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Assessment of Girls Attending School in Sindhupalchok

November 2015

Executive Summary

As an attempt to assess girls' overall needs and challenges in the aftermath of the earthquake, People in Need (PIN) partnered with Her Turn (HT), a girls protection program delivered in schools, to conduct a survey of over 1,000 girls in 11 schools in Sindhupalchok district across seven VDCs: Chautara, Ichok, Kiul, Petku, Thampalkot, Thulopakhar, Thumpakhar. The respondents were on average aged 14, and girls between the ages of 12 and 16 comprised over 90% of the sample. Among the schools surveyed, roughly half of the respondents had attended Her Turn's empowerment workshops. In addition to the survey, school data collection, focus group discussions (FGDs) and key informant interviews (KIIs) were conducted with girls, female community health volunteers, and school staff in all locations.

Key findings:

- Overall, 5% of girls reported that neither their mother nor father was currently living with them, and of these girls 31% reported that they were only living with a “non-relative” – potentially putting them at higher risk of sexual and gender based violence (SGBV).
- In eight schools from which the data was collected, average attendance was 7 students lower after the earthquakes for primary school and 8.5 students lower for secondary school compared to before the earthquakes. Attendance did not decrease across the board; rather, some schools had higher attendances after the earthquake than before. In two schools, there were over 20 fewer girl students attending school on average after the earthquake, while the average attendance of boys had increased. Substantial differences were recorded between schools where Her Turn was implemented, and those where it was not – please see below for details.
- While 94% of girls reported that they were receiving the same amount of food as their siblings and other family members, over 60% of girls reported eating less than normal during the time of assessment and 40% of girls had reported going to sleep hungry on average 2.3 days within the past month. During FGDs, girls' food insecurity was reported due to the loss of food stocks during the earthquake.
- Overall, 67% girls reported feeling most unsafe when they are working either in the forest or field, followed by 48% feeling unsafe during menstruation and 44% feeling unsafe while changing their clothes.
- Verbal harassment of a friend was the type of violence most frequently reported in the survey and was reported by 22% of girls. An additional 7.1% and 2.4% of girls



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reported a friend's sexual harassment or rape. According to these responses, Janajati girls reported higher rates of violence experienced by their friends; most significantly, verbal harassment, which was reported by 26% of Janajati girls compared to 19% of Brahmin/Chhetri girls and 18% of Dalit girls.

- Across all types of violence, Brahmin/Chhetri girls reported the lowest rates of violence and Dalit girls reported sexual harassment at a rate six times higher than Brahmin/Chhetri girls (1% compared to 6.6%.)
- Overall, 9% of girls perceived having been at risk of child marriage and another 16% perceived having been at risk of trafficking. Janajati girls were more likely to report that they had been at risk of both trafficking (12%) and child marriage (19%) than Brahmin/Chhetri (16% and 5% respectively) and Dalit girls (13% and 5% respectively).
- While 88% of girls stated that they had access to toilets, the type and condition of toilets was not included in the survey and 19% of girls reported that they felt unsafe when using the bathroom. Out of 12% of respondents who have no access to toilets, as many as 48% feel unsafe using toilet, compared to only 15% of girls who do have access to toilets.
- Brahmin, Chhetri (41%) and Dalit girls (32%) more frequently reported sleeping elsewhere during their periods because of cultural practices related to menstruation. Her Turn girls were also 7% less likely than non-Her Turn participants to report sleeping somewhere else during menstruation.
- Reports of having experienced rape are strongly correlated with girls who reported sleeping elsewhere during menstruation. According to survey responses, girls who slept elsewhere during their periods were more than twice as likely to report they had been raped since the earthquake – 4% compared to 1.7%.
- Two of the eleven schools surveyed lacked gender segregated toilets for girls and an additional four had only one gender segregated toilet for girls. There were two schools where none of the toilets had locks and additional four schools where there were no water taps for drinking and hand washing.



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Introduction & Overview of Her Turn

PIN in collaboration with Her Turn conducted a study of adolescent girl students in Sindhupalchok district – one of the most affected by the earthquakes. The aim was to assess the needs and experiences of adolescent girls in the post-earthquake setting in reference to their safety, access to education, health, and food security. The findings will be used to inform the future implementation of the Her Turn program as part of PIN's broader protection programming.

Out of over 1,000 respondents, 43% have participated in Her Turn workshops prior to the earthquake. The program works with rural adolescent girls and consists of 23 sessions that cover basic health and safety issues, confidence building and leadership skills development. As part of the program, the girls also propose and implement a community project to make their school safer or more girl or child friendly through a conditional cash grant provided through the program. At the end of the program, the girls plan their own community awareness event about issues that they have identified as the most important according to their contexts. The program also works with school staff to sensitize them to girls' specific needs and support the creation of a more child friendly learning environment in schools. While the survey was not designed to evaluate the impact of the intervention and the questions are not necessarily indicators of the program's impact, it provided an opportunity to assess if there were long term impacts along this basis. Relevant differences between program participants and non-participants are presented below.

Assessment Methodology & Demographics

As an attempt to assess girls' needs and challenges across several sectors, PIN partnered with Her Turn to conduct a survey of 1,002 girls in 11 schools in Sindhupalchok district across seven VDCs: Chautara, Ichok, Kiul, Petku, Thampalkot, Thulopakhar, Thumpakhar.¹ The questionnaire (Appendix A) was designed to assess girl specific challenges and aimed at gathering initial key data that could be used to design follow up surveys and interventions. The survey was administered between August 31st and September 12th 2015 in schools, among girls who attend grades 6-10. The enumerators were all women in order to ensure that girls felt comfortable discussing the issues and completing the survey. The enumerators read and explained the questions one by one and the girls recorded the answers on the sheets provided. Enumerators instructed the respondents that they could leave any questions blank if they did not understand or did not want to answer. Responses did not include any personal data and the girls were told that the surveys were anonymous. Because enumerators did not want to interfere with the school schedule and because the respondents were young, the length of the survey was limited and the language of the questionnaire was kept simple and informal. Enumerators were trained and equipped with

¹ Purposive sampling from a homogenous group was used for this assessment.

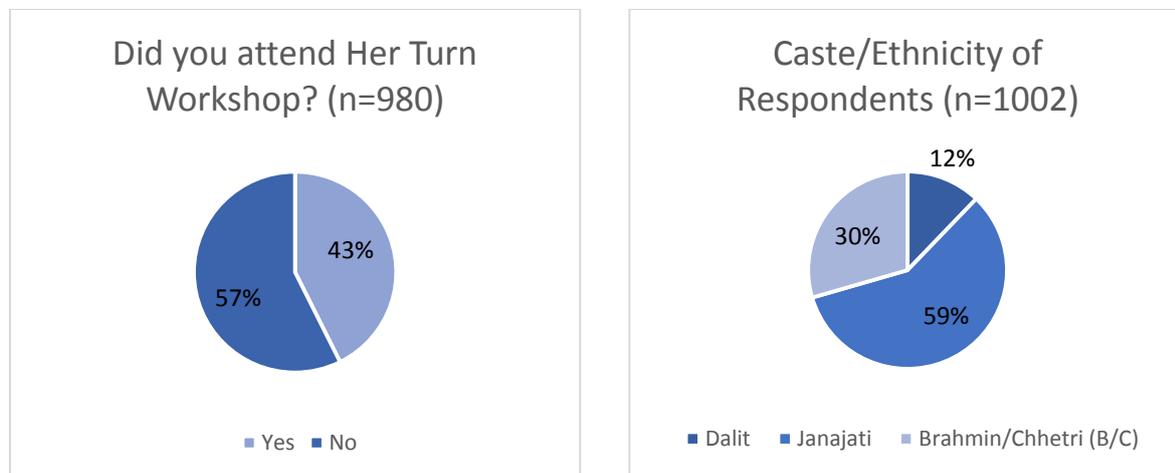


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referral information in the event that any of the girls wanted to access services or to formally report any incidence of SGBV. Non-responses to questions were omitted from the analysis and account for the change in the overall number of responses (n).

The survey was complemented by key informant interviews and focus group discussions. Overall, 13 focus group discussions with total of 122 girl students and 33 key informant interviews with school teachers and principals were conducted on the impact of the earthquake. This was also accompanied by an evaluation of facilities and interviews with school staff. The survey team and school staff recorded attendances of boy and girl students during three random days before and after the earthquake, and the number of available toilets, toilets with locks, and gender segregated toilets before and after the earthquake.



Responses were also divided according to whether respondents had or had not attended Her Turn workshops prior to the earthquake. The survey was not designed to evaluate the impact of the intervention, but to examine the needs and experiences of adolescent girl students in the post-earthquake context; however, it also provided an opportunity to assess if there were differences along this basis. Among the sample, 43% of the respondents had previously participated in the program and 57% had not. Anytime disaggregation either from caste differences or from the Her Turn intervention produced substantial differences in the results, they are presented below.

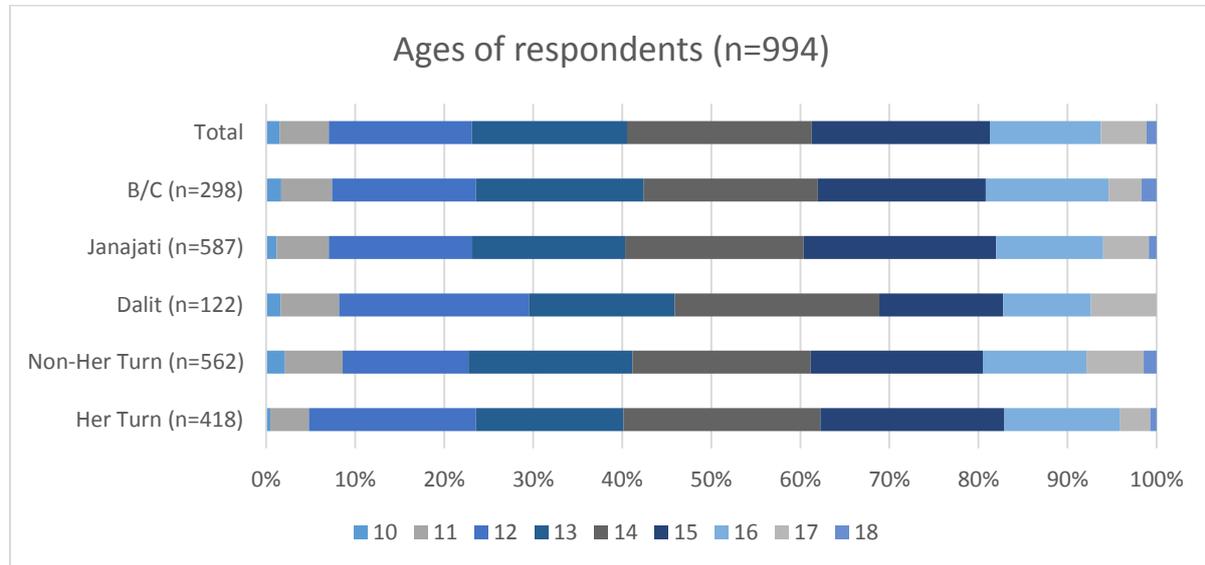
The respondents were on average aged 14 and girls between the ages of 12 and 16 comprised over 90% of the sample. The survey was able to capture each major caste/ethnic grouping from the sample VDCs. Some of the respondents did not answer certain questions, and their responses were excluded from the analysis (e.g. related to menstruation, either because the question was not applicable (girls who do not yet menstruate), they did not understand the question or because they declined to answer). More sensitive questions related to experiences of violence or menstruation received fewer responses overall. In addition, 5% of the respondents reported a disability and 1% reported that they were



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married. The following table contains a breakdown of respondents by age, the presence of Her Turn intervention and by caste/ethnicity:



The survey was conducted across a range of VDCs, but because the sample group was attending school, it should not be interpreted as a representative assessment of all adolescent girls' needs but rather of the needs of adolescent girls *currently attending school*. Other researches on girls who are not attending school highlight that they comprise a highly vulnerable group that lacks access to information, services, and are more likely to be at risk of various forms of SGBV.² PIN hopes to incorporate this population in further surveys, but due to time and resource constraints they were not targeted within this assessment.

Shelter and Cohabitation

“Before earthquake it was easy change our pads and clothes because there was a separate room, but now we are all living in same room and it is difficult to change. We wash menstruation clothes at the tap when there are no men around.” ~ Girl from FGD

“The largest problem we have experienced is changing our pads (because of the lack of privacy) and it is difficult to sleep because we all have to sleep in one room.” ~ Girl from FGD

PIN believes the current shelter status of adolescent girls has an impact on their vulnerability to violence and several questions regarding shelter conditions and cohabitation were included in the questionnaire. Of 983 respondents, the vast majority are still living in emergency and temporary shelters; 82% reported that they were currently staying in

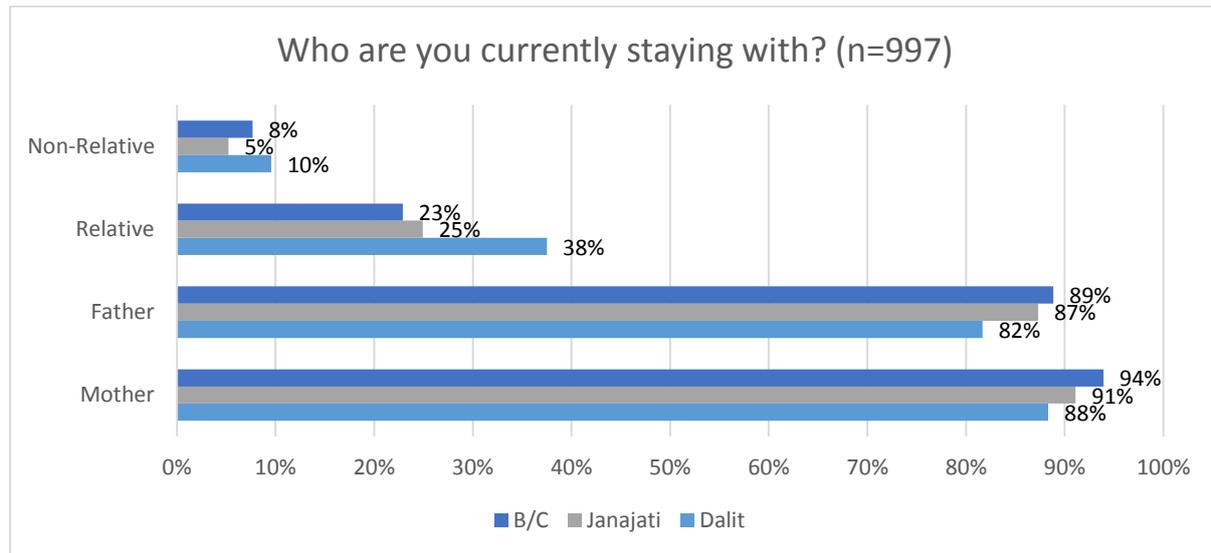
² Child Marriage Factsheets, International Center for Research on Women (2007)



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CGI/tin shelters and another 14% reported that they were staying in tarpaulin shelters. Dalit girls were more likely to be living in tarp shelters (16%) compared to Janajati (12%) and Brahmin/Chhetri girls (10%); most likely due to a difference in socioeconomic factors.



In terms of current cohabitation, girls were asked whether their mother, father, relative, or a “non-relative” was staying in their shelter. Dalit girls were somewhat less likely to be living with their mother or father and more likely to be living with a relative or “non-relative”. Overall, 5% of girls reported that neither their mother nor father was currently living with them, and of these girls 31% reported that they were only living with a “non-relative” – potentially putting them at higher risk of SGBV. These girls should be targeted in future assessments and programs.

Education: School Conditions, Attendance, Drop Outs

“In the beginning we did not feel like eating, playing or bathing. We could not concentrate in our studies. We felt upset often without any reason.”~ Girl from FGD

“School dropouts have increased and girls are going to India for work.” ~Secondary School Principal

“One girl from class 10 eloped and got married. Her step-mother was cruel towards her so she eloped.” ~Girl from FGD

During field visits to schools, enumerators collected basic details on the current WASH facilities in each school. Unsurprisingly, all of the eleven schools had fewer functional toilets for boys and girls, with and without locks, after the earthquake compared to the situation prior. There were also fewer water taps for students to drink from and wash their hands. Two of the eleven schools surveyed lacked gender segregated toilets for girls and an

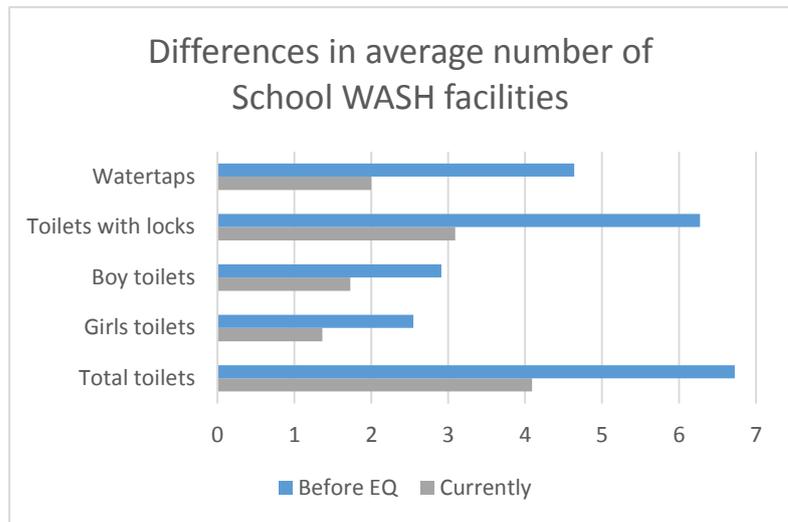


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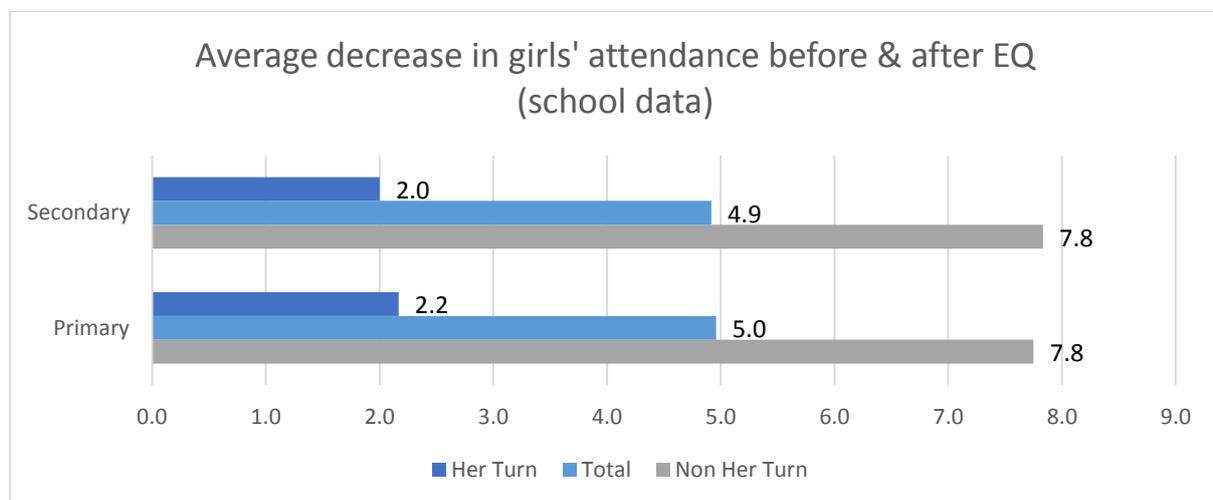
additional four only had one gender segregated toilet for girls. There were two schools where none of the toilets had locks and an additional four schools where there were no water taps for drinking and hand washing.

Enumerators also recorded attendance rates of primary and secondary school students, disaggregated by gender, for three random dates before and after the earthquake in eight of the 11 schools. Unfortunately, three schools lost their attendance records from before the earthquake and could not provide data to compare with post-earthquake.



According to the differences between three days of attendance before and after for eight schools, on average attendance was 7 students lower for primary school and 8.5 students lower for secondary school. Attendance did not decrease across the board; rather, some schools had higher attendances after the earthquake than before. In two schools, there were over 20 fewer girl students attending on average after the earthquake, while the number of male attendances increased.

There were significant differences in girls' attendance between schools where Her Turn was delivered before the earthquake and those where it was not, namely more girl students were attending schools where the program had been conducted. At the primary level, there were on average 2.2 fewer girls after the earthquake compared to before on a random day in a Her Turn school, compared to 7.8 in a non Her Turn school. For the secondary level, there were 2 fewer and 7.8 fewer girls respectively.



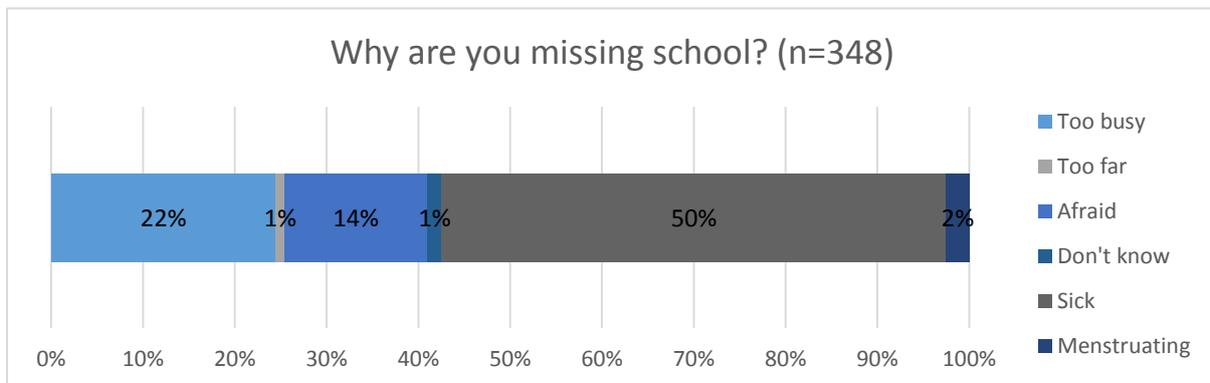


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The survey found that on average girls spent around 30 minutes walking to school, though some had to walk up to two hours to reach their schools – whether this time increased or decreased since the earthquake was not assessed. However, respondents did report that there were on average 1.11 girls and 0.98 boys missing from their class since the earthquake. This roughly matches the change in average attendances across entire school populations. Before the earthquake, students reported to having missed on average 2.12 days a month; since the earthquake the self-reported average number of days that girls missed a month was only 1.84. It is unclear why this number may have decreased, albeit marginally, though some teachers mentioned that organizations had provided supplies to children which encouraged parents to send them to school.

In terms of determining why girls missed school days, a majority of girls listed that they were too sick to attend school. The high rate of reported illness may be due to a lack of access to health care, insufficient WASH facilities or potentially related to food security. Illness as a reason for absence was more frequently reported by Janajati girls (69%) compared to others (50%). Other reasons were girls’ heavy chore load; many girls reported that their chores increased since the EQ (however, the overall average decreased from 157 minutes per day to 132 minutes per day). This could be due to a loss of productive assets in households, such as livestock which children often collect fodder for on a daily basis, or



from a disruption of other livelihood/agricultural activities. Another significant reason was because the girls were “afraid” or menstruating. In this respect, only 1% girls who participated in the Her Turn program reported they were too afraid to attend school compared with 22% of girls that did not receive the program.

Food Security

“In poor families girls are not getting enough food, they received relief but it is about to finish.” ~Female Teacher

“We are getting the same amount of food as our family members, but we don’t feel like eating.” ~Girl from FGD

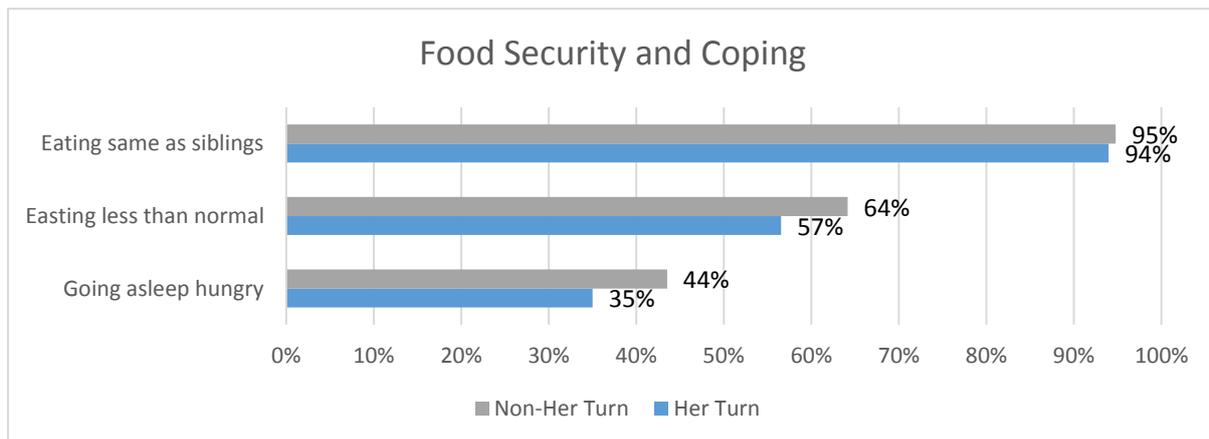


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"Right after earthquake, people from community were living together in shared tents. They didn't have proper utensils or required food materials for large number of people and they were scared to go inside the house to cook separately so they had less food." ~Girl from FGD

Food security in Sindhupalchok is currently a major problem. According to Food Security Cluster assessments conducted right after the earthquake, many VDCs in Sindhupalchowk were highly food insecure and in some areas the situation was reportedly deteriorating further.³ A central concern for PIN was whether girls were disproportionately food insecure. While 94% of girls reported that they were receiving the same amount of food as their siblings and other family members, over 60% also reported eating less than normal and 40% reported going to sleep hungry on average 2.3 days within the past month. This was partially attributed to food lost during the earthquake during FGDs.



There were minor differences (3-4%) in these statistics between caste/ethnic groups, and the most significant differences were noticed between girls who had participated in the Her Turn program and those who had not. While both groups reported eating the same as their siblings, Her Turn girls were less likely to have gone to bed hungry (35% vs 44%) and less likely to be eating less than normal (57% vs 64%). This may be because empowerment based interventions encourage girls to advocate for their needs and the inclusion of healthy eating practice and nutrition in the curriculum; however, these differences can also stem from various levels of food security in assessed VDCs or communities among other factors.

Insecurity Mapping

"When everybody stayed in same tent or room, it was difficult for girls to change and men were trying to look at them indirectly and seemed interested" ~Girl from FGD

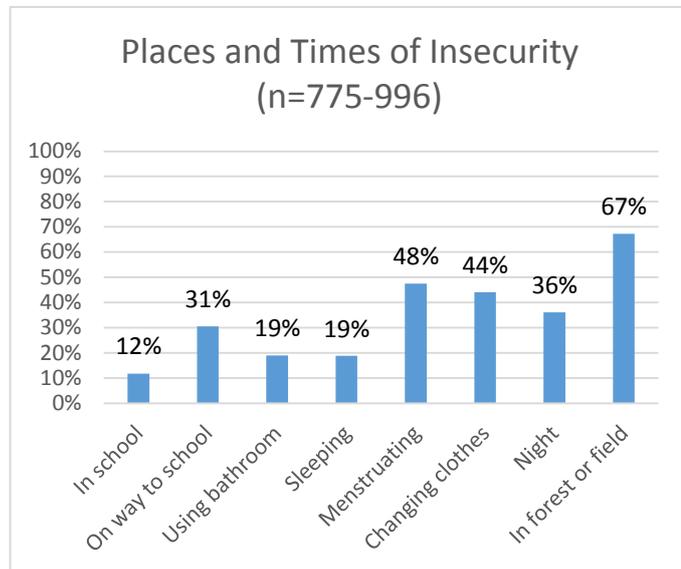
³ Sindhupalchok District Food Security Bulletin, Ministry of Agricultural Development Food Security Monitoring Unit and World Food Programme Food Security Monitoring and Analysis Unit, July 2015



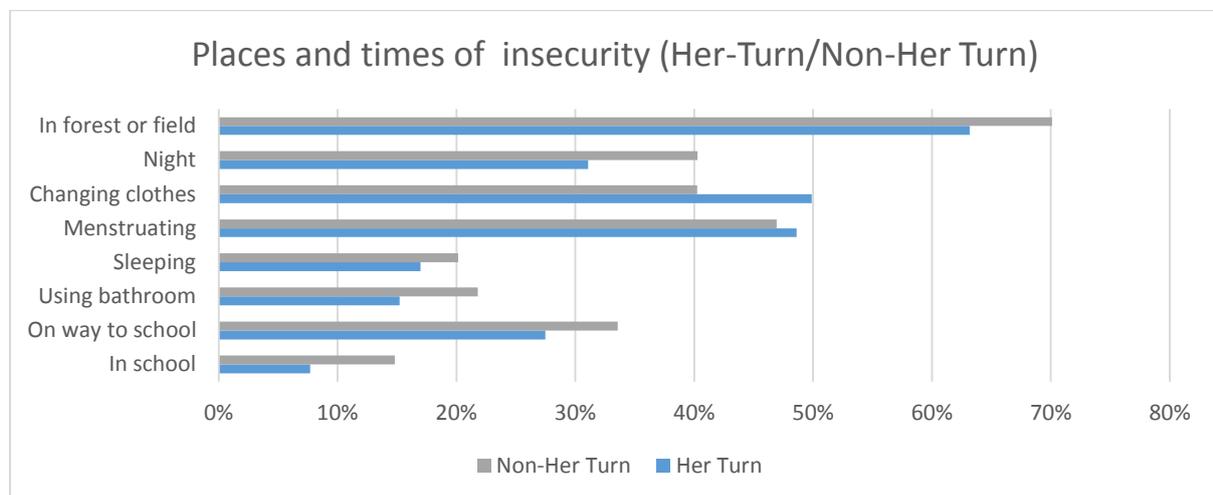
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In order to assess the insecurity according to different places and times of day, girls were asked whether they felt safe or unsafe in different situations such as in school or on the way to school. Overall, 67% girls reported feeling most unsafe while they were in either the forest or field when performing chores; followed by 48% who reported feeling unsafe during menstruation and 44% who reported feeling unsafe while changing their clothes. The lack of safety while changing clothes or during menstruation is most likely a result of the girls' current shelter situation where they are forced to share limited space without much privacy. While the questionnaire did not determine why the girls felt unsafe, during focus group discussions girls shared that lack of privacy is a major concern and a source of insecurity – men using a lack of privacy in shelter as an opportunity to spy on girls changing was reiterated by many girls within FGDs.



The lack of safety while changing clothes or during menstruation is most likely a result of the girls' current shelter situation where they are forced to share limited space without much privacy. While the questionnaire did not determine why the girls felt unsafe, during focus group discussions girls shared that lack of privacy is a major concern and a source of insecurity – men using a lack of privacy in shelter as an opportunity to spy on girls changing was reiterated by many girls within FGDs.



While there is some variability in girls' reporting of safety according to caste and ethnicity of the respondents, there are no significant trends or differences between the caste groups. However, when Her Turn participants are compared with girls who did not attend the Her Turn workshops, girls who were part of the intervention reported feeling safer in each instance except while changing and during their menstruation. The most significant differences were during night time, while in school and while using the bathroom. An additional 6% of girls reported that there was a person or group of people in their



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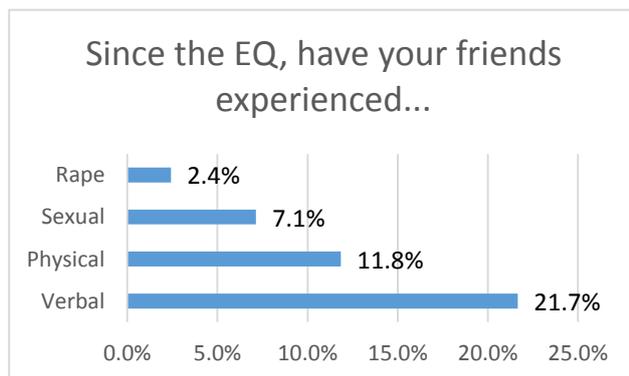
community that made them feel unsafe – most often this was reported to be boys or men in their community.

Experience of Violence since the Earthquake

“The money people received as relief has been used to buy alcohol; even the ones who couldn’t afford it before are now able to buy it. Drinking among men has increased as they don’t have as much work as before, and this can invite violence.” ~Female Community Health Volunteer

“There are incidents of trafficking; there is an increasing trend for girls aged between 13 and 25. Parents are responsible for it and they encourage it themselves after seeing other girls sending money to their family monthly. They couldn’t afford to send girls to school and by sending girls [abroad for work] they will have money. The broker doesn’t pressure them, but parents give pressure to broker to manage and send the girl. Afterwards, they also tip the broker.” ~Secondary School Principal

One of the main purposes of this assessment was to try to determine the perceptions of the rates of SGBV since the earthquake. While our assessment examined girls’ self-reported experiences of verbal, physical, sexual harassment, and rape, there is no comparative data to indicate whether these rates increased or decreased since the earthquake. Nevertheless, girls were first asked



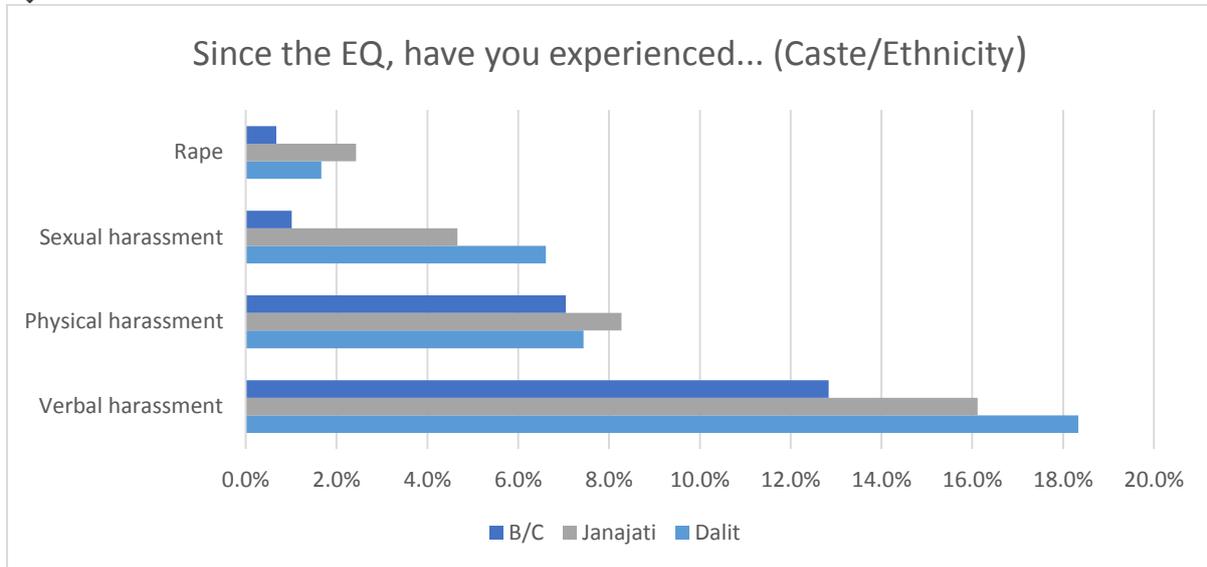
whether any of their friends had experienced any of the four types of SGBV (verbal, physical, sexual harassment, and rape) and then whether they themselves had experienced them. The enumerators also explained what constituted each of these categories.

Verbal harassment of a friend was the most frequently reported type of violence and was reported by 22% of girls. An additional 7.1% reported their friends had been sexually harassed and another 2.4% of girls reported a friend’s rape. According to these responses, Janajati girls reported higher rates of violence experienced by their friends; most significantly, verbal harassment, which was reported by 26% of Janajati girls compared to 19% of Brahmin/Chhetri girls and 18% of Dalit girls.

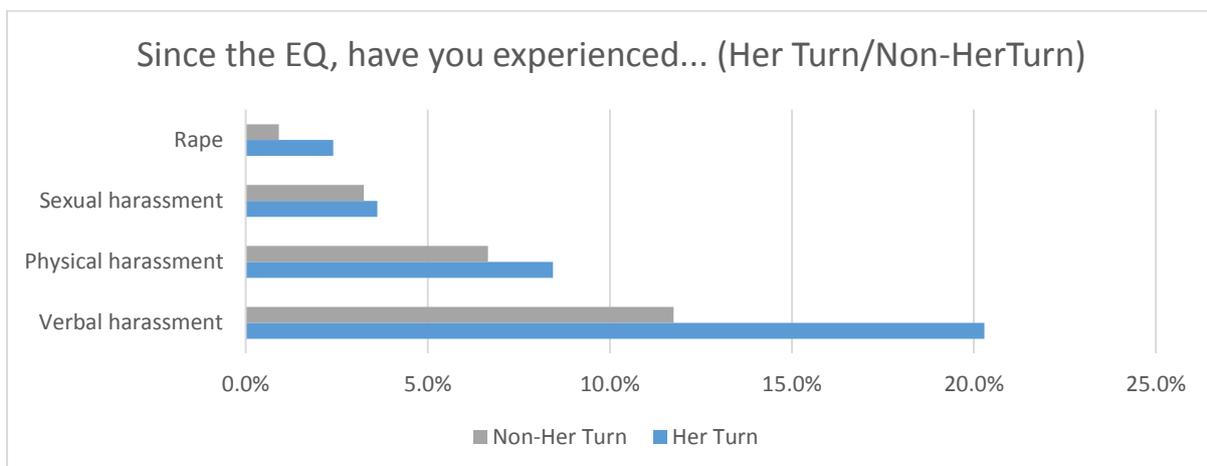


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In terms of self-reported violence, participants reported in the survey substantial levels of all forms of violence. It is important to keep in mind that reporting rates are always below actual rates of violence⁴ and that girls not attending school might be more susceptible to violence but are not captured in this survey. Across all types of violence, Brahmin/Chhetri girls reported the lowest rates of violence and Dalit girls reported sexual harassment at a rate six times higher than Brahmin/Chhetri girls (1% compared to 6.6%). This could be due to higher rate of SGBV against and among lower caste groups, but it can also possibly be partially attributed to cultural factors, for example differences in social norms around defining and reporting various forms of SGBV between these groups. Overall 1.6% of girls reported rape, however reporting rates varied significantly not only according to caste but on the basis of whether they had participated in the Her Turn workshops:



⁴ This is due to the shame and stigma attached to being a survivor, the lack of awareness of laws and reporting procedure surrounding SGBV, and other factors.



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As is evident, Her Turn participants were more likely to report on the survey any form of violence. In certain schools where the program had been implemented, reporting rates for rape were as high as 5%. This may be due to a wide range of factors addressed through the intervention that encourage girls to speak about, and ask for support when they are victimized. Again it is important to note that the above represent reporting rates in our survey and do not imply that any of the groups are more or less vulnerable – only that their willingness to report such violence through our methodology was correlated with their participation in the workshops. Furthermore, while it is impossible to say that rates of violence have increased following the earthquake (as is often assumed), these reports do confirm that violence against girls is occurring at a significant rate in the aftermath of the earthquake – most likely at higher rates than what is reported above.⁵

Risk and Coping

“Nowadays girls are misbehaving. They use attractive, transparent cloths and they try to distract and entertain by dancing. Because of this, they have faced more violence. To be safe girls have to more careful in how they dress and improve their behaviour.” ~Secondary School Principal

“Girls and women in the community are more at risk of violence after the earthquake. The temporary housing doesn’t have proper locks and doors and households with no male members are also at risk.” ~Girl from FGD

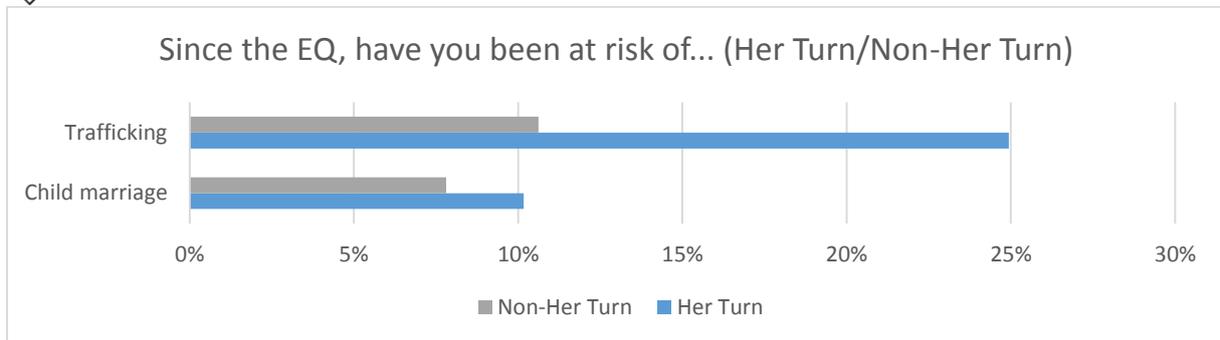
In addition to girls’ experiences of violence, the survey attempted to determine girls’ own perception of risk. Overall, 9% of girls reported having been at risk of child marriage and another 16% reported that they had been at risk of trafficking. Janajati girls were more likely to report that they had been at risk of both trafficking (19%) and child marriage (12%) than Brahmin/Chhetri (16% and 5% respectively) and Dalit girls (13% and 5% respectively). This information further confirms the prevalence of these issues within Tamang communities of Sindhupalchok, who have historically had high rates of trafficking and child marriage. However, an even greater difference between perceptions of risks can be seen between Her Turn girls and non-Her Turn girls, in both instances Her Turn participants were more likely to perceive that they had been at risk of trafficking and to a lesser extent, child marriage.

⁵ See “Her Safety” People in Need (2015) for a longer discussion of the perceived rates of SGBV prior to the earthquake and how this has changed.

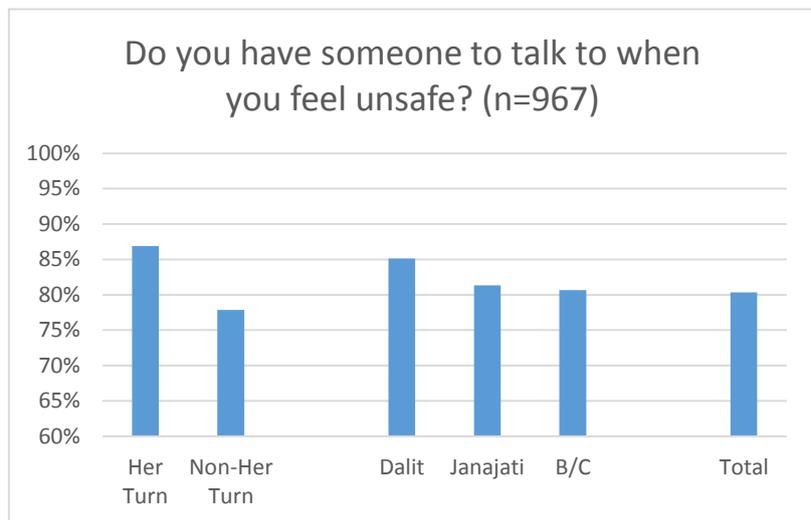


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In terms of girls’ resilience towards violence, respondents were asked whether they had someone to talk to when they felt unsafe, whether they had a friend to share their problems with, and whether they had an adult to share their problems with. Overall, 80% of girls reported that they had someone to talk to when they felt unsafe. An additional 82% of girls reported that they had a friend to share their problems with and 76% reported that they had an adult to share their problems with; however, neither can be seen as a definitive indication of whether girls would report their experiences of SGBV or potential risk of victimization to either their friends or a trusted adult.



Menstrual Hygiene and Practice

“We have problems using the toilets at school when we menstruate. We do not have separate toilets for girls at school and we don’t have a place to throw away our pads... it would be easier for us if we have a separate toilet and water at school” ~ Girl from FGD

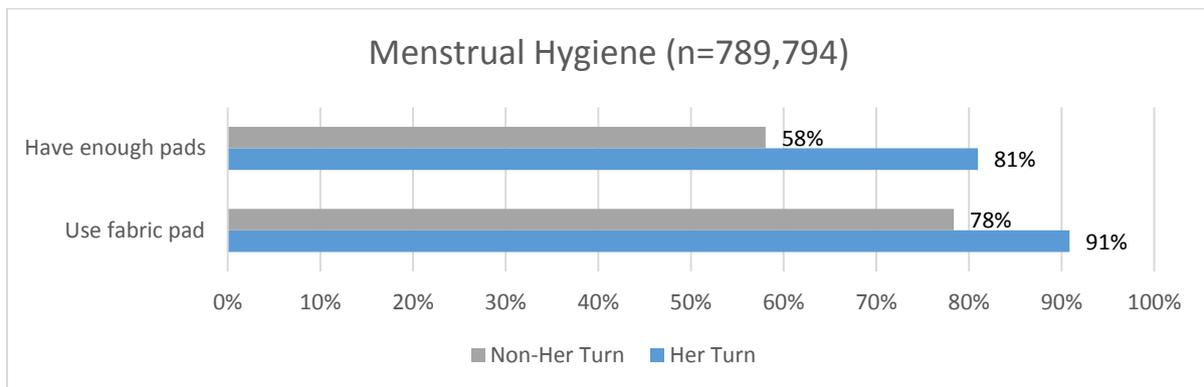
Because menstruation was reported as a time when girls feel most unsafe, respondents were asked several basic questions about their menstrual hygiene practices and access to hygiene items. The majority of girls use fabric pads or clothing during their menstruation and the differences below are due to the fact that immediately following the earthquake, Her Turn and PIN collaboratively distributed basic menstrual hygiene kits containing soap, towel, underwear, and reusable menstrual pads to girls in schools where the project had been implemented. However, based on the responses of girls who did not receive “Her



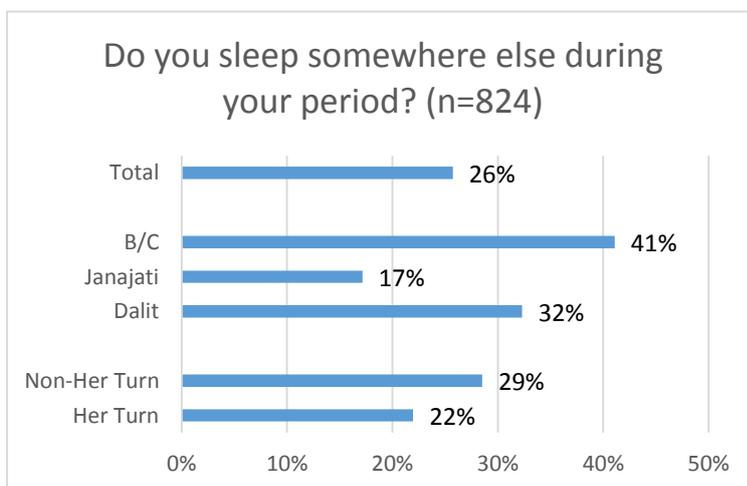
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Kits,” it appears that over 40% of girls reported not having enough pads or hygiene materials during their menstruation. Dalit girls were again less likely to use fabric pads (80% compared to 85% of Brahmin/Chhetri respondents), and less likely to report having enough menstrual hygiene materials (63% compared to 70%). An overwhelming 95% of girls reported that they wash their pads after every use – suggesting proper menstrual hygiene practices are followed. However based on this reporting, PIN suggests education and WASH sector actors continue to assess whether women and girls’ hygiene needs have been met even after several months of emergency.



Most girls, 88% reported having enough soap and the same number also reported having access to a toilet. Once again, fewer Dalit girls reported that they had enough soap (84%) compared with Janajati (88%) and Brahmin/Chhetri girls (90%), and girls from the Her Turn demographic also had better access to soap (92% compared to 85%). While 88% of girls stated that they had access to toilets, the type and condition of toilets was not included in the survey and it is important to note from earlier that 19% of girls reported that they felt unsafe when using the bathroom. These two were correlated: out of 12% of respondents who have no access to toilets, as many as 48% feel unsafe using toilet, compared to only 15% of girls who do have access to toilets.



Following the earthquake, there has been much uncertainty over what menstrual practices prior to the earthquake would be affected given the changes in shelter and in almost all other areas of life. A key concern is whether girls and women are required to sleep elsewhere during their menstruation – a practice related to perceived impurity of menstruating

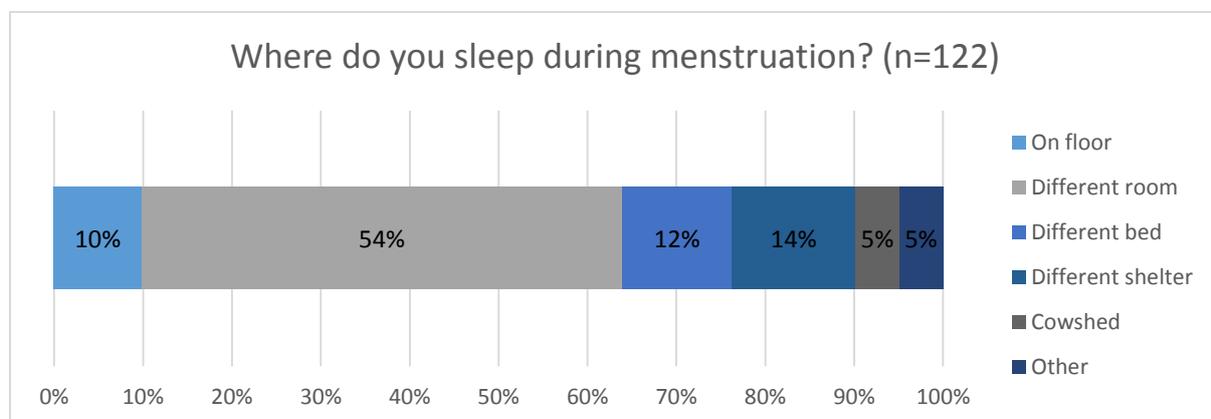


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women and girls – and where. As part of the assessment, girls were asked whether they slept somewhere other than where they would normally sleep during their menstruation.

Evidently, Brahmin, Chhetri and Dalit girls reported at higher rates that they slept elsewhere during their periods, whereas Her Turn girls were 7% less likely to report sleeping somewhere else. It is important to note that sleeping in a different location is not the only practice observed for menstruating women and girls in Nepal, that it is not necessarily an indicator of vulnerability and that such practices are not wholly rejected by women and girls within communities. For this reason, we examined the responses of girls who reported that they slept elsewhere during menstruation:



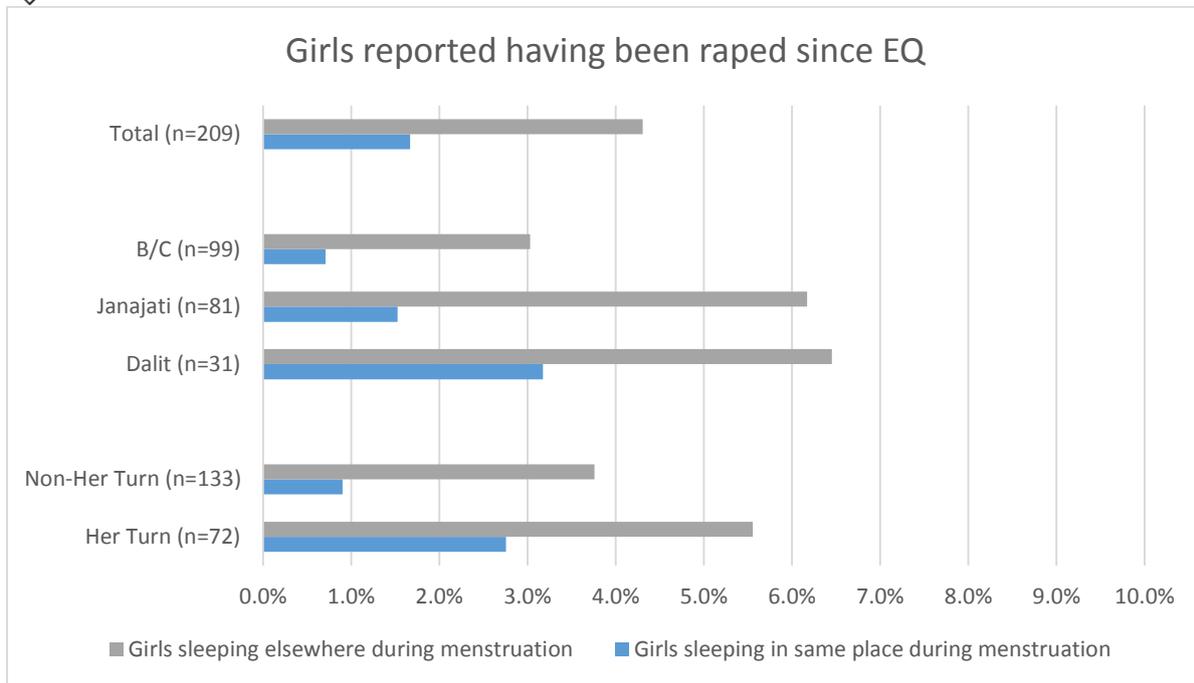
Three quarters of the girls who sleep in a different place during their menstruation reported staying within the same shelter, either sleeping on a different bed, in a different room, or on the floor. From our survey, it was unclear whether the 54% of respondents who slept in a different room were also sleeping separately from female members of their family or alone, and whether the girls felt or had experienced violence during this time at a higher rate. The assessment however did find that 52% of girls reported feeling unsafe during their menstruation, and of 198 girls who reported sleeping elsewhere during their period 60% said that they felt unsafe during their menstruation. This suggests that sleeping somewhere else, regardless the location, is linked with an experience of insecurity. Of additional concern are the 31% of respondents who reported to sleep outside of their shelter during their menstruation – oftentimes with relatives or friends.

Reports of having experienced rape are correlated with girls who reported sleeping elsewhere during menstruation. According to survey responses, girls who slept elsewhere during their periods were at least twice as likely to report rape through our survey. The number of responses for girls who slept elsewhere during their menstruation is listed next to each group:



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This does not prove that girls sleeping elsewhere are more likely to be raped as a result of cultural practices surrounding menstruation, but points to a correlation between these two. There is also qualitative data⁶ supporting evidence that women who sleep outside or somewhere else during the menstruation are more vulnerable to SGBV – sometimes two to three more times likely to report victimization. However, while the reports of rape are different between girls following a menstrual restriction that requires them to sleep elsewhere, other reports of SGBV captured in the survey, verbal, sexual and physical harassment, were not higher for any of the above demographics.

Recommendations

The recommendations were discussed and finalized during a workshop with representatives of various stakeholders, including NGOs, INGOs and the relevant UN agencies.

- Adherence to SPHERE standards across all sectors by all actors, would address many of the key insecurities identified by respondents in this report. SPHERE standards specify internal subdivisions in shelters, provision of menstrual hygiene materials, and access to lockable and separate toilets. Adherence to these standards should be required and encouraged by clusters and monitored through clusters’ monitoring and evaluation tools.
- Schools provide an excellent medium for targeting girls and boys with programs that address adolescents’ insecurities and other risk factors. These types of interventions

⁶ See “Field Bulletin. Chaupadi In The Far-West.” United Nations Resident and Humanitarian Coordinator’s (2011)



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can have a long term impact across sectors while addressing the immediate needs of program participants. Boys and girls who have dropped out should be included in these interventions as well because they are more vulnerable to various forms of violence.

- The capacity of schools to address protection issues (child marriage, trafficking) needs to be developed. Typically, school staff knows the communities well, are respected, and could potentially play an important role in prevention efforts.
- Schools can be linked with service providers and CBOs (Mothers Groups, Female Community Health Volunteers) who know the communities well and can help monitor and address issues affecting girls (early drop out, child marriage, trafficking). These actors' capacity to monitor and respond should be developed so their work is informed by other service providers and is in line with basic principles and guidelines, such as privacy and confidentiality.
- Schools should be sensitized to girls' needs and adhere to laws and standards of child friendly learning environment. Parents and communities should be empowered and encouraged to hold the schools accountable in terms of quality of education and creating safe learning environment.
- Girls' and boys' attendance in different schools across districts should be monitored as a way to track whether the emergency is exacerbating the number of girls and boys currently dropping out of or leaving school early. Such monitoring can allow for protection actors to better target their interventions, identify risk factors, and serve as an indication of protection needs.
- Boys and men should be included in prevention and response programming, as well as research. Boy and men also fall victim to SGBV and because of gender related social norms presumably struggle more with reporting and seeking help. Service providers should be sensitized to the needs of girls, women, boys and men.
- Menstrual Hygiene Management is one of the biggest challenges the girls identify due to lack of privacy, cultural factors such as notions of impurity, and a related increased vulnerability to violence. To mitigate related risks, provision of relevant materials and knowledge essential in programmatic response, including in WASH and WASH in schools interventions.
- Guidelines and standards for non-state SGBV service providers need to be enforced and service providers should be trained and monitored to ensure that they are complying with all relevant national and international guidelines.
- A multi-purpose help line, accessible from each phone network that links to relevant service providers for cases of child marriage, trafficking, and other forms of GBV is highly needed. This will increase participants' overall access to information and services and allow protection cluster actors to track and monitor referrals. In order to accomplish this, better coordination between service providers on all levels is required.



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Appendix 1 – Survey Questionnaire

Were you a part of Her Turn training?

Did you hear about Her Turn training from your friends?

1. Are you staying with your mother?
2. Are you staying with your father?
3. Are you staying with other relatives?
4. Are you staying with people who are not your relatives?
5. Are you Dalit?
6. Are you Janajati?
7. How old are you?
8. What class do you study in?
9. Do you have a (apanga) disability or are you injured?
10. Are you married?
11. If yes – how old were you when you got married? If no – skip this question
12. How many minutes does it take you to walk to school?
13. How many girls in your class are no longer coming to school at all after the earthquake?
14. How many boys in your class are no longer coming to school at all after the earthquake?
15. How many days of school did you miss a month before the earthquake?
16. How many days of school did you miss this last month?
17. Why are you missing school?
18. When you menstruate, do you use fabric menstrual pads?
19. If not, what do you use?
20. Do you have enough pads / menstrual materials to manage your period?
21. How often are you washing your menstrual pad since the earthquake?
22. Do you have soap to wash your hands/body?
23. Did you have access to a toilet before the earthquake?
24. Do you have access to a toilet now?
25. How many days have you been too sick to do work/attend school in the past month?
26. In the past month, has there been a time when you went to sleep hungry because there was no food for you to eat?
27. If yes, how many days? If no, skip this question.
28. In the past month, have you been eating less than you did before the earthquake?
29. Do you receive as much food as your siblings and other family members?
30. Where are you sleeping?
31. Are there people other than your family sleeping in your shelter?
32. Are you sleeping somewhere else when you have your period?
33. If yes, where? If no, skip this question.
34. How many minutes of chores per day did you have before the earthquake?
35. How many minutes of chores per day do you have now?



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Do you feel safe or unsafe when (give an answer for each)

36. Travelling to school
37. When using the bathroom
38. Sleeping
39. During menstruation
40. Changing clothes
41. At night
42. Forest / Field

43. What are the three biggest things that make you feel unsafe? (First - most unsafe)
44. What are the three biggest things that make you feel unsafe? (Second)
45. What are the three biggest things that make you feel unsafe? (Third)
46. Is there a person or a group who makes girls feel unsafe in your village?
47. If yes, who? If no, skip this question.

Since the earthquake, have any of your friends experienced...

47. Verbal harassment
48. Physical violence
49. Sexual harassment (inappropriate touching)
50. Rape

Since the earthquake, have you experienced...

- | | |
|--|-------------------------|
| 51. Verbal harassment | If yes, how many times? |
| 52. Physical violence | If yes, how many times? |
| 53. Sexual harassment (inappropriate touching) | If yes, how many times? |
| 54. Rape | If yes, how many times? |

Have you or anyone you know been at risk of

55. Child marriage
56. Human trafficking
57. Do you have someone to talk to when you feel unsafe?
58. Do you have a friend you can trust and share your problems with?
59. Do you have an adult you trust and can share your problems with?