Social Investment Report

A Look at Women for Women International

Prepared for Bloomberg Philanthropies and NoVo Foundation

September 2012
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Approach and Results

In 2009, Bloomberg Philanthropies and NoVo Foundation partnered to make a significant joint investment in Women for Women International to support the economic empowerment of women survivors of war.

These partners engaged KPMG to assist them in better understanding the impact the WfWI program can create for women and girls and identify the leverage points for continued investment in this and similar projects.

KPMG’s assessment primarily consisted of interviews with a sample of program graduates, household members of program graduates, banking officials, community health workers and health center administrators, educators and school administrators, tribal leaders, and a host of other community leaders. Additionally, KPMG reviewed corroborating data such as census records, health center records, community banking data, and school enrollment statistics. The assessment focused on the Funder’s investments in Rwanda and Democratic Republic of the Congo (DRC).

The following information details the results of KPMG’s analysis of WfWI’s work in these countries.

Women for Women International has shown with this investment:

- Significant changes in the attitudes of males toward women
- Greatly enhanced economic opportunities for program graduates and other women in the community
- Enhanced health and wellness for women and their children
- Remarkable decreases in domestic and sexual violence

These changes are attributed to the economic empowerment and gender empowerment of women.
A Look at Women for Women International

**Mission:**
To provide women survivors of war, civil strife, and other conflicts with the tools and resources to move from crisis and poverty to stability and self-sufficiency, thereby promoting viable civil societies.

**Program:**
Women for Women International (WfWI) achieves its objectives by enrolling women in a one-year program comprised of the following stages:

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<th>Creating Awareness</th>
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<td>• Improving women’s access to knowledge about their value and the importance of women’s rights and societal roles</td>
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<th>Promoting Behavior Change</th>
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<td>• Encouraging a woman’s willingness to:</td>
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<td>– Actively make decisions in her family and community</td>
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<td>– Apply knowledge to maintain physical and psychological wellness</td>
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<td>– Form or join women’s and community groups</td>
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<td>– Take advantage of economic opportunities</td>
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<th>Enabling Action</th>
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<td>• Providing opportunities to women to develop personal and group plans for action, which will allow women to become active citizens individually and in solidarity with other women</td>
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**Program Objectives:**
Women gain job skills, receive business training, and are educated about their rights and how to fight for those rights in their homes, communities and nations.
Conclusions

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<th>Health and Wellness</th>
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<td>The WfWI model has had a positive impact on women’s and children’s health for women both directly and indirectly involved in the program.</td>
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<th>Economic Empowerment</th>
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<td>The WfWI model has had a positive impact on the economic situation of women both directly and indirectly involved in the program.</td>
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<th>Gender Empowerment</th>
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<td>The WfWI model has had a positive impact on women’s views of their own empowerment as well as an improvement in the opinions of men toward women.</td>
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<th>Children’s Education</th>
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<td>WfWI model has had a limited, but positive, impact on the education of school children in Rwanda. No direct impact on the education of school children in DRC was noted, but parents are engaging more in their children’s education.</td>
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The WfWI model demonstrated positive impacts for both program graduates and their communities in Rwanda and DRC. The degree of impact varies between the two countries as the program is not implemented in a vacuum. The differences in impact appear to result from two key factors: political will and support of gender equality, and the penetration and reach of the program within a community.

As the findings shared in this report show, what is achieved in an environment that supports and enables women is greater than what is achieved when support and access to services are limited. Not only are investments in programs such as WfWI important, but it is also important to encourage political will to support women’s rights and increase access to care and the provision of health services that can help women be more active participants in their households and the greater economy. There is immediate need for investments in training of community health workers on the benefits of modern family planning methods, increasing women’s access to low-cost contraception and improving women’s access to sustainable cooperatives. A greater challenge is increasing political will to improve access to the economy by investing in infrastructure, creating areas of safe passage for women and encouraging the development of markets closer to areas of production.
The interviewers asked program graduates if they noticed any changes in the attitudes of male members in the community toward them or other women since the program began. Program graduates noted a substantial improvement in the attitudes of male members of the community toward women since the program began in their community. To understand the basis for their responses, the interviewers asked the program graduates to specify the reasons for any positive change. Program graduates felt the change was due to their improved ability to earn an income and contribute to supporting the household. Program graduates also felt strongly that their newly gained self-respect and understanding of their rights contributed to the improved attitudes of men.
The interviewers asked program graduates if they noticed whether other women in the community, who did not participate in the program, experienced benefits from it. The interviewers asked the program graduates to detail the specific secondary benefits. Based upon responses received during these interviews, the program is having a significant secondary impact in the community, with 83 percent of women interviewed reporting noticeable secondary benefits going to non-WfWI program participants. These benefits are offered through expanding cooperatives beyond program participants and sharing information regarding health and wellness practices. The program graduates interviewed listed secondary benefits such as economic empowerment, gender empowerment, and health. Based on the interviews with the program graduates, their families and community leaders, KPMG noted a significant economic “ripple” effect as other women in the community are learning from program graduates, who are now viewed as role models in the community.
Survey Results – RWANDA

Would other women in the community benefit from the program?

92% said that they knew of other women who would benefit from the WfWI program.

Program graduates who responded negatively reported that most eligible women of their community had already benefited from the program.

The interviewers then asked the program graduates who responded positively how other women might benefit from the program.

The responses provided by the program graduates show that WfWI’s program is valued by women in the community and that there are additional women who could benefit from the program.

Program graduates placed most of the program’s value on the economic opportunities it provides, with somewhat lesser value placed on gender empowerment and health and wellness.
The interviewers asked the program graduates if they were involved in any women’s groups. The interviewers then asked the program graduates who responded positively to list the groups in which they are involved. The responses provided by the program graduates indicate that program graduates are taking advantage of their collective learning by forming women’s groups focused mainly on savings and economic empowerment. Importantly, they have shared their knowledge and provided training to other women in the community who have joined them in these groups, but were not a part of the WfWI program. According to the women interviewed, some of the groups even include men. These groups provide opportunities to pool resources, provide a mechanism for making and collecting small loans, provide purchasing capital for joint income-generating activities, and provide a charitable mechanism to support others during times of crisis or ill health.
The interviewers asked program graduates if they noticed any changes in domestic violence in any of the households in the community. The interviewers also asked the program graduates to describe reasons for the perceived decreases in violence. The responses provided by program graduates indicate that the decrease in domestic violence in the community is primarily due to the government’s commitment to reducing domestic violence through government programs. However, some program graduates reported that they have also felt more empowered as a result of the program and better understand their rights.
The interviewers asked program graduates if they noticed any changes in the attitudes of male members in their community since the program began. Program graduates were then asked for their opinion for any positive change. Similar to the findings in Rwanda, women reported that attitudes of men toward women had improved since the initiation of the WfWI program in their community. In contrast to the program graduates interviewed in Rwanda, who most often listed economic empowerment as the primary reason for the positive changes in attitudes, program graduates in DRC more often cited gender empowerment and a better understanding of women’s rights as the primary drivers for the positive changes in attitudes.
Survey Results – Democratic Republic of the Congo

Did women who did not participate in this program benefit from it?

- Yes: 79%
- No: 21%

Types of Secondary Benefits to Other Women not Participating in WfWI Program

- Economic Empowerment: 63%
- Gender Empowerment: 20%
- Health and Wellness: 10%
- Children’s Education: 7%

The interviewers asked the program graduates if they noticed other women in the community, who have not participated in the program, benefitting from the program. The interviewers asked the program graduates about the specific secondary benefits they noticed. The results in DRC parallel the findings in Rwanda. Corroborative evidence from community leaders in both Rwanda and DRC suggests that there is significant secondary impact on other women in the community, particularly as the program graduates are seen as role models in the community.
The interviewers asked the program graduates if they knew of any other women in the community who would benefit from the program. The program graduates were then asked how these other women might benefit from the program. Nearly all the program graduates acknowledged the important opportunities the WfWI program could provide to other women in the community. Economic empowerment comprised the greatest percentage of responses, which correlates with the findings noted in Rwanda.
Survey Results – Democratic Republic of the Congo

Are you participating in a women’s group?

- Yes: 58%
- No: 42%

The interviewers asked the program graduates if they are involved in any women’s groups and, if so, what type of group. The program graduates noted that they are forming savings groups and “pre-cooperatives” within their community and are recruiting non-WfWI program graduates and men. These groups require regular contributions from their members, provide short-term, interest-bearing loans, and also provide financial support for emergencies or charitable contributions to needy members of the community.

Types of women’s groups

- Economic Empowerment: 93%
- Gender Empowerment: 4%
- Health and Wellness: 3%
Survey Results – Democratic Republic of the Congo

Perceived Changes in Domestic Violence

- Decrease in Domestic Violence: 70%
- Increase in Domestic Violence: 9%
- No Change: 21%

Reasons for Decreases in Domestic Violence

- Economic Empowerment: 9%
- Gender Empowerment: 91%

The interviewers asked the program graduates if they noticed any changes in domestic violence in any of the households in the community. The responses elicited from program graduates in DRC were nearly identical to those in Rwanda, with 70 percent of women noting an overall decrease in domestic or sexual violence in the community. This is exceptional given the prevalence of gender-based violence and use of sexual violence as a weapon of war in DRC. The interviewers also asked the program graduates to describe reasons for the perceived decreases in domestic violence. The responses provided by program graduates indicate that a number of program graduates have felt more empowered as a result of the program and are benefiting from understanding their rights, expressing their opinions, and improving their self-confidence.
Community Impact on Health and Wellness in Rwanda and Democratic Republic of the Congo

In the course of KPMG’s analysis, various aspects of health and wellness were questioned; below is a summary of the findings from the various interviews conducted and data reviewed. Each bullet point summarizes statements as reported by the individuals interviewed.

**Family Planning**

- In Rwanda, more women are accessing family planning services. Program graduates have even developed their own family planning outreach services.
- In DRC, the lack of modern family planning tools, materials and methods in clinics has limited the program’s impact on family planning.
- In Rwanda, preventive services are free and national health insurance is available at low cost; DRC does not have a national health insurance program, and nearly all healthcare services, including preventive and therapeutic services, require up-front payment.

**Antenatal Services**

- In Rwanda and DRC, more pregnant women are attending antenatal visits.
- In Rwanda, an increased number of women are delivering their children in hospitals; in DRC, relatively fewer women deliver in hospitals due to the cost of medical care.
- In DRC, relatively fewer women deliver in hospitals due to the cost of medical care.

**HIV Counseling and Testing**

- In Rwanda, women have been forming support groups to have HIV testing performed.
- No impact on HIV counseling and testing was noted in DRC.
Community Impact on Health and Wellness in Rwanda and DRC (continued)

Jacques Nsengiyumra
Head of the Kayonza Health Center in Rwanda

“WfWI helped us in changing perceptions among women around family planning. In 2009, about 15 percent sought family planning services, and now in partnership with the Ministry of Health together with WfWI, we have made dramatic improvements in family planning with 35 percent of women now using (recommended) family planning methods.

For pregnant women, WfWI helped encourage women to have checkups before they give birth. The number of women who come in for one checkup before birth has increased from 45 percent to above 75 percent of women. The number of women who come for all four of the required checkups has also increased, from a very low 3 percent to now 23 percent. Women are also coming into the hospital more often to deliver their child. Previously, only about 25 percent of women used to come to the hospital, but now it is nearly 75 percent.

We have made eradicating malnutrition a priority in our country and the partnership with WfWI has been crucial in this effort. WfWI has helped us to teach women about ensuring a balanced and complete diet at home. In 2009, we had about 237 children, or 6 percent, who had moderate malnutrition problems, but now we have only 6 children, or less than 0.001 percent, who have malnutrition problems and even those are only moderate in severity.”
Community Impact on Health and Wellness in Rwanda and DRC (continued)

**Domestic Violence**

- In Rwanda, community healthcare workers and head nurses cited that government programs and harsher prison sentences, along with WiWI’s program, have dramatically decreased gender-based violence; women are more likely to report cases of gender-based violence to local authorities.

- In DRC, women rarely report episodes of domestic or sexual violence to authorities. When these episodes are reported, they are only reported anonymously. Clinics make no attempt to notify local authorities of episodes of domestic or sexual violence.

**Children’s Health**

- In Rwanda, malnutrition incidences of kwashiorkor (an acute form of childhood malnutrition resulting from protein deficiency), and general illness are decreasing. Immunizations continue to be provided to most children.

- In DRC, more women are bringing their children to the clinic for immunizations due to greater knowledge about the importance of childhood immunizations.

- In DRC, malnutrition continues to be a major problem due to poverty and limited access to nutritious foods.
Community Impact on Economic Development in Rwanda and Democratic Republic of the Congo

To evaluate the economic impact of the program on program graduates and the communities where they live, interviewers asked questions that addressed three indicators of financial betterment; a summary of the interview findings is noted below. Each bullet point summarizes statements as reported by the individuals interviewed.

**Economic Opportunity and Overall Economic Growth**

- In Rwanda, more women are engaged in income-generating activities, and more households have domestic animals.
- In rural communities in DRC, the program has had substantial benefits for program graduates, other women, and even men; however, in peri-urban communities in DRC, with a large influx of internally displaced persons and limited arable land, the economic benefits of the program have been limited to the program graduates to date.

**Poverty Reduction**

- In Rwanda, women are working together to support the needy, and are prioritizing payment of national health insurance, which lessens the burden on the local government (which had previously been responsible for covering these costs). Families are also shifting to higher economic levels.
- In DRC, the program has had little impact on poverty in the communities; poverty appears unabated.

**Access to Savings and Credit Markets**

- In Rwanda, the number of savings accounts at the community Savings and Credit Cooperatives is increasing, with 67 percent of accounts opened by women.
- In DRC, where there is limited access to savings and credit institutions, program graduates have formed their own savings and pre-cooperative groups to build savings and capital and provide loans.
Community Impact on Economic Development in Rwanda and DRC (continued)

In DRC, where access to savings and credit markets is limited, program graduates are creating their own mechanisms to build financial stability.

Roseline Nakasunyo M’Ntole was elected as the leader of a small savings group in Kalehi, DRC that has a bread-making profit center supporting 15 members, each of whom have their own business. Each member contributes US$ 10 per month to a ‘green lock box’ along with the profits from the bread-making center, as well as interest from any loans made to the group. Their group currently has a balance of over US$ 1,000, and has made about a dozen loans to its members during the past eight months totaling over US$ 1,300. The individual businesses of its members are thriving and the greater community appears to be benefiting.

Another program graduate, Antoinette Muhindo M’cirahuli, started an eight-person savings group nine months ago, which is focused on soap-making. The group trained additional community members including some men, and the group has grown to 20. Profits from the soap-making efforts are combined with monthly contributions of US$ 4 to support loans to its members, each of whom has their own small business. In the past six months, the soap-making effort resulted in a net profit of US$ 416. Members frequently access credit, with most loans averaging US$ 100 at an interest rate of 10 percent per month. Profits have been used to start a bee-keeping business and to purchase chickens to support the group.
Community Impact on Government and Decision Making in Rwanda and Democratic Republic of the Congo

As a part of the review, KPMG asked questions to help assess how women are participating in the community, and what the male community member reaction has been with a focus on three aspects of community involvement; a summary of the interview findings is noted below. Each bullet point summarizes statements as reported by the individuals interviewed.

**Participation in Government and Decision Making**

- In Rwanda, women are taking up elected positions in local governments and are becoming more active at local government meetings and in decision making.

- Although women in DRC are participating more actively in community meetings and have formed women’s groups, there are few examples of women making substantial contributions to decision making in the community.

**Attitudes of Male Members of the Community**

- In Rwanda and DRC, male members of the community noted an improved view of the women in their communities, particularly as women are now seen as contributing members of society.
## Community Impact on Education and Literacy in Rwanda and Democratic Republic of the Congo

To help assess how women are taking what they have learned and investing in their children’s future, questions were asked to help determine how education and literacy are affected; a summary of the interview findings is noted below. Each bullet point summarizes statements as reported by the individuals interviewed.

### School Enrollment and Attendance

- In Rwanda, where primary school education is free and required, school enrollment is generally higher, absenteeism is lower, and parents tend to be more responsive to requests for meetings by teachers to discuss their children’s performance.
- In DRC, where primary education is not free, changes in school enrollment or attendance have not been substantial. However, parents are more involved with their children’s education and are prioritizing the payment of school fees.

### Gender Disparity

- In primary schools in Rwanda, the ratio of girls to boys is high; however, some program graduates have noted that school officials select a disproportionate number of boys to advance to secondary school over equally performing girls.
- There were large gender disparities between schools in the advancement to secondary schools evaluated in DRC. Some schools had a higher proportion of girls advancing to secondary schools and the opposite was true at other schools. The underlying factors that cause these disparities in students’ advancement are unknown.

### Literacy

- In Rwanda, adult literacy rates have increased, and program graduates are forming literacy groups; however, no impact on literacy was noted in DRC.
Women are worth investing in.

Women’s rights are human rights.
While progress has been made towards gender equality, there is still much work to be done. Women not only comprise over two-thirds of those living in poverty, they also represent one of the greatest untapped assets in the fight against poverty.

Investing in efforts to develop a woman’s ability to improve her economic future is crucial for global economic, political and social development and stability.

Why Invest in Women?

If the world doubled its investments in family planning and maternal and newborn healthcare, maternal deaths in developing countries could be reduced by 70 percent, and newborn deaths could be reduced by nearly 50 percent¹.

Globally, 50 percent of women are in vulnerable, low-paying jobs and could lose this source of income suddenly. Gender wage gaps are still 10–30 percent on average².

By mid-2011, only 28 countries had women’s parliamentary representation of a critical mass of 30 percent or more and only 19 countries had elected female heads of state³.

If women had equal access to productive resources, they could increase yields on their farms by 20-30 percent, which could raise total agricultural output in developing countries by 2.5–4 percent, and reduce the number of hungry people in the world by 12-17 percent, or up to 150 million people⁴.

GDP growth can suffer by up to 2 percent when women are unable to join the labor force, restricted by law or practice from certain jobs, or excluded from management positions⁵.

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¹ “Gender equality and female empowerment policy,” USAID, March 2012
⁴ “Gender equality and female empowerment policy,” USAID, March 2012
⁵ “Gender equality and female empowerment policy,” USAID, March 2012