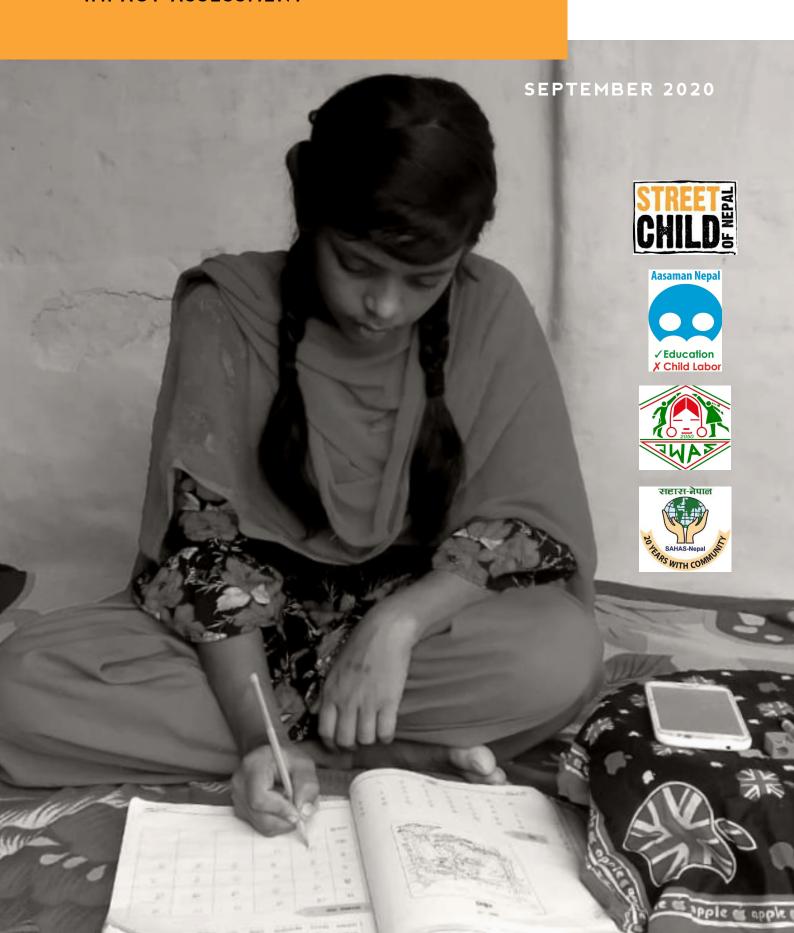
# **MARGINALISED NO MORE**

DISTANCE TEACHING AND LEARNING IMPACT ASSESSMENT



# 1. COVID-19 and Musahars in Nepal



On 24 March 2020, the Government of Nepal enforced a national lockdown to prevent a widespread outbreak of COVID-19. The country remained under one of the stringent lockdowns in the region until 15 June 2020, following which intermittent lockdowns and curfews have been carried out in areas most affected by COVID-19. These closures have led to interrupted access to capital, competition over scarce resources, and interrupted access to social services across the country; with a disproportionate impact on the poorest and most marginalised.

The COVID-19 crisis has exaggerated an existing chronic crisis for Musahars, considered 'untouchable amongst the untouchable', prohibited from accessing already scarce services and interacting with other castes [Bhattachan 2006]. This existing, enduring lack of access to essential infrastructure and support services due to isolation and stigmatisation has put Musahars at the centre of a health crisis, as well as a fast-evolving humanitarian crisis.

The health and humanitarian impact of the COVID-19 pandemic has educational, economic and social consequences that threaten to reverse promising progress. Musahar girls bear the brunt of this impact: the pandemic exacerbates existing inequalities, and exaggerates inequities in access to education and economic empowerment opportunities. The need to educate and protect most vulnerable girls is most critical than ever: Marginalised No More [Leave No Girl Behind/ Girls Education Challenge] is a 3-year project [2019-2021] which works with Musahar girls aged 10-18 to deliver essential education, economic empowerment and enhanced protection capabilities for Musahar girls. Following cessation of teaching and learning activities due to the lockdown in March 2020, the project has pivoted to remote project implementation and developed a comprehensive Distance Teaching and Learning [DTL] programme to effectively address the acute educational and protection challenges created through the COVID-19 crisis.

## 2. Situational Analysis and Action

Our COVID-19 response and action have been underpinned by (i) a scoping assessment of 211 Musahar villages [APR 2020]; (ii) a national COVID-19 Rapid Assessment, including 383 respondents in Province 2 [MAY 2020], conducted as part of a <u>Global COVID-19 Rapid Assessment</u> [May 2020]; and (iii) a COVID-19 Gender Analysis examining humanitarian impact on Musahar girls in Province 2 [APR 2020].

Key findings include: (i) 100% Musahars had experience immediate loss of income while 79% had not received any food assistance and 24% did not have hygiene resources; (ii) 65% of the respondents said that children had no access to alternative learning while 67% reported that they had borrowed cash from friends and relatives, with 70% citing hunger or starvation as the biggest threat to them; and (iii) families were prioritising survival and deprioritising learning for children, with girls amongst lower caste groups and with disabilities at biggest risk.

In response, Marginalised No More has been adapted for a robust COVID-19 response to (i) provide essential hygiene packs to Musahar girls and their families; (ii) deliver a responsive and effective remote learning intervention tailored for girls in rural, hard-to-reach communities [for literacy numeracy and life skills]; and (iii) cascade critical protection-related information and direct linkage to psychosocial first aid and case management, for immediate mitigation against negative coping strategies for girls during and following confinement. 83 Community Management Committee Focal Points, based within working communities, were instituted to support these activities on the ground, whilst the country and Province was under lockdown; including a Weekly Well-being Check to assess girls' status.



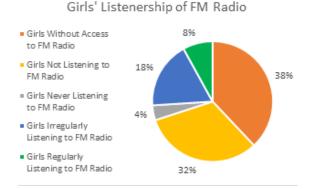
Street Child of Nepal was able to provide food assistance to 1,579 Musahar households, including 88 households on Marginalised No More through COVID-19 adaptations on our Breaking the Bonds project [UK Aid Direct] and Emergency Appeal Funds. In addition, 9 project communities were directly linked to food distributed by the local government. This was in direct response to the chronic food shortage experienced by the Musahar communities; and the discrimination and exclusion faced in accessing relief provisions.

## 3. Learning Approach

Last Mile Learning, the Street Child Distance Teaching and Learning [DTL] model, follows a learning framework which recognises the need for life-saving information integrated alongside foundational arithmetic and reading. This approach is designed to provide a safe, secure and stable routine that offers immediate psychosocial protection to maintain girls' learning gains and prevent disengagement or dropout. This is substantiated by an incremental intensification of support towards an improved pace of progress. Furthermore, in consultation with our Technical Advisor <u>Pratham</u>, this approach has been designed and implemented recognising that a dynamic state of lockdown and mobility restrictions will persist and impact project delivery, most likely, for the remainder of the project.

The DTL, implemented in both our Learning and Life Skills Protection Interventions, combines a three-pronged use of (i) audio-assisted learning sessions; (ii) self-learning print packages; and (iii) learning assistance provided through phone sessions. Street Child's Education and Protection/Inclusion team led the technical adaptation of instructional content while partners AASAMAN Nepal, Janaki Women's Awareness Society [JWAS] and Group of Helping Hands [SAHAS] adapted sessions for context and translated them into Maithili.

Initially, a DTL approach using radio was considered. However, our survey found that 62% of girls had access to FM radio, of which 26% listened and only 8% listened to FM radio regularly. A DTL approach using mobile phones to deliver sessions to small groups of learners through a shared mobile phone was therefore deemed more appropriate and effective.



## 4. Staff Capacity: Teacher Training and Safeguarding

Team trainings were conducted virtually with varying aims, objectives and content. Community Educators received a refresher training on the <u>Teaching at the Right Level</u> pedagogy and instructional resources including manuals, worksheet, workbooks and session plans for remote learning. 30 Community Educators participated in the training [17 female and 13 male], demonstrating a 20% increase [51% to 71%] in pre-test/ post-test scores for performance and understanding. Protection Advisors received a training on Life Skills Protection sessions adapted specifically to respond to impacts of COVID-19, including early marriage, gender-based violence [GBV)], Sexual Reproductive Health and Rights [SRHR], Disaster Risk

Resilience, etc. with an aim to increase capacity and understanding for effective delivery. 29 Protection Advisors participated in the training [20 female and 9 male], demonstrating a 15% increase [70% to 85%] in pre-test/ post-test scores for performance and understanding. In addition to these intervention-specific trainings for education and life skills, Community Educators and Protection Advisors received an in-depth orientation on efficient facilitation of learning sessions using phone communication. These orientations covered (i) appropriate, gender-responsive communication and conduct; (ii) soliciting feedback and addressing concerns; (iii) accurately recording attendance; and (iv) remote monitoring of learning outcomes.

A comprehensive orientation on the newly developed COVID-19 Remote Communication Safeguarding Standard Operating Procedures [SOP] was provided to all team members involved in the DTL pilot including Community Educators, Protection Advisors, Education Officers, Inclusion Officers, Programme Managers and Field Supervisors. The one-day training ensured that all team members had sufficient information on remote protection mechanisms to ensure safety for all staff and project participants during the DTL delivery. The training comprehensively covered (i) clear behaviour protocol for contacting girls during learning activities; (ii) appropriate use of 'contact time'; (iii) preventative measures for harassment and bullying through mobile phone; and (iv) reporting pathways for any safeguarding breach. Further, staff were re-oriented on (i) compliance with data protection policy; (ii) maintaining confidentiality; and (iii) informed consent and assent. The safeguarding orientation was also extended to Community Management Committee Focal Points who are critical to facilitating and monitoring learning activities on the ground. All trainings were designed to be Gender Equality and Social Inclusion [GESI] transformative in enabling staff to (i) be responsive to girls' learning needs during an emergency; and (ii) adapt curriculum and instruction for contextual and cultural appropriateness.

## 5. Implementation

Teaching and Learning through mobile phone sessions started at the end of July 2020, following a baseline of 280 girls [see Table 1.1 for disaggregation], with full implementation beginning in August 2020. A total of 560 girls completed the DTL pilot, across 83 communities in 5 districts.

Girls aged 10 to 18 attended hour-long sessions, 6 days a week with 45-minute sessions [4.5 hours a week] on foundational literacy and numeracy for the Education Intervention and 15-minute sessions [1.5 hours a week] on for the Life Skills Protection Intervention. These sessions took place in self-isolation as well as in small groups, in adherence with COVID-19 safety standards outlined by the Ministry of Health and Population [MoHP]. Community Educators and Protection Advisors provided learning support over the phone or in person where feasible, while Community Management Committee Focal Points monitored daily learning activities, reporting any issues or concerns to Protection Advisors for escalation and action.

## 6. Monitoring & Impact Assessment

Baseline and endline assessments, formative assessments and attendance records were the key tools used to track and measure progress. In line with the project Monitoring, Evaluation and Learning Framework [MELF], the monitoring and impact assessment framework for the DTL was designed to capture the changes realised as a result of the remote activities and to test and validate the assumptions and logical links between learning targets, learning achievements, project outputs and outcomes. A mixed methods approach was used including (i) learning tests to track reading and arithmetic levels; (ii) case studies comprising semistructured interviews to track feedback, experience and outcomes; and (iii) a longitudinal study to track a sample population and assess impact in achieving learning. This approach also carefully considered interaction between actors, learning activities and learning outputs, during COVID-19 in particular, recognising that these interactions can converge to create a self-sufficient, self-sustaining learning cycle.

Baseline and endline assessments were conducted over the phone using a tailored KOBO toolbox, including the Annual Status of Education Report [ASER] testing tools for literacy and numeracy [Annex I]. A purpose sampling strategy was used based on girls availability to participate and immediate community accessibility. At baseline, a quantitative assessment was conducted with 280 participants whereas 348 participants were assessed at end-line; qualitative assessments were conducted with 100 participants. [See Table 1.1 for disaggregation]

	Quanti	tative Assessm	ent Disaggregation	on	
		Education Intervention		Life Skills Protection Intervention	
Disaggregation	Criteria	Baseline	Endline	Baseline	Endline
Districts	Dhanusha	21	24	16	16
	Mahottari	13	15	7	20
	Siraha	8	9	5	11
	Saptari	69	70	48	77
	Sunsari	53	53	48	53
Age	10 to 14	55	52	29	51
	15 to 18	101	119	95	126
Marital Status	Married	9	16	14	10
	Unmarried	147	115	110	167
Previous Education	No Education	32	55	11	40
	Informal Education	15	24	3	14
	Drop Out	54	92	34	123
Mobile Phone Access	Own Mobile	12	28		
	Family's Mobile	75	116		
	Neighbour's Mobile	14	27		

Table 1.1\* Mobile Phone Access disaggregation was not performed for the Life Skills Protection Intervention and Previous Education disaggregation at baseline was performed retrospectively.

Formative assessments were incorporated into the Learning Intervention through exercise books which Community Educators were responsible for collecting weekly, marking and returning to girls to provide feedback and clarification. This approach allowed for targeted instruction, where Community Educators could assign enrichment activities to advanced learners, and remedial activities with intensified support for struggling learners. Marking was then compiled at the end of the month and shared with Street Child's M&E team for verification and analysis. Thus, these formative assessments informed the implementation of curricular content which was responsive to girls' learning levels, recognising differentials in learning gaps due to disruption of classes since March 2020. Finally, attendance was recorded by Community Management Committee Focal Points daily, submitted to Community Educators and Protection Advisors weekly, and shared with Street Child's M&E team for verification and analysis.



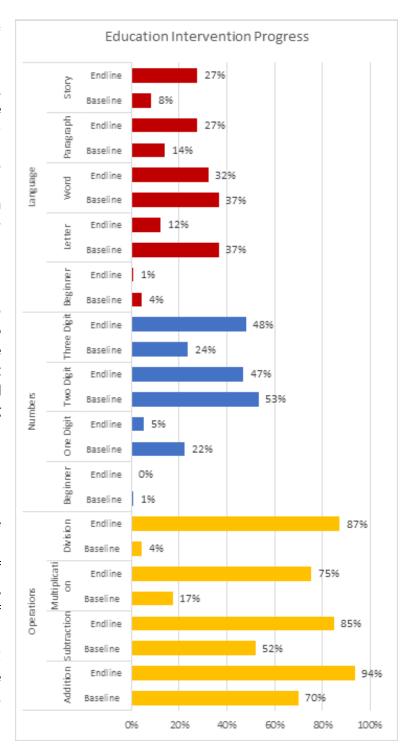
#### 7. Quantitative Results

### 7.1 Learning Intervention: Quantitative Findings

Overall, in language, after 5 weeks of intervention, 27% of the girls were able to read stories fluently and 27% of the girls were able to read paragraphs fluently, compared to 8% and 14% at baseline respectively. A notable decrease in the number of girls at Letter level was recorded [from 37% to 12%], with notable increase in the number of girls at paragraph and story levels. Overall, a positive progression of girls through the language levels towards the targeted story level is observed.

In numbers, 48% of the girls were able to recognise 3-digit numbers compared to 24% at baseline. This substantial increase in 3-digit number recognition means that lesser number of girls were at 1-digit and 2-digit levels at endline, demonstrating positive progression towards the targeted 3-digit level.

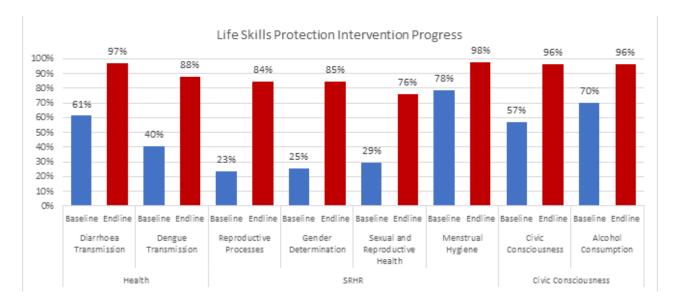
Finally, in operations, there were increases across all maths operations: (i) 94% of the girls were able to perform addition, compared to 70% at baseline; (ii) 85% of the girls were able to perform subtraction, compared to 52% at baseline; (iii) 75% of the girls were able to perform multiplication, compared 17% to baseline; and (iv) 87% of the girls were able to perform division, compared to 4% at baseline.



Overall, the Learning Intervention has demonstrated improved learning outcomes with 54% of girls at story or paragraph level, 95% of girls at 3-digit or 2-digit numbers level and 75% of girls able to do every basic maths operation.

### 7.2 Life Skills Protection Intervention: Quantitative Findings

Overall, there was an increase in understanding of health related issues, from 40% at baseline to 88% at endline. On Sexual Reproductive Health and Rights [SRHR], girls understanding and practice of reproductive processes and gender determination increased from 23% at baseline to 84% and endline, and 25% at baseline to 85% at endline respectively. Girls understanding and practice of menstrual hygiene increased from 78% at baseline to 98% at endline. There was also a notable increase in civic consciousness, which covers active citizenship and roles of a good citizen, from 37% at baseline to 57% at endline.



Overall, the Life Skills Protection Intervention has demonstrated an increase from 48% at baseline to 90% at endline on average, in understanding and practice of health, Sexual Reproductive Health and Rights [SRHR] and civic consciousness.

# 8. Analysis

## 8.1 Learning Intervention

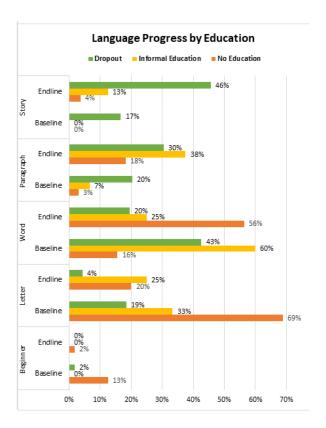
When disaggregated by age group, 10 to 14 [to progress to school transition] and 15 to 18 [to progress to enterprise set up], there are distinctive patterns in the data. In language at word level, the number girls aged 10 to 14 increased [35% to 40%] while the number of girls aged 15 to 18 decreased [38% to 29%p, however, the number of girls from both groups increased at paragraph and story levels with the number of girls aged 10 to 14 increasing from 9% to 27% at paragraph level and girls aged 15 to 18 increasing from 10% to 34% at story level. In numbers, number of girls decreased at beginner, 1-digit and 2- digit levels and increased at 3-digit level with the number of girls aged 10 to 14 increasing from 13% to 37%. In operations, there were uniform increases for both age groups, although girls aged 15 to 18 demonstrated greater increases in multiplication and division than girls aged 10 to 14.

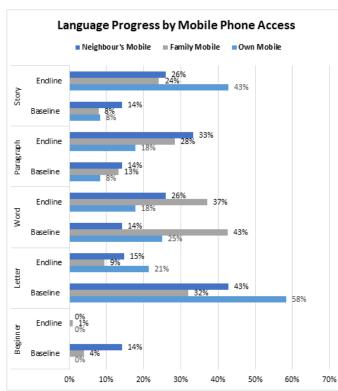
Similarly, when disaggregated by marital status, in language, both married and unmarried girls demonstrated progression, with decreases at beginner, letter and word level and increases at paragraph and story level. However, the number of married girls at paragraph level saw a notable jump from 0% to 19%.

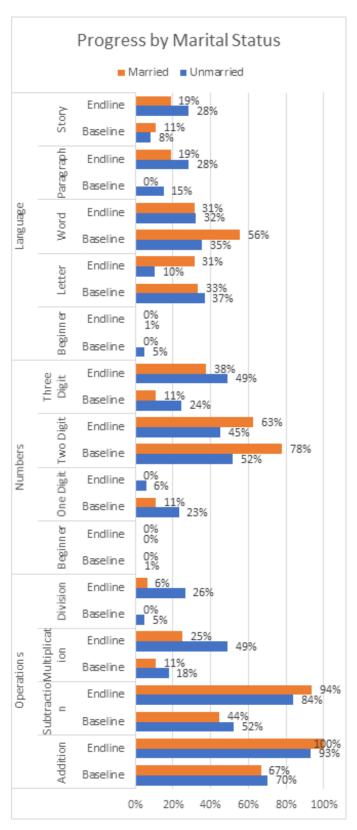
In numbers, both groups demonstrated decreases at beginner, 1-digit and 2-digit levels and increases at 3-digit level, with number of unmarried girls at 3-digit level increasing notably from 24% to 49%. In operations, there were uniform increases in both groups.

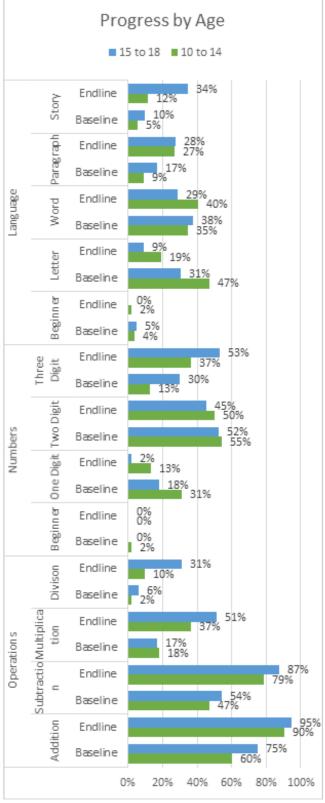
Furthermore, when disaggregated by previous experience in education, in language, all groups demonstrated progress towards paragraph and story Levels, with decreases at letter and beginner levels. The number of girls with no previous education experience increased from 3% to 18% at paragraph level, while the number of girls with previous informal education experience increased from 0% to 13% at Story level.

Two outliers in Language, that do not demonstrate the same pattern of progression towards paragraph or story level like other groups include (i) girls with no previous experience in education who have moved from Beginner or Letter level to Word level [16% to 56%]; and (ii) girls who used their neighbour's mobile phones to attend sessions [rather than their own or a family member's] who have also moved from beginner or letter level to word level [14% to 26%]. In numbers, all groups demonstrated progression towards 3-digit Level, with the number of girls with no previous experience in education increasing at 3-digit level [6% to 22%] and the number of girls using their neighbour's mobile phones also increasing at 3-digit level [21% to 48%]. In operations, there were uniform increases across all groups with the number of girls using their own mobile phones demonstrating notable increase in ability to perform division and multiplication [0% to 36%].



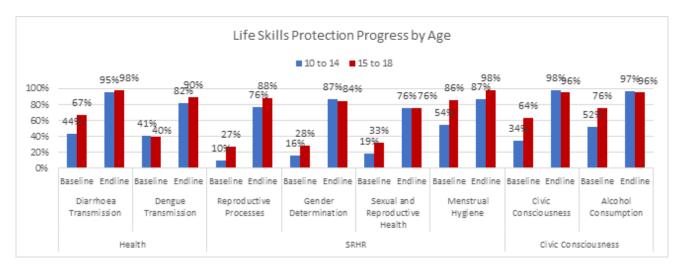




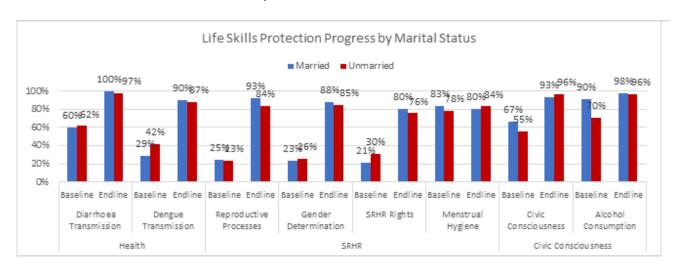


#### 8.2 Life Skills Intervention

When disaggregated by age group, 10 to 14 [to progress to school transition] and 15 to 18 [to progress to enterprise set up], distinctive patterns are noted in the data. On Health, there was a significant disparity in understanding of diarrhoea transmission between girls aged 10 to 14 [44%] and girls aged 15 to 18 [67%] at baseline, however, these were both increased to 95% and 98% respectively at endline. On Sexual Reproductive Health and Rights [SRHR], girls aged 10 to 14 demonstrated an increased understanding of gender determination [16% to 87%], while girls aged 15 to 18 also demonstrated good progress [28% to 84%]. On Civic Consciousness, there was a notable disparity in understanding of civic consciousness between girls aged 10 to 14 [34%] and girls aged 15 to 18 [64%] at baseline, however, these were both increased to 98% and 96% respectively at endline. Finally, both groups demonstrated increased understanding of impacts of alcohol consumption from 52% to 97% [girls aged 10 to 14] and 76% to 96% [girls aged 15 to 18].



When disaggregated by marital status, on health, married girls' understanding was lower than unmarried girls at baseline. However, at end-line, married girls demonstrated a higher understanding of both key diseases. On Sexual Reproductive Health and Rights [SRHR], married and unmarried girls' understanding of gender determination increased by 25% to 93% and 23% to 84% respectively; understanding and practice of sexual and reproductive rights increased by 21% to 80% and 26% to 85% respectively. However, married girls' understanding of menstrual hygiene decreased by 3% from 83% to 80% which is an anomaly. On civic consciousness, married and unmarried girls' understanding of civic consciousness and alcohol consumption increased to above 93%.



#### 9. Qualitative Results

### 9.1 Learning Intervention: Qualitative Findings

Qualitative assessments were carried out with 50 respondents [20 girls, 20 parents/guardians and 10 Community Educators] using Key Informant Interviews [KIIs].

Girls, when asked if they enjoyed DTL sessions, almost unanimously [95%] said that they did. When asked whether they preferred DTL sessions over previous classroom sessions, the majority [65%] preferred classroom sessions with a minority [25%] preferring DTL sessions and a few enjoying both. When asked to elaborate on their preference for previous classroom sessions, main reasons girls cited included (i) lesser understanding of the sessions covered; and (ii) missing their friends. Main positives of DTL were outlined as (i) easier to study and work (at home) simultaneously; (ii) quieter environment; and (iii) opportunity to ask questions more easily.

Parents and guardians were equally positive with all stating that they liked DTL sessions. However, when asked whether they preferred these to previous classroom sessions, responses were much more divided with 50% preferring previous sessions, 35% preferring DTL sessions and 15% liking both. When asked to elaborate on their preference for previous classroom sessions, main reasons cited included (i) less engagement time; and (ii) dependence on connectivity [which was more of a barrier in some communities than others]. Positives outlined by parents included (i) scope of studying while doing work [at home]; and (ii) one-on-one sessions.

"I enjoyed [DTL] sessions because learning at the centre used to be so noisy. Before I had to wait to ask questions but now I can ask them freely." Radhika, Participant, Sunsari.

"In DTL sessions I can't use all learning activities I use at the centre and I can't be sure if they [girls] are listening and participating. Even if I teach them over the phone in small groups I can't be sure so I prefer the previous sessions." Gaya, CE. Sunsari.

Community Educators were also divided, with half enjoying delivering DTL sessions while the other half did not; all [100%] agreed that previous classroom sessions were more effective in delivering learning outcomes in comparison. When asked about reasons for this, Community Educators referenced (i) difficulties in reaching girls; (ii) challenges in accurately capturing their understanding remotely; (iii) challenges in ensuring their attention during sessions; and (iv) limited scope to use learning activities.

## 9.2 Life Skills Protection Intervention: Qualitative Findings

Qualitative assessments were carried out with 50 respondents [20 girls, 20 parents/guardians and 10 Community Educators] using Key Informant Interviews [KIIs].

Girls when asked if they enjoyed DTL sessions, unanimously [100%] said that they did. When asked what they enjoyed most about these sessions, responses included (i) the ability to study from home; and (ii) opportunity to study alone and in peace. While elaborating on what they found challenging about this way of learning, girls mentioned (i) a lessened understanding and use of activities; (ii) missing their friends; and (iii) connectivity issues.

"The DTL sessions were very short so it was hard to understand some things. In previous sessions we could discuss and learn through pictures and games." Kusum, Participant, Siraha Majority of the parents and guardians [95%] said that they like DTL sessions, main reasons given were (i) that they were able to overhear and engage; (ii) it enabled girls to study and work simultaneously; and (iii) girls were able to study during their free time, alone and in peace. Two main drawbacks cited by parents/guardians were (i) less engagement time; and (ii) connectivity issues.

"Before we used to go to the centre and use a variety of learning activities to teach and now even reaching girls can be difficult. This has been good however for girls who were previous shy who now feel more comfortable to ask questions and parents listening to sessions." Bibha, PA, Mahottari

Protection Advisors all said that they now feel comfortable delivering DTL sessions, however, some said that initially it was difficult and that they felt awkward facilitating it over the phone. When asked to elaborate on challenges, key concerns raised were (i) difficulty in reaching girls; and (ii) reduced interactive learning activities. One of the main advantages outlined was that shy, quieter girls were more engaged.

Overall, although girls and parents/ guardians almost unanimously liked DTL sessions in both interventions they did raise multiple and legitimate concerns for a DTL approach, and while Community Educators and Protection Advisors did enjoy and feel comfort delivering DTL sessions they did express several difficulties and limitations which must be addressed.



## Case Studies

## Pramila, 16, Dhanusha

"I have decided not to marry until I am over 20 years old," says 16-year-old Pramila Risdev. Pramila, who lives in Gadi Rular, Sunsari district in Nepal and is a regular participant of the Marginalised No More project. After the lockdown, Pramilia is actively part taking in the DTL programme through her mobile phone. With the nationwide lockdown still imposed, all educational institutes have been closed and to ensure the continuation of the programme the lessons have been adapted to remote learning.

Currently, Pramila is participating in Life Skill Protection lessons remotely and has Accelerated recently completed the Learning Programme where she was taught basic literacy and numeracy skills. "It has been eight months since I joined the programme. I used to attend classes regularly but due to the lockdown I study from home now" says Pramila. She was only in grade 3 when she had to drop out of school due to financial problems, today she feels she has gotten a second chance in receiving education.

She explains that prior to the programme she struggled with her self-esteem and confidence. Coming from marginalised community she faced many issues. "We Musahars face a lot of discrimination in society, earlier I did not know that I have rights which I can stand for. Today, I know how to speak up for myself when needed," says Pramila. Although caste discrimination is illegal in Nepal, many Musahars still suffer from exclusion and discrimination on a daily basis. Within Life Skills Protection lessons she learnt about the dowry system, an illegal custom where the bride's family give money or property to the groom. After this Pramila was able to stand up for her rights when an early marriage proposal was being forced upon her. "Through the lessons I have learnt from the programme, I was able to convince my family to wait until I am ready for marriage," she says. Pramila is happy that she is able to continue with the classes remotely as she feels the lessons taught have helped her to deal with the daily challenges of life.

## Renuka, 15, Saptari

Renuka never missed a day of class of the Marginalised No More project before the COVID-19 pandemic, but in March when the government of Nepal imposed a nationwide lockdown all schools and educational institutions closed and are yet to reopen. Renuka, who lives in a small village with her husband's family could never have expected a complete halt to her daily life. "I was so upset that I couldn't attend my classes and was completely unprepared to face the challenges that my family suffered due to the lockdown," says Renuka.

Renuka married at a young age because her parents could not afford to take care of her. As a Musahar, one of the most socially marginalised and excluded groups in Nepal, Renuka and many other Musahar families were already struggling with social disparities and are now further burdened by the complete halt of all economic activities as daily wage labourers. Renuka has no formal education, however through the Accelerated Learning Programme she has learned functional literacy and numeracy skills.

Renuka explained that her plan was to open her own enterprise after she would complete the Employment Training Programme, however, she felt uncertain about the future. After the classes began remotely, Renuka continued with her sessions via mobile phone. She regularly attended her Life Skills Protection sessions where she learnt how to prevent catching diseases such as diarrhoea, dengue and malaria alongside topics such as sexually transmitted diseases and family planning. "I am beyond happy to continue with my classes even if it is from home, I learnt about family planning which I can apply to my life," she said. After gaining information about the risks early pregnancy and safe motherhood, which before participating in the programme she was unaware of, she will now plan her second pregnancy. "I missed the opportunity of going to school because I married and gave birth at a young age, I tell my friends now what I have learnt through my classes so that they can have a planned future," says Renuka.

### 10. Recommendations

The DTL quantitative and qualitative findings across the Education Intervention and Life Skills Protection Intervention have highlighted improved learning outcomes as well as important learning and key areas for reflection.

### 10.1 Staff Training and Support

- Community Educators and Protection Advisors require coaching and mentoring from Education Officers and Inclusion Officers on an ongoing basis, with an emphasis on more tailored support to lower performing sub-groups such as girls aged 10-14 with no prior education experience. This is essential to ensure equitable learning interventions that can offset any disadvantages recorded at baseline and achieve optimal outcome for all groups.
- Training and support to Community Educators and Protection Advisors will need to
  effectively address challenges they face in delivering DTL, including (i) irregular contact
  with girls; (ii) connectivity issues; (iii) inaccuracies in assessment data/ difficulty in
  capturing learning progress; and (iv) girls' finding areas covered and activities more
  difficult to understand remotely.

### 10.2 Learning & Life Skills Intervention

- Community Educations should offer further, specific support for girls with no previous education experience to progress from word to paragraph levels. Whilst girls with previous education experience progressed more easily towards word and paragraph level [perhaps calling on cognitive schema from previous educational experiences] girls without previous educational experience require more concrete support to make the cognitive connections between words, sentences and paragraphs.
- In operations, girls have performed lower in multiplication compared to addition, subtraction and division. Therefore, multiplication is recognised as an area that requires additional attention, including improved training for Community Educators, to achieve overall operations target.
- The topic of Sexual and Reproductive Health needs an increased emphasis as learning levels are lower in comparison. This is also essential as cases of early marriages have increased during COVID-19, increasing the likelihood of pregnancies and drop outs.
- Concerns were raised by parents/guardians around some of the pictures used during Sexual and Reproductive Health [SRH] sessions within Life Skills. Content and curriculum must be adapted as appropriately as possible in order to be culturally responsive. In addition to this, sensitization and comprehensive orientations should also be conducted with community members including parents/guardians, prior to beginning teaching and learning activities, to successfully mitigate against any adverse perceptions from parents.
- Boys were not part of the Life Skills DTL pilot due to girls being the main priority; while this did not cause any resistance or problems on this instance, given previous experience [of having faced backlash], boys must be incorporated into the programme, to the extent possible, when it is scaled.

• The DTL instructional methods, content and curriculum [for both Learning and Life Skills] should be adapted and revised on an ongoing basis to responsively address the learning gaps, as well as to continue to ensure the design provides a safe, secure and stable routine that offers psychosocial protection to girls [in confinement and beyond].

#### 10.3 Safeguarding

- Direct phone communication with girls was not immediately well-received by parents/guardians and other community members, especially when Community Educators and Protection Advisors were male. This caused some resistance and negative response towards the Educators and Advisors, however, this was resolved after a couple of rounds of discussion. Moving forward, while securing consent and assent for participation in DTL, these conversations must be prioritised as one of the first steps.
- Considering the general trend of increase in number of safeguarding and/or child protection incidents within the Musahar community, the project's safeguarding and Beneficiary Feedback Mechanisms [BFM] must remain responsive and functional during remote implementation, with key information shared at all levels [staff, community and girls].

#### 10.4 Others

- The practice of simultaneous study and work adopted by girls during the DTL sessions need further observation and analysis to determine any notable [negative or positive] impacts on learning outcomes.
- The positive impact of parental engagement as a result of the DTL approach should be further analysed and if appropriate, actively integrated into the teaching and learning process where possible.
- Disabled girls were not part of the DTL, due to a very limited number of disabled girls
  enrolled into the programme, therefore this is one of the limitations of this pilot and will
  need to be considered carefully before scaling, to ensure reach and effectiveness for
  disabled participants.
- Community Management Committee Focal Points have been critical in overseeing and facilitating learning activities, where project staff have not been able to visit communities during phases of strict lockdown. More intentional, active capacity strengthening for them will result in a stronger DTL programme, achieving even better learning outcome for girls.