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 Pakistan, the COMPASS programme is taking place across 9 sites in Jalozai camp and host communities in and around Peshawar, targeting adolescent girls aged 12-19. The IRC is partnering with Columbia University to conduct research in the second 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 Pakistan
IRC’s programming with adolescent girls is in its infancy in Pakistan. Due to this and other factors including security concerns, IRC and Columbia University will not be conducting an impact evaluation rather a randomised single group baseline and endline survey, extensive qualitative research and robust programme monitoring. The study focuses on the feasibility and acceptability of safe space programming in this setting, as well as processes for change (including girls and their families perceptions, how girls experience and respond to the programme, and unintended consequences) and best practice.

Methodology
The study assessment will employ a mixed methods approach with most data collection occurring at baseline and endline. The target sample size will be inflated to at least 225 (comparing the outcomes of the 225 girls in the pre-test to the outcomes of the same 225 girls in the post test) to account for an anticipated 25% non-response rate due to attrition. Quantitative survey methods will be used to evaluate attitudes towards a host of topics related to physical and financial assets and health-related behaviours. Survey questions will be administered by trained enumerators. This data will be combined with robust programme monitoring data in order to draw out key areas for learning. Qualitative methods will include in-depth semi-structured interviews and focus group discussions with girls, their family members 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 at any time 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.

Further information: Sophie Tanner, International Rescue Committee s.tanner@rescue.org