

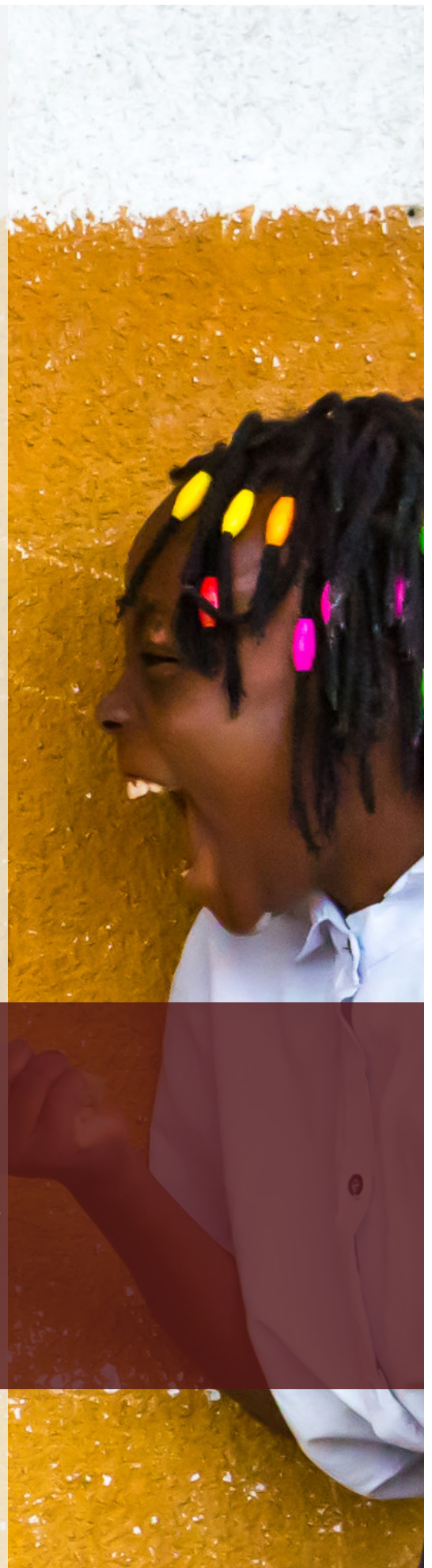


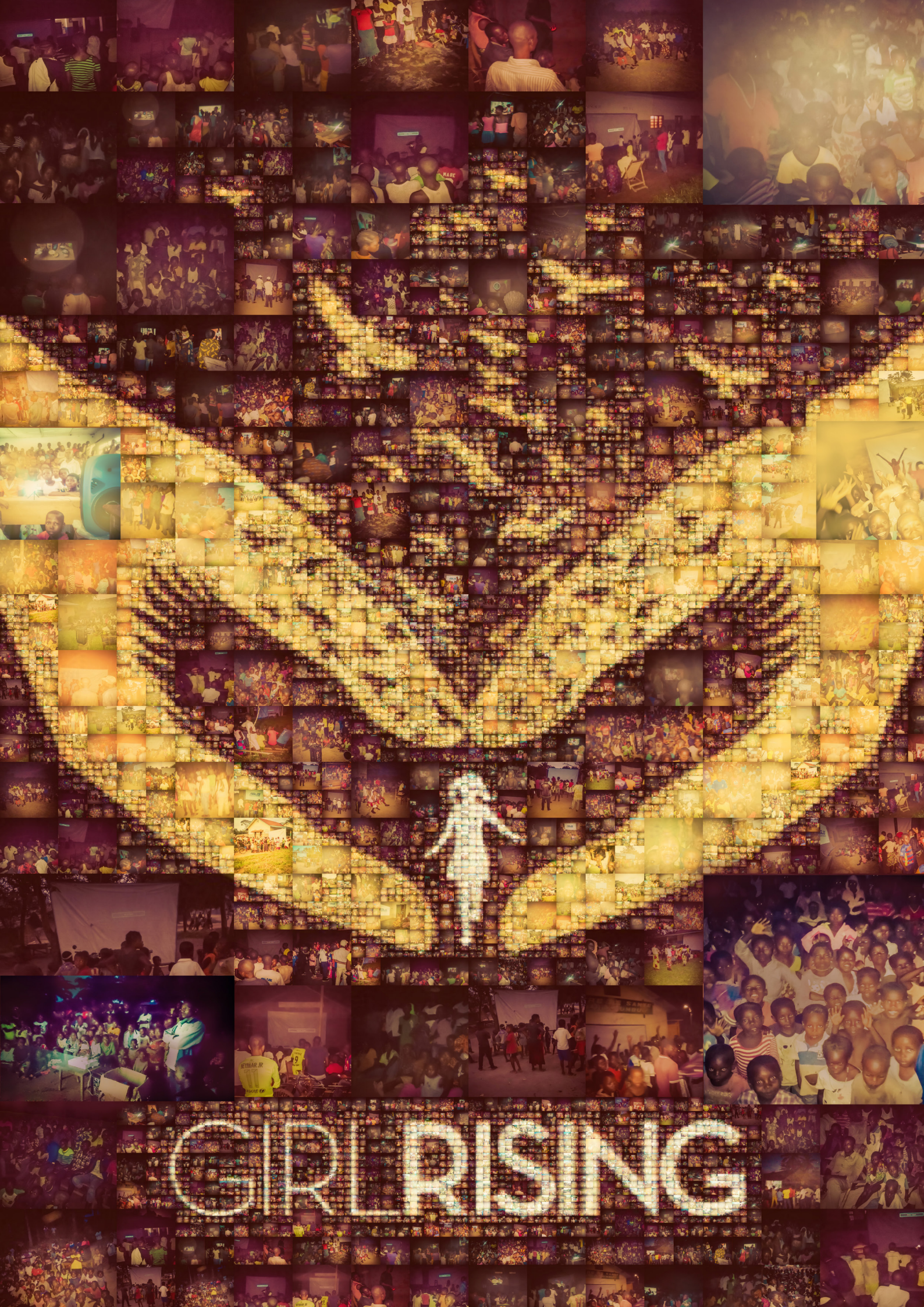
Final Report

ASSP - ENGAGE

Prepared by:
**Evelyn Howatt &
Crystal Stafford**

IMA World Health
DRC
June 1st 2016 – March 30th, 2017





GIRLRISING

Table of Contents

List of Tables & Figures	4
Project Contact Information.....	4
End Results	5
Summing It Up.....	6
Progress Report.....	8
Activity 1: Recruit & Train 31 Communications Ambassadors (CAs).....	9
1.1. # of Communications Ambassadors trained	9
1.2. # of training sessions provided	9
Activity 2: Pilot in Nord Ubangi	9
2.1. # of Communications Ambassadors trained	9
2.2. # of pilot movie nights hosted by location	9
Activity 3: Evaluate Pilot	10
3.1. # focus groups held.....	10
Activity 4: Dub film into Tshiluba	10
4.1. Girl Rising Film exists in Tshiluba.....	10
Activity 5: Scale Up (Host Girl Rising movie nights in all 886 ASSP health areas)	11
5.1. # of movie nights hosted by location.....	11
5.2. # of community members reached by age, gender, & location.....	11
5.3. geographic coverage (% health areas with a movie night that month).....	12
5.4. # of SD cards handed out at movie nights	12
Activity 6: Conduct Feedback Research (FR).....	12
6.1. # focus groups conducted	12
6.2. # interviews conducted	12
6.3. # interviews conducted	12
Activity 7: KAP Survey Add-Ons.....	16
7.1. % of community members who recall seeing Girl Rising movie nights	16
7.2. % of community members who recall seeing Girl Rising SD Cards	17
Other indicators sought by ASSP relevant to Girl Rising	17
8.1. # of new acceptors of modern methods of family planning	17
8.2. # of sexual and gender-based violence survivors who have received PEP kits within 72 hours.....	17
Challenges & Lessons Learned.....	18
Challenges: Political Instability & Logistics	18
Challenges: Ambassadors & Equipment.....	18
Success Stories	19
What's Next? Steps for the Upcoming Quarter.....	19
Annex A: Illustrative Results Framework.....	20
Annex B: Map of Project Intervention Zones.....	21
Annex C: Training Evaluation Results	22
Annex D: Financial Report	23
Annex E: Implementation Timeline.....	26

List of Tables & Figures

Table 1: Illustrative Results Framework Progress through March 30, 2017.....	8
Table 2: Number of Pilot Movie Nights Hosted By Location.....	10
Table 3: Number of Movie Nights Hosted By Quarter and Location.....	11
Table 4: Geographic Coverage by Month and Location.....	12
Table 5: Favorite Girl Rising Movie Chapters by Province.....	13
Table 6: Favorite Girl Rising Movie Chapters by Age Group.....	14
Table 7: Favorite Girl Rising Movie Chapters by Gender.....	14
Table 8: Percent of Community Members in Nord Ubangi Province who Recall Attending a Movie Night	16
Table 9: IMA-ENGAGE Original Illustrative Results Framework.....	20
Table 10: Communications Ambassadors' Training Evaluation Results for Kasai Province.....	22
Table 11: IMA-ENGAGE Financial Report.....	24
Table 12: IMA-ENGAGE Implementation Timeline.....	27
Figure 1: Number of Movie Nights Hosted By Age and Gender.....	11
Figure 2: Map of ASSP/ENGAGE Project Health Zones.....	21

Project Contact Information

IMA ENGAGE Quarterly Report	
Project Name	Empowering Next Generations to Advance Girls' Education (ENGAGE)
Contracting Authority	IMA World Health (IMA) Dr. Dragana Veskov Vice President of International Health Programs +1 202.888.6201 health@imaworldhealth.org
DRC Country Director	IMA World Health (IMA) Dr. Larry Sthreshley +243-81-504-4826 larrysthreshley@imaworldhealth.org
Project Cost	\$100,000
Project Duration	10 months
Start Date	June 1, 2016
End Date	March 31, 2017
Type of Agreement	Pre-Authorization Agreement
Status of Report	Final Report covering 1 June 2016 through 30 March 2017



End Results

531,398
Total Views

1,600
Movie Nights

Our Ambassadors hosted a total of 1,600 movie nights in all four provinces of DRC.

771
Health Areas Visited

Our Ambassadors hosted events in 771 of 886 ASSP health areas.

4.5%
Population Reached

Approximately 4.5% of ASSP beneficiaries saw the Girl Rising film.

ANOTHER GIRL RISING

Summing It Up



The ENGAGE project allocated \$100,000 U.S. dollars to IMA World Health so that IMA could integrate the Girl Rising films into its already-existing work in five provinces of the Democratic Republic of Congo (DRC). Through our Department for International Development (DFID) funded Accès au Soins de Sante Primaire (ASSP) project, we developed a communications strategy that creates original video content and disseminates this content through monthly movie nights at health centers in all of the 886 project health areas.

The ASSP video content tells community members about services available to them and encourages them to go to health centers for treatment of malaria, reproductive health issues, and other primary health needs. The Girl Rising film will mobilize and engage men, women, and school-aged youth through grassroots community initiatives to take action to address barriers and social norms impeding access to quality education for girls. Three chapters of Girl Rising were shown during each of the first three months of the project, and one chapter will be shown per month for

the remainder of the project.

The IMA team launched the joint ASSP-ENGAGE strategy in June 2016 with a pilot in Nord Ubangi. During the pilot, we hired eight Communications Ambassadors to serve the province of Nord Ubangi through an intensive training and selection process, which involved hosting practice movie nights together in teams. Scale up was launched in Maniema and Tshopo in October 2016. Scale up in Kasai was launched in February 2017. Ongoing political unrest repeatedly delayed implementation in the Kasai region and ultimately prevented the IMA team from implementing in Kasai-Central. IMA hired and trained regional supervisors for the Ambassadors. These supervisors were based in-province and provided support and ongoing training to Ambassadors in the field.

These supervisors have also assisted with conducting routine monitoring and feedback research in their regions. Qualitative data

has provided evidence of the impact of the project in local communities. Key informants and focus group participants shared stories of teachers helping impoverished students, parents sending children back to school, and increased uptake of primary health care services across project areas.

In November 2016, a malaria KAP survey with Girl Rising related add-on questions was conducted in Nord Ubangi province. We estimate that between 4% and 15% of the population in Nord Ubangi has attended at least one movie night. A follow on survey to confirm results will be conducted in the upcoming months. A KAP survey will also be conducted in Kasai.

While the ENGAGE project may be ending, the Girl Rising story is far from over. IMA plans to continue using Girl Rising materials in our public health work in the future.

“People tell me stories now of how their daughters are refusing to leave school. We are starting a revolution.”

—Daniel Yapuonze, Began as Communications Ambassador and was promoted to Supervisor of Nord Ubangi



Progress Report

Table 1: Illustrative Results Framework Progress through March 30, 2017

Activity	#	Indicator	Adjusted Target	Achieved
Objective: Mobilize and engage men, women, and school-aged youth through grassroots community initiatives to take action to address barriers and social norms impeding access to quality education for girls.				
Activity 1: Recruit & Train 31 Communications Ambassadors (CA)	1.1.	# of CAs trained	35	35 (100%)
	1.2.	# of training sessions provided	3	3 (100%)
Activity 2: Pilot in Nord Ubangi		# pilot Communications Ambassadors trained	8	8 (100%)
	2.2.	# of pilot movie nights hosted by location	434	402 (93%)
Activity 3: Evaluate Pilot		# pilot focus groups held	25	12 (48%)
Activity 4: Dub film into Tshiluba		Girl Rising Film exists in Tshiluba	1	1 (100%)
Activity 5: Scale Up (Host Girl Rising movie nights in all 886 ASSP health areas) *includes pilot		# of movie nights hosted by location	3,638	1,585 (44%)
		# of community members reached by age, gender, & location	1,067,137	531,398 (50%)
		Geographic coverage (% of 886 health areas with a movie night that month)	85%	46%
	5.4.	# of SD cards handed out at movie nights	40,000	0
Activity 6: Conduct Feedback Research (FR)	6.1.	# focus groups conducted	50-200	8
	6.2.	# interviews conducted	25-100	2
Activity 7: KAP Survey Add-Ons	7.1.	% of community members who recall seeing Girl Rising movie nights	2%	46%
	7.2.	% of community members who recall seeing Girl Rising SD Cards	2%	0
Other indicators sought by ASSP relevant to Girl Rising:	8.1.	# of new acceptors of modern methods of family planning	288,613	164,924 (57%)
	8.2.	# of sexual and gender-based violence survivors who have received PEP kits within 72 hours	1,732	368 (21%)

Activity 1: Recruit & Train 31 Communications Ambassadors (CAs)

1.1 Number of Communications Ambassadors trained

Thirty-five of 35 Ambassadors have been trained and hired. IMA launched the pilot phase of the project in June 2016 by recruiting and training seven CAs from the Province of Nord Ubangi. Ten additional Ambassadors were hired from Maniema and Tshopo provinces in October 2016.

The IMA team originally planned to hire a total of 31 CAs; however during the first month of the pilot IMA decided that an additional CA per province/regional area would be required in order to alleviate pressure on the CAs' already demanding schedule. For this reason, we decided to hire a total of 35 CAs before the end of the year.

In addition, IMA decided to hire three regional supervisors to support the CAs more adequately in the field. For Nord Ubangi province, Communications Ambassador Daniel Yapounze was promoted to supervisor and an alternate candidate from the original training was hired to replace him. In Maniema, Maurice Watanga, already an IMA staff member, was trained as a supervisor. Mr. Watanga then travelled to Tshikapa in December, where he recruited Walitch Kabata to serve as supervisor for that region.

1.2 Number of training sessions provided

A total of three training sessions were originally planned for the project; **all three have been completed.** The first was completed in Gbadolite, Nord Ubangi in June 2016. The second was completed in Kindu, Maniema in September 2016. The final training took place at the end of January 2017 in Tshikapa, Kasai after delays due to security concerns in the region.



Activity 2: Pilot in Nord Ubangi

2.1 Number of Communications Ambassadors trained

The target for number of Communications Ambassadors trained was seven – however IMA decided to hire eight. This was in part because 8 candidates demonstrated they had the necessary skills during the training and in part to alleviate the demanding schedule planned for the CAs. However, the 8th Ambassador was not able to drive a motorcycle at the time of the training. We asked him to take lessons during the following month. He began in 2017. A screening for ability to drive a motorcycle was added to the Maniema/Tshopo and Kasai trainings in order to avoid this kind of delay in the future.

2.2 Number of pilot movie nights hosted by location

An essential part of the pilot experience was for the IMA team to identify challenges and best practices for ensuring that at least 85% of all health areas are reached with the Girl Rising and ASSP films once per month. This is because during scale-up, our adjusted goal

was 85% geographic coverage at the level of the health area every month. During the pilot, we planned to achieve the equivalent, or 434 movie nights in the province of Nord Ubangi. As of September 30th, Ambassadors in Nord Ubangi hosted 402 movie nights, or 93% of the 434 targeted. Table 2 below shows the percent of all health centers that hosted a movie night. The health zones that met the 85% target are highlighted in gray. Percentages above 100% indicated that an Ambassador hosted “bonus” movie nights that month.



Table 2: Number of Pilot Movie Nights Hosted By Location

Province	Health Zone	# Health Areas (Target = 85% of health areas per month)	July 2016	August 2016	September 2016	Grand Total
Nord Ubangi	Abuzi	14	6 (43%)	14 (100%)	6 (43%)	26 (62%)
	Bili	17	16 (94%)	17 (100%)	17 (100%)	50 (98%)
	Bosobolo	20	20 (100%)	12 (60%)	19 (95%)	51 (85%)
	Businga	14	9 (64%)	13 (93%)	9 (64%)	31 (74%)
	Gbadolite	13	9 (69%)	13 (100%)	13 (100%)	35 (90%)
	Karawa	24	19 (79%)	16 (67%)	16 (67%)	51 (71%)
	Loko	15	7 (47%)	14 (93%)	13 (87%)	34 (76%)
	Mobayimbongo	17	11 (65%)	14 (82%)	12 (71%)	37 (73%)
	Wapinda	11	8 (73%)	9 (82%)	1 (9%)	18 (55%)
	Wasolo	13	9 (69%)	13 (100%)	12 (92%)	34 (87%)
	Yakoma	12	11 (92%)	13 (108%)	11 (92%)	35 (97%)
Grand Total		170	125 (74%)	148 (87%)	129 (76%)	402 (79%)

Activity 3: Evaluate Pilot

3.1 Number of focus groups held

This activity has been completed. Landy Kus, an intern from Emory University's Rollins School of Public Health, was brought onto the team for the purpose of evaluating the pilot. We had originally planned for her to conduct both a qualitative and quantitative evaluation. She arrived in DRC in late June and began conducting focus groups the following week. Her arrival was significantly delayed due to problems obtaining a visa (this issue was experienced by many visa applicants during this time period). She conducted 12 of 25 (48%) planned focus groups. She stopped after 12 because saturation had been reached and no further study was required. The results of her study can be found in her report (available upon request).

Activity 4: Dub film into Tshiluba

4.1. Girl Rising Film exists in Tshiluba

This activity was completed with significant support from ENGAGE's DRC Country Director. In June, small parts were recorded in Kasai province. During the first half of December IMA brought a consultant who had previously worked on the Lingala and Swahili versions of the film, Leroy Quintyn, to work on the film. A room within the IMA office was used as a studio, as well as IMA recording equipment. All parts were recorded and mixing began before the consultant's departure. The final version of the Tshiluba film was delivered to IMA in the final quarter of the project.

Activity 5: Scale Up (Host Girl Rising movie nights in all 886 ASSP health areas)

5.1 Number of movie nights hosted by location

Between July and the end of March, IMA's **Ambassadors hosted 1,600 of 3,638 planned movie nights (44%)**. Security concerns caused several months delay in implementation of the project in Kasai and ultimately failure to launch the project in Kasai-Central due to severe ongoing insecurity in that area. About half of the movie nights were planned to occur in that implementation area, which is significantly larger than the other project areas, and in the last three months of the project. A significant drop in the number of movie nights occurring in Nord Ubangi province occurred during October and November due to logistical problems in getting new media to that province. The number of movie screenings reported in December was low for both Nord Ubangi and Maniema/Tshopo. In part this is because many Ambassadors took unpaid time off to celebrate the Christmas holiday and because of political insecurity at that time. Several Ambassadors are also behind in turning

in their reports for December. Despite these challenges, by the end of March Ambassadors in Nord Ubangi, Maniema, Tshopo, and Kasai were back at work. We are including the pilot phase in indicator 5.1. to show the total number of movie nights over the life of the project.

5.2 Number of community members reached by age, gender, & location

Figure 1 illustrates the number of movie night attendees during the life of the project by age and gender. Most Ambassadors who were struggling with the crowd counting method have improved this quarter – further supervision is required for two Ambassadors on this topic. All regions follow a general trend, with more boys and girls attending than adults. The largest group of attendees is boys (162,548) followed closely by girls (159,387). Women and men have about equal attendance (108,862 and 109,559, respectively).

During the life of the project **Girl Rising chapter bundles have been viewed 531,398 times**. This figure represents 50% of the project target. An average of 329 people attended each movie night hosted.

Table 3: Number of Movie Nights Hosted By Quarter and Location

Province	Q1 June - September		Q2 October - December		Q3 January - March		Total	
	Target	Actual	Target	Actual	Target	Actual	Target	Actual
Nord Ubangi	434	402 (93%)	434	23 (5%)	434	211 (49%)	1,302	636 (49%)
Maniema & Tshopo	-	-	510	369 (72%)	510	231 (45%)	1,020	600 (59%)
Kasai & Kasai Central	-	-	-	-	1316	349 (27%)	1,316	349 (27%)
Kasai Only	-	-	-	-	931	349 (37%)	931	349 (37%)
Total All	434	402 (93%)	944	394 (42%)	2,260	929 (41%)	3,638	1,585 (44%)
Total w/Kasai Only	434	402 (93%)	944	394 (42%)	1,875	929 (50%)	3,252	1,585 (49%)

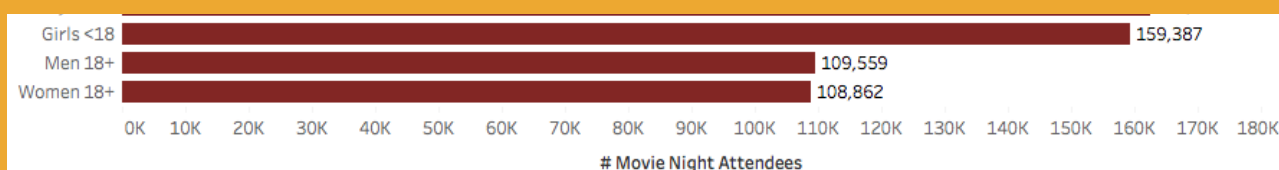


Figure 1: Number of Movie Nights Hosted By Age and Gender

*Disaggregation by age and sex was not available for the first month of the project. Attendees total reflects the total number for the life of the project while disaggregated data represents the months of August and September only.

5.3 Geographic coverage (% health areas with a movie night every month)

During the first three months of the project an average of 76% geographic coverage was achieved. Of all health areas in Nord Ubangi, Maniema, Tshopo and Kasai provinces, 642 (72%) have received at least one movie night. Of these health areas, 151 are located in Kasai-Central where implementation could not take place due to security concerns. If only the provinces where implementation occurred are considered, then the percent of health areas that received at least one movie night increases to 87%.

5.4 Number of SD cards handed out at movie nights

Due to difficulties in identifying a file type that is compatible with the maximum number of phones used by the Congolese population the IMA team delayed the start of the SD card activity until after the end of the ENGAGE project. IMA still plans to include Girl Rising material on SD cards handed out after the end of the project. Some time and more research is required to identify the best file type to use.

Table 4: Geographic Coverage by Month and Location

Province	Monthly Target	July 2016	Aug. 2016	Sept. 2016	Oct. 2016	Nov. 2016	Dec. 2016	Jan. 2017	Feb. 2017	Mar. 2017	Overall
Nord Ubangi	85%	71%	85%	71%	5%	0%	10%	41%	0%	76%	40%
Maniema & Tshopo	85%	-	-	-	84%	85%	12%	54%	33%	26%	49%
Kasai & Kasai Central	85%	-	-	-	-	-	-	0%	35%	28%	21%
Kasai Only	85%	-	-	-	-	-	-	0%	49%	40%	30%
Average All	85%	71%	85%	71%	48%	46%	10%	20%	28%	37%	46%
Average w/Kasai Only	85%	71%	85%	71%	48%	46%	10%	24%	33%	44%	46%

Activity 6: Conduct Feedback Research (FR)

6.1 Number of focus groups conducted

The new regional supervisors were trained in qualitative methods and instructed conduct focus groups and interviews during their routine supervision visits. So far, 8 focus groups have been conducted. One was conducted in Nord Ubangi, 3 in Maniema, and 5 in Kasai. Although the number of focus groups conducted so far is limited, the information gathered through them has been vital to understand the context and perceived impact of the project.

6.2 Number of interviews conducted

The new regional supervisors were trained in qualitative methods and instructed conduct focus groups and interviews during their routine supervision visits. So far, 2 interviews have been conducted in Tshopo. Although the number of interviews conducted so far is limited, the information gathered through them has been vital to understand the context and perceived impact of the project.

6.3 Post-movie night surveys

Although post movie night surveys are not part of the contractual indicators of the project, we wanted to include them in this

section of main report given the amount of information that has collected by Ambassadors. After each movie night Ambassadors are instructed to complete 16 surveys. Ambassadors identify community members who are willing to participate using convenience sampling before the movie starts. These community members are instructed to wait after the movie night in order to respond to the survey. After the film is shown, Ambassadors obtain verbal consent from participants a second time before proceeding with the questionnaire.

Demographics

A total of 6,040 surveys were completed between August and the end of March. Fifty-two percent of survey participants were female and 48% were male. The average age was 30 years old with a range of 7 to 80 years old. Attendees were interviewed in 34 of 41 health zones. In terms of age: 25% of respondents were between 5 and 18, 25% were between 19 and 25, 36% were between 26 and 45, and 14% were 46 or older. The health zone with the largest number of interviews was Punia with 713 interviews (12%).

Fifty-eight percent of survey respondents said that they were parents; 69% of those over 18 were parents and 12% of those under 18. Six percent of respondents under the age of 15 were parents. Of all respondents, 9% said they had never been to school. Of those 18 years of age and older, 28% said they had completed secondary school. The average distance travelled to attend a movie night was 9 kilometers (km), however the median was zero kilometers with a reported range of 0 to 349 kilometers.

Favorite Chapters

Ambassadors asked participants which Girl Rising chapter was their favorite. They could select any chapter previously seen. At the time of this report only the first two chapter bundles had been shown in Kasai province. In Kasai, Tshopo, and overall, Wadley was the favorite chapter. In Nord Ubangi respondents preferred Ruksana, while in Tshopo they preferred Azmera's story.

Table 5: Favorite Girl Rising Movie Chapters by Province

Chapter	Nord Ubangi	Maniema	Tshopo	Kasai	Total
Wadley	8%	15%	5%	68%	30%
Azmera	1%	3%	6%	16%	7%
Sokha	1%	2%	0%	6%	3%
Ruksana	39%	10%	1%	2%	7%
Senna	13%	6%	1%	1%	4%
Mariama	0%	10%	0%	1%	6%
Suma	0%	6%	1%	-	3%
Yasmin	1%	5%	2%	-	3%
Amina	0%	9%	0%	-	5%
All	38%	33%	81%	6%	30%
None	1%	3%	2%	0%	1%
Total	100%	100%	100%	100%	100%



In each age group between 46 and 56% indicated that they liked all the films and between 0 and 2% said they didn't like any of the films. The table below shows the three most preferred chapters for each age group. Across all age groups, Wadley was the preferred chapter.

Men and women had very similar preferences, with both groups citing Wadley as the favorite chapter. Women were slightly more likely to say they liked all of the films than men.

Table 6: Favorite Girl Rising Movie Chapters by Age Group

Chapter	5-18	19-25	26-45	46+	Total
Wadley	32%	27%	29%	32%	30%
Azmera	6%	6%	8%	7%	7%
Sokha	4%	2%	2%	3%	3%
Ruksana	3%	9%	6%	5%	7%
Senna	3%	4%	4%	5%	4%
Mariama	6%	7%	6%	7%	6%
Suma	3%	3%	3%	4%	3%
Yasmin	3%	4%	3%	3%	3%
Amina	5%	6%	6%	1%	5%
All	30%	30%	31%	30%	30%
None	2%	2%	1%	3%	1%
Total	100%	100%	100%	100%	100%



Table 7: Favorite Girl Rising Movie Chapters by Gender

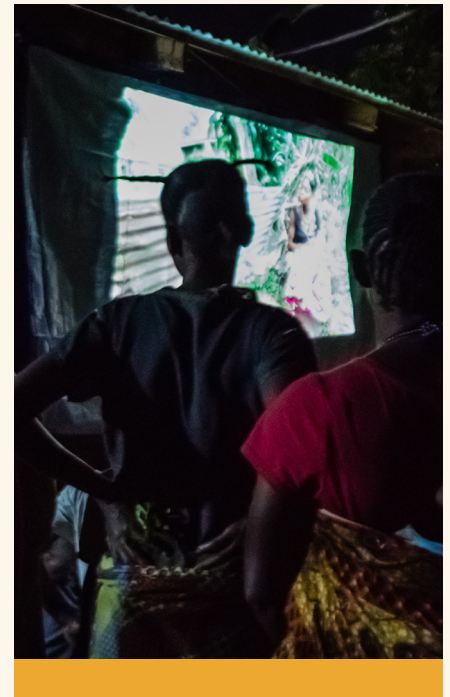
Chapter	Female	Male	Total
Wadley	29%	31%	30%
Azmera	6%	7%	7%
Sokha	3%	3%	3%
Ruksana	7%	6%	7%
Senna	4%	5%	4%
Mariama	6%	6%	6%
Suma	3%	3%	3%
Yasmin	3%	3%	3%
Amina	5%	5%	5%
All	32%	29%	30%
None	2%	2%	1%
Total	100%	100%	100%

Film Message and Importance

When asked what the message of the films were, most participants correctly responded that the message was about going to school and going to the health center.

Of 6,040 responses, 709 included the word “girl” or “girls”, 539 included the word “edu Of 6,040 responses, 709 included the word “girl” or “girls”, 539 included the word “education”, 165 included the word “malaria” and 60 included the words “victim”, “72 hours” or “sexual violence” (the later two subjects from ASSP media encouraging community mem-

bers to go to the health center in case of malaria or within 72 hours for sexual violence). However, many Ambassadors reported in their local language and a translation of all responses could not be completed before submitting this report. Community members also shared their personal stories with Ambassadors:



I will pay

“My mother died, but I will make an effort to pay for the education of my children.”

Movie night attendee
Female, 19-25 years old
Favorite chapter: all

I will send

“I will send my children to school because I did not get to.”

Movie night attendee
Female, 5-18 years old
Favorite chapter: Wadley

I will tell

“I will tell this message to my parents, my brothers, and sisters for a better education”

Movie night attendee
Female 5-18 years old
Favorite chapter: Mariama

When asked if this film had motivated them to take action in their own lives and communities, 86% of respondents said they felt “very motivated” while 13% said they were only a little motivated, not motivated, or weren’t sure. Those interviewed were also asked if there was anyone else they would like to show the film to. Of those reports that were written in French, 163 mentioned a sister, 109 mentioned a neighbor, 104 said the whole community, 93 parents, 88 brother, 36 father, and 4 mother.

Due to the convenience sampling used, the results cannot be generalized to all movie night attendees. Nonetheless, the results to help to confirm trends observed in Ambassadors’ regular reports and through observation. For example, we know that many more children than adults attend movie nights, and have heard anecdotes from Ambassadors that indicate that the Wadley chapter has a particular resonance with communities. Moving forward, all Ambassadors will be reminded that the questionnaire should be written in French to allow a more robust analysis.



Activity 7: KAP Survey Add-Ons

7.1 Percent of community members who recall seeing Girl Rising movie nights

A KAP Survey was completed in November 2016 in cooperation with the IMA malaria team in Nord Ubangi Province. Five percent of the population was randomly sampled. On average 46% percent of households surveyed said they had attended at least one movie night. A table of responses by health zone can be found below.

Table 8: Percent of Community Members in Nord Ubangi Province who Recall Attending a Movie Night

Province	Health Zone	% Attended One or More Movie Nights
Nord Ubangi	Abuzi	41%
	Bili	65%
	Bosobolo	64%
	Businga	7%
	Gbadolite	12%
	Karawa	38%
	Loko	38%
	Mobayi Mbongo	98%
	Wapinda	66%
	Wasolo	25%
	Yakoma	52%
Grand Total		46%

Given the high percent of people who responded affirmatively that they attended one or more movie nights (in comparison to the target of 2%), these results should be viewed with some skepticism. There were several opportunities for introduction of bias into the survey. In several health zones, Ambassadors were used as data collectors since they were already trained in the data collection method (ODK). A second KAP survey will be conducted in Nord Ubangi in the upcoming months using different data collectors and sampling different households. This second survey may help to confirm or refute the results found here. Before the second KAP survey takes place, IMA will take several steps to verify that the results will be valid, including verifying the translated survey tool. An additional KAP survey will take place in Kasai in several months.

The total population of Nord Ubangi Province is 1,370,136. The month with the highest number of attendees in the province was August with 53,366. The total number of views in Nord Ubangi province is 204,309. We can assume that the number of people who have attended a movie night is somewhere between the highest monthly attendance and the total number of views (given that some community members are likely to attend multiple movie nights). If this is true, then the percent of the population that has attended at least one movie night in Nord Ubangi would be somewhere between 4% and 15%, still well above the target of 2%.

7.2 Percent of community members who recall seeing Girl Rising SD Cards

The SD portion of the project has been delayed (see above).

Other indicators sought by ASSP relevant to Girl Rising

8.1 Number of new acceptors of modern methods of family planning

During the last quarter, **84,283 new acceptors** were offered modern family planning methods. This represents 121% of the quarterly target. In the upcoming months IMA staff will be conducting an analysis to investigate the possible impact of the ASSP/ENGAGE communications strategy on service utilization.

8.2 Number of sexual and gender-based violence survivors who have received PEP kits within 72 hours

In the last quarter, **124 survivors of sexual violence went to a health facility** within ASSP supported health zones, or 30% of the quarterly target. In the upcoming months IMA staff will be conducting an analysis to investigate the possible impact of the ASSP/ENGAGE communications strategy on service utilization.



Challenges & Lessons Learned

Challenges: Political Instability & Logistics

1. Instability in the capital Kinshasa and in the Kasai region severely impeded the progress of this 10-month project. The Maniema/Tshopo training was significantly delayed due to political unrest on the 19th and 20th of September 2016. The planned training in Kasai was postponed until the end of January. This instability interrupted not only ENGAGE, but other IMA projects as well, causing significant delays and difficulties with scheduling and staffing across the organization. Ongoing unrest in Kasai-Central, where 151 of 886 project health areas are located, caused IMA to make the decision not to implement in Kasai-Central at this time.

Response: Given our experience in delay caused by being unable to reach Nord Ubangi for several months, the IMA team has started delivering several months worth of media to Ambassadors at once in order to facilitate their ability to continue movie nights even without supervision. Furthermore, regional supervisors were hired to provide more on the ground support to Ambassadors.

2. Theft of a project motorcycle in Kasai delayed implementation in some health areas.

Response: The motorcycle was recuperated from the police. In the future, ASSP stickers will be placed on all project vehicles to clearly mark them as partner property.

Challenges: Ambassadors & Equipment

1. Some Ambassadors had to be replaced due to dishonesty and/or poor performance.

Response: Thanks to using ODK, it is often easy to identify Ambassadors who fail to complete their movie nights. By using report GPS coordinates we identified an Ambassador in Nord Ubangi who was falsifying reports. In addition, several candidates in Kasai falsified motorcycle documents and were not able to drive. Finally, one Ambassador in Kasai was let go after it was discovered he could not actually speak the local language. IMA will continue monitoring routine program data to identify and resolve such problems.

2. Some Ambassadors still struggle with using their smart phones properly, crowd counting, and turning in reports on time. Broken equipment is difficult and expensive to replace.

Response: Regional supervisors were hired and trained in December and January to help support any struggling Ambassadors on the ground. Increased supervision has seen an improvement in project implementation, especially in Nord Ubangi. In future projects, IMA would plan to purchase extra equipment in advance to replace broken/stolen equipment. In particular, cables (for charging, connecting the projector to the smart phones) and speakers have been very vulnerable to damage.

Success Stories

ENGAGE was successfully launched in four of five planned provinces; 1,585 movie nights have been hosted and chapters of the film have been viewed more than half a million times. In Kasai, the project hired three additional female Ambassadors who have, combined, conducted 71 movie nights and shown the film to over 16,000 people in just two months.

Anecdotal and qualitative evidence continue to provide examples of the positive impact of the film in the community. In Tshopo province, routine supervision including interviews with local health authorities revealed that practitioners have observed increased uptake of certain public health practices in communities that have seen the films. A head nurse in Banalia health zone also shared a story of a teacher who, after seeing the film, took a young girl who could not afford to go to school into her care.

In Nord Ubangi during an all-male focus group participants shared that while there has not been a school in their community for over a year, after seeing the film many



parents decided to send their children to live with relatives in a neighboring city where school was available.

We estimate that between 2.5% and 7.5% of the total population in implementation areas have attended a movie night. Given the level of interest surrounding the film, the conversations generated about the stories and themes of Girl Rising may have reached many more.



What's next?

Even though the financial support of the ENGAGE project may be ending, the story of Girl Rising in the DRC is not. IMA will continue to utilize Girl Rising materials in our public health work in the future.

Annex A: Illustrative Results Framework

Table 9: IMA-ENGAGE Original Illustrative Results Framework

Activity	Indicator	Original Target	Means of Verification
<i>Objective: Mobilize and engage men, women, and school-aged youth through grassroots community initiatives to take action to address barriers and social norms impeding access to quality education for girls.</i>			
Activity 1: Recruit & Train 31 Communications Ambassadors (CA)	1.1. # of Communications Ambassadors trained	31	Training attendance list
	1.2. # of training sessions provided	4	Training report and photos
Activity 2: Pilot in Nord Ubangi	1.1. # Pilot Communications Ambassadors trained	7	GEO ODK verification during movie nights
	1.2. # of pilot movie nights hosted by location	33	
Activity 3: Evaluate Pilot	1.1. # focus groups held	25	Evaluation report Signed agreement forms
Activity 4: Dub film into Tshiluba	1.1. Girl Rising Film exists in Tshiluba	1	Tshiluba speakers verify film translation
Activity 5: Scale Up (Host Girl Rising movie nights in all 886 ASSP health areas)	1.1. # of movie nights hosted by location	7,000	GEO ODK verification during movie nights Head count, photos, attendance list Records of receipt and disbursement
	1.2. # of community members reached by age, gender, & location	175,000 (25/night) 100%	
	1.3. Geographic coverage (% health areas with a movie night that month)		
	1.4. # of SD cards handed out at movie nights	40,000	
Activity 6: Conduct Feedback Research (FR)	6.1. # focus groups conducted	50-200	Feedback research report
	6.2. # interviews conducted	25-100	
Activity 7: KAP Survey Add-Ons	7.1. % of community members who recall seeing Girl Rising movie nights	2%	KAP Surveys
	7.2. % of community members who recall seeing Girl Rising SD Cards	2%	
	Other indicators sought by ASSP relevant to Girl Rising: # of new acceptors of modern methods of family planning		
	# of sexual and gender-based violence survivors who have received PEP kits within 72 hours	1,908,762 954	

Annex B: Map of Project Intervention Zones

ASSP | ENGAGE

Intervention Zones

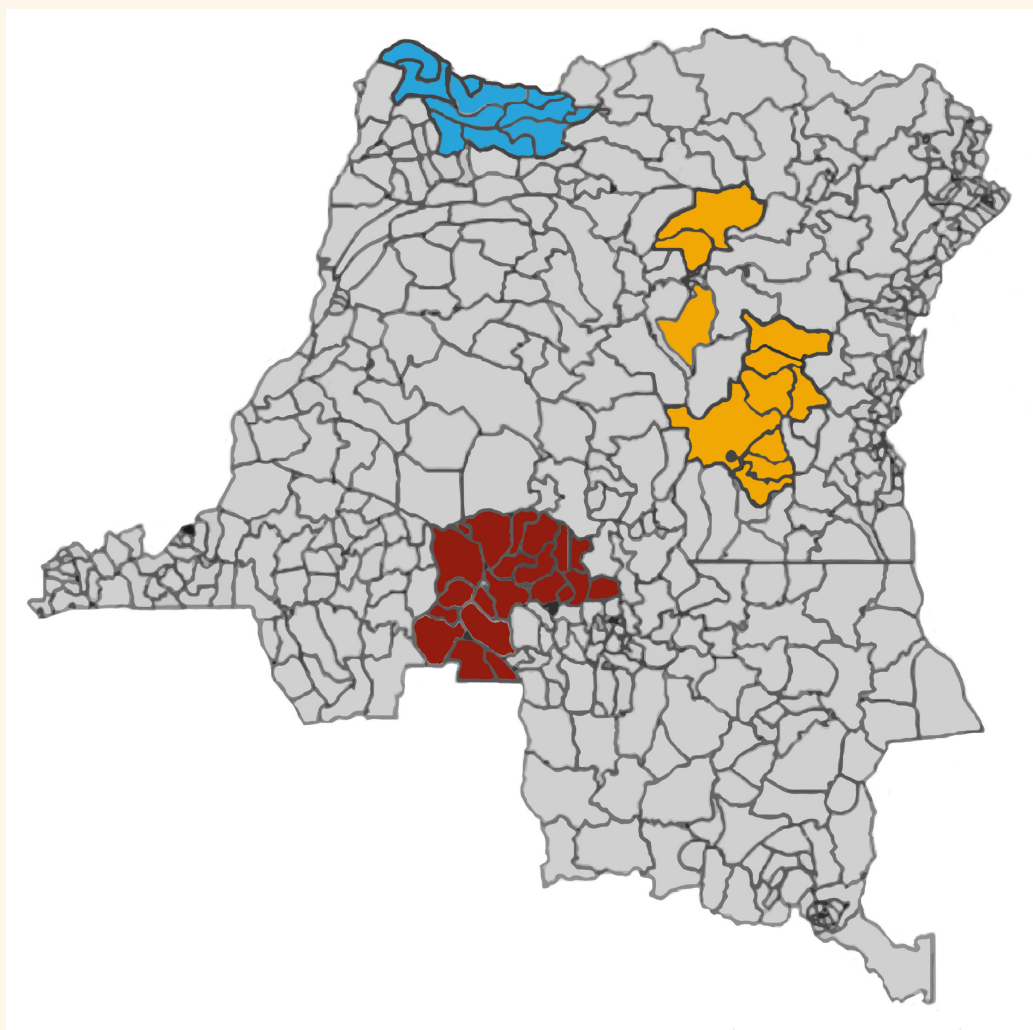


Figure 5: Map of ASSP/ENGAGE Project Health Zones

Nord Ubangi

Training: completed
Implementation: July 1
11 Health Zones
172 Health Areas
Population: 1,370,136

Maniema & Tshopo

Training: September 19
Implementation: October 1
13 Health Zones
200 Health Areas
Population: 1,484,565

Kasai & Kasai Central

Training: January 2017
Implementation: February
28 Health Zones
516 Health Areas
Population: 5,807,279

Non-ASSP zones

* Population based on
ASSP data

Annex C: Training Evaluation Results

Table 10: Communications Ambassadors' Training Evaluation Results for Kasai Province

Candidate Name	Health Zone	Moto	Written Test	Equipment	Obs (avg.)	Soc. Mob.	Pol. IMA	Total/30
Samuel WOTO	Kakenge	P	4.0	5	3.3	2	4.3	6.2
Marc ITA	Nyanga	P	4.3	5	3.0	2.5	3.6	6.1
Agnes NTANGA	Tshikapa	F	4.4	4	2.8	1	4.6	5.6
Emmanuel KWETO	Mikope	P	4.0	4.5	3.2	1.5	3.6	5.6
Felicien MATUNA	Ilebo	P	3.8	5	3.3	1	3.6	5.6
Walitch NGOY	SUPERVISOR	P	4.4	5	3.7	1.75	1.9	5.6
Joseph KATEMBWE	SUPERVISOR	P	2.8	5	3.3	1.75	3.4	5.4
Pierre KALENGAYI BEYA	Kanzala	P	5.0	4	2.3	0.5	4.1	5.3
Charles MBUYA CI-BAKA	Mutena	P	3.7	5	2.8	0.75	3.5	5.2
Ramanzani KABUASA	Kamuesha	P	4.0	4	2.3	1.5	3.3	5.0
Levi TSHIYA BUSHA-BU	Ilebo	P	4.0	2	2.3	1.75	4.3	4.8
Louis LOBO LOBO	Ndjoko Punda	P	2.8	4.5	2.8	2	2.3	4.8
Frederick LUKADI	Kamuesha	P	4.2	5	1.9	1	2.3	4.8
Mashimba NGOMB-WANYI	Mikope	P	3.3	4	2.7	1.25	2.8	4.6
Beatrice TSHIMANGA	Kalonda	F	3.2	3.5	3.3	1.75	1.8	4.5
Giselle MUTOMBO	Tshikapa	F	3.4	3.5	3.3	1.5	1.6	4.5
Ntumba KABU-TAKAPUA	Mutena	P-	4.5	4	2.3	0.5	0.8	4.0
David MIKOB	Mweka	P	2.5	3.5	2.7	1	2.1	3.9
Mbantshi MASHALU	Mushenge	P	2.5	2	2.5	2.5	2.3	3.9
René BOPE MBANT-SHI	Kakenge	P	2.8	4.25	2.0	0.5	1.3	3.6
Dieudonne MANGE	Kanzala	P	3.3	4	2.0	0.25	1.0	3.5
Sylvain KABA-LA-MPOYI	Kitangua	P-	3.5	2	2.0	0.75	2.0	3.4
Tony KATUMBA	Kamonia	P		4	2.3	2	1.9	3.4
Celestin KWETE	Bulape	P	2.1	4.5	2.0	0.75	0.8	3.4
Roger SAKA	Kitangua	P	3.0	3.5	2.3	0.5	0.3	3.2

Annex D: Financial Report

Table 11: IMA-ENGAGE Financial Report

Budget Line	Total Budget	Q1 (June) Spending	Q2 (Jul-Sep) Spending	Q3 (Oct-Dec) Spending	Q4 (Jan-Mar) Spending	Total Spending
Salaries & Wages & Fringe Benefits						
7100 - Salaries	\$21,230.00	\$5,307.50	\$5,307.50	\$5,307.50	\$3,532.58	\$19,455.08
7110 - Fringe benefits	\$10,061.00	\$2,515.25	\$2,515.25	\$2,515.25	\$2,515.25	\$10,061.00
7130 - Consulting Fees	\$1,000.00	\$1,000.00	\$-	\$-	\$-	\$1,000.00
Travel, Transport, & Per Diem						
7200.01 - Gas/Fuel	\$572.00	\$552.00	\$20.00	\$-	\$-	\$572.00
7200.02 - IMA staff per diem	\$273.00	\$273.00	\$-	\$-	\$-	\$273.00
7200.03 - Driver per diem	\$130.00	\$130.00	\$-	\$-	\$-	\$130.00
7200.11 - Gas/Fuel	\$1,560.00	\$-	\$1,557.79	\$-	\$2.21	\$1,560.00
7200.12 - IMA staff per diem	\$819.00	\$-	\$406.00	\$-	\$413.00	\$819.00
7200.13 - Driver per diem	\$260.00	\$-	\$-	\$-	\$260.00	\$260.00
7200.21 - Feedback Research Per Diem & Gas	\$2,704.00	\$-	\$-	\$-	\$2,704.00	\$2,704.00
7200.31 - KAP Survey Per Diem & Gas	\$822.00	\$-	\$-	\$-	\$822.00	\$822.00
Equipment						
7400.01 - SD cards	\$267.00	\$-	\$-	\$-	\$-	\$-
7400.02 - Projectors	\$140.00	\$-	\$519.98	\$-	\$-	\$519.98
7400.03 - White tarps	\$49.00	\$-	\$49.00	\$-	\$-	\$49.00
7400.04 - Speakers	\$400.00	\$-	\$274.28	\$125.72	\$-	\$400.00
7400.05 - Motorcycles	\$3,000.00	\$3,000.00	\$-	\$-	\$-	\$3,000.00
7400.06 - Tablets	\$500.00	\$-	\$-	\$-	\$-	\$-
7400.07 - Yeti Solar Charger	\$-	\$-	\$-	\$-	\$-	\$-

Annex D: Financial Report Continued

7400.08 - Solar panel	\$200.00	\$-	\$-	\$-	\$-	\$-	\$-	\$-
7400.11 - SD cards	\$12,600.00	\$-	\$-	\$-	\$-	\$-	\$-	\$-
7400.12 - Projectors	\$420.00	\$-	\$-	\$-	\$1,200.00	\$-	\$-	\$1,200.00
7400.13 - White tarps	\$146.00	\$-	\$120.00	\$26.00	\$-	\$-	\$-	\$146.00
7400.14 - Speakers	\$1,000.00	\$-	\$1,000.00	\$-	\$-	\$-	\$-	\$1,000.00
7400.15 - Motorcycles	\$9,000.00	\$-	\$9,000.00	\$3,000.00	\$-	\$-	\$-	\$26,425.00
7400.16 - Tablets	\$1,250.00	\$-	\$100.00	\$1,150.00	\$-	\$-	\$-	\$1,250.00
7400.17 - Yeti Solar Charger	\$1,377.00	\$-	\$379.98	\$64.96	\$-	\$-	\$-	\$444.94
7400.18 - Solar panel	\$500.00	\$-	\$-	\$-	\$-	\$-	\$-	\$-
Supplies								
7550.01 - Supplies Health Zones	\$14.00	\$14.00						\$14.00
7550.11 - Supplies Health Zones	\$56.00		\$14.00			\$42.00		\$56.00
7550.31 - Supplies Health Zones	\$17.00					\$17.00		\$17.00
Other Direct Costs								
7700.01 - Comms Ambassador	\$3,612.00	\$507.00	\$3,050.50	\$54.50	\$-	\$-	\$-	\$3,612.00
7700.02 - Megaphone promo	\$231.00	\$-	\$231.00	\$-	\$-	\$-	\$-	\$231.00
7700.03 - Gas	\$63.00	\$-	\$63.00	\$-	\$-	\$-	\$-	\$63.00
7700.04 - Training room	\$63.00	\$-	\$63.00	\$-	\$-	\$-	\$-	\$63.00
7700.11 - Comms Ambassador	\$989.00	\$-	\$460.00	\$-	\$-	\$-	\$-	\$460.00
7700.12 - Megaphone promo	\$934.00	\$-	\$-	\$375.00	\$-	\$-	\$-	\$375.00
7700.13 - Gas	\$1,668.00	\$-	\$280.00	\$-	\$-	\$-	\$-	\$280.00
7700.14 - Training room	\$50.00	\$-	\$50.00	\$-	\$-	\$-	\$-	\$50.00
7700.31 - Enumerators Maniema & Tshopo	\$215.00	\$-	\$-	\$-	\$-	\$215.00		\$215.00
7700.32 - Enumerators Kasai	\$182.00	\$-	\$-	\$-	\$-	\$182.00		\$182.00
7700.33 - KAP Training Room	\$10.00	\$-	\$-	\$-	\$-	\$10.00		\$10.00

Annex D: Financial Report Continued

7700.21 - FR Translation	\$75.00	\$-	\$-	\$-	\$75.00	\$75.00
7700.05 - Dubbing film in Tshiluba	\$9,099.00	\$77.00	\$1,742.00	\$7,945.00	\$-	\$9,764.00
7700.06 - Office Rent	\$1,200.00	\$300.00	\$300.00	\$300.00	\$300.00	\$1,200.00
7700.07 - Office Internet	\$120.00	\$30.00	\$30.00	\$30.00	\$30.00	\$120.00
7700.08 - Communication (phone units)	\$120.00	\$30.00	\$30.00	\$30.00	\$30.00	\$120.00
7700.09 - Gas	\$600.00	\$150.00	\$150.00	\$150.00	\$150.00	\$600.00
Indirect Costs						
7900 - Indirect costs	\$10,402.00	\$2,600.50	\$2,600.50	\$2,600.50	\$2,600.50	\$10,402.00
TOTAL	\$100,000.00		\$30,313.78	\$24,874.43		\$100,000.00

[illegible][illegible]