Ethical Monitoring & Evaluation for Violence against Women Prevention (1 hour)

Monitoring and Evaluation Series
Staff Skill Building Library
Raising Voices
This module is part of a **Staff Skill Building Library** developed by Raising Voices. The **Library** consists of competency based training modules designed to strengthen skills of staff implementing or supporting community-based violence against women (VAW) prevention programs. The **Library** is designed for organizations using the SASA! **Activist Kit for Preventing Violence against Women and HIV** but can be used by anyone working to mobilize their community to prevent VAW. If you are not using SASA! simply replace the word SASA! wherever you see it in the text with the name of your methodology.

This module is part of the Monitoring and Evaluation series in the **Staff Skill Building Library**.

All materials in the **Library** can be downloaded at [www.raisingvoices.org/staffskills.php](http://www.raisingvoices.org/staffskills.php) or requested at info@raisingvoices.org The SASA! **Activist Kit** can be downloaded at [www.raisingvoices.org](http://www.raisingvoices.org)
Ethical Monitoring & Evaluation for Violence against Women Prevention (1 hour)

Objective

- Demonstrate an understanding of the ethical issues involved in collecting data related to violence against women.

Competency

By the end of this session, participants should be able to . . .

- List at least 3 things that can be done to make sure data collection is ethical and minimizes risk to participants.
- Explain how the concept of informed consent relates to ethical monitoring and evaluation.
- Explain how the concept of confidentiality relates to ethical monitoring and evaluation.

Preparations

- Write cards (Step No. 1) for volunteers to read aloud. Best if they are written on large, colored cards that can be read, then posted on the wall.
- Photocopy Safety and Ethical Recommendations for Researching Violence against Women Compiled from World Health Organization Guidance (1 per participant).
- Photocopy and cut apart 1 copy of Group Work Scenarios.
Steps:

1. Explain: In this session, we will talk about making sure our monitoring and evaluation of SASA! is ethical—meaning that it benefits, and does not harm, the community—including the people who are currently experiencing violence.

2. Gather pre-prepared cards with the 3 points (below) written on them, and ask 3 volunteers to pick, and read in order, about the history of research, monitoring and evaluation on violence against women (VAW):
   
   1: In the beginning of the movement to prevent violence against women, activists recognized it as a sensitive, personal issue that could stigmatize survivors. They were hesitant to ask the community questions about violence against women because they were afraid it would break the confidentiality of survivors, and stir up trauma that would have a negative effect on the safety and well being of survivors.
   
   2: Recognizing the need for data to improve programming and advocate for the importance of the issue, World Health Organization created Safety and Ethical Recommendations for working with domestic violence and sexual violence in conflict settings to help to guide research.
   
   3: Today, it is clear that it is possible to undertake ethical VAW research, monitoring and evaluation—and recent research has actually indicated that, instead of being dangerous to ask the community about VAW, it is dangerous not to—because if we do not break the silence, nothing changes.

3. Post the 3 cards, in order, on the wall for people to see.

4. Explain: In the rest of this session, we will think more deeply about what ethical SASA! M&E should look like.

5. Ask participants to count off, 1-4, to form into 4 groups.

6. Explain:
   
   - Each group will take the handout: **Safety and Ethical Recommendations for Researching Violence against Women**, which was adapted from guidelines from the World Health Organization, and discuss the guidance in light of a different topic that each group will be given.
   
   - Groups will then report back with actionable ideas to be sure we have a plan for keeping our M&E data collection in SASA! ethical.

   - Groups will have 15 minutes to discuss, then you will present information about your consideration and recommendations from your group within 5 minutes.

7. Assign groups each one of the following topics, distributing the Handout: **Safety and Ethical Recommendations for Researching Violence against Women** and the discussion questions related to their group.

8. Invite groups to present their ethical consideration topic, the way the WHO guidelines relate to that topic, and concrete recommendations they have for moving forward with M&E plans (as stated in each group’s instructions).

9. After each group presentation, thank the group for their presentation and recommendations and then discuss each, ensuring the list is accurate and complete. Change recommendations, as necessary. Assure the following points are covered:
   
   - Questions we do and do not ask
     
     o In SASA!, we ask information about community and individual knowledge, attitudes, and skills related to violence—but only in in-depth interviews

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*Ethical M&E for Violence against Women Programs Module, Monitoring and Evaluation Series*

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after building rapport with respondents do we ever ask about personal experiences with violence. This helps to keep respondents safer, avoids exposing survivors and protects their privacy. It is important to avoid asking about personal experiences until we are more certain the context is safer, we can get accurate information and follow up and refer the survivors appropriately.

- **Informed Consent**
  - Informed consent is an agreement where potential respondents understand the what might happen as a result of taking part in the research and still choose freely to participate. In order to give informed consent, a person must have all the information (e.g., how the data will be used, who will have access to it, etc), be over the age of 18, be offered no undue incentives for participation (such that they feel they cannot say no), and be mentally sound enough to understand the agreement and its consequences.
  - Before we do any data collection with individuals with the SASA! Rapid Assessment Surveys, focus group discussions, or individual interviews, we will as for informed consent of those individuals. In later trainings, you will learn how to ask for consent.
  - With some SASA! tools, like the Activity Report form and Outcome Tracking Tool, we do not need informed consent because there is no way the data collected could be traced back to individual participants or hurt them—it is a community assessment.

- **Confidentiality**
  - Confidentiality is keeping all information related to a survivor secret and sharing it only with others who need to know in order to provide assistance and intervention, as requested and agreed to by the survivor.
  - Confidentiality of data is extremely important—to keep both ourselves and all of the respondents safe.
  - We will be sure that all data that can be traced back to individual respondents is paired with an ID code rather than the person’s name, and will be sure all data with identifying information is kept in a locked cabinet.
  - We will talk more about confidentiality when we talk about the RAS.
  - Also, if we do come to find out about personal experiences with violence—even when we are not asking about it—we will be sure to keep these stories confidential!

- **Referral lists**
  - As mentioned in the WHO guidelines, it is important that—if we do learn of cases of people experiencing VAW, we know who we can refer them to for health, legal, counseling, shelter, and other needs.
  - Decide who in the group will be responsible at the organization for taking forward this recommendation and creating a referral list that will be ready before any data collection is done.

10. Explain:
• We have here a good list of recommendations that will help ensure that our M&E is ethical. We will learn more about how to practically carry out these recommendations before we use each method.

• Another important part of doing ethical data collection is feeding back the findings to staff and the community, so we are also learning from the process and improving our programs and being open and transparent about what we’ve learned from the community.

11. Ensure specific recommendations are typed up and distributed/ posted for use by all staff who are involved in M&E/ data collection of any kind.
Validation Options

Validation is another way to say “assessment” or “pre/post-test”. It is used to determine whether the participants in a training learned what the facilitator intended for them to learn. Instructions for how to use each validation method can be found in Training Validation Methods: A how-to guide for assessing participant learning downloadable at www.raisingvoices.org/staffskills.php

Select validation methods for each competency using the table below:

1. Choose whether the competency (specific skill) needs to be validated at a group or individual level.
2. Looking at the validation methods listed in that category (group or individual), select only one of the validation methods marked with an ‘X’ for each competency.
3. Plan a time in the training agenda to use the validation method you’ve chosen to test each competency.

<table>
<thead>
<tr>
<th>Competency (Specific skill)</th>
<th>Group Validation</th>
<th>Individual Validation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Activity in Training*</td>
<td>Game Show</td>
</tr>
<tr>
<td>List at least 3 things that can be done to make sure data collection is ethical and minimizes risk to participants.**</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Explain how the concept of informed consent relates to ethical monitoring and evaluation.**</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Explain how the concept of confidentiality relates to ethical</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>
monitoring and evaluation.

* Activity in Training includes many possibilities, depending on the module, including brainstorms, group practices, debates, agree/disagree/not sure exercise, and others.

**See Validation Questions for this competency, to be used in Game Show, Card Game, Answers Bingo or Pick and Play methods, on next page.
Validation Questions

- Name 3 things that can be done to make sure data collection is ethical.
- What is informed consent and how does it relate to ethical monitoring and evaluation?
- What is confidentiality and how does it relate to ethical monitoring and evaluation?
- Facilitator’s Note: Find out what the participants really learned! These cards can be cut out and used with Game Show, Card Game, Answers Bingo or Pick and Play validation methods. Full descriptions of how to use each of these validation methods are available in the Staff Skill Building Library. Download at: www.raisingvoices.org/staffskills.php and go to Training Validation Methods: A how-to guide for assessing participant learning.
Safety and Ethical Recommendations for Researching
Violence against Women:
(Compiled from World Health Organization Guidance)\textsuperscript{1}

1. The benefits to respondents or communities of documenting [sexual] violence must be greater than the risks to respondents and communities.

2. Information gathering and documentation must be done in a manner that presents the least risk to respondents, is methodologically sound, and builds on current experience and good practice.

3. Basic care and support for survivors/victims must be available locally before starting any activity that may involve individuals disclosing information about their experiences of violence against women. Where few resources exist, it may be necessary for the study to create short-term support mechanisms.

4. The safety and security of all those involved in information gathering about sexual violence is of paramount concern and in emergency settings in particular should be continuously monitored.

5. Protecting confidentiality is essential to ensure both women’s safety and data quality.

6. Anyone providing information about violence against women must give informed consent before participating in the data gathering activity.

7. All members of the data collection team must be carefully selected and receive relevant and sufficient specialized training and ongoing support.

8. Additional safeguards must be put into place if children (i.e. those under 18 years) are to be the subject of information gathering. Note: In the absence of additional advice on how to interview children ethically, SASAI implementation partners are not recommended to interview anyone under the age of 18 years.

9. The study design must include actions aimed at reducing any possible distress caused to the participants by the research.

10. Researchers and donors have an ethical obligation to help ensure that their findings are properly interpreted and used to advance policy and intervention development.

Group Work Scenarios

Group 1: Questions we Do and Do Not Ask

1. Look through the *WHO Safety and Ethical Recommendations for Researching VAW*.

2. Consider the impact of the **questions we do and do not ask** in our monitoring and evaluation on the safety and ethics of our M&E activities.

   For example, SASA/ monitoring and evaluation methods do not include questions directed at finding out about the personal details of women’s experiences of violence, but rather discuss what community member’s knowledge, attitudes, skills and behaviors related to violence against women they see in their communities. How does this impact the level of safety of respondents?

   Note: If needed, look again through SASA! Start Phase Overview pp. 9-12, to get a sense of what questions we do and do not ask.

3. Be prepared to:
   - Explain the **Questions we Do and Do Not Ask** to the larger group.
   - Explain which of the *WHO Safety and Ethical Recommendations for Researching VAW* might apply.
   - Describe what actions your organization might take to keep within these ethical recommendations.

Group 2: Informed Consent

**Informed consent**: An agreement where potential respondents understand what might happen as a result of taking part in the research and still choose freely to participate. In order to give informed consent, a person must have all the information, be over the age of 18, be offered no undue incentives for participation (such that they feel they cannot say no), and be mentally sound enough to understand the agreement and its consequences.

1. Look through the *WHO Safety and Ethical Recommendations for Researching VAW*.

2. Consider the implications of getting **informed consent** to gather information in our monitoring and evaluation, and how this impacts the safety and ethics of our M&E activities. For example, what might happen if we did not get informed consent and asked someone questions about VAW?

3. Be prepared to:
   - Explain **informed consent** to your group.
   - Explain which of the *WHO Safety and Ethical Recommendations for Researching VAW* might apply.
   - Describe what actions your organization might take to keep within these ethical recommendations. Note: Think of what this may mean for interviewing children, and think of what we might have to explain to the respondents before we involve them in certain types of M&E.
Group 3: Confidentiality

Confidentiality: Keeping all information related to a survivor secret and sharing it **only** with others who need to know in order to provide assistance and intervention, as requested and agreed to by the survivor.

1. Look through the *WHO Safety and Ethical Recommendations for Researching VAW*.
2. Consider the impact of **confidentiality** to gather information in our monitoring and evaluation, and how this impacts the safety and ethics of our M&E activities.
   
   For example, think of what might happen if we did not keep confidential the information we gathered in a focus group, a rapid assessment survey, etc.

4. Be prepared to:
   
   - Explain **confidentiality** to your group.
   - Explain which of the *WHO Safety and Ethical Recommendations for Researching VAW* might apply.
   - Describe what actions your organization might take to keep within these ethical recommendations.

Group 4: Referral Lists

1. Look through the *WHO Safety and Ethical Recommendations for Researching VAW*.
2. Consider the importance of creating strong **referral lists** before we gather information in our monitoring and evaluation, and how this impacts the safety and ethics of our M&E activities. For example, think of what might happen if we did not have a referral list and came across someone who started to tell us more than we asked about their experiences with VAW.

5. Be prepared to:
   
   - Explain the concept of a **referral list** to your group.
   - Explain which of the *WHO Safety and Ethical Recommendations for Researching VAW* might apply.
   - Describe what actions your organization might take to keep within these ethical recommendations.