

Summary

As part of a multi-intervention Gender-Based Violence (GBV) prevention project, UN Women and partners adapted and implemented SASA! Together, a community mobilisation approach, in 12 communities in 3 districts of Bangladesh. Materials for the first two phases (Start and Awareness) were translated into Bangla and adapted for the local context. In each village, the project set up Community Activist Groups (CAGs) and Community Leader Groups (CLGs). CAGs met monthly and CLGs met quarterly and both groups also led community activities and stakeholder dialogues. However, implementation diverged from the recommended SASA! Together approach due to administrative delays, adaptations due to the COVID pandemic and limited financial resources to implement with the recommended intensity. Nonetheless, community members have clearly valued this intervention, and there is potential to build on this experience either to continue to fully adapt, pilot and implement SASA! Together in these communities or to develop a fully localised intervention inspired by SASA! Together.









Introduction

The Combatting Gender-Based Violence (CGBV) project (2018-2023), funded by Government of Canada, aimed to prevent gender-based violence against women and girls (VAWG), including the most marginalised, at home, at school, in workplaces and public spaces. UN Women and partner organisations, WE CAN and Christian Aid — and their local level partners - worked in three districts with a diverse public and private institutions to create an enabling environment for violence prevention, as well as directly with men, women, family members and communities. UN Women and partner BLAST also worked at national level to advocate for and influence policies and laws to promote women's rights and prevent VAWG. The project comprised multiple interventions designed to address the underlying drivers of VAWG and to support duty bearers to comply with international and national obligations to address VAWG and promote gender equality.

At a community level, alongside implementing a family-based approach based on Sammanit Jeevan in Nepal,¹ the CGBV project adapted the SASA! Together community mobilisation approach to the Bangladesh context. The <u>SASA! Together programme</u> was developed by Raising Voices in Uganda to prevent and respond to violence against women and HIV through supporting communities through a comprehensive process of social change focused on interrogating unequal power dynamics between women and men. It uses a core strategy of community activism with sustained activities to support neighbours, friends, relatives and family members to use their power positively to change gender attitudes, behaviours and norms and create safe, violence-free communities for women.

This learning brief documents key learnings from the adaptation and implementation of SASA! Together in 12 communities in Bogura, Pataukhali and Cumilla as part of the CGBV project. It is based on a review of project documents, interviews with project partners and stakeholders and a brief field visit to two implementation communities in June 2022. It shows that, as a result of delays, largely due to the COVID pandemic, limited resources and partner capacity, adaptation and implementation of SASA! Together has been partial. Nonetheless, project participants clearly valued the interventions and wanted them to continue. The brief identifies valuable lessons for the future implementation of SASA! Together in Bangladesh and other contexts.



Photo: UN Women/Amy Reggers, 2019

¹ See the accompanying CGBV Learning Brief "Adapting a family-based intervention in Bangladesh: Shomman O Shomotar Jeebon"

CGBV Bangladesh: Why SASA! Together?

Initial scoping work in the project target districts highlighted the importance of addressing gender-inequitable norms, attitudes and behaviours as a key approach to preventing VAWG.² Based on international evidence, "whole of community" mobilisation interventions were identified as a relevant approach, especially those that are "respectful of and rooted in community perspectives, deliver positive versus blaming messages, and thoughtfully move in a step-by-step manner through stages of change."³ In this respect, SASA! Together, a community mobilisation intervention developed by Raising Voices in Uganda was identified as a promising approach, based on the positive SASA! Together study results and successful adaptations to multiple contexts globally. The UN Women therefore decided to adapt SASA! Together, an updated version of the original SASA! Together Intervention launched in 2020, to Bangladesh.

SASA! Together consists of four phases:

- **START:** Identification of community activists (CAs), community leaders (CLs) and institutional allies (Als) who spend time exploring community norms about violence against women, begin their journey of deepening their **power within** to make changes in their own lives and start engaging others in the community.
- **AWARENESS:** CAs, CLs and IAs through respective strategies of Local Activism, Community Leadership and Institutional Strengthening use a variety of provocative and interactive. Activities to encourage a critical analysis of men's **power over** women and the community's silence about this.
- **SUPPORT:** More and more people engage with CAs, CLs and IAs who are learning new skills and joining their *power with* others to support women experiencing violence, couples trying to change, and activists speaking out and holding men who use violence accountable.
- **ACTION:** CAs, CLs and IAs lead efforts to support community members' **power to** take action and sustain change for years to come solidifying new norms in which VAW is never acceptable and women can live safe, fulfilling and dignified lives.

An impact evaluation (Randomised Control Trial)⁵ of SASA! Together in Kampala, Uganda (2007-2012) demonstrated that SASA! Together could create community-level change in programmatic timeframes, including a significant reduction of acceptance of physical intimate partner violence in heterosexual relationships and an actual reduction in women's experience of physical IPV from their male partners (women's risks of physical IPV was 52% lower in SASA! Together communities compared to control communities).

² Naved, RT., Taluker, A. and Mustary. T. (2019) Scoping Study: A qualitative Study on Violence Against Women in Six Villages from three districts of Bangladesh. Published by UN Women, Dhaka. May 2019

³ UN Women (2018) Project Document: Combatting Gender-Based Violence (CGBV) Project.

⁴ UN Women (2019) Effective Approaches to Preventing Violence Against Women (VAW): Research in programmes and interventions preventing gender-based violence in Bangladesh. April 2019; UN Women (May 2019) CGBV strategy and implementation plan; UN Women (July 2019) CGBV Prevention Strategy. UN Women, Dhaka;

⁵ Abramsky, T. et al (2014). "Findings from the SASA! Study: A cluster randomized controlled trial to assess the impact of a community mobilization intervention to prevent violence against women and reduce HIV risk in Kampala, Uganda." BMC Medical 12(122).

CGBV Bangladesh: The SASA! Together Adaptation process

The process of adapting SASA! Together was initially delayed due to a change in implementing partner. In March 2020, UN Women engaged WE CAN Bangladesh (Amari Pari Jot) to implement the community mobilisation, family-based and tertiary education institution-based interventions in the three districts. UN Women also contracted Raising Voices, the Ugandan NGO who designed SASA! Together to support and training for the adaptation and implementation of SASA! Together.

Shortly after WE CAN was on boarded, the Bangladesh Government announced the first lockdown due to the COVID pandemic. This had significant impacts for the adaptation and implementation of SASA! Together. In a situation of lockdown, in June 2020, UN Women delivered the initial training in the SASA! Together approach online to WE CAN and its community implementing partners DRISTI (Cumilla) and SUVO (Patuakhali). This was impeded by both format and connectivity issues and partners found it difficult to grasp the approach. Therefore, Raising Voices delivered a follow up online training to all partners in late 2020.

The adaptation of the SASA! Together materials followed this. UN Women and WE CAN followed the adaptation process of material contextualize as per technical guidance of Raising Voices by ensuring that the illustrations, materials, activities were appropriate for the implementation communities. This adaptation drew on the results of the project baseline survey in the 12 target communities. The main materials adapted in this phase were the SASA! Together Power Posters. Raising Voices, WE CAN and UN Women all participated in reviewing the adapted materials which took several months. Adaptations were also shared with other organisations implementing SASA! Together in Cox's Bazaar (UNFPA/BRAC, UNHCR). Following this, the AWARENESS guide was translated in Bangla and the illustrations were adapted in mid 2021. The majority of the materials were not tested in the communities due to time constraints, although some feedback on the illustrations was incorporated.



CGBV Bangladesh: Implementation of SASA! Together

The SASA! Together approach is based on working with three groups of individuals at community level: Community Activists (CAs), Community Leaders (CLs) and Institutional Allies (IAs), each of whom receives training and engages in a process of personal reflection around gender norms and men's power over women, start to make changes in their own relationships and engage with community members to encourage reflection, dialogue and wider change.

⁶ Naved, R.T., Al Mamun, M., Parvin, K., Alam Siddique, A. (2019) A Baseline Study on Combatting Gender-Based Violence (CGBV) Project. icdrr.b for UN Women Bangladesh.

- In mid-2020, WE CAN recruited 20 Community Activists and 20 Community Leaders per community and formed one Community Activist Group (CAG) and one Community Leader Group (CLG) in each of the 12 communities.
- WE CAN did not establish a separate Institutional Allies Group, as per the SASA! Together approach; instead the CLG consisted mainly of community/traditional/religious leaders with some service providers integrated.
- In the START phase, only the Community Activists received the START phase training; Community Leaders did not receive any training; in the AWARENESS phase, only Community Leaders received training; Community Activists did not receive training.
- In both the START and AWARENESS phases, the CAGs as small groups organised the community activities (small actions) rather than Community Activists individually. In the START phase, each of the 12 CAGs had 6 monthly sharing sessions (72 total by 240 CAs) and organised one small community action as a CAG (12 total). In the AWARENESS phase, each of the 12 CAGs undertook 8 monthly sharing sessions (108 total by 240 CAs) and organised 2 small community actions (24 total).
- This was the same approach for the CLGs who did activities as a group. In total 24 community monitoring meetings and 3 stakeholder dialogues were undertaken by 240 leaders in the START phase and 48 community monitoring meetings and 12 stakeholder dialogues in the AWARENESS phase.
- There were 6 staff members (1 man, 1 woman per district) responsible for 12 CAGs (240 CAs) and 12 CLGs (240 CLs) and these same 6 staff members were also responsible for the separate family-based intervention as well as the work with tertiary institutions.

Analysis of adaptation and implementation

There is growing evidence in the VAW prevention field, that the details and quality of implementation are key factors in determining whether programmes are successful in producing change and reducing the prevalence of VAW. This can explain why programmes based on an evidence-based model may not replicate the same success in future iterations.⁷ The table below provides a comparison of the main implementation elements recommended in the SASA! Together model and the CGBV adaptation in Bangladesh. The most notable differences include:

- Initial training for staff members from WE CAN and partners Dristi and Suvo was very limited under conditions of lockdown and with initial orientation training conducted online.
- The key community agents community activists and community leaders did not receive the full recommended training for each phase in Bangladesh.
- The frequency of NGO staff meetings with community activists was lower in Bangladesh (monthly not two-weekly).
- In Bangladesh, Community activists and Community Leaders implemented activist and leadership activities as small groups (CAG or CLG) rather than individual as recommended.

⁷ Jewkes, R., Willan, S., Heise, L., Washington, L., Shai, N., Kerr-Wilson, A, Christofides, N. 2020. *Effective design and implementation elements in interventions to prevent violence against women and girls. What Works* To Prevent VAWG? Global Programme Synthesis Product Series. South African Medical Research Council, Pretoria.

- The ratios of staff to community activists and leaders in Bangladesh were much lower than recommended (3-4 times lower and they were in charge of a second family-based intervention SOSJ).
- The scale of the Bangladesh project was quite large covering 12 villages (each with an average population of 12000 people) across 3 different districts, which would have had implications was staff presence and ability and capacity to provide mentoring.

Table: Comparison of implementation elements of SASA! Together and CGBV adaptation

	SASA! Together recommendations	Adaptation in Bangladesh
Programme locations	Various implementations of SASA! and SASA! Together but usually have involved a limited number of communities.	12 villages: 4 villages in each of the sub- districts of 3 districts: Dupchanchiya in Bogura, Bauphal in Pataukhali, Chouddogram in Cumilla
Set Up and Training of implementing partners	Recommended 3 months to identify and train staff, communities etc Set up training for staff = 3 days START phase staff training = 3-4 days AWARENESS phase staff training = 3 days	 UN Women delivered initial 3-day Set up training to WE CAN and partners in June 2020 Adaptation consultant delivered START training to WE CAN team in early 2021 Raising Voices delivered AWARENESS phase training for UN Women & WE CAN in March 2022
Community agents	 Community Activists = diversity of women and men from community (approx. 1 CA per 500 people if sparsely populated; 1 CA per 1500 people if densely populated) Community Leaders – male and female formal and informal leaders Institutional Allies (employees and leaders from key institutions and services) 	 1 Community Activist Group (CAG) of 20 CAs per community x 12 communities 1 Community Leader Group (CLG) of 20 CAs per community x 12 communities No institutional Allies group – although CLG included some members of local institutions
Timeframe and Phasing	 START 7 months AWARENESS: 12 months SUPPORT: 7 months ACTION: 7 months 	 START 8 months AWARENESS: 10 months (SUPPORT AND ACTION phases not undertaken in timeframe)

	SASA! Together recommendations	Adaptation in Bangladesh
CA training and meetings	 Initial 3-4-day training on recruitment 3-4-day training at start of START phase 3-day training at start of AWARENESS phase Meeting every two weeks with staff to plan and report on activities, practice facilitating, receive mentoring 	 START: 3 days initial training in April 2021 72 monthly sessions held with CAGs (6 per CAG) AWARENESS: No training at start of this phase 108 monthly sessions held with CAGs (9 per CAG)
CL training and meetings	 Initial 3-day training on recruitment 3-day training at start of START phase 2-day training at start of AWARENESS phase + recommend 3 supplementary trainings Meeting one-on-one meeting with staff and quarterly group meeting 	 START phase: No initial training 24 quarterly sessions/monitoring meetings held with CLGs (2 per CLG) AWARENESS: 2 days training at start of phase in February 2022 48 quarterly sessions / monitoring meetings held with CLGs (4 per CLG)
IA training	 Initial multi-day training on recruitment Multi-day training at start of each phase Meeting each month with staff - set goals, report on progress, receive new materials / activities 	NONE
Number / frequency of CA activities	 Recommend one 2-hour activity per CA per week + submit monthly Activity Plan and report All phases (Power posters, Community Conversations, Deeper discussions) Awareness phase onwards (Bingo games, Community Posters, Drama sketches, Community info sheets) 	 START 12 small actions done by CAG as a group (i.e. 12 activities by 240 people, 1 per community, 12 total) Power posters discussions. AWARENESS 24 small actions done by CAG as a group (i.e. 24 activities by 240 people, 2 per community, 24 total) Power posters, community leaflet, info sheet, community posters

	SASA! Together recommendations	Adaptation in Bangladesh
Number / frequency of CL activities	Recommend one 2-hour activity per CL per week + submit monthly Activity Plan and report • All phases (Leadership Leaflets, Community Talking Points, Social Media, Quick chats, Religious leader activities)	 START 3 stakeholder dialogues total (across all communities) AWARENESS 12 stakeholder dialogues total (across all communities)
Staffing	Recommend (depending on population density) 1 staff member per 15 - 30 CAs 1 staff member per 20-50 CLs 1 staff member per 4-6 IAs 1 full-time Learning & Assessment Officer	6 staff members (3 male, 3 female in total) for 240 CAs and 240 CLs (480 people) i.e. ratio of 1 staff member per 80 community agents
Monitoring and oversight	 Recommend (depending on population density) One Community Assessment Survey (CAS) at start of each phase Regular Institutional assessment surveys Complete the key tracking tools: activity plan and report, activity observation form, community change tracker, institutional change tracker, community FGDs) Ener key data in the tracking database on a monthly basis; analyse quarterly 	 One Community Assessment Survey (CAS) (baseline) in March 2021 (before START phase); One CAS done in October/November 2022 (after AWARENESS phase) Each CAG & CLG had a collective action plan and report which was filled in monthly in the meetings with staff Staff observed sessions and filled in activity observation forms and community change trackers End of START phase, 6 FGDs done with CAG, CLG and community members (2 per district) End of AWARENESS phase, 6 FGDs done with CAG, CLG and community members (2 per district)

Indeed, in 2017, Raising Voices launched a practical guide for organisations wishing to adapt the SASA! Together methodology for their context (see box below). It is based on learning – including from SASA! Together adaptations - that when evidence-based programmes are adapted to new contexts, they are often implemented with low levels of fidelity to the original methodology and thus do not produce the expected results.

Raising Voices: Guidance on Adapting SASA! Together

The <u>Fidelity to the SASA! Activist Kit</u>[®] highlights the <u>importance both of fidelity</u> (delivery of the program as intended) and adaptation (changes to delivery and/or content to ensure a program's contextual appropriateness) of the approach, recommending the adaptation of language (translation), images, material and activities in the toolkit as well as time to test materials and incorporate feedback before implementation. The brief also outlines **four 'essentials' of the SASA! Together approach** that are key to success alongside practical suggestions on how to ensure they are meaningfully implemented:

- 1. A gender-power analysis: At the heart of the SASA! Together approach is supporting women and men to understand and balance power in their relationships, families and communities. The SASA! Together Team and the Community Activists (CA) they train and mentor all spend time critically reflecting on the use of power and violence in their lives before facilitating informal activities to support community members to do the same.
- 2. **A phased-in approach:** SASA! Together is based on the Stages of Change Theory, where individuals first acknowledge a problem; then learn and critically think about the problem; then envisage alternatives and build skills to make a change; and finally, make change and work to sustain it. The Start phase nurtures 'power within', the Awareness phase deepens analysis of men's 'power over' women and community silence about this, the Support phase fosters joining 'power with' others, and Action encourages the use of 'power to' make and sustain positive change.
- 3. **Holistic community engagement:** SASA! Together is based on understanding that changing the social norms which underpin VAW requires engaging community members at the individual, relationship, community and societal levels in order to build a critical mass for change. SASA! Together strategies include communication materials, media and advocacy, training and local activism. Several activities are conducted per week with diverse individuals and groups within these circles of influence.
- 4. **Activism:** The SASA! Together Team selects, trains and mentors equal numbers of male and female CAs representing a diverse spectrum of community members, leaders and service providers. There are several CAs per community, all living within 30 minutes' walk of the community. CAs meet community members in their work places, gathering places and homes for informal discussion, rather than training or formal events. The repeated dialogues around power and VAW start to shift attitudes and behaviours over time. CAs have referral lists with services for survivors of violence and are mentored by the SASA! Together Team from the NGO.

In addition, Raising Voices provides guidelines on the **minimum intensity of programming activities required to achieve change** e.g. at least one dedicated SASA! Together Team staff member per 25 Community Activists (CAs); enough Community Activists (CAs) and Community Action Groups (CAGs) in each targeted community to regularly reach more than 50% of the total population of the community; activities take place several days a week and consistently across target communities. The guidance also stresses the importance of completing all four phases to obtain results, which means that **3-5 years are needed.**

In fact, the initial scoping work for the CGBV project noted this fidelity brief and the findings of the SASA! Together Adaptations Study (box below) and stressed the importance of adapting the model to the new context while maintaining fidelity to core principles, components and methodologies. However, it seems that under the pressures due to COVID as well as administrative, time and budgetary pressures, many of these learnings and recommendations were not able to be implemented as part of the CGBV project in Bangladesh.

⁸ https://raisingvoices.org/wp-content/uploads/2022/01/ProgramBrief2.FidelitytoSASA.RaisingVoices.may2017.pdf

⁹ A later document setting out the rationale for key CGBV intervention strategies also concluded that SASA! Together had potential in Bangladesh. It also highlighted that the updated SASA! approach was new and not yet rigorously tested, especially within a predominantly Muslim, South Asian context like Bangladesh and stated: "Careful consideration of the particularities of the CGBV Project target communities in Bangladesh when adapting the intervention model is crucial to the success of the strategy". See Abualsameed, S. (2021) "Promising and Effective Approaches to Violence prevention. Brief for UN Women Bangladesh". The Prevention Collaborative.

Raising Voices: Learning from SASA! Adaptations¹⁰

Raising Voices conducted a project from 2016-2019 to learn from SASA! adaptations conducted by partner organisations in three diverse settings: Beyond Borders' project in Jacmel town and 4 rural communities in Haiti (2010-2015); IRC's project in the humanitarian setting of Dadaab in Kenya (2012 -2016) and the Women's Promotion Centre's project in a rural setting in Kigoma, Tanzania (2014-2019). The project concluded that SASA! had a strong resonance at the community level across contexts, suggesting the universality of SASA! themes, as well as the usefulness of SASA!'s personalized approach for sparking critical reflection on these topics. The key findings of this project were:

(1) SASA! adaptation processes in diverse settings

- Adaptation is complicated and can add significant time to SASA! implementation
 → Allocate time and financial resources for adapting SASA! into donor proposals and work plans.
- Deciding on appropriate translations in local languages that are easily understood and also consistently reflect the nuance of SASA! concepts (e.g. various types of power) can be challenging.
- Three core ingredients for a successful adaptation process: (i) moving slowly through a step-by-step process (e.g. adapting and implementing one SASA! phase at a time); (ii) taking deliberate actions to test revised versions; (iii) integrating community feedback throughout.

(2) Context-specific implementation strategies

- Initial resistance to SASA!, particularly among some men who misperceived the program as "for women."
 Managing this tension required finding and engaging influential allies (e.g. religious leaders) to promote SASA! within the community.
- Expectations for financial compensation for participating in or facilitating SASA! activities were challenging to manage.
- Challenges in sustaining enthusiasm and commitment among SASA! CAs—the community volunteers who receive training and mentorship and are expected to lead SASA! activities. Thus, need to: Be clear and consistent about CA motivation from the beginning; connect CAs to professional development opportunities; foster personal relationships.
- Some anxiety resulting from perceived need to demonstrate quick progress to donors, including around
 outcomes that were at times misaligned with the SASA! phases (e.g. expecting a shift in the prevalence of
 VAW early on).
- Other external factors particularly elections and political violence negatively affected programming, with the potential for CAs and program staff to appropriate SASA! activities for politicking.

¹⁰ Raising Voices (2018) Learning from SASA! Adaptations in Diverse Contexts: A summary brief. https://raisingvoices.org/wp-content/uploads/2021/12/AdaptationsSASA AllContextsSum.pdf

On this basis, Raising Voices developed a set of tips and tools based on key findings and learnings:

Essentials for Adaptation

- Identify the adaptation modality that is required and feasible for the context; establish a structured process for the adaptation and designate required resources before any SASA! programming begins. Consider both logistical (e.g. printing) and technical (e.g. engaging individuals with specialized expertise) aspects.
- Consider which strategies & activities are most relevant for the context. At a minimum, translate these key
 materials into local language through a multi-step process (e.g. discuss possible translations, test with the
 community and integrate feedback before finalizing) and revise any artwork that may be inappropriate.

Essentials for Quality Implementation

- Ensure organizational support (e.g. commitment to SASA! at the senior management level, dedicated SASA! team in place), secure financial resources for minimum 18 months; ideally 3.5 years of SASA! programming.
- Pre-emptively identify potential areas of backlash and take mitigating steps as early as possible.
- Establish and adhere to recommended ratios of staff and CAs, based on the size and location of communities.
- Develop personal relationships with CAs, use creative strategies to sustain motivation, help them navigate community resistance, and support their personal and professional development in areas beyond SASA!.
- Monitor intended and unintended consequences using the SASA! monitoring and assessment strategy and hold regular sessions to discuss findings and adjust programming accordingly.

Progress against expected outcomes

A baseline study was undertaken in early 2019 by research partner icdrr.b in 24 communities (12 intervention, 12 control) across Bogura, Cumilla and Patuakhali with 1545 women and 1259 men. It was envisaged that the CGBV project will be evaluated through an endline survey at community level with an experimental - randomized control trial (RCT).

A midterm review was conducted by icddr,b in December 2021 to look into the fidelity of the interventions and progress made during the midterm review. In 2022, a light touch learning review of the CGBV was conducted and included a visit to Debkhanda village under Dupchacia Upazila in Bogura district to observe the SASA! Together activity and talk with community activists and field staff. This confirmed the variations from the SASA! Together model summarised above especially in terms of the intensity of activism and leadership activities. Discussions with staff also suggested that there were the insufficient staff to provide proper oversight and quality control on activities implemented at community level. Nonetheless, this visit also demonstrated that community activists, leaders and members were eager and invested in this intervention and wanted to continue.

Conclusions and Lessons Learned

- The adaptation and implementation of SASA! Together as part of the UN Women CGBV project took place under very challenging circumstances including the COVID pandemic of 2020-2022.
- The **initial decision to implement a community mobilisation intervention** and identification of SASA! Together as a suitable approach to adapt were well justified and documented.
- In line with best practice, the **UN Women team engaged the programme originator Raising Voices** to provide technical assistance in adapting SASA! Together.
- Two phases of SASA! Together have been adapted for the Bangladesh context including translation into Bangla and design of the START and AWARENESS guides an d some materials (Power Posters, community leaflet, info sheet, community posters) with images and messages appropriate for the context. Although this adaptation was based on the findings of the baseline survey in the implementation communities, the adapted toolkit materials need to be further tested in communities in order to incorporate feedback before future implementation.
- The human and financial resources allocated for implementation of SASA! Together were insufficient for implementation in 12 communities, reflecting an inadequate understanding by all partners involved of what was required to implement SASA! Together in line with best practice guidance.
- Despite several trainings conducted by Raising Voices and UN Women through online, the partners'
 staff trainings were insufficient to fully grasp the SASA! Together approach and know how of the quality
 implementation.
- The implementation of the START and AWARENESS phase was of limited intensity to remain faithful to the SASA! Together approach: there were a very limited number and range of monthly activism activities.
- The training and mentoring given to Community Activists and Community Leaders in the SASA! approach was lower than recommended as Community Activists only received START training (not AWARENESS) and Community Leaders only received AWRANESS training (not START).
- Implementing partners had insufficient field staff capacity to provide ongoing support and mentoring to Community Activists and Leaders, gather regular feedback from community members and monitor progress from community members and monitoring progress, despite individual staff members of the local level were hard working and dedicated.
- Nonetheless, in a difficult context of the COVID pandemic and inadequate resources, the CGBV project has
 created important assets for the future: two adapted SASA! guides (START and AWARENESS).
- Moreover, **Community Activist and Leader groups have been created in 12 communities** and they, as well as wider community members have greatly valued the interventions so far and are keen to stay involved.
- There are some indications that community mobilisation interventions are appropriate in this context and that the intervention was valued in the target communities.

Overall, this learning review suggests that there **is potential to build on this experience** to continue to fully adapt, pilot and implement SASA! Together – or continue a SASA! Together inspired approach. A recommended approach would be to implement a refresh of the START and AWARENESS phases in these 12 communities based on the lessons from implementation of the first two phases and then follow up with the SUPPORT and ACTION phases, but implemented with greater intensity – and ensuring testing of materials before implementation. However, it is recommended that this to be done as part of a greatly simplified overall project and that adequate human and financial resources be allocated to ensure high quality implementation, capacity development and evaluation.

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