

Final reflections

Achievements and lessons learned

Education for Life,
ActionAid

KENYA

SEPTEMBER 2018 – MARCH 2023



Girls'
Education
Challenge



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“The community had close attachment to the EfL project. The community identified girls with disability who were hidden in houses and would encourage parents to enrol them in the catch-up centres. They also advised parents of girls living with disability to use money given to them by the project appropriately.”

Community member



● Kenya

What did the Education for Life project do?

Education For Life (EFL) was implemented between 2019 and 2023 by ActionAid, in partnership with Voluntary Services Overseas (VSO) and Leonard Cheshire.

The project provided out-of-school girls with opportunities to access quality formal education, entrepreneurship, apprenticeship and vocational training. It worked to improve their literacy, numeracy and life skills through accelerated learning and transition into different pathways, supporting the most marginalised girls in counties of Isiolo, Garissa, Migori, Kisumu and Kilifi. The project supplied learning and hygiene kits and assistive devices. To facilitate transition to the different pathways, entrepreneurial and financial literacy skills, training, start-up kits and capital for small enterprises were also provided.

EFL reached 5,701 girls and 571 boys aged 10 to 19, of which 70% had never enrolled in school, 30% had some experience with the formal school system but dropped out and 30% had at least one form of disability. Some of the girls had experienced violence in the community and/or at school and some were pregnant or young mothers. Many of the girls came from pastoralist communities and/or were heads of their families, orphans or extremely vulnerable. Some had survived situations of conflict and insecurity, such as episodes of cattle rustling and tribal clashes in Isiolo and Garissa.

Project interventions included:

1. Establishing and delivering 'catch-up' classes in community spaces through moveable classroom facilities and specially-trained educators and mentors near villages in hard-to-reach areas.
2. Offering psycho-social support and adolescent sexual reproductive health training for girls and boys, by community health volunteers, in 'safe spaces' through counselling and community sessions.
3. Providing assistive devices and specialised Personal Integrated Therapy for girls with disability and scholastic kits for all children (learning materials, dignity kits) with extra additions for young mothers and girls with disabilities to support their attendance.
4. Introducing a modified, context-specific curriculum and individualised education plans.
5. Addressing issues around Gender and Social Inclusion (GESI) through the structured integration of GESI standards by teachers.
6. Promoting more favourable views towards girls' education in the community with a focus on early marriage, pregnancy and female genital mutilation.



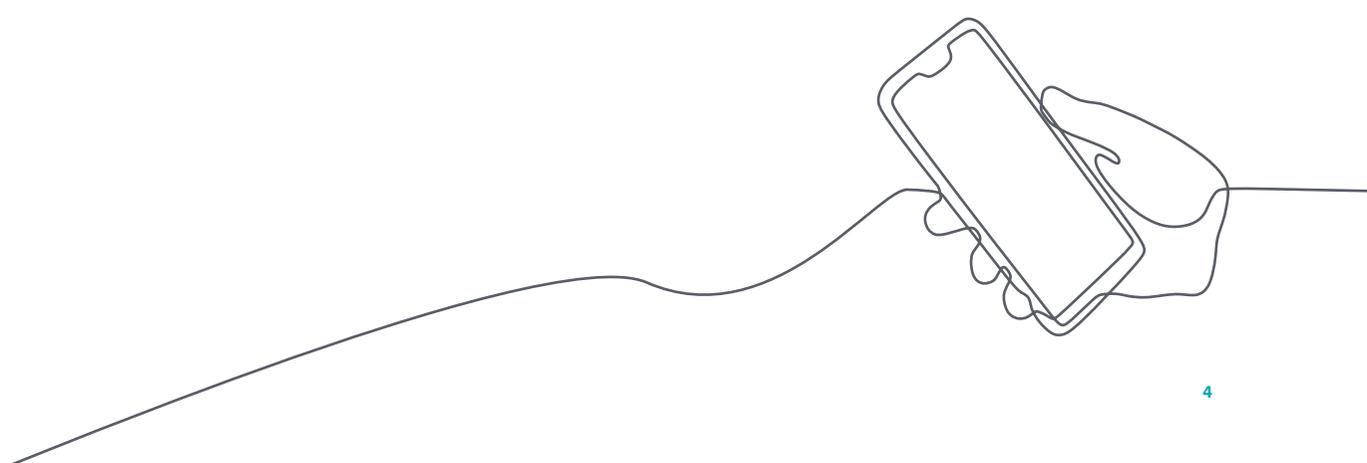
How did the Education for Life project adapt during COVID-19?

COVID-19, the subsequent inflation and drought had a significant impact on project implementation. These challenges meant that girls who had chosen the entrepreneurship pathway were likely not to use the economic support provided by the project for their small enterprises but rather to ease household economic pressures. To mitigate this risk, the project held meetings with parents, guardians and spouses to ensure they were committed to support girls' transition pathways. Spot checks were conducted to track the use and progress of girls' enterprises. The project also helped young mothers ensure that their children were safe and taken care of by child minders whilst they were learning at the vocational training centres. In addition, the project doubled the amount of money given to the girls as start-up capital.

COVID-19 resulted in the closure of all catch-up centres and the discontinuation of face-to-face learning. EfL introduced ways to engage girls at home through technology and household visits. Interventions were also differentiated by subgroup and county, with girls with disabilities having more household visits while the other girls had telephone discussions with facilitators. Girls received additional dignity kits that had household items sufficient for the whole family to cushion them from the adverse effects of the pandemic.

“Because the girls come from very poor families, they are provided with what will make them comfortable. They are given sanitary towels to ensure they attend and stay in class, and the ones with disabilities are treated and given assistive devices.”

Government official



// AKINYI'S STORY



My name is Akinyi. I am the only girl and I have four brothers. My mum died when I was little. I am typically in charge of the family and that is why I was not able to pursue my education. I am married and I have two children but one passed away. I came to learn about the catch-up centre from someone from ActionAid who came to my neighbourhood look to enrol out-of-school girls. My husband and I were told about Education for Life and my husband supported my wish to join the catch-up centre. We were trained on life skills, English, Kiswahili and mathematics. There were also child minders who used to take care of the children at the centre. The centre has been very beneficial to me. I have learned how to make transactions, how to give change to my customers and how to do tailoring. I now know how to make school uniform, dresses and blouses. I did not even know how to operate the sewing machine or read the tape measure but the teacher taught me and now I can make clothes.

// MIRIAM'S STORY



My name is Miriam. I am 19 years old and joined the Education for Life project when someone from ActionAid came looking to enrol out-of-school girls aged between 15 and 20 years in my village. At the time, I was not in school. I live with my mother and have several siblings and I was used to help my mother with her shop. After joining Education for Life, I stayed at a catch-up centre for six months where we were taught English, Kiswahili and mathematics. I also learned about business skills and tailoring. I liked learning about business skills as I could use those to better help my mother in the shop. During the training, I was taught how to manage a business. The project has been very beneficial and has impacted my life greatly. I was able to save some money that helped growing my mother's business. I also learned how to read and write. I feel empowered. I can confidently speak in front of an audience and before I could not do that.

What did the Education for Life project achieve?

Improved learning outcomes. According to the Endline Evaluation, EfL positively impacted on girls' learning outcomes. There was a significant improvement in learning from baseline to endline. There was consistently better performance in mathematics and Kiswahili, with the application of numeracy skills and Kiswahili skills in the daily lives of the girls. The provision of learning materials and catch-up centres were perceived by the girls as most valuable. The community and household support for girls' education had a positive impact: girls who were supported by the family and community were more confident and therefore likely to perform better.

The Endline Evaluation reports that before joining EfL girls had to rely on their spouses or other community members to make simple transactions at shops or in their businesses. The girls indicated that they had learned to calculate the balances to expect back when purchasing items. Girls were more confident when engaging with members of the community in Kiswahili. This was exemplified by when they went to the hospital alone: they could explain their issues to practitioners more effectively. Additionally, they could read and understand their prescriptions, including the expiry dates of the drugs. They became familiar with the benefits of child immunisation.

Provided support to young mothers. A common barrier in all of the counties was the community perception and treatment of girls who had dropped out of school or who were attempting to go back to some form of learning. In all the communities, there was a lot of negativity directed towards older girls who wanted to go back to school. They were insulted, made fun of and discouraged. This was particularly brutal if the girl had a child. This impacted on the morale of the girls and some of them felt that it was inappropriate for them to learn in the same school as the younger children as they considered themselves too old. EfL supported young mothers by working closely with the communities to change their perceptions. They also provided child-minders to take care of the girls' children so that they could learn. The persistent issue of early marriage

across the communities was addressed by involving educated girls in the community. They could advocate for themselves and for other younger girls in the community. The girls in Isiolo referred to themselves as 'ambassadors against early marriage' and would involve EfL and community members in intervening to prevent early marriages where possible.

Improved transition. In order to enhance transition, the project provided financial literacy and entrepreneurship skills for all girls who transitioned to vocational skills training, entrepreneurship and apprenticeship. EfL also provided start-up kits for these girls and provided individualised business coaching. The project linked girls to the Youth Enterprise Fund, Women Enterprise Funds, Micro Financial Institutions and community savings and loaning facilities. According to project data, the majority of girls (89%) transitioned successfully. At endline, 97% of the girls transitioned to different pathways, including entrepreneurship (40%) and apprenticeship (36%). For the small proportion (3%) that did not transition, the main reasons were a lack of capital, household chores and lack of spousal support.

Qualitative data revealed that mentorship sessions helped transition, as did flexibility at the catch-up centres. Girls were able to attend classes at times that suited them. The provision of child-minders and milk for their babies at the catch-up centres was also effective – some girls would not have managed to come without this intervention. At endline, girls had confidence in continuing with their chosen pathway. Some girls had started their own businesses, making enough profit to meet their basic needs. The caregivers and husbands in most of the communities were supporting the girls in their chosen pathways. Girls also said that close family members, including mothers and sisters-in-law, supported them by caring for the children when the girls were doing their income-generating activities. Some girls reported that their parents helped them with household chores such as fetching water, cooking and washing clothes. At endline, there was a greater understanding of the importance of educating adolescent girls.



Achieved sustained results at community level. Findings at endline suggest that girls could make their own decisions and advocate for themselves. At the county level, there were positive perspectives on sustainability in Garissa and Isiolo, for both the girls and the caregivers/husbands. Migori County had the lowest positive perspectives. Kilifi County had the largest shift from baseline to endline on the positive perspective on the sustainability of the project. The project created structures within the communities that will continue to support the girls. These structures differed from county to county but included having male champions, community groups or women's groups that would continue to support the girls. At the national level, the project was part of an initiative to have in place an accelerated education curriculum. At endline, the general perception of the community, girls and other government officials was that the benefits gained from the project by the girls would be sustainable.

Changed perceptions towards girls' education. Endline results suggest that community and parents/guardians shifted their perspectives towards education of out-of-school girls, including married girls, pregnant girls and those with special needs or disabilities. Whereas before the project, the out-of-school girls were looked down upon as disappointments or pitied as failures, by the end of the project communities were recognising the potential for success and the opportunities for these girls. Most community members, project implementers, male champions, vocational education trainers, girls, female and male parents reported the availability of community activities to support out-of-school girls' education. Some community members provided land where the catch-up centres were built, identified girls who were out of school and involved them in the project, and provided sanitary towels. Male champions participated in activities such as constructing salons. Community leaders including chiefs, assistant chiefs and religious leaders supported the initiative by visiting girls who had dropped out of school.

Improved attendance. At endline, girls had an average attendance rate (to the catch-up centres) of 85%. There was flexibility at the catch-up centres in terms of days and times to attend classes. Key drivers for attendance included support from the caregivers and/or husbands, provision of child-minders and hygiene kits. Family obligations and household chores were listed as contributing factors to low attendance and drop out. The provision of a conducive environment for these girls, especially young mothers, was a key driver for attendance. The project provided child-minders and scholastic kits, with extra supplies for young mothers and girls with disabilities. It also provided psychosocial support

and information on sexual and reproductive health. In addition, the project introduced budget items to support the construction of baby shades, a lactation area, playing materials and milk.

Trained male champions and engaged girls' husbands and parents.

According to the endline evaluation, male champions trained by EFL had a key role in changing men's and husbands' perceptions of girls' education. Male champions talked to the girls' husbands, in-laws or parents. They encouraged them to take on some house chores and childcare to allow the girls attend school, vocational or apprenticeship training. EFL addressed husbands' negative perceptions of their wives becoming empowered. Husbands were proactive in supporting their wives to transition to various pathways. In Kisumu, most of the spouses of the girls were boda riders who dropped their wives off in the morning at the catch-up centre and picked them up later after classes. Parents also offered financial support to girls when they needed materials such as boxes for practice and buying sewing threads.

Improved girls' life skills. The endline showed that girls were more confident and involved in decision making at household level compared to baseline. Their knowledge of sexual and reproductive health also improved. At endline, girls felt more confident expressing themselves both at home and in the community. The confidence of the girls resulted in them being better communicators, engaging better with others (from family, friends and even clients/customers). Boys also reported that girls' confidence increased. According to the boys in Garissa, they expressed that life skills coupled with literacy and numeracy skills as well as business skills are what led to the girls' new exposure and consequently built their confidence. Married girls related better with their husbands.

Discussions with girls and their caregivers at endline revealed that girls learned about the changes that they experienced as they moved from childhood to adolescence to adulthood. In Kisumu, girls reported that in the 'safe spaces' created by EFL they had conversations focused on reproductive health, personal hygiene with trusted community health volunteers. In some of the counties, the project initiated community conversations and facilitated community groups. Each girl was attached to a community health volunteer as a primary point of care, not for treatment but for conversations around reproductive health issues to do with pregnancies, issues with general health, care, health and nutrition. This led to an increase in the number of girls seeking reproductive services from the local facilities. This feedback came from nurses and community health workers.

“Husbands of the girls support them fully whereby others babysit and look after livestock at home so that their wives can learn. Some offer transport services and financial support when girls request for it. Parents provide financial support to girls and even carry out house chores on girls so that they can attend the sessions without being late.”

Vocational trainer



“Girls have earned income through the business of selling livestock, stabilising their family status. Some are coming out independently to support their spouses, some are hired on different occasions as resourceful people, for example those drawing henna patterns during weddings and finally some girls engage themselves in sewing school uniforms hence improving the standard of living within their families and community at large.”

Vocational trainer

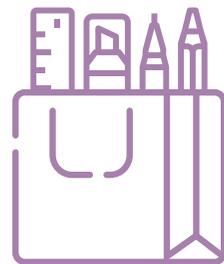
The Education for Life project in numbers



Number of girls reached
5,701

Number of student
kits distributed

4,044



Number of boys reached
571



Number of girls with
disabilities reached

989

Number of
teachers trained

862



Number of teachers trained: **862**

Number of girls who transitioned to vocational
training: **2,641**

Number of girls who transitioned to work: **1,961**

Number of textbooks and learning materials
distributed: **27,817**

Number of assistive learning devices provided : **152**

To what extent did the Education for Life project deliver value for money?

The EfL project offered strong value for money according to the GEC Fund Manager's assessment. It was a highly relevant project targeting the most marginalised girls. The project gave good and sustainable contributions towards improving girls' literacy and numeracy. It implemented good accelerated learning centres in communities and provided good quality learning materials. These interventions met the needs of the girls. EfL made adaptations to support girls with disabilities, particularly during COVID-19, offering appropriate remote support to learning. At endline, significant changes in learning were recorded by girls, together with strong changing attitudes and girls' clubs. The sustainability of the project was strong. EfL piloted learning catch working closely with ministries and government officials. The evidence on accelerated education developed by the project informed the national guidance on accelerated education.

“Previously, when a young girl got pregnant, the father of the girl could not accept her. Nowadays, if that happens both parents are helping the girl to continue with her life. In fact, the girl after delivery is allowed to go back to school as the parents look after the child.”

Community member



What did the Education for Life project learn?

Improving attendance and learning. Improving girls' self-confidence and addressing issues such as lack of knowledge and access to sexual reproductive health was key to improving girls' academic performance. Creating a good learning environment through the provision of child minders, teacher aides and educator facilitators helped address the learning needs of the different girls. Provision of relevant and adapted learning materials and support by the households to enable the girls to attend the learning sessions are important drivers of learning. A significant characteristic affecting learning in this county (at baseline and endline) was the education level of both the head of the household and caregiver. Overall, the results indicated that the persistent barrier from midline to endline was insecurity travelling to and from schools. The main barrier to learning at endline was the household chores and the need to work.

Adapting to support the most marginalised girls. The learning environment plays a major role and is a key factor towards achieving any better learning outcomes. At the point of identification and enrolment of the girls at the catch-up centres, EfL used the Community Led Participatory Change Plans that enabled the identification of the different vulnerabilities among the girls. The project considered vulnerability information while designing catch-up centre activities (learning days and learning times) and adapted the centres accordingly to support learning. Provision of relevant and adapted learning materials and support by the households to enable the girls to attend the learning sessions were the biggest drivers of learning.

Identifying and targeting girls with disabilities. It is essential to allocate adequate resources and do sufficient planning to identify and target girls with disabilities. Girls with disabilities were targeted by EfL (especially in Kisumu and Migori) and efforts made to ensure they were included in some of the project interventions. However, some community members pointed out that the inclusion of girls with disabilities was dependent on the severity of the disability and in some instances girls with severe disabilities were discriminated against and not engaged at catch-up centres but at their households.

Improving transition. Transition was most successful when caregivers and/or husbands and the local community were committed to supporting girls and when girls felt motivated to continue their learning. It is important to give girls guidance on the various formal and non-formal pathways available to them so that they get the most desired results. The main reasons for failure to transition were lack of capital to acquire required equipment, household chores and lack of spousal support.

Working closely with communities on delivering Girls' Clubs. EfL used community's own structures and resources to implement Girls' Clubs. The project recruited community members and incorporated them in the project (trainings, implementation, catch-up centre management). This made the Girls' Clubs particularly sustainable. Community groups, women groups and male will be left in the community for girls to continue to tap into them. The main criteria for selection of these people was their willingness to work for the community – and in some instances they were already opinion leaders within the community.

Improving girls' sexual and reproductive health. It may take time to change girls' and communities' perceptions and practices around sexual and reproductive health. This is especially for more conservative communities. Some resistance to interventions that deliver a comprehensive sexual reproductive health education may be religious. Generally, communities do not engage in open discussions on sexual reproductive health. Where resistance is strong, it may be more effective to approach sexual reproductive health from a health perspective, so not through learning centres but through health centres.

Providing evidence to support sustainability. At the system level, EfL learned that evidence-based advocacy is crucial in influencing decisions. The development of the Accelerated Education Guidelines by the government stemmed from field visits with senior directors at the Ministry of Education. During these visits evidence of results was gathered working closely with government officials.



Girls'
Education
Challenge



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Find out more: www.actionaid.org | www.girlseducationchallenge.org

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