



EVALUATION REPORT

MID-TERM EVALUATION OF THE USAID/MALI GIRLS LEADERSHIP AND EMPOWERMENT THROUGH EDUCATION (GLEE)

July 2021

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ACRONYMS AND ABBREVIATIONS

AE	Teaching Academy (Académie d'Enseignement)
AME	School mothers association (Association Mères d'élèves)
APE	School parents association (Association Parents d'élèves)
ASC	Accelerated Schooling Centers
CADDE	Support Unit for the Decentralization and Deconcentration of Education (Cellule d'Appui à la Décentralisation et à la Déconcentration de l'Éducation)
CAA	Community Asset Appraisal
CAP	Educational administration district (Centre d'Animation Pédagogique)
CBO	Community-based organization
CDA	Community Development Agent
CEPROCIDE	Center of Citizenship Promotion for Basic Sustainable Development (Centre de Promotion de la Citoyenneté pour le Développement Durable à la Base)
CGS	School Management Committee (Comité de Gestion Scolaire)
CNIECS	National Center for Information, Education and Communication in Health (Centre National d'information, d'éducation et de communication en santé)
CPHDA	Center for the Promotion of Human Rights and Development in Africa
CSCOM	Community Health Center (Centre de Santé Communautaire)
DNEF	National Directorate for Basic Education (Direction Nationale de l'Enseignement Fondamental)
DNP	National Directorate for Pedagogy (Direction Nationale de la Pédagogie)
DNPF	National Directorate for Family Promotion (Direction Nationale de la Promotion de la Famille)
DNS	National Directorate of Health (Direction Nationale de la Santé)
FGD	Focus group discussion
GAAS	Groupe d'Animation Action au Sahel
GLEE	Girls Leadership and Empowerment through Education
ICC	Inter-Class Correlation
ICRISAT	International Crops Research Institute for the Semi-Arid Tropics
ISFRA	Institut Supérieur de Formation et de Recherche Appliquées
IUP	Institut Universitaire Pédagogique
KAP	Knowledge, attitudes, and practices
KII	Key informant interview
MCHN	Maternal, child health, and nutrition
ME	Margin of error
MEL	Monitoring, evaluation, and learning
MEN	Ministry of National Education

OMAES	Œuvre Malienne d’Aide à l’Enfance du Sahel
SES	Socioeconomic status
USAID	United States Agency for International Development
WASH	Water, sanitation, and hygiene

ABSTRACT

USAID/Mali's Girls Leadership and Empowerment through Education (GLEE) activity seeks to increase school access for adolescent girls in the Mopti and Kayes regions of Mali by: 1) decreasing key barriers faced by adolescent girls to accessing quality education; 2) improving safety of girls in schools and their communities; and 3) increasing knowledge and adoption of positive health behaviors of adolescent girls. A mixed methods midline evaluation of the GLEE activity surveyed 1,749 girls (924 treatment and 825 control) and 113 principals (56 from GLEE schools and 57 from control schools) and conducted qualitative data collection with a range of program participants and stakeholders. The evaluation found positive progress of the program along a range of key outcomes, including reducing the number of girls who said they planned to drop out of school, improving girls' perception of school safety, and improving girls' knowledge and attitudes around menstrual health and reproductive health. Evidence of behavior change in these health areas is more limited. The program also has shown evidence of improving capacity for school management by local school management committees, but some skill transfer work needs to continue. Evidence of institutionalization of the program is limited, which is an area of critical work in later years of the activity. Further work also needs to be done to ensure that recent improvements in GLEE's monitoring and evaluation system are maintained.

EXECUTIVE SUMMARY

PROJECT BACKGROUND

USAID/Mali's Girls Leadership and Empowerment through Education (GLEE) activity seeks to increase school access for adolescent girls in the Mopti and Kayes regions of Mali by:

- 1) Decreasing key barriers faced by adolescent girls to accessing quality education
- 2) Improving safety of girls in schools and their communities
- 3) Increasing knowledge and adoption of positive health behaviors of adolescent girls

GLEE is implemented by Winrock International and a consortium of partners, including IntraHealth International, the Center for the Promotion of Human Rights and Development in Africa [CPHDA], Groupe d'Animation Action au Sahel [GAAS], and Œuvre Malienne d'Aide à l'Enfance du Sahel [OMAES]. The program uses a variety of programmatic approaches to implement this theory of change, including: developing and supporting Accelerated Schooling Centers (ASCs) to ease the transition into school for out of school girls; capacity-building of teachers to work with all students, particularly those coming from ASCs; provision of scholarships and other materials to reduce cost burdens for girls attending schools and ASCs; work through community development agents (CDAs) to build the capacity of School Management Committees (CGS, from the French Comité de Gestion Scolaire) members; mentorship and peer education (including capacity building and training for mentors, peer educators, and youth ambassadors); provision of teaching and learning materials; support to establish youth-friendly health centers; improved school water, sanitation, and hygiene (WASH) facilities; development and implementation of a school-related gender-based violence (SRGBV) reporting system and protocol; and targeted social behavior change communication.

USAID/Mali contracted with EnCompass and its partner CEPROCIDÉ (le Centre de Promotion de la Citoyenneté pour le Développement Durable à la Base¹), to conduct the midterm evaluation of GLEE to measure GLEE's progress in achieving its goals and identify strengths and opportunities to fortify the current program design, its implementation, and future institutionalization of its most impactful elements. This document serves as the midline report for the GLEE activity.

EVALUATION QUESTIONS

In order to evaluate the progress GLEE is making in achieving its goals, this evaluation will investigate: 1) implementation progress, 2) project management, 3) progress toward expected results, and 4) lessons learned and the sustainability of results. The evaluation team will seek to collect data on the following seven evaluation questions:

- 1) To what extent has the activity contributed to girls' enrollment and retention in schools?
- 2) To what extent did the GLEE activity reach its targets of new entrant students (including the number of new entrants in Grade 1 and the number of entrant children from ASC in other grades)? Why/why not?

¹ In English, Center of Citizenship Promotion for Basic Sustainable Development

- 3) To what extent did capacity-building efforts for education personnel (teachers, education administrators), community-based organizations (CBOs), and school governance structures: a) increase knowledge and skills, and b) change behaviors/teaching practices for education personnel, CBOs, and school governance structures?
- 4) To what extent are the systems and processes that are put in place for increasing school enrollment being institutionalized?
- 5) To what extent has the activity improved the safety of adolescent girls in schools and in their communities?
- 6) What is the new knowledge gained by adolescent girls and to what extent that has affected the adoption of positive health behaviors among adolescent girls?
- 7) How does project management (financial, human resources, technical, and monitoring, evaluation, and learning [MEL] systems) affect program implementation and the achievement of results?

RESEARCH TOOLS

Given the complex nature of GLEE and the mix of questions proposed, the evaluation team applied a convergent, parallel, mixed-methods design where qualitative and quantitative data are collected simultaneously and analyzed separately before findings from both are brought together for interpretation. The evaluation team used a mix of tools to conduct the evaluation, including:

- A quantitative survey of in-school adolescent girls ages 10-18 (GLEE and control schools)
- A quantitative survey of school principals (GLEE and control schools)
- A school inventory to capture administrative data (GLEE and control schools)
- Qualitative focus group and interview guides to use with stakeholders, including in-school girls, principals, teachers, CGS members, GLEE mentors, peer educators, youth ambassadors, ASC girls, ASC facilitators, school grandmothers (GLEE schools only), health center staff, Malian government officials at the national, regional, and local level, and GLEE staff members
- A data abstraction tool for data gathered through a desk review of GLEE program documents

SAMPLE

The primary population of interest is girls aged 10–18—the primary beneficiaries of GLEE programming, in the Mopti and Kayes regions of Mali. The sample provides estimates of the target population that can be disaggregated by project and control schools and student age group (10–12 and 13–18), permitting comparison of GLEE and non-GLEE schools. To sample the girls, a two-stage stratified cluster sample design was applied. In the first phase, the team sampled 60 treatment and 60 control schools for inclusion in the study along with 10 replacements for each. In the second stage, the evaluation team used the school registry to randomly select a group of seventeen girls (two as possible replacements), stratified by age group (10–12 vs. 13–18). In lower secondary schools, only older (13–18) girls were selected, while in primary schools, the age groups included were determined by the ages represented within the selected school. The target sample size was 1,800 girls. The final sample was 1,749 girls (924 treatment and 825 control), who were recruited from 60 GLEE schools and 57 control schools.

While at the selected GLEE and controls schools, research teams also interviewed principals and conducted school inventories. The teams interviewed 113 principals (56 from GLEE schools and 57 from control schools) and inventoried 112 schools (55 GLEE schools and 57 control schools).

A sub-sample of the GLEE-supported communities selected in the quantitative sample villages (eight from Mopti; eight from Kayes) where the GLEE schools are located were purposefully selected for qualitative research. Community characteristics that were considered in this purposeful selection were determined during the evaluation design workshop and included community size and stability. In 10 of the sites, data collection focused on gathering data from groups in schools (in-school girls, teachers, CGS, GLEE mentors, and peer educators/youth ambassadors) whereas, in the remaining six sites, data collection focused on gathering data from CSAs and the community (ASC girls, ASC facilitators, school grandmothers, and health center staff). Principals were sampled in all sites.

Government stakeholders and GLEE staff members were purposefully selected in coordination with the GLEE team.

KEY FINDINGS

The evaluation finds that the GLEE activity's components around 1) increasing access to quality education; 2) increasing safety for girls in schools and communities; and 3) promoting positive health behaviors have all shown promising signs of progress. Beyond increasing access to education, GLEE has shown substantial progress in terms of increasing girls' perceived safety in schools and communities. GLEE has also shown progress in expanding girls' knowledge and/or attitudes about family planning and family planning decisions, menstrual hygiene, some forms of SRGBV, and some nascent behavior change. Generally, the evaluation team found much larger differences between baseline and midline girls in GLEE schools than between girls at GLEE schools vs. control schools at the midline. This may in part be due to a high number of other education programs operating in the control schools, preventing them from acting as true controls. However, some important differences between both baseline and midline and between treatment and control have been identified, as have process-related findings.

INCREASED TRANSFER TO FORMAL SCHOOL

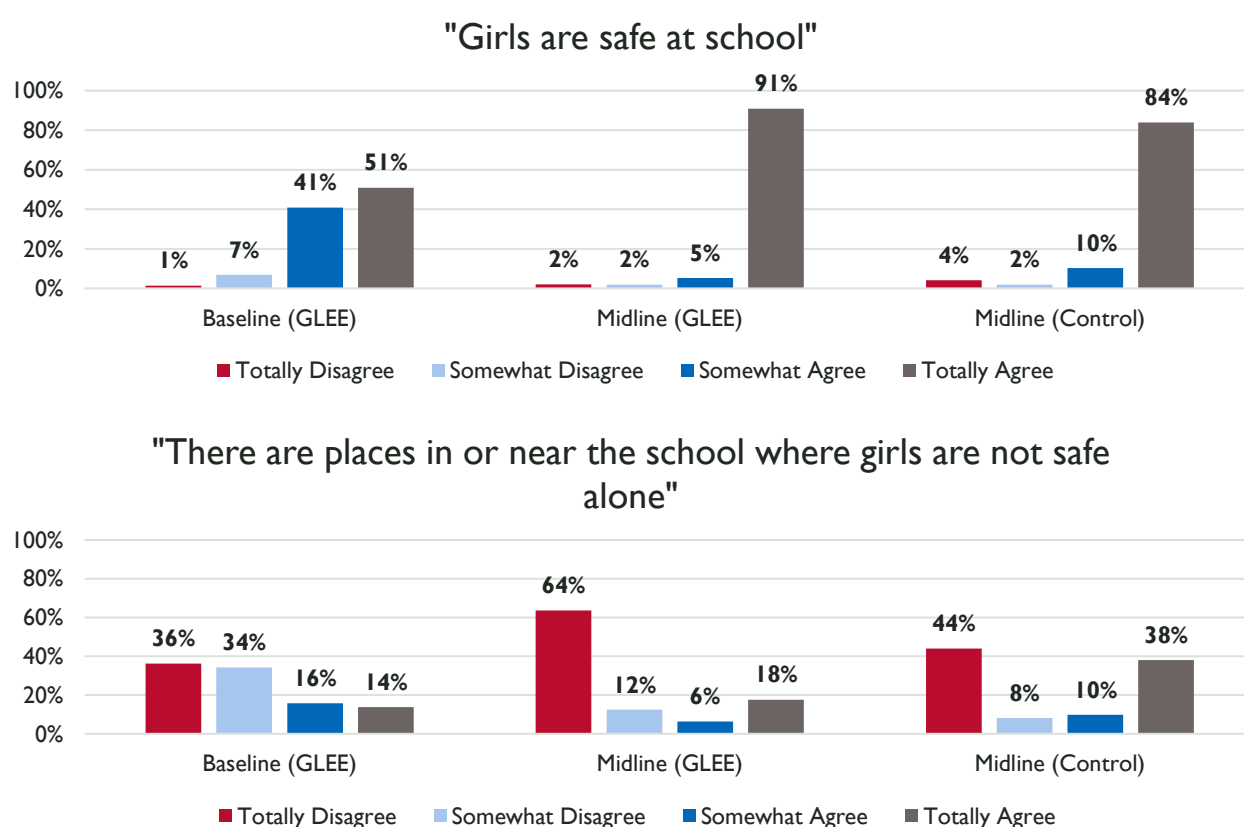
To date, 16,535 girls and boys who were out of school enrolled in ASC or formal education through the GLEE program. Overall, respondents reported positive perceptions of the ASCs, where facilitators were well-trained, timely, and committed. Overall, there have been high rates of transfer from ASCs to formal schools for both boys (78.2 percent) and girls (69.6 percent). Both girls and boys transfer rates have improved throughout the activity and the gap between girls and boys transfer rates has shrunk.

Once in formal school, several program components serve to support girls to stay in school. Adult respondents highlight the importance of school fees; 72 percent of GLEE principals saw this as an important element of the program to keep girls in school. Girls themselves highlighted the importance of the mentors (43.5 percent) and peer educators (21.5 percent). One girl explained, "Thanks to the GLEE mentors' sensitization, our parents have understood the importance of education for girls, the risks of early marriage." (Adolescent girl, Mopti Region)." Although school-level data on dropout is limited, between baseline and midline there was a marked increase in the rate of girls who said they planned to attend school the next year, from 68 percent at baseline to 99.4 percent at midline.

For all of these positive changes, more work remains to be done, particularly in terms of ensuring that students receive quality education once they arrive in the schools. GLEE only recently began tracking the retention ASC transfers in school and overall data quality on school enrollment, attendance, and dropout are limited.

IMPROVEMENTS IN GIRLS' SAFETY AND HEALTH

GLEE's communication program on girls' education, safety, and health has contributed to girls' and community members' knowledge about health and safety issues. Critically, significantly more girls in GLEE schools at midline agree with the statements "girls are safe at school" and "there are places in or near the school where girls are not safe alone" than girls in GLEE schools at baseline or control schools at midline ($p < 0.01$ for both).



Additionally, significantly fewer girls report missing school due to safety concerns.

Knowledge building and sensitization on issues of family planning and menstrual hygiene have increased girls' knowledge and shifted their attitudes on these topics. For example, significantly more GLEE girls said they were comfortable with the idea of going to school when they had their period at midline (70.2 percent) than at baseline (46.9%) ($p < 0.01$). However, these changes in attitude do not necessarily yet translate to a significant difference in behavior. Although fewer GLEE students at midline than at baseline reported staying home because of menstruation (16.1 percent vs. 21.1 percent), the difference was not statistically significant ($p = 0.43$). The program has recently begun to implement training on the production of sanitary pads so that girls can fabricate and use their own pads. Data on student use of

community health centers (CSCOM) is limited. . To respond to data issues, GLEE has begun to implement new data collection tools at CSCOM.

COMMUNITY MOBILIZATION

GLEE has been successful in its work with CGSs by building the capacity of key community partners and familiarizing them with their roles and responsibilities. As a result, CGS members have been able to take charge of the ASCs and local schools and are now equipped with the skills and tools to continue managing them. One CGS president reported, “I never thought that I would one day be in charge of managing a school since I did not go to school. I have a better understanding of the importance of education and especially the value it brings to girls. Apart from that, I can make decisions for my village. We got sewing machines for the children. In addition to the classes, a professional tailor comes to teach them how to sew. We are responsible for the management of all the facilities and the village itself participates in their maintenance” (CGS President, Kayes). However, CGSs may not have the capacity to design their action plans or their continued commitment to promoting girls' schooling and health without external support, and more work remains to be done in building their capacity to sustain the project work.

INSTITUTIONALIZATION

GLEE has succeeded in bringing together the education, health, and community sectors around a project focusing on girls. However, there is limited evidence of progress on the institutionalization of these partnerships and the program elements that have driven success, particularly paying school fees, providing ongoing funding for ASCs, and supporting ongoing community mobilization efforts through support of CGS and continuation of the mentors' program.

MONITORING AND EVALUATION

GLEE's monitoring and evaluation system requires further strengthening in order to ensure ongoing success and sustainability of the activity, as well as to identify some potential areas where the activity can be strengthened. The most important areas for improvement are in tracking ASC students' progress once they transfer to formal schools and in monitoring CSCOM records to ensure youth-

friendly services are delivered. GLEE has just begun to address both these reporting needs; continuation of this work is essential.

RECOMMENDATIONS

In the remaining years of the project, the GLEE activity should focus on expanding on its past achievements while working to increase further institutionalization of the systems it has put in place. The evaluation team specifically recommends the following:

Strategic Objective 1 - Decreasing key barriers faced by adolescent girls to accessing quality education

- 1) Identify strategies to continue increasing the transfer rate of students from ASCs to formal schools, focusing on equalizing the transfer rate between girls and boys by increasing girls' transfers.

- 2) Identify opportunities to partner with other, complementary projects (such as school feeding programs) to establish opportunities for cross collaboration (e.g., expanding school feeding programs to support both schools and ASCs).
- 3) Continue work with CGS and other community actors to build CGS capacity to design and implement action plans without external support. This may involve further training on implementing the CAA as well as work with national and regional government actors to ensure funding for these activities.
- 4) Work with the Government of Mali to identify ways to institutionalize key program elements, possibly including payment of school fees, ongoing support for ASCs, support for CGS activities, and support for other community mobilization strategies, particularly the mentors.

Strategic Objective 2 - Improving safety of girls in schools and their communities

- 5) Continue efforts to strengthen change in behavior and attitudes around SRGBV among principals, teachers, and students and continue to strengthen safeguards to limit opportunities for any form of SRGBV in schools. Similarly, more should be done to address the perception among some female students that they are to blame for harassment or abuse.
- 6) Take steps to ensure that all GLEE schools display the SRGBV hotline posters prominently. Put in place additional safeguards to ensure the anonymity of incident boxes and provide further sensitization to girls on the safety of its use. Bolster the confidant system to ensure its sustainability once the project ends. Consider working with GLEE schools to adopt consistent and frequent opening of the incident boxes across all schools such that any incidents are referred in a timely manner.

Strategic Objective 3 - Increasing knowledge and adoption of positive health behaviors of adolescent girls

- 7) Continue to reinforce the capacity of CSCOM focal persons to be able to cater to adolescents' needs in the communities. In addition to creating safer and friendlier spaces in the CSCOM to assist the girls, a strategy should be devised to make it easier for the girls to access the CSCOM even when they are located at a distance. Girls are often visiting CSCOM after receiving sensitization from mentors and Youth Ambassadors. Once the project will be ended and these figures will not be available anymore in the schools, CSCOM focal person will need to be able to close the gap left by the lack of these project figures.
- 8) Monitor the results of the menstrual pad production training to identify any further work that needs to be done to support girls' menstrual hygiene management.
- 9) Ensure that family planning training for boys is effectively increasing boys' understanding of the importance of condom use.
- 10) Continue efforts to ensure functioning WASH stations with soap or ash are available in all GLEE schools, Increase the number of schools with latrines equipped with menstrual hygiene compartments and increase the availability of waste disposal options for menstrual hygiene purposes. Institutionalize responsibility for monitoring and maintaining WASH facilities in all schools.

Recommendations related to project management

- I 1) Strengthen the monitoring and evaluation mechanism of the GLEE supported activities; in particular, ensure the consistent application of GLEE's new systems to monitor a) the retention of ASC transfer students and b) CSCOM data; consider identifying opportunities to monitor teacher implementation of GLEE approaches. Integrate government oversight of GLEE monitoring activities.
- I 2) Put in place an exit strategy focused on ways to sustain the changes implemented in the GLEE schools and communities. In particular, the strategy should include a clear indication of how each activity will be continued (or not) after the GLEE activity ends.

EVALUATION PURPOSE AND PROGRAM BACKGROUND

Despite ongoing efforts by the government in Mali, access to school remains low. The World Bank reported primary net enrollment rates and completion rates in 2018 to be at 59 percent and 50 percent respectively, with girls facing lower rates on both. The situation is more dire at the secondary level, where the overall net enrollment rate is 30 percent and that of girls is just 27 percent (World Bank, n.d.). Malian girls face a plethora of barriers to accessing the high-quality education promised by the Sustainable Development Goals. According to UNICEF, barriers include poverty, child marriage, child labor, and lack of nearby open schools (UNICEF, n.d.). Insecurity in the schools, which has been on the rise in Mali since 2012, has further exacerbated this situation. Countries in the Sahel region have witnessed an increase in school attacks. Human Rights Watch reports that Mali witnessed 60 attacks in 2019 alone, and an additional 27 attacks were recorded last June when middle schools had reopened for exams (Human Rights Watch, 2020). These attacks result in school closures and raise concerns about school safety. Those students who are able to attend school encounter low school quality, with a lack of teaching and learning materials, a lack of qualified teachers, and poor facilities. According to UNICEF, this lack of overall quality is associated with low learning levels, with a majority of students completing fifth grade without mastering basic reading and mathematics skills (UNICEF, n.d.). Barriers to girls' enrollment in upper primary and secondary schools are particularly complex and interrelated. They include social, economic, and cultural factors that influence norms and behaviors at individual, community, and societal levels. These factors are influenced and reinforced by the gender-inequitable attitudes held by teachers, parents, and the larger community. Adolescent girls face additional specific barriers to education, such as risk of gender-based violence, lack of secure and hygienic latrines with hygienic menstrual disposal systems reserved for girls, and parents' preference to send boys to school.

To combat these challenges, the United States Agency for International Development's Mali Mission (USAID/Mali) has funded the Girls Leadership and Empowerment through Education (GLEE) activity, implemented by Winrock International and a consortium of partners (IntraHealth International, the Center for the Promotion of Human Rights and Development in Africa [CPHDA], Groupe d'Animation Action au Sahel [GAAS], and Œuvre Malienne d'Aide à l'Enfance du Sahel [OMAES]). GLEE seeks to increase school access for adolescent girls in the Mopti and Kayes regions of Mali by:

- 1) Decreasing key barriers faced by adolescent girls to accessing quality education
- 2) Improving safety of girls in schools and their communities
- 3) Increasing knowledge and adoption of positive health behaviors of adolescent girls

The GLEE theory of change “posits that to increase girls' enrollment and success at school, change is needed at the individual level (the girls themselves) and within their social groupings and institutions: their peers, families, schools, healthcare facilities, communities, and the structures that support them.” The program uses a variety of programmatic approaches to implement this theory of change, including: developing and supporting Accelerated Schooling Centers (ASCs) to ease the transition into school for out of school girls; capacity-building of teachers to work with all students, particularly those coming from ASCs; provision of scholarships and other materials to reduce cost burdens for girls attending schools and ASCs; work through community development agents (CDAs) to build the capacity of School Management Committees (CGS, from the French Comité de Gestion Scolaire) members; mentorship and peer education (including capacity-building and training for mentors, peer educators, and youth

ambassadors); provision of teaching and learning materials; support to establish youth-friendly health centers; improved school water, sanitation, and hygiene (WASH) facilities; development and implementation of a school-related gender-based violence (SRGBV) reporting system and protocol; and targeted social behavior change communication.

GLEE ACTORS IN COMMUNITIES

CDAs: CDAs are GLEE staff located in field offices. They support project implementation on the ground, and conduct the community assessment appraisal (CAA), sensitization activities, and training activities in the communities.

CGS: CGSs are local representatives of the mayors at the school level. They are implemented nationwide in Mali. The GLEE activity supported CGSs (as well as parents' and mothers' associations) through trainings to enable them to carry out their functions. CGSs are responsible for management of school fees, with which the project pays for girls enrolled in the schools, and for the development of the school plan, which defines how funds are spent in the school.

Mentors: Mentors are GLEE activity volunteers (mainly female) coming from the villages where the project is implemented. After a training provided by GLEE, they are deployed in the schools and in the communities to conduct sensitization and training activities. They are also in charge of extracurricular activities with girls in schools.

Youth Ambassadors and Peer Educators: Youth Ambassadors and Peer Educators are school-based, student volunteers who conduct sensitization and training activities in schools.

Grandmothers: "Grandmothers" are trusted, older female community members trained by the project to support activities related to reproductive health and menstrual hygiene.

Community Health Centers (CSCOM) Focal Points: The GLEE activity is working with CSCOMs located close to the project schools. In each CSCOM, a focal point for the GLEE activity is in charge of GLEE's activities in the health center.

USAID/Mali contracted with EnCompass and its partner CEPROCIDÉ (le Centre de Promotion de la Citoyenneté pour le Développement Durable à la Base²), to conduct the midterm evaluation of GLEE to measure GLEE's progress in achieving its goals and identify strengths and opportunities to fortify the current program design, its implementation, and future institutionalization of its most impactful elements. This document serves as the midline report for the GLEE activity.

USAID, Winrock International, the other GLEE consortium partners, and the Malian Ministry of National Education (MEN) represent this report's intended audience. It is hoped that evidence captured

² In English, Center of Citizenship Promotion for Basic Sustainable Development

in this report will be a useful resource in strategic decisions as the GLEE activity moves from the base period into the option years.

EVALUATION QUESTIONS

In order to evaluate the progress GLEE is making in achieving its goals, this evaluation will investigate: 1) implementation progress, 2) project management, 3) progress toward expected results, and 4) lessons learned and the sustainability of results. The evaluation team will seek to collect data on the following seven evaluation questions:

- 1) To what extent has the activity contributed to girls' enrollment and retention in schools?
- 2) To what extent did the GLEE activity reach its targets of new entrant students (including number of new entrants in Grade 1 and number of entrant children from ASC in other grades)? Why/why not?
- 3) To what extent did capacity-building efforts for education personnel (teachers, education administrators), community-based organizations (CBOs), and school governance structures: a) increase knowledge and skills, and b) change behaviors/teaching practices for education personnel, CBOs, and school governance structures?
- 4) To what extent are the systems and processes that are put in place for increasing school enrollment being institutionalized?
- 5) To what extent has the activity improved the safety of adolescent girls in schools and in their communities?
- 6) What is the new knowledge gained by adolescent girls and to what extent has that affected adoption of positive health behaviors among adolescent girls?
- 7) How does project management (financial, human resources, technical, and monitoring, evaluation, and learning [MEL] systems) affect program implementation and the achievement of results?

By addressing these questions, the evaluation will provide USAID/Mali, the GLEE implementing partners, and other relevant stakeholders with information needed to help the GLEE team identify ways to continue to strengthen the activity's immediate and long-term impact. The full evaluation matrix can be found in Annex 2.

EVALUATION METHODS AND LIMITATIONS

Given GLEE's complex nature and the mix of questions proposed, the evaluation team applied a convergent, parallel, mixed methods design where qualitative and quantitative data are collected simultaneously and analyzed separately before findings from both are brought together for interpretation. The different methods are outlined below. This section of the report provides an outline of the methods and the most important limitations to the study. Further details about the methodology and additional limitations are included in Annex 2.

Desk Review. In addition to the primary data collection, the evaluation team conducted a desk review of existing project data prior to the start of field work to minimize duplication in data collection. The review included the results of the baseline and qualitative midline, annual reports, and findings from routine MEL activities for the project.

Quantitative Data Collection. The quantitative portion implemented a quasi-experimental design in which a sample of GLEE schools is compared to a sample of control schools using a slightly modified version of GLEE's baseline survey along with a survey of school principals and a school inventory. The quantitative data collection focused on quantifying program gains in desired outcomes: increased school access, retention, and completion for adolescent girls, improvements in girls' security at school and in their communities, girls' adoption of health-seeking behaviors, and girls' perceptions of GLEE activities.

Qualitative Data Collection. The qualitative portion implemented focus group discussions and interviews with key project stakeholders in a sub-sample of GLEE-supported communities and schools. Through the qualitative data collection, the team sought to capture lessons learned and to better understand which GLEE program elements and contextual factors are associated with project outcome levels.

Data collection tools were carefully vetted prior to field work. Details regarding the development of the quantitative and qualitative data collection tools, including the origins of each tool and information about the cognitive testing and piloting process, are included in Annex 3, along with the tools themselves.

SAMPLE

The primary population of interest is girls aged 10–18, the primary beneficiaries of GLEE programming in the Mopti and Kayes regions of Mali. The sample provides estimates of the target population that can be disaggregated by project and control schools and student age group (10–12 and 13–18), permitting comparison of GLEE and non-GLEE schools. To sample the girls, a two-stage stratified cluster sample design was applied. At the first stage, the evaluation team selected a sample of 140 public schools (70 GLEE and 70 control) for a target sample of 60 GLEE and 60 controls schools and 10 replacement schools for each school type. To select GLEE schools, the schools participating in the program were stratified by educational administration district (CAP)/commune and school level (primary or lower secondary). In areas that had been pre-identified as not carrying any safety-related risk, all GLEE lower secondary schools were selected for inclusion in the study while the primary schools were selected within each region/commune using a probability proportionate to size approach. Originally, the evaluation team had planned to use propensity score matching (using school size, level, socio-economic status, and urban/rural location) to identify control schools; however, the requisite data were not available. The team randomly selected schools, but because of the recent expansion in GLEE schools, several schools were randomly selected for participation as control that, in fact, were receiving GLEE programming. These schools were removed from the sample and the remaining control schools were selected with the help of GLEE MEL officers for Mopti and Kayes. These officers identified the schools nearest to GLEE schools, either in the same commune or, in cases where GLEE is working in all schools in a commune, the nearest non-GLEE commune. The same number of primary and lower secondary schools were selected in each CAP whenever possible. This resulted in the selection of 60 treatment and 60 control schools for inclusion in the study along with 10 replacements for each.

In the second stage, the evaluation team used the school registry to randomly select a group of seventeen girls (two as possible replacements), stratified by age group (10–12 vs. 13–18). In lower

secondary schools, only older (13–18) girls were selected, while in primary schools, the age groups included were determined by the ages represented within the selected school. The target sample size was 1,800 girls. The final sample was 1,749 girls (924 treatment and 825 control), who were recruited from 60 GLEE schools and 57 control schools. Annex 2 provides more details about the quantitative sample, including a table with further breakdown of the sample, the sample size calculation, the minimum detectable effect size, and sample weighting.

While at the selected GLEE and control schools, research teams also interviewed principals and conducted school inventories. The teams interviewed 113 principals (56 from GLEE schools and 57 from control schools) and inventoried 112 schools (55 GLEE schools and 57 control schools). Schools were selected using the method described above. Each school has one principal, who was sampled to participate in the study.

A sub-sample of the GLEE-supported communities selected in the quantitative sample villages (eight from Mopti; eight from Kayes) where the GLEE schools are located were purposefully selected for qualitative research. Community characteristics that were considered in this purposeful selection were determined during the evaluation design workshop, and included community size and stability.

In 10 of the sites, data collection focused on gathering data from groups in schools (in-school girls, teachers, CGS, GLEE mentors, and peer educators/youth ambassadors) whereas in the remaining six sites, data collection focused on gathering data from CSAs and the community (ASC girls, ASC facilitators, school grandmothers, and health center staff). Principals were sampled in all sites. In some sites, it was not possible to recruit all participant types. The sampling process for choosing the communities in which qualitative data collection occurred and the sampling process for individual participants is also described in Annex 2.

At the national and regional level, key informants were identified by USAID and Winrock as critical stakeholders in the Direction Nationale de l'Enseignement Fondamental (DNEF, National Directorate for Basic Education) and Direction Nationale de la Pédagogie (DNP, National Directorate for Pedagogy) in the Ministry of Education, the Direction Nationale de la Promotion de la Famille (DNPF, National Directorate for Family Promotion) in the Ministry of Women, Children and Family Promotion and the Direction Nationale de la Santé (DNS, National Directorate of Health) and the Centre National d'Information, d'Education et de Communication en Santé (CNIECS, National Center for Information, Education and Communication in Health) in the Ministry of Health. Key staff from Winrock and other implementing partners also participated in interviews. A full list of all key informant participants appears in Annex 3.

INSTITUTIONAL REVIEW BOARD

Data collection instruments and protocols were reviewed by the EnCompass institutional review board and received approval on April 19, 2021.

DATA COLLECTION TRAINING, DATA COLLECTION, AND ANALYSIS

Qualitative and quantitative data collection happened simultaneously April 21–30, 2021. Fifteen quantitative and four qualitative data collection teams were deployed in Kayes and Mopti to complete

data collection. The 3-person quantitative data collection teams each consisted of two data collectors (at least one female) and one supervisor. The 4-person qualitative data collection teams each consisted of three data collectors (at least one female) and one supervisor. In both quantitative and qualitative data collection teams, the team supervisors supported data collection. Data collectors and supervisors were trained over a 4-day period beginning on April 14. The quantitative training session included a presentation on the data collection instruments and protocols and techniques for sampling students in schools. Data collectors practiced sampling procedures and administering the data collection instruments using tablets. Assessor Accuracy Measurement (AAM) was performed for quantitative data collectors using the Principal Survey. Items of concern were discussed after analysis to retrain enumerators before data collection. A total of 63 data collectors participated in the training, of whom 45 were selected to participate in data collection. These data collectors were selected based on their performance during the pilot and results obtained from the AAM. Qualitative data teams received training on the sampling, recruitment, and informed consent/assent procedures for the qualitative sample. The bulk of the training focused on the data collection tools for the evaluation, and in particular, approaches for conducting ethical research on sensitive topics with adolescents using those tools. Trainees led mock participatory focus groups with other trainees acting as participants to practice the techniques and procedures of the data collection approach. Both quantitative and qualitative data collection trainees participated in the pilot (described in Annex 3).

DATA QUALITY CONTROL

In addition to the quality control measures applied during training, the team supervisors sampled students at each school and ensured data collectors were following proper data collection protocols. Supervisors also sent daily updates of the work carried out to the evaluation team. In addition to the team supervisors, two field supervisors (one per region) circulated among the qualitative and quantitative teams to verify data quality. These two field supervisors were in charge of maintaining communication with the evaluation team and flagging problems, such as school replacements, as they occurred. The data collectors used a WhatsApp channel to communicate challenges in the field and receive feedback and support from CEPROCIDÉ and EnCompass.

The quantitative and qualitative teams both used tablets to collect data. Electronic data collection provides multiple quality control benefits. First, range check and automatic skip patterns are built into the data collection software, helping reduce the potential for error. Second, data collection teams uploaded data on a daily basis, permitting the evaluation team to conduct daily quality control checks of incoming data. Recurring data collection or upload errors were flagged for CEPROCIDÉ and the data collection teams so that issues were addressed on a timely basis. Once all the data had been received, the complete data set was cleaned, weighted, and analyzed (described in detail in Annex 2).

ANALYSIS

The evaluation team compared quantitative data from 1) GLEE and control schools and 2) baseline and midline GLEE schools to measure difference in enrollment, entrance, and retention rates as well as adolescents' knowledge, perceptions, and behavior regarding GLEE curricular content. Secondary analyses of existing GLEE monitoring data as well as CAP entrance and transfer data were analyzed in tandem with primary quantitative data collected to verify data quality and to complement primary data collected. Qualitative data were also analyzed to further inform findings from the quantitative data. Further details on the quantitative and qualitative analysis can be found in Annex 2.

LIMITATIONS

While overall a robust evaluation design, several limitations affected this study. One major limitation was that multiple education programs remain active in the GLEE activity areas. It was not possible to avoid schools with some form of support given the saturation of programming in the area. As a result, many of the control schools cannot be considered true controls. For this reason, comparison of GLEE and control schools may not provide a true indication of the effect the GLEE activity has had. Moreover, while a random sample was drawn for GLEE schools, as noted before, this was not possible for control schools and the latter were sampled using a convenience sample. In what follows, we report comparisons between GLEE and control schools as well as GLEE baseline and midline schools. Importantly, there are no baseline data for control schools, which limited the research team's ability to isolate the impact of the GLEE activity.

In addition to these methodological challenges, the evaluation team encountered significant challenges related to security issues, COVID-19, and teacher strikes. The security situation limited the schools (and even regions) from which the evaluation team could sample, biasing the overall sample toward more secure locations. While COVID-19 created logistical challenges for the team during training and data collection, the biggest issue to the study caused by the pandemic was that it closed down schools during a year of program implementation, limiting students' in-person learning. Students' in-person participation in activities had been severely limited even prior to the pandemic because of frequent teacher strikes. In fact, the GLEE activity has not been implemented for a full school year during any project year.

A list of further limitations is presented in Annex 2.

FINDINGS

The evaluation findings below are organized by research question. Questions 1–3 focus on implementation effectiveness, questions 4–6 focus on sustainability of progress, and question 7 looks at governance and practices that helped or hindered the smooth implementation of the project.

Q1: TO WHAT EXTENT HAS THE ACTIVITY CONTRIBUTED TO GIRLS' ENROLLMENT AND RETENTION IN SCHOOLS?

1.1 HOW HAVE ENROLLMENT, DROPOUT, AND ATTENDANCE RATES CHANGED AT GLEE SCHOOLS? HOW DO THESE RATES COMPARE TO RATES AT CONTROL SCHOOLS?

In key informant interviews, representatives of the Ministry of Education attributed an increase in school enrollment to the GLEE activity. In terms of the absolute number of new enrollments (discussed under question 2), it is true that the program led to the enrollment of thousands of girls and boys, both in ASCs and in formal schools. However, the story of enrollment rates, especially compared to control schools, is more complicated. Before entering into this discussion, there are two major caveats to discuss. First, as noted in the limitations section, the control schools included in this study often receive other interventions which may also increase enrollment. Therefore, comparisons show whether GLEE is effective compared to other, similar interventions rather than true control schools. Second, with regard to enrollment data inconsistencies in data indicate a potential lack of accuracy in the school registries from which these data are drawn. We, therefore, limit reporting to findings that were confirmed in field

visits and qualitative findings. All schools in which the school inventory was completed provided enrollment data in their registry records.

Primary schools with enrollment data (both GLEE and control) saw significant increases ($p < 0.01$) in average girls' enrollment per school both in Kayes and Mopti. Similarly, primary schools saw an increase in the proportion of girls' enrollment when compared to Non-GLEE schools ($p < 0.05$). Significance in both the average and the proportion of girls' enrollment disappeared when controlling for the region.

As with the primary schools, secondary schools saw significant improvements in girls' average enrollment ($p < 0.01$). However, there was no significant difference between GLEE and Non-Glee schools overall or at the regional level. The impact of other programming in Non-GLEE schools included in this study should be considered when reviewing the lack of significant difference in GLEE and non-GLEE enrollment levels.

Exhibit 1: Proportion of girls enrolled

REGION	GROUP	2018-2019	2019-2020	2020-2021
Kayes	GLEE Schools	42.9%	46.1%	47.4%
	Control Schools	42.2%	48.0%	45.4%
Mopti	GLEE Schools	49.3%	54.6%	56.4%
	Control Schools	50.9%	51.9%	52.1%

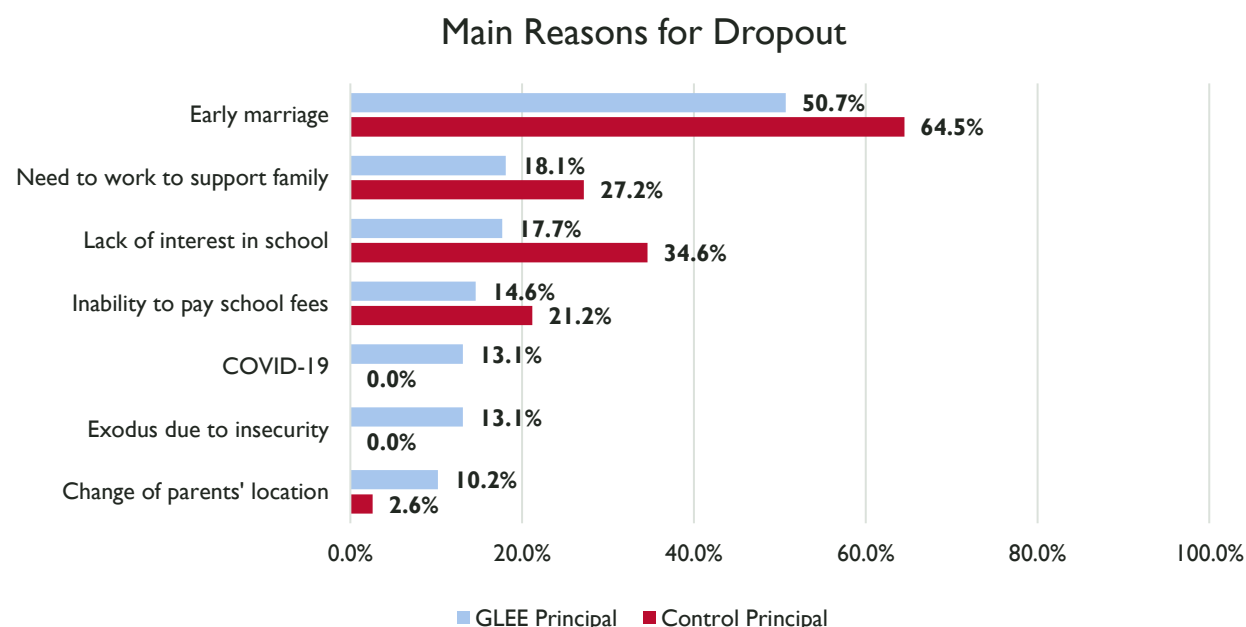
Exhibit 2: Increase in girls enrollment between 2019-2020 and 2020-2021

REGION	GROUP	% INCREASE IN PRIMARY	% INCREASE IN SECONDARY
Kayes	GLEE Schools	84.3	80.9
	Control Schools	99.3	31.5
Mopti	GLEE Schools	143.9	78.7
	Control Schools	152.1	58.6

In both treatment and non-GLEE schools, data on grade completion and dropout were far less common than data on enrollment. The total number of schools that recorded this data varied by school year and grades covered by the school. Although consistently higher numbers of GLEE schools capture dropout and completion data, fewer than half of GLEE schools record these data.

When asked about dropouts at their school, 51.8 percent of GLEE school principals vs. 55 percent of control school principals interviewed indicated that girls had dropped out in the past school year. This difference is not statistically significant. Principals mentioned a number of reasons for dropout. Among these, the most common was child marriage, with 50.7 percent of GLEE principals and 64 percent of control principals listing this as a cause. The second most common reason for dropout cited was "lack of interest in school" with 17.6 percent of GLEE principals and 34 percent of control school principals noting lack of interest. It is notable that only GLEE principals identified dropout because of COVID-19 or insecurity.

Exhibit 3: Reasons for dropout identified by principals



Source: GLEE Evaluation Principal Survey

In the girls' survey, girls were asked whether they planned to enroll in school during the next school year. In GLEE schools, there was a marked increase in the rate of girls who said they planned to attend school the next year, from 68 percent at baseline to 99.4 percent at midline (99.9 percent in non-GLEE schools). At baseline, girls listed a broad range of reasons they would not continue school, including inability to pay school fees (23.4 percent), need to work with their families (19.4 percent), not enjoying school (8 percent), and child marriage (4 percent). In this evaluation, only a small number (0.6 percent) of girls provided reasons for dropout since they were only asked this question if they did not intend to continue school; however, the only reasons mentioned were the need to work with their families and child marriage.

1.2 IF INCREASES IN ENROLLMENT AND RETENTION HAVE BEEN OBSERVED, WHICH OF GLEE'S ACTIVITIES HAVE CONTRIBUTED TO REDUCING BARRIERS TO ENROLLMENT, ATTENDANCE, AND RETENTION?

According to GLEE's activity plan, several activities were put in place in GLEE schools in order to support girls' enrollment, attendance, and retention. These include: the work in ASCs; payment of school fees; activities with mentors, youth ambassadors, and peer educators; and community mobilization work with CGSs and women's organizations. In this section, we will review the evidence on each of these factors in turn. The sustainability of these approaches will be discussed under question 4.

Creation and support of ASCs. The GLEE activity has established ASCs, covered their operating costs, and trained ASC facilitators. Although GLEE is not the only program in Mali supporting ASCs, the project's approach to ASCs strengthens school transfer by linking ASCs to transfer schools and providing further support at the schools after girls' transfer. To establish ASCs, GLEE communities first conduct community assessment appraisals (CAAs) with the support of GLEE staff. During the CAA process, the community enrolls out-of-school girls (and boys) in the ASC and identifies the support needed to maintain the ASCs. The project recruits and trains the ASC facilitator and supports the

equipment of the ASC (desks and learning materials). As discussed under question 2, thousands of students have transferred from GLEE-run ASCs to GLEE-supported schools.

Once students transfer from ASCs, there is some anecdotal evidence of academic success. According to respondents from the entire education chain at the local level (CAP Directors, Pedagogical Advisors, school principals and teachers), the students from the ASCs adapt easily to the formal school and, in many cases, they take the lead in their class. In fact, some of the strongest ASC students are able to enter into an age-appropriate grade level after nine months of ASC classes, despite having never attended formal school. Apart from this anecdotal evidence, in the CAPs where the evaluation took place, there is no formal data to assess ASC students' adaptability, performance, or retention in the formal system. School registries examined do not regularly indicate if students are ASC transfers at either GLEE or control schools, making it impossible for the research team to gauge performance and retention level among these students. In some locations, stakeholders did not see this data as important, while in others they acknowledged it was important, but did not collect it. In the absence of records, it was not possible to track retention and ongoing performance of ASC transfer students. GLEE began tracking the retention of ASC transfer students in the most recent project quarter (Year 4 Quarter 2), which is an important step in ensuring the effectiveness of the programming. However, to the evaluation team's knowledge overall completion and dropout rates (i.e. for both ASC transfers and non-transfers) at schools are still not recorded.

Payment of school fees. GLEE pays school fees for all girls in GLEE schools. Among adult respondents, school fees were frequently mentioned as one of the most important factors keeping girls in school. For example, 72 percent of principals in GLEE schools identified the payment of school fees as a way the GLEE activity successfully responded to girls' challenges in attending schools. Indeed, while about half of the principals in both GLEE and control schools felt girls had challenges in completing school, only about 15 percent of principals in GLEE schools thought that difficulty in paying school fees contributed to girls' dropout, compared to 21 percent of principals who thought girls faced challenges in control schools. When asked about which activities had been more beneficial to support girls' enrollment and retention in schools, the majority of respondents reached during qualitative interviews (school principals, teachers, communities, mentors) mentioned support for school fees as the first response. Members of the CGSs mentioned in 4 out of 9 instances how the payment of school fees has constituted an important factor in sending girls to school: "the activities implemented by the project have helped to reduce these difficulties, for example here in our community there are no families here who say that their child does not go to school because of school supplies, nor because of lack of means." (FGD CGS, Mopti Region). GLEE's own reporting indicated that the large majority of parents contend that the exemption from paying school fees gives them peace of mind and encourages them to send their children to school.

While school fees are important, they may not be sufficient to support girls, particularly those from ASCs. In qualitative interviews, both principals and teachers noted that once girls transferred to formal schools, they no longer receive the school material kits that they received while attending ASCs. This means the girls are not materially prepared to learn, which can demotivate them. One principal noted that, "... these girls are not very motivated to study because some of them do not even have a notebook to write in. So, the project also does not accompany these girls when they arrive in the transfer schools" (School Principal, Mopti Region).

Far fewer girls in GLEE schools saw school fees as important. Indeed, only 18.4 percent of girls in GLEE schools identified receiving this support at all, and 16.4 percent said that this support helped them

attend school more regularly. However, it may be that many girls are unaware these payments are being made since they are directly managed by the CGS and school administration.

In addition to the factors noted above, attitudes about school attendance after pregnancy and marriage have begun shifting for girls. More specifically, when comparing baseline to midline results more girls also agreed that girls who had had babies or who had gotten married had the right to continue attending school (63.3% Endline vs. 45.8% Baseline). There were similar increases in the percentage of girls who agreed that married girls should have the right to attend school. This attitude shift is important given that marriage and pregnancy are common reasons for dropout among girls.

Mentors, peer educators, and youth ambassadors. When asked about what program elements allowed them to attend school regularly, girls in the quantitative survey consistently mentioned the mentors (43.5 percent), peer educators (21.5 percent), school fees (16.4 percent), and youth ambassadors (14.3 percent). It is unsurprising that girls mentioned these program elements, as they are the elements with which the girls have the most frequent, direct contact. In the qualitative data, several girls explained that the mentors played an important role in helping girls remain in school through communication with their parents. One girl explained “Thanks to the GLEE mentors’ sensitization, our parents have understood the importance of education for girls, the risks of early marriage.” (Adolescent girl, Mopti Region).

Strengthening CGSs. GLEE has worked to strengthen existing CGSs and establish new ones where needed. Key informants noted that in several communities, GLEE helped reinvigorate or reestablish CGSs. Working through CDAs in Mopti and community mobilization officers in Kayes, GLEE has sensitized CGS members on the importance of the school, trained them on their roles and responsibilities, supported CAAs, and supported development and monitoring of school improvement plans. This had a downstream effect on GLEE’s ability to establish ASCs. According to four of the five CAP Directors interviewed, without the active contribution of the CGSs, it would have been difficult, if not impossible, to create the ASCs and to encourage children’s enrollment in ASCs. The CGSs conducted community sensitizations with support from CDAs. These sessions helped strengthen ASC attendance. In the words of an ASC facilitator in the Mopti region, “Mobilization and sensitization have convinced the parents. Even when the child comes late because of housework, someone (CGS, village chief, matron) goes to sensitize the parents of that child. This has been effective and this is why the mothers of the girls no longer keep them at home” (CSA Facilitator, Mopti Region). Furthermore, according to the Mopti zone coordinator, and corroborated with other statements from respondents from various backgrounds, “a change in the communities’ perception of girls’ education was observed as the high attendance at the sensitization sessions highlighted the interest in the issues discussed. More and more parents are in favor of their daughters continuing their schooling, whereas they were only destined for marriage and gold panning [CAP de Kéniéba] and rural-urban migration in Mopti.”

Q2: TO WHAT EXTENT DID THE GLEE ACTIVITY REACH ITS TARGETS OF NEW ENTRANT STUDENTS?

2.1 HOW MANY NEW STUDENTS ENTERED GRADE 1? HOW MANY STUDENTS TRANSITIONED FROM ASC TO FORMAL SCHOOL?

GLEE’s performance indicators report that the project has enrolled a total of 16,535 girls in ASCs or formal school through Quarter 2 of project Year 4. This exceeds the 13,362 girls the project originally aimed to enroll. Exhibit 4 shows the annual progress of this indicator. While the project did not achieve

its Year 2 and Year 3 forecasts, Year 4 showed remarkable success. Indeed, as a result, GLEE has exceeded its life of project goal in new enrollment by 24 percent.

Exhibit 4: Tracking of new enrollments in ASCs and in formal education

INDICATOR	PROJECT LIFE OBJECTIVE	YEAR 2 PLANNED	YEAR 2 ACHIEVED	YEAR 3 PLANNED	YEAR 3 ACHIEVED	YEAR 4 PLANNED	YEAR 4 ACHIEVED THROUGH Q2	TOTAL ACHIEVED THROUGH YEAR 4, Q2
Number of girls newly enrolled in ASC or formal school, aged 10–14	13,362	3,151	3,057	7,311	5,564	2,900	7,914	16,535
BY REGION								
Kayes			954		2,073		2,302	5,329
Mopti			2,103		3,491		5,612	11,206
BY TYPE								
ASC			3,057		5,282		5,487	13,826
Back to school			0		282		2,427	2,709

Source: GLEE Annual and Quarterly Reports

The disparities between the results of the second and third years and those of the fourth year are primarily due to issues of security and poor control over enrollment processes. Interviews with GLEE activity officials and implementing agencies shed light on these disparities.

- **Security issues.** The first year was expected to see the opening of 132 ASCs with 35 students per center (4,420 students in total). The high level of insecurity in the Mopti region, and particularly in the teaching academy (AE) of Douentza, prevented these centers from being installed. The improvement in the security situation made it possible to close the gap in the following years.
- **Monitoring community mobilization and the creation of ASCs.** In Kayes, many students who should have enrolled in regular schools were enrolled in the ASCs by accident. The evaluation team did not find definitive evidence of what drove this pattern; however, it may have been a result of poor sensitization around the purpose of ASCs, poor monitoring of enrollment, or parents' interest in sending students to the ASCs, which are generally closer to their homes.
- **Expansion of ASC coverage.** The GLEE activity planned on reaching 13,362 new female learners (in ASCs or formal school) during the life of the project. However, in the original project areas it was not possible to reach this target due a limited number of eligible children. Therefore, the project obtained permission from USAID to expand beyond the original area of intervention (hence increasing the number of target schools). It was this expansion of coverage in Year 4 that allowed the project to meet and exceed enrollment targets.

Exhibit 5 shows a yearly breakdown of the transfer from ASCs to formal schools in the 2018–2019 and 2019–2020 school year (data are not yet available for 2020–2021). The transfer rate of boys from ASCs to formal schools was 80.7 percent in the 2019–2020 school year. While the girls' transfer rate was considerably lower than it was for boys in the 2018–2019 school year (59.1 percent vs. 74.9 percent), the transfer rate among girls increased considerably in 2019–2020, reducing the difference in the transfer rate between girls and boys.

Exhibit 5: Student transfer from ASC to formal education in GLEE ASCs

SCHOOL YEAR	NUMBER OF GIRLS ENROLLED IN GLEE-SUPPORTED ASC	NUMBER OF GIRLS WHO TRANSFER TO FORMAL SCHOOL	% OF GIRLS WHO TRANSFER TO FORMAL SCHOOL	NUMBER OF BOYS ENROLLED IN GLEE-SUPPORTED ASC	NUMBER OF BOYS WHO TRANSFER TO FORMAL SCHOOL	% OF BOYS WHO TRANSFER TO FORMAL SCHOOL
2018–2019	3,574	2,112	59.1%	1,144	857	74.9%
2019–2020	5,564	4,247	76.3%	1,489	1,201	80.7%
Total	9,138	6,359	69.6%	2,633	2,058	78.2%

Source: GLEE DCOP

2.2 FOR THOSE STUDENTS WHO ENTERED FORMAL SCHOOL, WHICH OF GLEE'S ACTIVITIES HAVE CONTRIBUTED TO EFFORTS TO INCREASE NEW ENTRANTS IN FORMAL SCHOOL? WHAT MORE COULD BE DONE TO INCREASE NEW ENTRANTS?

Community involvement. Interviews with members of community organizations (CGS, AME, grandmothers), teachers, school principals, community health workers (CHWs), and GLEE staff unanimously identified community involvement as one of the most important elements in the enrollment of students in both ASCs and schools, although this was not a factor identified in the quantitative survey. This community involvement is supported by a whole system composed of GLEE field agents, peer educators and youth ambassadors at the school level, and community mentors, who play a key role in listening to girls and advocating at the community level.

An example of community involvement is the back-to-school awareness campaigns implemented from August 2019 to January 2020. A total of 270 (Kayes 120, Mopti 150) back-to-school campaigns were conducted in different communities, using messages that were tailored to the specific locations (for example, messages in Kayes discussed the harm gold panning has on girls' health). These campaigns targeted students and parents. The GLEE team reports that these messages drove enrollment in both schools and ASCs.

The effect of ASCs. Anecdotal evidence indicates that the fact that children from the village who had been considered excluded from education are entering school after nine months of instruction has encouraged and motivated others to enroll. The ASCs are seen as offering complete care of their students and use pedagogical methods that result in stronger students when they integrate into the formal system. For these reasons, many parents and even teachers send children already enrolled in formal schools to the ASCs. These children are then returned to formal schooling.

Challenges in ASC-to-school transfer. According to all the stakeholders interviewed, GLEE has been helping the communities in enrolling and re-enrolling pupils in schools. However, some students face challenges in reaching schools when the school is located far from their ASC. To help address this problem, the project has provided bicycles for students who live far away from their transfer school. Nevertheless, according to the responses to the focus group discussions (FGDs) with members of CGSs, school parent association (Association Parents d'élèves, APE), and school mothers association (Association Mères d'élèves, AME), this measure has not been sufficient, as not all students living at a distance are provided with bicycles. Indeed, in Year 4 Quarter 2, only 188 bicycles were distributed (78 in Kayes and 110 in Mopti). In some communities, families from the community where the school is located host girls from neighboring villages. This also creates issues due to lack of resources and lack of

support from the families of origin. In the words of an AME member, “There are families that take them in, but these families take care of everything, their parents don't give anything for the education of their children. We women here can't find anything unless you work as a housekeeper to support yourself, if you have to take care of yourself, your children, and someone else's children, it's not easy at all” (CGS member, Kayes Region).

Many stakeholders noted that the Government of Mali has not implemented the “one village, one school” policy to which it has committed itself. Distances to school make parents unwilling to send young children to faraway schools. While the GLEE activity cannot act on this non-implementation of the policy, the issue of distance to school and hosting families should be taken into consideration in future programming, especially in those communities where families host students coming from faraway villages. The GLEE management team has noted that no new ASCs will be established without a host school nearby.

Q3: TO WHAT EXTENT DID CAPACITY-BUILDING EFFORTS FOR EDUCATION PERSONNEL, CBOS, AND SCHOOL GOVERNANCE STRUCTURES: A) INCREASE KNOWLEDGE AND SKILLS? B) CHANGE BEHAVIORS/TEACHING PRACTICES?

According to the GLEE activity plan, the main targets of the training are: the central or regional services of the Ministries of Education and Health, health agents, school directors and teachers (especially those in grades 3 and 4), GLEE staff, mayor's office staff, local authorities, local organizations, ASC facilitators, members of CGS, grandmothers, local trainers, youth ambassadors, mentors, peer educators, and students. GLEE monitoring data show that a total of 7,944 people were trained over the course of the project, of which 3,355 are women and 4,589 are men. The training results are discussed below.

3.1 HAVE TEACHERS AND PRINCIPALS/DIRECTORS AND MENTORS RETAINED OR MASTERED CONTENT FROM GLEE TRAINING AND MENTORING?

GLEE school teachers and administrators received training in gender and GBV, WASH, security and reproductive health, management of students from ASCs, and the balanced pedagogic approach to teaching literacy.³ The training focused mainly on third and fourth grade teachers because these are the classes to which the majority of students from ASCs are directed. Moreover, GLEE provided training to all the actors involved in sensitization activities at school level, namely, mentors, peer educators, and youth ambassadors.

According to the teachers interviewed, the training helped increase their knowledge of different issues. For example, teachers in primary schools who participated in the FGDs mentioned the importance and usefulness of the training on the balanced approach and how they were able to apply it in the classroom; some also mentioned how the training on SRGBV allowed them to better understand issues related to violence. In the words of one of the teachers interviewed: “We had capacity-building training that helped me a lot. Now I know what I can and cannot do in school” (FGD Teacher, Kayes Region).

³ In the balanced approach, literacy instruction in the early grades relies on a balance among strategies of teaching phonics, reading comprehension, and writing, and consistent routines that teachers can manage easily and that engage students in *thinking about* how to decode/encode, understand what they read, and write (not just mastering the mechanics of these processes) (EDC, 2015).

While principals and teachers see this training as valuable (in the quantitative survey, 84 percent of principals found the training “very useful”), there is not clear evidence on how well they mastered what they learned in the training. Furthermore, teacher transfers may inhibit GLEE implementation in schools by removing teachers who have been trained in the program. For example, one of the school principals interviewed mentioned that he (and some of the teachers in his school) did not receive any training because they are newcomers to the GLEE school. As a result, they have to rely on notes from their predecessors in order to be informed about GLEE’s training and activities. In the school principal survey, only 75 percent of principals reported that they had received training from GLEE in the past three years.

Beyond teachers, all the mentors, youth ambassadors, and peer educators interviewed have participated in GLEE training on different topics. These groups found the training useful both to provide them with information to share with the students at school and to allow for personal growth. One of the mentors interviewed mentioned that the training helped her understand her rights since she had married when she was in grade 5 and so she could not complete her education.

While the evaluation team was not able to obtain objective results of principals’, directors’, and mentors’ mastery of the training materials, there is strong evidence that they have been conducting sessions with girls and that girls appreciate those sessions. Girls in sampled GLEE schools reported receiving training from teachers, mentors, peer educators, and youth ambassadors on school safety (76.3 percent), gender-based violence (73.2 percent), early and forced marriage (75.2 percent), reproductive health (67.6 percent), menstrual health (64.8 percent), and other health topics (family planning and COVID-19, 81.4 percent). The vast majority of these girls (87.6 percent) felt the training was “very useful,” and an additional 10.8 percent felt it was “useful,” meaning that only 1.8 percent of girls did not find the training useful in some way. This indicates that the teachers, mentors, peer educators, and youth ambassadors received some value from the training.

3.2 TO WHAT EXTENT HAVE TEACHERS AND MENTORS BEEN ABLE TO INCORPORATE NEW CURRICULAR MATERIALS AND PEDAGOGIC APPROACHES INTRODUCED BY GLEE?

While there is not observational evidence of the extent to which teachers integrated materials and approaches in the classroom, all the primary school teachers who participated in FGDs reported that the new skills are beneficial when managing the classes. Teachers praised the *Nouvelles de la classe* activity, where the teacher asks the students to tell what they have seen or done on the way to school to build oral production and vocabulary skills. One of the teachers interviewed noted that students particularly appreciate the activities conducted with the radio. According to this teacher, this activity “attracts the children so much” (Teacher, Kayes Region). Secondary school teachers did not report using the new techniques; however, given the grade levels targeted in the training, this is not surprising, as GLEE training targets teachers in earlier grades.

Data collected during KIIs with mentors highlight how the training organized for them is essential to the correct implementation of the activities for which they are responsible. Mentors come from the communities where the project is working and sometimes have a low education level. The training is crucial for them to learn the correct messages and to be able to engage with the students and the communities. All the mentors interviewed shared how the training has been beneficial and how, through this training, they are able to engage with the girls and the students in the schools. As noted above, the majority of both principals and girls in GLEE schools indicated that the sessions conducted by the mentors were “very useful.”

3.3 TO WHAT EXTENT HAVE EDUCATION PERSONNEL CHANGED BEHAVIOR PRACTICES IN A WAY THAT REFLECTS TRAINING AND SUPPORT PROVIDED BY GLEE?

GLEE worked directly with CGSs to build capacity in school planning and governance. The project also provided training in key areas such as WASH practices in schools, gender awareness, safety awareness and planning, and school improvement projects and action plans. The project adopted a participatory approach involving all school and community stakeholders to maximize engagement in the management of their school. According to interview respondents, the GLEE training of the CGSs, especially the training focused on their roles and responsibilities, led parents to take an active role in school management and to work with principals and teachers to improve attendance and learning outcomes. Likewise, the ASCs were set up and maintained with appreciable results because of the capacity-building of community organizations that understood their role and invested themselves fully in them. According to the Bandiagara CAP Director, provision of training, along with material resources, empowered the actors at the grassroots level to manage schools. This was reflected at the local level. For example, a CGS president said, “I never thought that I would one day be in charge of managing a school, since I did not go to school. I have a better understanding of the importance of education and especially the value it brings to girls. Apart from that, I can make decisions for my village. We got sewing machines for the children. In addition to the classes, a professional tailor comes to teach them how to sew. We are responsible for the management of all the facilities and the village itself participates in their maintenance” (CGS President, Kayes).

Despite these positive developments, there is some evidence of the limits of the training as well. Project quarterly reports have noted that some CGSs have difficulty fully developing their action plans and implementing the school projects on their own without the critical assistance of project staff, indicating that continued training and follow-up may be necessary.

3.4 TO WHAT EXTENT HAVE CBOS CHANGED BEHAVIOR PRACTICES IN A WAY THAT REFLECTS TRAINING AND SUPPORT PROVIDED BY GLEE?

The feedback from health center staff is generally favorable. The regional health workers and GLEE focal points interviewed provided detailed presentation of the substance of their training and the role they are supposed to play. However, they were unable to provide specific details about the number and frequency of girls’ visits to the health centers and reasons for those visits. One focal point in the Mopti region said that he had no contact with GLEE since the training, saying he did not work with the project regularly. A GLEE staff member noted that training was often the only time the project engaged with regional health workers.

Conversely, at the local level, CHWs emphasized the benefits of the training they received in relation to their actual practice. One statement from a CHW who participated in the evaluation highlights the importance of the GLEE training activities:

“The GLEE project's support for the improvement of adolescent girls’ health practices focuses on sensitization activities to reduce unwanted pregnancies, early marriage, gender-based violence, GBV, family planning, hygiene, and sanitation. These trainings have shaped me a lot and I receive an incredible amount of respect from the adolescents. Before GLEE, adolescents did not come to the CSCOM, but with GLEE and its sensitizations, their behavior has changed a lot. Even during the COVID-19 period we continued with our activities. When the school was closed, the students, the mentors, the grandmothers and myself would meet in the CSCOM

courtyard at the request of the girls to make sanitary pads and other activities. After the opening of classes, we used masks and respected the barrier measures, but not the distancing with regard to the plethora of students in class. Adolescents communicate with teachers and their parents on subjects considered taboo (menstrual cycle, family planning, forced marriage...) in the recent past” (CHW, Kayes Region).

There is limited data, however, on how this training changes CHWs’ behavior as recorded in CSCOM statistics. According to GLEE staff, the process of getting reliable statistics on health center use has been cumbersome. In fact, many users did not feel comfortable entering information into GLEE’s original data tracker. In the explanation given by GLEE staff, the original data tracker required input of extensive information (mainly related to “treatment” provided) which was not necessary for monitoring purposes. Since the setting of the visits is often informal (some CSCOM health providers report receiving visits from the girls at home or outside of working hours), it has been difficult for the health workers to record the information in the tracker. Therefore, existing data likely under-report the use of health facilities and limited data on the quality of care. As a result, GLEE has developed a new form that should allow health workers to take note of users attending the center and data should become more readily available.

Q4: TO WHAT EXTENT ARE THE SYSTEMS AND PROCESSES THAT ARE PUT IN PLACE FOR INCREASING SCHOOL ENROLLMENT BEING INSTITUTIONALIZED?

GLEE is anchored at the inter-ministerial level. It is mainly linked to the Direction Nationale de l'Enseignement Fondamental (DNEF) of the Ministry of Education, which oversees all basic education schools, but also has links with the Direction Nationale de la Pédagogie, which designed the ASC curriculum. Because of the family planning component of GLEE, the project is linked to the Ministry of Women, Children and Family Promotion, especially with the National Directorate for Family Promotion (DNPF). Because of the project’s work on menstrual health and reproductive health, it is also linked to the Ministry of Health and, more specifically, to the National Directorate of Health and the National Center for Information, Education and Communication in Health (CNIECS). Although the project is well known at the central government level, most of its activities are carried out at the grassroots/local level.

Local government representatives are directly involved in GLEE’s activities, and several actions important for the projects’ functioning are already locally managed. For example, low-cost or no-cost medical visits and follow-up consultations are the responsibility of the health services, not the project. Likewise, the evaluation of CSAs for the transition of students to the formal system is carried out by the pedagogical advisors of the CAPs and not by the project.

Although all these activities are part of the normal operation of ministry administration, there is little evidence of their continued execution after the project. Likewise, evidence of systematic institutionalization of GLEE’s primary activities was not observed during field visits. Funding allocations needed to cover ASC operational costs and supplies, girls’ school fees, WASH facility installation and maintenance, and activities run by mentors, peer educators, youth ambassadors, and grandmothers are covered entirely through the GLEE activity. This is also true of activities like menstrual hygiene training, training of teachers and principals, support to girls’ schooling through special programs like bicycle donation, sensitization and support to CGS and other school/community-based organizations, and radio programs. In addition, GLEE staff indicated that the participation of school administration is always motivated and instigated by the project’s agents rather than the administrators themselves.

The lack of institutionalization was confirmed through interviews with national and CAP-level MEN representatives, who indicated that the ministries had not taken on the responsibility of leading any of GLEE's primary initiatives. Furthermore, at the time the evaluation team left Mali, the memorandum of understanding that would map out the roles and responsibilities of the MEN relative to GLEE's activities between GLEE and the DNEF had still not been signed. No reason was given for the several-year delay in signing this basic document. This state of affairs raises doubts about the ability of these services to continue their activities without GLEE's intervention.

Despite these disappointing findings, there have been some instances of project ownership at the CGS level that indicate some sustainability in certain settings, if not institutionalization. In several cases, the CGSs have taken complete ownership of school management to the point that, even without a project, the prospects for continuing to promote children's schooling are very high. One example is the village of Selly in the commune of Kéniéba, where the CGS built a school with its own funds for a value of CFA 2.25 million, half of which was paid by the CGS president. These cases of community ownership suggest the possibility that some intervention components could be sustained locally.

A possible, low-cost area in which the program could expand local institutionalization is through building CGSs' and other community stakeholders' capacity to implement the activity's CAA approach. According to the interview conducted with the CPHDA Coordinator and with the GLEE DCOP, the CAA is the first activity carried out in a community when GLEE starts working there. The appraisal allows the community to become aware of the resources they have, both as individuals and as a community, and helps the community think about allocating these resources for education. For example, GLEE staff attribute the identification of resources to build the school in Selly mentioned above to a CAA. At the family level, the CAA allows family members to identify which assets can be sold at the time of school start to provide for school supplies. However, although the CAA is highly regarded by project implementers, it was not mentioned during the qualitative interviews held with members of the communities included in the study. If this useful tool is to be institutionalized, communities would require further training in its implementation and use.

Q5: TO WHAT EXTENT HAS THE ACTIVITY IMPROVED THE SAFETY OF ADOLESCENT GIRLS IN SCHOOLS AND IN THEIR COMMUNITIES?

Safety in schools and SRGBV are issues deeply rooted into the Malian education system. GLEE seeks to raise awareness among school communities about solving problems peacefully, speaking out when there is an incident, and tracking cases at the school and CAP levels via referral mechanisms. To this end, the project has put in place a number of activities (implementation of the school code of conduct, incident box to report cases of SRGBV and hotline posters in schools, in-kind grants, community awareness and sensitization activities in schools) to help schools and communities take action against cases of SRGBV.

5.1 AND 5.3: WHAT SAFETY IMPROVEMENT MEASURES HAS GLEE BEEN ABLE TO IMPLEMENT? HAS IMPLEMENTATION OF GLEE-SUPPORTED REFORMS SUCH AS THE CODE OF CONDUCT OR EMERGENCY PLANS RESULTED IN SHIFTS IN BEHAVIOR AND SAFETY IN SCHOOLS?

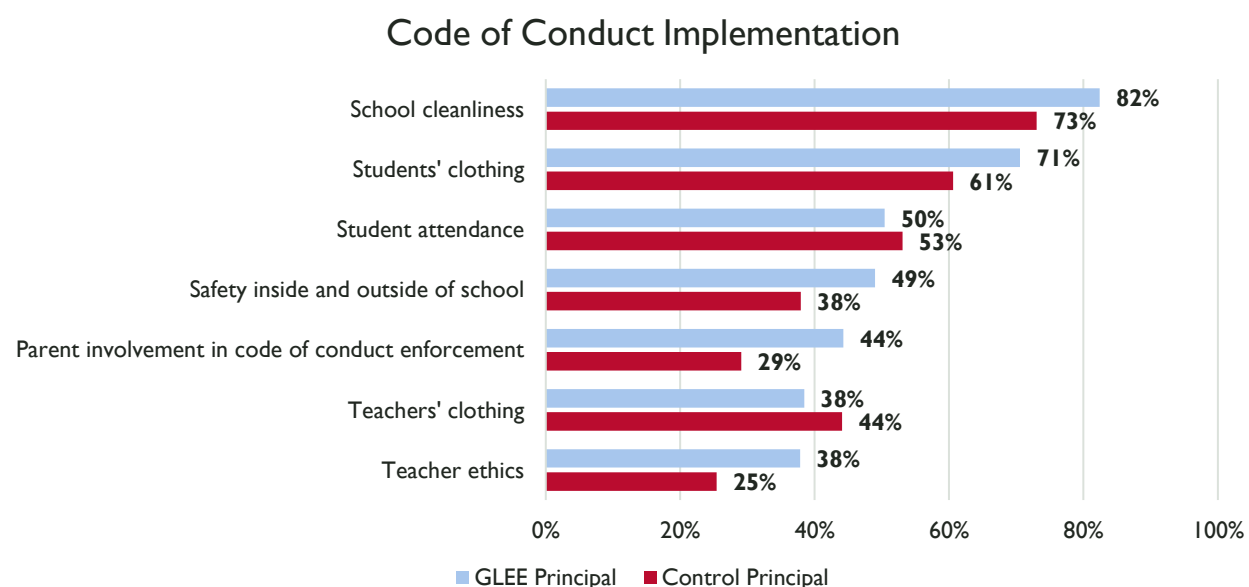
Code of Conduct. At the time of this evaluation, 377 schools were engaged in the process of adopting the code of conduct, with 295 having already adopted it. The code outlines principles, rights, and duties for students, teachers, and facilitators, CGS members, and elected officials. Following training, CGSs and mentors sensitized teachers on the importance of having a code in place. Copies of the illustrated code are displayed in schools and a second copy is kept by the CGS to monitor implementation. Code

implementation in schools is monitored by youth ambassadors and mentors, while the CGSs support orientation and sensitization of children and parents. The adoption of the code of conduct thus binds these stakeholders, who have a duty to promote its guidelines. According to the principal of a school in Mopti: “The Code of Conduct has moved teachers from a state of knowledge to a state of awareness. They knew that GBV was not a good thing, but with the code, they know that it is not in their interest to be compromised. Anyway, in this school, I notice better behaviors and more responsible care for the students and especially the girls” (School Principal, Mopti).

Findings from the school principal survey support these numbers. Fifty-four of the GLEE principals interviewed (96.3 percent) mentioned that the school has a code of conduct in place. Implementing a code of conduct is not unique to GLEE; similar codes had been implemented in some of the control schools visited by the evaluation team. However, they are not implemented as frequently, in that only 56.9 percent of the control school principals mentioned having a code of conduct in place.

Beyond creating the code of conduct, principals have to implement the code. Exhibit 6 shows the ways in which principals stated that they implemented the code of conduct. Notably, school cleanliness and students’ clothing are the most heavily implemented area for both groups of principals. However, parental involvement and safety inside and outside the school are mentioned much more frequently by GLEE principals than control principals. While these differences are not statistically significant due to the small sample size of the school principal survey, it is an important difference in the implementation of the codes of conduct.

Exhibit 6: Code of conduct implementation



Source: GLEE Evaluation Principals’ Survey

Implementation of emergency plans. At the time of the evaluation, GLEE had implemented emergency safety plans in all the schools. Each school, with the help of GLEE CDAs, developed a safety plan according to the needs of the area where the school is located.⁴ While the emergency plans exist,

⁴ GLEE staff reported that safety plans varied greatly between the two regions, with Mopti schools’ plans being directed mainly toward terrorist attacks to the school premises and Kayes plans more geared toward safety on the way to school and in the school premises.

the planning and implementation of emergency planning activities is still an area of concern. According to the GLEE Year 4 Quarter 2 progress report, this activity has not been implemented in most schools by the school authorities due to COVID-19 school closures and teachers' strikes.

Training on GBV. Training on gender equity, SRGBV, and the promotion of girls is a key activity of the GLEE activity. Over the course of the project, a total of 6,595 people were trained, including 2,814 women and 3,781 men. Various target stakeholders were reached, namely: the educational administrative body (29), teachers (43), CGS/APE/AME (191), health workers (93), mentors (116), peer educators (441), youth ambassadors (101), and 177 others of various origins. According to data collected by the evaluation team, mentors and other school-based actors regularly deliver sessions on SRGBV in all GLEE schools. School principals believe that students are "very interested" (76.8 percent) or "quite interested" (21.6 percent) in the content of the sessions.

According to GLEE staff and some school principals, the training on SRGBV is effective because it educates participants about the harm of SRGBV to girls and the consequences to perpetrators. Training is therefore a means of raising awareness and potentially deterring and reducing cases of GBV. Due to security concerns for the respondent, the data collection team did not ask individual girls directly if they had directly experienced SRGBV. Doing so in a school setting where privacy could not be guaranteed and where the perpetrator of the SRGBV may have been present could have put the girls at risk. However, girls were asked to indicate their level of agreement regarding statements about the occurrence of specific types of SRGBV (inappropriate touching, demands by teachers for students to engage in sex) at their school ("Teachers in my school touch students' thighs, buttocks, or private parts," "Teachers in my school demand sexual relations with students.") Substantially more students at midline disagreed that teachers in their schools touched girls inappropriately (52.2 percent baseline vs. 75.7 percent midline) or demand sex with students (58.1 percent baseline vs. 75.4 percent midline). These responses indicate distinct improvement in the perception of SRGBV incidents at school. GLEE and the ministry must continue efforts to continue this positive trend.

Awareness raising. In 2021, GLEE held a total of 350 general assemblies (Kayes 202 and Mopti 148) around behavior change messages in communities. The targets of this communication activity were parents of girls, village leaders, members of women's associations, CGSs, girls, and elected officials. According to the Mopti zone coordinator, GLEE activities also broadcast messages on its five partner radio stations (two in Mopti and three in Kayes) each week to reach community members. To the evaluation team's knowledge, no study has been conducted by GLEE to understand the reach of these messages in the community.

SRGBV reporting system. GLEE has printed and distributed posters about SRGBV to all schools. This poster includes an externally managed hotline number for students to call in case of GBV incidents. 58.8 percent of the GLEE school principals who participated in the study said that their school displayed posters in the school. In addition to the hotline, the GLEE activity has developed systems for reporting on GBV directly through the project, namely, school-based incident boxes and confiding to trusted people (mentors, youth ambassadors, peer educators, grandmothers, members of the CGS/APE/AME). While the project does not have data on the externally managed hotline, there is data on the use of GLEE activity mechanisms.

In each GLEE school, the incident box has been placed in a discreet location, allowing students to post messages about issues they want to raise confidentially. 93.2 percent of GLEE principals interviewed report having the "incident box" available at school and a system in place to open it and act on the issues raised. The majority of GLEE schools (61.5 percent) report opening the box once a month, with

the remainder reporting opening it once a week (21.9 percent) or once every 2-3 months (16.5 percent). Despite the availability of the boxes, it seems that they are not widely used in the GLEE schools. Seventy-four percent of girls interviewed in GLEE schools reported not knowing anybody who had used the incident box during the school year. While 51.1 percent of the girls said that they did not use it because they “did not have anything to report,” 18.7 percent affirmed that they did not use it out of “fear that somebody could see them reporting in the box.” According to CGS members’ statements, few cases of GBV are reported through the incident box. Instead, students use the boxes for a range of issues at the school, ranging from heat in classrooms and broken benches to the lack of books or trees in the schoolyard and individual feelings or insecurity.

GLEE and partner NGO staff provided contradictory evidence about the use of the boxes. While most stakeholders noted that most of the issues found in the box were not related to SRGBV, they also shared that they believe the presence of the box in schools acts as a deterrent against SRGBV. According to project staff, “knowing that the box is there, makes teachers think twice about committing any GBV actions as they fear those acts could be reported” (GLEE staff member). This view is also shared by school principals. In the words of a school principal in Kayes region: “The activities that have improved the safety of the girls is the code of conduct and the incident box, because the code of conduct talks about a lot of things like the behavior of the students with each other and with the student teachers, and even the dress code, the drugs that the children are often tempted to take. Not only was it in writing, but the project turned it into a visual and it's posted in front of all the classrooms. Everyone knows that the students have an incident box and everyone behaves properly, otherwise there would be cases of harassment” (School Principal, Kayes Region).

Socio-cultural issues also influence the use of the incident box. According to a CAP Director in Kayes, “the incident box does not really fit into the Malian socio-cultural context. The disclosure of individual information is not confided in anonymity. It requires a relationship of trust.” Several other respondents provided other reasons students might not use the incident boxes: students are not able to tell their stories in writing, students fear that their writing will be recognized and thus anonymity broken on important issues, and no student is willing to complain about his or her teacher by this means.

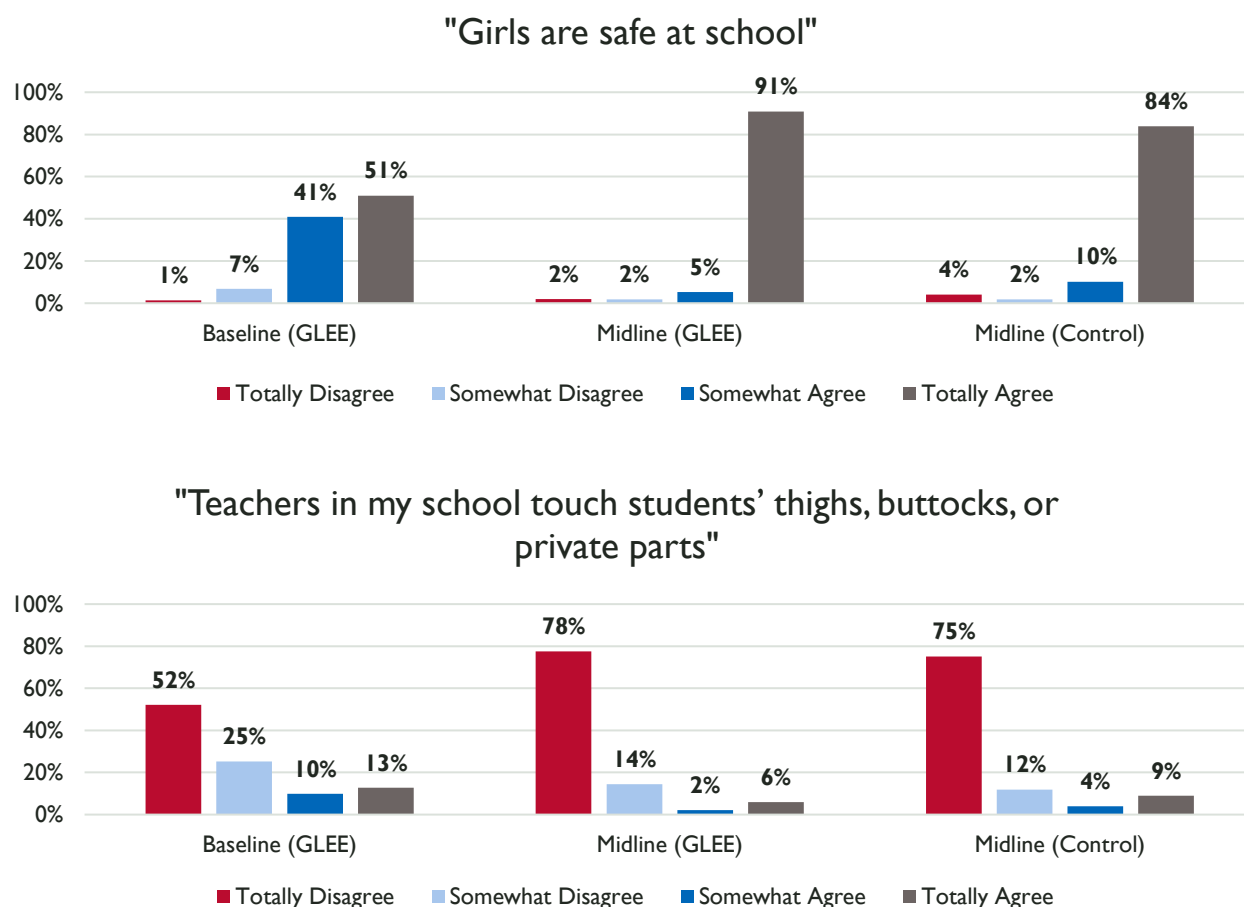
However, despite students’ discomfort with the incident box, the total number of SRGBV cases identified through the entire referral system (boxes and trusted confidants) has increased each year. In the first year of implementation of the referral system (Year 2), only six cases were reported, whereas in Year 3, a total of 58 cases were reported. In Year 4, several cases have already been reported, though there is some inconsistency between quarterly reports. Specifically, in the Quarter 1 report, the GLEE team identifies nine reported cases in the report narrative but 10 in the indicator tracker. In the narrative of the Quarter 2 report, the GLEE team states that there are nine cases reported in Quarter 1, and reports an additional 33 cases reported this quarter, for a total of 42 cases this year. However, in the indicator tracker only 22 cumulative cases are reported this year. Despite this confusion, which will hopefully be addressed in later quarterly reports, the clear trend is an increasing use of the report system, indicating increased trust in the system. The Quarter 2 report states that 66 percent of all reported GBV cases throughout the life of the project have followed the protocol, though as noted before, this may be based on inaccurate data.

5.2 AND 5.4: HOW HAVE GIRLS' PERCEPTIONS REGARDING SAFETY AT THEIR SCHOOLS AND IN THEIR COMMUNITIES CHANGED? HAS THERE BEEN A REDUCTION IN STUDENTS REPORTING THAT SAFETY CONCERNS ARE THE REASON FOR ABSENTEEISM?

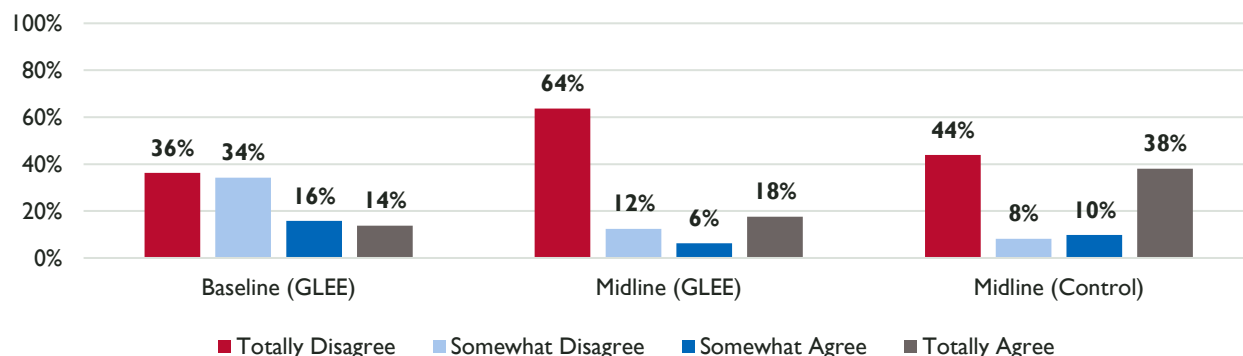
Girls' safety in school is a concern for the Malian education system. While the existence of SRGBV is acknowledged, stakeholders believe that victims do not speak out due to distrust toward the authorities who would take action following the accusations. SRGBV is also a community issue, since for girls to be safe at school, communities need to act so that they are also safe on the way to school and they are provided with a safe learning environment while at home.

There has been significant improvement in girls' perceptions of their safety in school between baseline and midline. Exhibit 7 shows to what extent girls agreed with the statements "girls are safe at school," "teachers in my school touch students' thighs, buttocks, or private parts," and "there are places in or near the school where girls are not safe alone" at baseline and midline in GLEE schools and at midline in control schools.

Exhibit 7: Extent to which girls agree with the statement:



"There are places in or near the school where girls are not safe alone"



Source: GLEE Evaluation Girls' Survey

Between baseline and midline, girls' overall perception of their safety in their schools jumped by 40 percent, from 51 percent to 91 percent ($p < 0.01$). While the difference between treatment and control schools is smaller, it is still statistically significant ($p < 0.01$). Similarly, between baseline and midline there was a significant increase ($p < 0.01$) in the percentage of girls who strongly disagree with the statement "teachers in my school touch students' thighs, buttocks, or private parts," possibly indicating a reduction in these forms of violence. As indicated above there was a similar increase in the girls who disagree with the statement that teachers at the school demand sexual relations with students at the school. Similarly, comparisons of baseline and midline results showed substantial shifts in girls' attitudes with almost all (92.8 percent midline vs. 60.2 percent baseline) girls agreeing that girls have the right to not be mistreated. The majority of students in both Non-GLEE and GLEE schools indicated that teachers do not have the right to demand sexual relations with students. Attitudes about girls' role in harassment indicate room for improvement as 44.7 percent of students agreed that sexual harassment by teachers was sometimes the fault of female students and 40.8 percent similarly agreed that sexual harassment by fellow students was sometimes the fault of girls. These results were similar to those at non-GLEE schools. Efforts should continue to strengthen change in behavior and attitudes around SRGBV among principals, teachers, and students to continue to strengthen safeguards to limit opportunities for any form of SRGBV in schools. Similarly, more should be done to address the perception among some female students that they are to blame for harassment or abuse. Likewise, responses from girls in GLEE schools at midline reflected a greater sense of safety in areas near the school now than at baseline. Although there was a slight increase in the percentage of girls who totally agreed there were places that were unsafe in or near their schools, there was a much larger increase in the percentage of girls who totally disagreed. In control schools, more girls totally agreed and fewer girls totally disagreed with this statement. All these differences are statistically significant ($p < 0.01$). This may indicate that GLEE schools and the areas around them may be safer than they were at baseline and are safer than control schools now.

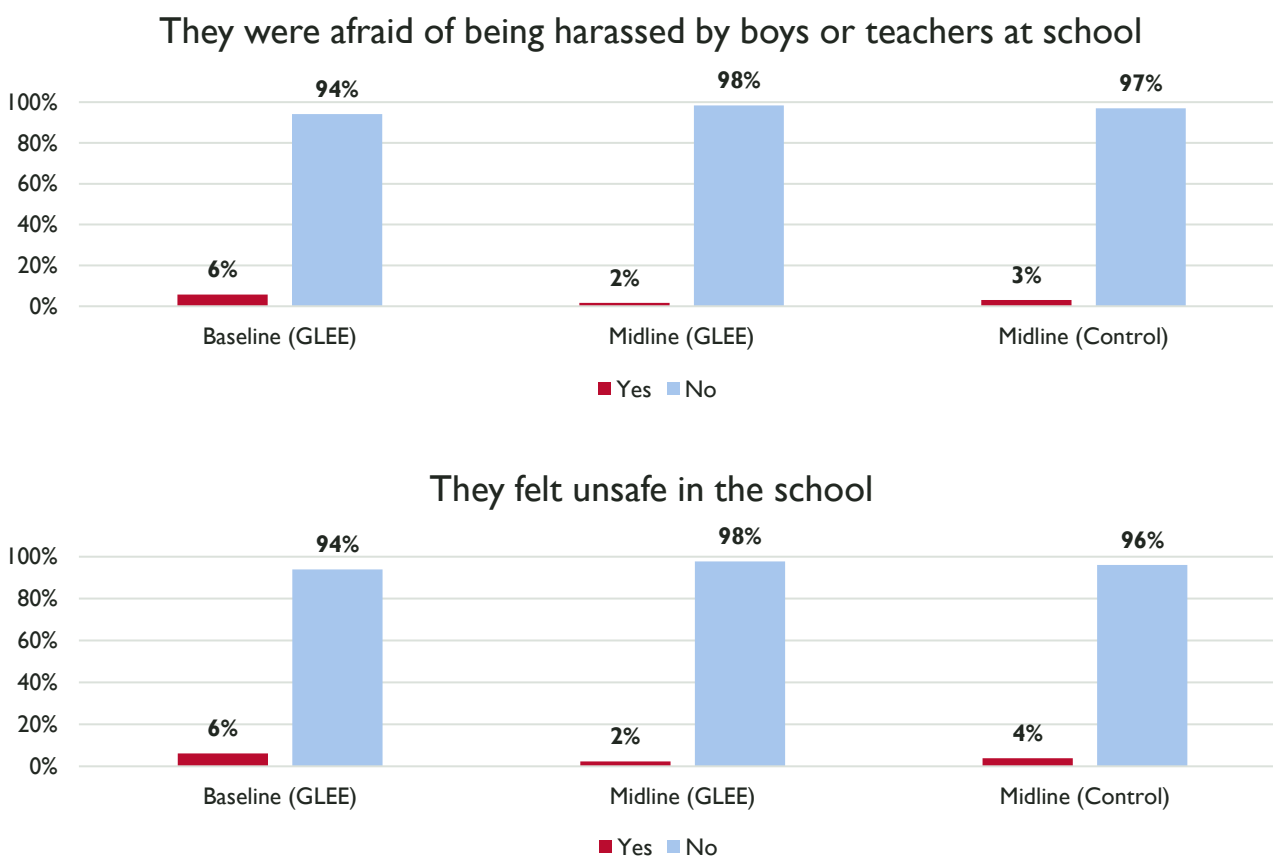
In 10 of the 12 FGDs conducted with girls in schools, girls reported that the GLEE activity has improved the situation in terms of gender-based violence in schools and on the way to schools. Responses underline how the sensitization at school has helped reduce the cases where boys are violent against girls, while the sensitization in the communities has taught parents about the importance of accompanying girls to school and, in situations where that is not possible, encouraged the entire community to be responsible for the safety of girls on the way to school. As one of the girls said: "Yes, we are safe at school, except for conflicts between students, on the way to school accidents can happen,

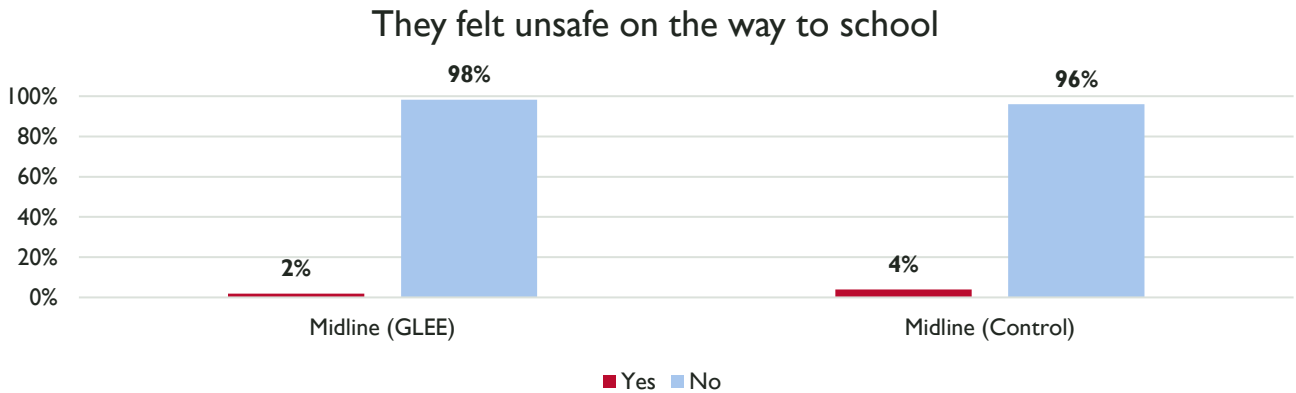
I was even confronted with this case, a motorcyclist hit me one day while coming to school. Now, with the arrival of the project, the boys no longer hit the girls, there have been sensitizations about this” (Adolescent, Kayes Region).

The adolescents interviewed in the ASCs (six FGDs) report less of a violence problem, both because the ASCs are normally closer to their residence than schools are and because the majority of the population in ASCs is composed of girls.

Exhibit 8 shows the percentages of girls who missed one or more days of school because of safety concerns.

Exhibit 8: Percentages of girls who report missing school because:





Source: GLEE Evaluation Girls' Survey

5.5: HAS THERE BEEN A SHIFT IN PERCEPTIONS REGARDING SRGBV AMONG PARENTS, COMMUNITY MEMBERS, AND SCHOOL ADMINISTRATORS?

There is some evidence that there has been a shift in community attitudes around SRGBV as a result of sensitization sessions. During FGDs with community members, sensitization campaigns and the distribution of bicycles to girls were mentioned as improving the safety of girls in and on the way to school. Community sensitization was mentioned in four out of nine FGDs as important in order to improve the safety of girls in schools. In the words of a member of the CGS: "Before, girls were abused on their way to school, but thanks to the project, we did not receive cases of sexual abuse. The girls would get pregnant and the perpetrator would not even be found. So we had this problem at home. Now there are no more cases of sexual abuse in our community thanks to the awareness activities initiated by GLEE. This is a change that we have noticed now" (CGS, Mopti Region).

Some school principals also report that community sensitization has had great importance in guaranteeing girls' safety. A school principal in Kayes region says: "Yes, these GLEE activities have improved safety. Before GLEE, parents did not know the importance of school and for them, the girl was only destined for marriage. But with GLEE, the girls' schooling is taken care of. They are safe from violence (interception on the way to school by boys, harassment at school and on the way to school). Now the girls know how to defend their right to marriage in the eyes of their parents. Yes, I am involved, I am even the main actor because I sensitize and mobilize all the parents and the children at school. My actions at school are followed at home by the parents. I told them that it is a complementary work. There has been a change in the mentality of the parents because they now have confidence in the children and send them or push them to go to school" (School Principal, Kayes Region).

In KII with CSCOM focal persons, the same improvement in safety and reduction of violence is reported. In six out of eight interviews with CSCOM focal points, the respondents mentioned a reduction in cases of SRGBV and an increase in families' awareness regarding these issues. According to a focal person in Kayes, this has helped retain girls in school because parents are no longer worried about their daughters being victims of SRGBV. Moreover, communication has also improved. In the words of one of the respondents, "Parents come to the center for information and when they have doubts about sexual violence at school, they ask for a test to be sure. This is due to communication. Parents are asking for help from the health centers and no longer let cases of violence go unnoticed. For example, during the discussion sessions, the community participates and asks questions to clarify the violence (GBV) and it is no longer a taboo to talk about it" (KII CSCOM Focal person, Mopti Region).

Q6: WHAT IS THE NEW KNOWLEDGE GAINED BY ADOLESCENT GIRLS AND TO WHAT EXTENT HAS THAT AFFECTED ADOPTION OF POSITIVE HEALTH BEHAVIORS AMONG ADOLESCENT GIRLS?

The youth ambassadors were one of the primary mechanisms the GLEE activity used to reach adolescent girls. This strategy experienced major constraints over two years (2018–2019 and 2019–2020) due to teacher strikes that lasted four and five months, respectively, over these two years and the COVID-19 pandemic that caused all schools to close from the end of March to June 2020. Therefore, the youth ambassadors could not lead sessions in schools, as they had originally intended. Despite these significant obstacles, the activity was able to reach 23,859 students, including 13,435 girls and 10,424 boys with a life of project target of 43,611.

Exhibit 9: Number of students reached through the youth ambassador (YA) initiative who participate in YA-organized programs

LIFE OF PROJECT TARGET	LIFE OF PROJECT ACTUAL PER PREVIOUS AR	LIFE OF PROJECT ACTUAL TO DATE
43,611	14,672	23,859

Source: Mali GLEE Quarterly Report Y4, Q2

6.1 AND 6.5: WHAT HAVE ADOLESCENT GIRLS LEARNED ABOUT FAMILY PLANNING? HAVE ADOLESCENT GIRLS' ATTITUDES AND BEHAVIORS CHANGED REGARDING FAMILY PLANNING?

Overall, nearly twice as many girls attending GLEE schools as control schools reported having heard about family planning (64.9 percent vs. 33.9 percent, $p < 0.01$). This may indicate greater knowledge of family planning among GLEE girls, greater comfort talking about it, or both. When asked about their sources of information, a plurality of GLEE girls (40 percent) stated that they received information on family planning from mentors, followed by teachers (26.2 percent). In control schools, girls who learned about family planning stated they mainly learned from TV (31 percent) and radio (23 percent). The evaluation team cannot determine where these radio messages originate; however, this may be a spillover effect of the GLEE activity since GLEE implements radio programs, which may go beyond project boundaries.

Those students who reported having heard about family planning were asked to name family planning methods they heard about. Exhibit 10 shows the methods they named. Significantly more GLEE students listed injectables and abstinence than control students ($p < 0.01$ and $p = 0.03$ respectively). Among GLEE students, pills and injectables were the most common responses, with both being identified by over 60 percent of GLEE students. Surprisingly, use of condoms was only cited by 22 percent of responding GLEE students. This was higher than it was for control students (16 percent) but the difference was not significant. The baseline evaluation adolescent questionnaire did not contain these questions and therefore it is only possible to compare these data to GLEE monitoring data. Year 3 GLEE monitoring data show a similar pattern, in that injectables and pills were most frequently identified, although in GLEE's internal data a far lower percentage of girls identified these methods overall (injectables being cited by 37 percent of respondents, pills by 28.6 percent, and condoms only by 15.7 percent).⁵

Given the relatively low percentage of girls indicated condoms as a form of FP. Unlike other FP measures indicated here, condoms protect from sexually transmitted diseases in addition to pregnancy

⁵ Winrock International, 2020.

prevention. Cultural issues however make it difficult for girls to suggest or request the use of condoms by their partners⁶. For this reason, ensuring that boys family training effectively emphasizes the importance of condoms should be considered.

Exhibit 10: Family planning methods named by students

METHOD	GLEE SCHOOL	CONTROL SCHOOL
Condom	21.9%	16.1%
Abstinence	25.9%	10.8%
Pill	60.6%	56.3%
Injectable	61.4%	42.5%
Other	8.1%	8.5%

Source: GLEE Evaluation Girls' Survey

Beyond this increase in knowledge about family planning methods, there is evidence that girls in GLEE communities have increased access to information about family planning between baseline and midline. For example, while only 22.4 percent of girls reported receiving information about family planning in the community at baseline, this percentage increased to 76.7 percent at midline ($p < 0.01$). Moreover, 73.4 percent of girls completely agreed with the statement “I know where to go if I need information about family planning,” compared to just 25.3 percent at baseline ($p < 0.01$).

In addition to increased knowledge and information sources, there is some evidence of changing attitudes toward family planning and women's rights in regard to family planning. For example, more girls at midline totally disagreed with the statement “I would be too shy or uncomfortable to go to a clinic or center to get birth control” than at baseline (44 percent vs. 8.7 percent, $p < 0.01$). Furthermore, there was a large increase in percentage of girls in GLEE schools who strongly agreed with the statement, “women should have knowledge of family planning before marriage” (87.9 percent at midline vs. 42.5 percent at baseline, $p < 0.01$). There were fewer significant differences with regards to attitudes of control girls at midline. However, as has been noted above, this may be a matter of the limited comparability of control schools due to other interventions.

In terms of girls' behavior, the data are less clear. Data on accessing and using family planning are sensitive and girls were not directly asked related questions, and monitoring data on student attendance at health centers is limited. Neither the schools nor the health centers were able to provide the evaluation team with attendance statistics for these centers. In total, GLEE's Year 4 Quarter 2 activity report mentions the care of 20,338 students, divided into 8,052 boys and 12,286 girls. The monitoring system put in place and the method of compiling these data have not been documented. Nonetheless, qualitative data tell an important story about the change of attitudes and behaviors related to FP. All the CSCOM focal points interviewed reported that the girls access the centers and ask questions freely. Moreover, these activities help solve doubts and reduce the amount of wrong information around family planning. “Attitudes have changed in relation to the use of contraceptive methods. Because people did not understand family planning before the project activities, but now a lot of girls are using

⁶ Darteh EKM, Dickson KS, Doku DT (2019) Women's reproductive health decisionmaking: A multi-country analysis of demographic and health surveys in sub-Saharan Africa. PLoS ONE 14(1): e0209985. <https://doi.org/10.1371/journal.pone.0209985>

Catherine Boileaua, Maria Victoria Zunzuneguib and Se'lim Rashedb, 2009, Gender differences in unsafe sex behavior among young people in urban Mali. AIDS Care 21(8): 1014-1024

contraception. There are some who thought that family planning is synonymous with abortion. But now they have understood. Every month I receive more than ten girls who come for family planning services. The girls are really using contraceptive methods” (KII CSCOM Focal Person, Mopti Region).

Another important issue raised by CSCOM focal person regards the spillover effect to girls who are not attending school who are also attending the health centers with more confidence and assiduity. According to one Focal person in the Kayes region, about 70 percent of the girls who do not attend GLEE schools have been told to go to the CSCOM by friends attending GLEE schools. “Girls come to the health center on their own for advice and to adopt a planning method. Today, the majority of adolescent girls in the village have opted for FP. They are not only those who attend the project school, but also those who did not even go to school. Admittedly, it has been a long road to get here. The GLEE project is a big part of that” (KII CSCOM Focal Person, Mopti Region).

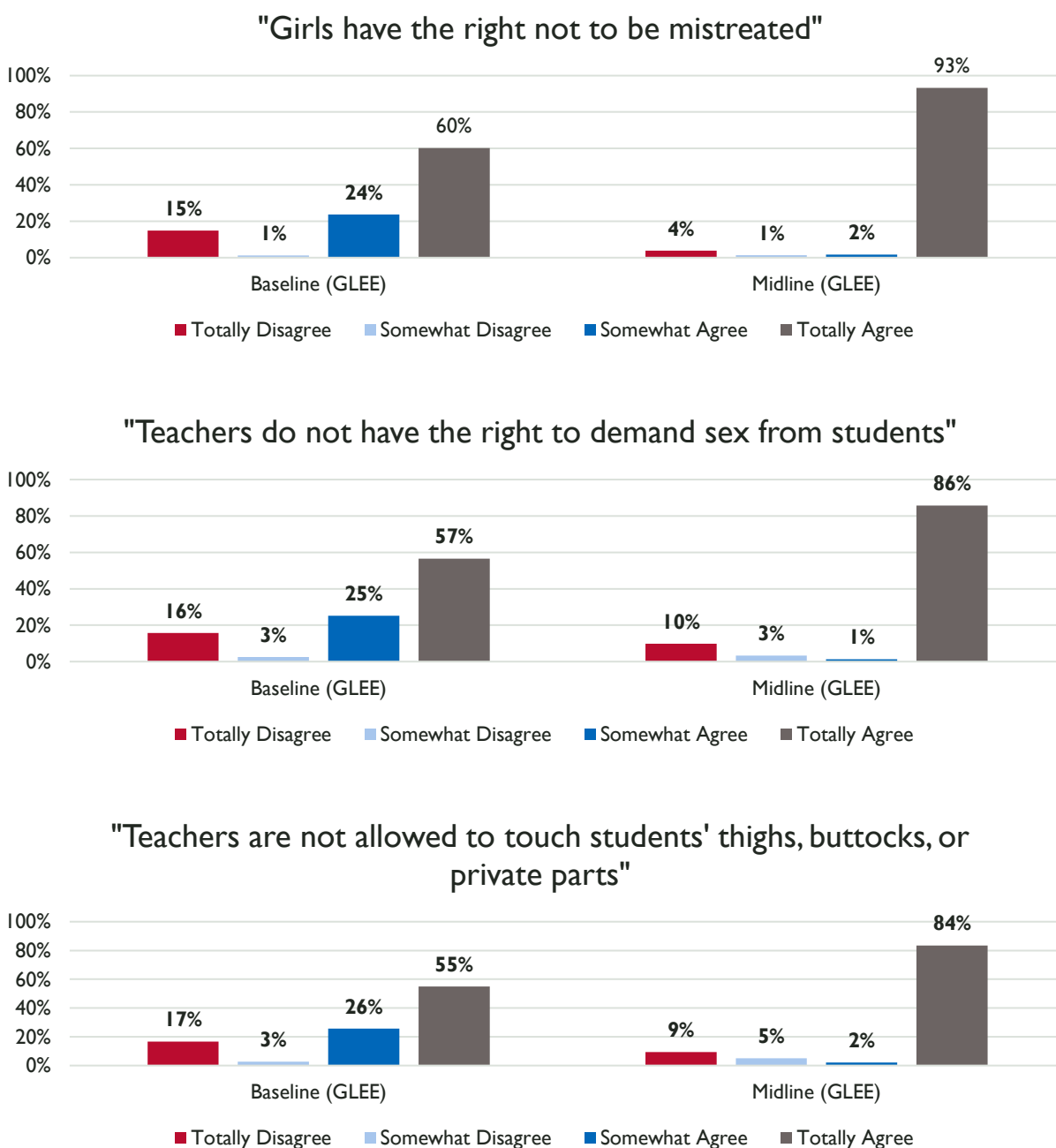
Lastly, it is worth noting that the effect of GLEE sensitization and training is also visible in the level of awareness shown by GLEE girls when approaching the health centers: “I work with all the girls in the community. They don't use contraceptive methods like those who go to GLEE schools. They don't use contraception very much because they don't have the same level of information. Every month I can receive ten girls from GLEE schools and five from non-GLEE schools, especially on the use of contraceptive methods” (KII CSCOM Focal Person, Mopti Region).

6.2: WHAT HAVE ADOLESCENT GIRLS LEARNED ABOUT SRGBV?

GLEE students receive information sessions on SRGBV from mentors, youth ambassadors, and peer educators. Teachers, community members, and other school personnel have also been trained on SRGBV and how to handle such cases.

As in other areas, there are not many statistically significant differences between GLEE schools and control schools with regards to knowledge and attitudes about SRGBV, despite the fact that GLEE girls do feel significantly safer in their schools compared to girls in control schools (see question 5). However, there are some statistically significant differences in girls' attitudes between baseline and midline. These differences are highlighted in Exhibit 11 ($p < 0.01$ for all items). Overall, these data indicate increased understanding of the unacceptability of SRGBV.

Exhibit 11: Extent to which girls agree with statements regarding SRGBV



Source: GLEE Evaluation Girls' Survey

Similarly, comparisons of baseline and midline results showed substantial shifts in girls' attitudes. With almost all (92.8 percent midline vs. 60.2 percent baseline) girls agreeing that girls have the right to *not* be mistreated. The majority of students in both Non-GLEE and GLEE schools indicated that teachers do not have the right to demand sexual relations with students. Attitudes about girls' role in harassment indicate room for improvement as 44.7 percent of students agreed that sexual harassment by teachers was sometimes the fault of female students and 40.8 percent similarly agreed that sexual harassment by fellow students was sometimes the fault of girls. These results were similar to those at non-GLEE

schools. Efforts should continue to strengthen change in behavior and attitudes around SRGBV among principals, teachers, and students to continue to strengthen safeguards to limit opportunities for any form of SRGBV in schools. Similarly, more should be done to address the perception among some female students that they are to blame for harassment or abuse.

6.3, 6.4, AND 6.6: WHAT HAVE ADOLESCENT GIRLS LEARNED ABOUT WASH AND MENSTRUAL HYGIENE? WHAT PERCENT OF SCHOOLS THAT DID NOT HAVE ADEQUATE WASH FACILITIES HAVE BEEN ABLE TO BUILD THOSE FACILITIES? HAVE ADOLESCENT GIRLS' ATTITUDES AND BEHAVIORS CHANGED REGARDING WASH AND MENSTRUAL HYGIENE?

GLEE students receive information sessions on WASH and menstrual hygiene from mentors, grandmothers, and youth ambassadors. Teachers in GLEE schools have also been trained on this topic and are able to provide support and information if asked.

According to the data collected from school principals, 78.1 percent of GLEE schools have a resource person available to support girls if they have their period while at school. However, only 53.4 percent of girls in GLEE schools know where to go or who to talk to about their menstrual hygiene, a small decrease from baseline.

Despite this concerning finding on knowing where to get information, there have been positive changes regarding girls' attitudes toward their period. Unlike most other areas of inquiry on attitudes, there are significant differences between both baseline and midline and between girls in treatment and control schools at midline. The differences between baseline and midline tend to be larger than the differences between treatment and control schools, but both are statistically significant. For example, compared with girls in control schools, significantly more GLEE girls than control girls totally disagreed with the statement "I feel ashamed of my body when I have my period" (61.1 percent vs. 46.5 percent, $p<0.01$). This is also a significant improvement over baseline (32.0 percent, $p<0.01$). Similarly, significantly more GLEE girls than control girls said they were proud of their period (83.6 percent vs. 69.1 percent). This was also a significant change from baseline (46.4 percent, $p<0.01$). Likewise, girls in GLEE schools were more likely than control girls to say that having their period isn't a big problem (79.6 percent vs. 68.4 percent $p<0.01$), which also reflects an improvement from baseline (37.5 percent, $p<0.01$).

Significantly more GLEE girls said they were comfortable with the idea of going to school when they had their period (70.2 percent vs. 48.1 percent, $p<0.01$), which was also an improvement from baseline (46.8 percent, $p<0.01$). However, this difference in attitude does not translate to a significant difference in behavior. Although fewer GLEE students than control students reported staying home because of menstruation (16.1 percent vs. 20.9 percent), the difference was not statistically significant ($p=0.53$). When comparing baseline and now, a similar difference emerges (16.1 percent vs. 21.1 percent, $p=0.43$).

Beyond working to improve girls' knowledge and attitudes toward WASH, GLEE has also worked to increase access to WASH facilities. Having access to clean, functioning, and safe WASH facilities with materials needed to manage menstrual hygiene and method for disposal are essential to facilitate girls' attendance at school during their menstrual cycle. In 2019, the project collected data to calculate the presence of WASH facilities to support the management of menstrual hygiene needs at each school. A WASH facility would be considered adequate if it met the following minimum requirements:

- Separate latrines for boys and girls
- Individual girls' toilet compartments that are lockable from the inside

- Individual girls' toilet compartments that have anal cleansing materials (water or toilet paper)
- A pit or an incinerator for burning used sanitary towels

According to baseline data, only 66 schools met the criteria in 2019. GLEE worked to increase this number to 312 by midline. Project monitoring data demonstrate that by the end of Year 3 GLEE had already renovated 783 stalls (316 in Mopti and 467 in Kayes) belonging to 287 facilities.

Evaluation team members visited the WASH facilities in sampled schools and found that 49.1 percent of GLEE schools had a functioning water source on site of which 80.6 percent had an improved water source. Significantly more GLEE schools had handwashing stations (92.1 percent vs. 66.5 percent, $p=.005$). 86 percent of these were functioning at the time of the visit and 83.6 percent had soap or ash for hand washing. 94 percent of GLEE schools had latrines and 98 percent of these had functioning latrines at the time of the visit. 86 percent of these schools were reported to have clean latrines compared to 63% of control schools. On average, 80 percent of latrines in GLEE schools had either water or paper for anal cleaning. 94 percent of GLEE schools had separate latrine blocks for male and female students. GLEE worked to install separate latrine compartments equipped with menstrual kits for menstrual hygiene purposes and 34.9 percent of GLEE schools had these compartments. This is significantly more ($p<0.000$) than the 4.4 percent that non-GLEE schools had. There were limited options for menstrual hygiene waste with 12.4 percent of GLEE schools having a pit to burn of menstrual hygiene waste and 5.3 percent having an incinerator for menstrual waste disposal.

In addition to work to change girls' attitudes and behaviors toward WASH and menstrual hygiene, GLEE has also worked to make sure that menstrual hygiene products are available to girls. As such, the project trained women to accompany the girls in making their own menstrual pads. In all, 168 women were trained, 47 in Mopti and 121 in Kayes.

According to a social mobilization officer in Mopti, "the making of pads in itself is a visible sign of a deeper transformation. No one usually talks about this subject. This barrier that has been broken opens the way to free exchanges where girls can freely open up about the issues that are important to them and that determine their being women. In any case, the taboo is broken. Even boys have learned to make sanitary napkins. We would never have thought of that just one or two years ago." Several respondents noted that the introduction of individual production of menstrual pads provides both great economic and cultural advantages in addition to the material resource provision for girls. Training for the production of sanitary pads was still ongoing in one of the regions at the time that data collection took place, and this component of the program has not been fully implemented. Even so, a small difference exists between baseline use of sanitary pads (2.3 percent) and use of pads at midline (12.3 percent).

Q7: HOW DOES THE PROJECT MANAGEMENT (FINANCIAL, HUMAN RESOURCES, TECHNICAL, AND MONITORING, EVALUATION, AND LEARNING [MEL] SYSTEMS) AFFECT PROGRAM IMPLEMENTATION AND THE ACHIEVEMENT OF RESULTS?

The evaluation team had the opportunity to assess the implementation of activities, and the relationship of the project with various stakeholders at national, regional, and local levels. Responses to the field teams' questions to ministry administrators, community stakeholders, or teachers and principals indicated that management of the project as a whole is satisfactory.

Project implementation and relations with the stakeholders. The GLEE team used a center-to-periphery approach in its implementation. Its establishment began with the ministerial authorities. Starting from the DNEF and the DNP at the central level, it went down to the AEs of Douentza and Kayes and then to the CAPs and schools. The collaboration at the level of the Ministry of Health followed the same structure. All officials interviewed at various levels, as well as CGSs and other school/community-based organizations, expressed their interest in working with GLEE. GLEE's reputation greatly facilitated contacts for the evaluation team's interviews and data collection work.

Decision-making process. The decision-making process involves the USAID Project Manager and GLEE management and field teams. Involving management and field teams that have a deep understanding of the project, its activities, and the local context in the decision-making process ensures more informed decisions.

ADAPTABILITY OF APPROACH

One of the strengths demonstrated by the GLEE activity was its ability to readily adapt to challenges experienced in the field. Below, we provide specific examples of adaptation.

Adapting advanced payment model to address local reimbursement issues. Though most ASCs seemed to enjoy successful implementation, in some cases, local implementing agencies found the original cost reimbursement of ASC activities they were implementing financially challenging. These challenges at times resulted in some delays in the implementation of activities. The project team and USAID were able to quickly resolve this issue by introducing a system of advance payments. In all the communities where the enumerators or the evaluation team went, GLEE was praised for keeping its promises and making resources available in a timely manner.

Expanding ASCs to meet demand. The strategic objective of the project was to establish ASCs in 272 villages. However, enrollment in these centers quickly reached a saturation level that was unable to accommodate existing demand. GLEE worked with USAID to expand implementation to other villages, increasing the total number of GLEE-supported ASCs to 372. This expansion allowed GLEE to help accommodate unmet demand and resulted in total enrollment that exceeded activity targets by 24 percent at the time of this evaluation.

Providing resources to address disparity of implementation approaches. As noted above, the implementing partner in Mopti used a field strategy based on CDAs. These CDAs are in contact with communities and schools and allow for continuous monitoring of activities. They work with the CGSs on their action plans and are instrumental in working with all other actors. In contrast, the implementing partner in Kayes works with only two social mobilization managers in its strategy, one of whom covers Kéniéba and the other the two CAPs of Kayes. This arrangement led stakeholders to perceive implementation challenges in the Kayes region. To respond to this challenge, GLEE recruited “interns” in Kayes, who are now responsible for monitoring communities at the grassroots level.

Shifting focus on sanitary pad production based on feasibility study results. The project planned under sub-result 3.3 to train women to manufacture menstrual pads as an income generating activity to support women's organizations. A feasibility study was then requested by USAID, which concluded that the target consumer population would not be able to afford the pads. Based on these findings, GLEE redesigned this activity and, beginning December 2020, trained women and girls to make sanitary pads for their own personal use.

OPPORTUNITIES FOR GROWTH

Statements from GLEE staff, field stakeholders, and the team's findings point to opportunities for improvement in project management. These are primarily issues of staff management and the organization of project monitoring and evaluation.

Personnel turnover. The evaluation team noted that the ranks of GLEE staff are thinning. The explanation given by GLEE management is that, faced with the uncertainty regarding the activation of the project's option phase, staff were scrambling to secure employment elsewhere before the project's close date.

An additional explanation for staff loss was provided by ASC facilitators. In an interview, an ASC facilitator complained that GLEE's salary rates are well below that of comparable agencies. Many facilitators echoed this sentiment, with some facilitators stating that “they would leave quickly if they had the opportunity.”

Monitoring and evaluation. The evaluation team had many difficulties obtaining routine monitoring data from the project. The most visible issue was the follow-up of students from ASCs. The evaluation team did not see systematic follow-up in operation. School registries did not indicate which students were ASC transfers, making it impossible to track their progress. As previously noted, school registries tended to miss dropout data. In addition, though respondents indicated that CGSs and teachers were tracking ASC students and that principals were providing quarterly follow-up reports on ASC transfer students to their CAPs, the evaluation team was unable to obtain a single follow-up report on ASC transfers. Collection and use of monitoring data are crucial in helping make informed decisions regarding girls' integration and retention within the formal education system.

CONCLUSIONS

The evaluation concludes that the GLEE activity's components around 1) increasing access to quality education; 2) increasing safety for girls in schools and communities; and 3) promoting positive health behaviors have all shown promising signs of progress. To date, 16,535 girls and boys who were out of school enrolled in ASC or formal education. Beyond increasing access to education, GLEE has shown substantial progress in terms of increasing girls' perceived safety in schools and communities. GLEE has also shown progress in expanding girls' knowledge and/or attitudes about family planning and family planning decisions, menstrual hygiene, some forms of SRGBV, and some nascent behavior change.

INCREASED TRANSFER TO FORMAL SCHOOL

GLEE has worked very effectively in the ASCs. These institutions are clearly highly respected and have resulted in high rates of transfer to formal schools. Additionally, GLEE's support of girls' school fees and community mobilization have also contributed to girls' enrollment. Girls in GLEE schools identified mentors as an important element that allowed them to attend school regularly. Within schools, teachers and principals had positive reactions to the training they have received from GLEE. For all of these positive changes, though, more work remains to be done, particularly in terms of ensuring that students receive quality education once they arrive in the schools.

IMPROVEMENTS IN GIRLS' SAFETY AND HEALTH

GLEE's communication program on girls' education, safety, and health has contributed to girls' and community members' knowledge about health and safety issues. Furthermore, the strengthened violence reporting system and awareness raising around issues of SRGBV may have reduced incidences of SRGBV. Knowledge building and sensitization on issues of family planning and menstrual hygiene have shifted girls' attitudes, while the development of WASH facilities has created the opportunity for girls to access these facilities. Further work in the dissemination of training on menstrual pad production and strengthening the monitoring of the CSCOM portion of the intervention may result in further behavior changes around girls' health. GLEE has already taken first steps in improving CSCOM reporting.

COMMUNITY MOBILIZATION

GLEE has been successful in its work with CGSs by building the capacity of key community partners and familiarizing them with their roles and responsibilities. As a result, CGS members have been able to take charge of the ASCs and local schools and are now equipped with the skills and tools to continue managing them. However, CGSs may not have the capacity to design their action plans or their continued commitment to promoting girls' schooling and health without external support, and more work remains to be done in building their capacity to sustain the project work. Beyond the CGS, GLEE has built community mobilization through the mentors, peer educators, youth ambassadors, and grandmothers.

INSTITUTIONALIZATION

GLEE has succeeded in bringing together the education, health, and community sectors around a project focusing on girls. However, there is limited evidence of progress on institutionalization of these partnerships and the program elements that have driven success, particularly paying school fees, providing ongoing funding for ASCs, and supporting ongoing community mobilization efforts through support of CGS and continuation of the mentors' program.

MONITORING AND EVALUATION

As has been noted above, GLEE's monitoring and evaluation system requires further strengthening in order to ensure ongoing success and sustainability of the activity, as well as to identify some potential areas where the activity can be strengthened. The most important areas for improvement are in tracking ASC students' progress once they transfer to formal schools and in monitoring CSCOM records to ensure youth-friendly services are delivered. GLEE has just begun to address both these reporting needs; continuation of this work is essential.

RECOMMENDATIONS

In the remaining years of the project, the GLEE activity should focus on expanding on its past achievements while working to increase further institutionalization of the systems it has put in place. The evaluation team specifically recommends the following:

Strategic Objective 1 - Decreasing key barriers faced by adolescent girls to accessing quality education

- 1) Identify strategies to continue increasing the transfer rate of students from ASCs to formal schools, focusing on equalizing the transfer rate between girls and boys by increasing girls' transfers.
- 2) Identify opportunities to partner with other, complementary projects (such as school feeding programs) to establish opportunities for cross collaboration (e.g., expanding school feeding programs to support both schools and ASCs).
- 3) Continue work with CGS and other community actors to build CGS capacity to design and implement action plans without external support. This may involve further training on implementing the CAA as well as work with national and regional government actors to ensure funding for these activities.
- 4) Work with the Government of Mali to identify ways to institutionalize key program elements, possibly including payment of school fees, ongoing support for ASCs, support for CGS activities, and support for other community mobilization strategies, particularly the mentors.

Strategic Objective 2 - Improving safety of girls in schools and their communities

- 5) Continue efforts to strengthen change in behavior and attitudes around SRGBV among principals, teachers, and students and continue to strengthen safeguards to limit opportunities for any form of SRGBV in schools. Similarly, more should be done to address the perception among some female students that they are to blame for harassment or abuse.
- 6) Take steps to ensure that all GLEE schools display the SRGBV hotline posters prominently. Put in place additional safeguards to ensure the anonymity of incident boxes and provide further sensitization to girls on the safety of its use. Bolster the confidant system to ensure its sustainability once the project ends. Consider working with GLEE schools to adopt consistent and frequent opening of the incident boxes across all schools such that any incidents are referred in a more timely manner.

Strategic Objective 3 - Increasing knowledge and adoption of positive health behaviors of adolescent girls

- 7) Continue to reinforce the capacity of CSCOM focal persons to be able to cater to adolescents' needs in the communities. In addition to creating safer and friendlier spaces in the CSCOM to assist the girls, a strategy should be devised to make it easier for the girls to access the CSCOM even when they are located at a distance. Girls are often visiting CSCOM after receiving sensitization from mentors and Youth Ambassadors. Once the project will be ended and these figures will not be available anymore in the schools, CSCOM focal person will need to be able to close the gap left by the lack of these project figures.
- 8) Monitor the results of the menstrual pad production training to identify any further work that needs to be done to support girls' menstrual hygiene management.
- 9) Ensure that family planning training for boys is effectively increasing boys' understanding of the importance of condom use.
- 10) Continue efforts to ensure functioning WASH stations with soap or ash are available in all GLEE schools, Increase the number of schools with latrines equipped with menstrual hygiene compartments and increase the availability of waste disposal options for menstrual hygiene

purposes. Institutionalize responsibility for monitoring and maintaining WASH facilities in all schools.

Recommendations related to project management

- I 1) Strengthen the monitoring and evaluation mechanism of the GLEE supported activities; in particular, ensure the consistent application of GLEE's new systems to monitor a) the retention of ASC transfer students and b) CSCOM data; consider identifying opportunities to monitor teacher implementation of GLEE approaches. Integrate government oversight of GLEE monitoring activities.
- I 2) Put in place an exit strategy focused on ways to sustain the changes implemented in the GLEE schools and communities. In particular, the strategy should include a clear indication of how each activity will be continued (or not) after the GLEE activity ends.

ANNEXES

ANNEX I: EVALUATION STATEMENT OF WORK

The Contractor will assess the management and technical progress made by GLEE. This evaluation is intended to determine what aspects of the GLEE project are working well and why, which are not working well and why not, and what mid-course corrections are needed, as well as to inform the implementation of the option period if exercised and the design of future projects.

The primary intended audience for this evaluation is USAID/Mali, which will use the results to improve the performance of the current projects as well as to plan for future projects. The implementing partner managing the education project being evaluated is also an important audience. The findings of the evaluation will also be used by the Government of Mali, other donors' community, the education stakeholders, and by USAID/Washington to provide appropriate types of support to the USAID/Mali education team.

The goal of the mid-term performance evaluation of the GLEE activity is to assess progress toward achieving the project goal (increased access to quality education for adolescent girls aged 10–18; increased safety in GLEE schools; and help girls in GLEE school communities understand and adopt positive health behaviors).

In order to achieve this goal, the performance evaluation will gather and analyze data on the three objectives:

- 1) The degree to which key barriers faced by adolescent girls to access quality education has decreased
- 2) Whether the safety of girls in schools and their communities has increased
- 3) Whether the knowledge and adoption of positive health behaviors of adolescent girls has increased

This evaluation will be conducted in Kayes and Mopti. However, for security and COVID-19 reasons, some part of the interviews via telephone may be acceptable.

ANNEX 2: METHODOLOGY AND LIMITATIONS, CONTINUED

This annex contains additional information about the methodology and limitations not included in the body of the report.

QUANTITATIVE SAMPLE

The final quantitative sample is outlined in Exhibit 12.

Exhibit 12: Adolescent girls quantitative sample

	NUMBER OF GLEE SCHOOLS	TOTAL NUMBER OF GLEE STUDENTS	NUMBER OF CONTROL SCHOOLS	TOTAL NUMBER OF CONTROL STUDENTS	TOTAL NUMBER OF STUDENTS IN THE SAMPLE
Kayes	34	466	29	424	890
CAP de la rive droite de Kayes	10	164	9	144	308
CAP de la rive gauche de Kayes	10	150	10	151	301
CAP de Kénébia	10	152	9	129	281
Mopti	32	458	29	401	859
CAP Sangha	15	233	15	193	426
CAP Bandiagara	15	225	14	208	433
Total	60	924	57	825	1,749

This sample allowed findings to be generalized to the population of girls benefiting from the GLEE intervention with a 95 percent confidence level and 6.4 percent margin of error.⁷ When conducting hypothesis testing for comparing results of treatment and control schools, the minimum detectable effect size was 0.13, meaning that any differences of 13 percent or more will be detected as statistically significant. The following parameters were used in computing the expected margin of error (ME) for our sample:

- An expected observed proportion of 0.50, which is the proportion for which the observed ME will be at its maximum value

⁷ When conducting hypothesis testing for comparing results of treatment and control schools the achieve power of our selected design is computed considering the same parameters as the ones used for the precision. The minimum detectable effect size will be 0.13 meaning that any differences of 13.0 percent or more will be detected as statistically significant.

- An Inter-Class Correlation (ICC) of 0.20; as this information is not available in the baseline report, we used an often-observed ICC value
- A 95 percent confidence interval

QUALITATIVE SAMPLING

Exhibit 13 outlines the sampling procedure for the different groups of qualitative participants. GLEE staff worked with the team to identify who the particular individuals in each community are, as the staff members work with these individuals regularly.

Exhibit 13: Qualitative sample procedure

PARTICIPANT TYPE	SAMPLING PROCEDURE
In-school adolescent girls	Eight girls not selected to participate in the quantitative study were randomly selected to participate in the qualitative study. If fewer than eight girls were eligible, then all girls were asked to participate in the qualitative study.
ASC adolescent girls	Girls in the ASC were randomly sampled from the ASC records. Up to eight girls were randomly sampled, unless fewer than eight girls attend the ASC.
Principals	There is one principal in each selected school. All principals of schools in the qualitative sample were asked to participate in the qualitative data collection if they were interested. As a result, these principals participated in both quantitative and qualitative data collection.
Teachers	Teachers were sampled from the selected schools. If there were fewer than eight teachers, all were asked if they wanted to participate in the focus group discussion.
ASC facilitators	In each ASC, there are 1–2 facilitators. If there was only one, this facilitator was sampled. If there were two and both were interested in participating, one was randomly selected to participate. If only one was interested, that one participated. If neither was, ASC facilitators were not be sampled from that site.
CGS members	In each community there is one CGS. If the CGS had under eight members, all were asked if they wanted to participate in the focus group discussion. If there were more than eight members, the participants were randomly selected.
“School grandmothers”	In each community, there is one older woman in the community who is considered a school grandmother. If she was interested, she was sampled in the communities where data collection is occurring in ASCs.
Health center staff	In community health centers, the team spoke with the health center staff member who has done the most work with the GLEE program and/or adolescent girls. If multiple health center workers had done a lot of work with the GLEE program and were interested in speaking with the team, then one was randomly selected to participate. Note that in two school sites, peer educators and youth ambassadors were cut from the sample in favor of getting additional health center staff to respond.
GLEE mentors	There are two GLEE mentors in each community. If both were interested in participating, one was randomly selected to participate. If only one was interested, that one participated. If neither was interested, GLEE mentors were not sampled from that site.
Peer educators and youth ambassadors	Theoretically, there are two peer educators and two youth ambassadors in each community. However, in some communities, there are more peer educators or youth ambassadors due to high interest and/or turnover. The data collection teams conducted joint interviews with the peer educators or youth ambassadors who are interested in participating in each site. Note that in two school sites, peer educators and youth ambassadors were cut from the sample in favor of getting additional health center staff to respond.

The final qualitative sample is outlined in Exhibit 14.

Exhibit 14: GLEE evaluation qualitative sample

PARTICIPANT TYPE	NUMBER OF PARTICIPANTS
In-school adolescent girls	5 primary school FGDs (51 participants total)
ASC adolescent girls	5 secondary school FGDs (44 participants total)
Principals	6 FGDs (54 participants total)
Teachers	16 interviews
ASC facilitators	5 focus groups (12 participants total)
CGS members (including AME and APE)	6 interviews
“School grandmothers”	9 focus groups (46 participants total)
Health center staff	3 interviews
GLEE mentors	7 interviews
Peer educators and youth ambassadors	9 interviews

QUANTITATIVE DATA ANALYSIS

DATA CLEANING

Before running any statistical analysis, all quantitative data collected were cleaned to correct inconsistent respondent or data entry error. The main problem encountered was the identification of the correct schools for the respondent. Using tablets to collect data ensured the presence of minimal inconsistencies in the datasets collected.

SAMPLING WEIGHTS

In order to correct estimates for unequal probability of selection caused by clustering of the sample, we applied a two-step procedure for weighting the data. In the first step, base weights were computed for each dataset, and, in the second step, adjustment factors were applied to correct for non-participation of the selected subjects as well as selection within school.

The probability of inclusion of each student in strata $s = \{\text{control urban, control rural, program urban, program rural}\}$ is:

$$\pi^s = \left[\frac{m_i^s * n^s}{M^s} \right] * \left[\frac{s^s}{m_i^s} \right] = \frac{s^s * n^s}{M^s}$$

Where

- $g_i^{ab} g_i^{ab}$ is the total enrollment of school i in strata s
- M^s is the total enrollment of all schools in strata s
- n^s is the total number of schools sampled in strata s
- s^s is the number of students sampled per school in strata s

Thus, the school weight (inverse probability of selection) for strata s is:

$$W_s = \frac{1}{\pi^s} = \frac{M^s}{s^s * n^s}$$

ADJUSTMENT FACTORS

The probability of inclusion of participant type $k = \{\text{teacher, parent, student (Grades 4-6)}\}$ in the teacher, parent, student attentiveness and WASH surveys, respectively is:

$$\pi^k = \frac{s^{k,i}}{M^{k,i}}$$

Where

- $s^{k,i}$ is the number of participant type k sampled in school i
- $M^{k,i}$ is the total number of all participant type k in school i

Thus, the adjustment factor (inverse probability of selection) for participant type k is:

$$A_k = \frac{1}{\pi^k} = \frac{M^{k,i}}{s^{k,i}}$$

Finally, for the EGRA reading assessment, the probability of selecting a non-repeating student of gender $g = \{\text{male, female}\}$ from the 3rd grade of school i is:

$$\pi^{g,i} = \frac{s^{g,i}}{M^{g,i}}$$

Where

- $s^{g,i}$ is the number of non-repeating students of gender g sampled from the 2nd grade of school i
- $M^{g,i}$ is the total number of non-repeating students of gender g in school i

Thus, the adjustment factor (inverse probability of selection) for EGRA reading scores are:

$$1. \quad A_{g,i} = \frac{1}{\pi^{g,i}} = \frac{M^{g,i}}{s^{g,i}}$$

Adjustment factors are multiplied by the respective school weight when weighting each observation.

STATISTICAL ANALYSIS

Quantitative data analysis consisted of a first descriptive analysis step with simple frequencies and means of the main indicators and looked at how these differed for project and control schools and also from baseline to midline. To estimate the impact of the GLEE activity on participating students when comparing project and control schools, a treatment effect analysis was conducted using doubly robust

estimates with control variables (such as student SES, age, home language). Treatment effect analysis with doubly robust analysis is a regression approach that incorporates both propensity matching and control variables to mimic an experimental design. This analysis approach allowed us to determine the causal impact of GLEE while controlling for some school and student characteristics. This approach couldn't be used when comparing baseline response with midline because the control variables had not been collected during the baseline. Then, regular regressions were conducted to test for significant differences between those two timepoints.

QUALITATIVE DATA ANALYSIS

Summary notes and key quotations from qualitative interviews were entered into surveyCTO in order to facilitate data transfer. Data were organized by grouping responses from different research participants in thematic groupings based on the evaluation questions. The data were analyzed for common trends and to interrogate questions left unanswered or partially answered by the quantitative data.

EVALUATION MATRIX

Exhibit 15 shows the GLEE midterm evaluation matrix.

Exhibit 15: GLEE midterm evaluation matrix

CODE	QUESTIONS, SUB-QUESTIONS (AND TYPE)	MEASURE OR INDICATOR	TARGET/STANDARD (NORMATIVE)	DOCUMENT REVIEW	DATA COLLECTION INSTRUMENT - QUANT	DATA COLLECTION INSTRUMENT - QUAL
1	To what extent has the activity contributed to girls' enrollment and retention in schools?				Principal survey Girl questionnaire	KII MoE National KII MoE Local
1.1	How have enrollment, dropout, and attendance rates changed at GLEE schools? How do these rates compare to rates at control schools? <i>Type of sub-question: Quantitative</i>	% change in enrollment, drop out, and transition rates at GLEE versus non-GLEE schools	Target based on AMELP	School: Enrollment and attendance records, Document review: Project Indicator Tracking Table; Annual reports; Recent quarterly reports;	Principal interview, Adolescent questionnaire	
1.2	If increases in enrollment and retention have been observed, which of GLEE's activities have contributed to reducing barriers to enrollment, attendance, and retention? <i>Type of sub-question: Qualitative</i>	Description of GLEE activity contributions to reducing barriers to enrollment, attendance, and retention	N/A			FGD in-school girls FGD ASC girls FGD AME/CGS KII YA/Peer educator KII with GLEE Staff
2	To what extent did the GLEE activity reach its targets of new entrant students (including number of new entrants in Grade 1 and number of entrant children from ASC in other grades)? Why/Why not?				Principal interview	KII GLEE Staff FGD in-school girls
2.1	How many new students entered grade 1? How many students transitioned from ASC to formal school? <i>Type of sub-question: Quantitative</i>	# of entrants in grade 1 # of students transferring from ASC to formal school	Target based on AMELP	School: New entrant records from GLEE schools, ASC transfer records, or project indicator tracking tables	Principal interview	FGD AME/CGS KII YA/Peer educator
2.2	For those students who entered formal school, which of GLEE's activities have contributed to efforts to increase new entrants in formal school? What more could be done to increase new entrants? <i>Type of sub-question: Mixed methods</i>	Description of GLEE activity contributions to increasing new entrants into formal school	N/A			FGD in-school girls FGD AME/CGS KII YA/Peer educator

CODE	QUESTIONS, SUB-QUESTIONS (AND TYPE)	MEASURE OR INDICATOR	TARGET/STANDARD (NORMATIVE)	DOCUMENT REVIEW	DATA COLLECTION INSTRUMENT - QUANT	DATA COLLECTION INSTRUMENT - QUAL
3	To what extent did capacity-building efforts for education personnel (teachers, education administrators), community-based organizations, and school governance structures:				Principal survey	FGD Teachers KII YA/Peer educator KII with GLEE Staff
3.1	... increase knowledge and skills? Have teachers, principals/directors, and mentors retained or mastered content from GLEE training and mentoring? <i>Type of sub-question: Mixed Methods</i>	Evidence of retention/mastery of content	Target based on AMELP	GLEE activity monitoring data if available	Principal survey	FGD Teachers KII YA/Peer educator KII with GLEE Staff
3.2	... change behaviors/teaching practices for education personnel, CBOs, and school governance structures? To what extent have teachers and mentors been able to incorporate new curricular materials and pedagogic approaches introduced by GLEE? <i>Type of sub-question: Quantitative</i>	% of teachers whose teaching practice reflects GLEE's approach	Target based on AMELP	Direct observation or, if available, routine GLEE classroom monitoring data	Principal survey Adolescents survey	FGD Teachers KII YA/Peer educator KII with GLEE Staff FGD Teachers
3.3	To what extent have education personnel changed behavior practices in a way that reflects training and support provided by GLEE? <i>Type of sub-question: Quantitative</i>	% of education personnel whose behavior practice reflects GLEE's approach	Target based on AMELP	Direct observation or, if available, routine GLEE classroom monitoring data	Principal survey Adolescents survey	FGD Teachers
3.4	To what extent have CBOs changed behavior practices in a way that reflects training and support provided by GLEE? <i>Type of sub-question: Mixed methods</i>	Quantitative: Number of community-based health centers in GLEE communities that have begun to offer free or reduced cost healthcare Qualitative: Other evidence of behavior change among CBOs	Target based on AMELP	Project Indicator Tracking Table; Annual reports; Recent quarterly reports	Adolescent survey	KII health care staff KII community health association members FGD CGS/AME KII with GLEE Staff
4	To what extent are the systems and processes that are put in place for increasing school enrollment being institutionalized?				Principal survey	KII MOE National KII MOE Local (CAP and Academie) FGD Teachers FGD with CGS/AME

CODE	QUESTIONS, SUB-QUESTIONS (AND TYPE)	MEASURE OR INDICATOR	TARGET/STANDARD (NORMATIVE)	DOCUMENT REVIEW	DATA COLLECTION INSTRUMENT - QUANT	DATA COLLECTION INSTRUMENT - QUAL
4.1	Have CGS, CAPS, AEs put in place plans to fund provision of school kits for needy girls? <i>Type of sub-question: Quantitative</i>	Number of CGSs, CAPSs and AEs that have allocated funds for provision of school kits to needy girls	Target based on AMELP	Review of project annual reports	Principal survey	KII MOE National KII MOE Local (CAP and Academie) FGD Teachers FGD with CGS/AME
4.2	Have systems been put in place to fund school fee payments for needy students? <i>Type of sub-question: Quantitative</i>	Number of CGSs, CAPSs and AEs that have allocated funds for provision of fee payments for needy students	Target based on AMELP	Review of project annual reports	Principal survey	KII MOE National KII MOE Local (CAP and Academie) FGD Teachers FGD with CGS/AME
4.3	How do CGSs, CAPSs, and AEs plan to institutionalize systems and processes they have adopted with support from GLEE? <i>Type of sub-question: Qualitative</i>	Description of plans to institutionalize systems and processes	N/A			KII MOE National KII MOE Local (CAP and Academie) FGD Teachers FGD with CGS/AME
5	To what extent has the activity improved safety of adolescent girls in schools and in their communities?				Principal survey Adolescents survey	KII MOE National KII MOE Local (CAP and Academie) FGD Teachers FGD with CGS/AME
5.1	What safety improvement measures has GLEE been able to implement? (introduction of school code of conduct, updating and implementing emergency plans, GBV incident kits, and referral systems)? <i>Type of sub-question: Quantitative</i>	Number of safety improvement measures implemented (disaggregated by type)	Target based on AMELP	Review of project annual reports	Principal survey Adolescents survey	KII MOE National KII MOE Local (CAP and Academie) FGD Teachers FGD with CGS/AME

CODE	QUESTIONS, SUB-QUESTIONS (AND TYPE)	MEASURE OR INDICATOR	TARGET/STANDARD (NORMATIVE)	DOCUMENT REVIEW	DATA COLLECTION INSTRUMENT - QUANT	DATA COLLECTION INSTRUMENT - QUAL
5.2	How have girls' perceptions regarding safety at their schools and in their communities changed? <i>Type of sub-question: Mixed methods</i>	Quantitative: Percentage of girls in school saying that they have missed one or more days of class this school year because they feared SRGBV while in school (disaggregated by age group and region); Perceptions of SRGBV prevalence Qualitative: Girls' descriptions of changes in school and community safety	Target based on AMELP		Adolescents survey Principal survey	FGD in-school girls FGD ASC girls FGD AME/CGS KII YA/Peer educator KII with Mentors
5.3	Has implementation of GLEE-supported reforms such as the code of conduct or emergency plans resulted in shifts in behavior and safety in schools? <i>Type of sub-question: Qualitative</i>	Descriptions of changes in school and community safety	Target based on AMELP		Principal survey	FGD in-school girls FGD ASC girls FGD AME/CGS KII YA/Peer educator KII with Mentors
5.4	Has there been a reduction in students reporting that safety concerns are the reason for absenteeism? <i>Type of sub-question: Quantitative</i>	Percent of girls who have been absent who state that safety concerns are a reason for absenteeism	Target based on AMELP	Baseline report	Adolescents survey	FGD in-school girls
5.5	Has there been a shift in perceptions regarding SRGBV among parents, community members, and school administrators? <i>Type of sub-question: Mixed methods</i>	Perceptions of SRGBV from parents, community members, and girls	Target based on AMELP	Baseline report	Adolescents survey Principal survey	FGD Teachers FGD CGS/AME FGD In-school girls
6	What is the new knowledge gained by adolescent girls and to what extent has that knowledge affected adoption of positive health behaviors among adolescent girls?				Adolescents survey School observation	
6.1	What have adolescent girls learned about Family Planning? <i>Type of sub-question: Quantitative</i>	% of adolescent girls who have mastered family planning curricular content	Standard		Adolescents survey	
6.2	What have adolescent girls learned about SRGBV? <i>Type of sub-question: Quantitative</i>	% of adolescent girls who have mastered SRGBV curricular content	Standard		Adolescents survey	

CODE	QUESTIONS, SUB-QUESTIONS (AND TYPE)	MEASURE OR INDICATOR	TARGET/STANDARD (NORMATIVE)	DOCUMENT REVIEW	DATA COLLECTION INSTRUMENT - QUANT	DATA COLLECTION INSTRUMENT - QUAL
6.3	What have adolescent girls learned about WASH and menstrual hygiene? <i>Type of sub-question: Quantitative</i>	% of adolescent girls who have mastered WASH and menstrual hygiene curricular content	Standard		Adolescents survey	
6.4	What percent of schools that did not have adequate WASH facilities been able to build those facilities? <i>Type of sub-question: Quantitative</i>	Percent of schools that did not have adequate WASH facilities at baseline that now have those facilities	Target based on AMELP		School observation	
6.5	Have adolescent girls' attitudes and behaviors changed regarding family planning? <i>Type of sub-question: Mixed methods</i>	Quantitative: % of adolescent girls who report behavior change, % of community health centers that report increase in visits from adolescent girls Qualitative: Girls' descriptions of changes in attitudes and behaviors	Target based on AMELP		Adolescents survey	FGD in-school girls FGD ASC girls
6.6	Have adolescent girls' attitudes and behaviors changed regarding WASH and menstrual hygiene? <i>Type of sub-question: Mixed methods</i>	Quantitative: % of adolescent girls who report behavior change Qualitative: Girls' descriptions of changes in attitudes and behaviors	Target based on AMELP		Adolescents survey	FGD in-school girls FGD ASC girls
7	How does the project management (financial, human resources, technical, and M&E systems) affect program implementation and the achievement of results?					KII with GLEE staff

LIMITATIONS

Exhibit I6 includes a summary of the evaluation limitations and the evaluation team's mitigation strategies.

Exhibit I6: Summary of evaluation limitations

LIMITATION/CHALLENGE	MITIGATION STRATEGY
Response bias: Many stakeholders participating in the evaluation have an interest in seeing the program succeed. Those most engaged with the project may be positively biased toward the programming, particularly if they are currently receiving financial support.	Elicit explicit examples from evaluation participants, stressing confidentiality and the importance of objectivity to improving the program as a whole. Additionally, the evaluation team drew on multiple data sources, triangulating findings to answer the evaluation questions.
There is no quantitative data collection with girls who are currently in ASCs and sampling cannot be designed to ensure significant representation of girls who have moved from ASCs to standard schools.	Data on ASCs are primarily drawn from GLEE activity data and qualitative findings. While not generalizable, this allows analysis of girls' experience in ASCs as it relates to preparation for school.
Control group sampling: Due to unavailability of data, it was not possible to use the planned sampling strategy for control schools.	Analysis takes into consideration these limitations and findings report comparison between baseline/midline measures in addition to project/control.
Recall bias: Students and other stakeholders might face difficulties recalling certain details of their behavior.	The team mitigated this limitation by providing guidance to enumerators during the training on how to help the students remember the information investigated by the evaluation tools.

ANNEX 3: DATA COLLECTION INSTRUMENTS

This annex contains additional information about the data collection instruments, as well as the instruments themselves.

LIST OF DATA COLLECTION TOOLS

Quantitative tools are outlined in Exhibit 17.

Exhibit 17: Quantitative data collection tools and uses

TOOL	USE	PARTICIPANTS
Adolescent questionnaire*	To compare knowledge, attitudes, and practices between girls in GLEE and control schools	Adolescent girls, two versions, one for ages 10–12 and one for ages 13–18
School principals' survey	To gather data on interventions that take place at the schools, both in terms of which GLEE components have been implemented (treatment schools) and which similar programs have been implemented in control schools	School principals (ages 18+)
School inventory and observation checklist*	To gather data on school level entrance, enrollment, transfer, and retention data missing from GLEE and CAP records and identify which program elements are visibly implemented on school sites (implementation schools only)	N/A, observation and data abstraction conducted by data collector

* Adapted from GLEE Baseline Survey tool

Exhibit 18 outlines the range of qualitative data collection tools.

Exhibit 18: Qualitative data collection tools and uses

TOOL	USE	PARTICIPANTS
In-school adolescent girls' FGD Guide	To identify how the intervention has affected in-school adolescent girls	In-school adolescent girls, ages 13–18
ASC adolescent girls' FGD Guide	To identify how the intervention has affected adolescent girls attending ASCs	Adolescent girls in ACS, ages 13–18
Principals' Interview Guide	To learn more about GLEE implementation at the school level from an administrative standpoint	School principals, ages 18+
Teachers' FGD Guide	To learn more about GLEE implementation at the school level from a teaching standpoint	School teachers, ages 18+
CGS/AME FGD Guide	To learn more about GLEE implementation at the school level from a school management standpoint	CGS members, ages 18+
Health Center Staff Interview Guide	To learn more about GLEE implementation at health centers	Health center staff, ages 18+
Mentors' KII Guide	To learn about the experience of female mentors, who are young adult women who have completed secondary education trained by the GLEE program to provide support for girls' staying in school	GLEE program mentors, female youth ages 18+

TOOL	USE	PARTICIPANTS
Peer educators and youth ambassadors KII guide	To learn about the experience of peer educators and youth ambassadors, who are school-aged children trained by the GLEE program to educate their peers on adolescent health issues	GLEE Program peer educators and youth ambassadors, youth ages 13–17
Local CAP and AE representatives	To learn about implementation of GLEE in the program areas	CAP and AE representatives, ages 18+

INSTRUMENT DESIGN PROCESS

Following an initial review of background documents and consultations with USAID, a half-day, remote (due to COVID-19 restrictions) collaborative Evaluation Design Workshop was convened on March 22, 2021, including appropriate USAID Mission, Ministry of Education, and GLEE activity staff. The results of that session, along with ongoing conversations with Winrock, informed the evaluation instrument design process.

The evaluation team created first drafts of the data collection tools based on the original tools provided by Winrock as well as new tools developed as a result of the evaluation design workshop, ongoing conversations with Winrock, and the desk review. These tools were further updated in Mali through cognitive interviewing and piloting.

Cognitive interviewing. While the team relied primarily on data collection tools that had already been created and tested in Mali for GLEE, the research team conducted cognitive interviews for new content that required interpretation in the adolescent survey and the FGDs for adolescent girls (in school or in ASC) to ensure that respondents’ understanding of these questions aligned with the researchers’ intent. Cognitive interviewing was conducted in each of the four languages (Bamanankan, Peulh, Dogon, and Dogosso) that the data collection teams would use to ensure that the questions were understood as originally intended regardless of language used. Cognitive interviews occurred in locations where the target language was spoken as outlined in Exhibit 19.

Exhibit 19: Locations, languages, and numbers of cognitive testing

TOOL	LANGUAGE	LOCATION OF COGNITIVE TESTING	NUMBER OF INTERVIEWS CONDUCTED
GLEE Adolescent Survey	Bamanankan	Diago	3
GLEE Adolescent FGD	Bamanankan	Diago	3
GLEE School Principal Survey	Bamanankan	Diago	1
GLEE Adolescent Survey	Peulh	Keniéba	3
GLEE Adolescent FGD	Peulh	Keniéba	3
GLEE School Principal Survey	Peulh	Keniéba	1
GLEE Adolescent Survey	Dogon	Dandoli	3
GLEE Adolescent FGD	Dogon	Dandoli	3
GLEE School Principal Survey	Dogon	Dandoli	1
GLEE Adolescent Survey	Dogosso	Dourou	3
GLEE Adolescent FGD	Dogosso	Dourou	3
GLEE School Principal Survey	Dogosso	Dourou	1

Pilot testing. Following data collection training, CEPROCIDÉ conducted a pilot test of the data collection instruments in a convenience sample of eight schools (primary and lower secondary) in Bamako. At four of these schools, the qualitative teams also piloted the school-based data collection tools for adolescent girls (aged 18+). Pilot data were analyzed in order to finalize the tools. A total of 185 interviews were conducted with adolescent girls and eight school principal surveys. Additionally, eight qualitative interviews (4 FGD girls, 2 FGD teachers, and 2 KII school principals) were also conducted in the same schools.

ADOLESCENTS SURVEY

N° Question	Question (personnes âgées de 13 à 18 ans)	Question (personnes âgées de 10 à 12 ans)	Catégories de réponses
AE	AE		
COMMUNE	Commune		
CAP	CAP		
ECOLE	Village/Ecole		
LOC	Localisation		Urbain / ___ / Rurale / ___ /
ENQ	Nom enquêteur		
SEXE	Sexe de l'enquêté(e)		Fille / ___ / Garçon / ___ /
AGE	Age de l'enquêté(e)		# Ouvert
EDU	Niveau d'éducation		Primaire1 (1A – 6A) / ___ / Primaire2 (7A – 9A) / ___ / Secondaire et plus / ___ / Déscolarisé / ___ / Non scolarisé(e) / ___ /
ENF	Type enfant : Étiez-vous inscrite à un CSA de GLEE avant de fréquenter cette école ?		Oui / ___ / Non / ___ /
GLEE	Connaissez-vous le projet GLEE ? Enquêteur : expliquer brièvement le projet GLEE		Oui / ___ / Non / ___ /
C_1	Avez-vous été absente de l'école la semaine dernière ?		Oui / ___ / Non / ___ /
	(Si OUI C_5) Combien de jours avez-vous été absente ?		___ [] 777 Ne sait pas [] 888 Refuse de répondre/Pas de réponse

C_6	Étiez-vous inscrite à l'école l'année dernière ?		☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
C_7	(Si OUI C_6) En quelle année ou classe étiez-vous l'année dernière ?		1 = 1ère année, 2 = 2ème année, 3 = 3ème année, 4 = 4ème année, 5 = 5ème année, 6 = 6ème année, 7 = 7ème année, 8 = 8ème année, 9 = 9ème année, 99 Ne sait pas
C_8	Prévoyez-vous de vous inscrire à l'école l'année prochaine ?		☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
C_9	(SI NON C_8) Pourquoi pas?		1 Il n'y a pas suffisamment d'argent pour couvrir mes frais de scolarité 2 Je dois travailler pour aider ma famille à économiser ou à gagner de l'argent 3 Il n'est pas prudent pour moi d'effectuer les trajets aller/retour entre le domicile et l'école 4 Il n'est pas prudent pour moi d'être à l'école 5 L'école ne dispose pas de suffisamment d'espace ou d'enseignants 6 Personne n'est disponible pour faire les trajets aller/retour avec moi 7 Les services de transport sont inadaptés 8 Je souffre d'un problème de santé ou d'un handicap qui m'empêche de me rendre à l'école 9 Je suis trop en retard par rapport aux autres à l'école 10 Mon enseignant me maltraite à l'école 11 Je ne peux pas me déplacer à l'intérieur de l'école ou de la classe 12 Je ne peux pas utiliser les toilettes à l'école 13 L'école n'offre pas de programme répondant à mes besoins d'apprentissage

				14 Je suis trop âgée pour aller à l'école 15 J'ai suivi suffisamment d'études 16 Je suis mariée ou sur le point de me marier 17 J'ai un enfant ou suis sur le point d'en avoir un 18 Je n'aime pas aller à l'école 19 L'école n'a pas d'importance pour moi 20 L'école ne m'aide pas à trouver un bon travail 21 Je suis maltraitée/harcelée par d'autres élèves Autre Ne sait pas Refuse de répondre/pas de réponse
Je vais maintenant vous interroger sur les tâches que vous pouvez avoir en dehors de l'école, veuillez indiquer laquelle de ces affirmations est vraie.				
	Il n'est pas prudent pour moi d'effectuer les trajets aller/retour entre le domicile et l'école			☐ 0 Non mentionné ☐ 1 Mentionné
GRRTU_1	Je dois travailler à la maison pour aider la famille avec les tâches ménagères, notamment la cuisine, le ménage, la lessive, les jeunes frères et sœurs, la collecte d'eau et de bois, etc.			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
GRRTU_2	Je dois travailler à la ferme familiale ou dans l'entreprise familiale			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
GRRTU_2b	Je dois travailler dehors, pour gagner de l'argent ou obtenir une sorte de rémunération,			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse

	afin de venir en aide à la famille			
GRRTU_3	Ces responsabilités vous empêchent-elles parfois d'étudier avant ou après l'école ?			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
GRRTU_4	Ces responsabilités vous empêchent-elles parfois d'aller à l'école ou de vous y rendre à l'heure ?			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
<i>Je vais vous lire une série d'affirmations. Veuillez me dire si vous êtes tout à fait d'accord, assez d'accord, pas vraiment d'accord ou pas du tout d'accord avec chacun des énoncés.</i>				
SEP_1	Les femmes ont le droit d'occuper des postes de direction au sein de la communauté.	Les filles peuvent être des leaders à l'école.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SEP_2	Une femme présidente peut être aussi efficace qu'un homme président.			1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SEP_3	Les filles ont autant le droit d'aller à l'école que les garçons.			1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SEP_4	Dans ma communauté, il est normal pour les garçons de finir l'école primaire.	n/a		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SEP_5	Dans ma communauté, il est normal pour les filles de finir l'école primaire.	n/a		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse

SEP_5b	Dans ma communauté, il est normal pour les garçons de finir l'école secondaire.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SEP_5c	Dans ma communauté, il est normal pour les filles de finir l'école secondaire.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SEP_6	Dans ma communauté, il est normal pour les garçons et les filles d'avoir les mêmes chances d'aller à l'école.	n/a	1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SEP_6b	Dans ma communauté, il est normal pour les garçons et les filles d'avoir les mêmes chances d'aller à l'école secondaire.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
PREG_1	Une jeune femme ayant un enfant (ou des enfants) a le droit de demeurer à l'école et de poursuivre ses études		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
PREG_2	Un jeune homme ayant un enfant (ou des enfants) a le droit de demeurer à l'école et de poursuivre ses études		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
PREG_3	Une jeune femme mariée a le droit de demeurer à l'école et de poursuivre ses études		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
PREG_4	Un jeune homme marié a le droit de demeurer à l'école et de poursuivre ses études		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse

Je vais vous lire une série d'affirmations. Veuillez me dire si vous êtes tout à fait d'accord, assez d'accord, pas vraiment d'accord ou pas du tout d'accord avec chacun des énoncés.

PRVIO_1	Les filles ont le droit de ne pas être maltraitées.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
PRVIO_2	Les garçons ont le droit de ne pas être maltraités.		0 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SRGBV_1	Les filles sont en sécurité à l'école.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SRGBV_2	Les garçons sont en sécurité à l'école.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SRGBV_3	Il y a des endroits dans l'école ou à proximité où les filles seules ne sont pas en sécurité.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SRGBV_4	Il y a des endroits dans l'école ou à proximité où les garçons seuls ne sont pas en sécurité.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SRGBV_5	Les garçons plus âgés et les hommes font des commentaires sur le corps des filles quand elles sont sur le chemin de l'école.	n/a	1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse

SRGBV_6	Les enseignants dans mon école touchent les cuisses, les fesses ou les parties intimes des élèves.			1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
SRGBV_7	Les enseignants dans mon école exigent d'avoir des rapports sexuels avec certains élèves.	n/a		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
MISS_1	Avez-vous manqué un ou plusieurs jours d'école cette année parce que vous aviez peur d'être harcelée par des garçons ou des enseignants à l'école ?	n/a		☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
MISS_2	Avez-vous manqué un ou plusieurs jours d'école cette année parce que vous ne vous sentiez pas en sécurité dans l'établissement ?			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
MISS_3	Avez-vous manqué un ou plusieurs jours d'école, cette année parce que vous ne vous sentiez en sécurité sur le chemin d'école?			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
<i>Je vais vous lire une série d'affirmations. Veuillez me dire si vous êtes tout à fait d'accord, assez d'accord, pas vraiment d'accord ou pas du tout d'accord avec chacun des énoncés.</i>				
TVIO_1	Les enseignants n'ont pas le droit d'exiger des rapports sexuels auprès des élèves	n/a		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse

TVIO_2	Les enseignants n'ont pas le droit de toucher les cuisses, les fesses ou les parties intimes des élèves.			1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
<i>Je vais vous lire une série d'affirmations. Veuillez me dire si vous êtes tout à fait d'accord, assez d'accord, pas vraiment d'accord ou pas du tout d'accord avec chacun des énoncés.</i>				
NOG_1	C'est parfois la faute de la fille si un enseignant la harcèle sexuellement.	C'est parfois la faute de la fille si un enseignant lui touche les cuisses, les fesses ou les parties intimes.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
NOG_2	C'est parfois la faute de la fille si un élève la harcèle sexuellement.	C'est parfois la faute de la fille si un élève lui touche les cuisses, les fesses ou les parties intimes.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
NOG_3	Connaissez-vous quelqu'un dans votre classe qui a utilisé la boîte des suggestions cette année ?	Connaissez-vous quelqu'un dans votre école qui a utilisé la boîte cette année ?		☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
NOG_4	Pourquoi pensez-vous que les élèves ne sont pas plus nombreux à utiliser cette boîte ?			1 Je n'ai jamais rien eu à signaler 2 Je ne sais pas comment l'utiliser 3 Je ne veux pas l'utiliser 4 J'ai peur que quelqu'un puisse me voir si je l'utilise 5 Je ne pense pas que ce soit efficace 6 Autre (précisez) 777 Ne sait pas 888 Refuse de répondre/pas de réponse
NOG_5	Si un de vos camarades de classe était victime de violence ou de harcèlement sexuel, que lui conseilleriez-vous de faire ?			

HYG_1	Lorsque les jeunes filles deviennent des femmes, leur corps connaît certains changements, notamment avec le début du cycle menstruel. Avez-vous commencé à avoir vos règles ?		☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
HYG_2	Savez-vous où aller (ou à qui parler) si vous avez besoin d'informations sur le cycle menstruel ?		☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
HYG_3	Vous sentez-vous à l'aise à l'idée d'aller à l'école en ayant vos règles ?		☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
HYG_4	(Si OUI HYG_1) Êtes-vous déjà restée à la maison au lieu d'aller à l'école quand vous aviez vos règles ?		☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
HYG_5	(Si OUI HYG_1) La dernière fois que vous avez eu vos règles, combien de jours êtes-vous restée à la maison au lieu d'aller à l'école ?		saisir #
HYG_6	(Si OUI HYG_1) et (Si OUI HYG_5) Pour quelle raison êtes-vous restée à la maison durant vos règles ?		1 Douleur/crampes/maux de tête 2 Diarrhée 3 Saignement abondant 4 Manque de serviettes hygiéniques 5 Manque d'eau et d'endroits pour se nettoyer 6 Ma famille ne veut pas que j'aille à l'école quand j'ai mes règles 7 Autre (saisissez)
Je vais vous lire une série d'affirmations. Veuillez me dire si vous êtes tout à fait d'accord, assez d'accord, pas vraiment d'accord ou pas du tout d'accord avec chacun des énoncés.			

HYG_7	(Si OUI HYG_I) J'ai honte de mon corps lorsque j'ai mes règles			1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
HYG_8	(Si OUI HYG_I) Il est important que je garde secret le fait d'avoir mes règles			1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
HYG_9	(Si OUI HYG_I) Je suis fière d'avoir mes règles			1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
HYG_10	(Si OUI HYG_I) Avoir mes règles n'est pas un gros souci pour moi			1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
HYG_11	(Si OUI HYG_I) Quelle est la principale méthode que vous utilisez à l'heure actuelle pour gérer la situation durant vos règles ?			Coton/ouate Morceaux de tissu Serviettes hygiéniques Tampon Papier toilette ou autre Autre (SPÉCIFIEZ _____)
HYG_12	(Si OUI HYG_I) Au cours des trois derniers mois, vous est-il arrivé de ne pas avoir accès à ce matériel ?			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
Je vais vous lire une série d'affirmations. Veuillez me dire si vous êtes tout à fait d'accord, assez d'accord, pas vraiment d'accord ou pas du tout d'accord avec chacun des énoncés.				

FAM_8	Avez-vous vu ou entendu parler de la planification familiale (PF) /santé de la reproduction (SR) pendant l'année scolaire en cours (2020-2021) ? I dedila ka bangue kolochili kibarouya mèn wa ? wali ma iyayé wa ?		☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
FAM_9	(Si OUI FAM_8) Si oui à travers quelle source ? I ya mèn walima E yayé tchogodi ?		Pair Educateur /__/ Jeune Ambassadeur /__/ Mentors /__/ Grand-mère /__/ Enseignants /__/ Autre agent GLEE /__/ CSCOM/Agent de santé /__/ Message radio /__/ Message télé /__/ Autres sources (à préciser) _____
FAM_10	(Si OUI FAM_8) Pouvez-vous nous citer des méthodes de planification familiale (PF) entendue pendant l'année scolaire en cours (2020-2021) ? Multiple answer I bè bangue kolochili fèrè djoumen don ?		port de condom, abstinence, pilule, Produit injectable, Autre _____ 777 Ne sait pas 888 Refuse de répondre/pas de réponse
FAM_11	(Si OUI FAM_8) Pouvez-vous nous citer des messages sur la santé de la reproduction (SR) entendu pendant l'année scolaire en cours (2020-2021) ? Multiple answer I bè bangue kolochili fèrè djoumen don ?		Grossesse précoce VIH Hygiène menstruelle excision Autre _____ 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
FAM_1	Dans ma communauté, on apprend aux filles ce	n/a	1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à

	qu'est la planification familiale.			fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
FAM_2	Dans ma communauté, on apprend aux garçons ce qu'est la planification familiale.	n/a		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
FAM_3	Un mari et une femme doivent décider ensemble du nombre d'enfants à avoir	Une mère et un père doivent prendre des décisions conjointes concernant leurs enfants.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
FAM_4	Les hommes doivent avoir connaissance de la planification familiale avant le mariage.	Les hommes ont le droit de choisir qui épouser.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
FAM_5	Les femmes doivent avoir connaissance de la planification familiale avant le mariage.	Les femmes ont le droit de choisir qui épouser.		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
FAM_6	Je sais où aller si j'ai besoin d'une méthode de contraception (contrôle des naissances)	n/a		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
FAM_7	Je serais trop timide ou mal à l'aise à l'idée de me rendre dans une clinique ou un centre pour y obtenir une méthode contraceptive (contrôle des naissances).	n/a		1 Pas du tout d'accord, 2 Pas vraiment d'accord, 3 Assez d'accord, 4 Tout à fait d'accord, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
<i>Je vais maintenant vous interroger sur les sessions auxquelles vous avez pu assister. Pour chaque session que j'énumère, veuillez indiquer si vous avez eu l'occasion de participer.</i>				
GLEE_I	sessions de communication/sensibilisation sur l'éducation des filles, (Ces			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse

	sessions sont animées par les pairs éducateurs, les jeunes ambassadeurs, mentors GLEE, enseignants) ?			
GLEE_2	sessions de communication/sensibilisation sur les violences basées sur le genre, (Ces sessions sont animées par les pairs éducateurs, les jeunes ambassadeurs, mentors GLEE, enseignants) ?			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
GLEE_3	sessions de communication/sensibilisation sur la sécurité scolaire (Ces sessions sont animées par les pairs éducateurs, les jeunes ambassadeurs, mentors GLEE, enseignants) ?			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
GLEE_4	sessions de communication/sensibilisation sur la santé de la reproduction (sida, IST,), (Ces sessions sont animées par les pairs éducateurs, les jeunes ambassadeurs, mentors GLEE, enseignants) ?			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
GLEE_5	sessions de communication/sensibilisation sur le Planning Familial (PF) et le COVID-19, (Ces sessions sont animées par les pairs éducateurs, les jeunes ambassadeurs, mentors GLEE, enseignants) ?			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
GLEE_6	sessions de communication/sensibilisation sur l'hygiène menstruelle, (Ces sessions sont animées par les pairs éducateurs, les jeunes			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse

	ambassadeurs, mentors GLEE, enseignants) ?			
GLEE_7	sessions de communication/sensibilisation sur le mariage forcé/précoce (Ces sessions sont animées par les pairs éducateurs, les jeunes ambassadeurs, mentors GLEE, enseignants) ?			☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
GLEE_8	Quand avez-vous assisté aux sessions de communication/sensibilisation dont vous avez parlé ?			1 Ce mois-ci, 2 Cette année scolaire, 3 l'année scolaire précédente, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
GLEE_9	Pensez-vous que les sessions auxquelles vous avez participé sont utiles?			1 Pas du tout utiles, 2 Pas vraiment utiles, 3 Assez utiles, 4 Tout à fait utiles, 777 Ne sait pas, 888 Refuse de répondre/pas de réponse
GLEE_10	Avez-vous bénéficié directement ou indirectement de quoi que ce soit d'autre en provenance du projet GLEE , etc.) ? de quoi avez-vous bénéficié ?			pairs éducateurs jeunes ambassadeurs les mentors GLEE Paiement des frais scolaires Moyen de transport pour se rendre à l'école (vélo) Formation pour la production de serviettes hygiéniques Autre _____
GLEE_11	Est-ce que l'une des activités GLEE (ÉNUMÉREZ-LES) vous a permis de vous sentir plus en sécurité à l'école ou sur le chemin de l'école ? Si oui, dites-moi lesquelles vous ont fait vous sentir plus en sécurité			pairs éducateurs jeunes ambassadeurs les mentors GLEE Paiement des frais scolaires Moyen de transport pour se rendre à l'école (vélo) Formation pour la production de serviettes hygiéniques Autre _____
GLEE_12	Est-ce que l'une des activités GLEE (ÉNUMÉREZ-LES) vous a permis fréquenter l'école plus régulièrement ? Si oui, dites-moi lesquelles			pairs éducateurs jeunes ambassadeurs les mentors GLEE Paiement des frais scolaires Moyen de transport pour se rendre à l'école (vélo) Formation pour la production

	vous ont fait vous sentir plus en sécurité		de serviettes hygiéniques Autre _____
Je vais maintenant vous poser des questions sur votre famille et la maison où vous habitez.			
SES_1	Combien de membres du ménage sont âgés de 15 ans ou moins ?		A. Sept ou plus B. Six C. Cinq D. Quatre E. Trois F. Deux G. Un H. Aucun
SES_2	Le chef de ménage masculin, sait-il lire et écrire en Français, Arabe, Anglais, une langue nationale, ou une autre langue ?		A. Non B. Oui C. Il n'y a pas un chef de ménage masculin
SES_3	Nature du sol ?		A. Terre battue/sable, ou autre B. Bouse d'animaux C. Chape de ciment, ou carreaux
SES_4	Nature de la toiture ?		A. Paille, chaume, natte, ou autre B. Banco, tôle, dalle, ou tuile
SES_5	Type d'aisance (WC) ?		A. Dans la nature, ou autre B. Latrine, ou chasse d'eau
SES_6	Le ménage possède-t-il des télévisions qui sont en bon état ?		A. Non B. Oui
SES_7	Le ménage possède-t-il des radios (avec ou sans cassette) ou chaînes hifi qui sont en bon état ?		A. Non B. Oui
SES_8	Le ménage possède-t-il des motos qui sont en bon état ?		A. Non B. Oui

SES_9	Combien de téléphones mobiles qui sont en bon état le ménage possède-t-il ?		A. Aucun, ou un B. Deux ou plus
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SCHOOL INVENTORY

Nom de la variable	Question	Réponse
DATE	Date de l'entretien (jour/mois/année)	_ _ / _ _ / _ _
HEURE_DÉBUT	Heure du début de l'entretien (format 24 heures)	_ _ : _ _
RÉGION	Région	Sélectionnez l'une des deux : Kayes Mopti
AE	AE	Add list with sample
COMMUNE	Commune	Add list with sample
VILLAGE	Village	Add list with sample
GPS	Localisation par GPS	This is not localization on SurveyCTO
NOM DE L'ÉCOLE	Nom de l'école	Add list with sample
ENQUÊTEUR	Nom de l'enquêteur	Add list of enumerators Remarque : Rempli automatiquement
SEXE	Sexe de la personne interrogée	0. Homme 1. Femme
RÔLE	Rôle ou poste occupé par le participant(e)	1. Directeur/trice 2. Adjoint(e) 3. Intérimaire

L'ENQUÊTEUR/TRICE LIT LA MENTION SUIVANTE : Nous aimerions savoir comment les écoles maintiennent leurs registres. Quels types de registres conservez-vous dans cette école ? Je demanderai également à voir ces registres.		
Q1.1	Votre école conserve-t-elle des registres sur l'enregistrement ou l'inscription des élèves ?	1. Oui 0. Non
Q1.2	Votre école conserve-t-elle des registres sur le passage des élèves d'une année à l'autre ?	1. Oui 0. Non
Q1.3	Votre école conserve-t-elle des registres sur le taux d'abandon des élèves ?	1. Oui 0. Non
Q1.4	Votre école conserve-t-elle des registres sur le taux de présence des élèves ?	1. Oui 0. Non
Q1.5	Votre école conserve-t-elle les informations sur les élèves provenant de CSA ?	1. Oui 0. Non

Section 2, Inscription.

INSTRUCTIONS DESTINÉES À L'ENQUÊTEUR/TRICE : Après avoir pris une photo du registre, veuillez utiliser les données enregistrées dans ce document pour remplir le tableau suivant avec le nombre des élèves inscrits à l'école.

A. Cochez chaque niveau scolaire offert au sein de l'école.

B. Saisissez le nombre des élèves inscrits à chaque année scolaire. Saisissez « 0 » s'il n'y en a aucune. Saisissez 777 si des données manquent ou ne sont pas disponibles.

	Classe offerte	Nombre de filles inscrites en 2020-21	Nombre de garçons inscrits en 2020-21	Nombre de filles inscrites en 2019-20	Nombre de garçons inscrits en 2019-20	Nombre de filles inscrites en 2018-19	Nombre de garçons inscrits en 2018-19
1 ^{ère} année	1. Oui 0. Non						
2 ^{ème} année	1. Oui						

	0. Non						
3 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _	_ _	_ _
4 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _	_ _	_ _
5 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _	_ _	_ _
6 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _	_ _	_ _
7 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _	_ _	_ _
8 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _	_ _	_ _
9 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _	_ _	_ _

Section 3	Classe offerte	Nombre de filles CSA inscrites en 2020-21	Nombre de garçons CSA inscrits en 2020-21	Nombre de filles CSA inscrites en 2019-20	Nombre de garçons CSA inscrits en 2019-20
1 ^{ère} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
2 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
3 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
4 ^{ème} année	1. Oui	_ _	_ _	_ _	_ _

	0. Non				
5 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
6 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
7 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
8 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
9 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
	Classe offerte	Nombre de filles ayant fini 2017-2018	Nombre de garçons ayant fini 2017-2018	Nombre de filles ayant fini 2018-2019	Nombre de garçons ayant fini 2018-2019
1 ^{ère} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
2 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
3 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
4 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
5 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
6 ^{ème} année (fin du	1. Oui 0. Non	_ _	_ _	_ _	_ _

premier cycle)					
7 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
8 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
9 ^{ème} année (fin du deuxième cycle)	1. Oui 0. Non	_ _	_ _	_ _	_ _
Section 4	Classe offerte	Nombre de filles ayant abandonné en 2017-2018	Nombre de garçons ayant abandonné en 2017-2018	Nombre de filles ayant abandonné en 2018-2019	Nombre de garçons ayant abandonné en 2018-2019
1 ^{ère} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
2 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
3 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
4 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
5 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
6 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
7 ^{ème} année	1. Oui	_ _	_ _	_ _	_ _

	0. Non				
8 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
9 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
	Classe offerte	Nombre de filles CSA ayant abandonné en 2018-2019	Nombre de garçons CSA ayant abandonné en 2018-2019	Nombre de filles CSA ayant abandonné en 2019-2020	Nombre de garçons CSA ayant abandonné en 2019-2020
1 ^{ère} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
2 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
3 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
4 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
5 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
6 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
7 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
8 ^{ème} année	1. Oui 0. Non	_ _	_ _	_ _	_ _
9 ^{ème} année	1. Oui	_ _	_ _	_ _	_ _

	0. Non				
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Section 5: Présence des élèves

INSTRUCTIONS DESTINÉES À L'ENQUÊTEUR :

Allez dans la classe (2ème, 4ème et 8ème) et comptez combien de filles et combien de garçons sont présents.

Comptez les élèves - ne vous fiez pas aux informations recueillies par l'enseignant (ou le tableau mural) au début de la journée scolaire.

	Classe offerte	Filles présentes jour de la collecte des données	Garçons présents le jour de la collecte des données
2 ^{ème} année	1. Oui 0. Non	_ _	_ _
4 ^{ème} année	1. Oui 0. Non	_ _	_ _
8 ^{ème} année	1. Oui 0. Non	_ _	_ _

Section 6: Inventaire en matière d'hygiène

INSTRUCTIONS DESTINÉES À L'ENQUÊTEUR : Déplacez-vous dans l'école, avec la personne interrogée, et enregistrez les réponses suivantes.

Nom de la variable	Question	Valeur/Réponse
Q6.1	Y a-t-il une source d'eau fonctionnelle dans la cour d'école ou dans l'enceinte scolaire ?	1. Oui 0. Non
Q6.2	Y a-t-il une source d'eau améliorée dans la cour d'école ou dans l'enceinte scolaire ?	1. Oui 0. Non
Q6.3	L'école dispose-t-elle de toilettes ou de latrines ?	1. Oui

		0. Non
Q6.3b	De combien de cabines dispose-t-elle ?	_____
Q6.4	De quels types de toilettes l'école dispose-t-elle ? (Cochez toutes les réponses possibles)	1 : Chasse d'eau 2 : Latrine à fosse avec plaque 3 : Latrine à fosse sans plaque / Fosse ouverte 4 : Latrines aérées à fosse 5 : Toilettes dotées de systèmes de compostage / Toilettes EcoSan 6 : Seau 7 : Fosse surplombée 555 : Autre : 777 : Non applicable (pas de système sanitaire dans l'école)
Q6.5	Est-ce que les toilettes sont fonctionnelles ?	1. Oui, toutes 2. Oui, Certaines 1. Non
Q6.6	Est-ce que les toilettes sont propres ?	1. Oui 1. Non
Q6.7	Les latrines sont-elles séparées pour les garçons et les filles ?	2. Oui - Blocs géographiquement séparés filles / garçons 3. Oui – Latrines séparées par un muret 0. Non
Q6.7b	Y-a-t- il un symbole ou écriture qui précise que telle cabine est pour filles ou garçons ?	1. Oui 1. Non

Q6.8	Combien de compartiments de toilettes individuels pour filles peuvent être verrouillés de l'intérieur ?	_ _ _ _
Q6.9	Combien de compartiments de toilettes individuels pour filles contiennent du matériel de nettoyage anal (eau, papier toilette) ?	_ _ _ _
Q6.10	Combien de toilettes sont accessibles aux enfants handicapés ?	_ _ _ _
Q6.11	Existe-t-il des toilettes disponibles dans l'école ayant été conçues pour des enfants plus jeunes ?	1. Tous 2. Certains 0. Aucun
Q6.12	Fournissez le nombre de toilettes/latrines fonctionnelles étant :	
Q6.12.1	Exclusivement destinées aux filles	_ _ _ _
Q6.12.2	Exclusivement destinées aux garçons	_ _ _ _
Q6.12.3	Destinées aux garçons et aux filles, collectives	_ _ _ _
Q6.12.4	Exclusivement destinées aux femmes enseignantes ou au personnel féminin	_ _ _ _
Q6.12.5	Exclusivement destinées aux hommes enseignants ou au personnel masculin	_ _ _ _
Q6.12.6	Pour les femmes et les hommes enseignants, collectives	_ _ _ _
Q6.12.7	Pouvant être utilisées par quiconque au sein de l'école (élèves/enseignants, hommes/femmes)	_ _ _ _
Q6.12.8	Latrines équipée de kits et exclusivement destinées aux filles pour la gestion des menstrues.	_ _ _ _

Q6.13	Au moment de la visite, les récipients à déchets/chambres de compostage/fosses septiques étaient-ils, de toute évidence, trop pleins ou débordaient-ils ?	1. Oui 0. Non 5 : Pas en mesure d'observer
Q6.14	Au moment de la visite, avez-vous vu une fosse pour brûler les serviettes hygiéniques ?	1. Oui 0. Non
Q6.15	Au moment de la visite, avez-vous vu un incinérateur pour brûler les serviettes hygiéniques ?	1. Oui 0. Non
Q6.16	L'école dispose-t-elle d'un système de drainage pour éliminer les eaux usées de l'enceinte scolaire ?	1. Oui 0. Non
Q6.17	Si oui, le système de drainage était-il fonctionnel au moment de la visite ?	1. Oui 0. Non
Q6.18	L'école dispose-t-elle d'installations pour se laver les mains ?	1. Oui 0. Non
Q6.19	De quels types d'installations pour se laver les mains l'école dispose-t-elle ?	1 : Eau courante d'un système de canalisation ou d'un réservoir (robinet et lavabo, réservoir d'eau de pluie avec robinet, seau à robinet) 2 : Système de versement manuel (ex. seau ou louche) 3 : Bassine/ Seau (lavage de mains fait dans l'eau sans eau courante et sans versement) 888 : Autre
Q6.20	Combien y a-t-il d'installations pour le lavage des mains ?	_ _ _
Q6.21	Y a-t-il des installations pour le lavage des mains à moins de 10 mètres des latrines ?	1. Oui 0. Non

Q6.21b	Y a-t-il des installations pour le lavage des mains dans la cour d'école ou en proximité de salles de classe ?	1. Oui 0. Non
Q6.22	Au moment de la visite, de l'eau était-elle disponible pour se laver les mains au niveau de ces installations ?	1. Oui 0. Non 4 : Pas d'eau disponible
Q6.23	Au moment de la visite, y avait-il du savon ou des cendres pour se laver les mains au niveau de ces installations ? (Visitez l'ensemble des installations pour le lavage des mains au sein de l'école)	1. Oui 0. Non 4 : Pas d'eau disponible
Q6.24	Combien d'installations pour le lavage des mains sont accessibles aux enfants handicapés ? (Le savon (ou les cendres) et l'eau pouvaient être atteints)	1. Oui 0. Non
Q6.25	Les installations pour le lavage des mains sont-elles accessibles aux enfants plus jeunes ? (Le savon (ou les cendres) et l'eau pouvaient être atteints)	1. Oui 0. Non
Q6.26	Les installations pour le lavage des mains montrent-elles des signes d'utilisation ?	1. Oui 0. Non
Q6.27	Si les installations pour le lavage des mains portent le nom d'un partenaire, quel partenaire a fourni cette installation ?	1. Un autre projet de l'USAID 2. L'UNICEF 3. L'Union européenne 4. Une autre organisation internationale partenaire 5. Une autre organisation nationale partenaire

Section 7 : Inventaire de l'école

INSTRUCTIONS DESTINÉES À L'ENQUÊTEUR : Déplacez-vous dans l'école, avec la personne interrogée, et enregistrez les réponses suivantes.

Nom de la variable	Question	Valeur/Réponse
Q7.1	Cette école a-t-elle une bibliothèque ?	1. Oui 0. Non
Q7.2	Cette école a-t-elle une cantine scolaire ?	1. Oui 0. Non
Q7.3	Combien y a-t-il de salles de classe utilisées dans votre école ? <i>NB Compter même en matériaux provisoires</i>	_____

Section 8: Enseignant(e)s de l'école

INSTRUCTIONS DESTINÉES À L'ENQUÊTEUR : Déplacez-vous dans l'école, avec la personne interrogée, et enregistrez les réponses suivantes.

Nom de la variable	Question	Valeur/Réponse
Q8.1	Combien des enseignant(e)s enseignent dans cette école ?	_____
Q8.2	Combien d'enseignants de sexe masculin y-a-t'il dans votre école ? <i>[NB : Inclure le directeur]</i>	
Q8.3	Combien d'enseignants de sexe féminin y-a-t'il dans votre école ? <i>[Inclure la directrice]</i>	

PRINCIPAL SURVEY

Nom de la variable	Question	Réponse
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DATE	Date de l'entretien (jour/mois/année)	_ _ / _ _ / _ _
HEURE_DÉBUT	Heure du début de l'entretien (format 24 heures)	_ _ : _ _
RÉGION	Région	Sélectionnez l'une des deux : Kayes Mopti
AE	AE	
COMMUNE	Commune	
VILLAGE	Village	
GPS	Localisation par GPS	
NOM DE L'ÉCOLE	Nom de l'école	
ENQUÊTEUR	Nom de l'enquêteur	Remarque : Rempli automatiquement
100	Êtes-vous le directeur/trice en titre de l'école ?	☐ Directeur/trice ☐ Adjointe ☐ Intérimaire
101	Genre (regardez l'interlocuteur et cochez)	☐ Masculin ☐ Féminin
102	Quel âge avez-vous ? [NB : mettre 99 si la personne ne veut pas répondre]	_____ ans
103	Quelle(s) classe(s) enseigniez-vous ?	☐ 1 ^{ère} année ☐ 2 ^{ème} année ☐ 3 ^{ème} année

		• 4^{ème} année • 5^{ème} année • 6^{ème} année • 7^{ème} année • 8^{ème} année • 9^{ème} année • Aucune (Seulement directeur)
104	[Q100 = Directeur] Depuis combien d'années êtes-vous directeur d'établissement dans cette école ?	_____ années
105	Quels sont les ONG/organismes qui travaillent ou appuient votre école ?	• GLEE/Winrock • Food for Education (Cantine Scolaire) • Aucune • Autres _____
206	Dans quels domaines ?	• Éducation des filles • Cantine scolaire • Formation des enseignants • Eau/WASH • Hygiène Menstruelle

		• Enseignement Coranique • Autres_____
On voudrait parler des taux d'inscription et d'abandon dans votre école et des transferts des élèves des centres de scolarisation accélérée.		
200	Pendant cette année scolaire, avez-vous reçu des élèves qui ont fréquenté un CSA pendant l'année scolaire passée ou la précédente ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
201	Si oui Q 200 Quelles sont les difficultés de ces élèves par rapport à la fréquence/l'assiduité à l'école ?	☐ 1 Distance de l'école ☐ 2 Disponibilité des matériels scolaires ☐ 3 Différentes méthodes utilisées par les enseignant(e)s ☐ 4 Autre _____ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
202	Si oui Q 200 Est-ce que ces difficultés sont différentes par rapport aux autres élèves ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
203	Si oui Q 200 et Si école GLEE Est-ce que le projet GLEE vous a aidé à résoudre ces difficultés ?	☐ 1 Oui complètement ☐ 2 Oui partiellement ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse

204	Si oui 203 Comment ?	☐ 1 Paiement des frais scolaires ☐ 2 Sessions de sensibilisation ☐ 3 Autres _____ ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
205	Pendant cette année scolaire, y a-t-il des élèves filles qui ont arrêté de fréquenter l'école ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
206	[Si oui à la question 205] À votre connaissance, quelles sont les raisons principales pour lesquelles ces élèves ont arrêté de fréquenter ?	1 Impossibilité de payer les frais de scolarité 2 Nécessité de travailler à la maison/en dehors de la maison pour supporter la famille 3 Manque de sécurité en route vers l'école 4 Manque de sécurité à l'école 5 Manque d'enseignant(e)s/salles de classe à l'école 6 Problèmes de santé 7 Problèmes avec les enseignant(e)s 8 Manque de toilettes 9 Mariage/mariage précoce 10 Manque d'intérêt pour l'école 11 Problèmes avec les autres élèves 12 COVID-19 13 Changement de sites des parents 14 exode dû à l'insécurité

		Autre Ne sait pas Refuse de répondre/pas de réponse
207	Si école GLEE Selon vous, dans quelle mesure le taux d'inscription des filles a changé depuis le début du projet GLEE ?	☐ Il a beaucoup augmenté (plus que 80% de filles en plus) ☐ Il a augmenté moyennement (plus que 25% de filles en plus) ☐ Il a peu augmenté (au plus 25% de filles) ☐ Il n'a pas vraiment changé ☐ Ne sait pas / Pas de réponse
208	Si école GLEE Selon vous, dans quelle mesure l'assiduité des filles a changée depuis le début du projet GLEE ?	☐ Les filles sont beaucoup plus assidues ☐ L'assiduité a augmenté (plus que 25% en plus) ☐ Il a peu augmenté (au plus 25%) ☐ Il n'a pas vraiment changé ☐ Ne sait pas / Pas de réponse
209	Pendant cette année scolaire, y a-t-il des élèves garçons qui ont arrêté de fréquenter l'école ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
210	SI oui 209 À votre connaissance, quelles sont les raisons principales pour lesquelles ces élèves ont arrêté de fréquenter ?	1 Impossibilité de payer les frais de scolarité 2 Nécessité de travailler à la maison/en dehors de la maison pour supporter la famille 3 Manque de sécurité en route vers l'école

		4 Manque de sécurité à l'école 5 Manque d'enseignant(e)s/salles de classe à l'école 6 Problèmes de santé 7 Problèmes avec les enseignant(e)s 8 Manque de toilettes 9 Mariage/mariage précoce 10 Manque d'intérêt pour l'école 11 Problèmes avec les autres élèves 12 COVID-19 13 Changement de sites des parents 14 exode dû à l'insécurité Autre Ne sait pas Refuse de répondre/pas de réponse
300	Avez-vous reçu une formation professionnelle au cours des 3 dernières années ? <i>[NB : Ne pas prendre en considération les réunions pédagogiques, inclure les formations de GLEE]</i>	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
301	Si oui 300 Sur quelles thématiques ? Plusieurs réponses possibles	☐ Pédagogie différenciée ☐ Approche équilibrée ☐ Genre ☐ Violence de genre ☐ Hygiène menstruelle ☐ Sécurité à l'école

		☐ Formation coranique ☐ Formation AGR (activités génératrices de revenus) ☐ Culture de la Paix ☐ Rôle et responsabilités du CGS ☐ Plan d'urgence ☐ AUTRE _____ ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
302	Si oui 300 Dans quelle mesure pensez-vous que la formation reçue vous a aidé ?	☐ Beaucoup aidé ☐ Assez bien aidé ☐ Moyennement aidé ☐ Pas vraiment aidé ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
303	Si oui 300 Dans quelle mesure pensez-vous que la formation reçue par les enseignant(e)s de cette école les a aidé à intégrer les élèves provenant des CSA (ou CSA/P)?	☐ Beaucoup aidé ☐ Assez bien aidé ☐ Moyennement aidé ☐ Pas vraiment aidé ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
Je vais vous poser des questions sur les activités du programme GLEE au sein de votre école. Pour chaque activité veuillez nous dire si l'activité a été mise en place dans l'école. Votre école dispense-t-elle des sessions de communication/sensibilisation sur ...		
400	L'éducation des filles ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse

400b	Si oui 400 Qui dispense ces sessions ?	- les pairs éducateurs, - les jeunes ambassadeurs, - les mentors GLEE, - les Enseignants Autre _____
400c	Si oui 400 Quand a été dispensée la dernière session ?	Date _____ Il y a 2 mois Il y a 3 mois ou plus L'année passée ou avant ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
400d	Si oui 400 À votre avis, les élèves sont-elles intéressées et participent-elles activement à ces séances ?	☐ Beaucoup intéressées ☐ Assez bien intéressées ☐ Moyennement intéressées ☐ Pas vraiment intéressées ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
Votre école dispense-t-elle des sessions de communication/sensibilisation sur		
401	Les violences basées sur le genre,	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
401b	Si oui 401 Qui dispense ces sessions ?	- les pairs éducateurs, - les jeunes ambassadeurs, - les mentors GLEE, - les Enseignants Autre _____
401c	Si oui 401	Date _____

	Quand a été dispensée la dernière session ?	Il y a 2 mois Il y a 3 mois ou plus L'année passée ou avant ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
401d	Si oui 401 À votre avis, les élèves sont-elles intéressées et participent-elles activement à ces séances ?	☐ Beaucoup intéressées ☐ Assez bien intéressées ☐ Moyennement intéressées ☐ Pas vraiment intéressées ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
402	la sécurité scolaire ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
402b	Si oui 402 Qui dispense ces sessions ?	- les pairs éducateurs, - les jeunes ambassadeurs, - les mentors GLEE, - les Enseignants Autre _____
402c	Si oui 402 Quand a été dispensée la dernière session ?	Date _____ Il y a 2 mois Il y a 3 mois ou plus L'année passée ou avant ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
402d	Si oui 402 À votre avis, les élèves sont-elles intéressées et	☐ Beaucoup intéressées ☐ Assez bien intéressées

	participent-elles activement à ces séances ?	☐ Moyennement intéressées ☐ Pas vraiment intéressées ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
403	La santé de la reproduction (sida, IST,) ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
403b	Si oui 403 Qui dispense ces sessions ?	- les pairs éducateurs, - les jeunes ambassadeurs, - les mentors GLEE, - les Enseignants Autre _____
403c	Si oui 403 Quand a été dispensée la dernière session ?	Date _____ Il y a 2 mois Il y a 3 mois ou plus L'année passée ou avant ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
403d	Si oui 403 À votre avis, les élèves sont-elles intéressées et participent-elles activement à ces séances ?	☐ Beaucoup intéressées ☐ Assez bien intéressées ☐ Moyennement intéressées ☐ Pas vraiment intéressées ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
404	Le Planning Familial (PF) et le COVID-19 ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
404b	Si oui 404	- les pairs éducateurs,

	Qui dispense ces sessions ?	- les jeunes ambassadeurs, - les mentors GLEE, - les Enseignants Autre _____
404c	Si oui 404 Quand a été dispensée la dernière session ?	Date _____ Il y a 2 mois Il y a 3 mois ou plus L'année passée ou avant ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
404d	Si oui 404 À votre avis, les élèves sont-elles intéressées et participent-elles activement à ces séances ?	☐ Beaucoup intéressées ☐ Assez bien intéressées ☐ Moyennement intéressées ☐ Pas vraiment intéressées ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
405	L'hygiène menstruelle ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
405b	Si oui 405 Qui dispense ces sessions ?	- les pairs éducateurs, - les jeunes ambassadeurs, - les mentors GLEE, - les Enseignants Autre _____
405c	Si oui 405 Quand a été dispensée la dernière session ?	Date _____ Il y a 2 mois Il y a 3 mois ou plus

		L'année passée ou avant ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
405d	Si oui 405 À votre avis, les élèves sont-elles intéressées et participent-elles activement à ces séances ?	☐ Beaucoup intéressées ☐ Assez bien intéressées ☐ Moyennement intéressées ☐ Pas vraiment intéressées ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
406	Le mariage forcé/précoce ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
406b	Si oui 406 Qui dispense ces sessions ?	- les pairs éducateurs, - les jeunes ambassadeurs, - les mentors GLEE, - les Enseignants Autre _____
406c	Si oui 406 Quand a été dispensée la dernière session ?	Date _____ Il y a 2 mois Il y a 3 mois ou plus L'année passée ou avant ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
406d	Si oui 406 À votre avis, les élèves sont-elles intéressées et participent-elles activement à ces séances ?	☐ Beaucoup intéressées ☐ Assez bien intéressées ☐ Moyennement intéressées ☐ Pas vraiment intéressées

		☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
407	Qui s'occupe de l'hygiène et de la propriété de l'école ?	1. Les filles 2. Les garçons 3. Les filles et les garçons 4. Les élèves sous la direction du club d'hygiène/gouvernement d'enfants 5. Les élèves sous la direction d'un enseignant/directeur 6. Une agence ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
408	Votre école a-t-elle une personne ressource qui conseille les filles lorsque les règles surviennent à l'école ?	1. Oui 0. Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
409	Y a-t-il un CGS dans votre école ?	1. Oui 0. Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
410	Si oui 409 Le plan d'action du comité de gestion de votre établissement comporte-t-il un budget en matière d'hygiène ?	1. Oui 0. Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
411	Votre école dispose-t-elle d'un code de conduite mis à jour ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
412	Si oui 411 Est-il mis en œuvre ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse

413	Si oui 412 Pouvez-vous nous fournir des exemples de mise en œuvre du code de conduite ?	- Propreté de l'école - Déontologie des enseignants - Habillement des élèves - Habillement des enseignants - Sécurité dans et en dehors de l'école - Assiduité des élèves - Participation des parents à l'application de code de conduite ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
414	Votre école dispose-t-elle d'une boîte de suggestions que les élèves de l'école peuvent utiliser pour signaler les incidents de nature sexuelle ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
415	Si oui 414 Dans votre école, avez-vous le "comité restreint" qui ouvre la boîte pour vérifier les messages ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
416	Si oui 415 A quelle fréquence se réunissent-ils pour ouvrir la boîte ?	☐ Une fois par semaine ☐ 2-3 fois par mois ☐ 1 fois par mois ou moins ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
417	Votre école dispose-t-elle des affiches Hotline qui expliquent les incidents de nature sexuelle ?	☐ 1 Oui ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
418	Votre école a-t-elle reçu l'accompagnement pour les	☐ 1 Oui par GLEE

	frais de scolarisation des élèves pour cette année scolaire ?	☐ 1 Oui par un autre organisme ☐ 0 Non ☐ 777 Ne sait pas ☐ 888 Refuse de répondre/Pas de réponse
419	Avez-vous reçu l'accompagnement pour tous les élèves ou pour une partie seulement ?	☐ 1 Oui pour tous les élèves ☐ 2 Oui pour certains élèves

ADOLESCENT FGD GUIDE

1a. Quand avez-vous commencé à fréquenter cette école ?

1b. Avez-vous fréquenté un centre de scolarisation accéléré (CSA) avant d'être dans cette école ?

1b. Dites-nous les activités auxquelles vous avez participées.

1c. Avez-vous reçu de matériels ou supports par le projet GLEE (vélo ? Kit scolaire ?)

2a. Parmi les activités citées en 1b, quelles sont celles qui vous paraissent plus intéressantes ou très utiles ? Pourquoi ?

2b Et quelles activités vous semblent-elles moins intéressantes ou peu utiles ? Pourquoi ?

3. Dans le cadre des sessions de communication/sensibilisation auxquelles vous avez assisté/participé, quelles ont été les thématiques abordées ?

Pouvez-vous mentionner/donner/citer des informations que vous avez apprises ?

3b. Qu'avez-vous fait de ces informations ? (Pratiquer, partager avec amies, autres filles et femmes à la maison...)

4. Quels changements significatifs/visibles le projet a apporté chez vous ou chez les autres (que vous avez observé) ? Veuillez les décrire en donnant des exemples.

LES RAISONS PRINCIPALES POUR ALLER ET RESTER A L'ECOLE

5. Pourquoi continuez-vous à aller à l'école /CSA ? Quelles sont les raisons principales ? Quelles sont les activités présentes à l'école qui vous aident à fréquenter ?

LES RAISONS PRINCIPALES POUR ABANDONNER

6. Avez-vous connaissance des élèves qui ont abandonné l'école ou le CSA ? Si oui, Quelles sont les raisons de l'abandon

LES OBSTACLES A L'EDUCATION DES FILLES

7. Selon vous, quels sont les obstacles à l'éducation pour les filles adolescentes et pour vous-même ? Veuillez donner des exemples. Pensez-vous que le projet GLEE vous a aidé à éliminer /surmonter certains obstacles ? Si oui, lesquels ?

L'INSECURITE A L'ECOLE ET SUR LA ROUTE DE L'ECOLE

8. J'aimerais maintenant parler de la sécurité à l'école et en/sur la route vers/de l'école (citez quelques éléments de sécurité pour une rapide compréhension).

Vous sentez-vous en sécurité à l'école ? et sur la route de l'école ?

N'avez-vous jamais rencontré des incidents de Violences Basées sur le Genre à l'école? Si oui, lesquels ?

8b. Est-ce que cela a changé depuis le début du projet GLEE ? Si oui, comment ? Pouvez-vous nous donner des exemples ?

8c. Quelles sont les activités que vous aident à vous sentir en sécurité à l'école ? et sur la route de l'école ?

8d. Connaissez-vous le code de conduite de l'école ? Pouvez-vous nous expliquer comment il est utilisé ?

IMPACT DU COVID 19 SUR LA PARTICIPATION AUX CSA ET ECOLE

11. À votre avis, la COVID-19 a-t-elle eu un impact sur votre participation aux CSA ou à l'école l'année dernière ? Si oui, veuillez expliquer pourquoi. Si non, avez-vous vu que cela a eu un impact sur l'accès des filles que vous connaissez ? Expliquez pourquoi.

CONCLUSION

12. Voici les questions que j'avais pour vous. Avez-vous des questions pour moi ou autre chose à partager avec moi ?

TEACHER FGD GUIDE

1. Dans quelle classe enseignez-vous ? Depuis combien d'années êtes-vous enseignant(e) dans cette école ?

2. Quels types d'activités le projet met-il en œuvre et à quelles activités avez-vous participées ?

3. Quelles sont les principales difficultés rencontrées par les filles pour accéder et rester dans votre école ?

4. Pensez-vous que le projet a été efficace pour réduire ou supprimer ces difficultés ? Comment ? Donnez des exemples

5. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les plus efficaces pour réduire les obstacles à l'inscription à l'école et au passage entre le CSA et l'école ?

5a. Est-ce qu'il y a quelques activités que le projet pourrait mettre en place pour améliorer le passage entre le CSA et l'école et augmenter le nombre des élèves qui continuent après avoir fréquenté le CSA ? Pourquoi ? Donnez des exemples

5b. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les plus efficaces pour réduire les obstacles à l'assiduité à l'école ? Pourquoi ? Donnez des exemples

5c. et au maintien à l'école? Veuillez donner des exemples d'activités et expliquer pourquoi vous les trouvez efficaces.

6. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les moins efficaces ? Veuillez donner des exemples d'activités et expliquer pourquoi vous ne les trouvez pas efficaces.

7. Avez-vous participé aux formations du projet GLEE pour les enseignant(e)s ? Si oui, pouvez-vous décrire votre expérience avec ces sessions ?

7a. Quelles ont-été les thématiques abordées pendant la formation ?

7b. Pouvez-vous nous donner des exemples de comment vous mettez en pratique dans l'enseignement ce que vous avez appris ?

7c. Pouvez-vous donner des exemples de mise en pratique des nouvelles méthodes ?

8. Dans votre école/communauté, y a-t-il des familles qui ont des difficultés financières qui empêchent les filles d'aller ou de rester à l'école ?

8a. Pouvez-vous nous donner des exemples ?

8b. Pensez-vous que les activités mises en place par le projet ont contribué à réduire ces difficultés ? Comment ?

8c. Pouvez-vous nous donner des exemples ?

9. Dans votre école/communauté, y a-t-il des plans en cours de discussion pour soutenir l'inscription et le maintien des filles à l'école ? Pouvez-vous les décrire ? Y a-t-il eu des discussions sur la manière d'institutionnaliser/ pérenniser certaines des interventions mises en place par le programme GLEE ? Quelles activités pensez-vous qu'il sera possible de poursuivre ?

10. Selon vous, quelles sont les activités du projet GLEE qui ont amélioré la sécurité des filles dans cette école ? Pouvez-vous donner des exemples ? Dans quelles activités portant sur la question de sécurité avez-vous été impliquées ? Quels changements avez-vous observé ? Selon vous, quelles sont les activités du projet GLEE qui ont amélioré la sécurité des filles sur la route pour l'école ? Pouvez-vous donner des exemples ? Dans quelles activités portant sur la question de sécurité avez-vous été impliquées ? Quels changements avez-vous observé ?

11. Dans votre expérience, quelles activités ont été mises en place dans l'école pour combattre la violence basée sur le genre à l'école ? Pensez-vous que ces activités ont contribué à changer les perceptions des enseignant(e)s et du personnel de l'école en ce qui concerne la violence basée sur le

genre à l'école ? Comment ? Donnez des exemples. Pensez-vous que les effets seront durables ? Qu'est-ce que le projet devrait faire pour pérenniser ces changements ?

12. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école ont changé en ce qui concerne les activités WASH et l'hygiène menstruelle ? Si oui, pouvez-vous donner des exemples des changements ? Si non, pourquoi ?

13. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école ont changé en ce qui concerne la planification familiale ? Si oui, pouvez-vous donner des exemples des changements ? Si non, pourquoi ?

14. Pensez-vous que la COVID-19 a eu un impact sur l'accès à l'éducation des filles adolescentes de votre communauté ? Et sur les activités GLEE ? Expliquer.

15. Selon vous, est-ce qu'il y a toujours certains besoins non satisfaits par le projet GLEE par rapport aux filles adolescentes ? Si oui, veuillez les décrire et donner des exemples. Qu'est-ce que le projet devrait faire pour mieux répondre à ces besoins

PRINCIPAL INTERVIEW GUIDE

1. Depuis combien d'années êtes-vous directeur/directrice dans cette école ? Êtes-vous également enseignant(e) dans l'école ?

2. Quels types d'activités le projet met-il en œuvre et à quelles activités avez-vous participé ?

3. Quelles sont les principales difficultés rencontrées par les filles pour accéder et rester à l'école dans votre école ?

4. Pensez-vous que le projet a été efficace pour réduire ou supprimer ces difficultés ?

5. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les plus efficaces pour réduire les obstacles à l'inscription à l'école et au passage entre le CSA et l'école ? Est-ce qu'il y a quelques activités que le projet pourrait mettre en place pour améliorer le passage entre le CSA et l'école et augmenter le nombre des élèves qui continuent après avoir fréquenté le CSA ? Pourquoi ? Donnez des exemples

5b. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les plus efficaces réduire les obstacles à l'assiduité à l'école ?

5c. et au maintien à l'école? Veuillez donner des exemples d'activités et expliquer pourquoi vous les trouvez efficaces.

6. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les moins efficaces ? Veuillez donner des exemples d'activités et expliquer pourquoi vous ne les trouvez pas efficaces.

7. Avez-vous participé aux formations du projet GLEE pour les enseignant(e)s et les directeurs/trices ? Si oui, pouvez-vous nous décrire votre expérience avec ces sessions ? Quelles ont-été les thématiques

abordées pendant la formation ? Pouvez-vous nous donner des exemples de comment vous mettez en pratique ce que vous avez appris ?

8. Dans votre école/communauté, y a-t-il des familles qui ont des difficultés financières qui empêchent les filles d'aller ou de rester à l'école ? Pouvez-vous nous donner des exemples ?

8a. Pensez-vous que les activités mises en place par le projet ont contribué à réduire ces difficultés ? Comment ? Pouvez-vous nous donner des exemples ?

9. Dans votre école/communauté, y a-t-il des plans en cours de discussion pour soutenir l'inscription et le maintien des filles à l'école ? Pouvez-vous les décrire ? Y a-t-il eu des discussions sur la manière d'institutionnaliser certaines des interventions mises en place par le programme GLEE ? Quelles activités pensez-vous qu'il sera possible de poursuivre ?

10. Selon vous, quelles sont les activités du projet GLEE qui ont amélioré la sécurité des filles dans cette école ? Pouvez-vous donner des exemples ? Dans quelles activités portant sur la question de sécurité avez-vous été impliquées ? Quels changements avez-vous observé ?

11. Selon vous, quelles sont les activités du projet GLEE qui ont amélioré la sécurité des filles sur la route pour l'école ? Pouvez-vous donner des exemples ? Dans quelles activités portant sur la question de sécurité avez-vous été impliquées ? Quels changements avez-vous observé ?

12. Selon votre connaissance, quelles activités ont été mises en place et réalisées à l'école pour combattre la violence basée sur le genre à l'école ? Pensez-vous que ces activités ont contribué à changer les perceptions des enseignant(e)s et du personnel de l'école en ce qui concerne la violence de genre à l'école ? Comment ? Donnez des exemples. Est-ce que les effets seront durables ? Que devrait faire le projet pour pérenniser les changements enregistrés ?

13. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école ont-ils changé en ce qui concerne les activités WASH et l'hygiène menstruelle ? Pouvez-vous nous donner des exemples des changements ?

14. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école ont-ils changé en ce qui concerne la planification familiale ? Pouvez-vous nous donner des exemples des changements ?

15. Pensez-vous que la COVID-19 a eu un impact sur l'accès à l'éducation des filles adolescentes de votre communauté ? Et sur les activités GLEE ? Expliquez.

16. Selon vous, est-ce qu'il y a toujours certains besoins non satisfaits par le projet GLEE par rapport aux filles adolescentes ? Si oui, veuillez les décrire et donner des exemples. Qu'est-ce que le projet devrait faire pour mieux répondre à ces besoins ?

CSA FACILITATOR GUIDE

1. Pouvez-vous nous expliquer votre rôle dans le projet ? Depuis quand jouez-vous ce rôle ?

2. Quels types d'activités le projet met-il en œuvre et à quelles activités avez-vous participé ?

3. Quelles sont les principales difficultés rencontrées par les filles pour accéder et rester dans votre école/CSA ?
4. Pensez-vous que le projet a été efficace pour réduire ou supprimer ces difficultés ?
5. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les plus efficaces réduire les obstacles à l'inscription à l'école et au passage entre le CSA et l'école ? Est-ce qu'il y a quelques activités que le projet pourrait mettre en place pour améliorer le passage entre le CSA et l'école et augmenter le nombre des élèves qui continuent après avoir fréquenté le CSA ?
- 5b. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les plus efficaces réduire les obstacles à l'assiduité à l'école ?
- 5c. et au maintien à l'école? Veuillez donner des exemples d'activités et expliquer pourquoi vous les trouvez efficaces.
6. Selon vous, parmi les activités du projet que vous avez mentionné, quelles sont les activités les moins efficaces ?Veuillez donner des exemples d'activités et expliquer pourquoi vous ne les trouvez pas efficaces.
7. Avez-vous participé aux formations du projet GLEE ? Si oui, pouvez-vous nous décrire votre expérience avec ces sessions ? Quelles ont-été les thématiques abordées pendant la formation ? Pouvez-vous nous donner des exemples des activités mises en place dans l'école/CSA ou dans la communauté en suite aux formations ?
- 7a. Pouvez-vous nous donner des exemples des comment vous mettez en pratique dans l'enseignement ce que vous avez appris ?
- 7b. Pouvez-vous donner des exemples de mise en pratique des nouvelles méthodes ?
8. Dans votre école/communauté, y a-t-il des familles qui expériences des difficultés financières qui empêchent les filles d'aller ou de rester à l'école ? Pouvez-vous nous donner des exemples ? Pensez-vous que les activités mises en place par le projet ont contribué à réduire ces difficultés ? Comment ? Pouvez-vous nous donner des exemples ?
9. Selon vous, est-ce que les activités du projet GLEE ont amélioré la sécurité des filles dans l'école ? Pouvez-vous donner des exemples ? Dans quelles activités avez-vous été impliqué ? Quels changements avez-vous observé ?
- 9a. Selon vous, est-ce que les activités du projet GLEE ont amélioré la sécurité des filles dans la route pour l'école ? Pouvez-vous donner des exemples ? Dans quelles activités avez-vous été impliqué ? Quels changements avez-vous observé ?
10. Dans votre expérience, quelles activités ont été mise en place dans la communauté pour combattre la violence de genre à l'école ? Pensez-vous que ces activités ont contribué à changer les perceptions de parents et de membres de la communauté en ce qui concerne la violence de genre à l'école ? Comment ? Donnez des exemples. Pensez que les effets seront durables ? Qu'est-ce que le projet devrait faire pour pérenniser ces changements ?

11. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école/CSA ont-ils changé en ce qui concerne les activités WASH et l'hygiène menstruelle ?

Pouvez-vous nous donner des exemples des changements ?

12. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école/CSA ont-ils changé en ce qui concerne la planification familiale ? Pouvez-vous nous donner des exemples des changements ?

13. Pensez-vous que le COVID-19 a eu un impact sur l'accès à l'éducation des filles adolescentes de votre communauté ? Expliquer.

14. Selon vous, est-ce qu'il y a toujours certains besoins non satisfaits par le projet GLEE par rapport aux filles adolescentes ? Si oui, veuillez les décrire et donner des exemples. Qu'est-ce que le projet devrait faire pour mieux répondre à ces besoins ?

MENTORS-YOUTH AMBASSADORS-PEER EDUCATORS INTERVIEW GUIDE

1. Pouvez-vous nous expliquer votre rôle dans le projet ? Depuis quand jouez-vous ce rôle ?

2. Quels types d'activités le projet met-il en œuvre et à quelles activités avez-vous participées ?

3. Quelles sont les principales difficultés rencontrées par les filles pour accéder et rester à l'école dans votre école/CSA ?

4. Pensez-vous que le projet a été efficace pour réduire ou supprimer ces difficultés ?

5. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les plus efficaces pour réduire les obstacles à l'inscription à l'école et au passage entre le CSA et l'école ? Est-ce qu'il y a quelques activités que le projet pourrait mettre en place pour améliorer le passage entre le CSA et l'école et augmenter le nombre des élèves qui continuent après avoir fréquenté le CSA ?

5a. Selon vous, parmi les activités du projet que vous avez mentionné, quelles sont les activités les plus efficaces réduire les obstacles à l'assiduité à l'école ?

5b. et au maintien à l'école? Veuillez donner des exemples d'activités et expliquer pourquoi vous les trouvez efficaces.

6. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les moins efficaces ? Veuillez donner des exemples d'activités et expliquer pourquoi vous ne les trouvez pas efficaces.

7. Avez-vous participé aux formations du projet GLEE ? Si oui, pouvez-vous décrire votre expérience avec ces sessions ? Quelles ont-été les thématiques abordées pendant la formation ? Pouvez-vous nous donner des exemples des activités mises en place dans l'école ou dans la communauté suite aux formations ?

8. Selon vous, est-ce que les activités du projet GLEE ont amélioré la sécurité des filles dans l'école ? Pouvez-vous donner des exemples ? Dans quelles activités avez-vous été impliqué ? Quels changements avez-vous observé ?

8a. Selon vous, est-ce que les activités du projet GLEE ont amélioré la sécurité des filles sur la route pour l'école ? Pouvez-vous donner des exemples ? Dans quelles activités avez-vous été impliquées ? Quels changements avez-vous observés ?

9. Dans votre expérience, quelles activités ont été mises en place dans la communauté pour combattre la violence basée sur le genre à l'école ? Pensez-vous que ces activités ont contribué à changer les perceptions de parents et de membres de la communauté en ce qui concerne la violence basée sur le genre à l'école ? Comment ? Donnez des exemples. Pensez que les effets seront durables ? Qu'est-ce que le projet devrait faire pour pérenniser ces changements ?

10. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école/CSA ont changé en ce qui concerne les activités WASH et l'hygiène menstruelle ? Pouvez-vous nous donner des exemples des changements ?

11. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école/CSA ont-ils changé en ce qui concerne la planification familiale ? Pouvez-vous nous donner des exemples de changements ?

12. Pensez-vous que la COVID-19 a eu un impact sur l'accès à l'éducation des filles adolescentes de votre communauté ? Expliquer.

13. Selon vous, est-ce qu'il y a toujours certains besoins non satisfaits par le projet GLEE par rapport aux filles adolescentes ? Si oui, veuillez les décrire et donner des exemples. Qu'est-ce que le projet devrait faire pour mieux répondre à ces besoins ?

HEALTH CENTER STAFF INTERVIEW GUIDE

1. Pouvez-vous nous expliquer votre rôle dans le centre de santé ?

2. Quels types d'activités le projet met-il en œuvre et à quelles activités avez-vous participées ? Avez-vous suivi une formation par GLEE ? Si oui, quelles sont les thématiques abordées pendant la formation ? Ont-elles été utiles pour vous ? Si oui en quoi ? Si non pourquoi ?

3. Quel est l'appui du projet GLEE pour améliorer les pratiques de la santé des filles adolescentes ?

4. Selon vous, parmi les activités du projet, quelles sont les activités les plus efficaces ? Pourquoi ?

5. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les moins efficaces ? Pourquoi ?

6. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent les écoles du projet ont changé en ce qui concerne les activités WASH et l'hygiène menstruelle ? Pouvez-vous nous donner des exemples de ces changements ?

6a. Est-ce que vous travaillez avec des adolescent(e)s qui ne fréquentent pas les écoles GLEE ? Si oui, notez- les différences dans leurs attitudes et comportements en ce qui concerne les activités WASH et l'hygiène menstruelle. Pouvez-vous donner des exemples de ces différences ?

7. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent les écoles du projet ont changé en ce qui concerne la planification familiale ? Pouvez-vous donner des exemples des changements ?

7a. Est-ce que vous travaillez aussi avec des adolescent (e)s qui ne fréquentent pas les écoles GLEE ? Si oui, notez les différences dans leurs attitudes et comportements en ce qui concerne la planification familiale. Pouvez-vous donner des exemples de ces différences ?

8. Selon vous, est-ce que les parents et les membres de la communauté ont changé leurs perceptions en ce qui concerne la violence sexuelle à l'école ? Pouvez-vous donner des exemples ?

9. Ce sont toutes les questions que j'ai pour vous. Avez-vous des questions ou autre chose à partager ?

CGS FGD GUIDE

1. Pouvez-vous nous expliquer votre rôle au sein du CGS/APE/AME? Depuis quand êtes-vous membre du CGS/APE/AME?

2. Pouvez-vous nous expliquer votre rôle dans le projet ? Depuis quand jouez-vous ce rôle ?

2a. Quels types d'activités le projet met-il en œuvre et dans quelles activités avez-vous participées?

3. Quelles sont les principales difficultés rencontrées par les filles pour accéder et rester à l'école?

4. Pensez-vous que le projet a été efficace pour réduire ou supprimer ces difficultés ?

5. Selon vous, parmi les activités du projet que vous avez mentionnées, quelles sont les activités les plus efficaces réduire les obstacles à l'inscription à l'école et au passage entre le CSA et l'école ? Est-ce qu'il y a quelques activités que le projet pourrait mettre en place pour améliorer le passage entre le CSA et l'école et augmenter le nombre des élèves qui continuent après avoir fréquenté le CSA ?

5a. Selon vous, parmi les activités du projet que vous avez mentionné, quelles sont les activités les plus efficaces pour réduire les obstacles liés à l'assiduité à l'école ?

5b. et au maintien à l'école? Veuillez donner des exemples d'activités et expliquer pourquoi vous les trouvez efficaces.

6. Selon vous, parmi les activités du projet que vous avez mentionné, quelles sont les activités les moins efficaces ? Veuillez donner des exemples d'activités et expliquer pourquoi vous ne les trouvez pas efficaces.

7. Avez-vous participé aux formations du projet GLEE pour les membres de CGS/APE/AME? Si oui, pouvez-vous nous décrire votre expérience avec ces sessions ? Quelles ont-été les thématiques abordées pendant la formation ? Pouvez-vous nous donner des exemples des activités mises en place dans l'école ou dans la communauté suite aux formations ?

8. Dans votre école/communauté, y a-t-il des familles qui ont des difficultés financières qui empêchent les filles d'aller ou de rester à l'école ? Pouvez-vous nous donner des exemples ?

8a. Pensez-vous que les activités mises en place par le projet ont contribué à réduire ces difficultés ? Comment ? Pouvez-vous nous donner des exemples ?

9. Dans votre école/communauté, y a-t-il des plans en cours de discussion pour soutenir l'inscription et le maintien des filles à l'école ? Pouvez-vous les décrire ? Y a-t-il eu des discussions sur la manière d'institutionnaliser / pérenniser certaines des interventions mises en place par le programme GLEE ? Quelles activités pensez-vous qu'il sera possible de poursuivre ?

10. En dehors du support donné par le projet GLEE, avez-vous eu une expérience sur l'allocation de fonds pour soutenir l'inscription des filles (comme le paiement des frais de scolarité ou autre type de soutien) ? Pouvez-vous nous donner un exemple ? Pensez-vous qu'il sera possible de maintenir ces efforts dans le temps ? S'il n'y a pas cette expérience, pensez-vous qu'il sera possible de l'établir ?

11. Selon vous, est-ce que les activités du projet GLEE ont amélioré la sécurité des filles dans cette école ? Pouvez-vous donner des exemples ? Dans quelles activités avez-vous été impliqué ? Quels changements avez-vous observés ?

11a. Selon vous, est-ce que les activités du projet GLEE ont amélioré la sécurité des filles sur la route pour l'école ? Pouvez-vous donner des exemples ? Dans quelles activités avez-vous été impliqué ? Quels changements avez-vous observé ?

12. Selon votre expérience, quelles activités ont été mise en place dans la communauté pour combattre la violence basée sur le genre à l'école ? Pensez-vous que ces activités ont contribué à changer les perceptions des parents et des membres de la communauté en ce qui concerne la violence basée sur le genre à l'école ? Comment ? Donnez des exemples. Pensez que les effets seront durables ? Qu'est-ce que le projet devrait faire pour pérenniser ces changements ?

13. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école ont changé en ce qui concerne les activités WASH et l'hygiène menstruelle ? Pouvez-vous nous donner des exemples des changements ?

14. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école ont changé en ce qui concerne la planification familiale ? Pouvez-vous nous donner des exemples des changements ?

15. Pensez-vous que la COVID-19 a eu un impact sur l'accès à l'éducation des filles adolescentes de votre communauté ? Expliquer.

16. Selon vous, est-ce qu'il y a toujours certains besoins non satisfaits par le projet GLEE par rapport aux filles adolescentes ? Si oui, veuillez les décrire et donner des exemples. Qu'est-ce que le projet devrait faire pour mieux répondre à ces besoins ?

GRANDMOTHER GUIDE

1. Pouvez-vous nous expliquer votre rôle au sein du projet en qualité de grand-mère ? Depuis quand jouez-vous ce rôle ?

2. Quels types d'activités le projet met-il en œuvre et à quelles activités avez-vous participé ?
3. Quelles sont les principales difficultés rencontrées par les filles pour accéder et rester à l'école?
4. Pensez-vous que le projet a été efficace pour réduire ou supprimer ces difficultés ?
5. Avez-vous participé aux formations du projet GLEE pour les grand-mères ? Si oui, pouvez-vous nous décrire votre expérience avec ces sessions ? Quelles ont-été les thématiques abordées pendant la formation ? Pouvez-vous nous donner des exemples des activités mises en place dans l' école ou dans la communauté en suite aux formations ?
6. Dans votre école/communauté, y a-t-il des familles qui expériences des difficultés financières qui empêchent les filles d'aller ou de rester à l'école ? Pouvez-vous nous donner des exemples ?
- 6a. Pensez-vous que les activités mises en place par le projet ont contribué à réduire ces difficultés ? Comment ? Pouvez-vous nous donner des exemples ?
7. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école ont-ils changé en ce qui concerne les activités WASH et l'hygiène menstruelle ? Pouvez-vous nous donner des exemples des changements ?
8. Selon vous, est-ce que les attitudes et les comportements des adolescentes qui fréquentent cette école ont-ils changé en ce qui concerne la planification familiale ? Pouvez-vous nous donner des exemples des changements ?
9. Pensez-vous que le COVID-19 a eu un impact sur l'accès à l'éducation des filles adolescentes de votre communauté ? Expliquer.
10. Selon vous, est-ce qu'il y a toujours certains besoins non satisfaits par le projet GLEE par rapport aux filles adolescentes ? Si oui, veuillez les décrire et donner des exemples. Qu'est-ce que le projet devrait faire pour mieux répondre a ces besoins ?

ANNEX 4: KII PARTICIPANT LIST

KEY INFORMANT INTERVIEW PARTICIPANTS

NATIONAL AND REGIONAL LEVEL KEY INFORMANTS

- Mahamadou Keita – DNEF
- Doucouré Bodo Soumaré – DNEF/Chef Division SCOFI
- Fofana Moussa – Agent Division Pédagogique
- Sissoko Kani – Agent Division Pédagogique
- Dembélé Aissata Touré – Agent SCOFI
- Abdrahamane Mama Touré – DNP
- Moussa Macalou – DNP
- Tounkara Sophie Souko – DNFP
- Camara Aboubacar – DNFP
- Traoré Soumana – DNFP
- Sirantou Wagué – DNS/DSR
- Aly Bakayoko – DNS/DSR
- Dr. Fatou Magregua – CNIECS
- Djeneba Dolo – CNIECS

KAYES REGION – AE KAYES

- Nouhoum Maiga – DAE
- Maha Wague – SCOFI/AE
- Luc Kodio – Chef de Division Curricula/AE
- Cheick Aamadou Tidiana Traoré – DRS
- Martine Diakite – Agent DRS
- Donze Diarra – DRPFEP

KAYES REGION – CAP RIVE DROITE

- Mamadou Kone – DCAP
- Salimata Sissoko – SCOFI
- Issa Coulibaly – Conseiller
- Adama Tall – Conseiller
- Moriba Goita – Agent CSRéf
- Inhissa Bengaly – Agent CSCOM

- Christine Savane – Agent CSCOM
- Donze Diarra - DRPFEF

KAYES REGION – CAP RIVE GAUCHE

- Balla Keita – DCAP
- Abdoulaye Konare – Conseiller
- Fatou Konate – SCOFI
- Moriba Goita – CSRéf
- Amadoun Yalcouye – DTC
- Véronica Berthe – Agent CSCOM
- Yousouf Diallo – DTC
- Haby Sylla – Agent CSCOM
- Donze Diarra - DRPFEF

KAYES REGION – CAP KENIEBA

- Ernest Diarra – DCAP
- Aminata Keita – SCOFI
- Mady Keita – Conseiller
- Sega Keita – Maire Conseiller
- Moussa Modibo Diarra – CSRéf
- Sékou Sallah Togo – CSRéf
- Fabougary Sissoko – DTC
- Moussa Diabate – DTC
- Pierre Diarra – DTC
- Faganda Dallo – Che Service Promotion de la Femme de l'enfant et de la famille

MOPTI REGION – AE DOUMENTZA

- Souleymane Aliou – DAE
- Tènin Coulibaly – SCOFI
- Amadou Ongoiba – Chargé Enseignement Fondamental
- Dr. Diaminatou Cisse – DRS Mopti
- Bama Nimaga – DRS Mopti

MOPTI REGION – CAP BANDIAGARA

- Lamine Traoré – DCAP
- David Guindo – Conseiller Pédagogique
- Hamadi Karembé – Conseiller Pédagogique
- Adel Karim Doumbia – CSRéf
- Dr. Zoumane Samaké – CSRéf
- Fatoumata Niagne Diallo – CSCOM
- Blandine Yébéizé – DLPF
- Angelle Kaboré - DLPF

MOPTI REGION – CAP SANGHA

- Kadidia Kodio – DCAP
- Ali Oyé Traoré – CP
- Adinron Kodio – CP
- Atti Guindo – Conseiller à l’orientation
- Mariam Diarra – DTC
- Adiaratou Konaté – DTC
- Lassana Diabaté - DTC

ANNEX 5: EVALUATION TEAM MEMBERS

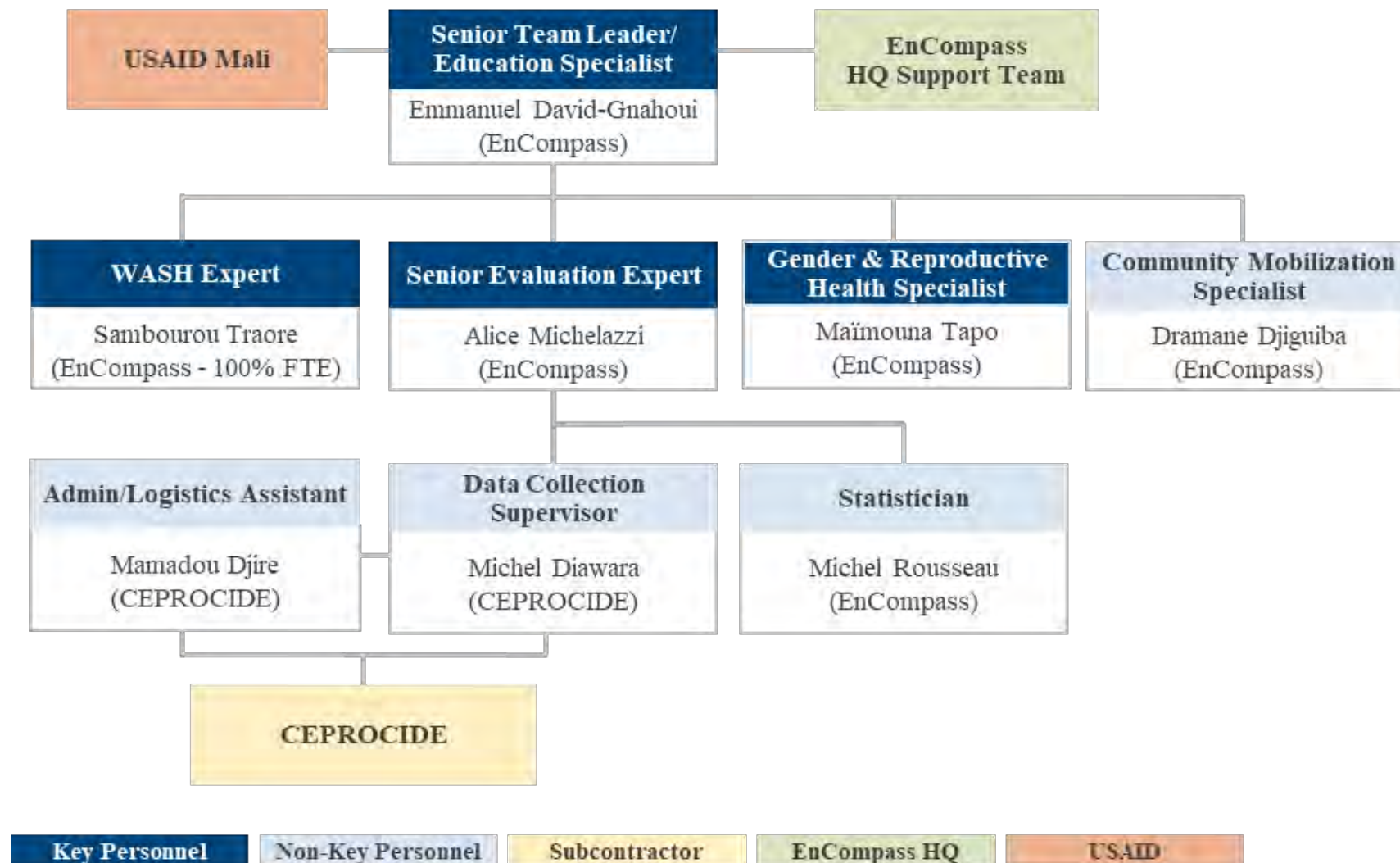
The EnCompass team offers a strong mix of skills and significant experience conducting evaluations for USAID, specifically in the education sector in Mali, and relevant local subject matter knowledge. The evaluation team management approach is represented in the organizational chart in Exhibit 20.

Senior Team Leader/Education Specialist Mr. Emmanuel Moise David-Gnahoui acted as Team Leader (TL). His responsibilities included day-to-day field implementation and oversight of the technical team maintaining close coordination with USAID and the Ministry of National Education (MEN), and ensuring timely deliverables, while providing technical leadership throughout. The TL was assisted by Alice Michelazzi, Senior Evaluation Expert (SEE), in all the phases of the evaluation. The TL and SEE were responsible for drafting the evaluation report and managing the evaluation activities. Additionally, the team included Malian subject matter and evaluation professionals to ensure an accurate, on time, and useful assessment of the GLEE activity's progress. These were Ms. Maimouna Tapo (Gender and Reproductive Health Specialist), Mr. Sambourou Toure (WASH expert), and Mr. Dramane Djiguiba (Community Mobilization Specialist).

EnCompass provided extensive home office support and technical backstop to the evaluation team. Technical backstop was provided by Dr. Patricia Morris, Director of Gender and Inclusive Development and by Dr. Amy Mulcahy-Dunn, Senior Evaluation Advisor. Mr. A. Theodore Rizzo, MEL Specialist, supported the team as the Project Manager and Ms. Emma Venetis acted as Project Coordinator.

Encompass worked with CEPROCIDE to carry out all data collection activities in Kayes and Mopti. Mr. Michel Diawara, as the head of CEPROCIDE, supervised data collection, while Mr. Mamadou Djire ensured efficient scheduling and logistical operations. Additionally, Mr. Michel Rousseau, based in Canada, provided statistical expertise to ensure the highest level of evaluation design quality and quantitative analysis.

Exhibit 20: GLEE Evaluation Organization Chart



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