Project Evaluation Report

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Notes:

Some annexes listed in the contents page of this document have not been included because of challenges with capturing them as an A4 PDF document or because they are documents intended for programme purposes only. If you would like access to any of these annexes, please enquire about their availability by emailing uk_girls_education_challenge@pwc.com.

Girls' Education Challenge

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Strategic Approaches to Girls' Education External Evaluation Report

Non-Formal Track Cohort 2 Baseline

November 2021

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Contents

Cover sheet

- **Name of project:** Strategic Approaches to Girls' Education (STAGE)
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- **Name of external evaluation firm:** IMC Worldwide
- **Version number:** 6

Acronyms

ALPs	Accelerated Learning Programmes
CBE	Complementary Basic Education
CoC	Community based Oversight Committees
DSPs	Downstream Partners
EE	External Evaluator
EFA	Education for All
EGMA	Early Grade Mathematics Assessments
EGRA	Early Grade Reading Assessments
FCDO	Foreign, Commonwealth and Development Office
FGD(s)	Focus Group Discussion(s)
GBV	Gender Based Violence
GES	Ghana Education Services
GESI	Gender and Social Inclusion
GWDs	Girls with disabilities
JHS	Junior High School
KII(s)	Key Information Interview(s)
MEL	Monitoring, Evaluation and Learning
MOE	Ministry of Education
M&E	Monitoring and Evaluation
NBSSI	National Board for Small Scale Industries
NFED	Non Formal Education Division
NVTI	National Vocational Training Institute
RCT	Randomised Control Trial
SCT	STAGE Coaching Tool
SD	Standard Deviation
SHS	Senior High School

SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health & Rights
STAGE	Strategic Approaches to Girls' Education
TOC	Theory of Change
WASH	Water, Sanitation and Hygiene
WEI	World Education, Inc.

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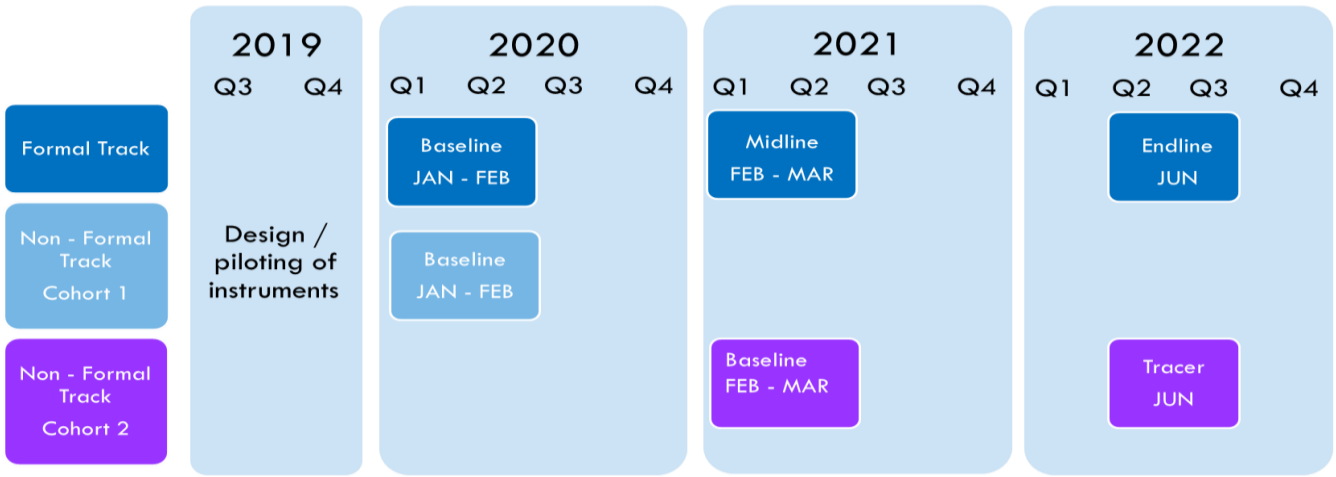
Executive Summary

This report presents the findings from the Non-Formal Track 2 baseline evaluation for the Strategic Approaches to Girls' Education (STAGE). The evaluation was conducted by IMC Worldwide, an external evaluator (EE), hired by the project implementing agency World Education, Inc. (WEI). This report follows the evaluation guidelines provided by the FM and reflects the evaluation scope of work detailed in the STAGE MEL framework.

Project Background. The project targets locations in Ghana where there are high levels of extreme poverty and where social norms towards gender roles include early marriage, early pregnancy, and high chore burdens. The result is a negative impact on girls' ability to progress in education and gain decent employment. The project consists of two programme tracks for highly marginalised girls – a single cohort Formal school track for girls aged 10-14, and a non-Formal track of three cohorts for girls aged 15-19 focused on vocational skills and employment. The project is implemented from January 2018 until June 2023 and seeks to reach 17,014 girls (8,245 Formal and 8,769 Non-Formal) across eight regions of Ghana (originally seven regions, but the country has repartitioned the area of implementation into eight regions). The Non-Formal track will provide 15–19-year-old girls with (i) nine months of accelerated learning programmes (ALPs) on literacy and numeracy; (ii) life skills training, and (iii) vocational training from skilled workers and entrepreneurs with the purpose of supporting future employment/self-employment. Interventions also include support to caregivers and awareness raising on the importance of girls' education. Schools in Ghana closed for 10 months from March 2020 due to the pandemic and WEI suspended some programme interventions, including ALPs, animation sessions, home visits, training for safeguarding, peer education, the Behavioural Change Campaign (BCC) and vocational training for a short period, from March to June 2020. Once reinstated, activities were implemented as planned.

Evaluation Approach. The purpose of the baseline evaluation is to assess the starting point of the STAGE project's key indicators (at Outcome and Intermediate Outcome level), together with assessing the relevance and plausibility of the STAGE Theory of Change (TOC) for the Non-Formal track, Cohort 2 (Figure A). The literacy and numeracy levels of girls were measured using Early Grade Reading Assessments (EGRA) and Early Grade Mathematics Assessments (EGMA). Other indicators were measured using a quantitative household survey with heads of household, primary caregivers, and girls. Qualitative data (focus groups with target girls, interviews with target girls, boys, caregivers, local leaders and local authority members) was also collected to provide input to some log frame indicators and complement the quantitative data. Data collection took place between 15 February and 4 March 2021 in five regions and seven language groups. The qualitative sample covered three communities in three different regions. The evaluation applied a Gender and Social Inclusion (GESI) lens throughout to ensure girls and marginalised sub-groups were thoughtfully considered and reported on throughout in accordance with minimum standards for GESI reporting (e.g. data disaggregation for marginalised subgroups, and differentiating sub-group and characteristics in reporting findings and analysis).

Figure A. Evaluation timeline



Profile of STAGE Non-Formal track. Data provided by the programme on STAGE target beneficiary group indicates that the proportion of girls aged 15-19 who are mothers is highest in the Central (21.3%) and Oti

regions (22.1%) with Eastern region at 16.8%. The programme also indicated that 8-12% of beneficiaries in each of the regions are married. In the Oti region, 10.9% of beneficiaries have never attended school and the region also has the highest proportion of girls aged 15-19 with disabilities.

The evaluation sample size for Non-Formal Cohort 2 is 640. Of the girls surveyed under the evaluation (actual sample size = 639), 92.3% are 15-19 years old. 8% of girls reported having a disability, particularly relating to mental health, and less than 3% reported a physical disability.

Subgroup marginalisation. Table B reports the prevalence of marginalised sub-groups among the Non-Formal Cohort 2 sample.

Table B - Characteristic subgroups overall, Non-Formal Track, baseline

Characteristic	Proportion of sample with this characteristic
Is a Mother	50.7%
Married under 15	0.16%
Married	21.1%
Lives with neither parent	21.3%
1+ hours to primary school	5.2%
Household unable to meet basic needs[1]	7.8%
Currently employed	1.4%
Employed and under 15	0.2%
High Chore Burden (Half a day or more)	33.1%
Has a disability	8.0%
Source: Analytical Dataset N = Caregiver survey	639

The most common characteristic reported by households are being a mother (50.7% of the total sample), high chore burden (33.1%), being married (21.1%), not living with either parent (21.3%) and being impoverished, defined as unable to meet basic needs (7.8%). Of those who reported being married, only one beneficiary was under 15 years old; 7.9% of beneficiaries under 18 years were married, and 31.5% of beneficiaries 18 years or older were married. There is variation in prevalence of marginalisation subgroups by region/language. Eastern and Oti regions (Akuapim Twi) show lower levels of marginalisation than others, even though Oti region (Akuapim Twi speakers) has the highest prevalence of mothers (75.0%). Upper West (Dagaare) is relatively more marginalised in terms of demographic characteristics such as being mothers or married. In Upper West (Dagaare), Northern and Oti (Likpakpaaln) and Upper East (Kasem) there is a higher prevalence of girls affected by high chore burden and impoverishment, and that are married.

The overall percentage of employed girls is low (1.4%, or nine girls), either as self-employed or employed in household's income generating activities. Girls work selling agricultural/livestock/forestry/fishery produce or for subsistence, or sales/services (vendors, domestic help/ cleaner, cook). Few jobs are permanent and full-time. The majority of work is very safe or somewhat safe (66.6%); only in one case was it reported as somewhat unsafe. Girls were also asked whether they feel they possess the skills and knowledge to do the kind of job they would like to do. The majority feels there is room for improvement.

[1] Defined as answering Household Survey question 'PCG_5econ Please tell me which of the following phrases best suits your household situation' with '[_] 1 unable to meet basic needs without charity'

Barriers. The barriers questions focus on what obstacles are preventing girls from attending school/ education programmes that STAGE should consider in the design and implementation of its activities[2]. At baseline, the prevalence of barriers by categories among girls dropped out of school (44%, N=281) was as follows:

Table C - Barriers among Non-Formal Track, baseline

Barrier	Proportion of sample affected by this barrier
Economic (Work or Costs)	96.2%
Travel (Safety or Distance)	7.7%
Disability (School cannot meet disability-related needs)	16.2%
Social Norms (Disinterest by Parent/Girl)	10.6%
School (Unsafe/Teacher Mistreats/Refused Entry)	3.8%
Demographic (Age/Pregnant/Parent/Married)	6.0%
Source: Analytical Dataset Caregiver Survey: Unenrolled students: Girls no longer in school: N	281

Among beneficiaries who dropped out of school, economic barriers to enrolment are by and large the most felt, by 96.2% of the sample; almost all of girls in each marginalisation subgroup. The second most prevalent barrier is related to unmet disability needs, 16.2% of the girls that dropped out of school (45 girls). Those married, with disabilities and/or living in remote areas are largely driving up the overall incidence. The third most felt barrier relates to social norms (10.6% of girls that dropped out of school). Married, mothers, employed girls, those with a high chore burden, living in remote areas, and girls with a disability (GWDs) particularly experience these barriers. For a smaller percentage of girls (7.7%), travel-related issues represent an obstacle to enrolment. Girls with high chore burden or married experience these issues more than others, suggesting that housework and family duties might make getting to school more difficult than girls that live further away. Close to 1 in 10 (6%) of girls also experience demographic barriers, mostly those married or living with neither parent. Aside from the unmet disability needs, these barriers were also confirmed and supported by the qualitative data.

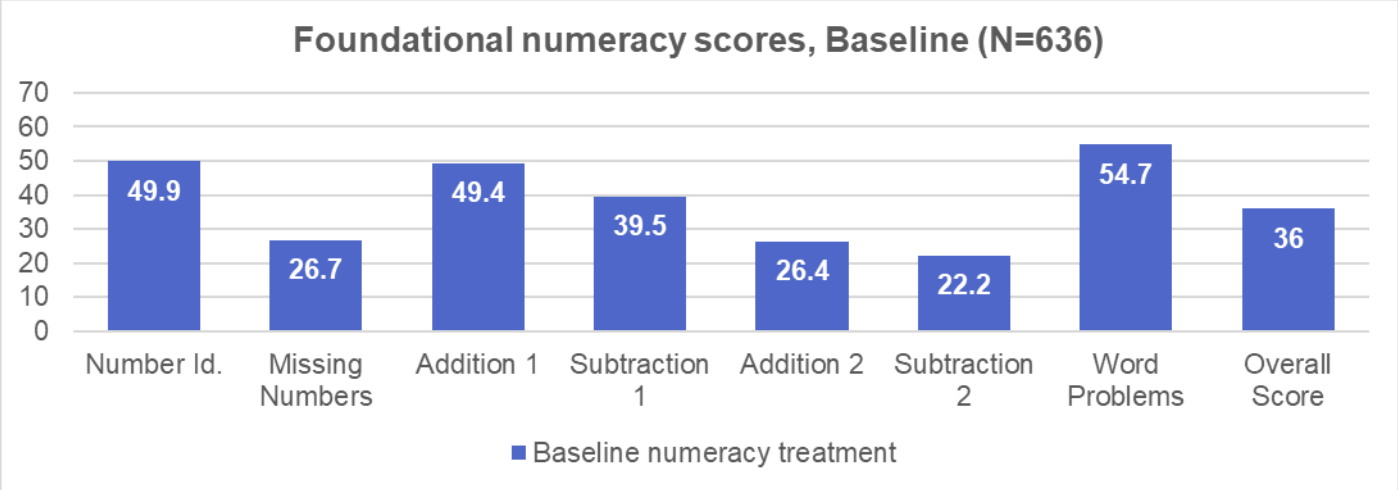
TOC Review. The majority of the project assumptions on characteristic subgroups and barriers are valid. A key risk to monitor might relate to the transition into vocational training and/or employment of girls that have dropped out of education because of high chore burden, housework and/or being with their families. STAGE interventions to address the barriers faced by this track suggest that girls will be supported in a transition to additional vocational training or further education, though a key assumption to monitor is whether girls will be able to transition to decent and fair employment or sustainable self-employment after the end of the ALP/vocational training. The STAGE project addresses this through the provision of a variety of options for girls in terms of jobs to train in based on market availability and interest, support options for transition (e.g. grants for income generation), and Downstream Partners (DSPs) linking girls with interested employers and businesses. However, the availability of income generation / employment opportunities remains a key assumption; as is the STAGE programme ability to be able to link girls with employment opportunities.

Learning Outcomes. The overall **numeracy** score at baseline is 36 (out of 100) (Figure B)**.** Most girls scored in either the Non-learner or Emergent learner classifications in Missing numbers, Subtraction 1, Addition 2 and Subtraction 2. By region, Upper West and Northern present the lowest Early Grade Mathematics Assessment (EGMA) scores. For World Problems, slightly less than half score in the higher categories. Girls from Upper

[2] A challenge in this baseline is that barriers questions were only asked to girls dropped out of school, and not those never been in school (see section on Challenges and Limitations in main report). Findings on barriers by region should be taken with caution.

exhibit higher than average scores, for numeracy, all results are significant. It is notable that numeracy tests for Upper East (Kasem) are double than the mean score (72.1*)[3]. Results for Likpakpaaln and Akuapim Twi speakers in Eastern, Oti and Northern regions tend to drive down the average.

Figure B - Foundational numeracy scores. Baseline



The overall score for foundational **literacy** skills at baseline is 15.4 (out of 100) (Figure C), only slightly lower than the overall baseline score for Non-Formal Cohort 1 (15.9). As for Non-Formal Cohort 1 baseline, most girls were in the Non-Learner category except for letter sounds where 70.6% of girls are in the Emergent Learner category. In Writing, 74.9% of girls are in the Non-Learner category. Oral reading fluency is the second more challenging task (69.1% in the Non-Learner category).

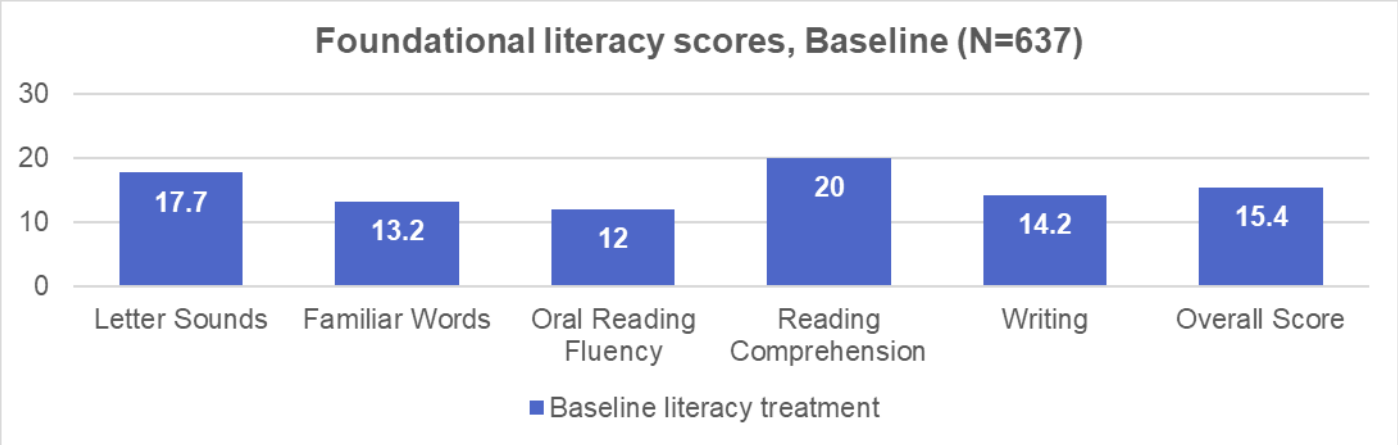


Figure C - Foundational literacy scores. Baseline

While variations in literacy scores by language may denote differences in the complexity of the language's alphabet, orthography, and grammar, the differences remain striking. The lowest scoring region/language groups in both tests are from Oti (Likpakpaaln, 3.7* and 16.9* for literacy and numeracy) and Eastern (Akuapim Twi,

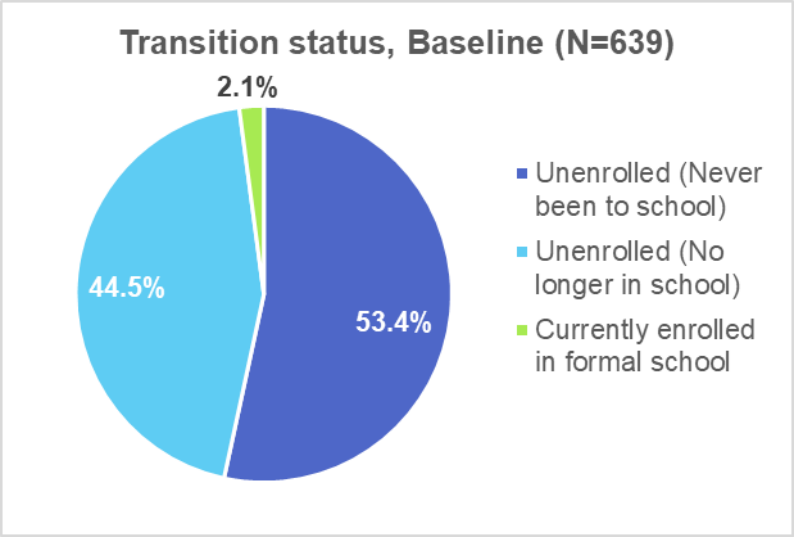
[3] Asterisks are used throughout the report to denote significant differences. See methodology section for details on hypothesis tests.

5.3* and 22.5* for literacy and numeracy). The learning scores across most marginalisation subgroups are higher than mean scores for the overall non-Formal group, except Girls with Disabilities (GWDs), mothers (for literacy) and high chore burden (for numeracy). Whilst girls with any reported disability by the caregiver are just slightly below the mean score, it is girls with anxiety and depression - particularly anxiety – that score substantially lower. Girls from impoverished households are the second highest scoring subgroup on both tests (22.5 and 43.7).

Transition outcome. Over half of the Non-Formal sample has never been to school (53.4%, Figure D).

A small percentage, mostly in Upper West (Dagaare) and Upper East (Kasem) are reported to be currently enrolled in school. In terms of regional differences, the noticeable outliers are the subgroups Likpakpaaln speakers, in both Oti and Northern regions, where the great majority of girls have never been to school (91.7%* and 86.6%*). In both regions the large majority of girls are affected by high chore burden. A high percentage of girls living in remote areas have never been to school and the same is observed for girls with high chore burden, living with neither parent and married girls.

Figure D – Transition status, baseline.



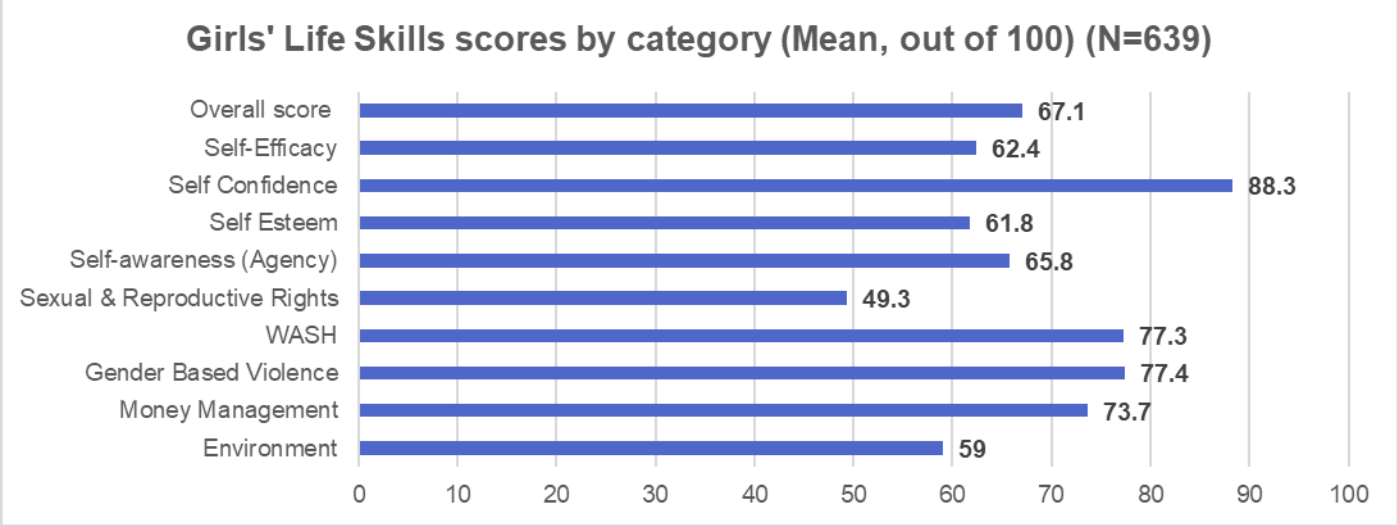
Sustainability outcome. The overall sustainability score at baseline is found to be 1. At community level**,** caregiver support scored 2, caregiver access to vocational training and services for GWDs 1, local leaders support for education 0 (no support or very limited support), school leadership 1 which demonstrates foundational knowledge and support for girls' education/ employment. It seems that a key reason for limited community leaders' support relates both to limited financial resources for education in communities and prioritisation of other issues, as the qualitative data (from the interviews as well as survey's open responses) evidenced. Based on limited quantitative data from the survey, it was also found that caregivers were unable to access services within their district for their children with disabilities. Note that approximately half of the sustainability scorecards are not measured at baseline as the indicators relate to activities which are yet to start.

Intermediate Outcomes (IO)

IO1.1 Attendance. N/A

IO3.1 Girls Life Skills score. The overall Life Skills score is 67.1 (out of 100) (Figure E).

Figure E – Girls' Life Skills scores by category.



Cohort 2 girls performed poorly on knowledge of sexual and reproductive health (49.3). When prompted specifically on money management, all girls from all three communities reported being responsible looking after

what little money they have and saving when possible. The self-awareness score is mostly in line with the average Life Skills score (slightly lower), with self-confidence driving the overall average up. However, qualitative findings found mixed results on self-confidence.

The subgroups beneficiaries with a high chore burden and those with disabilities performed lower than the overall average (59.1*, 61.8 and 56.6* respectively). Girls whose caregivers reported mental health issues are performing lower than the overall group of girls with a disability, particularly for depression (47.5*). Mothers performed above average (72.4*). This is likely linked to the fact that Life skills results are significantly higher for older girls, and mothers tend to be older on average than non-mothers (18.4 against 17.2 years old). Impoverished girls scored above average; the same trend was noted for learning scores. Regionally (Figure F), the Non-Formal sub-group speaking Likpakpaaln in Northern and Oti regions reported a lower-than-average score than elsewhere. Further, Life Skills scores by region seem to be consistent with Learning Outcomes results whereby the Likpakpaaln speakers in Oti scored poorly compared to others in both literacy and numeracy.

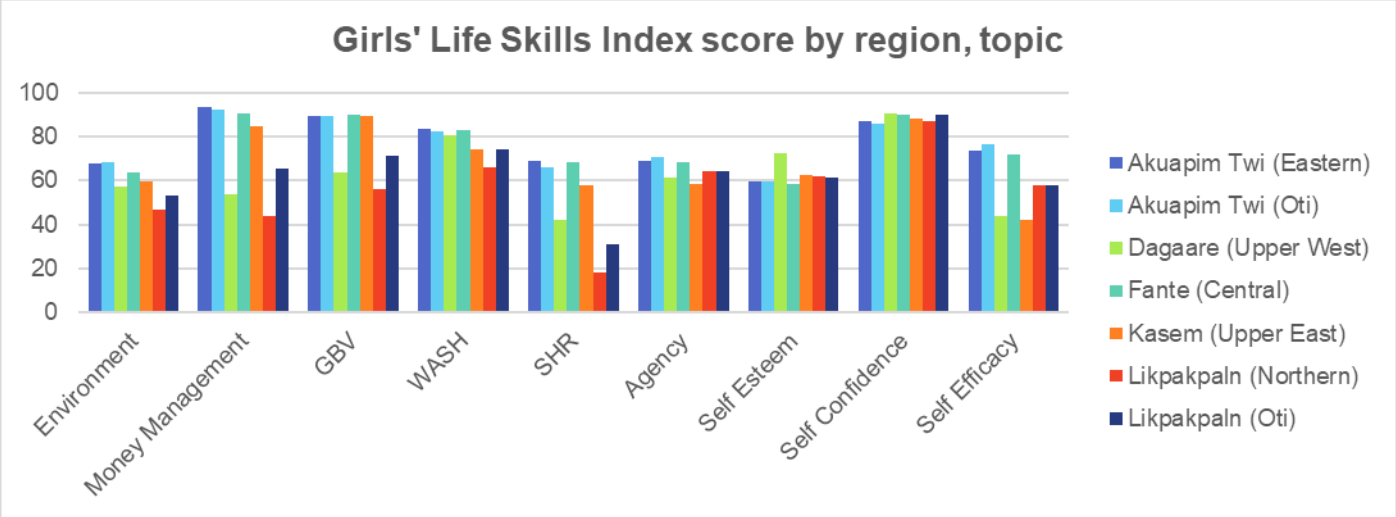


Figure F - Girls' Life Skills scores by category and region

IO3.2 Life Skills Caregivers' assessment. Caregivers have high levels of confidence in their girl-child's Life Skills in all areas and in relation to all sub-groups (overall 77.3); less so for girls with mental health issues, particularly anxiety. There is a lower level of confidence in the knowledge of sexually transmitted diseases (3.4 out of 5). By region, confidence levels are lower for Likpakpaaln speakers in Northern and Oti regions (significant for Northern, 73.4*) and Oti region (Akuapim Twi language, 74.3).

IO4.1 Percentage of caregivers who feel it is equally viable to invest in a girl's education as a boy's, even when funds are limited. A high percentage of caregivers (80.3%) feel it is equally viable to invest in a girl's education as boy's education, even when funds are limited. By and large, fewer caregivers of girls with a disability feel it is equally viable to invest in a girl's education as boy's education than other groups (significant, 56.9%*), with the average driven further down by caregivers of girls with daily anxiety. Another subgroup with less support for education than average is girls with high chore burden (56.0%*) and girls that live far away from primary school (63.6%). For those that are married, living with neither parent and those experiencing demographic barriers, support is also lower than average. There is much less support for girls' education in the Northern region, Likpakpaaln speakers in Northern and Oti regions (56.4%* and 51.4%*). Qualitative findings reveal that the main reason girls have not been able to get education - including vocational training - so far is due to lack of finances, rather than unappreciation of the importance of education. The general sense from interviews is that vocational training is a pathway to more secure employment.

IO4.2 Extent that religious and traditional leaders actively mobilise households to support excluded girls into education. Only a minority of caregivers reported that leaders speak in support of girls' education (19.2%), as expected prior to project intervention. There are large regional variations, with very few Akuapim Twi speaking caregivers (Eastern and Oti region) and Fante speaking caregivers (Central region) reporting speaking in support of girls' education. Overall, only 10.9% stated that this happens on at least a quarterly basis. The qualitative data supports the quantitative findings. All caregivers interviewed across the three communities agreed that local leaders do not do anything to actively support girls. Girls' perceptions of community support for

their education also match caregivers': over half of the girls either do not feel supported or do not know, and 38.8% feel they are supported a little.

IO4.3 Extent that relevant district agencies participate in monitoring, supervision and coaching visits of schools. All local authority members interviewed were verbally supportive of girls' education, vocational training, and decent employment. There were very few qualitative findings around active district agency support. Of the few examples, two caregivers from Chakoli (Northern) have commended their district agencies for bringing the STAGE project to their community.

Gendered barriers to education, training and employment include early marriage, pregnancy, higher chore burdens, and unequal access to paid work. Being a mother, being married, and/or having a high chore burden intensify barriers to attendance, and a high percentage of these subgroups had never been to school previously. In terms of learning scores, scores were lower than the mean for the overall non-Formal group amongst mothers (for literacy), married (for life skills), and those with a high chore burden (for numeracy and life skills). The STAGE project addresses these barriers through the provision ALPs classes, vocational training transition support, home visits and community sensitisation. For these subgroups, timing sessions around responsibilities, and supporting mothers with caretakers during lessons will be important to consider. Relatedly, it will be especially important to monitor girls who have previously never been in school, or dropped out due to high chore burden, housework and/or being with their families, to ensure transition into vocational training and/or employment.

Inclusion related barriers to attendance and learning relate to inability to meet basic needs (impoverishment) and disability, and baseline findings suggest out-of-school girls are the most affected by economic barriers and unmet disability needs barrier. Girls from impoverished households scored higher than average on both learning and life skills tests. However, girls with disabilities score slightly lower than average, and girls with mental health issues (particularly anxiety and depression respectively) performed lower than the overall group of GWDs. STAGE must therefore ensure appropriate support is in place for those with depression and anxiety. STAGE planned life skills training around self-esteem could go some way to helping with that. The quantitative findings found caregivers were unable to access services within their district for their children with disabilities, and so this will be another area for STAGE to focus on, alongside ensuring GWDs are adequately supported when travelling to ALPs and vocational training, and communities are sensitised around opportunities for GWDs. For the formal midline, these same STAGE interventions targeting this subgroup were found to have addressed their needs to an extent.

Recommendations. Some recommendations that the STAGE team might consider to further improve the project's relevance are presented below. Note that these recommendations are described in full in the main report.

Area	Recommendation
Targeting	● Replace the small percentage of girls currently enrolled in school with out-of-school girls, if enrolment is confirmed.
Learning	● Where feasible, customise the curriculum, adopt differentiated teaching and learning strategies (e.g., speed of covering material) and ensure language appropriateness between groups for those with lower overall learning outcomes (regions and language groups).
Life Skills	● Consider differentiated teaching and learning strategies for subgroups with high chore burden and girls with disabilities who performed lower than the overall average on Life Skills, and the Likpakpaaln speakers in Northern and Oti regions.
Transition	● Regularly monitor whether interventions remain sufficient in addressing economic barriers. ● Ensure sufficient time for planning and identification of different livelihoods/transition options for each girl, and follow up actions (linking to employers, use of IGA fund). ● Provide more information on the transition results and lessons learned observed with Cohort 1; any updates to the market assessment, especially following COVID-19 and its likely negative labour market impacts. Then consider designing and applying an approach to transition which is realistic in taking into account availability of income generation / employment opportunities. ● Continue to ensure sensitisation for community leaders includes guidance on practical

	steps they can take to enable girls' education and decent employment.
Sustainability	● Monitor whether the fund given to girls to assist with their transition to self-employment is sufficient enough to ensure sustainability of the intervention. ● Continue supporting girls in need to access National Health Insurance. ● Focus on how to increase active support levels for non-Formal caregivers', which are low (10.9%). Related to this is the need to address social norms. ● Focus on sensitisation of community leaders on girls' education/ vocational training/ right to safe and decent employment/ self-employment opportunities, given low level of active support found, and sensitise local leaders on how they can support girls better going forward, particularly low-cost support options.
GESI	● Learn from the positive results from the Formal track midline to ensure effective sensitisation at community, school and household levels towards relieving girls of their high chore burden. The inclusion of boys and husbands in this intervention will be of paramount importance. ● Consider specifically targeting girls living in remote areas, married girls, their husbands/husbands' families, and girls' caregivers in the work around changing social norms, given the prevalence of these barriers among these sub-groups. ● Apply the targeted actions (successful at formal midline) to reduce high chore burden and provide travel options for encouraging transition to further vocational training and/or decent employment for non-Formal girls. ● Include content on gender roles and job choices within the awareness activities for parents, boys and community members in the non-Formal communities. ● Strengthen the module on sexual and reproductive health and rights, ensuring it is covered early, and allow more time for this module, given relatively low scores in this area and small improvements detected in the Formal midline. Ensure that peer educators, especially boys, have training on the risks of early pregnancy and how and why to avoid it. ● Continue sensitising boys on the respect for girls, taking responsibility for contraception and caregivers and communities to address the issue of unplanned teenage pregnancies. ● Ensure local leaders are sensitised better on the various reasons why the STAGE programming is primarily benefitting girls. ● Consult with Non-Formal beneficiaries and identify timings when they can attend trainings given many are mothers and/or have high chore burden.
Disability	● Ensure there are appropriate transition options available for GWDs and sensitise the employers on employing and supporting GWDs. ● For girls with disabilities, ensure provision of assistive devices where needed and referral for specialised care including health insurance enrolment. ● The programme should confirm whether there is appropriate support for girls with a disability in the case where this is preventing them from travelling to ALPs or vocational training. ● Continue to include effective support to girls who have anxiety (and depression), together with guidance for caregivers on how to support girls with these barriers.
Safeguarding	● Consider how girls who report being in hazardous child labour or modern slavery will be safeguarded throughout the project intervention.

The EE believes the evaluation questions remain relevant but recommends some changes for project's M&E system especially around monitoring of the availability of income generation / employment opportunities. Importantly, STAGE MEL team should work on a more detailed definition of the transition paths for non-Formal girls to enable a clear and robust assessment at endline/tracer. The EE also proposes changes to some indicators to be more relevant for endline/tracer. The recommendations finish by providing some specific recommendations to the EE for the next round of data collection.

1. Background to project

1.1 Project context

Ghana made notable efforts towards achieving Education for All (EFA) in the post-Jomtien period of the 1990s and by 2000. However, despite initial increases in rates of enrolment, significant expansion in terms of access nationally did not necessarily translate into equality or equity of opportunity (Acheampong et al, 2012). In the early 2000s, Ghana passed clear policy guidelines through the 2002 – 2015 National Action Plan on Education for All that sought to decrease girls' dropout rates in primary and Junior High School (JHS) and while this led to increases in primary education enrolment, challenges in transition and retention of JHS girls persist and from 2014-2016 national transition rates from primary to JHS declined. In 2017 the Government pledged to make secondary education free thus removing a significant barrier to students staying in school.

In addition to financial challenges, extensive literature (UNICEF 1993; Mfum-Mensah, 2003; Farrell & Hartwell, 2009; Mfum-Mensah & Ridenour, 2014) highlights that rigid formalised school systems based on fixed timetables, and a loaded curriculum that greatly depends on trained teachers are often not performing as well in rural environments with respect to providing basic literacy, numeracy and other skills that are relevant to the local environment. Traditional schools operate on insufficient budgets and little funding is allocated to vocational training and apprenticeship programmes.

There is a correlation between the regions with the highest incidence of poverty, lowest levels of education, and the regions with the least per pupil expenditure in education (World Bank, 2010). Out-of-school children, especially girls, have few options to re-enter school or find viable options to generate income.

UNESCO studies found the gender gap in educational attainment increases at Junior High School. Ghana's Education Sector Performance Report (2016) indicates that gender parity (was achieved at the primary and JHS levels (0.97 in 2015/16), but in deprived districts, the gender parity indicator is 0.93 (2015/16) and 0.79-0.9 or below in Northern, Ashanti, Greater Accra, and Upper West regions. Girls in these targeted areas are not finding their way to school.

Evidence[4][5][6] strongly suggests that the factors contributing to educational exclusion are multifaceted and intersectional and children suffering multiple disadvantages are considered most at risk. The barriers affecting education are interrelated throughout community, school, and system levels impacting all children but, disproportionately affect girls. Addressing these barriers will engender an enabling environment for girls' education and change the perception at the individual, community, and institutional levels. Ultimately it will equip the girls to be agents of change.

Programme Design

The Strategic Approaches to Girls' Education (STAGE) project, implemented by World Education, Inc. (WEI), addresses barriers to education through two tracks (a Formal school track and Non-Formal track focused on

[4] School exclusions: a literature review on the continued disproportionate exclusions of certain children (publishing.service.gov.uk)
[5] Access to Elementary Education in Ghana: Country Analytic Review
[6] External influences and the educational landscape - An analysis of political, economic, geographic, health and demographic factors in Ghana.pdf (lse.ac.uk)

vocation skills and employment) designed to provide a holistic approach that tackles barriers at individual, community, school, and system levels, and supports girls in accessing education and fair employment.

STAGE targets communities in eight regions of Ghana[7] with high levels of extreme poverty, in combination with existence of deep-seated traditional and social norms. STAGE targets girls in these areas that are highly vulnerable and systematically marginalised due to factors such as early marriage, pregnancies, disabilities, and high chore burden. Additionally, with poverty being such a key factor of the problem, STAGE will work to reduce financial barriers, to ensure that girls become better educated and are put on pathways that break the cycle of poverty.

The project builds on learning from the DFID and USAID funded Complementary Basic Education (CBE) Programme that was set up to provide children between 8 and 14 years with basic literacy and numeracy skills, targeting children in remote and deprived areas that would normally be unable to attend school. The programme aimed to equip children with knowledge and skills comparable to those learnt in the first three years of formal school, and on completion of the accelerated learning children were able to transition into local primary schools.

The Non-Formal track will provide 15–19-year-old girls with nine months of accelerated learning on literacy and numeracy together with life skills training, and vocational training from master craftspeople with the purpose to support future employment for the girls via interventions such as support to caregivers, and awareness raising on the importance of girls' education.

COVID-19

The context in which STAGE is being implemented has changed significantly since the Formal and Non-Formal Cohort 1 Baselines were conducted as Ghana has been impacted by the COVID-19 pandemic and resulting measures imposed to control its spread. As of 27th April 2021, 92,253 confirmed cases of COVID-19 resulting in 777 deaths had been reported to WHO[8].

Ghana recorded its first COVID-19 cases on 12th March 2020 but prior to this had already put control measures in place[9]. Measures have included enhanced hygiene protocols, restricted movement within country, a ban on all public gatherings, including conferences, funerals, festivals, and religious activities and authorisation for schools to shut down[10].

The COVID-19 vaccination campaign began on 1st March 2021, starting with 600,000 doses of the CoviShield vaccine received through the COVAX facility (WHO, CEPI, GAVI, UNICEF). The vaccine rollout focused initially on the three most affected regions: Greater Accra, Ashanti and Central and prioritised health care workers and frontline workers, adults over 60 years of age and persons with known underlying comorbidities[11]. On the 21st of March, the rollout was extended to target health care workers in all regions. As of 27 April 2021, a total of 842,521 vaccines have been administered[12].

Impact on Education

"COVID-19 has created the largest disruption of education systems in history, affecting nearly 1.6 billion learners in more than 190 countries and all continents" and "exacerbating pre-existing education disparities by reducing the opportunities for many of the most vulnerable children"[13].

[7] Originally targeting seven regions but updated following the creation of six new regions after the 2018 referendum.
[8] https://reliefweb.int/report/ghana/unicef-ghana-covid-19-situation-report-no16-1-31-march-2021
[9] https://covid19.who.int/region/afro/country/gh
[10] The United Nations. "Education during COVID-19 and beyond"
[11] https://www.unhcr.org/gh/2021/01/25/un-ghana-joint-statement-in-commemoration-of-2021-international-day-of-education/
[12] https://www.peacefmonline.com/pages/local/education/202004/405898.php
[13] https://reliefweb.int/report/ghana/unicef-ghana-covid-19-situation-report-no16-1-31-march-2021

Schools in Ghana first closed in March 2020 and remained closed for 10 months. UNHCR estimates that 9.2 million schools' students and 0.5 million tertiary education students were impacted at the peak of the pandemic by the closure of learning institutions and the interruption of literacy and lifelong learning programmes[14].

The Ghana Education Services (GES) sought to mitigate the disruption to education provision through digital learning with lessons available online and transmitted via radio and television, developing a COVID-19 Coordinated Education Response Plan for Ghana in April 2020. GES opened a website[15] and in partnership with the Ghana Broadcasting Corporation expanded their digital learning offer, developing a further 700 lessons in English, Mathematics, Social Studies and Integrated Science.

The Government implemented a staggered re-opening of education institutions; students in classes with exams returned in October 2020, most new and continuing pre-tertiary students in January 2021 and in March 2021, first-year Senior High School (SHS) students[16]. The Government launched a Back-to-School Campaign in January 2021, to encourage learners and especially girls to return to school safely and the GES issued guidelines that mandated measures including the wearing of masks, temperature checks[17] and regular hand washing with soap to enable schools to open safely.

Impact on STAGE

During the 10-month period from March 2020 STAGE Formal and Non-Formal track programme activities were unable to continue as originally planned and the work plan has been adapted in response to COVID-19 and resulting measures. WEI identified the risks to programme and programme participants, along with mitigations in the STAGE Response Plan. This plan and the revised work plan are found in Annex 17 and 18 respectively.

1.2 Target beneficiary groups

Direct Beneficiaries

STAGE direct beneficiaries for the **Non-Formal Track** are 15-19-year-old out of school marginalised girls living in the Central, Oti, and Eastern regions. 10.9% of girls in the Oti region have never attended school and the region also has the highest proportion of girls aged 15-19 with disabilities[18]. Identified districts are rural with subsistence agricultural activities, resulting in limited economic opportunities and employable skills for girls. The proportion of girls aged 15-19 who are mothers is highest in the Central (21.3%) and Oti regions (22.1%) with

[14] https://www.unhcr.org/gh/2021/01/25/un-ghana-joint-statement-in-commemoration-of-2021-international-day-of-education/
[15] Temperature checks and mandatory wearing of masks. - (https://www.africanews.com/2021/01/19/schools-in-ghana-reopen-as-covid-19-cases-surge//
[16] WEI reported that the 2010 Population Census indicates that there are 737,437 (6%) PWD in Ghana. The female PWD population is 387,647 (52.6%). Girls between the ages of 10-14 and 15-19 years constitute 5.8% and 6.5% respectively of the total female PWD in Ghana. This figure translates into about 46,517 girls with disabilities who are within the ages of 14-19 years. This age bracket is the main benchmark for both Non-Formal and Formal track STAGE beneficiary selection in all project communities. The 9,200 girls with disabilities for the 7 STAGE regions out of the total 16 regions was extrapolated from the national female PWD population and used at the time of the proposal in 2014. Source: the 2010 Housing and Population Census, Ghana Statistical Service (2012).
[17] The Evaluator has reviewed STAGE COVID-19 Plan and Mid Term Review Plan dating July 2020.
[18] WEI reported that the 2010 Population Census indicates that there are 737,437 (6%) PWD in Ghana. The female PWD population is 387,647 (52.6%). Girls between the ages of 10-14 and 15-19 years constitute 5.8% and 6.5% respectively of the total female PWD in Ghana. This figure translates into about 46,517 girls with disabilities who are within the ages of 14-19 years. This age bracket is the main benchmark for both Non-Formal and Formal track STAGE beneficiary selection in all project communities. The 9,200 girls with disabilities for the 7 STAGE regions out of the total 16 regions was extrapolated from the national female PWD population and used at the time of the proposal in 2014. Source: the 2010 Housing and Population Census, Ghana Statistical Service (2012).

Eastern region at 16.8%. 8-12% in these regions are married. There are three Non-Formal cohorts which will undergo the Accelerated Learning Programme (ALP) delivered by STAGE.

The main programme learning outcome for the non-Formal track is improvement of literacy, numeracy, cognitive and non-cognitive skills by the end of the ALP, with a focus on life skills and vocational training. Success in the second key outcome (transition) is that girls begin their own entrepreneurial activity or gain decent employment (see Table 1).

Table 1 - Proposed Intervention Pathway - Non-Formal Track

Which girls follow this pathway?	How many girls follow this pathway?	How long will the intervention last?	How many cohorts are there?	What literacy and numeracy levels are the girls starting at?	What does success look like for learning?[19]	What does success look like for transition?
Girls aged 15-19	8,769	6 months ALP and 3 months IGA	3 cohorts	Grade 0-1 for literacy and numeracy	Girls begin their own entrepreneurial activity[20]	Girls set up their own business for income generation, or obtain decent employment

Indirect beneficiaries include: Boys; ALP Facilitators; Community members. Please see Annex 7 for a detailed breakdown of beneficiaries.

1.3 Theory of change

This section presents the original project Theory of Change (TOC) as taken from the STAGE project MEL Framework and highlights key changes in the TOC assumptions and activities compared to baseline – most of which are in response to the outbreak of the COVID-19 pandemic[21]. These changes relate to the Non-Formal track, both Cohort 1 and Cohort 2. Whilst COVID-19 related risks and adaptation response have mainly concerned Cohort 1, which was ongoing at the height of the pandemic, some potential impacts and adaptations also concern Cohort 2 – which this baseline focuses on. It should be noted that the project has confirmed there have been no changes to the log frame, notwithstanding the change in the operating context; and no changes to the original TOC diagram (see Annex 2 for TOC diagram).

IF highly marginalized adolescent girls who have dropped out or have never been to school are provided with tailored and inclusive learning, and life skills, AND IF this is combined with family and individual level financial education and resource support, community wide behavioural change interventions, and institutional support mechanisms, THEN the girls will be able to successfully pursue educational and vocational pathways or use their acquired skills and set themselves on a path to self or paid employment.

[19] The evaluation was designed around the 0.2SD measure for improved learning outcomes. This has the advantage of focusing primarily on overall improvement, rather than meeting a minimum benchmark. Particularly in the case of the Non-Formal Track, literacy and numeracy requirements of operating one's own business will vary highly based on the sector that the beneficiary is working in and should be part of girls' individualized plans, rather than set project-wide. This is compounded by the fact that comparisons across languages cannot be made because of how literacy acquisition varies by language, and therefore common minimum thresholds cannot be set across all languages. Only measures of improvement where girls are being compared to their past improvement are appropriate. See EGRA Toolkit, p.10 "How EGRA Should Not Be Used."

[20] For the Non-Formal track, success refers to: Ability to start and manage their own business; Ability to work under another vocational master making use of skills learnt from STAGE (WEI).

[21] The Evaluator has reviewed STAGE COVID-19 Plan and Mid Term Review Plan dating July 2020.

The overall goal of STAGE is to improve life chances of marginalized girls by lowering the barriers that they face in achieving an education. The girls in STAGE all have lives full of potential and promise but need significant support and guidance to enable them to overcome the barriers that hold them back. To achieve this overall impact, STAGE will work towards three key outcomes – *Learning, Transition and Sustainability* (see Boxes 1, 2 and 3 below for further details). While these are three separate outcomes, they are also causally linked to each other. Girls with improved *learning* outcomes will be able to *transition* into formal and Non-Formal education or careers and will work with communities to create *sustainable* change in communities by empowering women to create change and creating an encouraging environment by working with community institutions and power structures.

Box 1 – Outcome: Learning

Learning will be measured by the number of marginalized girls with improved learning outcomes. To achieve these outcomes, girls will need to a) regularly attend learning sessions, b) have access to well-equipped facilitators and educators who provide inclusive learning opportunities and c) be able to acquire the critical life and non-cognitive skills needed for success. These intermediate outcomes will collectively increase participation, self-esteem, and support for gender equity as girls will learn to speak their voice, engage more with their peers, and achieve better learning outcomes.

Key changes. Accelerated Learning Programme (ALP) activities were suspended in all the 426 communities in 18 districts in seven regions until June 2020. Key interventions and drivers of the programme like the ALPs, animation sessions, home visits to check on the girls, training for safeguarding, peer education, the Behavioural Change Campaign and vocational training were suspended. WEI and the Downstream Partners (DSPs) had to adapt delivery of the ALPs and gender sensitive and inclusive education to the new context. During the suspension of activities, teaching and learning were done through radio and community information systems. Facilitators and Community-based Oversight Committees (COCs) with support of the town criers were to alert learners on the broadcast day and time and encourage them to tune in as well as follow the lessons with their reading and exercise books. Parents were to be educated about this strategy and encouraged to support the learning process. WEI also procured radios for DSPs to distribute in households with learners that did not possess radios (established through a baseline assessment). In addition to distance learning, community facilitators also provided learning in reduced classes (5 girls out of 25, then increased to 15) whilst observing social distancing, starting in June 2020. This allowed the resumption of almost all ALPs as of July 2020. The programme also organised catch up classes between August and September to ensure that most of the content areas would be covered. In the case of the non-Formal track classes alternated between literacy, numeracy, Life Skills class and Vocational Skills.

In August - November 2020, STAGE worked with the non-Formal division of GES on regional and district level, staff from social development and districts assemblies to help them in the identification and registration of Cohort 2 Non-Formal track learners. Overall, the original TOC assumptions on learning should stand. Cohort 2 were provided with repackaged Teaching and Learning materials including a Peer Education Manual, and Safeguarding and new Life Skills content incorporating COVID-19 preventive practices.

Box 2 – Outcome 2: Transition

Transition will be measured by the number of marginalised girls who have been able to move into vocational training, or safe, fairly paid employment or self-employment. The key intermediate outcome enabling this transition is the increased community and district support for inclusive girls' education. Because of the specific characteristics and needs of these girls, local ecosystems (made up of stakeholders such as local businesses, vocational training centres) that are well sensitized and prepared to accommodate the target population must be advocated for and developed. Non-Formal girls will have improved learning outcomes through the community-based ALP platform where literacy, numeracy, life skills and vocational training will be taught. At the end of the ALP, Non-Formal track girls will not be placed into the formal school system but be given livelihood options based on technical skills acquired from master craftspeople in addition to the ALP. An Income Generating Activity (IGA) fund is available for girls choosing the self-employment path.

Key changes. For both tracks, the WASH component of the Life skills curriculum will be strengthened to include COVID-19 preventive information, as well as the Sexual and Reproductive Health & Rights (SRHR) and Nutrition components. Support for girls' education at community level / sensitisations will continue as initially envisaged by the programme. As stated in the Medium-Term Response plan (MTR), to ensure that non-Formal girls receive quality vocational skills and training, Master Craftspersons are to be safely selected and recruited and trained before they are deployed back to the 111 Non-Formal Track communities to train girls. To widen the scope of

vocational training, DSPs will collaborate with the National Board for Small Scale Industries (NBSSI), National Vocational Training Institute (NVTI) and private vocational institutions who already have master craftspeople posted to communities. All DSPs will ensure that each beneficiary is given the opportunity to select a short vocational training course of her choice based on the market research conducted by STAGE. During the ALP period, learners will also be taken through financial literacy, digital literacy, using the mobile phone to transact business, accessing and using micro credit and saving products (group or individual savings), basic sales and record keeping. On GESI-specific issues, training will cover gender-related challenges in starting their business (domestic work, child care, consent from spouses and significant others, involvement of spouses and significant others etc. are barriers), and challenges related to production and working with employers.

Transition might be negatively impacted if:

- Transition support material, including bicycles and transition kits are not delivered as planned.
- Collaboration with GES and industry associations/craftspeople is not effective.
- The evolution of COVID-19 pandemic represents a too large barrier for girls' transition (through a range of adverse economic, social and health impacts on girls and their families).
- As noted in baseline Cohort 1, the main question on transition for the non-Formal track is in relation to the availability of jobs/income opportunities for the girls to transition into. There is also a risk that the economic repercussions of the pandemic further limit the availability of safe and decent employment/self-employment opportunities.
- STAGE is not able to secure linking girls with identified employment opportunities and monitor/follow up of Non-Formal transition pathways to take corrective actions where needed.

Box 3 – Outcome 3: Sustainability

3. Sustainability will be measured by demonstrating that the changes brought about by the project go beyond the initial targets. Strong and active partnerships and engagement with government, community, school, and other key stakeholders involved in girls' and inclusive education would continue reaching the most highly marginalized girls. STAGE will leverage existing programmes, organizational and community structures and policies to educate, enhance, advocate and demand accountability from all actors. For example, STAGE would continue national sensitisation efforts on the matter of inclusive education through participation in various working groups like the CBE working group, disabilityworking group under Non-Formal Education and GEC/LNGB fora. STAGE would also continue working with the non-Formal division of GES, staff from social development and Districts Assemblies and industry associations on the provision of safe and quality vocational training for non-Formal girls. Each Master craftsperson deployed to communities (a maximum of three per community) would undergo safe vetting before being trained for a day on child protection, safeguarding, GESI, disability, child labour and programme expectations and goals, among other topics. Existing GES tools, such as the Inclusive Education and Monitoring Tool are adapted to focus on marginalized girls. GES staff is involved in community mapping and animation as well. By building the capacity of GES in developing and using these tools, STAGE ensures that interventions can continue after project support ceases.

Key changes. WEI's strategy involves establishing strong relationships with a range of stakeholders to support dissemination of COVID-19 messaging from official and reputable sources to STAGE communities and beneficiaries, whilst fighting against spreading of misinformation, which could increase stigma and fear among community members. WEI and DSPs have partnered with Ghana Health Service, GES, the District Assemblies, National Commission of Civic Education, Department of Social Welfare and Community Development, the Non-Formal Education Unit, the Local Radio Stations and Traditional Authorities in the implementation of COVID-19 activities. Positive messaging is encouraged through interactive radio instructions, targeted support by the CoC, peer educators through home visits and active monitoring by the DSP Safeguarding focal points and WEI staff. In addition to the dissemination of messages discussed above, STAGE works with DSPs to procure supplies and train community members, set up areas for tippy taps and Veronica buckets and promote hand washing in all communities.

It is hoped that this action will help reduce some of the GESI-differentiated impacts of social distancing, and other restrictions to key economic, livelihoods and social activities. GESI-related risks for women, girls and marginalised communities and families such as those targeted by STAGE include: limited access to medical services for beneficiaries with specific medical conditions; loss of livelihoods for many families and women / girls engaged in livelihood activities particularly affected by suspension of gatherings (e.g. market vending and

service provision during gatherings such as funerals, weddings, church services); increased gender based violence (GBV) at home; increased levels of anxiety and depression.

Sustainability might be negatively impacted if:

- Support for girls' vocational training/employment at community level / sensitisations are not able to reduce safeguarding/GESI/COVID-19-related issues and barriers to girls' vocational training/employment, especially for marginalised sub-groups.
- Coordination with MOE, GES, GHS at all levels is not effective; capacity of government/community actors to continue ensuring STAGE girls' continued education/support to vocational training is not built; there are insufficient incentives/resources to ensure continued government/community action in support of girls' continued education/ vocational training following the end of the programme.

2. Evaluation approach and methodology

This section describes the evaluation approach and methodology for the STAGE programme evaluation, focusing specifically on the second Cohort of the STAGE Non-Formal track. As described under Section 1.1, STAGE comprises two different beneficiary tracks -Formal and Non-Formal-, with the Non-Formal track being delivered through three different cohorts. Both tracks share the same overarching Outcomes and Non-Intermediate Outcomes. Similarly, the STAGE evaluation was designed as a comprehensive programme evaluation, covering both tracks and addressing the same evaluation questions, albeit with slightly different methodologies and timelines. Synergies between evaluating the two tracks were sought in the design, particularly in the tools and the planned timelines for data collection. As such, whilst this report focuses on Cohort 2 of the STAGE Non-Formal track, the evaluation approach and methodology might refer to the Formal track and Non-Formal Cohort 1 evaluation.

2.1 Evaluation purpose(s) and evaluation questions

The purpose of this baseline evaluation is to assess the starting point of the STAGE project's key indicators (at Outcome and Intermediate Outcome level), together with assessing the relevance and plausibility of the STAGE TOC for the second Cohort of the STAGE Non-Formal track. Table 2 details the evaluation questions of the STAGE programme. There have been no changes since the inception phase of the evaluation in this aspect.

Table 2 - Evaluation questions and summary of data/analysis required to answer question

Evaluation question	Qual data/analysis required to answer question	Quant data/analysis required to answer question
1. What impact did the STAGE project have on the transition of highly marginalised girls into education/learning/training or work opportunities?	Qualitative data will identify any unintended impacts on girls.	Quantitative analysis from representative sample of girls on their transition status and learning proficiency. Project beneficiaries transition status and learning proficiency assessed at baseline and endline (and midline for Formal Track). This will allow identification of change in learning and transition status (in school, increased grade, in decent employment) Findings to be disaggregated by respondent characteristics (household and region), including marginalisation category where possible.
2. What works to facilitate transition of highly marginalised girls into education/training/employment and to increase learning?	Qualitative data will explore girls, caregivers, teachers, and other relevant stakeholders' understanding of what works for transitions.	Quantitative data produced to answer EQ1 will be analysed to look at associations between transition/learning outcomes and project activities/intermediate outcomes (attendance, quality of teaching, Life

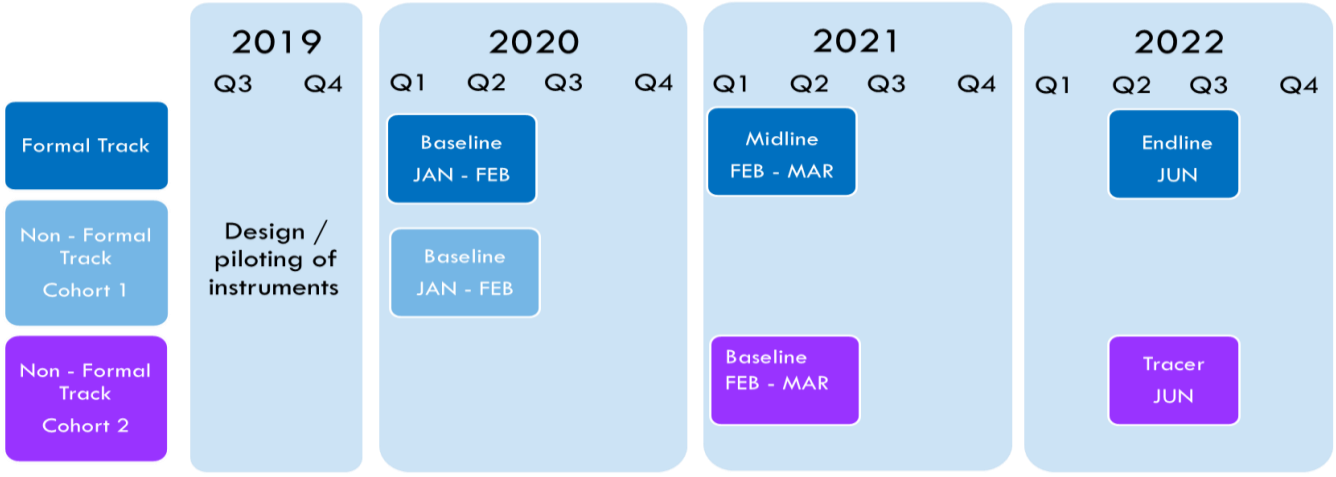
		Skills, support to family)
3 How sustainable were the STAGE activities funded by the GEC and was the programme successful in leveraging additional interest, investment, and policy change?	Qualitative Data collected at community, school, and system level to understand more about the changes in key stakeholders' attitudes and behaviours and changes in relevant agencies, budget, and actions.	Quantitative Data collected at community, school, and system level to understand quantitative changes in key stakeholders' attitudes and behaviours and changes in relevant agencies, budget, and actions.
4. How successfully did LNGB projects reduce barriers to full participation in education or vocational education for highly marginalised girls?	Qualitative data from girls, caregivers and other relevant stakeholders will seek to understand how the project reduced the barriers identified during project development. The barriers include cultural beliefs on marginalised girls' roles, household poverty, beliefs on disability, inaccessible schools and teaching methods, teacher attitudes, district level awareness and actions.	Quantitative analysis of the different outcomes achieved by girls with different marginalisation status.
5. What are the most cost effective and impactful activities implemented through the STAGE intervention which have helped girls to transition to schools and employment opportunities?	N/A	Analysis of results of EQ1 Impact, EQ2 What works, and EQ3 Sustainability against the costs of different activities. Possible calculations: ● Cost per girl enrolled in ALP/vocational training ● Cost per girl completing STAGE ALP/vocational training ● Cost per girl improving in Learning (SD 0.2) ● Cost per girl achieving appropriate of transition (see definitions below)

2.2 Overall evaluation design

The evaluation design is a mixed methods quasi-experimental evaluation as per methodology agreed in the MEL Framework. Since STAGE targets marginalised girls with special attention to those with disabilities, it is not feasible to design a randomised control trial (RCT) where some girls will be randomly assigned to the intervention and other girls will be left out of this. The quasi-experimental design, however, allows various comparative analyses. Progress at endline is considered in two ways: (1) comparing the cohorts' average scores at baseline and midline; and (for the Formal only) (2) comparing midline scores with a comparison group comprised of benchmark and previous scores, weighted to ensure comparability. Quantitative data will be used to identify relationships between variables and assess the effect of some explanatory variables on the outcomes of interest. For example, marginalisation characteristics of the target group as well as characteristics of the environment (learning space, perceived level of community support for girls' education). Qualitative data will be used to assess harder to quantify issues and build a deeper understanding of 'how and why' and 'under what circumstances' change has or has not occurred. To understand the proposed design, a visual model below shows tracking of both beneficiary cohorts (Formal and Non-Formal) over the course of the programme.

The data collection and timelines are aligned with the programme work plan. For the Non-Formal track, baseline

Figure 1 - Evaluation Timeline (Updated March 2021)



and endline for Cohorts 1 and 2 are planned at the beginning and end of the ALPs[22] (Figure 1).

Given the split implementation model of the STAGE project the design will be using a different evaluation approach for each track to best measure the impact of the interventions in the seven regions where STAGE is working. With three distinct cohorts of non-Formal track beneficiaries who will go through an ALP and transition into vocational training or employment, the original evaluation design proposed to conduct baseline and endline for Cohort 1, and baseline and tracking assessment for the girls in Cohort 2. This would enable measurement and understanding of the impact of the STAGE project on Learning and transition to work opportunities (EQ1 and EQ2):

- By evaluating the endline of Cohort 1 at the end of the ALPS and vocational training it would allow STAGE to learn about the success of its intervention on key Outcomes; and the learning can be used to improve both Cohort 2 and Cohort 3.
- Allowed for a Cross-over design such that the results of beneficiaries of Cohort 1 can be compared with the baseline of similar target group for Cohort 2.
- By evaluating Cohort 2 a year after the end of the ALPs/vocational training it would allow a year for girls to find employment, thus, sufficient time for the transition outcome to be evaluated for the non-Formal track.
- Data Collection for Cohort 1 and 2 can be timed to match the data collection for the Formal track, this facilitates cost-efficiency which then allows more data collection for the same evaluation budget.

For Cohort 1, the baseline was conducted in January/February 2020 and an endline was scheduled for September 2020. However, the evaluation timeline and structure have changed in light of the COVID-19 pandemic, resulting changes to programme implementation and shift in priorities over the use of evaluation resources. Per request of the Fund Manager and WEI, the external evaluation endline of Cohort 1 has been cancelled, and replaced with an internal project assessment. For Cohort 2, the baseline has been conducted in February/March 2021 – to coincide with the transition to school of the Formal track (midline). Currently, the

[22] These timelines are based on current knowledge of project and school timelines. These might shift due to the COVID-19 pandemic.

endline for the non-Formal track coincides with the endline of the Formal track scheduled for June 2022. Given that currently there is no scheduled external assessment for the non-Formal right at the end of the ALPs and vocational training, the endline timeline might be subject to change (see Figure 1, two bottom rows, light blue and purple boxes).

Non-Formal Cohort 1: **Baseline** - January 2020; **Endline** - Cancelled.

Non-Formal Cohort 2: **Baseline** – February/March 2021; **Tracer** - June 2022

Due to the number of communities (total of 132), multiple intervention tracks, and separate cohorts, the evaluation design will include a representative sample of communities. STAGE monitoring will be regularly collecting data from all project communities and assessing all project beneficiaries, but for the sake of the external evaluation the sampling will select a stratified representative sample of communities.

The monitoring system will also provide data for the external evaluator as they attempt to disaggregate the different elements of the intervention and how they are impacting variance within the results. Monitoring data will also be needed to report against some of the intermediate outcome indicators in the STAGE log frame.

Evaluating the link between Intermediate Outcomes (IO) and Outcomes

At Endline for cohort 1, and midline for the Formal Cohort, the status of intermediate outcomes will be measured. Associations between the samples' quantitative transition/learning outcomes and project activities/intermediate outcomes (attendance, quality of teaching, Life Skills, support given to family) will be calculated. This quantitative assessment will be complemented by qualitative analysis which will use key informant interviews and focus groups to assess and understand the link between IO and Outcomes.

Gender and Social Inclusion (GESI)

To understand GESI the evaluation will disaggregate both Learning and Transition Outcomes, together with **Life Skills Outcomes by girl's age, disability and key project identified characteristics**. Complementing this will be specific questions within the qualitative data collection to explore the experiences and potential barriers for girl's with different marginalisation characteristics.

2.3 Evaluation methodology

Data Collection Tools

The quantitative tools included: two learning assessments (Early Grade Reading Assessment and the Early Grade Mathematics Assessment); and Household questionnaire comprising sections for (1) the head of household; (2) the primary caregiver; (3) the beneficiary girl, including the Life Skills tool. The qualitative tools included: Key Informant Interview (KII) tools for all stakeholders[23], and a Focus Group Discussion (FGD) tool for girls. During baseline, three versions of the EGRA and three versions of the EGMA were designed, piloted, and assessed to ensure comparability. See Annex 11 for further details on tools and changes since Non-Formal Cohort 1 Baseline.

Data collection and analysis

Enumerators and training. For the STAGE Formal and Non-Formal Cohort 1 baseline data collection, twenty (20) enumerators were engaged by data collection partners (JEAVCO/PAB), all of whom had previously worked with JEAVCO/PAB on assignments similar to STAGE. In selecting enumerators, extra consideration was given

[23] Girls, Boys, Caregivers, Teachers, Headteachers, Local Leaders (Traditional and Religious), and Local Authority Members.

to those with qualitative data collection experience. For the Formal Midline and Non-Formal Cohort 2 Baseline, twenty-four (24) enumerators were engaged, of which 21 worked on the Non-Formal cohort 1 baseline data collection in 2020. Prior to engaging enumerators for the STAGE assignment, the data collection partner undertook pre appointment checks, including police checks.

Of the 24 enumerators, seven were female and seventeen were male. Of the 24 enumerators undertaking quantitative data collection, 10 were chosen to also collect qualitative data (8 of which had experience of doing so for the baseline of NF Cohort 1). The other data collectors selected were paired up with those with more experience to undertake the qualitative data collection for the STAGE Formal Midline and Non-Formal Cohort 2 Baseline.

Building on the training provided for the pilot and earlier baseline, all data collectors participated in a 3-day training programme. The training programme was revised and strengthened in response to data collection challenges experienced at baseline and included an introduction to the STAGE project and Evaluation Design, Data Collection tools and protocols, Quality Assurance processes, COVID-19 protocols and Safeguarding and Ethics. Additionally, simulation exercises were included for data collectors to practice administering each of the tools.

The training was delivered by the JEAVCO/PAB leads, with remote support from the IMC Worldwide Evaluation team, as in-person support was limited by COVID-19 travel restrictions). In lieu of attending in person, IMC Worldwide team recorded video presentations for training sessions and joined remotely to answer questions. WEI also contributed to training through input into training content and a member of a DSP attended the pilot training to offer input on key areas.

The training on quantitative data collection tools involved the following:

- Learning Assessments:
    - Introduction to Learning Tests (EGMA and EGRA)
    - Explanation of the types of questions and how to administer them using the survey software.
    - Enumerator practice session
    - Feedback from training team on accuracy of enumerators' recording of practice questions.
    - Piloting new questions on quantitative instruments
- Quantitative Household Survey:
    - Introduction to Household Survey and modules
    - Explanation of the types of questions and how to administer them using the survey software.

The training on qualitative data collection tools involved the following:

- Purpose of qualitative data collection;
- Good practice in qualitative data collection;
- Introduction to each tool;
- Enumerator practice session.
- Use of cohort lists for identifying girls in sample, and procedures for selecting alternates

Data Quality Assurance. Processes were reviewed and strengthened following baseline data collection.

While in the field, data collectors reported any inconsistency with the sample and tools via their assigned coordinator to the JEAVCO/PAB headquarters team. The team, including IMC Worldwide, also used a mobile platform, WhatsApp, to communicate daily and raise concerns. By raising minor concerns and responses via a shared platform, the team were able to respond to immediate concerns while also sharing knowledge with all data collectors, who may be in a similar situation or may face it later.

Quantitative data collected was submitted to the JEAVCO/PAB I.T Department on a daily basis. On receipt, the data was checked for completion, relevance (response recorded as expected) and clarifications were sought from any data collectors, as needed. Supervisors checked progress daily, specifically, the required number of persons interviewed, and a sample of the data entered. Where there was a call back from the data base administrator, the local supervisor ensured that needed corrections were made.

Additionally, the uploaded data were downloaded by the lead Quantitative specialist several times per week to identify any systemic issues with the data. This role proved important in identifying enumerator teams who were

not completing all Life Skills sections and had to return to recollect the data from several communities. It also helped to identify which teams were and were not promptly submitting data onto the secure servers.

Qualitative data collected was transcribed by enumerators and audited by groups of enumerators with the requisite language skills before submission to JEAVCO/PAB headquarters. Data Collectors were requested to share their first transcription with Field Coordinators and EE within a few days of it being collected. This was so quality could be monitored and so EE could provide timely feedback and guidance to data collectors, as needed. Subsequent transcripts were audited by enumerators and quality assured by the JEAVCO/PAB headquarters team before being submitted to IMC Worldwide for analysis. Clarifications were sought directly from enumerators, as needed.

Data collection. The data was collected through two parts: (1) the learning assessments using Tangerine software, and (2) the survey and life skills data through a Survey Solutions tool.

Quantitative data collection for both Learning tests and Household Survey took place between 15 February – 4 March 2021. Qualitative data was collected during the same time, due to the need to reduce data collection time/costs in communities, but using different data collection teams. The enumerators were assigned areas based on their language skills. All qualitative data collection transcriptions were completed by 12 March 2021.

Data cleaning and storage. Once enumerators entered data into their tablets, data were uploaded to secure servers when the tablet could access a mobile cellular network. Learning data, which was collected using the software Tangerine, were stored separately from household surveys, which were collected using Survey Solutions. The enumerator teams and the Lead Quantitative specialist undertook an iterative process of cross-checking and cleaning. Once data collection was completed, final datasets were securely downloaded and stored as encrypted files on a password-protected hard drive. Both the household survey and the learning assessments were standardised and encoded. For each beneficiary in the sample, the household survey and the learning data were matched together using their unique identification numbers. Analytical files were de-identified and names and confidential information were stored separately. In addition, the observations were matched to the original beneficiary lists used to populate the sample to ensure fidelity. When identification numbers did not match, enumerators and the data collection team were contacted for corrections.

Qualitative data was recorded using the audio record function of data collectors' phones. The data collectors worked in pairs, one recording the interview and the other administering the questions. Notes were taken where appropriate by the data collector administering the questionnaire. The data collectors then transcribed and translated the data within word documents. Enumerators audited transcriptions which were then quality assured by JEAVCO/PAB headquarters team before submission to the EE.

Data analysis. All statistical analysis was completed using the software package Stata/IC 16. Several sets of variables have specific calculation criteria described in the LNGB documentation, including how the Washington Group questions are used to create a binary definition of disability for each disability domain, and how learning assessments are to be calculated and proficiency levels set (especially treatment of correct words per minute). All requirements were followed per the LNGB Guidelines.

Qualitative transcripts were coded by the EE using Excel. Codes were based on EQs and Logframe Indicators, this allowed data to be sorted and findings identified in a way to complement the quantitative data. The EE found most of the transcripts to be of good quality, with sufficiently detailed responses. The incidence of transcripts with short responses of insufficient detail was significantly reduced compared to baseline data collection.

Adaptations for GWDs. To reduce barriers related to disabilities, only large-print materials were used for the assessments. In addition, enumerators were given instruction to repeat (and reword on repetition) instructions as necessary and as often as needed to ensure clarity. Breaks were offered to respondents at multiple points

during the interviews. To minimize burden on test-takers, skip logic was used such that students who could not complete the simpler version of a subtask were not asked to complete a more complex version.

Sampling

Quantitative Sample selection[24]

The same sampling strategy was developed for the evaluation of both the Non-Formal and Formal tracks of the project. As agreed with the Fund Manager, sample sizes of 640 were chosen for both the Formal and Non-Formal tracks.

Community Sampling: The evaluation uses a clustered sampling approach, where a representative group of communities and eight girls within each sampled community were selected randomly at baseline. Communities were selected based on their language-region pairing (see Table 3 detailing quantitative sample sizes). The languages were purposefully chosen to cover the maximum proportion of the project population and cover as many of the project's regions as feasible across the Formal and Non-Formal tracks. Note, there is an overlap in languages between the Formal and Non-Formal tracks, with six languages used across both samples. Choosing the languages with a larger proportion of the project population ensured a larger sample from each subgroup, which increases statistical power of each subgroup, and simplifies the design and analysis of the reading scores to fewer languages.

Beneficiaries who speak languages not in the sampling design and records with no region and language information were excluded from baseline sample selection (see Table 3). To ensure it would be possible to collect data from eight or more beneficiaries in each community, communities with 15 or fewer beneficiaries were excluded. Randomised community selection was stratified by region-language pairing according to the table further below.

Alternate communities were selected randomly within each language-region pairing if for any reason one of the selected communities cannot be part of the sample. They are ordered on the list to ensure that they are not chosen out of convenience. When required, alternate communities were used as substitutes after discussing with partners at baseline.

The proportions of the sample communities differ only slightly from the beneficiary makeup due to rounding.

Student Selection: At baseline, within each sampled community, eight beneficiaries were randomly selected. While eight beneficiaries from each community were identified as the intended sample, an additional eight girls were randomly selected and added to an alternates list. If a beneficiary was unavailable or refused to take part in the baseline evaluation, an alternate beneficiary was selected, in the order that they were listed on the alternate list.

Quantitative sample sizes and representativeness

As per agreed MEL framework, the sample for Non-Formal Cohort 2 is 640, designed to be proportionally representative of seven language-region groups. The actual sample size is 639. Distribution of the sample by region and language is as follows:

[24] See Annex 14 for further details on sampling.

Table 3 - Quantitate sample sizes by region and language

Language	Region	Beneficiaries		Designed Sample		Actual Sample		Difference	
		#	%	#	%	#	%	#	%
Sample									
Akuapim Twi	Eastern	354	10.93%	72	11.25%	72	11.3%	0	0%
Akuapim Twi	Oti	532	16.43%	104	16.25%	104	16.3%	0	0%
Dagaare	Upper West	365	11.27%	72	11.25%	73	11.3%	+1	0.2%
Fante	Central	674	20.82%	128	20.0%	128	20.0%	0	0%
Kasem	Upper East	281	8.68%	56	8.75%	56	8.8%	0	0%
Likpakpaaln	Northern	671	20.72%	136	21.25%	134	20.8%	-2	-0.4%
Likpakpaaln	Oti	361	11.15%	72	11.25%	72	11.3%	0	0%
All		**3,238**	**100%**	**640**	**100%**	**639**	**100%**	**-1**	**-0.2%**
Out of sample (excluded from baseline sample selection)									
Dagbani	Northern	303							
Gurune	Upper East	167							
Mampruli	North East	N/A[25]							
N/A	N/A	5							
All (In / Out of sample)		**3,714**							

The actual sample largely reflects the designed sample. The missing observations ("Difference" column in Table 3) are too few and do not skew the sample to underrepresent Likpakpaaln speakers in Northern region.While there are minor differences in the age profile of the sample and the beneficiary samples as recorded, they are not substantial. The slightly older skew of the sample may sim-ply be due the time that has progressed between the time of the beneficiary data being collected and the sample collection.

Table 4 - Sample breakdown by age

Age (adapt as required)	Beneficiaries (In sample)	Sample design	Actual sample
No Age provided (%)	0.3%	0.2%	0.0%
Age 10 (%)	0.0%	0.0%	0.2%
Aged 12 (%)	0.0%	0.0%	0.3%
Aged 13 (%)	0.0%	0.0%	0.6%
Aged 14 (%)	0.3%	0.9%	3.6%
Aged 15 (%)	16.2%	10.9%	11.9%
Aged 16 (%)	13.5%	12.3%	13.9%
Aged 17 (%)	18.0%	18.8%	13.3%

[25] There are no girls from North East, Mampruli language in the enrolment data provided for Non-Formal Cohort 2.

Aged 18 (%)	37.7%	43.4%	33.8%
Aged 19 (%)	13.7%	13.4%	19.4%
Aged 20 (%)	0.0%	0.0%	1.4%
Source: Analytical Dataset, N =	**3,238**	**640**	**639**

Table 5 - Sample breakdown by age and region

Age	Akuapim Twi (Eastern)	Akuam Twi (Oti)	Dagaare (Upper West)	Fante (Central)	Kasem (Upper East)	Likpakpaaln (Northern)	Likpakpaaln (Oti)
Under 15	2.8%	4.8%	9.6%	0.0%	1.8%	9.0%	4.2%
Age 15	2.8%	4.8%	9.6%	7.8%	17.9%	19.4%	22.2%
Age 16	12.5%	15.4%	12.3%	12.5%	10.7%	16.4%	15.3%
Age 17	19.4%	17.3%	11.0%	7.8%	14.3%	16.4%	6.9%
Age 18	43.1%	31.7%	21.9%	41.4%	39.3%	26.1%	36.1%
Age 19	19.4%	26.0%	24.7%	30.5%	14.3%	5.2%	15.3%
Over 19	0.0%	0.0%	11.0%	0.0%	1.8%	7.5%	0.0%

Given that the process of validating beneficiary data were ongoing, the sample was not designed to be proportionally representative of age, so slight variations between the age reported in the original beneficiary lists and the age in the designed sample can be noted (Table 4). This variation is small (around 5%) when considering the age groups 12-15 and 16-19, with the group 16–19 making up the large majority of the Non-Formal Cohort 2 (83.2% in the original beneficiary list and 88.0% in the designed sample). The average age of the actual sample is 17.2, virtually the same as the average age of beneficiaries (regions/languages included in the sample) at 17.1. The composition of the sample is slightly older than the age makeup of beneficiaries: 53.2% of girls in the sample are aged 18 – 19 against 51.6% of beneficiaries.

The majority of older girls (16 to 19) are in the Eastern and Central regions (94.4% and 92.2% respectively); whilst a higher prevalence of younger girls (12 to 15) is found in the Northern region (Likpakpaaln language) (Table 5 above). These trends are similar to Cohort 1.

Table 6 - Sample breakdown by disability

Domain of difficulty	Sample proportion of intervention group (%)
Seeing	0.8%
Hearing	0.8%
Walking	0.6%
Self-care	0.3%
Communication	0.3%
Learning	0.5%
Remembering	0.3%
Concentrating	0.3%
Accepting Change	0.5%
Controlling Behaviour	1.1%

Making Friends	1.1%
Anxiety	2.8%
Depression	2.5%
One disability domain (A)	5.5%
Multiple disability domains (B)	2.5%
Girls with disabilities overall (A+B)	**8.0%**
Source: Analytical Dataset, Caregiver Survey N =	639

Table 7 - Sample Breakdown of Disability by region

Characteristic	Akuapim Twi (Eastern)	Akuapim Twi (Oti)	Dagaare (Upper West)	Fante (Central)	Kasem (Upper East)	Likpakpaaln (Northern)	Likpakpaaln (Oti)
Has a disability (any)	1.4%	5.8%	1.4%	6.3%	16.1%	9.8%	16.7%
Source: Analytical Dataset, Caregiver Survey N =	72	104	73	128	56	134	72

Table 8 - Sample breakdown by frequency of Anxiety and Depression

		Daily	Weekly	Monthly	A few times a Year	Never	N
23	How often does beneficiary seem very anxious nervous or worried?	2.8%	4.5%	30.2%	39.9%	22.5%	639
24	How often does beneficiary seem very sad or depressed?	2.5%	4.4%	33.0%	39.0%	21.1%	639

Caregivers were asked the Washington Group questions about their child's ability to complete common everyday tasks and activities, such as walking 100 metres, communicate their needs, or making friends, in order to determine their level of disability among the above domains. Beneficiaries could qualify as having a disability in one or more domains. The questionnaire enquired disability severity (some difficulty in performing a task, a lot of difficulty or not being able to do a task at all). If a beneficiary had a great deal of difficulty or could not do something at all, they met the qualification of having a disability for the purposes of this evaluation and hence have been counted as having a disability in that domain in Table 7 above. For questions about anxiety or depression, reports of daily feelings of strong anxiousness or sadness qualified a girl as having a mental health disability. Prevalence of disability is calculated the percent of the sample that has one or more disability: those with multiple disabilities are not double counted. Annex 14 reports the breakdown of disability by level of severity.

Of the 639 observations with disability data, 3.9% of caregivers (of 25 girls) reported girls as having a disability other than anxiety or depression (Table 6). These disabilities include physical or socio-cognitive. The highest prevalence of reported functional difficulties is in Northern (Likpakpaaln language) and Upper East (Kasem) (Table 7). According to the 2010 Census, which did not include anxiety or depression as categories of disability, 3% of Ghanaians have a disability[26], and hence the sample is aligned with the prevalence of disability found in the general population. By disability domain, higher prevalence is found for behavioural and making friends domains (both 1.1%), seeing and hearing (both 0.8%) and walking (0.6%).

When looking at the breakdown of disability by severity (Annex 14), higher percentages of girls fell in the milder disability category (having 'some' difficulty in performing a task). This was noted particularly in the Socio-Cognitive difficulty domains: Controlling Behaviour (8.8%); Remembering and Accepting Change (8.7%); Learning (7.9%). Further, 5.7% reported having some difficulty seeing, 4.9% and 5.1% having some difficulty walking 100 yards / meters and 500 yards / meters compared to children of the same age, and 2.8% having some difficulty hearing.

Overall 4.1% are reported to suffer daily from mental health disabilities, specifically 2.8% anxiety and 2.5% depression (Table 8). Not all that experience anxiety also experience depression, and vice versa. However, the breakdown by frequency shows that a significant percentage of girls experience these feelings monthly (30.2% and 33.0% respectively) or weekly (4.5% and 4.4% respectively). Anxiety or depression appears to be significantly higher among those who have a high chore burden, but not any other characteristic. The pandemic may have affected levels of mental health, as 83.9% and 81.9% of respondents have felt anxious about the possibility of becoming infected or their caregiver becoming infected (respectively).

Qualitative sample selection and sample sizes

It was jointly agreed by the EE, WEI and the FM that three communities – across three regions – would be sufficient coverage for the purposes of the qualitative data collection[27]. To select these communities the EE firstly tried to ensure these covered a range of regions, DSPs and languages. The communities were then purposively sampled to ensure that there were: (1) enough girls in the community to ensure no overlaps with the girls being surveyed through the quantitative data (20-25 girls per community was deemed an appropriate number); and (2) enough girls from marginalised backgrounds (looking at the communities with the highest sum of girls with disabilities, mothers and married at the Non-Formal Cohort 1 baseline). From this, the EE was able to select three proposed communities, with two alternate communities each. The proposed communities were visited with no problems and are outlined in the below table.

Table 9 - Qualitative sampled communities for Non-Formal Cohort 2 baseline

Region	District	Community	Partner	Language
Oti	Nkwanta South	Gekorong	Prolink	Akuapem Twi
Eastern	Akuapem South	Obodan	ICDP	Akuapem Twi
Northern	Kpandai	Chakoli	RAINS	Likpakpaaln

[26] https://www.disabilitydataportal.com/explore-by-country/country/Ghana

[27] At baseline of the Non-Formal Cohort 1, the qualitative sample included six NF communities to get a good range of communities and DSPs (Northern – RAINS; Upper West – Pronet; Central – GRCS; Eastern – ICDP; and two in Oti - Prolink). However, the qualitative data collectors struggled to get around the full beneficiary sample. To prevent this from happening again, the EE, WEI and the FM agreed to: reduce the size of the qualitative tools; reduce the number of communities; and reduce the beneficiary sample size per group.

Within these communities, respondents were not randomly chosen. This was because in each of these communities, quantitative data was also being collected and the EE was cautious not to overburden the same girls with both sets of data collection tools. To avoid this, the EE chose its proposed girls and alternates from the end of the quantitative alternates list, whilst attempting to capture a good proportion of girls from within marginalised sub-groups (i.e. married, mothers, and disabled), where possible. The caregivers of the girls in question, were also interviewed. Boys of a similar age were randomly selected based on guidance from DSPs, local leaders chosen based on which communities visited and, similarly, the relevant local authority member that works on girls' education / vocational training was chosen.

The EE are pleased to report that the change in sampling approach worked successfully in the field, and meant that almost the full range of beneficiaries were interviewed as planned. As detailed in the table below.

Table 10 - Qualitative sample sizes for Non-Formal Cohort 2 baseline

Beneficiary Group	NF2 Baseline Sample Size	Reduction from NF1 Baseline	Reasoning Given	Sample Achieved
KII Girls	12 girls (4 girls per 3 communities)	8 girls	Reduction to allow more attention paid to each girl, but still allow some breadth.	100%
FGD Girls	3 FGDs (1 in each of 3 communities). Each FGD should aim for 5 girls	2 FGDs	Reduction mirrors the reduction in communities.	100% (15 girls total)
KII Caregivers	9 caregivers (3 per 3 communities)	6 Caregivers	Reduction necessary as only 50% of sample reached at baseline.	100%
KII Boys	9 boys (3 in each of 3 communities)	6 Boys	Reduction to allow more time with each boy. At endline, look at making this an FGD.	100%
KII Local Leaders	6 (1 religious leader and 1 traditional leader from each of the 3 communities)	4-9 Local Leaders	Reduction mirrors the new community sample.	83%[28]
KII Local Authority	3 (1 in each of the 3 communities)	2 Local Authority	Reduction mirrors the new community sample.	100%

2.4 Evaluation ethics

The evaluation ethical approach is grounded in principles based on FCDO's ethics guidance and principles, WEI's policies and procedures and local laws for the states we will operate in. A core principle is prioritising the best interest of the child and doing no harm.

Recruitment and Selection

The EE's partner data collection firm in Ghana (JEAVCO/PAB) have experience of working with children, including those with experience of high risk, vulnerable and/or marginalised girls. JEAVCO/PAB have conducted

[28] In Chakoli, only one local leader was located at the time of data collection.

pre appointment checks, including security checks for each of the twenty-four (24) enumerators engaged for the STAGE Formal Midline data collection.

Training and Data collection

In the training for the pilot, baseline and midline data collection enumerators received training on ethics and child protection. This training was informed by FCDO's ethics guidance and principles, WEI's policies and procedures and local laws for the states we will operate in. Specific content of training included the priority of Safeguarding and a child's wellbeing being paramount, the importance of gaining consent (of girls and adults), how to ask for consent, how to ensure the consent is informed in relation to questions asked and use of information, respecting respondents' right to decline/stop interviews, respectful behaviour during data collection (non-judgemental tone and body language), not taking photos, keeping data confidential, password protecting data collection devices, avoidance of raising expectations, what a Safeguarding issue is and how to report a Safeguarding issue. In addition, training included how data collection processes should be adapted in line with social distancing and other COVID-19 control measures.

All the tools were developed to ensure that questions are framed sensitively and are appropriate to the age, gender, and ability of respondents to minimise distress to children.

No **ethical issues** were reported in relation to the enumerators during the baseline data collection. The quantitative data identified only three girls that dropped out of school because of mistreatment by a teacher prior to STAGE (one of the barriers related to school). Whilst we do not condone this behaviour, we understand that corporal punishment is still a common practice in Ghana, despite being banned in recent years. Furthermore, of the few girls currently in employment (nine), one reported to feel somewhat unsafe in her job. This finding was shared with the STAGE project so that they are aware of the mistreatment by teachers reported and they will monitor closely any safeguarding issues not only for this sample of girls but for the overall intervention. See Section 5.2 for an assessment of project's activities in relation to child protection and teacher's discipline methods.

Additionally, the baseline data collection did not collect information on modern slavery and the qualitative data did not identify anyone in modern slavery or hazardous child labour. However, it was noted that the STAGE project NFT 2 community mapping data (December 2020) did identify some girls in conditions that could be classified as forms of modern slavery. From a sample of 3890 girls, 5.8% were required to work to pay off a debt, and 0.9% of them had been forced to marry. It would be helpful to understand how STAGE is safeguarding the girls that responded to these questions.

2.5 Challenges in data collection and limitations of the evaluation design

The timing of the interviews of the caregivers was a considerable challenge. The caregivers usually returned from their places of work late in the evenings, which posed a challenge to data enumeration as a result of the safeguarding protocols established. In consultation with the DSP, WEI Ghana and IMC Worldwide the decision was granted that interviews could continue beyond the stipulated time to complete an interview provided it was at the convenience of the caregiver.

There were no particular challenges relating to reluctance to answer questions, though some of the girls had to overcome the initial shyness for some questions. The challenge of the length of the questionnaire was resolved by arranging interviews at the respondents' convenience, though the length of the caregivers' questionnaire should be reviewed at endline to minimise burden on respondents coming back from a day of farming work.

There were no ethical or safeguarding issues (apart from the timing of caregivers' interviews) reported during the data collection. All the girls were assembled either at a community centre or in a school classroom and they were interviewed in turn while others waited for their turn. This is the standard process WEI has established at the community level to ensure no issues arise between visitors or staff and the girls.

Due to a mistake in coding the questionnaire, the barrier questions for the non-Formal track were only asked of girls who had left school (N=281) - not those who had never attended. This would be an issue if there were systemic differences in how girls who left school and those who never attended responded. However, the EE did some analysis and found that in the baseline Non-Formal Cohort 1, girls who left school and girls who never were in school did not have significantly different prevalence of any barrier. The values for prevalence of any single barrier are relatively similar for both groups. Also, because the prevalence of barriers is only reported among those who were asked the questions, this does not affect the findings or values in the report itself. However, one issue is that the regional disaggregation of prevalence of barriers is skewed. This is because there are some language-region groups (Likpakpaaln speakers in Oti and Northern regions) where the large

majority of girls have never been to school, and hence were not asked the barriers questions. The findings section advise that regional findings on barriers should be taken with caution. For the same reason, there are no conclusions nor recommendations specific to the regional prevalence of barriers.

There are limitations to reporting on disability and disability-related barriers. Rates of functional difficulties detected by the EE are different from those detected by the project's community mapping. Further, there is a mismatch between girls whose caregivers reported they are affected by unmet disability needs, and girls that were identified as having a functional difficulty by their caregivers. It is suggested a review of the Child Functioning Module in the survey tool (currently based on the Washington questions) for endline to better align with the project's definitions of functional difficulties.

The qualitative midline sample only collected data from three communities: one in each region. Therefore, there is a limitation on how representative these findings are.

It was not possible to disaggregate the data collected by the new categories of marginalisation identified by the Non-Formal Cohort 2 community mapping. As already flagged to WEI, these marginalisation categories and the request to disaggregate by these were only shared with the EE after the survey tools were finalised and the data had been collected. Hence, at analysis stage, the EE examined whether it would be possible to introduce new marginalisation categories based on the data already gathered. This has not been possible as the survey questionnaire was not designed/amended to collect the information required to be able to disaggregate by these new categories. The EE also notes that some of the marginalisation categories are about particularly problematic issues to have an enumerator who is not from that community enter, ask a girl these questions, and then depart without offering anything in return[29]. If WEI/FM is interested in asking these questions at the next evaluation point, there would need to be a discussion around the ethics, International Research Body clearance, accuracy, and support the EE would be able to offer respondents.

2.6 Cohort tracking and next evaluation point

The next and final evaluation point in the non-Formal track Cohort 2 evaluation is currently planned for June 2022, eight months after the end of the ALPs (tracer)[30]. The same girls in the baseline sample will be tracked with the assistance of the DSP.

[29] Questions that would be difficult for the EE's enumerator teams to ask, getting both reliable information and not causing distress to the respondent include: "has the girl been sexually harassed or abused? Did the girl run away to marry someone without telling her parents/guardians? Has the girl been forced to marry someone she did not want to marry? Has she ever experienced violence towards her in school from a boy or man?" While the EE might have been able to find some safe wording to use for some of these subjects if given before data collection, many of these topics could not be discussed in a safe way by strangers interviewing young girls.

[30] The timing of the endline for Non-Formal Cohort 2, currently set for June 2022, is about eight months following the end of the ALP. The rationale for conducting a tracer for Cohort 2 was to give some time to the STAGE girls to transition into employment or vocational training, whilst an assessment right at the end of the ALP through a planned endline for Cohort 1 would have allowed assess learning outcomes at the end of the intervention (ALP). As mentioned though, the endline for Cohort 1 right at the end of the ALP has been cancelled per request from WEI/FM. The EE and project teams have discussed whether the approach for Cohort 2 should be changed as a result, considering that as the design currently stands, there would be no outcome assessment at the end of the ALP on learning (EGRA/EGMA) and Life skills. Discussions are ongoing. The options and budget implications have been flagged to WEI/FM in the short inception report prepared prior to conducting the data collection exercise in February – March 2021 (see Annex 10). To note, as a decision has not been made yet, the learning targets for the endline have been set to a 0.15 SD increase compared to this baseline: even though we would expect a 0.2 SD improvement immediately following the programme, the long-term impacts would likely be seen lower 8 months after.

3. Findings

The following sections report key findings from the evaluation. Section 3.1 examines the prevalence of key marginalisation characteristics and barriers to education among the STAGE Non-Formal Cohort 2 girls surveyed at baseline, as well as the intersection between such characteristics and the barriers experienced. This section ends with a review of the appropriateness of the STAGE activities to the identified characteristics and barriers of beneficiaries. Section 3.2 analyses each of the STAGE three outcomes (learning, transition and sustainability), baseline results, both quantitative and qualitative. Section 3.3 presents key findings at the STAGE intermediate outcome levels.

All results are disaggregated by region/language groups, functional difficulties reported by caregivers of girls, marginalisation characteristics, and barriers as appropriate and where possible[31]. When information provided comes from monitoring data of STAGE programme/WEI, this is specified.

3.1 Key characteristic subgroups and barriers of baseline samples

Educational marginalisation

Table 11 - Characteristic subgroups overall, Non-Formal Track, baseline.

Characteristic	Proportion of sample with this characteristic
Is a mother	50.7%
Married under 15	0.16%
Married	21.1%
Lives with neither parent	21.3%
1+ hours to primary school	5.2%
Household unable to meet basic needs[32]	7.8%
Currently employed	1.4%
Employed and under 15	0.2%
High Chore Burden (Half a day or more)	33.1%
Has a disability	8.0%
Source: Analytical Dataset N = Caregiver survey	639

The most common characteristic reported by households under the Non-Formal Track Cohort 2 are being a mother (50.7% of the total sample), high chore burden (33.1%), being married (21.1%), not living with either parent (21.3%) and being impoverished (7.8%, Table 11). Only one respondent under 15 was married.

[31] To ensure individual respondents cannot be identified through the report, no reporting is done on subgroups comprised of fewer than 10 respondents; we are unable to provide more detailed subgroup reporting while respecting confidentiality. Where this is the case, it is indicated in tables through "N/A".
[32] Defined as answering Household Survey question 'PCG_5econ Please tell me which of the following phrases best suits your household situation' with '[_] 1 unable to meet basic needs without charity'

Marginalisation prevalence appears to be lower than for Cohort 1 for all subgroups except those living in remote areas (see Table 39 in Annex 8 for a detailed comparison).

Table 12 - Characteristic subgroups by region, baseline.

Characteristic	Akuapim Twi (Eastern)	Akuapim Twi (Oti)	Dagaare (Upper West)	Fante (Central)	Kasem (Upper East)	Likpakpaaln (Northern)	Likpakpaaln (Oti)
Mother	37.5%	75.0%	50.0%	70.3%	41.1%	31.6%	38.9%
Married under 15	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Married	9.7%	13.5%	51.4%	3.1%	42.9%	24.1%	23.6%
Lives with neither parent	29.2%	11.5%	41.7%	17.2%	32.1%	18.0%	12.5%
1+ hours to primary school	0.0%	0.0%	2.8%	0.0%	23.2%	13.5%	0.0%
Impoverished	0.0%	0.0%	5.6%	10.2%	14.3%	13.5%	9.7%
Currently employed	0.0%	0.0%	1.4%	0.0%	3.6%	3.8%	1.4%
Employed and under 15	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.4%
High Chore Burden (Half a day or more)	0.0%	0.0%	42.9%	2.3%	28.6%	86.1%	87.3%
Has a disability	1.4%	5.8%	1.4%	6.3%	16.1%	9.8%	16.7%
Source: Analytical Dataset N =	72	104	73	128	56	134	72

The prevalence of marginalisation subgroups varies by region/language subgroup (Table 12). Eastern and Oti regions, Akuapim Twi language show overall lower levels of marginalisation than others, even though Oti region (Akuapim Twi speakers) has the highest prevalence of mothers of all region/language groups (75.0%). Upper West (Dagaare) is relatively more marginalised in terms of demographic characteristics such as being mothers, married, and living with neither parent. In Upper West (Dagaare), Northern and Oti (Likpakpaaln language) and Upper East (Kasem) there is a higher prevalence of girls affected by high chore burden and impoverishment, and that are married. It is notable that Central region (Fante) has the second highest prevalence of mothers (70.3%), but the lowest prevalence of married girls (3.1%). The overall percentage of employed is low (1.4%), of which all are concentrated in Northern (Likpakpaaln), Upper East (Kasem) and to a lesser extent in Oti (Likpakpaaln) and Upper West (Dagaare). All employed under 15 are in Oti (Likpakpaaln). Further findings on employment are set out in Box 4 below. As seen in Table 40 in the Annex, there are intersecting levels of marginalisation. In particular, there is considerable interrelation between remote [from school], marriage, foster, and high chore burden. The strongest negative correlations in marginalisation rates are related to poverty and how beneficiaries are dedicating their time: whether they're unable to meet basic needs and whether they have a high chore burden. Lower levels of

poverty and chore burdens among cohort 2 girls may be due to differences in targeting or enrolment choices by those in the second cohort.

Box 4 – Employment

As mentioned, the girls' survey questionnaire found that only 1.4% of Non-Formal Cohort 2 girls are currently employed: nine girls overall. The percentage is even lower considering responses to the primary caregivers' survey (0.94%, six girls). This quantitative data is complemented by KIIs with the sample of 12 girls (four per each of three communities) and nine caregivers (three in each of three communities).

The evaluation enquired about some aspects of the employment of these girls, including relating to job safety and fairness of payment which are two key characteristics of decent employment (as per WEI's definition)[33]. Whilst the low prevalence of employed girls limits the representativeness of data, detailed quantitative and qualitative findings are reported in this baseline, given the specific transition outcome of the Non-Formal Cohort.

Types of Employment

- The majority of currently employed girls that responded to the question reported being self-employed (three girls), employed in household's income generating activities (one girl) and five did not know. All six caregivers that reported the girls to be employed referred that the nature of the work was self-employment. Most girls are in selling agricultural/livestock/forestry/fishery produce or for subsistence, two girls are in sales/services (vendors, domestic help/ cleaner, cook).
- The most common type of employment overall in the three communities qualitatively interviewed was farming. The majority of girls interviewed either have not had jobs or have only had experience helping out on farms, either for their caregivers or for local farmers. As girls from an FGD in Obodan (Eastern) relayed: ***"It is not common for girls this community to have work in paid employment…The only means of work the girls in this community have is carrying pineapple suckers to the farm and earn a little"***. Farming work is deemed inappropriate for girls with physical disabilities and mothers, which puts them at the biggest disadvantage within the community (according to a religious leader in Gekorong, and local authority member in Obodan). Other than farming, the service sector is the next most common employment avenue for girls, with girls reporting working at market stalls and at restaurants t.
- Types of employment for boys differ slightly to those of the girls according to the qualitative data. Whilst the majority of boys also work in farming in Obodan (Eastern) and Gekorong (Oti) boys are also reported to work as construction labourers, or as couriers/taxis in the motorcycle business ("Okada"). As a Local Authority Member from Obodan (Eastern) explained, the reason that boys' jobs are different is that ***"boys are stronger by nature, and there are manual works that girls cannot do"***. This same sentiment was echoed across multiple respondents within the three communities. As such, the boys generally have more opportunities to gain employment and relieve their financial burdens than the girls.
- Few jobs are permanent and full-time (three) and one temporary and part time. Five girls could not respond to questions on seasonality and working patterns.

Job Safety

[33] Transition to decent employment is one of the key pathways for STAGE beneficiaries in the Non-Formal track. For endline the evaluator will work with WEI to add to the survey tools any additional variables that could measure and explain decent employment as per WEI's definition.

- In terms of job safety, for the majority this is very safe (44.4%, four girls) or somewhat safe (22.2%, two girls); only in one case somewhat unsafe.
- The qualitative data found that those girls that work with their caregivers reported feeling safe whilst working. As a girl from Gekorong (Oti) said: ***"I'm very safe working with my mother"***. However, one girl from Gekorong (Oti) reports that farming is unsafe ***"since we are using tools such as cutlass and hoe, and you stand to hurt yourself anytime"***. In addition, one girl from Chakoli (Northern) reported that farming was not safe as there are ***"snakes and scorpions***.
- Generally, it was felt across all three communities interviewed that their communities do not tolerate any forms of violence against girls. As a local authority member in Obodan (Eastern) says: "***I don't think there are [safety] issues because the rights of girls are very much protected, and those that breach them are punished"***. Similarly, the local leader in Gekorong (Oti) felt that there are ***"no such issues in or community… the only issue is that the work girls are doing is hard"***. However, despite this, both girls who had experience working as waitresses previously, reported experiencing harassment at work. In Gekorong (Oti) a girl reported that customers would take advantage of her at work. Similarly, a girl from Obodan (Eastern) said that: ***"Most of the time I felt unsafe because [the customer] would always want to take advantage of you and when you complain the owner would insult you, hence I had to stop"***. So, whilst the general sense is that girls are safe and protected from violence, it is evident that violence and harassment in the workplace does occur.

Fair Pay

- Two girls felt they are paid fairly, three felt they are not, and four were not able to respond. All jobs that are paid (three) are in cash only or both cash and in kind, whilst five girls did not know what to respond.
- The qualitative data found that for those that work for their family, they are either unpaid (seeing it as part of their household responsibilities) or are paid a small amount at the discretion of their family. As a girl from Chakoli (Northern) said*: "**They do not pay us except at the end of the year, they give us a small amount…enough to buy some soap [for example]**".*
- For those that work for others, the types of employment available in the three communities interviewed are largely informal, low-paid, and insecure (paid by the day in cash with no assurance of a salary). As a girl from Obodan (Eastern) explained about the farming work: ***"The work is not secured, if you are sick, you won't be paid and also it is seasonal so when it's over, we find it difficult to earn anything"***. In addition, another girl from the same community illustrated the struggles around farm work: ***"You start work as early as 6:30am roll around 2:00pm but paid as low as 10 to 20 cedis a day… Compared to the work we do the amount we receive is very small but we do not have any option"***. Reports of a lack of options was a recurring theme among respondents. As a girl from Gekorong (Oti) said of her waitress job*: "**the payment was not enough but I couldn't complain because there was no option…you have to just appreciate what you have**".*
- In addition, few respondents commented on the difference between girls and boys pay. Whilst one boy from Obodan (Eastern) says "***there is no differences in terms of payment"*** between girls and boys, one girl from Gekorong (Oti) disagrees, saying that: ***"[Boys] are paid a bit more than the girls, as boys are stronger and can do more difficult work"***.
- In terms of support issues around payment, nothing was reported to being done in Chakoli (Northern). In Obodan (Eastern), the local authority member reports that there are byelaws around ensuring adequate payment and holding offenders to account. In Gekorong (Oti), the local authority and local leaders report that whilst they do not have any specific byelaws around this, the elders will "intervene" to ensure that girls receive payment for their work.

Economic empowerment

- Girls were also asked whether they feel they possess the skills and knowledge to do the kind of job they would like to do. The majority feels there is room for improvement, with 19.8% (127 girls) stating they do not possess suck skills and knowledge at all, and 47.9% (306 girls) stating they do to some extent.

Barriers to education by key characteristic subgroups

Table 13 - Proportion of sample affected by barriers

Barrier	Proportion of sample affected by this barrier
Economic (Work or Costs)	96.2%
Travel (Safety or Distance)	7.7%
Disability (School cannot meet disability-related needs)	16.2%
Social Norms (Disinterest by Parent/Girl)	10.6%
School (Unsafe/Teacher Mistreats/Refused Entry)	3.8%
Demographic (Age/Pregnant/Parent/Married)	6.0%
Source: Analytical Dataset Caregiver Survey: Unenrolled students: Girls no longer in school: N	281

Table 14 - Key barriers to education by characteristics subgroups

	Proportion of sample affected by this barrier					
Characteristic	Economic	Travel	Unmet Disability Needs	Social Norms	School	Demographic
Mother	96.2%	8.3%	15.9%	9.1%	3.0%	6.8%
Married	95.8%	16.7%	33.3%*	10.4%	8.3%	12.5%
Lives with neither parent	98.0%	13.7%	23.5%	9.8%	7.8%	9.8%
1+ hours to primary school	100.0%	10.0%	30.0%	20.0%	0.0%	10.0%
Impoverished	95.5%	9.1%	0.0%	13.6%	9.1%	4.5%
Currently employed	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Employed and under 15	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
High Chore Burden (Half a day or more)	97.7%	23.3%*	14%	25.6%*	11.6%*	14%
Has a disability	75.0%	25.0%	25.0%	25.0%	16.7%	16.7%
Source: Analytical Dataset Caregiver survey: Girls no longer in school: N = 281						

Table 15 - Key barriers to education by region

Characteristic	Akuapim Twi (Eastern)	Akuapim Twi (Oti)	Dagaare (Upper West)	Fante (Central)	Kasem (Upper East)	Likpakpaaln (Northern)	Likpakpaaln (Oti)
Economic (Work or Costs)	100.0%	95.8%	97.8%	92.0%	97.4%	93.8%	100.0%
Travel (Safety or Distance)	0.0%	0.0%	20.0%	4.0%	7.7%	18.8%	16.7%
Unmet Disability-related barriers	0.0%	2.1%	40.0%	6.0%	35.9%	12.5%	0.0%
Social Norms (Disinterest by Parent/Girl)	6.5%	4.2%	22.2%	8.0%	5.1%	18.8%	33.3%
School (Unsafe/Teacher Mistreats/Refused Entry)	0.0%	0.0%	13.3%	0.0%	0.0%	18.8%	0.0%

Demographic (Age/Pregnant/Parent/Married)	0.0%	2.1%	15.6%	0.0%	7.7%	12.5%	16.7%
Source: Analytical Dataset Caregiver Survey N =	37	48	46	89	39	16	6

The barriers questions focus on what obstacles are preventing girls from attending school/ education programmes. As noted under Section 2.5 Challenges, the questions were asked only to caregivers of girls who dropped out of school (N=281, Table 13), rather than all unenrolled girls (including those never been to school). Findings by region on barriers, and particularly for Likpakpaaln speakers (in Oti and Northern regions) should be taken with caution given the low numbers of girls that were asked the barriers questions in these regions out of the total of unenrolled girls[34]. Regionally (Table 15), apart from the economic barriers that affect all regions, among Akuapim Twi language speakers in both Eastern and Oti regions, and Central region (Fante speakers) there is a lower prevalence of other barriers compared to other regions. This trend resembles what observed in terms of marginalisation subgroups (Table 14).

Economic barriers to enrolment are by and large the most felt, by 96.2% of the sample (Table 13). Economic barriers (there is not enough money to pay costs of schooling and/or the girl-child needs to work, earn money or help out at home[35]) also affect almost all of girls in each marginalisation subgroup (>95%), not just the sub-group classified as impoverished. The exception is a lower prevalence of these barriers for girls with a disability (75%). This finding was supported by the qualitative data. All girls across the three communities reported that they have either never been to school, or dropped out of school, due to the financial burden. As a girl from an FGD in Chakoli (Northern) proclaimed: *"**school is important, and the teachers are nice, but it's about financial difficulties**"*. To make matters worse, at least one respondent from each of the communities reported that they had lost one, or both of their parents. As a girl from Gekorong (Oti) explained: "***I lost my father who was caring for the family, so I couldn't continue [schooling] since my mother wasn't in the position to take care of me and my other siblings**". The pandemic has exacerbated economic barriers, as 72.9% of respondents reported that household income has fallen due to the COVID-19.* Important for the Non-Formal track, all girls and caregivers across the three communities reported that girls had never been to vocational training before because they could not afford the admission fees and this was the same situation for boys. As one caregiver from Obodan (Eastern) explains*: "**the main challenge with sending my daughter to vocational training is financial problem as it is very expensive and I cannot afford it**".*

The **second most prevalent barriers** are those related to **unmet disability-related needs**[36] for 16.2% of the girls that dropped out of school (45 girls). Disability-related barriers are identified using questions distinct from the Washington Group based questions on who is considered to have a disability and identify unmet needs or

[34] The large majority of girls in Northern and Oti have never been to school (86.6% and 91.7% respectively, see Outcome 2 - Transition), and hence were not asked the barriers questions, leaving only a small percentage of girls in these regions (those that dropped out of school) that were. In other regions the percentage of girls that dropped out of school out of the total sample – and were asked the barriers questions - is higher.

[35] The questionnaire questions and codes for the Economic barrier are PCG_notenr3 [There isn't enough money to pay the costs of (name)'s schooling], and PCG_notenr4 [(Name) needs to work, earn money or help out at home]

[36] The questionnaire questions and codes for the Unmet disability needs barriers are PCG_notenr10 Lack of special services or assistance (such as speech therapist, support worker, sign language interpretation) for [GIRL], PCG_notenr11 Lack of special services or assistance (such devices/technology such as braille textbook, hearing aid, wheelchair) for [GIRL], PCG_notenr12 Lack of teachers that know how to teach a childlike [GIRL], PCG_notenr15 Inability of [GIRL] to move around the school / learning centre, PCG_notenr17 Learning programme not good for [GIRL]'s needs, PCG_notenr18, Health condition prevents [GIRL] from going to school.

absence of accommodations in the school environment. For example, 13 beneficiaries identified a lack of assistive technologies (such as braille) at their schools as a barrier for enrolment. However, only 3 of the 13 girls qualified as having a disability according to the Washington Group questions. Upper West (Dagaare) and Upper East (Kasem) are largely driving up the overall incidence, with 40% and 35.9% of the sample in both regions experiencing these obstacles. While those who qualify as having a disability (as reported by their caregivers) drive the majority of this barrier, it is notable that many do not qualify as having a disability using the Washington Group questions. For example, 31 caregivers of GWDs report a lack of special services, such as a speech therapist, support worker, or assistive technology, serve as a barrier to enrolment. Disability barriers are significantly higher for married girls: one third of married beneficiaries report a disability-related barrier, as opposed to 11.8% of those not married. This is primarily driven by unmet services (such as speech therapists and support workers) and assistive devices (see Table 40 in Annex 8 for detailed results). 87% of married beneficiaries reporting disability-related barriers do not qualify as having a disability according to the Washington Group questions. While the significance level is appearing among those who are married, it may be a result of them being mothers: 84.4 percent of married beneficiaries are mothers. It may very well be that the assistive devices or support they are not receiving are those for pregnant girls or mothers. It is unclear why these barriers would not show up as strongly among unmarried mothers. The qualitative data cannot help contextualise this, as no respondents from the qualitative data reported that they had disability needs that prevented them attending school. As mentioned in Section 2.3, a small number of girls present a physical or cognitive disability that could require special services or assistance and overall, the prevalence of girls with a disability, including mental health, is 8%. At the same time, travelling to school might well be challenging for girls living in remote areas that present even a mild form of physical, socio-cognitive or mental health difficulty.

Still, it should be noted that girls with disabilities are particularly disadvantaged as the lack of opportunities other girls face is compounded for them, and there is often a lack of knowledge in what employment alternatives there are.

The third most common barriers relate to social norms[37] (10.6% of girls that dropped out of school), including the perception that school does not help in finding a good job and disinterest in education by caregiver or girl child. Specifically, almost all responses relate to a disinterest of the girl in going to school (8.9%). Those with a high chore burden (25.6%*) and living in remote areas (20%) particularly experience these barriers, as well as girls with a disability (25%). This is perhaps linked to the belief that household work is more important than education, or that education is not worthwhile for a girl that lives far away from school or has a disability. The need to prioritise housework over other activities might represent a challenge the programme needs to take into account if transition to further vocational training and/or safe and decent employment is to be achieved. It is also interesting that the social norms barriers affect to a higher extent different subgroup in the non-Formal track than in the Formal track: in the former, it is girls living in remote areas, affected by high chore burden and a disability that are most affected; in the latter, it is those who are married, mothers, and employed. Regionally, it is mostly Likpakpaaln speakers in Oti and Northern regions, and Upper West that drive up results for these barriers, where also by and large most girls affected by high chore burden are located. Likpakpaaln (Northern) also has the second highest prevalence of girls living in remote areas, suggesting this is a subgroup to consider attentively in this region. The qualitative data have only one instance of a girl (from Obodan, Eastern) reporting that their household responsibilities stopped them attending school because in order to afford it financially it meant she ***"had to sell things in the morning before I could go to school"***. In addition, all qualitative respondents' caregivers were supportive of them gaining an education, just that they could not afford it as previously mentioned.

[37] The questionnaire questions and codes for the Social Norms barriers are PCG_notenr24 [(Name is not interested in going to school] and CG_notenr26 [Perception that school does not help in finding a good job].

For a smaller percentage of girls (7For a smaller percentage of girls (7.7%), **travel-related issues**[38] represent an obstacle to enrolment, especially the lack of transport options to go to school, and distance to school being too large (see Table 41 in Annex 8 for specific reasons for citing these barriers). Most girls experiencing this are located in Upper East and Likpakpaaln speaking regions (Northern and Oti). From the qualitative data, only one girl from Gekorong (Oti) said that they could not attend school due to the distance being too far. A lack of transport options might particularly affect girls with a disability (a quarter of which experience travel barriers). Interestingly, girls living in remote areas experience travel barriers substantially less than other subgroups, such as girls with high chore burden or who are married. This suggests that house work and family duties make the distance to school, or the time needed to get to school when no transport is available more prohibitive than for girls that actually live further away. Findings from the Formal midline reveal that it is possible to overcome travel related obstacles to enrolment through targeted actions to reduce high chore burden and provide travel options. The same might be achieved for encouraging transition to further vocational training and/or decent employment for non-Formal girls.

In relation to demographic barriers[39] (child too old, not mature enough, pregnant, a mother, married, see Table 32 in Annex 8 for details), these are mostly felt by girls with a disability (16.7%) and girls with a high chore burden (14%). As found in the midline qualitative data, when girls are married, they are more likely to be considered by caregivers to be too old to attend school. It is interesting that mothers are less likely to experience this barrier than married girls, or girls living with neither parent. It might be that mothers living with their family receive help in child care. Becoming pregnant represents a risk to continuing education. For example, one interviewed girl from Obodan (Eastern) reported that she dropped out of school as *she "**got pregnant along the way**".* A girl from Gekorong (Oti) reported the same.

School-related barriers[40] are only felt by 11 girls that dropped out of school, of which three reported experiencing instances of being mistreated in school previous to STAGE (see Table 43 in Annex 8 for a breakdown by reason for citing the barrier). The majority of respondents who reported experiencing this barrier did so in relation to feeling unsafe in school. Those with a disability, affected by high chore burden and impoverished experience these barriers at a higher prevalence than other subgroups (16.7, 11.6* and 9.1% against 3.8% of the out of school girls). Whilst no qualitative respondents reported any problems with the schools or teachers, one girl from Obodan (Eastern) said she dropped out of school as she was *"**academically weak and was always teased by friends in school**"*.

Appropriateness of project activities to the characteristic subgroups and barriers identified

The STAGE project considers all of the main characteristic of sub-groups identified in the baseline data. It is evident that STAGE has considered the recommendations of previous education evaluations in Ghana. This section examines key findings by barrier and subgroup, linking these to STAGE activities intended to address

[38] The questionnaire questions and codes for the Travel barriers are PCG_notenr5 [It is unsafe for (name) to travel to/from school], PCG_notenr7 [Distance to school is too large], PCG_notenr8 [No one available to travel with (name) to/from school], PCG_notenr9 [No transport available to go to school].
[39] The questionnaire questions and codes for the demographic barrier are PCG_notenr19 [(Name) is too old to attend school], PCG_notenr20 [(Name) is not mature enough to attend school], PCG_notenr23 [(Name) has a child or is about to have a child], PCG_notenr22 [(Name) is married or about to get married]
[40] The questionnaire questions and codes for the Issues with School barriers are PCG_notenr6 [It is unsafe for (name) to be in school] PCG_notenr13 [Child says teachers mistreat her at school], PCG_notenr14 [(Name) was refused entry into the school], PCG_notenr15 [Toilets at school / learning centre are not usable], PCG_notenr27 [Instances where child says they are mistreated/bullied by other pupils].

the needs of the most marginalized girls. For the Non-Formal track, this is mostly in relation to transition to further vocational training, and/or employment.

The main barriers to educational attendance are economic, felt by almost all girls in each marginalisation sub-group. The qualitative data found that caregivers and girls could not afford vocational training fees, even if it has been acknowledged in the qualitative interviews that non formal education could equip girls for transition into employment. Specific reasons for citing economic barriers relate not only to a lack of resources to pay for education, but also to the need for working/helping with house chores. The analysis of subgroups and barriers also revealed that girls with high chore burden are amongst the subgroups most affected by economic, social, travel and demographic barriers. Qualitative data also revealed instances of girls being employed in housework or farming work for their caregivers. The STAGE Non-Formal track has interventions to address economic-related barriers, e.g., free ALP classes and vocational training, provision of fund for Income Generating Activities for those who choose to do so, and dissemination of useful information such as on farming subsidies available. However, a key risk to monitor might relate to the transition into vocational training and/or employment/self-employment of girls that have dropped out of education because of high chore burden, housework and/or being employed (not necessarily paid as shown by the data) with their families.

The second most common barriers related to unmet disability needs, with those married and living in remote areas most affected, followed by those with a disability. As most responses on these barriers relate to a lack of special services or assistance (such devices/technology such as braille) and lack of special services or assistance (speech therapist/support worker), STAGE should follow up on provision of, or facilitation of, access to special services and assistance, including referral for specialised care including health insurance enrolment. It is also positive that STAGE intends contributing towards national sensitisation efforts on the matter of inclusive education through participation in various working groups like the disability working group under GES Non-Formal Education.

The third most common barrier is in relation to social norms, largely relating to a disinterest in girls going to school. Those with a high chore burden, living in remote areas, or with a disability are most affected by these barriers. STAGE has numerous interventions to change social norms towards girls' education at household, community and school levels. The EE felt that both the home visits and continuous sensitisation were appropriate for tackling this, given both the time required for social norms to change, and the likely recurring challenges and decision points that households will face throughout the project. The inclusion of boys and husbands in this intervention will be of continued importance. CoC home visits to encourage families/husbands to be supportive of mothers and married girls' education should continue; though it noted that changing social norms requires a likely longer time than STAGE lifespan and concerted efforts from government stakeholders as well. Regarding the girls with high chore burden, sensitisation of caregivers on the importance of continued education for this subgroup is an appropriate activity, as found in the Formal track midline evaluation. Specific to the Non-Formal, GESI training of facilitators, but also craftspeople; and specific Life Skills modules on gender-related challenges in starting businesses and working with employers are considered appropriate.

Closely behind this, were the travel-related barriers. It is good to see that STAGE plan to facilitate travel for the non-Formal track girls to vocational training. However, at midline for the Formal Track, qualitative and quantitative data showed that almost no bicycles had been delivered. As such, when for Non-Formal Cohort 2, STAGE must ensure that travel is facilitated as planned to girls living in remote areas to ensure girls successfully transition to vocational training. Girls from sub-groups that typically struggle the most with this issue are those that live far away from their school; mothers, married and currently employed. Lastly, the programme should confirm whether there is appropriate support for girls with a disability preventing them from travelling to ALPs or vocational training.

In relation to demographic barriers, these are mostly felt by girls with a disability, married, and girls with a high chore burden. For these subgroups, their situation is practically harder to navigate because their responsibilities and disabilities are unlikely to be fully alleviated by any intervention. However, addressing issues relating to social norms (i.e., the role of married girls) by for example encouraging families/husbands to be supportive of girls' education is one good way that STAGE tries to alleviate this barrier. STAGE peer educator training given to boy peer educators should continue[41]. The MTR also mentions support for teenage mothers in negotiating for caretakers during lessons. It would be interesting to know more about this activity and whether its extended to girls in vocational training. Beyond that, it will be important to discuss with participants and identify the timings when they can attend training (though the burdens should hopefully be reduced through awareness raising on gender roles). In terms of prevention of teenage pregnancy and child marriage, awareness raising activities with caregivers and community need to address the issue of 'pregnancy inevitability'. The partial resignation by caregivers/community leaders that girls will get pregnant was reported as influencing the willingness of caregivers to invest in their girl-child.

Both girls and their caregivers are **supportive of girls vocational training and gaining decent employment** based on the qualitative and quantitative data noted under IO4.1 (Section 3.3), which is positive to see. The fact that STAGE is giving girls the opportunity to attend vocational trainings will be a great help in itself as qualitative respondents either did not know of any vocational training before STAGE, or they said the training centre was too far away. As girls from an FGD in Gekorong (Oti) said: ***"Having professionals to train us in vocations is not common in our community so you have to go to another place which the long distance"***. Similarly, a caregiver from Obodan (Eastern) reported that "***getting quality vocational training in this community is another factor, and you have to send the girls to the city to get the best out of them"***.

STAGE interventions to address the barriers faced by this track (economic, travel, social norms and high chore burden) **suggest that girls will be supported in a transition to additional vocational training or further education**. It is also positive the involvement of NBSSI, NVTI and private vocational institutions professionals who already have master craftspeople posted to communities in the provision of additional vocational training. A key challenge will be addressing the learning and attendance barriers that seem to face girls with disabilities. The STAGE project has activities in these areas.

A question remains around how realistic it is to expect that after the end of the ALP/vocational training, girls will be able to **transition to decent and fair employment, or sustainable self-employment**. The STAGE project addresses this through the provision of a variety of options for girls in terms of jobs to train in based on market availability and interest (including jobs traditionally for men), support options for her transition (e.g. grants for income generation), and DSPs linking girls with interested employers and businesses. For those who choose self-employment, it will be important for STAGE to work with girls to help make an informed decision on how to use their grant (this could include business plan development).

The availability of income generation / employment opportunities remains a key assumption; as is STAGE ability to be able to link girls with employment opportunities. The market research conducted by WEI[42] at baseline Cohort 1 contained a good range of research (with vendors, at markets, with microfinance

[41] Including on respect for girls, taking responsibility for contraception and SRH related to contraception.
[42] WEI conducted the below market research:
1. A set of questionnaires/ Focus Group Discussion was carried out by STAGE to engage stakeholders- Private, public, and community leaders and parents to elicit information on viable opportunities; 2. Focus Group Discussions with Girls; 3. Face to face orientation with Master Craftspeople/ NBSSI/NVTI to educate girls on opportunities; 4. The STAGE facilitators, supervisor, and COCs will lead a group of beneficiary girls to markets, vendors, artisans in their communities to see what people are selling to determine the viability of such ventures and community needs; 5. DSPs will further conduct FGDs and KIIs with the girls, parents, community leaders, business owners, local government reps (assemblymen), microfinance companies, other NGOs; 6. A list of the

companies, craftspeople, business owners), though evaluation data on employment under Section 3.1 (though based on a limited number of cases) illustrate job opportunities in girls' communities can be limited. More information is needed from STAGE project on the transition results and lessons learned observed with Non-Formal Cohort 1; any updates to the market assessment, especially following COVID-19 and its likely negative labour market impacts; more information on detailed ways /mechanisms for STAGE to support girls' transition to employment/self-employment and monitoring of this key pathway.

It will be important for the STAGE team to regularly monitor the status of the opportunities and be able to both seize opportunities when they come or adapt to explore alternative opportunities when initial plans no longer hold (for example, potential employers decide not to offer jobs, or change in the market related to one job). It will also be important for the STAGE team to make sure girls with disabilities have options (suitable for both physical and mental disabilities) and sensitise employers to ensure they are also more knowledgeable on what is possible.

3.2 Outcome findings

Learning outcomes

Results from baseline – Numeracy

Table 16 - Foundational numeracy skills[43]

Categories	Mean	SD	Non-learner 0%	Emergent learner 1%-40%	Established learner 41%-80%	Proficient learner 81%-100%
Number Id.	49.9	28.6	3.6%	38.1%	47.3%	10.8%
Missing Numbers	26.7	22.7	20.7%	60.6%	16.6%	1.9%
Addition 1	49.4	28.6	6.1%	32.5%	45.1%	16.0%
Subtraction 1	39.5	24.3	9.7%	44.7%	40.5%	4.7%
Addition 2	26.4	28.7	40.8%	35.8%	15.9%	7.4%
Subtraction 2	22.2	27	48.2%	33.9%	12.4%	5.3%
Word Problems	54.7	30.1	27.9%	23.7%	25.7%	22.4%
Overall Score	**36.0**	**23.3**				
Target score	**39.53**					
Source: Analytical dataset: EGMA N = 636						

The overall score for foundational numeracy skills at baseline is 36.0[44] (Table 16). The target score (39.53) for the Non-Formal is based on a 0.15 SD increase by the next evaluation point (in June 2022)[45].

identified livelihood opportunities in the selected community will be generated by DSPs; 7. Beneficiaries will select their proposed vocational skills areas based on the findings from this research.

[43] Literacy and Numeracy Skills reporting follows the GECT Midline Report Template Final document. Means are reported as the mean percentage of items answered correctly. The four benchmark categories report the percentage of students that fell into each category, by subtask.

For the numeracy categories, most girls scored in either the Non-learner or Emergent learner classifications in Missing numbers, Subtraction 1, Addition 2 and Subtraction 2. A relatively high percentage of girls scored in the Established Learned category for Number Id and Addition 1 questions. For World Problems, slightly less than half score in the higher categories. This is thought to be a result of their use of verbal numeracy skills in their daily lives.

There does not appear to be a ceiling effect in the EGMA numeracy tests as there are few girls scoring 81%+ (proficient learning) overall, however, it is noted that in Addition 1 a relatively high percentage of girls score in the highest category (16%). See Annex 8, Table 44 for detailed subtask scores by region.

Results from baseline – Literacy

Table 17 - Foundational literacy skills[46]

Categories	Mean	SD	Non-learner 0%	Emergent learner 1%-40%	Established learner 41%-80%	Proficient learner 81%-100%
Letter Sounds	17.7	17.1	19.5%	70.6%	9.4%	0.5%
Familiar Words	13.2	20.5	52.9%	35.8%	9.3%	1.7%
Oral Reading Fluency	12	22.8	69.1%	20.1%	8.3%	2.4%
Reading Comprehension	14.2	28.0	74.9%	11.5%	10.4%	3.3%
Writing	20	27.1	49.9%	32.3%	11.9%	5.7%
Overall Score	**15.4**	**20.6**				
Target score	**18.49**					
Source: Analytical dataset: EGRA N = 637						

The overall score for foundational literacy skills at baseline is 15.4[47] (Table 17). The target score (18.48) for the non-Formal is based on a 0.15 SD increase by the next evaluation point (in June 2022, see under numeracy for the rationale) on a 0.15 SD increase by the next evaluation point (in June 2022, see under numeracy for the rationale). Scores are reported in two forms: as means, and as the percentage of learners that fall into each of four achievement categories, specified by the LNGB Report Template. For the subtasks Letter Sounds, Familiar words, reading comprehension, and Writing, the four categories are non-Learner (those who obtain zero scores); Emergent Learner (scoring 1-40% of items correctly); Established Learners (scoring 40.1%-80% correctly); and

[44] See Table 45 in Annex 8 for a detailed comparison with numeracy scores for Non-Formal Baseline Cohort 1.
[45] As mentioned under Section 2.5, the learning and Life Skills targets for the endline have been set to a 0.15 SD increase compared to this baseline: even though we would expect a 0.2 SD improvement immediately following the programme, the long-term impacts would likely be seen lower after 1.5 years. 0.2 SD increase per year of schooling is recommended by the LNGB guidance. The ALPs are nine months long, though they are accelerated programmes. Additionally, results from the Formal midline show improvements in learning outcomes well beyond the 0.2 SD increase a few months after the end of the ALP. Hence, the EE believes a 0.15 SD increase for June 2022 to be a realistic target.
[46] Literacy and Numeracy Skills reporting follows the GECT Midline Report Template Final document. Means are reported as the mean percentage of items answered correctly. The four benchmark categories report the percentage of students that fell into each category, by subtask. The only exception is Oral Reading Fluency, which is reported as the average correct words per minute read (CWPM). Oral Reading Fluency are broken down into non-learner: 0-5CWPM; Emergent: 6-44CWPM; Established: 45-80CWPM; Proficient: 80 or more CWPM.
[47] Slightly lower than the overall baseline score for Non-Formal Cohort 1 (15.9). see Table 48 in Annex 8 for a detailed comparison

Proficient Learners (scoring 81% or more correctly). Oral Reading Fluency is calculated as the correct number of words per minute (cwpm) read in a story, meaning that the mean score of 12.0 is also the mean correct words per minute read. Per LNGB Report Template, the four guidelines are broken into non-Learner (0-5cwpm); Emergent (5.1-44 cwpm); Established (45-79 cwpm); and Proficient (80 or more cwpm).

As for Non-Formal Cohort 1 baseline, most girls obtained zero scores for all subtasks except for letter sounds where 70.6% of girls could read between one and 40 letters. In Writing, many more were unable to write any words (74.9% against 43%), whilst the opposite is noted for reading comprehension. The percentage of girls with zero scores fell from 59.7% at baseline to 49.9% at midline. Oral reading fluency is the second most challenging task (69.1% in the non-Learner category). There does not appear to be a ceiling effect for the Non-Formal EGRA literacy tests because there is not a significant percentage of girls scoring in the Established learner category; and while there appears to be a minor floor effect, it would not be possible to adjust for it, as the assessment already measures the most basic of preliteracy skills. See Annex 8, Table 46 for detailed subtask scores by region.

Characteristic subgroup analysis of the learning outcome

Table 18 - Learning scores by key characteristic, subgroups and barriers

	Average literacy score	Average numeracy score
All girls	**15.4**	**36**
Disability subgroups:		
Any Disability	15.3	34.4
Seeing	N/A	N/A
Walking	N/A	N/A
Hearing	N/A	N/A
Self-Care	N/A	N/A
Communication	N/A	N/A
Learning, Remembering, and Concentrating[48]	N/A	N/A
Accepting Change, Controlling Behaviour and Making Friends	N/A	N/A
Mental Health (Anxiety)	11.4	26
Mental Health (Depression)	13.3	36.2
Mental Health	11.5	28.9
Project specific subgroups:		
Mother	13.5	37.3
Married	18.9	39.8

[48] The three disability combined categories are calculated as averages of the three categories per the LNGB Template

Lives with neither parent	17	37.8
1+ hours to primary school	28.5*	47.6
Impoverished: Unable to meet basic needs without charity	22.5	43.7
Currently employed	N/A	N/A
Employed and under 15	N/A	N/A
High Chore Burden (Half a day or more)	16.2	30.9*
Barriers		
Economic (Work or Costs)	21.8	46
Travel (Safety or Distance)	24.6	52.1
Disability (School cannot meet needs)	32.3	59.6*
Social Norms (Disinterest by Parent/Girl)	26.8	44.8
School (Unsafe/Teacher Mistreats/Refused Entry)	N/A	N/A
Demographic (Age/Pregnant/Parent/Married)	35.5	61.4
Age		
Age 12 to 15	14.1	30.1
Age 16 to 19	15.5	37.2
Languages (Regions)		
Akuapim Twi (Eastern)	5.3*	22.5*
Akuapim Twi (Oti)	11.6	31.2
Dagaare (Upper West)	20.7	46.1*
Fante (Central)	14	43.5*
Kasem (Upper East)	43.7*	72.1*
Likpakpaaln (Northern)	16.8	29.6*
Likpakpaaln (Oti)	3.7*	16.9*
Source: Analytical Dataset EGMA (N=637); EGRA (N=636); Caregiver survey: Unenrolled: Girls no longer in school (N=281)		

The learning scores across most marginalisation subgroups are higher than mean scores for the overall Non-Formal Cohort 2 group, except for girls with a disability, mothers (for literacy) and high chore burden (for numeracy, significant result at 30.9, Table 18). Whilst girls with any disability are just slightly below the mean score, it is girls with anxiety and depression - particularly anxiety – that score substantially lower. This confirms the findings from baseline for Non-Formal Cohort 1 and Formal track. Girls living in remote areas score substantially higher than the mean (for literacy, significant results, 28.5*; for numeracy, 47.6). Girls from impoverished households are the second subgroup that scored the highest on both tests (22.5 and 43.7). By age, younger girls perform below average especially in numeracy (30.1 against 36).

There is substantial regional variation across EGRA and EGMA scores (Table 18). Girls from Upper West, Central and Upper East regions exhibit higher than average scores, for numeracy all results are significant. It is notable that numeracy tests for Upper East (Kasem) are double than the mean score (72.1*). As for baseline Cohort 1, results for Likpakpaaln and Akuapim Twi speakers in Eastern, Oti and Northern regions tend to drive down the average. The lowest performing region/language groups in both tests are from Oti (Likpakpaaln, 3.7* and 16.9* for literacy and numeracy) and Eastern (Akuapim Twi, 5.3* and 22.5* for literacy and numeracy). In all regions but Upper East (Kasem) it is the EGMA subtasks Missing numbers, Addition 2 and Subtraction 2 where the scores are below the overall average by region (see Annex 8 for detailed breakdown). In all regions but Upper East (Kasem), the EGRA subtasks where performance is lower than the overall average are Writing, Oral reading fluency, Familiar words, with some variation in the other subtasks (see Annex 8, Tables 45 and 46 for a detailed breakdown). The distribution of results from numeracy tests across regions is more similar than for

literacy. It is worth noting that literacy assessments across languages should not be directly compared, as mastering an alphabet or phonics in one language may take longer than doing so in another. Kasem speakers score higher on both literacy and numeracy at baseline. Kasem speakers have similar levels of barriers and and meet similar characteristics of other groups. One possible reason why they have higher scores at baseline is that those in Kasem are more likely to have some schooling. While overall 53.4% of beneficiaries have never attended school, only 25% of those in who speak Kasem never attended. Only 3 beneficiaries in Kasem were currently enrolled.

Transition outcome

Table 19 - Transition pathways Non Formal Track

Please describe the possible transition pathways for this group	Aim for girls transition for next evaluation point	Aim for girls transition level by the time project stops working with cohort
Girl gains decent employment (fair wage and safe working conditions)	Girl gains decent employment/ self-employment (fair wage/ income and safe working conditions)	Girl gains decent employment (fair wage and safe working conditions)[49] Note – the STAGE project works with each Non-Formal Cohort for 9 months. After 9 months it is not expected that all girls will have gained decent employment/self-employment. However, it is hoped that evaluating Cohort 2 a year after ALP completion/vocational training will enable sufficient time for most of the girls to transition.

Sub-group analysis of the transition outcome

Table 20 - Transition Status by subgroups, regions

	Never been to school	No longer in school	Currently enrolled in formal school
All girls	53.4%	44.5%	2.1%
Disability subgroups:			
Any Disability	62.7%	31.4%	5.9%
Seeing	N/A	N/A	N/A
Walking	N/A	N/A	N/A
Hearing	N/A	N/A	N/A
Self-Care	N/A	N/A	N/A
Communication	N/A	N/A	N/A

[49] WEI reported adopting the ILO definition of "decent employment": "Decent work sums up the aspirations of people in their working lives. It involves opportunities for work that is productive and delivers a fair income, security in the workplace and social protection for families, better prospects for personal development and social integration, freedom for people to express their concerns, organize and participate in the decisions that affect their lives and equality of opportunity and treatment for all women and men".

Learning, Remembering, and Concentrating	N/A	N/A	N/A
Accepting Change, Controlling Behaviour and Making Friends	N/A	N/A	N/A
Mental Health (Anxiety)	88.9%	11.1%	0%
Mental Health (Depression)	75%	25%	0%
Mental Health	76.9%	23.1%	0%
Project specific subgroups:			
Mother	47.2%*	52.2%*	0.6%
Married	61.1%	38.2%	0.8%
Lives with neither parent	55.2%	44%	0.7%
1+ hours to primary school	69.7%	30.3%	0%
Impoverished: Unable to meet basic needs without charity	40%	56%	4%
Currently employed	N/A	N/A	N/A
Employed and under 15	N/A	N/A	N/A
High Chore Burden (Half a day or more)	75%*	23.4%*	1.6%
Age			
Age 12 to 15	65%	32%	2.9%
Age 16 to 19	51.2%	46.9%	2%
Languages (Regions)			
Akuapim Twi (Eastern)	48.6%	51.4%	0%
Akuapim Twi (Oti)	53.8%	46.2%	0%
Dagaare (Upper West)	26.8%*	64.8%*	8.5%*
Fante (Central)	29.1%*	70.1%*	0.8%
Kasem (Upper East)	25%*	69.6%*	5.4%
Likpakpaaln (Northern)	86.6%*	12.6%*	0.8%
Likpakpaaln (Oti)	91.7%*	8.3%*	0%
Source: Analytical Dataset Caregiver survey N = 639			

The table above shows that over half of the non-Formal sample has never been to school (53.4%). A small percentage, mostly in Upper West (Dagaare) and Upper East (Kasem) is reported to be currently enrolled in school. In terms of regional differences, the noticeable outliers are the subgroups Likpakpaaln speakers, in both Oti and Northern regions, where the great majority of girls have never been to school (91.7% and 86.6%, results are significant). In both regions the large majority of girls are affected by high chore burden (87.3% and 86.1%). The subgroup Likpakpaaln in Oti region particularly has also scored the lowest in both numeracy and literacy tests. A high percentage of girls living in remote areas has never been to school (69.7%) and the same is observed for girls with high chore burden (75%*, significant), married and girls living with neither parent (61.1% and 55.2% respectively). The findings from the qualitative data all supported these as barriers to education (in relation to barrier analysis, see Section 3.1). See Annex 8, Table 49 for the breakdown of girls no longer in school by age and grade.

Sustainability outcome

Table 21 - Sustainability indicators

	System	Community	Learning space
Indicator 1:	Extent that the district assembly support girls'	% of parents of marginalised girls who	Extent that parents can access vocational training

	education / vocational training / employment Baseline status = 1	support girls' education/ employment opportunities Baseline status = 2	support within their district for their children with disabilities Baseline status = 1
Indicator 2:	Extent that MOE/GES/NFED promote inclusive gender sensitive education in their district/region through monitoring and coaching using the STAGE Coaching Tool. (SCT) Baseline status = N/A	Extent that key community leaders power holders support girls' education/ employment opportunities Baseline status = 0	N/A (only 1 indicator for school)
Indicator 3:	Extent that NFED/ Ministry of Education (MoE) adopts the STAGE curriculum for ALPs to support non-Formal education programming in Ghana Baseline status = N/A	Extent that parents can access services within their district for their children with disabilities Baseline status = 1	N/A (only 1 indicator for school)
Baseline Sustainability Score (0-4)	**1**	**1**	**1**
Overall Sustainability Score (0-4, average of the three level scores)	**1**		

System Level

Indicator 1: Extent that the district assembly support girls' education / vocational training / employment

At baseline, the qualitative data findings found that Local Authority Members vocally support education, vocational training and decent employment for girls, however, they were not able to give many clear examples of how they give support beyond infrequent visits to vocational training centres (see Section 3.3, IO4.3).

Therefore, a score of 1 is given because whilst local authority officials seem to support the project, they lack the needed capacity and policies/structures. WEI expects that engagement with District Assemblies in the future will yield results after the Assemblies have received the common fund.

Indicator 2: Extent that MOE/GES/NFED promote inclusive gender sensitive education in their district/region through monitoring and coaching using the STAGE Coaching Tool. (SCT)

It was reported by the STAGE team that the MOE/GES/NFED are not yet using the STAGE Coaching Tool. This situation can be expected at the start of the project. Therefore, a score of N/A is given.

Indicator 3: Extent that NFED/ MoE adopts the STAGE curriculum for ALPs to support non-Formal education programming in Ghana.

Similarly, whilst the STAGE curriculum has been shared with the CBE Steering Committee for their inputs and further discussions, feedback has not been received. As such, at baseline the NFED/ MoE have not yet adopted the STAGE curriculum for ALPs to support non-Formal education programming in Ghana. Again, this is expected at the start of the project and, therefore, a score of N/A is given. WEI note that the committee has not met since late 2019, partly due to a change in Director's and perhaps due to the Government of Ghana's inability to fund the programme consistently. If this remains to be the case, and considering COVID-19 disruptions, it seems unlikely that the CBE steering committee will adopt the STAGE curriculum before the endline data collection.

Community Level

Indicator 1: % of parents of marginalised girls who support girls' education/employment opportunities.

The baseline quantitative data found that 67.1% of the sampled caregivers showed key knowledge, understanding, and a basic level of supportive attitude towards girl's education. This was echoed in the

qualitative data as all caregivers interviewed across the three communities wanted their girls to gain education and employment, and saw vocational training as a pathway towards secure employment. The majority of the girls interviewed verified this (see Section 3.3, IO4.1 for more detail). Further, it was found that 49.3% are *actively* supporting girl's education[50]. Therefore, a score of 2 is given.

Indicator 2: Extent that key community leaders power holders support girls' education/ employment opportunities

This indicator is to be reported through qualitative data as per log frame, however questions to assess aspects of community support have been inserted in the EE survey (see Section 3.3, IO4.2). The EE found that only 10.9% of caregivers reported that community leaders spoke quarterly or more frequently in support of girls' education, and that only 4.2% and 4.8% of caregivers said that action was taken in support of girls remaining in school and out of school girls being enrolled. This was supported by the qualitative findings. Based on the survey and qualitative data, a score of 0 is given (Community leaders show no/ very limited support for project approach or may even reject it). The large regional variation is noted in the detailed findings under Section 3.3.

Indicator 3: Extent that parents can access services within their district for their children with disabilities

The survey asked whether girls with disability (lots of difficulty in performing a task or cannot do at all) receive support from the government in relation to this. Of the 19 responding caregivers of beneficiaries who would qualify for government support as identified through the survey Washington questions[5152], only five said they can access support (one girl receives financial support from District Assembly, three girls obtained access to vocational training support and one received Other support). Therefore, a score of 1 is given. See Annex 8, Table 50 for a detailed breakdown. There was no qualitative data to support or deny this finding. It is noted that either the EE survey questions or the scoring for this indicator need to be reviewed for endline as currently the reporting is inconsistent[53].

Learning Level

Indicator 1: Extent that parents can access vocational training support within their district for their children with disabilities

Out of 19 responding caregivers, 3 said they can access vocational training support (3 out of 5 that receive some kind of support for disability). There is no target or description of the scoring for this indicator in the logframe. The EE assigns a scores of 1 based on the same rationale for Indicator 3 at Community Level.

[50] Active support is defined as meeting all of the following conditions: i) key knowledge, understanding, and a basic level of supportive attitude towards girl's education (measured through positive responses to the following survey questions: 1. Do you think [GIRL] has a right to education even though she is not in school?; 2. To what extent do you agree that "even when funds are limited it is worth investing in a girl's education?; 3.To what extent do you agree "a girl is just as likely to use her education as a boy?); ii) Active support: 1. Caregivers did not say any of the following were acceptable reasons for a child not to attend school: child needs to work, child needs to help at home, child is married, child is too old, child unable to learn, education is too costly, child is a mother; 2. When asked, girls stated that chores, work supporting home economic activities, or working in a family business were not a reason keeping her from enrolling in school or a vocational education programme

[51] Not all disability domains were asked this question, specifically for some cognitive disability domains (accepting changes, controlling behaviour, making friends) and mental health (anxiety and depression).

[52] For those using an aid to walk (seven), the question on support received was also asked to caregivers of girls with a mild difficulty in walking (2), or no difficulty at all (1). Questions on disability will be reviewed at endline.

[53] The scoring in the logframe is based on the frequency of parents being able to access services (from no access to accessing services most of the time); however the survey only asks whether they access services or not. Further, the indicator does not specify what is the minimum threshold of parents that need to report accessing some kind of support (whilst the survey measures the percentage of parents accessing support out of all girls with severe disability).

3.3 Key Intermediate outcome findings

Intermediate Outcome 1 - Attendance

Table 22 - IO indicator 1.1 Attendance

IO indicator	Sampling and measuring technique used	Who collected the data?	Baseline level	Target for endline	Will IO indicator be used for next evaluation point? (Y/N)
1.1 Attendance rates of girls	100% of sample Measured by ALPS register	STAGE / DSPs	N/A	85%	Y
Main qualitative findings					
No qualitative findings collected at baseline for this indicator					

Table 23 - IO indicator 1.2 Barriers to Attendance

IO indicator	Sampling and measuring technique used	Who collected the data?	Baseline level	Target for endline	Will IO indicator be used for next evaluation point? (Y/N)
1.2 Extent that girls, caregivers, teachers and school leaders feel the support received helped reduce the barriers to regular attendance	N/A	N/A	Not measured at baseline	Actual	Y
Main qualitative findings					
No qualitative findings collected at baseline for this indicator					

Target

To note that logframe indicates as a target for next evaluation point an improvement on baseline, however this indicator is not measured at baseline.

Intermediate Outcome 2 - Quality of teaching

Table 24 - IO indicator 2 Quality of teaching

IO indicator	Sampling and measuring technique used	Who collected the data?	Baseline level	Target for next evaluation point	Will IO indicator be used for next evaluation point? (Y/N)
2.1 % of Girls that agree that their facilitator was effective at the learning centre 2.2 Extent that teachers/ facilitators apply inclusive gender-sensitive education 2.3 % of facilitators who demonstrate effective literacy/numeracy instruction	N/A	N/A	Not measured at baseline	75% 75% 75%	Y
Main qualitative findings					
No qualitative findings collected at baseline for this indicator					

Intermediate Outcome 3 - Life Skills

This section presents summary and detailed results for the two Intermediate Outcome Indicators: 3.1 Life Skills index score and 3.2 Extent that caregivers perceive positive changes in girls' Life Skills. The methodology for life skills for Indicators 3.1 and 3.2 is detailed in Annex 13.

Girls Foundational Life Skills

The Life Skills Index is based on the Life Skills Tool used to assess beneficiary girls[54]. It has various questions according to six topics:

1. Environment
2. Money Management
3. Gender Based Violence
4. Water, Sanitation, and Hygiene (WASH)
5. Sexual & Reproductive Health and Rights
6. Self-awareness, including
    a. Self Confidence
    b. Self-Efficacy
    c. Self Esteem

The questions related to these topics were coded into three Leave No Girl Behind (LGNB)-prescribed categories:

1. **Agency.** Whether or not girls feel able to make a strategic life choice based on what she thinks is desirable or possible.
2. **Attitudes**. What are the mindsets girls have towards a topic and the set of beliefs and values they hold at baseline about what is desirable?
3. **Knowledge**. What is the knowledge girls have about the topic?

The Index was calculated as a 0-100 scale.

Table 25 - IO indicator 3.1 Life Skills Index score

IO	IO indicator	Sampling and measuring technique used	Who collected the data?	Baseline level	Target for endline	Indicator used for next evaluation point.
3 Number of marginalised girls supported by GEC with improved Life Skills (Non-Formal Track)	3.1 Life skills index score	Same sampling as Learning Test and HH Survey	EE	67.1	65.0 (target from Logframe) EE recommends 69.6	Yes

[54] The structure and nature of the questions used regarding self-confidence and self-esteem were suggested by the FM due to their use in other studies and seeming external validity. There is likely to be a data limitation in that – as noted by the project - there is a high likelihood of desirability bias with these questions: respondents are very likely to interpret them as having a preferred answer, resulting in a high percentage of agree and strongly agree responses. The Life Skills Index, by its very nature as an index, is an artificial construct that is meaningful when compared to itself (at future evaluation points). Our analysis suggests that: it measures a wide range among the respondents; higher values are better; and there are no floor or ceiling effects. However, not more can be said until we have multiple evaluation points. All this considered, it should be noted that: i) Life Skills are commonly measured through self-reporting; ii) if the level of desirability bias is the same at each evaluation point, it is possible to use these questions to measure progress. Whether this is true or not is unknown, as respondents may be less swayed by desirability bias as they get older. The evaluator acknowledges the weaknesses of these sets of questions but deferred to the FM's suggestion to use them.

Table 26 - Life Skills Baseline Results Index

Categories	Mean (out of 100)	SD	Non-learner 0%	Emergent learner 1%-40%	Established learner 41%-80%	Proficient learner 81%-100%
Environment	59	15.6	0.3%	12.5%	81.7%	5.5%
Money Management	73.7	30.8	6.9%	10.5%	19.4%	63.2%
Gender Based Violence	77.4	26.2	5.5%	4.4%	29.9%	60.3%
WASH	77.3	15.6	0.6%	3.1%	46.8%	49.5%
Sexual & Reproductive Health Rights	49.3	27.4	11.3%	22.2%	54.1%	12.4%
Self-awareness (Agency)	65.8	12.3	0.0%	2.2%	83.9%	13.9%
Self Esteem	61.8	9.1	0.0%	0.0%	94.4%	5.6%
Self Confidence	88.3	14.4	0.0%	0.2%	32.0%	67.9%
Self-Efficacy	62.4	26	2.2%	18.6%	51.0%	28.3%
Overall score	67.1	16.5				

Sources: Analytical Dataset: Girls' Combined Survey (N=639)

Table 27 - Life Skills Baseline Results – LNGB categories

Categories	Mean	SD	Non-learner 0%	Emergent learner 1%-40%	Established learner 41%-80%	Proficient learner 81%-100%
Self-Awareness (Agency)	65.8	12.3	0.0%	2.2%	83.9%	13.9%
Attitudes	48.7	18.9	5.9%	14.2%	77.6%	2.2%
Knowledge	64.4	22.4	0.0%	15.3%	53.7%	31.0%
Caregiver's Assessment	77.3	12.6	0.0%	0.9%	65.2%	33.9%

Source: Analytical Dataset: Girls' Combined Survey (N=639)

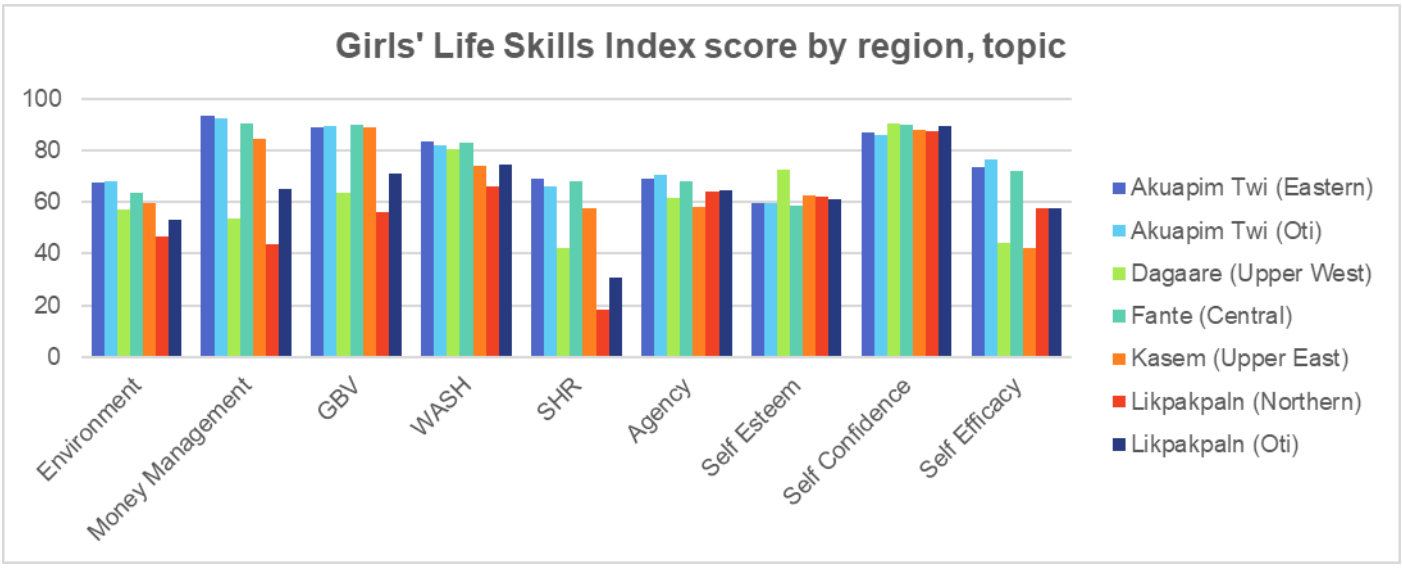


Figure 2 - Girls' Life Skills Index score by region, topic

Table 28 - IO indicator 3.1 Girls' Life Skills by key characteristic subgroups, barriers and region

	Average score
All girls	**67.1**
Disability subgroups	
Any Disability	56.6*
Seeing	N/A
Walking	N/A
Hearing	N/A
Self-Care	N/A
Communication	N/A
Learning, Remembering and Concentrating[55]	N/A
Accepting Change, Controlling Behaviour and Making Friends	N/A
Mental Health (Anxiety)	54.6*
Mental Health (Depression)	47.5*
Mental Health	52.7*
Marginalisation characteristics	
Mother	72.4*
Married under 15	N/A
Married	67.5
Lives with neither parent	71.3*
1+ hours to primary school	66.2
Impoverished: Cannot meet basic needs without charity	69.2
Currently employed	N/A
Employed and under 15	N/A
High Chore Burden (Half a day or more)	59.1*
Barriers	
Economic (Work or Costs)	72.1
Travel (Safety or Distance)	67.1
Disability (School cannot meet needs)	65.2*

[55] The three disability combined categories are calculated as averages of the three categories per the LNGB Template

Social Norms (Disinterest by Parent/Girl)	69.2
School (Unsafe/Teacher Mistreats/Refused Entry)	N/A
Demographic (Age/Pregnant/Parent/Married)	69
Age	
Age 12 to 15	53.5*
Age 16 to 19	70.7*
Language (Region)	
Akuapim Twi (Eastern)	78.7*
Akuapim Twi (Oti)	78.1*
Dagaare (Upper West)	59.8*
Fante (Central)	77.3*
Kasem (Upper East)	70.6
Likpakpaaln (Northern)	49.2*
Likpakpaaln (Oti)	59.9*
Source: Girls Life Skills (N=639); Caregiver survey: Unenrolled: Girls no longer in school (N=281)	

Main findings

The overall Life Skills score is 67.1 (Table 25). A target of 69.56 is recommended for endline (based on 0.15 SD improvement per year, after one and a half year since baseline). All girls from all three communities interviewed for the qualitative data felt they had good qualities and necessary life skills. The majority citing *"hard work", "respect"* and *"obedience"* as signs of good qualities. As girls from an FGD in Chakoli (Northern) said: ***"girls here have good character because they respect their elders"***. Though this is not the case with all girls, as girls from an FGD in Gekorong (Oti) said*: "**girls in this community are hardworking and willing to do anything to support their families, though there are some girls who are lazy and disobedient to their families**".* This basic level of understanding on life skills is expected at baseline before any specific life skills teaching has been administered.

The high average scores on money management (73.7, Table 26) are complemented by the qualitative data, as all girls from all three communities reported being responsible looking after what little money they have and saving when possible for emergencies. Several of them use susu boxes (community savings banks). As one girl from Obodan (Eastern) representatively explains: ***"I use my money very wisely. If you don't plan how to spend your money, you will always fail. I also use a susu box for saving money in case of emergencies"***. It is worth noting that they money they look after is all personal earnings or allowances, rather than their household finances more broadly.

Non-Formal Cohort 2 girls performed poorly on knowledge of sexual and reproductive health (49.3, Table 26). It is appropriate that the STAGE Life Skills course has a module on SRH and it is recommended that this module is introduced as early as feasible in the Life Skills course (the STAGE team may feel that due to its sensitive nature that SRH should not be the first module). Even if not directly comparable, it is worth noting that midline results for the Formal Cohort highlighted little improvement in SRH since baseline.

The subgroups of those with a high chore burden or a disability performed lower than the overall average (59.1*, 61.8 and 56.6* respectively, Table 28). For girls with a disability, the same trend is noted as in learning, of girls with mental health issues performing lower than the overall group of girls with a disability; in this case, particularly for depression (47.5*). Mothers performed above average (72.4*). This is likely explained by the difference in age between mothers and non-mothers (18.4 against 17.2) and the fact that Life Skills results are higher for older girls (results are significant). Impoverished girls scored above average; the same trend was noted for learning scores.

Regionally, the Non-Formal sub-group speaking Likpakpaaln in Northern and Oti regions reported a mean score of 49.2* and 59.9* respectively, lower than elsewhere. For example, these two region/language groups report the lowest scores in SHR, GBV and environment (Figure 2). Further, Life Skills scores by region seem to be consistent with Learning Outcomes results whereby the Likpakpaaln speakers in Oti scored poorly compared to

others in both literacy and numeracy, and in numeracy only in Northern. It is worth remembering that Northern and Oti have the highest prevalence of girls that are affected by a high chore burden.

Data also highlights that unmet disability needs can negatively impact on Life Skills scores; however it is unclear the reason for this, considering the barriers analysis under Section 3.1. It might be related to the need for supporting girls with anxiety and depression, given they are perhaps the most vulnerable group as emerged from the findings throughout.

The self-awareness score is mostly in line with the average Life Skills score (slightly lower), with self-confidence driving the overall average up. When the qualitative data prompted specifically on confidence, interviewed girls views varied in their views[56]. In Chakoli (Northern), all girls reported a lack of confidence when speaking publicly, as one of the girls explained: ***"I am not confident at all. When I find it difficult to speak in public, and my heart beats fast talking to someone I don't know"***. Their caregivers had positive views on their confidence however, as described in the below section.

Target

The EE recommends setting targets at 0.2 standard deviations (SD) increase over the baseline mean per year of schooling/treatment. For this indicator this would mean the target after nine months of ALP should be 69.6[57].

Caregivers' Life Skills Assessment

Caregivers' perceptions of girls' acquisition and utilisation of life skills is an average score of caregivers' opinions (marked on a five-point Likert Scale from Strongly Disagree to Strongly Agree) on 10 questions covering topics including environment, WASH, personal hygiene, pregnancy and money management among others).

Table 29 - IO indicator 3.2 Caregiver assessment of girls' Life Skills

IO	IO indicator	Sampling and measuring technique used	Who collected the data?	Baseline level	Target for midline / endline	Indicator used for next evaluation point.
3 Number of marginalised girls supported by GEC with improved Life Skills (Formal Track)	3.2 Extent that caregivers perceive positive changes in girls' Life Skills	Same sampling as Learning Test and Household Survey – see section 4.4	EE	77.3	EE recommends 79.2	Yes

Table 30 - Relative Frequency of Caregiver Response to questions on their girl's Life Skills

Introduction to each question – "To what extent do you agree that [girl's name] ….	SA	A	N	D	SD	Mean at baseline
Knows how to look after the environment and keep it clean?	43.5%	53.6%	2.7%	0.2%	0.0%	4.4
Knows how to spend money sensibly?	32.4%	58.1%	6.6%	2.9%	0.0%	4.1

[56] This was not found to be different for boys, with mixed levels of confidence and shyness amongst them too.
[57] (Baseline value =) 67.1+0.15* (SD =) 16.52

Knows about the dangers of violence that women face?	23.2%	63.4%	9.1%	3.9%	0.3%	3.9
Knows good water and sanitation hygiene - how to wash her hands before eating and after the toilet, to only drink clean water?	31.3%	63.6%	4.4%	0.6%	0.0%	4.2
Knows about women's menstruation, use and cleaning of sanitary pads?	26.2%	62.4%	6.9%	3.7%	0.3%	3.8
Knows about how women get pregnant and how to avoid getting pregnant?	23.1%	62.1%	8.0%	5.3%	1.0%	3.7
Knows about sexually transmitted diseases and how to avoid sexually transmitted diseases?	16.6%	60.6%	12.1%	7.4%	2.1%	3.4
Feels she has good personal qualities and is a person of value?	17.3%	71.4%	9.1%	1.5%	0.3%	3.8
Is confident expressing her feelings and opinions and talking in front of others?	17.8%	62.2%	10.9%	8.5%	0.2%	3.7
Source: Analytical Dataset Caregiver survey N=639						

Figure 3 - Life Skills Caregiver's assessment by region, topic

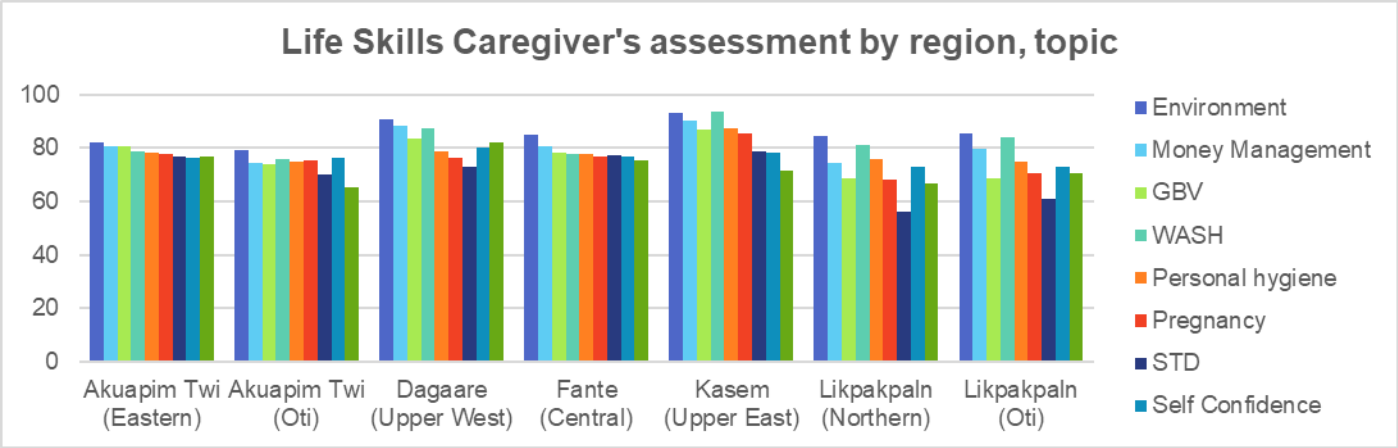


Table 31 - IO indicator 3.2 by key characteristic subgroups, barriers and region

	Average score
All girls	**77.3**
Disability subgroups	
Any Disability	73.7
Seeing	N/A

Walking	N/A
Hearing	N/A
Self-Care	N/A
Communication	N/A
Learning, Remembering, and Concentrating[58]	N/A
Accepting Change, Controlling Behaviour and Making Friends	N/A
Mental Health (Anxiety)	69
Mental Health (Depression)	68.9
Mental Health	70.2
Marginalisation characteristics	
Mother	80.2*
Married under 15	N/A
Married	84*
Lives with neither parent	81.2*
1+ hours to primary school	78.4
Impoverished: Cannot meet basic needs without charity	84.4*
Currently employed	N/A
Employed and under 15	N/A
High Chore Burden (Half a day or more)	76.4
Barriers	
Economic (Work or Costs)	81.3
Travel (Safety or Distance)	85.8
Disability (School cannot meet needs)	86.7*
Social Norms (Disinterest by Parent/Girl)	85.2
School (Unsafe/Teacher Mistreats/Refused Entry)	N/A
Demographic (Age/Pregnant/Parent/Married)	86.8
Age	
Age 12 to 15	69.4*
Age 16 to 19	78.6*
Language (Region)	

[58] The three disability combined categories are calculated as averages of the three categories per the LNGB Template

Akuapim Twi (Eastern)	78.8
Akuapim Twi (Oti)	73.9
Dagaare (Upper West)	82.4*
Fante (Central)	78.5
Kasem (Upper East)	85.1*
Likpakpaaln (Northern)	73.4*
Likpakpaaln (Oti)	74.3
Source: Caregiver Survey (N=639); Caregiver survey: Unenrolled: Girls no longer in school (N=281)	

Main findings

The above results suggest that Caregivers have high levels of confidence in their girlchild's Life Skills in all areas (Tables 29 and 30) and in relation to all sub-groups (Table 31)[59], even though less so for girls with mental health issues, particularly anxiety. This latter result is consistent with the findings under Indicator 4.1 (see below), whereby less caregivers of girls experiencing daily anxiety feel that it is equally viable to invest in a girl's education as a boy's education even when funds are limited. There is a lower level of confidence in the knowledge of sexually transmitted diseases (3.4/5). By region, confidence levels are lower for Likpakpaaln speakers in Northern and Oti regions (significant for Northern, 73.4*) and Oti region (Akuapim Twi language, 74.3). Northern region (Likpakpaaln) also shows the lowest confidence levels among caregivers in girls' STD knowledge (Figure 3). See Annex 8, Table 53 for a detailed regional breakdown by question.

Regarding the qualitative findings, caregivers across all communities most commonly cited *"hardworking"* as their girls' best quality, followed by *"confidence", "honesty", "obedience"* and *"cleanliness".*

When prompted specifically on **money management**, caregivers across the three communities were also complimentary of their girls' money management skills, generally agreeing that when they are given any money, they take good care of it, and somehow even manage to save and be generous with others too. As a caregiver from Obodan (Eastern) proudly stated: ***"she is a good saver of money. Even the little I give her she still saves and even comes to the aid of younger ones when they are in need. She also accounts for the collections given by children's services without missing a penny, so I am proud of her"***. A caregiver in Gekorong (Oti) also talks of how she entrusts her girl with money for groceries and meal preparation: ***"I only give her a little to feed the whole family, but she manages to work with it without complaint, and trust me her meals are the best"***.

When prompted specifically on **confidence,** caregivers felt their girls were confident. Whereas, in Obodan (Eastern) and Gekorong (Oti), girls reported high levels of confidence. As a girl from Gekorong (Oti) said: ***"I speak very well in front of people with no shyness. I even participate in church activities"***, *and* girls in Obodan (Eastern) said similar. Notably, speaking and singing in church was commonly listed as a demonstration of girls' confidence, both among girls and their caregivers. For example, a caregiver from Obodan (Eastern) said: ***"my daughter has confidence because she is the chorus leader in church and leads the Sunday school children"***. Additionally, a caregiver from Gekorong (Oti) reports of how she ***"first thought she was that shy type but was proven wrong when I saw her participate in a drama show where she was the leading character"***.

[59] Caregiver means are calculated on a scale of 1-5, with 5 being Strongly Agree and 1 being Strongly Disagree.

Lastly, one caregiver in Chakoli (Northern) notes that whilst her girl has good qualities, ***"I hope ALP will build on their life skills"***. Whilst it is still early days in the STAGE intervention some caregivers from the same community report that ALPs classes are helping already, as one said: ***"There is a lot [of life skills] because of the programme. There is some kind of personal hygiene among the girls and their confidence is higher"***. Another caregiver from Chakoli (Northern) said: ***"[Now] they believe they have to bath, as when they compare themselves to those who don't go to ALP classes, they look better"***. Whilst this sample is too small to make any conclusions from, these are positive early signs on the usefulness of ALPs classes.

Target

The high baseline scores may make improvements in this indicator difficult to measure. The EE recommends setting targets at 0.2 standard deviations (SD) increase over the baseline mean per year of schooling/treatment. For this indicator this would mean the target after nine months of ALP should be 79.2[60].

Intermediate Outcome 4 - Community-based attitudes and behaviour change

Table 32 - IO indicator 4.1

IO indicator	Sampling and measuring technique used	Who collected the data?	Baseline level	Target for endline	Indicator used for next evaluation point.
4.1 % of caregivers who feel it is equally viable to invest in a girl's education as a boy's education even when funds are limited	Same sampling as Household Survey Question PCG_32g (Strongly agree or agree)	EE	80.3%	EE recommends 85% Logframe says +50% on BL	Yes

Table 33 - IO indicator 4.1 by key subgroups, barriers and region

	Average score
All girls	**80.3%**
Disability subgroups	
Any Disability	56.9%*
Seeing	N/A
Walking	N/A
Hearing	N/A
Self-Care	N/A
Communication	N/A
Learning, Remembering and Concentrating[61]	N/A

[60] (Baseline value =) 77.3+0.15* (SD =) 12.60

Accepting Change, Controlling Behaviour and Making Friends	N/A
Mental Health (Anxiety)	50%*
Mental Health (Depression)	62.5%
Mental Health	50%*
Marginalisation characteristics	
Mother	83.3%
Married under 15	N/A
Married	66.7%*
Lives with neither parent	75%
1+ hours to primary school	63.6%
Impoverished: Cannot meet basic needs without charity	92%
Currently employed	N/A
Employed and under 15	N/A
High Chore Burden (Half a day or more)	56%*
Barriers	
Economic (Work or Costs)	91.2%
Travel (Safety or Distance)	77.8%
Disability (School cannot meet needs)	89.5%
Social Norms (Disinterest by Parent/Girl)	88%
School (Unsafe/Teacher Mistreats/Refused Entry)	N/A
Demographic (Age/Pregnant/Parent/Married)	78.6%
Language (Region)	
Akuapim Twi (Eastern)	95.8%*
Akuapim Twi (Oti)	99%*
Dagaare (Upper West)	90.3%
Fante (Central)	97.7%*
Kasem (Upper East)	67.9%
Likpakpaaln (Northern)	56.4%*
Likpakpaaln (Oti)	51.4%*

[61] The three disability combined categories are calculated as averages of the three categories per the LNGB Template

Source: Caregiver Survey (N=639); Caregiver survey: girls no longer in school (N=281)

Main findings

Baseline data shows that a high percentage of caregivers feel it is equally viable to invest in a girl's education as boy's education, even when funds are limited (Tables 32 and 33). By and large, fewer caregivers of girls with a disability f it is equally viable to invest in girl's education as boy's education than other groups (significant, 56.9%*), with the average driven further down by caregivers of girls with daily anxiety (significant, 50%*). Another subgroup with less support for education than average is girls with high chore burden - as it would be expected (56%*) – and girls that live far away from primary school (63.6%). Interestingly, support is widespread from caregivers of girls from impoverished households (92%). For those that are married, living with neither parent and those experiencing demographic barriers, support is also lower than average, whilst the opposite is true for mothers (83.3%). As the demographic barriers were particularly reported by caregivers of girls that are married or about to get married, this suggests this group should be targeted for interventions to increase community, particularly family and husbands' support.

There is much less support for girls' education in the Northern region, Likpakpaaln speakers in Northern and Oti regions (56.4%* and 51.4%*) where a higher prevalence of girls with high chore burden can be found with respect to the overall average. Support is particularly high in regions with overall lower prevalence of marginalised girls (Akuapim Twi, both regions) and Central (Fante). As Oti (Akuapim Twi) and Central (Fante) also have the highest prevalence of mothers, by far, disaggregation analysis would seem to suggest that being a mother is seen less as a reason for not supporting education in the same way as for boys than being married or having high chore burden.

Findings from the quantitative data on high support for girls' education were also supported by the qualitative findings. All caregivers across all regions reported that they want their girls to be educated and vocationally trained, and the main reason they have not been able to so far is down to lack of finances The girls across communities confirmed this too, as one girl from Obodan (Eastern) explained: ***"It is their wish to push me to the top and reach my dreams, but the means to support is not there"***. Vocational training is also valued as highly as education amongst the majority of caregivers, as one caregiver from Gekorong (Oti) made clear: ***"I think vocational training is very important for this community and the country as a whole and is as equal as formal education"***.

The general sense is that vocational training is a pathway to more secure employment and income. As a caregiver from Chakoli (Northern) illustrates: "***When you are trained, you can get income at any time because your service will always be needed, but when you do not have handwork [trade/craft] then you are a nobody***". Similarly, a caregiver from Obodan (Eastern) says that: ***"learning a vocation is important as we pineapple farming will not be available at all times because it is seasonal***". Interestingly for a few of the caregivers across the three communities, vocational training is seen as a second chance for success for those who have not made it through formal education. One caregiver from Chakoli (Northern) makes this clear when they say: ***"our expectation is that those who cannot send their child to school should try to send their child to vocational training"***. Equally, a caregiver from Obodan (Eastern) claims that ***"vocational training is very important… because we cannot all be in school, and so others need to be doing different things, like seam stressing"***.

In addition, the majority of caregivers claim that there is no difference between their support for girls and boys and claim that ***"vocational training is useful to girls as well as boys"*** (Caregiver from Obodan – Eastern). However, in Chakoli (Northern), two caregivers say that girls should be prioritised above boys for vocational training, partly due to the fact that they have less employment opportunities within the community (See Employment under Section 3.1). As one caregiver from Chakoli said vocational training ***"is good for boys and girls but I will say girls should be considered first"***. Another caregiver from Chakoli contextualises this further when they said that***: "it is different because boys can do any dirty job to get money, but girls are not strong enough, so vocational training will be important for girls specifically."***

The lower prevalence of support for girls' education at baseline suggests that there is room for improvement on this indicator for some sub-groups (High chore burden, married, living with neither parent) and for Likpakpaaln speakers particularly. Support for girls' education is a core assumption of the project and it needs to be tracked to see if the high level of support remains.

In addition, it must be carefully considered whether the reasoning given behind the support for girls' education is not just embedded in gender norms, which place a dual-burden on the girls to provide both financial and reproductive support to their families and the community at large.

Target

The logframe target of +50% on baseline for endline is impossible, given the starting point. EE recommends 85%.

Table 34 - IO indicator 4.2

IO indicator	Sampling and measuring technique used	Who collected the data?	Baseline level	Target for endline	Indicator used for next evaluation point.
4.2 Extent that religious and traditional leaders actively mobilise households to support excluded girls into education.	Same sampling as Household Survey Question PCG_34g2[62]	EE	10.9%	EE proposed: 20% Logframe: +50%	Yes

Table 35 - Community support for girls' education

Question	N	Responses					
Have leaders in your community spoken out in support of girls' education?		**Yes**	**No**	**Don't Know**			
Overall (Caregiver)	639	19.2%	35.2%	45.6%			
How often?		**Weekly**	**Monthly**	**Quarterly**	**Once a year**	**Never**	**Don't know**
Overall (Caregiver)	639	1.6%	5.0%	4.4%	2.7%	40.9%	45.5%
On which occasions have they spoken out in support of girls' education?		**During religious/ community meetings**	**At home visits**	**Both**	**Don't know**		
Overall (Caregiver)	639	17.7%	1.1%	0.3%	80.9%		
Have they taken action to support girls to remain in school?		**Yes**	**No**	**Don't Know**			
Overall (Caregiver)	639	4.2%	30.4%	65.4%			
Have they worked to ensure more out of school girls are enrolled?		**Yes**	**No**	**Don't Know**			
Overall (Caregiver)	639	4.8%	30.4%	64.8%			
Do you feel supported by your community in your education?		**Yes, very much**	**Yes, a little**	**No**	**Don't Know**		

[62] Responses to question: PCG_34g2: How often (have leaders in your community spoken out in support of girls education? Quarterly or more frequently (monthly, weekly).

Overall (Girls)	639	8.1%	38.8%	13.8%	39.3%		

Main findings

Only a minority of caregivers reported leaders speak in support of girls' education (19.2%), as expected prior to the project intervention much lower than results observed at midline for the Formal Track (Table 35). There are large regional variations, with very few Akuapim Twi speaking caregivers (Eastern and Oti region) and Fante speaking caregivers (Central region) reporting speaking in support of girls education takes place (1.4%*, 2.9%* and 7.8%* respectively, results are significant). Overall, only 10.9% stated that this happens on at least a quarterly basis (Table 34 and 35), mostly during religious and community meetings. Again, large regional variation is observed, with 77.8%* of caregivers stating this happens on at least a quarterly basis in Central region (Fante) and 48% in Oti (Likpakpaaln); and, conversely, none in Oti (Akuapim Twi) and around 2.5% in Upper West (Dagaare) and Eastern (Akuapim Twi). An even smaller percentage of caregivers observed action being taken by community leaders to encourage girls to remain in school or to enrol. Of the 30 open responses from the survey, slightly over half (17 respondents) say that leaders have taken action towards maintaining girls enrolled in school by encouraging/advising/talking to girls about the importance of education; four have mentioned leaders either advise or help girls in finding handiworks/work opportunities or to get into non formal education; six also mention provision of material help (financial resources, books, free educational resources, pens, pencils, uniforms) to help them stay enrolled in school.

Girls were asked if they feel supported in their education by the community (Table 35). Over half of respondents either do not feel supported (13.8%) or do not know (39.3%, see Annex 8 for detailed results). It is particularly among the subgroups of girls with anxiety, with a disability, living with neither parent, or in remote areas that less community support is felt (see Annex 8, Table 54). Of the 49 open responses to why or why not they feel supported, 47.1% felt there is no encouragement/support from community leaders; 7.8% mentioned education is not a priority/there is no time for talking about it in the community; and two respondents mentioned that the community is too impoverished/there are no resources for education. or that the leaders are concerned about their own children. The rest did not know.

These findings are echoed in the qualitative data too. Whilst all local leaders interviewed were vocally supportive of the STAGE initiative, all caregivers across the three communities agreed that local leaders do not do anything to actively support girls. They say that only district agencies have helped by bringing the STAGE programme to the community. As a caregiver from Chakoli (Northern) summarises: ***"Before ALP there was no support for girls to gain paid employment. Our community leader hasn't done anything, but district agencies brought the programme to support girls, and community leaders are in support of this initiative".*** Only one local authority member in Obodan (Eastern) claimed that the chief in the community ***"is willing to assist the academically good in furthering their education with the educational fund".*** As such, aside from this one exceptional example, and in line with the quantitative findings, the only support identified at baseline is verbal. This may be through lack of knowledge on what support local leaders can offer, as one traditional leader from Gekorong (Oti) says: ***"we are willing to help but finances do not allow us, so we always just advise the girls to take whatever they are doing seriously".*** The STAGE interventions should help to sensitise local leaders on how they can support better going forward, particularly low-cost support.

It is also worth noting that local leaders from all three communities positively agreed that all girls regardless of demographic barriers should be welcomed into this initiative. As one local leader from Chakoli (Northern) explained: "***It should be for all girls because some are mothers and disabled, and so if it is for all girls, they will be able to better take care of themselves and their children".*** However, some of them felt that this programme should be extended to boys too as they face the same problems. As the Obodan (Eastern) traditional leader said: ***"If this kind gesture is extended to the boys too it will be highly appreciated as boys also face the same problems as girls."*** STAGE may need to ensure local leaders are sensitised better on the various reasons why girls are being prioritised over boys.

There is therefore room for improvement around local leader support, particularly around active support.

Target

There is no logframe target for this indicator at baseline; for endline the target is set as a 50% increase on the baseline value. This indicator is to be reported by WEI ('periodic reports from WEI or DSPs') and qualitative data from the EE as per logframe, however it is not clear how it would be measured. The sample and minimum prevalence of leaders speaking quarterly or monthly in support of girls' education required for reporting target achievement is not defined e.g. in how many communities out of the total should leaders speak monthly to be able to report a level of 3? How is a 50% increase on baseline measured?

For endline, the EE proposes to report against this indicator as done at baseline, through the EE survey. Two sub-indicators are suggested: 1) prevalence of caregivers that report community leaders speaking quarterly or more frequently in support of girls' education, to measure changes compared to baseline; as well as 2) prevalence of caregivers that report community leaders have taken action in support of girls' education. There are limitations in using this technique (a relatively large percentage of caregivers do not know how to answer the question) however it is considered more straightforward and consistently measurable than the current technique. Given the low starting point, and the values observed for the midline Formal track (after one year of intervention), the target for sub-indicator 1) is proposed at 20%.

Table 36 - IO indicator 4.3 as per the Logframe

IO indicator	Sampling and measuring technique used	Who collected the data?	Baseline level	Target for endline	Indicator used for next evaluation point.
4.3 Extent that relevant district agencies'(GES, Social Welfare, NFED) participate in monitoring, supervision and coaching visits of schools	See section 2.3 on qualitative data collection	EE	1	2	Yes

Main findings

This indicator is measured solely based on qualitative data and there is a limitation on how representative these findings are. All local authority members interviewed were verbally supportive of girls education, vocational training, and decent employment. For example, in Gekorong (Oti), the local authority member said: *"vocational training is very important because we cannot all be in school, and so some people need a vocation"* Additionally, the local authority member in Obodan (Eastern) made clear that *"those with disabilities should also enjoy the same privilege as others [with regard to training and employment] so there are no differences".* As such, we can say that in the communities interviewed, verbal support from district agencies is high.

However, there were very few qualitative findings around active district agency support. Of the few examples, two caregivers from Chakoli (Northern) have commended their district agencies for bringing the STAGE project to their community. As one of the caregivers said*: "There was nothing done for girls around economic empowerment, skills development and employment until recently, the district agencies have brought ALP which we are hoping will better the lives of our girls in the future".* Relatedly, the Obodan (Eastern) local authority member claimed the local authority are *"doing all things possible to help the girls and boys gain good employment"* and bringing ALPs to the community was felt to have played a big part of that. Lastly, only in Gekorong (Oti) did a local authority member say they had been participating in monitoring visits: *"I normally visit their training centres and provide the little help when I can".*

On another note, when girls were asked about their confidence, some girls from Obodan (Eastern) and Gekorong (Oti) explained that despite girls confidence, local leaders and elders of the community do not take them seriously. As a girl from Obodan (Eastern) said: *"Girls in this community are confident in expressing their views on issues of interest but most the leaders don't respect their views".* A girl from Gekorong (Oti) noted that: *"Others don't share their opinions at all because it wont be taken seriously by the elders. The boys provide more support to the community than girls, so they [the elders] normally take boys more seriously than girls".* For STAGE outcomes to be sustainable, it will be important to ensure that local leaders and elders understand the importance of listening to girls voices within the community.

For the tracer, we expect there should more examples of active support being given by local leaders.

Target

It is recommended that the next target be Level 2 by endline, with the local authorities moving from verbal support to more specific supportive actions.

4. Conclusions

Key characteristic subgroups and barriers faced

Profile of STAGE Non Formal track. Data provided by STAGE programme indicates that non-Formal girls are mostly aged 15-19-year-old out-of-school marginalised girls living in the Central, Oti, and Eastern regions. The proportion of girls aged 15-19 who are mothers is highest in the Central (21.3%) and Oti regions (22.1%) with Eastern region at 16.8%. The programme also indicated that 8-12% of beneficiaries in each regions are married. 10.9% of girls in the Oti region have never attended school and the region also has the highest proportion of girls aged 15-19 with disabilities.

The evaluation sample size for Non-Formal Cohort 2 is 640. Of the girls surveyed under the evaluation (actual sample size = 639), 92.3% of the surveyed girls are 15-19 years old. 8% of girls reported to have a functional difficulty by their caregivers (classified as having a great deal of difficulty or could not do something at all), particularly relating to mental health (daily anxiety feelings, 2.8%, and daily depression feelings (2.5%). Less than 3% reported a physical disability (seeing, hearing or walking, 0.8%, 0.8% and 0.6% respectively). Upper East (Kasem) and Likpakpaaln speakers (Northern and Oti regions) have the highest prevalence of GWDs.

Subgroup marginalisation. The most common characteristic reported by households under the Non-Formal Track Cohort 2 are being a mother (50.7% of the total sample), high chore burden (33.1%), being married (21.1%), not living with either parent (21.3%) and being impoverished (7.8%).

There is variation in prevalence of marginalisation subgroups by region/language. Eastern and Oti regions (Akuapim Twi) show lower levels of marginalisation than others, even though Oti region (Akuapim Twi speakers) has the highest prevalence of mothers of all region/language groups (75.0%). Upper West (Dagaare) is relatively more marginalised in terms of demographic characteristics such as being mothers, married, or living with neither parent. In Upper West (Dagaare), Northern and Oti (Likpakpaaln) and Upper East (Kasem) there is a higher prevalence of girls affected by high chore burden and impoverishment, and that are married.

The overall percentage of girld who are employed is low (1.4%, nine girls), of which all are concentrated in Northern (Likpakpaaln), Upper East (Kasem) and to a lesser extent in Oti (Likpakpaaln) and Upper West (Dagaare). Of employed girls that responded to the question, three reported being self-employed and one being employed in household's income generating activities. Most girls are in selling agricultural/livestock/forestry/fishery produce or for subsistence, two girls are in sales/services (vendors, domestic help/ cleaner, cook). Few jobs are permanent and full-time (three) and one temporary and part time. For the majority work is very safe (44.4%) or somewhat safe (22.2%); only in one case somewhat unsafe. Two girls felt they are paid fairly, three felt they are not.

Girls were also asked whether they feel they possess the skills and knowledge to do the kind of job they would like to do. The majority feels there is room for improvement, with 19.8% (N=639) stating they do not possess such skills and knowledge at all, and 47.9% stating they do possess these skills to some extent.

Barriers to education. Findings on barriers by region should be taken with caution given the challenges highlighted (the barriers questions were only asked to girls dropped out of school, and not those who have never been in school). Among beneficiaries who dropped out of school (44%, N=281), **economic barriers** to enrolment are by and large the most felt, by 96.2% of the sample. Economic barriers also affect almost all of girls in each marginalisation subgroup (>95%), not just the sub-group classified as impoverished. The negative impact of financial difficulties on education (formal and vocational training) was confirmed by the qualitative data.

The **second most prevalent barriers** are those related to **unmet disability needs**, 16.2% of the girls that dropped out of school (45 girls). Upper West (Dagaare) and Upper East (Kasem) are largely driving up the overall incidence. It is those married and those living in remote areas that are most affected, followed as expected by GWDs. This is primarily driven by unmet services (such as speech therapists and support workers) and assistive devices. The relatively high prevalence of these specific obstacles, driven by the married subgroup, is not entirely clear, though it could be related to lack of assistive devices or support for those pregnant girls or mothers, considering 84.4% of married beneficiaries are mothers. Travelling to school might be challenging for girls living in remote areas that present even a mild form of health difficulty.

The third most felt barriers relate to social norms (10.6% of girls that dropped out of school). Those with a high chore burden (25.6%*) and living in remote areas (20%) particularly experience these barriers, as well as girls with a disability (25%). This is perhaps linked to the belief that household work is more important than education, or that education is not worthwhile for a girl that lives far away from school or has a disability. Married

girls, mothers, and employed girls seem to be the most affected by social norms. Regionally, it is mostly Likpakpaaln speakers in Oti and Northern regions, and Upper West that drive up results for these barriers, where also most girls affected by high chore burden are located.

For a smaller percentage of girls (7.7%), **travel-related issues** represent an obstacle to enrolment. Girls with high chore burden and married experience these issues more than others, suggesting that house work and family duties make the distance to school or the time needed to get to school when no transport is available more prohibitive than for girls that actually live further away. 6% of girls also experience **demographic barriers**, mostly those married or living with neither parent, more than being mother. The qualitative data pointed at the risk that becoming pregnant represents to continuing education.

TOC review. The majority of the project assumptions on characteristic subgroups and barriers are valid. A key risk to monitor might relate to the transition into vocational training and/or employment of girls that have dropped out of education because of high chore burden, housework and/or being employed (not necessarily paid as shown by the data) with their families. STAGE interventions to address the barriers faced by this track (economic, travel, social norms and high chore burden) suggest that girls will be supported in a transition to additional vocational training or further education. A question remains around how realistic it is to expect that after the end of the ALP/vocational training, girls will be able to **transition to decent and fair employment, or sustainable self-employment**. The STAGE project addresses this through the provision of a variety of options for girls in terms of jobs to train in based on market availability and interest, support options for transition (e.g. grants for income generation), and DSPs linking girls with interested employers and businesses. However**, the availability of income generation / employment opportunities remains a key assumption; as is STAGE ability to be able to link girls with employment opportunities**.

Outcome findings

Learning outcome, Numeracy. The overall numeracy score at baseline is 36, most girls scored in either the Non-learner or Emergent learner classifications in Missing numbers, Subtraction 1, Addition 2 and Subtraction 2. By region, Upper West and Northern present the lowest EGMA scores. For World Problems, slightly less than half score in the higher categories.

Learning outcome, Literacy. The overall score for foundational literacy skills at baseline is 15.4. Most girls were in the Non Learner category except for letter sounds where 70.6% of girls are in the Emergent Learner category. In Writing, 74.9% of girls are in the Non Learner category. Oral reading fluency is the second more challenging task (69.1% in the Non Learner category).

Learning Outcomes, Regional, Barrier and Marginalisation analysis. The learning scores across most marginalisation subgroups are higher than mean scores for the overall Non-Formal group, except GWDs, mothers (for literacy) and high chore burden (for numeracy). Whilst girls with any disability are just slightly below the mean score, girls with anxiety and depression - particularly anxiety –score substantially lower. Girls from impoverished households are the second subgroup that scored the highest on both tests (22.5 and 43.7).

There is substantial regional variation across EGRA and EGMA scores. Girls from Upper West, Central and Upper East regions exhibit higher than average scores, for numeracy all results are significant. It is notable that numeracy test results for Upper East (Kasem) are double than the mean score (72.1*). Results for Likpakpaaln and Akuapim Twi speakers in Eastern, Oti and Northern regions tend to drive down the average. The lowest performing region/language groups in both tests are from Oti (Likpakpaaln, 3.7* and 16.9* for literacy and numeracy) and Eastern (Akuapim Twi, 5.3* and 22.5* for literacy and numeracy).

Transition. Over half of the Non-Formal sample has never been to school (53.4%). A small percentage, mostly in Upper West (Dagaare) and Upper East (Kasem) is reported to be currently enrolled in school. In terms of regional differences, the noticeable outliers are the subgroups Likpakpaaln speakers, in both Oti and Northern regions, where the great majority of girls have never been to school (91.7%* and 86.6%*). In both regions the large majority of girls are affected by high chore burden (87.3% and 86.1%). A high percentage of girls living in remote areas has never been to school (69.7%) and the same is observed for girls with high chore burden (75%*), married and living with neither parent.

Sustainability. The overall sustainability score at baseline is found to be 1 (note –approximately half of the sustainability scorecards are not measured at baseline as the indicators relate to activities which are yet to start). Parental support scored 2, parental access to vocational training and services for GWD 1, local leaders support for education 0 (no support or very limited support), school leadership 1 which demonstrates foundational knowledge and support for girls' education/employment. It seems that a key reason for limited community leaders' support relates both to limited financial resources for education in communities and prioritisation of other

issues, as the qualitative data (from the interviews as well as survey's open responses) evidenced. It was also found that parents were unable to access services within their district for their children with disabilities. It was not clear what the barrier to accessing services is (lack of availability / access).

Intermediate outcomes

Intermediate Outcome (IO) 1.1 Attendance. N/A

IO3.1 Girls Life Skills score. The overall Life Skills score is 67.1. Non-Formal Cohort 2 girls performed poorly on knowledge of sexual and reproductive health (49.3). Even if not directly comparable, it is worth noting that midline results for the Formal Cohort highlighted little improvement in SRH since baseline. When prompted specifically on money management, all girls from all three communities reported being responsible looking after what little money they have and saving, when possible, for emergencies. The self-awareness score is mostly in line with the average Life Skills score (slightly lower), with self-confidence driving the overall average up. However, qualitative findings found mixed results on self-confidence.

The subgroups of girls with a disability performed lower than the overall average (59.1*, 61.8 and 56.6* respectively). For girls with a disability, the same trend is noted as in learning, of girls with mental health issues performing lower than the overall group of girls with a disability; in this case, particularly for depression (47.5*). As expected, mothers performed above average (72.4*). Impoverished girls scored above average; the same trend was noted for learning scores.

Regionally, the Non-Formal sub-group speaking Likpakpaaln in Northern and Oti regions reported a mean score of 49.2* and 59.9* respectively, lower than elsewhere. Further, Life Skills scores by region seem to be consistent with Learning Outcomes results whereby the Likpakpaaln speakers in Oti scored poorly compared to others in both literacy and numeracy.

IO3.2 Life Skills Caregivers' assessment. Caregivers have high levels of confidence in their girlchild's Life Skills in all areas and in relation to all sub-groups (overall 77.3), even though less so for girls with mental health issues, particularly anxiety. There is a lower level of confidence in the knowledge of sexually transmitted diseases (3.4/5). By region, confidence levels are lower for Likpakpaaln speakers in Northern and Oti regions (significant for Northern, 73.4*) and Oti region (Akuapim Twi language, 74.3).

IO4.1 'Percentage of caregivers who feel it is equally viable to invest in a girl's education as a boy's'. A high percentage of caregivers (80.3%) feel it is equally viable to invest in a girl's education as boy's education, even when funds are limited. Less caregivers of girls with a disability feel it is equally viable to invest in a girl's education as boy's education than other groups (significant, 56.9%*), with the average driven further down by caregivers of girls with daily anxiety (significant, 50%*). Girls with anxiety also scored substantially lower than the overall average at numeracy and literacy tests, and lower than the average for girls with a disability; thus, evidence from multiple indicators seem to point at the fact that girls with anxiety are in a particularly challenging situation with regards to their education. Another subgroup with less support for education than average is girls with high chore burden - as it would be expected (56%*) – and girls that live far away from primary school (63.6%). For those that are married, living with neither parent and those experiencing demographic barriers, support is also lower than average. There is much less support for girls' education for Likpakpaaln speakers in Northern and Oti regions (56.4%* and 51.4%*). Qualitative findings reveal that the main reason girls have not been able to get education -including vocational training - so far is down to lack of finances, rather than unappreciation of the importance of education. The general sense from interviews is that vocational training is a pathway to more secure employment and income.

IO4.2 'Extent that religious and traditional leaders actively mobilise households to support excluded girls into education'. Only a minority of caregivers reported leaders speak in support of girls' education (19.2%), as expected prior to the project intervention much lower than results observed at midline for the Formal Track. There are large regional variations, with very few Akuapim Twi speaking caregivers (Eastern and Oti region) and Fante speaking caregivers (Central region) reporting speaking in support of girls' education takes place. Overall, only 10.9% stated that this happens on at least a quarterly basis, mostly during religious and community meetings. The low level of community support noted by caregivers is reflected in girls' perceptions. All caregivers across the three communities agreed that local leaders do not do anything to actively support girls. They say that only district agencies have helped by bringing the STAGE programme to the community.

IO4.3 'extent that relevant district agencies' participate in monitoring, supervision and coaching visits of schools. This indicator is measured solely based on qualitative data and there is a limitation on how representative these findings are. All local authority members interviewed were verbally supportive of girls'

education, vocational training, and decent employment. There were very few qualitative findings around active district agency support. Of the few examples, two caregivers from Chakoli (Northern) have commended their district agencies for bringing the STAGE project to their community.

Gender, Equity and Social Inclusion

Gendered barriers to education, training and employment include early marriage, pregnancy, higher chore burdens, and unequal access to paid work. Being a mother, being married, and/or having a high chore burden intensify barriers to attendance, and a high percentage of these subgroups had never been to school previously. The baseline findings suggest that these all subgroups are most affected by social norms and travel related barriers, married girls specifically are most affected by the unmet disability needs barrier, and girls with a high chore burden are amongst the subgroups most affected by the economic and demographic barriers too. In terms of learning scores, scores were lower than the mean for the overall non-formal group amongst mothers (for literacy), married (for life skills), and those with a high chore burden (for numeracy and life skills).

For these subgroups, their situation is practically harder to navigate because their responsibilities are unlikely to be fully alleviated by any intervention. However, the STAGE project addresses these barriers through the provision of ALP classes, vocational training transition support, home visits and community sensitisation. For these subgroups, timing sessions around their responsibilities, and supporting mothers with caretakers during lessons will be important to consider. Relatedly, it will be especially important to monitor girls who have previously never been in school, or dropped out due to high chore burden, housework and/or being with their families, to ensure transition into vocational training and/or employment.

Inclusion related barriers to attendance and learning relate to inability to meet basic needs (impoverishment) and disability, and baseline findings suggest they are affected by the economic barrier and unmet disability needs barrier, respectively. Girls from impoverished households scored higher than average on both learning and life skills tests.

However, girls with disabilities score slightly lower than average, and girls with mental health issues (particularly anxiety and depression respectively) performed lower than the overall group of girls with a disability. STAGE must therefore ensure appropriate support is in place for those with depression and anxiety. STAGE planned life skills training around self-esteem could go some way to helping with that. In addition, the quantitative findings found caregivers were unable to access services within their district for their children with disabilities, and so this will be another area for STAGE to focus, alongside ensuring girls with disabilities are adequately supported when travelling to ALPs and vocational training, and communities are sensitised around opportunities for girls with disabilities. For the formal midline, these same STAGE interventions targeting this subgroup were found to have been able to address their needs to an extent.

5. Recommendations

Project Implementation

Area	Recommendation
Targeting	● A small percentage, mostly in Upper West (Dagaare) and Upper East (Kasem) is reported to be currently enrolled in school – if this is confirmed, the project should replace these with girls not currently enrolled.
Learning	● Learning outcomes remain highly variable between regions and language groups. The subgroup Likpakpaaln in Oti region particularly has also scored the lowest in both numeracy and literacy tests. Adjustments to the curriculum, differentiated teaching and learning strategies (e.g. speed of covering material), and naturally, ensuring language appropriateness between groups, should be customised to the groups with lower overall learning.
Life Skills	● Consider subgroups with a high chore burden or a disability performed lower than the overall average on Life Skills, as did the Likpakpaaln speakers in Northern and Oti regions (where also there is the highest prevalence of girls that are affected by a high chore burden). Differentiated teaching and learning strategies (e.g., speed of covering material) should be customised to the groups with lower overall scores where possible.

Transition	● Given the continued significance of economic barriers for project beneficiaries, STAGE should regularly monitor whether interventions remain sufficient in addressing them. ● Ensure sufficient time for planning and identification of different livelihoods/transition options for each girl, and follow up actions (linking to employers, use of IGA fund including business plan development). ● More information is needed from STAGE project on the transition results and lessons learned observed with Non-Formal Cohort 1; any updates to the market assessment, especially following COVID-19 and its likely negative labour market impacts. All of this should be considered in designing and applying an approach to transition which is realistic in taking into account availability of income generation / employment opportunities. ● Ensure there are appropriate options available for beneficiaries with disabilities and sensitise the employers on what is possible. ● Continue to ensure sensitisation for community leaders includes guidance on practical steps they can take to enable girls' education and decent employment.
Sustainability	● Given the prevalence of economic barriers and potential challenges noted in terms of transition to self-employment, the project should monitor whether the fund given to girls to assist with their transition is sufficient enough to ensure sustainability of the intervention. ● Continue supporting girls in need to access the National Health Insurance. ● Evaluation evidence from the Formal midline[63] shows that knowledge, understanding and basic support for girls' education, but especially active support of caregivers and girls are positively linked to better transition outcomes. STAGE should focus on how to increase active support levels for caregivers', which are low (10.9%). Related to this is the need to address social norms. ● Focus on sensitisation of community leaders on girls' education/vocational training/right to safe and decent employment/self-employment opportunities, given particularly low level of active support found both by quantitative and qualitative data. The STAGE interventions should help to sensitise local leaders on how they can support better going forward, particularly low-cost support.
GESI	● Learn from the positive results from the Formal track midline to ensure effective sensitisation at community, school and household levels towards relieving girls of their high chore burden. The inclusion of boys and husbands in this intervention will be of paramount importance. ● Consider specifically targeting girls living in remote areas, married girls, their husbands/husbands' families, and girls' caregivers in the work around changing social norms, given the prevalence of these barriers among these sub-groups. The need to prioritise housework over other activities might represent a challenge the programme needs to take into account if transition to further vocational training and/or safe and decent employment/self-employment is to be achieved. Though, it is noted that changing social norms requires a likely longer time than STAGE lifespan and concerted efforts from government stakeholders as well. ● Findings from the Formal midline demonstrate that it is possible to overcome travel related obstacles to enrolment through targeted actions to reduce high chore burden and provide

[63] The midline evaluation for STAGE Formal track was conducted at the same time as the baseline for non-Formal track Cohort 2, and has been separately reported.

	travel options. The project should apply the approach for encouraging transition to further vocational training and/or decent employment for non-Formal girls. ● STAGE should follow up on provision of or facilitation of access to special services and assistance, including referral for specialised care and health insurance enrolment. Subgroups most affected by the disability barriers are, beyond GWDs, married girls (of which 84% are mothers) and those living in remote areas. ● Include content on gender roles and job choices within the awareness activities for parents, boys and community members in the non-Formal communities. ● Strengthen the module on SRHR, and allow for more time for this module in programming, given relatively low scores in this area and small improvements detected from the Formal midline. Ensure the topic of SRH is covered early in the Life Skills training, and that peer educators, especially boys, have training on the risks of early pregnancy and how and why to avoid it. ● The project should continue sensitising boys on the respect for girls, taking responsibility for contraception and SRH related to contraception; and caregivers and communities to address the issue 'pregnancy inevitability'. ● Ensure local leaders are sensitised better on the various reasons why girls are being prioritised over boys. ● Consult with Non-Formal beneficiaries and identify times when they can attend trainings given many are mothers and/or have high chore burden.
Disability	● Ensure there are appropriate options available for GWDs and sensitise the employers on employing and supporting GWDs ● The programme should confirm whether there is appropriate support for girls with a disability preventing them from travelling to ALPs or vocational training. ● The subgroup of girls with chronic anxiety (daily) scored substantially lower than the overall average at numeracy and literacy tests, and lower than the overall average for girls with a disability. Less caregivers of girls with anxiety than others feel that it is equally viable to invest in a girl's education as boy's education than other groups. Continue to include effective support to girls who have daily anxiety (and depression), together with guidance for caregivers on how to support girls with this challenge.
Safeguarding	● Strengthen safeguarding messages given results from the Formal midline that almost 30% of girls said they either disagree or neither agree nor disagree with the statement "I have learned how and where to report harassment or abuse". ● Consider how girls who report being in hazardous child labour or modern slavery will be safeguarded throughout the project intervention.

Project Monitoring, Evaluation & Learning

Area	Recommendation
M&E	● A key risk to monitor might relate to the transition into vocational training and/or employment/self-employment of girls that have dropped out of education because of high chore burden, housework and/or being employed with their families. ● Support for girls' education is a core assumption of the project and it needs to be tracked to see if the high level of support remains and can be improved for some groups. The Formal midline results found a positive correlation between support for girls' education and learning and transition outcomes. ● Regularly monitor the availability of income generation / employment opportunities. ● The STAGE MEL team should work on a more detailed definition of the transition paths for non-Formal girls to enable a clear and robust assessment at endline. At the moment this is not clear, and criteria are not specific enough. What exactly constitutes success, how it is defined, also in consideration of the context and actual income generation/employment opportunities (e.g., employment placement, or sustainment for a minimum number of months? Business sustainability? Formal contract needed or not? Type/amount of payment,

	or ability to sustain family/expand business? Minimum threshold of girls to achieve employment, self-employment or further vocational training or education, or any of such pathways, based on the market assessment? For example, if most girls were found to be in additional vocational training following the ALPs, would this count as success for the project? ● It is recommended that the STAGE team ensure it regularly collects feedback from girls, caregivers, teachers, master craftspeople and other stakeholders on how effective the project activities are and the likelihood of transition especially for the subgroups and barriers identified by the EE. ● Monitor closely progress of GWDs to ensure they are receiving appropriate support to assist with their continued transition.
Logframe	● Indicator 4.2. Consider EE comments on Target under indicator 4.2. ● Sustainability, Community Level, Indicator 3. Consider EE comments on reviewing scoring of this indicator. ● Targets are not set for some indicators in the logframe.
Learning	The baseline findings suggest some notable opportunities for the STAGE team to learn about effective transitions. The EE recommends learning opportunities could be especially valuable on: ● How to change social norms on high chore burden for girls especially those that are married and pregnant/mothers, to mitigate the 'double burden' risk. ● If not done already, update market assessment to ensure realistic employment/self-employment opportunities are captured.

External Evaluation

Area	Recommendation
Evaluation questions	All of evaluation questions are still judged to be relevant with no need for additional questions to be added.
Measurement tools	● Measurement for IO4.2 "Extent that religious and traditional leaders actively mobilise households to support excluded girls into education" includes a question(s) in both the girls and caregiver surveys (both tracks). This has enabled this indicator to be reported on using quantitative data from a larger sample. The survey question would seek to understand the views of girls and caregiver in relation to the support of local leaders for girls' education. It is recommended to leave this for endline as well, where percentage of actions will be looked at. ● Suggest changing the quantitative survey to allow disaggregation of 'mistreatment by teacher', to be able to report definitively on where the mistreatment took place, whether in previous schooling, ALPs, or their transitioned school. Consider also adding an open response box for enumerators to detail what is meant by 'mistreatment' in cases of ALPs or transitioned school reports. ● Suggest adding a prompt in the qualitative tool to ask girls what other forms of mistreatment make them feel unsafe at school (to be covered also in enumerator training). ● Suggest reviewing disability questions at endline. ● Review financial assistance section for endline. ● EE will need in due time clarity on definition of success in transition (see above under M&E) to be able to update endline Non-Formal tools to robustly assess transition. ● Suggest revising the qualitative life skills questions at endline. ● Suggest adding qualitative questions to help explain the differences between married and mothers. ● Consider whether to omit boy KIIs in favour of a FGD instead. ● If caregiver says girl cannot go to school because of cost, suggest inserting question asking caregiver how many boys in the household go to school (measuring active support). ● Find alternative way to measure perception of STAGE support to reducing barriers to education, focusing beyond provision of financial assistance.

6. Annexes

Annex 1 Baseline Evaluation submission process
Annex 2 Theory of Change
Annex 3 Project Design and Intervention
Annex 4 Log frame and Outcomes Spreadsheet
Annex 5 Intervention roll out dates
Annex 6 Beneficiaries Tables
Annex 7 Additional EE Tables
Annex 8 MEL Framework
Annex 9 External Evaluators Inception Report
Annex 10 Data Collection Tools Used for Baseline
Annex 11 Datasets, Codebooks and Programmes
Annex 12 Learning Test Pilot and Calibration
Annex 13 Sampling Sizes
Annex 14 External Evaluation Declaration
Annex 15 Project Management Response
Annex 16 Revised Workplan/ COVID-19 Response Plan

6.1 Annex 1 Baseline NF Cohort 2 Evaluation submission process

Please submit all baseline reports and accompanying Annexes to your respective evaluation officer. Please note, some Annexes can be sent for FM review separately and before the baseline report analysis is completed. We advise projects and EEs to follow the sequence outlined below to speed up the review process and avoid unnecessary back and forth. Where possible, we also advise that projects and EEs do not begin their baseline report analysis until Annex 8 is signed off by the FM.

Annexes to submit for FM review any time before the baseline report is completed:

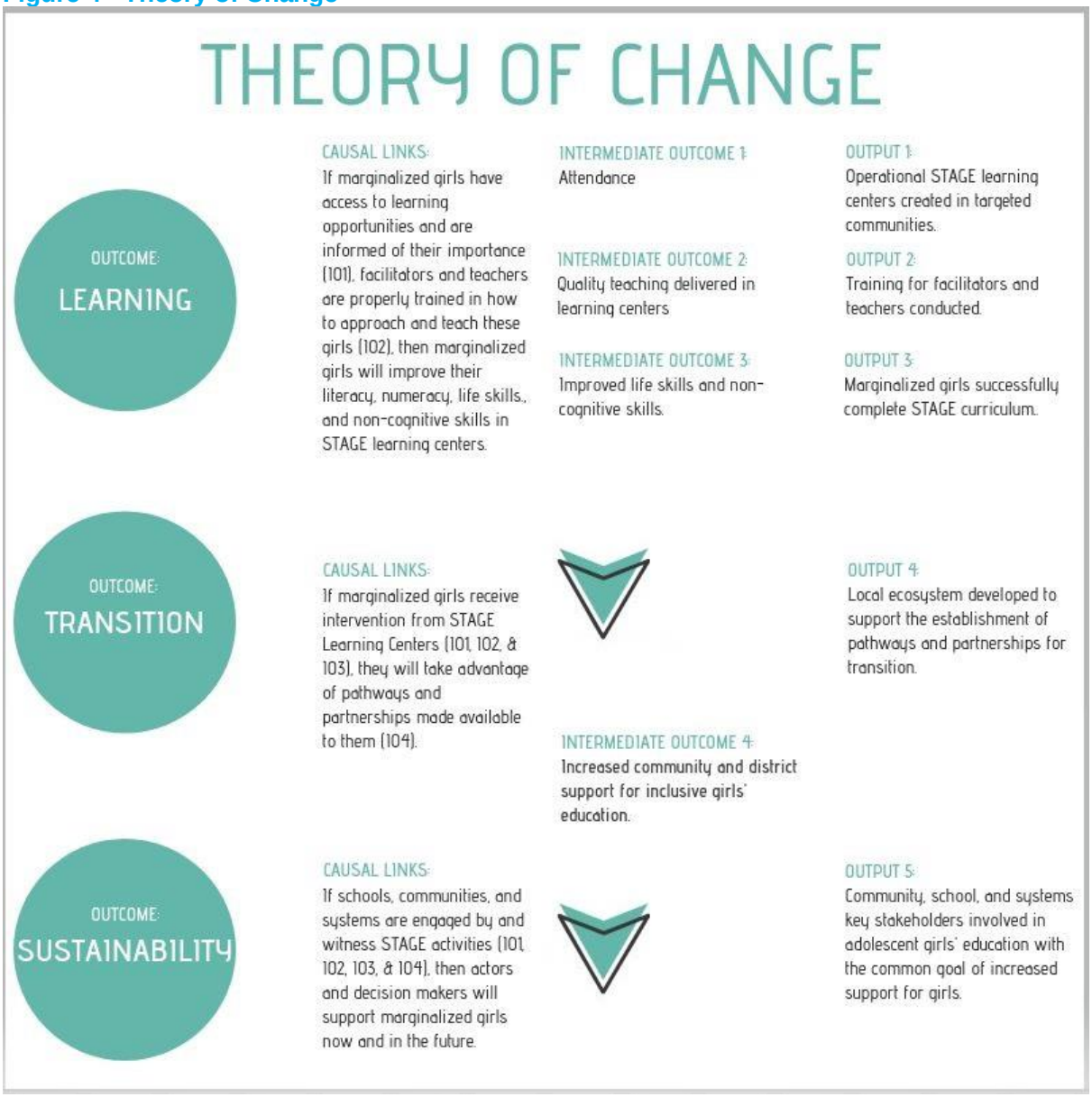
- Annex 3: Cohort approach evaluation
- Annex 4: Beneficiaries table (sample data)
- Annex 5: Beneficiaries table (Project mapping data)
- Annex 6: MEL framework
- Annex 7: External evaluator's inception report (where applicable)
- Annex 8: Data collection tools used for baseline
- Annex 9: Datasets, codebooks, and programmes
- Annex 10: Learning test pilot and calibration
- Annex 11: Sampling framework
- Annex 12: Disability breakdown by severity: Formal and Non-Formal Tracks
- Annex 13: Employment Breakdown: Formal and Non-Formal Tracks
- Annex 16: Useful Resources

Annexes to finalise after Annex 9 'Datasets, codebooks and programmes' is signed off by the FM:

- Annex 2: Logframe
- Annex 14: External evaluator declaration
- Annex 15: Project management response

6.2 Annex 2 Theory of Change

Figure 4 - Theory of Change



6.3 Annex 3 Project Design and Intervention

Background

The Strategic Approaches to Girls' Education (STAGE) project lowers the barriers that girls face in achieving education by providing formal and Non-Formal Education tracks. The project operates in seven regions of Ghana, specifically targeting districts and communities where high levels of extreme poverty, in combination with deep-seated traditional and social norms, negatively impact women and girls. STAGE focuses on girls who are highly vulnerable and systematically marginalized due to factors such as early marriage, pregnancies, disabilities, and others.

STAGE will work together with a number of ministries and agencies of the Ghanaian Government to improve learning outcomes in numeracy, literacy, and life skills, and to establish relevant and appropriate partnerships and pathways for the successful transition of more than 2,997 girls between ages 15 and 19. A buffer of 10% of additional communities are to be enumerated during the mapping exercise to make room for uncertainties that may arise , which will make up for the drop outs and achieve the target of 17,000 ultimately.

The project is implemented by a consortium led by World Education with local NGO partners, including AfriKids Ghana, Regional Advisory Information and Network Systems, ProNet North, Link Community Development, Pro-link, Ghana Red Cross, and the International Child Development Programme.

Key activities of STAGE address the outcomes of learning, transition, and long-term sustainability. With each cohort of girls, the intervention begins with a focus on literacy, numeracy, and life skills through accelerated learning programs to get girls on track for transition into formal education, a vocational learning opportunity, or some form of employment. Teachers and facilitators will be trained in gender sensitive inclusive strategies and provided with curricula and supporting materials to meet the diverse needs of the girls. The project will collaborate closely with partners such as the Girls Education Unit and Special Education Unit of the Ghana Education Service (GES) to develop basic training modules and teaching and learning materials to facilitate the adequate provision of support to marginalized subgroups of girls, such as those with disabilities. The project will simultaneously work to sensitize communities and advocate at a national policy level to challenge contextual barriers affecting girls' education. In order to do this, STAGE will establish peer education models involving adolescent girls and boys as allies; work with youth and adult male-led community sensitization campaigns to promote positive behavior change; and engage both the public and private sectors to provide opportunities beyond the learning programs.

Subrecipient's Scope of Work

The subrecipient will enroll 2,997 marginalized girls in the 111 most marginalized communities in seven regions. Each subrecipient will work closely with the regional and district authorities to facilitate the learning and transition of the girls. Each subrecipient is responsible for ensuring that the girls are able to attain the required level of learning in literacy, numeracy and life skills. Learning assessments will be conducted to assess their competency. The subrecipient is also responsible for ensuring sustainability of project interventions at the community and system levels.

Outcomes, Intermediate Outcomes, Outputs and Activities

The subrecipient is responsible for implementing activities with a view to achieving Outputs, which should in turn progress towards intermediate outcomes (IOs), and eventually Outcomes of

- Learning
- Transition
- Sustainability

The STAGE Intermediate Outcomes are:

- IO1: Attendance

- IO2: Quality teaching delivered in learning centers.
- IO3: Improved life skills among marginalized girls
- IO4: Increased community and district support for inclusive girls' education

The key Outputs to be delivered are:

- Output 1: Operational STAGE learning centers created in targeted communities
- Output 2: Training for facilitators conducted
- Output 3: Marginalized girls successfully complete STAGE curriculum
- Output 4: Local ecosystem developed to support the establishment of pathways & partnerships for transition
- Output 5: Community, school, and systems key stakeholders involved in adolescent girls' education with the common goal of increased support for girls
- Monitoring, Evaluation and Learning: Regular monitoring in accordance with the MEL Guidance and support to External Evaluator

The subrecipient (interchangeably, Downstream Partner (DSP)) is to forecast for the following activities.

1.1 Staff, Partner, and Stakeholder Orientations & Advocacy Meetings

DSPs are expected to orient staff, partners and stakeholders on every aspect of the project, including expectations, targets and outcomes. Orientations must focus especially on

Safeguarding and Child/Vulnerable Adult protection, Gender and Social Inclusion, including

Disability Inclusion. Advocacy meetings are expected to be continuous at district and community levels. The orientation should be done for both old and new staff.

In October, 2020 an initial one-day training should be planned for district actors in each district explaining the various thematic areas of the program. This should be done before staff move into communities for animation and sensitization as well as registration of the next cohort. Following this meeting, district offices, local government offices, and other relevant stakeholders will be continuously engaged to create a sense of commitment and develop ownership of the program at the district level at all times.

At least 10 key stakeholders should be engaged in quarterly meetings with each DSP. These should include GES, Social Welfare, NVTI, NBSSI, Planning officer of the District Assembly and a staff of Ghana Health service C-19 team members.

1.2 Community Mapping (to Identify Beneficiaries and Spaces)

DSPs will visit communities between August to November to conduct mapping for the second cohort of beneficiaries for project implementation in year three (3).They will work with Community leaders, District Education Officers (specifically Girls' Education Officers) and District Assemblies for initial community-wide sensitization on girls' education using the STAGE criteria for identification and selection of girls. STAGE will hold planning meetings with key stakeholders to set up, review, and agree on the specific criteria for the selection of the girls in each community using a targeted approach. This visit should also be used to collect district and community specific data, identify potential learning sites, the households of beneficiaries, master craftsmen/women, potential Community Oversight Committee members etc. The community mapping process will also include home visits to the beneficiary to complete the selection process. This will include engagement with beneficiaries to determine the marginalization categories as well as literacy and numeracy levels through the ASER test.

A summary of the Mapping is outlined in the steps below;

❖ Animation activities to educate communities on the rationale for STAGE and criteria for selecting potential beneficiaries

❖ Contact with heads of household to mobilise communities' members and to discuss the criteria for selection

❖ Training of DSPs and partners/enumerators on data collection tools including the Child Friendly tool for people with Disability

❖ DSPs and partners/enumerators conduct mapping exercises by organising district entry and engagements, community entry and asset mapping, and the household interaction sessions to collect data on eligible girls.

❖ Definition of eligible girls primarily as those who dropped out of school at P3 or below, are found to be educationally marginalized on the conduct of the ASER test and are grouped under other subsets of marginalizations.

❖ The DSP is responsible to allocate sufficient resources to the community mapping exercise to ensure that the allocated number of girls is identified within the timeframe set out for the mapping.

❖ The DSP is responsible to enter the community mapping data on a daily basis or, in the case where internet is not available, DSPs should visit at least 3 times per week.

1.3 Community Animation and Sensitization

DSPs of the non-formal track will continue with engagement with community leadership and parents of registered girls aimed at reassuring them that the ALP would start in August 2021. These community meetings will provide information on all STAGE activities as well as key information to prepare beneficiaries and stakeholders for interventions i.e. organisation of ALP, Safeguarding interventions, COVID 19 protocols, discussions on how to address SEAH, negative cultural norms, the value of girls' education, inclusive education and non-discrimination and various vocational skills etc. The team should also make use of developed BCC materials focusing on messages such as: "Help your Daughter get a skill for life, Help your daughter learn a trade, support your child with a disability, I can make it in life" among others. DSPs should ensure the following have been undertaken within the timeframe provided by the WEI MEL team.

1. Updated list of all the available girls (indicating area of marginalization) should be submitted to WEI MEL team.

2. Updated list of all available facilitators should be submitted to WEI MEL team. (Note that facilitators that dropped out at the end of the first year must be replaced before the refresher training takes place.)

3. Ensure all materials needed for ALP centers have been purchased by December 2021.

4. Updated list of all ALP learning centers and their status (whether they have furniture and are disability friendly)

5. Updated list of girls with disabilities

6. Updated list for identified mastercraftsmen/women

7. Updated list of available CoC members.

Other meetings after the start of ALP should discuss messages centered around positive social norms that promote girls and inclusion/acceptance of girls with disabilities, and child/vulnerable adult protection. The program expects that specific activities would happen at least once after the start of ALP and activity reports submitted.

Animation for cohort 2 girls will be between October and December 2020. DSP should ensure that they use appropriate community entry strategies including COVID 19 protocols to enable them meet the 2020/2021 target. Each ALP is expected to have at least 27 girls.

1.4 Establishment of STAGE Learning Centers with All Necessary Materials

DSPs will work with communities to identify an appropriate space for the learning center. (A learning center is a conducive space used as a classroom that allows easy access for persons with disabilities, has separate toilet and urinal for males and females and furniture that make teaching and learning environment interesting and participatory) As much as possible, DSPs should ensure that learning centers are complete before the ALP begins in January 2021, but they will be given a fund for minor refurbishments when necessary. WEI will provide a curriculum, necessary manuals, and accompanying books, decodables, etc. DSPs will be responsible for purchasing other necessary teaching and learning materials: pencils, pens, etc. at 40 Cedis per girl.

1.5 Accommodation/ Enrolment of Beneficiaries including Girls with Disabilities

For girls with disabilities, each community would have a fund of 580 Cedis to cater for the needs of learners who may require any specific materials/services to aid their learning. Facilitators will receive 110 Cedis per month (1 facilitator per community) starting from January 2021.

1.6 Selection and Training of STAGE Community-Based Oversight Committees

Community-Based Oversight Committees should comprise 3 community members (2 females and 1 male) and should be active in each community throughout the intervention in the community. DSPs should involve parents, local chiefs, community leaders, religious leaders, where possible.

Compliance to strict safeguarding principles and standards are considered very critical components of the STAGE project at all levels. To this end selection of CoC members is subject to very prudent processes.

The selection team (already mentioned) ensures only persons of known high moral standards are considered for selection onto the CoC. Once selected, the members undergo an orientation session as already indicated which must capture:

- What Safeguarding means to WEI and the STAGE project

- WEI/DSP Safeguarding policy documents. (The Vulnerable Adult Safeguarding and Child Protection Policy documents. These must be presented in the language and mode in which they can understand

- WEI safer hiring protocols which are:

a. Sign for receipt of our Vulnerable Adult Safeguarding and Child Protection Policies

b. Sign onto our Safeguarding Code of Conduct

c. Provide 2 references

d. Sign Personal Disclosure Forms

CoCs as part of their training will be taken through how to receive disclosures ie

1. Be guided by the Do No Harm Principle ie make sure your actions and decisions avoid causing further damage and harm

2. Receive complaint either by phone or directly from complainant

- listen to and support the victim;
- reassure the survive he or she did the right thing;
- assess the risk of ongoing abuse;

- provide any possible help and ensure the safety of the victim;
- be honest.
- do not compromise confidentiality. Explain that you will share this information only to the DSP Safeguarding Focal Person who will be able to help them.
- exercise caution and sensitivity in disclosing
- report the incident to the DSP Safeguarding Officer ASAP

DSPs will be responsible for providing a one-day refresher training in December 2020 at the community level of the Oversight Committee on monitoring, feedback delivery, program objectives, COVID-19 protocols, civic engagement, gender sensitivity and inclusion, disability inclusion, and Safeguarding measures and procedures as well as roles and responsibilities. Committees will be met with and coached during separately routine monitoring visits.

The COCs will be responsible for monitoring the Learning centres to ensure learning takes place, check on daily attendance of both facilitator and learners, follow up on girls who absent themselves from attending the ALP, manage ALPs in the event that the facilitator is absent, they will engage learners in life skills activities such as teaching the learners to sew reusable sanitary pads, conduct home visit among others. As part of ensuring effective safeguarding measures in the community, one of the female COCs will be assigned as the Focal Point person for Safeguarding in the community.

The CoC members after the end of ALP activities and graduation in November 2020 will from January to October 2021 in old communities monitor the work of the first cohort who have graduated and are either on their own or have joined "work for pay". This is to help ensure that the girls are followed up on and updates provided on their progress and businesses.

2.1 Identification of STAGE Facilitators and Master Craftsmen

DSPs and their enumerators are entreated to identify and select female Facilitators and master crafts persons. Facilitators will be trained for 10 days in January 2021 after WEI had trained the master trainers. Prior to the training, background checks would be conducted on them; they will provide two references from trusted and respected community members, their last educational institution(in the case of NSP) or place of engagement(if they have been employed by another organisation); they will be briefed on WEI and the DSP's Safeguarding Commitment, policies and procedures as part of a mandatory Safeguarding orientation program; sign the DSP Safeguarding Code of Conduct and the Personal Disclosure Forms. All these will be executed prior to their engagement with the beneficiaries at community level. They will subsequently undergo a mandatory annual safeguarding refresher training session thereafter.

Facilitators and Master craftsmen will be required to create a safe environment and build trust between themselves and the girls so that the girls are able to open up and report any issues that might be a cause of concern to them. The girls will at all times be encouraged to report any abuse (either to the DSP Safeguarding Officer or directly to WEI through the toll free number 0800 12 12 12) they may be exposed to or suffer to be adequately investigated and addressed. They will be taught strategies on how to work with and support marginalized girls. STAGE facilitators will be trained on the correct implementation of all literacy, numeracy, life skills, vocational skills, financial literacy, digital literacy, disability, child protection, gender sensitivity, social inclusion and inclusive education materials. In addition, there will be extensive orientation on child protection processes and case management procedures. Facilitators will learn about data collection and monitoring requirements. In terms of monitoring, Facilitators will be key during periodic monitoring at the field. Particularly, they will be involved in checking attendance of learners to the ALP, support CoC with receiving and addressing safeguarding complaints, monitoring the learners at home periodically with the CoC as well as the vocational centres of master crafts persons. Each Supervisor will be in charge of 10 communities and will be responsible for playing an oversight role to ensure that facilitators, CoCs and master craftsmen are delivering on their mandate. Supervisors will be reporting to the DSP MEL/Programme team monthly and the content of their reports will include findings on attendance of

girls to ALPs, performance of master craftsmen and facilitators from the field, feedback on animation sessions, performance of beneficiaries at ALPs etc. WEI recommends that Supervisors attend the entire refresher Training for facilitators. DSPs must develop job descriptions for their supervisors.

2.2 Mastercraftspersons Orientation: DSPs must support communities to identify a Master Craftsperson based on the vocational skills chosen by girls. With Year one and two experience, DSPs are encouraged to identify people whose proximity to the training centers will not be a challenge. DSPs should complete the master craftsmen/women template by indicating the name, gender (sex), age, type of crafts, residence, education and other demographic information labelled in the template. This template has been attached to the spreadsheet for the DSP beneficiary master list. All DSPs are required to introduce the potential master crafts persons to the STAGE safeguarding and GESI requirements prior to their formal training. Each will undergo safe vetting before being trained for a day at the community level on child protection, safeguarding, gender sensitivity and inclusion, disability, child labor, program expectations and goals, among other topics. It is expected that this orientation could be held in January 2020 and handled by the Supervisor with support from the facilitator. To widen the scope of vocational training, DSPs should introduce National Board for Small Scale Industries (NBSSI), National Vocational Training Institute (NVTI) and private vocational institutions professionals who already have master craftspersons in communities and the beneficiaries.

2.2 Teaching and Learning Materials for ALPs

DSPs will ensure that all the learning centres are equipped with all appropriate materials to support effective teaching and learning. The basic teaching and learning materials that will be used in combination with CBE materials at the Learning centers include:

- STAGE Facilitator Guide- A reinforcement tool on effective approaches to literacy Numeracy and Life Skills lessons. The literacy component will be taught for 2 months by the facilitator before transitioning to CBE materials while the life skills is continued to the end of the ALP. It also covers the gender and disability inclusive strategies.

- Students Book is the supporting reading book for reinforcement lessons

- CBE facilitator's Manuals (Literacy/Numeracy) and Primers for the learners

- Flip charts-pictorials to support teaching of lesson in the life skills

- 2 Complementary readers for learners titled Lucy the Winner and Joseph goes to school

- ASER Assessment tools which the facilitator will administer to assess learners reading and numeracy skills in every 5th week of the ALP.

- Attendance Register.

3.1 STAGE Girls Receive Accelerated Learning Program Instruction

All DSPs will ensure that each selected learning centre in the communities is being managed by a facilitator living in the community. Each learning centre must have no less than 27 girl beneficiaries who will attend literacy, numeracy and life skills classes for 3 hours a day and three days a week for six continuous months. Facilitators and community leaders must ensure that these are safe spaces for all the girls, including girls with disabilities. Facilitators will be provided with teaching and learning materials which would be used at the learning centers for the six-month program from January to July 2021 for the next cohort. Supervisors in collaboration with facilitators and CoCs must organise group discussions with the girls to find out what interventions to put in place to make them safe, help them break the barriers of overburdening domestic chores and other barriers that will not allow them to participate in the program. These must be documented and used to address their needs. They need not be physical needs only - emotional support and reduction of fears and anxiety etc.

3.2 STAGE Girls Receive Vocational Training with Master Craftsmen/women

All DSPs will ensure that each beneficiary is given the opportunity to select a short vocational training course of her choice. The girls should be consulted on their choices for vocational training. Discussions should be held with them to enable them make choices which will satisfy them. The vocational courses must not only be selected based on availability but more importantly, the market available for any product or service. After cohort one vocational skills training, DSPs have gained experience on how ro effectively organize vocational skills, the best appropriate method in each district should be used to train the next cohort. Each DSP would be required to submit a write-up on how they intend to engage and train the girls. It is important to add that the minimum 3 hours a day and two days a week for six continuous months is the standard but DSP can negotiate better terms where possible. Master craftsmen/women and community leaders must ensure that the training sites are safe spaces for all the girls, including girls with disabilities. A separate group meeting should be held with girls with disabilities. An experienced adult woman must organise the group meeting to enable them to open up about their fears, expectations, safeguarding issues etc. It is important to add that girls with disabilities would be part of the general meetings.

Master craftsmen/women will be paid to provide beneficiaries with training tools for the Three-month program beginning in April 2021.

Training on male dominated vocations will be provided to demystify the perception that certain trades are meant for only male. It is also to project and expand the opportunities for our girls.

3.3 Beneficiary Home Visits by Committee Members

From the beginning of the ALP (January 2021) till the end of the program year (October 2021), each girl will receive at least two home visits by facilitators, supervisors, a member of the community oversight committee or any other educators to ensure support systems, mitigate challenges, and provide one-on-one family support. DSP supervisors will be responsible for ensuring these visits are completed and sufficiently documented. Girls with disabilities or extra hardships will receive extra visits. GES is already instituting home visits by District Girls' Education Officers and; DSPs are expected to seek collaboration with them to conduct the household visits.

3.4 preparation of reusable sanitary pads

The Senior Programme Managers of DSPs who have been trained on how to make reusable sanitary pads should endeavor to teach the girls on how to prepare these pads. This means that budgetary provision should be made for the purchase of the raw materials for training and also for the girls. This training should be done during the facilitators workshop for facilitators and also at ALP centers for the girls.

DSPs should use the first week of January 2021 to get this done so that the girls can derive the maximum benefit.

DSPs are to conduct group discussions with the first cohort girls, learn lessons from their experiences on reusable sanitary pads and share progressive lessons with the second cohort.

5.2 Vision Planning Exercises

Prior to the graduation of the girls (preferably last week of September and October 2021), DSPs should organize joint meetings with District Assemblies as well as other stakeholders, to develop a vision plan for the girls. This is a life plan that probes deeply into resources, skills and interests the girls have in their environment. The intervention will help them sequence changes in their lives and think along pathways to achieve their ambitions and vision. Apart from guiding them through the leadership and trade skills they may need, the project could guide them through non-traditional trade areas or through the path of value chain initiatives in their communities or districts.

3.4 Graduation of STAGE girls

Upon completion of the non-Formal track, girls will receive small start-up funds for income generating activities (if they choose to do so). If girls select another pathway, then plans should be made for the use of funds toward that pathway. During the ALP, girls will be introduced to the multiple pathways available to them, including the vocational training. DSPs will be responsible for organizing stakeholder meetings involving the beneficiaries, community members and close relatives of the beneficiaries, employers, businesses, vocational institutes, to discuss the pathways of the beneficiaries. DSPs should also plan a graduation for the girls. Graduations should be simple events held at the end of the six month (July 2021) at the community level, inviting a family member/caretaker, school members, stakeholders, etc. Graduates would receive certificates.

WEI/DSP are collaborating with NVTI to support identification of master crafts persons especially in communities where none is available. This collaboration should be strengthened following the experience of year 1. NVTI is also responsible for issuing certificates to the girls. This gives credence to the fact that the girls have gone through an approved vocational training. A month to the graduation of the girls, DSPs should collect the necessary data on the girls using that of year one as a benchmark. However, due to COVID-19, cohort one girls will graduate in November 2021.

4.2 Alumni Network Designed and Functioning

At the beginning of the ALP, DSPs should compile a database of all the girls for effective tracing, follow-on activities as well as networking among the beneficiaries. During graduation and prior to beginning their income generation activities, DSPs will crosscheck in their attendance lists and ensure that they have current information on the biodata of the girls. All the information from various communities will be compiled and fed into the WEI database for follow-up.

4.4 Facilitating Family-Centred Income Generating Activities

DSPs should support each beneficiary to document their plans (either in employment or further vocational training), have discussions with them on how implementation should take place and disburse the small start-up funds to them.

Girls should be encouraged to form small groups of similar trade and be made to work together and grow their business. This will also provide opportunity for slow learners to catch-up from their peers who have mustered the trade. The formation of the groups will also enable them to buy the necessary tools needed for the work since the amount involved might not be able to procure all the needed tools. The girls should be made to understand that in the course of their work, they can also work on their own after acquiring all the tools for each girl with reasonable capital.

Both staff of DSPs and WEI MEL team will monitor the following three months after the funds have been disbursed.

5.1. Engagement of Government Agencies and Private Sector

DSPs should discuss with District Assemblies and other agencies at District level, the need to involve private sector practitioners in quarterly meetings to discuss support to the program through their corporate social responsibilities, by providing employment or training opportunities and by implementing gender sensitivity and inclusiveness. DSPs will work closely with the Department of Social Welfare and Domestic Violence and Victims Support Unit (DOVVSU) at the district level to provide psychosocial and further investigative support to address reported cases of abuse particularly on serious cases and those that border on criminality. Some of the meetings could serve as training platforms for DSPs to share their knowledge and skills on gender sensitivity, disability, child/vulnerable adult protection etc.

To support the girls with disability (GWD) and to ensure that the District Assembly makes provision for support to people with disability in their plans, DSPs should specifically apply to the various district assemblies to release part of their common fund for the identified GWDs who may need support. DSPs must provide documentation to support this.

DSP must register all GWDs with the Disability people organisations (DPO's) in the district so they can also benefit from all government interventions for the vulnerable, example LEAP, District Assembly Common

fund and access to National Health Insurance which is free for all persons with disabilities. The DSPs must send a list of all GWDs to the social welfare in the districts to facilitate the acquisition of the National Health Insurance this process must start early so their cards are active and ready before their medical assessment.

5.6. Behaviour Change Communication Materials Produced and Disseminated

WEI and the STAGE Consortium partners have developed BCC materials and will share with DSPs to enable them to disseminate at the various communities. The BCC materials are in the form of posters, audio and video formats, translated into local languages. DSPs must ensure that at least once a quarter, the program is visible on print or electronic media (local radio/community radio). Changes in discourse and attitudes towards girls' education, PWDs, safeguarding issues, negative norms such as early marriage, teenage pregnancies etc. should be tracked and reported on. This should be well documented and reported to WEI.

7.1. Support of Child Protection Toll Free Helpline

DSPs are required to review their safeguarding and Child/Vulnerable Adult Protection policies and plans using guidance provided by WEI. DSPs will update their child protection plans by conducting a self-assessment based on the GEC checklist provided by the Project. Now that the helpline has been put in place, DSPs will support their project staff, community members and other stakeholders involved to actively utilize it. This will contribute immensely to the line being functional and also provide data on referrals, calls, etc.

5.7. Peer Education Trainings

The Non-formal facilitators will train community peer educators (3 girls, 3 boys) in January 2021. After their training, peer educators will be provided with kits to carry out weekly community peer educator sessions between from January to July 2021. DSP Supervisors will be responsible for supporting peer educators to deliver community and household sessions, document reports and participate in support meetings to discuss their observations and findings from their community meetings. The peer educators will act as allies in the community for the marginalized girls and support them to build confidence in themselves. WEI will provide 3 kits per community and training materials for the peer educators. DSPs will be required to diligently track the peer educators and community members they reach during their monitoring visit. WEI will provide definitions of indicators for how to track this information as well as targets.

Monitoring

DSPs will be responsible for efficient monitoring and quality assurance visits throughout the program. Following the CBE model, WEI recommends that DSPs have one Supervisor per 10 communities to ensure monitoring and an effective feedback process. DSPs will be responsible for visiting each community monthly throughout the program. DSPs will gather data using monitoring checklists and data collection forms provided by WEI. Reporting will be done on a quarterly basis. Field monitoring data will be collected and reported using the participatory approach below;

The trained facilitators, community oversight committees (CoCs), field officers and Supervisors of the DSP will collect and provide information on project activities and implementation. These Supervisors will oversee ten (10) communities each. Supervisors would be required to gather data from the ALPs (weekly, monthly) collected by the facilitators and CoCs and these would be recorded in real time through the use of a customized mobile application and uploaded to a cloud-based server to be accessed by WEI and DSP Staff (MEL Officer and Programme Manager) to inform decision making. Supervisors will generate reports from data from the Classroom Observation Tool (COI) and Inclusive Education Monitoring (IEM) Tool. The WEI MEL team and DSP Staff (MEL Officer & Programme Manager) will be trained on the use of the tools to train DSP staff and will in turn train all facilitators, CoCs and Supervisors on the use of the tools. DSP Staff shall collect, validate, analyse and report on a quarterly basis to WEI with the support of the MEL officer. Data from the field is first collected by facilitators and CoCs. These are all collected by supervisors in addition to what they will personally collect from the field on a weekly basis. These are uploaded within

three (3) days of the visit and sent to the DSP MEL Officer. DSP MEL officer validates and does some analysis, sent to the DSP PM on a monthly basis. DSP PM analyses and sends all compiled reports on a quarterly basis to WEI MEL team. WEI MEL Team shall analyse the data submitted with the help of the MEL team, and necessary spot checks will be done. Feedback will be provided on the information received to improve program design and the monitoring process.

Evaluation

DSPs will be informed of their role in supporting WEI and an external Evaluator to facilitate the collection of baseline and endline information on the selected beneficiaries in the field. Baseline data will be collected in the first month of the ALP while endline data collection will also take place in the last month of the ALP.

Development and Dissemination of Research Papers

WEI will work with DSPs to collect field data for the development and the dissemination of research papers. Any DSP could be selected to support the project in this exercise at any point in time. Research groups will be formed with DSPs MEL and Safeguarding officers to collect longitudinal data on the role of socio-cultural determinants on educational marginalization, differentials in literacy and numeracy acquisition and safeguarding reporting and case handling capacities. The results will be disseminated at conferences and through DevResults and other referred journals. All DSPs in the non-formal track will disseminate quarterly ASER results to their respective district and community level stakeholders. At the community level, DSPs will provide a synopsis of the findings that will be orally translated into the respective local language for easy understanding and appreciation. The findings of the non-formal track cohort 2 mapping will be disseminated by the DSP at the district and community levels. DSPs are required to share their quarterly dissemination plans with the knowledge management unit.

Staffing

DSPs should only be charging time for staff who directly contribute to the program. All expenses under this tab should be given by position title, listed under "Fees - Local". All persons named by DSPs as key staff in the contracts must be committed to working on the project. Their priority must be the STAGE project and must be available whenever they are needed.

ODC

Other Direct Costs related to the program should be listed here and itemized as detailed as possible. Notes on ODC

Consider 10% to cover all shared costs and overhead. Contingencies are not allowed.

INFLATION

Generally, consider the 5% inflation rate annually.

6.4 Annex 4 Logframe

ABBAligned Logframe.xls

6.5 Annex 5 Intervention Roll-out dates

Activity	Period	WEI	DSP
District level stakeholders' engagement	August to September 2020		DSPs
Training of enumerators	September 2020	WEI	
Community engagement, animation and registration of Girls	September to November 2020		DSPs
ToT for language experts	January 2021	WEI	
Facilitators Initial Training	January 2021		DSPs
CoC members Training	January 2021		DSPs
Refresher for facilitators	July 2021		DSPs
Printing of Materials	August to December 2020	WEI	
Engagements of language experts to develop ASER test	January 2020	WEI	
Refurbishment/rehabilitation of learning centers	Dec. 2020 to January 2020		DSPs
ALP sessions	Feb to July 2021		DSPs
Home Visits	February to August 2021		DSP
ALP monitoring	Feb to August 2021	WEI	DSPs
Transition related activities	August to October 2021	WEI	DSP
Disbursement of IGA	October 2021 to December	WEI	DSPs
Annual review meeting	December 2021	WEI	

6.6 Annex 6 Beneficiaries Tables

Direct Beneficiaries

Non-Formal Track: 15-19-year-old out of school teenage mothers and other marginalised girls living in the Central, Oti, and Eastern regions. 10.9% of girls in the Oti region have never attended school and the region also has the highest proportion of girls aged 15-19 with disabilities. Identified districts are rural with subsistence agricultural activities, resulting in limited economic opportunities and employable skills for girls. The proportion of girls aged 15-19 who are mothers is highest in the Central (21.3%) and Oti regions (22.1%) with Eastern region at 16.8%. 8-12% in these regions are married.

Selection: In collaboration with the district authorities, STAGE visited communities to conduct initial entry and animation exercises to gather a broad base of support for project implementation. Consultations were held with traditional leadership and opinion leaders to outline key objectives and other implementation arrangements. Working with District Assembly girls' education and gender officers, initial community-wide sensitisation on girls' education was organised to lay the groundwork for the identification and selection of girls.

STAGE held planning meetings with key stakeholders to set up, review, and agree on the specific criteria for the selection of the girls using a targeted approach. Key criteria for selection included the following:

- age (10-19 years),
- educational level,
- parental income/livelihood measures,
- marital status,
- girls who are pregnant or teen mothers,
- girls with any form of disability, and
- fostered girls.

Community-level meetings provided a forum for the initial identification of girls that meet these criteria and local systems of communication were used to ensure that the beneficial opportunity for participation in this programme was made widely known within the selected communities. Once identified, STAGE conducted home visits to verify cases, better understand the needs of beneficiaries, and begin training families and girls to gain momentum for programme entrance[64].

Table 37 - Summary of direct beneficiaries

Direct beneficiary numbers	Total figures
Total number of girls reached in cohort 2	3714 girls in cohort 2 (NF), 27 per community
Total number of girls expected to reach by end of project	8769 NF girls 8025 Formal girls (just one cohort) Total both tracks (16752)
Education level	**Proportion of total direct beneficiaries (%)**
Never been to school	735 Non-Formal 2803 Formal
Been to school but dropped out	1984 Non-Formal

[64] See Annex 5 for External Evaluator comment on selection process.

	5076 Formal
Could not answer directly	14 non-Formal 146 Formal
Age banding (The age bandings used should be appropriate to the ToC)	**Proportion of total direct beneficiaries (%)**
10 to 14	8025 Formal Track 100%
15 to 19	2733 Non-Formal Cohort 1 100%

Table 38 - Indirect beneficiary groups

Group	Interventions received	Total number reached for cohort 2
Boys	• Peer education training • Information on Behavioural Change Campaign (BCC) • Training in communication skills (gender, self-esteem, safeguarding)	1242 (3 boys per community x 414 (282 formal +132 NF communities)
ALP Facilitators	• Gender, Inclusive pedagogy, Safeguarding and Inclusion, life skills, ASER assessment training • 6 – 9-month continuous professional support from supervisors and WEI teaching and learning team	547 ALP facilitators
Community members	• Public BCC campaigns on gender issues and safeguarding	96,600

6.7 Annex 7 Additional External Evaluation Tables

Educational marginalisation

Table 39 - Comparison of marginalisation prevalence between Non-Formal track Cohort 1 and Cohort 2

Characteristic	Proportion of sample with this characteristic – Cohort 2	Proportion of sample with this characteristic – Cohort 1	Difference: Cohort 2 – Cohort 1
Is a Mother	50.7%	58.2%	-7.5%
Married under 15	0.16%	4.6%	-3.9%
Married	21.1%	27%	-5.9%
Lives with neither parent	21.3%	26.2%	-4.9%
1+ hours to primary school	5.2%	1.2%	4.0%
HH unable to meet basic needs[65]	7.8%	20.5%	-12.7%
Currently employed	1.4%	3.8%	-2.4%
Employed and under 15	0.2%	0.2%	0.0%
High Chore Burden (Half a day or more)	33.1%	59.2%	-26.1%
Has a disability	8.0%	9.4%	-1.4%
Source: Analytical Dataset Caregiver survey N =	639	565	

Table 40 - Significance of Intersectionality of Marginalisation of sub-groups

	Disability	High Chore Burden	Remote	Impoveri-shed	Not with Parents	Married
Mother	0	-	0	0	+	+
Married	0	+	+	0	+	
Not Living with Parents		0	+	0		
Unable to meet basic needs (Impoverished)	0	+	0			

65 Defined as answering Household Survey question 'PCG_5econ Please tell me which of the following phrases best suits your household situation' with '[_] 1 unable to meet basic needs without charity'

Remote	0	+	
High Chore Burden	0		

Note: Positive significant logistical regression tests marked with a +, negative with a -, and no significance marked with a 0. Marginalisation categories excluded had no significant correlations with any other marginalisation category.

Barriers

Table 41 - Key disaggregation of 'Unmet disability needs' Barriers, Out of School girls, baseline

Barrier: Disability	Proportion of Unenrolled girls affected by this barrier. Baseline
Disability (School cannot meet needs)	**16.2%**
Lack of special services/assistance (speech therapist/support worker)	6.8%
Lack of special services or assistance (such devices/technology such as braille	11.9%
Lack of teachers that know how to teach a childlike [GIRL]	0.0%
Inability of [GIRL] to move around the school / learning centre	0.0%
Learning programme not good for [GIRL]s needs	0.4%
Health condition prevents [GIRL] from going to school	0.9%
Source: Analytical Dataset: Caregiver Survey: Unenrolled: Out of school girls N = 281	

Table 42 - Disaggregation of 'Travel' barriers, Out of school girls, Baseline.

Barrier: Travel	Proportion of sample affected by this barrier. Baseline
Travel (Safety or Distance)	**7.7%**
It is unsafe for (name) to travel to/from school	2.1%
Distance to school is too large	5.1%
No one available to travel with (name) to/from school	2.1%
No transport available to go to school	5.5%
Source: Analytical Dataset: Caregiver Survey: Unenrolled: Out of school girls N = 281	

Table 43 - Disaggregation of 'Demographic' barriers, Out of school girls, Baseline.

Barriers: Demographic	Proportion of sample affected by this barrier. Baseline
Demographic	**6%**
Perception too old to attend school	1.7%
Perception not mature enough to attend school	1.7%
Perception should not attend school as she is married or about to get married	3.4%
Perception should not attend school as she has a child or about to have a child	2.6%
Source: Analytical Dataset: Caregiver Survey: Unenrolled: Out of school girls N = 281	

Table 44 - Disaggregation of 'School' barriers, Out of school girls, Baseline.

Barriers: School (Unsafe/Teacher Mistreats/Refused Entry)	Proportion of sample affected by this barrier. Baseline
School	**3.8%**
It is unsafe for (name) to be in school	1.7%
Times where [GIRL] said she was mistreated at school	1.3%
Times where [GIRL] was refused entry into the school	0.4%
Toilets at school / learning centre are not usable	0.4%
Instances where child says they are mistreated/bullied by other pupils	1.3%
Source: Analytical Dataset: Caregiver Survey: Unenrolled: Out of school girls N = 281	

Learning Outcome

Table 45 - Numeracy Scores by Region

Numeracy tasks	Akuapim Twi (Eastern)	Akuapim Twi (Oti)	Dagaare (Upper West)	Fante (Central)	Kasem (Upper East)	Likpakpaln (Northern)	Likpakpaln (Oti)
EGMA Score	22.5	31.2	46.1	43.5	72.1	29.6	16.9
Number Id. %	29	42.3	54.4	62.9	78.5	48.2	34.7
Missing Numbers %	15.8	21.4	31.1	30.2	62.5	24.6	10.7
Addition 1 %	34.7	44.7	58.1	60	74.6	45.2	30.8
Subtraction 1 %	29.7	38.1	47	51.8	57.5	31.3	22.2
Addition 2 %	9.5	13	41	28.4	73.8	18.7	7.9
Subtraction 2 %	5.1	9.3	31.3	21.5	67.3	17.3	5.3
Word Problems %	33.8	49.8	59.7	49.5	90.5	22	6.9
Source: EGMA: N=636							

Table 46 - Literacy Scores by Region

Literacy tasks	Akuapim Twi (Eastern)	Akuapim Twi (Oti)	Dagaare (Upper West)	Fante (Central)	Kasem (Upper East)	Likpakpaln (Northern)	Likpakpaln (Oti)
EGRA Score	5.3	11.6	20.7	14	43.7	16.8	3.7
Letter Sounds %	8.4	14.1	19.9	16.7	33.4	24.4	7.5
Familiar Words %	4.1	11.1	15.4	12.8	35.6	15.3	2
Oral Reading Fluency	1.2	3.9	18.7	8.4	43.3	15.7	3.3
Reading Comprehension %	10.7	20.5	32.9	18.8	54.5	13.2	3.1
Writing %	1.9	8.3	16.7	13.1	51.4	15.6	2.8
Source: EGMA: N=637							

Table 47 - Foundational numeracy skills. Difference between Cohort 2 and Cohort 1 Numeracy scores, by subtask and achievement band.

Categories	Mean	SD	Non-learner 0%	Emergent learner 1%-40%	Established learner 41%-80%	Proficient learner 81%-100%
Number Id.	-5.9	-0.8	-4.7%	17.0%	-6.9%	-5.7%
Missing Numbers	-1.9	2.4	6.9%	-6.5%	-1.3%	0.7%
Addition 1	4.1	1.4	-3.3%	-1.0%	-1.4%	5.6%
Subtraction 1	0.9	-0.9	-2.5%	4.2%	-3.4%	1.5%

Addition 2	-0.8	4.2	7.5%	-4.4%	-7.6%	4.4%
Subtraction 2	-1.1	4.3	7.7%	-5.7%	-5.7%	3.5%
Word Problems	-14.7	2	15.7%	3.3%	-5.8%	-13.5%
Overall Score	**-2.8**	**1.5**				
Source: EGRA: Cohort 2: N=636; Cohort 1: N= 565						

Table 48 - Foundational literacy skills. Difference between Cohort 2 and Cohort 1 Literacy scores, by subtask and achievement band.

Categories	Mean	SD	Non-learner 0%	Emergent learner 1%-40%	Established learner 41%-80%	Proficient learner 81%-100%
Letter Sounds	-2.4	3.6	2.7%	-0.9%	-1.9%	0.1%
Familiar Words	0.6	-1.8	2.5%	-6.1%	2.9%	0.5%
Oral Reading Fluency	0.6	2.6	10.5%	-15.8%	3.2%	2.0%
Reading Comprehension	6.4	-1.5	-19.8%	13.4%	2.3%	3.9%
Writing	-7.5	1.5	31.9%	-17.2%	-15.3%	0.6%
Overall Score	**-0.5**	**2.1**				
Source: EGRA Cohort 2: N = 636; Cohort 1: N= 565						

Transition outcome

Table 49 - Composition of girls that are no longer in school

Age Beneficiary Left Formal School	%	Grade Beneficiary Left Formal School	%
		Primary - 1	3.9%
		Primary - 2	14.6%
Age 8	4.6%	Primary - 3	28.8%
Age 9	7.5%	Primary - 4	17.4%
Age 10	11.4%	Primary 5	7.5%
Age 11	2.1%	Primary 6	9.6%
Age 12	5.3%	Junior Secondary 1	5.7%
Age 13	4.6%	Junior Secondary 2	7.1%
Age 14	8.2%	Junior Secondary 3	5.3%
Age 15	4.3%		
Age 16	6.0%		
Age 17	0.4%		
Age 18	0.7%		
Age 19	0.4%		
Don't Know	44.5%		

Source: Caregiver Survey, No longer in school N =281

Of the 281 girls that dropped out of school, 43.8% had dropped out by age 14, about 10% between 15 and 16 years old, and a majority of caregivers did not know. Considering the grade they left school, the majority have dropped out before finishing primary school (4th grade, 64.8%). The table above compares the age with the intended education level according to Ghana's national definition and International Standard Classification of Education (ISCED) 1997 which coincide[66]. It can be noted that these girls are about two years behind the grade intended for their age, though it cannot be assumed this is representative of STAGE girls.

Sustainability outcome

Table 50 - Government support received for girls with disability

Difficulty domain	N Using aid	N GWD	Government support	
			Yes	No
Seeing (without glasses/contact lenses)	-	5	1	4
Hearing (with hearing aid)	13	3	1	2
Hearing (without hearing aid)	-	2	-	2
Walking (with equipment) 100 m	7	4	2	5
Self-care	-	2	-	2
Being understood inside/outside HH	-	2	-	2
Learning	-	3	1	2
Remembering	-	2	-	2
Total	**20**	**23**	**5**	**21**

STAGE Girls' education during COVID-19

Table 51 - Non Formal Track, Caregivers' responses: impact of COVID-19 on household

Question	N	Responses						
In the last 3 months: how has your life been affected by the C-19 pandemic		I or another member of my household have contracted COVID-19	not able to work	not able to go out of my house	not able to go and fetch water together with other friends	not able to attend meetings (church, market, social gatherings, funerals)	could not borrow money from family and friends during this period	Other
Overall	639	1.1%	54.8%	0.6%	1.9%	41.0%	0.5%	0.2%
Has your household experienced a decrease in income?		Yes	No	Don't Know				
Overall	639	90.3%	6.3%	3.4%				
Lack of		Strongly	Agree	Neither	Disagree	Don't know		

[66] UNESCO Institute for Statistics (2012). Ghana: Age distribution and school attendance of girls aged 9-13 year. Available at: Ghana_country_report.pdf (who.int)

interaction for social gathering restrictions		Agree,		agree or disagree				
Overall	639	30.0%	60.1%	6.7%	2.7%	0.5%		

Table 52 - Non-Formal Track, Caregivers' responses: impact of COVID-19 on girls

Question	N	Responses					
Could you tell me to what extent do you agree with the following statements: In the last 6 months,							
Girl has been feeling anxious about possible infection		Strongly Agree	Agree	Neither agree or disagree	Disagree	Strongly Disagree	Don't know
Overall	639	20.2%	62.3%	8.3%	8.2%	0.5%	0.6%
Girl has been feeling anxious about their caregiver getting infected		Strongly Agree	Agree	Neither agree or disagree	Disagree	Strongly Disagree	Don't know
Overall	639	18.0%	61.5%	9.2%	9.7%	0.6%	0.9%
Girl has been feeling anxious about change in daily activities		Strongly Agree	Agree	Neither agree or disagree	Disagree	Strongly Disagree	Don't know
Overall	639	18.5%	62.3%	8.1%	6.4%	0.5%	1.6%

Intermediate Outcome 3 - Life Skills

Table 53 - Caregivers' responses to questions on their girl's Life Skills by Region

– "To what extent do you agree that [girl's name] ….	Akuapim Twi (Eastern)	Akuapim Twi (Oti)	Dagaare (Upper West)	Fante (Central)	Kasem (Upper East)	Likpakpaln (Northern)	Likpakpaln (Oti)
Caregiver's Assessment	78.8	73.9	82.4*	78.5	85.1*	73.4*	74.3
Knows how to look after the environment and keep it clean?	82.3	79.1*	90.6	85.2	93.3*	84.6	85.4
Knows how to spend money sensibly?	80.6	74.5	88.2*	80.9	90.2*	74.4*	79.6
Knows about the dangers of violence that women face?	80.6	73.8	83.7*	78.3	87.1*	68.6*	68.6*
Knows good WASH - how to wash her hands before eating and after the toilet, to only drink clean water?	78.8	75.7*	87.2	77.7	93.8*	81	84
Knows about women's menstruation, use and cleaning of sanitary pads?	78.5	75	78.6	77.7	87.5*	75.8	75
Knows about how women get pregnant and how to avoid getting pregnant?	77.8	75.2	76.4	77	85.3*	68*	70.8

Knows about sexually transmitted diseases and how to avoid sexually transmitted diseases?	77.1	70.1	72.8	77.2*	79	56.1*	60.8*
Feels she has good personal qualities and is a person of value?	76.4	76.2	80.4	76.8	78.1	72.8	73.2
Is confident expressing her feelings and opinions and talking in front of others?	77.1	65.4*	82.2*	75.6	71.4	66.7	70.8

* significant results

Intermediate Outcome 4 – Community support for girls education

Table 54 - Community support for girls education, Girls' perception.

Question	Response		
Do you feel supported by your community in your education ?	Yes, very much	Yes, a little	No
All girls	13.4%	63.9%	22.7%
Disability subgroups			
Any Disability	6.5%	51.6%	41.9%
Seeing	N/A	N/A	N/A
Walking	N/A	N/A	N/A
Hearing	N/A	N/A	N/A
Self-Care	N/A	N/A	N/A
Communication	N/A	N/A	N/A
Learning, Remembering and Concentrating[67]	N/A	N/A	N/A
Accepting Change, Controlling Behaviour and Making Friends	N/A	N/A	N/A
Mental Health (Anxiety)	N/A	N/A	N/A
Mental Health (Depression)	N/A	N/A	N/A
Mental Health	0%*	30.8%*	69.2%*

[67] The three disability combined categories are calculated as averages of the three categories per the LNGB Template

Marginalisation characteristics			
Mother	10.3%	63.4%	26.3%
Married under 15	8.7%	60.9%	30.4%
Married	16.7%	60.4%	22.9%
Lives with neither parent	10.6%	53.2%	36.2%
1+ hours to primary school	31.8%	36.4%	31.8%
Impoverished: Cannot meet basic needs without charity	19.0%	69.0%	11.9%
Currently employed	N/A	N/A	N/A
Employed and under 15	N/A	N/A	N/A
High Chore Burden (Half a day or more)	9.2%	76.1%	14.8%
Barriers			
Economic (Work or Costs)	13.6%	66.9%	19.5%
Travel (Safety or Distance)	0.0%	60.0%	40.0%
Disability (School cannot meet needs)	39.4%	54.5%	6.1%
Social Norms (Disinterest by Parent/Girl)	0.0%	76.2%	23.8%
School (Unsafe/Teacher Mistreats/Refused Entry)	N/A	N/A	N/A
Demographic (Age/Pregnant/Parent/Married)	7.7%	61.5%	30.8%
Age			
Age 12 to 15	16.4%	70.1%	13.4%
Age 16 to 19	13.2%	62.7%	24.1%
Language (Region)			
Akuapim Twi (Eastern)	0.0%*	50.0%*	50.0%*
Akuapim Twi (Oti)	2.2%*	93.5%*	4.3%*
Dagaare (Upper West)	21.5%	64.6%	13.8%
Fante (Central)	4.5%*	41.8%*	53.7%*
Kasem (Upper East)	25.5%	43.1%	31.4%
Likpakpaaln (Northern)	19.2%	69.9%	11.0%
Likpakpaaln (Oti)	12.3%	82.5%	5.3%

Source: Girls Life Skills (N=639); Caregiver survey: girls no longer in school (N=281)

STAGE approach to ensuring Sustainability

Table 55 - Non Formal Track, STAGE approach to ensuring Sustainability

Questions to answer	System	Community	Learning Space	Family/ household	Girl
Change: what change should happen by the end of the implementation period	The STAGE approach/model is shown to work at scale, and used by District Assembly members to integrate in wider policy, budgets,	Community leaders are taking on active roles in mobilising resources to support girls' education.	Established vocational training activity in project areas (without ongoing project support)	At least 85% of caregivers are actively supporting girls education (e.g. giving flexibility with household chores to ensure	Girls will have a vocational skill/trade and venture into a profitable employment/ continued vocational training

	plans and/or key delivery systems (e.g. teacher training, curriculum, school management). Appropriate models for transition to employment / self-employment is shown to work at scale and private actors have pledged support for continuation of delivery model beyond project timeline.	Community leaders show consistent supportive practices / behaviours towards girls' education.		school attendance; advocating to others on the importance of girls' education). Caregivers report that they are able to access services for their children with disabilities (i.e. access to 5% District Assembly common fund; vocational skills training; health services using national insurance system).	without assistance from STAGE. Girls are protected under structures at community, household and school level in the prevention (and reporting of) Sexual Exploitation, Abuse and Harassment (SEAH).
Activities: What activities are aimed at this change?	• Development of national framework and tracking system for transitioned girls and graduates • Coordination Meetings with District Stakeholders • Presentation of findings to stakeholders at national/district level • Review of and update of Behavioural Change Campaign (BCC) materials for BCC • Organise monthly coaching visits • Quarterly stakeholder meetings	• Identify local employers, businesses, vocational training centres and IGA for each community. • Community animation activities • Selection and contracting of radio/TV stations to broadcast BCC messages • Community Oversight Committee (CoC) implement community child/ vulnerable adult plan	• STAGE girls receive accelerated learning programme (ALP) instruction • Weekly Vocational Training sessions begin • DSPs to procure and distribute materials needed by the girls in each learning centre	• Identification of sub- groups of girls • Provide information to families to create awareness and explain the process of providing family farming subsidies • Girls and caregivers are informed about child protection services through the BCC campaign	• CoC and STAGE programme staff implement case management protocol • Girls and parents are informed about child protection services through the BCC campaign • Safeguarding champions identified and trained at the community level to receive/refer and/or address complaints
Stakeholders: Who are the relevant stakeholders?	District Assembly stakeholders (GES, DSPs); National stakeholders (MOE/GES/NFED)	Community leaders (chiefs, opinion leaders, religious leaders)	Facilitators and Master craftspeople and women	Parents, caregivers, and other household members	Girls, parents, caregivers, and other household members
Factors: what factors are	District Assembly and National	Socio-cultural beliefs and	Master craftspeople,	STAGE girls and their families will	If beneficiary girls receive the

hindering or helping achieve changes? Think of people, systems, social norms etc.	stakeholders supporting the DSPs with capacity building, mentoring, coaching, and monitoring of project interventions will help in the achievement of intended changes.	practices (whether negative or positive) will help or hinder the intended changes being sought by the project.	women and facilitators adopting inclusive, gender-sensitive approaches will help create a good learning environment to promote improved literacy, numeracy and vocational skills.	become community ambassadors for supporting marginalised girls' education and development and enable the project achieve it intended objectives.	required support from their caregivers, they will be able to make the most out of STAGE interventions.

7.1 Annex 9 External Evaluators Inception Report

See MEL Framework submitted as part of Annex 8.

F Midline & NF Cohort 2 Baseline Inception Report

The following summarises the EE approach as presented in the MEL framework and notes any changes since the baselines, resulting from learning from the baseline of both the Formal and Non-Formal tracks.

The EE's mixed methods quasi-experimental evaluation design is largely unchanged. The quasi-experimental alternative design allows us to conduct various comparative analyses for both tracks. Quantitative data is used to assess how much and identify relationships between variables. Qualitative data is used to assess harder to quantify issues and build a deeper understanding of 'how and why' and 'under what circumstances' change has or has not occurred.

Formal Track - With a single cohort of beneficiaries who will go through an ALP and transition into formal schooling, a longitudinal design will be used over the course of the project. This will track the levels of girls' key variables (Learning, Transition, Life skills, attendance) together with those of their caregivers and other stakeholders (teachers, community leaders, boys) and compare the levels with the baseline scores.

Qualitative data will complement the quantitative data to understand the how and why of the changes, together with understanding the contribution of the STAGE project to these changes (see MEL Framework Section 7 for more on qualitative data collection).

For this formal track group, there will be three evaluation points: *baseline, midline and endline.*

Non-Formal Track - With three distinct cohorts of non-Formal track beneficiaries who will go through an ALP and transition into vocational training or employment, STAGE proposed to conduct baseline and endline for Cohort 1, and baseline and tracking assessment for the girls in Cohort 2 a few months after the end of the programme (without endline). The rationale for conducting a tracer for Cohort 2 was to give some time to the STAGE girls to transition into employment or vocational training, whilst an endline for Cohort 1 would have allowed to measure learning outcomes right at the end of the ALP and thus learn about the success of STAGE intervention on key Outcomes, using this learning to improve Cohort 2 and 3. Considering the impact of COVID-19 on the project interventions during 2020, the EE will not be conducting an endline for Cohort 1. Instead, monitoring data will be captured by the project.

The EE and project teams have discussed whether the approach for Cohort 2 should be changed as a result, considering that as the design currently stands, there would be no outcome assessment at the end of the ALP for Cohort 2 on learning (EGRA/EGMA) and Life skills. Therefore, IMC believe the ideal scenario for the non-Formal track would be to have an endline for cohort 2, to assess learning outcomes at the end of the programme; as well as a tracer to measure transition a few months after the end of the programme. There is no harm in additionally doing a tracer for Cohort 1, if we want to capture some of the transition results achieved for this cohort, however our recommendation is to focus resources on cohort 2 as it will not, we hope, be impacted as much by the pandemic.

Note – In the final version of the MEL Framework, dated 27 September 2019, there is a repeated error (pgs. 39, 46 & 47) where reference is made to data collection across Cohorts 2 and 3, where it should read Cohorts 1 and 2. There will be no external evaluation of Non-Formal Cohort 3.

The Evaluation Matrix (MEL Framework Table 3) provides a summary of how the evaluation questions will be responded to. The MEL framework Sections 5.3 onwards provide more explanation of the methodology for each outcome, quantitative sampling framework and qualitative sampling framework and methods. This is unchanged.

Measuring outcomes

Outcomes and intermediate outcomes for the STAGE project will be measured by the EE, also drawing on some data collected by WEI / DSP through their monitoring process. This section outlines how those outcomes are defined and the approaches used to measure them.

Learning. As defined by the Girls' Education Challenge, the key Learning outcome indicator is "Number of marginalised girls supported by GEC with improved outcomes". This includes literacy and numeracy outcomes measured by the EE through administration of Early Grade Reading Assessment (EGRA) and the Early Grade Mathematics Assessment (EGMA) tools to test the quantitative changes in the literacy and numeracy outcomes. As per FM guidance in the Baseline Report Template, the EE will measure Learning outcomes by first identifying

the bands in which a girl's performance places her at baseline. Then assessing the proportion of girls that move upwards during subsequent data collection points in terms of a given level of functional literacy and numeracy. For example, move from non-learner to emergent learner. In addition, as part of the quasi-experimental design, we aim to estimate the Formal girls' 'natural' cognitive progression by matching Formal Track girls' midline and endline results with the baseline results of girls who are older but otherwise similar to the Formal track girls[92].

There are no changes in measurement of numeracy and literacy outcomes compared to baseline formal, and Non-Formal Cohort 1.

Transition. Successful transition defined by the STAGE project depends on the track to which girls have been assigned. It will be measured in binary format - successful transition, no/unsuccessful transition.

Formal Track: Transition from Out of School to enrolment in Formal School (present in the first few weeks of the year), transition through a grade of Formal School Transitions for the Formal track will be measured by a combination of WEI/DSP monitoring data (attendance registers) and household surveys administered by the external evaluator, comparing the midline and endline results with the baseline scores.

Non-Formal Track: Transition from Out of School / work to safe and decent employment.

Transition for the Non-Formal track will be measured by household surveys conducted by the external evaluator. The definition of safe and decent employment will be contextual and include fair pay and safety of employment. We encourage WEI to provide as specific as possible a definition of these two concepts in order to be able to measure transition in the most relevant way.

The quantitative changes in these outcomes will be disaggregated by key beneficiary characteristics (including those related to marginalisation) to understand how inclusive are the changes. Further, analysis will also be conducted in relation to intermediate outcome data (attendance levels, Life Skills level, transition support, support to parents). This, together with qualitative data, will help to answer the 'What works' evaluation question (EQ2).

Measuring Intermediate Outcomes

Attendance

Quantitative - ALP facilitators will record and report attendance levels (% of days attended) at ALPs using digital tablets. We understand as per MEL framework this data will be verified by spot checks by DSP staff.

In the MEL Framework it's proposed that data on attendance levels at schools be collected by the EE when they visit schools for the midline and endline (school registries) but suggest DSP staff share this data directly with IMC, if possible.

In addition to what is planned in the MEL framework, we propose to introduce a section in the survey to report against the Logframe indicator using three descriptive levels (Yes, very much, Yes, a little, No) to measure the extent it is felt the project's support has reduced barriers to attendance. This change is reflected in the Formal midline survey tools (Primary Caregiver) submitted for review to the FM. Inserting this section in the survey will allow to increase substantially the sample size to assess to what extent the programme has contributed to reduce barriers to attendance.

[92] For example, for midline comparison, a girl who is aged 8 at the November 2019 Formal baseline will be 8 years 11 months at the Sep/October midline, and 10 ½ years old at endline. Therefore, her 'natural' progression can be estimated by comparing her outcome scores at midline with the baseline scores of a similar out of school girl aged 8 years 11 months (from either formal or nonformal tracks), and endline natural progression through comparison with a similar out of school girl aged 10 ½ at baseline.

In both the Formal midline and Non-Formal Cohort 2 baseline, COVID-19 has also been introduced as a barrier to school attendance.

Qualitative - Focus groups and KIIs will be used to understand issues related to girls' attendance, specifically the value of attendance, changes in the barriers to attendance and how the project activities have contributed to these changes.

Quality of Teaching

ALPS facilitators, master craftspeople, national authorities will not be interviewed by the EE.

Instead, the data captured by WEI / DSP through classroom observations and Ghana Education Service assessments of quality of teaching delivery will be complemented by midline and endline surveys with students to ask them how much they felt that their facilitators and teachers followed known good practice in relation to inclusive education (for example, clarity of explanation, engaging, responsive).

Questions have been included in the girls' survey based on the 18 Inclusive Education practices defined in the STAGE logframe, to be able to report on Intermediate Outcome indicator: Extent that girls agree that their facilitator was effective at the learning centre. In addition to what is stated in the MEL framework, in the formal girls' midline survey we have introduced some questions to gauge girls' perceptions on school access, conducive learning environment, safety and coverage of STAGE activities (administration of stipends, travel funds/transportation), building on WEI COME monitoring tool.

To report against this intermediate outcome indicator, the EE still feels that it would be beneficial to receive from WEI summary reports (if available) of the classroom's observations, as well as the classroom observations themselves. We would be able to check these against the data reported from WEI by drawing a random sample of classroom observations (this could be by community, or overall).

Life Skills

Girls' life skills will be assessed using a survey with questions to assess girls' knowledge, skills, attitude and practice in relation to the life skills with the STAGE curriculum. These life skills include environment, money management, gender-based violence, water and sanitation hygiene, disabilities, sexual and reproductive health rights, self-esteem and self-confidence. The responses to these questions will be analysed, weighed and expressed as a percentage to produce a score against a life skills index. The girls will be assessed by the external evaluator at baseline, midline and endline.

The Girls' life skills survey will be complemented and triangulated by household survey and interviews with caregivers on their perceptions of the girls' acquisition and utilisation of life skills.

Some additional questions not asked at baseline will be included at the midline and endline, however they will not be included in the Index score calculation because this would be different to the baseline process. further, small changes have been made on the girls' Life Skills questionnaire to address a few small issues from baseline.

Sustainability

The third Outcome, Sustainability, will be measured with quantitative data at three levels – school, community, and system – against a Sustainability Scorecard. For each level descriptions of 0-4 ranks will be developed. Zero will represent no signs of desired change, and four the highest rank of desired change. Scores of 0-4 will be reported for each level, plus, to add clarity, disaggregation by each stakeholder group within each level. The information collected against this indicator will answer the Evaluation Question on sustainability (EQ3).

Washington Group Questions and adaptations for disability

During the community mapping the Washington group questions will be used to identify if girls have a functional impairment. In addition to contributing towards choices of which girls to enrol in the project, this data will be used for in three ways. Firstly, it will contribute towards the sampling approach to ensure appropriate representation of girls with disabilities within the sample. Secondly, it will contribute towards any adaptation of data collection tools to remove possible barriers these girls may face in responding to surveys. Thirdly, it will act as a category of analysis to see if girls with disabilities experience, in comparison to girls without disabilities, changes in outcomes and how these changes occur.

No changes in the household survey have been made to the disability section.

GESI

To understand GESI the evaluation will disaggregate both Learning and Transition Outcomes, together with Life Skills Outcomes by girl's age, disability and key project identified characteristics (see MEL Framework Table 13). Complementing this will be specific questions within the qualitative data collection to explore the experiences and potential barriers for girls with different marginalisation characteristics.

Qualitative sample selection and sample sizes

The qualitative data sample design had data to be collected from purposefully chosen communities by the STAGE project team. The criteria that informed the choices were:

- Collect data from at least one community where a Downstream Partner (DSP) would implement – this was to provide some learning on how each DSP worked, and to be representative of all DSPs (there are 3 DSPs for the Formal Track and 5 DSPs for the Non-Formal Track)
- In recognition that 68% of beneficiaries are in the Northern region for the Formal Track, additional communities should be sampled in that region.
- In recognition that 29% of beneficiaries are in the Oti region for the Non-Formal Track, an additional community should be sampled in that region

Within these communities, respondents were chosen based on the STAGE ToC, Logframe and Evaluation Questions. Girls and parents/primary caregivers were randomly chosen from beneficiary lists, boys randomly selected based on guidance from DSPs, teachers purposefully selected from project schools, religious/traditional leaders chosen based on which communities visited and, similarly, the relevant local authority official that works on girls' education / vocational training will be chosen. To enable some triangulation, where possible, at least three of each respondent group will be interviewed per community.

At baseline, the data collection firm noted that in some locations it was not possible to identify multiple leaders and, as a minimum, one teacher (Formal), one religious leader, one traditional leader and one Local Authority will be interviewed.

The data was collected at the same time as the quantitative data due to budget constraints influenced by the need to reduce data collection time/costs in communities.

The planned sample is described in the MEL Framework and is based on 5 communities in the Formal track and 6 communities in the non-Formal track. This was partially adapted to ensure at least one community per Downstream Partner (DP) had data collected.

Sampling process for midline and endlines, suggested changes to remove risk of bias in selection.

1. Discuss within the team if the same communities as baseline should be used.
2. If not the same communities, then review the selected communities from the quantitative sample and randomly select 5 communities from the Formal track, 6 from the non-Formal. Ensure that each Downstream partner has at least one community selected.
3. Check with WEI that there are at least 20 girls in that community who they feel can be accessed and there is not a high number that have left the location – it is ok to interview girls that might have dropped out (note, 8 will be needed for the quantitative data). If there are too few girls in that community, randomly select an alternative community.

Quantitative Tools Updates

The key updates are as follows. Detailed updates are listed in the Change log submitted to FM.

Questions to capture decent employment:	Add more variables to define decent employment. Make changes to current response options to improve quality of responses received on employment. [further clarity needed from WEI on what is defined as decent employment in the context of this programme. We understand it relates to safety and pay, but we would need more details, for example how do you consider seasonal/temporary job?

Length of questionnaire	Review whether there any questions that could be removed.
	Questions on Drop out recording the age / grade the girl dropped out
Measurement for IO4.2	"Extent that religious and traditional leaders actively mobilise households to support excluded girls into education" includes a question(s) in both the girls and caregiver surveys (both tracks). This will enable this indicator to be reported on using quantitative data from a larger sample. The survey question would seek to understand the views of girls and caregiver in relation to the support of local leaders for girls' education. The question will be piloted before use.
Definition of success for Non-Formal: Ability to start and manage their own business; Ability to work under another vocational master making use of skills learnt from STAGE.	Definition of success for Non-Formal: Ability to start and manage their own business; Ability to work under another vocational master making use of skills learnt from STAGE. Review and add to the tool.
Intermediate outcome indicator 1.2 Extent that girls, caregivers, teachers and school leaders feel the support received helped reduce the barriers to regular attendance	Questions added for midline & endline for both tracks (in addition to measuring changes in perceptions on level of barriers)
Intermediate outcome indicator 2. 2.1 % of Girls that agree that their facilitator was effective at the learning centre 2.2 Extent that teachers/ facilitators apply inclusive gender-sensitive education 2.3 % of facilitators who demonstrate effective literacy/numeracy instruction	Questions added for midline & Endline for both tracks on indicator 2.1 to the survey. Review KIIs to complement WEI's monitoring data on 2.2 and 2.3
IO 4.C Extent that religious and traditional leaders actively mobilise households to support excluded girls into education.	Questions added to measure this, based on definition of indicator set out in STAGE logframe.
Various	Survey: Add questions to measure school drop outs (age and grade); to capture girls over 18; review and correct issues emerged during baseline data collection; review issues on Life Skills Index questions. [clarity sought: could you confirm how the STAGE programme should be referred to in the survey, to ensure respondents understand what we are referring to ?]
COVID-19	Questions added on Girls and Primary caregivers survey building on WEI's COVID Rapid Assessment Tool.

Review length of questionnaire and delete un-needed questions – if appropriate

Qualitative Tools Updates

No major amendments needed from Baseline, aside from some shortening needed if possible due to the length of interviews. However, changes are to be made to each baseline tool to as appropriate for midline and endline data collection.

As confirmed during a call with WEI on 19th October 2020 no changes to the tools are being made to enhance the EE's assessment of GESI or to respond to the impact of COVID-19 on the project.

7.2 Annex 10 Data Collection Tools Used for Baseline

File names (shared separately):

- Learning Tests:
  - 7. EGRA English FINAL BASELINE 2020 (local language versions available if required)
  - EGMA Likpakpaln_ BASELINE_FINAL 2019 Rev. 14.01.20 (other local language versions available if required)
  - 1. EGMA Baseline Stimulus Sheets_2019 12.23.19
- Household Survey Tests:
  - LNGB HH survey STAGE Ghana Non-Formal Track C2 baseline 20.01.2021 V3
- Life Skills Test (asked as part of household survey to girls)
  - Life Skills Index Composition Draft Baseline V6
- Qualitative Non-Formal Track:
  - STAGE Qual Girls Non-Formal Track KII Baseline
  - STAGE Qual Girls NON-Formal Track FGD Baseline
  - STAGE Qual Caregiver Non-Formal Track KII Baseline
  - STAGE Qual Boys NON-Formal Track KII Baseline
  - STAGE Qual Local Leaders NON-Formal Track KII Baseline
  - STAGE Qual Local Authority NON-Formal Track KII Baseline

Summary of Changes to Data Collection Tools

The following table sets out quantitative data collection tools, the relevant indicators they contribute to and key changes since baseline. Full tools are submitted separately.

Table 56 - Quantitative and Qualitative evaluation tools

Tool name	Relevant indicator(s)	Tool review at midline	Was tool piloted?	How were piloting / training findings acted upon[81]	Was tool shared with the FM?	Was FM feedback provided?
EGMA	Outcome 1: Number of Marginalised Girls with Improved Learning Outcomes (Formal Track) – % of Marginalised Girls with improved EGMA score	N/A	Yes, at baseline (three versions)	Minor adjustments to difficulty level & coding.	Yes	Yes
EGRA	Outcome 1: Number of Marginalised Girls with Improved Learning Outcomes (Formal Track)	N/A	Yes, at baseline (three versions)	Minor adjustments to difficulty level & coding.	Yes	Yes

	– % of Marginalised Girls with improved EGRA score					
Household Questionnaire	OUTCOME 2 – Transition Number of Marginalised Girls who have transitioned through key stages of Education or gained Employment Outcome 3: Sustainability (see Sustainability sections for relevant sub-indicators) Intermediate Outcome 4: Increased community and district support for inclusive girls' education (Formal and Vocational)	Several changes and additions: - revised questions to capture decent employment. - IO1.2 Questions added for midline & endline for both tracks (in addition to measuring changes in perceptions on level of barriers). - IO2.2. Questions added for midline & endline for both tracks. - IO4.2. Questions added in both the girls and caregiver surveys (both tracks), enabling this indicator to be reported on using quantitative data from a larger sample. - STAGE contribution to reducing barriers to education. Introduced questions to report on financial assistance/scholarship and reduction of barriers to education (Formal only) - COVID section: Questions added on Girls and Primary caregivers survey building on WEI's Covid Rapid Assessment Tool (mostly Formal)	Yes, at baseline. Extensive exercises during training for midline.	Minor adjustments to skip / validation and instructions for data collectors	Yes	Yes
Life Skills survey (within	Intermediate	Reviewed issues from baseline, ensuring	Yes, at baseline. Extensive	Minor adjustments	Yes	Yes

the Household Questionnaire)	Outcome 3: Number of marginalised girls supported by GEC with improved Life Skills	correct response types are given (multiple choice, tick all that apply, etc.) for both tracks	exercises during training for midline.	to terminology used and response options		
Key Informant Interview (KII) Tools[82] And Girls Focus Group Discussion (FGD) Tools	IO3 and IO4 plus complementing quantitative indicators where possible.	Revised all tools (with feedback log in excel documenting all changes), including: Shortening following baseline feedback; Simplifying language; Reframing boys' questions; Reframing life skills questions to ask around what are good qualities and skills to have.	During baseline and midline training exercises.	No changes required.	Yes	Yes

7.3 Annex 11 Datasets, Codebooks and Programmes

Submitted Separately

7.4 Annex 12 Learning Test Pilot and Calibration, Life Skills Methodology

Learning tests

No changes have been made to the tests or administration modality compared to Non-Formal Cohort 1 baseline. No modifications were made for girls with disabilities.

Enumerators administered all quantitative tools orally and recorded responses electronically. All instructions and items were given in the language of preference of the respondent (typically their mother tongue), with the exception of the listening comprehension and dictation sentences of the literacy assessment which were always given in the language of assessment (the language that will be used in ALPs training in that location). The learning assessments included paper supplements for test-takers to interact with (such as passages to read or lists of numbers). This section provides an overview of the quantitative tools for this midline.

Languages: Both learning assessments were translated into the language of instruction used by the STAGE programme in their community (which is presumably the same as language spoken in the home of the girl)[93]. The languages included in the midline were: Dagaare, Kasem, Kusaal, and Likpakpaaln. All assessments were designed in English, and then translated to the six languages. As mentioned above, instructions and items were given in the language of preference of the respondent (typically their mother tongue). The items in the EGRA were all written in the language of assessment, and accommodations made for differences in alphabets, letter, and word frequency. This resulted in slight differences in length of the oral reading passages: however, because scoring is calculated as correct words per minute, the different number of items does not affect the calculation of scores.

Early Grade Reading Assessment (EGRA): The EGRA was based on the standardised international assessment and modified slightly to ensure appropriateness for the beneficiary population. It consists of five sections:

Table 57 - EGRA subtasks

	Subtask	Timed
1.	Letter Sound Identification	60 sec.
2.	Familiar Word Reading	60 sec.

[93] Because differences in language are inherently tied to different social, geographical differences, it is not possible to untie them strictly with the baseline data. For example, it is not possible to untangle differences in learning assessments between Kusaal and Dagaare speakers based on where they live, what language they speak, what their language of instructions are or the social and economic differences between their communities live. It should be noted that there were only 8 cases in the Formal interviews and 10 cases in the Non-Formal interviews where languages of instruction and spoken at home were different which doesn't imply a significant gap in the quantitative data collected by the evaluation, but few outliers compared with the overall sample.

3.	Oral Reading Passage	60 sec.
4.	Reading Comprehension	Untimed
5.	Dictation	Untimed

The Letter Sound Identification and Familiar Word Reading subtasks consist of grids of letters and words, and test-takers were asked to read as many of them as they could in a minute. For the Oral Reading Passage, test-takers were given a short narrative passage to read and asked to read aloud to the end. After 60 seconds had elapsed, the enumerator marked how many words were correctly read in that period. Test-takers could finish reading the story. Reading Comprehension asked five questions about the Oral Reading Passage story. Finally, the enumerator read a sentence slowly aloud, and asked the test-taker to write it down. The timed subtasks are scored according to the number of items correct per minute[94]. The untimed subtasks are scored as a percentage of the total number of items. Translation resulted in slightly different word counts of the passages and dictation, depending on the language of assessment. Because scoring is completed as correct words per minute or percentages, this increases comparability of scores.

Skip Logic. Each subtask is progressively more difficult than the previous, so if a test-taker is unable to complete ability on one subtask they do not need to continue to the successive tasks. Each subtask had a minimum standard required to continue to the next subtask. This minimises the burden on test-takers struggling to complete the assessment. For example, test-takers who could not read any of the first 10 letters on Subtask 1 were not asked to continue with the assessment. Within each subtask, students were encouraged to continue to the next item if they could not read a letter or word within 3 seconds.

Table 58 - EGRA untimed subtasks

Subtask		Minimum Proficiency to Continue
1.	Letter Sound Identification	Read 1 or more letter on the first line (10 items)
2.	Familiar Word Reading	Read 1 or more words correctly on the first line (10 items)
3.	Oral Reading Passage	Read 1 or more words correctly on the first line (5 items)
4.	Reading	Read 1 or more words correctly in first sentence (9-12 items, depending

[94] Per the FM template guidelines, all subtasks excluding oral reading fluency were calculated as percentages of the total items. Oral Reading Fluency was calculated as correct words per minute, which includes measuring the total number of correct answers divided by the amount of time tested, according to the Tangerine software. For example, if a student read 25 correct answers and completed the exercise in 20 seconds, their ORF score would be 75cwpm. In cases where students read more than 100 cwpm, their scores were rounded to 100, to ensure the entire range of scores spanned from 0 to 100.

	Comprehension	on language)
5.	Dictation	Final subtask: no minimum needed.

Early Grade Mathematics Assessment (EGMA). The EGMA consisted of 7 subtasks.

Table 59 - EGMA subtasks

Subtask		Timed
1.	Number Identification	60 Sec.
2.	Missing Number	Untimed
3A.	Addition: Level 1	60 Sec.
3B.	Addition: Level 2	Untimed
4A.	Subtraction: Level 1	60 Sec.
4B.	Subtraction: Level 2	Untimed
5	Word Problems	Untimed

The Number Identification subtask followed a similar design as the first two subtasks in the EGRA. The Missing Number subtask showed a succession of numbers following a pattern, and asked students to fill in a missing number in the pattern. In the Level 1 Addition and Level 1 Subtraction subtasks, test-takers were given 60 seconds to correctly complete up to 20 questions of addition or subtraction of two one-digit or two-digit numbers. If students correctly completed at least one Level 1 question, they continued to the Level 2 questions, which included addition of up to four-digit numbers. Responses were not timed on Level 2 questions. On the Word Problem subtask, students were slowly read six-word problems of increasing difficulty, from simple addition to multiplication and division.

Skip Logic: Students were not asked the Level 2 questions if they could not complete any of the Level 1 questions, but there were no other cases where subtasks were skipped. Within each subtask, if a child stopped on an item for five or more seconds, they were asked to continue to the next item.

Modifications for girls with disabilities: No modifications were made for girls with disabilities.

Girls' Life Skills Questionnaire

The Life Skills Index is based on the Life Skills Tool used to assess beneficiaries[95]. It has various questions according to six topics. The Life Skills tool asked questions of the beneficiary related to 6 topics:

[95] The structure and nature of the questions used regarding self-confidence and self-esteem were suggested by the FM due to their use in other studies and seeming external validity. There is likely to be a data limitation in that – as noted by the project - there is a high likelihood of desirability bias with these questions: respondents are very likely to interpret them as having a preferred answer, resulting in a high percentage of agree and strongly agree responses. The Life Skills Index, by its very nature as an index, is an artificial

7. Environment
8. Money Management
9. Gender Based Violence
10. Water, Sanitation, and Hygiene (WASH)
11. Sexual & Reproductive Rights
12. Self-awareness, including
    a. Self Confidence
    b. Self-Efficacy
    c. Self Esteem

The questions related to these topics were coded into three categories:

4. **Agency.** Whether or not girls feel able to make a strategic life choice based on what she thinks is desirable or possible.
5. **Attitudes**. What are the mindsets girls have towards a topic and the set of beliefs and values they hold at baseline about what is desirable?
6. **Knowledge**. What is the knowledge girls have about the topic?

While skills, resources and services, social capital, and gender norms were also considered categories, for the given items within the STAGE baseline Life Skills, the above three categories served most appropriately. This is because the topics within the STAGE Life Skills modules map almost completely across these three categories.

This section reports Life Skills in two ways: according to the topics described, and the LNGB-prescribed categories.

The Index was calculated as a 0-100 scale, representing beneficiary's responses by the six topics. The index was calculated as the mean of six topics sub scores. Each topic's sub scores were based on the percentage of desired responses given in that topic's section. Each item for each topic was assigned a score based on the desirability of the response. For example, beneficiaries who could correctly name at least one way to treat water would get one point, and zero points if they could not. Then, all the items for each category were averaged together to create a category sub score. To calculate the overall Life Skills Index, the average of all sub scores would be combined[96].

The Agency topic is comprised of three separate sets of questions: (1) the General Self-Efficacy Scale[97], (2) the Rosenberg Self-Esteem Scale[98], and (3) three questions on self-confidence from the core LNGB survey[99]. They

construct that is meaningful when compared to itself (at future evaluation points). Our analysis suggests that: it measures a wide range among the respondents; higher values are better; and there are no floor or ceiling effects. However, not more can be said until we have multiple evaluation points. All this considered, it should be noted that: i) Life Skills are commonly measured through self-reporting; ii) if the level of desirability bias is the same at each evaluation point, it is possible to use these questions to measure progress. Whether this is true or not is unknown, as respondents may be less swayed by desirability bias as they get older. The evaluator acknowledges the weaknesses of these sets of questions but deferred to the FM's suggestion to use them.

[96] We elected to treat each subject area of life skills equally in determining the index, as described on p.87. We believe that we made an effective balance to weigh each subject area and items within in a way such that WEI can use the information provided.

[97] The Schwarzer Self-Efficacy Scale and Rosenberg Self Esteem scales are typically reported on a scale from 10 to 40. Both scales have 10 questions graded on a four-point scale from Strongly Agree (4 points) to Strongly Disagree (1 point). Schwarzer R & Jerusalem M. Generalized self-efficacy scale. J Weinman, S Wright, & M Johnston (1995) Measures in health psychology: A user's portfolio. Causal and control beliefs. Windsor, England: NFER-NELSON.

[98] Rosenberg, M. (1965). Society and the adolescent self-image. Princeton, NJ: Princeton.

were combined for the Life Skills Index, but are reported separately in the category table so that they may be compared with other studies.

In cases where beneficiaries chose not to give an answer, those items were excluded from their score calculations, and means taken from the remainder. In cases where beneficiaries did not know an answer, those items were included as zeros when calculating sub scores. In cases where girls completed some sections but not all, their scores will appear in the means for sub scores, but those observations were not included in the overall mean scores, as their overall Life Skills score could not be calculated.

Caregivers' Life Skills Assessment

Caregivers' perceptions of girls' acquisition and utilisation of life skills is an average score of caregivers' opinions on to what extent the beneficiary:

- knows how to look after the environment and keep it clean
- knows how to spend money sensibly
- knows about the dangers of violence that women face
- knows good water and sanitation hygiene - how to wash her hands before eating and after the toilet, to only drink clean water
- knows about women's menstruation, use and cleaning of sanitary pads
- knows about how women get pregnant and how to avoid getting pregnant
- knows about sexually transmitted diseases and how to avoid sexually transmitted diseases
- feels she has good personal qualities and is a person of value
- is confident expressing her feelings and opinions and talking in front of others

Each response was marked on a five-point Likert Scale from Strongly Disagree to Strongly Agree. If a caregiver opted to not respond or said they did not know, those questions were omitted from calculating the average. It is reported as the mean of all items responded to by the caregiver, and is calculated on a 0 to 100 score, where 100 would mean caregivers responded Strongly Agree to all questions.

The relative frequency of each response is shown in the tables, along with the mean score for each question, where Strongly Agree (SA) is scored as 5, and Strongly Disagree (SD) is scored as 1 (with D=Disagree, N=Neither Agree/Disagree, A=Agree).

[99] It should be noted that as self-confidence measurement is based on only 3 questions it is very sensitive and likely not precise.

7.5 Annex 13 Sample Sizes

Supplementary to sample data provided in the main report, see section 2.3 Evaluation Methodology

Table 60 - Formal Track, Disability Breakdown by severity

Question	No Difficulty	A Little Difficulty	A Lot of Difficulty	Cannot Do At All	# Responses
Difficulty Seeing	93.6%	5.7%	0.6%	0.2%	637
Difficulty Hearing	96.4%	2.8%	0.8%	0.0%	636
Difficulty Walking 100 metres	92.2%	4.9%	2.0%	1.0%	102
Difficulty Walking 500 metres	93.9%	5.1%	1.0%	0.0%	99
Does she have difficulty with self-care such as feeding or dressing him/her	98.6%	1.1%	0.3%	0.0%	636
When she speaks does he/she have difficulty being understood by people ins	97.8%	1.9%	0.3%	0.0%	635
When she speaks does he/she have difficulty being understood by people out	97.6%	2.0%	0.3%	0.0%	636
Compared with children of the same age does she have difficulty learning t	91.7%	7.9%	0.5%	0.0%	636
Compared with children of the same age does she have difficulty remembering	91.0%	8.7%	0.3%	0.0%	635
Does she have difficulty concentrating on an activity that she enjoys doing	93.2%	6.5%	0.3%	0.0%	634
Does she have difficulty accepting changes in her routine?	90.8%	8.7%	0.5%	0.0%	632
Compared with children of the same age does she have difficulty controllin6	90.0%	8.8%	1.1%	0.0%	633
Does she have difficulty making friends?	93.1%	5.8%	0.9%	0.2%	634

Note: difficulty walking by distance questions only asked of those who require equipment to walk. This was likely a mistake when coding the questionnaire.

7.6 Annex 14 External Evaluation Declaration

External evaluator declaration

Name of project: Strategic Approaches to Girls' Education External Evaluation

Non Formal 2 Baseline

Name of External evaluator and contact information:

IMC Worldwide Ltd

Email: imc@imcworldwide.com
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Fax: +44 (0)1737 771107

Names of all members of the evaluation team:

Elena de Besi, IMC Worldwide

Lauren Atherton, IMC Worldwide

Andrew Trembley, Independent

___FF___ (Fazlun Fazlee) certify that the independent evaluation has been conducted in line with the Terms of Reference and other requirements received.

Specifically:

All of the quantitative data was collected independently ((Initials: _FF___).

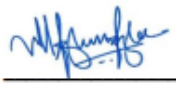
All data analysis was conducted independently and provides a fair and consistent representation of progress (Initials: __FF__).

Data quality assurance and verification mechanisms agreed in the terms of reference with the project have been soundly followed (Initials: _FF___).

The recipient has not fundamentally altered or misrepresented the nature of the analysis originally provided by JEAVCO / PAB (Company) (Initials: _FF___).

All child protection protocols and guidance have been followed (initials: _FF___).

Data has been anonymised, treated confidentially and stored safely, in line with the GEC data protection and ethics protocols (Initials: __FF__).



Fazlun Fazlee

Senior Technical Director, Africa and the Caribbean, IMC Worldwide Ltd

27 May 2021

7.7 Annex 15 Project Management Response

The current Theory of Change and what might need to be revised based on current activities and evaluation evidence;

The TOC of the project targets changes at three levels: community, school and system level. It runs on the assumption that if highly marginalized adolescent girls who have dropped out or have never been to school are provided with tailored and inclusive learning, and life skills, and if this is combined with family and individual level financial education and resource support, community wide behavioural change interventions, and institutional support mechanisms, then the girls will be able to successfully pursue educational and vocational pathways or use their acquired skills and set themselves on a path to self or paid employment.

The evidence from the baseline largely validates the assumptions underlying the theory of change. Improving and creating a sustainable support system for marginalized girls will require changes at each of the levels identified by the project's theory of change which goes beyond the community animation sessions the project has been organizing on a regular basis at the community level. In Ghana, there is considerable respect for traditional, religious and opinion leaders. As the symbol of authority at the local level, these actors largely have a huge influence on their subjects and followers. The baseline indicates just 10.9% of this group of actors demonstrate support for girls' education and skills development even though the report indicated that more than 7 in 10 caregivers support the education of girls as well as boys. Similarly, the report noted that in spite of district assembly's support for girls' education and skill acquisition, they lack the needed capacity and policies/structures. These findings and others in the report are a huge concern for the sustainability of the project interventions. In addition, it has implications on the pervasiveness of most of the barriers to girls' education which have been found to be rooted in social and economic factors.

To address these concerns, STAGE intends to enhance its engagement with stakeholders at the community and district level. The focus of these engagements will revolve around working with community structures and caregivers of beneficiaries to move their support of girls' education beyond expressions to taking keen interest and steps to make it a reality. This will include addressing gender roles in the home and giving equal support to both boys and girls to receive education and acquire skills. In this regard, CoC members and peer educators will be empowered to work in collaboration with other stakeholders to engage existing community structures to address the barriers to girls' education and skills acquisition.

Drawing from the lessons learnt from the implementation of cohort one activities, the intersectionality of the marginalization faced by girls show that some barriers are more persistent than others at preventing enrolment. This point is also highlighted in the report which states that economic and social norms are prevalent in the project communities. The persistence of the economic barriers as the report revealed is reflected in the 96.2% (Baseline Report, page 27) of girls affected by the barrier. The project therefore plans to provide Agric and business support to the families of the project beneficiaries. This will help improve the productivity of these households, improve their chance of earning sustainable incomes and enhance their resilience to shocks.

The current log frame and what might need to be revised based on current activities and evaluation evidence;

The evidence from the baseline report largely reinforces and validates the assumptions and indicators in the log frame. Considering the fact that COVID 19 pandemic has considerably changed the context of the project implementation, a good number of the project's targets may have to be revised to make them realistic to achieve.

In line with this, the EE recommended some revisions in the log frame targets. The project agrees with the recommendations which includes targeting, retargeting and changing some of the indicator definitions. For instance, the project target for IO3 (1) was 65% however given the starting point of 67.1%, the project has

accepted the EE's recommendation to put the target for endline at 69.6%. Similarly, the project accepts the EE recommendation of 79.2% for the end line target of IO 3(2).

In addition, the evidence from baseline suggests that there are promising signs of with regards to support for girls' education among caregivers, however the targets set for the sustainability indicators seem ambitious which may not be achieved. The project's observation over the past three years shows that behaviour change in the project communities will happen at a slow pace due to the pervasiveness of some barriers to girls' education and skills development. In line with this, the project agrees with the recommendation of the EE to put the endline target for IO 4(2) at 20% against the project's initial target of 50%.

Reasons for any differential results by disability status, subgroup and barrier, including whether exposure (compliance) to the project was similar or dissimilar across subgroups;

In recognition of the objectives of the project, the project takes the differentials in the baseline figures and the barriers faced by each of the beneficiary girls seriously. STAGE will ensure each beneficiary receive the full set of the basic interventions. Beneficiaries with special needs will be provided with assistive devices after they have been thoroughly reviewed. Similarly, as part of the design, remedial interventions will be integrated into the ALP classes to provide an opportunity for girls with learning difficulties to catch up their peers. These will be rolled out to ensure that at the barest minimum the project interventions respond to the peculiar needs of each beneficiary.

In addressing the barriers around social norms, intensive behaviour change, communication interventions, community, stakeholder engagements and sensitization will be implemented. It must however be pointed out that, looking at the short duration of the project implementation, it will prove very difficult to say the project will entirely alter the social structures to remove all challenging social norms. Notwithstanding the project is of the firm belief that the roll out of these interventions will serve as the catalyst for the expected change.

Programmatic changes that might be made based on the evaluation evidence.

- Given the past experiences of some youth empowerment projects, STAGE as part of the efforts to ensure that girls sustainably transition in to productive IGAs and further training, a market survey will be conducted to identify the existing markets and structures that has to be put in place to support girls' transition. STAGE proposes to use a multi-tier approach that will have the girls at the center to identify sustainable IGA options that are culturally and economically viable in the project communities for implementation. In addition, STAGE will engage with relevant local and national level agencies to provide support to beneficiaries. For those who transition into further training, STAGE will try and build relationship with TVET service providers and master craftspersons to ensure that the trainings they receive align with the national TVET qualification framework. The Community Development Unit as well as the Business Advisory Services in the districts within which the project is being implemented will be engaged to provide business development services to the beneficiaries at regular intervals to ensure the sustenance of the IGAs.
- To improve beneficiaries' understanding and knowledge on sexual reproduction, the project will work in collaboration with the Ghana Health Service to periodically visit the ALP centers to provide education on sexual reproductive health. The findings from the project's recent rapid assessment of the ALPs identified some challenges among facilitators in the delivery of the SRH content of the life skills curriculum. This to a large extent may have accounted for the gap identified by the midline report. The integration of the Ghana Health Service will therefore address this challenge and improve the knowledge of SRH issues among beneficiaries. This has currently commenced with some of the DSPs.

- To address the pervasiveness of social norms and economic barriers, the project will work with community support structures, such as the CoC and community leaders to identify girls who are facing such barriers to fashion out an appropriate support system to improve attendance and learning gains.

This will also be complemented with farmer base support to the families of these girls to improve their economic resilience and provide the needed support to the girls as they go through the ALP and VST trainings.

- The project recognises the creation and maintenance of safe and child friendly spaces is critical to enrolment and retention of beneficiaries on the project. Facilitators, CoCs, Teacher Mentors, Peers and the girls themselves will be reminded about what constitutes as well as the importance of safe/child friendly spaces to enhance the girls' overall well-being including being vocal and assertive. Continued advocacy and sensitization will be undertaken in te communities to increase community members understanding of safeguarding issues and the need to support girls' education and skills development. Designated DSP Child Protection/Safeguarding officers as well as supervisors will be empowered to occasionally conduct visits to the ALP and VST training centers to assess compliance and also sensitize facilitators, master craft persons and beneficiaries on the interventions STAGE has put in place including the hotlines to make them feel safe and comfortable in using appropriate quarters to report any abuses or safeguarding breaches.
- The report recommended that the project should enhance monitoring of DSPs/standardization of delivery, given substantial regional disparities in the baseline figures. In line with this recommendation, the project intends to roll out an enhanced monitoring system pivot around supervisors. A three-tier system will be created to address data quality issues and provide swift technical support to DSPs with challenges in monitoring and data management. The project further intends to roll out a monthly summary sheet that will provide DSPs and project staff with easy to read up to date analysis of the project interventions in order to promote learnings on the project. Further, the project will pilot periodic spot checks and validation of monitoring data submitted by DSPs. This will be in the form of sampling beneficiary girls and administering the ASER tools on them to validate DSP data. The roll out of these interventions is expected to contribute in improving the project data quality.

7.8 Annex 16 WEI/ STAGE COVID-19 Response Plan

C-19 MTR Activities
WP + Y3 AWP- Re-al