



COMPASS Research Brief DRC

Background

Over three years (2014 - 2017), the IRC are developing, implementing and evaluating the COMPASS programme (Creating Opportunities through Mentoring, Parental Involvement and Safe Spaces). This programme identifies, acknowledges and responds to the vulnerabilities of adolescent girls by establishing a foundation for their healthy transition into adulthood in humanitarian crises. Seeking to improve prevention and response to violence against girls, activities include: safe space programming such as life skills training and asset building; mentoring activities with older adolescent girls; and engagement with service providers and caregivers to better prioritise and meet the needs of adolescent girls. In the DRC, the COMPASS programme is taking place across 14 sites in South Kivu, targeting adolescent girls aged 10-14. The IRC is partnering with Columbia University to conduct research in the first cycle of the programme, with research questions that address gaps in existing evidence and best practice, and emphasise the importance of understanding not only whether the programme is effective, but also how, why and under what conditions it works.

Study Design in DRC

The study examines the relative impact of the parenting initiative in addition to the safe space programming for adolescent girls, that is, whether the structured intervention with girls' parents increases positive outcomes for girls' safety and well-being. The research will focus on unpacking the programme to determine which components, or combination of components, have the most impact, as well as addressing additional questions of acceptability, processes of change and best practice.

The randomised controlled trial includes two arms; during the first cycle of the programme girls and caregivers will receive (i) only the basic package of services, which includes life skills education and access to mentors in safe spaces, or (ii) the basic package plus a structured parenting intervention for girls' caregivers. Groups in the first arm of the study will receive the parenting intervention in the second cycle, ensuring all girls and parents/caregivers have full access to the benefits of the programme.

Methodology

A mixed methods approach will be used, with most data collection occurring at baseline and endline, plus a qualitative assessment at the intervention midpoint. Quantitative research will be conducted with a minimum 880 girls (440 girls from each arm of the study)¹, and 880 primary caregivers. Qualitative research will be conducted with at least 44 girls and 34 parents or caregivers.

Quantitative survey methods will be used to evaluate attitudes towards a host of topics related to physical and psychological assets and health-related behaviours. Survey questions will be administered using tablet computers programmed with Audio Computer Assisted Self-Interviewing (ACASI) and Computer-Assisted Personal Interviewing (CAPI). ACASI is particularly well-suited to research on sensitive issues because respondents complete the survey independently without the need for an interviewer.

Qualitative methods will include in-depth semi-structured interviews and focus group discussions with girls, their parents and caregivers and mentors, as well as participatory methods with girls to assess topics such as self-esteem, empowerment and resilience. The use of participatory methods is particularly effective for eliciting girls' views on topics which they may be less comfortable discussing in an interview or focus group discussions. Participatory methods used include mapping and ranking activities.

Ethical and Safety Considerations

IRC and Columbia University take the safety and wellbeing of research participants extremely seriously. Informed consent will be obtained at the beginning of the study by trained researchers from girls, and/or parents or guardians depending on age and marital status. Participants may withdraw from the study without affecting their participation in the programme. All enumerators are female and from the local communities, and undergo strict vetting and training on confidentiality, child protection and referral procedures.

Research Dissemination and Uptake

IRC and Columbia University will disseminate research findings through engagement with local, national and international programme and policy fora, and issue research briefings and academic articles to engage the wider humanitarian community.

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¹ Sample calculation based on power of 80%, alpha at the 5% level of significance and a design effect of 2.0, plus 25% anticipated attrition