

International Organization for Migration (IOM)

IOM Internal Evaluation of the Project:
*Technical Support to the Government of Ghana to Address Child
Trafficking and Other Child Protection Abuses in the Ketu South,
North and South Tongu Districts of the Volta Region*

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IOM International Organization for Migration
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I. EXECUTIVE SUMMARY

I.I. PROJECT DESCRIPTION

In November 2012, the International Organization for Migration (IOM) in Ghana, with support from the United Nations Children’s Fund (UNICEF), launched a new initiative aimed at building the capacity of local communities to address and prevent child trafficking and protection violations occurring in the Volta Region of Ghana.

IOM engaged and trained key leaders and government structures in six communities in three districts (Ketu South, North and South Tongu districts) to understand the dangers associated with child trafficking and other child protection issues. This culminated in the production of a Child Protection and Counter-Trafficking Toolkit, containing 16 thematic modules for in-depth interactive educational sessions with all members of the community. The first six modules were piloted in 2013 in the six target areas and included topics such as: community commitment, child protection, child trafficking, children’s rights, children’s rights for children, and birth registration. Sensitization and awareness creation activities were also organized in all communities. More than 7,300 individuals were trained during the 104 training session held (see Annex A). The combination of training, outreach, and awareness raising components of the programme aimed to ensure a protective environment for children from trafficking and other child protection abuses, and to strengthen the capacity of the Government of Ghana to address such issues.

I.II. METHODOLOGY

In November 2013, IOM Ghana, in collaboration with relevant District Assemblies and other key partners, conducted an internal evaluation of the project *Technical Support to the Government of Ghana to Address Child Trafficking and Other Child Protection Abuses in the Ketu South, North and South Tongu Districts of the Volta Region* to gather lessons learned, including key achievements and areas for improvement. The evaluation also assessed the effectiveness of the community facilitation toolkit developed and piloted, and the corresponding level of community awareness on child trafficking and other child protection issues. The evaluation will serve as a guide to IOM and its key partners, including UNICEF as they expand the project to include the roll-out of the remaining 10 modules of the Toolkit and look to expand this project to other communities in the three target districts and/or other vulnerable districts in the Volta Region.

As part of the evaluation, group interviews were conducted in five of the six project communities, namely Memordze-Sikor, Kanyakope, Anoenu, Hlevi and Agbagorme. An interview was not conducted in the sixth project community, Aveyiborme, as the participants did not show on the scheduled date and time. While an interview was conducted in Hlevi, the results were also not included in the evaluation findings as the group interviewed did not form part of the group reached by the project roll out. Groups interviewed consisted of community elders/leaders, men and women. Children were interviewed separately from adults. A total of 128 adults and 230 children were interviewed in four communities (see Annex B).

In order to assess a change in knowledge, retroactive project baseline data was collected by asking participants to provide a score for “before” and “after” project implementation. Where applicable, focus group questions were used to capture reasons for change in knowledge. For a full listing of interview questions, please see Annex C.

The results of the interviews were captured in an interview notes template, by both the evaluator and an assistant, which was then analysed to identify key themes.

I.III. KEY EVALUATION FINDINGS

The results of the evaluation indicate a significant increase in knowledge by community members regarding counter-trafficking and child protection issues. This change was credited by respondents almost entirely to the IOM intervention and the support provided by a small network of community volunteers, who were trained to roll-out the toolkit. The following is a summary of key evaluation findings:

- All communities indicated that, prior to the IOM intervention, an average of three to ten children were being **trafficked** per month. Conversely, they reported that no children had been trafficked since the toolkit training was received. It was further noted that, upon learning of the harsh realities facing trafficked children, parents from the communities of Memordze-Sikor and Kanyakope voluntarily requested the return of a total of three previously-trafficked children from the fishermen keeping them.
- At the time of the interview, participants were well-versed in **parental responsibilities** towards their children in order to ensure that the children are well cared for and protected. Following the IOM intervention, 46.9 per cent of adult participants indicated they were undertaking key responsibilities towards their children, in comparison to 13.3 per cent who indicated that they had been implementing such practices prior to the toolkit training. This is a three and a half fold increase in knowledge following the IOM intervention.
- Participants interviewed were able to easily and accurately define **child trafficking**, explain who a trafficker is and state things that happen to children after they are trafficked. Evaluation results indicate that 18.8 per cent of adult participants exhibited knowledge of trafficking following the IOM intervention in comparison to 4.7 per cent who indicated they possessed the knowledge before the toolkit training. This result indicates a four-fold increase in knowledge among adults after receiving the Toolkit training; however, the overall low percentage indicates that such counter-trafficking awareness information needs to be reinforced in target communities.
- Evaluation respondents were able to easily and accurately define **child protection** and mention ways by which a community could ensure the protection of its children. After the IOM intervention, 50 per cent of adult participants exhibited knowledge of children's rights, in comparison to 13.3 per cent who indicated they possessed the knowledge before the toolkit training. This result indicates a three and three-quarter fold increase in knowledge of participants. The outcome is similar to awareness levels of parental responsibilities with half of interviewees now aware of both child protection and parenting issues.
- Those children interviewed were able to easily and accurately list their **rights and responsibilities**. The majority of children (63%) indicated that they knew they had rights following the IOM intervention, in comparison to the small number of children (6.5%) who indicated that they knew they had rights prior to the toolkit training. This was the most significant change in knowledge among all respondents, with a ten-fold increase in the number of children now aware of their rights in communities that received the Toolkit training.
- The majority of participants interviewed indicated that they were previously made aware of the need to **register the birth of their children** by medical professionals at the "weighing" of

the children. Of those interviewed, 25 per cent indicated that they had registered their children's birth prior to the IOM intervention, in comparison to 1.6 per cent who indicated that they became aware as a result of IOM's training.

I.IV. CONCLUSIONS AND RECOMMENDATIONS

Information obtained during the evaluation interviews suggests that the project has been effective at producing a change in knowledge amongst community participants. Therefore, funding permitting, the remaining modules should be rolled out to build upon participants' newly acquired knowledge. Furthermore, as the evaluation findings suggest that the toolkit is an effective tool for sensitizing communities to child protection issues, the toolkit could be implemented in other communities or incorporated into any national action plan regarding counter-trafficking and child protection.

Recommendation #1: *As much as possible, project communities should be connected with any available revenue generating opportunities and/or referred to any available government services, NGOs or the private sector.*

In Ghana, it has been observed that that financial hardship plays a key role in a parent's decision to traffic his or her child. This reality was underscored during the current evaluation process as community members, and sometimes teachers, stated their appreciation for the knowledge being imparted but then presented the plight of community members, including the children, who were facing financial hardships.

Recommendation #2: *District Assemblies should be presented with project details in advance of the roll-out as they have a key role to play in supporting the project implementation.*

During the course of the evaluation, toolkit presentations were scheduled at two District Assemblies. This process involved project staff providing a copy of the toolkit to representatives of the District Assembly and explaining the nature and scope of the project. However, as was noted by the project consultants during the training of trainers of the toolkit, "...any programme or project in Ghana wishing to effectively facilitate community mobilization and ownership for child care and protection and elimination of child trafficking should...use effective community entry processes including consultations with the Metropolitan/Municipal/ District authorities." Having the District Assembly involved from the onset means that they may provide some support during the course of the project roll-out and also, it potentially equips them to effectively use the toolkit and continue the community sensitization following the completion of the IOM project.

Recommendation #3: *IOM should review toolkit modules to ensure that there is no overlap between the information they are presenting and the information being presented by other community actors.*

For example, on the topic of birth registration, participants from most communities indicated that they were previously advised by medical officials of the need to register the birth of their children at the 'weighing'. IOM may choose to leave the toolkit unchanged as a means to reinforce existing community knowledge.

Recommendation #4: *Where feasible, IOM should tie some key toolkit activities to durbars (or celebrations) in order to ensure greater community attendance and involvement.*

In one community, participant turnout for evaluation interviews was low; while in another, the community members who participated in the training were not the same community members

present for the evaluation interviews; and in yet another community, the participants were a no show, which meant that their data could not be gathered for the report. IOM Ghana experience shows that community attendance is better for events tied to durbars than those which are not. Therefore, future programming should consider sponsoring durbars as a means to ensure higher attendance for key toolkit activities.

Recommendation #5: The “Free To Be Me” training modules should be reinforced in all pilot communities with follow-up trainings to strengthen community response and awareness of child protection and counter-trafficking issues.

The evaluation findings indicate a dramatic increase in knowledge among those who participated in IOM toolkit trainings sessions. However, despite these achievements overall knowledge remains at or below 60 per cent of the target population. The reinforcement of concepts in pilot communities would expand the level of awareness and the capacity of communities to respond to child protection and counter-trafficking violations.

Recommendation #6: IOM should scale up child protection and counter-trafficking training and sensitization in other vulnerable communities in Ghana, utilising the “Free To Be Me” campaign.

The successful completion of trainings in pilot communities, demonstrates the positive impact and tangible outcomes of the “Free To Be Me Campaign”. This model should be replicated to communities across Ghana, particularly those vulnerable to child protection and trafficking violations. This would serve to support national action plans regarding child protection and counter-trafficking.

II. PROJECT DESCRIPTION

Human trafficking is a global problem that is widely considered to be modern-day slavery and one of the most heinous crimes in existence today. Its victims are robbed of their most basic human rights and it occurs in varying frequency and forms in countries the world over. The victims, who are mostly women and children, are deceived by false promises and deprived of their normal lives, forced to provide labour or sexual services, all for the direct profit of their traffickers. Exploitation often manifests as intimidation, physical force, sexual assault, work without pay and threats of violence to the victims and their families.

Ghana is not immune to the occurrence of human trafficking. According to the US Department of State 2013 Trafficking in Persons Report, such flows occur from, through and to Ghana for the primary purposes of forced labour and sexual exploitation. Additional research has shown that internal human trafficking of children occurs on a more frequent basis than transnational trafficking of foreigners. “Ghanaian boys and girls are subjected to conditions of forced labour within the country in fishing, domestic service, street hawking, begging, portering, artisanal gold mining, and agriculture.”¹ In response to the problem of human trafficking, the Government of Ghana (GoG) has adopted international instruments, such as the Protocol to Prevent, Suppress and Punish Trafficking in Persons and the Convention on the Rights of the Child, that protect children and has enacted local laws (Human Trafficking Act and Anti-Migrant Smuggling Act) and put in place institutions such as the Anti-Human Trafficking Unit (AHTU) to protect the rights of children in Ghana. However, despite

¹ United States Department of State, *2013 Trafficking in Persons Report - Ghana*, 19 June 2013, available at: <http://www.refworld.org/docid/51c2f3bc53.html>

these advances in countering human trafficking and child's rights there exists a wide gap between law and practice.

In Ghana, children are often confronted with a wide range of protection issues ranging from poverty to physical abuse, sexual and labour exploitation. Although children in the Volta Region are not different from children in other parts of Ghana; they are confronted with some of the worst forms of protection violations. A large number of children from this Region have become victims of trafficking, exploitative labour, and abuse. The Child Labour Survey conducted by the Ghana Statistical Service in 2003, for example, indicated that 33 per cent of the 1,273,294 child labour victims in Ghana were located in the Volta Region; with the majority working in hazardous conditions in the fishing industry along the Volta Lake.²

Since 2002, IOM has partnered with the GoG and local stakeholders to provide technical capacity building and direct assistance to victims of human trafficking in the country. The organization's work started with baseline research regarding the extent of child trafficking into the fishing industry to better inform the Government and all working to eliminate human trafficking in the country. IOM's counter-trafficking activities have predominately focused on the rescue, rehabilitation, reintegration and long-term monitoring of children trafficked into the fishing industry. To date, 732 children have been assisted and 48,000 community members and fishermen have been sensitized about human trafficking and children's rights. More recently, in December 2012, IOM partnered with the United Nations Children's Fund (UNICEF), to launch an awareness and prevention campaign, aimed at building the capacity of local communities to address and prevent child trafficking and protection violations occurring in the Volta Region of Ghana.

The pilot project, *Technical Support to the Government of Ghana to Address Child Trafficking and Other Child Protection Abuses in the Ketu South, North and South Tongu Districts of the Volta Region*, targets community structures through awareness creation, sensitization and information sharing on child trafficking and other child protection abuses in the three districts in the Volta Region. The project will also contribute to the realization of Output 7.5 of the UNDAF Action Plan (2011 – 2016), which states that “by 2015 Child Protection service providers (MDAs, CSOs, NGOs) across Ghana will deliver efficient, coordinated, gender appropriate child protection services to orphans and vulnerable children, including ‘at risk’ groups.”³ The initiative is further aligned with the UNICEF/GoG Child Protection Programme expected result that by 2016, parents, care-givers and community members in at least five Regions understand and are able to practice positive behaviour that protects children from violence, abuse and exploitation.

To facilitate the capacity building of community structures on child protection and counter-trafficking and to better inform affected communities, IOM developed a toolkit entitled, “Free To Be Me”. The IOM toolkit is intended to educate village leaders and family members so they may more capably address child trafficking and protection challenges, bridging the gap between legislative measures and action. The toolkit contains 16 thematic modules for in-depth educational sessions with all members of the community (men, women and children). The toolkit was piloted in 2013 in six communities in Ketu South, Ketu North and the South Tongu Districts of the Volta Region. These communities were identified as areas vulnerable to child



² This is the most current information available; a child labour survey has not been conducted since 2003.

³ UNDP, *Ghana UNDAF 2012-2016 Narrative*.

trafficking and other child protection abuses through research and IOM's extensive experience working in the Volta Region. Each District Assembly was also directly engaged prior to the start of activities to ensure full participation from community leaders.

Each of the six targeted communities in the three districts were trained using the first six modules of the "Free To Be Me" toolkit, which included topics such as; community commitment, child protection, child trafficking, children's rights, children's rights for children, and birth registration. More than 7,300 individuals were trained during the 104 training session held (see Annex A). The toolkit serves as just one of the many necessary, integrated, and nationally coordinated programmes or interventions created to address the root causes of child trafficking and abuse. Additional sensitization and awareness creation activities were organized to reinforce messages delivered. These activities aimed to ensure a protective environment for children from trafficking and other child protection abuses, and to strengthen community based response and accountability.

Following the completion of pilot project activities (November 2013), IOM undertook an internal evaluation of the Toolkit, to inform and refine project implementation for future initiatives, such as the complete roll-out of all 16 modules in the six target communities and the scale-up and delivery of the toolkit in affected communities across Ghana.

III. METHODOLOGY

The main objectives of the IOM child protection and counter-trafficking project are to raise awareness of child protection issues and to mobilize/create capacity among village leaders, parents, community members and children to more capably address those issues in order to bridge the gap between legislative measures and action. When a community well known for child trafficking has been mobilized, it will possess, amongst others, the following characteristics:

1. Community members will understand the concept of trafficking and be able to talk about who is a trafficker and who is a trafficked child.
2. Community members will understand that a child is different from an adult - one who needs special assistance to develop well to become a productive adult.
3. Community members will have a basic understanding of the Human Trafficking Act, which seeks to prevent trafficking of persons, including children, and offers protection to victims of trafficking. They would also have some knowledge of the Children's Act, which deals with child care and protection from neglect and other forms of abuse.
4. Community members will be aware of the different actions they can take to address child trafficking.
5. Community members will be motivated and committed to act individually and as a group to eliminate child trafficking from their communities.
6. A mobilized community will have the confidence to seek outside assistance and cooperation when needed.

The evaluation of the "Free To Be Me" toolkit was designed to measure change in the knowledge of training participants. The evaluation followed two methodologies, scoring and focus group interviews, to record change in knowledge. Change was assessed in



terms of evaluation participants' knowledge before and after the IOM toolkit intervention.

As baseline data was not collected properly prior to project implementation, it was collected retrospectively. The scoring method was chosen for data collection as it is a particularly useful tool when project baseline data is weak or non-existent. Scoring is a method used for participatory quantitative analysis. In the area of child care and protection, it can be used to estimate the level of change that has taken place after an intervention has been applied by estimating the situation before the intervention was applied and the situation after. To ensure that the evaluator and participants were referring to the same timeline, the Tree of Life was used as the point of reference for "before" and "after" questions. For each question posed, participants were asked to provide a score "before" project implementation and a score for "after".

Evaluation participants were given fifty pebbles and asked questions such as, "Before the Tree of Life, how many people knew there was a law against human trafficking? and How many after?". It was then explained that pebbles represented all the members of the community. The participants were then requested to discuss amongst themselves and decide how many pebbles represented the members of the community who knew about the law. Once a consensus was reached, a representative appointed by the group would count the number of pebbles that represented the group's response and present them to the evaluator to be recorded. Semi-structured interview questions were used to supplement the scoring method in order to capture, where applicable, reasons for any registered change in knowledge.



Those who participated in group interviews included: community elders/leaders, men and women. Children were interviewed separately from adults. The size of the groups varied by community. The results of the interviews were captured in an interview notes template, by both the evaluator and an assistant, and was later analysed to identify key themes.

III.I LIMITATIONS AND CONSIDERATIONS

While the evaluation contains both qualitative and quantitative evidence, there are a few methodological considerations that should be noted.

- a. *Group interviews were not able to be conducted in all six communities; one of the five remaining communities' interviewees were not the same as those who participated in toolkit trainings.*

Group interviews were conducted in five of the six project communities, namely Memordze-Sikor, Kanyakope, Anoenu, Hlevi and Agbagorme. An interview was not conducted in the sixth project community, Aveyiborme, as the participants did not show up on the scheduled date and time. [Note: due to time constraints, it was not possible to reschedule the Aveyiborme interview.] Data collected in Hlevi was not used in the analysis as it was noted that those present for the evaluation interviews did not participate in the toolkit training and as such comparison would be impossible.

- b. *There is confidence in the evaluation findings overall; however, the level of confidence varies by community.*

More specifically, the participants interviewed in Hlevi were largely unfamiliar with the “Free To Be Me” toolkit training. While the project had previously been rolled out in the community, the evaluation participants, with very few exceptions, were not the same participants who had undergone the training. Nonetheless, their responses were recorded in view of being used for comparisons between the knowledge of those who had received the training and those who had not.

- c. *The evaluator was not functional in Ewe, the local language spoken in the Volta Region; therefore the use of an interpreter was necessary to carry out the interviews.*

The interpreter used to conduct the interviews was the same project staffer who provided the training to the various communities. While it is not believed that said staffer influenced the responses of the participants in any way, this constraint should be noted.

- d. *Participants of the “Free To Be Me” toolkit training are not tracked in any systematic way.*

As the particulars of the participants of the toolkit training were not recorded during the project roll-out, there was no way to identify, with certainty, which of the evaluation participants had actually undergone the training. Therefore, certain assumptions had to be made that those who self-identified as having participated in the training.

- e. *The evaluation methodology had to be adjusted to suit the realities of the field.*

With the exception of Memordze-Sikor where the pebbles worked well as a tool to represent various numerical responses, the other four communities struggled somewhat with the concept and were therefore asked to verbally provide their responses to the evaluator to supplement the findings.

IV. KEY EVALUATION FINDINGS

The main findings associated with each of the evaluation questions are presented below. See Annex C to view the evaluation questionnaire.

As previously mentioned, participants from Aveyiborme did not attend scheduled interviews and participants who attended interviews in Hlevi were not familiar with the IOM intervention. Therefore, these findings are based on the analysis of information gathered from a total of 128 adult participants and 230 children interviewed in the four remaining communities.

In general, participants, through their responses to interview questions, showed a good grasp of the material covered in modules one through six of the toolkit. The toolkit roll-out helped participants to



become aware of the realities faced by children after they had been trafficked; become aware that Ghana has a law against human trafficking; gain valuable insights into activities they could undertake as individuals and as a community to ensure the protection of their children. It also informed children of their rights and responsibilities. The following are a summary of key findings from interviews with target communities, regarding each module that was piloted.

Module 1: It Takes A Village

Interview Questions

1. Before the Tree of Life how many times did your community meet to discuss the problems of children?
2. After the Tree of Life how often has your community met to discuss the Tree of Life? If there is a difference between the response to Q1 and Q2, please explain the reason for change.

Before the Tree of Life

Participants in two of the four project communities, namely Memordze-Sikor and Anoenu, indicated that they met during the school term to discuss issues affecting children. The remaining three communities had never met to have such discussions.

After the Tree of Life

Memordze-Sikor respondents reported an increase in the frequency of meetings regarding child welfare. More specifically, they reported an increase from three parent-teacher meetings, held during the school term, to seven meetings held between July and November 2013. Participants indicated that, due to IOM's intervention, child protection was being viewed more seriously and meetings were a means of further disseminating counter-trafficking information to community members, discussing ways to stop trafficking and keeping each other accountable for the welfare of the children.

While Anoenu interviewees indicated that no further community meetings had been held, participants said that door-to-door visits had been conducted by community elders to remind parents of their child protection responsibilities.

Kanyakope community, which had never previously met to discuss issues affecting children, reported holding four meetings (between July and November 2013) to discuss the education of children, issues of trafficking and to enforce/reinforce message learnt from the toolkit training.

Module 2: Child Protection

Interview Questions

1. On average, how many children were taken from the community each month before the Tree of Life?
2. How many have been taken since? If there is a difference between response to Q1 and Q2, please explain the reason for such change.
3. Name three key responsibilities parents are expected to undertake towards their children to ensure they are well cared for and protected?
4. How many parents in this community used to undertake all three responsibilities to their children before the Tree of Life?
5. How many parents do you think have taken on all three responsibilities to their children after the Tree of Life? If there is a difference between responses to Q4 and Q5, please explain the reason for change.

Before the Tree of Life

Two of the four communities interviewed, namely Memordze-Sikor and Kanyakope, reported that on average 3 to 10 children were taken from the community each month. The community of Anoenu

was unable to provide a number as participants were not previously aware of the issue of child trafficking and the community of Agbagorme stated that no children had been taken from the community.

After the Tree of Life

All communities indicated that no children had been trafficked since IOM’s intervention. Furthermore, participants from Memordze-Sikor indicated that fishermen had visited seeking children to work on their boats but instead of turning over their children, community members informed the fishermen of the counter-trafficking toolkit project and, in at least one instance, a fisherman was taken to view the Tree of Life mural.

Note: Of their own volition, upon learning of the harsh realities facing trafficked children, the communities of Memordze-Sikor and Kanyakope requested the return of a total of three previously trafficked children from the respective fishermen keeping them.

Overall, evaluation participants were well-versed in the responsibilities that parents are expected to undertake towards their children in order to ensure that the children are well cared for and protected. They listed responsibilities such as education, birth registration, medical care and protection from trafficking. Information obtained from interviews showed that, before the Tree of Life, just 13.3 per cent of participants were undertaking all three listed responsibilities towards their children compared to 46.9 percent after the Tree of Life (Table 1). This indicates a three and a half fold increase in knowledge about parenting responsibilities following the IOM training.



Table 1: Percentage of evaluation participants that were undertaking all three listed responsibilities towards their children

Responses	Percentage	Number of participants
Undertaking all responsibilities before the Tree of Life	13.3%	17
Undertaking all responsibilities after the Tree of Life	46.9%	60
Not undertaking all responsibilities or did not respond	39.8%	51
Total	100%	128

Module 3: Child Trafficking

Interview Questions
1. What is child trafficking? (take turns in the group and let everybody name some features of the trafficking definition) Count the number of people who mention that trafficking is for the purposes of exploitation.
2. Who is a trafficker?
3. Name three things that happen to a child after s/he has been trafficked?
4. Before the Tree of Life did community members have all the knowledge you have exhibited above?
5. Before the Tree of Life, how many people knew there was a law against human trafficking?
6. After the Tree of Life, how many people know there was a law against human trafficking?

Evaluation participants in all communities were able to easily and accurately define child trafficking, explain who a trafficker is and state things that happen to children after they are trafficked.

Before the Tree of Life

Very few (4.7%) adult participants were aware that Ghana had a law against human trafficking prior to the Tree of Life. Of those who did, the radio, word of mouth and the District Assemblyman were listed amongst their sources of information. In one instance, a participant from Kanyakope stated that he became aware of the law following a GoG-led interception on the north side of the Volta Region in which a bus transporting children to work was boarded; this resulted in the children being removed from the bus and returned to their parents.

After the Tree of Life

When asked, a slightly higher number (18.8%) of adult participants indicated that they possessed knowledge of trafficking after the Tree of Life (Table 2). This result indicates a four-fold increase in knowledge among adults after receiving the Toolkit training; however, the overall low percentage indicates that such counter-trafficking awareness information needs to be reinforced in target communities.

Table 2: Percentage of evaluation participants that exhibited knowledge of trafficking

Responses	Percentage	Number of participants
Possessed all knowledge before the Tree of Life	4.7%	6
Possessed all knowledge after the Tree of Life	18.8%	24
Only possessed some knowledge or did not respond	76.5%	98
Total	100%	128

Module 4: Children's Rights

Interview Questions

1. What is child protection?
2. Mention two ways a community can ensure the protection of its children?
3. Before the Tree of Life how many people do you think had a clear understanding of child protection?
4. After the Tree of Life how many people in the community have a clear understanding of the Tree of Life? If there is a difference between responses to Q3 and Q4, please explain the reason for such change.

When asked, evaluation participants in all communities visited were able to easily and accurately define child protection and mention ways by which a community could ensure the protection of its children.

Before the Tree of Life

Very few (only 13.3%) adult participants indicated that they understood what child protection was, and could not easily and or accurately mention ways to protect children.

After the Tree of Life

Half (50%) of adult participants could not only define child protection but were now aware of ways to protect their children from abuses. The overwhelming majority referenced the toolkit training when asked the reason for the change in their knowledge. This result indicates a three and three-quarter fold increase in knowledge of participants. The outcome is similar to awareness levels of parental responsibilities with half of interviewees now aware of both child protection and parenting issues.

Table 3: Percentage of evaluation participants that exhibited knowledge of children's rights

Responses	Percentage	Number of participants
Possessed knowledge before the Tree of Life	13.3%	17
Possessed knowledge after the Tree of Life	50%	64
Did not possess the knowledge or did not respond	36.7%	47
Total	100%	128

Module 5: Children’s Rights for Children

Note: This is the only module where child participants were interviewed.

Interview Questions

1. Name at least three of the rights of children.
2. Name at least three responsibilities of children.
3. Before the Tree of Life, how many children knew their rights?
4. After the Tree of Life, how many children know their rights? If there is a difference between responses to Q3 and Q4, please explain the reason for such change.

The children interviewed for the evaluation, across all communities, were able to easily and accurately list their rights and responsibilities.

Before the Tree of Life

Few (6.5%) children reported knowing they had rights and responsibilities. In the few instances where children stated that they were aware, they were unable to identify the source of their information.

After the Tree of Life

The vast majority of children (63%) interviewed stated that they were aware that they had rights and responsibilities. For example, in Agbagorme, over 96 per cent of the children interviewed indicated that they were aware and also that they came to know of their rights and responsibilities as a result of the community volunteers, trained by IOM, who had conducted information sessions/training at the various schools. This was the most significant change in knowledge among all respondents, with a 10-fold increase in the number of children now aware of their rights in communities that received the Toolkit training.



Table 4: Percentage of children who knew they had rights

Responses	Percentage	Number of participants
Knew they had rights before the Tree of Life	6.5%	15
Knew they had rights after the Tree of Life	63%	145
Were not aware they had rights or did not respond	30.4%	70
Total	99.9%	230

Module 6: Birth Registration

Interview Questions

1. Do you have a child/ children? Yes/No (show of hands)
2. Have you registered their birth with the Birth and Death Registry? Yes/No (show of hands)
3. Before the Tree of Life how many babies were registered with Births and Deaths Registry?
4. After the Tree of Life how many births have been registered? If there is a difference between responses to Q3 and Q4, please explain the reason for such change.

Before the Tree of Life

In most communities, 25 per cent of adult participants with children reported registering the births of their children before the Tree of Life. When asked how they knew of the requirement for birth registration, most indicated that they were informed by medical professionals at the ‘weighing’ of their babies.

After the Tree of Life

In the few cases (1.6%) where the birth registrations took place after the Tree of Life, participants listed school registration and information from the toolkit training amongst the reasons for the birth registrations.

Table 5: Percentage of parents who registered their children’s birth with the Birth and Death Registry

Responses	Percentage	Number of participants
Registered their children before the Tree of Life	25%	32
Registered their children after the Tree of Life	1.6%	2
Did not have children or did not respond	73.4%	94
Total	100%	128

V. CONCLUSIONS AND RECOMMENDATIONS

Information obtained during the evaluation interviews suggests that the project has been effective at producing a change in knowledge amongst project participants. Therefore, funding permitting, the remaining modules should be rolled-out to build on participants’ newly acquired knowledge. Furthermore, as the evaluation findings suggest that the toolkit is an effective tool for sensitizing communities to child protection issues, reinforcement is required and the toolkit should be implemented in other communities or incorporated into national action plans.

Recommendation #1: *As much as possible, project communities should be connected with any available revenue generating opportunities and/or referred to any available government services, NGOs or the private sector.*

In Ghana, it has been observed that financial hardship plays a key role in a parent’s decision to traffic his or her child. This reality was underscored during the current evaluation process as community members, and sometimes teachers, stated their appreciation for the knowledge being imparted but then presented the plight of community members, including the children, who were facing financial hardships.

Recommendation #2: *District Assemblies should be presented with project details in advance of the roll-out as they have a role to play in supporting the project implementation.*

During the course of the evaluation, toolkit presentations were scheduled at two District Assemblies. This process involved project staff providing a copy of the toolkit to representatives of the District Assembly and explaining the nature and scope of the project. However, as was noted by the project consultants during the training of trainers of the toolkit, “...any programme or project in Ghana wishing to effectively facilitate community mobilization and ownership for child care and protection and elimination of child trafficking should...use effective community entry processes including consultations with the Metropolitan/Municipal/ District authorities.” Having the District Assembly involved from the onset means that they may provide some support during the course of the project roll-out and also, it potentially equips them to effectively use the tool to continue community sensitization following the completion of the IOM project.

Recommendation #3: *IOM should review toolkit modules to ensure that there is no overlap between the information they are presenting and the information being presented by other community actors.*

For example, on the topic of birth registration, participants from most communities indicated that they were previously advised by medical officials of the need to register the birth of their children at the 'weighing'. IOM may choose to leave the toolkit unchanged as a means to reinforce existing community knowledge.

Recommendation #4: *IOM should tie some key toolkit activities to durbars (celebrations) in order to ensure greater community attendance and involvement.*

In one community, participant turnout for evaluation interviews was low; while in another, the community members who participated in the training were not the same community members present for the evaluation interviews; and in yet another community, the participants were a no show which meant that their data could not be gathered for the report. IOM Ghana experience shows that community attendance is better for events tied to durbars than those which are not. Therefore, IOM should consider sponsoring durbars as a means to ensure higher attendance for key toolkit activities.

Recommendation #5: *The "Free To Be Me" training modules should be reinforced in all pilot communities with follow-up trainings to strengthen community response and awareness of child protection and counter-trafficking issues.*

The evaluation findings indicate a dramatic increase in knowledge among those who participated in IOM toolkit trainings sessions. However, despite these achievements overall knowledge remains at or below 60 per cent of the target population. The reinforcement of concepts in pilot communities would expand the level of awareness and the capacity of communities to respond to child protection and counter-trafficking violations.

Recommendation #6: *IOM should scale up child protection and counter-trafficking training and sensitization in other vulnerable communities in Ghana, utilising the "Free To Be Me" campaign.*

The successful completion of trainings in pilot communities, demonstrates the positive impact and tangible outcomes of the "Free To Be Me Campaign". This model should be replicated to communities across Ghana, particularly those vulnerable to child protection and trafficking violations. This would serve to support national action plans regarding child protection and counter-trafficking.

VI. ANNEXES

VI.II ANNEX A: NUMBER OF COMMUNITY MEMBERS TRAINED DURING TOOLKIT ROLL-OUT

FIELD ACTIVITIES FOR THE ROLL-OUT OF THE “FREE-TO-BE ME” CHILD PROTECTION TOOLKIT									
MODULES (# of Community Members Trained per Module by Location)									
A.	District	Community	1: It Takes a Village	2: Child Protection	3: Child Trafficking	4: Children’s Rights	5: Children’s Rights for Children	6: Birth Registration	Review Session
1.	North Tongu	Memordzi/ Sikor	Males:81 Females:189 Children:173 # of Sessions:6	Males:104 Females:253 Children: 266 # of Sessions:11	Males:80 Females:169 Children:152 # of Sessions:4	Males:38 Females:68 Children: 107 # of Sessions:4	Males:33 Females:88 Children:21 # of Sessions:2	Males:61 Females:89 Children:0 # of Sessions:4	Males: 38 Females: 57 Children:26 # of Sessions:1
2.		Kanyakope	Males:88 Females:251 Children:31 # of Sessions:6	Males:27 Females:63 Children:38 # of Sessions:5	Males:49 Females:118 Children:0 # of Sessions:3	Males:12 Females:29 Children:18 # of Sessions:3	Males:0 Females:0 Children:70 # of Sessions:2	Males:21 Females:44 Children:31 # of Sessions:3	
3.	South Tongu	Hlevi	Males:57 Females:148 Children:136 # of Sessions:3	Males:69 Females:174 Children:234 # of Sessions:4	Males:42 Females:121 Children:136 # of Sessions:2	Males:57 Females:95 Children:376 # of Sessions:3	Males:32 Females:86 Children:136 # of Sessions:1	Males:43 Females:103 Children:136 # of Sessions:2	
4.		Agbargorme	Males:18 Females:49 Children:102 # of Sessions:2	Males:35 Females:52 Children:86 # of Sessions:5	Males:11 Females:27 Children:75 # of Sessions:3	Males:53 Females:34 Children:102 # of Sessions:2	Males:14 Females:28 Children:85 # of Sessions:2	Males:14 Females:28 Children:0 # of Sessions:1	Males: 42 Females:16 Children:26 # of Sessions:1
5.	Ketu South	Anoenu	Males:25 Females:25 Children:13 # of Sessions:1	Males:209 Females:38 Children:0 # of Sessions:5	Males:23 Females:30 Children:0 # of Sessions:2	Males:90 Females:80 Childrn:13 # of Sessions:4	Males:22 Females:43 Children:65 # of Sessions:2	Males:67 Females:19 Children:0 # of Sessions:2	Males: 28 Females: 38 Children:0 # of Sessions:1
6.		Averyiborme	Males:35 Females:50 Children:129 # of Sessions:1	Males:12 Females:9 Children:51 # of Sessions:1	No data	No data	No data	Males:35 Females:50 Children:129 # of Sessions:1	
Total Community Members Trained (by module)*			Total Trained: 1600 Total Sessions: 18	Total Trained: 1720 Total Sessions: 31	Total Trained: 1033 Total Sessions: 14	Total Trained: 1172 Total Sessions: 16	Total Trained: 723 Total Sessions: 9	Total Trained: 870 Total Sessions: 13	Combined Total Reached: 7389 Total Module Sessions:104

*Note – total numbers trained by module is tallied by persons attending each session, it is possible some individuals attended multiple sessions.

VI.III ANNEX B: NUMBER OF PARTICIPANTS INTERVIEWED FOR EVALUATION BY COMMUNITY

PARTICIPANTS INTERVIEWED IN EVALUATION			
A.	District	Community	# of Community Members Evaluated by Location*
1.	North Tongu	Memordzi/Sikor	Adult Males: 20 Adult Females: 53 Boys: 56 Girls: 73
2.		Kanyakope	Adult Males: 5 Adult Females: 16 Boys: 17 Girls: 10
3.	South Tongu	Hlevi**	Adult Males: 3 Adult Females: 13 Boys: 76 Girls: 77
4.		Agbargorme	Adult Males: 11 Adult Females: 10 Boys: 25 Girls: 29
5.	Ketu South	Anoenu**	Adult Males: 9 Adult Females: 4 Boys: 12 Girls: 8
6.		Averyiborme	Adult Males: 0 Adult Females: 0 Boys: 0 Girls: 0
Total Community Members Interviewed		Combined Total Reached: 128 adults, 230 children	
**Note – Not included in analysis as community members interviewed did not benefit from toolkit training.			

VI.I ANNEX C: EVALUATION QUESTIONS

Module	Questions
Module 1: It Takes A Village	<ol style="list-style-type: none"> 1. Before the Tree of Life how many times did your community meet to discuss the problems of children? 2. After the Tree of Life how often has your community met to discuss the Tree of Life? If there is a difference between the response to Q1 and Q2, please explain the reason for change.
Module 2: Child Protection	<ol style="list-style-type: none"> 3. On average, how many children were taken from the community each month before the Tree of Life? 4. How many have been taken since? If there is a difference between response to Q1 and Q2, please explain the reason for such change. 5. Name three key responsibilities parents are expected to undertake towards their children to ensure they are well cared for and protected? 6. How many parents in this community used to undertake all 3 responsibilities to their children before the Tree of Life? 7. How many parents do you think have taken on all three responsibilities to their children after the Tree of Life? If there is a difference between responses to Q4 and Q5, please explain the reason for change.
Module 3: Child Trafficking	<ol style="list-style-type: none"> 8. What is child trafficking? (take turns in the group and let everybody name some features of the trafficking definition) Count the number of people who mention that trafficking is for the purposes of exploitation. 9. Who is a trafficker? 10. Name three things that happen to a child after s/he has been trafficked? 11. Before the Tree of Life did community members have all the knowledge you have exhibited above? 12. Before the Tree of Life, how many people knew there was a law against human trafficking? 13. After the Tree of Life, how many people know there was a law against human trafficking?
Module 4: Children's Rights	<ol style="list-style-type: none"> 14. What is child protection? 15. Mention two ways a community can ensure the protection of its children? 16. Before the Tree of Life how many people do you think had a

	<p>clear understanding of child protection?</p> <p>17. After the Tree of Life how many people in the community have a clear understanding of the Tree of Life? If there is a difference between responses to Q3 and Q4, please explain the reason for such change.</p>
Module 5: Children's Rights for Children	<p>18. Name at least three of the rights of children.</p> <p>19. Name at least three responsibilities of children.</p> <p>20. Before the Tree of Life, how many children knew their rights?</p> <p>21. After the Tree of Life, how many children know their rights? If there is a difference between responses to Q3 and Q4, please explain the reason for such change.</p>
Module 6: Birth Registration	<p>22. Do you have a child/ children? Yes/No (show of hands)</p> <p>23. Have you registered their birth with the Birth and Death Registry? Yes/No (show of hands)</p> <p>24. Before the Tree of Life how many babies were registered with Births and Deaths Registry?</p> <p>25. After the Tree of Life how many births have been registered? If there is a difference between responses to Q3 and Q4, please explain the reason for such change.</p>