was affirmation that violence had decreased, or was non-existent in communities.

I have seen changes with the work of GEP and World Vision  
in my community, in terms of domestic violence.

*Male youth focus group discussion, Honiara*

No violence is highly statistically unlikely; it is also highly likely that this question was being asked of perpetrators of violence themselves, as female responses were not consistent with the idea that violence had decreased (see next point).

* **However, women are *not* experiencing decreases in violence. Harmful coping mechanisms are being employed that are likely causing further trauma.**

The findings from the focus group discussions around women submitting to men to “prevent” violence are indicative of a lack of effectiveness for changing deeply rooted social norms on gender-based violence and the status of women in the Solomon Islands. Social norms change is difficult to achieve over the course of generations, let alone three years of a development intervention.

Despite this context, the evidence of women employing harmful, traumatic coping mechanisms to protect themselves needs urgent address. It further reinforces the likelihood that COHG is not being implemented as it was designed, where the messages are that no one was made to be abused, and that perpetrators alone are responsible for choosing to be violent.

* **The effectiveness of WVSI’s Conflict Resolution training as a tool in helping people manage their anger is somewhat mixed.**

*Q: If you personally feel yourself getting angry, or upset – how do you manage or control your behaviour?*

I have to do things in silence. I don’t want to talk. I usually hurt myself if I talk to others even to my husband.

*Female Leaders/CHATs focus group discussion, South Malaita*

My understanding is clear about  
gender-based violence. I, as a young man, the trainings provided  
by World Vision helps me a lot, especially in controlling my temper.

*Male Leaders/CHATs focus group  
discussion, South Malaita*

Respondents were specifically asked how they managed or controlled their own behaviour – reinforcing the idea that they are responsible for that control. While some referenced World Vision’s training in conflict resolution (see right), there were a significant number of responses that indicated people did not know how to manage their anger, or were employing tactics that were harmful to themselves or others. Conflict resolution training of trainers is one item that has been delivered with all staff, including those who are very new to the project.

Fight back with the person… Swear  
back at the person… I can’t control my anger, I don’t know how to control  
my anger. I always reacted (with) my anger.

*Youth focus group discussion, Honiara*

## Sustainability

Assess the **sustainability** of the approaches.

* + What are the key factors that have enabled GEP approaches to be sustained in the communities?
  + What support do communities need to continue in the long term?
  + How easy is it for communities or community leaders to access the resources required to run the different GEP approaches?
* **There are mixed responses to whether communities can access World Vision’s resources to do things themselves. Some felt very comfortable with the local office and staff – particularly Afio in South Malaita**

*Q: Can you easily access World Vision’s resources if you need them, to run activities?*

*Yes, Patrick and Afio staffs are*

*very welcoming and helpful.*

*Easy to approach.*

*Female youth focus group*

*discussion, South Malaita*

Throughout the responses, community members were occasionally seemingly confused about what it meant to be able to access World Vision’s resources if they wanted to. Some stated yes, some stated no, some stated that they didn’t know that was an option. At no point was it clear whether discussions about project sustainability had taken place.

WVSI’s office in South Malaita in particular seemed to have developed good relationships with the communities, with some staff being named as being particularly helpful.

*Q: Can you easily access World Vision’s resources if you need them, to run activities?*

No…

It’s easy for us to call, but depending on your timing because of the business we need working together.

*Leaders/CHATs focus group discussion, Honiara*

* **Communities want to see more participatory work with youth, better planning and coordination, and more support to women.**

There were a significant number of responses across all groups, in both area programs, that gave ideas for more work with youth: to use drama, sports, singing, theatre and other types of activities to engage youth, as well as suggestions to ensure that the timing of those activities is suitable (i.e. not during school hours).

Conduct a refresher workshop again on Channels of Hope for Gender.

*Male Leaders/CHATs focus group  
discussion, South Malaita*

There were also a number of requests for better coordination and planning from World Vision. And one participant identified the need for refresher training on Channels of Hope (see right).

It is good if World Vision can bring back the life skills women who always train the women in the centre  
about cooking skills, sewing, and cloth dying.

*Key informant interview with Christian Care Centre, Honiara*

Link women to services that provide woman needs… Workshop for woman.

*Female community members focus group discussion, South Malaita*

Need life skills for women and need more projects… Give us tools for gardening… Provide us funds.

*Female Leaders/CHATs focus group discussion, South Malaita*

In addition, there were some specific requests to strengthen the program’s support to and engagement with women, from both communities and partners (see below). Given this is a gender equality project, the idea that communities and stakeholders feel greater attention to women is needed, should be considered.

**4. Conclusions**

Present **lessons learned** from implementation of the approach.

* In which ways could CCOH/GEP be strengthened/
* What do communities/individuals value about CCOH/GEP?

By and large, World Vision’s gender-based violence programming has successfully raised awareness of gender-based violence in communities of implementation. **Communities value this increase in knowledge and awareness, and largely credit that to World Vision’s work.**

Respondents to this mid-term review also **valued an increase in community cohesion**, and strengthened relationships between different groups in communities, particularly youth. While this was more pronounced in rural contexts than in urban, focus groups felt that the project provided opportunities to engage youth in community decision-making and activities, and as a result, felt that violence and crime amongst youth decreased. Where this hadn’t happened, communities themselves recommended greater engagement with youth as a priority.

However, the mid-term review has raised concerns around the quality of content being implemented in communities. Concerning comments around women submitting to their husband’s “special needs” in order to reduce violence, and motivations for reducing violence being fear-based, indicate that there are gaps in the knowledge, attitudes, behaviour, and potentially confidence, of staff who are directly implementing. It is highly statistically likely that World Vision staff have been subjected to abuse in their lifetimes themselves; implementing a gender-based violence and protection programme in this context requires there to be a plan for staff to be able to overcome this trauma themselves, to ensure there will be no accidental projecting of harmful coping mechanisms onto communities.

Partnerships with external service providers is an area that appears under-utilised, from this review. Stakeholders and services are crying out for a stronger partnership with World Vision, to find ways to work together better and more often; and in turn, communities that are “tired” of hearing about awareness and training, are crying out for stronger services. World Vision has the potential to be a bridge between services and communities, but is currently not filling that potential to its fullest extent.

Both projects could be strengthened through investing in staff capacity to implement, and a greater targeting of interventions to maximise impact. This review has generated a significant body of evidence, and there are a large number of areas for improvement. However, in order to keep the review *utilisation-focused*, recommendations are limited to those that are achievable within the 1-2 year timeframe remaining. Revisiting some of the data and findings at a later date may be useful as the office’s capacity is strengthened and time/space/resource becomes available.

# **Recommendations**

Present recommendations to strengthen all aspects of the approach moving forward.

* Summarise by key findings and lessons learned to present evidence-based recommendations for CCOH/GEP.

1. **Assess and re-scope the projects. Make decisions on whether COHG is the right model for the Solomon Islands.**

Using the “Channels of Hope Design Implementation Quality Assurance Tool,” determine how big the gap is between WVSI implementation of COHG, and the project model methodology.[[8]](#footnote-9) Decide whether this gap can be bridged, or whether the projects have strayed too far from the original methodology and will require a different approach to achieving outcomes in the remaining timeframe (see recommendation #2a).

During the re-scope, narrow the focus: currently, the projects are spread thinly across youth (potentially implementing IMPACT+), savings groups, positive parenting education, as well as supporting CHATs and implementing COHG modules. Staff have been trained in a wide range of approaches and content to implement, which is unrealistic for the number of staff available on the projects, as staff are being expected to be experts in a number of different models at once. Investigate different possibilities for increasing reach of the projects – e.g. support and strengthening of service providers, in line with community recommendations.

Narrow the focus, reduce the number of communities (see recommendation #2), equip staff with 1-2 tools for implementation at a time, and regularly assess progress.

1. **Scale back implementation while all implementing staff are trained on COHG, if that methodology is to continue to be used.**
2. *Alternative recommendation/in tandem: explore/develop a uniquely Solomon Islands approach to weaving kastom and faith for addressing gender-based violence.*

For CCOH in particular, staff are spread thin across 20 communities in extremely remote areas of already very remote provinces. In GEP, staff are having to juggle implementation in traditional rural communities with implementation in urban settlements, without a differentiation in approach between the two.

With only 1-2 years left of implementation, WVSI should prioritise the communities who wish to remain engaged in the project and with WVSI. This could look like a “health check” of community partnerships, while also making a plan for sustainability and wrap-up, being clear that these projects will be ending – this is currently not obvious to communities.

If implementing COHG as it was designed is determined to be achievable in the remaining timeframe, ensure that all staff are trained as staff facilitators before implementing any more content in communities. Consider taking lessons learned from other Melanesian offices (e.g. Vanuatu) on how to support staff through their own journeys of change to ending violence and overcoming trauma.

An alternative recommendation to implementing COHG from a purely faith perspective is to revive the recommendation from the 2015 evaluation of WVSI’s gender-based violence prevention programming, ensuring that WVSI is, “more prominently acknowledging the centrality of chiefs in interrupting violence, settling disputes, delivering justice and informing and enforcing norms in the approach/design.” This includes addressing their capacity to attempt to encourage a focus on the needs of victims and the reform of perpetrators, as well as community harmony. This approach is also recommended by UN Women.[[9]](#footnote-10) The centrality and importance of chiefs in mediating disputes and addressing violence has been reiterated in other recent research on Solomon Islander women’s experiences of addressing violence,[[10]](#footnote-11) and in this review.

Currently, there is little research that recognises the positive role chiefs and *kastom* ceremonies could play in preventing violence against women and girls. COHG has the potential to be adapted for effective use by chiefs, through a *kastom* lens; having COHG for *kastom* has the potential to engrain the importance of preventing gender-based violence as a *kastom* norm in communities, not just a faith perspective, but a message that aligns with both church and culture to enhance impact. WVSI has the opportunity to investigate and research how this could be applied, either in partnership with other Melanesian contexts, or as a uniquely Solomon Islands context with adaptations from island to island.

1. **Identify potential mentor/peer support partnerships across WVSI for the GEP and CCOH project team leads/managers, to provide ongoing assistance with project management, time management, financial management and communications.**

Communities and stakeholders identify a space for improvement in WVSI as its capacity for project management, across finances, logistics, time management and communications. Staff have been recipients of a large number of trainings over the years – however, trainings alone do not embed learnings. There is a need to support and mentor staff in planning and coordination roles under these projects, to foster good practices in project management. The content of what they need to do is not new information: the practicality of how to achieve it (e.g. how to communicate in advance with communities who have no cell reception, for example) needs to be worked out.

1. **Decide on the extent to which youth will be a focus of the projects – and how this can best be achieved.**

In this review, CCOH does *not* include a youth-specific target, whereas GEP does. And yet, CCOH communities were positive and praised the achievements of the project in engaging and including youth, whereas GEP communities were critical of this area, stating more needed to be done.

CCOH communities engaged youth by including youth as part of wider community activities, and using tools and activities that were attractive to youth. This is likely to be a better approach than a youth-specific component (i.e. IMPACT+) that GEP is implementing. Taking the learnings from CCOH and applying them to GEP could look like a greater focus on community cohesion activities, and acknowledging youth-friendly, “fun” activities as a vehicle for gender-based violence messaging. Previous initiatives can be drawn upon[[11]](#footnote-12) to better design a youth component that is attractive and meets the projects’ outcomes.

1. **Seek support for mainstreaming disability inclusion, including practical strategies for how implementing staff could do this on top of regular work (if possible), and develop associated tools (if required).**

People with disability in the Solomon Islands are typically “invisible”.[[12]](#footnote-13) It cannot be ignored that a significant number of communities picked up that people with disability were *not* being included in World Vision’s programming. However, mainstreaming disability is a specific skill-set, and often staff are “told” to include people with disability without being given tools or support to do so. The projects are not funding a disability inclusion expert or resource, and the only Disabled Peoples’ Organisation in the Solomon Islands is heavily under-resourced and over-subscribed.

WVSI needs to determine the best method going forward for mainstreaming disability inclusion in Solomon Island communities, which will likely look different between rural and urban, if not from island to island. This is an area that external support (e.g. WVA) could be helpful with. Practical strategies, advice and tools are required if mainstreaming inclusion is able to occur.

1. **Map out, formalise, and focus on how World Vision can strengthen services, and be a bridge between communities and services.**

With a reduction in communities who are not engaged in the project (recommendation #2), there may be a gap in the target reach. At the same time, communities are heavily demanding greater access and support from services, rather than “just” awareness on gender-based violence. This presents an opportunity for WVSI to focus and strengthen its support to GBV services in its target provinces, while providing avenues for communities and services to access and speak with one another, embedding referral mechanisms. This may look like a combination of financial support, mentoring (e.g. in project management, grant management, finance and logistics, etc.), and working together to develop pathways and materials that can be left with communities (e.g. appropriate training and follow-up materials). This is one potential way of strengthening sustainability, as fewer “World Vision” models are being implemented, and communities are connecting more closely with service providers.

It should be noted that one of the biggest gaps in resources is the RSIPF, which WVSI cannot fund. However, the police have noted that they would like a stronger partnership with World Vision, and there is potential to ensure that complimentary services are available for police to draw on (e.g. funding legal services, health and medical, counselling etc.).

1. **Following the re-scope and identification of when staff facilitator training can realistically be completed (given COVID-19 pandemic restrictions), create a detailed implementation plan for the remaining 1-2 years of both projects, with realistic targets and a map to get there. Adjust the logframe, Indicator Tracking Table and other monitoring tools as required. Spend time workshopping these with implementing staff to ensure everyone feels confident to carry it out, and that suggestions for changes are taken into account.**

From the outcome mapping exercise and interviews, some staff lack confidence in the details of the project; this comes across in communities, where focus groups have questioned whether World Vision understands the outcome of the project, or who they are targeting, or what the organisation wants out of this.

The projects need simplifying. Short goals and targets (e.g. every 3 months) need to be set. Staff need to feel confident in their ability to implement and meet expectations. Sustainability and exit plans need to be completed. And this all needs to be communicated clearly with communities.

# **Annexes**

## Annex 1: Terms of Reference for Mid-Term Review

[MTR\1. Term of reference\Mid Term Review Terms of Reference.docx](file:///C:\Users\cnongeba\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\YR77YV93\MTR\1.%20Term%20of%20reference\Mid%20Term%20Review%20Terms%20of%20Reference.docx)

## Annex 2: Mid-Term Review Plan

[MTR\2\Mid Term Review Plan.docx](file:///C:\Users\cnongeba\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\YR77YV93\MTR\2\Mid%20Term%20Review%20Plan.docx)

## Annex 3: Bond Evidence Principles Tool

[MTR\3\Bond Evidence Principles Checklist.xlsx](file:///C:\Users\cnongeba\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\YR77YV93\MTR\3\Bond%20Evidence%20Principles%20Checklist.xlsx)

## Annex 4: Qualitative Data Book

[MTR\4\Raw Qualitative Data\_Synthesised.docx](file:///C:\Users\cnongeba\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\YR77YV93\MTR\4\Raw%20Qualitative%20Data_Synthesised.docx)

## Annex 5: Qualitative Data Coding Framework

[MTR\5\Coding Frame Work.docx](file:///C:\Users\cnongeba\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\YR77YV93\MTR\5\Coding%20Frame%20Work.docx)

## Annex 6: Data Collection Tools

[MTR\6\Focus Group Guide\_CHAT.docx](file:///C:\Users\cnongeba\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\YR77YV93\MTR\6\Focus%20Group%20Guide_CHAT.docx)

[MTR\6\Focus Group Guide\_Community members.docx](file:///C:\Users\cnongeba\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\YR77YV93\MTR\6\Focus%20Group%20Guide_Community%20members.docx)

[MTR\6\Focus Group Guide\_Youth.docx](file:///C:\Users\cnongeba\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\YR77YV93\MTR\6\Focus%20Group%20Guide_Youth.docx)

[MTR\6\Key informants interviews Guide.docx](file:///C:\Users\cnongeba\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\YR77YV93\MTR\6\Key%20informants%20interviews%20Guide.docx)

## Annex 7: WVSI Management

**World Vision Solomon Islands Management Response to Gender Mid-Term Review**

WVSI’s Gender Program Manager has reviewed and responded to the MTR. The immediate actions and responses to the MTR are captured in WVSI’s six-month action plan (Annex 8). WVSI will explore options with the WVI partnership, including the Technical Services Organisation (TSO), which is a group of in-house technical experts, available to WV offices on short term assignment to address technical gaps. WVSI will also engage neighboring National Offices in the Asia Pacific Region to discuss options to address recommendations through regional collaboration, lessons learned and trouble shooting. Below is a summary of consultant recommendations and WVSI’s response, action time frame and resourcing required to deliver on recommendations for both the Gender Equality Project and Channels of Hope for Gender project.

**Recommendation: Assess and re-scope the project: Make Decision on whether COHG is right model for the Solomon Islands.**

WVSI has chosen to reject this recommendation based on a long history and previous successful experience with the COH model, which has been found to be effective and suits the context in Solomon Islands. Issues related to efficacy of implementation of the project model primarily comes down to staff turnover. The recommendation is a timely reminder of the importance on continuous training for new and experienced gender project staff. To address this concern, WVSI will conduct a training of trainer (TOT) on the Channels of Hope for Gender methodology for all project staff and will be started by. WVSI will join COHG Training of Facilitators in Indonesia in July 2023 with 1 staff and 2 faith leaders planning to attend.

**Recommendation: Scale back implementation while all implementing staff are trained on COHG, if that methodology is continuing to be used.**

WVSI has chosen to accept this recommendation. WVSI will clearly communicate with community leaders and project partners that a scale down of implementation will occur in the short term while staff training is undertaken and that this will be beneficial to target communities. The project team will also develop a community mapping tool to determine which communities needs additional training to understand the COH methodology and implement it. This will be undertaken between September and November by WVSI’s gender team and include training materials and the final community mapping tool.

**Recommendation: Identify potential mentor/ peer support partnership across WV for the GEP and CCOH project team leads/ Managers to provide ongoing assistance with project management, time management, financial management and communications.**

WVSI has chosen to reject this recommendation. Project management and implementation weaknesses have been addressed in the six-month action plan and can be managed internally. In addition, the gender team will use World Vision International’s partnership assessment tools with our partners for effective partnerships. This will occur during September and October 2021.

**Recommendation: Decide on the extent to which youth will be a focus of the projects – and how this can best be achieved.**

WVSI has chosen to accept this recommendation. The two projects can use and implement CCOH model, especially the ‘Celebrating families’ tool to address conflict resolution for youths and youth engagement. Activities will also be re-focused where appropriate to include youth participation. This will occur from September to November 2021 and be led by the gender team and manager and utilize existing tools and IEC materials.

**Recommendation: Seek support for mainstreaming disability inclusion, including practical strategies for how implementation staff could do this on top of regular work (if possible), and develop associated tools if required.**

WVSI has chosen to accept this recommendation. WVSI will liaise with people with disability services (PWDSI) and draw a plan to implement the recommendation. PWDSI will provide training for disability inclusion for staffs and partners in Honiara and Malaita in May 2023.

**Recommendation: Map out, formalize and focus on how World Vision can strengthen services can be a bridge between communities and services.**

WVSI has chosen to reject this recommendation. By utilizing the World Vision partnership assessment tools with our partners in other recommendation WVSI should be able to strengthen connections with communities and service providers. The gender manager will lead this process in May 2023 to conduct partnership consultation.

**Recommendation: Follow the re-scope and identification of when staff facilitator training can realistically be completed (given covid-19 pandemic restrictions).**

WVSI has chosen to accept this recommendation. Due to COVID-19 pandemic, WVSI will join COHG Training of Facilitators in Indonesia in July 2023 for 1 staff and 2 faith leaders.

WVSI is committed to implementing the COHG methodology in a robust and contextually appropriate approach with high fidelity to the project model’s best practice approach. WVSI will continue to work with project partners, communities, DFAT and World Vision Australia to ensure the Gender Equality Project and Channels of Hope for Gender project’s create sustainable and lasting change for vulnerable people in target communities.

## **DFAT Management Response**

DFAT notes that the Community Channels of Hope program will conclude in 2023 and that the recommendations of the Mid-Term Review are primarily for World Vision Solomon Islands. Consequently, DFAT responses to each MTR recommendation are not appropriate. Nevertheless, DFAT welcomes the findings of the MTR, which provides insight and learning on a faith-based approach to the elimination of violence against women (VAW), and community perceptions and experiences. DFAT notes the importance of engaging with youth, *kastom* and people with disability. Challenges such as the disconnectedness of remote communities to response services are also noted. DFAT will consider the MTR findings in the design of future investments that support the elimination of violence against women.

1. See <https://www.statistics.gov.sb/statistics/social-statistics/population> [↑](#footnote-ref-2)
2. Ride, A & P. Soaki (2019). Women’s Experiences of Family Violence Services in Solomon Islands. Honiara: Australian Aid/Solomon Islands Government. [↑](#footnote-ref-3)
3. World Vision International (2021). Behaviour Change: Practical Implementation Guidance for Programs. [↑](#footnote-ref-4)
4. Community Channels of Hope Design Phase III, page 42:

   Is the distance to the potential new community reasonable?

   Is it located relatively near an existing CoH community - permitting members of the CHAT in the existing community to take part in outreach and spreading the CoH model (and permitting WVSI staff to visit both communities on the same visit when going to the field?)

   Are the issues addressed by the CoH project a concern that key community leaders (both faith leaders and others) feel is important, and are interested in working to address? Is the community interested and willing to participate in the CoH project?

   Are there any community conflicts, tensions, or issues which could but the safety of WVSI staff at risk?

   Are there any NGOs, government agencies, or other organisations doing work similar to CoH in the community already/would there be duplication? [↑](#footnote-ref-5)
5. Ride & Soaki, (2019) [↑](#footnote-ref-6)
6. Ming, M. M., Stewart, M. G., Tiller, R. E., Rice, R. G., Crowley, L. E., & Williams, N. J. (2016). Domestic violence in the Solomon Islands. *Journal of Family Medicine and Primary Care, 5*(1), 16—19. <https://doi.org/10.4103/2249-4863.184617> [↑](#footnote-ref-7)
7. Australian National University. (2017). Urban development in Honiara: Harnessing opportunities, embracing change. <http://dpa.bellschool.anu.edu.au/experts-publications/publications/5567/urban-development-honiara-harnessing-opportunities-embracing> [↑](#footnote-ref-8)
8. Without access to project implementation materials, it is impossible for the consultant on this review to evaluate the gap. [↑](#footnote-ref-9)
9. UN Women. (2011). *Ending Violence Against Women and Girls: Evidence, Data, and Knowledge in Pacific Island Countries*. [↑](#footnote-ref-10)
10. Ride & Soaki, (2019) [↑](#footnote-ref-11)
11. For example, Red Cardim Vaelens, implemented by Live and Learn in Solomon Islands from 2015-2017; YOPP Sports, implemented by Save the Children Solomon Islands 2011-2014 – both centring on the use of sports for addressing violence with youth. Other agencies have implemented initiatives with drama, theatre, song and music, which should all be considered. [↑](#footnote-ref-12)
12. Gartrell, A., Jennaway, M.G., Manderson, L., & Godden, N. (2016). Making the Invisible Visible: Disability Inclusive Development in Solomon Islands, *The Journal of Development Studies*, *52*(10), 1389-1400 <https://dx.doi.org/10.1080/00220388.2015.1121238> [↑](#footnote-ref-13)