

EVALUATION OF KTF's PROJECT ZERO

EQUITY ECONOMICS AND DEVELOPMENT PARTNERS

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ABOUT EQUITY ECONOMICS

Equity Economics is a leading consulting firm, providing analysis, policy development, design and evaluation services to government, private sector and non-government clients.

We specialise in economic and social policy, and international development. We combine technical economic skills with policy and design expertise, helping our clients contribute to a more inclusive, equitable society. Our work addresses the persistent challenge of social and economic disadvantage, through new and practical solutions. We work in collaboration with our clients and are believers in life-long learning. We are committed, and in for the long haul.



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ABOUT KOKODA TRACK FOUNDATION (KTF)

KTF is an international development agency working throughout Papua New Guinea, on education, health, equality and leadership.

KTF works with people and communities to improve lives, livelihoods and futures. KTF works in remote and rural communities to improve access to elementary and primary education, improve access to quality and accessible healthcare, improve opportunities for, and the safety of, women along with fostering the next generation of leaders.



ACKNOWLEDGEMENT OF COUNTRY

Equity Economics acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional Owners of Country throughout Australia and their continuing connection to both their land and seas. We also pay our respects to Elders – past, present and emerging – and generations of Aboriginal and Torres Strait Islander peoples now and into the future.

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Executive Summary

Project Zero addresses the high rates of family and sexual violence (FSV) in Oro (Northern) Province, Papua New Guinea (PNG), through a combination of preventative community education and outreach, and supporting responsive service delivery for survivors of violence. The project commenced in late 2020 focusing solely on Oro, where KTF already supports and co-delivers a range of development activities across health, education, equality and leadership.

Project Zero, in addressing FSV, particularly addresses violence against women and children. Project Zero has a gender, disability and social inclusion (GEDSI) informed approach, as well as a focus on child protection. Through Project Zero, KTF has brokered deep collaboration and partnership between government and non-government entities involved in addressing FSV in Oro and PNG more broadly.

Project Zero aims to challenge harmful norms and behaviours relating to FSV, including a lack of awareness of PNG's Family Protection Act (2013), and the right to safety for all people, as well as the services available to those escaping violence.

This evaluation was conducted from January to March 2023. The evaluation included a review of data and documents provided by KTF, as well as a series of consultations with project stakeholders and implementing partners.. The evaluation drew on the Organisation for Economic Development's (OECD) evaluation guidance¹ on using and applying six evaluation criteria plus gender equity, disability, and social inclusion (GEDSI).

Key evaluation findings:

1. **Relevance:** The evaluation found Project Zero has been highly relevant across multiple stakeholder groups, including survivors of violence, local institutions including hospitals, health facilities and schools, and both government and non-government stakeholders, through preventative and responsive activities. Project Zero's approach has been relevant to the local context in Oro and activities have been suitable in responding to the specific needs of the local community.
2. **Effectiveness:** The evaluation found to a large extent Project Zero has been effective in achieving its objectives, including embedding respectful and non-violent relationships in schools, health facilities and the wider community and bringing stakeholders together to reduce FSV. The evaluation also found Project Zero has been effective in providing safe and supportive services for survivors of violence.
3. **Efficiency:** Project Zero has been managed by KTF in an efficient manner, consistent with DFAT's value for money (VfM) principles including most notably cost-consciousness and evidence-based decision making.

¹ OECD 2021, Applying Evaluation Criteria Thoughtfully, OECD Paris. The evaluation criteria included relevance, effectiveness, efficiency, impact, coherence, sustainability and GEDSI.

4. **Impact:** The evaluation identified significant change experienced by stakeholders as a direct result of Project Zero. Key aspects of change include increased community awareness of PNG's FPA (2013) and services available to survivors of violence; improved communication and networking between stakeholders involved in preventing FSV in Oro; and improved safety and support for survivors of violence, in particular women and children.
5. **Coherence:** The evaluation found Project Zero to be coherent with PNG's FPA (2013) and nation-wide efforts to prevent and respond to FSV. The evaluation also found Project Zero to be coherent with the objectives of local government and non-government organisations in Oro working on FSV, as well as aligned with KTF's broader work in Oro to improve development outcomes for communities.
6. **Sustainability:** The evaluation found evidence of ongoing benefits directly attributable to Project Zero, at individual, community and institutional levels, relating to both the prevention and response to FSV. Project Zero has successfully built local capacity and embedded knowledge and commitment in local institutions.
7. **GEDSI:** The evaluation found the primary beneficiaries of Project Zero to be women and children. Project Zero has directly improved women and children's safety through preventative and responsive activities. Consistent with other programs to address FSV in PNG and the Pacific, benefits for people with a disability are less evident, but KTF has and continues to identify opportunities to support people with disabilities through Project Zero.

Project Zero is a critical intervention responding to an urgent need for prevention of, and responses to FSV in Oro. However, Project Zero, like many other FSV interventions in PNG and the Pacific, is operating in an environment where key service providers, such as the police and justice system, are critically under resourced and as a result sometimes ineffective. Despite this, Project Zero has already demonstrated significant impact and is deserving of continued funding to build upon this impact.

Key recommendations for Project Zero :

High Priority:

- 1.1 This evaluation strongly recommends KTF continue to implement Project Zero in Oro. The successes evident so far provide a strong rationale to continue delivery of the program.
- 1.2 KTF should continue providing support and capacity-building to the FSVU and Sohe Safe House, to improve the support provided to survivors.
- 1.3 Continue learning from the precedent set by Femili PNG with their Lae Safe House, as the Sohe Safe House enters a new phase with the construction of the new facility. This is an opportunity to consider how the Safe House can improve its service delivery.

Medium Priority

- 2.1 Improve the use of information management systems to collect data on survivor age, disability, employment status and nature of abuse. KTF should formalise agreement with FSVU for data-sharing, to improve monitoring and evaluation.

- 2.2 Explore opportunities to work with the Northern Provincial Health Authority (PHA). The National Department of Health is considering how PHAs can provide more integrated health care, including responding to GBV and FSV. KTF should consider whether the Northern PHA could be brought into partner meetings if relevant.
- 2.3 Increase the geographical reach of Project Zero within Oro, in particular providing outreach in more remote and rural areas, where awareness of the FPA (2013) and associated laws and services is much lower. KTF may also consider providing training to remote health clinics on how to properly document FSV, and refer survivors to police, hospitals or other services.
- 2.4 Connect Project Zero with other programs operated by KTF in Oro, particularly programs which increase education, training and livelihood opportunities for women. As evidenced in this evaluation, financial dependency on a spouse is often a risk factor for FSV, whereas financial independence can give survivors the confidence and means to leave a violent partner.
- 2.5 Provide more outreach and training to frontline police officers throughout Oro, to increase awareness of FSV, FPA (2013) and available services. Once established, KTF could work with the FSVU to establish a formal assessment to assess police officer knowledge of correct procedures and ensure they are meeting obligations under the FPA (2013).
- 2.6 Increase public awareness of options to report dissatisfaction with police responses to FSV.
- 2.7 Lobby for a FSC to be established in Oro, noting this was a critical source of referrals for the Lae Safe House.
- 2.8 Prioritise disability inclusion, including co-delivering outreach with a DPO where possible. This activity should be guided by DPOs but may include co-designing and delivering outreach training, working together to strengthen referral pathways for people with disabilities, or providing guidance to police and justice services on FSV awareness specifically for people with disabilities.
- 2.9 Work with Oro Provincial Government to explore feasibility of contributing core-funding in future, such as 5% of total cost of Project Zero in 2024-25 FY. This may contribute to project sustainability and local ownership.

Further detail on the recommendations is provided at the end of this evaluation.

1. Program Overview

1.1 CONTEXT

Working amongst communities in PNG for over a decade, KTF has delivered a range of projects addressing health, education, equality and leadership in 17 of PNG's 22 Provinces. KTF has a cross-cutting focus on supporting education and economic opportunities for women and girls, as well as championing women's safety and equality in the home and in the community.

Project Zero is the first KTF program dedicated to reducing rates of FSV through a combination of preventative and responsive activities. Project Zero was introduced in response to the continuing high rates of FSV in Oro Province. Exact numbers of women and children experiencing violence throughout PNG is unknown, due to the majority of cases going unreported, however it is estimated 50% of women in Oro Province have experienced violence.

PNG enacted a Family Protection Act (FPA) (2013) in 2014². The Act consists of laws relating to domestic violence offences and Family Protection Orders, including Interim Protection Orders (IPO's) and Protection Orders (PO's.) Consistent with other Pacific Island Countries who have enacted FPA's over the last twenty years, awareness of PNG's FPA is varied and institutional capacity to implement the FPA is mixed.

PNG adopted a National Strategy to Prevent and Respond to Gender Based Violence (GBV) (2016-2025)³. The Strategy, consistent with the FPA, defines GBV as "physical, emotional, psychological and sexual abuse directed against a person because of his or her gender, including but not limited to acts committed with force, manipulation or coercion and without the informed consent of the survivor, to gain control over them".

Responses to FSV and GBV in PNG, including the implementation of the aforementioned strategy, are in general under-resourced and as a result poorly implemented. Accordingly, further investment from government and non-government entities has been required. There are a limited number of FSV interventions in PNG to draw-on for benchmarking, and a larger number throughout the Pacific, particularly in Solomon Islands, Fiji and Tonga. In general, all interventions are responding to weak implementation and awareness of the national FPA, and respond with a combination of preventative and responsive activities. Project Zero is consistent with this trend amongst peers. Further context on the extent of FSV in PNG as well as the role of various government and institutional stakeholders is provided in Annex 1.

² PNG Family Protection Act (2013) <https://femilipng.org/wp-content/uploads/Family-Protection-Act-2013.pdf>

³ PNG National Strategy to Prevent and Respond to Gender Based Violence 2016-2025
<https://femilipng.org/wp-content/uploads/National-Strategy-to-Prevent-and-Respond-to-GBV.pdf>

1.2 PROJECT DESCRIPTION

KTF has an overarching and cross-cutting focus on equality, with all projects across PNG aiming to change harmful community norms and advocate for a zero-tolerance approach to GBV and FSV, and help to generate financial security for women through sustainable, income generating opportunities. Project Zero commenced in 2020, following a rigorous design process involving extensive consultation with local communities and institutions.

Project Zero is targeted at individuals, communities and institutions. KTF partners with Femili PNG, a local NGO operating safe houses in Lae and Port Moresby, and the Family and Sexual Violence Action Committee (FSVAC) to provide training and outreach which educates communities throughout Oro on the FPA (2013) as well as services available to survivors of violence, including via health facilities, police and the justice system. Project Zero's outreach is delivered within communities (e.g. at marketplaces) as well as to health facilities, schools and other local institutions.

Project Zero also partners with the Family and Sexual Violence Unit (FSVU) to provide necessary resources and support, to assist the FSVU in managing reports of violence and referring and transporting survivors, among other tasks. In this capacity, KTF provides an essential networking and convening function, connecting the FSVU to other project partners, as well as the Office of Community Development within the Oro Provincial Government.

Project Zero also funds and operates a safe house in the Sohe district of Oro. The safe house is operated by a manager who is paid directly by KTF, and offers emergency accommodation and counselling to survivors of violence, as well as referrals to police and health facilities. KTF funds all operating costs of the safe house, including transport and accommodation, and also works closely with the safe house manager to build her capacity and confidence in tasks such as applying for IPOs. KTF has brokered numerous opportunities for the safe house manager to receive training and mentoring, including travel to Lae to observe Femili PNG's Lae safe house and approach to case work.

The overarching aim of Project Zero is for all people to live safely in their homes and communities and for children to grow and develop in safe and secure environments. The desired longer-term project outcomes, as per the project design are:

- People and communities take a zero tolerance approach to FSV and violence perpetrated against children, women and people from vulnerable and marginalised backgrounds.
- Respectful relationships and non-violent behaviours are embedded in schools, health facilities and the broader community; and schools, health facilities, colleges and community are responding to, reporting and educating people about school-based violence, child-abuse, GBV and FSV.
- Stakeholders are working together and taking action to reduce FSV and violence against children, women and people from vulnerable and marginalised backgrounds.
- Schools deliver teaching and learning that encourages respectful relationships via a gender transformative approach that tackles gender inequity.
- Victims and their families are safe and supported.

1.3 PROJECT LOCATION

Project Zero operates in Oro province of PNG. No official data has been published on the prevalence of FSV in Oro since the 1980s-1990s when it was reported that 49% of wives had been hit by their husbands.

The Hon. Garry Juffa, Governor of Oro Province, was quoted in 2014 as saying:

"You have angry young men in urban areas who have not had access to a grandfather, who have no cultural principles, morals and parameters, no loving tribe. All those things have been dismantled by either Christianity or the colonial administration. [...] They have been told they are savages, and they behave accordingly. Then you've got 10,000 jobs and 80,000 school leavers. The cost of living is through the roof. It is all a very potent mix for violence."⁴

Prior to the advent of Project Zero, KTF already supported the operation of fifteen aid posts in Oro, including several in Sohe district. Through interviews with community health workers, KTF became aware of extremely high rates of FSV in Sohe, with health workers overloaded by high case-loads, and survivors experiencing difficulty accessing services. Some of the main challenges facing survivors in Oro included under-reporting of cases, unawareness of services available to survivors (e.g. health facilities, police and justice services), unawareness of the FPA (2013) or poor implementation of the FPA amongst local institutions, and fear or distrust of local police.

These challenges are consistent with other evaluations of FSV including in Lae, as well as in Solomon Islands, Fiji and Tonga. There is evidence across several evaluations that police and justice services are under-resourced, and community trust in the police can be low amongst specific populations, in particular female survivors of violence⁵.

In Oro, violence against female teachers in schools as well as school students is of particular concern. The Oro Provincial Education Advisor, in a consultation with KTF, remarked on a number of cases of violence perpetrated against female teachers. Cases were generally reported to the FSVU, but many go unreported. Child sexual abuse cases have also been reported. At the time of launching Project Zero, there were no programs run in Oro to address either child protection or FSV.

1.4 ABOUT THIS EVALUATION

The purpose of this evaluation was to examine the impact and effectiveness of Project Zero in supporting people to live safely in their homes and communities in Oro and provide recommendations to help inform the future direction of Project Zero.

EVALUATION CRITERIA

This evaluation draws on the Organisation for Economic Cooperation and Development's (OECD) evaluation guidance on using and applying evaluation criteria. The OECD recommends six kinds of

⁴ Chandler (2014)

⁵ (i) Use and efficacy of Family Protection Orders (FPOs). Putt et.al. 2019; (ii) Ride, A & P. Soaki (2019) *Women's Experiences of Family Violence Services in Solomon Islands*. Honiara: Australian Aid/Solomon Islands Government; (iii) Winterford, K, Ma'u, K and Leahy, C (2019). Summative Evaluation of the Women and Children's Crisis Centre Program Against Violence Against Women. Pacific Women Shaping Pacific Development Support Unit.

evaluation criteria – relevance, coherence, effectiveness, efficiency, impact, and sustainability. These criteria can be viewed as a set of lenses to understand and analyse an intervention and as a basis for the consultation questions.

Criteria	Description
Relevance	Are the projects aims and objectives still relevant and important, and are the project activities consistent with the aim of the project?
Effectiveness	Is the project achieving its intended objectives? What has happened as a result of the project?
Efficiency	Are the activities cost-efficient and do they deliver on intended outputs in a timely manner?
Impact	What difference does the intervention make?
Coherence	How well does the intervention fit?
Sustainability	To what extent will the benefits of the project continue after the donor funding ceases? What are the recommendations for ongoing sustainability of the program?

The program's responsiveness to each criterion is assessed through an evaluation rubric, scoring the criteria 1 – 5 (see Annex 3). In addition to the above criterion, this evaluation also considered GEDSI.

METHODOLOGY

The approach to this evaluation consisted of a two-step methodology:

1. Desktop Review

This evaluation began with a desktop review of relevant documents. This included documents provided by KTF as well as external literature, in particular external evaluations of FSV programs in PNG, Solomon Islands, Fiji and Tonga. The full list of documents is available in Annex 2.

2. Consultations

A series of consultations were conducted with project stakeholders, including representatives of KTF, as well as program partners Femili PNG and FSVAC, and a range community stakeholders.

LIMITATIONS

This evaluation was conducted through a combination of online and face to face consultations. The majority of consultations were conducted online, with a small number conducted with the support of KTF face to face. More than sufficient data was collected in each consultation and good internet quality allowed for two-way conversation and follow-up.

The review was limited by the availability of follow-up data from program participants. This challenge is consistent with many FSV interventions, whereby follow-up with participants (particularly of outreach programs) is hard to implement due to logistical challenges, such as a lack of mobile phone reach, or

difficult geographical terrain. KTF is exploring how it may be feasible to gather more data from Project Zero's activities, including both preventative and responsive activities.

2. Findings

This evaluation has scored Project Zero a total of 31/35 when assessed against seven evaluation criteria.

Criteria	Score (out of 5)
Relevance	5
Effectiveness	4
Efficiency	5
Impact	4
Coherence	5
Sustainability	4
GEDSI	4
Total	31/35

Table 1. Scoring against evaluation criteria

2.1 RELEVANCE

Are the project's aims and objectives still relevant and important, and are the project activities consistent with the aim of the project?

RELEVANCE - SCORE 5/5

The evaluation found the program is highly relevant and responds to a significant need for prevention and responses to FSV.

Project Zero has an overarching goal for all people to live safely in their homes and communities and for children to grow and develop in safe and secure environments. This goal remains highly relevant to Oro, particularly in light of higher rates of FSV reported in Oro throughout Covid-19. Covid-19 placed increased pressure on all government services in PNG, including health, education and justice services, meaning the need for targeted interventions to address FSV is greater.

Project Zero's activities are consistent with the needs of local institutions, including health facilities, schools and police and justice services. The high rates of FSV in Oro are not matched by adequate outreach or services for survivors. Awareness of the FPA (2013) and services available to survivors is low at a community level. The FSVU is not adequately resourced to manage a high case-load. KTF's

partnership with the FSVU is helping to provide additional resourcing. In general, it is difficult for communities to take a zero-tolerance approach to FSV, when awareness that FSV is a crime, and punishable under the FPA (2013), remains so low.

Project Zero's outreach to health facilities, as well as provision of transport and other resources, is highly relevant. At Kokoda Hospital, 3-4 survivors are admitted to the facility each month with severe injuries from FSV, and a further 5-10 are seen as outpatients. The hospital doesn't have any vehicles available to transport survivors from the facility to their homes, or to the Sohe Safe House. Many young, married women are presenting at Kokoda Hospital and other health facilities in the district after experiencing FSV. In many cases, these women have travelled to Sohe to marry older men, and are disconnected from their home communities.

Project Zero's outreach to school teachers, and education about child protection, directly responds to high rates of child abuse in schools. In Oro, there have been many known cases of teachers sexually abusing female students, and most likely many unknown cases also. This often results in female students being unable to complete their schooling. Sexual and physical violence towards children within the home and community is also reported.

The need for respectful relationships and non-violent behaviour to be embedded in schools, health facilities and the broader community is high, along with the need for schools to deliver relevant teaching and learning on the topic. Project Zero directly responds to this need.

The aims of Project Zero are also relevant to PNG's FPA (2013) and the *National Strategy to Prevent and Respond to Gender Based Violence (2016-2025)*⁶ (Discussed in more detail under 'Coherence').

⁶ National Strategy to Prevent and Respond to Gender Based Violence (2016-2025).
<https://femilipng.org/wp-content/uploads/National-Strategy-to-Prevent-and-Respond-to-GBV.pdf>



CASE STUDY – PRIMARY SCHOOL TEACHERS

Preston* and Natalie* are primary school teachers in Oro. Both have attended trainings run by Femili PNG, one of which was held at Kokoda Hospital and the other in a local community hall. Preston and Natalie learnt a lot about referral pathways, and laws relating to FSV.

As a result of attending the training, more teachers are reporting FSV, including reporting their colleagues who are perpetrating child abuse. Preston and Natalie say the training was very useful, and that KTF is the “backbone” of FSV reform in Oro.

Preston and Natalie are keen to see a more diverse group of people attend the training, in particular more community leaders, constables and male teachers. “The training makes people vocal, and we need people to be more vocal.” Preston and Natalie also hope KTF can continue improving service delivery, to ensure that when a survivor is referred to a service, they receive help and a long-term solution.

*Names changed to protect anonymity of respondents.

2.2 EFFECTIVENESS

Is the project achieving its intended objectives?

EFFECTIVENESS - SCORE 4/5

The evaluation found the program is effective in achieving each of its objectives.

Outcome 1: People and communities take a zero tolerance approach to FSV and violence perpetrated against children, women and people from vulnerable and marginalised backgrounds.

Project Zero has been effective in promoting a zero-tolerance approach to FSV through outreach with communities, health facilities, schools and other local institutions in Oro.

Project Zero has funded two main partners, Femili PNG and FSVAC to conduct FSV awareness and gender desensitisation training via outreach with local communities and institutions. The training has aimed to raise awareness of the FPA (2013) and related legal frameworks (e.g. human rights) including the importance of reporting incidents of FSV, as well as raise awareness of services available to survivors.

In addition to face to face training provided through Project Zero, the program has also facilitated the set-up of “knowledge hubs” in schools and health centres, where brochures and other resources relating to FSV are always available. These resources reinforce key messages from the training. Participants report that the training gave them the confidence to report FSV, and also become champions in their own communities, and pass on their learning to others. Project Zero has resulted in an uptick in reports of FSV in the weeks and months following a training session.

There are long-standing issues with distrust of police and justice services in Oro. This trend is also evident in many other FSV programs reviewed as part of this evaluation. For instance, in Solomon Islands, the most common action taken by police in response to a report of FSV was “no action” whereby survivors were discouraged from reporting or told to come back later⁷. This contributed to a feeling amongst women that male police would side with male perpetrators of violence. In Oro, some training participants felt discouraged from reporting FSV out of concern that the police would do nothing. Project Zero is actively working with the FSVU to address this trend, and is encouraging police to attend the workshops run by Femili PNG or FSVAC, to increase awareness of relevant legislation and services. The FSVU is solely in Popondetta, however the Saiho Police also work closely with the Safe House, and Kokoda Police work closely with Kokoda Memorial Hospital. Therefore a portion of district police are actively working to address FSV.

Increasing the resourcing and effectiveness of institutions such as the police-force is a long-term process. Project Zero has made significant gains already, by fostering a highly collaborative partnership with the FSVU for the purpose of sharing resources and supporting institutional capacity, and this evaluation recommends this partnership continue, as set out in the recommendations.

Outcome 2: Respectful relationships and non-violent behaviour are embedded in schools, health facilities and the broader community; and schools, health facilities, colleges and community are responding to, reporting and educating people about school-based violence, child-abuse, gender-based violence and family and sexual violence.

Outcome 3: Schools deliver teaching and learning that encourages respectful relationships via a gender transformative approach that tackles gender inequity.

Project Zero has conducted targeted outreach, focusing on schools, health facilities and other institutions in the community. This outreach has been effective in encouraging participants to champion respectful relationships and non-violent behaviour. The outreach has reached more than 5000 people, primarily through workshops. Participants have included teachers, health workers, church leaders, and representatives of government including police and members of the FSVU.

⁷ Ride, A & P. Soaki (2019) *Women's Experiences of Family Violence Services in Solomon Islands*. Honiara: Australian Aid/Solomon Islands Government.

Training is typically conducted in recognisable local locations, including within schools and health clinics, as well as in community halls and marketplaces in Oro.

The training conducted in schools has been particularly effective in increasing reporting of child abuse. Teachers who participate in the training report being more confident identifying and reporting child abuse to the police. KTF is looking into how to improve data collection with outreach participants, to better understand long-term impact on reducing FSV, including through greater reporting to police.

As above, long-standing under-resourcing of the police, and an associated distrust of police, can undermine reporting of FSV in general. This trend is observed in Oro, including amongst teachers who have attended training. However, once again KTF's relationship with the FSVU is helping to reverse this trend, as is including police and FSVU staff in outreach.

Outcome 4: Stakeholders are working together and taking action to reduce domestic and family violence and violence against children, women and people from vulnerable and marginalised backgrounds.

Prior to Project Zero, local institutions including the FSVU and police, Sohe Safe House and others had no means of networking and exchanging knowledge with one another. Through Project Zero, KTF has brought together stakeholders from within Oro, as well as NGOs such as Femili PNG who had never undertaken work in Oro prior to Project Zero. This coordination and networking between partners has fostered improved knowledge-sharing, capacity building and a cohesive, consistent approach to addressing FSV. KTF plans to continue bringing partners together, including the potential to formalise this partnership such as with the establishment of a 'FSV Working Group' in Oro or similar vehicle.

The coordinating and convening function provided by KTF has also provided a basis for service providers to improve referral pathways and continue to promote better coordination. Strengthening referral pathways between service providers (for example, from a health facility to the police, or to a case worker) is an important component of many FSV programs. In the case of Femili PNG's Safe House in Lae, the introduction of qualified case workers was an essential component in improving referral pathways.

A study of the use and efficacy of Family Protection Orders (FPOs) in Lae found that having a qualified case worker supporting a survivor as well as a court advocate increased the probability of a Protection Order (PO) being issued⁸. This demonstrated that case workers were an important element in helping survivors through the justice system, and to a final outcome.

In the case of Femili PNG, the majority of referrals in the first two years of operating the Lae Safe House came from the Family Support Centre (FSC)⁹. FSCs have been established in PNG over the last 20 years, particularly since the FPA (2013) was enacted. The FSCs offer survivors of FSV a range of healthcare and referral services. There is no FSC in Oro Province, and thus a critical referral mechanism is absent from the FSV landscape. KTF has played an important role in strengthening coordination between local service providers in the absence of an FSC.

Outcome 5: Victims and their families are safe and supported

⁸ Use and efficacy of Family Protection Orders (FPOs). Putt et.al. 2019.

⁹ Helping Family and Sexual Violence Survivors in Papua New Guinea, Evaluation of Femili PNG, Lae Operations 2014-2020 Judy Putt 2021

The Sohe Safe House is the first and only facility providing emergency accommodation and counselling to survivors of FSV in Oro. The Safe House was initially setup by the Safe House manager, and was recognised but not financially supported by the Oro Provincial Government. KTF began funding the Safe House at the outset of Project Zero. KTF's support to the Sohe Safe House has been instrumental and without KTF it is unlikely the facility would continue to operate, or offer the services and support it currently provides.

KTF funds the salary of the Sohe Safe House manager, and provides ongoing support including daily communication and oversight, as well as facilitating mentoring and capacity building both via KTF and more recently from Femili PNG's Lae Safe House. The manager has become more confident in providing counselling and case work, and is now familiar with tasks such as filing an IPO, and is able to educate others in the community on how to do this. KTF also funds food, transport and other operational expenses for the Sohe Safe House. KTF is currently working with the manager to plan her ongoing professional development, which is likely to include further study and professional qualifications in counselling or case work.

The Sohe Safe House caters to a high proportion of children and teenagers, most of whom are the children of female survivors and are accompanying their mother to the facility. As is consistent with other safe houses, most survivors stay for a short time (less than two weeks). KTF has collected data on the survivors, including duration of stay, nature of abuse, dependents and where possible, contact information for follow up. KTF is working on improving data collection, partly to assist with referring survivors to other services, as well as to support and improve the operations of the Sohe Safe House and adapt them to the diverse experiences and needs of survivors.

KTF's approach to the Sohe Safe House can be compared to that of Femili PNG's Lae Safe House. The Lae facility commenced operations in 2014, and as of 2020 had 26 staff providing specialist services including case work and legal-aid. Thus, the size and scale of the Lae operation is different to that of the Sohe Safe House, however it provides a direction for growth. KTF are exploring how to provide specialist case workers at the Sohe Safe House, as well as counselling for survivors and their children. This will be important as the number of survivors accessing the Sohe Safe House increases, through greater outreach and awareness of the service. This is referenced in more detail in the recommendations.

KTF has also experimented with offering livelihood training to survivors at the Sohe Safe House, such as training in making and selling sanitary pads (consistent with KTF's Strongim Bisnis program). This was effective in providing skills to survivors, but was difficult to maintain due to the need for more staff at the facility. KTF is eager to extend this offering in the future, and offer livelihood training to all survivors to increase their economic security. Other studies of FSV evaluations found that financial dependency on spouses increased the risk of FSV, and prevented survivors from seeking help. Linking livelihood and employment programs with FSV services is a common recommendation¹⁰.

2.3 EFFICIENCY

Are the activities cost-efficient and do they deliver on intended outputs in a timely manner?

¹⁰ Ride, A & P. Soaki (2019) *Women's Experiences of Family Violence Services in Solomon Islands*. Honiara: Australian Aid/Solomon Islands Government.

EFFICIENCY - SCORE 5/5

The evaluation found the program is highly efficient, providing value for money.

KTF has invested \$750,854 AUD in Project Zero since 2020. Of this, approximately \$336,520¹¹ went to partners to cover the cost of outreach, which has reached over 5000 people.

Between 2020 and 2022 the Sohe Safe House was accessed by 81 people, of which 38 were adult females, and 6 were adult males, and the remainder were children, often in accompaniment of their parent. The operation of the Sohe Safe House has cost approximately \$85,000 over the life-cycle of Project Zero. Demonstrating KTF's strong commitment to the program, KTF are now investing approximately \$200,000 in the construction of a new safe house, which will resolve issues with ownership and land title for the current facility. This is due for completion by June 2023.

This evaluation finds Project Zero to be cost efficient, in line with DFAT's value for money principles. KTF has demonstrated cost-consciousness and proportionality in allocating funds. KTF has also had a results-focus and has monitored performance and risk through strong project management and ongoing communications with partners, and has demonstrated accountability and transparency throughout this evaluation. Project Zero is an example of a highly innovative project, being the first project to address FSV in Oro, and is demonstrating significant achievements already, especially considering the difficult and complex operating environment and poorly resourced local institutions.

2.4 IMPACT

What difference does the intervention make?

IMPACT - SCORE 4/5

The evaluation found the program is highly impactful.

Project Zero has had a significant and positive impact on individuals, communities and institutions in Oro. This impact has been felt in terms of both preventing and responding to FSV.

The outreach conducted by Project Zero has impacted upon awareness of FSV at a community level, and has contributed to a strengthened and coordinated approach to addressing FSV. Prior to KTF implementing Project Zero, no development NGO had addressed FSV in Oro. KTF is now perceived as the organisation leading advocacy and reform on FSV in the province. KTF has therefore had a significant impact on the FSV landscape in Oro.

Project Zero has had a positive impact on individuals and communities through its outreach activities. As outlined above, this outreach has contributed to fostering respectful relationships and promoting a zero-tolerance approach to FSV, encouraging participants to speak-up and report crimes. The outreach

¹¹ All figures are in AUD

has increased knowledge of the FPA (2013) amongst participants, including participants from schools, health facilities and other local institutions.

Project Zero has also had a highly significant impact on the FSVU. KTF has provided ongoing, substantial support to the FSVU, both in terms of capacity building and providing essential logistical support. KTF works closely with a Sergeant at the FSVU.

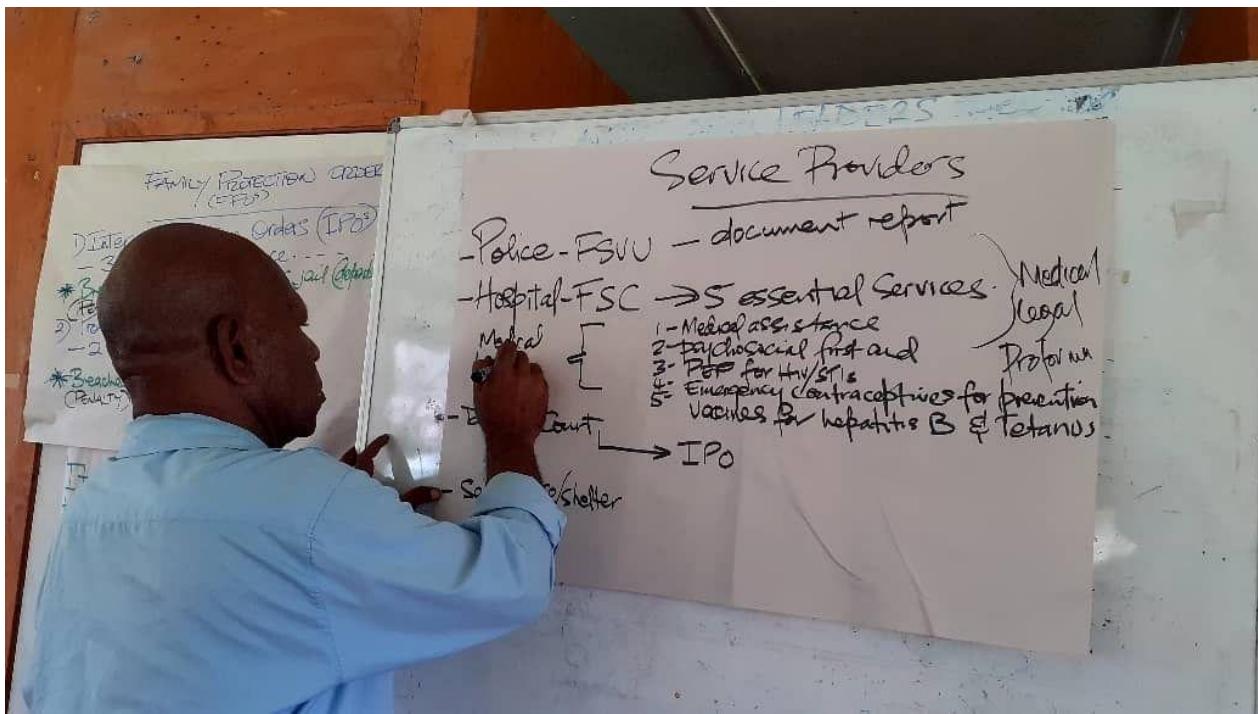
Through working closely with KTF, this Sergeant now refers survivors to the Sohe Safe House, as well as accepts referrals to the FSVU from the Sohe Safe House. When survivors come to the Safe House, the Safe House manager with the support of KTF begins compiling documentation for PO's or Authorisation's to Repatriate¹². As many survivors are from outside of Oro, safely repatriating them to their home province after experiencing FSV is of critical importance to their long-term welfare. When repatriating a survivor, KTF is in constant contact with the FSVU and Sohe Safe House, from the first engagement with any partner up until they are safely repatriated. This process has a very significant impact on both the survivor, and the capacity of the Sohe Safe House and FSVU to operate.

FSVU also works closely with KTF in the event of child protection cases, in particular by referring matters to their counterparts in Popondetta Police, particularly more senior members of the force such as Sergeants and Constables. KTF is able to refer matters to the FSVU and work closely with the FSVU to ensure their follow-up.

KTF also provides direct financial support to the FSVU, including to fund transportation or escort of survivors, as well as transportation used to apprehend perpetrators. Members of the FSVU are also included in Project Zero's partner training and service provider meetings, further contributing to their capacity. KTF has therefore had a significant impact on the FSVU through the ongoing partnership brokered through Project Zero.

KTF and the FSVU also work closely with the Department of Community Development on case management, and KTF will be working on strengthening this partnership in the near future, .

¹² An Authorisation to Repatriate is a letter administered by the FSVU and addressed to KTF, to allow for repatriation to occur when a survivor leaves the Province.



CASE STUDY – STAFF MEMBER OF FEMILI PNG

Brian* works with Femili PNG on their outreach programs. Brian observed a lot of FSV in Oro upon his first visit there, in particular violence in schools. He said teachers were sexually abusing their own students, and as a result many young girls were unable to complete their schooling. Brian says Project Zero has brought together partners working on FSV, like Femili PNG, and ensured no one has to work in isolation. "Everyone is coming together now, which is a good sign. This is very important." Brian's colleague Stacey* remarked that prior to Project Zero, there was no effective communication between service providers. Now there is a bridge to coordinate and communicate.

Since Project Zero began its outreach program, Brian says many changes can be observed. People in communities are reporting and referring abuse. "The information we provide is allowing people to change their thinking."

But Brian says there is still much work to do. Essential services are under-resourced and at capacity, and in rural and remote areas essential services are often not available. Service delivery must be strengthened, and Femili PNG is eager to continue working with KTF to support local institutions addressing FSV in Oro.

*Name changed to protect anonymity of respondent.



CASE STUDY – HEALTH OFFICER AT KOKODA HOSPITAL

Cynthia* is a Health Officer at Kokoda Hospital. She has lived in Kokoda for 13 years. In her role, she oversees administration and treatment at the hospital. Cynthia has attended outreach training by Project Zero, and has sent other officers from the hospital to attend training too. Cynthia is regularly in touch with KTF, and had received a lot of support, including advice on preparing medical reports for survivors which are then sent to the police. Cynthia also refers survivors to the Sohe Safe House.

After attending outreach training, both health officers and survivors of violence become more aware of what they should do, including asking for medical reports to be conducted to be used as evidence for police. Cynthia

says men are also starting to understand the law, with some perpetrators coming to the hospital to apologise before their partners report them to the police. Cynthia knows how important medical reports are in helping survivors pursue justice.

Cynthia says “no other partners helped” with FSV and KTF addressed an urgent gap. There is still much work to do, particularly to address the safety of health officers and nurses, who often experience threats from the partners of survivors whom they’re caring for. Cynthia is eager to see Project Zero continue to strengthen local service providers and work closely with the justice system to ensure perpetrators are dealt with.

*Name changed to protect anonymity of respondent.

2.5 COHERENCE

How well does the intervention fit?

COHERENCE - SCORE 5/5

The program was found to be coherent with PNG's laws and frameworks governing FSV, as well as with the work of local partners in Oro, and KTF's broader development work in the province.

The objectives of Project Zero are consistent with PNG's FPA (2013) and associated National Strategy to Prevent and Respond to GBV (2016-2025). The objectives of the National Strategy include:

1. To ensure that by 2025 the Government of PNG has a functioning gender based violence (GBV) governance and institutional structure supporting the achievement of zero tolerance towards GBV.
2. To standardise and institutionalise data collection and facilitate ongoing in-depth research to support evidence-based planning, budgeting and programming to end GBV.
3. To ensure quality, continuity and sustainability of coordinated responses, referrals and service delivery for survivors of GBV.
4. To scale-up, decentralise and standardise inclusive, quality initiatives and messaging for prevention of gender-based violence at all levels and in all sectors of society.

KTF directly addresses each of these objectives through Project Zero. KTF is also working to improve data collection and support evidence-based planning as the program continues, in order for Project Zero to continue to contribute to the growing evidence-base on FSV interventions in PNG.

KTF supports the aims of the FSVU and Sohe Safe House, and Project Zero has been welcomed by the Oro Provincial Government. KTF is viewed as a committed, long-term development partner with a range of programs in Oro, across health, education, leadership and livelihoods. KTF is exploring how to further increase coherence between Project Zero and other programs in Oro, such as education and livelihood development activities.



CASE STUDY – SOHE SAFE HOUSE MANAGER

Wanda* is the Manager of the Sohe Safe House. She says she is dedicated to her role, and sees it as a “blessed” opportunity to serve her community.

Wanda says violence is a big problem in Oro. Many men are unaware of the laws relating to FSV. The violence takes many forms, including sexual assault, physical violence or financial coercion. Wanda says it's critical that women and children know their rights.

In her role as Manager, Wanda has become a well-

known figure in the community. Her training from KTF in writing IPOs, for example, has allowed her to teach people in the community how to apply for an IPO. When survivors come to the Sohe Safe House, Wanda cares for and counsels them, and also supports them to cook and develop useful skills where possible.

Wanda is eager to see the role of the Sohe Safe House grow, and to offer a broader range of services including more case work and legal aid.

2.6 SUSTAINABILITY

To what extent will the benefits of the project continue after the donor funding ceases?

SUSTAINABILITY - SCORE 4/5

The benefits of the program were found to be sustainable. KTF continues to be an essential funder, convenor and coordinator.

Project Zero is creating sustained behavioural change and improved capacity amongst program participants. The outreach conducted by Project Zero has embedded respectful relationships and a zero-tolerance approach to FSV amongst program participants, who have then gone on to share their learnings and contribute to ongoing behavioural change amongst their communities. The growing awareness of the FPA (2013) and related laws and frameworks cannot be undone, and is consistently

reinforced through the presence of Knowledge Hubs at schools and health facilities where outreach has occurred.

Project Zero has also strengthened the capacity of the FSVU and Sohe Safe House, and connected both organisations with one another as well as with other partners including Femili PNG and the FSVAC. This capacity-building and networking has sustained, long-term benefits which will continue to be reinforced as Project Zero continues.

KTF is operating in a highly complex landscape, and as noted above was the first development partner to address FSV in Oro. Project Zero has succeeded in putting the issue of FSV “on the map” in Oro and building a groundswell of momentum and support for preventative and responsive approaches to addressing the issue.

2.7 GEDSI

To what extent has gender, disability and social inclusion been addressed?

GEDSI - SCORE 4/5

The program was found to directly address the needs of women and girls, as well as engage with and benefit people with disabilities.

Project Zero directly addresses an issue primarily experienced by women and girls. The vast majority of adults accessing the Sohe Safe House were female. As addressed in the above, Project Zero’s activities have a direct benefit to women, by contributing to their safety and wellbeing through preventative and responsive activities.

KTF has also conducted extensive place-based analysis on the needs of disabled people in Oro. All FSV programs considered as part of this evaluation report difficulty in meeting the needs of people with disabilities, and report low levels of people with disabilities accessing services such as safe houses or legal-aid¹³. Some programs have found success through working with Disabled People’s Organisations (DPOs) including to co-deliver outreach and training, and others have focused on providing training to police and other service-providers on working with disabled people. KTF has focused on increasing the uptake of Project Zero’s activities by including people with disabilities, and continues to explore the most appropriate methods to do so in Oro. The Sohe Safe House also has a long-stay survivor with a disability.

¹³ Winterford, K, Ma’u, K and Leahy, C (2019). Summative Evaluation of the Women and Children’s Crisis Centre Program Against Violence Against Women. Pacific Women Shaping Pacific Development Support Unit ; Ride, A & P. Soaki (2019) *Women’s Experiences of Family Violence Services in Solomon Islands*. Honiara: Australian Aid/Solomon Islands Government.

3. Conclusions and Recommendations

This evaluation makes the following recommendations to Project Zero:

1. High Priority

- 1.1 This evaluation strongly recommends KTF continue to implement Project Zero in Oro. The successes evident so far provide a strong rationale to continue delivery of the program.
- 1.2 KTF should continue providing support and capacity-building to the FSVU and Sohe Safe House, to improve the support provided to survivors. Examples from other FSV programs in the Pacific which may benefit Project Zero include:
 - 1.2.1 Create a decision-tree or visual representation of referral pathways and services under the FPA (2013) with branches presenting the options which service providers can take for FSV survivors. This decision-tree should be provided to all survivors presenting with FSV at police stations, health facilities or the Sohe Safe House.
 - 1.2.2 Develop and distribute a one-page follow-up sheet to record outcomes of service provision and monitor service satisfaction (for instance, upon departure from the Sohe Safe House or upon meeting with the FSVU). This follow-up sheet should be tailored to both adults and older children.
 - 1.2.3 Given the proportionately high number of children accessing the Sohe Safe House, as well as the high rates of FSV crimes against children, KTF should develop and distribute a cross-sectoral guide to educate service providers on the needs and rights of children. The tool should describe safe and unsafe ways for service providers to work with children.
- 1.3 Continue learning from the precedent set by Femili PNG with their Lae Safe House, as the Sohe Safe House enters a new phase with the construction of the new facility. This is an opportunity to consider how the Safe House can improve its service delivery. Options based on the Lae experience include:
 - 1.3.1 Recruit skilled case-workers, or upskill current personnel in case work. As of 2020, case workers in the Lae Safe House were typically managing up to 150 cases per year. Since 2014, the Lae Safe House has observed an increase in client follow-ups and an increase in the average length of closed-cases, suggesting more intensive and longer case work and demonstrating the importance of case work to supporting survivors.
 - 1.3.2 Provide greater legal assistance, in particular to obtain IPO's and PO's. In the Lae Safe House, between 2019 and 2020 just 2.6% of clients were assisted with repatriation whereas 80% sought legal assistance to obtain an IPO. Femili PNG also observed that having a case worker and a court advocate working with a survivor significantly increased the likelihood of a PO being issued. It is likely the FSVU and wider justice system in Oro would struggle with a significant increase in demand for IPOs, so if Project Zero is to provide more legal-aid it should also consider means of further increasing the capacity of the FSVU and where possible, the wider justice system. KTF should consider placing a permanent advisor within the FSVU.

2. Medium Priority

- 2.1 Improve the use of information management systems to collect data on survivor age, disability, employment status and nature of abuse. KTF should formalise agreement with FSVU for data-sharing, to improve monitoring and evaluation.
- 2.2 Explore opportunities to work with the Northern Provincial Health Authority (PHA). The National Department of Health is considering how PHAs can provide more integrated health care, including responding to GBV and FSV. KTF should consider whether the Northern PHA could be brought into partner meetings if relevant.
- 2.3 Increase the geographical reach of Project Zero within Oro, in particular providing outreach in more remote and rural areas, where awareness of the FPA (2013) and associated laws and services is much lower. KTF may also consider providing training to remote health clinics on how to properly document FSV, and refer survivors to police, hospitals or other services.
 - 2.3.1 Ensure that training is reaching diverse groups of people. Other FSV programs have observed that training can risk 'preaching to the converted' and the people who really need to attend, do not.
- 2.4 Connect Project Zero with other programs operated by KTF in Oro, particularly programs which increase education, training and livelihood opportunities for women. As evidenced in this evaluation, financial dependency on a spouse is often a risk factor for FSV, whereas financial independence can give survivors the confidence and means to leave a violent partner.
- 2.5 Provide more outreach and training to frontline police officers throughout Oro, to increase awareness of FSV, FPA (2013) and available services. Once established, KTF could work with the FSVU to establish a formal assessment to assess police officer knowledge of correct procedures and ensure they are meeting obligations under the FPA (2013).
- 2.6 Increase public awareness of options to report dissatisfaction with police responses to FSV.
- 2.7 Lobby for a FSC to be established in Oro, noting this was a critical source of referrals for the Lae Safe House.
- 2.8 Prioritise disability inclusion, including co-delivering outreach with a DPO where possible. This activity should be guided by DPOs but may include co-designing and delivering outreach training, working together to strengthen referral pathways for people with disabilities, or providing guidance to police and justice services on FSV awareness specifically for people with disabilities.
- 2.9 Work with Oro Provincial Government to explore feasibility of contributing core-funding in future, such as 5% of total cost of Project Zero in 2024-25 FY. This may contribute to project sustainability and local ownership.

ANNEX 1 – FURTHER CONTEXT ON FSV PREVENTION IN PNG

The *Papua New Guinea Demographic Health Survey 2016-2018* reported that 63% of women who were, or who had previously been, married had experienced spousal violence. The most common type of violence was physical followed by emotional violence. Of these, 57% of women who had experienced spousal violence had sustained injuries. Whilst the exact cost of family and sexual violence to the PNG economy is unknown, the practice results in a significant burden on the healthcare system, as well as unemployment and underemployment for both survivors of violence and those who care for them.

The issue of family and sexual violence is unfortunately not new for PNG, though in interviews conducted as part of this evaluation, many felt that violence increased during and post-Covid-19. In 2013, PNG enacted the *Family Protection Act (2013)* resulting in the establishment of specialist services such as Family and Sexual Violence Units (FSVU), Family Support Centres (FSCs) and more Safe Houses. However, preventing family and sexual violence requires a holistic response, including a range of preventative and reactive/responsive interventions.

Attitudes towards family and sexual violence are concerning. The *Demographic Health Survey* also found that 70% of women and 72% of men believe a husband is justified in beating his wife under specific circumstances, for instance if she appears to be neglecting the children, or if she goes out without telling him.

Medecins Sans Frontieres (MSF) has referred to family and sexual violence in PNG as a medical emergency, noting that survivors can suffer acute and long-lasting medical and psychological consequences. MSF attributes some of this violence to cultural practices including polygamy, early marriage, customary justice and social norms which favour high levels of criminality. Of particular concern are the high numbers of children experiencing family and sexual violence, generally at the hands of relatives or a known person. MSF focuses on five key services which should be made available to all survivors of sexual violence. These are:

- Medical first aid;
- Psychological first aid;
- Prevention of HIV and other STIs;
- Vaccination against hepatitis B and tetanus; and
- Emergency contraception to prevent unwanted pregnancy.

However, providing this support is highly challenging due to a severe shortage of healthcare workers particularly in rural areas, as well as a lack of awareness of medical services and referral pathways more generally, and a stigmatization of survivors of family and sexual violence. Large distances and challenging terrain also make follow-up and the ongoing provision of services extremely difficult.

Current State of Service Providers

Family Support Centres (FSCs) have been established in PNG over the last 20 years, and particularly since the *Family Protection Act (2013)* was enacted. In 2006, the Secretary for Health required all Provincial Hospitals to have FSCs. The FSCs offer survivors of violence a range of healthcare and referral services. The FSCs were originally introduced to address referral gaps by providing facilities within health centres dedicated to survivors of violence through treatment, counselling and legal advice. The FSCs also exist to bring more awareness to the issue of family and sexual violence.

In order to function effectively, FSCs need to be able to refer survivors to other service providers. Whilst the FSCs have had some success in providing a critical service to survivors, and fostering safe and respectful environments, their replicability has been limited by a lack of clear leadership and management ¹⁴. At the time of writing, there are no FSCs in Oro Province demonstrating the significant gains required to bring Oro into alignment with other Provinces with operational FSCs.

Family and Sexual Violence Units (FSVUs) have also been established in PNG as a function of the Royal PNG Constabulary (RPNGC). Like FSCs, the FSVUs are intended to provide a critical service to survivors. An evaluation by Pacific Women Lead in 2021 found that their effectiveness is inhibited by internalised gender norms relating to male dominance and authority. Further, like many institutions in PNG, FSVUs are under-resourced and over-burdened by cases, impacting upon the timeliness of responses. Very few cases referred to the FSVU are investigated, and where cases are investigated, this is generally the result of the determination of the survivor to see an outcome. There is an FSVU in Popondetta, which was considered in the context of this evaluation. However, it wasn't possible to speak with the Sergeant as part of this evaluation.

The **Provincial Law and Order Committee** in Oro consists of the Provincial Magistrate, the Provincial Police Commander, the Public Solicitor and the Provincial Education Advisor. This group is responsible for carrying out some limited awareness raising in schools, and during these sessions may detect child protection issues (e.g. cases of child abuse, or children arriving at school having not had breakfast and thus leaving school by lunchtime due to hunger).

The **Office of Community Development** in Oro Provincial Government is also involved in supporting survivors of family and sexual violence, through coordination and network-building and providing advice to NGOs working on violence in the province.

Numerous non-government service providers and advocacy organisations exist in PNG. The **Family and Sexual Violence Action Committee (FSVAC)** is a Sectorial Committee of the Consultative Implementation and Monitoring Council (CIMC), an independent organisation administered by the Institute of National Affairs ¹⁵. FSVAC was established in 2000 to contribute towards reducing the occurrence of physical, sexual and psychological violence. FSVAC focuses on legal reform and policy development, survivor centred service provision, advocacy and communication, and research and knowledge management and plays a role in coordinating and networking the various service providers in the sector. The FSVAC, based in Port Moresby, has relationships in Oro Province and has conducted training and other events there.

There are several safe houses operating in PNG which are run by **independent non-government organisations**. Despite this, there remains a severe lack of well-resourced safe houses across the country. Femili PNG is a Papua New Guinean NGO that works to improve responses to family and sexual violence through free case management services, awareness raising, training and support, and advocacy. KTF has enabled Femili PNG, through Project Zero, to offer awareness raising and training in Oro. Prior to Project Zero and KTF's direct support, Femili PNG had not conducted any work in Oro.

¹⁴ UNICEF Evaluation of FSCs (2016): <https://pacificwomen.org/news/evaluating-family-support-centres-in-papua-new-guinea/>

¹⁵ Family and Sexual Violence Action Committee (2023): <https://cimcpng.org/index.php/fsvac-about-us>

ANNEX 2 – PROJECT METHODOLOGY

1. Desktop Review

Documents provided by KTF:

- Project Zero Final Project Design (2020)
- Place-based Analysis of Disability in Oro (2022)
- Place-based Analysis of Gender in Oro (2022)
- Femili PNG Project Zero Progress Report (2022)
- Femil PNG Training Survey Pre and Post Training (2022)
- FSVAC Tranining Program Outline (2022)
- FSVAC Tufi Sensitisation Report (2022)
- Project Zero Disability and Gender Analysis (2020)
- Quarterly Reports Project Zero (Q4 2021 and Q2 2022)
- Femili PNG Project Zero Proposed Activities (2021)
- Femili PNG Working with KITF (2022)
- Safe House Data 2020-2022
- Sustainability Paper Project Zero (2022)
- Training Report Femili PNG Sensitisation Training (2022)

External literature:

- Violence Against Women in PNG: How Men Are Getting Away with Murder, Jo Chandler (2014).
- Papua New Guinea National Strategy to Prevent and Respond to Gender Based Violence 2016-2025
- Papua New Guinea Demographic Health Survey 2016-2018
- Evaluation of the RPNGC Family and Sexual Violence Units, Pacific Women Lead and GHD Pty Ltd (2015)
- Medecins Sans Frontieres (MSF) Responses to Domestic Violence in PNG (multiple sources).
- Independent Formative Evaluation of Family Support Centres in PNG, UNICEF (2016).
- Use and efficacy of Family Protection Orders (FPOs). Putt et.al. (2019).
- Mobile phones gender-based violence and distrust in state services: Case studies from Solomon Islands and PNG. Stephanie Hobbis (2018).
- Ride, A & P. Soaki (2019) *Women's Experiences of Family Violence Services in Solomon Islands*. Honiara: Australian Aid/Solomon Islands Government.
- Helping Family and Sexual Violence Survivors in Papua New Guinea, Evaluation of Femili PNG, Lae Operations 2014-2020. Judy Putt (2021)
- IWDA Evaluation - Responding to Violence Against Women and Girls in SI (2021)
- Winterford, K, Ma'u, K and Leahy, C. Summative Evaluation of the Women and Children's Crisis Centre Program Against Violence Against Women. Pacific Women Shaping Pacific Development Support Unit (2019).

2. Consultations

Online consultations were conducted with:

- Four representatives of KTF:
 - Project Zero Coordinators
 - Gender and Social Inclusion Lead

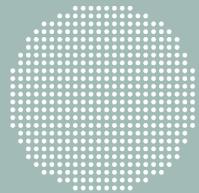
- Two representatives of Femili PNG:
 - Operations Director
 - Community and Outreach Officer
- One representative of the Family and Sexual Violence Action Committee (FSVAC)
- Sohe Safe House Manager
- Two Representatives of Community Development Unit, Oro Provincial Government

Face to face consultations were conducted with:

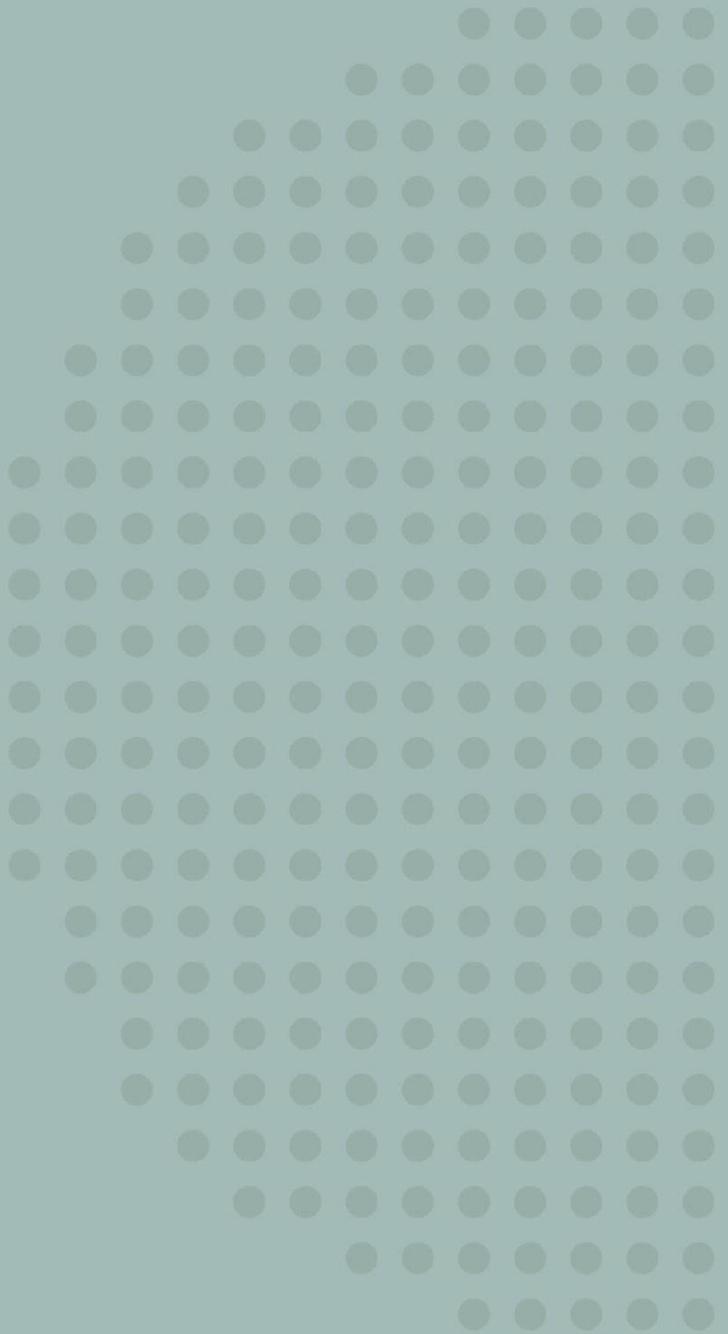
- One representative of Kokoda Hospital
- Two Teachers working in Sohe:
 - Gorari Primary Shool
 - Kou Kou Elementary School

ANNEX 3 - EVALUATION RUBRIC

Score out of 5	1	2	3	4	5
<i>Relevance</i>	The project's aims and objectives are not relevant or important and not consistent with the aims of the project.	The project's aims and objectives are only slightly relevant and slightly consistent with the aims of the project.	The project's aims and objectives are relevant and consistent with the aims of the project.	The project's aims and objectives are truly relevant, important, and very consistent with the aims of the project.	The project's aims and objectives are highly relevant and incredibly important and completely consistent with the aims of the project.
<i>Effectiveness</i>	The project has not achieved its intended objectives.	The project has fallen short of achieving its intended objectives.	The project has gone a long way toward achieving its intended objectives.	The project has achieved its intended objectives.	The project has thoroughly achieved its intended objectives.
<i>Efficiency</i>	The activities are not cost-efficient, and they do not deliver on intended outputs in a timely manner	The activities are only slightly cost efficient and only slightly deliver on intended outputs in a timely manner.	The activities are reasonably cost-efficient, and they deliver on intended outputs in a mostly timely manner.	The activities are cost-efficient, and they deliver on intended outputs in a timely manner.	The activities are extremely cost-efficient, and they deliver on intended outputs in a timely manner.
<i>Impact</i>	The intervention generates broader negative impacts.	The intervention generates slightly negative impacts.	The intervention generates moderately positive impacts.	The intervention generates positive impacts.	The intervention generates extremely positive impacts on a broad and transformative scale.
<i>Coherence</i>	The intervention does not fit and is not consistent internally or externally.	The intervention only slightly fits and is only slightly consistent internally or externally.	The intervention mostly fits and is mostly consistent internally and externally.	The intervention fits and is consistent internally and externally.	The intervention fits and is extremely consistent internally and externally.
<i>Sustainability</i>	The project is not sustainable and funding sources are very limited.	The project is not very sustainable, and funding is difficult.	The project is sustainable, and funding is available, but donor funding is still the major source of total funding.	The project is -sustainable but relies on some donor support.	The project is entirely self-sustaining.
<i>GEDSI</i>	The project does not reflect GEDSI principles.	The project is not reflecting GEDSI principles very well though there is some attempt to do so.	The project reflects some GEDSI principles.	The project reflects GEDSI principles effectively.	The project promotes GEDSI through every element of its activities and impact.



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