



FINAL ENDLINE EVALUATION REPORT
SAFE FAMILIES PROJECT PHASE II
SOLOMON ISLANDS
FEBRUARY 2024



This independent evaluation report was prepared by an evaluation team consisting of the Endline Evaluation Consultant Cody Yerkovich with oversight and logistical support from Safe Families Country Program Manager Ella Wairiu of the Oxfam Solomon Islands Country Office and Oxfam Australia. This endline evaluation report provides an overall evaluation of the Safe Families Phase II Project, key findings, project impact, challenges, and recommendations for future projects within the region.

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ABBREVIATIONS AND ACRONYMS

Abbreviation or Acronym	Full name/word	Abbreviation or Acronym	Full name/word
BC	Behaviour Change	BCL	Behavioural Science Lens
CA	Change Agents	CEF	Community Engagement Facilitators
COH	Channels of Hope	CEDAW	Convention on the Elimination on all Forms of Violence Against Women
COHG	Channels of Hope for Gender	DFAT	Department of Foreign Affairs and Trade
DV	Domestic Violence	DVA	Domestic Violence Abuse
EVAW	Ending Violence Against Women	EVAWG	Ending Violence Against Women and Girls (Policy)
FPA	Family Protection Act	FPAC	Family Protection Act Committee
FLR	Front Line Responders	FV	Family Violence
FSC	Family Support Centre	GL	Gender Lens
GEWD	Gender Equality and Women's Development (Policy)	GBV	Gender Based Violence
GEWD	Gender Equality and Women's Development (Policy)	GBV	Gender Based Violence
NCW	National Council of Women	NGO	Non- Government Organization
M and E	Monitoring and Evaluation	MEL	Monitoring, Evaluation and Learning
MWYCFA	Ministry of Women, Youth, Children and Family Affairs	ODA	Overseas Development Assistance
MV	Market Vendors	MPCW	Malaita Provincial Council of Women
PCW	Provincial Council of Women	SIG	Solomon Islands Government
RSIPF	Royal Solomon Island Police Force	SF	Safe Families
SNRN	SAFENET Referral Network	Toc	Theory of Change
WCW	Ward Council of Women	WDD	Women Development Division
WDO	Women Desk Officer	WF	Ward Facilitator
WPCW	Western Provincial Council of Women	WRC	Women Resource Centers



SAFE FAMILIES PHASE II PROJECT

OVERVIEW

The Oxfam initiative, named the 'Let's Make Our Families Safe' (Safe Families) project phase II, is a multifaceted project with a holistic approach designed within the framework of a ten-year strategic initiative endorsed by the Australian Government under Pacific Women Shaping Pacific Development (Pacific Women). The intention of Safe Families phase II project was to create a holistic and multi-layered approach in the realm of violence prevention, aligning with the cultural and societal context of Solomon Island people where holistic approaches to violence prevention are predominantly more accepted.

In light of the diminishing civil society space and limited funding options for gender-related initiatives on a national scale, Oxfam in the Pacific actively investigated inventive programming models aimed at sustaining and fortifying local partnerships. A prospective approach was considered and selected, involving the implementation of a regional programming model (Papua New Guinea's Safe Families model) focused on influencing a diverse array of stakeholders engaged in transformative norms change initiatives, resulting in the establishment of the 'Let's Make Our Families Safe' (Safe Families) program and the multi-layered approaches- central to influencing change.

The mission of Safe Families extends beyond standard approaches to primary prevention of SGBV, focusing on reshaping social and cultural norms, values, attitudes, and beliefs that perpetuate family and sexual violence. The ultimate vision is to influence and change behaviour that normalises violence against women and girls within the societal fabric of the Solomon Islands by providing people within the community and village with fundamental skills and knowledge to create change. Oxfam is committed to fostering change by supporting communities, the National Council of Women (NCW), Provincial Council of Women (PCW), and the Solomon Islands Government (SIG) in implementing its Eliminating Violence against Women (EVAW) and Girls Policy through rights-based approaches.

The Safe Families Program is characterised by an 'integrated' human rights-based approach, emphasising the necessity of addressing root causes of gender-based violence (GBV) for social transformation. The program collaborated with various stakeholders to formulate contextually appropriate solutions, with community and local partners taking a leading role. Key aspects of the implementation have included capacity development within the governance structures on Provincial and National levels such as capacity development and support for stakeholders who's key responsibility is advocating for rights holders in alignment with national policies, these key stakeholders such as the Provincial Councils of Women (PCW), Women's Development Division (WDD) and National Council of women (SINCW) have been the driving support for the coordination and oversight of implementation of the community healing component of Safe Families (SF) aimed at educating people within the community with the intention to change attitudes and behaviours towards family violence.

The community healing component has been a very important aspect of the Safe Families program in phase II. A series of four books were developed through a successful model within Papua New Guinea safe Families (SF) who successfully implemented these books via training sessions, with an extensive review of this regional program content and minimal changes being made the learning books were selected to be used in the Solomon Island community healing component of Safe Families (SF) as a trial due to cultural and contextual similarities. While the program design for community healing included four books as part of the community healing program sessions, only book one was completed throughout the communities



during the four-year program and only one community completed book two with no communities completing book three or four.

Furthermore, the geographical scope of the Safe Families design was intended for Choiseul, Western and Malaita Province, several communities within each of these Provinces have been part of the Safe Families community healing component, as a result of logistical issues it was not feasible to travel to Choiseul to evaluate program impact due to flight delays and the evaluation timeframe so key focus has been on collecting primarily qualitative and quantitative data in Western and Malaita Provinces, this means success and findings within Choiseul Safe Families phase II program remain unknown yet comparative analysis can be made based on Western and Malaita Provinces. The project's responsiveness to the MWYCFA's request to integrate the Safe Families Provincial Alliances into the SAFENET structure showcased a governance-minded approach. This adaptation allowed for more synergised efforts in addressing Ending Violence Against Women and Girls (EVAWG), reinforcing the project's commitment to collaborative governance structures.

Safe Families (SF) was Implemented systematically from January 2019 to December 2022, with a planned 12-month extension until December 2023. However significant delays, particularly due to COVID-19 disruptions contributed to the divergence from the original program design. Delays that took place were a result of several factors including lockdowns in the Solomon Islands, donor funding delays and issues with communication from key stakeholders down toward the community level between 2020-2022. Regardless of these delays progress toward the project's Theory of Change (ToC) and the four interconnected pathways continued where possible. These pathways strategically target drivers contributing to GBV and Violence Against Women (VAW) across various levels, systematically addressing social and structural barriers to gender inequality. The key pathways include Influence, Empower, Response, and Prevent.

Led exclusively by Oxfam in the Pacific, in strategic partnership with the Solomon Islands National Council of Women (SINCW) and Provincial Councils of Women (PCWs) in Choiseul, Western, and Malaita provinces, the project actively engaged with key stakeholders such as the Ministry of Women Youth Children and Family Affairs (MWYCFA) and provincial governments with an important objective to engage in national-level advocacy with MWYCFA and SINCW, fostering collaboration on EVAW initiatives. Close collaboration with the Women's Development Division (WDD) Desk Office, including MWYCFA and PCWs at the provincial level, aimed to build capacity in preventing violence at the community level and holding GBV service providers accountable. The program's top-down, bottom-up approach facilitated ownership by Provincial Councils of Women (PCWs) and Women's Development Divisions (WDDs), empowering them to lead and implement the Solomon Islands Government's EVAW policies. The program focused on embedding violence prevention and response foundations into all levels of government and community structures with the intention to promote effective and sustained coordination beyond the program end date, however due to ineffective program coordination on the governance level and the contributing factors resulting in delays not all community healing books being completed, the intended sustained coordination has not been reached.

This endline evaluation acknowledges achievements along with insights and challenges, demonstrating Oxfam's commitment to cultivating sustained change within the societal landscape of the Solomon Islands, and also highlights key limitations which were restrictive toward project progress and successful implementation of the design. Safe Families Program and its holistic approach is a pivotal initiative in addressing the pervasive issue of violence against women. Recognising the impact of violence on individuals and communities, this program places a strong emphasis on community healing as an integral part of the broader strategy. Through community healing sessions led by ward facilitators and change agents, the program aimed to provide community members and survivors with education on topics such as emotional regulation, anger management, communication, confidentiality, recovery, and reintegration into



society. Such topics among others were effective and helpful for those attending the sessions as expressed by participants through interviews and storytelling during the data collection phase.



EXECUTIVE SUMMARY

The 'Let's Make Our Families Safe' (Safe Families) Phase II project, led by Oxfam and endorsed by the Australian Government under Pacific Women, stands as a multifaceted initiative addressing gender-based violence (GBV) in the Solomon Islands. Executed from January 2019 to December 2022, with a planned extension until December 2023, the project operated within a ten-year strategic framework. The program's holistic and multi-layered approach aligns with the cultural fabric of the Solomon Islands, emphasizing violence prevention beyond primary measures, focusing on reshaping social and cultural norms. Oxfam's commitment extends to fostering change through collaborations with communities, the National Council of Women (NCW), Provincial Councils of Women (PCW), and the Solomon Islands Government (SIG), implementing the Eliminating Violence against Women (EVAW) and Girls Policy.

The Safe Families Program, characterized by an integrated human rights-based approach, prioritizes addressing root causes of GBV for societal transformation. Notable aspects include capacity development within governance structures, with key stakeholders like the PCWs, Women's Development Division (WDD), and National Council of Women (SINCW) playing pivotal roles. The community healing component, a critical element of the program, introduced a series of four books, adapted from a successful model in Papua New Guinea. Despite challenges, this component fostered positive changes in the communities, with the evaluation focusing primarily on Western and Malaita Provinces due to logistical constraints. The project faced significant delays, attributed to COVID-19 disruptions which included donor funding issues, and communication challenges from 2020 to 2022. However, despite setbacks, progress towards the project's Theory of Change and interconnected pathways (Influence, Empower, Response, and Prevent) continued. Safe Families demonstrated a governance-minded approach by integrating Provincial Alliances into SAFENET, showcasing adaptability and synergized efforts in addressing EVAWG. Challenges in program coordination at the governance level impacted the intended sustained coordination, particularly in completing community healing books.

The endline evaluation acknowledges achievements and challenges, showcasing Oxfam's commitment to cultivating sustained change. The program's emphasis on community healing sessions, focusing on emotional regulation, anger management, communication, confidentiality, recovery, and reintegration into society, proved effective. Challenges at the community level were attributed to inadequate coordination and capacity development at the institutional level. The evaluation, strategically focused on Western and Malaita provinces, highlighted community endorsement, with 19 out of 21 participants affirming the effectiveness of community healing sessions in Western Province. A total of 30 participants were part of this endline evaluation who include a combination of community facilitators, such as ward facilitators and change agents, government officials, PCW's, front line service providers and recipients receiving the community healing training sessions.

Despite identified gaps in safeguarding mechanisms and coordination, the project's strategic focus on capacity building, collaboration, and community empowerment has laid a sustainable foundation for transformative change in addressing family violence. Recommendations include continued collaboration, long-term monitoring, community-led initiatives, capacity building, and advocacy for policy continuity. While the project showed strong relevance in addressing the needs of women stakeholders, the executive summary underscores the importance of addressing remaining gaps in capacity development and coordination to further enhance the impact of future interventions.



The endline evaluation, while facing logistical challenges, strategically focused on accessible regions, allowing an in-depth analysis of the program's impact in Choiseul, Western, and Malaita Provinces. Challenges in accessing remote communities, exemplified by the Hambere village, underscore the complexities faced during implementation. This targeted approach enabled a meaningful and representative assessment of the Safe Families Phase II Program, providing valuable insights for future interventions in the fight against gender-based violence.

SUMMARY MATRIX OF FINDINGS, EVIDENCE AND RECOMMENDATIONS

Findings	Evidence ¹	Recommendations ²
1. No safeguard training or thorough capacity development for change agents and ward facilitators implementing in the community	Identified through interviews and surveys- all change agents noted no training or safeguard training and lack of confidence in the work they are doing.	1. Ensure future programming has effective and efficient safeguard training not only on the institutional level but on the community level where change agents and Ward facilitator's are directly working with survivors of GBV/DV
2. Poor coordination and partnerships within the institutional level e.g. PCW, SINCW, WDD, Oxfam and other key stakeholders	Identified through in-depth interviews with PCW and other government officials.	2. Prioritize better more effective approaches to relationship building and improved partnerships in future programming, this requires both strategic and holistic approach, look at regional models being used that have been effective in this space
3. There have been 9 referrals within the community healing sessions in western province and Malaita province for survivors of domestic violence and family violence to be referred on to support services- this was the connection with SAFENET referral network and SAFEFAMILIES working together.	Identified through interviews with Ward Facilitators in the Provinces	3. More awareness and engagement between frontline service providers and SafeNet programs is necessary to ensure the relationship between the two remains both transparent and strong.

Findings	Evidence ¹	Recommendations ²
<p>4. Lack of trust between community participants actively engaged in the community healing (CH) sessions due to the funding issues that restricted implementation, also lack of trust due to some participants feeling the selection process for change agents is unfair and they are often a family member of Ward facilitator who is not trained.</p>	<p>Identified through interviews in Western Province.</p>	<p>4. A thorough and professional process needs to take place when selecting change agents and ward facilitators including background checks and trainings, the safety of survivors and community members attending these sessions is paramount.</p>
<p>5. Awareness of Safe Families and the community healing component of SF was very low in Gizo, Western Province with many stakeholders not being clear on what SF or CH sessions are about.</p>	<p>Identified through stakeholder interviews.</p>	<p>5. Focus on partnerships and awareness between key stakeholders and Oxfam programming is essential, workshops need to involve all stakeholders including frontline service providers to ensure they are educated on what the program is about and how they can support the work.</p>
<p>6. Awareness and advocacy on the community level—Safe families was not heard of before for many community people, they had however heard of community healing but only those directly associated with the church groups of Ward Facilitators or Change Agents</p>	<p>Identified through surveys and interviews.</p>	<p>6. Future programming and design must prioritize effective awareness campaigns so that people within rural communities have the opportunity to attend community healing sessions. Such awareness on the community level needs to be implemented in an effective way such as through trusted church groups, ensuring there is a do no harm approach in the process and transparency as to what the program is about.</p>

Findings	Evidence ¹	Recommendations ²
<p>7. For change agents who are traveling to different communities in their wards to implement community healing sessions the geographical distance is vast, for example; one change agent in Hambere village had to travel 3 hours on a small boat to reach a village to run CH session, the fuel costs were high and were not accounted for in funding for resources resulting in personal funds being used for fuel as a result.</p>	<p>Identified through interviews and open discussions</p>	<p>7. Ensure all aspects of geographical location and village distance from facilitators are considered as well as the financial aspect of accommodation for those facilitators. Many of these factors were not considered and remained a challenge in some cases stopping the community healing sessions from continuing.</p>
<p>8. Communication and Program management was poor between those implementing the program. For example, key stakeholders such as Oxfam and the coordination and communication with PCW's remained very strained. With one participant from a PCW stating, "We have to wait months for a response to a request for support, however when Oxfam has a request, they respond instantly- there is a real gap here in the responsibilities and roles of the two."</p>	<p>identified through in-depth interviews and observations.</p>	<p>8. Clarity on the roles and responsibilities of PCW's and Oxfam especially with such a multi-layered project is essential. Without role clarity it is easy to see dysfunction and implementation begin to be impacted. Future programming must prioritize all aspects of multilayered approaches and ensure stakeholders are clear of what their role is, this also connects into strengthening capacity development.</p>
<p>9. It was identified that monitoring and evaluation was limited throughout the project resulting in community level implementation being impacted for example, as a challenge would arise there was limited program monitoring to ensure support was offered. Furthermore, data collection was also limited with insufficient baseline data being collected and also collected after program implementation had begun.</p>	<p>Identified during surveys, observations, interviews.</p>	<p>9. A new and robust monitoring and evaluation system on both the institutional level and community level is essential and crucial for a multi-layered program like this. Future programming must focus on ensuring this is reviewed and redesigned to suit cultural context, and account for any contextual or global issues such as Covid-19 should they arise, for example, what strategies are in place to ensure monitoring and evaluation is not impacted?</p>



I. INTRODUCTION

The initiation of Safe Families can be traced back to the first year of implementing the Safe Families project Phase II. Recognising the need for a comprehensive review and update, Oxfam, in consultation with the Department of Foreign Affairs and Trade (DFAT), aimed to align the project design with the evolving operational landscape. This effort considered the establishment of SAFENET, a national FV/GBV referral network under the Solomon Island government MWYCFA and drew insights from the SVRI research study. This research study was conducted to build an evidence base for the Safe Families community-led model for violence prevention in the Solomon Islands.

The comprehensive review underscored the necessity for an effectively updated design, emphasising the transformational social norm change through the healing-centred approach. This approach sought to shift norms related to corporal punishment and gender equality, promote role modelling among facilitators, and integrate discussions about the bride price into community conversations and prevention messaging. Simultaneously, there was a deliberate effort to enhance youth involvement to ensure more youth are engaged throughout programming, especially with regards to community healing.

Key aspects of the changes from phase I to phase II included transitioning from 'Community engagement facilitators in the provinces working with select communities to identify activities that prevent family violence' to 'Ward Facilitators and Change Agents implementing the community healing training sessions that were identified as the primary activity to implement.' Governance and institutional strengthening also underwent updates and alterations, aligning with contextual and political changes.

Safe Families Phase II operates on a Theory of Change (Toc) that encompasses four distinct pathways influencing policy and practice, empowering national, provincial, and community structures, strengthening response mechanisms, and promoting prevention. These four pathways (Influence, Empower, Respond, Prevent) in combination with the projects methodological approach compliment the cultural and social context of the Solomon Island people and their communities.

The primary objective of this evaluative endeavour is to gain a comprehensive understanding of the Safe Families Phase II project by rigorously examining its achievements, challenges, and overall impact. This examination is specifically directed at discerning the project's effectiveness in transforming the knowledge, attitudes, and behaviours of the designated target population concerning family and gender-based violence. Additionally, the evaluation seeks to meticulously assess the enhanced capacities of partner organisations and groups associated with Safe Families, particularly in their endeavours to advance gender equality and proactively prevent gender-based violence (GBV).

This evaluative process serves as a critical foundation for ensuring that future gender-based violence (GBV) and violence against women and girls (VAWG) prevention programming, especially proposed models that have been implemented within the region for addressing VAWG in the Solomon Islands, are not only purpose-fit but also strategically focused, precisely targeted, and exceptionally responsive to the identified 'needs' of partners and donors. The overarching objective is to guarantee the optimal alignment of future initiatives with the evolving dynamics and requirements of the field, fostering enhanced effectiveness and impact in addressing the pervasive challenges of VAWG and GBV.

The bifocal aims of the endline evaluation for the Safe Families Phase II project are intricately crafted to facilitate a thorough and comprehensive examination. The evaluation involved a comprehensive examination of the project's achievements, challenges, and overall impact on the prevention and response



to family and sexual violence in the Solomon Islands. This included a thorough analysis of the project's effectiveness, identifying key accomplishments, and addressing challenges encountered during implementation including in-depth exploration on the key outcome areas and whether these have been successfully achieved or not.

A notable key aim of the Safe Families community healing component has been to educate in order to promote behaviour and attitude change, exploring behavioural changes within the identified target communities, villages, and the broader societal context has enabled this evaluation to best understand what aspects of the community healing sessions have been effective and develop more in-depth understanding of the contributors toward success and limitations that have impeded overall impact.

This exploration is conducted with a methodological lens firmly grounded in behavioural science, aiming to unveil and understand the intricate shifts in attitudes, perceptions, and actions among the project's beneficiaries. The emphasis is on delving into the nuanced intricacies of how behavioural science principles interact with and influence the outcomes of the project, providing a more granular understanding of its impact on the targeted populations. This comprehensive evaluation approach is poised to yield detailed insights that will not only inform the assessment of the project's current effectiveness but also contribute valuable lessons for the design and implementation of similar initiatives in the future.

The methodology is meticulously crafted to delve deeply into the intricacies of the project's relevance, efficiency, effectiveness, and sustainability. Moreover, it aims to provide nuanced insights into the transformation of knowledge, attitudes, and behaviours, specifically addressing gender-based violence (GBV). This evaluative approach aligns with Oxfam's commitment to maximising the depth of findings and offering optimal recommendations for future projects, thereby contributing to the broader goal of creating a society where family violence is unequivocally rejected.

BACKGROUND AND CONTEXT

Violence against women in the Solomon Islands is a deeply entrenched issue that requires a comprehensive understanding of its root causes, prevalence, and socio-cultural dynamics for effective intervention. Equally crucial is the implementation of new holistic approaches, like the 'Make Our Families Safe' (Safe Families) Project, focused on creating sustainable behaviour change on the community level. Despite the rich cultural diversity in the South Pacific archipelago of the Solomon Islands, women are regrettably not shielded from the pervasive reality of gender-based violence.

The Solomon Islands Family Health and Safety Study (SIFHSS) conducted in 2016 serves as a critical reference point for understanding the extent of violence against women in the country. Shockingly, the study reveals that 64% of women aged 15-49 have experienced physical or sexual intimate partner violence in their lifetime. This statistic underscores the urgent need for a concerted and targeted response to address the multifaceted dimensions of gender-based violence.

The cultural fabric of the Solomon Islands plays a significant role in shaping attitudes towards gender roles and perpetuating violence against women. Traditional practices often reflect deeply ingrained patriarchal values, fostering an environment where gender inequalities persist and certain violent behaviours within relationships are normalised. For instance, a study published in the Pacific Health Dialog in 2018 highlighted the influence of cultural beliefs on the acceptance of domestic violence in the Solomon Islands. Understanding and addressing these cultural determinants are paramount to effecting lasting change.



Despite the alarming prevalence of violence, survivors in the Solomon Islands face formidable challenges when attempting to report incidents and seek assistance. The stigma associated with being a victim of violence, coupled with fears of retaliation, acts as a deterrent to reporting. Additionally, there is a pervasive lack of trust in the legal system, hindering survivors from seeking justice. The geographical dispersion of the islands, villages and communities further complicates the provision of support services, making it difficult for women in remote areas to access help.

In response to the pervasive issue of violence against women, the Solomon Islands government, in collaboration with non-governmental organizations (NGOs) and international agencies, have undertaken initiatives to address the problem. The enactment of the Family Protection Act in 2014 represents a significant legislative milestone, criminalising domestic violence and providing legal mechanisms, including protection orders, to safeguard survivors. However, the effective implementation of these measures remains a challenge, highlighting the need for sustained efforts and resources as well as further support from partners such as Oxfam and the Safe Families Phase II Project that supports the implementing partners and key stakeholders towards their efforts in eradicating violence against women.

While commendable efforts have been made, challenges persist, demanding a nuanced and sustained approach. Behavioural change, a critical aspect of eradicating violence, requires targeted awareness campaigns and educational programs such as the community healing component of Safe Families to challenge and transform deep-seated attitudes. Adequate resources must be allocated to strengthen support services, especially in remote areas, and enforce legal mechanisms effectively. The issue of violence against women in the Solomon Islands demands a multifaceted approach that encompasses innovative projects/programs that are implemented through a Behavioural science lens in combination with holistic approaches that compliment cultural beliefs, values, and practices. Other approaches also include legislative reforms, cultural awareness campaigns, and the strengthening of support services. Collaborative efforts between the government, NGOs, and international agencies are imperative to effect meaningful change and create a safer environment for women in the Solomon Islands.

The endline evaluation conducted for the Safe Families Phase II Program encompassed a nuanced understanding of the contextual factors that shaped the outcomes of the initiative. Key considerations span diverse realms, including cultural, gender-related, social, political, economic, demographic, environmental, and institutional aspects. The implementing Provinces, namely Choiseul Province, Western Province, and Malaita Province, each present unique contextual nuances that impacted the program's effectiveness. Due to logistical and geographical challenges, the evaluation team encountered constraints in reaching Choiseul province, primarily attributed to limited fuel availability and the looming cyclone season with a turnaround time for flights extending to 2-3 months.

Despite these challenges, the evaluation strategically focused on Western Province and Malaita province, where assessments were conducted within the available communities. This targeted approach allowed the evaluation to capture the intricacies of the contextual factors, enabling an in-depth analysis of the program's impact in the accessible regions, thus ensuring a meaningful and representative assessment of the Safe Families Phase II Program.

Four communities were surveyed and interviewed throughout the endline evaluation to understand the program's impact. These communities represent diverse geographic and socio-cultural contexts within the implementing Provinces of Choiseul, Western, and Malaita Provinces. In total these communities included Ward North Kolombangara and within this ward Hambere community residents took part in the evaluation, Ward Noro and communities Base and Baru were also surveyed and interviewed within the Western Province. Within Ward 1 in Malaita the community of Ambu was also part of the evaluation. Among these communities, one by the name of Hambere from Western Province stood out as exceptionally isolated, representing significant logistical challenges. This Hambere village is the perfect representative for many of the remaining communities in Western, Choiseul and Malaita who were not

available to take part in the evaluation process. On the scheduled survey dates, there was initially no response from the community Hambere, highlighting the remoteness and difficulty of access and communication two of many challenges that have been faced throughout implementation.

OVERALL CONCEPT AND DESIGN

The Safe Families Phase II Program is a comprehensive initiative designed to tackle the pervasive issue of gender-based violence (GBV) and violence against women and girls (VAWG) in the Solomon Islands. Grounded in a socio-ecological model, the program strategically maps and understands the multifaceted drivers contributing to GBV/VAWG at different levels within society. The model identifies four interconnected quadrants of change, spanning both formal and informal spheres at individual and systemic levels. These quadrants include transforming formal institutions, policies, and practices; enhancing women's collective empowerment; improving women's access to GBV response services; and transforming social norms and practices related to GBV/VAWG. These key areas align with what is known as the Gender at Work Framework, a useful framework which emphasises and helps to promote understanding toward the interconnectedness among gender equality, organisational transformation, and the institutions or power dynamics that govern communities.

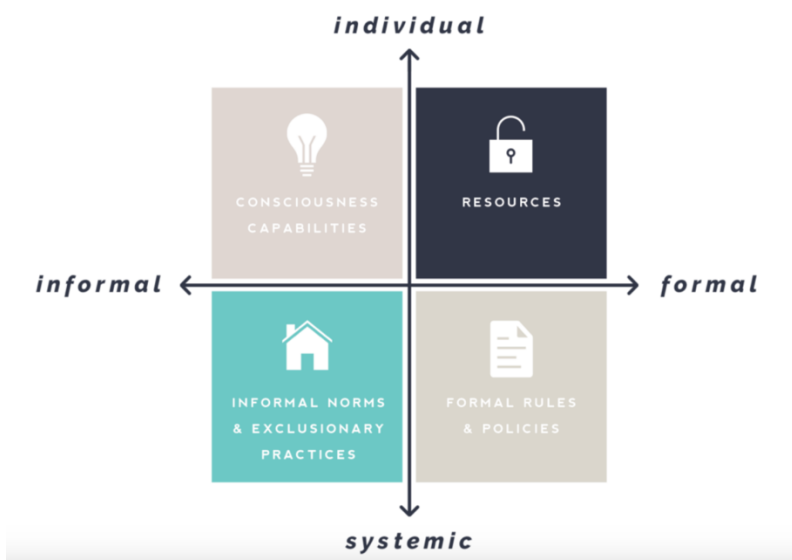


Image: Gender at Work (2024)

The concept and design of this program recognises the interdependence of these quadrants, acknowledging that change in one area can influence and reinforce positive developments in others. By applying this socio-ecological framework, the Safe Families Phase II Program's intention was to dismantle the underlying structural and social barriers to gender equality, fostering a holistic approach to preventing and responding to family violence.

Aligned with the mandate of the Ministry of Youth, Women, Children, and Family Affairs (MYWCFA) and the commitment to enforce the Family Protection Act (FPA) across the Solomon Islands, the program was developed to leverage existing formal and informal institutional structures at national, provincial, and community levels. Collaboration with local actors and engagement within established structures such as community groups, Women's Clubs of the Solomon Islands (WCW), Provincial Council of Women (PCW),



Women's Development Division (WDD), and provincial leaders has been intended to enhance the program's outreach, impact, replicability, and sustainability.

The implementation in select provinces ensures a strategic and gradual approach, facilitating a deepened connection with local communities. Importantly, the program seeks to promote ownership within the community and reinforce the accountability of service providers. Through the establishment of a National EAWG Taskforce by the Ministry of Women, Youth, Children and Family Affairs (MWYCFA) as a subset of the national SAFENET, focused on coordinating prevention activities and developing joint messages, the program facilitates a collective voice in the EAWG space.

By linking community family violence prevention committees to the provincial SAFENET in target provinces, the program was designed to establish a multi-stakeholder, locally owned, and locally relevant mechanism for the coordinated provision of family violence prevention and response services for survivors. This approach was implemented to ensure that interventions are contextually appropriate, acknowledging the diverse needs of communities across the Solomon Islands.

The Safe Families Phase II Project was designed to ensure a strategic and collaborative effort to address the root causes of GBV/VAWG, fostering a safer and more equitable environment for women and families in the Solomon Islands. Through its holistic design and engagement with diverse stakeholders, the programs intention was to create enduring change and contribute to the broader goals of gender equality and violence prevention within the nation.

THE COMPOSITION OF THE EVALUATION TEAM

The evaluation team for the Safe Families Phase II Program consisted of an Endline Evaluation Consultant with extensive expertise working within the cultural context of the Solomon Islands, a background in behavioural science, gender advisory, and human rights advocacy, the consultant brings a nuanced understanding of gender justice and women's economic empowerment projects throughout the region. Overseeing and providing technical guidance and support toward the evaluation was OAU and Oxfam Solomon Islands providing strategic direction and ensuring alignment with program goals and Oxfam evaluation standards. The independent evaluation consultant was supported by Oxfam Safe Families Program Manager and acting Gender Justice Lead in the logistical aspects of field data collection, in particular support in coordinating with change agents to organise venues and participants for data collection. Despite facing time constraints, the team has achieved a strong evaluation, demonstrating adaptability, collaboration, and a commitment to providing valuable insights for the continued success of future projects within both the Solomon Islands and the region.

MAP OF PROJECT PROVINCES

Below you will find a detailed map illustrating the diverse provinces of the Solomon Islands. Pertinent to the Safe Families phase II (SF) initiative, Choiseul Province, Western Province, and Malaita Province were the key provinces where program implementation took place. It is crucial to emphasise however that only Western Province and Malaita Province were accessible and engaged in the endline evaluation process. This spatial constraint, though posing challenges, underscores the necessity for a nuanced interpretation of evaluation outcomes within the confines of the accessible implementing partners.

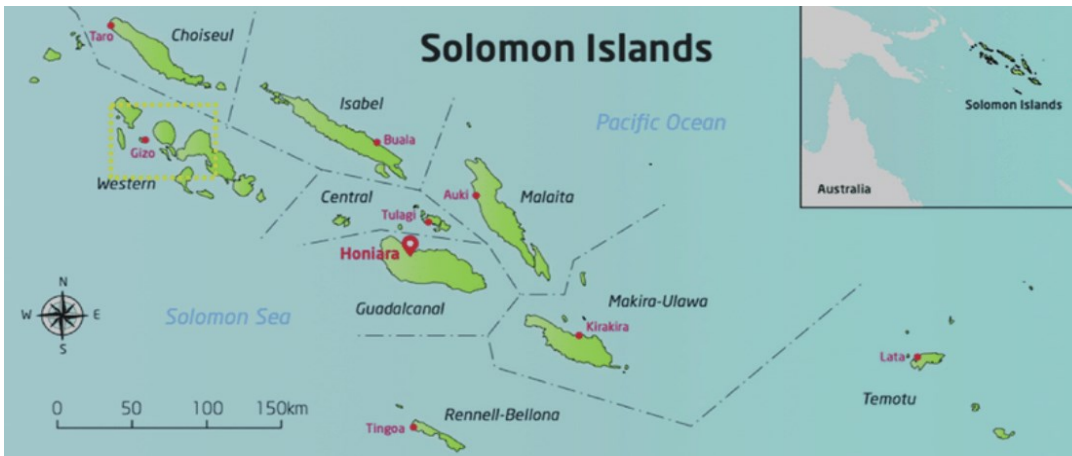


Image: Research Gate (2019)

Choiseul Province (found in the north-western region of the Solomon Islands is extremely isolated), Malaita Province (found in the north-east of the Solomon Islands is somewhat central to Honiara but has isolated communities) and Western Province (within the far western region of the Solomon Islands having the most isolated and difficult to access communities).

The intention of this map is to allow you to gain a visual of the vast geographical location of the many Islands within the Solomon Islands and the distance between provinces, further helping you to gain insight on the many geographical challenges which were faced throughout the 5-year program implementation of the Safe Families phase II program and the difficulty accesses all remote communities for the endline evaluation. Despite these challenges which include lack of resources for many of the participants within the Safe Families program there were still many who showed their strong interest in participating and supporting the endline evaluation process, partaking in surveys, interviews and open discussions with an emphasis on story telling.

EVALUATION METHODOLOGY

The evaluation methodology was initiated with a thorough desk review and context analysis, involving an extensive examination of project documents, reports, and relevant literature. To enhance the analysis, a behavioural science lens was incorporated, with a specific focus on the Safe Families Project Theory of Change (ToC) and implementation strategies. In the initial stage, further in-depth interviews and storytelling sessions with key stakeholders played a crucial role, ensuring comprehensive and strong emphasis on qualitative data collection. Surveys were administered to all evaluation participants, excluding those not directly involved in implementation, such as stakeholders within Gizo and Auki. However, interviews were conducted with all participants, including those not directly involved, aiming to uncover crucial information regarding limitations and gaps to guide findings.

The survey topics covered various aspects related to the Safe Families Project, including its impact on gender equality, community dynamics, collection of demographics, personal views towards GBV/FV/SGBV, awareness around Safe Families and community healing among many other topics. Questions delved into participants' perceptions, experiences, and observations, providing a holistic understanding of the project's outcomes. Data from the surveys underwent a rigorous analysis process. Thematic content analysis was employed, starting with the identification of overarching impressions and the removal of biases. This method allowed for the organic exploration of materials, seeking common themes across the dataset. Additionally, a narrative content analysis was utilised, requiring a sense-making approach to individual stories from interview respondents. This method proved effective in identifying significant aspects of the



data that resonated well with readers, adding depth to the overall analysis. The combined use of these analysis methods ensured a robust examination of the information gathered during the evaluation process.

Overview of the Evaluation Approach:

The methodology commenced with an in-depth desk review and context analysis, involving an extensive examination of project documents, reports, and literature. The evaluation incorporated a behavioural science lens into the analysis, emphasising the Safe Families Project Theory of Change (ToC) and implementation strategies, further in-depth interviews with key stakeholders were an important aspect to this initial stage ensuring data is gathered and information is as extensive and clear as possible.

Quantitative Data Collection:

To capture quantitative data on key evaluation criteria, including relevance, efficiency, effectiveness, and sustainability, surveys were designed and administered. These surveys were able to determine key data that could show case changes in the attitudes, beliefs, and behaviours towards set statements from the baseline data VS endline evaluation data. Statistical analysis was applied to further identify key patterns and trends in the baseline data versus current data, particularly related to the behavioural changes. Important to note, baseline data was limited and there were some major inconsistencies in this data which need to be considered when looking at the overall findings and comparison.

Qualitative Primary Data Collection:

In-depth interviews with key stakeholders and focus group discussions, utilising behavioural science methodologies, were conducted to explore shifts in attitudes and behaviours related to gender-based violence (GBV) and Safe Families interventions. Specially designed surveys and qualitative questionnaires were implemented for members of target communities, ensuring a gender-sensitive approach.

Specific Methodological Components:

The methodology integrates a feminist and SOGIESC lens throughout the evaluation, engaging diverse voices where possible to capture behavioural changes in various attitudes and beliefs towards violence against women. However importantly to note due to risk of resistance and backlash, especially around cross-cutting issues we were unable to successfully engage diverse voices in the space of gender identity which remains a very sensitive and unspoken topic in the Solomon Island cultural context with many people still not understanding what the term means.

Ethical Considerations and Safeguarding:

Ethical considerations prioritise informed consent, transparent communication, and culturally appropriate data collection methods. Data was collected and analysed in a disaggregated manner, considering gender, disability, and other relevant attributes. The methodology complies with Oxfam's evaluation and data protection policies, ensuring participant privacy and confidentiality.

Timeline and Deliverables:

The timeline encompassed an inception phase, data collection phase, and analysis and reporting phase. Deliverables included a detailed evaluation plan, engagement with key stakeholders, desk review, and comprehensive data collection and analysis. The reporting structure emphasised regular briefings, ongoing communication, and stakeholder involvement.

This methodology, aligned with the evaluation's objectives, ensured inclusivity, ethics, and a thorough analysis of the Safe Families program's achievements and challenges. It utilised a behavioural lens to provide nuanced insights and recommendations, contributing to the ongoing improvement of future projects.



LIMITATIONS TO THE EVALUATION

Conducting the endline evaluation for the Safe Families Phase II project encountered several limitations that have profound implications for the assessment's comprehensiveness and effectiveness.

Time Constraints

Limitation: The compressed timeline for the endline evaluation, conducted within one month instead of an appropriate and realistic proposed timeframe of six months given the geographical and contextual issues faced, hindered the depth and breadth of data collection.

Implications: Limited time compromised the ability to reach remote communities effectively and gather nuanced information, potentially impacting the accuracy and reliability of the evaluation findings.

Unexpected Expenses and Cultural Norms

Limitation: Unexpected expenses related to participants' financial needs for fuel to attend surveys and interviews created challenges, influenced by cultural norms and expectations around participation.

Implications: Financial constraints may have excluded valuable perspectives, particularly from economically vulnerable participants, potentially skewing the evaluation's representation and findings.

Insufficient Training for Change Agents and Ward Facilitators

Limitation: Inadequate training, particularly on safeguarding practices, for change agents and ward facilitators raised concerns about their capacity to appropriately support the evaluation, especially in sensitive situations within communities and when communicating with individuals.

Implications: The absence of proper training compromises participant safety, potentially violating safeguarding policies set by DFAT and Oxfam, and threatens the ethical integrity of the evaluation.

Resource Constraints

Limitation: Limited resources hindered the participation of rural participants who couldn't afford to travel to selected locations for evaluation activities.

Implications: This limitation may result in a skewed representation of perspectives, excluding voices from marginalized and rural communities, impacting the evaluation's comprehensiveness and fairness.

Impact of Pacific Games 2023:

Limitation: The scheduling of the Pacific Games 2023 in December restricted availability for meetings within communities and key stakeholders. Due to community members traveling to Honiara for the Pacific Games and not being available.

Implications: Reduced availability during a significant event undermines the breadth and depth of engagement, potentially limiting the diversity of participants included in the evaluation. For example; large groups of people travel to Honiara for the games but end up staying months with family due to the fact they cannot afford to travel back right away after the financial constraints off the games.

Christmas Period in January:

Limitation: The Christmas period in January, characterized by family reunions and limited work engagement, posed challenges for participant availability due to most people returning home to their villages for Christmas period where family time is a priority and connectivity is non-existent.

Implications: Delays in engagement during this period may have affected data collection, potentially skewing the findings and limiting the ability to capture accurate reflections on program impact.



Strong Lack of Trust:

Limitation: Throughout the Safe Families Implementation there were significant delays with receiving funding from donors due to COVID-19 that negatively impacted their ability to implement and continue implementation once started within the community healing component.

Implications: Delays in receiving funding necessary to commence community healing sessions may have affected trust between community members and Oxfam as well as other key stakeholders.

Limited Program Engagement:

Limitation: Safe Families has not been as active in many implementing communities as intended, with inconsistent activities and awareness SF and the community healing component were foreign to many community members interviewed in Western Province. Community members including youth and older members.

Implications: Direct Impact on overall potential of Community healing sessions in the Solomon Islands, where there is limited program awareness it is not possible to measure program impact or effectively impact behaviour change.

Lack of Baseline Data:

Limitation: The absence of sufficient baseline data, exacerbated by the unavailability of materials from previous surveys, hindered the ability to effectively compare and measure changes over time.

Implications: The lack of baseline data severely challenges the evaluation's ability to provide a robust assessment of the Safe Families Phase II program's impact, making it challenging to draw meaningful conclusions about project success.

Addressing these limitations requires a thoughtful approach, including potential adjustments to data collection strategies, increased stakeholder engagement, and consideration of additional contextual factors that may influence the evaluation's validity and reliability.

Limitations to the evaluation	Mitigation measures
Time Constraints: Endline Evaluation having limited time frame to successfully complete endline evaluation and reach all Provinces and communities.	Mitigated by selecting most accessible communities who can be reached within the one-month timeframe available to collect baseline data.
Unforeseen Expenses and Cultural Norms: Participants not interested in being actively engaged in the endline evaluation unless they receive a form of compensation to cater for fuel and travel costs necessary to reach select locations.	Catering to cover food costs for participants on arrival as well as travel allowance was allocated to every participant, this helped to develop trust and ensured arrival of participants on the agreed date.
Lack of Education About Safe Families: Some participants were not aware who Safe Families was, nor had they heard about the community healing most notably key stakeholders who should be actively engaged and aware of Safe Families such as RSIPF, FSC, Social Welfare and key community leaders.	Did not use surveys on those who had no awareness or no active engagement with Safe Families, instead focused on in-depth interviews to better understand the existent gaps and why they were not educated on Safe Families or the community healing.
Insufficient Training for Change Agents and Ward Facilitators: Ward facilitators and Change agents did not undergo any safeguarding training or preparation before conducting community healing sessions.	Mitigated by ensuring I gave each of the change agents and ward facilitators responsible for supporting me in locating key participants a brief informal training when first meeting, to better understand their experience and to also ensure that they are interacting with participants



	in a professional manner when coordinating people to be part of the evaluation.
Resource Constraints: Resources limited, and many participants were unable to attend select locations for the evaluation because they could not afford to travel by boat, interviewing in their homes was too high risk for those women.	I provided an allowance for travel that support those traveling for the endline evaluation, as well as catering for each participant on arrival as was requested by some.
Impact of Pacific Games 2023: Impacted the availability of participants and interest in participation.	Delayed starting data collection/surveys/interviews until after the Pacific Games 2023 was finished in the new year.
Christmas Period in January- This is very important to mention as within the Solomon Island culture no one works or participants in anything in the final weeks of December or the first 2 weeks of January as this is a time many go home to the village where connectivity is limited.	Delayed starting data collection/surveys/interviews until after the Christmas Period- commencing in the 2 nd week of January instead.
Strong Lack of Trust- As a result of inconsistent funding received by the communities during the Covid-19 period trust was impacted, and this was verbally noted as a reason why some participants were not interested in supporting the endline evaluation.	Assured participants their voice and contribution matters and is valued no matter what. Spoke further on the importance of finalizing the endline evaluation even if the feedback is not positive it is important to be transparent and allow every voice to be heard.
Lack of baseline data- This being one of the most limiting aspects of this evaluation where there is limited baseline data, and where there is some data collection the approach and tools is not effective and not possible to complete a robust impact comparison with.	Selected one community (as was the only community who responded to participant in the evaluation who were active in the Baseline data collection)
Limited Program activity- many community members in the Western Province stated they had never heard of Safe Families or community healing; these are members who are actively engaged in the community such as schoolteachers or active community leaders.	Interviewed these community members to better understand why they had not heard of Safe Families. Understanding the gaps and learning about their experiences allowed me to narrow down focus on engaging the areas where participants were involved.

II. EVALUATION FINDINGS

RELEVANCE

To what extent was the intervention relevant to the needs and priorities as defined by beneficiaries?

Finding: High Relevance

The Safe Families Phase II intervention in the Solomon Islands has demonstrated a high degree of relevance, effectively addressing the needs and priorities as defined by beneficiaries, particularly women stakeholders at the provincial and ward levels. The project's emphasis on capacity strengthening, institutional development, and collaborative initiatives has yielded positive outcomes, showcasing its impact not only at the institutional and government levels but also within local communities. It is important to note that the beneficiaries were involved in defining their needs and priorities during phase I of the program when facilitators were actively engaging within communities to find out what these needs and priorities are as well as key activities necessary to achieve them.

One of the major strengths of the project lies in Safe Families Outcome 1, which focuses on capacity strengthening. Through Oxfam's partnership model, the project supported the revamping of the Solomon Islands National Council of Women (SINCW), providing essential capacity building, education, and training. This strategic intervention enabled SINCW to enhance its legitimacy and leadership by aligning with Provincial Councils of Women (PCWs) and Ward Councils of Women (WCWs), further strengthening the support available to Safe Families at the community level. These successes were exemplified by SINCW's AGM in March 2023, where a legitimate board and executive were established, and key documents gained endorsement. This success allowed SINCW to align national priorities with PCW partners and strategically plan, enhancing its leadership capabilities and influence on crucial gender policies within the Solomon Island Government.

Furthermore, the intervention facilitated significant engagement in policy validation, involving 90 participants from key organizations validating key council policies across the four provinces. The validation of the Human Resources policy, for example, led to the inclusion of safeguards for safe recruitment, demonstrating a direct impact on institutional practices within partner organizations and positively affecting communities. Although pending endorsement, participants emphasized the importance of having these policies to guide councils in supporting the implementation of government policies relevant to women. Additional workshops, such as the Human Resources Validation and fraud and risk management, contributed to the enhancement of institutional knowledge and practices, fostering positive changes at the community level.

The project also effectively increased collaboration and created safe spaces for women to lead at the community level. The SINCW Organisational Capacity Assessment (OCAT) and extraordinary meetings in August 2023 provided space for women representatives from nine provincial councils and member associations to influence key governance documents. The outcomes included a review of SINCW's constitution, the presentation of a strategic plan (2023-2026), and the endorsement of both at the conclusion of the workshop. This highlights the project's success in empowering women to shape policy priorities and organizational direction, directly impacting communities.



Moreover, the project played a crucial role in enhancing collaboration and linkages among key stakeholders by strengthening the SAFENET referral network. The facilitation of regular meetings and workshops at both provincial and national levels encouraged sustained engagement between national stakeholders and community groups. This collaborative effort extended to the national level, where key stakeholders planned joint prevention initiatives, including collaboration during the annual 16 Days of Activism campaign and COVID-19 GBV prevention communications. Oxfam's involvement in the National Protection Cluster within the Ministry of Women Youth Children and Family Affairs (MWYCFA) further underlines the project's commitment to addressing gender-based violence at the national level and the high relevance of Safe Families in the Solomon Islands on the institutional, government, and community level.

The Safe Families Phase II intervention has not only been relevant but has exceeded expectations in addressing the defined needs and priorities of beneficiaries. The focus on capacity building, policy validation, collaboration, and linkages has created a positive and lasting impact, fostering empowerment, leadership, and sustainable change for women in the Solomon Islands, including at the community level.

To what extent did the intervention align with and adapt to changing government policies for gender equality and women's empowerment? What is the value of this alignment for the sustainability of the project results?

Finding: Robust Alignment

The Safe Families Phase II intervention in the Solomon Islands demonstrated a robust alignment with and adaptation to changing government policies for gender equality and women's empowerment. Specifically, Outcome No. 5, focusing on empowering Women's Development Divisions (WDDs) to implement the Ending Violence Against Women and Girls (EVAWG) policy and design violence prevention programs, stands out as a big achievement.

The project played a pivotal role in developing a skilled and motivated workforce, comprising both women and men, capable of overseeing gender-sensitive violence prevention work in rural communities. The collaboration with WDDs, facilitated through workshops and training sessions by Oxfam and partners, covered crucial aspects such as safeguarding, finance risk management, Training of Trainers for community healing, and validation of partner Provincial Councils of Women (PCWs) and Solomon Islands National Council of Women (SINCW) constitutions, strategic plans, and human resource policies. However, this collaboration did not involve the direct implementors such as change agents on the ground and subsequently this lack of training and involvement for those implementors did impact the change agent's ability to confidently deliver training sessions to the standard they had hoped.

The alignment with government policies is particularly significant given the challenges faced by WDDs due to funding constraints for effectively implementing and monitoring the progress of EVAWG policy and the Family Protection Act (FPA). Minister for Ministry of Women, Youth, Children and Family Affairs (MWYCFA) Freda Rotutafi Rangirei highlighted these challenges as setbacks in the government's decision-making process and solidarity toward increasing resources for gender-based violence (GBV) prevention interventions. The Safe Families project addressed this concern by enhancing reporting mechanisms, contributing to improved coordination unfortunately this did not enhance or improve the monitoring and evaluation of the project which faced significant limitations.

The success of the EVAWG policy was further evident in the financial support received from Western and Choiseul provincial governments for their respective PCWs in preparation for upcoming Annual General Meetings (AGMs). The project's impact extended to national advocacy efforts during the National 16 Days of Activism Campaigns, where WDDs and provincial PCW partners collaborated to advocate for resources



and budget from the Solomon Islands National Parliament. Thirty-seven out of fifty parliament members pledged their full commitment to resourcing activities aligned with the FPA and EVAWG policy, showcasing the empowerment of the national Women's Development Division in implementing violence prevention programs.

The value of this alignment with government policies is paramount for the sustainability of the project results. It not only strengthens the institutional capacity of WDDs but also positions them strategically to secure funding and drive gender-sensitive policies and advocacy at provincial levels and within the Ministry of Women Youth Children and Family Affairs (MWYCFA). The success in garnering support from provincial governments and the national parliament indicates the potential for positive influence on government decisions and commitment to addressing GBV, however there is no evidence to support that this influence has been achieved.

EFFECTIVENESS

To what extent were the expected outcomes achieved and how did Oxfam Safe Families project contribute towards these?

Finding: Some expected outcomes partially met

The Safe Families Phase II project has met some expected outcomes, contributing to transformative changes in addressing family violence against women and girls, however such contributions are not as profound as the design intended nor can we confidently draw on conclusions with the limited data/monitoring and evaluation provided for the program. However, the project's multi-pronged approach, focusing on influence, empowerment of women's organisations, and responding to survivors' needs, has supported communities toward education that has a succinct overview of how the project has contributed to each of the expected outcomes:

Outcome 1: Women stakeholders at Provincial and Ward level have increased institutional capacity and knowledge:

Oxfam's partnership model emphasised capacity strengthening, particularly for the Solomon Islands National Council (SINCW). SINCW's board and executive, established during the AGM in March 2023, showcased strengthened leadership and alignment with PCWs and WCWs.

Women's engagement in policy validation significantly increased, with 90 individuals validating key Council policies, contributing to enhanced governance. Through evaluation storytelling Provincial Council of Women stakeholders expressed increased knowledge and awareness around key things such as financial management and project coordination, especially comparing their experiences and knowledge in these areas prior to support from Safe Families, these findings indicate correlation between the Safe Families capacity development support and the increased knowledge in the space where training was provided.

Outcome 2: Increased collaboration between PCW, Provincial SAFENET, and Provincial Government:

Increased collaboration among PCWs, SAFENET, and provincial governments, facilitated by Oxfam's support which was focused on capacity development and strengthened the governance and relationship building through coordination and better program management. This increased collaboration was discovered through the questionnaires which prompted participants to speak about their experiences with special focus on collaboration. Importantly to note such experiences being expressed cannot be used to make a sound judgement as key variables must be considered such as other trainings taking place with external partners throughout the year also impacting this enhanced collaboration. Success stories from Malaita and Western provinces further support this increased collaboration but also highlight some gaps in the collaboration from institutional level down to the grassroots level.



Outcome 3: Increased collaboration and coordination between prevention initiatives at the national and provincial levels:

Measurable results come from the increased collaboration between SAFENET referral network and the safe families (SF) community healing component, where specifically referrals were made throughout the program from change agents who were engaged with survivors and victims in the community healing sessions to various SAFENET referral networks. In total 9 referrals were made throughout the Safe Families program in Western and Malaita Provinces, further increasing the collaboration in this very important national network.

Outcome 4: Increased number of PCW and WCW members empowered to design and implement violence prevention programs:

Oxfam collaborated with PCWs and WCWs to empower members through training on violence prevention and the Family Protection Act. PCWs actively participated in joint initiatives like the 16 Days of Activism Campaigns, demonstrating commitment to violence prevention. However there was no evidence found on PWC or WCD designing or co-designing violence prevention programs, but through interviews it was suggested PCW had planning and initial discussions toward designing violence prevention programs, in particular within the Western Province where the PCW had strong interest in designing a new Violence Prevention Program that they had shared several meetings about, but lacked the funding support to commence during the Safe Families programming.

Outcome 5: Increased number of Women’s Development Divisions (WDD) empowered:

Oxfam supported Provincial WDDs through workshops and training sessions, addressing key challenges that they had been facing, such as stakeholder coordination and relationship management which was a big challenge navigating the various relationships within the WDD and other stakeholders where previously relationship issues had existed. These challenges were supported through coordination trainings and general capacity development between partners, however WDD’s stated such trainings and support were not enough and although helpful they have not felt empowered to the point necessary to create change. The WDDs supported included 2, one in Western province and one in Malaita Province.

Outcome 6: Increased number of women and girl survivors aware of their right to referrals:

Through the Safe Families (SF) community healing component there was a strong increase of women and girls around awareness specifically regarding their right to referrals and the referral pathway available to them, such increased awareness was captured within the interviews during the endline evaluation data collection phase. All those participants interviewed in the evaluation had stated that they had increased awareness toward their right to referrals and support. As one participant stated in her interview, “I was always afraid about seeking help because you know I did not know who to ask and did not know what the process or my right to a referral. I always felt scared and unsafe asking for help, so I didn’t ask. Now I know my right for support and where to go”. Another participant stated “I was referred to a counsellor for support, before community healing sessions I did not know what referral rights were or whether I would be safe reaching out for help”.

Outcome 7: Increased capacity of community and service-providing organizations:

There have been no findings of increased capacity of community and service- providing organisations. Lack of awareness around Safe Families and community healing is likely to be a major contributor to this, for example key service providing organisations had not heard of Safe Families before and those who did were not aware of their role or what the program entails.



Outcome 8: Positive changes in beliefs, attitudes, and social norms:

Increased male leadership and participation in addressing violence were observed by ward facilitators within the communities who are actively engaged in the community healing, these observations were noted during interviews, stating that 'men who were involved in the community healing sessions are now actively stepping up as leaders in their communities and trying to be a voice for survivors or those less empowered', however importantly to note we cannot directly contribute this increased male leadership to community healing as there is not enough evidence to make such conclusions. The community healing sessions had a positive impact in changing the beliefs and attitudes of the ward facilitators and change agents as they were teaching content within the book they all stated they felt they were healing themselves and making big changes in their personal lives in the process and were confident that the concept of self-healing that community healing focuses on would be making similar impacts to the participant- such statements have not enough evidence to conclude.

Outcome 9: Adoption of non-violent conflict resolution methods and respectful behaviour:

Community Healing and Rebuilding Program, reinforced by community bylaws and policing, contributed to significant improvements. In one community a violence prevention committee was developed as a result of an argument taking place within a community healing session around the topic confidentiality, this topic triggered two of the participants who had different views around this topic, as a result the community came together and developed a very effective violence prevention committee that remains actively in use and helpful for the community today.

What are the major factors that influenced progress in achievement or non-achievement of the outcomes/objectives of the project?

Finding: Substantial Contributing factors

The Safe Families Phase II program encountered various factors that influenced both the progress and non-achievement of its outcomes. Understanding these factors is crucial for a comprehensive endline evaluation. Here are the major influences within both the program design and external factors:

PROGRAM DESIGN FACTORS

Capacity Strengthening and Collaboration:

Positive Influence: The emphasis on capacity strengthening, as seen in Outcome 1, significantly empowered women stakeholders, and enhanced governance structures. Collaboration among PCWs, SAFENET, and provincial governments (Outcome 2) was a key influencer, fostering joint initiatives and strengthened referral pathways.

Community Engagement and Empowerment:

Positive Influence: The project's emphasis on empowering PCWs, WCWs, and WDDs (Outcome 4 and Outcome 5) facilitated community engagement and strengthened local leadership. The establishment of Family Violence Prevention Committees and community by-laws showcased community-driven initiatives, positively influencing non-violent conflict resolution methods (Outcome 6).

Coordination and Collaboration at Multiple Levels:

Positive Influence: Enhanced collaboration and coordination between prevention initiatives at national and provincial levels (Outcome 3) facilitated community monitoring and joint prevention initiatives. The establishment of Prevention Committees and the strategic mission led by SINCW President in 2023 demonstrated the project's effectiveness in aligning national and provincial strategic plans.



Training and Education Programs:

Positive Influence: The Training of Trainers on violence prevention and the Family Protection Act (Outcome 4) equipped PCWs and WCWs with the knowledge and skills to actively participate in prevention initiatives. Trainings, such as Frontline Respondent Training, positively influenced the capacity of community and service-providing organizations (Outcome 7).

Strategic Planning and Advocacy:

Positive Influence: The strategic planning approach, as seen in the establishment of CPCs and the endorsement of provincial strategic plans, played a crucial role in achieving outcomes (Outcome 3). Advocacy efforts during the National 16 Days of Activism Campaigns demonstrated the project's influence in securing parliamentary commitment.

EXTERNAL FACTORS

Financial Constraints and Funding Challenges:

Mixed Influence: Financial constraints, highlighted in the challenges faced by WDDs, posed a significant obstacle to the effective implementation of EVAWG policy and the Family Protection Act. However, advocacy during the National 16 Days of Activism Campaigns successfully garnered parliamentary commitment, showcasing the project's resilience in overcoming funding challenges.

Global Challenges

Challenging Influence: External factors, such as the global COVID-19 pandemic, did create challenges to project activities and timeline implementation significantly delaying progress and program potential.

Local Dynamics

Political impasses in Western Province and issues between the Malaita Provincial Government and the national government created pressures for voluntary service providers and affected collaboration in provinces, showcasing the impact of broader contextual challenges.

Gender Sensitivity and Male Engagement:

Positive Influence: The project's focus on gender sensitivity, as evident in the increased involvement of men and boys (Outcome 8 and Outcome 9), suggested positive changes in beliefs and behaviours comparing attitude statements from baseline data to endline evaluation statement findings, however there are many variables to consider, and such suggested positive changes do not have substantial evidence to make such conclusions on that behaviour change. There were Male champions on the ground such as change agents and increased male participation in anger management sessions which have highlighted the success of engaging men in addressing violence and most importantly the need to ensure male engagement is a key focus on future programs where men have most authority and influence on the community and societal level.

The Safe Families Phase II program in the Solomon Islands experienced a blend of positive and challenging factors influencing the progress or non-achievement of its outcomes. The emphasis on capacity building, community engagement, and strategic planning emerged as major positive influencers, while financial constraints and broader contextual challenges posed notable obstacles. The project's ability to adapt to global and local context by continuing to run community healing sessions during events such as COVID-19 restrictions and impediments, as well as the civil unrest taking place in Honiara impacting the country on a national level was evident. Collaboration on the community level navigating these factors without the support and consistent communication from key stakeholders in Honiara contributed to the community healing components overall impact on addressing family violence, and the potential such an important



approach has. However on a governance level the project has shown limited evidence around the ability to adapt, major program design changes are necessary for this to happen.

EFFICIENCY

How does the partnership approach, governance and gender equality principles affect implementation?

Finding: Positive Affect on Implementation

Safe Families Phase II project has demonstrated strong impact as a result of its partnership approach, governance principles, and commitment to gender equality on the successful implementation of its objectives.

Partnership Approach:

- *Contextual Relevance:* The project's partnership approach, working closely with local partners and stakeholders, ensured that solutions were contextually appropriate and aligned with the Solomon Islands government objectives. The partnership approach was about enhancing the relationships between key partners and stakeholders in the space of violence prevention against women and girls, increasing the success and collaboration of these partnerships. By collaborating with the Ministry of Women, Youth, Children and Family Affairs (MWYCFA) by supporting the ministry in their capacity development activities such as the SAFENET reflection workshops helping SAFENET members share challenges and develop plans to improve and enhance activity. Leveraging the existing SAFENET referral network and partners, the project strategically aligned itself with national policies in order to enhance its effectiveness in responding to and addressing violence against women (VAW), although the partnership approach was a key focus there is no substantial evidence it was effective in fact interviews with government officials suggest severe limitations within the partnership approach which many stated is 'ineffective'.
- *Adaptability:* Notably, the project demonstrated limited adaptability in the overall program design and implementation and a major re-design, and significant changes are necessary in the entire approach in order to increase adaptability.

Governance Principles:

- *Policy Influence:* The project's commitment to influencing policy and practice (Pathway 1) was found in its contribution to enhancing the capacity of the National and Provincial governments specifically through partnership capacity to implement crucial policies such as the Family Violence Act, Ending Violence Against Women and Girls, and Women's policies. However, although such contributions were made there is limited measurable evidence to conclude that Safe Families had a direct influence on policy and practice.
- *Adaptations for Synergy:* The project's responsiveness to the MWYCFA's request to integrate the Safe Families Provincial Alliances into the SAFENET structure showcased a governance-minded approach. This adaptation allowed for more synergised efforts in addressing Ending Violence Against Women and Girls (EVAWG), reinforcing the project's commitment to collaborative governance structures.

Gender Equality Principles:

- *Empowerment and Behavioural Transformation:* The multi-pronged approach of the project, encompassing empowerment, training, and community healing and rebuilding, played a pivotal role in fostering positive behavioural changes. Through training programs, the project empowered



women stakeholders, allowing them to raise awareness and advocate for changes in social and cultural norms. The community healing and rebuilding program attempted to educate community members with the intention of influencing behaviours toward violence against women and family violence there was some evidence found in the effectiveness and positive approach that the self-healing of community healing program focuses on, however these findings of effectiveness came through in the evaluation interviews and such findings are inconclusive. Findings were also found through interviews that a deeper understanding of reconciliation and forgiveness was achieved with all participants who were part of the evaluation. For example, one participant stated, “I have been having domestic issues with my husband for a long time, community healing has educated me on better communication and listening skills, it’s taught me about reconciliation and forgiveness, we cannot move forward and heal unless we forgive and this is Gods teaching too. My relationship is healthier now and I am happy”. Another participant stated, “I have learnt so many new things. What’s been most helpful for me was learning about reconciliation and forgiveness, I have applied these lessons to my family life, and I see positive changes and less fighting now.”

Safe Families strategic partnership approach, governance principles, and commitment to gender equality have been important components of the Safe Families project. By aligning with national policies, fostering adaptability, and empowering communities, the project intended to achieve its key outcomes but unfortunately such outcomes have not all be met to the level necessary for sustainable impact and behaviour change.

To what extent does the coordination of the intervention support efficiency for programme implementation?

Finding: Coordination of Intervention support low

Safe Families faced notable challenges in the coordination of interventions across various institutions, government stakeholders, and community members. These coordination hurdles significantly impeded program efficiency, leading to lower reach, diminished impact, and an outcome that fell short of its full potential.

Weak Coordination Across Stakeholders:

- Despite the project's overarching goal to address gender-based violence (GBV) through a multi-pronged approach, coordination challenges were evident across key stakeholders. The collaboration between government entities, such as the Ministry of Women, Youth, Children and Family Affairs (MWYCFA), and community members faced significant challenges such as pre-existing relationship issues between those government bodies and community members on the provincial level, these existing issues of governance impacted the coordination.
- The adaptation to a reduced geographic scope, while a pragmatic decision, demonstrated the challenges in aligning various stakeholders with the new geographic scope resulting in wards missing out and communities having to be removed from Safe Families Implementation. The phased-out partnerships with the Guadalcanal Provincial Council of Women (GPCW) and Temotu Provincial Council of Women (TPCW) reflected the difficulties in sustaining collaborative efforts.

Limited Management Synergy:

- The integration of the Safe Families Provincial Alliances into the existing SAFENET structure showcased an attempt to streamline efforts; however, this change indicated that the initial coordination mechanism may not have been optimally designed. Such adjustments mid-project underscored a lack of initial management synergy whilst at the same time supported improved coordination between key SAFENET members and SAFE FAMILIES.



Relationship Dynamics and Impact:

- The challenges in coordination, management, and relationships between various individuals, government bodies, frontline service providers and organisations responsible for implementation had a cascading effect on program outcomes. The lower reach and impact were not solely due to a lack of resources or commitment but were exacerbated by the inefficiencies in communication and collaboration. Such evidence for this coordination management includes no communication toward the PCW's when requesting support from Oxfam on the National level, such support included capacity development for trainers, safeguard training, financial management and support or training for improved governance- often times leaving the PCWs waiting months before receiving a response to their request for support.
- The community healing and rebuilding program, a key component for behavioural change, may not have achieved its full potential due to coordination challenges with the Provincial Council of Women, National council of Women and Oxfam Safe Families. Also important to note the transformation of beliefs, attitudes, and social norms was hindered by the disjointed efforts of stakeholders involved. Although these conclusions are interpreted based on interview and storytelling findings.

Lessons for Future Interventions:

Robust Coordination Strategies:

The program demonstrated significant contributions to governance structures and policy implementation. However, the lessons learned highlight the critical importance of robust coordination strategies. Future interventions should prioritize meticulous upfront planning to establish effective coordination mechanisms. These mechanisms should foster strong relationships, seamless management, and efficient communication among all stakeholders. Clear guidelines and frameworks for collaboration should be established from the outset to enhance program effectiveness.

Ongoing Capacity Building and Training:

The experience of the Safe Families Phase II project underscores the necessity for continuous capacity building and training, particularly in the realms of coordination and relationship management. Recognizing that effective collaboration between government bodies, implementing partners, and community stakeholders is essential for program success, future interventions should allocate resources and efforts toward ongoing capacity-building initiatives. This includes training programs that enhance the skills of all involved parties in coordination and relationship management, ensuring sustained program efficiency and impact over time. Regular updates and refresher courses can further reinforce these skills and adapt them to evolving contexts.

Despite its significant achievements, Safe Families faced considerable challenges in coordinating interventions. The inefficiencies in coordination, management, and relationships among stakeholders had tangible consequences on the program's reach and impact. Recognising these challenges provides valuable insights for refining coordination strategies in future interventions, ensuring a more seamless and impactful implementation process. These insights found on



SUSTAINABILITY

Assess the sustainability of the intervention in achieving transformation of attitudes, values and beliefs related to gender-power relations in support of addressing violence against women and girls in the Solomon Islands;

Finding: Changes in behaviour and attitude related to gender-power relations for those who attended community healing sessions

Safe Families embarked on the ambitious task of transforming attitudes, values, and beliefs related to gender-power relations to address violence against women and girls. Rooted in the understanding that gender roles are power relations, the intervention sought to challenge the patriarchal norms pervasive in Solomon Islands society. The assessment of sustainability reveals both notable strides and potential areas for further improvement. The Safe Families Phase II project has also demonstrated commendable achievements in aligning with its expected outcomes however not at the level that should be expected for such a multi layered project, it is important to note that there have been some inconsistencies and strong gaps discovered that have hindered the progress of meeting outcome expectations at the level necessary to impact behaviour change and see measurable results, these key insights include the need for more consistent community healing sessions where those facilitators are completing more frequent sessions in the communities in order to really influence change, however as they are receiving a small fee to do extensive amounts of work and coordination it is suggested that these roles in a future project need to be paid full time positions in order for those implementing training to stay accountable and influence change. It is essential to highlight that the strategic focus on capacity building, collaboration, and community empowerment has created a sustainable foundation for transformative change in addressing family violence in the Solomon Islands and many community leaders have continued the work in this space after the Safe Families Program has ended, proof of the sustainability of this program.

Behavioural Change and Shift in Attitudes:

- The program's focus on gender as a system of power relations has contributed to attitude and behaviour change within communities. Participants in various communities reported recognised changes in attitudes towards violence against women. This signifies a crucial step in dismantling deeply ingrained patriarchal beliefs. One participant stated "My brother was part of the community healing sessions. He used to get angry and beat his wife over money issues especially when he drinks beer. Now he try's s to be better and he talks to me about how he feels now and his new skills. He says he is proud of the man he's becoming because he can control his anger better from what he has learnt and I'm proud of him too." Another participant stated, "I use to accept violence against women as a way to deal with marriage issues. I know it's not okay now and I want to be an advocate for women, so my daughters are never victims of violence, I want them to know their rights".
- The acknowledgment of behaviour change is a positive indicator of the intervention's potential impact on individuals and communities. Participants including women and men, youth boys, youth girls between the ages of 15-65, having undergone awareness programs and community healing initiatives, have demonstrated a heightened understanding of the detrimental impact of gender-based violence on women, and more confidence in their ability to advocate for or support survivors should they need support.

Challenges in a Patriarchal Society:

- In the Solomon Islands, varying between communities and provinces, there exist both patriarchal and matriarchal societies; for instance, Guadalcanal and Western Provinces exhibit a mix of these cultural norms. However, even in matriarchal societies, men still wield significant control, highlighting the persistence of patriarchal influences. For example, women may make key decisions in matriarchal societies, and they may own land, but men guide those decisions and manage the land. This presents inherent challenges to gender equality. Gender inequality intersects with other power structures based on class and ethnicity, further complicating the transformation process.
- The intervention has made some efforts toward influencing those attitude, beliefs, and behaviours behind patriarchal ways of thinking yet the deeply entrenched norms demand sustained and targeted efforts. For example, the community healing sessions have focused areas on teaching around the importance of equality between women and men, especially around roles and responsibilities in the home. One participant stated, “I use to get home from work and let my wife do everything, because well that’s always been a woman’s job. Now I do the dishes and help her with cleaning up because I know it’s important to share these roles”. Another participant stated “I see gender equality differently now. I grew up where men are in charge, it was patriarchal, my Mum had not many rights. I want my daughters to grow up and feel empowered to be who they want to be, I want them to own land and houses because they worked hard for them and not be stopped because of their gender”.
- The observed gender disparities, such as women being more likely to have no schooling, underscore the systemic nature of gender-based discrimination. The program's impact in challenging these disparities, though recognised, highlights the need for ongoing interventions that address the multifaceted layers of power relations.

Opportunities for Further Transformation:

- While the program has initiated significant changes, the sustainability of these transformations depends on continuous efforts and re-design of the program. The recognition of women's vulnerabilities, particularly in education, calls for holistic approaches that not only challenge gender-based violence directly but also address broader systemic inequalities. Such holistic approaches such as the concept of self-healing has been existent in Solomon Island culture for thousands of years, where self-healing for many issues is the preferred way, so such an approach with self-healing in the community healing component is received well.
- Opportunities for further transformation lie in enhancing community-led initiatives and reinforcing the linkages between gender, education, and economic empowerment. At the policy and institutional level enhanced interconnection and collaboration between major stakeholders is paramount. Strengthening women's participation in decision-making processes and ensuring access to educational opportunities can serve as catalysts for sustained change.

4. Lessons for Future Interventions:

- Future interventions should incorporate long-term strategies that empower women economically, socially, and politically. Fostering community-led initiatives and engaging men as allies in challenging patriarchal norms are crucial components of a sustainable transformation agenda.
- The successes and challenges encountered by the Safe Families Phase II offer valuable lessons for future interventions. Sustaining the transformation of gender-power relations require a



comprehensive approach that considers the intersectionality of power structures and addresses underlying systemic issues.

There has been commendable progress in challenging gender-power relations and transforming attitudes towards violence against women in the Solomon Islands. The sustainability of these transformations hinges on recognising the systemic nature of gender inequality and implementing targeted, community-driven initiatives. By addressing not only the symptoms but also the root causes of patriarchal norms, future interventions can build on the foundation laid by Safe Families Phase II for a more equitable and sustainable society in the Solomon Islands.

How will the benefits of the interventions be secured for rights holders (i.e. what accountability and oversight systems were established)?

Finding: Some systems established but significant gaps exist in safe-guarding mechanisms
Safe Families was designed not only to implement interventions but also to secure lasting benefits for rights holders, particularly women and girls. To achieve this, the program established robust accountability and oversight systems. Key mechanisms were put in place with the intention to effectively deliver the intervention with the intention of safeguarding the rights and well-being of the beneficiaries.

Community Empowerment and Participation:

- The program prioritised community involvement, ensuring that rights holders actively participated in the planning, implementation, and evaluation of interventions. This participatory approach aimed to empower women and girls to take ownership of the initiatives, fostering a sense of agency and autonomy.
- Community consultations, awareness campaigns, and workshops were instrumental in creating a platform for rights holders to voice their concerns, needs, and expectations. This inclusivity contributed to the design of contextually relevant programs that directly addressed the challenges faced by women and girls in the Solomon Islands.

Strengthening Institutional Capacities:

- Collaborating with national and provincial institutions, the program worked towards strengthening the capacities of organisations such as the Solomon Islands National Council of Women, Provincial Councils of Women, and Women's Development Divisions. This capacity-building initiative aimed to enhance their ability to advocate for women's rights and effectively implement gender-sensitive policies, such advocacy supports rights holders in the societal fabric of the Solomon Islands, especially when such policy is endorsed by government.
- By bolstering the institutional capabilities of these organisations, the program sought to create enduring structures that would continue to support and protect the rights of women and girls beyond the project's timeline.

Coordination with SAFENET:

- The establishment and coordination with the Solomon Islands SAFENET served as a critical accountability mechanism. SAFENET, functioning as a referral network, played a pivotal role in connecting survivors of gender-based violence with essential services. This network ensured a timely and comprehensive response to the needs of rights holders.



- The integration of Safe Families Provincial Alliances into SAFENET in three provinces - Malaita, Western, and Temotu - enhanced coordination and streamlined efforts to address violence against women. This integration provided an organised structure for reporting, monitoring, and responding to cases of gender-based violence, although SAFENET does not directly support in the monitoring and overall coordination it supports the Ministry of Women, Youth, children, and Family Affairs to achieve this.

Transparent Reporting and Monitoring:

- The program incorporated transparent reporting and monitoring mechanisms, allowing for continuous evaluation of its impact. Regular assessments, reviews, and progress reports facilitated accountability to rights holders, donors, and stakeholders.
- Monitoring and evaluation activities provided limited insights into the effectiveness of the intervention, improved monitoring and evaluation would enable adaptive management and responsive adjustments to better align with the needs and expectations of rights holders.

Safeguarding Mechanisms:

- To ensure the safety and well-being of rights holders, the program intended to implement safeguarding mechanisms. These measures were aimed to prevent and address any potential harm that could arise during the course of interventions. Training was provided at the institutional and provincial levels for government stakeholders, but it was not implemented or monitored at the community level for those conducting community healing sessions, such as Change Agents. This lack of safeguarding training poses a significant risk to individuals involved in Safe Families' community healing sessions. To reinforce the safeguarding concern, a case occurred during a session where both a perpetrator and the victim/survivor's brother were present. The Change Agent, lacking safeguarding training, hesitated in navigating the situation when the brother reported the case and requested a referral. This uncertainty posed challenges in reducing harm and risk while maintaining confidentiality for all parties involved.
- There is no safeguarding system within Safe Families on the community level that is managed or has been successfully implemented for all those actively engaged in implementation on the ground to ensure the safety of all those involved in activities. This comes back to the responsibility of Oxfam to ensure all safeguarding measures are being met.
- Training sessions on transparency, accountability, administration, and safeguarding were conducted for key stakeholders, including the Solomon Islands National Council of Women, Provincial Councils of Women, and Women's Development Divisions. These initiatives instilled a culture of responsibility and ethical conduct in safeguarding the rights of women and girls, however this same training was not given to those directly involved in implementing the program on the community level.

In general, there was a strong demonstration and commitment to securing benefits for rights holders through a comprehensive set of accountability and oversight systems. By prioritising community participation, strengthening institutional capacities, coordinating with SAFENET, implementing transparent reporting, the program aimed to create a foundation for sustainable, rights-based interventions in the Solomon Islands. However there have been significant gaps in training and safeguarding for those directly responsible for community healing implementation and this is a gap that needs to be urgently addressed for future implementation. These accountability measures ensure that the positive impacts of the interventions are not only realised but also endure beyond the project's duration, contributing to lasting transformation and empowerment for women and girls.



To what extent did the project successfully blend Safe Families activities with other efforts to address GBV to sustain impacts in the longer term? What recommendations are necessary to strengthen social norm change in the future?

Finding: High efforts in blending activities throughout program implementation

Safe Families (SF) demonstrated commendable efforts in blending its activities with broader initiatives addressing Gender-Based Violence (GBV), thereby laying the groundwork for sustained impacts in the longer term. The project's approach of integrating Safe Families activities with other ongoing efforts created a multi-layered, comprehensive strategy that holds significant potential for lasting social norm change.

Holistic Integration:

- Safe Families Phase II strategically integrated its activities with existing efforts to address GBV, recognizing the interconnected nature of social issues. By collaborating with institutions such as the Solomon Islands National Council of Women, Provincial Councils of Women, and Women's Development Divisions, the project tapped into existing networks and structures.
- This holistic integration allowed Safe Families to leverage the strengths of partner organizations, ensuring a collective and synergistic approach toward achieving sustainable impacts. The project's multi-layered nature, spanning policy influence, community engagement, and capacity-building, enabled a comprehensive response to the complex challenge of GBV.

Strengthening Partnerships:

- The project actively engaged with various stakeholders, fostering partnerships that extended beyond its immediate scope. For example, collaboration with stakeholders responsible for the successful operation of government bodies such as SAFENET referral network. This partnership strengthening took place between Ward Facilitators, Change Agents and RSIPF and Social Welfare stakeholders through survivor referrals of both women and children during the community healing sessions being implemented.
- The integration of Safe Families Provincial Alliances into SAFENET in key provinces enhanced coordination and strengthened the broader response mechanism. This collaborative approach is fundamental for the sustainability of efforts, ensuring that the positive impacts resonate at multiple levels.
-

Building Institutional Capacities:

- The project focused on enhancing the capacities of institutions like the Solomon Islands National Council of Women and Provincial Councils of Women. This capacity-building not only contributed to achieving project outcomes but also empowered these organizations to continue their efforts in addressing GBV beyond the project timeline.
- Strengthening institutional capabilities ensures that the groundwork for social norm change is sustained. The empowered institutions can continue to advocate for policy changes, influence community attitudes, and provide essential services to survivors of GBV.

Empowering Communities:



- Safe Families Phase II placed a strong emphasis on community empowerment, recognizing the pivotal role communities play in sustaining social norm change. Through initiatives like the Community Healing and Rebuilding Program, the project equipped communities with the knowledge and tools to address GBV at the grassroots level.
- Empowered communities to become agents of change in themselves, fostering a culture of respect and gender equality. The ripple effect of these empowered communities contributes significantly to the sustainability of the project's impacts.

Recommendations for Strengthening Social Norm Change:

Continued Collaboration: Encourage ongoing collaboration with governmental and non-governmental entities to ensure a unified, cohesive effort in addressing GBV. Strengthening existing partnerships and forging new alliances can amplify the impact.

Long-Term Monitoring and Evaluation: Establish a robust monitoring and evaluation framework for continued assessment of social norm change. Long-term data collection will provide insights into the sustained impact and areas requiring further attention.

Community-Led Initiatives: Empower communities to take the lead in sustaining social norm change. Supporting community-led initiatives ensures that the transformation is ingrained in local contexts and driven by the people themselves.

Capacity Building for Continuity: Continue investing in the capacity building of institutions and community leaders. Building local capacities creates a sustainable infrastructure for ongoing efforts to combat GBV.

Advocacy for Policy Continuity: Advocate for the integration of project-driven policies into national frameworks. This ensures that legislative changes and policy advancements initiated by the project remain in force beyond its conclusion.

Through its multi-layered approach and integration with broader initiatives Safe Families has built a strong foundation for sustainability in the Solomon Islands. The collaborative efforts, institutional capacity building, and community empowerment strategies lay a foundation for continued progress in addressing GBV. By incorporating the recommendations mentioned, the project can further strengthen its contribution to lasting social norm change, leaving a transformative legacy in the fight against gender-based violence in the Solomon Islands.

To what extent was partner capacity developed in order to ensure sustainability of efforts and benefits?

Finding:

The Safe Families Phase II project demonstrated a robust commitment to developing partner capacity, a cornerstone for ensuring the sustainability of efforts and benefits beyond the project's lifespan. Through strategic partnerships with key stakeholders such as the Ministry of Women, Youth, Children and Family Affairs (MWYCFA), Solomon Islands National Council of Women, and Provincial Councils of Women, the project actively engaged in capacity-building initiatives. Workshops, training sessions, and collaborative activities were tailored to enhance the capabilities of partner organizations in effectively addressing gender-based violence (GBV) throughout the duration of the project, with some delays in partner capacity development during civil unrest and most notably Covid-19 impediments.

The project's emphasis on empowering local partners extended to both governmental and non-governmental entities, fostering a collective understanding of the root causes of GBV and equipping partners with the tools to advocate for sustainable change. By focusing on partner capacity, the project not



only facilitated the achievement of immediate objectives but also laid a foundation for partners to carry forward the mission of combating GBV, contributing significantly to the lasting impact and sustainability of the intervention.

How has funding been secured to ensure partner programme implementation of the programme and do these funding models remain relevant and appropriate going forward?

Finding: Funding secured to support partner implementation, funding models need review.

Securing funding for partner program implementation within the Safe Families Phase II project has been a dynamic and strategic process, reflective of the evolving needs and challenges encountered during the intervention. The project initially received support from the Australian Government under the 'Pacific Women Shaping Pacific Development' initiative, demonstrating a commitment to advancing gender equality and addressing violence against women in the Solomon Islands. This funding model provided the essential resources required for the project's multi-pronged approach, aligning with national policies and priorities in the fight against gender-based violence (GBV).

As the project progressed, there were notable adaptations in the funding model to address changing circumstances and priorities. A pivotal shift occurred when the Department of Foreign Affairs and Trade (DFAT) approved a reduced geographic scope, focusing on specific wards and communities based on criteria such as distance, proximity to services, and reported violence cases. This adjustment aimed to optimize impact and resource allocation in areas where the need was most pressing. Furthermore, the project responded to a request from the Ministry of Women, Youth, Children and Family Affairs (MWYCF) to integrate Safe Families Provincial Alliances into the existing SAFENET structure, streamlining efforts and ensuring funding aligned with the national EVAWG focus.

The evolving funding models demonstrated a strategic responsiveness to the contextual demands of the intervention, ensuring that resources were allocated efficiently to maximize outcomes. Going forward, it is crucial to continually assess the relevance and appropriateness of these funding models, considering the changing landscape of GBV prevention and response efforts in the Solomon Islands. Regular evaluations and strategic planning will be essential to secure sustainable funding sources that align with emerging priorities and challenges in the ongoing battle against violence against women and girls.

THE FOUR CHANGE PATHWAYS: INFLUENCE, EMPOWER, RESPOND, PREVENT

The success of the Safe Families Phase II project, rooted in a robust Theory of Change (ToC), becomes evident through its comprehensive implementation of four interconnected pathways targeting diverse contributors to gender-based violence (GBV) and violence against women (VAW) across the various strata of Solomon Islands society. Under the first pathway, emphasising institutional mechanisms for effective policy implementation, the project not only supported the revitalization of the Solomon Islands National Council of Women (SINCW) but also enhanced its legitimacy through the establishment of a credible board and executive during the SINCW Annual General Meeting in March 2023, although this finding was evident through interviews it is not substantial enough to conclude that Safe Families was responsible for such enhanced legitimacy. The initiative further facilitated collaboration between Provincial Councils of Women (PCW), Provincial SAFENET, and Provincial Government, fostering the creation of prevention and response support structures, notably observed in Malaita Province. Active participation in the National Protection Cluster and engagement in joint prevention initiatives, such as the



annual 16 Days of Activism campaign and COVID-19 GBV prevention communications, suggest the project's impact on enhancing collaboration and coordination at both national and provincial levels.

In the second pathway, aiming to empower women's rights organizations like NCW/PCW/WCW/WDD, the project achieved some of its tangible outcomes. Empowering PCWs and WCWs led to successful violence prevention programs and advocacy initiatives, prominently demonstrated during the 16 Days of Activism Campaigns. Additionally, the project significantly empowered Women's Development Divisions (WDD), contributing to the implementation of EVAWG policy and the design of prevention programs, such empowerment was discovered in the interview sessions. The newfound capacity of WDDs played a crucial role in advancing gender equality within PCWs and MWYCFA, fostering advocacy efforts and securing financial support from provincial governments.

Moving on to the third pathway, responding to the needs of survivors of family violence, the project raised awareness among women and girl survivors regarding their right to referrals for support services specifically awareness around SAFENET referral network. Establishing Family Violence Prevention Committees and conducting empowerment workshops contributed to improved governance at community levels. Establishing Community Crime Prevention Committees and leveraging by-laws, the project successfully facilitated effective community-level response mechanisms.

Finally, the fourth pathway aimed at preventing family violence against women and girls through changes in beliefs, attitudes, and social norms. Positive shifts in these aspects were observed, especially with increased male leadership in addressing violence. The implementation of the Community Healing and Rebuilding Program played a pivotal role in fostering non-violent conflict resolution methods and respectful behaviour at the household level. Communities showcased a demonstrable shift towards non-violent conflict resolution methods and respectful behaviour, further reinforced by the Community Healing and Rebuilding Program, community policing, and the reinforcement of by-laws.

In summary, the Safe Families Phase II project has adeptly translated its Theory of Change into some outcomes being achieved however there is much need for improvement, embodying a holistic and community-centred approach is essential but ensuring a collaborative, motivated and coordinated environment to foster such implementation and success is essential. This comprehensive initiative has fostered lasting changes in attitudes, practices, and social norms surrounding gender-based violence in the Solomon Islands.

A TRIANGULATION EVALUATION APPROACH

The decision to employ a triangulation approach in the endline evaluation of the Safe Families program stems from the recognition of inherent limitations and challenges associated with the baseline data. The baseline data, characterized by inconsistencies, weaknesses, and unreliability, raised concerns regarding its adequacy for measuring the impact or behaviour change resulting from the program.

The identified significant gaps and compromised quality of the baseline data necessitated a more robust and comprehensive evaluation strategy. By utilising a triangulation approach that integrates data from multiple sources, including interviews, surveys, and observations, we aim to enhance the reliability and validity of the evaluation findings.

This method allows for cross-verification and validation of information, mitigating the risks associated with relying on a single data source. In situations where baseline data lack's reliability, a triangulation approach



becomes essential to ensure a more accurate and nuanced understanding of the program's impact and the behavioural changes it has initiated within the target population.

KNOWLEDGE, ATTITUDES AND BEHAVIOURS

The primary objective of this evaluation was to meticulously examine the Safe Families phase II project's accomplishments, impediments, and influence in effecting transformative changes in the knowledge, attitudes, and behaviours of the designated population concerning family and gender-based violence. A key focus was placed on understanding the capacities of partner organisations and groups affiliated with Safe Families, assessing their enhanced capabilities in advancing gender equality and effectively preventing gender-based violence (GBV). Understanding the impact on fostering positive shifts in societal norms related to family and gender-based violence throughout has been essential.

In the Solomon Islands, addressing changes in knowledge, attitudes, and behaviours is of paramount importance due to the pervasive societal norms that have historically normalised and accepted violence against women. Achieving meaningful transformation requires a holistic and meticulously designed approach that takes into account the intricate web of cultural and contextual factors deeply embedded in the fabric of the society. This necessitates a nuanced understanding of local customs, traditions, and power dynamics, which shape individuals' perspectives on gender roles and relationships. In cultures where violence against women has been normalised, a comprehensive strategy becomes imperative to challenge ingrained beliefs, foster awareness, and cultivate new attitudes. A carefully crafted intervention must navigate these cultural intricacies, offering not only awareness but also viable alternatives that resonate with the community's values. This approach ensures the sustainability and effectiveness of behavioural change initiatives, fostering a shift towards a society where violence against women is not only condemned but actively replaced with values of equality, respect, and dignity.

WESTERN PROVINCE

The endline evaluation for Safe Families Phase II in Western Province focused on assessing the impact of the Community Healing Program in two key locations: Ward North Kolombangara and communities Hambere, and Ward Noro within communities Baru and Base. Additionally, stakeholders in Gizo were included in the evaluation, totalling 21 participants surveyed and interviewed.

Utilising a comprehensive approach, the evaluation incorporated in-depth interviews, surveys, and observations, engaging key stakeholders, change agents, ward facilitators, and community healing participants. Out of the 21 participants in Western Province, 19 agreed that the Community Healing Program was highly effective, citing witnessed behavioural changes in their communities. However, 2 participants expressed scepticism, primarily due to a lack of awareness about Safe Families' overall activities and concerns about the management of the community healing approach, these participants were located within Hambere community.

Remarkably, 20% of the individuals participating in the community healing sessions reported measurable behaviour change, capturing positive transformations in their lives, relationships, and families. These changes were acknowledged by both male and female change agents and participants in community healing sessions at the community level. Key changes discovered as a result of the Safe Families community healing sessions for Western province Book 1 and 2 include the following:

- 1) **Enhanced communication skills-** *evidence found through story telling on the community level, such story telling involved open encouragement to share experiences and share stories in a structured timeline from start to finish around the key skills that were gained as a result of community healing sessions, this was a finding noted with 18 out of 21 participants of those 18 participants 7 were female and 10 were male.*

- 2) **Improved emotional regulation (anger management)**- evidence here includes 9 out of 21 individuals including 5 female and 4 male shared experiences on how they now navigate emotions when they arrive and control their anger as a result comparing examples of how they would react and feel prior the community healing sessions VS after.
- 3) **Improved communication with their husband/wife**- evidence showing 5 women stating during interview that their marriages have significantly improved in the space of communication, that they understand the value of communication now more than they previously had and are better at listening while communicating. 3 men also stated this to be the same for them furthering adding that their wives have improved communication because their new skills allow them to be present and give space for equal communication.
- 4) **Deeper understanding of confidentiality and its importance**- 4 male stated learning about confidentiality has changed the way they all interact within the community and within their families. 6 female stated confidentiality has enabled them to better perform at work, especially those involved in counselling and frontline service work.
- 5) **Increased education on the importance of equality and shared responsibilities**- evidence was found with regards to the education and changes in the perspectives and attitudes surrounding the importance of equality and shared responsibilities especially in the household. These findings were noted during survey data collection with 15 out of 21 participants stating their increased knowledge around the importance of shared responsibilities specially in their relationship/marriage and how this contributes to gender equality in their communities.
- 6) **Decrease in domestic violence reports (although this could be due to the sessions taking place and hesitancy to report as a result)**- Two ward facilitators one male and one female stated that they are both actively involved within their church groups in their community, and it has been noted that their usual number of reports within the one month period post the community healing session had reduced by more than 50% Although they attributed this to community healing sessions and educational knowledge from these sessions, its important to consider that such reduction in reports could have been due to fear of reporting while the community healing session were taking place.
- 7) **Improved referral network coordination with SAFENET**- 5 Cases of DV were reported through community healing session change agents in Western province between 2020-2022.

Notably, 80% of participants expressed interest in and understood the importance of community healing sessions, with older age groups (30-50) showing higher clarity than youth about the direct benefits. In Hambere village, 3 male participants (ages 25-45) self-reported substantial signs of behaviour change in their relationships, resulting in improved anger management and communication skills and a reduction in domestic violence incidents while the community healing sessions were taking place. 1 participant in Base expressed very strong changes in her own attitude towards holistic approaches to domestic violence, and in Baru 3 participants stated they have experienced some changes especially with how they approach communication and anger management.

QUOTES FROM DIFFERENT MALE AND FEMALE PARTICIPANTS

Male Participant - Confidence Building:

"Before the sessions, I didn't talk much. Now, I feel more confident. I know how to keep secrets, which helps survivors. It's important, and I want more people to learn this."

Female Participant - Improved Relationships:

"Since the sessions, me and my husband talk better. Less fighting now. Learning to manage anger is good. We need more of these sessions to keep families happy."



Male Participant - Understanding GBV Awareness:

"I never knew much about GBV. I thought it was just women's issues only. Now I do. It's important to help our community and for more men to advocate. We need more people to learn, so we all understand and stop it."

Female Participant - Safeguard Training Concern:

"I feel safer now, but I worry about the trainers. No training for them. They need it. They need to know how to deal with survivors and there are more here in the sessions than you realise. Please make it a priority for everyone's safety."

Female Participant - Coordination Needed:

"From Oxfam to PCW, we all need to work better together. Oxfam needs to make it easier for us. Give us more support and more training. Help us help our people on the ground."

Female Participant - More Sessions Needed:

"The books are good. We need more sessions, every week. Keep teaching us. I want to learn more. It's helping us heal."

Male Participant - Importance of Healing First:

"You need to heal yourself first before helping others. I learned that. Now, I can help my friends and family. It's important."

Female Participant - Communication Skills:

"Talking is better now. No more hiding and ignoring issues. My husband and I talk more. No violence like we use to have its good. These sessions work. We just need more of them."

Male Participant - Lack of Safeguard Training Concern:

"I learned a lot, but we trainers need training too. We need to feel confident in our work. It's a concern for all of us and we do not want to be judged. Make it a priority."

Female Participant - Call for Better Coordination:

"Oxfam, SINCW, PCW's MWYCFA, everyone must work together. We need to forgive one another and move forward from past issues. Not just big people at the top but us too on the ground in the provinces, implementing in our communities and ending violence against women and girls should be a priority. We need better coordination to make change."

FURTHER EVIDENCE/FINDINGS

Real testimonies from participants underscored the transformative impact of community healing training, with numerous stories shared about how it positively influenced their lives. While improvements in personal relationships were a recurring theme, the analysis emphasised the need for a more in-depth examination of these statements and observations and having strong baseline data that can be used as a pre intervention and post intervention comparison. There were two key methods used to analyse data these methods included Thematic content analysis – This method identified overarching impressions of the information and supported the weeding out biases. Instead of establishing a framework for approaching the data materials were searched organically to look for common themes. The key aim was to discover the recurring patterns across the data set. The second method was Narrative content analysis, this method



required sense making of the individual stories from interview respondents. It is the ideal approach for identifying important aspects of the data that resonate well the key audience of the report.

However, the data findings were not consistent and there were such significant gaps especially in the quality of any data recorded during this project that any comparison with the endline evaluation key findings would not be an accurate measurement thus the importance of looking at impact through a triangulation approach testing the validation of information from various resources and not just relying on the limited and inconsistent baseline data found. This is the evaluation approach for Safe Families phase II project to ensure the most accurate findings.

Noteworthy improvements in personal relationships coincided with reports of decreased domestic violence in Hambere village in the months following community healing sessions as shared by Ward facilitators. However, it is essential to distinguish the outcomes between Ward North Kolombangara and its community Hambere from Ward Noro and communities Base and Baru. There were many similarities in the key findings for Base, Baru and Hambere communities however Hambere had expressed more changes in behaviour and shared many stories from those who had attended the community sessions validating the effectiveness of the holistic approach it brings.

In Hambere village, six participants were interviewed, including four males and two females. Baru community had seven participants interviewed, with four males and three females, while Base community had three female participants interviewed. The remaining interviews took place with key stakeholders in Gizo, comprising community police, Family Support Centre staff, Social Welfare, and the Western Provincial Council of Women. These findings underscore the nuanced and context-specific nature of the Safe Families Phase II interventions in Western Province.

KEY FINDINGS ON PROGRAM SAFEGUARDING

How many people were interviewed that reported that they had not received any safeguarding training?

21 participants were interviewed in Western Province and 9 participants were interviewed in Malaita Province. A total of 30 participants were interviewed. Out of these 30, 8 stated that they had not received safeguard training. These 8 consisted of 4 ward facilitators and 4 community change agents.

Were all the people who reported that they had not received safeguarding training change agents and how many were spoken to?

All people who reported they had not received safeguard training were a combination of Ward Facilitators and Change agents. In total there were 4 change agents and 4 ward facilitators spoken to totally 8, out of these 8 reported no safeguard training, but did report a 2 day training on how to take the community healing sessions and teach the books 1 and 2 comments were made on how short this 2 day training was and that they needed a 2 week training to feel confident to deliver these CH sessions.

How many Ward facilitators reported they did not receive safeguard training and how many were spoken to?

As mentioned above a total of 4 ward facilitators were interviewed and out of those 4 all of them stated no safeguard training but instead a short 2 day training on running the community healing session books. Concerns were raised with the lack of focus on them and their implementation in the community leave all 4 ward facilitators stating they felt unsupported throughout the program.



What was the interpretation of the meaning of the word safeguarding and was there a difference in that interpretation on the community level vs governance level?

The common understanding shared between all Ward Facilitators and Change Agents was that Safeguarding means keeping people safe from harm or danger. For someone interacting with survivors of domestic violence, safeguard training is crucial because it teaches them how to protect and support survivors in a safe way. It helps them understand the signs of abuse, know how to respond, and ensures that they do not unintentionally cause more harm. Safeguard training is important to create a secure environment for survivors, build trust, and provide effective assistance while respecting their rights and well-being.

Please see the below graph that shares some of the comments and key themes connecting these comments discovered throughout the evaluation data collection.

KEY THEMES	PARTICIPANT COMMENTS	PROVINCE GENDER ROLE
<i>Knowledge increase of confidentiality and communication</i>	<p><i>Has stated experiencing increases in education in the space of gender and violence against women in particular with regards to communication and confidentiality.</i></p> <p>Participant said: “I have learnt new skills about confidentiality and why it’s important. Before I would share information without thinking about it, now I am careful.”</p>	<i>Western Province Male Community Member</i>
<i>Knowledge increase on anger management</i>	<p><i>Stated that new skills include now practicing ways to feel calm when angry to avoid violence toward spouse.</i></p> <p>Participant said: “Sometimes my wife doesn’t listen and it upsets me. I learnt how to stay calm and not use my anger to hurt the ones I love”.</p>	<i>Western Province Male Community Member</i>
<i>Knowledge increase on confidentiality</i>	<p>Has expressed learning about the importance of confidentiality and how this knowledge building has assisted in personal cases where confidentiality has been important for a survivor.</p> <p>Participant said: “I now use my new knowledge on confidentiality with my clients in counselling, I really take it seriously now because I know what can happen if I don’t.”</p>	<i>Western Province Female Community Level Implementing Staff</i>

<p><i>Increase in awareness of GBV and a change in attitudes and behaviours toward ending violence against women</i></p>	<p>Stated visible changes in his brother who engaged in community healing sessions who previously had limited awareness around violence against women and its prevalence in the community.</p> <p><i>Participant said: "My brother is young and did not have much awareness on this topic. He went to the youth community healing session, he has changed a lot. He talks about violence against women being wrong and is now an advocate in church now".</i></p>	<p><i>Western Province Male Community Member</i></p>
<p><i>Increases in emotional regulation</i></p>	<p>Has noticed profound changes in her husband who was also in the community healing sessions too, especially in his behaviour towards her and the way he interacts when they are both upset.</p> <p><i>Participant said: "My husband use to yell at me and it has always been normal. Now when he is upset he talks more and remains calm. It's made a big difference working on his self-healing too".</i></p>	<p><i>Western Province Female Community Member</i></p>
<p><i>Enhanced education toward attitudes and behaviours supporting FV/DV</i></p>	<p>Has noticed changes in the attitudes and behaviours of her community members since they engaged in the community healing session.</p> <p><i>Participant said: "I can really see a change since these sessions started, people are interested, the young girls want sessions to continue, knowledge is growing and it's empowering our young women."</i></p>	<p><i>Western Province Female Community Level Implementing Staff</i></p>
<p><i>Enhanced awareness on GBV</i></p>	<p>Said she was overwhelmed with the content inside the book and has increased her knowledge in the space of domestic violence, simple skills people are unaware of have been taught in this community healing book and she believes that it is the way forward to support and reduce violence against women.</p> <p><i>Participant said: "I did not know there were so many helpful areas that relate back to violence against women, I feel so lucky to be part of this important training."</i></p>	<p><i>Western Province Female Community Member</i></p>
<p><i>Increased awareness, education and engagement with GBV related activities</i></p>	<p>Feels his new perspective alongside attitude toward women and violence has changed. Wants to get more involved in this space of</p>	<p><i>Western Province Male Community Implementing Staff</i></p>

	<p>work and help to support the women in his community.</p> <p>Participant said: “I am an ending violence against women advocate in my church and community now, I have to be for my sons.”</p>	
<p><i>Enhanced knowledge toward attitudes and behaviours supporting GBV</i></p> <p><i>Increased emotional regulation skills leading to improved anger management</i></p>	<p>Has personally witnessed some changes in the attitudes towards domestic violence by one male who was in a community healing session, as she works directly with him, she was able to speak about those changes with him.</p> <p>Participant said: “One man I know has changed, it really impacted him you know. He cried to me talking about the changes in his life thanks to community healing, he is aware of the damages of Domestic violence and wants to be a better role model for his children now.”</p>	<p><i>Western Province Female Provincial Stakeholder</i></p>
<p><i>Inconsistency of training impacting behaviour change potential</i></p>	<p>Stated his knowledge in this very important space has been the main area of change, feels that behaviour change would come with more regular community healing sessions.</p> <p>Participant said: “I wish there was more support for more regular community healing sessions, funds too these lacked. We need to be repeating these sessions each week to make a difference.”</p>	<p><i>Western Province Male Community Implementing Staff</i></p>
<p><i>Increases in knowledge of GBV support services and referral networks available</i></p>	<p>Has noticed visible changes in her sister and mother who were both attending the community healing sessions also stated she has experienced a change in her personal values and rights as a woman, and this has given her confidence. States there are clear changes in attitudes taking place especially through the knowledge sharing and education that comes out of the community healing sessions.</p> <p>Participant said: “I feel so empowered now, like I can do anything, and I know my options if something ever happens to me, I know about the referral networks available.”</p>	<p><i>Western Province Female Community Member</i></p>

<p><i>Strong governance coordination lacking</i></p>	<p>States that the community healing sessions can only continue if the governance, coordination, and support is improved.</p> <p>Participant said: “There is a real issue here, we are not supported, no one talks when we need help, and the governance needs to improve.”</p>	<p><i>Western Province Female Provincial Stakeholder</i></p>
<p><i>Community engagement and program management limited</i></p>	<p>Stated more youth need to be involved both young men and women and feels that there is too much focus on older people whose behaviours are more difficult to change.</p> <p>Participant said: “Youth are the future and need to be the focus, not enough of them were involved in community healing in our community.”</p>	<p><i>Western Province Male Community Implementing Staff</i></p>
<p><i>Lack of capacity development and training for trainers</i></p>	<p>Participant wishes she received more support especially with funding management and training around how to successfully run the community healing sessions.</p> <p>Participant said: “I really felt scared because I had to manage funds and did not know what I was doing most the time.”</p>	<p><i>Western Province Female Community Implementing Staff</i></p>
<p><i>Lack of capacity development and financial management</i></p>	<p>Stated she feels a great lack of support, especially in financial management. Stated you cannot give funds to people who do not have the capacity and experience and expect them to manage budgets, there needs to be on-going support to make it work and safeguarding especially for those implementing the community healing sessions should have been priority- it was not and did not happen.</p> <p>Participant said: “This program needed more advisor support on the ground, there was not enough, someone from overseas through VSA would be good to help strengthen our work.”</p>	<p><i>Western Province Female Provincial Stakeholder</i></p>
<p><i>Lack of strong partnerships and coordination on institutional level</i></p>	<p>Stated that it is crucial for improved coordination and communication between all government bodies, projects, programs so we can better support one another.</p> <p>Feels that she should have been more involved in Safe Families especially community healing and that there should</p>	<p><i>Western Province Female Provincial Stakeholder</i></p>



	<p>have been widespread knowledge and awareness on when community sessions will be held and where.</p> <p>Participant said: “I don’t know what Safe Families role is in my community and I have never heard of community healing, can you explain what it is please.”</p>	
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The Safe Families endline evaluation in Western Province engaged 21 participants, comprising facilitators, change agents, and participants involved in the Community Healing Sessions. Notably, 19 out of these 21 participants including facilitators, change agents and community participants expressed a strong belief in the high effectiveness of the community healing sessions and the holistic approach employed by the program. This endorsement underlines the positive impact witnessed by those actively engaged in the sessions, attesting to the success of the Safe Families initiative in fostering behavioural change within the community. However, it is crucial to acknowledge that 2 participants who were community members both female exhibited scepticisms, emphasizing the importance of ongoing evaluation and adaptability in program implementation. Among the 21 participants, 15 (9 female 6 male) were actively involved in various capacities at community level implementation and 6 (2 male and 4 female) were not directly involved. Those involved were serving as facilitators, change agents, or participants, highlighting the depth of community engagement and participation in the transformative sessions. Those not directly involved in the community level implementation were key stakeholders from frontline service providers.

Measuring Beliefs

There were a total of 21 participants in the Western Province endline evaluation, these participants including a combination of change agents who were both male and female for each community, ward facilitators and those who were engaged in the community healing sessions. 19 out of 21 stated community healing to be highly effective, 1 stated low effectiveness, and 1 stated somewhat effective. Effectiveness was explained in Pijin language by explaining the following and giving some real-life examples to support this explanation. Out of the 19 participants who stated the community healing component was highly effective they were comprised of 11 females between 29-45 and 8 males between 30-45, the 1 who stated somewhat effective was female age 45 and the one who stated low effectiveness was male and 34. It is important however to mention that although these statements were given there are variables to consider that could have impacted those answers, such as confusion with regards to the question keeping in mind many of those interviewed have not received formal primary or secondary education and do not have the skills of reading and writing., this was remedied by repeating the question slowly 2-3 times in Pijin English and English asking questions to ensure they are clear, then when receiving an answer repeating back to them and ensuring I have received the answer correctly.

Highly effective- “You notice some very strong changes in influencing your own beliefs, attitudes and behaviour towards violence against women and girls after attending the community healing sessions and can easily identify these changes”.

Change example- “You have in-depth knowledge around the importance of confidentiality and can confidently share practical ways to use confidentiality to keep survivors safe, you have already put these new skills to practice”.

Somewhat Effective- “You notice that your knowledge toward the importance of confidentiality has increased, and you understand what can take place if confidentiality is not used.”

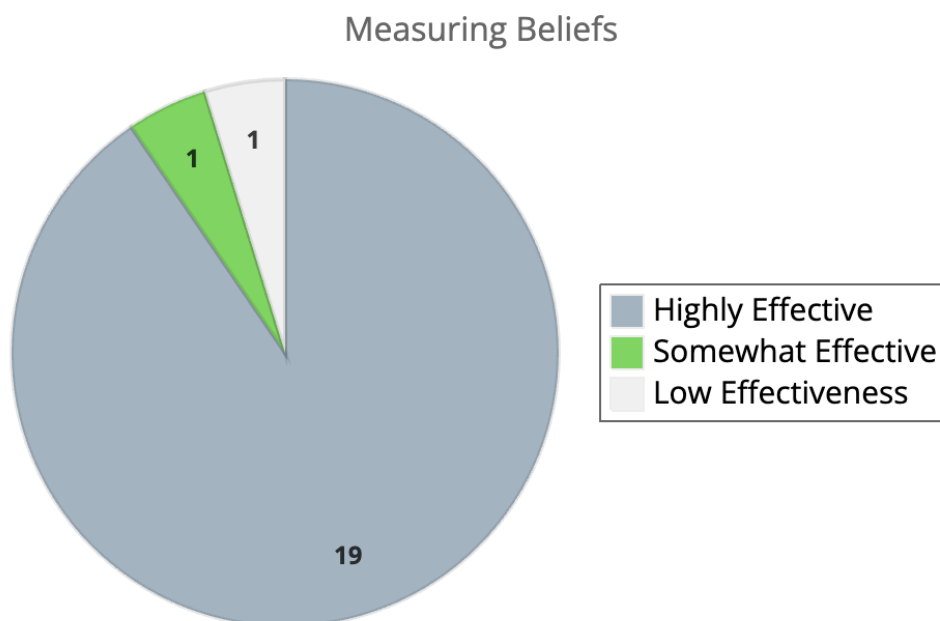
Change example- “You start to look at the importance of confidentiality and can link its importance with keeping survivors safe and can identify when confidentiality needs to be used’.

Low Effectiveness- ‘You do not feel that education is effective, or perhaps you feel that the way the community healing sessions are delivered need to be improved’.

Change example- ‘You have not noticed many if any changes in your own life, or within the community around you’.

Graph 1: In the graph below you will find a visual of the three groups and their varying beliefs

Western Province Community Healing



Measuring Perceived Behaviour Change

The following graph shows perceived behaviour change that has taken place for participants including change agents and ward facilitators who are running the sessions. Out of 21 participants 6 experienced strong changes in beliefs towards domestic and family violence these 6 were comprised of 5 female one male between the ages of 28-45, 3 experienced strong changes that comprised of 2 male and 1 female between the ages of 28-45, 4 noticeable changes in their attitudes this comprised of 1 female and 3 males between the ages of 28-45 and 8 individuals noticed low changes in behaviour these included 5 female and 3 male between the ages of 28-45, and finally 6 people experienced no indication of attitude change, these people were between the ages of 28-65.

Interestingly those participants over the ages of 45 rarely noticed changes in attitude, belief or behaviour which could be attributed to deeply ingrained beliefs and views towards gender equality that are more

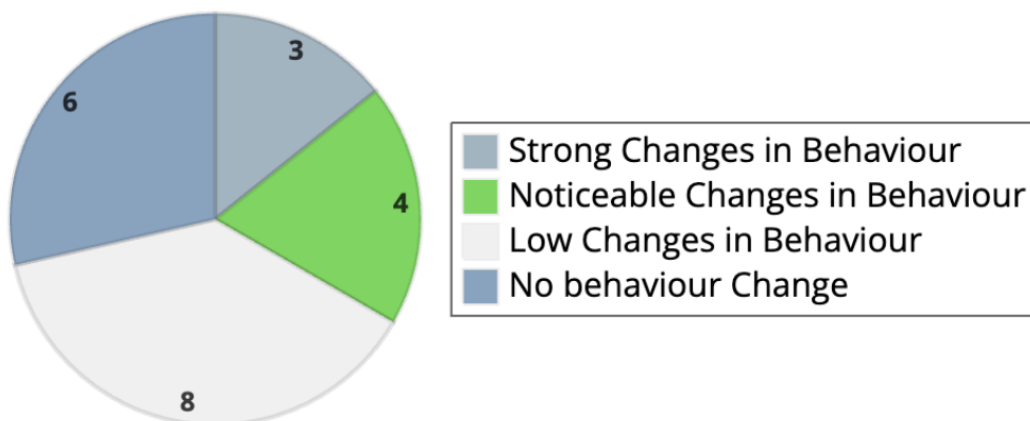
difficult to cognitively alter than for example youth, however there is no evidence to support this statement and further investigation and data collection/analysis is necessary. An equal distribution of community-level implementing staff, community members, and stakeholders was maintained in this analysis. Despite similarities, perspectives differed, with examples such as 6 individuals reporting no behaviour changes. However, reasons varied, including distance from sessions (2), perceived lack of helpful teaching (1), and incomplete attendance (3), emphasizing the importance of considering diverse perspectives in the analysis and how these may contribute to the overall validity of results.

The belief findings being measured in the following graph were identified using surveys and attitude and belief scales. These tools were also used with some community members pre intervention however important to note the same surveys and attitude and belief scales were not used. A range of questions were asked probing the participant what their beliefs are for a specific statement for example, “please tell me about your experience in changes in behaviour for yourself or your community members as a result of community healing” or “please rate these changes on this scale from strong, noticeable, low, no change at all”. Such statements are effective at better understanding key beliefs that indicate behaviour change has either taken place or not. It is imperative to mention that with such low numbers of participants in this evaluation results can be misinterpreted and conclusions made which are not substantiated by the data.

Graph 2: In the graph below you will find a visual of the perceived behaviour change recorded

Western Province Community Healing

Measuring Perceived Behaviour Change



Highest Areas of Knowledge Growth

In order to understand whether there was a change in the knowledge levels of key teachings within community healing book 1 sessions participants were asked a series of questions which included their



knowledge on a topic before community healing sessions vs their knowledge afterward being prompted to share examples to ensure they are clear on the question being asked. For example, “Please tell me about your knowledge on confidentiality before you started community healing sessions, what did you know about confidentiality?” or “Please tell me on a scale of 1-10 your level of knowledge on confidentiality before Vs after community healing sessions”. These statements and prompting questions have been essential in identifying potential changes in the levels of knowledge growth, what this indicates is the community healing sessions have been effective at educating community participants in areas which support the fight against violence against women, raising awareness and developing critical skills that can be used in the community to protect women and girls.

There are of course many variables to consider that could have interacted with and impacted results. These include but are not limited to, the low numbers of participants therefore making conclusions without substantiated data, answering questions to please the interviewer rather than be honest about their knowledge levels, misinterpretations as to what the question means or different understanding or interpretation of the words e.g. confidentiality.

Five areas of knowledge growth taught in the community healing sessions were identified in interviews. These 5 topics were used as part of the survey to identify these following results. A total of 21 participants were part of the surveys.

Topic 1: Communication. It was identified that 4 out of 21 participants had increases in their communication skills specifically in their relationship communication , only 1 out of 21 stating their communication skills remained the same from before the intervention with 16 stating they are unsure because they feel they need more sessions before their knowledge can improve.

Topic 2: Confidentiality. It was identified that 7 out of 21 participants noticed increases in their knowledge around confidentiality comparing knowledge levels before vs after CH sessions, 3 participants stated no changes in their knowledge post intervention, and 11 stated stating they are unsure because the sessions were too short to determine changes.

Topic 3: Emotional regulation. It was identified that 3 out of 21 participants stated increases in their knowledge of emotional regulation (findings ways to deal with emotions before acting on them), 1 out of 21 participants stated they had no changes and their ability to manage feelings remained the same. 17 stated it was be helpful to have more sessions to have a better understanding on this topic.

Topic 4: Anger management. This topic relates to emotional regulation but is not the same, anger management being a skill that comes from mastering emotional regulation. It was identified that 5 out of 21 participants had increased in their anger management skills compared to before the community healing sessions, 1 out of 21 stated they already had the same anger management skills and community healing made no difference, 15 stated they needed more sessions before they could really feel a difference in their anger management ability.

Topic 5: GBV awareness. It was identified that 2 out of 21 participants had noticeable changes in their knowledge around the topic of gender based violence and what it means, 2 out of 21 participants also stated that they experienced no changes before vs after community healing and their knowledge remained the same, 17 stated they need more content and sessions on the topic before they can comment.

The findings drawn have not been strong enough to determine whether knowledge levels increased as a result of community healing sessions. Although the participants indicated some changes, these changes

were small with the majority of participants indicating they need more community healing sessions before they can determine whether their knowledge levels have changed on the set topics or not.

Table 1: Please see the following table which gives you a visual of the different survey questions being used for the above analysis and findings on knowledge changes.

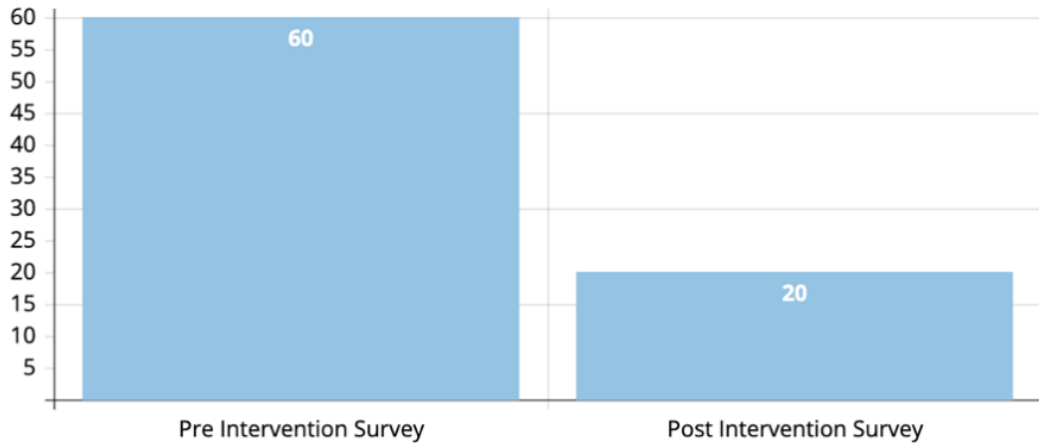
Questions	Answers	Demographic
Please tell me about your level of knowledge before you started community healing sessions, what did you know about confidentiality?	7 noticed increases in knowledge 3 stated no increases in knowledge 11 stated need more sessions before they can determine if knowledge has changed or not.	Male and Female between the ages of 28-65 Mixture of community participants and community implementing staff
Please tell me about your level of knowledge before you started community healing sessions, what did you know about the importance of good communication?	4 noticed increases in knowledge 1 stated no increases in knowledge 16 stated need more sessions before they can determine if knowledge has changed or not.	Male and Female between the ages of 28-65 Mixture of community participants and community implementing staff
Please tell me about your level of knowledge before you started community healing sessions, what did you know about the importance of emotional regulation and its meaning?	3 noticed increases in knowledge 1 stated no increases in knowledge 17 stated need more sessions before they can determine if knowledge has changed or not.	Male and female between the ages of 28-65 Mixture of community participants and community implementing staff
Please tell me about your level of knowledge before you started community healing sessions, what did you know about anger management and can you share examples of how you would manage feelings of anger?	5 noticed increases in knowledge 1 stated no increases in knowledge 15 stated need more sessions before they can determine if knowledge has changed or not.	Male and female between the ages of 28-65 Mixture of community participants and community implementing staff
Please tell me about your level of knowledge before you started community healing sessions, what did you know about gender based violence and has this knowledge increased after CH sessions?	2 noticed increases in knowledge 2 stated no increases in knowledge 17 stated need more sessions before they can determine if knowledge has changed or not	Male and female between the ages of 28-65 Mixture of community participants and community implementing staff
Please tell me on a scale of 1-10 with 1 being no increase at all to	An average of 4 was selected for this scale	Male and female between the ages of 28-65

10 being extremely high increase your knowledge on the topic of 'confidentiality' before vs after community healing sessions.		Mixture of community participants and community implementing staff
Please tell me on a scale of 1-10 with 1 being no increase at all to 10 being extremely high increase your knowledge on the topic of 'communication' before vs after community healing sessions.	An average of 4 was selected for this scale	Male and female between the ages of 28-65 Mixture of community participants and community implementing staff
Please tell me on a scale of 1-10 with 1 being no increase at all to 10 being extremely high increase your knowledge on the topic of 'emotional regulation' before vs after community healing sessions.	An average of 3 was selected for this scale	Male and female between the ages of 28-65 Mixture of community participants and community implementing staff
Please tell me on a scale of 1-10 with 1 being no increase at all to 10 being extremely high increase your knowledge on the topic of 'anger management' before vs after community healing sessions.	And average of 5 was selected for this scale	Male and female between the ages of 28-65 Mixture of community participants and community implementing staff
Please tell me on a scale of 1-10 with 1 being no increase at all to 10 being extremely high increase your knowledge on the topic of 'GBV awareness' before vs after community healing sessions.	An average of 7 was selected for this scale	Male and female between the ages of 28-65 Mixture of community participants and community implementing staff

Graph 3 Pre and Post Intervention Survey: Understanding whether Safe Families has impacted and influenced the attitudes and beliefs of those involved is essential. As part of the evaluation pre and post surveys were carried out with the 21 participants in the Western province. 60% of participants involved in community healing sessions stated they believed alcohol was one of the main causes of domestic violence prior to their involvement in community healing. Most notably post intervention only 20% of participants stated alcohol was a cause of domestic violence. This shift indicates a positive correlation between beliefs around causes of violence and the impact of the sessions. However, it is important to consider there are other potential variables that could have impacted these results.

Beliefs and Attitude Statements

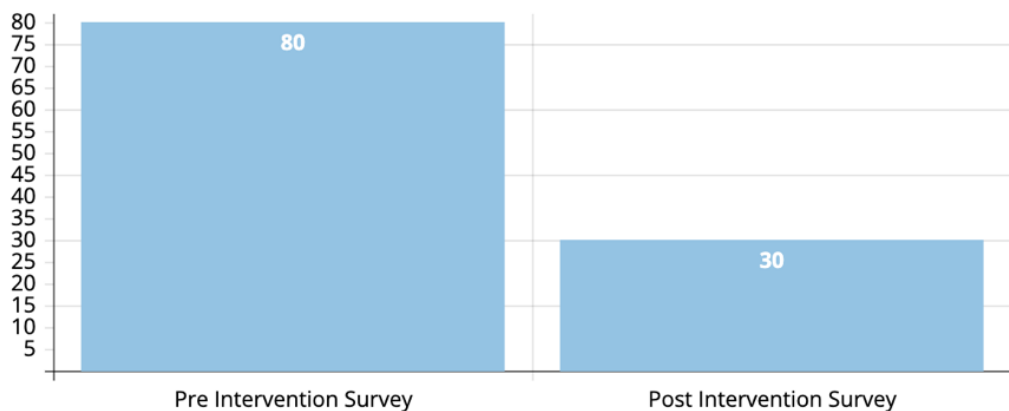
Statement: Alcohol is one of the main causes of Domestic Violence



Graph 4 Pre and Post Intervention Survey: The graph below shows another attitude statement survey statement question which was administered to participants with the intention of understanding their beliefs and attitudes both before and after the community healing sessions. 80% of participants interviewed stated their view towards domestic violence pre intervention was that DV is a family matter and therefore should be dealt with in the family. However interesting the survey showed that post community healing sessions their attitude and beliefs towards this statement changed and only 20% continued to believe this statement to be true. There is strong evidence that the community healing sessions and the content within the sessions have had strong impact when implemented however there are other variables to consider, and the fact that consistent ongoing sessions would likely be more beneficial and assist in understanding impact further.

Beliefs and Attitude Statements

Statement: Domestic Violence is a family matter





MALAITA PROVINCE

In the endline evaluation conducted for the Safe Families project in Malaita Province, with a particular focus on the Ambu community in Ward 1, key insights have been derived from the perspectives of 9 individuals encompassing change agents, ward facilitators, stakeholders these stakeholders' included members of various frontline service providers in Auki, and community healing participants. The findings revealed a good level of acceptance and endorsement of the community healing program.

88% (8 out of 9) of participants attesting to its high effectiveness and also stating they have noticed some positive changes within their own lives as a result. Of these 8 out of 9 total participants 6 were female and 2 were male between the ages of 25-45. They expressed improved skills in communication, anger management, and confidentiality, citing tangible transformations in their personal lives, relationships, and families. Two examples of these transformations include 1) One female stated that her marriage had improved significantly, and she was experiencing mutual communication that was not leading to arguments, especially around money and spending, both herself and husband were involved in the community healing sessions and both had noticed great differences by applying those skills learned. 2) One man stated that he has dealt with anger issues for the majority of his life, he has been a perpetrator of violence and was very open about this, he also stated that his marriage improved as his wife felt safe when he learned to control his anger, he still practices this today 8 months after the community healing session.

However, 44% of participants (4 out of 9 who comprised of 3 female and 1 male) held reservations regarding the relevance of the community healing content to the Solomon Islands context, emphasising the need for tailored materials that align with local nuances. Concerns were raised about the current organisational aspects of community healing sessions, pointing to issues such as poor coordination, limited training, inadequate awareness, and a lack of safeguarding measures, suggesting areas for improvement.

Notably, the engagement of youth in the community healing sessions was highlighted as a positive trend, attributed the intentional focus of change agents on all age groups unlike in the Western Province. This attribution was made by 9 out of 9 participants within the endline evaluation in Malaita who all stated they are happy to see change agents making youth focus a priority. Stakeholders and change agents acknowledged the impact of the program on ward facilitators, who reported experiencing key changes in their lives relationships, and families after participating in the training.

Despite these positive outcomes, 2 out of 9 participants who were facilitators and stakeholders expressed scepticism about the overall effectiveness of the Safe Families program, attributing it to a lack of awareness regarding the program's objectives and a belief that the community healing approach is inadequately managed. Examples of inadequate management of the program include 1) One participant who has a facilitation role experienced a real lack of support especially when it came to program delays in 2021, there was no contact of transparent communication as to what was happening during this time, and she attributed this to inadequate program management who have a responsibility to stay in communication. 2) One complaint came through from a participant stating that many of her friends had not been aware of this program even herself and that there is limited accountability and adequate management, all people of the community should have been aware. Of the 2 out of 9 who were identified both were female between the ages of 29-45. While stories of improved relationships and reduced domestic violence incidents emerged from Malaita Province, participants underscored the importance of proper implementation, coordination, and training for the community healing program to realise its full potential in fostering lasting behavioural change within Solomon Islands communities.



Two example stories of improved relationships and reduced domestic violence include “One participant noted during interviews that the dynamic between herself and her husband had changed especially when it came to money management, they would always argue when money had been spent, she said, now they sit together and communicate ways to save and budget, it’s been so helpful”. Another participant stated that she now uses confidentiality that she has learned in her counselling practice in the community, and she feels it is very helpful and she is providing a better service to those who have been victims of domestic violence. These findings provide valuable insights into the varied perceptions surrounding the Safe Families project in Malaita Province specifically the community healing component.

Please see the below graph that shares some of the comments and key themes connecting these comments discovered throughout the evaluation data collection through surveys and interviews for each of the 9 Malaita Provincial participants as well as comments they have made through their experiences and perspectives. These participants included 7 female and 2 male between the ages of 25-55.

KEY THEMES	PARTICIPANT COMMENTS	PROVINCE
<i>Improved Confidence and Communication skills</i>	<p>After book one and book 2 had noticed significant changes in her personal knowledge, attitude, and behaviours.</p> <p>Had comments made by her husband and close friends as to the way she was acting, her communication and interactions were different, she had more confidence because of what she was learning, and this resulted in positive changes.</p>	<i>Malaita Province</i>
<i>Changes in Attitude and Behaviour</i>	<p>Stated profound changes in the community healing group she was part of. Noted the behavioural change most noticeably in younger women who were part of the sessions rather than older women.</p> <p>Experience personal positive changes in her own life and marriage as has doubt with anger management all her life and understands the value of these sessions- as a result increased knowledge means increased confidence.</p>	<i>Malaita Province</i>
<i>Increased Program Awareness Needed</i>	<i>Stated that awareness</i> needs to be priority to ensure there are no gaps and that all those key stakeholders and frontline service providers are aware of community healing sessions, what they offer and where they are taking place.	<i>Malaita Province</i>
<i>More Capacity Development on Community Level</i>	Stated limited support and training, needs more coordination and improved governance structure in order to enhance impact of the Safe Families program.	<i>Malaita Province</i>
<i>More Capacity development on Community Level</i>	Would have liked to receive more training.	<i>Malaita Province</i>



<i>Safeguard training for change agents</i>	No training received on safeguarding or training for trainers, this was necessary and feel there was a general lack of support and resources available.	
<i>Changes in Attitude and Behaviour</i> <i>Enhanced Confidence through Education in CH Sessions</i>	Noticed strong changes in both herself as a youth rep and within some of the youth who were part of the session. Noticeable changes in her own confidence as well as the confidence of the majority of youths attending the community healing sessions such changes were visible and effective skills to continue using.	<i>Malaita Province</i>
<i>Program Awareness and Program Coordination Needing Improvement</i>	As a community leader in the space of GBV was not directly involved nor had she heard of community healing or Safe Families programs being implemented.	<i>Malaita Province</i>
<i>Consistency in delivery of CH Sessions</i>	Stated she wishes there were more training opportunities and that all the books continued. There was no transparency or awareness as to when the next book would come out leaving a lot of uncertainty and long wait times.	<i>Malaita Province</i>

Graph 1 Measuring Beliefs: There were a total of 9 participants in the Malaita Province endline evaluation, these participants including a combination of change agents who were both male and female for each community, ward facilitators and those who were engaged in the community healing sessions.

7 out of 9 stated community healing to be highly effective, 0 stated low effectiveness, and 2 stated somewhat effective. Effectiveness was explained in Pijin language by explaining the following and giving some real-life examples to support this explanation. Out of the 7 participants who stated the community healing component was highly effective they were comprised of 6 females between 29-45 and 1 male between 30-45, the 2 who stated somewhat effective included 1 female age 45 and 1 male age 44. No participants stated low effectiveness.

It is important however to mention that although these statements were given there are variables to consider that could have impacted those answers, such as confusion with regards to the question keeping in mind many of those interviewed have not received formal primary or secondary education and do not have the skills of reading and writing, other variables include small numbers of participants involved in the endline evaluation which leads to lack of valuable data as you would receive if numbers had of been much higher.

Highly effective- “You notice some very strong changes in influencing your own beliefs, attitudes and behaviour towards violence against women and girls after attending the community healing sessions and can easily identify these changes”.

Change example- “You have in-depth knowledge around the importance of confidentiality and can confidently share practical ways to use confidentiality to keep survivors safe, you have already put these new skills to practice”.

Somewhat Effective- “You notice that your knowledge toward the importance of confidentiality has increased, and you understand what can take place if confidentiality is not used.”

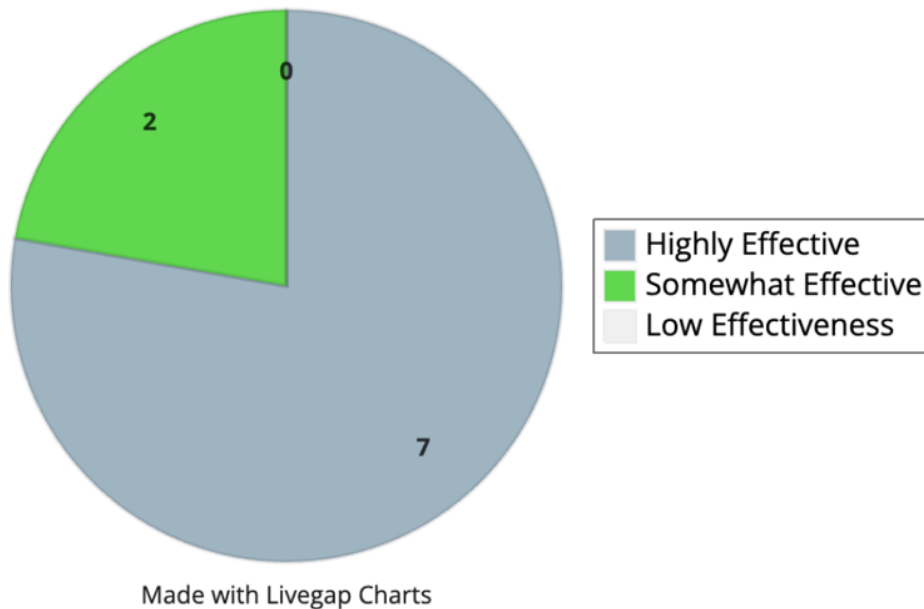
Change example- “You start to look at the importance of confidentiality and can link its importance with keeping survivors safe and can identify when confidentiality needs to be used’.

Low Effectiveness- ‘You do not feel that education is effective, or perhaps you feel that the way the community healing sessions are delivered need to be improved’.

Change example- ‘You have not noticed many if any changes in your own life, or within the community around you’.

Malaita Province Community Healing

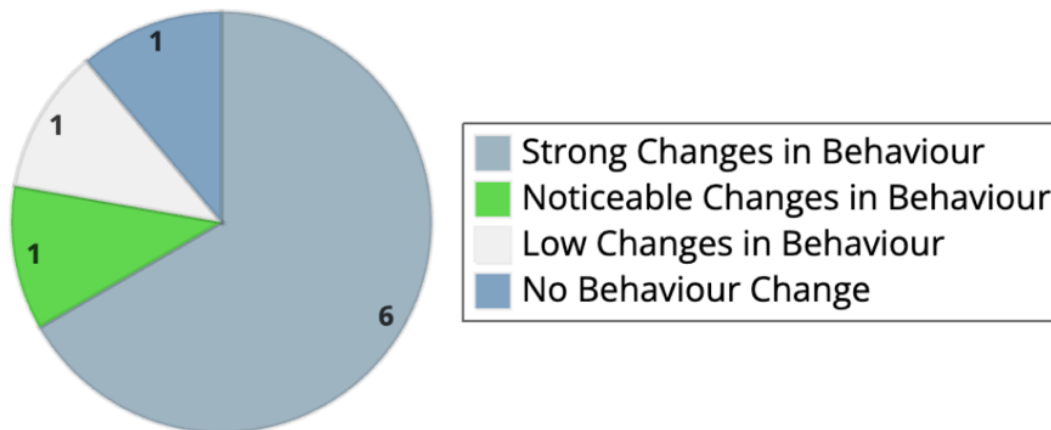
Measuring Belief



Graph 2 Measuring Perceived Behaviour Change: Out of 9 participants 6 experienced strong changes in behaviour, 1 experienced strong change, 1 noticeable change in behaviour, 1 low changes in behaviour and 1 people experienced no indication of behaviour change.

Malaita Province Community Healing

Measuring Perceived Behaviour Change



Highest Areas of Knowledge Growth: There were many positive aspects that come from the community healing sessions as discovered within surveys and interviews, however the top 5 that were most profound and acknowledged as the most important were Confidentiality (2), Anger Management (1), Emotional regulation (1), Self-healing (3) and communication(2).

Positive outcomes emerged from community healing sessions, as revealed in surveys and interviews. However these positive outcomes are outweighed by inconclusive findings and the desired need for more community healing sessions and training on the key topics before they could make a confident decision that their knowledge levels had increased. For example; with confidentiality 2 out of 9 participants indicated a change in knowledge, 1 reporting no change at all and 6 stating they need more sessions before they can tell whether their knowledge has increased after comparing to before the community healing sessions.

These sessions covered various topics, prompting an assessment of the most effective areas of learning. The graph analysis below shows results from participants who were questioned about their knowledge before and after community healing sessions. They were prompted to share examples for clarity, facilitating a comparison of knowledge levels before and after the sessions. For example, “Please tell me about your level of knowledge before you started community healing sessions, what did you know about confidentiality?” or Please tell me on a scale of 1-10 with 1 being no increase at all to 10 being extremely high increase your knowledge on the topic of ‘confidentiality’ before vs after community healing sessions.” One participant stated, “I have always been aware of the meaning of confidentiality, but the community healing sessions have helped me really understand its importance and how confidentiality can protect women and girls in my community, I am careful now with the information I share”.



The top five most popular topics within community healing sessions were identified through in-depth interviews with all the participants. A survey was then conducted to analyse the findings within these 5 topics to understand whether there have been increases in the topics of knowledge after community healing vs before community healing.

Topic 1: For Communication 2 out of 9 participants stated an increase in knowledge, 1 participant reporting no change, 5 stating more sessions are needed to determine any increase in knowledge.

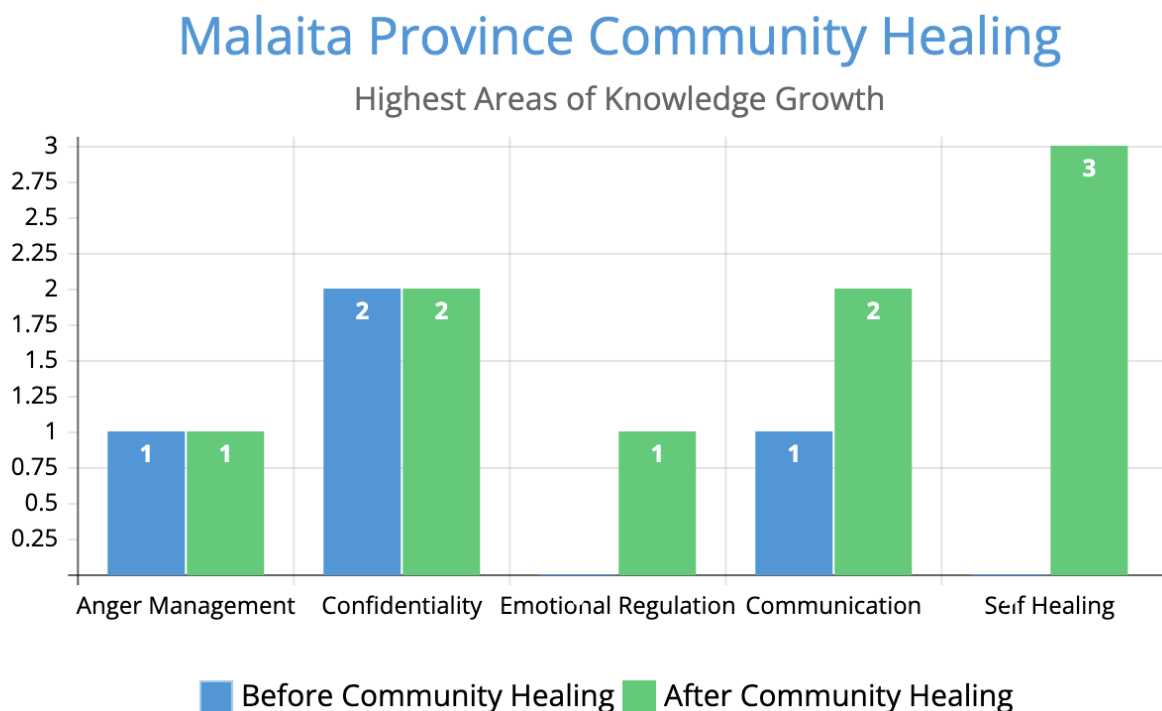
Topic 2: Confidentiality 2 out of 9 participants stated an increase, while 2 out of 9 reported no change, with 5 reporting more training needed before a judgement can be made.

Topic 3: Emotional 1 out of 9 participants stated an increase, with 0 participant stating no changes took place and 8 participants stating they need more training sessions before an answer can be give,

Topic 4: Anger management 1 out of 9 participants stated an increase, with 1 out of 9 participants stating no increases and knowledge remaining the same, with 7 participants stating they need additional sessions before judgements can be made.

Topic 5: Self-healing 3 out of 9 participants stated noticeable increases, while 0 reported no changes in their knowledge, with 6 requesting further community healing sessions before they can make a statement.

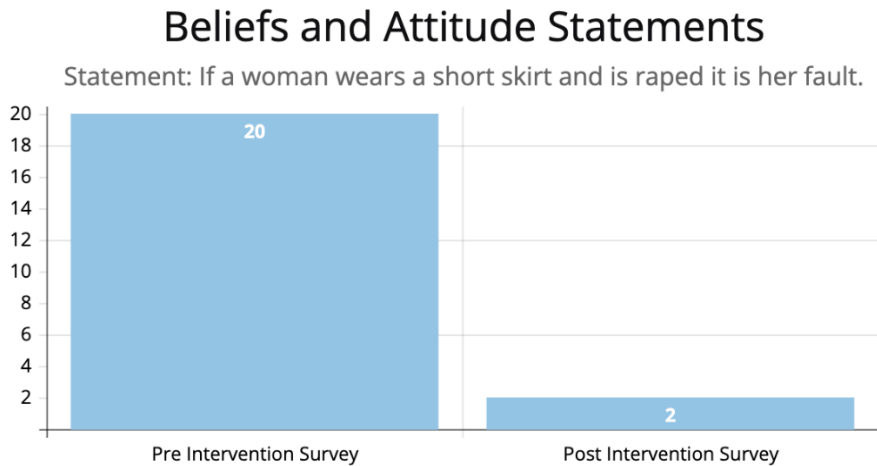
Graph 3: The following graph gives a visual of highest areas of knowledge growth



Pre and Post Intervention Survey: Understanding whether Safe Families has impacted and influenced the attitudes and beliefs of those involved is essential. As part of the evaluation pre and post surveys were carried out with the 9 participants. 20% of participants involved in community healing sessions stated they

believed before the community healing sessions that women who wore short skirts and are raped are at fault. Most notably post intervention only 2% of participants stated this to be true. This shift indicates a positive correlation between beliefs around causes of violence and the impact of the sessions. However, it is important to consider there are other potential variables that could have impacted these results.

Graph 4: The following graph gives a visual of the beliefs and attitude statements before vs after



The graph above shows another attitude statement survey statement question which was administered to participants with the intention of understanding their beliefs and attitudes both before and after the community healing sessions. 30% of participants interviewed stated women should not speak back to her husband therefore it is okay for him to punish her through physical violence. However interesting the survey showed that post community healing sessions their attitude and beliefs towards this statement changed and only 3% continued to believe this statement to be true. There is strong evidence that the community healing sessions and the content within the sessions have had strong impact on participants, but it is highly recommended to consider the many gaps and possible variables that could have interfered with these results.

CHOISEUL PROVINCE

Regrettably, despite earnest efforts, Choiseul Province was unable to participate in the endline evaluation for the Safe Families Phase II project due to geographical challenges out of our control and limited contact with key stakeholders on the ground. This limitation in data collection underscores the unique logistical difficulties posed by certain remote areas. Nevertheless, recognising the importance of obtaining a comprehensive understanding of the project's impact, it becomes imperative to draw parallels between communities in Choiseul and those in Western Province. By looking at the similarities between these regions, we can glean insights into the potential impact of the Safe Families program, allowing for a nuanced evaluation that transcends geographical constraints. This comparative approach ensures that Choiseul and any efforts and progress within the communities who engaged in Safe Families are recognised, ensuring that the insights derived from Malaita and Western provinces are contextualised within the broader regional context, even in the absence of direct Choiseul Province participation and data.

It is important to note that although we were unable to travel to Choiseul Province due to logistical limitations with flight delays, we were still able to gather information and were some key challenges and that have been faced in Choiseul Province during implementation these key challenges have come from a



combination of mid-term review report, speaking over the phone to one participant in Choiseul about their experiences and conducting a phone interview to gather information to use towards evaluation findings and speaking to one community member from Western Province who attended a community healing session in Choiseul. Choiseul was unable to complete book 1 due to several challenges these included.

- 1) Cultural Barriers where there was an expectation to be paid in order to confirm attendance- this was indicated over the phone interview with community participant and her experience.
- 2) Financial constraints with funding delays- as was experienced in other implementing Provinces.
- 3) Lack of trust with regards to very poor communication and management of the community healing implementation- stated by Western Province community member who attended the Choiseul Community healing session.
- 4) No real training on how to implement the community healing sessions- as stated by the participant who was actively involved in Choiseul Province.
- 5) Limited data and monitoring and evaluation support of the project especially the community healing component- as stated in the mid-term review.
- 6) Low efforts of awareness on community healing and what the program does- this was stated by the Choiseul participant over the phone during informal interview discussion.

BASELINE DATA AND COMPARISONS

Throughout the project, the Monitoring and Evaluation (M&E) officer at Oxfam undertook baseline data collection to gauge the impact and measure change. However, despite concerted efforts, the data exhibited notable inconsistencies, presenting a challenge to its reliability as a standalone source for understanding project impact. The data gaps were particularly evident in all areas except for attitude and belief scales, as well as in the results of simple surveys conducted. Compounding the issue, the communities targeted for data collection were not engaged at the project's outset, introducing ambiguity in the processes and potential variables influencing the outcomes. This was due to the fact that monitoring and evaluation within this project were very inconsistent as was the coordination of the Safe Families program and therefore engagement for baseline data collection was not completely accurate nor can conclusive findings be drawn. Moreover, the communities chosen for baseline data collection did not align with those included in the subsequent endline evaluation, further compromising the comprehensive nature of the assessment. Despite these challenges, it remains imperative to scrutinise the available data, recognising its limitations, and proceed with a meticulous analysis. This nuanced approach will contribute valuable insights to the overall understanding of the project's impact, even in the face of incomplete and inconsistent baseline data.

Graph Comparison: Presented below is a comparative analysis of participants from the Western Province who underwent surveys at the inception of Safe Families Phase II in 2020. Only 3 statements were identified and able to be used for this pre-post comparison. The initial surveys for Western province baseline encompassed 67 participants across various communities including Hambere community. Despite the smaller sample size during the endline evaluation in Western province of 21 participants efforts have still be made to make a comparison, there is one community which is included in this comparison for both baseline data (pre) and endline evaluation data (post) which is Hambere community. Encouragingly, some positive changes were observed, particularly in a decline in the number of individuals endorsing the statement "it is embarrassing for men if a wife earns more money than he does." However, it is crucial to acknowledge that this comparative analysis alone is not sufficient to conclusively validate these results, emphasising the need for improved monitoring and evaluation that ensures data collection including surveys and statements as a priority.



It is essential to note that this comparison was made from survey statements found in the baseline report for the Safe Families Phase II program, the full survey results were not located so a full analysis and before after comparison of all 15 statements within the survey was not achieved. Only 3 statements were able to be directly compared for Western province and one statement for Malaita province which was “if women and girls wear short skirts and are raped it is their fault”. However we also completed a pre post analysis using questionnaires and surveys on all 15 questions with all 30 participants from Malaita (9) and Western Province (21) by using promoting questions to ask those participants to compare their attitude and belief statement now vs what they would have been before the community healing session. For example “What would you have answered with the following statement before the community healing sessions compared to your knowledge now, can you please take yourself back in time and elaborate more on what your knowledge was then toward “women and girls getting raped for wearing short skirts vs your views on this today”? Although this survey was conducted with 15 statements and the intention of understanding before and after attitudes and behaviours, measuring a before after without baseline data cannot present accurate or confident findings but rather useful information that can be used to contribute to qualitative analysis.

Please see the table below that shows the three statement comparisons from baseline data that was able to be located in the above mentioned report.

Table 1: the following table shows a comparison of three statement questions from the attitude belief scale pre intervention vs post intervention.

Before: Women and men should have equal rights	Total baseline participant pre intervention in Western Province= 67 45% agree Vs 49% disagree	After: Women and men should have equal rights	Total baseline participants post intervention in Western Province=21 22% agree while 78% disagree
Before: It is embarrassing for men if a wife earns more money than he does	Total baseline participant pre intervention in Western Province= 67 46% agree Vs 48% disagree	After: It is embarrassing for men if a wife earns more money than he does	Total baseline participants post intervention in Western Province=21 32% agree while 68% disagree
Before: A woman should always obey her husband	Total baseline participant pre intervention in Western Province= 67 66% agree Vs 20% disagree	After: A woman should always obey her husband	Total baseline participant post intervention in Western Province= 21 34% agree Vs 66% disagree

Image One: Below you will see that of the 67 individuals in Western Province pre intervention 46% disagreed with the statement “it is embarrassing for men if a wife earns more money”, while 48% agreed,

Out of 21 participants from Western Province from endline data collection 32% agreed with the statement and 68% disagreed.

Knowledge and Attitude Statements

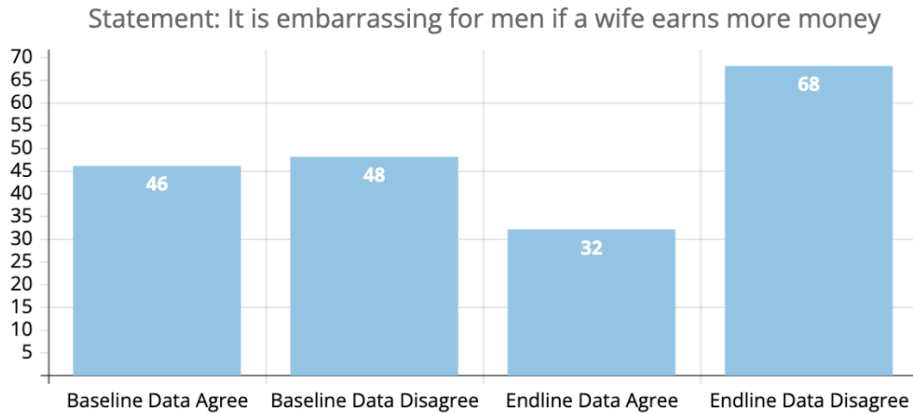
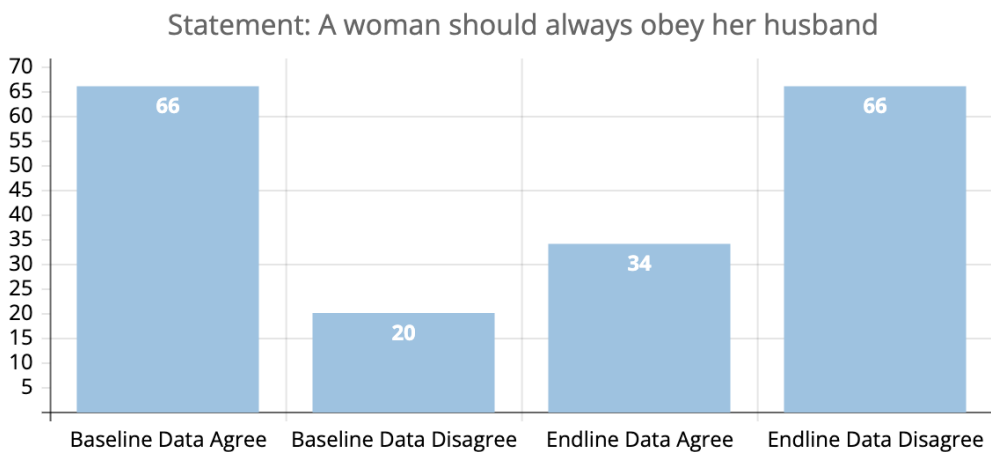


Image Two: Below you will see that of the 67 individuals in Western Province pre intervention data 66% agreed with the statement “a woman should always obey her husband”, while 20% disagreed, Out of 21 participants from Western Province from endline data collection 66% agreed with the statement and 34% disagreed. This shows a strong difference in the beliefs towards power relations and equality within a relationship which were identified as key teachings within the community healing sessions.

Knowledge and Attitude Statements



The primary aim of this assessment was to thoroughly scrutinise the accomplishments, obstacles, and impact of the Safe Families Phase II project, specifically in transforming the knowledge, attitudes, and behaviours within the designated population regarding family and gender-based violence. A central focus was placed on evaluating the capabilities of partner organisations and groups associated with Safe Families, emphasising their enhanced capacities in promoting gender equality and effectively preventing



gender-based violence (GBV). It was crucial to understand the project's influence on fostering positive shifts in societal norms related to family and gender-based violence.

In the Solomon Islands, addressing changes in knowledge, attitudes, and behaviours holds paramount importance due to the deeply ingrained societal norms that historically normalised and accepted violence against women. Meaningful transformation requires a holistic and intricately designed approach, considering the cultural and contextual factors deeply embedded in the society. A nuanced understanding of local customs, traditions, and power dynamics is essential, as they shape individuals' perspectives on gender roles and relationships.

In cultures where violence against women has been normalised, a comprehensive strategy becomes imperative to challenge ingrained beliefs, raise awareness, and cultivate new attitudes. An intervention must navigate these cultural intricacies, providing not only awareness but also viable alternatives aligned with the community's values. This approach ensures the sustainability and effectiveness of behavioural change initiatives, fostering a shift towards a society where violence against women is not only condemned but actively replaced with values of equality, respect, and dignity. Such an approach is how this endline evaluation has been navigated. The findings shown above showcase a strong emphasis on the interest and belief in the holistic approach that compliments customary beliefs, views, values, and current cultural systems. There is also an indication that there have been some shifts in knowledge, attitudes, and behaviour as a result of the Safe Families Phase II program with specific focus on the community healing component, such positive correlations must be acknowledged but not relied on when understanding impact.



III. CONCLUSIONS

In conclusion, the Safe Families Phase II project in the Solomon Islands has demonstrated commendable achievements in addressing gender-based violence (GBV), focusing on effectiveness, efficiency, sustainability, accountability, and partner capacity development. The project's multi-pronged approach, strategic partnerships, and commitment to gender equality have positively influenced its objectives. Despite successful outcomes, challenges in coordination and safeguarding mechanisms were identified, indicating areas for improvement.

Efficiency was positively impacted by the project's partnership approach, governance principles, and commitment to gender equality, ensuring contextual relevance, adaptability, and policy influence. Despite challenges in coordination efficiency, the project's achievements in policy influence, community empowerment, and challenging gender norms contribute to the long-term sustainability of its impact.

The sustainability assessment highlights significant strides in transforming attitudes toward gender-power relations, emphasizing behavioural changes, and acknowledging challenges in a patriarchal society. The program has opportunities for further transformation, including enhancing community-led initiatives and reinforcing linkages between gender, education, and economic empowerment.

The accountability and oversight systems established by the project were strong with very clear gaps and room for improvement, emphasising community empowerment, institutional capacity building, and coordination with SAFENET. However, significant gaps were identified in safeguarding mechanisms, particularly in training and safeguarding for those directly involved in community healing implementation.

The project's success in blending activities with other GBV initiatives demonstrates a comprehensive strategy for sustained impacts. On the policy/institutional level in particular via Solomon Island National Council of Women (SINCW) and engagement with Women's Development Desks (WDDs) and Provincial Council of Women (PCWs) the project was both effective and relevant, however it is crucial to mention that regardless of this relevance and effectiveness coordination between the various stakeholders and strengthened partnerships is an area where improvement is needed. On the community level there were challenges experienced however these challenges were not a result of the ward facilitators or the change agents who effectively engaged and implemented community healing sessions, but instead the coordination, capacity development and program management on the institutional level that had a ripple down effect to the community level as a result impacting implementation. For example, lack of capacity strengthening for community healing session Change Agents and Ward facilitators, limited coordination and communication from key stakeholders responsible for overseeing community level progress with community healing sessions, limited support and resources for community implementors, where resources are allocated no training support especially with financial management and accountability.

Recommendations include continued collaboration, long-term monitoring, community-led initiatives, capacity building, and advocacy for policy continuity. The Safe Families Phase II intervention in the Solomon Islands has shown strong relevance intended to effectively address the articulated needs and priorities of beneficiaries, particularly women stakeholders at provincial and ward levels, however it is essential to highlight that not all needs have been addressed and major gaps still exist especially with capacity development in area of partnerships, relationship building and coordination between stakeholders responsible for adhering to policies that protect women and girls against violence.

The project's emphasis on capacity strengthening, institutional development, and collaborative initiatives has yielded substantial positive outcomes, exceeding expectations. Furthermore, the robust alignment



with and adaptation to changing government policies for gender equality and women's empowerment, especially through empowering Women's Development Divisions (WDDs), underscores the project's strategic foresight and commitment to sustainable impact in the Solomon Islands.

The intervention has shown commendable achievements in meeting expected outcomes, particularly in empowering women stakeholders, enhancing collaboration, and fostering community engagement. Despite some inconsistencies and identified gaps, the project's strategic focus on capacity building, collaboration, and community empowerment has laid a sustainable foundation for transformative change in addressing family violence. Factors influencing progress included positive aspects like capacity strengthening and community engagement, as well as challenges such as financial constraints and global dynamics like the COVID-19 pandemic. The project's ability to adapt and navigate these factors highlights its resilience and impact on addressing family violence in the region.

Partner capacity development was a priority for the project, contributing to sustainability. Funding models, initially secured from the Australian Government, evolved to address changing circumstances. Ongoing reviews and strategic planning are recommended to ensure the continued relevance and appropriateness of funding models in the evolving landscape of GBV prevention.

Moreover, the Safe Families endline evaluation in Western Province engaged 21 participants, comprising facilitators, change agents, and participants involved in the Community Healing Sessions. Notably, 19 out of these 21 participants expressed a robust belief in the high effectiveness of the community healing sessions and the holistic approach employed by the program. This endorsement underlines the positive impact witnessed by those actively engaged in the sessions, attesting to the success of the Safe Families initiative in fostering behavioural change within the community. However, it is crucial to acknowledge that 2 participants exhibited scepticism, emphasizing the importance of ongoing evaluation and adaptability in program implementation. Among the 21 participants, 15 were actively involved in various capacities, serving as facilitators, change agents, or participants, highlighting the depth of community engagement and participation in the transformative sessions. A total of 30 participants took part in the endline evaluation surveys and questionnaires from Western and Malaita Provinces.

In summary, the Safe Families Phase II project, through its comprehensive and adaptive approach, has achieved commendable success in addressing GBV in the Solomon Islands despite significant setbacks, delays, limitations and challenges. Identified areas for improvement include coordination, safeguarding, and ongoing relevance of funding models. The project's emphasis on community engagement, capacity building, and adaptive strategies provides valuable insights for future interventions in the fight against gender-based violence.

IV. RECOMMENDATIONS

The following recommendations for Safe Families (SF) are laid out based on two key areas of importance which include Operational and Strategic recommendations. The recommendations have been selected based on in-depth analysis of qualitative findings that are inclusive of interviews, surveys, open discussion and storytelling on the institutional and community level. Although quantitative data was limited throughout this project, what was available was also analysed to support these key recommendations through a thorough methodological process. These recommendations are intended to guide and support future projects and interventions within the Solomon Islands and the greater Pacific region.

While the program made noteworthy contributions to governance structures and policy implementation, the lessons learned emphasise the importance of robust coordination strategies. Future interventions should prioritise upfront planning for coordination mechanisms that foster strong relationships, seamless management, and effective communication. The experience of Safe Families Phase II project underscores the need for ongoing capacity building and training in coordination and relationship management. Strengthening the collaboration between government bodies, implementing partners, and community stakeholders is essential for maximising the efficiency and impact of future programs.

Future interventions should incorporate long-term strategies that empower women economically, socially, and politically. Fostering community-led initiatives and engaging men as allies in challenging patriarchal norms are crucial components of a sustainable transformation agenda. The successes and challenges encountered by the Safe Families Phase II offer valuable lessons for future interventions. Sustaining the transformation of gender-power relations requires a comprehensive approach that considers the intersectionality of power structures and addresses underlying systemic issues.

OPERATIONAL

RECOMMENDATION 1 – MONITORING AND EVALUATION CAPACITY DEVELOPMENT

Recommendation one underscores the imperative need for enhanced monitoring, evaluation, and capacity development within the Safe Families Program and future interventions.. Throughout the program's duration, there was a notable deficiency in data collection and monitoring activities, compounded by challenges such as the disruptions caused by the COVID-19 pandemic. Despite the acknowledged external impediments, the deficiency in monitoring has significantly hampered the program's overall potential. The extensive geographical scope, encompassing three provinces and multiple communities, demands robust monitoring and evaluation mechanisms to ensure the effective progression of the program. A lack of comprehensive monitoring not only impedes the ability to track progress but also hinders the timely identification of challenges, limiting the program's capacity to implement corrective measures. The recommendation emphasises the critical nature of monitoring and evaluation on both institutional and community levels, recognizing their paramount importance for the success of future programs in the Solomon Islands and the Pacific.



RECOMMENDATION 2 – ADVANCED AND ADAPTIVE STRATEGIES FOR CONTINUED IMPLEMENTATION DURING GLOBAL AND CONTEXTUAL EVENTS

Recommendation 2 addresses a crucial need for the development of advanced and adaptive strategies to ensure the continued implementation of programs, particularly in the face of global and contextual events. Throughout the implementation period from 2019 to 2023, the Safe Families Program encountered significant disruptions, most notably due to the unforeseen impact of the COVID-19 pandemic. These disruptions, coupled with contextual challenges such as civil unrest, underscore the importance of robust operational planning. During the project's course, it became evident that there were no effective strategies in place, especially at the community level, to navigate and mitigate the implications of global events like the pandemic and contextual issues such as civil unrest. This lack of preparedness resulted in delays and challenges in the progress of community healing implementation. Moving forward, it is imperative to develop and integrate advanced and adaptive strategies that account for potential disruptions caused by unforeseen events. This includes institutional-level planning and community-level readiness to ensure program impact and effectiveness even during unpredictable circumstances in the Solomon Islands.

RECOMMENDATION 3 – MULTI-CULTURAL CONSIDERATIONS TO BE PRIORITISED ESPECIALLY IN IMPLEMENTING COUNTRIES WITH SUCH DIVERSE CULTURAL EXPECTATIONS AND NEEDS

Recommendation 3 highlights the necessity to incorporate cultural factors, such as customary payments, into future budgeting for activities like data collection through evaluations and community healing sessions attendance. The Solomon Islands, characterised by its rich cultural diversity with predominantly Melanesian and also Polynesian peoples speaking over 600 languages, presents a unique context for program implementation. For instance, in Choiseul Province, it is culturally expected to provide payments to individuals attending workshops or training sessions, ensuring active participation. However, these expectations vary across different provinces and communities. In Western Province, payment requests may vary or not be expected at all, with some communities valuing food or catering over monetary compensation. During the evaluation, it became evident that budgeting did not adequately account for these diverse cultural practices, resulting in challenges related to participant attendance, especially concerning fuel or travel expenses. Furthermore, stakeholder feedback throughout the evaluation has suggested that contextualising the community healing content would have been helpful, for example, the content in the community healing books was taken from Papua New Guinea (PNG) Safe Families (SF) program and their community healing sessions, although many cultural similarities exist there are many differences and therefore it is essential to contextualise even in a trial intervention. To enhance future programming, it is imperative to conduct a more in-depth community consultation to ensure meaningful interactions take place that delve into the intricacies of cultural expectations at the community level. This nuanced understanding should inform budgeting processes, ensuring that funding aligns with the contextual and cultural dynamics of the Solomon Islands on a localized level, fostering more effective and culturally sensitive program implementation.

STRATEGIC



RECOMMENDATION 4 - CAPACITY BUILDING TO STRENGTHEN COORDINATION AND PARTNERSHIPS ON THE INSTITUTIONAL LEVEL

Gaps were identified in the coordination and effective partnership between the Provincial Council of Women (PCW) and the Solomon Island National Council of Women (SINCW) this relationship between the two key stakeholders had been strained due to previous program disagreements where the relationship was negatively impacted and trust lacking due to financial management disagreements. These relationship issues have been found to continue through into Safe Families Program. Furthermore, these gaps impact community level implementation as sufficient support is not given when partnerships are not operating effectively on the governance level. Recommendation one highlights the critical necessity for capacity building to fortify continuity and sustainability within the Safe Families program and future interventions. Specifically, there is a vital need for capacity development at both the institutional and community levels. On the institutional front, strengthening capacities is essential to foster robust partnerships and coordination among key stakeholders responsible for the implementation of national government policies, particularly those addressing Ending Violence Against Women and Girls (EVAWG). Such capacity building ensures a more streamlined and effective execution of these policies. Although efforts were made with capacity development and partnership building, gaps that were identified such as the above mentioned continue to remain and this calls for a new approach more specifically focused on coordination and relationship building between key partners. A remediation between the two partners would be effective in combination with a workshop for all key stakeholders dedicated to relationship and communication building.

RECOMMENDATION 5 – CAPACITY BUILDING TO STRENGTHEN CONTINUITY AND SUSTAINABILITY ON THE COMMUNITY LEVEL

Recommendation two highlights essential capacity development needed on the community level, emphasis is placed on enhancing the capacities of key individuals, such as ward facilitators and change agents. Evidence was found that no capacity development in the program design was intended on the community level to the standard of which was necessary. For example, a 2-day training on the community healing session books was given at the very start of the program to the ward facilitator and change agents, but no sufficient capacity development in crucial areas such a safeguarding was given. The focus here is on targeted training programs covering areas like training for trainers, safeguarding, coordination, and management. It is also essential to ensure such capacity development focuses on empowering communities to take the lead in sustaining social norm change. Supporting community-led initiatives ensures that the transformation is ingrained in local contexts and driven by the people themselves. A key finding in this evaluation was no safeguard training for the direct community implementers; such training is essential when delivering possibly triggering topics within program implementation such as the community healing that could impact those who are taking the sessions such as survivors or even perpetrators which is why safeguarding is a key priority as mentioned above. This strategic capacity development approach aims to empower community-level implementers with the skills necessary for efficient and effective delivery of community healing sessions, contributing to the overall success and sustainability of the program.



RECOMMENDATION 6 – PROGRAM ADVOCACY AND AWARENESS

Recommendation 3 underscores the crucial need for improvement in the awareness and advocacy efforts for future Safe Families programs, both on the community and institutional levels. The evaluation findings illuminated a significant gap in community-level awareness regarding community healing sessions, with limited understanding of the sessions' purpose, schedules, and responsible individuals. While awareness efforts were concentrated within church groups, the broader community lacked targeted campaigns led by change agents and implementers. This absence of awareness hindered the effective reach of training sessions. Moreover, on the institutional level, key stakeholders, particularly front-line service providers like community police and support counsellors, exhibited a lack of awareness regarding Safe Families and its initiatives, including the community healing programs. Improving advocacy and awareness is pivotal not only for expanding the reach of the program within communities but also for engaging stakeholders. This becomes especially crucial in the case of potential referrals, ensuring that service providers are acquainted with the program, its objectives, and the roles of change agents and ward facilitators. Enhancing awareness at both levels will not only foster community engagement but also strengthen partnerships and understanding among key stakeholders, contributing to the overall success and sustainability of the Safe Families program.



ANNEX I: TERMS OF REFERENCE

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OXFAM IN THE PACIFIC

SAFE FAMILIES ENDLINE EVALUATION TERMS OF REFERENCE (TOR)

Objective	To contract services for a consultant to conduct an Evaluation of Safe Families Project
Location	Solomon Islands Home Based (with travel in the Islands)
Duration	35 working days
Contract Supervision	Program Manager – Safe Families Project

I. BACKGROUND

The Oxfam ‘Let’s Make Our Families Safe’ (Safe Families) program is part of a ten-year strategic initiative, supported by the Australian Government under Pacific Women Shaping Pacific Development (Pacific Women), to prevent and respond to family and sexual violence in Solomon Islands. Safe Families is a multi-layered approach to violence prevention that aims to influence the social and cultural norms, values, attitudes and beliefs that support family and sexual violence, as well as enabling and resourcing collective action. The goal of Safe Families is that family violence will no longer be considered acceptable in Solomon Islands.

Oxfam, through the Safe Families Program, is committed to support communities, National Council of Women (NCW), Provincial Council of Women (PCW) and the intentions of the Solomon Islands Government (SIG) to implement its Eliminating Violence against Women (EVAW) and Girls Policy through a rights-based approach. The program applies a transformational ‘integrated’ human rights-based approach, which is based on the principle that social transformation is possible by addressing the root causes of gender-based violence (GBV) through working in partnership with others, so that solutions are contextually appropriate and led by communities and local partners.

The project was implemented over a four (4) year period starting from January 2019 to December 2022 with a 12-month extension till December 2023.

This project and its Theory of Change (ToC) is premised on four interconnected pathways of change that reflect the different drivers contributing to GBV and Violence Against Women (VAW) at various levels and how these mutually reinforcing drivers underlie the social and structural barriers to gender inequality. The four pathways aim to;

Influence: Target communities and key provincial stakeholders to provide sustained, coordinated action to prevent family violence and respond to the needs of survivors,



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Empower: Provincial Alliance and Women Rights Organisations become an effective platform for holding Provincial Government and service providers accountable through active engagement between civil society and government institutions and ensure women and girls have a life free from violence.

Respond: Survivors have more and better-quality support within communities and from service providers

Prevent: Women including young women are safer and increasingly empowered in their homes and communities

Building on achievements and lessons learnt, the project is solely led and managed by Oxfam in Pacific in Solomon Islands in partnership with Solomon Islands National Council of Women (SINCW) and Provincial Councils of Women (PCWs) in Choiseul, Western and Malaita provinces. Key stakeholders to this project were MWYCFA (Ministry of Women Youth Children and Family Affairs) and provincial governments of Choiseul, Western and Malaita provinces.

The focus is on prevention of VAW at the community level as well as sustainability through strategically working in the aforementioned provinces, partners and stakeholder. The project worked with MWYCFA and SINCW at the national level to advocate for national collaboration on EAW initiatives.

Additionally, the project worked closely with the Women's Development Division (WDD) Desk Office, including MWYCFA and PCWs at the provincial level to build their capacity in preventing violence at the community level and holding the GBV service providers accountable.

The top down, bottom-up approach taken by this program enabled ownership by PCWs and that WDDs ensuring they are increasingly more capable to lead and implement the Solomon Islands Government's EAW policies. The focus is to firmly ground violence prevention and response foundations into all levels of government and community structures. This will ensure effective and sustained coordination past the program end date.

II. PURPOSE AND OBJECTIVES OF THE EVALUATION

The purpose of this evaluation is to understand the project's success, challenges and impact toward transforming knowledge, attitudes and behaviours of the target population with respect to family and gender-based violence and assess improved capacities of Safe Families partner organizations/groups to advance gender equality and prevent GBV.

The evaluation will include an assessment of the project Theory of Change (TOC) pillars at the national, provincial and community level. Oxfam aims to identify lessons learned, good practices and examples, and innovations of efforts that support the partners' empowerment and prevention of violence against women and girls. Evaluation will investigate the key outcomes that Oxfam and partners have contributed to in changing negative attitudes, norms and behaviours to end VAWG/GBV and what has been Oxfam's added value in Solomon Islands through this work.



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This in turn ensures that future GBV/VAW prevention programming, in particular, proposed models in partnership mobilization interventions to address VAWG in the Solomon Islands, is not only fit for purpose, but also better focused, targeted and more responsive to partners’ ‘needs’, as well as donors.

As this is an end of project evaluation, it must assess the **impact, relevance, effectiveness, and sustainability**, with particular attention to the sustainability of the project’s impact. In addition to focusing on network building and capacity building initiatives with government partners, the consultant is encouraged to evidence attitude change at community level, particularly focusing on impact of Oxfam’s resource “community healing and rebuilding program¹”.

The evaluation will use a feminist or sexual orientation, gender identity and expression, and sex characteristics (SOGIESC) lens, putting a focus on strategic lessons for future interventions and developing evidence of what worked and what did not work and why. It is expected that the consultant will design inquiry to also intentionally capture some of the resistance, backlash and negative outcomes that are commonly experienced in gender equality work - and when relationships of power are challenged.

Oxfam would expect that this evaluation also investigates four common cross-cutting issues:

- inclusion (gender, disability and other social disadvantage including those related to age and ethnic minority)
- accountability to affected populations
- localisation, and
- Partnership

The Evaluation should include an assessment of the following:

Criteria	Key Evaluation Question
Relevance	To what extent was the intervention relevant to the needs and priorities as defined by beneficiaries? To what extent did the intervention align with and adapt to changing government policies for gender equality and women’s empowerment? What is the value of this alignment for the sustainability of the project results?
Effectiveness	How does the partnership approach, governance and gender equality principles affect implementation?

¹ [1] The Community Healing and Rebuilding Program is a three-year violence prevention program. It draws on the combined strengths of group therapy, community healing, and community development approaches, with the aim of addressing the risk factors of violence and strengthening the protective factors against it



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	To what extent does the coordination of the intervention support efficacy for programme implementation?
Effectiveness	To what extent were the expected outcomes achieved and how did Oxfam Safe Families project contribute towards these? What are the major factors that influenced progress in achievement or non-achievement of the outcomes/objectives of the project?
Sustainability	Assess the sustainability of the intervention in achieving transformation of attitudes, values and beliefs related to gender-power relations in support of addressing violence against women and girls in the Solomon Islands; How will the benefits of the interventions be secured for rights holders (i.e. what accountability and oversight systems were established)? To what extent did the project successfully blend Safe Families activities with other efforts to address GBV to sustain impacts in the longer term? What recommendations are necessary to strengthen social norm change in the future? To what extent was partner capacity developed in order to ensure sustainability of efforts and benefits? How has funding been secured to ensure partner programme implementation of the programme and do these funding models remain relevant and appropriate going forward?

Lastly, in the context of shrinking civil society space and reduced funding opportunities available for gender work at national level, Oxfam in Pacific is exploring innovative programming models that can continue to strengthen our local partners. One such idea is to build a regional programming model built around influencing diverse range of actors on transformative norms change work. Any recommendations around transitioning Safe Families programming model to a regional focus would be very valuable.

III. SCOPE OF WORK

Within a maximum of 35 billable days working period, under the overall supervision of Oxfam's Safe Families project manager and direct support from the Safe Families M&E Officer; the consultant will complete and submit a Workplan, conduct data collection, data analysis, first draft and the final evaluation report of the Safe Families program. The evaluation must fit within Oxfam evaluation framework and policy.

The key audience for this evaluation includes Oxfam in Solomon Islands Office, Department of Foreign Affairs and Trade (back donor) and Safe Families project partners.



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IV. Methodology

The evaluation team will develop a comprehensive and rigorous evaluation methodology. The methodology for the evaluation will be designed in detail by the evaluation team of selected company during the inception phase. However, each bidding consulting company should indicate the methodology it employs for answering the evaluation criteria and questions in its technical proposal as this will be one of the main criteria for selection of the consulting company for this evaluation.

Data collection will be required in Honiara, Malaita, Western and Choiseul provinces.

The methodology will be documented in an Evaluation Plan that includes the relevant data collection and analysis tools. The evaluation methodology will address the requirements of DFAT's Monitoring and Evaluation Standards. The evaluation approach should take full account of the program's focus on inclusivity and do no harm activities.

The approach to data collection will involve several different methods to triangulate data. It should also use tested frameworks and data collection tools. While the consulting company will design the data collection methodology, it should involve:

- Desk Review and Context Analysis
- Quantitative data collection
- Qualitative primary data collection

The evaluation will be designed and conducted with regards to high standards of ethical conduct. The approach to ethics and safeguarding will be documented in the Evaluation Plan (see the Australasian Evaluation Code of Ethics and Guidelines for the Ethical Conduct of Evaluations).

Key steps in the evaluation will likely include:

1. Developing a detailed evaluation plan, including methodologies, evaluation question matrix, data collection tools, interview guides, a framework for data analysis, and timeline. The evaluation team should ensure that the perspectives of the affected peoples are central to the evaluation plan. The evaluation plan will be updated and finalised based on feedback from Oxfam.
2. Developing a rubric with input from key stakeholders identifying clear standards for each of the evaluation questions to enable the evaluation team to make a transparent judgement about the project.
3. A desk review of background document and development of data collection tools.
4. Collect data through key informant interviews, focus groups, surveys, direct observation and/or other appropriate data collection techniques. Ensure all sectors of the community are reached, including people with disabilities.
5. Analyse and triangulate data against the evaluation questions and rubric, reinforcing with rich storytelling from qualitative data collection.
6. Present preliminary findings for sense checking Oxfam partners and stakeholders.
7. Write an evaluation report.
8. Communicate key findings through a verbal report to Oxfam in the Solomon Islands.

ANNEX II: EVALUATION MATRIX

Criteria	Evaluation Questions	Indicator	Data Source	Data Collection Methods	Sampling	Data Analysis/ Risks
Relevance	To what extent was the intervention relevant to the needs and priorities as defined by beneficiaries?	Beneficiary needs and priorities are in alignment with project-measured through project impact and SF outcomes met	Project documentation (proposals, project plans, and reports)	Project Documentation review, beneficiary surveys, key informant interviews, focus group discussions	Non-Probability Sampling	Quantitative and Qualitative Analysis Data validity, selection Bias, Time and resource constraints
Relevance	To what extent did the intervention align with and adapt to changing government policies for gender equality and women's empowerment?	Alignment with government policies visible and measurable	Project documentation (project proposals, reports, strategic plans), FPA and GEWD policy documents	Document reviews, interviews with government officials National and Provincial level, surveys.	Non-Probability Sampling	Qualitative Analysis Limited Government engagement, temporal bias, bias reporting
Relevance	What is the value of this alignment for the sustainability of the project results?	Sustainability impact of alignment-identified opportunity for scale up detected	Project outcome and impact reports, mid term reviews, budget reports, progress reports	Project Documentation review, Key informant interviews, focus groups	Non-Probability Sampling	Qualitative Analysis
Efficiency	How does the partnership approach, governance and gender equality principles affect implementation?	Positive Implementation impact of partnership,	Project documentation (partnership agreements,	Project Documentation review, Key informant	Non-Probability Sampling	Qualitative Analysis

		governance, and gender equality principles measurable	governance frameworks, gender equality policies), Stakeholder interviews	interviews, focus groups, observations		Social desirability bias, limited document availability, observer bias
Efficiency	To what extent does the coordination of the intervention support efficiency for programme implementation?	Coordination impact on program efficiency visible	Project implementation plans, monitoring and evaluation reports, project activity records/ timelines	Project Documentation review, Key informant interviews, target community interviews, focus groups	Non-Probability Sampling	Quantitative and Qualitative Analysis Incomplete monitoring data, over emphasis on efficiency
Effectiveness	To what extent were the expected outcomes achieved and how did Oxfam Safe Families project contribute towards these?	Achievement of expected outcomes and measurable impact of Oxfam's contribution	Project outcome and work plan documents, progress reports	Project Documentation review, Key informant interviews, target community interviews	Non-Probability Sampling	Quantitative and Qualitative Analysis Limited attribution, over emphasis on positive outcomes
Effectiveness	What are the major factors that influenced progress in achievement or non-achievement of the outcomes/ objectives of the project?	Major factors influencing outcome achievement identified and measured	Monitoring and evaluation data, project documentation (risk assessments, work plans, progress reports)	Stakeholder interviews (stakeholders, beneficiaries, partners), External reviews and evaluation, surveys, focus groups, key informant interviews	Non-Probability Sampling	Quantitative and Qualitative Analysis External evaluation bias, incomplete monitoring data, social desirability bias
Sustainability	Assess the sustainability of the intervention in achieving transformation of attitudes, values and beliefs related to gender-power relations in support of addressing violence against women and girls in the Solomon Islands; How will the	Visible transformation of attitudes, values and beliefs	Past survey and focus group discussions, progress reports, baseline data, other relevant project documents (workplan,	Surveys and focus group discussions, in-depth questionnaires and interviews, key informant interviews, stakeholder	Non-Probability Sampling	Qualitative Analysis Long term sustainability assessment, subjectivity in attitude assessment, limi

	benefits of the interventions be secured for rights holders (i.e. what accountability and oversight systems were established)?		external reports, internal reports)	interviews, observation		ted document/data availability
Sustainability	To what extent did the project successfully blend Safe Families activities with other efforts to address GBV to sustain impacts in the longer term? What recommendations are necessary to strengthen social norm change in the future?	Integration of Safe Families Activities with Other GBV Efforts	Project documentation (progress and midterm review reports, project plans, integration strategies) partner reports, externals assessment and reviews	Stakeholder interviews (stakeholders, beneficiaries, partners), External reviews and evaluation, surveys, focus groups, key informant interview	Non-Probability Sampling	Qualitative Analysis External assessment reliability, perception vs impact
Sustainability	To what extent was partner capacity developed in order to ensure sustainability of efforts and benefits?	Visible partner capacity developed for sustainability	Partner capacity assessment tools, project documentation review, progress reports	stakeholder interviews (partner organisations, stakeholder staff), questionnaires, surveys, interviews	Non-Probability Sampling	Quantitative and Qualitative Analysis Over emphasis on outputs, long term impact assessment
Sustainability	How has funding been secured to ensure partner programme implementation of the programme and do these funding models remain relevant and appropriate going forward?	Funding Acquisition and Relevance of Funding Models clear	Funding records and financial reports, implementation reports, progress reports, baseline data	Stakeholder interviews (donors, project managers), interviews, surveys, data analysis	Non-Probability Sampling	Quantitative Analysis Limited financial transparency, Changing financial landscape
Future Scale/ Innovation	Has this project shown key findings that indicate feasibility to transition Safe Families programming model to a regional focus model built around influencing a diverse range of actors on transformative norms change work?	Identified need for transition to a regional focus model	Project outcome and impact reports, progress and mid term reviews, external partner reports, regional comparison documentation	Comparative analysis with regional data and models, focus groups, external evaluation and reviews	Non-Probability Sampling	Quantitative And Qualitative Analysis Limited external project data, complex transition factors



ANNEX III: EVALUATION TOOLS: SURVEYS AND INTERVIEW GUIDES

Safe Families Project Survey - Oxfam

Thank you for taking part in this crucial survey about Oxfam's Safe Families Project. Your feedback is essential for assessing the impact of the project on your community.

Consent Disclosure Statement for Safe Families Program:

Before we proceed with this survey, we want to ensure you are fully informed about the survey and your rights as a participant.

Confidentiality and Privacy:

- Your participation in this survey is voluntary, and you have the right to withdraw at any time without consequences.
- All information provided will be treated with the utmost confidentiality, and your identity will remain anonymous in the reporting of findings.
- The data collected will only be used for research purposes related to the Safe Families Program, and no personal information will be disclosed to unauthorized individuals or entities.

Purpose of the Survey:

- The purpose of this survey is to gather information about your experiences and perceptions of the Safe Families Program to improve its effectiveness in supporting communities.

Procedure:

- The survey will involve a series of questions about your awareness of the program, your beliefs and attitudes towards gender-based violence, and the impact of the Safe Families Program on your community.

Contact Information:

- If you have any questions about the survey or would like more information, you can contact [Your Name or Affiliation] at [Your Contact Information].

Complaints and Concerns:

- Your comfort and safety are our top priorities. If you have any complaints or concerns about the survey process, please contact the Change Agent in your community. The Change Agent will address your concerns and, if necessary, forward them directly to [Your Name or Affiliation] to ensure a safe and effective resolution.

Change Agent Contact Information:

- [Change Agent's Name]
- [Change Agent's Contact Information]

Voluntary Participation:

- Your participation in this survey is entirely voluntary, and you are free to decline or withdraw at any point without facing any consequences.

Benefits and Risks:

- There are no direct benefits or risks associated with participating in this survey. Your honest responses will contribute to the improvement of the Safe Families Program.

Data Storage and Security:

- All collected data will be securely stored and accessible only to the research team. Data will be retained for the duration necessary to complete the analysis and reporting.

Consent:



By proceeding with this survey, you indicate that you have read and understood the information provided in this Consent Disclosure Statement. You voluntarily agree to participate in the survey, understanding your rights and the confidential handling of your information.

Participant's Name (if desired): _____

Participant's Signature (or Thumbprint): _____

Date: _____

Please answer the following questions thoughtfully and honestly. Your responses are confidential and important to us.

Section 1: Demographic Information

1.1 Gender:

- Male
- Female

1.2 Do you have a disability?

- Yes
- No

1.3 Age: _____

1.4 Village: _____

Section 2: Project Awareness and Participation

2.1 Were you aware of the Safe Families Project before participating in this survey?

- Yes
- No

2.2 How did you first learn about the Safe Families Project?



Section 4: Community Healing and Change Agents

4.1 How have community healing initiatives led by change agents and community facilitators affected your community's well-being?

4.2 Have you personally experienced positive changes in your mental and emotional well-being due to community healing efforts? If yes, please elaborate.

Section 5: Impact on Community Dynamics

5.1 How has the Safe Families Project influenced the overall dynamics of your community in terms of communication, trust, and collaboration?

5.2 Have you observed increased community solidarity and support for survivors of gender-based violence since the project began?

Section 6: Recommendations for Improvement

6.1 What aspects of the Safe Families Project do you believe could be enhanced to better address gender-based violence and community healing?

6.2 Are there specific types of community healing activities or interventions you would like to see implemented by the Safe Families Project?

Section 7: Empowerment and Education

7.1 Have you participated in any educational or empowerment programs offered by the Safe Families Project? If yes, please share your experience.

7.2 How have these programs contributed to your personal growth and empowerment within the community?



Section 8: Future Impact and Sustainability

8.1 In your opinion, what are the long-term benefits and impacts of the Safe Families Project on your community?

8.2 How can the Safe Families Project ensure its sustainability and continued positive impact in the future?

8.3 Please provide any further comments (these can include changes, challenges, or other experiences you would like to speak about)

Thank you for providing your valuable insights. Your experiences and opinions will help the Safe Families Project better understand the effectiveness of their initiatives and support future programs in the Solomon Islands and the Pacific. If you have any additional comments or suggestions, please feel free to share them below.



Interview Guide for Endline Evaluation of Safe Families Phase II Program in the Solomon Islands- STAKEHOLDERS

I. Introduction:

Introduction to the Interviewee:

- Begin with a brief introduction about the purpose of the interview and the importance of the stakeholder's perspective in the evaluation process.
- State that there is an option to have interview in both English and/or Pijin English

Consent and Ethical Considerations:

- Clearly explain the purpose of the interview, assure confidentiality, and obtain informed consent from the interviewee.

II. Understanding the Program:

Program Background:

- Discuss the interviewee's understanding of the Oxfam 'Let's Make Our Families Safe' (Safe Families) program.
- Explore their awareness of the multi-layered approach, goals, and overall objectives.

Role and Involvement:

- Inquire about the interviewee's role and involvement with the program, including any collaborations with National Council of Women (NCW), Provincial Council of Women (PCW), and the Solomon Islands Government (SIG).

III. Evaluation Criteria:

Relevance:

- Assess the extent to which the intervention aligned with the needs and priorities as defined by beneficiaries.
- Explore the alignment with changing government policies for gender equality and women's empowerment.

Efficiency:

- Discuss the impact of the partnership approach, governance, and gender equality principles on program implementation.
- Evaluate the coordination of the intervention in supporting efficiency for program implementation.

Effectiveness:

- Inquire about the extent to which expected outcomes were achieved and how the Safe Families project contributed towards these outcomes.
- Identify major factors influencing progress or challenges in achieving project objectives.

Sustainability:

- Assess the sustainability of the intervention in transforming attitudes, values, and beliefs related to gender-power relations.



- Explore how benefits will be secured for rights holders and the establishment of accountability and oversight systems.

Cross-Cutting Issues:

- Discuss the interviewee's perspective on inclusion, accountability to affected populations, localisation, and partnership.
- Inquire about challenges and successes related to these cross-cutting issues.

IV. Methodology and Data Collection:

Evaluation Methodology:

- Seek insights into the interviewee's understanding of the proposed evaluation methodology and its alignment with DFAT's Monitoring and Evaluation Standards.

Ethical Conduct:

- Discuss the importance of ethical conduct in the evaluation, considering the Australasian Evaluation Code of Ethics and Guidelines.

V. Program Impact and Recommendations:

Program Impact:

- Explore the interviewee's observations on the impact of the Safe Families program at the national, provincial, and community levels.
- Inquire about any unexpected outcomes or unintended consequences.

Recommendations:

- Discuss potential recommendations for strengthening social norm change, ensuring partner capacity development, and securing funding for future initiatives.
- Explore the interviewee's views on transitioning the Safe Families programming model to a regional focus.

VI. Closing:

Feedback, Additional Insights and Storytelling:

- Invite the interviewee to provide any additional insights or feedback regarding the evaluation process or the Safe Families program.
- Encourage and welcome storytelling (informal open discussion that shares experiences from start to finish) as a way to express their experiences, comments and concerns.

Appreciation and Conclusion:

- Express gratitude for the interviewee's time and valuable input, and reiterate the importance of their perspective in shaping the evaluation.

Note: Document responses accurately, ensuring all ethical guidelines and data protection policies are strictly followed throughout the interview process.

ANNEX IV: DESK REVIEW LIST

OXFAM DOCUMENTS

Documents Reviewed	Analysis Methodology	Source
SAFE FAMILIES PHASE II MID TERM REVIEW REPORT	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
OXFAM RESPONSE TO DFATS COMMENTS ON THE SAFE FAMILIES PROGRESS REPORT	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
FAMILIES PROGRAM AMENDMENT 2 PROPOSAL DOCUEMNT	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
SAFE FAMILIES PROGRAM INCEPTION PLAN 2014	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
SAFE FAMILIES MOBILISATION PLAN	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
SAFE FAMILIES REVISED RESEARCH PRPOSAL 2017	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
FINAL SAFE FAMILIES PROJECT REPORT 2019	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
AUKI SF TRAINING REPORT 2017	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
IWDA SAFE FAMILIES PROGRESS REPORT 2017	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
SAFE FAMILIES WORKPLAN AND BUDGET 2023	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
SAFE FAMILIES PHASE II NARRATIVE REPORT JAN-JUNE 2021 FINAL	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
SAFE FAMILIES 6 MONTHLY PROGRESS REPORT 2020	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
SAFE FAMILIES PROJECT NARRATIVE REPORT JULY-DEC 2022	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM

SAFE FAMILIES PHASE II NARRATIVE REPORT JULY-DEC 2019	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
FINAL TECHNICAL REPORT ERAW IEC	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
SAFE FAMILIES MEL PLAN	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
SAFE FAMILIES PHASE II BASELINE REPORT	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
SAFE FAMILIES FINAL REPORT 2019	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM
TRANSFORMING GENDER NORMS REPORT FINAL 2023	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	OXFAM

EXTERNAL DOCUMENTS

Documents Reviewed	Analysis Methodology	Source
SOLOMON ISLAND FAMILY PROTECTION ACT 2014 (FPA)	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	SOLOMON ISLAND GOVERNMENT
ENDING VIOLENCE AGAINST WOMEN AND GIRLS POLICY	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	SOLOMON ISLAND GOVERNMENT
EXPERIENCE AND IMPACT OF GENDER-BASED VIOLENCE IN HONIARA, SOLOMON ISLANDS: A CROSS-SECTIONAL STUDY RECORDING VIOLENCE OVER A 12 MONTH PERIOD	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	BMJ JOURNALS VOLUME 14
GENDER DOMESTIC VIOLENCE AND ITS BIG BITE ON SMALL ISLAND STATES- VANUATU AND FIJI	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	BRIDE PRICE LITERATURE REVIEW
COMMUNITY MOBILISATION IN THE FRAMEWORK OF SUPPORTIVE SOCIAL ENVIRONMENT TO PREVENT FAMILY VIOLENCE IN THE SOLOMON ISLANDS	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	WORLD DEVELOPMENT VOLUMBER 152 2022

WOMENS EXPERIENCE OF FAMILY V IOLENCE SERVICES IN THE SOLOMON ISLANDS-STUDY	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	AUSTRALIAN AID 2019
MONITORING PEACE AND CONFLICT IN THE SOLOMON ISLANDS	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	UNIFEM 2005
MOBILE PHONES, GENDER BASED VIOLENCE AND DISTRUST IN STATE SERVICES- A CASE STUDY FROM SOLOMON ISLANDS AND PAPUA NEW GUINEA	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	ASIA PACIFIC VIEWPOINT 2018
PARTNERING FOR FAMILIES EVALUATION REPORT (PSF) PAPUA NEW GUINEA	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	DFAT REPORT 2022
SOME MEN USE VIOLENCE AGAINST WOMEN AND HOW CAN WE PREVENT IT? STUDY	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	UNDP, UNFPA, UN WOMEN 2013
SVRI RESEARCH INITIATIVE BUILDING THE EVIDENCE BASE FOR SAFE FAMILIES A COMPREHENSIVE COMMUNITY LED MODEL FOR VIOLENCE PREVENTION IN THE SOLOMON ISLANDS.	THEMATIC CONTENT ANALYSIS/NARRATIVE CONTENT ANALYSIS	SEXUAL VIOLENCE RESEARCH INTITATIVE, 2017

ANNEX V: STAKEHOLDERS CONTACTED DURING THE EVALUATION

Number of stakeholders	Type of stakeholder (see note below)	Sex disaggregated data	Province/Country
1	Government	Male: Yes Female:	Solomon Islands
1	Government	Male: Yes Female:	Solomon Islands
1	Government	Male: Female: Yes	Solomon Islands
1	Government	Male: female: Yes	Solomon Islands
1	Government	Male: female: Yes	Solomon Islands
1	Organization	Male: female: Yes	Solomon Islands
1	Government	Male: Yes female:	Solomon Islands
1	Organization	Male: female: Yes	Solomon Islands
Total: 10			
<p>Note: A stakeholder could be a Civil Society Organisation; Project/Programme implementer; Government recipient; Donor; Academia/Research institute; etc. Stakeholders contact does not represent the total number of stakeholders participating in the interviews or surveys. Many stakeholders contacted were not available to meet.</p>			

ANNEX IV: SAFENET RESPONSE AND REFERRAL PATHWAY

