

Baseline Study of the Right to Play Project: “RECAF-Jeu”

Final Report

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List of Acronyms

Child Early and Forced Marriage	CEFM
Civil Society Organisations	CSOs
Convention on the Elimination of all forms of Discrimination Against Women	CEDAW
Déclaration Solennelle pour l'Egalité de Genre en Afrique	DSEGA
Demographic Health Survey	DHS
Difference-in-difference design	DID
Ending Violence Against Women	EVAW
Evaluation Reference Group	ERG
Female genital mutilation	FGM
Focus Group Discussions	FGDs
Gender-Based Violence	GBV
Gender Equality	GE
Gender Equality and Women’s Empowerment	GEWE
Gender Inequality Index	GII
Global Affairs Canada	GAC
Headquarters	HQ
Key Informant Interviews	KIIs
Knowledge, Attitudes and Practice	KAP
Migrant Women in Domestic Work	MDWs
Monitoring and Evaluation	M&E
Multi Partner Trust Fund	MPTF
National Programme Coordinator	NPC
National Project Advisory Committee	NPAC

Non-Governmental Organisation	NGO
Organisation for Economic Co-operation and Development/Development Assistance Committee	OECD/DAC
Performance Management Framework	PMF
Power Point	PPT
Renforcement des Capacités des Filles par le Sport et le Jeu	RECAF-JEU
Reproductive Health Rights	RHR
Right to Play	RTP
Senegalese National Agency of Statistics and Demography	ANSD
Sexually Transmitted Infections	STIs
Sport and Cultural Associations	ASCs
Sustainable Development Goals	SDGs
Theory of Change	ToC
Terms of Reference	ToRs
United Nations	UN
United Nations Development Programme	UNDP
United Nations Population Fund	UNFPA
United Nations Children's Fund	UNICEF
United Nations Evaluation Group	UNEG
The United Nations Entity for Gender Equality and the Empowerment of Women	UN Women
Violence Against Women and Girls	VAWG
World Health Organisation	WHO

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Executive Summary

Baseline Study Purpose and Methodology

The Renforcement des Capacités des Filles par le Sport et le Jeu (RECAF-Jeu) is a five-year (2021-2026) 8.6-million-dollar project implemented by RTP and funded by Global Affairs Canada (GAC) aimed at supporting the empowerment of girls and young women through sport in the Ziguinchor and Sédhiou regions of Senegal.

The purpose of the baseline study is to facilitate the measuring of project impact by establishing a benchmark that can be used to measure progress at its midterm and endline. The study used a mixed methods design and quasi-experimental approach through a difference-in-difference (DID) design to facilitate the assessment of changes in attitudes, knowledge and behaviour among beneficiaries affected by the project by measuring those from a treatment group against those of a comparison group. The study collected quantitative data that was used to report on progress indicators from the project’s Performance Management Framework (PMF) through Knowledge, Attitude, and Practices (KAP) questionnaire surveys from the treatment and comparison groups, reaching a total of 3,191 girls and boys from sports clubs, female and male coaches, and community members.

Qualitative data was gathered through focus group discussions (FGDs) and key informant interviews (KIIs) with project beneficiaries and key stakeholders and was used to triangulate against the quantitative data to provide an explanatory narrative in order to understand the statistics generated by the surveys. Sex-disaggregated FGDs were held with a total of 293 girls and boys from sports clubs; female and male coaches; and mothers, fathers, and grandmothers of girls from sports clubs. KIIs were held with 58 representatives of sports associations and institutions, media institutions, civil society organisations (CSOs) working on gender equality, and government institutions as well as community leaders, religious leaders, and parents’ groups and associations. Both quantitative and qualitative data was analyzed using a gender analysis that drew on a Social Relations Framework and data was disaggregated according to gender, age, type of stakeholder, location, and disability/non-disability.

Key Findings

The baseline study revealed that, according to RTP’s Girls Empowerment through Sport Index¹, 44 per cent of girls from the treatment group in Sédhiou and 47 per cent in Ziguinchor are currently empowered. At the same time, perceptions of the occurrence of gender-based violence (GBV) are high with 52 per cent of girls and 47 per cent of boys reporting GBV in their communities (44 percent reporting physical violence, 40 per cent sexual violence, and 46 per cent child, early and forced marriage). Levels of perceived GBV are considerably higher in Sédhiou at 73 per cent than in Ziguinchor at 46 per cent. The perpetrators of GBV are generally men and are often members of a girls’ own family. In addition, girls often view themselves as to blame for GBV as opposed to those

¹ The Girls’ Empowerment through Sport Index is comprised of: girls’ agency, community support for girls’ participation in sports, boys’ support, coaches’ support, and inclusion of girls in sports clubs.

committing the offence. While a vast majority of boys, girls, coaches, and community members surveyed are clear in their understanding that it is never alright for a boy to be violent against another boy or girl and that it is always alright for a girl or a boy to refuse unwanted sex, many girls and boys from FGDs believe that violence committed by a boy can be acceptable if he needs to establish authority over another boy or girl.

Girls report overall low levels of agency to make life choices regarding sports, education, and marriage, with only 34 per cent reporting complete agency (comprised of self-efficacy, self-esteem, ability to take decisions, and voice). Indeed, only 14 per cent of girls compared to 24 per cent of boys report having complete autonomous decision-making over whether they pursue studies, participate in sports, and whom and when they marry. Girls also report very low levels of self-confidence to express their ideas, with only 11 per cent of girls reporting self-confidence. Girls explained that they are generally uncomfortable expressing their ideas in front of boys and community members and are more comfortable in intimate settings among family and friends.

Only 17 per cent of girls are knowledgeable about their reproductive health rights, including menstrual hygiene management, with considerable regional differences at 19 per cent in Ziguinchor compared to 5 per cent in Sédhiou. Girls report that healthcare providers often restrict access to reproductive health information and services, including access to contraception, to girls under 18 years of age and/or if they are unmarried even though there is no legislation to support this. A higher percentage of girls (47 per cent) are knowledgeable of existing laws, services, and reporting mechanisms related to reproductive health rights and GBV. In addition, a total of 30 per cent of boys, 42 per cent of community members (42 per cent women and 42 per cent men), and 82 per cent of coaches are knowledgeable. Regional differences are also quite stark with 45 per cent of girls and boys demonstrating knowledge in Ziguinchor compared to only 28 per cent in Sédhiou. Only 10 per cent of girls and boys report feeling confident in their abilities to seek information and/or services relating to their reproductive health rights and GBV, while 28 per cent of boys report confidence in their ability to advocate for the prevention of GBV.

Sports most often played by girls and boys are football (44 per cent girls and 53 per cent boys); basketball (25 per cent girls and 30 per cent boys); handball (14 per cent girls and 5 per cent boys); followed by athletics (9 per cent girls and 13 per cent boys). While 46 per cent of boys and 41 per cent of community members (45 per cent men and 38 per cent women) demonstrate positive attitudes towards girls participating in sports, 30 per cent of boys think that there are some sports that girls should not play. Indeed, girls, boys, and community members often believe that girls should not participate in boxing, rugby, and wrestling as they are often considered “too violent” for girls. Girls report that the primary reason why girls do not participate in sports is due to a lack of time, as they have other responsibilities that include domestic chores and studying. Girls often feel that menstruation is a barrier for them to participate in sports. Levels of inclusiveness of sport and play facilities are extremely low across regions, with only six per cent of coaches believing that the clubs are gender-responsive and inclusive. Clubs typically lack the necessary infrastructure and equipment to facilitate girls’ participation in sports and they are rarely adapted to meet the needs of children

with disabilities or sub-groups of vulnerable girls. Poor infrastructure is cited by children as a major safety concern, especially among children with disabilities.

A total of 21 per cent of girls can recall leading one or more community initiatives to support girls’ empowerment in the last twelve months. The most common barriers faced by girls to participate in leadership initiatives are: 1) lack of self-confidence; 2) discomfort going against established social norms and beliefs; and 3) lack of support from community members. Only 16 per cent of community members (21 per cent men and 11 per cent women) can recall engaging in at least one concrete action over the past 12 months to support gender equality, while only seven per cent of boys can recall engaging in at least one advocacy action in the last 12 months to prevent GBV. In contrast, 80 per cent of female coaches and 70 per cent of male coaches report leading girls’ empowerment initiatives within the last year. However, these percentages vary considerably by region with 80 per cent of coaches reporting engagement in Ziguinchor compared to only 30 per cent in Sédhiou.

Representatives of sports associations and institutions reflect an overall positive attitude towards girls’ participation in sports but identified a need to certify more female coaches and providing girls’ sports clubs with more financial resources and competition/tournament opportunities. Representatives of government institutions from youth, sports and health sectors are generally supportive of girls’ empowerment and participation in sport but are sometimes reluctant to refer to equality between men and women based on supposed physical differences. Media representatives are enthusiastic towards women’s and girls’ participation in sports but acknowledged that there is very little media coverage of women’s and girls’ sports due to lack of interest from the general public and poor sensitization among media personnel. Civil Society Organisations (CSOs) working on gender equality are largely supportive of girls’ participation in sports but see sports as a side activity for leisure as opposed to an opportunity to promote girls’ empowerment or to further advance their gender equality programming. Peer Youth Groups and Girls’ Clubs (funded by the government) are already active in promoting girls’ empowerment and have links to sports clubs and could thus become valuable strategic partners for the project, especially with respect to promoting dialogue among girls and government representatives.

Conclusions and Recommendations

The study produced eight (8) conclusions and recommendations stemming from the baseline findings.

Supporting Girls to Achieve Greater Empowerment

Conclusion #1: There is a need to expand access to sports among girls at the community level as well as further strengthen the empowerment of girls already in sports clubs.

Recommendation #1: RTP should invest in strategies to engage girls from the community who are not already practicing sports to join sports clubs and/or participate in community-level sports. It should also provide focused support for girls in sports clubs in those areas where they require further support to strengthen their empowerment.

To operationalize this recommendation, RTP should:

- Engage girls from sports clubs as advocates to encourage other girls from the community to join the clubs
- Provide support and structured opportunities for girls to express their ideas in public settings and engage in structured leadership initiatives
- Train media personnel to better cover girls’ sports in order to encourage girls to participate in sports
- Provide media training to girls and boys from sports clubs so that they can more effectively promote sports through media outlets
- Provide targeted training to girls within sports clubs on their reproductive health rights and where to go to access information and services
- Provide sensitization and training to reproductive health information and service providers to strengthen mechanisms to promote confidentiality and to increase girls’ trust in having a confidential experience, as well as to eliminate stigmas and restrictions promoted by providers towards girls
- Develop targeted messaging and training materials for girls in sports clubs that tackle misconceptions that girls cannot participate in all sports and that girls are to blame for GBV

Addressing Regional Differences between Sédhiou and Ziguinchor

Conclusion #2: There are large regional disparities between the regions of Sédhiou and Ziguinchor regarding attitudes and beliefs towards girls’ empowerment and their participation in sports, with girls’ empowerment indicators consistently lower for Sédhiou.

Recommendation #2: RTP should invest targeted resources in the Sédhiou region in order to address regional disparities with respect to attitudes and beliefs towards girls’ empowerment and participation in sports. This investment should include a focus on confronting religious beliefs that hinder girls’ participation in sports.

To operationalize this recommendation, RTP should:

- Engage religious leaders in dialogue to promote interpretations of Islam that encourage girls’ empowerment and participation in sport
- Use religious leaders who promote girls’ empowerment and participation in sports as advocates for RTP’s activities
- Design messaging to promote girls’ empowerment and participation in sport across Sédhiou that identifies and challenges the specific religious beliefs held in these communities that hinder girls’ equal access to sports

Strengthening the Capacities of Coaches to Promote Girls’ Empowerment through Sports

Conclusion #3: While sports coaches generally have positive views towards girls’ empowerment and have a strong understanding of reproductive health rights and GBV laws and services, they need training, information, and support on how to effectively refer girls and boys to the correct services as well as how to promote girls’ empowerment and positive masculinities as well as principles of inclusivity into their coaching. There is also a need to train more female coaches and referees to encourage girls’ participation in sports.

Recommendation #3: RTP should provide training and informational materials to female and male coaches at sport clubs to support them to refer girls and boys more effectively to reproductive health and GBV services and to better integrate principles that promote girls’ empowerment and positive masculinities as well as principles of inclusivity into their coaching. Right to Play should also invest in training more female coaches and referees to increase women’s representation in sport and to encourage more girls to participate in sports.

To operationalize this recommendation, RTP should:

- Provide targeted training and informational materials to coaches at sports clubs to help them to better encourage and support boys and girls to access information and services on reproductive health and GBV
- Sensitize coaches, particularly male coaches, on the barriers that girls and boys face when trying to access available reproductive health and GBV information and services, including feelings of shame and embarrassment as well as fears of breaches in confidentiality
- Provide training to female and male coaches to better integrate principles that promote girls’ empowerment and positive masculinities as well as principles of inclusivity into their coaching
- Use pre and post-tests to measure changes in attitudes and capacities of coaches as a result of RTP’s interventions
- Invest in training more female coaches and referees to increase women’s representation in sport and to encourage more girls to participate in sports

Engaging Boys and Men

Conclusion #4: Boys and fathers of girls who participate in sports clubs largely demonstrate support for girls’ participation in sports and tend to generally reflect healthy attitudes towards girls’ empowerment, reflecting potential to further become advocates of gender equality. However, they require increased sensitization regarding the types of barriers that girls face when trying to participate in sports or accessing reproductive health and GBV information and services as well as support to engage in formal initiatives to advocate for girls’ empowerment and ending GBV.

Recommendation #4: RTP should leverage the largely positive attitudes of boys and fathers of girls from sports clubs towards girls’ empowerment, including their participation in sports, by engaging them in organized activities and formal advocacy initiatives to promote girls’ rights.

To operationalize this recommendation, RTP should:

- Provide sensitization and training to boys and fathers of girls from sports clubs on the types of barriers that girls face when trying to participate in sports or accessing reproductive health and GBV information and services, as well as how they can become stronger advocates of girls’ rights and better allies of girls and women, including with respect to ending GBV.
- Engage boys and fathers of girls from sports clubs in organized activities and formal advocacy initiatives to promote girls’ empowerment, including their participation in sports.
- Document and draw on the examples of Men’s Clubs designed to encourage gender equality in the Kolda region

Addressing Social Norms and Engaging Families and General Community Members

Conclusion #5: Social norms regarding socially acceptable behaviour and activities as well as expected roles for girls remain an inhibitor to achieving gender equality and girls’ empowerment across the Ziguinchor and Sédhiou regions, and there is limited formal organizing among community members to promote gender equality and girls’ empowerment. Since family members (particularly husbands, brothers, and uncles) are often the perpetrators of GBV, addressing intimate family dynamics and encouraging openness and dialogue at home could be beneficial to tackle this problem and promote gender equality.

Recommendation #5: Right to Play should place a strong programming focus on changing social norms with respect to girls’ empowerment and their participation in sports, which should include engaging community members in formal initiatives to promote girls’ empowerment as well as activities that promote greater openness and dialogue between children and their parents.

To operationalize this recommendation, RTP should:

- Develop positive messaging strategies that leverage existing momentum within communities around changing social norms that support girls’ empowerment
- Support community dialogue initiatives between girls, boys, women, and men to challenge social norms and promote girls’ empowerment, including through their participation in sports
- Engage community members in organized activities and promote formal community organizing that encourages girls’ empowerment and their participation in sports
- Design project activities that aim to improve communication between children and their parents in order to encourage more openness and dialogue at home so that children feel more supported when seeking information on their reproductive health rights as well as reporting GBV

Developing Sports Infrastructure

Conclusion #6: Sports clubs across the Ziguinchor and Sédhiou regions struggle to provide adequate infrastructure and sports equipment to facilitate girls’ and boys’ participation in sports. The general lack of infrastructure across sports clubs is a major safety concern for children, especially those with disabilities.

Recommendation #6: RTP should invest in improving the infrastructure of sports clubs across the Ziguinchor and Sédhiou regions by targeting elements that reflect strong value for money such as the provision of basic sports equipment, the creation of sex-disaggregated bathrooms (and the provision of menstrual hygiene management kits for girls), and access to potable drinking water.

To operationalize this recommendation, RTP should:

- Invest in providing basic sports equipment to clubs
- Support the creation of sex-disaggregated bathrooms and the provision of menstrual hygiene management kits across clubs to encourage girls’ participation in sports
- Support the provision of potable drinking water across clubs so that participants can access safe drinking water while participating in sports

Supporting Marginalized Children including those with Disabilities

Conclusion #7: Sports clubs across the regions of Ziguinchor and Sédhiou are largely not adapted or sensitized to the needs of children with disabilities, making it challenging for children with disabilities to participate in sports. There is little to no adaptations to club infrastructure or coaching techniques to encourage inclusivity of children with disabilities and/or other sub-groups of vulnerable girls and young women who require access to supports such as those who are pregnant, widowed or divorced.

Recommendation #7: RTP should support sports clubs to adapt their facilities and coaching approaches to promote greater inclusivity of children with disabilities as well as sub-groups of vulnerable girls such as those who are pregnant, divorced, or widowed.

To operationalize this recommendation, RTP should:

- Support sports clubs to collect data on participating children with disabilities in order to better understand their needs and priorities
- Provide targeted investment to sports clubs to help modify their facilities to improve the physical safety of children, including those with disabilities
- Support sports clubs to offer special activities to children with disabilities
- Sensitize sports clubs on the importance of engaging children with disabilities in sports and support them to integrate inclusive coaching practices and engage in outreach among communities to try to increase the number of children with disabilities who participate in the clubs.

- Sensitize sports clubs on the importance of engaging vulnerable sub-groups of girls such as those who are pregnant, divorced or widowed, and provide materials and training on how to design sports activities that can engage and benefit these groups

Developing Partnerships

Conclusion #8: Key stakeholders such as sports and government representatives, media personnel, and CSOs require targeted project support to become stronger allies in promoting girls’ empowerment.

Recommendation #8: RTP should provide targeted support to its strategic partners based on their needs and priorities to help them become better advocates for girls’ empowerment and participation in sports, as well as consider partnering with Peer Youth Groups and Girls’ Clubs to leverage their existing work and facilitate dialogue between girls and government officials.

To operationalize this recommendation, RTP should:

- Invest in the certification of female coaches and referees
- Provide training to media personnel on the importance of covering girls’ participation in sports as well as invest in resources (such as live streaming of girls’ sporting events, articles focused on girls in sports, etc.) to facilitate media personnel to better cover girls’ sports
- Partner with Peer Youth Groups and Girls’ Clubs to organize dialogue sessions between girls and government representatives in order to adapt government policies and services to better respond to the needs and priorities of girls and young women
- Provide sensitization and training sessions to CSOs to help them to better integrate girls’ participation in sports into their programming as a means towards furthering girls’ empowerment.

Section I Background and Context

1.1 Background on Gender Equality and Gender Based Violence in Senegal

Women and girls represent half of the world population as well as half of its potential. Whenever gender inequality exists, this typically results in women and girls being excluded or in a disadvantageous position in society. Gender equality aims at the achievement of equal enjoyment by both women and men of opportunities, resources and rights. Typical gender disparities and gaps in societies occur in areas such as the division of labour between men and women; access to and control over resources; access to services, education, information and opportunities; and distribution of power and decision-making. For instance, Senegal is one of five countries at the global level with the lowest primary education gross enrollment rates for girls (87.92%) and lowest levels of reproductive health knowledge among girls and young women (UNESCO, 2015).² Important decisions such as financial decisions are typically made by men within the household, and women are largely not encouraged to participate in leadership initiatives at the community level. The empowerment of women and girls is central to identifying and redressing gender inequalities and contributes directly to the participation of both women and men as equal partners in society. Since gender attributes are social constructs, these are susceptible to being modified in order to achieve a more just and equitable society.

According to the 2020 Gender Inequality Index (GII), Senegal ranked 130th out of 162 countries³. While 41.8 percent of parliamentary seats are held by women, only 10.3 percent of adult women have reached at least a secondary level of education vis à vis 26.5 percent of their male counterparts. Furthermore, for every 100,000 live births, 315 women die from pregnancy-related causes, and the adolescent birth rate is 72.7 births per 1,000 women aged 15-19. Early pregnancies among girls in middle and secondary schools are prevalent across Senegal and affect a girls’ ability to continue with her studies and/or participate in sports. In 2020, adolescent fertility rate (births per 1,000 women aged 15 – 19) was 67, compared to 69 in 2019⁴. In terms of vulnerability of girls to teenage pregnancy while in school in Senegal, this is particularly notable in the regions of Sédhiou, Kolda, Thiès, Ziguinchor and Fatick⁵. Female participation in the labour market is 35 percent compared to 57.5 for men.⁶ According to the 2019 Senegal Demographic Health Survey (DHS), the proportion of women and girls aged 15 and over who have been victims of physical, sexual or psychological violence committed by a current or former intimate partner in the 12 months preceding the survey was 9.3 per cent.⁷ These official statistics are likely a gross under-representation of the full extent of gender-based violence occurring in Senegal due

² UNDP (United Nations Development Programme). 2020. Human Development Report 2020: The Next Frontier: Human Development and the Anthropocene. New York

³ UNDP (United Nations Development Programme). 2020. Human Development Report 2020: The Next Frontier: Human Development and the Anthropocene. New York

⁴ “Adolescent Fertility Rate (Births per 1,000 Women Ages 15-19) - Senegal | Data.” Adolescent Fertility Rate (Births per 1,000 Women Ages 15-19) - Senegal | Data, data.worldbank.org, https://data.worldbank.org/indicator/SP.ADO.TFRT?locations=SN&most_recent_value_desc=true. Accessed 3 Aug. 2022.

⁵ The State of Education and Implications of SRHR on the Education of Adolescent Girls in Senegal Author(s): B. A. Abuya, R. Cisse, N. A. Fall and N. Muhia African Population and Health Research Center (2020) Stable URL: <https://www.jstor.org/stable/resrep28641> Accessed: 03-08-2022 20:23 UTC

⁶ *The Next Frontier: Human Development and the Anthropocene, Briefing note for countries on the 2020 Human Development Report, Senegal*, UNDP, 2020, Human Development Report 2020.

⁷ Agence Nationale de la Statistique et de la Démographie (ANSD) [Sénégal], et ICF. 2019. Sénégal : Enquête Démographique et de Santé Continue (EDS-Continue 2019). Rockville, Maryland, USA : ANSD et ICF.

to reluctance by survivors to report incidences of violence committed against them.

The Government of Senegal has made significant progress towards the promotion of gender equality through the adoption of the Parity Law, the Standard Operating Procedures on GBV⁸, a National Action Plan on GBV/Human Rights and the Empowerment of Women, the National Agenda for Girls, and the validation of the new National Strategy for Gender Equality and Equity. These measures have been developed and implemented under the technical leadership of the Ministry of Women, Family and Childhood, which has existed since 1974. Similarly, Senegal’s Constitution (2001) guarantees equality between women and men in its article 7. Senegal has ratified the Convention on the Elimination of All forms of Discrimination against Women (CEDAW) in 1985, as well as the Optional Protocol on Violence Against Women (in 2000). In addition, the country ratified the Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa in 2005. Senegal’s last national report to the CEDAW committee dates back to 1994. Senegal also adheres to the 2004 Déclaration Solennelle pour l’Egalité de Genre en Afrique (DSEGA) as well as the Additional Act on Equal Rights between Women and Men for Sustainable Development within the Economic Community of West African States (l’Acte additionnel sur l’EFH pour le développement durable dans l’espace CEDEAO).

Child, early and forced marriage (CEFM) is a result of gender inequalities and is internationally recognized as a harmful practice and a violation against the rights of women and girls, which contravene the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa (the Maputo Protocol). Globally, 21 per cent of young women are married before the age of 18⁹. Child brides often have limited economic opportunities and are less likely to remain in school¹⁰. They are at elevated risk for domestic violence and face special challenges to negotiate safer sexual practices, make informed choices, and access equal opportunities¹¹. In addition, child brides are more likely to become pregnant before their bodies are physically mature, increasing the risk of pregnancy-related complications and maternal and newborn mortality and morbidity¹². Although in 1998 Senegal ratified the African Charter on the Rights and Welfare of the Child, including article 21 regarding the prohibition of CEFM, formal legislation criminalizing it remains elusive. The prevalence of CEFM in Senegal is 31% before age 18 and 8.5% before age 15. Over the past 20 years, the national average prevalence rate of CEFM has decreased by 16 percentage points in Senegal from 47 percent to 31 per cent, and has fallen well below the regional average of 42 percent¹³. However, the rate of CEFM among the poorest quintile (60%) is nearly twice the national average and has seen virtually no progress in the last 20 years. Rates are particularly high in the south-eastern part of the country. Senegal’s rate of progress needs to increase by 1.5% by 2030 to achieve the goals of ending CEFM included in the Sustainable Development Goals. Women marry at a much younger average age than men, with a median age at first marriage of 20.4 years for women and 26.3 years for men. The CEFM rate is higher in Senegal rural areas, particularly

⁸ These apply to the Ministry of Health, Ministry of Interior, and Ministry of Justice.

⁹ 2019 Evaluation of the UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage.

¹⁰ International Women’s Health Coalition, ‘The Facts on Child Marriage’, <iwhc.org/resources/facts-child-marriage/>, accessed 5 April 2019. ^[1]_{SEP}

¹¹ United Nations Children’s Fund, ‘Harmful practices’, UNICEF, <www.unicef.org/protection/57929_58008.html>, accessed 5 April 2019. ^[1]_{SEP}

¹² United Nations Population Fund, ‘Child Marriage: Frequently Asked Questions’, UNFPA, <www.unfpa.org/child-marriage-frequently-asked-questions>, accessed 5 April 2019; International Women’s Health Coalition, ‘The Facts on Child Marriage’, <iwhc.org/resources/facts-child-marriage/>, accessed 5 April 2019. ^[1]_{SEP}

¹³ 3 United Nations, Department of Economic and Social Affairs, Population Division (2017). World Population Prospects: The 2017 Revision, DVD Edition

in the south and in some northern regions. Ethnic and religious disparities affect the social norms that underpin CEFM, contributing to geographical differences. At the same time, poverty remains a key factor of CEFM as the poorest quantile of the population has the highest rate of CEFM (62%) and has experienced the slowest decline.

Violence against women and girls along with the practice of CEFM are linked to intricate social norms that are encouraged by a variety of factors that include deeply entrenched traditional beliefs and myths, as well as wider gender inequalities combined with strong cultural barriers to women’s participation in decisions affecting them. Prevalence rates of violence against women and girls that includes CEFM are highest among communities that experience high levels of poverty and low levels of education, thus highlighting the interconnected nature of the vulnerabilities facing women and girls. Factors that encourage CEFM include but are not limited to gender roles that restrict girls and women to family and household roles, economic incentives, the perceived need to ensure the safety of the girl in areas where girls are at a high risk of physical and/or sexual assault, and inaccessible and/or low-quality services such as schools or health facilities¹⁴. Rates of CEFM vary widely within countries reflecting influences including ethnic identity, religious identity, and secular influences such as urbanization or changes in women’s status.

Efforts to change the social norms that promote violence against women and girls, including CEFM, have been concentrated around developing and effectively implementing national legislation that prohibits the practices, raising awareness of their negative consequences (specifically with respect to health and education), increasing access to health and education services, and empowering women and girls (with the support of men and boys) to challenge gender inequalities and the systems that uphold them. Recent laws that criminalize GBV include the January 13 1999 Law on GBV (Loi du 13 janvier 1999 sur les VBGs), the 2020 Law on the Criminalization of Rape and Pedophilia, including Incest (La loi criminalisant le viol et les actes de pédophilie), and the Taxation Law on Employed Women (La loi sur la fiscalité de la femme salariée).

Attempts by CSOs such as Tostan to conduct an organized dissemination of these norms through community dialogue sessions, trainings on the rights of women and girls, etc. in more communities have been used intensively in the regions that are most affected.

Law enforcement against gender-based violence faces great obstacles mainly related to the reluctance of community members to report cases perpetuated against young girls in their community. In spite of the progress made in promoting girls’ rights, which has led to a significant reduction of child marriage and the adoption of stronger legislation to protect girls’ rights, girls from disadvantaged backgrounds and remote regions like Ziguichor and Sédhiou, are still challenged by poor education and life skills training, inadequate access to reproductive health services and harmful traditional practices. Services are available across Ziguichor and Sédhiou to help prevent and respond to violence against women and girls, and to promote girls’ empowerment. Please see Annex 7 for a detailed Social Services Map developed by the Evaluation Team. The map is intended to generate additional knowledge and will support project planning by identifying what services already exist to avoid project duplication and to promote potential partnerships and synergies with other initiatives.

1.2 Sport and Play as a Means to Empower Young and Adolescent Girls

14 2019 Evaluation of the UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage.

RTP uses a rights-based approach to empower adolescent girls and boys through sports as part of a play-based approach. Phumzile Mlambo-Ngcuka, Under-Secretary-General of the United Nations and Executive Director of UN Women, put it succinctly: *“Sport can be one of the great drivers of gender equality, by teaching women and girls the values of teamwork, self-reliance and resilience. It can provide girls with social connections and a refuge from violence in their homes and communities, and help them to understand their bodies and build confidence and the ability to speak up, particularly during adolescence, when the pressure to conform to traditionally ‘feminine’ stereotypes leads many girls to abandon sport entirely.”*¹⁵.

Play-based-approaches can trigger the development of key dimensions of adolescent girls’ empowerment, namely: 1) the expression of their free will and self-reliance through participation in sports, 2) their voice, and 3) their behavioral control and autonomy of decision-making. Through the RECAF-Jeu Project, RTP will promote the development of these three dimensions of the agency of adolescent girls and boys as well as better aptitudes and commitment of coaches and community members to support gender equality in general and girls’ empowerment in particular.

Right to Play’s efforts to empower girls are complemented by the efforts of a wide variety of other actors that include United Nations organizations (i.e. UNFPA, UNICEF, UN Women, UNDP, etc.); research institutions (i.e. Population Council, Drexel University, Colombia University, etc.); international philanthropic organizations (i.e. those who form part of “28 Too Many”, among others); international social change programmes and campaigns (i.e. The Girl Generation Programme, the 16 for 16 Campaign, the Girls Not Brides Global Partnership to End Child Marriage, etc.); religious organizations promoting an end to FGM and EFM (Norwegian Church Aid, Trocaire, etc.); Amnesty International; national governments and their FGM/EFM Coordination Bodies; the African Union and its campaigns to end FGM and Child Marriage; and local CSOs and community groups promoting social change to end FGM and EFM across countries; among others.

15 *Op-ed: Empowering women through sport*, Phumzile Mlambo-Ngcuka, Under-Secretary-General of the United Nations and Executive Director of UN Women, (April, 2019) - <https://www.unwomen.org/en/news/stories/2019/4/op-ed-ed-phumzile-empowering-women-through-sport> (Accessed on Sept. 19, 2021)

Section II Overview of the RECAF-Jeu Project

Overview

Renforcement des Capacités des Filles par le Sport et le Jeu (RECAF-Jeu) is a five-year (2021 – 2026), \$8.6 million project implemented by RTP in Senegal and funded by Global Affairs Canada. RECAF-Jeu is aimed at supporting the empowerment of girls and young women in Casamance region of Senegal, a region selected due to its high rate of early and forced marriage, early pregnancies, violence against girls and women including female genital mutilation, and school dropout by girls.

The implementation of this project will cover the regions of Ziguinchor and Sédhiou, in the area of Casamance. The population of the [Ziguinchor](#) Region (i.e. 706,551 inhabitants, corresponding to 4.1% of total Senegalese population)¹⁶ is characterized by great ethnic diversity, natural resources, and tolerance towards social diversity. More than half of the population is made up of the Diola ethnic group (61%); followed by the Mandingo group (9%), the Puular group (9%), Ouolofs (5%), Manjaques (4%), Mancagnes (3%), Balantes (2%), Sereres (2%), other ethnic groups (5%). In the Ziguinchor Region, Muslims represent 74.5% of believers, Catholics 17.3%, other Christians 0.5% and animists 7.8%. The animists are mainly located in the department of Oussouye where they represent more than 45% of the population and in the district of Nyassia. The population of the Sédhiou region was estimated at about 591,969 inhabitants in 2021¹⁷. The population is also characterized by its cosmopolitan composition due to the ethnic diversity encountered, namely: the Mandingoes, the Fulani, the Balantes, the Diolas, the Manjacks, the Mancagnes, the Wolofs and the Sereres. The ethnic composition of Sédhiou region is predominately Mandingo and therefore often referred to as the ‘bastion of Mandingo culture’. Both regions have been subjected to the Casamance Conflict since 1982 between the Government of Senegal and the independence-seeking Movement of Democratic Forces of Casamance (MDFC). The violent conflict has taken approximately 5,000 lives and internally displaced over 60,000 people¹⁸. This has made the provision of basic services such as education and health services more challenging and has raised the level of vulnerability of women and children, particularly girls.

Project Beneficiaries and Stakeholders

The primary intended beneficiaries of the project are girls and young women aged between 10 and 25 years old, also counting boys of the same age, among those benefitting directly from the project. Organized around 2 cohorts of 2-years each, the project expects to reach 7,740 adolescent girls and young women and 2,580 adolescent boys and young men totaling 10,320 direct beneficiaries, which includes an estimated 361 adolescents boys and girls and young women and men with disabilities. The project will also work extensively with young women and men as coaches and mentors for girls’ and boys’ clubs. Each cohort will include 4 coaches trained in leadership and sports, who will be reaching 1376 young men and women (1032 young women and 344 young men). These young women and men will gain knowledge on issues of gender equality, reproductive health rights and violence against women and girls. Furthermore, they would also learn life skills and the use of sports as a means of empowerment.

¹⁶ ANSD, Projections démographiques, 2021

¹⁷ ANSD, Projections démographiques, 2021

¹⁸ Harsch, Ernest (April 2005). "Peace pact raises hope in Senegal"

To support teenage girls and boys as well as young men and women coaches, the project will engage parents and grandparents, community elders and leaders as well as sports and leadership mentors and media personnel. It is also expected that 10,320 parents and grandparents will be indirect beneficiaries of the project. In addition, more than 150 mentors and media personnel will be engaged as leaders in their field (sports, gender equality, media) to mentor adolescent girls and boys. Media personnel will also participate in programs for positive reporting of women in sports.

The project will have an additional indirect reach of 89,784 community members through community awareness sessions and other activities. It is estimated that 50% of population in Ziguinchor and Sédhiou would be reached through mass media.

Please see Annex 6 for a Stakeholder Map that identifies the project’s various stakeholders, including rights holders and duty-bearers, and outlines their engagement, participation and interest in the project. It also identifies the power relations between the stakeholder groups to help identify push/pull factors affecting gender equality and girls’ empowerment.

Planned Outcomes

The intended outcomes of the project are as follows:

Ultimate Outcome:

- Enhanced empowerment of vulnerable and marginalized adolescent girls and young women in the Ziguinchor and Sédhiou regions of Senegal.

Intermediate Outcomes:

- Increased agency amongst vulnerable and marginalized adolescent girls and young women in targeted communes of the Ziguinchor and Sédhiou regions for the realization of their rights within their families and communities
- Increased action by family and community members, including men and boys, in targeted communes of Ziguinchor and Sédhiou regions to support gender equality and the realization of the rights of adolescent girls and young women
- Increased accountability of key institutions to respect, promote and fulfill the rights of adolescent girls and young women in and through sport

Immediate Outcomes:

- Increased life skills of vulnerable and marginalized adolescent girls
- Increased knowledge of adolescent girls concerning prevention and response to gender-based violence, and reproductive health rights (RHR) and services (including menstrual hygiene management)
- Increased access to and participation in sports by vulnerable and marginalized adolescent girls and young women, including those with physical disabilities
- Increased capacity of families and communities to address barriers to gender equality and the realization of the rights of adolescent girls and young women
- Increased capacity of coaches and relais to train and inform adolescent girls on life skills, GBV and RHR services

- Increased ability of boys and men in their communities to act as champions and allies for gender equality and the rights of adolescent girls and young women
- Increased participation of adolescent girls, boys, and young women in public forums to defend and promote the rights of women and girls, including in sports, at the sub-regional, regional and national levels
- Increased capacity of civil society organizations to advocate for adolescent girls’ and young women’s rights, especially in and through sports
- Increased commitment of key institutions towards promoting adolescent girls’ and young women’s rights, especially in and through sports

The project has a Logic Model (see Annex 2) that outlines the project’s planned results as well as a Theory of Change (see Annex 18) that explains how change is expected to occur and that will articulate causal pathways of change as well as assumptions that underpin the project’s change logic. In addition, the Evaluation Team supported the development of a Performance Management Framework (PMF) (see Annex 3) that presents the Logic Model results and provides indicators to measure progress towards results throughout project implementation. Results from the Baseline Study will inform future refinement of the Theory of Change.

Section III Overview of the Baseline Study Purpose and Objectives

The **purpose** of the mixed-method baseline evaluation of the RECAF-Jeu project is to produce a rigorous evaluation and analytical framework that can serve as a guide to measure project results with a particular focus on the impact of interventions on direct beneficiaries. It is also designed to collect baseline data that can be used to measure progress against a set benchmark. The study will ultimately facilitate midterm and endline project evaluations to assess the coherence, delivery, effectiveness, sustainability and impact of the project and report the findings and lessons learned through a gender lens, as well as provide programmatic guidance by identifying social norms and attitudes that need to be targeted through the project’s work.

The **primary objectives** of the baseline study are as follows:

1. To produce a rigorous evaluation framework design, including an analytical framework which can be used for the midline and end line evaluations;
2. To review, refine and/or develop reliable and valid survey and other measurement instruments;
3. To report the baseline starting points for the RECAF-Jeu project’s intended outcomes;
4. To inform realistic and achievable targets that are grounded within the local context;
5. To produce evidence which facilitates discussion and learning regarding program best practices among beneficiaries, community members, RTP staff, partners and institutional stakeholders; and
6. To produce evidence which informs organizational strategic learning and continuous improvement to strengthen capacity to carry out quality program design, implementation, and monitoring and evaluation in the future.

Additional objectives of the baseline related to the gender analysis include the following:

- To analyze the harmful gender norms and challenges faced by girls and boys, men and women and the additional intersecting vulnerabilities;
- To inform the project gender equality strategy and ensure it is consistent with the needs of boys and girls, men and women including most vulnerable groups.; and
- To map out existing reproductive health rights and GBV services available at national level and in the regions of Ziguinchor and Sédhiou.

The Baseline Study is designed to provide RTP with the data needed to conduct an impact evaluation at the midline and endline of the project. Through the use of a quasi-experimental approach (further described in Section V on Methodology) that draws on treatment and comparison groups, RTP will be able to identify project actions that have caused effects or observed changes within the treatment groups and measure this change over time through a longitudinal approach (i.e. measuring the same people or similar groups of people from the treatment group at baseline, midline, and endline).

Section IV. Evaluation Framework and Research Questions

The Evaluation Team designed an Evaluation Framework to guide the Baseline Study as well as the project’s future evaluation work. It is designed around the standard OECD/DAC evaluation criteria of relevance, coherence, effectiveness, efficiency, impact, and sustainability, as well as the cross-cutting themes of gender, equity and human rights. Under each evaluation criterion, the evaluation team defined an overarching evaluation question and associated questions. These questions are presented within an Evaluation Framework Matrix (see Annex 4) that includes indicators as well as data collection methods, sources, and analysis methods to facilitate a qualitative assessment in response to each question.

To measure progress towards the achievement of results under the Effectiveness criterion, the Evaluation Team has developed results indicators outlined in the PMF (see Annex 3). Quantitative data obtained through Knowledge, Attitudes, and Practice (KAP) Questionnaires (i.e. surveys) with young and adolescent girls and boys from clubs, club coaches, and community members directly informed the PMF indicators while qualitative data obtained through focus group discussions (FGDs) and key informant interviews (KIIs) was used to explain trends in quantitative data reported on in the PMF. Data was analyzed using a Data Analysis Matrix (see Annex 15) that presents PMF-specific research questions and that articulates how each indicator was analyzed. The Findings section of this report presents the baseline study data according to PMF specific-research questions.

The Evaluation Framework also includes a stand-alone and yet well-integrated Gender Analysis and Needs Assessment Framework, as presented in Annex 5, to examine the relationships between girls, boys, women, and men and by examining issues of access to resources and power imbalances between girls, boys, women, and men; the effects of existing national and local legislation, policies, and frameworks on gender equality; cultural norms and perceptions that affect gender equality and girls’ empowerment; and gender equality in sports.

The Gender Analysis drew on a Social Relations Approach due to its strength in identifying existing gender inequalities in the distribution of resources, responsibilities and power. Questions from the Gender Needs Assessment were integrated throughout the data collection tools so that the needs assessment could be conducted at the same time as the baseline study’s primary data collection.

Section V Methodology

5.1 Design and Approach

The Baseline Study methodology used for this research project was based on a ***mixed-methods design*** to collect and analyze both quantitative and qualitative data through surveys, interviews, and a document review. It used a ***quasi-experimental approach*** through a ***Difference-In-Difference (DID) design*** to assess changes in attitudes, knowledge and behaviour among stakeholders affected by the project by measuring those from a treatment group (i.e. stakeholders who are affected by the project) against those of a comparison group (i.e. stakeholders with similar characteristics but who were not affected by the project).

For this Baseline Study, treatment groups consisted of stakeholders from sports clubs and communities that form part of the geographic areas where the project is being implemented. The comparison groups consisted of stakeholders from sports clubs and communities from the same regions who share similar characteristics (such as income-levels, ethnic background, religious affiliation, etc.) but where project interventions have not occurred. Similar groups to those who have benefited from project interventions are easily accessible in the regions of Ziguinchor and Sédhiou and have served as ideal comparison groups, resulting in strong matched samples. Since the project activities have been planned to be quite targeted, the project has very little direct effect on the comparison groups. The risk of project contamination among the comparison groups has remained minimal. Therefore, the use of a DID Design proved to be effective. The same number of respondents per stakeholder group were surveyed in the comparison groups as were surveyed within the treatment groups.

How does a Difference-In-Difference (DID) design measure impact?

Under DID, impact is measured by studying the outcome of interest before and after the intervention for two groups; one of which is exposed to the intervention/project and the other which is not. This approach is founded on attributing to the interventions any change in the outcome experienced by a group of beneficiaries before and after the intervention and over-and-above the change experienced by a comparison group of comparable non-beneficiaries in the same period. The change happening in the comparison group provides the counterfactual scenario to the intervention.

The Baseline Study will also facilitate a ***longitudinal comparison***. The methodological approach used by the evaluators will facilitate a comparison in changes in the knowledge, attitudes and behaviour of stakeholders within the treatment and comparison groups, across the project baseline, midline, and endline. This comparison will measure changes in stakeholder knowledge, attitudes and behaviour over time. By comparing changes observed in the treatment group to those in the comparison group, evaluators will be able to determine the extent to which project interventions have impacted stakeholders from the treatment group, thus determining cause and effect. This longitudinal comparison has been facilitated by the evaluators by tracking the participants’ contact information so that the midline and endline studies that will be done in the future will have the potential to include the same stakeholders.

Both *utilization-focused*¹⁹ and *participatory approaches* were used in this Baseline Study. The Study was designed to be useful to the end-user and has engaged key stakeholders throughout its design, implementation, and results dissemination to ensure its usefulness. The study has also *mainstreamed human rights and feminist evaluation principles* throughout the work.

In addition to the application of feminist evaluation principles, the evaluation team used a *gender equality and equity approach* throughout the baseline exercise. By applying a gender and equity-sensitive analytical lens throughout the baseline process, the evaluation team was able to ensure that the process itself did not reinforce structures of inequality between men, women, boys, and girls, and sub-groups of vulnerable young and adolescent girls and boys. In practical terms, this meant that the Evaluation Team took the necessary steps to identify sub-groups of vulnerable young and adolescent girls and boys, such as children with disabilities, to ensure that they were comfortable and able to participate in the baseline study wherever possible; that data collection tools did not reinforce discrimination (based on gender, ethnicity, or other characteristic); and that a gender and equity-sensitive analytical lens was applied to all baseline study processes and products. The Evaluation Team ensured that evaluation tools were carefully reviewed to ensure that they were free from bias or discrimination and that they used empowering language; data was disaggregated by sex and vulnerable sub-group to the greatest extent possible; and a gender and equity lens, including gender and equity analysis, was used throughout all of the data analysis.

Feminist evaluation principles include:

- Approaches that explore why differences between women and men exist;
- Challenging women’s subordinate positions;
- Using empirical results to strategically affect women’s lives;
- Acknowledgement of differences among women and do not consider women as a homogenous category;
- Understanding that evaluations are not value free and apolitical but are means to engage and empower women.

Source: www.betterevaluation.org

5.2 Data Collection Methods and Sources

Through the mixed methods design, the Baseline Study collected and analyzed both quantitative and qualitative data to inform the overarching evaluation questions and research questions. This was done through the use of three primary methods: 1) document review; 2) KIIs and FGDs; and 3) KAP Questionnaire Surveys. The quantitative data was used to report on quantitative indicators in the PMF as well as to triangulate data and provide additional contextual information. The qualitative data was used to explain trends seen in the quantitative data and has been used to facilitate analytical insights to respond to the evaluation and research questions.

The following provides a brief overview of the three primary data collection methods that were used in this Baseline Study Project:

The *document review* examined all relevant project documents as well as national policies and frameworks affecting girls’ empowerment, in addition to any other relevant documentation. This review provided secondary quantitative data through documents such as government statistics and project planning and monitoring documentation, as well as secondary qualitative data to add necessary contextual information to facilitate a qualitative analysis of results.

¹⁹ A utilization-focused approach was developed by Michael Quinn Patton and is designed to ensure that evaluation results are targeted towards the needs of end-users so that evaluation findings and recommendations are useful and can be applied to strengthen future programming.

FGDs and KIIs took place with a wide selection of stakeholders affected by the project. The focus groups and interviews provided important qualitative insights that have facilitated in-depth investigation into the reasons behind behaviours, attitudes, and factors affecting project outcomes. FGDs and KIIs have been used to gather qualitative data to inform questions outlined in the evaluation framework matrix and gender needs assessment. These interviews took place in person, along with a select number done virtually. All FGDs and KIIs were conducted following the “do no harm” principle and all interviews were conducted ethically and in a culturally sensitive manner. (Please see section IX below for a full description of how ethical principles were ensured throughout the baseline study.) All FGDs were sex-disaggregated with female interviewers interviewing female respondents and male interviewers interviewing male respondents.

FGDs targeted project beneficiary girls, boys, mothers, fathers, grandmothers²⁰, and coaches (only the treatment group and not the comparison group in order to prioritize qualitative information from those who will be involved in the project). Each discussion group randomly targeted between 6 – 9 participants and took place in a group setting in order to put participants at ease, as well as to stimulate discussion between participants. FGDs were recorded to facilitate detailed note-taking. KIIs were conducted with target stakeholders who required a one-on-one interview in order to have the necessary time to transmit detailed knowledge of the project where increased confidentiality was provided through a private interview. These stakeholders included target community leaders, religious leaders, club managers, representatives of sports federations, CSOs, media representatives, representatives of government institutions, leaders of parent groups and associations within targeted communities, leaders of organized men’s clubs that promote positive masculinity and women’s rights, and project staff. In some cases, individuals from the same stakeholder group were asked to be interviewed in a small group, at which point the KII was easily transformed into a FGD using the same KII questionnaire. (Please see annex 8 for a copy of the FGD and KII discussion guides and refer to sub-section 5.3 below for the sampling approach used to select FGD and KII participants.) Exhibits 1 and 2 below indicate how many stakeholders were reached through FGDs and KIIs, respectively.

²⁰ Grandmothers have been identified as a separate stakeholder group due to their strong influence on girls’ empowerment and decision-making in Senegal.

Exhibit 1. Number of stakeholders reached through FGDs

FGD Participants (Treatment Group Only)									
Stakeholder Group	Sex		Region		District				Total
	Female	Male	Ziguinchor	Sédhiou	Sédhiou	Bignona	Oussouye	Ziguinchor	Total
Girls aged 10 - 17	40	N/A	24	16	16	8	8	8	40
Girls aged 18 - 25	40	N/A	32	8	8	8	16	8	40
Boys aged 10 - 17	N/A	6	0	6	6	0	0	0	6 ²¹
Boys aged 18 - 25	N/A	44	36	8	8	5	17	14	44
Female Coaches	16	N/A	16	0	0	0	0	16	16
Male Coaches	N/A	24	17	7	7	5	7	5	24
Mothers	32	N/A	16	16	16	8	0	8	32
Fathers	N/A	28	20	8	8	0	13	7	28
Grandmothers	32	N/A	16	16	16	0	8	8	32

²¹ It was difficult to engage boys aged 10 – 17 through FGDs since many of the sports teams within this age category were busy playing in sports tournaments during the data collection period.

Youth Groups ²²	8	4	3	9	9	1	1	1	12
Men’s GE Clubs	N/A	14	0	14	14*	0	0	0	14
RTP Project Team	4	1	N/A	N/A	N/A	N/A	N/A	N/A	5
Total	172	121	183	110	108	35	70	75	293

Exhibit 2. Number of stakeholders reached through KIIs

KII Participants									
Stakeholder Group	Sex		Region		District				Total
	Female	Male	Ziguinchor	Sédhiou	Sédhiou	Bignona	Oussouye	Ziguinchor	Total
Representatives of Sports Associations and Institutions	0	8	6	2	2	2	3	1	8
Representatives from the Media	0	4	3	1	1	1	1	1	4
Representatives from CSOs working on gender equality (including organisations that promote the rights of	4	6	6	4					10

²² These youth groups refer to organized clubs such as Girls and Boys Clubs who are not direct project beneficiaries but who could serve as potential partners and allies during project implementation.

children with disabilities)									
Representatives from Government Institutions	5	5	8	2	2	2	3	3	10
Community Leaders	0	10	7	3	3	1	5	1	10
Religious Leaders	0	10	7	3	3	2	3	2	10
Leaders of Parents Groups and Associations	0	6	3	3	3	1	0	2	6
Total	9	49	40	18					58

KAP Questionnaire Surveys have been implemented by the GISSE team to collect primary quantitative data and have targeted girls, boys, adolescent coaches, and community members in the Ziguinchor and Sédhiou regions to understand their needs, priorities, and how their attitudes, knowledge, and behaviour has changed throughout the project intervention. These stakeholder groups have been selected to inform the quantitative indicators in the PMF. (A separate survey has been developed by the Evaluation Team for each stakeholder group, which can be found in Annex 8.) The survey reached 96 sports clubs across the treatment and comparison groups, which included Sport and Cultural Associations (ASCs)²³.

Exhibit 3. Number of stakeholders reached through surveys

²³ Disaggregation between ASCs and other sports clubs is not possible since ASCs were not specifically distinguished from other sports clubs during data collection.

Survey Participants (Treatment and Comparison combined)											
Stakeholder Group	Sex		Region		District				Disabilities		Total
	Female	Male	Ziguinchor	Sédhiou	Sédhiou	Bignona	Oussouye	Ziguinchor	With Disabilities	Without Disabilities	Total
Girls aged 10 - 17	517	N/A	383	134	134	110	133	140	74	443	517
Girls aged 18 - 25	345	N/A	243	102	102	94	79	70	38	307	345
Boys aged 10 - 17	N/A	480	323	157	157	88	134	101	57	423	480
Boys aged 18 - 25	N/A	430	289	141	141	99	110	80	58	372	430
Female Coaches	8	N/A	5	3	3	1	0	4	N/A	N/A	8
Male Coaches	N/A	88	59	29	29	21	17	21	N/A	N/A	88
Community Members	665	658	880	443	443	274	464	142	N/A	N/A	1323
Total	1535	1656	2182	1009	1009	687	937	558	227	2964	3191

Survey Participants (Treatment Group Only)											
Stakeholder Group	Sex		Region		District				Disabilities		Total
	Female	Male	Ziguinchor	Sédhiou	Sédhiou	Bignona	Oussouye	Ziguinchor	With Disabilities	Without Disabilities	Total
Girls aged 10 - 17	295	N/A	213	82	82	65	72	76	42	253	295
Girls aged 18 - 25	201	N/A	150	51	51	44	54	52	22	179	201

Boys aged 10 - 17	N/A	254	160	94	94	52	61	47	38	216	254
Boys aged 18 - 25	N/A	263	174	89	89	46	73	55	43	220	263
Female Coaches	5	N/A	3	2	2	1	0	2	N/A	N/A	5
Male Coaches	N/A	56	38	18	18	11	11	16	N/A	N/A	56
Community Members	329	341	442	228	228	144	224	74	N/A	N/A	670
Total	830	914	1180	564	564	363	495	322	145	868	1744

Survey Participants (Comparison Group Only)											
Stakeholder Group	Sex		Region		District				Disabilities		Total
	Female	Male	Ziguinchor	Sédhiou	Sédhiou	Bignona	Oussouye	Ziguinchor	With Disabilities	Without Disabilities	Total
Girls aged 10 - 17	222	N/A	170	52	52	45	61	64	32	190	222
Girls aged 18 - 25	144	N/A	93	51	51	50	25	18	16	128	144
Boys aged 10 - 17	N/A	226	163	63	63	36	73	54	19	207	226
Boys aged 18 - 25	N/A	167	115	52	52	53	37	25	15	152	167
Female Coaches	3	N/A	2	1	1	0	0	3	N/A	N/A	3
Male Coaches	N/A	32	21	11	11	10	6	5	N/A	N/A	32

Community Members	336	317	438	215	215	130	240	68	N/A	N/A	653
Total	705	742	1002	445	445	324	442	237	82	677	1447

5.3 Sampling

The Baseline Study used a mix of purposeful and randomized sampling approaches to collect the qualitative and quantitative data. Annex 19 provides a complete overview of the study’s sampling approach.

5.4 Data Collection Quality Control and Safety

The evaluation team implemented a number of measures to ensure data collection quality and safety. This included hiring experienced enumerators and supervisors with extensive local knowledge and providing them with a thorough training session on data collection and ethics, which included a pilot testing of the data collection tools within sample villages. Enumerators were also given mapping of services and reporting mechanisms briefs developed by the evaluation team that could be given discretely to anyone requesting such services (see Annex 14 for a copy of these briefs). The briefs were designed with information taken from Essential Services Map (see Annex 7) that was developed by the evaluation team and that outlines the key reproductive health and gender-based violence services offered across the Ziguinchor and Sédhiou regions. To ensure the safety of research participants and researchers during the current Covid-19 pandemic, the Evaluation Team and all enumerators followed a strict Covid-19 health protocol, as detailed in Annex 13. Data safety and ethical standards were also followed, as outlined in Annex 19.

5.5 Data Analysis

The Baseline Study draws on both quantitative as well as qualitative data analysis techniques. Quantitative data, obtained through the surveys and document review, provides concrete statistics to generate a description of current knowledge, attitudes, and behaviour among stakeholders in the treatment and comparison groups, as well as to measure concrete statistical changes within these groups over time. These statistical descriptions and trends are complemented with the qualitative data that provides a holistic analytical description of the factors affecting the statistics, facilitating an understanding of the “why” and “how” behind the statistics.

Quantitative Data Analysis

Quantitative data has been analyzed to inform each results indicator in the PMF. The Data Analysis Matrix (see Annex 15) identifies the exact survey questions that informed each indicator and describes how the survey questions have been analyzed to generate the indicator value. Data has been disaggregated according to the disaggregation plan specified in the PMF (see Annex 3) next to each results indicator. Data disaggregation has been done according to gender, age²⁴, type of stakeholder, location, and disability/non-disability²⁵. The evaluators have conducted descriptive and inferential statistics to analyze study data using the STATA software package. Descriptive statistics afford a better understanding of the baseline sample and survey data.

²⁴ Girls and boys were disaggregated into two age groups: 10 – 17 and 18 – 25. These groups covered all of the children participating in the clubs and have been disaggregated into two separate groups since the older group requires information on life skills, RHR and GBV information more urgently and can receive information in a more thorough and nuanced fashion than the younger age group.

²⁵ For surveys, children were self-identified as having a disability, if relevant, through background questions using the Washington Group Guidance ([cdc.gov/nchs/washington_group/wg_questions.htm](https://www.cdc.gov/nchs/washington_group/wg_questions.htm))

Qualitative Data Analysis

Qualitative data analysis has been completed to analyze and triangulate information generated through FGDs and KIIs in order to provide a comprehensive narrative behind the statistical descriptions and trends. This analysis was done by categorizing information from FGD and KII notes according to identified themes and trends across interviews (including categories such as research questions, discussion questions, type of stakeholder, PMF indicator, and any other theme(s) that the evaluators wanted to analyze across interviews and stakeholders). Qualitative data analysis also drew on the principles of triangulation, a Theory of Change Analysis, and a Gender Equality and Equity Analysis²⁶.

See Annex 19 for a complete description of the data analysis techniques that were used to perform this study.

Section 5.6 Study Limitations

The baseline study faced a number of limitations, as outlined below:

1. **Limitations inherent to a perceptions survey:** The baseline study drew on perceptions surveys with boys, girls, coaches, and community members in order to measure changes in their knowledge, attitudes, and behaviours between the start and end of the project. While perception surveys are an excellent method for assessing the knowledge, attitudes, and behaviours of stakeholders towards gender equality and girls’ participation in sports, they rely on the self-reporting of respondents who may or may not have an accurate perception of their current realities or capacities. For instance, respondents may over-estimate their current level of empowerment or feel over-confident in their abilities to address gender inequality and GBV. In some cases, respondents may not even answer truthfully to some questions for fear of being perceived as providing the “wrong” answer to a question. One’s perception of a situation can oftentimes be misaligned with the actual reality. A good example of this is regarding contributions made by boys and girls towards unpaid household domestic work. Gender equality studies across continents have clearly indicated that girls typically do more unpaid domestic work than boys. However, in this baseline study, boys reported doing more unpaid domestic work than girls, which may indeed be their perception but is unlikely to be an accurate reflection of reality. Respondents from this baseline study tended to provide quite positive perceptions regarding gender equality, and therefore the limitations of a perceptions survey should be taken into consideration when using this data.

Another challenge with perceptions surveys is that one’s perceptions may change over time depending on their context and exposure to new ideas and/or information. For instance, when people learn more about gender equality and women’s rights, they often become more sensitized towards situations of gender inequality and are more capable of identifying actions that hinder women’s rights. Therefore, after a successful intervention that raises awareness of gender equality, community members may actually perceive higher instances of gender inequality, including GBV, in their communities than they did before participating in the intervention. This potential limitation should be taken into consideration when setting project targets and analyzing project data at the midline and endline, and can be somewhat mitigated by using complementary assessment tools such as pre and post assessment surveys to directly measure any changes in knowledge among project beneficiaries in order to take these changes in knowledge into consideration when interpreting midline and endline results.

²⁶ The Gender Equality and Equity Analysis drew on a Social Relations Framework.

Mitigation Strategy: To mitigate the limitations posed by a perceptions survey, the project will use secondary data and research as well as project monitoring data to contextualize the baseline data.

2. Limitations related to targeting stakeholders from sports clubs as opposed to those from the general population: The baseline study intentionally targeted the project’s primary beneficiaries (i.e. girls, boys, and coaches as well as the parents of girls from sports clubs) in order to facilitate the measurement of changes in their knowledge, attitudes, and behaviour as a direct result of the project intervention. A wider survey was also conducted at the community level to capture overall community perceptions but girls and boys at the general community level were not specifically targeted due to the need to prioritize girls and boys from clubs within the limited resources allocated towards the study. This means that the perceptions of girls and boys that were captured through this study are of children that are inherently more empowered than many others within the community since the children surveyed and interviewed are already practicing sports within family dynamics that facilitate their engagement in sports. This is likely a contributing factor that explains some of the highly positive perceptions of girls’ empowerment that emerged from the survey and FGD data. In addition, by focusing on girls and boys who already practice sports, it was more difficult to meaningfully inform some of the PMF indicators such as Indicator 1100.2 that measures the percentage of girls who are practicing extra-curricular sports, since most girls in the sports clubs are already practicing extra-curricular sports. Indeed, due to this limitation, Indicator 1100.2 was removed from the PMF.

Mitigation Strategy: To mitigate the limitations posed by only targeting project beneficiaries from sports clubs, the project will use secondary data and research to inform on community trends.

3. Limitations in identifying children with disabilities: The baseline study intended to capture the perceptions and experiences of children with physical disabilities who participate in sports clubs. However, children with minimal to moderate disabilities are rarely identified as such by sports clubs meaning that it was not possible for the evaluation team to pre-identify children with disabilities to ensure their participation in FGDs. The baseline study also learned that children with more severe disabilities are not typically included at sports clubs and are expected to either participate in separate clubs that are specifically designed for children with disabilities or to stay home and not participate in physical activity. This limited the extent to which the study was able to highlight the experiences of children with disabilities through FGDs. The evaluation team was, however, able to mitigate this limitation with respect to girls’ and boys’ surveys by including some background questions to help children self-identify as having a disability so that quantitative data from the surveys could be disaggregated by disability.

Mitigation Strategy: To mitigate the limitations surrounding the identification of children with disabilities, the project included background questions in the girls’ and boys’ surveys to help children self-identify as having a disability so that quantitative data could be disaggregated by disability.

4. Limitations in engaging project stakeholders: Due to the current project design and development timeline, girls and boys from clubs have not yet been registered in the project. Therefore, the girls and boys who were involved in the baseline study from the clubs may not end up being the exact same children as those who will participate in the project. In addition, the project has not yet created partnerships with specific stakeholders from government institutions, media outlets, or CSOs. The baseline study therefore provided general insights as to how these types of stakeholders perceive gender equality and girls’ empowerment through sports, but it was not able to reflect the actual

perceptions of project participants and partners. It was also very challenging to engage media representatives and CSOs as study participants since they sometimes didn’t see the value of participating without having first established direct communication or formed a partnership with RTP.

Mitigation Strategy: To mitigate the limitations surrounding the engagement of project stakeholders, the evaluation team collected the contact information of study participants to monitor which ones are engaged in the programme to facilitate potentially reaching out to the same participants during the midline evaluation.

For additional information on the methodology, see Annex 19.

Section VI Findings

Ultimate Outcome: Girls’ Empowerment

Question: To what extent are vulnerable and marginalized adolescent girls and young women in the Ziguinchor and Sédhiou regions of Senegal empowered at baseline, as measured by the prevalence of GBV; incidences of CEFM; and levels of girls’ empowerment through sport?

Associated with Ultimate Outcome 1000: Enhanced empowerment of vulnerable and marginalized adolescent girls and young women in the Ziguinchor and Sédhiou regions of Senegal

Draws on three performance indicators, as follows:

- Indicator 1000.1: Girls’ Empowerment through Sport Index
- Indicator 1000.2: Percentage of girls married before 18 years of age (National Government Indicator from the ANSD, the national agency of statistics and demography)

GBV and CEFM in Senegal at the national level

According to 2019 national statistics collected by the Senegalese National Agency of Statistics and Demography (ANSD), a total of 9.3 per cent of women in Senegal aged 15 – 49 had experienced GBV over the past 12 months. The same document also specifies that within that percentage, 4.6% of Senegalese women experienced physical violence, 3% reported sexual violence, and 6.2% reported psychological violence.²⁷ Again, this is likely an under-representation of GBV since it is often under-reported.

In 2019, 31 percent of Senegalese women aged 20-24 were married before 18 years and 9 percent before 15 years.²⁸ Even though the average national prevalence of CEFM has decreased by 16 percentage points over the last two decades in Senegal, the country’s rate of progress will still have to increase by 1.5 percent to meet Sustainable Development Goal elimination targets by 2030. CEFM rates, however, vary a great deal across regions. For instance, according to the 2019 DHS, rates of CDFM were 4.2 per cent in Ziguinchor compared to 46.7 in Sédhiou.²⁹

²⁸ Iris Group. 2021. Political Economy Analysis of Child, Early, and Forced Marriage in Senegal. Chapel Hill, USA.

²⁹ Iris Group. 2021. Political Economy Analysis of Child, Early, and Forced Marriage in Senegal. Chapel Hill, USA.

Girls’ empowerment through sport

To complement these national statistics, the baseline has established a Girls’ Empowerment through Sport Index to further capture how the project will influence girls’ empowerment. This index is composed of four key elements from the PMF that reflect girls’ empowerment, as follows: Girls’ Agency Indicator 1100.3 (60% weighting), Community Support (community survey questions #6 – 11 at 15% weighting), Boys’ Support (boys’ survey questions #8 – 12 at 15% weighting), and Inclusion of Girls in Sports Clubs (girls’ survey questions #11 – 13 at 10% weighting). The baseline study found that girls’ empowerment is currently at 0.47 in Ziguinchor and 0.44 in Sédhiou on a scale from 0 – 1, with 0 representing no empowerment and 1 representing full empowerment.

4.1 Girls’ Agency

Research Question: To what extent do vulnerable and marginalized adolescent girls and young women in targeted communes of the Ziguinchor and Sédhiou regions at baseline have agency to realize their rights within their families and communities, as measured by levels of GBV, girls’ participation in sports, girls’ agency to make life choices, and extent of time dedicated towards unpaid domestic work?

Associated with Intermediate Outcome 1100: Increased agency amongst vulnerable and marginalized adolescent girls and young women in targeted communes of the Ziguinchor and Sédhiou regions for the realization of their rights within their families and communities

This question draws on four performance indicators, as follows:

- Indicator 1100.1 Percentage of girls and boys 15-25 who perceive a decrease in GBV over the last 12 months
- 1100.2 Percentage of girls who are practicing sports
- 1100.3 Percentage of girls who demonstrate agency to make life choices regarding sports, education, and marriage
- 1100.4 Percentage of girls and boys who self-report spending more than an estimated 14 hours per week on unpaid domestic work

GBV within communities across Ziguinchor and Sédhiou regions

Slightly over half (51 per cent) of girls and boys aged 15-25 years old from the treatment group perceived the existence of GBV in their community, compared to a higher rate of 67 per cent in the comparison group³⁰. Respondents reported relatively equal breakdowns of the kinds of GBV perceived, with 44 per cent of the treatment group reporting physical violence, 40 per cent reporting sexual violence, and 46 per cent reporting CEFM.

Girls from the treatment group perceived slightly higher levels of GBV at 52 per cent compared to boys at 47 per cent. Perceptions among girls from the comparison group were much higher at 73 per cent compared to boys at 54 per cent.

³⁰ The surveys captured girls’ and boys’ current perceptions of GBV. To inform *Indicator 1100.1 Percentage of girls and boys 15 – 25 who perceive a decrease in gender-based violence over the last 12 months*, the project will compare current levels of perceived GBV at the baseline against those at the midline and endline.

Levels of GBV among the treatment group appear to be considerably higher in the Sédhiou region at 73 per cent compared to Ziguinchor at 46 per cent. However, the comparison group identified slightly higher levels of GBV in Ziguinchor at 69 per cent than Sédhiou at 63 per cent. The district of Bignona reported the highest levels of GBV violence across the treatment and comparison groups at 85 per cent among both groups. This is compared to treatment group perceptions of 72 per cent in the Sédhiou district, 41 per cent in the Ziguinchor district, and 37 per cent in the Oussouye district. This demonstrates considerable variance among districts, with the Bignona district reporting over double the perceived levels of gender-based violence than Oussouye. Although there are many factors that could explain these differences between districts, the primary factor is likely cultural in that people in Oussouye tend to follow more traditional norms that place women in higher esteem³¹ than those in Bignona where cultural practices have been influenced by more modern forms of patriarchy, including interpretations of Islam that discourage gender equality.

Older respondents (aged 18 to 25 years old) among the treatment group reported slightly higher perceptions of GBV at 53 per cent compared to younger respondents (aged 10 to 17 years old) at 48 per cent. There was no notable difference in perceptions of respondents according to age in the comparison group, with 67 per cent of both age groups reporting the occurrence of GBV.

Respondents with self-identified disabilities from both the treatment and comparison groups perceived a slightly higher occurrence of GBV than those without a disability. Indeed, 53 per cent of respondents from the treatment group with a self-identified disability reported the perception of GBV versus 50 per cent of respondents without³². In the comparison group, 73 per cent of respondents with a self-identified disability reported perceived GBV in comparison to 66 per cent without.

When asked in FDGs about GBV within their communities, girls in all districts mentioned that men are generally the perpetrators of this type of violence. They added that in many cases, these men are members of their own family. They are typically uncles, older brothers or husbands. Younger girls are particularly susceptible to this type of GBV. Girls in Mlomp described rape as a form of GBV often perpetrated by husbands. Girls also explained that GBV can occur in public spaces, including during their transit to and from sports clubs, and that they sometimes must take special precautions such as not returning home after dark or returning with a group or girls or with boys that they trust in order to protect themselves. Interestingly, girls in FDGs also indicated that women can be perpetrators of GBV against other women. For example, co-wives sometimes perpetrate gender-based violence against other wives when living in a polygamous situation as well as stepmothers against their stepchildren.

As far as factors that may explain GBV within the community, girls thought that they were themselves often to blame for GBV. For example, they felt that when women and girls wear inappropriate clothing or try to seduce men, it can provoke men and sometimes lead to some form of violence. Walking alone at night can also facilitate violence against women. Cultural practices and traditions are also often to blame as they can promote practices such as CEFM and physical abuse by husbands. Girls in Diembering described how the feeling of superiority of men over women or their physical force can also be factor that can lead to GBV.

³¹ For instance, girls and boys are largely expected to execute the same kinds of household chores in Oussouye without distinguishing roles based on gender.

³² Due to the small sample size of boys and girls who self-identified as having a disability, the 3% difference is statistically significant.

"Usually men make the laws, especially in villages. Men are in charge. It is easier for them to get away with violence. Women on the other hand always have to give in and be inferior to men." Quote from a girl aged 18-25 years old from a basketball club in Diembering

Girls in Sédhiou and Oussouye explained that GBV can also be perpetrated by people addicted to drugs or drunk on the street. Girls in Ziguinchor also mentioned that boys tend to put girls down when they play sports or when they become too muscular.

Boys provided a somewhat different perspective on gender-based violence during FDGs. Although they indicated that men are most often perpetrators of gender-based violence, they highlighted that people in authority are common perpetrators, including supervisors, coaches, teachers and older male family members. Boys agreed with the perception that girls can also sometimes inflict GBV and also thought that girls are often responsible for violent outbursts in men that result in GBV. Boys in Diembering and Bignona felt that when girls dress provocatively they can attract this type of violence. Male frustrations regarding their ability to achieve life goals (such as employment, marriage, etc.) as well as unequal power dynamics between men and women that allow men to more easily dominate women were also identified as causes of GBV, according to boys.

"Violence is committed by both men and women. Most violence is committed by men, but women will often say something to men to cause a violent reaction." Quote from a boy in Sédhiou

"Sometimes women provoke men with the way they dress. Sometimes they don't wear clothes, but rather pieces of fabric. That's provocation." Quote from a boy in Bignona

When asked about ways to project themselves, girls in FDGs suggested that dressing conservatively and avoiding bad acquaintances can help them stay away from GBV. Girls in Bignona also suggested that they should stay home to avoid GBV. Most girls and boys interviewed in FGDs felt that the responsibility of avoiding GBV lies primarily with girls themselves as opposed boys who may commit the violence.

"Clothing is important, because if you dress indecently you can walk past a young boy who will in turn have an idea in the back of his head." Quote from a girl aged 10-17 years old from a basketball club in Ziguinchor.

Girls also indicated that education can be a factor that can help protect them against GBV. Girls mentioned that they would like to start learning how to protect themselves from a young age or know what they can and cannot do to avoid GBV. Some girls also felt that education needs to happen within the community and the family unit such as through community female advisors on sexuality and reproduction or through associations of women dedicated to raising awareness on human rights and harmful traditional practices. Within families, encouraging good communication between parents and daughters was raised as a tool that could help girls to express concerns with parents and go to the police if needed. Girls in several regions described the importance of empowering young girls to denounce any abuse. Girls also thought that showing character and being assertive are key to being respected and safe from GBV. For example, they cited how engaging in sports can help make girls stronger and give them character to avoid GBV.

During FDGs, girls were also asked how boys can protect themselves against GBV. According to girls, boys must be strong mentally to avoid being manipulated by girls. They also must be physically strong to defend themselves and to gain respect. Girls also described how boys may need education to learn how to respect women and to know how to behave around girls. Girls explained that boys also need to stay away from drugs and alcohol and learn how to resist women’s advances.

Girls’ participation in extra-curricular sports

As previously mentioned in the report under the limitations section, the girls’ survey targeted girls who are already participating in sports clubs (those that are both associated with academic schools as well as stand-alone extra-curricular clubs). Of those girls, a total of 72 per cent of the treatment group confirmed that they play extra-curricular sports, meaning that they are engaged in sports clubs that are not associated with school activities. The percentage among girls from the comparison group is similar at 74 per cent. The remaining respondents are engaged with sports purely through their scholastic activities.

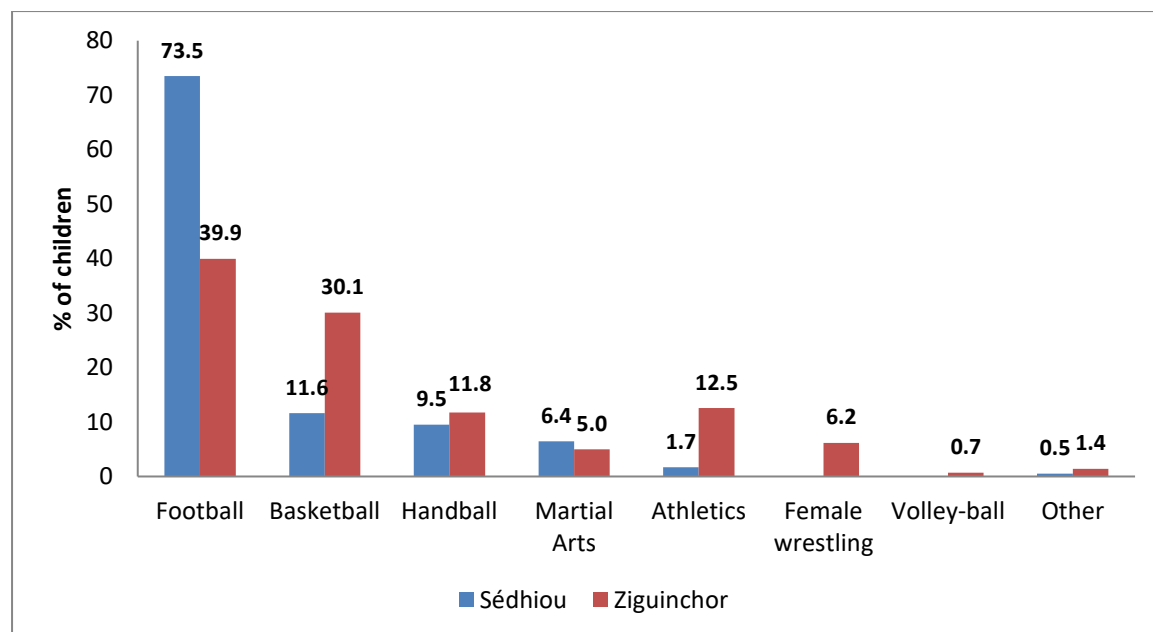
A regional comparison demonstrates a remarkably higher level of girls’ engagement in extra-curricular sports in the Sédhiou region than in Ziguinchor. Indeed, 94 per cent of girls from the treatment group and 92 per cent of girls from the comparison group participate in extra-curricular sports in Sédhiou compared to only 68 per cent of girls from the treatment group and 69 per cent of girls from the comparison group in Ziguinchor.

There does not appear to be a large difference between girls’ participation in extra-curricular sports by age, with 74 per cent of girls aged 18 to 25 engaged in extra-curricular sports compared to 71 per cent of girls aged 10 – 17 from the treatment group. The comparison group shows an even smaller difference between age groups with 74 per cent of girls aged 18 – 25 compared to 75 per cent of girls aged 10 – 17.

While the comparison group shows almost no difference in engagement in extra-curricular sports between girls who self-identify as having a disability compared to those who do not, there is a substantial difference in the treatment group, with only 52 per cent of girls with a disability participating in extra-curricular sports compared to 76 per cent of girls without. This may suggest that many extra-curricular sports clubs are not sufficiently welcoming to girls with disabilities and/or that girls with disabilities do not have the necessary support from their families and communities to participate in extra-curricular sports.

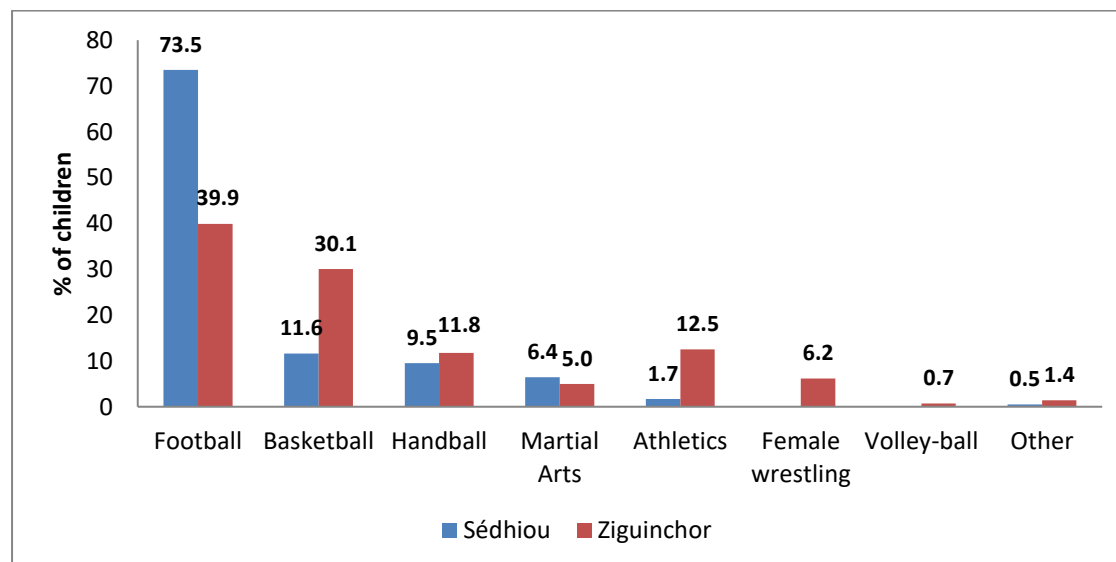
Girls who participate in extra-curricular sports primarily play football (soccer), with nearly half (44 per cent) of female respondents participating in this sport. Football is also the most popular sport among boys, at a rate of 53 per cent. For girls, the second most played sport is basketball at 25 per cent followed by handball at 14 per cent. Basketball is also the second most popular sport among boys at 30 per cent followed by track and field at 13 per cent. Football and basketball are also by far the most popular sports among children (both girls and boys) who self-identify as having a disability

Exhibit 4. Sports practiced by girls and boys across regions



As outlined in the chart below, nearly three quarters (74 per cent) of girls and boys who participate in extra-curricular sports in the Sédhiou region play football compared to only 40 per cent in Ziguinchor. More children play basketball in Ziguinchor at 30 per cent compared to only 12 per cent in Sédhiou. More children also participate in track and field in Ziguinchor at 13 per cent compared to only 2 per cent in Sédhiou.

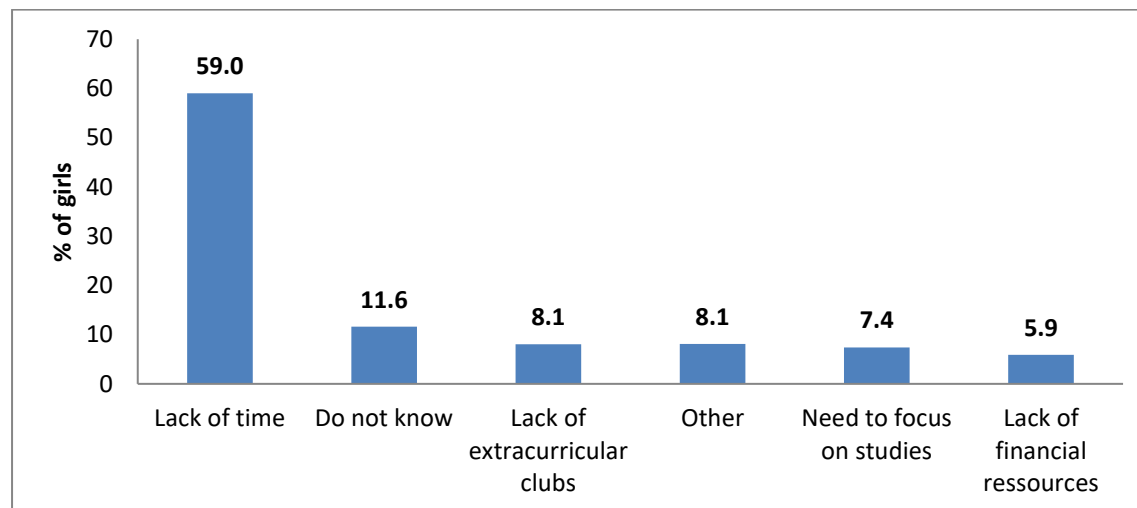
Exhibit 5. Sports practiced by children in sports clubs per region



When girls were asked what sports they would like to play, 25 per cent of respondents identified football while another 25 per cent identified basketball. An additional 25 per cent did not wish to engage in a second sport. The remaining quarter of respondents identified a variety of sports that include primarily handball, track and field, volleyball, and martial arts. Since football and basketball are currently the two sports that girls are most often playing, this response may suggest that girls are either extremely interested in these two sports or that they lack exposure to other kinds of sports.

When asked why girls do not participate in extra-curricular sports, a total of 59 per cent of girls from the treatment group who do not participate in extra-curricular sports responded that it is due to a general lack of time. In the Sédhiou region, 57 per cent of girls who do not participate in extra-curricular sports responded that it was because they were too busy with their studies, while the remaining 43 per cent indicated that it was due to a lack of extra-curricular sports clubs. In Ziguinchor, 66 per cent of respondents said that it is due to a lack of available time, 7 per cent cited lack of available sports clubs, and 6 per cent identified lack of financial resources.

Exhibit 6. *Reasons why girls do not participate in extra-curricular sports*



During FGDs, girls described barriers they face to participate in sports. In most regions, girls described how opposition to their participation in sports often comes from their own family, including fathers and older brothers.

“My dad didn't want me to play basketball, even though it is my passion. He did everything he could to get me to quit, but I held my ground.” Quote from a girl aged 18-25 years old from a basketball club in Ziguinchor.

Girls explained that barriers can also come from traditional roles and responsibilities imposed on them. For instance, girls in Ziguinchor mentioned that household chores and cooking for the household were priorities that came before any sport activities.

“Before you go to the gym, you must do your chores, and that is a drag for us. At 6 p.m. when you finish practice, you have to run to come and make dinner by 7 p.m.” Quote from a girl aged 18-25 years old from a basketball club in Ziguinchor.

Participating in sports was also deemed impossible when girls have their periods or when they lack adequate materials such as sport shoes or money to participate in competitions.

When asked if girls feel supported by their family and community to play sports, 91 per cent of girls responded “yes” while 9 per cent responded “no”. This breakdown was similar for both age categories (girls 10 – 17 and 18 – 25 years old). However, girls with disabilities felt substantially less supported than those without, with 23 per cent of girls with disabilities feeling unsupported compared to 6 per cent of those without. As well, twice as many respondents felt unsupported in the Sédhiou region (at 16 per cent) compared to the Ziguinchor region (at 7 per cent).

Girls’ agency to make life choices regarding sports, education, and marriage

RTP has defined “girls’ agency” as comprising of four key elements: self-esteem, self-efficacy, voice³³, and ability to take informed decisions. Overall, 34 per cent of surveyed girls reported complete agency³⁴, with 44 per cent reporting agency regarding self-efficacy, 39 per cent for self-esteem, 33 per cent for ability to take decisions, and 19 per cent for voice.

Overall, older girls aged 18 – 25 reported more agency at 37 per cent compared to younger girls aged 10 – 17 at 31 per cent. This is likely due to the increased life experience and independence of the older girls compared to the younger ones. A lower score of 23 per cent is seen among girls who self-report having a disability compared to 35 per cent among those who do not. This suggests that girls with disabilities have less agency to make their choices than girls without.

Survey responses for each of the four elements of agency are presented below.

Exhibit 7. Girls’ survey responses on self-efficacy

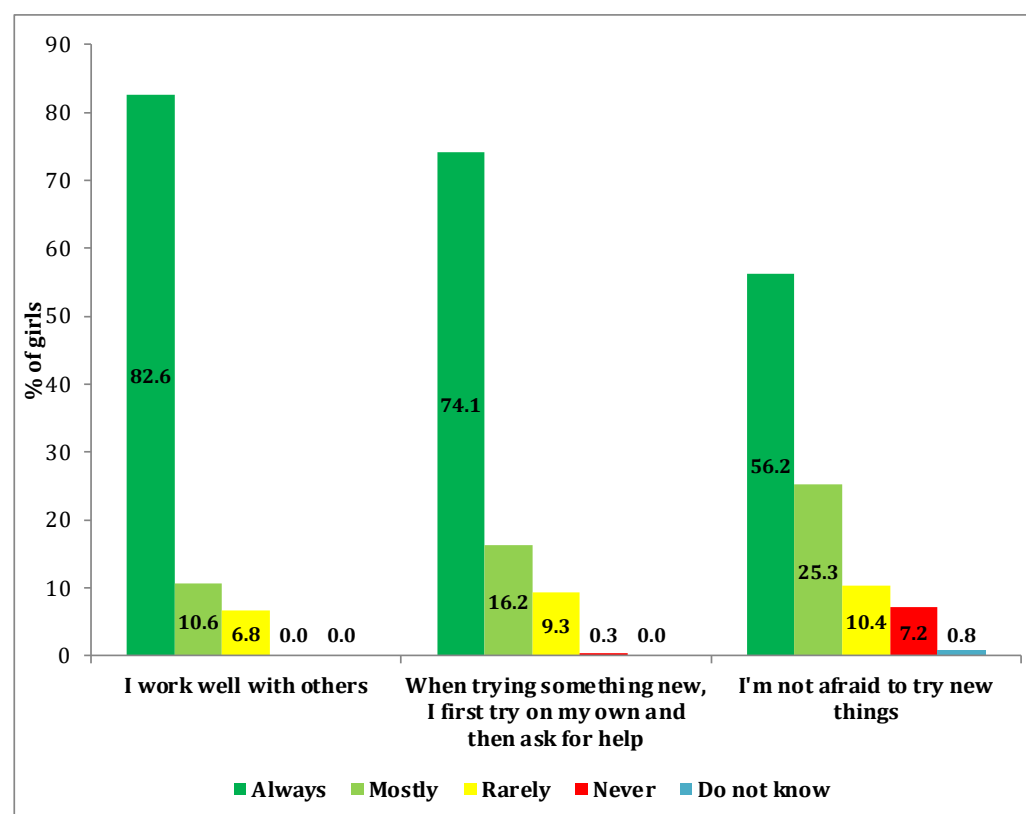


Exhibit 8. Girls’ survey responses on self-esteem

³³ “Voice” refers to girls’ ability to express their ideas, opinions and concerns as well as feeling confident that they know their rights.

³⁴ Agency was calculated as the mean score across the four elements that comprise the concept of “agency”, which are: self-esteem, self-efficacy, voice, and ability to take informed decisions about life choices that include studying, participating in sports, and marriage. “Complete agency” refers to scores where girls answered “always” to each question posed.

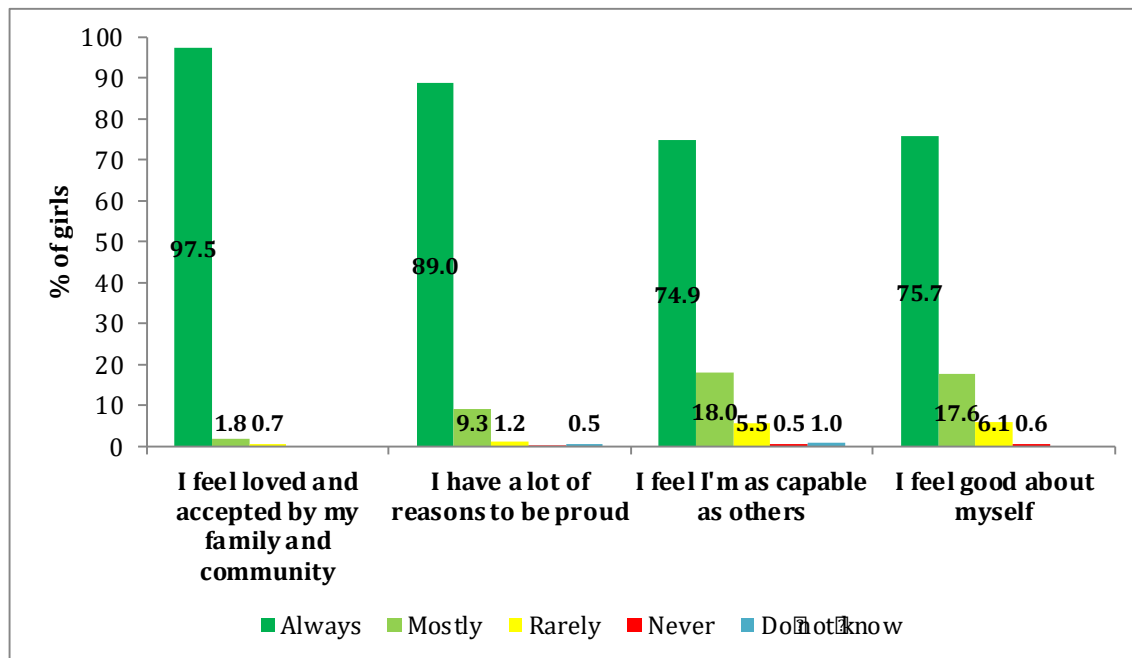


Exhibit 9. Girls' survey responses on ability to take decisions

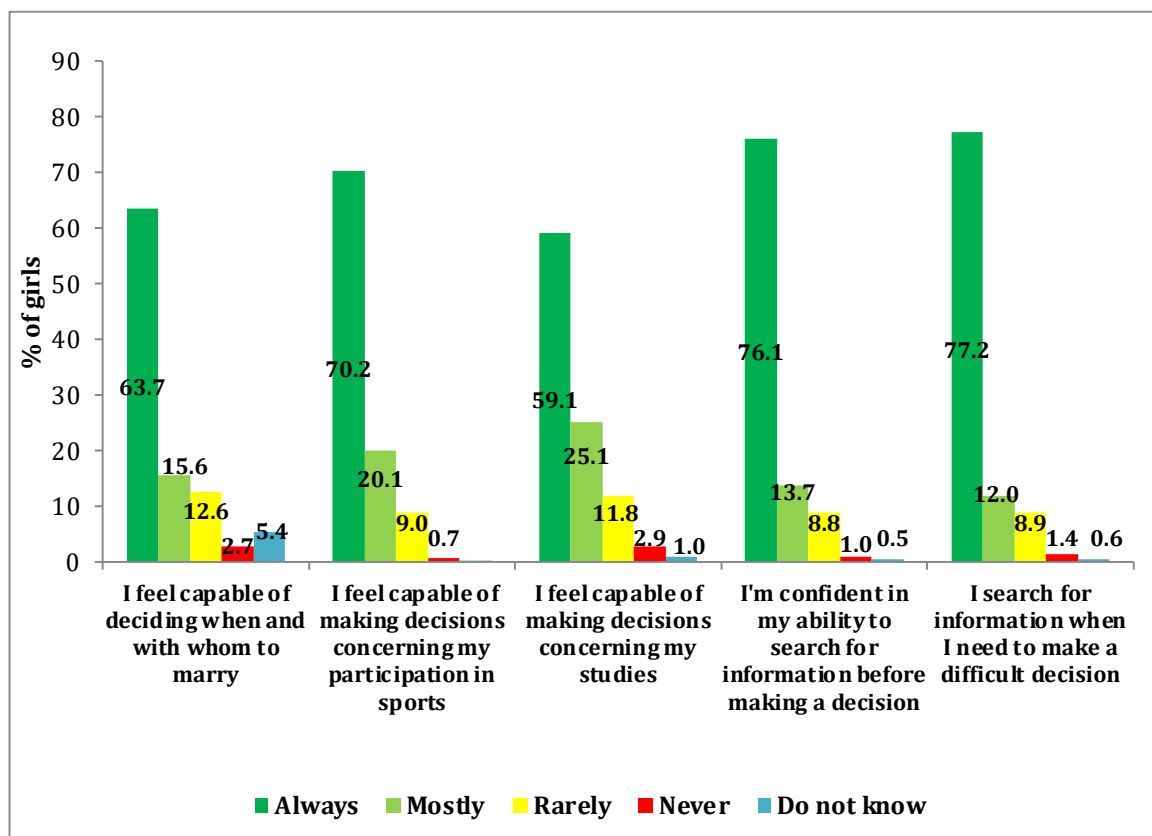
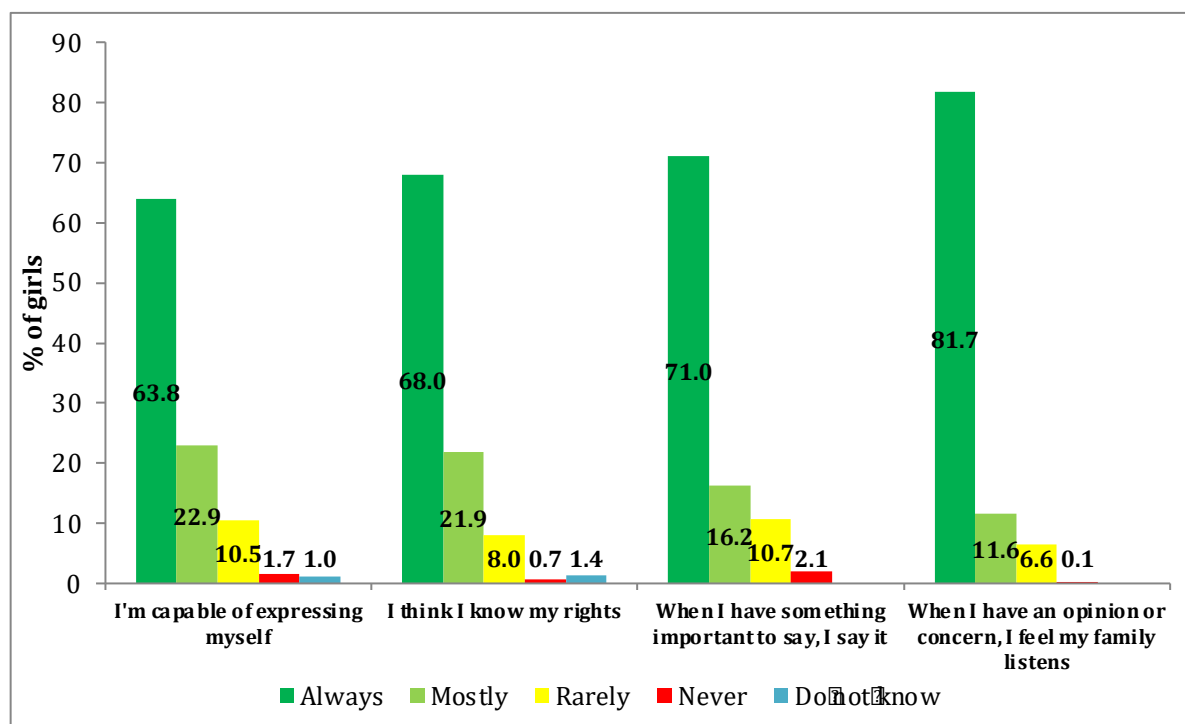


Exhibit 10. Girls' survey responses on voice



Time spent by girls and boys on unpaid domestic work

Unpaid domestic work (including household chores, gardening/farming, taking care of family members, and the picking, processing and selling of local produce) is often an inhibitor for girls and boys to participate in extra-curricular sports, as it takes up valuable free time that could otherwise be dedicated towards the development of essential life skills that are strengthened through sport.

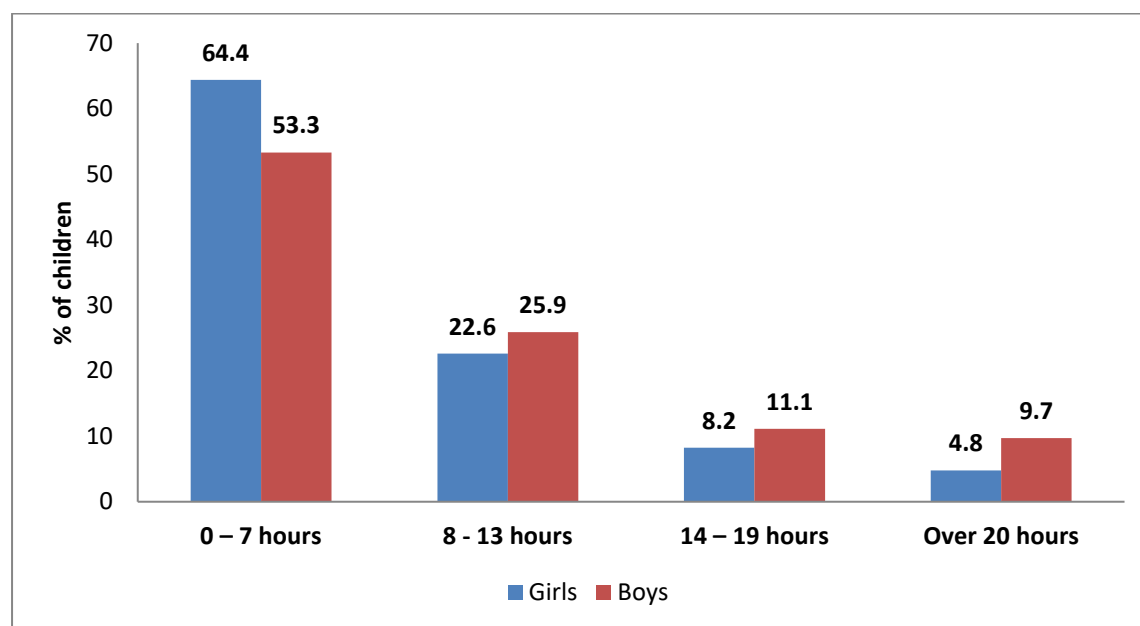
The ILO estimated in 2013 that the average number of hours weekly spent on unpaid household work in Senegal among children aged 7-14 was between 13 and 14 hours. Therefore, the baseline survey collected data on the percentage of girls and boys from sports clubs in Sédhiou and Ziguinchor that self-reported working above the national average. The survey revealed that 15 per cent of girls and boys self-reported working more than the national average of 14 hours per week on unpaid domestic work.

Boys reported working more hours, with 21 per cent of surveyed boys reporting working more than 14 hours per week compared to 13 per cent of girls. Girls are typically responsible for more household chores than boys and it would be expected that they would report a higher number of working hours on unpaid domestic work. A reason that may explain the high rate among boys could be the fact that the survey included household repairs, farming, and the picking, processing and selling of local produce, which are activities often done by boys. Another possibility is that boys simply self-reported more working hours based on inflated perceptions of their own contributions towards the family compared to girls who may have been more realistic.

As the graph below indicates, over half of the girls and boys who responded to the survey spend seven hours or less on unpaid domestic work per week, while approximately a quarter spend between eight and 13 hours per week. Around eight per cent of girls spend 14 - 19 hours per week compared to 11 per cent of boys. Ten per cent of boys report spending over 20 hours per week compared to five per cent of girls. Overall, these results indicate that approximately three quarters of girls and boys who participate in sports clubs are spending less than the national average on unpaid domestic work. This may reflect a

somewhat privileged position that children who are engaged in sports clubs have compared to those children who do participate in sport clubs.

Exhibit 11. *Number of hours per week spent by girls and boys on unpaid domestic work*



As outlined in the chart below, the main domestic activities that girls are engaged in are cleaning and cooking while boys are primarily engaged in cleaning and farming.

Exhibit 12. *Kinds of unpaid domestic work performed by girls*

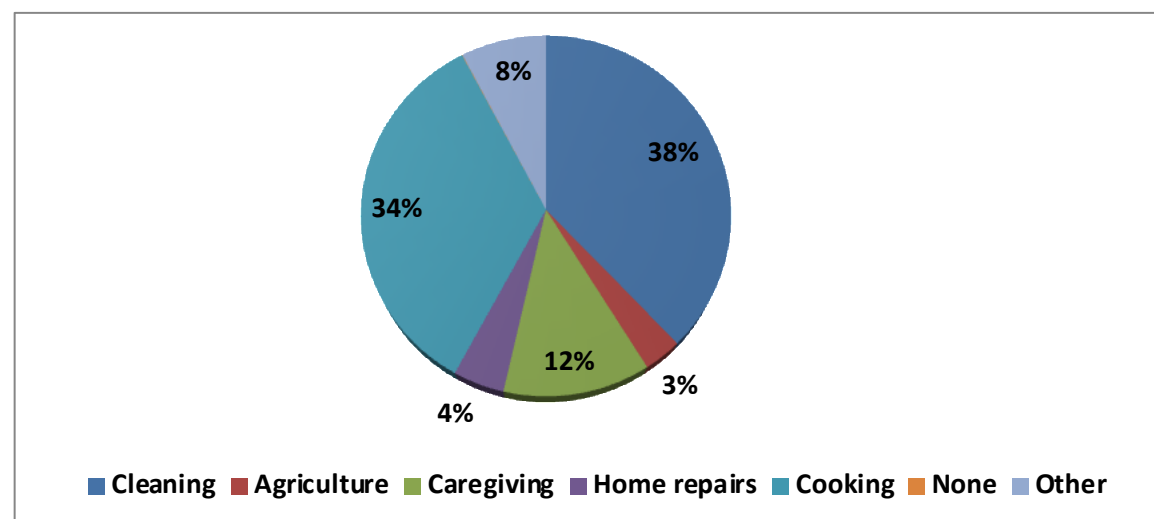
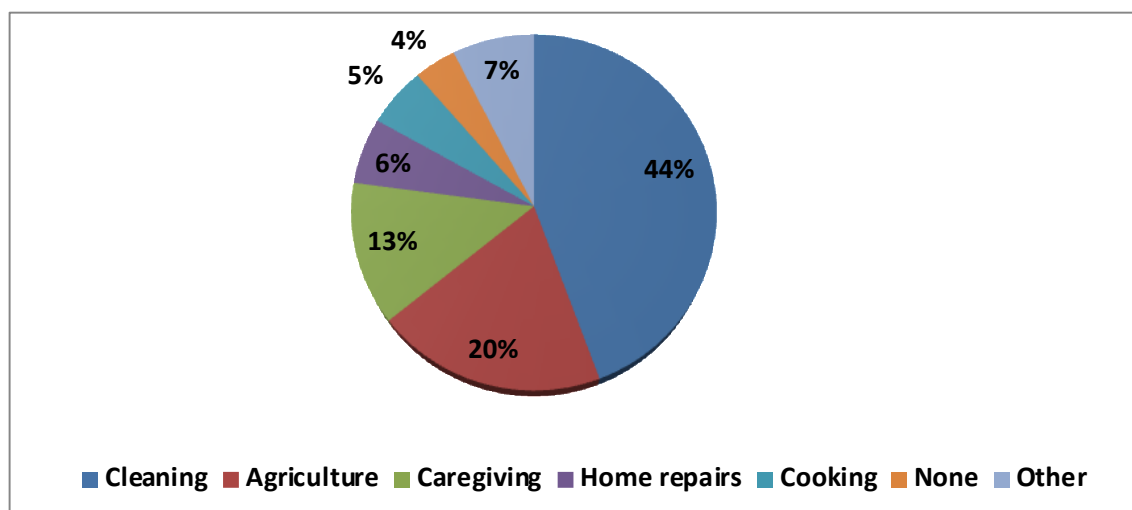


Exhibit 13. *Kinds of unpaid domestic work performed by boys*



A regional breakdown shows considerable differences between the regions of Sédhiou and Ziguinchor, with 43 per cent of girls and boys in Sédhiou self-reporting a workload of more than 14 hours per week on unpaid domestic work compared to only ten per cent Ziguinchor.

Even though nearly all girls and boys who responded to the survey contribute towards unpaid domestic work, nearly all survey respondents reported that these obligations do not interfere with their ability to study or participate in sports. Indeed, 94 per cent of boys and 96 per cent of girls do not feel that these obligations impede their ability to study, while 93 per cent of boys and 96 per cent of girls do not feel that these obligations impede their ability to participate in sports.

When asked in FDGs if household chores ever get in the way of studying or playing sports, girls in most regions indicated that it was not the case. Girls described how being organized or waking up earlier were key to juggling school, household work and playing sports. Most girls in Ziguinchor felt that they had the capacity to manage it all. However, some girls in Mlomp mentioned that they sometimes felt overwhelmed trying to juggle everything.

“It’s not a problem at all, because I’m used to doing it. It’s all about planning. Before you go to school you take care of chores and before you go to practice.” Quote from a girl aged 18-15 from a basketball club in Ziguinchor

The fact that the survey and FDGs targeted girls who already participate in sports is likely a strong factor affecting their answers since their presence in sports clubs clearly reflects that household chores have not severely impeded their ability to participate in sports to the point where they could not be present. Girls who were severely impeded by domestic responsibilities would not be present in sports clubs and therefore would not have participated in the survey or FDGs.

Girls had mixed responses in FDGs regarding their ability to say no to household work. Some girls indicated that their parents were supportive of prioritizing studying and playing sports over household chores while others were afraid to ask and even felt ashamed to be excused from housework. These girls were often concerned or felt guilty if their absence from housework were to increase their mothers’ workload.

“I would feel bad leaving the household work for my mother to do in my place.” Quote from a girl aged 10-17 years old from a football club in Thionk Essyl

“When I tell my father that I can't do such and such a task [at home] because I have to go to school, he understands because, in his opinion, studying comes first.” Quote from a girl aged 18-25 years old from a basketball club in Ziguinchor

“Housework is for women. If you tell your mom you are not able to do something, she's going to tell you that in her day, she would leave school, do all the housework, and then she might go back to school or do other activities.” Quote from a girl aged 18-25 years old from a female wrestling club in Mlomp

During FDGs, boys identified the kinds of chores they do at home. While some boys were not able to identify clear responsibilities, other boys in Ziguinchor and Diembering described how they are required to fetch water, sweep, clean the house, or work in the field and with the cattle. Boys explained that the main reasons why they do these chores is to help their mothers or to fulfill a sense of duty they felt regarding housework. Boys generally agreed that household chores did not get in the way of studying or playing sports. They also explained how they are generally confident to tell their parents when they are not able to do their domestic work because of school or sports.

“Our mothers are overburdened with tasks. Since our parents are our main support, we need to support them in return...and our children may support us one day.” Quote from a boy in Ziguinchor

“If I have to go to practice or school, I can explain it to my mom.” Quote from a boy in Sédhiou

4.1.1 Life Skills

Research Sub-Question: To what extent do vulnerable and marginalized adolescent girls and boys at baseline have life skills in terms of their ability to promote girls’ empowerment, express their ideas, make decisions, and demonstrate healthy attitudes towards GBV?

Immediate Outcome 1110: Increased life skills of vulnerable and marginalized adolescent girls

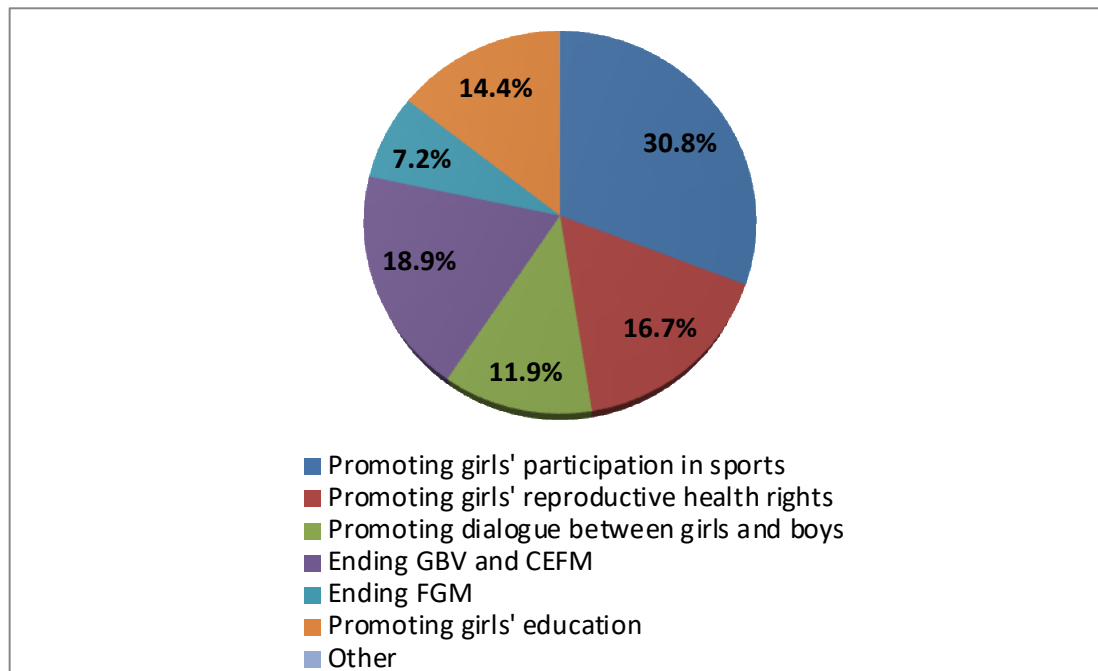
This question draws on four performance indicators, as follows:

- 1110.1 Percentage of girls who recall leading one or more community initiatives to support girls' empowerment in the last twelve months
- 1110.2 Percentage of girls and boys who report self-confidence to express their ideas
- 1110.3 Percentage of girls and boys who feel motivated to make decisions
- 1110.4. Percentage of boys, girls, coaches, and community members who demonstrate a healthy attitude towards GBV

Girls’ leadership of female empowerment initiatives

A total of 21 per cent of girls surveyed could recall leading one or more community initiatives to support girls’ empowerment in the last twelve months. This reflects that nearly a quarter of surveyed girls from sports clubs are actively leading girls’ empowerment initiatives, which is a considerable sum and could potentially provide some momentum to further engage the other 75 per cent. As identified in the chart below, the most common type of leadership activities revolved around engaging girls to participate in sports followed by ending GBV and then followed by promoting girls’ reproductive health rights.

Exhibit 14. Girls’ leadership activities to promote female empowerment led by girls from sports clubs



When asked in FGDs about the kinds of leadership initiatives to promote girls' empowerment that girls often support, they largely identified informal activities such as providing advice to other girls to believe in themselves or to practice sports. Some girls in Sédhiou also described efforts to raise awareness on topics such as obtaining birth certificates or abstaining from early marriages.

"I give advice to all the players on our team because I am their senior. I often ask them to believe in their abilities and to be careful with the boys, because they are not sincere." Quote from a girl aged 18-25 years old from a basketball club in Ziguinchor

Through FGDs, girls explained that they were often motivated to support other girls in order to protect them from public scorn or to help with specific issues such as early pregnancy. Some described how they thought they needed to push girls to get involved in sports or to increase their leadership skills. They felt that empowering girls with these skills could improve their overall well-being and their future.

"Girls start getting into trouble when they start dating boys. Boys like to lure young girls, that's what motivated me to give advice to my sister." Quote from a girl aged 10-17 years old from a basketball club in Ziguinchor

"We got involved to show people that sport is not only for boys. We want to allow any girl to express herself through sport and to feel comfortable." Quote from a girl aged 18-25 years old from a female wrestling club in Mlomp

Girls also explained how supporting girls' empowerment initiatives can be challenging. Girls in FGDs described how girls sometimes do not listen to them and how their advice is not always well received. In addition, girls who start practicing sports often face challenges that they have to overcome such as insults by people who don't think that they should be participating. This can also make encouraging girls to participate in sports more difficult.

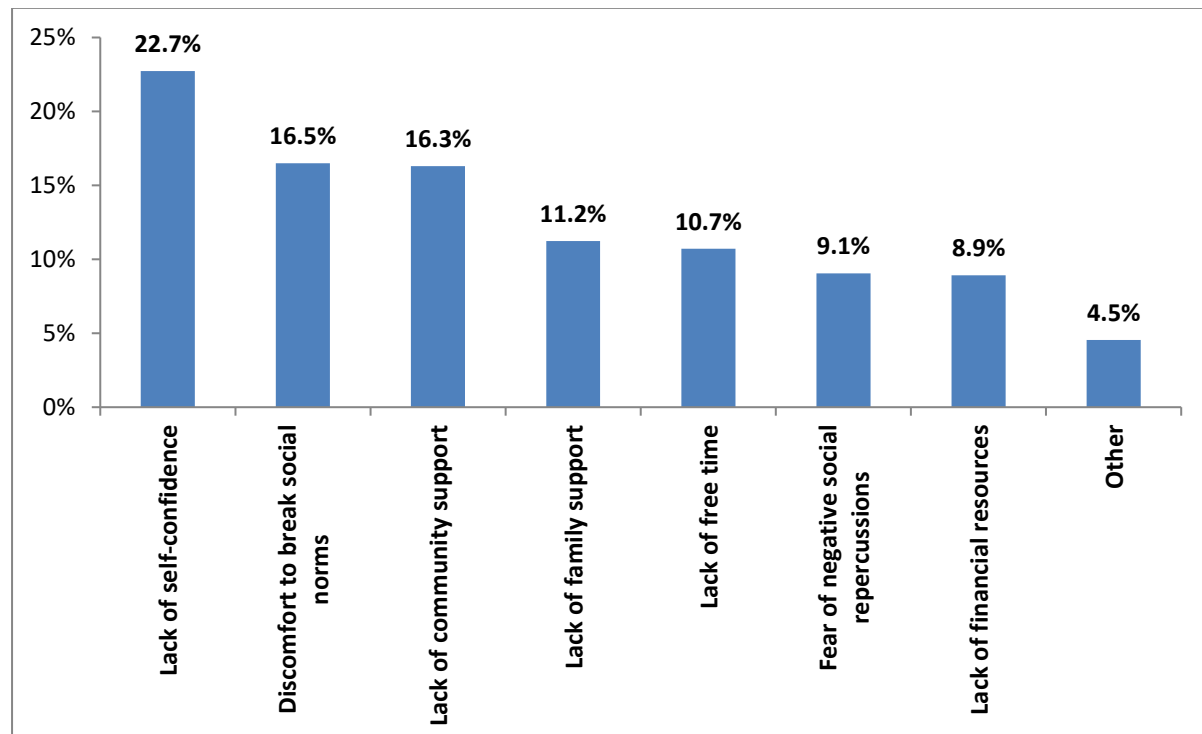
“It's not easy to convince a girl to do something she doesn't want to do. Besides, if you convince her to do sports, she will have to go through insults or being put down. I used to tell them, you have to come and once you start you will know the benefits.” Quote from a girl aged 18-25 years old from a basketball club in Diembering

When asked what barriers girls often face to participate in leadership initiatives that support gender equality and girls’ empowerment, girls reported the most common barriers to be a lack of self-confidence followed by discomfort going against established social norms and beliefs, such as that girls shouldn’t be leaders, as well as a lack of support from community members. Girls who participated in FGDs explained how men and boys are often unsupportive of girls taking on leadership roles. They explained how men and boys often perceive the role of girls and women to be exclusively associated with household domestic work and are often uncomfortable when women assume leadership positions outside of the household.

“Men often say that a woman’s place is in the kitchen and that she has household responsibilities that must be met. So, men are the primary obstacle [to women assuming leadership positions]. We must convince them that women can do the same kinds of activities that men can.” Quote from a girl aged 18-25 years old from a basketball club in Diembering

“Female leadership is not well-liked by boys.” Quote from a girl aged 10-17 years old from a football club in Thionk Essyl

Exhibit 15. *Barriers to girls’ leadership of gender equality and girls’ empowerment initiatives*



Girls in FGDs also identified a lack of resources or time and the fear of being bullied or the fear of attracting negative attention as barriers. For example, a girl in Ziguinchor described how she cannot be involved in sports and participate in leadership activities at the same time due to a lack of available time. Girls in most regions expressed a fear of potential negative social perceptions associated with

involvement in girls’ empowerment activities. They explained that supporting girls’ empowerment is often met with social disapproval and misunderstanding that can lead to public embarrassment. Girls often did not feel that they had the necessary self-confidence to overcome these barriers.

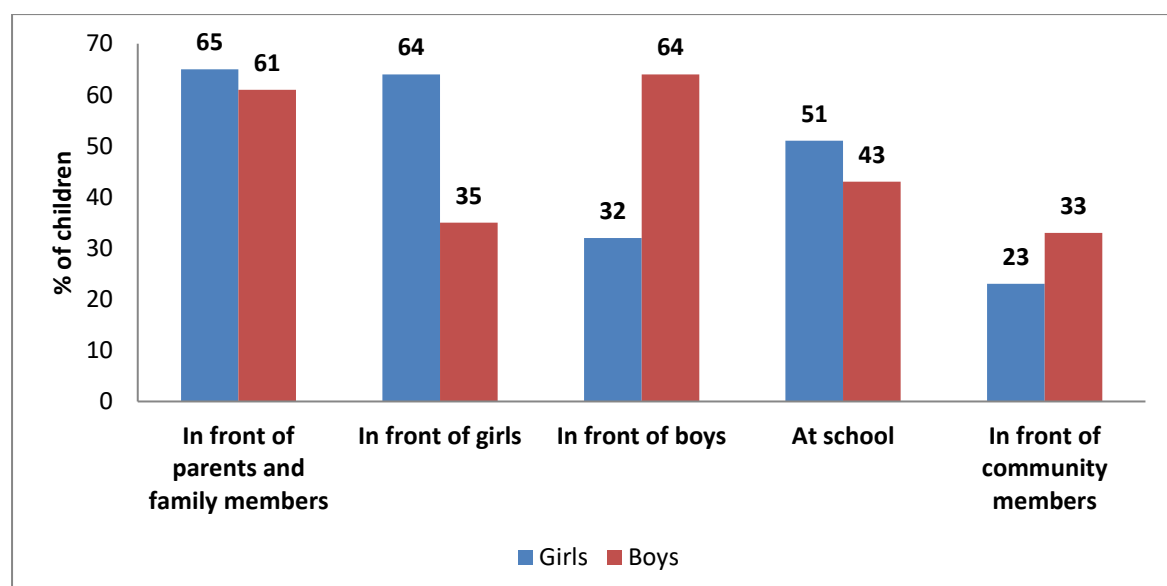
“Parents sometimes forbid their children to take part in these kinds of activities [girls’ empowerment activities]. But they will never understand if no one explains to them the purpose of these activities.”
Quote from a girl aged 18-25 from a football club in Bignona

"Boys typically don't want a girl as their leader, and sometimes they tell us that a girl can't be the leader of a group." Quote from a girl aged 10-17 from a basketball club in Sédhiou

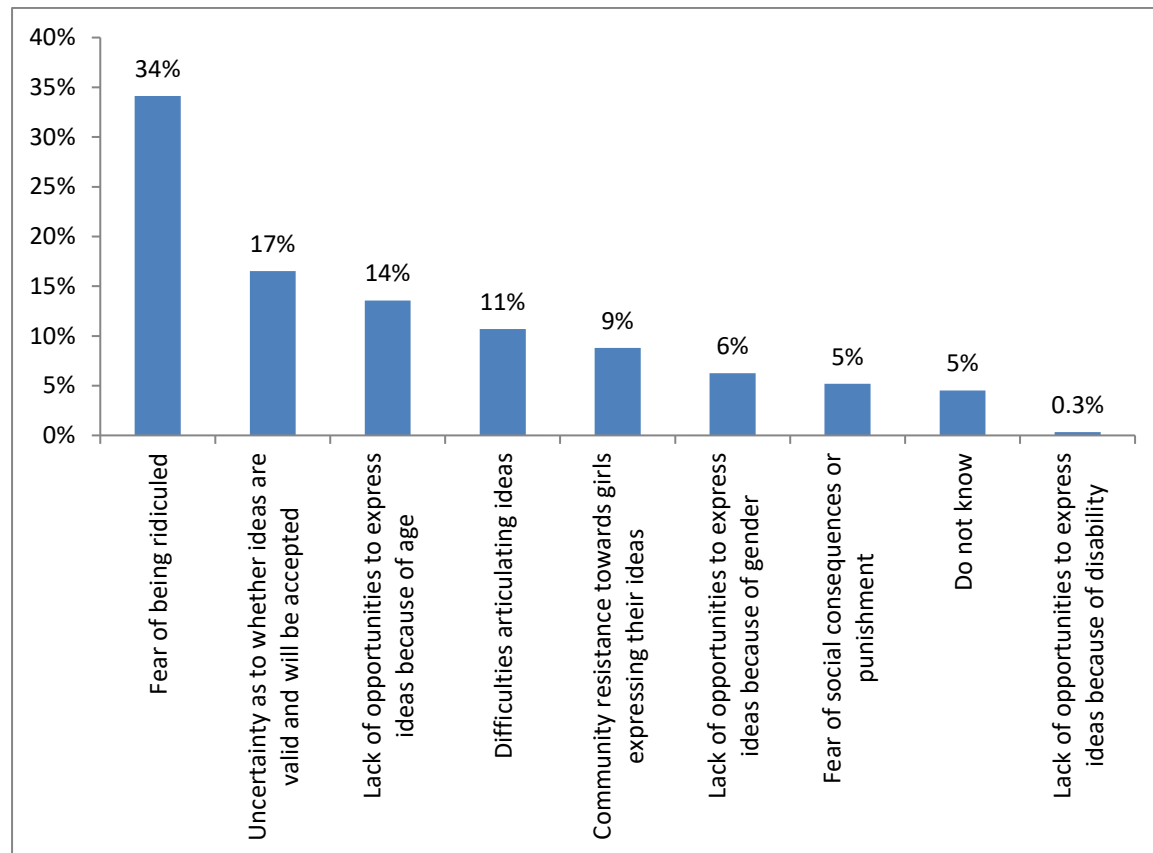
Self-confidence of girls and boys to express their ideas

In alignment with the previous findings on needing to strengthen girls’ self-confidence to lead female empowerment initiatives, the baseline surveys with girls and boys from sports clubs revealed that only 11 per cent of girls and 14 per cent of boys feel very confident (5 on a scale from 1 – 5) to express their ideas. A total of 65 per cent of girls reported feeling somewhat confident (4 on a scale from 1 – 5) to express their ideas in front of their parents and family members (compared to 61 per cent of boys), 64 per cent in front of other girls (compared to 35 percent of boys), 51 per cent at school (compared to 43 per cent of boys), 32 per cent in front of boys (compared to 64 per cent of boys), and 23 per cent in front of community members (compared to 33 per cent of boys). These statistics highlight that girls tend to be quite uncomfortable expressing their ideas in front of boys and community members, while boys are slightly more comfortable expressing their ideas in front of these groups. Girls and boys with disabilities felt considerably less comfortable to express their ideas at 4 per cent compared to those without at 13 per cent.

Exhibit 16. *Situations where girls and boys feel confident to express their ideas*



The greatest obstacles that surveyed girls reported facing to confidently express their ideas are fear of being made fun of followed by unsureness about whether their ideas are valid and will be accepted, followed by lack of opportunities to speak because of their age, and difficulties articulating their ideas.

Exhibit 17. Barriers that girls face to express their ideas

When asked what situations make them feel most confident to express their ideas and viewpoints, girls in FGDs mentioned that they preferred to share their ideas in a more intimate setting such as when they are with girlfriends or close family members. Other girls described how they feel most confident to express themselves during sporting events. Girls also explained that they do not necessarily perceive school as a safe space to express their viewpoints because of a fear that they may be judged or ridiculed.

“When I’m with my younger siblings and my mom, we talk. When I am at practice with my friends, or with my grandparents, I play with them. But when my dad is at home I shut down, I prefer not to get too close to him.” Quote from a girl aged 18-25 years old from a basketball club in Ziguinchor

“In class when you speak, people laugh at you. Or when you make mistakes, people start laughing. Then you won’t have the courage to express yourself. You won’t be able to express yourself because you think that what you say is wrong. In class, you’re not going to feel comfortable expressing yourself.” Quote from a girl aged 18-25 years old from a female wrestling club in Mlomp

Through FGDs, girls explained why it is sometimes difficult to express their ideas or viewpoints. In most regions, they described feelings of not being taken seriously or the lack of trust in their audience. For example, a girl in Ziguinchor explained that she cannot confide in just anyone for fear that her secrets will be exposed to everyone. Another girl mentioned how trust needs to be built over time. She explained how with parents, for instance, it is not possible to suddenly be open with them when the relationship has never lent itself to this. Girls also explained that it can be difficult to express ideas or

viewpoints when they stem from painful memories or issues. Finally, girls in several regions also described how they sometimes feel shy to speak up or to share ideas in public.

“As for the parents, the connection should be established from an early age. Parents should be close to their children. Instead of confiding in a third person, young girls should be able to talk to their parents.”
Quote from a girl aged 18-25 years old from a basketball club in Ziguinchor

“Most girls are shy and that's why they keep a lot of things in their heart and can't express themselves in public or can't say what they think.” Quote from a girl aged 10-17 from a basketball club in Sédhiou

During FGDs, girls were asked to identify factors that could make them feel more comfortable to express themselves. The main factors they described were linked to having established a relationship built on trust beforehand. They explained how it is easier for girls to confide in someone when they know and trust the person. Girls in Mlomp felt that practicing a sport is a good way to become better at public speaking and not being as self-conscious in front a crowd since they are required to play in front of people.

“You have to establish a certain complicity with a person or confide in someone you are used to talking to about certain subjects.” Quote from a girl aged 18-25 years old from a basketball club in Ziguinchor

“Sports can allow a person to express herself in front of her peers. When you play sports, people are going to know you and you're going to express yourself in front of people more easily.” Quote from a girl aged 18-25 years old from a female wrestling club in Mlomp

While there were many similarities with girls’ responses, boys sometimes had a slightly different point of view during FGDs. Like girls, boys felt that it was easier to express their viewpoints among friends. However, they felt more confident to express themselves in the context of practicing sports or at school. Boys also mentioned that they were reluctant to express their ideas or opinions at home since they often felt as though their views were not particularly welcome and that it was more important for them to demonstrate restraint and respect for their parents than to articulate their views.

“Basketball teaches us leadership, how to express ourselves, when to lower our voice.” Quote from a boy in Ziguinchor

“I feel more comfortable at school. Because at school I share the same class with two of my brothers. They support me in difficult moments.” Quote from a boy in Bignona

Through FGDs, boys described in what contexts it could be difficult for them to express their ideas. Just like girls, they shared fears of being ridiculed and identified a lack of confidence to speak in public. However, they also added that a lack of language proficiency (French or Wolof) could also influence their ability to share their opinions. Boys also identified some factors that make it easier for them to express themselves which include, for example, having an outgoing personality, self-confidence, or knowledge of the subject matter being discussed.

Motivation to make decisions among girls and boys

A total of 14 per cent of surveyed girls compared to 24 per cent of surveyed boys from the treatment group reported having full decision-making (i.e. complete autonomous decision-making) over whether they pursue studies, participate in sports, and whom and when they marry. This is compared to seven per cent and 15 per cent respectively from the comparison group. Only 11 per cent of children with disabilities from the treatment group reported full-decision-making compared to 19 per cent of those without disabilities.

As can be seen in the exhibits below, 15% of surveyed girls have full decision-making over whether they pursue studies (compared to 29% of boys), 10% have full decision-making over whether they participate in sports (compared to 17% of boys), and 10% have full decision-making over whom and when they marry (compared to 17% of boys). These statistics indicate that both girls and boys have relatively limited autonomy to independently make decisions concerning their studies, their participation in sports, and whom and when to marry. Boys consistently have greater autonomy to make independent decisions than girls.

Exhibit 18. *Level of decision-making autonomy for girls and boys regarding their studies³⁵*

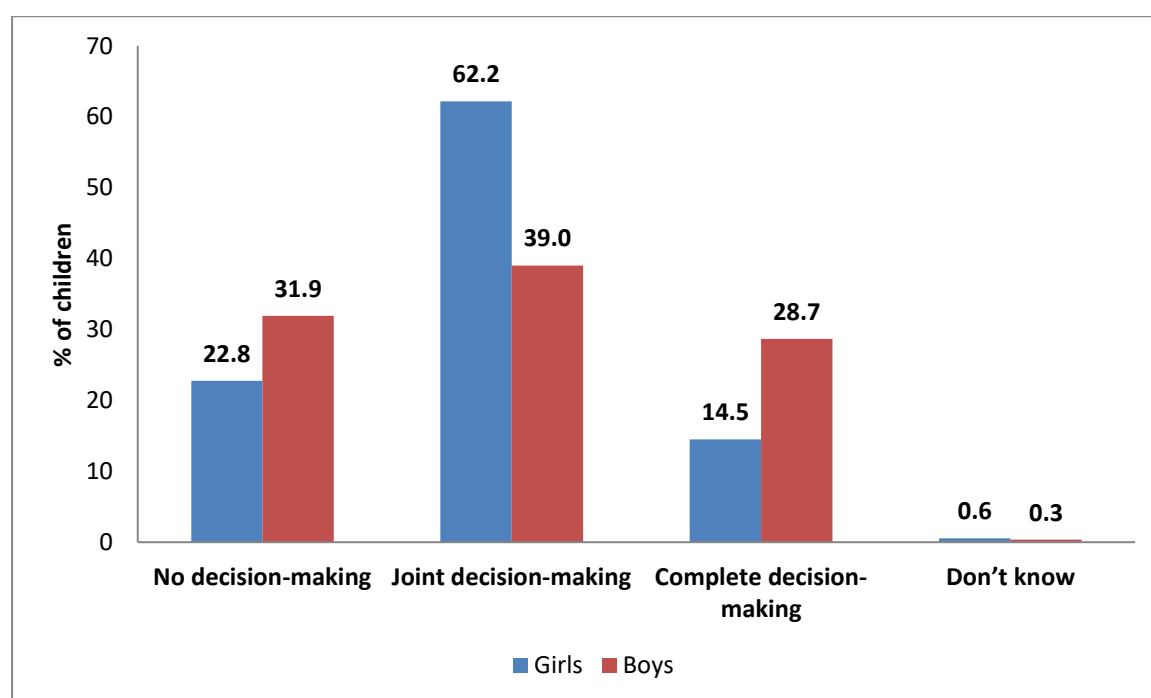


Exhibit 19. *Level of decision-making autonomy for girls and boys regarding their participation in sports*

³⁵ Joint decision-making refers to decisions taken by the girl or boy jointly with either one or both parents.

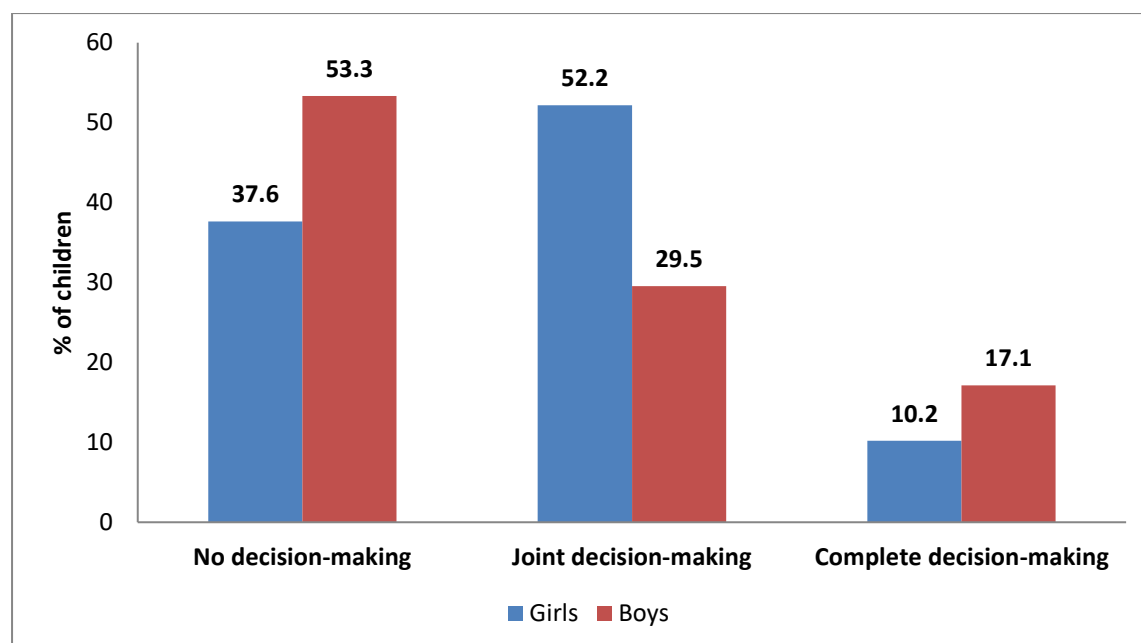
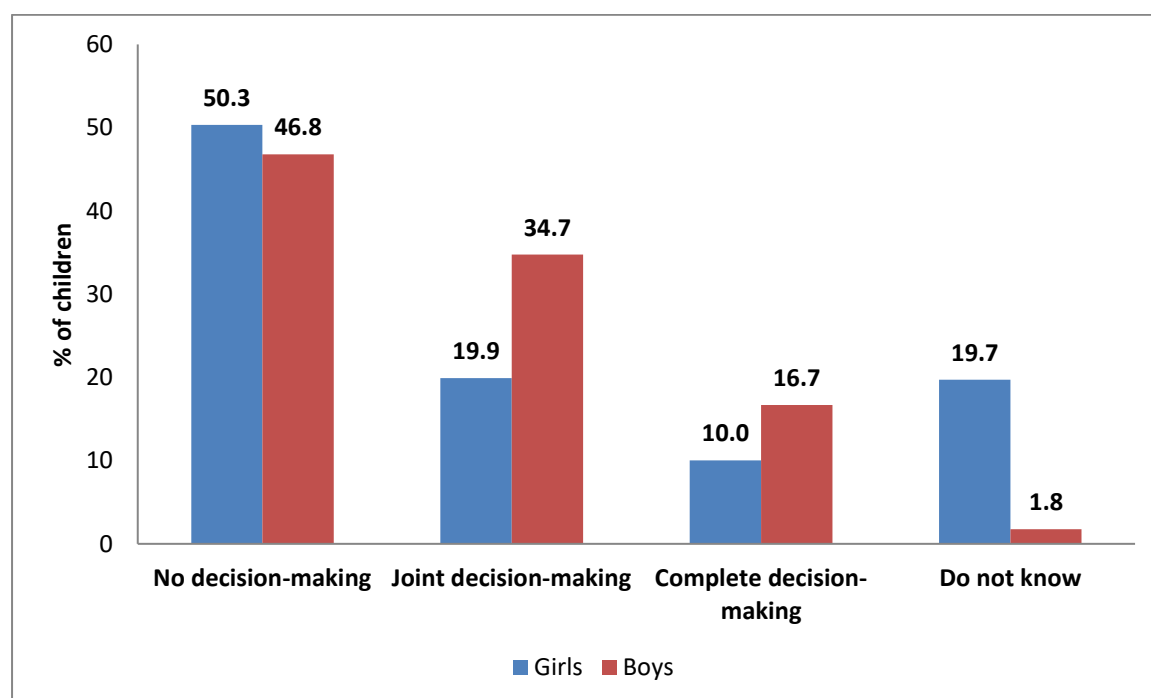


Exhibit 20. Level of decision-making autonomy for girls and boys regarding when and whom they marry



Girls’ Perceived Influence on Decision-Making

Surveyed girls indicated that the most common barriers that they face when trying to influence decisions about their studies, whether they participate in sports, and who and when they marry are that they are often deemed too young by their parents and family members to make such decisions followed by a lack of open communication with their parents and family members followed by a lack of self-confidence to express their desires.

With respect to decisions concerning whether girls and boys pursue studies, girls specified that both fathers and mothers typically make these decisions. This aligns with responses from girls in FGDs where they explained that parents typically make these decisions for their daughters. For instance, a girl in Ziguinchor explained how she felt that she must respect her parents’ decision since they had laid out a path for her to follow. Girls in Thionk Essyl, Bambali and Sédhiou felt that they are largely free to make decisions regarding their studies on their own. While they felt free to decide whether they will pursue their studies, some girls indicated that they feel able to do so only after consulting with their parents first.

“I think that parents have a responsibility in this kind of decision, even if we want to stop studying to devote ourselves to something else, parents give us advice. Sometimes they force us to continue because they think that it is the only way to succeed.” Quote from a girl aged 10-17 from a basketball club in Sédhiou

“My parents make that decision [regarding pursuing studies] because they are the ones who took care of me since I was a baby. I must not override their decision. They are your parents, they took care of you, you must obey their decision.” Quote from a girl aged 10-17 from a sport club in Bambali

Surveyed community members largely agreed with girls’ perceptions by indicating that mothers and fathers are the primary decision-makers. However, mothers believed that they had more influence than fathers perceived them to have while, at the same time, fathers perceived that they had more influence than mothers perceived them to have. Both mothers and fathers perceived their own decision-making influence to be greater than what the other spouse perceived of them.

“It is not easy to keep our children from doing something that they really want to do (...) This was the case with my daughter whom I had tried to dissuade from playing sports but I did not succeed. I ended up letting go of my decision to stop her because I realized that it was a well thought-through decision. Finally, I ended up accompanying her in what she wanted to do.” Quote from a mother in Sédhiou

With respect to decisions concerning whether girls and boys participate in sports, surveyed girls specified that their opinions were largely taken into consideration even though decision-making was primarily made by their father and/or mother. Girls in FGDs provided more varied responses by explaining that in some cases, fathers and older brothers were the primary drivers encouraging girls to participate in sports while in other cases the decision was largely left up to the girls themselves. Some girls also explained that they felt the need to be pushed or encouraged by friends or teachers to participate in sports. Surveyed community members were of the opinion that girls largely decide for themselves whether or not to participate in sports, with strong influence from their mothers and/or fathers.

“It was my father who decided that I should do sports. He practices judo and has a black belt. He found it necessary for me to practice sports because sports are good for girls. I feel better when I practice sports.” Quote from a girl aged 18-25 years old from a female wrestling club in Mlomp

“I make the decision to practice sports. If in the future I don't feel like doing sports anymore, I will stop.” Quote from a girl aged 10-17 from a basketball club in Sédhiou

“Young people are starting to see things more clearly and they would really like to be in the decision-making bodies, (...) Personally, in my neighborhood council, they (youth) participate in decision-making, they participate in a material way, in a thoughtful way with a view to certain improvements in the life of the city.” Quote from a community leader from Ziguinchor

With respect to decisions concerning when and whom girls marry, surveyed girls responded that their opinion was largely taken into consideration by both their mothers and fathers who are the ones who primarily make this decision. Responses from girls in FGDs were more varied with some girls explaining that their uncle or their father typically make this decision for them. However, girls in FGDs also felt that their opinion was important and demonstrated strong opinions regarding marriage and articulated determination to make this decision for themselves. Girls in Sédhiou described the importance of choosing the right person to marry since marriage is a life-long commitment and will have a long-lasting impact on their lives. Girls were clear that consequences of marrying the wrong spouse could include divorce or domestic violence and that it was therefore important for girls to make their own decision. Surveyed community members were overwhelmingly of the opinion that girls largely decide for themselves when and whom to marry, with some influence from their mothers and/or fathers.

“Personally, I decide for myself when I am going to get married because I don’t think you can force a person to get married. It’s up to her to choose who she wants to marry and when.” Quote from a girl aged 10-17 from a basketball club in Ziguinchor

Overall, girls in FGDs felt that they were largely not able to take decisions concerning their studies, their participation in sport, and when and whom to marry on their own but had some ability to influence decisions. In the case of marriage, for instance, they explained how they can try to respectfully plead their case with their parents. Girls in Ziguinchor also described how they could resort to asking someone in their neighborhood or elders in the community to try and convince their parents to change their minds. No matter the type of decision, girls explained how they understood the need to prepare for a conversation with their parents by having valid arguments and well positioning themselves to negotiate. They also stressed the importance of having good communication with their parents in order to understand the reasons for their decisions. Sometimes girls would first go to their mothers to get them on board and then the mother would in turn convince the father. Girls in Sédhiou specified that they knew their rights and they should never be forced to do something they do not want to. When asked who could influence these decisions, girls referred mostly to close family members such as older siblings, mothers, grandparents or uncles and aunts.

“If someone asks me to stop playing basketball, I will give them my opinion by suggesting things. For example, if I am told to stop playing basketball, I will tell them that I will stop doing a task at home. If they ask me to work well at school so that I can continue to play, then we will sign agreements between my parents and me. We will negotiate.” Quote from a girl aged 10-17 from a basketball club in Oussouye

“If your father doesn’t like your man, no matter how hard you try, he won’t accept him. So you have to find out why he doesn’t want this marriage. And then he will explain it to you, and after that it is up to you to see how to talk to the man you want to marry. So, you have to find out why your dad doesn’t

want you to get married in the first place.” Quote from a girl aged 18-25 years old from a female wrestling club in Mlomp

“Oftentimes mothers can help [to influence the fathers], because normally it’s fathers who make the decision.” Quote from a girl aged 10-17 from a basketball club in Ziguinchor

Boys’ Perceived Influence on Decision-Making

Boys in FGDs were also asked to describe who makes decisions about whether they will pursue studies. Similar to girls, boys explained that they themselves make that decision or their parents. They also indicated that they often make that decision after consulting with their parents. The same logic applied to sports. Boys are typically free to make that decision, but they often consider consulting their parents before doing so. Marriage also appeared to largely be the decision of boys with some form of parental consent. Contrary to girls, boys did not indicate that they could be forced to marry someone they do not love. During FGDs, boys described how they did not like having choices imposed on them. If they do not agree with a decision, they will often show their opposition. They also explained how they could turn to family members or their coaches if they needed support to influence a decision.

“We decide for ourselves, but we need the support of parents.” Quote from a boy in Diembering

“For me personally, it was my decision to do sports and my parents agreed.” Quote from a boy in Bignona

“For marriage it's about me, it's for me, so it’s my decision even though my parents might not agree.” Quote from a boy in Bignona

“Marriage is our decision, sometimes after consulting our parents.” Quote from a boy in Sédhiou

“I am the actor of my choices before my parents. If their choice doesn't suit me, I can oppose it by trying to convince them.” Quote from a boy in Diembering

“It depends, sometimes the coach comes to the house to explain the situation [why it’s important to allow the daughter to play sports] to the parents or, for example, if you have an older brother who is passionate about soccer he can support you, or an older sister who is a little bit concerned about you and would like you to have an opportunity to play sports.” Quote from a boy in Sédhiou

Mothers’ Perceptions Regarding Decision-Making

Mothers in FGDs were asked to describe factors affecting the decisions about whether boys will pursue studies, participate in sports or get married. Mothers believed it was important for boys to study, placing emphasis on success in school. According to them, scholastic success is the path forward to a decent future for their sons. Some mothers felt that marriage should come after boys are done studying to ensure a better future for them while other mothers in Bignona described how boys sometimes need to get married in order to have a wife to support their mothers in the house.

Mothers in Bignona felt that traditions were not as important today as they were before. For example, the need to marry within a certain caste was not perceived as important today as it used to be. In addition, according to some mothers, social norms are changing in relation to traditional ways of thinking. Mothers explained that when practicing sports, no one knows who’s who on a basketball court and it does not matter whether a boy is poor or rich. Mothers generally felt that they had to support boys if they wanted to practice sports and that these decisions are often influenced by the family context. For instance, if a family is very much into sports, boys are also more likely to practice sports.

“If they decide to do sports, we must support them.” Quote from a mother in Ziguinchor

“Children cannot wake up one day and say “I’m getting married.” They must study first.” Quote from a mother in Ziguinchor

“Studying, it is the only way to have a decent job and something to offer to a woman.” Quote from a mother in Sédhiou

“In sports you don’t recognize who’s a griot or who’s a nobleman and who’s a blacksmith. The kids are like a family, they’re very close.” Quote from a mother in Bignona

Regarding decisions affecting their daughters, mothers also felt that girls had the ability and the capacity to make their own decisions. Mothers from Ziguinchor explained that their daughters are free to decide if they want to practice sports or not. For marriage, they also felt that girls should marry out of love. Mothers in Bignona described how they wished they could go back in time and have the liberty that their daughters now enjoy today.

Mothers tended to think that girls’ decision are often influenced by their close circles and the friends they spend time with. According to them, social norms or traditions are less relevant today. During FGDs, mothers overwhelmingly placed an emphasis on the need for their daughters to study and then make decisions regarding their future, including marriage.

“Today we are stay-at-home moms but I don’t like it very much because if we could go back and continue our education and get our paycheck at the end of the month, we would do it. So we are urging our daughters to continue their education. We only want what’s good for them and not the same thing we did.” Quote from a mother in Bignona

“My daughter asked me to wait for marriage, until she gets her baccalaureate. A person came to propose to my daughter, I told him to wait until the right time.” Quote from a mother in Djiredji

Fathers’ Perceptions Regarding Decision-Making

Fathers who participated in FGDs generally believed that boys were free to make their own decisions regarding sports, studies, or marriage. They felt that parents should support their sons in these decisions. While fathers would like their sons to marry, they also know that boys must have the means to get married. They were clear that getting an education is a way to access better opportunities. In terms of social norms that may influence a boy’s decision, fathers felt that boys shouldn’t wait too long to get

married. They also explained that when social norms are broken or when a boy makes a decision against his father’s will, it sometimes leads to conflicts between a father and his son.

“These decisions belong to the individual first. If the boy is on the right track, parents will support him.”
Quote from a father in Ziguinchor

“In the past we waited until the boy was grown up and ready to get married. Nowadays, young people tend to decide for themselves.” Quote from a father in Diembering

Regarding girls’ decisions, fathers described how their daughters, just like their sons, tend to discuss with their parents to get their support before final decisions are taken. One father in Ziguinchor described how his daughter started playing football without his knowledge but after a while, he accepted the situation. Compared to boys, fathers perceived stronger social norms influencing decisions of girls. For example, fathers explained how women generally have to stay home after marriage. They also explained that during sports, it is expected that they will wear appropriate clothing to hide their bodies.

Grandmothers’ Perceptions Regarding Decision-Making

Grandmothers also explained during FGDs that when boys are old enough, they can make their own decisions. They saw boys as determined to provide for their family and honor their parents and explained how this determination often pushes them to pursue studies and to be good in sports. Grandmothers generally tend to understand the importance of school and are aware that boys cannot reach a high level of professional achievement without studying first.

FGDs revealed how social norms are still a factor in the marital success of young boys. For example, a grandmother in Sédhiou explained how her grandson cannot get married yet because he does not have a job or the financial resources to support a wife and family. Grandmothers also mentioned that consequences of breaking social norms can arise when boys do not listen to the wishes of their parents. Some explained how if they go against their parents’ will, boys could end up in the street, thieves or addicted to drugs.

“In today's world, only those who have not studied have regret. Life at this time is conditioned by knowledge. It allows you to have a certain openness and connectivity with the world and it allows you to have a good job and a certain level of social dignity.” Quote from a grandmother in Djirédji

Perceptions from grandmothers regarding their granddaughters’ decision-making abilities were sometimes more conservative and restrictive than those regarding grandsons. For instance, according to grandmothers, girls can practice sports, but they must first demonstrate that they are successful in school or make the decision to practice sports in consultation with their fathers or husbands.

At the same time, many grandmothers felt that girls should be actively involved in decision-making that affects them. Grandmothers in Oussouye felt that girls should be free to choose a husband. They explained that if a mother makes the decision for her daughter, the daughter can blame her mother for her unhappiness. Grandmothers in Sédhiou explained that it is important for girls to get educated before they marry. Otherwise, they may miss out on important opportunities. Grandmothers across regions felt that girls have the potential to be just as successful as young boys.

They also explained how social norms have changed to provide girls with more opportunities. For instance, they explained how girls are typically no longer forced to stay home when they get married and that they can continue to practice sports and have a job. At the same time, a grandmother in Djirédji explained that it is still poorly seen for parents to refuse to give their daughter’s hand when she is socially perceived to be old enough to be married. Grandmothers also described how girls usually suffer greater consequences than boys when they break social norms. For instance, they may end up being pregnant and abandoned, living on the street, or perceived as prostitutes.

“If a girl gets married without an education, she may miss opportunities that could be there but will not be within her reach because she has not studied. Some opportunities are reserved for holders of knowledge.” Quote from a grandmother in Sédhiou

“In the past, as soon as the parents gave their daughter in marriage, everything was blocked for her. The only activity allowed for her was marriage and running the household. But those days are gone.” Quote from a grandmother in Sédhiou

“There are other considerations like community, traditional and cultural norms, that force you to give her hand in marriage. When a man comes to ask for her hand in marriage, parents often feel obliged to agree. Otherwise, people will say that you refuse to give your daughter of marriageable age because of studies. And that is very much frowned upon and badly perceived in our communities.” Quote from a grandmother in Djirédji

Attitudes among girls, boys, coaches, and community members towards GBV³⁶

A vast majority of boys surveyed were clear in their understanding that it is never alright for a boy to be violent³⁷ against another boy or girl and that it is always alright for a girl or a boy to refuse unwanted sex. Indeed, 80 per cent of boys from the treatment group demonstrated this healthy attitude versus 62 per cent of the comparison group. Similarly, older boys, i.e. aged 18-25, showed a healthier attitude at 84 per cent compared to younger boys aged 10-17 years old at 76 per cent. In addition, boys with disabilities had healthier attitudes at 86 per cent compared to those without at 78 per cent.

The percentage of girls demonstrating this healthy attitude among the treatment group was 84 per cent versus 72 per cent from the comparison group. Whereas a consistent healthy attitude can be observed overall across districts surveyed, a slightly healthier attitude could be observed among younger girls, (i.e. 1-17 years old) at 87 per cent versus older girls aged 18-25 years old at 81 per cent. In contrast to the trend seen among boys with disabilities, girls with disabilities demonstrated less healthy attitudes at 70 per cent compared to those without disabilities at 87 per cent.

Coaches surveyed demonstrated a healthy attitude towards preventing and eliminating GBV at 71 per cent versus 55 per cent from the comparison group³⁸. Furthermore, when looking at coaches from the

³⁶ GBV was defined in the surveys as *violence from a boyfriend or husband, sexual violence (including exchanging sex for favours such as payment of school fees), early marriage, etc.*

³⁷ Violence includes both verbal and physical violence.

³⁸ The difference between the treatment and comparison groups is likely due to the fact that the treatment group includes all of the major cities within the regions where coaches have greater access to training and information relating to GBV.

treatment group disaggregated by sex, 86 per cent of female coaches had a healthy attitude compared to 69 per cent of male coaches.

Among community members, healthy attitudes were more noticeable in the Ziguinchor region at 60 per cent versus 49 per cent from the Sédhiou region.

Exhibit 21. Community perceptions on if and when it is alright for a boy to be violent towards another boy

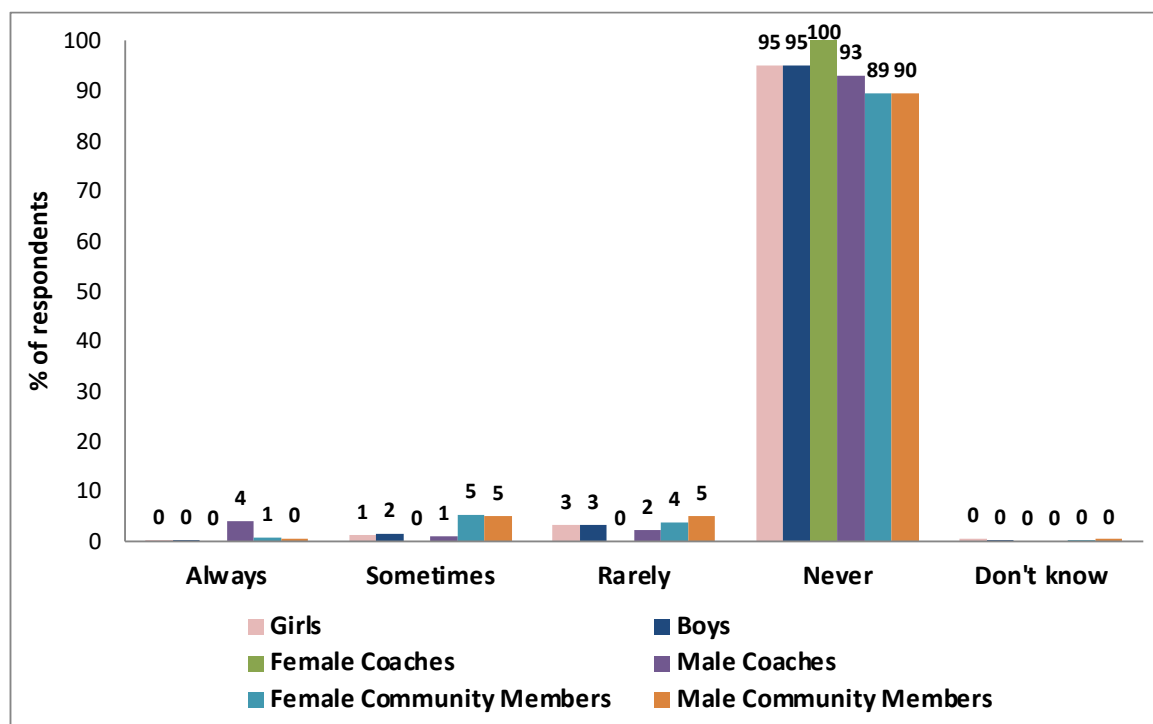


Exhibit 22. Community perceptions on if and when it is alright for a boy to be violent towards a girl

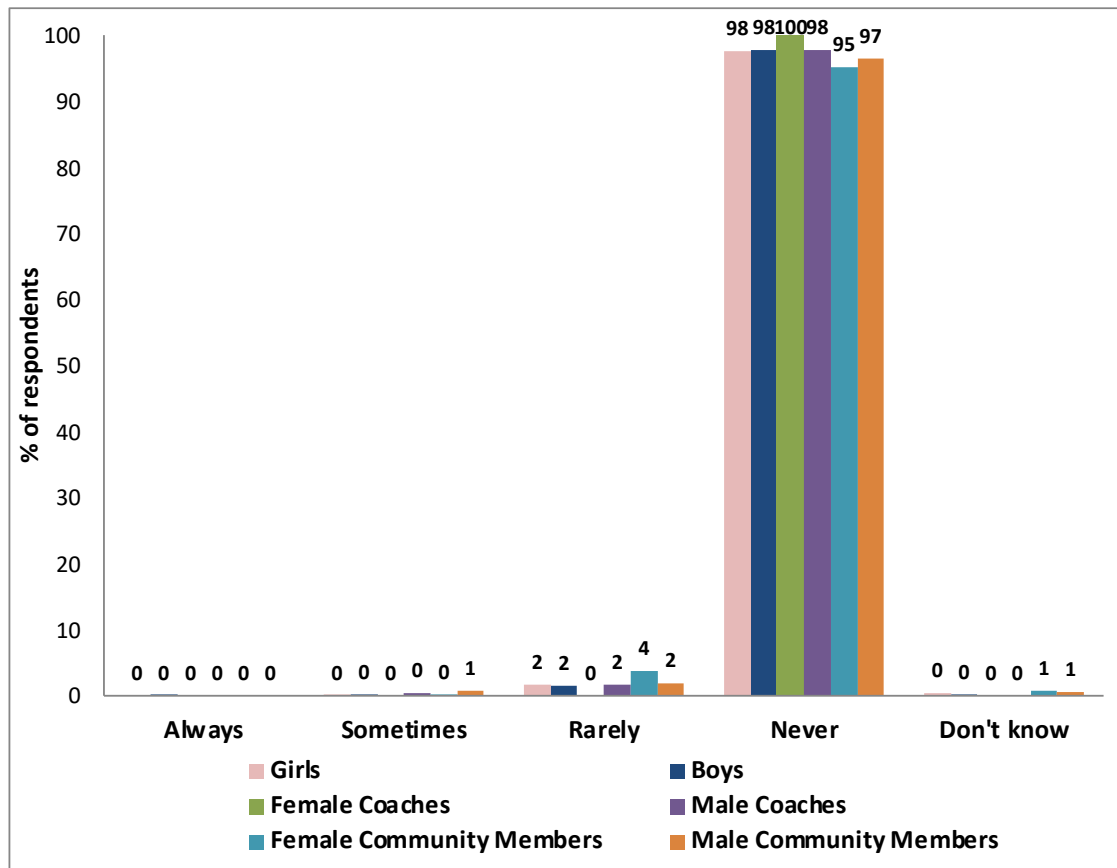


Exhibit 23. Community perceptions on if and when it is alright for a boy to refuse unwanted intercourse

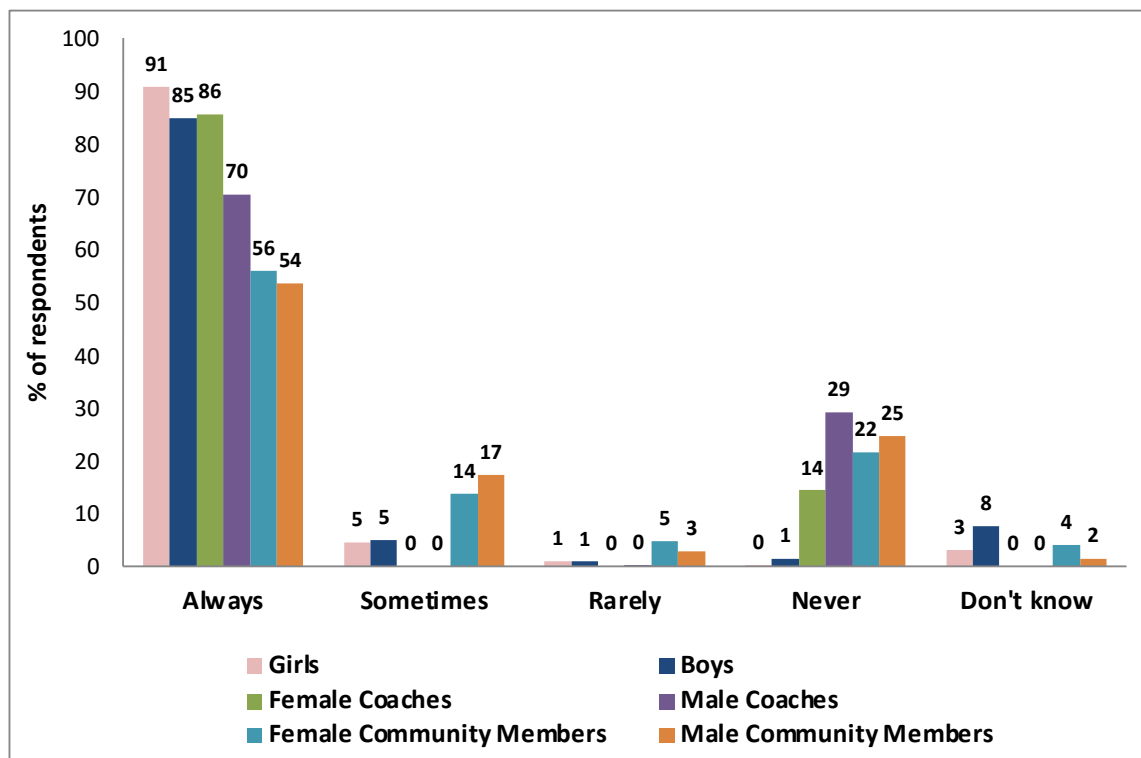
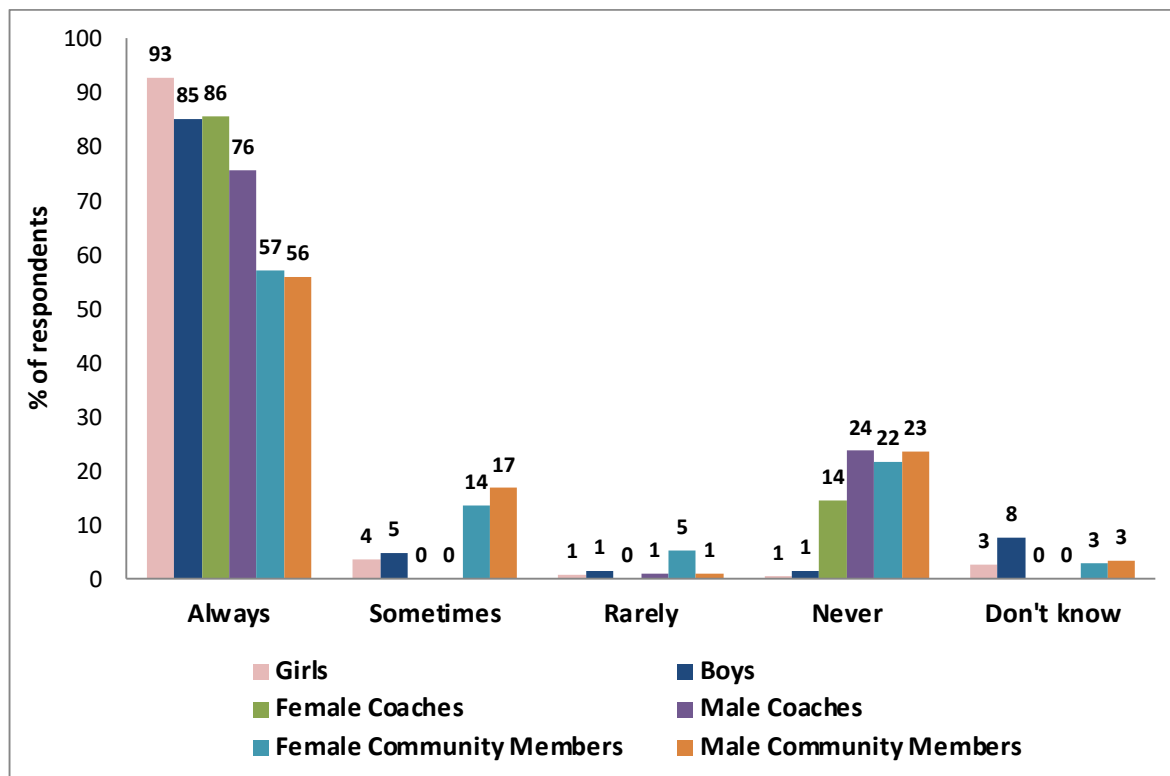


Exhibit 24. Community perceptions on if and when it is alright for a girl to refuse unwanted intercourse



Girls’ perceptions on violence by a boy towards another boy

Most girls during FGDs thought that it was not alright for a boy to be violent against another boy. However, some girls also felt that in some circumstances boys need to be violent with other boys to establish their authority if they want to be respected. Overall, girls in FGDs showed a strong preference towards non-violent behaviours and felt that it was not normal for boys to express themselves through violence.

“In my opinion, violence is not normal because it doesn't solve anything. No matter how much you might hate another boy, I think it shouldn't bring them to beatings. You can hurt your neighbor unintentionally.” Quote from a girl aged 18-25 from a football club in Bignona

“Boys shouldn’t be insulted by their friends or parents. In this context, if a boy asks them to stop and they continue, he may be obliged to hit them to make them understand that he doesn't like it.” Quote from a girl aged 10-17 from a basketball club in Oussouye

Girls’ perceptions on violence by a boy towards a girl

Girls in FGDs also felt that it was not alright for boys to be violent against girls. However, similar to violence between boys, some girls felt that it was sometimes necessary for a boy to be violent against a girl. For example, girls in Ziguinchor explained their views around how girls who are stubborn need to sometimes be humiliated by boys in order to see reason.

At the same time, most girls agreed that even though boys are generally physically stronger than girls, it should not be an excuse to be violent towards them. They should instead use that strength to protect

girls. They felt that boys needed to remember that being violent against a girl is like hurting their own mother by disrespecting the gender who gave birth to them.

“A boy should not be violent towards a girl just because they don't have the same strength. The man is stronger so he should protect girls instead of abusing them.” Quote from a girl aged 18-25 years old from a basketball club in Ziguinchor

“It is the woman who gives life to the boy, and with all the vicissitudes of pregnancy and childbirth, it is not normal for the boy to come back and be violent against her.” Quote from a girl aged 10-17 years old from a football club in Thionk Essyl

Girls’ perceptions on why violence is often socially acceptable

Even though most girls and boys from sports clubs do not endorse violence committed by boys, girls in FGDs tried to explain why it is often accepted by members of the community. Girls felt that it largely related back to traditional practices and ways of thinking. For example, if a wife is beaten by her husband, her family will often encourage her to go back to her husband because there is a social perception that that is what marriage is supposed to be like. They explained that, according to social norms, women and girls are not supposed to claim their rights and are expected to tolerate violence. On the other hand, if wives are violent against their husbands, it is seen as scandalous and completely inappropriate.

Girls in FGDs also largely blamed themselves for boys’ violent behavior against them. For instance, they explained that violence can occur if girls wear inappropriate clothing since they are intentionally enticing the boys. Some girls also suggested that violence from boys towards girls is acceptable because it is seen to be permitted in the Koran. Finally, girls also felt that the justice system and the laws generally favor men, which allows them to be violent with impunity.

“Senegalese society places the man as the head of the household, so everything he says is true. You see a father who hits his child for nothing, when you ask him why, he will tell you that's a good thing, so his child won't do it again.” Quote from a girl aged 18-25 years old from a basketball club in Ziguinchor

“I would say that men are favored in some way. A man can beat his wife, but if the wife beats her husband, it will make noise because men have more voice than women.” Quote from a girl aged 18-25 years old from a basketball club in Ziguinchor

“I think it's due to women's rebellion, because men don't like it, because they prefer women to submit. When there is rebellion, men are forced to impose their superiority.” Quote from a girl aged 18-25 years old from a basketball club in Diembering

“In Senegal even the justice system doesn't do much about men who hit their wives so it encourages them to continue. Society ignores it all.” Quote from a girl aged 10-17 from a basketball club in Sédhiou

Girls’ perceptions on refusing unwanted intercourse

When asked if it was alright for boys to refuse unwanted intercourse, girls in FGDs felt strongly that it was indeed alright. Some girls described how consent was needed to engage in intercourse, while others said that boys can refuse because they are physically stronger and can impose their decision. Some girls explained that being forced to have intercourse could also result in an unwanted pregnancy, so boys should have the right to refuse.

Regarding the ability of girls to say no to intercourse, some girls in FGDs also referred to the concept of consent. They believe that no one should be forced to do something that they do not want to do. There was also a perception that girls needed to say no to intercourse to keep their dignity in order to marry a good suitor. Girls expressed an understanding that if they get pregnant out of wedlock, they will likely have to raise the child by themselves.

“Intercourse should be something that one should consent to do, but one should not be forced by anyone.” Quote from a girl aged 18-25 years old from a basketball club in Ziguinchor

“A woman has to keep her dignity because if you give yourself to a man and get pregnant, he's going to leave you here to get married to another woman.” Quote from a girl aged 10-17 from a basketball club in Oussouye

Boys’ perceptions on violence and intercourse

Boys were asked similar questions in FGDs. Regarding violence against other boys, they explained that it was not alright or normal to be violent. However, they explained that violence can sometimes happen, whether unintentionally or to command respect. Boys also agreed that it was not normal to be violent against girls. According to them, boys should protect girls. They explained that violence is often more accepted in the community when it is perpetrated by boys because boys are perceived as needing to be able to defend themselves, command respect and mark their territory. They also felt that boys can sometimes have violent behaviours to try to impress others. Like girls, boys understood the concept of consent when it came to refusing unwanted intercourse. According to them, boys should be able to refuse intercourse. However, a boy in Ziguinchor admitted that it can sometimes be difficult for boys to refuse intercourse because they could be labelled as impotent. Boys also explained that it was normal for girls to refuse unwanted intercourse.

“It is not normal to be violent between men, although it may not be intentional.” Quote from a boy in Ziguinchor

“Boys must protect girls.” Quote from a boy in Diembering

“A boy who doesn’t fight is a wimp.” Quote from a boy in Diembering

“I think that all of this is rooted in our education because our parents tend to give boys weapons, swords, firearms [toys] so that they can be strong, be brave and everything. So that has an impact when we grow up.” Quote from a boy in Ziguinchor

“Of course, a boy can refuse intercourse when he doesn't want to. If he is forced, it should be considered as rape.” Quote from a boy in Sédhiou

Coaches’ perceptions on violence and intercourse

Consulted male coaches in FGDs also explained how they felt about violence between boys. They described how violence should not be permitted on the sports court. Male coaches also explained that it was not alright for boys to be violent against girls. Male coaches identified several factors that could encourage boys to be violent, which included mentalities that encourage boys to be tough, jealous, or rivals. Male coaches felt that both boys and girls were free to refuse unwanted intercourse.

“We can't allow anyone to be violent. We call for calm. No violence is allowed. We try to anticipate situations that could lead to violence.” Quote from a male coach in Sédhiou

“It is the responsibility of the coach to ensure that there is no violence on the sports field. It’s normal to get worked up and agitated when playing sports but we cannot tolerate any verbal or physical violence.” Quote from a male coach in Ziguinchor

Female coaches also described how they felt about violence. They believed that both physical or psychological violence between boys was not normal, and that violence is not a way to solve problems. They also felt that violence against girls should not be tolerated.

When asked why violence committed by boys is largely accepted by the community, female coaches described how violence often begins with education when boys are young and are highly influenced by cultural norms that accept male violence. They explained that if women or girls are violent against boys or their husbands, their reputation will be negatively affected while the opposite is not true. They also explained that women are often expected to tolerate violence from men. They also said that it was problematic that men are largely not taught to manage their anger. Regarding the right to refuse unwanted intercourse, female coaches explained how boys and girls should be free to refuse whenever they like. However, religious beliefs can put pressure on married women who do not want to have intercourse. Unless a woman is sick, she generally cannot refuse to have intercourse with her husband.

“In my opinion, violence is not normal at all because no reason can justify it. However, there are boys who are violent by nature and there are others who like violence by vice.” Quote from a female coach in Sédhiou

“Violence starts at home. Fathers are the ones who hit women and women tolerate the situation. Children witness this and they will do the same thing.” Quote from a female coach in Ziguinchor

“The Muslim religion says that a woman should not refuse to give herself to her husband. You should not sleep with your underwear on, because you have to be ready whenever he needs it. Even if you are cooking and he needs you, you must satisfy him.” Quote from a female coach in Ziguinchor

Mothers’ perceptions on violence and intercourse

During FGDs, mothers explained that it was not alright for boys to be violent against other boys. They explained that it was important to educate young boys to tell them what is acceptable and what is not. Mothers also felt that violence against girls was not alright. They explained that boys are usually stronger than girls and a fight would not be fair. Mothers hoped that their sons are able to see all girls as their own mothers and avoid being violent against them.

Mothers believed that violence committed by boys is often wildly accepted in the community because it is so frequent. Cultural norms and religious beliefs that privilege men based on the erroneous belief that they are stronger and superior to women also explain violent behaviours by men and boys. Mothers explained that both boys and girls should be able to refuse unwanted intercourse. They explained that rape can leave scars on all victims whether they are boys or girls. Mothers believed that men had some valid reasons to refuse intercourse, which may include tiredness or sickness. However, they explained that women have an obligation to do as their husbands wish, in part because of religious doctrine.

“When you hear that your child is fighting outside, you don't like it, but it's up to us mothers to make sure that we educate them well to avoid that kind of situation.” Quote from a mother in Ziguinchor

“All boys must see girls as their own mothers and so it will prevent them from committing violence against women.” Quote from a mother in Bignona

“In my opinion, violence is related to the fact that the man is the head of the family. He is the one who is responsible for the woman. In fact, Islam forbids any woman to hit a man, let alone her husband. This is the reason why many women do not do it because it is not good for the society.” Quote from a mother in Sédhiou

“As far as religion is concerned, you cannot be in a marriage and refuse your husband's needs. This is forbidden by religion. That's why we as women always make efforts.” Quote from a mother in Sédhiou

Fathers' perceptions on violence and intercourse

During FGDs, fathers had little to say about violence. They explained that violence was not normal but that boys tend to be violent to avoid being victimized. They also believed that both boys and girls should be able to refuse unwanted intercourse.

Grandmothers' perceptions on violence and intercourse

Grandmothers shared their opinions through FGDs on violence between boys explaining that violent behaviour was not normal, including stronger boys bullying weaker boys. Consulted grandmothers also explained that it was not alright for boys to be violent against girls. Some grandmothers added that violence against girls should not be tolerated because women birthed men, and they should be respected. Even though violence is not normal, grandmothers explained that violence committed by boys is often socially accepted because that is the way things are and have been for a long time. They explained how since men are heads of households and demand respect, on many occasions when inter-family violence occurs, husbands are believed over women and wives have no way to defend themselves against their husbands. Nevertheless, some grandmothers do see an evolution from their times in terms of tolerance for violence. Even though it is still present, they explained that violence against girls and women is not as tolerated as it was before.

While some grandmothers felt that men should not refuse unwanted intercourse except when they are sick, other grandmothers believed that it was alright for them to refuse. They explained that marriage is not all about intercourse. On the other hand, they acknowledged that married women generally do not have the same liberty to refuse intercourse due to cultural and religious beliefs.

“In the past, a man could beat you up but no one would talk about it. We settled it at home and it was over. It was our ancestors who set up this system. If a man hits a woman, the woman always came back. Today, however, there is a change. If a man hurts you, we can correct him.” Quote from a grandmother in Djirédji

“In our culture, you are told at the time of gaining the marital home "if your husband needs you, unless you are menstruating, you must accept" and it is the same for the man as well.” Quote from a grandmother in Ziguinchor

4.1.2 Girls’ Knowledge of Prevention and Response to Gender-Based Violence and Reproductive Health Rights and Services

Research Sub-Question: To what extent are adolescent girls at baseline knowledgeable concerning prevention and response to GBV and reproductive health rights and services, including menstrual hygiene management?

Immediate Outcome 1120: Increased knowledge of adolescent girls concerning prevention and response to GBV and RHRs and services (including MHM)

This question draws on three performance indicators, as follows:

- 1120.1 Percentage of girls who are knowledgeable about their RHRs (particularly MHM)
- 1120.2 Percentage of girls and boys who are knowledgeable about existing laws, services, and reporting mechanisms (RHRs and GBV)
- 1120.3 Percentage of adolescent girls and boys who feel confident in their ability to seek RHRs and GBV information/services

Knowledge among adolescent girls concerning their RHRs, including MHM

A total of 17 per cent of surveyed adolescent girls from the treatment group were knowledgeable about their RHRs, including MHM, compared to only seven per cent from the comparison group. This includes being able to correctly identify their RHRs, knowing that they can continue everyday activities including sports when menstruating, as well as understanding how to protect oneself against unwanted pregnancy and sexually transmitted infections (STIs).

There is considerable variation between respondents in the treatment group in the Ziguinchor (19 per cent) and Sédhiou (5 per cent) regions. Adult respondents who were between the ages of 18 and 25 years old were most likely to demonstrate knowledge about their RHRs and MHM (26 per cent) compared to girls aged 10 – 17 years old (11 per cent).

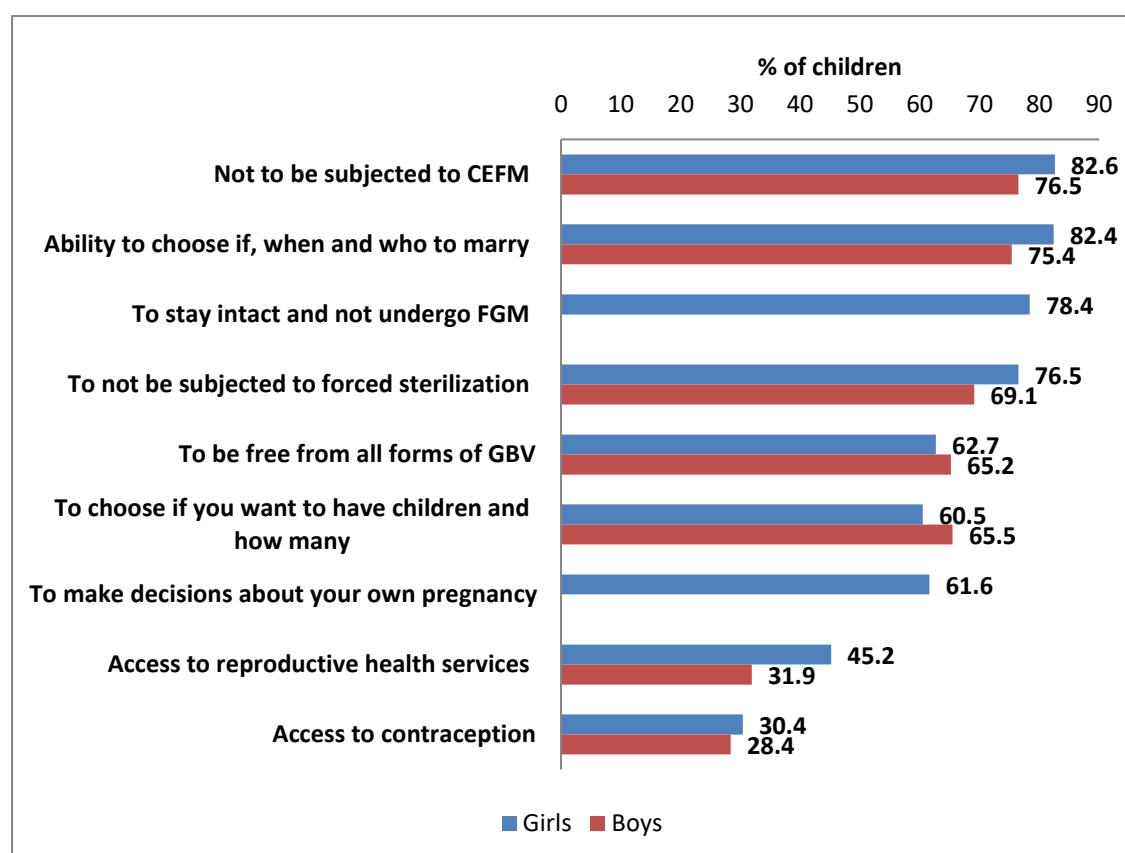
The percentage of adolescent girls from the treatment group who are knowledgeable about their RHRs varied a great deal across the four districts surveyed. Whereas in Bignona, 27 per cent of adolescent

girls are knowledgeable about this matter, in Ziguinchor 19 per cent of surveyed girls demonstrate knowledge, followed by Oussouye with 13 per cent and finally Sédhiou with only five per cent.

Girls from sports clubs were surveyed to gauge the extent to which they can correctly identify their RHRs. Boys from sports clubs were also surveyed about their knowledge of their own RHRs for comparison purposes. As can be seen from the exhibit below, less than half (45 per cent) of surveyed girls and less than one third (32 per cent) of surveyed boys correctly identified access to reproductive health services as part of their RHRs. An even lower percentage of girls (30 per cent) and boys (28 per cent) identified access to contraception as a right.

More girls and boys were able to correctly identify the right to choose if, when and who to marry as well as to not be subjected to CEFM, with 82 per cent of girls and 75 per cent of boys identifying choices about marriage as a right as well as 83 per cent of girls and 77 per cent of boys identifying not being subjected to CEFM as part of their rights. This higher level of awareness around these particular rights could potentially be due to widespread advocacy campaigns that have been implemented across Senegal to end CEFM. The same is true of the 75 per cent of surveyed girls who know that staying intact and not undergoing FGM is one of their health rights. Considerable investments from non-profit organisations and governments entities have been made across Senegal to raise awareness to end FGM. Finally, a little over half of surveyed girls (63 per cent) and boys (65 per cent) were also aware that freedom from GBV makes part of their health rights.

Exhibit 25. *Percentage of surveyed girls and boys who can correctly identify their own RHRs*



In addition to the survey question on RHRs, girls were also asked questions to gauge their knowledge of menstruation in order to inform Indicator 1120.1. Only 10 per cent of surveyed girls are aware that

there are no activities that a girl can’t do when she is menstruating (compared to 8 per cent of boys who are aware of this), while only 33 per cent of girls (and 17 per cent of boys) know that girls can continue to play sports while they are menstruating. Overall, only 27 per cent of girls and a surprisingly higher figure of 36 per cent of boys stated that they feel completely comfortable talking with their peers about menstruation. Indeed, only 31 per cent of girls and 28 per cent of boys felt completely confident that they knew where to find information about menstruation and sanitary products.

When asked in FGDs about the types of activities girls can and cannot do when they are menstruating, girls drew on examples from their own lives. Girls often felt that menstruation is a barrier for them to participate in sports. For instance, girls described that they prefer not to do sports or be on the bicycle when they have their periods because they are often in pain or because they are concerned about doing certain movements. Girls were also largely concerned about potential social repercussions while menstruating. For instance, they explained that they could faint on the court or be humiliated if they stain their clothes. They explained that in these cases, they must think ahead and bring a change of clothes. However, girls in Sédhiou explained that this should not be a problem when girls have access to the right kinds of menstrual protection (i.e. sanitary pads). Girls from across districts also mentioned that sports clubs are often not well equipped to support girls who are menstruating by having separate bathrooms for girls or waste bins next to the toilets. Girls also explained that menstruation not only affects the girls’ ability to participate in sports but that it also limits the types of household chores they can do. Some families, as explained in FGDs in Sédhiou, do not want girls who are menstruating to touch food or even stay in the house. However, girls from FGDs in Oussouye and Mlomp expressed a strong opinion that their periods should not stop them from doing what they want. When they are not in pain, girls generally believed that they should be able to continue with their normal activities.

"She can't do sports. She can do it, but in a simplified way, because she can't do movements like the split. Because there's something that comes out of your body. At the same time there can be a leakage, when you do certain movements and then you feel ashamed." Quote from a girl aged 10-17 from a basketball club in Ziguinchor

"She can do anything, because having your period shouldn't hold you back from doing what you want to do." Quote from a girl aged 10-17 from a basketball club in Oussouye

““If she suffers from painful periods, she can't do everything. There are girls when they have their period the whole house knows because they are not able to do anything. You can’t do sports unless you don't have a painful period, in which case you can do all disciplines.” Quote from a girl aged 18-25 years old from a basketball club in Diembering

Survey questions that informed Indicator 1120.1 revealed that girls and boys are largely not very confident that young people can obtain contraception without being married, with only nine per cent of girls and 13 per cent of boys responding with complete confidence that contraception can be obtained. Indeed, even though there is no law in Senegal restricting access to contraceptives, girls in FGDs explained that healthcare providers often restrict access to girls under 18 years of age and/or if they are unmarried. A very low number of only seven per cent of surveyed girls are completely sure that a girl can indeed get pregnant the first time she engages in intercourse (compared to 23 per cent of boys) while 40 per cent of surveyed girls are somewhat sure (compared to 22 per cent of boys). In contrast, 19 per cent of surveyed girls were either somewhat sure or completely sure that a girl could not get pregnant the first time she engages in intercourse (compared to 29 per cent of boys) while 35 per cent of girls and 26 per cent of boys were not sure. In addition, a total of 28 per cent of girls and a slightly

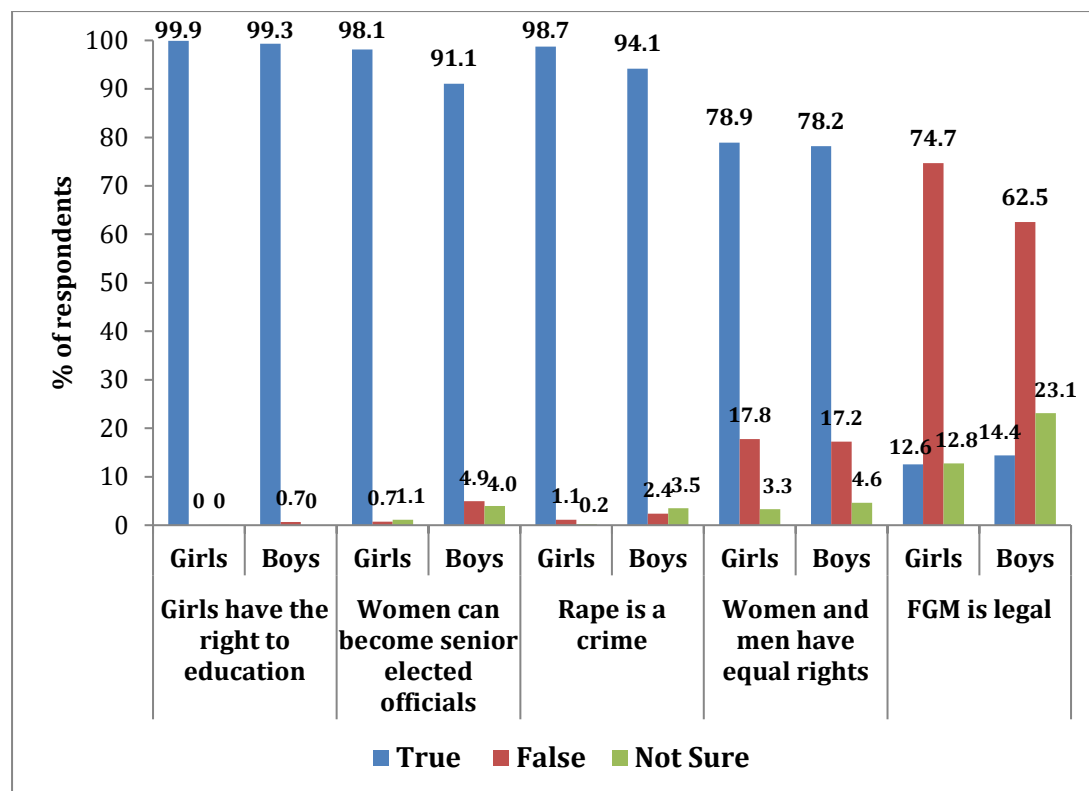
higher number of 32 per cent of boys feel completely sure that it is the responsibility of the girl to make sure that she doesn’t get pregnant. Finally, a total of 52 per cent of girls and 50 per cent of boys strongly believe that it’s more important for a girl to be a virgin than for a boy when they marry.

Knowledge among adolescent girls and boys of existing laws, services, and reporting mechanisms relating to RHRs and GBV

Overall, 42 per cent of surveyed girls and boys in the treatment group are knowledgeable of existing laws, services and reporting mechanisms relating to RHRs and GBV compared to a similar percentage (43 per cent) in the comparison group. Girls tend to be more knowledgeable (at 47 per cent) compared to boys (at 30 per cent) in the treatment group. There also appear to be some regional differences with 45 per cent of girls and boys demonstrating this knowledge in Ziguinchor compared to only 28 per cent in Sédhiou. Differences in knowledge are minimal across age groups and between those with and without disabilities.

Surveyed girls and boys were asked specific questions to test their knowledge of existing laws, services, and reporting mechanisms relating to RHRs and GBV. Three quarters (75 per cent) of surveyed girls and 63 per cent of surveyed boys were aware that FGM is illegal under Senegalese law, while 13 per cent of girls and 14 per cent of boys thought that it was legal. The rest were unsure. Nearly all surveyed girls (99 per cent) and boys (94 per cent) were aware that rape is illegal under Senegalese law. A similarly high rate of surveyed girls and boys were aware that girls have the right to an education, with 100 per cent of surveyed girls and 99 per cent of boys responding favorably. Slightly fewer girls and boys were aware that women and men have equal rights under the Senegalese constitution, with 79 percent of girls and 78 per cent of boys demonstrating their awareness of this. However, nearly all girls (98 per cent) and boys (91 per cent) are aware that women are allowed by law to become senior elected officials.

***Exhibit 26.** Percentage of surveyed girls and boys who are knowledgeable of existing laws, services and reporting mechanisms relating to RHRs and GBV*



When asked whether they would be able to tell someone who experienced GBV, such as rape or FGM, where to go for support services, 75 per cent of surveyed girls felt they could do so compared to only 53 per cent of boys. There are also stark regional differences with 72 per cent of girls and boys in Ziguinchor able to refer a friend compared to only 52 per cent in Sédhiou. Most girls and boys identified a hospital as the primary place where those who have experienced GBV should go for support services. Girls also mentioned that survivors of GBV could access services with a local Bajenu Gox (i.e. a neighbourhood Godmother in Senegal who provides health education to girls and boys as well as information on existing health services) while boys recommended reaching out to the police and visiting youth centres. A slightly higher percentage of surveyed girls (86 per cent) and boys (70 per cent) felt confident that they could tell someone who experienced GBV where to report the offence with nearly all respondents suggesting that the survivor contact the police.

Girls in FGDs explained the types of barriers that they face when trying to report GBV. In most cases, girls described fears of threats and fears of not being believed as the primary barriers. Threats on the life of girls can be made to stop them from reporting violence. There can also be threats coming from close family members. For instance, girls in Ziguinchor described how they were dissuaded from reporting violence because it could divide the family. They also reported that they felt shame at having experienced GBV and were concerned that other community members could learn about what happened if they reported on the violence.

"She may be afraid of death threats. At the same time, she is likely afraid that other family members will know about it." Quote from a girl aged 18-25 from a basketball club in Ziguinchor

"Sometimes there is also shame, because if you go and denounce the abuse, others can put this information online and you will be talked about everywhere." Quote from a girl aged 10-17 from a basketball club in Oussouye

“If you want to file a complaint, in the neighborhood you are considered a snitch. You will be indexed as the one who caused the imprisonment of so-and-so.” Quote from a girl aged 10-17 years old from a football club in Thionk Essyl

When asked what could make it easier for girls to report GBV, girls in Ziguinchor described the existence of associations that could help young people denounce violence. Another facilitating factor is when good communication exists between children and their parents. In addition, some girls in Mlomp believed that as a society, there is a need to stop protecting abusers. In many cases, girls are dissuaded from reporting violence because it could ruin the reputation of their abuser. Overall, girls agreed in FGDs that girls must demonstrate a lot of courage to report GBV, and that they need to feel empowered to be able to get to that point.

"The parent should be close to their children, so whenever they have a problem you'll know it's not right. You have to be able to dialogue with the child. This is facilitated by making sure the child is not afraid of you, so he/she can talk to you about anything." Quote from a girl aged 18-25 from a basketball club in Ziguinchor

"I think we mostly need counseling and awareness to tell victims that they don't have to be ashamed and that they don't have to be afraid to report a rapist." Quote from a girl aged 10-17 from a basketball club in Sédhiou

Boys were also asked during FGDs to comment on the barriers they see when reporting a GBV crime. They explained that power imbalances between men and women are still present in Senegal and abusers often have some form of authority over their victims. Boys in Ziguinchor explained that in many cases, girls are not believed if they decide to report violence and that they could even be stigmatized. Therefore, there is a tendency to hide the situation. Boys in FGDs also felt that as boys, if they report gender-based violence committed on themselves, they will definitely not be believed. Although some boys had strong opinions on the difficulties related to reporting GBV, in many cases, boys did not perceive any barriers.

“From a societal point of view, you're going to lose a lot of things if you report abuse. People are going to label you as the person who was raped. In fact, people try to stigmatize girls and that's the biggest problem, the stigmatization, that's the biggest obstacle.” Quote from a boy in Ziguinchor

“There is no barrier to reporting a gender-based violence crime.” Quote from a boy in Diembering

“There is a tendency to try to hide the situation; if abuse was committed by relatives, normally «maslaha» takes place which means an amicable solution is sought.” Quote from a boy in Sédhiou

“It's not easy because as soon as you talk about rape, people think it's committed by a man against a woman. A boy who denounces a rape will not be believed.” Quote from a boy in Sédhiou

Boys also described what could make it easier for young people to report GBV. During FGDs, they explained that having dedicated centers and access to legal support and guidance are key to reporting a GBV crime. Girls who suffer abuse should be able to get access to health and psychological support, and they should know their rights. They explained how education and awareness raising are important tools to know what to do when abuse occurs. While some boys mentioned that they would prefer for these crimes to be settled amicably, others did not see a problem in reporting GBV.

“There are no difficulties to denounce gender-based violence.” Quote from a boy in Diembering

« To allow girls to make denunciations with the state police, girls have to have enough information on how to do so. Even children in primary school need to know this. We should teach them on how to make a report if they are raped.” Quote from a boy in Sédhiou

“Often it is settled out of court. We need a confidential service to deal with rapes.” Quote from a boy in Bignona

Confidence among adolescent girls and boys in their ability to seek information/services on RHRs and GBV

In general, the level of confidence among youth regarding their ability to seek information and/or services on reproductive health rights and GBV is low with a total of 10 per cent of surveyed adolescent girls and boys from the treatment group, compared to 11 per cent from the comparison group. Girls from the treatment group reported slightly higher levels of confidence at 11 per cent compared to boys at 7 per cent. There is a considerable difference between the level of confidence among adult respondents (aged 18 - 25 years old) when it comes to seeking information and/or services on RHR and GBV, at 16 per cent, compared to only 4 per cent among girls and boys aged 10 – 17 years old.

Whereas there was little variation among disabled and non-disabled respondents, (i.e. nine versus 10 per cent, respectively), the levels of confidence varied to a greater degree across the four districts surveyed. Whereas in Oussouye, 14 per cent of adolescent girls and boys declared to feel confident of their ability to seek RHR and GBV services and/or information, only eight per cent of respondents in Ziguinchor agreed with that statement. The district of Sédhiou ranks second in this regard with 13 per cent, followed by Bignona at 10 per cent.

Access to reproductive health information

A total of only 14 per cent of surveyed girls and 14 per cent of boys reported feeling very able to access information or services regarding their RHRs³⁹. In fact, 17 percent of girls and 47 per cent of boys felt completely unable to access this information, thus signifying a significant need for support in this area. Girls and boys across both the Ziguinchor and Sédhiou regions felt similarly with respect to their ability to access this information, while older individuals (18 – 25 years old) felt slightly more able than younger ones (10 – 17 years old).

Girls were asked in FGDs about places they could go to access information and services on their reproductive health and GBV. Girls identified several examples of places, including gynecologists, midwives, youth community centers, and women’s associations. Some girls also explained that they can go to their mothers if they need advice or they can look online for information. However, they were also concerned that some of these information sources may have some limitations. For example, girls often mentioned that their mothers do not always know precisely how to avoid pregnancy and they were concerned about encountering false information online.

³⁹ Information and services on reproductive health rights include any type of information or service that supports people to make informed decisions and obtain the medical and non-medical support required to lead a healthy

“It is still taboo, so it's hard to ask your mothers. Even for your mom to explain how to avoid a pregnancy, it's hard for her.” Quote from a girl aged 18-25 years old from a female wrestling club in Mlomp

“The world has evolved. You can go on the Internet and type in your research. There you will have all the information about what to do or not to do.” Quote from a girl aged 18-25 from a football club in Bignona

Barriers to accessing reproductive health information

Surveyed girls identified the primary barriers that they face when trying to access this information as being: 1) the feeling of personal shame or embarrassment to access information; 2) fear of being judged due to prejudices and social norms; 3) feeling too young to be entitled to this information; and 4) lack of services. Surveyed boys identified the primary barriers as being: 1) lack of knowledge of where to access this information; 2) lack of easy access to this information⁴⁰; and 3) general disinterest in obtaining this information. Boys in FGDs often did not see it as their responsibility to avoid pregnancy or STIs since they viewed this as primarily a girl's responsibility.

Girls in FGDs also described the types of barriers they face when accessing information and services on reproductive health. Girls explained that oftentimes, because of their age, they cannot access certain types of information and services such as information on family planning or contraception. Indeed, girls explained that health care providers will often refuse to provide this to girls under 18 years of age even though there is no law in Senegal barring access. Girls in Ziguinchor mentioned that their parents sometimes are the ones who put barriers because they deem that their daughters are not old enough to have this information. Some girls also mentioned that nurses or midwives refuse to share information based on the age of the girls. Girls also explained that they are afraid that they will be labeled as sexually active or a worse stigma if they try to obtain this information. They also said that they feel quite shy to ask questions regarding reproductive health.

“If you ask for contraception or information about family planning at the health clinic, the nurses will often ask you “why do you need this information? You are very young!” So, you are embarrassed to access the information and services .” Quote from a girl aged 10-17 from a basketball club in Oussouye

“Parents need to talk to their children and provide explanations to them, they should be open so that children have easy access to come and confide in them if they need to.” Quote from a girl aged 18-25 from a basketball club in Ziguinchor

“If you are married, you can freely go and ask for your information without embarrassment, but if you are not married you will be ashamed.” Quote from a girl aged 10-17 from a basketball club in Oussouye

“Sometimes if you're young, when you go to the midwife, they're going to give you some information, but they're not going to tell you everything because of your age.” Quote from a girl aged 18-25 from a football club in Bignona

⁴⁰ Boys often mentioned that it was not easy or straight-forward to access this information. They explained that it is not provided in school and they have to go out of their way to visit a clinic or talk with a trusted adult to obtain it.

“Sometimes it's shyness when the girls are in front of the counselors, sometimes they are afraid or they shut down. Most often they have a complex about asking certain questions.” Quote from a girl aged 10-17 from a basketball club in Sédhiou

Through FGDs, girls provided opinions on the ways their community could make it easier to access information and services on reproductive health rights. They suggested that information be disseminated through various fora by a wide range of people (doctors, elders, etc.) and that it could be shared during community events or using the door-to-door method. They also suggested that health workers come to schools to share information directly with the students. They also felt that while information should be given to children, it should also be given to their parents. Girls in Thionk Essyl added that awareness raising would also need to happen with community members and those who work in the health sector who tend to shame girls who access reproductive health information and services.

“I think that the door-to-door method would be the best approach to raise awareness because currently it is the young girls of our generation who get pregnant. This method of sensitization could allow them to be informed, so that if boys try to double-cross them they will be aware and can protect themselves.” Quote from a girl aged 18-25 years old from a basketball club in Diembering

“The people who often talk about the risks of getting pregnant should give girls advice or raise their awareness.” Quote from a girl aged 10-17 years old from a football club in Thionk Essyl

Girls in FGDs also described the types of services and information that they would like to access, which includes information on sexually transmitted infections (STIs); vaginal infections; ways to preserve their virginity; potential consequences of having intercourse; understanding their menstrual cycle; and avoiding rape and GBV.

“A girl needs to know about her menstrual cycle. A girl who doesn't get this kind of information is ignorant”. Quote from a girl aged 18-25 years old from a female wrestling club in Mlomp

Accessing information on GBV

Slightly fewer surveyed girls and boys felt completely capable of accessing information regarding GBV⁴¹. In fact, only 13 per cent of girls and nine per cent of boys reported feeling very capable, while 15 per cent of girls and 50 per cent of boys felt completely unable to access this information. Regional differences were also very marginal. The primary barriers that surveyed girls face when trying to access information on GBV are the same as when trying to access information on their reproductive health rights. Surveyed boys largely responded that they didn't know where to go to find this information.

4.1.3 Girls' Access to Sports

Research Sub-Question: To what extent do marginalized adolescent girls and young women, including those with disabilities, have access to and are able to participate in sports?

Immediate Outcome 1130: Increased access to and participation in sports by vulnerable and marginalized adolescent girls and young women, including those with disabilities.

This question draws on three performance indicators, as follows:

- Indicator 1130.1 Percentage of sport and play facilities that meet the criteria of being gender responsive and inclusive
- Indicator 1130.2 Percentage of girls and boys – especially children with disabilities – who report feeling safe and included at sports clubs
- 1130.3 Number of adolescent girls and young women that participate in sports through project clubs (data to be collected by RTP through project monitoring)

Gender-responsiveness and inclusiveness of sport and play facilities

In general, club coaches surveyed report a rather low percentage of gender-responsiveness and inclusiveness of sport and play facilities with a one per cent variation between the treatment group at six per cent, and the comparison group at five per cent. Also, there is a slightly higher percentage of female coaches who consider existing sport and play facilities to be gender responsive and inclusive at seven per cent, compared to male coaches, (i.e. six per cent).

If we look at the responses provided by coaches by districts surveyed, we can observe some variation across the four districts. For instance, whereas in Bignona, 11 per cent of coaches considered sport and play facilities to be gender-responsive and inclusive, in Ziguinchor only 6 per cent of surveyed coaches agreed with this statement, followed by Oussouye with 5 per cent and finally Sédhiou with only four per cent of coaches surveyed.

To determine the extent to which sport and play facilities are gender-responsive and inclusive across the project implementation zone in Ziguinchor and Sédhiou, the baseline study used an observational check-list to determine the extent to which the facilities’ physical infrastructure and programme set-up include elements that facilitate gender-responsiveness and inclusivity.

The check-list examined the following ten elements:

- 1) Does the facility have wheelchair accessibility?
- 2) Are bathrooms wheelchair accessible?
- 3) Are there separate bathrooms for girls and boys?
- 4) Are there separate changing rooms for girls and boys?
- 5) Does the club have both male and female staff members?
- 6) Does the club include safe spaces such as recreation rooms, break rooms, etc. that are friendly to girls and where girls can spend time⁴²?
- 7) Does the club include safe spaces such as recreation rooms, break rooms, etc. that are friendly to boys and where boys can spend time?
- 8) Does the club include sports equipment that is appropriate for boys?
- 9) Does the club include sports equipment that is appropriate for girls?
- 10) Does the club include sports equipment that has been adapted to children with disabilities?

The baseline study discovered that, overall, only six per cent of sports facilities in the treatment group meet the criteria of being gender responsive and inclusive (by including at least five of the ten elements on the check-list) compared to five per cent in the comparison group. Indeed, sports clubs substantially

⁴² Spaces that are “friendly” to girls are defined as any space where girls feel comfortable. Elements that may influence such spaces could include decor, music, the presence of other girls, types of activities conducted in the spaces, etc.

lack the necessary infrastructure and equipment to support both girls’ and boys’ participation in sport. Some sports clubs are no more than a dirt field with a single soccer ball. Most do not have bathrooms and very few have separate bathrooms for girls and boys. Most clubs are unable to provide sporting equipment and many participants must play without basic gear such as running shoes. Unsurprisingly, under these challenging conditions, it is exceptionally rare to find clubs that have been adapted to the needs of children with disabilities.

Girls in FGDs mentioned that particularly vulnerable groups of girls are often not encouraged to play sports, and that the current sports arrangements that are offered are not well adapted to the particular needs of vulnerable groups. For instance, they mentioned that girls who are pregnant are often quite stressed and need access to sport and physical activity in order to help them to have a healthy pregnancy. However, they explained that pre-natal sports classes or activities such as walking or stretching are not at all offered by sports centers and that pregnant girls are simply excluded from physical activities. Another group of vulnerable girls identified by FGD respondents includes women who are divorced or who have recently experienced a psychological trauma. This also includes girls who have experienced trauma or physical disabilities due to the regional armed conflict. They are often shunned and lack support from society, which adds to their existing stress and makes it even more necessary for them to have access to physical activity and the social benefits of sports clubs.

While some surveyed children in sports clubs self-identified as having some sort of a physical disability, clubs are not designed to identify these disabilities or provide targeted support to encourage their participation in sport. Children who have been formally diagnosed with a physical disability outside of the club setting are typically excluded from sports and are expected to simply stay home. There are, however, a few sports clubs across the two regions that are designed specifically for children with disabilities.

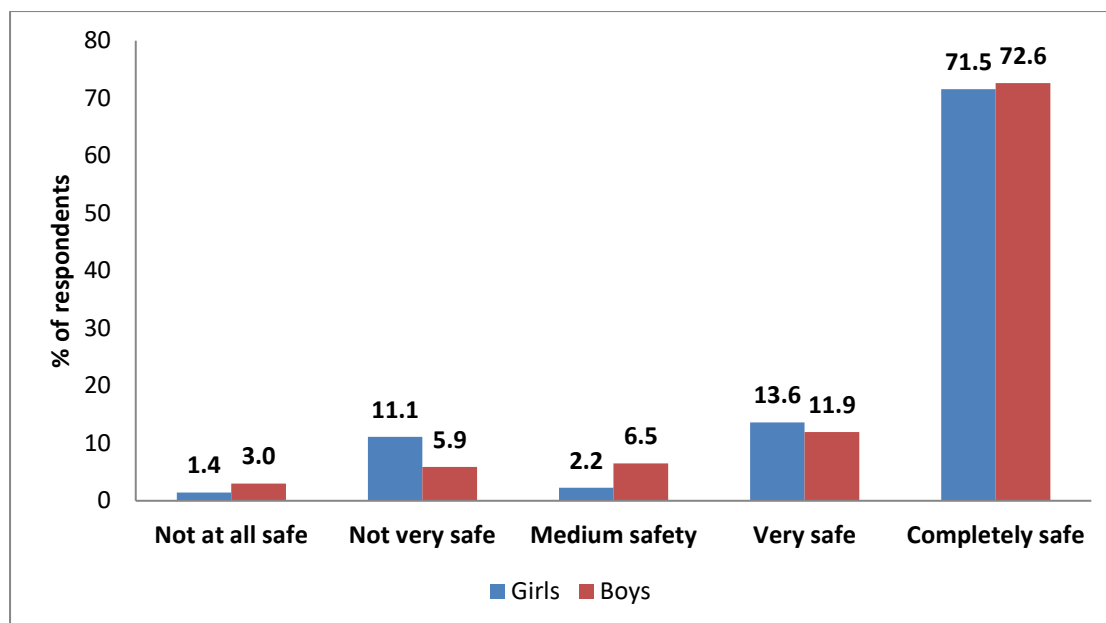
Sense of safety and inclusion at sports clubs among girls and boys, especially those with disabilities

A majority of boys and girls surveyed in the treatment group declare to feel safe and included at sports clubs with a total of 60 per cent, which represents a 15-percentage point difference with the comparison group, at 45 per cent. There is minor variation regarding gender with 62 per cent of girls reporting feeling safe and included at sports club, compared to 57 per cent of boys.

Since this survey question explicitly enquires about the inclusion of disabled girls and boys, it is interesting to note that there is a 20-per cent difference between disabled respondents who declared feeling safe and included at their sports clubs, at 44 per cent, versus 64 per cent of non-disabled respondents. Furthermore, a five-percentage point difference was observed when looking at the two regions surveyed with 65 per cent respondents in Sédhiou agreeing with the premise of this question, versus 60 per cent of respondents in the Ziguinchor region.

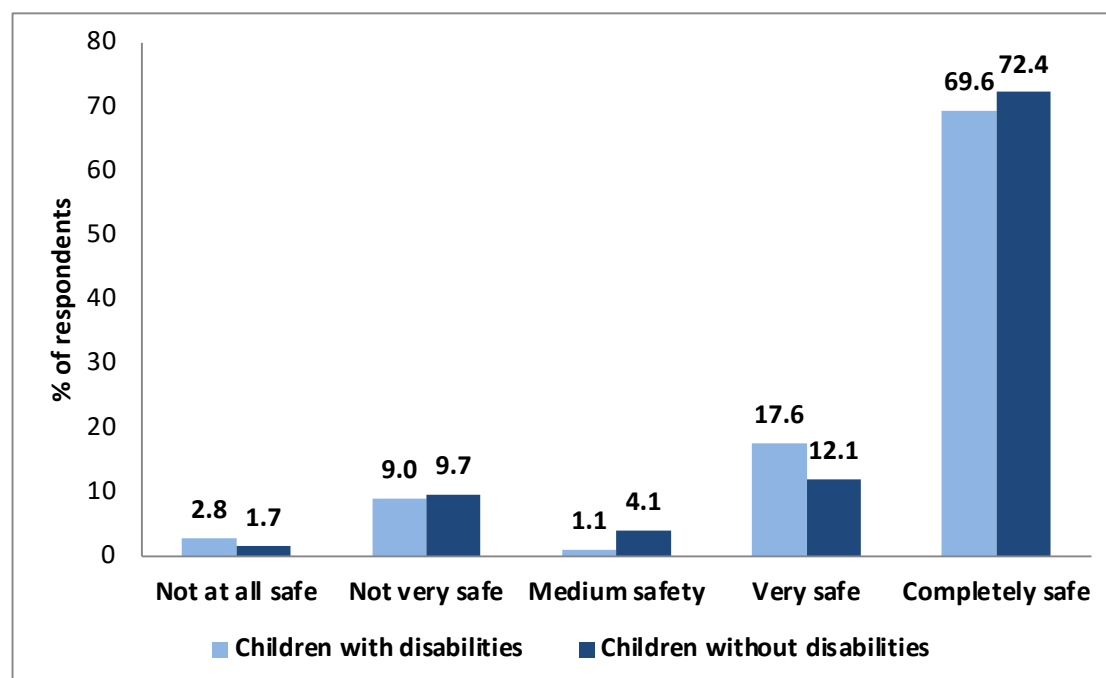
As can be seen from the two exhibits below, surveyed girls and boys in sports clubs largely feel emotionally safe when they are at their clubs. Indeed, nearly three quarters of both girls and boys (72 per cent of girls and 73 per cent of boys) feel completely emotionally safe. This is compared to 13 per cent of girls and 9 per cent of boys who do not feel safe.

Exhibit 27. Degree of emotional safety felt by girls and boys at sports clubs

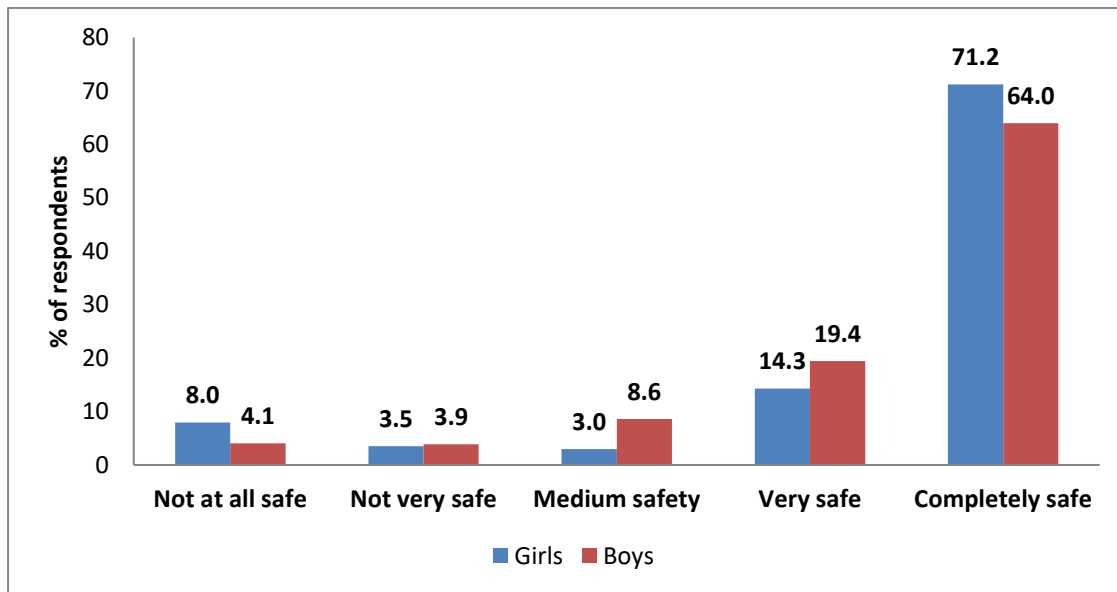


Surveyed children with self-identified disabilities also largely feel emotionally safe when they are at their clubs, with 70 per cent of children with disabilities feeling completely emotionally safe compared to 72 per cent of children without disabilities. This is compared to 12 per cent of children with disabilities and 11 per cent of children without disabilities who do not feel safe.

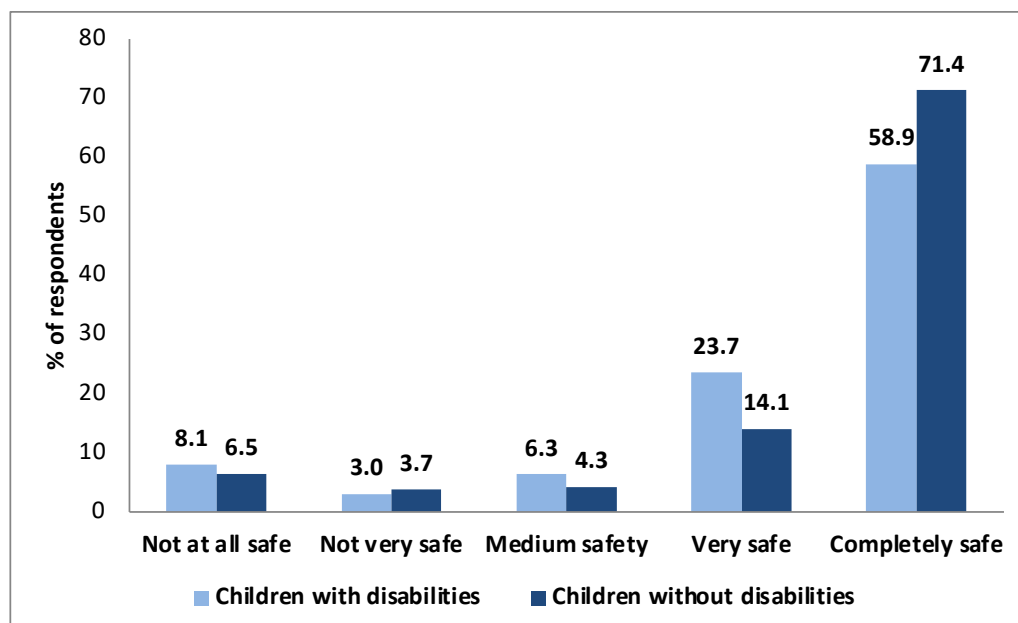
Exhibit 28. *Degree of emotional safety felt by children with disabilities versus those without at sports clubs*



With respect to physical safety, more surveyed girls reported feeling completely safe than boys in clubs, with 71 per cent of girls feeling complete physical safety compared to 64 per cent of boys. This is compared to 11 per cent of girls and eight per cent of boys who reported feeling physically unsafe. Girls and boys largely reported similar degrees of feeling safe whether it was with respect to emotional safety or physical safety.

Exhibit 29. Degree of physical safety felt by girls and boys at sports clubs

Children with disabilities reported feeling less physically safe than those without, with only 60 per cent of children with disabilities feeling complete physical safety compared to 71 per cent of children without disabilities. This is compared to 11 per cent of children with disabilities and 12 per cent of children without disabilities who reported feeling physically unsafe. Both children with and without disabilities reported concerns over their physical safety with respect to poor conditions of infrastructure across many sports clubs. For instance, some sports clubs use rocky terrains that could be hazardous to children and cause them to fall down and hurt themselves, especially if they have a disability and struggle with sight or coordination.

Exhibit 30. Degree of physical safety felt by children with disabilities versus those without at sports clubs

When asked whether sports clubs make them feel welcome, surveyed girls and boys responded similarly, with 75 per cent of girls and 76 per cent of boys reporting that they feel completely welcome. These numbers were slightly lower for children with disabilities, with 70 per cent of children with disabilities reporting that they feel completely welcome compared to 76 per cent of children without disabilities.

Girls were asked in FGDs to describe what makes them feel safe and included in their sports club, where they overwhelmingly pointed towards their coaches and team mates as the primary factors. Girls explained that their coaches and team members facilitate their integration and that after a while, they can even feel like family for some girls. Coaches often provide advice to girls such as how to avoid distraction caused by boys. Girls in Oussouye added that coaches often boost young girls’ self-confidence, while girls in Sédhiou explained that a deep sense of trust has developed over time between them and their coaches, which also helps them to feel safe. Girls particularly felt welcome and secure when they had female coaches. Boys in FGDs also pointed towards coaches and teammates as the primary factors affecting whether or not they feel safe in clubs. However, they also highlighted the quality of the facilities where they practice sports as contributing factors. They explained that it is important to them to have the right equipment and infrastructure like running water in the club to ensure their safety.

“I can say that in the club you feel like a family. If there is no peace no one will feel comfortable.”
Quote from a girl aged 18-25 years old from a female wrestling club in Mlomp

“The coach is central to giving the team a sense of security; our coach makes sure that we are all good.”
Quote from a girl aged 18-25 from a football club in Bignona

“We trust our coaches and so do our parents. If our parents didn't trust them they wouldn't want us to go on a field trip with them and leave us alone so I think the basis is trust.” Quote from a girl aged 10-17 from a basketball club in Sédhiou

“We feel safe because we are in good hands with people who know this sport. We feel like a family. We are surrounded by big brothers, parents etc.” Quote from a boy in Diembering

“We took the initiative to bring buckets of water to the gym to improve security because we had no water and people had to go out to drink. ” Quote from a boy in Sédhiou

Girls in FGDs went on to also describe the factors that do not make them feel safe in their sports clubs. They explained that they do not feel safe in an environment where there is no trust or respect. For instance, when coaches harass them by making inappropriate sexual comments or when boys or team members make fun of them. They also explained that sometimes, male coaches may flirt with girls and this can contribute to making them feel uncomfortable. Girls in Oussouye mentioned that when coaches are too easy going or show favoritism towards a particular girl, it can create chaos and a sense of insecurity.

Through FGDs, boys were largely concerned with their physical safety and explained that they do not feel safe when there are not enough first-aid kits or sports facilities are not up to par. They explained how some sport clubs do not have electricity or running water while others have no door and so the ball can roll out onto the street, which can lead to safety accidents.

“If the coach is picking on you or wants to court you, it can make us feel unsafe.” Quote from a girl aged 18-25 from a basketball club in Ziguinchor

“Feeling that our teammates make fun of us when we make mistakes can make us feel insecure.” Quote from a girl aged 10-17 from a basketball club in Sédhiou

“We must have equipment that allows us, for example, to intervene on the spot if we are injured while playing, like a small box of medicine.” Quote from a boy in Ziguinchor

A much lower percentage of surveyed children feel that their clubs adequately take their needs into consideration, with only 48 per cent of girls and 44 per cent of boys reporting that their needs are considered. These needs include the provision of sports equipment, adequate infrastructure, washrooms, changing rooms, menstrual hygiene management support, etc. A similar percentage of children with disabilities feel that their needs are adequately considered. However, surprisingly, children with disabilities reported feeling as though their needs are adequately considered more than children without disabilities. Indeed, 50 per cent of children with disabilities reported that their needs are considered compared to 46 per cent of children without disabilities. Girls highlighted a need for financial resources, infrastructure, menstrual hygiene management support, and bathrooms as the primary needs that are not adequately considered, while boys overwhelmingly highlighted infrastructure. Children with disabilities highlighted a lack of infrastructure and financial resources are the primary needs not considered.

4.2 Family and Community Support for Girls’ Empowerment

Research Question: To what extent do family and community members support girls’ empowerment by engaging in gender equality initiatives, encouraging girls to participate in sports, and participating in advocacy to prevent GBV?

Associated with Intermediate Outcome 1200: Increased action by family and community members, including men and boys, in targeted communes of Ziguinchor and Sédhiou regions to support gender equality and the realization of the rights of adolescent girls and young women.

This question draws on three performance indicators, as follows:

- Indicator 1200.1 Percentage of community members who recall engaging in at least one concrete action over the past 12 months to support gender equality
- 1200.2 Percentage of community members who recall encouraging young and adolescent girls to participate in sports over the past 12 months
- 1200.3 Percentage of boys who recall engaging in at least one advocacy action in the last 12 months to prevent gender-based violence

Community engagement in gender equality initiatives and promoting girls’ participation in sports

A total of 16 per cent of surveyed community members from the treatment group could recall engaging in at least one concrete action over the past 12 months to support gender equality, compared to a similar but slightly lower number of 12 per cent from the comparison group. Responses were similar between the Ziguinchor and Sédhiou regions. However, more men (21 per cent) than women (11 per cent) from the treatment group recalled some form of engagement. Respondents who were between the ages of 26 and 40 years old were most likely to have engaged (23 per cent) compared to other age groups such as those from 18 – 25 years old (11 per cent) or over the age of 40 (11 per cent).

As can be seen in the charts below, women were most engaged at encouraging an end to violence against women, including FGM, followed by promoting girls’ health and reproductive rights. Men were most engaged at improving dialogue between men/boys and women/girls, followed by encouraging girls to participate in sports.

Exhibit 31. *Kinds of engagement by women to promote gender equality*

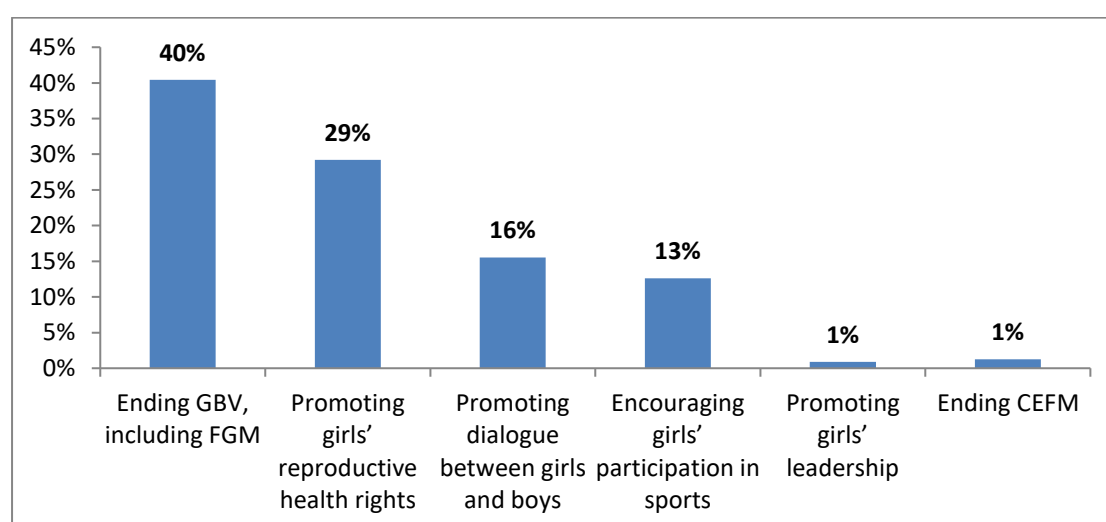
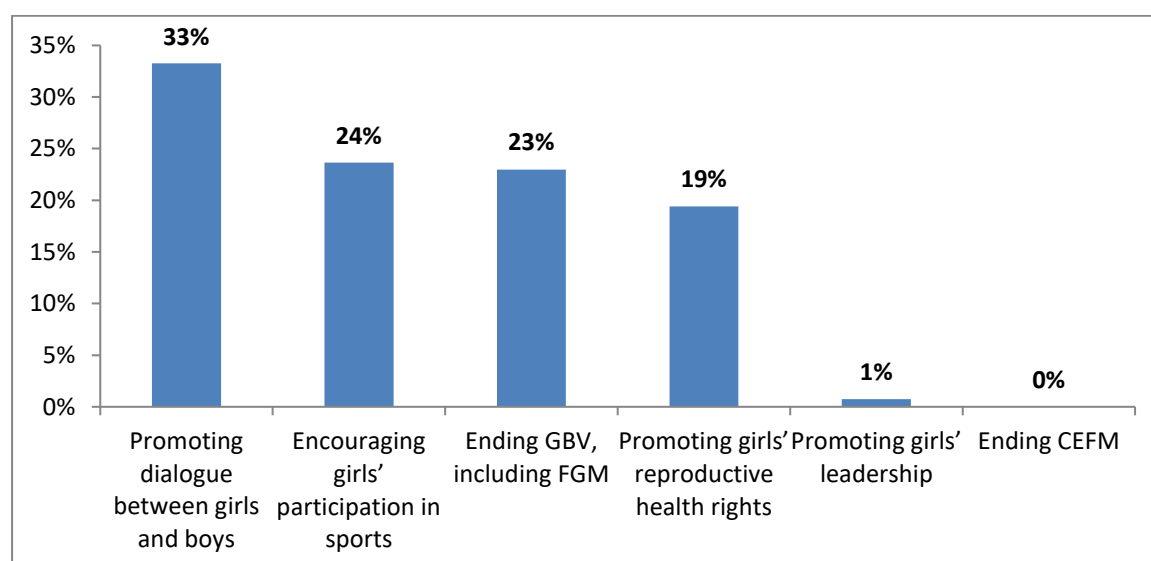


Exhibit 32. *Kinds of engagement by men to promote gender equality*



A slightly higher percentage (20 per cent) of surveyed community members from the target group could recall encouraging young and adolescent girls to participate in sports over the past 12 months. The

percentage was similar in the comparison group. Again, a larger percentage of men (28 per cent) compared to women (11 per cent) could recall encouraging girls’ participation in sports.

FGDs with mothers, fathers, and grandmothers suggest that most concrete actions to encourage gender equality and girls’ participation in sports were informal as opposed to formal in nature. Some examples of informal actions include raising awareness about specific issues by leading through example, having open discussions with their daughters, and purchasing sports clothes and accessories for girls so that they can participate in sports. Examples of more formal actions include holding sports competitions for both boys and girls, opening up sports clubs to girls as well as boys, and organizing talks in schools to promote sports among girls and boys.

Most community members felt motivated to encourage gender equality based on their own personal observations of inequalities between boys and girls and a perceived need to further support girls’ empowerment. In some cases, external factors helped to advance a concrete action. For instance, in Ziguinchor, the Ministry of Education set up some training centers where physical education teachers were trained. One of these teachers was a former athlete and suggested that the community open a sports club that could include both girls and boys. Mothers of girl beneficiaries in Ziguinchor explained that the club initially didn’t have enough money to purchase jerseys but the husband of one of the mothers stepped up and purchased jerseys for all of the children.

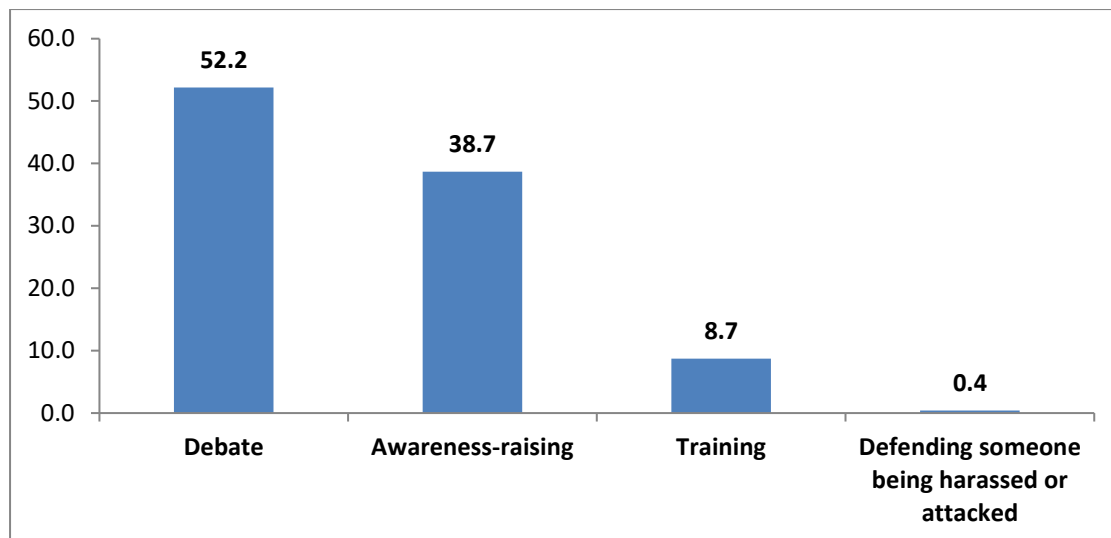
“Through a women’s association where I am president, we visit schools to discuss the importance of girls’ participation in sport. Engaging in sport demands a lot of commitment.” – Quote from a mother from Djirédji.

Boys from sports clubs also provided examples of how they have encouraged girls to participate in sports. This encouragement usually included motivating girls through positive reinforcement; walking with girls to and from practice together so that they get there safely; convincing their parents to let their daughters participate in sports; and helping girls to organize their schedules so that they can participate in sports and also meet all of their responsibilities at home.

“I was playing handball and I wanted my little sister to be able to play too but my parents said that she is too busy with her household chores. I told them that training was from 4pm – 6pm and I explained to them that she could make dinner right after training. In the end, I was able to convince them and they let her play handball”. – Quote from a target beneficiary boy from Bignona.

The percentage of surveyed boys who could recall engaging in at least one advocacy action in the last 12 months to prevent GBV was quite low at 7 per cent in the treatment group and 6 per cent in the comparison group. While the percentages were very similar across regions, there was a relatively large difference between the Bignona district at 4 per cent compared to the Oussouye region at 13 per cent. Older boys (between 18 and 25 years old) were more likely to have engaged in advocacy efforts against gender-based violence (at 11 per cent) compared to younger boys aged 10 to 17 years old (at 3 per cent). Interestingly, boys who self-identified as having a disability were nearly twice as likely to have engaged in advocacy (at 10 per cent) compared to those who did not (at 6 per cent). As can be seen in the exhibits below, the most common advocacy activities that boys engaged in were: 1) debate; 2) awareness-raising; and 3) training.

Exhibit 33. *Types of engagement by boys to prevent GBV*



Boys who were interviewed through FGDs identified primarily non-formal interpersonal actions that they engaged in to stop gender-based violence such as helping a sister or a friend. Boys from FGDs identified the most common form of help to be physically protecting girls who were being harassed or attacked by other boys. This is in contrast to the survey results where few surveyed boys identified this as a type of intervention.

4.2.1 Capacity of Family and Community Members to Support Gender Equality and Girls’ Empowerment

Research Sub-Question: What is the current capacity of family and community members to address barriers to gender equality and the realization of the rights of adolescent girls and young women?

Associated with Immediate Outcome 1210 Increased capacity of families and communities to address barriers to gender equality and the realization of the rights of adolescent girls and young women

This question draws on two performance indicators, as follows:

- Indicator 1210.1 Percentage of community members who are knowledgeable about existing laws, services and reporting mechanisms (girls’ RHRs and GBV)
- Indicator 1210.2 Percentage of community members who demonstrate positive attitudes towards girls’ participation in sports

Knowledge of community members about existing laws, services and reporting mechanisms pertaining to girls’ RHRs and GBV

A total of 42 per cent of surveyed community members from the treatment group were knowledgeable that rape is a crime and FGM is illegal, as well as feel confident that they know where to access information on reproductive health rights and gender-based violence, including where to report instances of violence. This is compared to 36 per cent from the comparison group. Responses among men and women were the same overall at 42 per cent each. However, there do appear to be some important regional differences. Levels of knowledge are much higher in Ziguinchor (at 46 per cent) than in Sédhiou (at 24 per cent). Indeed, only 61 per cent of community members from Sédhiou were aware that FGM is illegal compared to 86 per cent from Ziguinchor. While more community members from both regions were aware that rape is a crime, regional differences remained apparent with only 82 per cent of community members from Sédhiou reporting that rape is a crime compared to 98 per cent in Ziguinchor. These regional differences can largely be attributed to variances in cultural and religious norms and beliefs, with Sédhiou reflecting stronger patriarchal practices encouraged by interpretations of Islam.

A total of 61 per cent of surveyed women and 68 per cent of surveyed men reported feeling confident that they would be able to tell someone who experienced gender-based violence, such as rape, CEFM or FGM, where to go for support services. Community members between the ages of 26 and 40 felt the most confident, with 76 per cent reporting confidence compared to 57 per cent for those aged 18 – 25 and 58 per cent for those over the age of 40. Again, some regional differences can be seen with 52 per cent of respondents from Sédhiou expressing confidence compared to 68 per cent from Ziguinchor. Community members from Ziguinchor felt most confident accessing support from the Badjène Gogkh while those from Sédhiou felt most comfortable reaching out to adolescent centers.

Surveyed community members generally felt more confident telling someone who experienced GBV where to go to report the offence than where to go to receive services due to a general lack of knowledge regarding available services. In fact, a total of 76 per cent of surveyed women and 80 per cent of surveyed men reported feeling confident that they knew where to go to report the offence. Again, significant regional differences can be seen, with only 65 per cent of respondents in Sédhiou expressing confidence compared to 81 per cent in Ziguinchor. Respondents across age categories generally felt

similar levels of confidence. In both Ziguinchor and Sédhiou, nearly all respondents stated that they would report a gender-based violence crime, including CFM, FGM, and intimate partner violence, to the police.

When asked in FGDs what barriers young people often face when trying to access information and services regarding their reproductive health rights and gender-based violence, community members regularly identified the stigma around accessing services as a major barrier, compounded with fears that confidentiality would not be respected and that they would face social repercussions for having reached out for support. In addition, some mentioned that services can be difficult to access with long wait times and health workers who were not very responsive or open to listening. Interviewed fathers appeared somewhat disengaged on this topic with relatively little insights to share while some grandmothers felt that it was problematic that adolescents turn to the Internet for information as opposed to reaching out directly to their parents.

When asked what would make it easier for young people to access information and

“It’s not that there is a lack of services *per se*. The problem is the social stigma around accessing them. For example, if someone you know sees you at the hospital accessing family planning, they will tell everyone that they saw you there”. Quote from a mother from Ziguinchor.

services, some mothers suggested that schools do more to educate children. Others suggested that hospitals try to integrate reproductive health services into their general health visits so that young people can receive support in a more confidential setting. Mothers and grandmothers from across districts also emphasized the importance of open communication between parents and children so that young people can feel comfortable asking their parents for advice and/or seeking support from them. With respect to what members of the community can do to make it easier for young people to access services, grandmothers from Ziguinchor emphasized the importance of reaching out to the badiénou gokh for support.

When asked what barriers young people face when trying to report a GBV crime, community members explained that the biggest barrier is an unwillingness to pursue a complaint against a family member or a neighbour. They explained that fear of negative repercussions, including splitting up the family, dividing the community, and even one’s own physical safety commonly contribute to an unwillingness to press charges. These repercussions can also include blaming the victim and being associated with a negative social stigma, which can make it more difficult for them to marry in the future. A grandmother in Djirédji also mentioned that adults often don’t take children seriously when they make a claim against someone.

“I think that it’s the role of the badiénou gokh at the neighbourhood level since it’s their role to help young people who find themselves in difficulty. You can try to talk with your children but if they are hesitant or ashamed to talk with their mother, they can go to the badiénou gokh to explain their problem and receive help”. – Quote from a grandmother from Ziguinchor.

Mothers, fathers, and grandmothers suggested that it would be easier for young people to report a GBV crime if communication and trust was stronger

“In the end, it’s often the victim who ends up getting blamed if she reports a gender-based crime”. – Quote from a father from Ziguinchor.

between parents and children. They also suggested that building more community centers for young people could help them to feel safe and more comfortable reporting instances of GBV.

“Children often don’t denounce gender-based violence because when they tell adults about what happened, they are treated as liars. We don’t take seriously denunciations made by children, and the abuser who is older takes advantage of this”. – Quote from a grandmother from Djirédji

“It is important for parents to talk with their children before a violent situation occurs so that the young people are prepared and feel comfortable coming to adults for help”. – Quote from a grandmother from Ziguinchor.

Community perceptions regarding the participation of girls and boys in sports

Nearly half (41 per cent) of surveyed community members from the treatment group and 46 per cent from the comparison group demonstrated positive attitudes towards girls' participation in sports by answering that girls should have the same access to sports as boys; knowing that sports improve girls' confidence, mental health, and physical health; and believing that there are no sports in which girls shouldn't participate. While statistics were similar

“Before people can denounce a crime, they have to know what their rights are. If someone were to rape me, I wouldn’t know what to do and what not to do. I need to know this before I could report a crime”. – Quote from a mother from Djirédji

across regions, more men demonstrated positive attitudes than women at 45 per cent compared to 38 per cent. Some of the reasons why community members believe that girls should not have the same access to sports as boys include a belief that boys need more physical outlets than girls due to their perceived physical strength and need to burn off energy; that girls are often unavailable to play sports due to their household chores and marriage responsibilities and therefore don't require the same

“The grandmothers practice judo in our community. If boys follow their example, they can learn important discipline that can help them to take charge of their lives and also defend themselves if they are ever attacked”. – Quote from a mother from Ziguinchor.

access; and that it is often seen as socially and culturally inappropriate for girls to participate in sports where they would be required to wear tight or revealing clothing, engage in moves deemed socially inappropriate (such as opening their legs or bending over); develop muscles that would make them appear supposedly less physically attractive to men, and engage in sports such as boxing that are often considered too violent and “unfeminine”.

“Sport is not only good for one’s health but it allows one to have a career and create a future”. – Quote from a mother from Sédhiou.

When asked whether boys should participate in sports, community members felt that sport is important to promote good health, encourage self-defence, and foster self-discipline. They also felt that sports could

“Sports help my son to stay occupied and off the streets. Even when he is not in school, he wakes up early to go and train”. – Quote from a mother from Ziguinchor.

directly benefit boys’ futures by giving them structure that could help them secure a good career and that, in some cases if they were talented enough, sport could even bring them and their families financial wealth and recognition. They also felt that

sports can be helpful in keeping boys out of trouble and off the streets and can help them to feel relaxed and concentrate better at school. Some community members, however, also felt that sports could be a distraction from school and were not always beneficial. Community leaders were in agreement with the perceptions of the other community members but also added that sports can foster discipline and a sense of community, which can help boys to become more responsible citizens.

Mothers, fathers, grandmothers, and community leaders participating in FGDs agreed that boys can do all kinds of sports and that there aren’t any sports that boys shouldn’t play. However, they also mentioned that sometimes boys are not interested in participating in sports that they perceive as “girly” such as gymnastics. Religious leaders also largely agreed that boys can play all kinds of sports. Only one religious leader in Bignona raised a concern regarding the boys’ dress code in wrestling where it was perceived to be too revealing and immoral.

“When boys succeed in sport, they can become very useful to their family, village, community, and even nation. Today, everyone can see that football can help a boy reach heights beyond his community”. – Quote from a grandmother from Djirédji.

When asked whether girls should participate in sports, community responses were overwhelmingly positive with mothers, fathers, grandmothers, and community leaders expressing strong opinions that girls should participate in sports. They raised many examples of the benefits that sports can have on girls, which were very similar to the benefits attributed to boys such as the promotion of girls’ health; supporting girls to relax and better concentrate at school, and keeping girls busy in order to stay out of trouble. However, some mothers from Ziguinchor also mentioned that engaging in sports could potentially put girls in closer contact with boys, which could pose some risks for adolescent girls, such

“If girls can practice martial arts, it allows them to better defend themselves because today if a woman marries a violent man who tries to abuse her, she can physically defend herself so that he can’t hurt her”. – Quote from a mother from Bignona.

as pregnancy. Some praised sports as a means to strengthen girls’ independence while others mentioned that sports can help girls to learn self-defense techniques that can be useful if in an abusive relationship. A father from Diembering explained how female wrestlers hold a special status in his community because they are seen as having the strength to produce strong offspring who can

win wrestling tournaments. Fathers in Ziguinchor also mentioned that sports can potentially help advance a girls’ career by giving her opportunities to join the army, while grandmothers in Djirédji believed that sports could promote girls’ careers and that girls could achieve national and international recognition through sport.

Religious leaders also overwhelmingly expressed support for girls’ participation in sports, with most citing clear health benefits. This being said, religious leaders from Thionk Essyl, Bombali, and Djirédji were more hesitant or did not think that girls’ participation in sports is at all desirable. Some mentioned that girls’ sports clothes are too risqué and not considered “decent” enough while others simply stated that God does not want girls to play sports. They explained that girls and boys play different roles in society and that it does not make part of a girls’ role to participate in sports.

“Sport is a ‘medicine’, everyone must do sport since it allows you to keep oneself in good shape. When a person does sport, it is important because that keeps them in good health.” Quote from a religious leader from Ziguinchor

“Women’s work and men’s work are not the same. Men and women are not equal. Women should not play sports. It’s only men who should play sports. God did not give women football or basketball. If women who play sports undress in front of men, they will never feel shame again in front of men. This causes women to lose their morals and values, which is something that God does not want”. – Quote from a religious leader from Djirédji.

While there were many similarities between how community members and community leaders viewed girls’ and boys’ participation in sports, there were also some differences. While community FGD respondents identified strength-training as a benefit of sports for boys, they identified weight-loss as a benefit to girls, thus reflecting social conceptions towards what is considered attractive with respect to girls’ and boys’ bodies. Another major difference with respect to community perceptions is that while boys are seen to be generally able to participate in all kinds of sports, girls faced more restrictions. Some community members felt that girls should play “softer” sports so as to avoid interfering with their reproductive system; out of concern for a perceived “weaker capacity” that could negatively affect their overall health; and out of concern that certain sports might make girls less physically attractive. Sports that were mentioned that girls shouldn’t play include boxing, judo, karate, gymnastics, and weightlifting. Some religious leaders from Bignona, Bambali, and Djirédji also mentioned wrestling and boxing as inappropriate for girls to pursue due to their perceived violent nature. They also suggested that girls avoid football and high jump because their clothes might become misarranged and expose some skin, as well as gymnastics due to what can be perceived as provocative moves such as lying on the ground and raising their legs in the air.

“In general, girls are vulnerable people, so even if they can play sports, they will not do so in the same way as men.” Quote from a community leader from Bambali

When asked whether girls should have the same access to sports as boys, most community members agreed that, in principle, girls should have the same access but that they often do not due to the high demands of housework placed on girls which leaves them with less free time to engage in sports as well as cultural and social constraints such as duties involving marriage that can reduce a girls’ ability to participate in sports. Indeed, grandmothers from Djirédji explained that once a girl is married, she assumes more responsibilities to manage the household, which diminishes her opportunities to participate in sports. Mothers from Bignona also explained that girls are often not allowed to leave the house to play sports out of concern for their physical safety.

Community members also explained that girls’ access to sports is sometimes more limited than that for boys since girls are often seen as having less physical capacity than boys and therefore, are perceived to not be in need of sports opportunities to the same extent. There was, however, recognition among FGDs with grandmothers that these perceptions are changing among the younger generation and that exposure to Western media is causing a shift in beliefs regarding girls’ capacities and opportunities.

« Sometimes it’s out of concern for their safety that we don’t let children leave the house. There’s no problem letting boys leave because they are boys and can go where they like, but we regularly limit girls from going out ». – Quote from a mother in Bignona

Nearly all community leaders interviewed agreed that girls and boys should have equal access to sports. They explained that this is because they see girls and boys as inherently equal and also because of the positive role models of successful female athletes in the media. One community leader, however, did not agree that girls should have equal access to sports as boys because the leader believed that girls

should focus on remaining busy within the home. This belief was also shared among some religious leaders who agreed that a woman’s place is exclusively within the household. Other religious leaders were accepting of girls playing sports and having equal access to boys as long as they wore “appropriate” clothes that don’t reveal the shapes of the girls’ bodies.

“Before, we thought that sports were only for boys. Now that times have changed and we live in a world that is more modern, we can see that in Western countries girls play football, karate, judo, and many other kinds of sports. Since we’re always in front of the TV, it’s this example that pushes us to encourage our grandchildren to go and play football and once they do, they develop a love for the sport”. – Quote from a grandmother in Ziguinchor.

4.2.2 Capacity of Coaches and Relais to Support Gender Equality and Girls’ Empowerment

Research Sub-Question: What is the current capacity of coaches and relais to train and inform adolescent girls on life skills, gender-based violence, and available services for girls’ reproductive health rights?

Associated with Immediate Outcome 1220 Increased capacity of coaches and relais to train and inform adolescent girls on life skills, and gender-based violence and available services for girls’ RHRs

This question draws on three performance indicators, as follows:

- Indicator 1220.1 Percentage of coaches who are knowledgeable about existing laws, services and reporting mechanisms relating to GBV and girls’ RHRs
- Indicator 1220.2 Percentage of coaches and relais who recall leading one or more initiatives to support girls’ empowerment in the last 12 months
- 1220.3 Percentage of coaches and relais who report self-confidence in advocating for girls’ empowerment through sport and for the prevention of GBV

Knowledge of coaches about existing laws, services and reporting mechanisms relating to GBV and girls’ RHRs

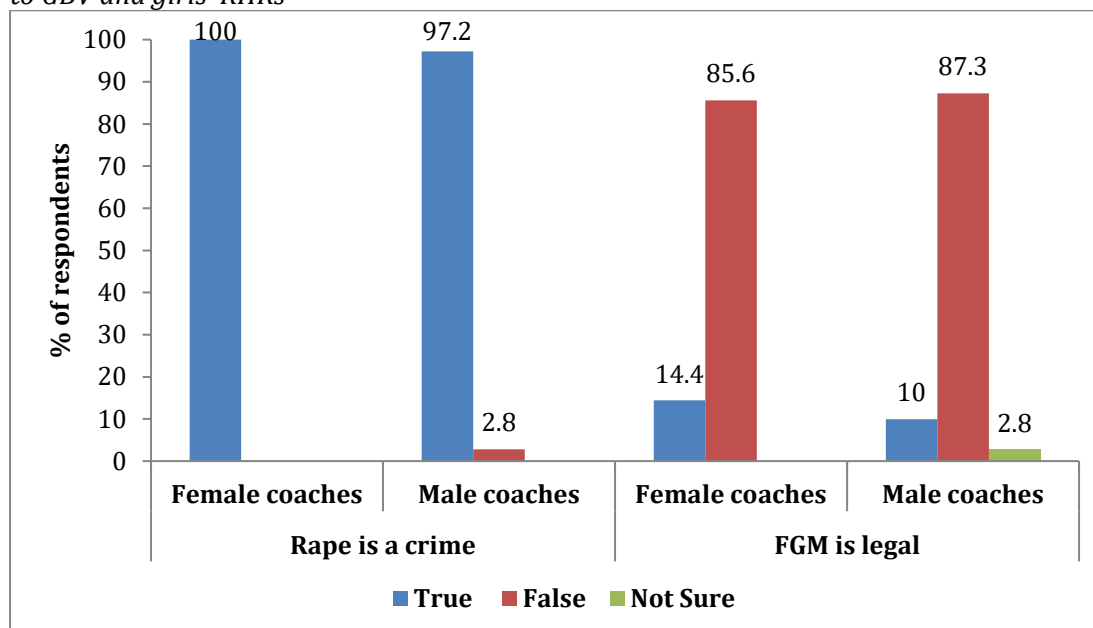
Surveyed sports club coaches reported a high degree of knowledge regarding existing laws, services and reporting mechanisms relating to GBV and girls’ RHRs. Interestingly, there was reported higher knowledge of existing laws, services and reporting mechanisms in the comparison group than in the treatment group; 90 per cent of coaches in the comparison group indicated that they were knowledgeable of laws, services and reporting mechanisms related to RHRs and GBV, while in the treatment group this was slightly lower at 82 per cent.

In terms of a regional breakdown, the rate of reported knowledge about RHRs and GBV services was much higher among coaches in Ziguinchor (at 89 per cent) than in Sédhiou (at 50 per cent). More specifically, in Sédhiou, only 55 per cent of coaches reported knowing that FGM was illegal in Senegal while this was much higher in Ziguinchor at 94 per cent. There was no significant difference between regions concerning knowledge that rape is a crime, with 100 per cent of coaches in Sédhiou and 97 per cent of coaches in Ziguinchor reporting that rape is a crime under Senegalese law.

Looking across genders, 82 per cent of male coaches surveyed reported they were knowledgeable of related laws, services, and reporting mechanisms concerning reproductive health rights and GBV while of the female coaches surveyed, 86 per cent reported being knowledgeable. Specifically, 87 per cent of male coaches and 86 per cent of female coaches knew that FGM was illegal in Senegal. Concerning

rape, 100 per cent of female coaches and 97 per cent of male coaches reported knowing this was a crime under Senegalese law.

Exhibit 33. Knowledge of coaches about existing laws, services and reporting mechanisms relating to GBV and girls’ RHRs



Male and female coaches also felt quite confident in their ability to tell others where to access information and services on reproductive health rights and GBV. Indeed, 93 per cent of male coaches felt that they could tell someone where to go to access services compared to 100 per cent of female coaches. In terms of reporting an offence related to GBV, both male coaches (at 97 per cent) and female coaches (at 100 per cent) felt confident that they could tell someone where to report such an offence.

During FGDs with female coaches, participants discussed barriers that young people often face when accessing information and services related to reproductive health rights and GBV. Female coaches often identified feelings of shame among young girls and boys as the biggest obstacle to accessing these services, even if the services are readily available within the community. One female coach from Ziguinchor shared that the barrier of

“They are ashamed to go ask for help at the center level” – Quote from a female coach from Sédhiou.

“You might confide in a mother in the neighborhood, but she will divulge your secret to everyone. At the adolescent center level, they listen to you, and it won’t be shared in the same way. Most of the time young people don’t access services because of the lack of information on how to do so even if you can go to the ado center for the counseling you might need” – Quote from a female coach in Ziguinchor.

shame could be amplified by the parents if they do not want to help the young person find the needed services. Another female coach from Ziguinchor mentioned that taboos in the home regarding sexuality

can also make it difficult for some girls and boys to speak with their parents about the need to access information and services. Other female coaches brought forward the challenge of actually accessing the services that are available to a young person, such as when young people do not know exactly where to go to find relevant services. This included limited knowledge about adolescent centers, which are part of health centers where young people can go to find help if they need it and where the concerns brought forward by a young person would be treated

more confidentially than if they went to someone in their neighbourhood for help. A female coach from

Sédhiou also noted that a young person could be deterred from seeking out services given the challenge of navigating the various administrative levels involved. The issue of the quality of services provided was also raised, as some coaches believed that staff can be unwelcoming and even judgmental towards young girls and boys, which might deter them from seeking the necessary services that are already available.

Male coaches in the focus group discussions did not identify many obstacles to accessing reproductive health rights and GBV services. One male coach from Diembereng argued that there were not many obstacles for young people in accessing services in his community, as information about where to go and what to seek out was coming from young people’s peers and their mothers. On the other hand, a coach from Bignona noted that he understood there to be a lack of information about where to go for services, which meant that coaches had to counsel young people on where to seek support. Interestingly, few male coaches identified shame as the main barrier to accessing services and instead were more focused on the barriers of access to services from a logistical standpoint.

In terms of barriers that young people face when trying to report GBV, responses from the FGDs with

“It is at the level of the families where they will reject you. Nobody in the family will believe your accusations. This is because it is a taboo subject and it is forbidden to speak about it under any circumstances. In the community you and your family will be stuck with unpleasant social labels” – Quote from a female coach in Sédhiou.

female coaches often brought forward the risk of violence or punishment that a young person might face if they were to report it. Indeed, a female coach from Sédhiou indicated that if the family of the person seeking to

make the complaint was poor, they would be more likely to lose their case and even face imprisonment. Another female coach from Sédhiou understood that young people are often afraid to report GBV because they might receive death threats from the perpetrator, in addition to the fact that they felt that not many people would actually believe their claims. Female coaches also brought forward the challenges at the family level

“Maybe they [young people] are threatened with death if they report a GBV crime, and they think that no one would believe their story” – Quote from a female coach in Sédhiou.

which deter a young person from making a report. In Ziguinchor, female coaches cautioned that making

“When a poor person is the victim of violence from a person belonging to a rich family, the poorest will always risk being the loser in the case of a denunciation and can even be imprisoned” – Quote from a female coach in Sédhiou.

a report could be seen as a risk to the family, causing significant disruption between family relationships. A female coach from Sédhiou also noted these family dynamics, suggesting that young people risk being rejected by their family if they make a report and that a young

person and their family could be ostracized in the community as a consequence of a report being made.

Male coaches did not bring forward barriers caused by the risk of violence to the young person but instead focused on issues of shame which a young person might experience when trying to report GBV. According to the male coaches, this sense of shame comes from both the parents of the young person and stems from social norms in the community. Male coaches from Bignona noted that this feeling of shame makes young people hide GBV from their parents and deters them from going to the police. A male coach from Sédhiou also acknowledged that it is hard for young people to make a report because such issues are seen as a taboo in the community.

“She often hides so her parents do not find out. She is ashamed. I have never seen a girl go to the police to report a rape” – Quote from a male coach in Bignona.

In terms of what would make it easier for young people to report GBV, female coaches often raised the

“If it's in a school setting, you can go to an organization like AEMO. You can bring a case of violence to them, whether it's verbal or physical and they are able to intervene in a school setting.” – Quote from a female coach in Ziguinchor.

importance of programs at schools and the role of the adolescent center. Female coaches from Ziguinchor specifically noted the example of the AEMO in schools as well as the role of the badiénou gokh in facilitating GBV reports. A female coach from Sédhiou suggested that young

people should know how to go to the police, the gendarmerie, or the hospital to make a report. Male coaches in Ziguinchor also called out the role of the badiénou gokh in helping young people make a GBV report. A male coach from Ziguinchor pointed toward the legal system, suggesting that young people making a complaint would need access to a good lawyer. This same coach also noted that it would be easier for young people to make a GBV report if they had more social support since making a report often means the complainant will lose their job and “their dignity.” In both female and male focus group discussions, the importance of awareness raising to help make GBV reports easier was also noted.

“I have led activities through discussions, talks, and sensitization on the importance of sport for girls and all of its benefits. This included exchanges on themes related to gender, the promotion of girls through sport, empowerment, and female leadership. Also, on the concepts around self-confidence, self-esteem and self-belief and opportunities in sport.” – Quote from a female coach in Sédhiou.

In the key informant interviews with club managers in Oussouye, the role of health officers to integrate information on reproductive health, GBV, and menstrual hygiene management into sports was noted as

“The training is insufficient, and coaches do not have the means to acquire adequate training” – Quote from a club manager in Oussouye.

being a potential opportunity for improvement. Specifically, during training camps health professionals could deliver this information to youth participants. One club manager also noted that having access to sanitary napkins would help them. Both club managers indicated they received little, if

any, support to help them tailor their coaching approaches to better promote inclusive sports activities, including towards girls and children with disabilities.

Support among coaches for girls’ empowerment initiatives

The surveyed sports club coaches in the treatment group reported a high degree of engagement in leading initiatives to support girls’ empowerment in the last 12 months, at 71 per cent. By contrast, in the comparison group only 27 per cent of coaches surveyed reported having led initiatives to support girls’ empowerment in the last 12 months. Regionally, the rate of engagement in girls’ empowerment activities over the past year was much higher among surveyed coaches from Ziguinchor (at 80 per cent) than from Sédhiou (at 30 per cent). At the district level, almost all coaches surveyed in the district of Ziguinchor (94 per cent) reported leading girls’ empowerment initiatives, which was markedly higher than the other districts where only 20 per cent of coaches in Bignona, 30 per cent in Sédhiou, and 50 per cent in Oussouye report having led girls’ empowerment activities. A gender breakdown reveals female coaches more often reported leading girls’ empowerment initiatives within the last year (80 per cent) when compared to male coaches (70 per cent).

Focus group discussions with coaches reveal a difference between male and female coaches in that female coaches more often highlight interpersonal efforts to encourage girls in sports and related activities while male coaches pointed to more formal activities. For example, a female coach from

Ziguinchor expressed how she encourages girls in sports by setting a good example and acting as a role model herself. Another female coach in Ziguinchor indicated that she had supported girls’ empowerment by helping to purchase girls’ materials and clothing so that they could participate in sports if they had any financial troubles. Multiple female coaches also noted that they have tried to empower girls by emphasizing how success in sports and in school are connected. One female coach from Sédhiou brought up examples of her efforts to talk with friends to promote sports to girls, including by talking about the benefits sports can give girls such as increased self-confidence and self-esteem.

Male coaches offered examples of specific events and tournaments that they had led that encouraged the participation of girls and young women. A male coach from Sédhiou brought up the example of the “Rap-Attaque” as a tournament which supported girls’ empowerment. A male coach from Bignona highlighted the example of his club offering training for professional development to help young people, including girls, find career success outside of soccer.

In terms of what motivates coaches to lead girls’ empowerment initiatives, male coaches were largely unsure or unable to articulate their motives. Among

“It is necessary to help their future by training them in professions outside of soccer. While soccer is good, the chances of professional success in the sport are limited. Young people should be advised to take a second job to prepare for the end of their sports career. They should learn a trade or go back to school. My club is in the process of setting up professional training” – Quote from a male coach in Bignona.

female coaches, their own personal motivations to do sports often directed them towards engaging in girls’ empowerment activities. For example, one female coach from Ziguinchor noted her own passion

“It’s the passion I have for sports. I told myself that I have been in her shoes, that is, when I was young, my coach bought a jersey and spikes for me to practice athletics. So, if I see an athlete having problems, I will do that kind of thing for her. It’s just a passion for the sport that drives me, plus the need to help that motivates me” – Quote from a female coach in Ziguinchor.

for sport was why she engaged in initiatives to empower girls. In Sédhiou, a female coach also noted she was motivated to empower girls through sport since sports are good for their health. Another theme that emerged was the motivation to reduce rates of early pregnancy. In Ziguinchor, for example, female coaches suggested they are motivated because they want

to encourage talented young players to stay in the sport and not get pregnant.

From the focus group discussions, only female coaches offered examples of challenges that they faced in leading initiatives to support girls’ empowerment. A female coach from Ziguinchor brought forward the challenge of resources which meant that she has paid out of pocket for club materials. A female coach from Sédhiou suggested that a challenge was the girls’ parents, particularly the fathers, as they can deny girls access to sports or deny girls the ability to travel to competitions, which can lead to girls lying to their parents in order to participate. A different female coach from Sédhiou brought up the fact that when she first began as a coach, she often lacked confidence in her own skills as a coach and as a mentor to young girls.

“The major difficulty I faced in the beginning was whether the girls would believe me or not and whether they would listen and follow my recommendations” – Quote from a female coach in Sédhiou.

Self-confidence among coaches to advocate for girls- empowerment through sport and the prevention of GBV

Among coaches surveyed in the treatment group, a significant majority (85 per cent) said they were confident in their abilities to advocate for girls’ empowerment through sport and for the prevention of GBV. This is compared to the comparison group where only 48 per cent of the coaches surveyed reported similar self-confidence. Again, a regional difference can be observed where 90 per cent of coaches from Ziguinchor said they were confident in their ability, while only 60 per cent of coaches from Sédhiou were confident. At the district level, there is also a significant difference in the self-confidence of coaches surveyed. In the Ziguinchor district, 100 per cent of coaches stated they had self-confidence to advocate for girls’ empowerment and the prevention of GBV. In contrast, only 37 per cent of coaches surveyed in Oussouye said they had similar self-confidence. This rate was slightly higher in Sédhiou (at 59 per cent) and in Bignona (at 75 per cent). In terms of a breakdown across genders, self confidence in their abilities of coaches was roughly the same for both male and female coaches at 85 per cent and 87 per cent, respectively.

Through FGDs with coaches, all male coaches expressed that they felt comfortable advocating for girls’ empowerment and GBV prevention through sport.

“I feel comfortable about empowerment because I am empowered by sport. I am always proud and comfortable standing in front of my students and telling them that it is because of sport that I am here in front of you talking about sports and health, as well as sport and finance. That's why I say that it's natural and simple” – Quote from a female coach in Ziguinchor.

One male coach from Bignona said that he felt comfortable because he enjoyed it and liked to see when girls take the lead. Likewise, female coaches expressed during focus group discussions that they also felt comfortable in this type of advocacy. Some female coaches from Ziguinchor stated that this comfort came “naturally” given their own connection to sport and given the pride they take in their work.

Other female coaches in Ziguinchor noted that they felt comfortable because they had received training in the past.

From key informant interviews with club managers, there were some examples of mentorship programmes in place to support boys’ participation in sports but none to support girls. In one soccer club, the program offered to boys also focuses on empowerment, entrepreneurship, and project management. In a wrestling club, while a formal mentorship programme is not in place, the club manager emphasized that mentorship is a fundamental practice in the sport itself as there is an old practice of having a mentor help a young wrestler with motivation and confidence.

“Mentorship is a traditional practice here as it aims to provide [the young wrestler] with motivation, security, and confidence. The novice under mentorship is called "Bajanga" here.” – Quote from a club manager in Oussouye

4.2.3 Capacity of Boys and Men to Support Gender Equality and Girls’ Empowerment

Research Sub-Question: What is the current capacity of boys and men to act as champions and allies for gender quality and the rights of adolescent girls and young women?

Associated with Immediate Outcome 1230 Increased ability of boys and men in their communities to act as champions and allies for gender equality and the rights of adolescent girls and young women

This question draws on three performance indicators, as follows:

- Indicator 1230.1 Percentage of boys who are knowledgeable about their RHRs
- Indicator 1230.2 Percentage of boys who report self-confidence in advocating for prevention of GBV
- 1230.3 Percentage of target boys who demonstrate positive attitudes towards girls' participation in sports

Knowledge of boys about their RHRs as well as those of girls and reported self-confidence of boys in advocating for prevention of GBV

Between the treatment and comparison group of boys surveyed, slightly more boys in the comparison group were knowledgeable about their RHRs, at 36 per cent, than in the treatment group, at 27 per cent. Regionally, there was a slight variation within the treatment group, with 29 per cent of boys surveyed in Ziguinchor being knowledgeable about their SRH rights, while only 19 per cent in Sédhiou were. In terms of a breakdown by age, the young men surveyed who were ages 19 to 25 were more knowledgeable (at 31 per cent) than the boys ages 10 to 17 who were surveyed (at 22 per cent). Interestingly, boys with disabilities who were surveyed reported having a higher degree of knowledge of their SRH rights (33 per cent) than boys without disabilities who were surveyed (24 per cent).

Concerning the SRH rights of girls, from the focus group discussions with boys, some thought that girls could participate in all sports activities while menstruating. Accordingly, there was knowledge that girls could do sports while menstruating due to the availability of pads and tampons. For example, a boy in Ziguinchor indicated

“I would say that nowadays with the advancement of technology and research, girls can participate in sports while menstruating. Recently, I saw an advertisement about sanitary napkins. There are even pads now that are adapted for those who swim. So ... if the pain doesn't allow you to do sports, it is understandable, but regarding hygiene, there is the technology that allows girls to keep doing sports” – Quote from a boy in Ziguinchor.

“A girl can practice sports during her period, it's not a devilish thing. But in some cases, a girl will experience painful periods which limits her.” – Quote from a boy in Diembering.

that there are menstrual products that make it so girls can swim while they have their periods. However, others in the same group thought that girls participating in sports while menstruating was still taboo

even if there were products that could help a girl control her bleeding. Across a number of focus groups there were boys who noted that girls cannot participate in sports while menstruating because they are often in pain and are considered to be weaker during that period of time. For example, one boy in Sédhiou suggested that there were some sports a girl should not do while menstruating, such as running which would be difficult as the girl

would already be “weak.” While religion was not often pointed to as a reason for a girl not to do sports while menstruating, one boy in Oussouye did suggest girls should refrain from sports while on their period due to religious reasons.

Regarding where young people access information and services for SRH and GBV, the boys from the focus group discussions noted different organizations and institutions where they can go to access information and services. These include the adolescent center, the hospital, and also their own schools with the teaching of the “Sciences de la Vie et de la Terre” course. One boy from Ziguinchor described how their coach has talked to them about SRH and GBV, having brought with him the badiénou gokh to share relevant information. Others brought forward the role of media in accessing information related to SRH and GBV services, including the television, the radio, and the internet. Interestingly, only a few boys across the different focus groups indicated that they go to their parents for information, and when they did mention their parents, this was not their only source. For example, one boy in Diembering would get information from his parents in addition to information he sought from the internet and at the hospital.

“The coach spends time talking to us about these issues, warning us about certain risks, and every year he calls the badiénou gokh to come here and make us more aware. We have a debate, we exchange. They talk to us about gender-based violence. They tell us that when a girl is not 16 years old, going out with her is considered a crime or an offence.”
– Quote from a boy in Ziguinchor.

In terms of barriers in accessing information and services, the boys often brought forward the issue of their parents, including how talking to them about such topics was a challenge and how topics regarding sexuality are still considered taboo. One boy in Ziguinchor noted how sometimes he seeks information online, but he is not sure if what he is finding is accurate and he does not have an adult to turn to as his parents do not want to discuss such topics.

The boys from the focus groups had various suggestions about how to make it easier for them to access information and services, including within their community. A focus group in Ziguinchor argued that

“... You can type something on your phone, and you can have the answer in a click, in less than a minute you have all the answers you want, but do you have the right information? You can't tell your father or your mother because they will believe that these subjects are taboo, that we must not talk about sexual intercourse between parents and children”– Quote from a boy in Ziguinchor.

more should be done in schools to educate young people concerning issues of SRH and GBV. One boy in Oussouye thought that it would be possible to bring SRH and GBV services closer to the sports clubs so young people could have more convenient access. Role models, such

as sporting celebrities, were mentioned by some participants as a possible avenue for the sharing of SRH and GBV information. Boys in Bignona highlighted the importance of community outreach, including community debates and the work of badiénou gokh⁴³ to facilitate easier access to information and services. While very few boys had specific information or services that they would like more or better access to, one boy in Diembering said that he would like more information on pregnancy and sexually transmitted infections.

Of the boys surveyed, only 28 per cent in the treatment group reported that they were confident in advocating for the prevention of GBV. In the comparison group this was slightly higher at 36 per cent. There was very little regional variation between Ziguinchor (at 27 per cent) and Sédhiou (29 per cent) in terms of reported self-confidence of boys in advocating for the prevention of GBV. Young men

⁴³ The badiénou gokh provides SRH and GBV information to both girls and boys through community outreach. However, typically only girls go to the badiénou gokh for direct support and/or advice.

between the ages 18 to 25 who were surveyed were more confident (at 39 percent) than were the boys ages 10 to 17 who were surveyed (at 16 per cent). Of the boys with disabilities who were surveyed, 31 per cent reported being confident in advocating for the prevention of GBV in comparison to 26 per cent of boys who are not disabled who reported similar confidence.

In contrast to the survey results, the boys in the focus group discussions for the most part indicated that they felt comfortable advocating for the prevention of gender-based violence. One boy from Ziguinchor

“Even though I try to talk to girls about soccer, I try to support those who want to train, sometimes passers-by say words in order to discourage the girls while practicing” – Quote from a boy in Sédhiou.

noted that participating in sports has made him feel more comfortable doing so because, to him, in sports you do not think about gender in the same way. However, other boys stated that they are still fearful to

denounce GBV in public because of the potential social backlash both within the community and within sports clubs. One boy in Ziguinchor brought forward that he was fearful that he would face repercussions from his coaches if he were to denounce acts of GBV within the club. In Sédhiou, one boy specifically described how he tried to encourage girls to do sports, but that this was hard because many people in the community still think the girls’ place is at home. Another boy in Sédhiou gave the example of how even if he tried to encourage girls to do sports, others in the community would discourage the girls from practicing.

Attitudes among boys towards girls’ participation in sports

Of the boys surveyed, 46 per cent in the treatment group demonstrated positive attitudes towards girls participating in sports compared with 48 per cent in the comparison group. More specifically, of the boys surveyed in the treatment group, 57 per cent agreed that girls should have the same access to sports as boys. However, 30 per cent of boys thought that there were some sports that girls should not be allowed to play. Almost all boys surveyed (88 per cent) thought that sports help increase a girl’s confidence. Differences between regions were very small, with 47 per cent of boys in Ziguinchor demonstrating positive attitudes towards girls in sports and 44 per cent of boys in Sédhiou demonstrating positive attitudes. In terms of age, there was only a slight difference between demonstrated positive attitudes of young men ages 18 to 25 (at 50 per cent) and boys ages 10 to 17 (at 42 per cent). Demonstrated positive attitudes towards girls in sports among boys with disabilities who has been surveyed was 55 per cent in contrast to 42 percent in boys without disabilities.

Among the focus group discussions with boy beneficiaries there was unanimous opinion that girls should do sports. In general, sports were seen as equally valuable between boys and girls. It was often expressed that girls should be encouraged to do sports for the same reason as boys. There were many benefits for girls if they

“... in sport we are equal as before God” – Quote from a boy in Diembering.

did sports according to the boys. Commonly cited benefits included improving their health, helping them with discipline, as well as helping to regulate stress and to decompress. Another benefit, according to a number of boys in the group discussions, was that sports

“... girls love their beauty and sports helps them stay beautiful” – Quote from a boy in Oussouye.

would help a girl stay-in shape and that sports would help them stay attractive.

In general, across the FGDs with boy beneficiaries, there was a consensus that there should be equal access to sports for boys and for girls. This was in part because there was a recognition that girls and boys have the same passion for sport. One boy in Ziguinchor specifically noted how a boy or a girl could do any sport they wanted if they tried hard enough and it was the problem of socialization and education which made some people think girls were not fit to do certain sports, rather than their actual capability. However, while many thought that girls should have the same access, some boys across districts raised examples of specific sports that girls should not do such as combat sports, wrestling, and rugby since they are seen as “too violent” for girls as well as gymnastics which were falsely associated with risks to women’s reproductive organs.

“We tend to feminize certain sports, we also tend to masculinize certain sports, for example weightlifting. However, this is only a process of socialization and education. Had it not been for this, we would have said that all people are equal and that each sport could be done by any person.”– Quote from a boy in Ziguinchor.

When asked about their own ability to participate in sports, the boys from the focus group discussions were unanimous in the opinion that a boy should do sports. As with the benefits for girls, the boys understood that doing sports was good for a boy’s health and for his discipline. They also identified other benefits for themselves when they practiced sports, including staying away from the streets and away from crime, improving self-defence, improving their reputation, and opening up potential career opportunities. In contrast to the restrictions identified for girls, there was a unanimous opinion among the boy focus group participants that boys could do any sport they wanted to do.

It is interesting to contrast the opinion of boys concerning girls’ participation in sports with those of girls concerning their own participation in sports. Among focus group discussions with girls, there was the common opinion that girls should do sports. Girls thought participating in sports gave them many benefits and they

“If you want to be sexy, to have nice size, a nice shape, doing sports is something that will help.”– Quote from a girl aged 18-25 from a football club in Bignona

identified more benefits for girls than did the boys. For example, by doing sports the girls thought they would improve their health, they

“... When you play sports, you don’t think about having boyfriends. If I take my own example, basketball is my boyfriend.”– Quote from a girl aged 18-25 years old from a basketball club in Diembering

would stay busy and away from trouble, they would stay “in shape,” they could lose weight, they could be more confident, and they also could better manage their stress. One girl from Ziguinchor stated that sports would help with a girl’s self-defense while a girl from Diembering stated that sports can help a girl stay busy and away from boys.

While girls were able to identify a wider breadth of advantages from their participation in sports than the boys did, responses from girls focus groups brought forward similar perspectives to boys concerning the sports girls should not play. While many girls thought that they could do any sport they chose, across the different focus groups some sports were consistently mentioned by participants as being unsuitable for girls, such as boxing, rugby, and wrestling which were considered by some to be too violent for girls. Other girls thought that cycling should not be practiced by girls since it risked a girl losing her virginity and also “athlétisme” which could risk a girl becoming sterile if the exercise was too strenuous. One girl from Sédhiou also mentioned that a girl should avoid sports that make her unattractive, such as weightlifting.

While girls in the focus groups in general thought girls and boys should have equal access to sports, they did bring forward the obligations of housework and the challenge of menstruation as barriers that

“I think there are many sports that are not good for women, because if they do them, they cannot have children. For example, the athlete Amy Mbacké, she cannot have children and I think that many of athletes like her who cannot have children.”– Quote from a girl aged 18-25 from a football club in Bignona

often-meant equal access to sports was not the case for them. Neither of these two factors (housework and menstruation) were brought forward in the focus group discussions with boys concerning equal access to sports for boys and girls. There were some girls in the focus groups, notably from Bignona,

“Some people say that if girls practice certain sports our body become deformed, and we will not be able to give birth. They also say that will not be able to find a husband because we look like boys.”– Quote from a girl aged 10-17 from a basketball club in Sédhiou.

Thionk Essyl, and Bambali who thought that there should not be equal access to sports for girls because they considered boys to be different than girls in that they were naturally smarter and stronger than girls.

Perhaps unsurprisingly, girls thought that boys could practice any sport they wanted to, although one girl from Bignona cautioned that some sports might be considered too feminine for boys, such as handball or volleyball. Girls from the focus group discussions identified a range of benefits for boys if they did sports which mirrored benefits that they themselves receive, including improved health, better discipline and staying away from trouble. However, in contrast to the benefits identified for themselves,

“In sports a girl and a boy are not comparable, because when boy gets up in the morning, he has nothing to do so he can for a walk or jogging. But a girl, when she gets up, she has to do the housework and cook for the family. In the evening she has to wash the children, so you won't have time for yourself.”– Quote from a girl aged 10-17 from a basketball club in Oussuye.

girls also noted that for boys, sports could bring financial benefit that could help support a family and a community and that sports would give boys the benefit of becoming stronger physically.

4.3 Accountability and Commitment of Key Institutions to Respect, Promote and Fulfill the Rights of Adolescent Girls and Young Women in and through Sport

Research Sub-Question: What is the current level of accountability of key institutions to respect, promote, and fulfill the rights of adolescent girls and young women in and through sport?

Associated with Intermediate Outcome 1300 Increased accountability of key institutions to respect, promote and fulfill the rights of adolescent girls and young women in and through sport

This question draws on three performance indicators, as follows:

- 1300.1 Number of locally relevant policies that promote girls' empowerment in and through sports (to be identified through RTP monitoring data)
- 1300.2 Number of concrete actions taken by key institutions in response to youth advocacy on girls' empowerment in sports (to be identified through RTP monitoring data)
- 1300.3 Number of new initiatives and/or commitments from key institutions emerging from public forums, dialogue, and advocacy campaigns supported to respect, promote and fulfill the rights of adolescent girls and young women in and through sport (to be identified through RTP monitoring data)

Research Sub-Question: To what extent do key institutions commit to promoting adolescent girls' and young women's rights, especially in and through sports?

Associated with Immediate Outcome 1330 Increased commitment of key institutions towards promoting adolescent girls' and young women's rights, especially in and through sports

This question draws on one performance indicator, as follows:

- Indicator 1320.1 1330.1 Roadmap for girls' empowerment in sports developed and disseminated

Support from Sports Associations and Institutions towards Girls' Participation in Sports

Attitudes towards Girls' Participation in Sports

KIIs with representatives of sports associations and institutions reflect an overall positive attitude towards girls' participation in sports. Indeed, football representatives from Bignona stressed the importance of girls' participation in sports in fostering a well-rounded personality, self-confidence, and personal autonomy. In Sédhieu, handball representatives acknowledged that sport can play an important role in promoting gender equality while they also identified a need to further support girls' empowerment to better facilitate girls' leadership in sport by certifying more female coaches and providing girls' sports clubs with more financial resources and competition/tournament opportunities.

Initiatives to support Girls' Participation in Sports

“We work with parents to help them to understand that girls have the right to play sports .” – Quote from a Sports Association Representative from Ziguinchor region

“We regularly organise a big basketball competition with 300 to 350 young people, where the majority of participants are girls. We try to encourage girls' leadership and help girls and boys to understand that they are equal by providing the same playing time to girls as boys during the competition”. Quote from a Basketball Sports Association Representative in Bignona

These positive attitudes are in line with recent developments and support for new ministerial programmes promoting girls’ participation in sports among sports leagues such as football, wrestling and handball. For instance, representatives from Ziguinchor explained that a programme exists to promote girls’ participation in football where the sports federation has capacitated ten colleges across Ziguinchor to promote women’s participation in sport. Representatives from Oussouye explained that the National Wrestling Committee of Senegal is in the process of developing women wrestling and is piloting the discipline through test competitions in Mbour (Thies region), Kaolack, Ziguinchor, Fatick, Saint Louis, and Dakar regions.

“The wrestling league in Oussouye organises girls’ contests as a way to promote their participation in wrestling. Following the last contest organised between villages, the inspector of sports requested that all wrestling clubs have a girls’ section.” – Quote from a Sports Association Representative from Oussouye

Gaps and Barriers hindering Girls’ Participation in Sports

Representatives of sports associations and Institutions across sporting disciplines identified limited investment in certifying female coaches and referees as a major barrier to encouraging girls’ participation in sports. They explained that this certification process is quite costly and that institutions tend to prefer investing their limited funds into promoting boys’ sports.

Support from Government Institutions towards Girls’ Participation in Sports

Attitudes towards Girls’ Participation in Sports

Key Informant Interviews with representatives from government institutions from youth, sports and health sectors reflect that these government institutions are supportive to girls’ empowerment and participation in sport. However, even though sports are seen as an equality vector by government institutions representatives, some misconceptions regarding gender equality still persist. For instance, some government representatives interviewed were reluctant to refer to equality between men and women based on supposed physical disparities which according to them would make it impossible to speak of gender equality in sports.

« There’s no difference between boys and girls. Girls like sports and they can participate in it just like boys do. Sport is linked to well-being and health. By practising sports girls can improve their health and well-being. » – Quote from an Adolescent Counseling Center Representative

“When we refer to gender equality, we are suggesting that women and men have the same physical, mental, and psychological capacities, which is not true. Indeed, there are very big differences. We may not see these differences when they are young but they become important factors that positively or negatively influence them when they grow up.” – Quote from a government representative

Initiatives to support Girls’ Participation in Sports

A number of government policies that seek to promote girls’ empowerment have been implemented by government institutions. Some of these initiatives include the recruitment of Youth Workers dedicated to education and reproductive health and organisational work as well as support for the network of Girls’ Clubs (*Clubs de jeunes filles*) which seeks to develop girls’ leadership, entrepreneurship and vocational training, including crafts work and food processing. Also, there are health policies that target adolescents and youth to increase their knowledge of and access to reproductive health services such as

the SRMNIA (*Plan Stratégique National de la Santé Maternelle, du Nouveau-ne, de l'Enfant, de l'Adolescent et des Jeunes*), a plan on sexual and reproductive health for the mother, the new-born, the child and the adolescent. Furthermore, some policies exist in the area of medical care concerning adolescents and young people such as norms and procedures regarding adolescents and youth reproductive health, manuals on reproductive health, and the creation of Adolescent Clubs («Espaces ado») within health districts.

Gaps and Barriers hindering Girls' Participation in Sports

The primary challenges or barriers identified by government officials to promoting girls' participation in sport are related to the lack of sports infrastructure and personnel, especially at decentralised levels coupled with a lack of financial resources, especially lack of funding from local authorities and insufficient staff capacity. Also, harmful practices that continue to be entrenched in cultural beliefs as well as attitudes and social norms can cause parents to create opposition towards girls' participation in sports among those sports that are socially perceived as “male sports”. In addition to this, there is consensus among government officials around the role that poverty plays in increasing girls' vulnerability and reducing their opportunities to participate in sports. Indeed, they referred to a lack of financial resources among families to support the purchasing of basic sports equipment and attire such as running shoes and/or jerseys as a hindering factor to girls' participation in sports.

“Obstacles [to girls' participation in sports] are linked to social prejudices around what it means to practice sport, with parents and community members placing a strong focus on supporting boys over girls due to a perceived notion that boys have a natural athletic discipline that girls lack”. Quote from a representative of an adolescent counselling center.

Support from Media towards Girls' Participation in Sports

Attitudes towards Women's and Girls' Participation in Sports

All media representatives and journalists interviewed were enthusiastic, supportive and showed high levels of commitment towards women's and girls' participation in sports. They emphasized an increasing trend in women's and girls' participate in sports and referred to efforts done by journalists to support this new trend. However, they also highlighted a lack of publicity in the practice of sports by women and girls as well as some degree of cultural resistance among some communities to the practice of sports by women and girls.

« Regarding the women's championship, the nature of this coverage is different from the coverage for men. For girls there is no direct coverage. Reports are made after the game. So it's a simple coverage and a post-game broadcast. » – Quote from radio journalist from Ziguinchor

Initiatives to support Women's and Girls' Participation in Sports

In general, women's and girls' sport is not covered by the media to the same extent as men's and boys' sport in any of the four districts covered by the study, i.e. Ziguinchor, Oussouye, Bignona and Sedhiou. In fact, women's and girls' sport activities are typically very poorly covered by media or simply not covered at all. There is no live coverage of women's or girls' sports in any of the four districts other than some occasional coverage through “Facebook live”, which can be done by any Facebook user and does not necessarily require any media involvement or equipment other than a smartphone. Some of the most common forms of media coverage of women's and girls' sports include support for teams

during competitions as well as web pages dedicated to team information, activities and players, which include written articles summarising matches. Media personnel cited a general lack of interest among society as the primary reason for why women’s and girls’ sports are not covered by the media. Women’s and girls’ sports are often seen as “inferior” sports to men’s sports since women are generally less physically strong. They also cited a lack of knowledge among media personnel of women’s and girls’ sports as an additional barrier.

Gaps and Barriers hindering Girls’ Participation in Sports

Media representatives explained that media managers need to be further sensitised, trained and oriented to address the neglected coverage of female sports as a real obstacle to the promotion of sports among girls. Media representatives also recommended that media personnel’s capacity be strengthened in technical aspects such as streaming, approaches for covering women’s sports, and other aspects of sportive journalism. Furthermore, media representatives suggested that girls’ and boys’ life skills and, in particular, their communication skills be strengthened in order to increase their capacity to use effective language and speak confidently to the media about their engagement in sports. They also suggested that sports clubs put in place a communications coordinator/resource person to manage the clubs’ websites featuring information on the clubs, individual photos and profiles of players, videos, etc. to help facilitate the broadcasting and information-sharing of sports events.

4.3.1 Participation of Adolescent Girls and Boys, and Young Women in Public Forums to Defend and Promote the Rights of Women and Girls, including in Sports

Research Sub-Question: What is the current level of participation of adolescent girls and boys, and young women in public forums to defend and promote the rights of women and girls, including in sports, at the sub-regional, regional and national levels?

Associated with Immediate Outcome 1310 Increased participation of adolescent girls and boys, and young women in public forums to defend and promote the rights of women and girls, including in sports, at the sub-regional, regional and national levels

This question draws on two performance indicators, as follows:

- Indicator 1310.1 Number of advocacy plans and campaigns implemented by girls’ and boys’ clubs (to be identified through RTP monitoring data)
- 1310.2 Number of girls, boys and young women who participate in public forums supported by the project to defend and promote the rights of women and girls, including in sports (to be identified through RTP monitoring data)

As part of the baseline methodology, the study interviewed adolescent girls and boys from Peer Youth Groups through the Peer Educators’ Network (Le Réseau National des Pairs Educateurs du Sénégal) and Girls’ Clubs (Clubs de Jeunes Filles), which are government supported networks of young leaders working on promoting the rights of girls and boys across Senegal. While these groups have not been identified as specific partners of the RECAF- Jeu Project, they are working on similar issues and could potentially become valuable strategic partners. Interviews with Youth Groups from four Peer Educator Networks across Oussouye, Ziguinchor, Sédhiou and Bignona as well as a Girls’ Club in Sédhiou revealed that the main objective of their organisations is to promote girls’ empowerment through awareness raising of GBV prevention; ending child marriage and teen pregnancy; promoting girls’

rights to speak out in male dominated communities; and raising awareness of girls’ rights through culturally sensitive approaches.

Promotion of Dialogue

Youth organisations organise community dialogues between boys and girls as well as dialogues with authorities, parents and religious leaders. These events take different forms like a regional week of activities, i.e. “Semaine de base de la jeunesse” in Oussouye. During this week, various outreach activities are carried out that include community dialogue designed to sensitize boys around the idea that girls have an equal place in society.

In Sédhiou, the networks of youth organisations use a community dialogue strategy which engages the *Préfet* (the head of the local administration), boys and girls, parents, and religious leaders. According to this strategy, dialogue is typically followed by the dissemination of recommendations stemming from it.

« We chose to target girls in sports clubs because they are dynamic. Some peer educators find it better to work with girls in sports clubs because they are leaders. Our girl leaders are generally sportswomen. » – Quote from a youth organization representative.

There is also a strong link between Peer Educators and Girls’ Clubs. Many efforts are made by the Peer Educators’ Network to support Girls’ Clubs through networks present in some schools and community sports associations (ASC). The Peer Educators’ Network also targets girls from sports clubs in Ziguinchor, Oussouye and Sédhiou by providing support to girls in sport and by recruiting some of them to become peer educators. Nevertheless, no formal partnership could be observed between peer educators and sports clubs, and girls who practice sports remain primarily a target for peer educators in terms of awareness raising and empowerment.

Opportunities for Partnership

Opportunities for partnership between RTP and the Peer Educators’ Network and Clubs of Young Girls are most evident at the grassroots level where youth organisations have great expertise in conducting outreach activities. Support at the grassroots level could help to overcome challenges linked to cultural resistance to change within conservative communities. There are also opportunities for RTP to leverage existing community dialogue and partner with the Peer Educators’ Network and Girls Clubs to facilitate dialogue between girls and government representatives.

4.3.2 Capacity of Civil Society Organizations (CSOs) to Advocate for Girls’ and Young Women’s Rights, especially in and through Sports

Research Sub-Question: What is the current capacity of civil society organizations to advocate for adolescent girls’ and young women’s rights, especially in and through sports?

Associated with Immediate Outcome 1320 Increased capacity of civil society organizations to advocate for adolescent girls’ and young women’s rights, especially in and through sports

This question draws on three performance indicators, as follows:

- Indicator 1320.1 Number of advocacy plans and campaigns implemented by CSOs with project support to advocate for adolescent girls’ and young women’s rights, especially in and through sports (to be identified through RTP monitoring data)
- Indicator 1320.2 Number of initiatives, including events, organized by CSOs to advocate for adolescent girls’ and young women’s rights, especially in and through sports (to be identified through RTP monitoring data)
- Indicator 1320.3 Number of CSOs that have integrated girls’ empowerment, especially through sports, into their work and advocacy plans (to be identified through RTP monitoring data)

Attitudes of CSOs towards Girls’ Participation in Sports

CSOs working on girls’ empowerment are largely supportive of girls’ participation in sports. However, they often see sports as a side activity for leisure as opposed to an opportunity to promote girls’ empowerment or to further advance their gender equality programming.

“We promote both educational and sporting activities but we have yet to include an intentional gender equality objective behind this work. We have access to some decent sporting facilities (football and basketball) that could facilitate further work in this area”. – Quote from a CSO Representative

Some CSOs, especially those with a religious orientation, claiming to promote the rights of girls, reflect conservative views of what constitutes gender equality. Such organisations tend to justify inequalities between girls and boys as being natural differences between genders that should be embraced. They tend to encourage a strict definition of gendered roles and responsibilities and are less inclined to support girls’ participation in sports.

“In the world of sport there are girls who develop skills and become champions. There are fewer taboos in sport, women invest themselves in sports and they are able to empower themselves as they do it. It's not just for men anymore. We have sportswomen, leaders, etc.” Quote from a NGO representative

Initiatives to support Girls’ Participation in Sports

CSOs working on girls’ empowerment are largely supportive of girls’ participation in sports but tend to not actively engage in programming that facilitates girls’ increased access to sports or use girls’ participation in sport as a means to promote girls’ empowerment. Gender equality programming currently conducted by CSOs largely consists of promoting reproductive health rights (including ending FGM), ending child marriage, facilitating young women’s participation in decision-making bodies and local politics, awareness-raising regarding GBV, encouraging equal household work between girls and boys, and providing vocational training for young women to expand their professional options, amongst others.

Gaps and Barriers hindering Girls’ Participation in Sports

CSOs who were interested in further promoting girls’ participation in sports identified a number of barriers or challenges that hinder their work in this area. These include training competent coaches and supervisors across different sports disciplines to work with girls; accessing sports equipment; developing sports infrastructure that is accessible to communities; developing staff capacity to fully understand how girls’ participation in sports can encourage girls’ empowerment and gender equality; and knowing how to integrate girls’ self-confidence and psychological support into sporting activities. Some CSOs also require further sensitization on what truly constitutes gender equality and girls’ empowerment so as to not propagate beliefs that girls cannot participate in all types of activities, including sports.

“I believe it is counterproductive to promote beliefs like gender equality that go against the morals and values of a society. Each society is unique and we should not try to change their ways of doing things. »
– Quote from a CSO Representative

Section VII Lessons Learned

The Baseline Study exercise identified a number of insights for RTP to consider when implementing its midline and endline evaluations. These lessons learned are presented below.

1. Since data generated from perceptions surveys can reflect substantial biases, it should be analyzed with caution, taking into consideration the local context and potential biases of respondents. In particular, data obtained through girls and boys participating in sports clubs should be understood within the context that these children are privileged compared to many others within the community since they already participate in sports and largely have their family’s support to do so. Therefore, they are likely more empowered and aware of girls’ rights than other children within the community. Data from perceptions surveys can be strengthened and contextualized by drawing on project monitoring data (including outcome monitoring) and other available studies.

2. Collecting data exclusively with girls and boys from sports clubs limits the extent to which RTP can identify general trends among girls and boys at the community level and can negatively affect the project’s ability to report on certain PMF indicators, such as the percentage of girls who participate in sports. RTP may wish to consider modifying the methodological approach and/or budget for the midline and endline evaluations to facilitate surveying girls and boys at the community level in addition to those from the clubs.

3. The perspectives of children with disabilities from sports clubs are difficult to capture in FGDs unless a mechanism is put in place before a study occurs that can pre-emptively and confidentially identify them to ensure their participation in the discussions. Such a mechanism, however, would need to be created in a way that allows the facilitator to know which children have disabilities but that does not risk stigmatizing the children in any way.

4. Data can better directly inform baseline measurements when actual project beneficiaries and partners are engaged in the study. To do this, projects must invest in stakeholder outreach and establish a strong project design prior to implementing the baseline. This would also facilitate a more cost-effective baseline exercise as the evaluation team would not need to invest such significant time and resources towards identifying and contacting stakeholders to participate in the study.

5. It is challenging to engage stakeholders from the comparison group without offering them some sort of compensation or benefit for their time and engagement. Such compensation should be taken into consideration and decided-upon during the project design prior to conducting the baseline study.

6. Survey responses from coaches reflected a high degree of knowledge concerning sexual and reproductive health rights and gender-based violence. For the midline evaluation, the evaluation team may wish to present more challenging questions in order to better measure improvements in knowledge between the midline and endline. In addition, RTP could potentially further capture changes in knowledge among coaches by using pre and post-tests as part of its monitoring system between the baseline and midline.

Section VIII Conclusions and Recommendations

The baseline study has produced a total of eight conclusions and recommendations stemming from the findings that provide an analysis of the implications of the findings on the future of the Récaf Jeu project along with specific recommendations to strengthen project design and implementation.

Supporting Girls to Achieve Greater Empowerment

Conclusion #1: Stakeholders interviewed through FGDs were largely unanimous that sports encourage girls’ empowerment. The baseline study revealed quite positive attitudes and perceptions towards girls’ empowerment among girls who participate in sports as well as their parents. Indeed, girls who already participate in sports clubs are likely experiencing more favourable conditions that promote girls’ empowerment than girls who do not have access to sports clubs. This highlights a need to expand access to sports among girls at the community level and offers an opportunity for girls in sports clubs to promote and encourage girls’ participation in sports among those who are not yet engaged either through a sports club or community level sports practice. Barriers that girls face to participate in sports include but are not limited to social norms among parents and community members that discourage girls’ participation in sports due to beliefs that girls should spend their time at home, that they should not wear tight fitting or revealing sports clothes, etc.; conflicting responsibilities and priorities such as studying and/or household domestic work; and financial resources to pay for sports attire. In addition, even though girls who are participating in sports clubs demonstrate good levels of overall empowerment, the baseline study has identified a number of areas where their empowerment could be further strengthened, thus signaling areas where RTP interventions could be particularly meaningful. These include:

- Increasing girls’ self-confidence to express their ideas, particularly in front of boys and among community members. Girls tend to feel more comfortable expressing their ideas in more familiar settings than in public spaces. They also struggle to find the confidence to participate in leadership initiatives that promote girls’ empowerment. This represents an opportunity to further support girls in sharing their perspectives in more public settings through initiatives such as community dialogue and/or dialogue with other stakeholder groups such as government representatives.
- Improving girls’ knowledge of their reproductive health rights and their confidence to access related information and services. Survey results suggest that girls are often unclear as to what constitutes their reproductive health rights. They are also often shy or embarrassed to access information and services regarding these rights. Improvements also need to be made at the community level to better ensure girls’ confidentiality, reduce stigmas that girls feel from service providers when accessing services, and increase access to information and services for girls of any age even if they are socially perceived as being “too young”.
- Encouraging girls to believe that they can participate in any kind of sport and that there are no sports that girls cannot play. Baseline study findings revealed that girls often believe that not all sports are appropriate for them. These beliefs are often founded on misconceptions about sports like gymnastics where girls sometimes fear that certain moves could affect their reproductive organs or other sports such as wrestling, weightlifting, or boxing that are perceived as only appropriate for boys due to their more violent nature or out of fear of developing an “unfeminine body” that is too muscular to be perceived as beautiful.
- Breaking misconceptions that girls are responsible for GBV committed against them. Girls interviewed through this baseline study largely felt that girls themselves are to blame if GBV is committed against them. Factors that they felt encourage GBV to occur include how girls behave and dress and the places they go.

Recommendation #1: Right to Play should invest in strategies to engage girls from the community who are not already practicing sports to join sports clubs and/or participate in community-level sports. It should also provide focused support for girls in sports clubs in those areas where they require further support to strengthen their empowerment.

To operationalize this recommendation, RTP should:

- Engage girls from sports clubs as advocates to encourage other girls from the community to join the clubs.
- Provide opportunities to celebrate girls at the community level who practice sports.
- Provide support and structured opportunities for girls to express their ideas in public settings and engage in structured leadership initiatives. This could include community dialogue as well as dialogue with government representatives.
- Train media personnel to better cover girls’ sports in order to encourage girls to participate in sports. This should also include the development of a quantitative indicator to monitor change in sports coverage over time.
- Provide media training to girls and boys from sports clubs so that they can more effectively promote sports through media outlets. This should include website management so that sports clubs can encourage media coverage by better promoting their sports and tournaments online.
- Provide targeted training to girls within sports clubs on their reproductive health rights and where to go to access information and services. This training should include a focus on improving girls’ self-confidence to access information and services and address any barriers related to shame or embarrassment.
- Provide sensitization and training to reproductive health information and service providers to strengthen mechanisms to promote confidentiality and to increase girls’ trust in having a confidential experience, as well as to eliminate stigmas and restrictions promoted by providers towards girls, including stigmas/restrictions around a minimum age requirement to access information and services.
- Develop targeted messaging and training materials for girls in sports clubs that tackle misconceptions that girls cannot participate in all sports and that girls are to blame for GBV.

Addressing Regional Differences between Sédhiou and Ziguinchor

Conclusion #2: The baseline study findings reveal large regional disparities between the regions of Sédhiou and Ziguinchor with respect to attitudes and beliefs towards girls’ empowerment and their participation in sports, with girls’ empowerment indicators consistently lower for Sédhiou than Ziguinchor. Sédhiou is a more predominantly Muslim region and interviews with stakeholders, including religious leaders, suggest that some interpretations of Islam are fostering beliefs that girls and boys should play pre-defined separate roles and that girls should not participate in all sports. Since religious leaders are quite influential among community members across most of Sédhiou, their engagement in promoting positive views of gender equality and girls’ participation in sports will be key for challenging existing social norms.

Recommendation #2: Right to Play should invest targeted resources in the Sédhiou region in order to address regional disparities with respect to attitudes and beliefs towards girls’ empowerment and

participation in sports. This investment should include a focus on confronting religious beliefs that hinder girls’ participation in sports.

To operationalize this recommendation, RTP should:

- Gather additional information from secondary sources, including CSOs, regarding religious influences on gender equality in Ziguinchor and Sédhiou.
- Engage religious leaders in dialogue to promote interpretations of Islam that encourage girls’ empowerment and participation in sport. There is already some momentum among religious leaders across Senegal to challenge interpretations of Islam to better encourage girls’ empowerment that RTP could potentially leverage and with which it could create synergies.
- Use religious leaders who promote girls’ empowerment and participation in sports as advocates for RTP’s activities.
- Design messaging to promote girls’ empowerment and participation in sport across Sédhiou that identifies and challenges the specific religious beliefs held in these communities that hinder girls’ equal access to sports.

Strengthening the Capacities of Coaches to Promote Girls’ Empowerment through Sports

Conclusion #3: Both female and male coaches demonstrate a largely unanimous view that sports are empowering and necessary for both girls and boys. They also reflect strong understandings of reproductive health rights and GBV laws and services. However, baseline study findings have identified a need among coaches to receive training, information, and support on how to effectively refer girls and boys to the correct services and how to encourage them to seek access to these services and overcome feelings of shame or embarrassment in doing so. Indeed, male coaches require specific training to raise their awareness of the fact that girls and boys often choose not to access available services out of shame, embarrassment, or fear that members of the community will find out that they have been accessing these services. While coaches believe in sports as a means towards girls’ empowerment, they have largely not received any kind of training or support to help them to consciously integrate principles that promote girls’ empowerment and positive masculinities as well as principles of inclusivity into their coaching. This is an important gap that can be filled by RTP. Representatives of sports federations also identified the need to train more female coaches and referees to increase women’s representation in sport and to encourage more girls to participate in sports.

Recommendation #3: *Right to Play should provide training and informational materials to female and male coaches at sport clubs to support them to refer girls and boys more effectively to reproductive health and GBV services and to better integrate principles that promote girls’ empowerment and positive masculinities as well as principles of inclusivity into their coaching. Right to Play should also invest in training more female coaches and referees to increase women’s representation in sport and to encourage more girls to participate in sports.*

To operationalize this recommendation, RTP should:

- Provide targeted training and informational materials to female and male coaches at sports clubs to help them to better encourage and support boys and girls to access information and services on reproductive health and GBV.
- Sensitize coaches, particularly male coaches, on the barriers that girls and boys face when trying to access available reproductive health and GBV information and services, including feelings of shame and embarrassment as well as fears of breaches in confidentiality.
- Provide training to female and male coaches to better integrate principles that promote girls’ empowerment and positive masculinities as well as principles of inclusivity into their coaching.
- Use pre and post-tests to measure changes in attitudes and capacities of coaches as a result of RTP’s interventions.
- Invest in training more female coaches and referees to increase women’s representation in sport and to encourage more girls to participate in sports.
- Conduct advocacy targeted towards the Ministry of Sports to include information regarding girls’ and boys’ reproductive health rights, how to prevent and respond to GBV, and how to encourage concepts of gender equality and positive masculinities into coaching curriculum.

Engaging Boys and Men

Conclusion #4: Boys and fathers of girls who participate in sports clubs largely demonstrate support for girls’ participation in sports and tend to generally reflect healthy attitudes towards girls’ empowerment. This reflects potential among boys and men to further become advocates of gender equality. However, there appear to be low levels of engagement through formal initiatives among boys and men to advocate for girls’ empowerment and ending GBV. Boys and men also require increased sensitization regarding the types of barriers that girls face when trying to participate in sports or accessing reproductive health and GBV information and services. The fact that many boys and men are interested in encouraging girls’ participation in sports and yet are not well organized to do so provides an opportunity for Right to Play to intentionally engage them in formal activities to advance girls’ empowerment. Men’s Clubs designed to encourage gender equality in the Kolda region (next to the Sédhiou region) can potentially serve as examples of how men’s grassroots organisations that encourage men to become women’s allies can be formed and supported. In addition, community dialogue between girls, women, boys, and men is a common tool in Senegal that can help to increase awareness and understanding among men of women’s concerns and realities.

Recommendation #4: *Right to Play should leverage the largely positive attitudes of boys and fathers of girls from sports clubs towards girls’ empowerment, including their participation in sports, by engaging them in organized activities and formal advocacy initiatives to promote girls’ rights.*

To operationalize this recommendation, RTP should:

- Provide sensitization and training to boys and fathers of girls from sports clubs on the types of barriers that girls face when trying to participate in sports or accessing reproductive health and GBV information and services, as well as how they can become stronger advocates of girls’ rights and better allies of girls and women, including with respect to ending GBV.
- Engage boys and fathers of girls from sports clubs in organized activities and formal advocacy initiatives to promote girls’ empowerment, including their participation in sports.
- When designing organized activities and formal advocacy initiatives for men to support girls’ empowerment, document and draw on the examples of Men’s Clubs designed to encourage

gender equality in the Kolda region (next to the Sédhiou region) as well as community dialogue initiatives that encourage open dialogue between girls, women, boys, and men. These good practices should be documented and shared in order to promote men’s engagement.

Addressing Social Norms and Engaging Families and General Community Members

Conclusion #5: Social norms regarding socially acceptable behaviour and activities as well as expected roles for girls remain an inhibitor to achieving gender equality and girls’ empowerment across the Ziguinchor and Sédhiou regions. These norms remain particularly conservative in Sédhiou due to strong Islamic beliefs that confine girls to specific roles and hinder their ability to participate in all sports. Even so, FGDs with girls, mothers, and grandmothers suggest that social norms are quickly changing and are becoming more conducive to empowering girls and encouraging their participation in sports. This presents an opportunity for Right to Play to leverage these changing circumstances to further encourage girls’ empowerment, especially through sport. While there is evidence of community dialogue initiatives in some communities to challenge social norms and promote more understanding between girls, boys, women, and men, there appears to be limited formal organizing among community members to promote gender equality and girls’ empowerment. This presents another gap to fill and opportunity for Right to Play to support the development of concrete initiatives at the community level to promote girls’ participation in sports as well as gender equality and girls’ rights.

Both girls and their parents explained in FGDs that there is also a need to improve communication between children and their parents so that children can turn to their parents for information on their reproductive health as well as for support if they experience GBV. In fact, girls explained that family members (particularly husbands, brothers, and uncles) are often the perpetrators of GBV, suggesting that a programming focus on addressing intimate family dynamics and encouraging openness and dialogue at home could be beneficial to tackle this problem.

Recommendation #5: *Right to Play should place a strong programming focus on changing social norms with respect to girls’ empowerment and their participation in sports, which should include engaging community members in formal initiatives to promote girls’ empowerment as well as activities that promote greater openness and dialogue between children and their parents.*

To operationalize this recommendation, RTP should:

- Develop positive messaging strategies that target girls, boys, parents, and wider community members that leverage existing momentum within communities around changing social norms that support girls’ empowerment.
- Support community dialogue initiatives between girls, boys, women, and men to challenge social norms and promote girls’ empowerment, including through their participation in sports.
- Engage community members in organized activities and promote formal community organizing that encourages girls’ empowerment and their participation in sports.
- Design project activities that aim to improve communication between children and their parents in order to encourage more openness and dialogue at home so that children feel more supported when seeking information on their reproductive health rights as well as reporting GBV.

Developing Sports Infrastructure

Conclusion #6: Sports clubs across the Ziguinchor and Sédhiou regions struggle to provide adequate infrastructure to facilitate girls’ and boys’ participation in sports. Many sports clubs are little more than a dirt field and do not have running water or adequate sanitation (i.e. bathrooms). In addition, sports clubs often lack necessary sports equipment and participants often lack essential gear such as shoes and jerseys. Consequentially, there is little physical adaptation done to sports club facilities to facilitate children with disabilities or to ensure that clubs are inclusive to sub-groups of vulnerable children. The general lack of infrastructure across sports clubs is also a major safety concern for children, with many girls and boys highlighting the need to improve sports infrastructure in order to ensure a safe environment. The overall lack of suitable infrastructure is a major factor hindering girls’ participation in sports and will need to be addressed by the project. However, improving infrastructure is an expensive task and any investments made by the project to improve the infrastructure of sports clubs should be carefully considered and prioritized to ensure the greatest possible value for money.

Recommendation #6: *Right to Play should invest in improving and maintaining the infrastructure of sports clubs across the Ziguinchor and Sédhiou regions by targeting elements that reflect strong value for money such as the provision of basic sports equipment, the creation of sex-disaggregated bathrooms (and the provision of menstrual hygiene management kits for girls), and access to potable drinking water.*

To operationalize this recommendation, RTP should:

- Invest in providing basic sports equipment to clubs across the Ziguinchor and Sédhiou regions.
- Support the creation of sex-disaggregated bathrooms and the provision of menstrual hygiene management kits across clubs to encourage girls’ participation in sports.
- Support the provision of potable drinking water across clubs so that participants can access safe drinking water while participating in sports.

Supporting Marginalized Children including those with Disabilities

Conclusion #7: Sports clubs across the regions of Ziguinchor and Sédhiou are largely not adapted or sensitized to the needs of children with disabilities, making it challenging for children with disabilities to participate in sports. Some children with mild to moderate disabilities participate in sports clubs but their disabilities are not formally identified by the clubs and little to no adaptations to club infrastructure or coaching techniques are done to encourage inclusivity of children with disabilities. While most children with disabilities who participated in the baseline survey indicated that they felt emotionally safe within the club environment, fewer felt physically safe. There is considerable scope for the project to support clubs in making their facilities safer for children with disabilities and for greater inclusivity to be integrated into coaching techniques. Other sub-groups of vulnerable girls and young women who require access to sports include girls who are pregnant, who are divorced or widowed, and who have experienced trauma or physical disabilities due to the regional armed conflict. These girls often experience heavy stress levels and are in need of the physical and social outlets provided through sport to relieve this stress. However, very few if any sports clubs provide activities targeted towards these groups.

Recommendation #7: *Right to Play should support sports clubs to adapt their facilities and coaching approaches to promote greater inclusivity of children with disabilities as well as sub-groups of vulnerable girls such as those who are pregnant, divorced, or widowed.*

To operationalize this recommendation, RTP should:

- Support sports clubs to collect data on participating children with disabilities in order to better understand their needs and priorities. This should be done in a way that does not put the children with disabilities at risk of stigmatization or any unintended negative consequences.
- Provide targeted investment to sports clubs to help modify their facilities to improve the physical safety of children, including those with disabilities.
- Support sports clubs to offer special activities to children with disabilities.
- Sensitize sports clubs on the importance of engaging children with disabilities in sports and support them to integrate inclusive coaching practices and engage in outreach among communities to try to increase the number of children with disabilities who participate in the clubs.
- Sensitize sports clubs on the importance of engaging vulnerable sub-groups of girls such as those who are pregnant, divorced or widowed, or who have experienced trauma or physical disabilities due to the regional armed conflict and provide materials and training on how to design sports activities that can engage and benefit these groups.

Developing Partnerships

Conclusion #8: As the project develops, Right to Play will actively engage strategic partners to support it in implementing its work plan. Stakeholders who the project plans to partner with include sports federations and institutions, media outlets, government representatives, and CSOs already working on gender equality. To make its programming as relevant as possible, the project will need to tailor its support to meet the most pressing needs of its partners to help them become stronger allies in promoting girls’ empowerment. Needed support includes facilitating the certification of female coaches and referees; training media personnel on the importance of covering girls’ participation in sports as well as investing in resources to facilitate media personnel to better cover girls’ sports; supporting dialogue between girls and government representatives to adapt government policies and services to better respond to the needs of girls and young women; and helping CSOs to use girls’ participation in sports as a means towards girls’ empowerment. In addition, while RTP has not specifically identified Peer Youth Groups and Girls’ Clubs as project partners, they are quite actively involved in promoting girls’ empowerment and already have links to sports clubs as well as experience organizing dialogue sessions. There are therefore opportunities for Right to Play to engage these actors as strategic partners to leverage their existing work as well as facilitate dialogue between girls and government officials.

Recommendation #8: *Right to Play should provide targeted support to its strategic partners based on their needs and priorities to help them become better advocates for girls’ empowerment and participation in sports, as well as consider partnering with Peer Youth Groups and Girls’ Clubs to leverage their existing work and facilitate dialogue between girls and government officials.*

To operationalize this recommendation, RTP should:

- Invest in the certification of female coaches and referees.
- Provide training to media personnel on the importance of covering girls’ participation in sports as well as invest in resources (such as live streaming of girls’ sporting events, articles focused on girls in sports, etc.) to facilitate media personnel to better cover girls’ sports.
- Partner with Peer Youth Groups and Girls’ Clubs to organize dialogue sessions between girls and government representatives in order to adapt government policies and services to better respond to the needs and priorities of girls and young women.

- Provide sensitization and training sessions to CSOs to help them to better integrate girls’ participation in sports into their programming as a means towards furthering girls’ empowerment.