

Empowered Women Empowered Children

Mixed method design to examine the relationship
between women's empowerment and the well-being
of children in structured families in Armenia



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World Vision Middle East and Eastern Europe

World Vision Armenia

“When I am very emotional and my sons come from school, they immediately notice and they get very worried”

Liana, Armenia, Gavar

“I have a strong relation with my mother, she always stands beside me and never blame when I am wrong”

Satenik, 13



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World Vision is a Christian relief, development, and advocacy organisation dedicated to working with children, families, and communities to overcome poverty and injustice. Inspired by our Christian values, we are dedicated to working with the world's most vulnerable people. We serve all people regardless of religion, race, ethnicity, or gender

CHILD AND ADULT SAFEGUARDING CONSIDERATIONS

World Vision ensured the safe and ethical participation of girls, boys and women, adhering to World Vision's Safeguarding policy and protocols on data collection and World Vision's Code of Conduct. Data collectors were trained on Psychological First Aid (PFA) and interviews' ethical and safe management. Names of participants have been anonymised and changed to ensure confidentiality. Children and women were oriented on the possibility of withdrawing from the interview process at any moment. Identified cases of child and adult abuse and violence were referred to specialized agencies for case management.

Acronyms

COVID-19	Coronavirus Disease-19
CYRM-R	Child and Youth Resilience Measure
CWB	Child Well-Being
DHS	Demographic Health Survey
EWB	Existential Well-being
GBV	Gender Based Violence
GESI	Gender Equality and Social Inclusion
HH	Household
HHDS	Household Diet Diversity Scale
IDP	Internally Displaced Person
IPV	Intimate Partner Violence
KII	Key Informant Interview
MEAL	Monitoring, Evaluation, Accountability and Learning
MEER	Middle East and Eastern Europe
MEERO	Middle East and Eastern Europe Regional Office
PDQA	Programme Development and Quality Assurance
PTSD	Post-Traumatic Stress Disorder
PFA	Psychological First Aid
RSES	Rosenberg Self-Esteem Scale
RWB	Religious Well-Being
SAS	Statistical Analysis System
SDG	Sustainable Development Goal
SPSS	Statistical Package for Social Sciences
SRQ	Social Role Questionnaire
SWBS	Spiritual Well-Being Scale
UN	United Nations
UNESCO	United Nations Educational, Scientific and Cultural Organization.
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund.
WCMWBS	Warwick-Edinburgh Mental Well-Being Scale

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1-Executive summary

Gender inequality is recognized as one of the most powerful drivers of children's vulnerability in all contexts. As part of its mandate to help the most vulnerable children experience the fullness of life, World Vision focuses on child well-being programmes, and capitalizes on child well-being outcomes. With intention to increase the focus on gender-responsive programmes that respond to the strategic needs of women, WV Armenia conducted the following research, to better understand the connection between mother's and children's well-being and holistically address both.

Accordingly, this research explores women empowerment and children well-being factors in Armenia and looks at how women's socio-demographic factors and empowerment components are associated with children's well-being. For this purpose, a cross-sectional observation design was developed with the application of a convenient sampling approach. The research targeted 104 World Vision beneficiary children, aged 11-17 living in structured families and their respective mothers. The survey results are complemented with 2 KIIs with mothers, 2 KIIs with girls and 2 KIIs with boys.

Findings on Women's empowerment factors

Empowerment at the **relational** level takes place in the relationships and power relations within the woman's surrounding network. It is the most challenging to achieve, due to the fact that women's immediate environment, such as family and community is responsible for it and usually benefits from those unequal relations. **Research found, that only 1% of surveyed women in Armenia are empowered through all relational factors.** Due to prevailing patriarchal norms, Women's decision-making and control over assets is low. Only one-quarter of surveyed women can influence decision-making and only one-third can control assets. Moreover, the majority of the surveyed women do not have control over time (81%). They do all the domestic work and care activities at the household and cannot delegate or redistribute those tasks while their male partners are responsible only for paid labour and are very minimally involved in childrearing. GBV and especially domestic violence is prevalent, but still limited with 16% of women experience some type of violence.

Empowerment at the **personal** level takes place within the person. This refers to the perception of the woman in relation to herself, her well-being, how she considers her role in society and that of other women. It speaks to women's overall resilience and the ability to manage daily stress. **Approximately 41% of women in Armenia are empowered through personal factors.** Overall, the majority of surveyed women have moderate self-esteem and good mental/spiritual well-being. However, the challenges encountered in the society make it difficult for women in Armenia to break out of the traditional gender roles and hold non-sexist attitudes. Acceptability of GBV is still high and prevalent in 37% of surveyed women, and harmful social norms and traditions still sustain sexism among 48% of women.

Empowerment through **environmental** factors looks at the broader context, which consists of informal components, such as equitable social norms, attitudes and the beliefs of wider society, and formal aspects, such as the gender-responsive political and legislative framework. **Only 1% of the surveyed women are empowered through environmental factors,** which does make sense, as relational and environmental factors are closely related and reinforcing one another. Even though freedom of movement is relatively high (70%), only 20% of women live in communities with low restrictive gender norms and 4% are able to access their civic rights, while 37% are able to access legal assistance.

Findings on Child Well-Being Outcomes

Children's well-being was measured by looking at physical outcomes, such as education, nutrition and health, protection, as well as mental and psycho-social indicators. **Only 1% of the surveyed children achieved well-being through all factors.** With regards to education the self-perceived functional literacy is relatively low among surveyed children, with 9% of children considering themselves as functionally literate in the three domains of language, digital and numbers. Surveyed children are all enrolled in informal education and 59% of them have positive attitude towards learning and willingness to pursue their education. With regards to nutrition and health, the vast majority of surveyed children have good or moderate diverse and adequate nutrition. Only 2% have poor nutritional outcomes, while overall, positive health-related behavior is developed in 10% of surveyed children.

When it comes to child violence, 43% of surveyed children in Armenia are highly exposed to violence and abuse, especially from their mothers and friends. 17% of children have heard about sexual violence in their community and 13% have heard about the online harm.

Self-esteem, mental and spiritual wellbeing, resilience and empathy feed into mental and psycho-social dimension of child well-being. The majority of surveyed children have moderate self-esteem and high resilience capacity, especially through the relation with their caregivers, as well as high empathy and all of them are spiritually empowered. Only 11% of children have probable or possible signs of depression.

Findings on the connection between women's socio-economic and demographic characteristics and their empowerment

According to research findings, women's education in Armenia is key contributor to women's empowerment. More specifically, women with tertiary education are more likely to enjoy freedom of movement and to not be submitted to movement restrictions in comparison to their less educated peers.

The household size is associated with women's control over HH assets and sexism, with women coming from large households more likely to be sexist and have no control on assets. And finally, women with higher income have better mental well-being than those with lower income.

Key Recommendations for programmes

- Address IPV, through mainstreaming GBV across all sectors. Both, GBV prevention and response to be included in the project designs and implemented/measured accordingly;
- Address harmful social and community norms through awareness raising and advocacy, while liaising with local faith leaders and power holders, for them to become allies in harmful norms transformation;
- Adopt project models/approaches that are gender-responsive and provide explicit opportunity to address gender norms and relations, as part of the project implementation;
- Adopt gender-transformative indicators that measure changes in gender norms and relations;
- Invest in further research and innovative pilots to find the most effective women empowerment models and practices;
- Invest in staff capacity building on gender equality and social inclusion, to improve the quality of interventions.

2- Background

Achieving child well-being outcomes remains a global challenge due to the prevalence of children's vulnerability, particularly in developing countries. Childhood is an essential period in human development, which affects social and economic life achievements in the adulthood, therefore, child focused outcomes are prominently featured in the international development agenda, especially in the last 20 years. World Vision is no exception, with its strategic commitment to help the most vulnerable children to overcome poverty and experience the fullness of life.

Gender inequality is one of the most powerful drivers of vulnerability for children in every context. For this reason, under the current UN 2030 Agenda, gender equality and women's empowerment are considered an *SDG accelerator*. In every part of the world women are still the primary caregivers for their children, which makes it logical to think that mothers' well-being would directly be connected with the well-being of their offspring.

Even though Armenia ranks 98th out of 153 countries in the World Economic Forum Global Gender Gap Report¹, according to the ISET Policy Institute², Armenia made a significant leap in the last 6 years towards the gender equality, especially compared to other post-Soviet neighbors. Major gains are reported in regards to access to education and health services. However, challenges remain in the area women's economic and political participation, women's unpaid, unsupported care work in the home and access to financial resources. The prevalence of gender-based violence (GBV) continues to be a pervasive challenge in the country. At the root of all of the above challenges hindering the full realization of gender equality in Armenia are the gender norms and subsequent gender stereotypes. These gender norms are perpetuated by families, communities, cultural and political leaders, state policies, education curricula, private sector and media³.

Armenian children face main problems that hinder their well-being. According to the data issued by the National Service of Statistics in Armenia, 41.9% of children live below the poverty line, and 4.9% endure conditions of extreme poverty. Some Armenian children face difficulties receiving the healthcare they need. However, the education participation of Armenian children is very promising⁴.

Despite of a clear linear logic, globally, as well as for the Armenian context, there is still a scattered evidence, on how exactly gender equality and women empowerment relate and contribute to children's well-being. Moreover, the understanding of the associations between women's empowerment factors and specific children's well-being outcomes is absent for Armenia, with no external and internal body of evidence that supports the linkages between them. This research contributes to building evidence on the association between women empowerment and child well-being, as well as contributes to improvement of existing programmes in WV Armenia while feeding into its strategy on prioritising gender-responsive programming.

¹ World Economic Forum Global Gender Gap Report http://www3.weforum.org/docs/WEF_GGGR_2020.pdf

² ISET Policy Institute (2021), [Measuring Gender Equality for Development](#)

³ UN Women Regional Office for Europe and Central Asia (2019). Armenia Country Gender Equality Brief.

⁴ Humanium. Children of Armenia. Realizing Children's rights in Armenia

3-Research Framework

The research framework is a result of analysing, adapting and merging several internal and external models and frameworks of Women Empowerment, Gender Equality and Child Well-Being. Consequently, the research framework is the first of its kind and different from existing GESI research models available in the literature. Some of the internal and external frameworks that were adapted to fit World Vision’s given research design are: (1) World Vision’s Gender Equality and Social Inclusion (GESI) Theory of Change (ToC)⁵; (2) Oxfam’s model of measuring women’s empowerment⁶; (3) World Vision International’s Child well-being (CWB) model. In addition, the research framework highlights the specific child well-being indicators that focus on children’s psycho-social well-being and their connection with the psycho-social well-being of mothers. More information on specific factors and sub-factors/indicators is displayed through the Figure 1 below.

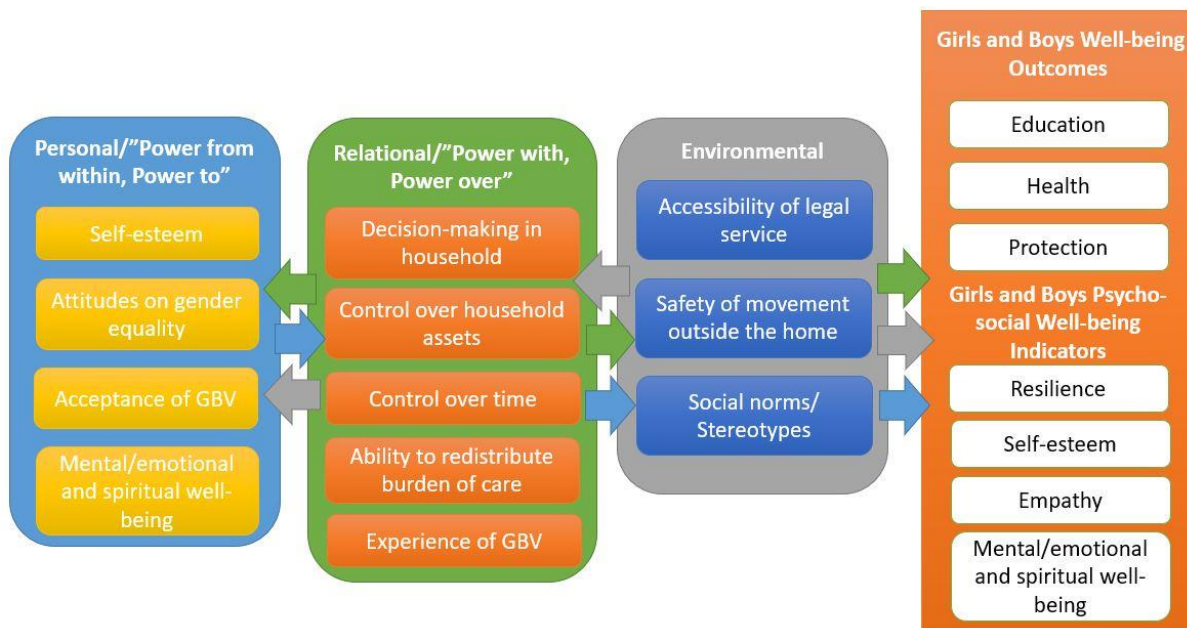


Figure 1: Research framework

Based on the theoretical framework, the research explores how selected personal, environmental and relational factors of women’s empowerment interact with one another and how these three empowerment dimensions influence core well-being outcomes in children.

⁵ GESI ToC link is not available at the moment as WV US is revising the framework

⁶ Oxfam 2017; A ‘How To’ Guide To Measuring Women’s Empowerment: Sharing experience from Oxfam’s impact evaluations.

4-Methodology

Research objective

The research examines the relationship between women's socio-demographic and empowerment factors and child well-being outcomes in Armenia. Various indicators of women's empowerment and child well-being are explored alone and correlated together to build evidence on the association and determine the specific factors of women empowerment that are associated with child well-being.

Research design and target population

Study design

World Vision carried out a mixed method study design, with girls and boys benefitting from World Vision programmes in Armenia and their respective mothers. The quantitative data was gathered through population-based cross-sectional design. The qualitative data was gathered through key informant interviews (KIIs).

Target populations

The research targeted World Vision beneficiary children living in structured families and their mothers. Participating girls and boys are aged 11-17 years old. Mothers' age is between 35 and 50 years old. Beneficiaries with an extensive support from World Vision (members of parents' clubs, youth clubs, economic empowerment projects, etc.) were not selected, to avoid data biases and to make the sample close to be representative of Armenia population.

Sampling framework and sample size

Sampling technique

The sample of surveyed children and their mother was selected by convenience based on the decision of operations and MEAL teams in WV Armenia, the sample was selected from a group of World Vision programme/ project participants from the vulnerable communities that World Vision Armenia serves.

Sample size

Following the framework of convenience sampling, the sample of 100 children and their respective mothers was estimated by the research team and MEAL team guided by their knowledge and experience in order to maximize the statistical power and to identify the relationships between women empowerment and child well-being. KIIs were conducted with 2 women and 4 children to complement the survey data and enable more in-depth analysis on research variables.

Tools

The survey and KII tools for women and children were developed by the Gender and Safeguarding Leader and the Programme Effectiveness advisor in World Vision Middle East and Eastern Europe Regional Office (WV MEERO), in consultation with World Vision Armenia. The survey tools relied on existing reliable and valid instruments to measure multiple dimensions of women empowerment and children well-being. The

tools were translated to Armenian by WV Armenia. The survey and KII tools in English are attached in Annex A.

Data collection and ethical considerations

The data collection took place during May/June 2021. In consideration to COVID-19 preventive measures, the quantitative and qualitative data was collected remotely through phone calls with mothers and children. Research enumerators entered the data directly on Microsoft online forms while surveying the participant over the phone. Prior to data collection, a training was conducted by MEERO to familiarize the research enumerators with the tools and build their capacities on using it. During the training, ethical considerations of consulting with girls/ boys and with women were emphasized. Due to the sensitivity of some questions, a gender-responsive and survivor-centered data gathering methodology was applied. Female enumerators interviewed and surveyed women and girls, while male enumerators surveyed and interviewed boys.

The data collection followed the minimum standards for consulting with girls and boys developed by the Inter-Agency Working Group on Children's Participation. The principles include transparency, honesty, accountability, provision of a child-friendly environment, equality of opportunity, and the safety and protection of children. The research took into account the special considerations required to gain informed consent, ensure confidentiality and anonymity, acknowledge the diverse cultures of the research sites, and refrain from presenting any information that may potentially harm participants. The facilitation team ensured the safe and ethical participation of women, girls and boys, strictly adhering to World Vision's Safeguarding policy and protocols, including a referral procedure in coordination with local Protection partners.

Data Analysis

Survey data from each mother and her child was paired together using SAS Programme to make a single observation of each pair. Once merged the database was imported to SPSS 24 for Windows. Descriptive analyses were conducted to describe the sample, where means with standard deviations for continuous variables, and frequencies and percent for categorical variables were reported.

Inferential statistics was carried out to assess the associations between socio-demographic factors, empowerment factors and child well-being outcomes using independent t-test, Fisher's and chi-square test. A p-value < 0.05 was used to indicate significance in all cases.

Limitations and challenges

When considering the findings of the study, some methodological limitations should be kept in mind. Namely, the sample size was chosen through a convenient sampling method, which follows non-probability rules. Thus, the results from this research cannot be generalised to the entire population of children and their mothers in Armenia. However, based on demographic distributions, the results can be generalised to the population of children and their mothers participating in World Vision sponsorship-funded programmes in Armenia. Accordingly, statistical associations were drawn from a convenient sample with limited power and research conclusions should be analysed carefully and explored further in future research.

5-Findings/ Discussion

Demographic and Socio-Economic profile of Women

Demographic profile

Surveyed women in Armenia have an average age of 31 years-old. The majority of them are married (86%) or previously married (10.6%) at an average marriage age of 23 years-old. They live with their children (98%) and their husband (86%) in households with an average of 4 members approximately. 19% of surveyed women live with their in-laws, especially their mother in-law, and 5% live with their parents, especially their mothers (Table 1).

Socio-economic profile

Education: The education attainment of surveyed women in Armenia is relatively fair. Almost three-quarter of them (44%) have finished upper-secondary education and one-third (35%) have completed technical school. The percentage of women with tertiary education remains relatively low with only 14% of surveyed women who hold university degrees. (Table 1).

Employment and income: The survey has observed a moderate participation in the economy and labour force for surveyed women with 42% of them doing a paid activity and among them the majority having a full-time job (53%), a part-time job (19.5%), or work in Agriculture (14.6%) (Table 1).

The average monthly family income is approximately USD 209 and the main contributor to the family income is the husband (64%) followed by the spouse (33%). Moreover 12% of households rely on the extended family, especially their in-laws and the in-laws to support their income (Table 1).

Vulnerability: The HH vulnerability is relatively prevalent in surveyed women. One-quarter live with members with physical disabilities, 15% live with chronically ill members, 13% live with elderlies, all in need of special care (Table 1).

		Frequency (%)
Total sample		N=100
Age	Mean (\pm sd)	28.3 (\pm 5.4)
Age getting married	Mean (\pm sd)	20.7 (\pm 3)
Household size	Mean (\pm sd)	4.9 (\pm 1.8)
Residency status	Citizen	100%
	Internally displaced	0%
Social status	Married	91%
	Widowed	5%
	Divorced	2%
	Separated	2%
Education	Intermediate	6%
	Secondary	44%
	University	14%
	Vocational	1%

	Technical	35%
With who do you live in the same household?	Husband	88%
	Children	100%
	Mother	5%
	Father	1%
	Mother-in-Law	44%
	Father-in-Law	27%
Family members unable to take care of themselves	Physical disabilities	25%
	Mental disabilities	2%
	Chronically ill	15%
	Elderlies	13%
Paid activity	No	58%
	Yes	42%
	Full-time	53.7%
	Part-time	19.5%
	Freelancer	7.3%
	Family business	4.9%
	Farming/ agriculture	14.6%
Monthly income	Mean (\pm sd)	209 (\pm 167)
Family members who contribute to family income	Respondent	33%
	Husband	64%
	Children above 18	2%
	Children under 18	0%
	Government/ NGO	13%
	Extended family	12%

Table 1: Demographic and socio-economic profile of surveyed women

Women's Empowerment State

Empowerment through Relational Factors

According to Oxfam's Women Empowerment model⁶, empowerment at the relational level takes place in the relationships and power relations within the woman's surrounding/immediate network. In order to define women empowerment through relational factors, five core indicators were selected. These are: household decision-making, control over household assets, control over time, ability to redistribute the burden of care and experience of GBV.

Household Decision-making

This indicator aims to measure the level of women's involvement in household decision making. The respondent was asked to state who normally makes most of the decisions concerning a list of activities within the household (Annex A). The activities are divided into three categories: decisions on consumption and expenditure; decisions on investment and business activities; and decisions on household management (Annex A).

The findings have shown that the majority of surveyed women (76%) do not have a decision-making power in their household and (Figure 2). If we look at sub-domains of decision-making, almost all of surveyed women (97%) said they can make or influence households decisions related to household management especially related to their children, However, only one-third can make or influence financial household decisions related to consumption and expenditures and 63% can make or influence decisions related to investment and business activities. During KIIs, Lia said: *“When the decision is related to purchasing kitchen equipment, I take it alone, when it is related to bigger issues, such as renovation, we decide together. There are also certain issues, when my husband decides alone and it is normal”*.

External literature confirms, that although one might expect that there has been a generational shift in attitudes toward more progressive family values among younger men and women, adherence to the traditional family system is still prevalent in Armenia. According to 2017 research studying Armenian youth⁷, only 13 percent of husbands of age 18 to 35 in rural areas stressed the influence of their wives on decision-making whereas married men in urban areas did not stress it at all.

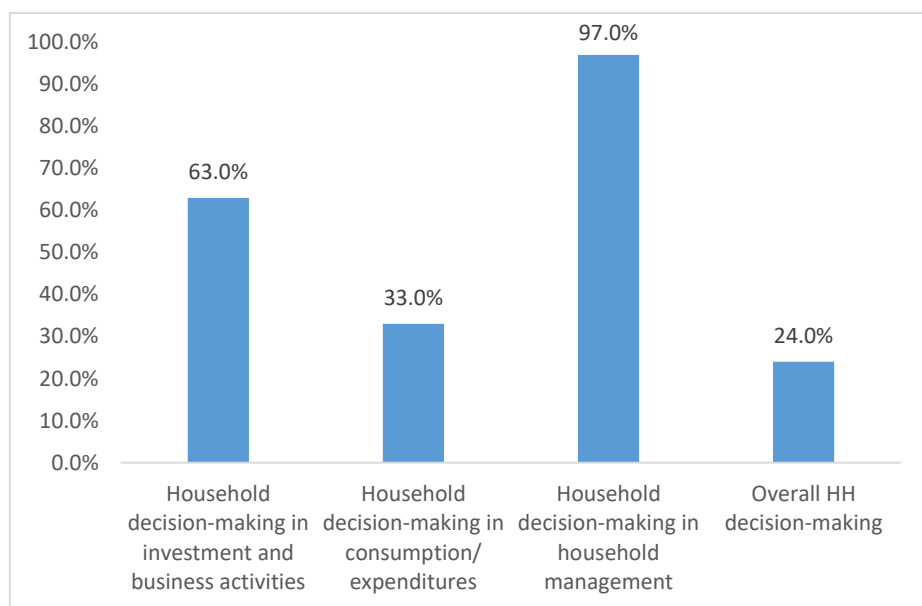


Figure 2: Household decision-making

Control over household assets

This indicator explores to what extent each woman has a control over the assets owned by the household. Control over household assets is captured by asking each respondent to estimate how many items the household owns from a list of assets. For each item owned by the household, the respondent is asked to indicate who decides whether to use, sell or replace the item if the need arose (Annex A).

Overall, 36% of women in Armenia said they have control over HH assets (Figure 3). However, the majority do not have an autonomous control to use, sell or replace the items, but a joint control with their husband. The least control women have is on agricultural lands and means of transportation and the

⁷ Mkrtychyan, V., Vermishyan, H. and Balasanyan, S. Independence Generation: 2016 Armenia Youth Study. Frederich Ebert Stiftung, 2017.

most control they have is on means of communications, household small consumer durables and large consumer durables (Figure 3).

According to USAID Gender Analyses⁸, although Armenian law grants equal property rights to women and men, women are not able to exercise these rights due to several factors including: discriminatory property registration practices; patrilocal marriages and inheritance practices; limited access to resources (due to limited access to and control over financial resources either through credit or income); and limited knowledge regarding their ownership rights over land, housing and other assets.

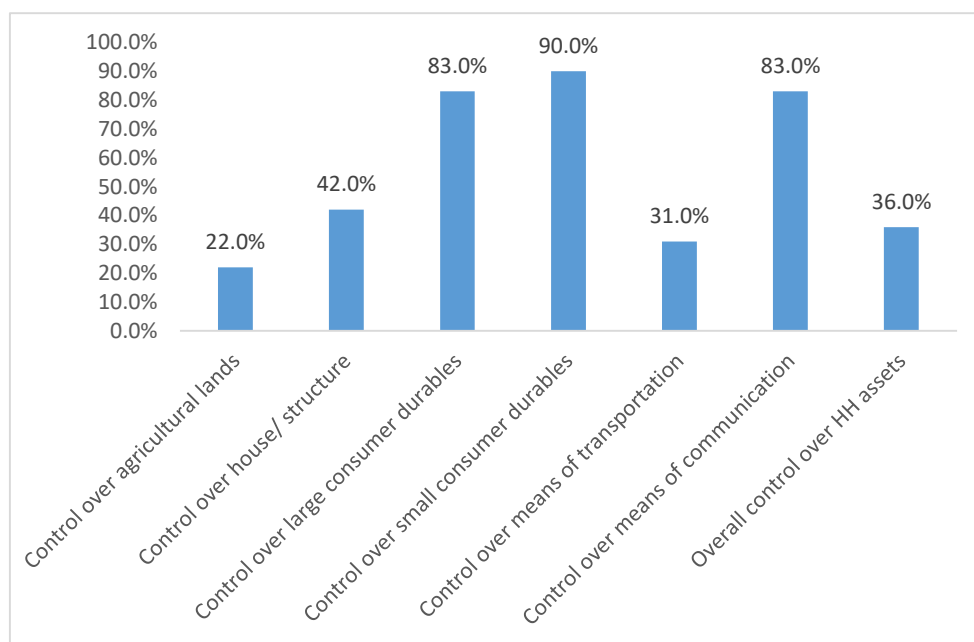


Figure 3: Overall control over HH assets

Experience of Gender-Based Violence (GBV)

Measuring women’s experience of GBV is important because the freedom from violence has been widely recognized as a critical dimension for empowerment. The respondents were asked if anyone has ever committed any of the violent actions listed towards them (Annex A). When the answer was yes, the respondents were asked if this took place within the household to identify domestic violence.

The findings have shown that only 16% of surveyed women in Armenia experience GBV (Figure 4) and among the victims, 56% experience domestic violence or IPV. The most common violence against women is emotional (13%), with lower prevalence of physical (4%) and sexual violence (1%) (Figure 4). It should be noted that earlier findings from World Vision Armenia suggest otherwise, as according to Caring for Equality Baseline Report⁹, 50 percent of men practiced emotional violence in the last 12 months, 35 percent practiced physical violence; and 53 percent practiced economic violence. Despite the significant progress towards gender equality, mentioned in the introduction, such a drastic decrease of GBV prevalence is still less probable.

⁸ USAID Armenia, *Gender Analyses Report (2019)*

⁹ Guntzberger, M., Kostelny, K, and K. Ondoro. *Caring for Equality Baseline Report, World Vision Armenia, March 2017*

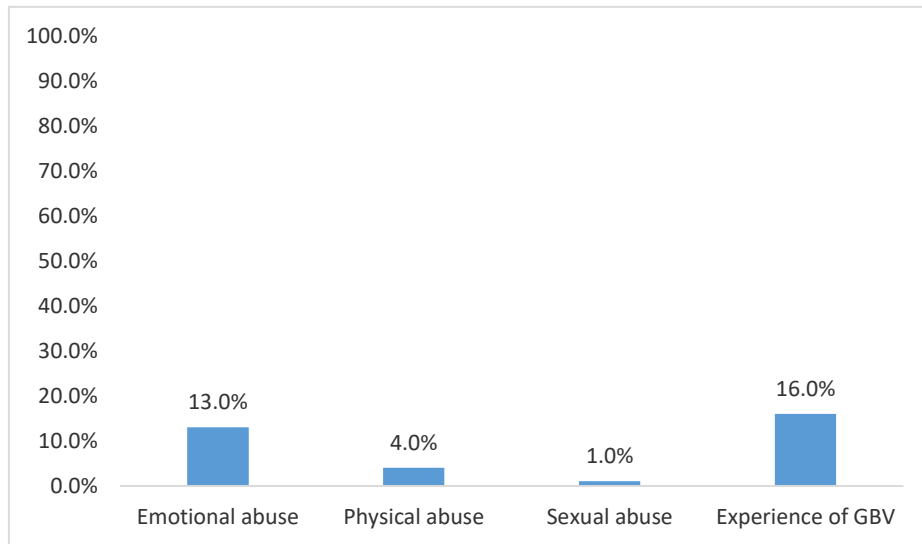


Figure 4: Experience of GBV

Control over time and redistribution of burden of care

The control over time indicator aims to measure the most important elements of daily time allocation and workload and to collect information on the number of hours dedicated to a particular task by the respondent and her husband. (Annex A). The redistribution of care indicator aims to measure the most important time allocation to care activities and is calculated through collecting information on the number of hours dedicated to a particular care tasks by the respondent. The indicator looks also on the women’s ability to delegate the care activities to her husband or another family member (Annex A).

The survey has revealed an unequal division of household activities, as women do almost all the unpaid and reproductive work, in addition to a paid work, while men are responsible only for the paid labor (Figure 5). As a result, the majority of the surveyed women (81%) do not have control over time, as the majority of them overwork and rest less than 10 hours per day including sleeping (Figure 6). When asked about rest time, Lia said: *“When I have free time, I do agriculture activities to feed my family”*. On division of household activity Liana added: *“My husband works and I am busy with household matters and my free time is dedicated to home management”*.

Men's involvement in childrearing is very limited with only 13% of surveyed women who said they can delegate the care activities to their husband (Figure 7).

As confirmed by the USAID analyses¹⁰, most Armenians adhere to traditional gender norms in which men are considered the breadwinners and are not expected to undertake domestic responsibilities including childcare. Even if a married woman works outside the home and earns income, she is still expected to continue to carry out all unpaid domestic responsibilities, including childcare and if a married women’s salary is high enough, she may be able to hire childcare and domestic help (mostly in Yerevan). However, the report concludes, that there is still the underlying expectation that a husband must out-earn his wife.

¹⁰ USAID Armenia, Gender Analyses Report (2019)

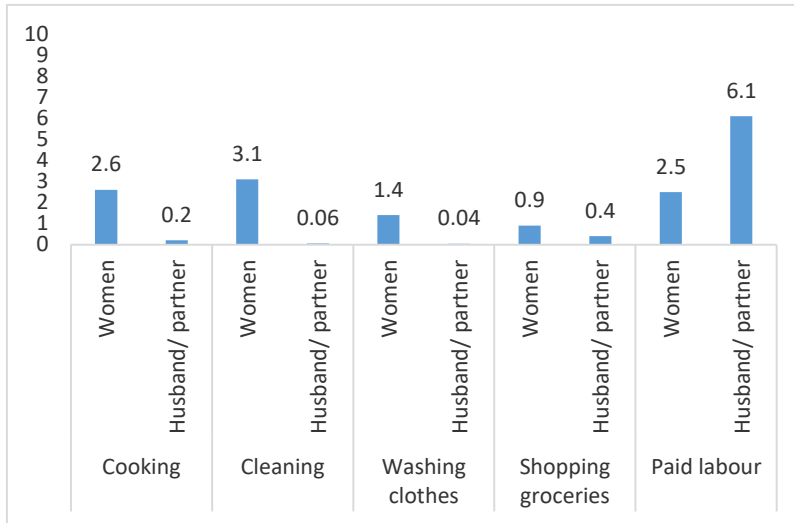


Figure 5: Comparison of work time (hours/day) between surveyed women and their husband

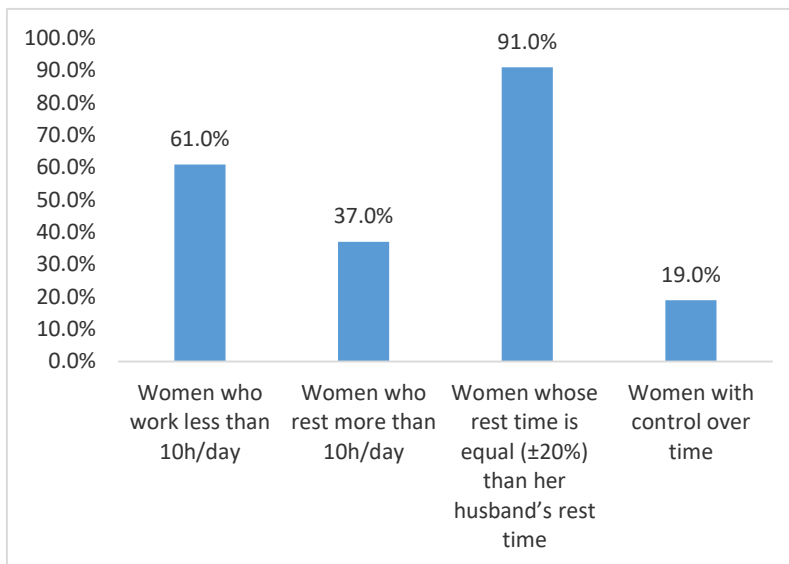


Figure 6: Control over time of surveyed women

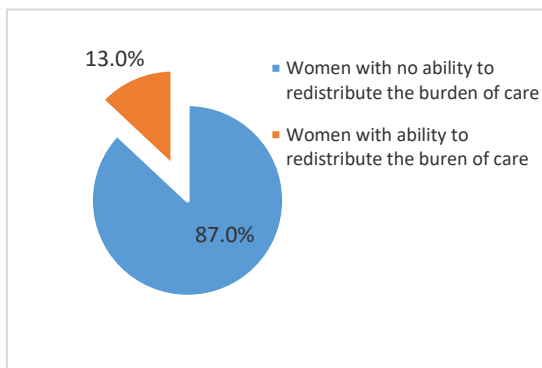


Figure 7: Ability to redistribute burden of care of surveyed women

Relational empowerment index

Only 1% of the surveyed women in Armenia are empowered through all relational factors, with all five indicators present. This result confirms the assumption that along with personal and environmental conditions, relational factors are critically important to achieve a full empowerment of women, but it's the lowest possible at the moment and will be the most challenging part of empowerment work, due to the fact that women's immediate environment (family, community) is responsible for it and might resist the change. Table 2 is a summary of all the indicators related to empowerment through relational factors.

Indicators of empowerment through relational factors	Frequency (%)
Women with household decision-making	24%
Women with control over household assets	36%
Women with no experience of GBV	84%
Women with control over time	19%
Women with ability to redistribute the burden of care	13%
Women empowered through relational factors	1%

Table 2: Indicators of empowerment through relational factors

Empowerment through personal factors

Changes at the personal level take place within the person. This refers to the qualities and perceptions of the woman in relation to herself, her well-being, how she considers her role in society and that of other women. The personal empowerment dimension was measured through five indicators: self-esteem, attitudes on gender equality (sexism), acceptance of GBV, mental/emotional and spiritual well-being.

Self-esteem

This indicator is measured by the Rosenberg Self-esteem scale (RSES, 1965)¹¹. The RSES scale is considered a reliable and valid quantitative tool for self-esteem assessment. It has been translated and adapted to various languages. It reflects the attitude that the respondent has towards herself. The respondent has to state to what extent she agrees or disagrees with each statement using a Likert scale ranging from strongly disagree to strongly agree (Annex A). The findings have shown that the majority of surveyed women have a moderate self-esteem (91%), while almost 15% have high self-esteem and only 4% have a low self-esteem (Figure 8).

Self-esteem is an important factor to achieve women empowerment because it heavily influences women's choices and decisions. In other words, self-esteem serves a motivational function by making it more or less likely that women will take care of themselves and explore their full potential. Women with high self-esteem are also women who are motivated to take care of themselves and to persistently strive towards the fulfillment of personal goals and aspirations. Women with lower self-esteem don't tend to regard themselves as worthy of happy outcomes or capable of achieving them and so tend to let important things slide and to be less persistent and resilient in terms of overcoming adversity.

¹¹ Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press.

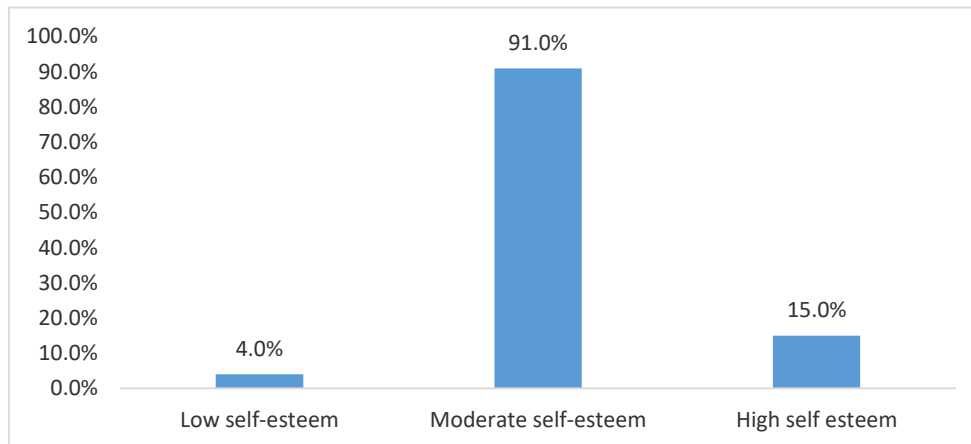


Figure 8: Self-esteem of surveyed women

Attitude on gender roles (sexism)

Women’s attitude and opinion on gender equality and sexism ideology have been measured using the Social Roles Questionnaire (SRQ) developed by Baber & Tucker in 2006¹². The SRQ is a 13-item scale that assesses how individuals conceptualize different social roles. This measure consists of two domains: gender transcendence, which captures the extent to which individuals conceptualize gender in non-dichotomous ways (i.e. People can be both aggressive and nurturing regardless of their sex), and gender-linked, which measures individual beliefs about whether social roles are associated with a particular gender (i.e. Girls need to be protected and watched over more than boys) (Annex A).

The majority of surveyed women have high scores on the gender transcendent scales which means the majority of surveyed women are likely to endorse high egalitarian and gender transcendent beliefs (85%). However, the challenges encountered by women in society often make it difficult for them to break out of the traditional gender roles, which explains why many women in Armenia hold high gender-linked views at the same time (36%) (Figure 9). The most prevalent beliefs on association of gender and social roles are that “father’s major responsibility is to provide financially for his children” and “some type of works are not appropriate for women” (Figure 10).

38% of women expressing sexist values are in alignment with USAID’s 2019 findings¹³, where 32% of women were supporting gender inequitable views. The report says that the gender-based discrimination and stereotyping should be explained by the patriarchal and traditional rigid social norms and perceptions regarding masculinity, femininity, gender equality, sexuality, the division of household tasks, and gender-based violence (intimate partner violence and peer violence), that remain prevalent in Armenian society.

¹² Baber, K.M., Tucker, C.J. *The Social Roles Questionnaire: A New Approach to Measuring Attitudes Toward Gender*. *Sex Roles* 54, 459–467 (2006). <https://doi.org/10.1007/s11199-006-9018-y>

¹³ USAID Armenia, *Gender Analyses Report (2019)*

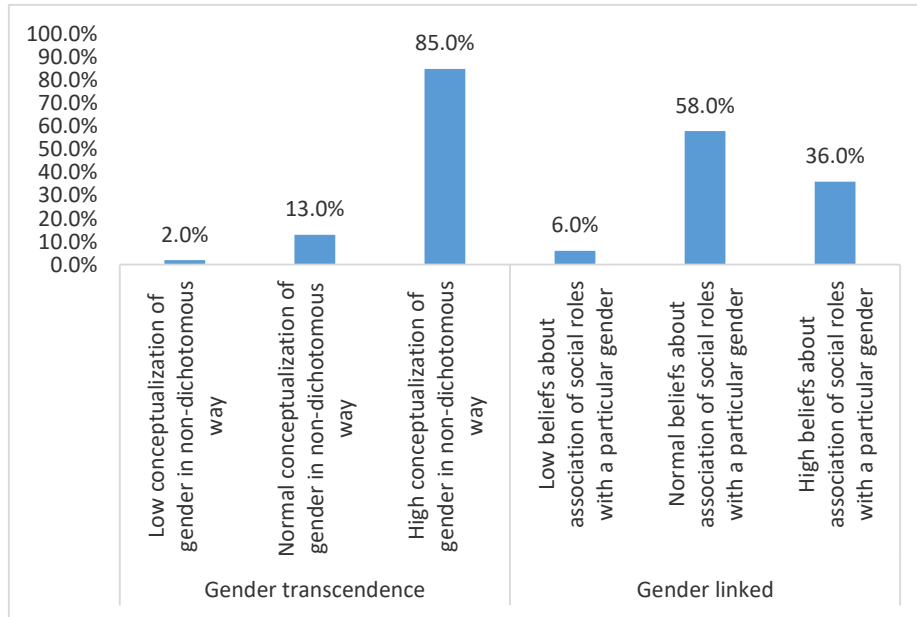


Figure 9: Gender transcendent and gender-linked attitudes

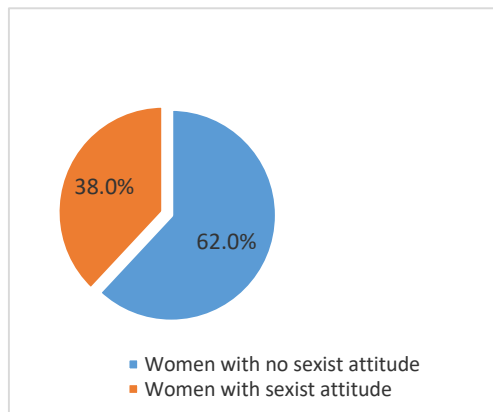


Figure 10: Sexist attitude of surveyed women

Acceptability of GBV

This indicator aims to measure the extent to which a surveyed woman considers domestic violence to be acceptable. Questions reported have come from a simplified version of the Demographic and Health Surveys (DHS) toolkit questionnaire¹⁴. Respondents are asked to say if they think it is acceptable for a man to beat his wife in a number of different circumstances (Annex A).

The results showed that the majority of surveyed women do not accept GBV (63%) while only more than one-third (37%) accept it (Figure 11). The most accepted circumstance for GBV is when women do not pay attention to children (25%), when she disobeys her husband (13%) and when her husband suspects she was unfaithful (24%). These findings show a significant progress since 2016, when WV Armenia

¹⁴ USAID. DHS program. Demographic and Health Survey. <https://dhsprogram.com/methodology/Survey-Types/DHS-Questionnaires.cfm>

reported¹⁵ high levels of acceptance of intimate partner violence among both, men and women. A 2016 study found that 66 percent of men and 63 percent of women reported that “if a woman betrays her husband, he can hit her.”

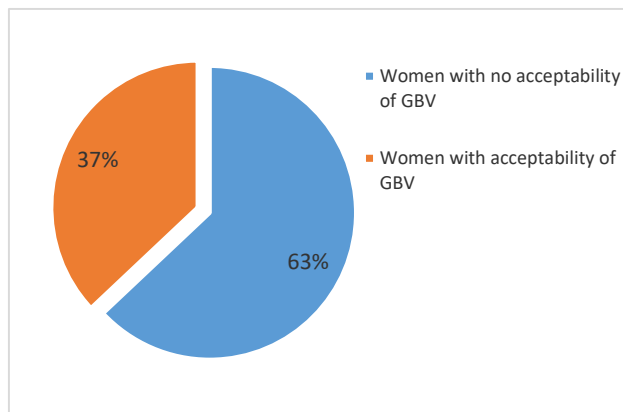


Figure 11 : Acceptability of GBV

Mental well-being

Women’s mental well-being was measured by the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)¹⁶. The 14-item scale has 5 response categories, summed to provide a single score. The items are all worded positively and cover both feeling and functioning aspects of mental wellbeing, thereby making the concept more accessible (Annex A).

Findings have shown that more than half of surveyed women have average mental health (67%) and one-quarter have good mental health (24%) while 9% showed signs of possible or probable depression (Figure 12). When asked about factors that affect her well-being Lia mentioned the financial resources “*We are trying to provide for our child, but we are not always capable and I am always stressed out about that*”. However, despite all the hardship Lia is resilient “*I have gone through many challenges and difficulties and I am always ready for more challenges to provide for my daughter*”. Liana added that the country’s political and conflict situation affects her well-being “*Everything was fine earlier, but now because of the situation in the country, especially the war, we are very worried, as we have two sons and it is almost time for them to serve the army*”.

¹⁵ Guntzberger, M., Kostelny, K, and K. Ondoro. *Caring for Equality Baseline Report*, World Vision Armenia, March 2017

¹⁶ Tennant, R., Hiller, L., Fishwick, R. et al. *The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): development and UK validation*. *Health Qual Life Outcomes* **5**, 63 (2007). <https://doi.org/10.1186/1477-7525-5-63>

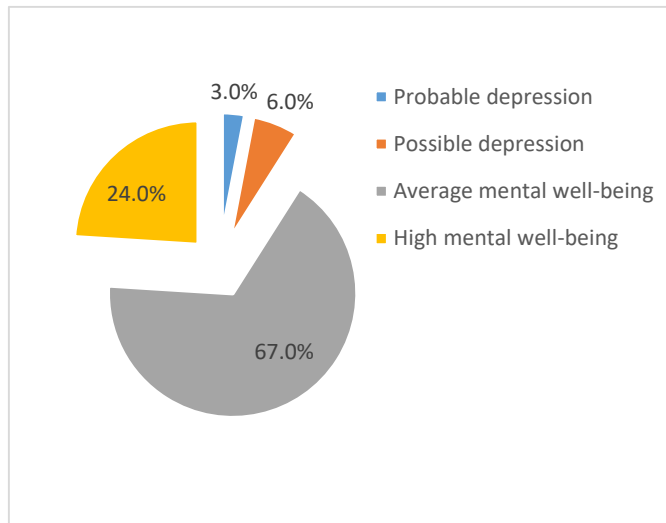


Figure 12: Mental well-being of surveyed women

Spiritual well-being

The Spiritual Well-Being Scale (SWBS)¹⁷ is a general indicator of perceived well-being used for the assessment of individuals of various faiths. The scale is composed of 20 items. Ten of the items assesses Religious well-being (RWB) and the other 10 assesses Existential well-being (EWB). The SWBS provides a subscale for Religious and Existential well-being, as well as an overall measure of the perception of an individual's spiritual quality of life. The Existential Well-Being Subscale gives a self-assessment of an individual's sense of life purpose and overall life satisfaction. The Religious Well-Being subscale provides a self-assessment of an individual's relationship with God (Annex A).

Findings from the SWBS have shown that the majority of surveyed women scored moderate or high on RWB and EWB subscale (Figure 13). Since the spiritual well-being indicator looks at women who either scored moderate or high on SWBS, that means the majority of surveyed women are considered as spiritually empowered (Figure 13).

The spiritual well-being can be considered as a sign of women's resilience against hardships. Religiousness is a significant resilience factor for many people. It helps individuals withstand the effects of life crises and major life stressors. There is also evidence that religiousness can help people move beyond prior levels of adjustment to achieve fundamental positive transformation in their lives¹⁸.

¹⁷ Paloutzian R.F. et al. (2021) *The Spiritual Well-Being Scale (SWBS): Cross-Cultural Assessment Across 5 Continents, 10 Languages, and 300 Studies*. In: Al A.L., Wink P., Paloutzian R.F., Harris K.A. (eds) *Assessing Spirituality in a Diverse World*. Springer, Cham. https://doi.org/10.1007/978-3-030-52140-0_17

¹⁸ Pargament, K. I., & Cummings, J. (2010). *Anchored by faith: Religion as a resilience factor*. In J. W. Reich, A. J. Zautra, & J. S. Hall (Eds.), *Handbook of adult resilience* (pp. 193–210). The Guilford Press.

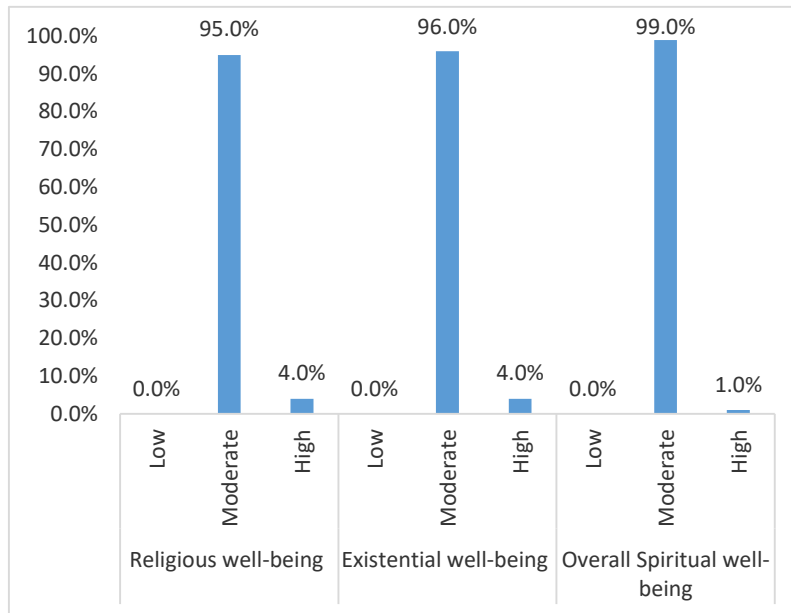


Figure 13: Religious, existential and overall spiritual well-being in surveyed women

Personal empowerment index

The research found that 41% of surveyed women in Armenia are empowered through all personal factors. Compared to relational empowerment score, this is a significant result and on one hand, it speaks to women’s overall resilience and the ability to manage daily stress. On the other hand, it speaks to the internalization of relational factors, which seem to not affect women’s self-perception and well-being anymore, as they are part of the everyday life and its corresponding social norms. Table 3 is a summary of all the indicators related to empowerment through personal factors.

Indicators of empowerment through personal	Frequency (%)
Women with high/ moderate self-esteem	96%
Women with no sexist attitude	62%
Women who do not accept GBV	63%
Women with high/ moderate mental well-being	91%
Women with high/ moderate spiritual well-being	100%
Women empowered through personal factors	41%

Table 3: Overall empowerment through personal factors

Empowerment through Environmental factors

Empowerment through environmental factors looks at the broader context, which consists of informal, such as inequitable social norms, attitudes and the beliefs of wider society, and formal aspects, such as the gender-responsive political and legislative framework. This dimension was measured by three key indicators: accessibility of legal services and civic rights (formal), safety of movement outside home (informal) and social norms/stereotypes (informal).

Social Norms/Stereotypes

This indicator aims to measure the social norms and stereotypes around women’s roles in the communities in which they live. The tool used is the Community-Level Restrictive Gender Norms¹⁹²⁰; a 14-item measure of descriptive norms (what the respondent thinks others do) and injunctive norms (what the respondent believes others think that she should do) related to gender. Items cover five domains: education, time use, financial inclusion and economic empowerment, relationships and marriage, and sexual and reproductive health.

Data have shown that only low proportions of surveyed women live in communities/surroundings with low restrictive gender norms and gender stereotypes (20%). On the other hand, the majority (80%) are exposed to harmful stereotypes in their communities, especially in the dimension related to time use and distribution of household tasks and financial inclusion and economic empowerment (Figure 14). During KIIs, Lia mentioned the stereotypes on financial inclusion *“There is no business for women and girls in our community. Not everyone is able to join the trainings organized, such as beadwork, hairdressing, manicure, since they are costly and not offered most of the time. For men having a job is easier”* Liana also said: *“The role of a woman is to take care of her family, I never had a desire to work”*. Children also mentioned the gender norms that hinder equality during the KIIs. Sergey, 14 said: *“Boys can communicate and express themselves freely and girls cannot”*. Liana, 14 said: *“There are no opportunities for girls to do physical fitness and sports”*.

Important to note, that according to USAID analyses, the political discourse on gender equality in Armenia has dramatically improved since the Velvet Revolution of 2018, as women actively participated in this mass social uprising, which challenged commonly-held stereotypes and perceptions on gender roles. The positive changes are noticeable in urban areas and despite the hopes for change at the political level, women have not yet seen the gains that they seek in terms of political participation and proportional representation in governance and decision-making.

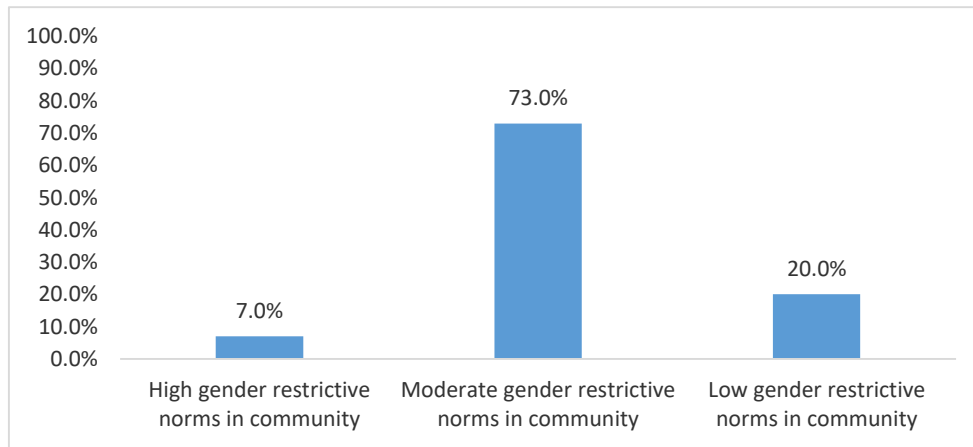


Figure 14: Restrictive gender norms in women’s community

¹⁹ https://emerge.ucsd.edu/r_lq503c5n20z3lyv2/

²⁰ Baird, S., Bhutta, Z. A., Hamad, B. A., Hicks, J. H., Jones, N., & Muz, J. (2019). Do restrictive gender attitudes and norms influence physical and mental health during very young Adolescence? Evidence from Bangladesh and Ethiopia. *SSM Popul Health*, 9, 100480. <https://doi.org/10.1016/j.ssmph.2019.100480>

Safety and freedom of movement outside the home

This indicator aims to measure the level of perceived freedom and safety of movement outside the house. Respondents are asked if they agree or disagree with statements referring to freedom of movement and security outside the house. Findings have shown that 30% of surveyed women suffer from restriction of movement and lack of safety outside home, while 70% did not report this issue (Figure 15).

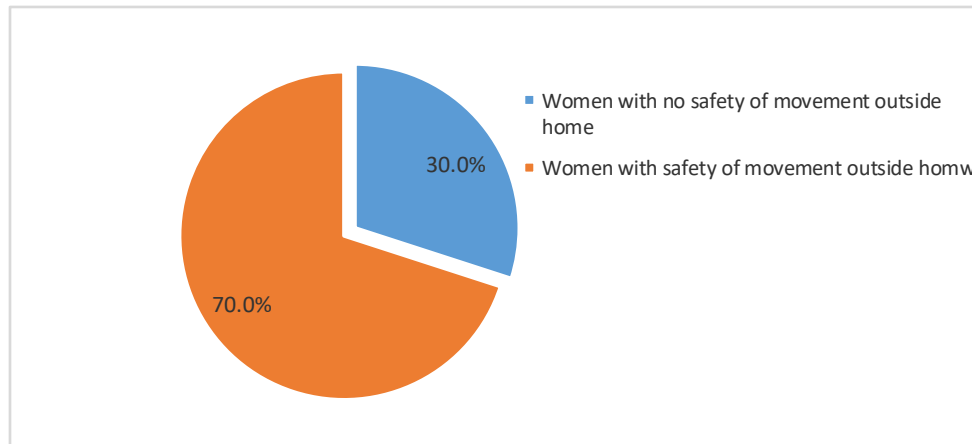


Figure 15: Safety of movement outside home for surveyed women

Civic rights and access to legal aid and assistance

This indicator aims to measure women’s access to legal services, legal assistance/aid and civic rights (Annex A). Data have shown that one-third (37%) of surveyed women have access to legal aid, ensuring equal access to justice for them, and only 4% have civic rights, including travel rights, custody rights after divorce, property rights and inheritance rights.

This finding is logical, since the legal system in Armenia remains challenging and continues to provide opportunities for gender-based discrimination, due to the lack of harmonization of laws across political entities, their inconsistent implementation, as well as lack of effective monitoring. In addition, according to OECD²¹, though women are granted the same rights as men to open bank accounts, women face discrimination in accessing credit, especially in rural areas. This is due the lack of specific laws to prohibit discrimination by creditors on the basis of gender or marital status.

More specifically, as per Armenia’s most recent Universal Periodic Review (UPR 2016) before the UN’s Human Rights Council, a key legislative gap in upholding the commitments made under the CEDAW is Armenia’s continued lack of a stand-alone non-discrimination law. As per the CEDAW Committee’s most recent Concluding Observations (COs), such a law would need to include a “broad definition of discrimination against women, covering direct and indirect discrimination by both State and non-state actors and encompassing intersecting forms of discrimination, in line with the Committee’s general recommendation No. 28 (2010) on the core obligations of States parties under article 2 of the Convention and previous concluding observations”. In 2019, as a step forward, a draft discrimination law was put forward by both State and non-state actors and encompassing intersecting forms of discrimination.

²¹ OECD. Armenia – Social Institutions and Gender Index Datasheet, 2019.

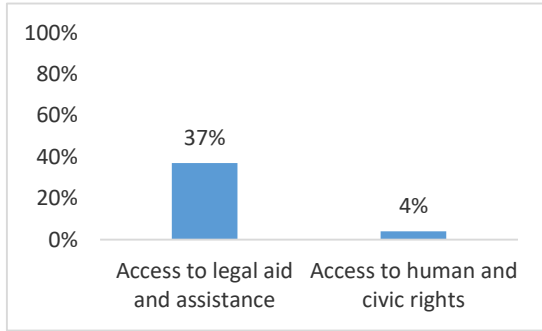


Figure 16: Access to legal aid and civic rights

Environmental empowerment index

Finally, the research found that only 1% of the surveyed women are empowered through all three environmental factors. This is not unexpected, looking at similar results in relational factors index, as relational and environmental factors are closely related and reinforcing one another. Table 4 is a summary of all the indicators related to empowerment through environmental factors.

Indicators of empowerment through environmental	Frequency (%)
Women living in communities with low restrictive gender norms	20%
Women enjoying safety and freedom of movement outside home	70%
Women accessing legal aid/ assistance	37%
Women accessing civic rights	4%
Women empowered through all environmental factors	1%

Table 4: Empowerment through environmental factors

Demographic and Socio-Economic Characteristics of children

Surveyed girls and boys in Armenia have an average age of 13-year-olds. The majority of them do equal reproductive work (with girls only doing more cooking) and care activity to help their family (Table 5). It is important to notice that none of the surveyed children is involved in formal child labour (Table 5).

		All children	Girls	Boys	P value
Total sample		N=100	N=54	N=46	
Age	Mean (\pm Sd)	12.8 (\pm 1.6)			
Gender	Girls	54%			
	Boys	46%			
Reproductive work and care activities	Cleaning house	92%	96.3%	87%	0.09
	Hours/ day				
	Cooking	72%	87%	54%	<0.0001*
	Hours/day				
	Taking care of young family members	94.6%	95%	94%	0.06
	Hours/day				
	Taking care of old family members	95%	96.9%	93.8%	0.5
	Hours/day				
	Taking care of sick family members	87%	87%	86%	0.6
	Hours/day				
	Taking care of animals	66%	57%	77%	0.09
	Hours/day				
Paid work	Supporting in agricultural tasks	80%	73%	88%	0.09
	Hours/day				
Paid work	Yes	0%	0%	0%	
	Hours/ day				

*Significant if <0.05

Table 5: Demographic and socio-economic characteristics of surveyed children

Children's well-being state

Children's well-being was measured by looking at their education, health, protection and psycho-social outcomes. In education three indicators were prioritized: self-perceived functional literacy, access to formal education and positive attitude towards learning. With regards to health, children's diet diversity and positive health-related behaviours were measured. As for the protection, physical, emotional and community perceived sexual/online violence indicators were used. Self-esteem, mental well-being, spiritual well-being, resilience and empathy feed into psycho-social dimension of children well-being.

Education

Self-perceived language development, digital literacy and numeracy: Functional literacy, or the ability to succeed in critical life pursuits, is an equally important outcome of education. Many of the outcomes included in functional literacy are skills necessary for both school success and success in later life. This indicator aims to assess the self-perceived and self-reported functional literacy of surveyed children in 3 domains: language development, digital literacy and numeracy. Children were asked about languages

they speak and how good they are in some important digital skills and daily used math skills. Functional literacy skills are measured based on the options of measurements for SDG target 4.6 provided by UNESCO in 2017²² (Annex A).

Results have shown that 69% of surveyed children speak second language, different from their primary language. The most spoken foreign languages are Russian and English (Figure 17). Functional digital literacy is the lower and prevalent in only 11% of children, who perceive their digital and computer skills as good (Figure 17). Numeracy is prevalent in 47% of surveyed children who self-measured their numerical skills in daily tasks as good (Figure 17). Finally, only 9% of children in Armenia have self-perceived functional literacy in all 3 domains. It is to note that no statistical difference between girls and boys was observed in any of the literacy domains.

School enrolment: This indicator aims to measure the enrolment in formal education of surveyed children. The results have shown that only 100% of surveyed children were enrolled in school. (Figure 17)

Attitude towards learning: Attitudes towards learning are important factors, especially in regards to the learners’ levels of goal setting, problem solving abilities, their beliefs towards learning, their inner and external motivations in the process of learning and all the academic performances they perform. The positive attitude makes the students more open to learning and increases their expectations from learning process. This indicator aims to measure the attitude towards learning of surveyed children through seven statements. Children were asked if they agree or disagree with each statement (Annex A).

The majority of surveyed children (60%) have positive attitude towards learning with no difference between girls and boys (Figure 17). Children who showed negative or neutral attitudes towards learning considered that they do not have the confidence to learn new things.

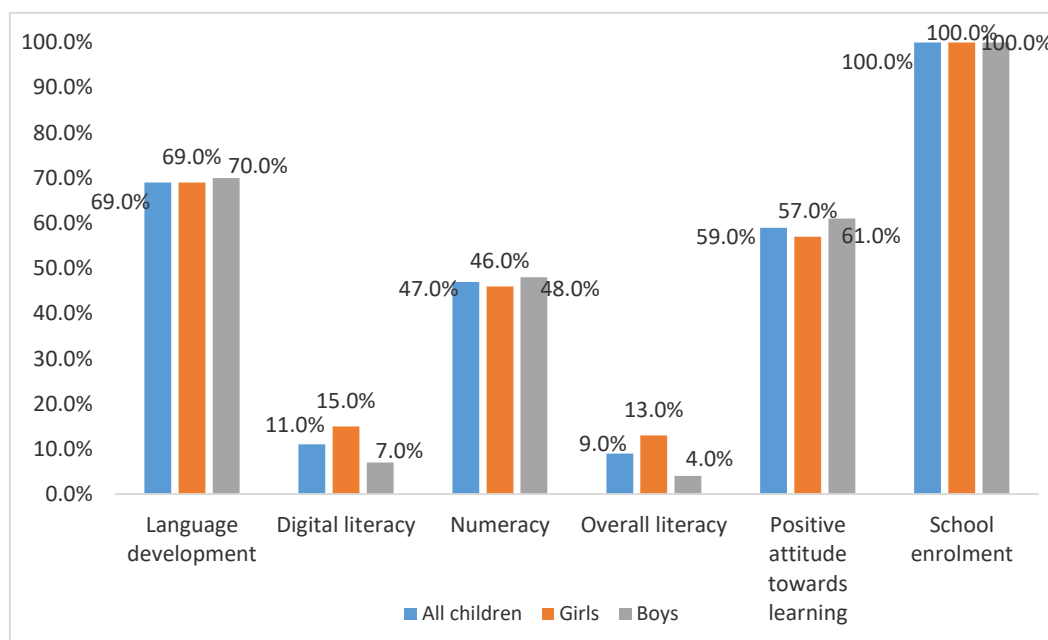


Figure 17: Educational outcomes of surveyed children

²² UNESCO (2017). Functional literacy and numeracy: Definitions and options for measurement for the SDG Target 4.6

Health and Nutrition

Diet Diversity: Dietary diversity is a self-reported measure of food consumption that reflects household access to a variety of foods, while at the individual level, it is a proxy of nutrient adequacy of the diet. Nutrient adequacy means being nutrition secure through the appropriate consumption of energy and all essential nutrients in sufficient amounts over time. Nutrient adequacy leads to optimal nutritional status in which both under and over nutrition are avoided. Diet diversity of surveyed children was assessed by using the Household Diet Diversity Score (HDDS) developed by USAID in 2006²³. Children were asked to tell how much they eat per week of seven food groups, including, cereals, vegetables/ leaves, fruits, proteins, pulses, dairies and oils (Annex A).

The results have shown that 49% of surveyed children have a good diet diversity, while 49% have medium one and 2% have low diet diversity, meaning that they do not receive an adequate nutrition for their health and development, with no difference between girls and boys (Figure 18).

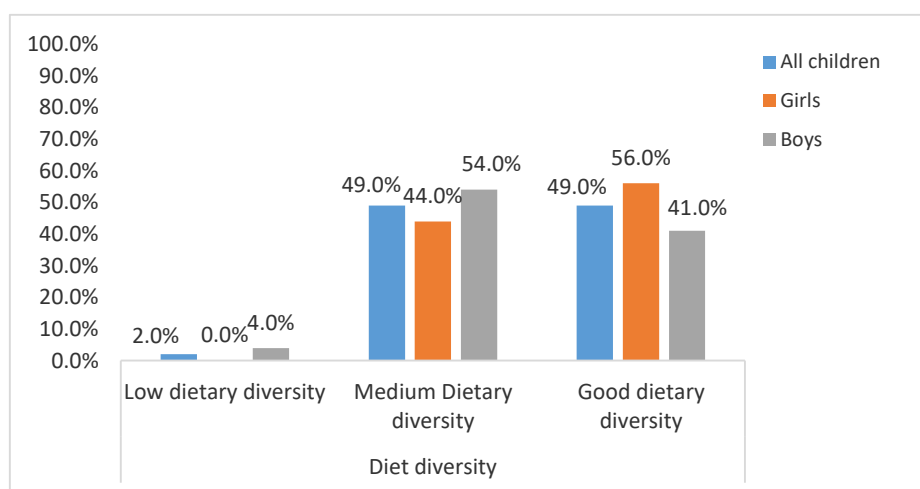


Figure 18: Diet diversity scale of surveyed children

Positive health-related behaviour: A number of health-related behaviours and conditions begin in adolescence that affect health both at the time and in later years. Some of these behaviours lead to the major causes of mortality and morbidity among adolescents such as injuries, or to conditions such as underweight and other nutrition deficiencies. Other behaviours begun in adolescence contribute to adult non-communicable diseases, including conditions related to tobacco or alcohol use and overweight or obesity. Conversely, adolescents' positive behaviours such as healthy eating and adequate physical activity can play a positive role in their health and development. This indicator aims to measure the positive health-related behaviour of surveyed adolescents in 4 questions, where children answered by yes or no (Annex A). The results have shown that 10% of surveyed children showed positive health behaviour, including abstinence from smoking, abstinence from drinking alcohol, wearing seat belt when passenger in a car and exercising and sweating, with no statistically significant difference between girls and boys (Figure 19). It is important to notice that none of the surveyed children smoke and only 2% drink alcohol

²³ <https://www.spring-nutrition.org/publications/tool-summaries/household-dietary-diversity-score#:~:text=Brief%20Description%3A%20The%20Household%20Diversity,number%20of%20different%20foods%20consumed.>

However, the majority of them (76%) do not exercise or do any physical activity and 72% do not wear seat belts in car.

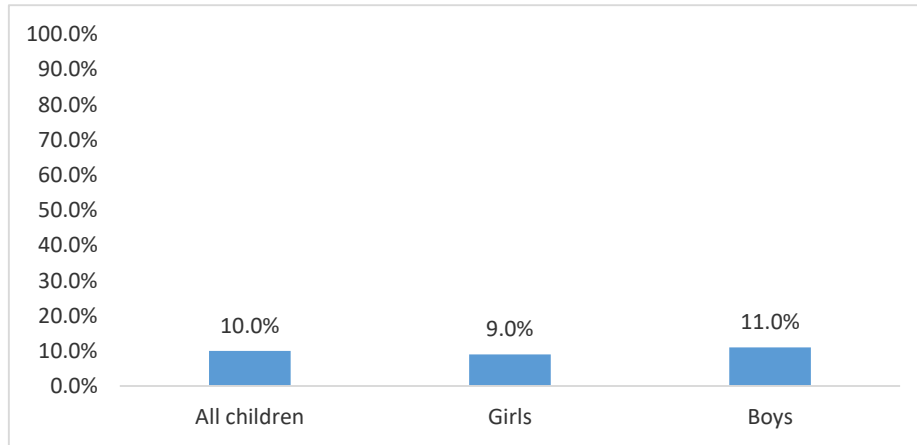


Figure 19: Positive health-related behaviour of surveyed children

Protection

Exposure to violence: Children that are exposed to violence as a witness on a regular basis often experience many of the same symptoms and lasting effects, as children who are victims of violence themselves, including PTSD. These children can feel emotional and physical "aftershocks" for months or even years. They can relive the event again and again in their minds, and be less able to function normally in their day-to-day lives. Some may become more aggressive, violent, and self-destructive. This indicator aims to measure children's direct exposure to physical and emotional violence and children's perception on the existence of sexual abuse and online harm in their communities (Annex A).

The results have shown that almost three-quarter (43%) of surveyed children in Armenia suffer from at least one type of violence, with no difference between girls and boys. The emotional/verbal abuse is more prevalent with 31% and 29% of children are exposed to physical abuse. Moreover, 17% of surveyed children have heard about case of sexual abuse in their community and 13% have heard about other children in their community exposed to online harm (Figure 20). Perpetrators of physical violence are likely to be friends. Moreover, 12% of children said that their mothers were emotionally/verbally abusing them (Figure 21).

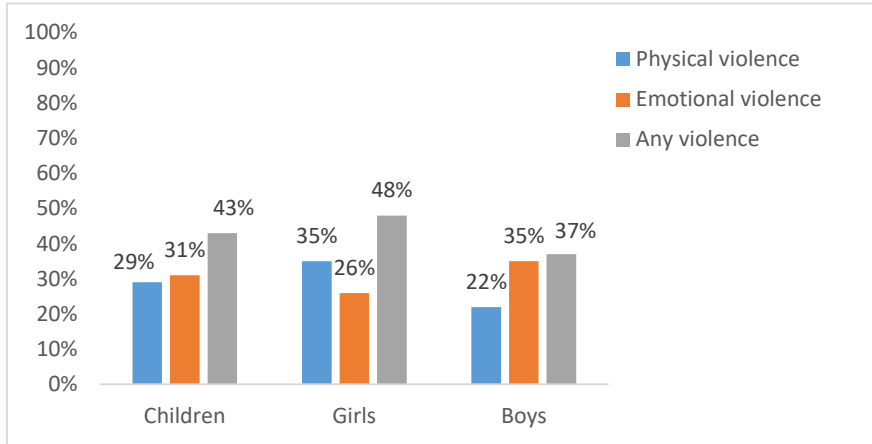


Figure 20: Exposure to physical and emotional/verbal violence and perception of existence of sexual abuse and online harm in communities of surveyed children

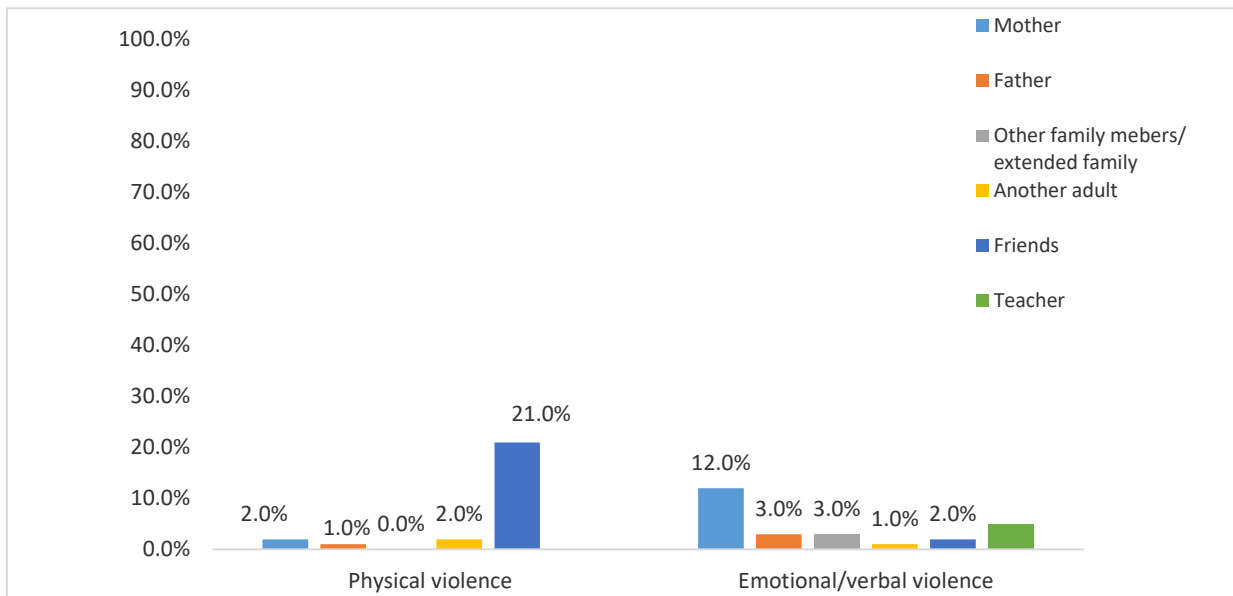


Figure 21: Perpetrators of physical and emotional/verbal violence

Psycho-social well-being

The well-being of adolescents has been shown to be related both to individual and contextual factors. Psycho-social well-being during adolescence has been shown to be integrally shaped by the daily contexts in which children grow and develop. The psycho-social aspects of adolescent well-being will be measured through three constructs: self-esteem, socio-ecological resilience and empathy.

Self-esteem: This indicator aims to measure children’s self-esteem using the same tool than their mothers; the RSES scale¹¹ (Annex A). Positive self-esteem for adolescents is important as it allows them to try new things, take healthy risks and solve problems. In turn, their learning and development will be

productive and will set them up for a healthy and positive future. A young person with healthy self-esteem is more likely to display positive behavioral characteristics, while children with low self-esteem tend to avoid situations where they think there's a risk of failure, embarrassment or making mistakes. These can involve school work, making friends, and trying new activities, which are all important parts of a healthy adolescent life. The results showed that almost all the children in Armenia have either moderate or high self-esteem and only a small proportion (2%) have low self-esteem (Figure 22).

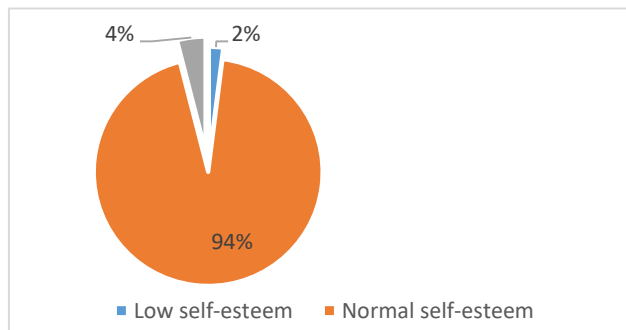


Figure 22: Self-esteem in surveyed children

Socio-ecological resilience: Resilience refers to the process of overcoming the negative effects of risk exposure, coping successfully with traumatic experiences, and avoiding the negative trajectories associated with risks. Socio-ecological resilience refers to culturally-relevant personal and caregiver resources that adolescents can use to adapt to stressful situations. This indicator aims to measure surveyed children's socio-ecological resilience capacity using the Child and Youth Resilience Measure (CYRM-R), a self-reported measure of social-ecological resilience used by researchers and practitioners worldwide²⁴ (Annex A). The CYRM-R recognizes two main dimensions in an individual's social ecology for adjusting to adversity. Caregiver resilience relates to characteristics associated with the important relationships shared, with either primary caregiver or a partner or a family. Personal resilience refers to intrapersonal and interpersonal resources to cope with a stressor (Annex A).

The analysis have showed that 97% of surveyed children have high personal resilience, thus, high interpersonal skills that allow them to bounce back when facing life stressors and hardships. On that topic, Liana 14 said: "I try not to concentrate on difficulties and go forward always". Moreover, 99% of children have exceptional or high caregiver resilience, which indicates excellent relationships with their caregivers that are nurturers of their resilience (Figure 23). Satenik, 13 during KIIs said: "When I have difficulties, I always refer to my mother and she always helps me" Overall, 99% of children have resilience capacities with no statistically significant difference between girls and boys (Figure 24).

²⁴ <https://cyrm.resilienceresearch.org/>

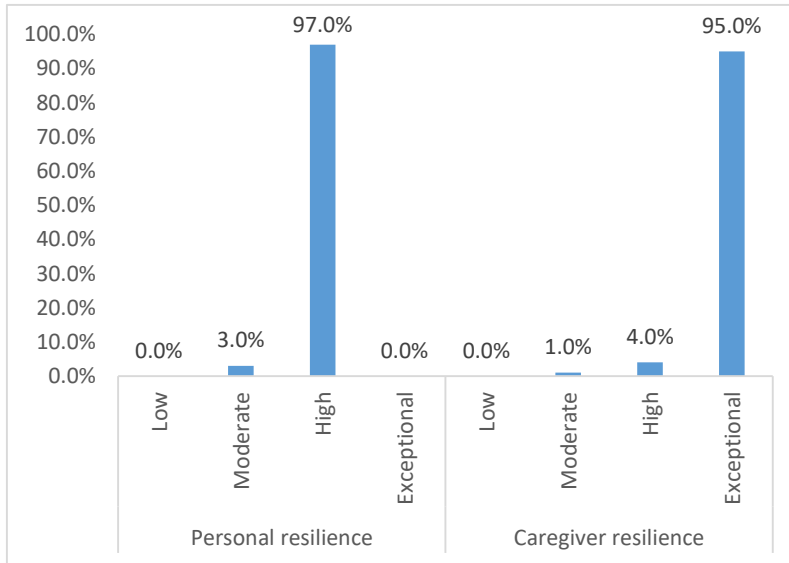


Figure 23: Personal and caregiver resilience of surveyed children

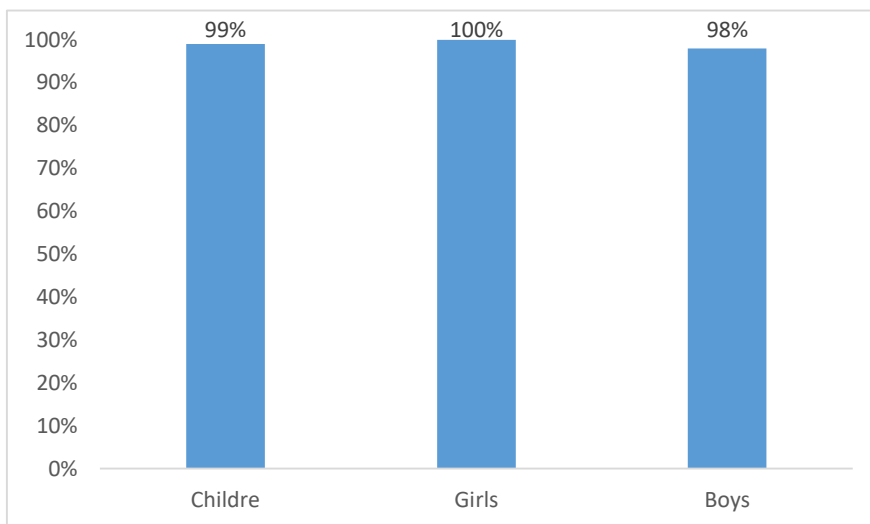


Figure 24: Socio-ecological resilience capacity in surveyed children

Empathy: Empathy has been defined as an emotional response to the affective state or situation of other people. Empathy emerges in the early childhood and become more complex during the individual development. Early adolescence is a particularly critical period for empathy development. Empathy results in greatest social benefits, because it allows to understand others' emotions and to get effectively involved without becoming overwhelmed. Low empathy is instead associated with more conflicts, aggressive behaviours and bullying. Individuals, with low empathy cannot imagine the consequences of their behaviour and the potential harm they might cause. This indicator aims to measure empathy in surveyed children using the Bryant empathy scale²⁵. The tool is designed to measure empathy in children and adolescents in order to foster an understanding of how empathy develops and how it relates to social

²⁵ Bryant, Brenda K. "An Index of Empathy for Children and Adolescents," *Child Development*, 53 (2), 1982, pp. 413–25.

development. The tool recognizes two main dimensions in adolescents' empathy: empathic sadness and reflecting attitude. Empathic sadness subscale measures the affective empathy, which is the ability to share the feelings of another person." This type of empathy helps children to build emotional connections with others. Reflecting attitude subscale measures the cognitive empathy, which is the ability to understand how a person feels and what they might be thinking. Cognitive empathy makes children better communicators, because it helps them relay information in a way that best reaches the other person (Annex A).

The majority (99%) of surveyed children are moderately or highly empathic, with no difference between girls and boys. Empathic children scored moderate or high on empathic sadness, which is their capacity to build connections with others. Children also scored high on reflecting attitude, which involves understanding other's feelings instead of only connecting with their own (Figure 24).

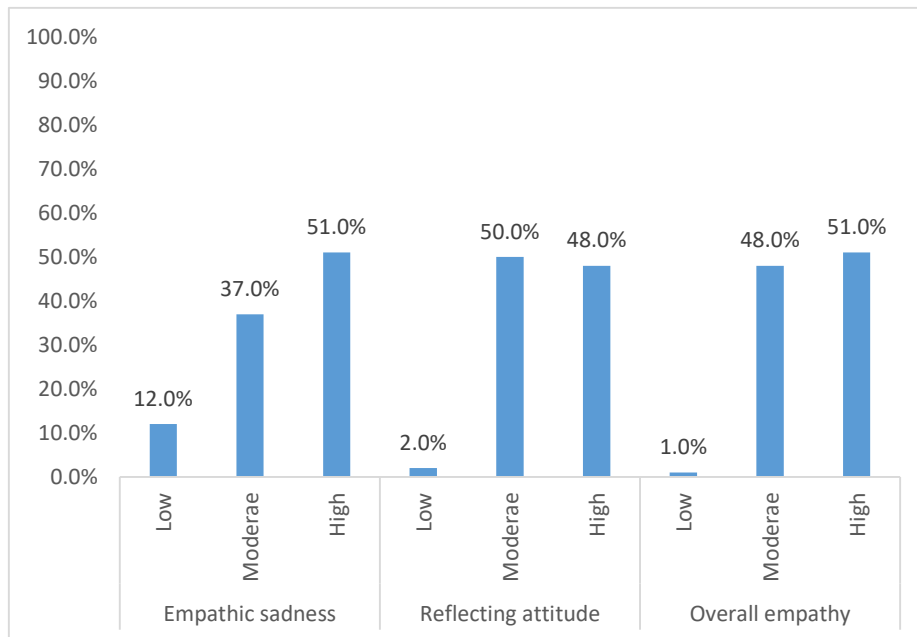


Figure 25: Empathic sadness, reflecting attitude and overall empathy of surveyed children

Mental well-being

Mental health: To be mentally healthy means for a child to be able to cope with stress in any situation, to go to school and play at home and in the community without feeling angry, anxious or depressed. A good mental health during childhood is fundamental to a child's development and for reaching one's own full potential. The mental well-being of surveyed children was measured using the same WEMWBS used to measure mental well-being in surveyed mothers¹⁶ (Annex A). The majority of surveyed children showed average or good mental health with only 11% having signs that might indicate a possible or probable depression (Figure 26). During KIIs, children mentioned some factors that affect their well-being such as the war, the family conflicts, the poverty and the exposure to violence. Hrach, 13 said: "Last year was very difficult, I lost my father during the war and I do not feel good at all", Sergey 14 said: "What affects me a lot is the relationship between my parents", Satenik 13, said: "I feel sad since my mom work hard and for very long hours in the field to provide for us", Liana 14 said: "I feel bad when I am offended by my friends".

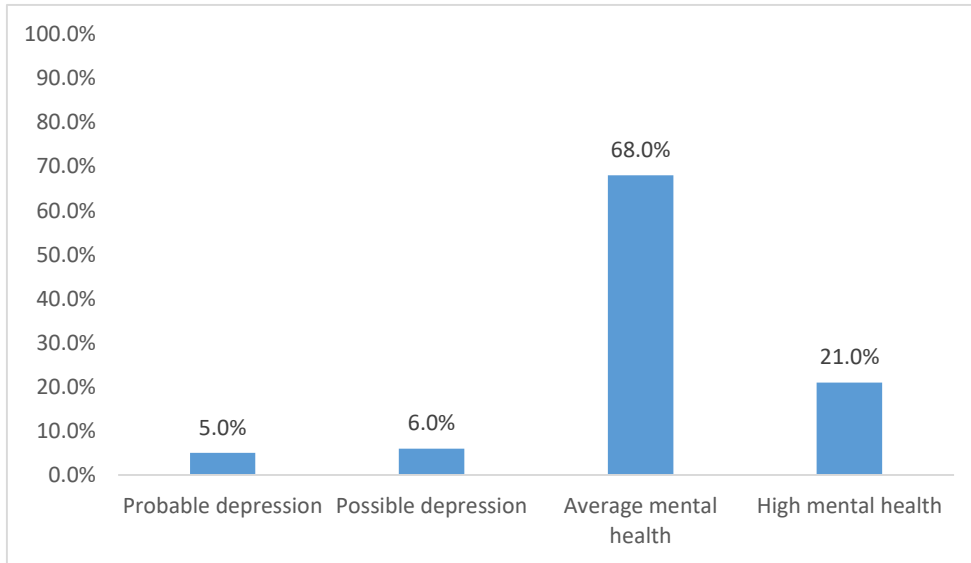


Figure 26: Mental well-being of surveyed children

Spiritual well-being

Spiritual empowerment: The spiritual well-being of children was measured using the same tool - SWBS that was used for mothers¹⁷ (Annex A). Results have shown that all surveyed children have spiritual well-being (Figure 27).

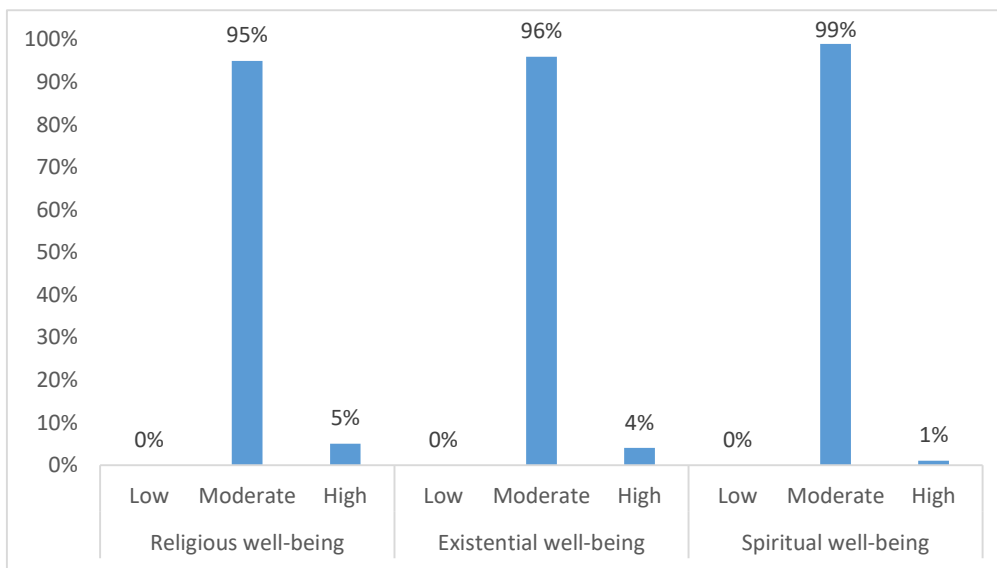


Figure 27: Spiritual well-being of surveyed children

Child well-being index

Only 1% of surveyed children in Armenia have showed well-being in all the dimensions of education, nutrition, health, psycho-social, mental and spiritual. However, if we exclude the physical factors and look only at psycho-social and mental well-being factors, we found out that a big majority of children (86%)

have well-being in all listed psycho-social dimensions. Table 7 provides a summary of all indicators of well-being in surveyed children.

Dimension	Indicators	
Education	Children with self-perceived functional literacy	9%
	Children with positive attitude towards learning	59%
	Children enrolled in formal education	100%
Nutrition Health	Children with diet diversity	98 %
	Children with positive health-related behaviour	10%
Protection	Children non-exposed to violence	57%
Psycho-social	Children with self-esteem	98%
	Children with socio-ecological resilience	99%
	Children with empathy	99%
Mental	Children with mental well-being	89%
Spiritual	Children with spiritual well-being	100%
Children with overall well-being		1%
Children educated with good health and protected from violence		1%
Children with psycho-social and mental well-being		86%

Table 6: Indicators of child well-being

Correlational Analysis

Association between mothers' socio-demographic factors and mothers' empowerment factors

Several socio-demographic factors in women's lives were significantly associated with their empowerment levels. Namely, the employment status, the household size and the income were all connected to women's empowerment. Table 7 provides in-depth statistical analysis on association between socio-demographic factors and women's empowerment, explained below:

- Low education attainment negatively affects women's empowerment. The lower is the education level, the more likely the women are not enjoying freedom of movement and are subject to movement restrictions (Table 7). This finding can be explained by the fact that women's education and personal autonomy are closely related, as more education brings more employment opportunities, along with more agency and awareness on how exercise own rights;
- Moreover, the household size is associated with women's control over HH assets and sexism with women coming from large households more likely to be sexist and have no control on assets (Table 7). Larger households are normally associated with an increased financial vulnerability and due to several generations living together, tend to have more hierarchical power dynamics. This explains why women in larger households are more vulnerable, by having less control over household assets, as well as being conditioned to maintain more traditional understanding of gender roles and relations within the family;
- Finally, women with higher income have better mental well-being, than those with lower incomes (Table 7). This finding is self-explanatory, as the average monthly income among the surveyed population is only 209 USD per month and the most vulnerable women worry about the severe lack of financial resources and inability to provide their children, which affects their mental health.

Women's socio-demographic factors		Safety/ freedom of Movement			
		No n (%)	Yes n (%)	P value	
Total Sample		N=30	N=70		
Education level	Prim/interm	5 (16.7%)	2 (2.9%)	0.01*	
	Secondary	24 (80%)	55 (78.6%)		
	Tertiary	1 (3.3%)	13 (18.6%)		
Women's socio-demographic		Control over HH assets		Sexism	Mental Well-being

factors		No n (%)	Yes n (%)	P Value	No n (%)	Yes n (%)	P value	No n (%)	Yes n (%)	P value
Total Sample		N=64	N=36		N=62	N=38		N=9	N=91	
Household size	Mean (sd)	5.4 (1.8)	4.0 (1.3)	<0.0001	4.6 (1.7)	5.4 (1.8)	0.03*			
Income	Mean (sd)							USD 110 (72)	USD 219 (171)	0.002*

*Significant if <0.05

Table 7: Association between women's socio-demographic factors and women's empowerment factors

Recommendations

Recommendations for donors, policymakers, and governments:

- Prioritise women's empowerment projects, with a strong focus on preventing GBV, shifting gender norms, provision of life skills and women's employment.
- Invest in adapting and expanding GBV response services such as shelters and safe spaces, along with psychosocial support and advice for individuals experiencing or at risk of GBV.
- Ensure gender equality is embedded in the education policy and practice, to ensure gender-responsive classroom practices and effective transition from education to workforce.
- Design and apply effective gender markers, that ensure proposed projects address root causes of gender inequality, by specifically tackling gender norms and gender relations.
- State and non-state actors to better coordinate their efforts to ensure women's empowerment dimensions are prioritised and addressed while developing and implementing national policies.

Recommendations for Programming:

- Consider women's empowerment as a critical precondition for achieving children's well-being and accordingly embed women's empowerment approaches into child-focused policies, strategies, and interventions.
- Ensure that all projects, regardless of the sector, are grounded in sound gender and social analysis, which seeks to understand the different experiences, needs and barriers of women/men and girls/boys.
- Provide income-generating activities for women and potentially create sustainable economic participation opportunities within the community.
- Provide mothers with education opportunities, connected with future employment, to improve their basic life skills and awareness of human/civic rights and services.
- Provide targeted mental and psychosocial support for mothers and their children, especially for the ones affected by GBV and IPV.
- Ensure adoption of project models/approaches that are gender-responsive and provide explicit opportunities to address gender norms and relations in the project design.
- Ensure consulting with women on their needs, barriers, and wishes while designing new projects and interventions, even when they primarily target children's well-being.
- Through informal power holders, strategically engage men and boys in dialogue to change social norms and strengthen their engagement in reproductive and caregiving roles, as well as women's participation in the economy.

- Invest in addressing harmful social and cultural norms, through awareness-raising in close partnership with local CSO and faith leaders, as the leading power holders for social change.
- Engage UN agencies, Civil Society Organisations, and organisations focusing on women's rights and empowerment for effective coordination and work alignment.

Conclusion

Provided study empirically investigated the association between women's empowerment dimensions and different child well-being outcomes, through analyzing the survey data with mothers and their children. It considered a multidimensional women's empowerment model represented by interconnection of relational, personal and environmental empowerment factors, leading to children's well-being outcomes. The study did not find a direct correlation between mothers' and children's well-being for Armenia sample, but confirmed the existing knowledge of relation between demographic factors (education, income, household size) and women empowerment. Available findings are aligned with the external literature and provide a scientific proof for the importance of women's empowerment.

As findings have demonstrated, only 41% of women in Armenia are empowered through personal factors, but only 1% of them - through all the three dimensions of personal, relational and environmental empowerment. The main barriers to women's empowerment are their inability to redistribute the burden of care, lack of access to employment opportunities, limited decision-making power within the household, as well as lack of knowledge and access to basic legal services and civil rights. Interviews confirmed that above listed adversities shape everyday life of Armenian women, which is also strongly influenced by COVID-19 pandemic, as well as the recent war in Armenia.

In light of research findings, more gender-specific and gender-responsive programmes and interventions are recommended, which address IPV, focus on increasing women's access to education and employment, promote women's status and rights within the family and community. Furthermore, looking at relational and environmental factors, addressing harmful social and gender norms through awareness raising, advocacy and partnering with formal and informal actors, such as faith leaders and local community power holders becomes critically important.

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Annex A: Research tools

Women Survey tool

Survey code number: (to be filled by interviewer, please apply the same code for mother and her child)

M _____

Socio-demographic characteristics

Initials: _____

Date of Birth: _____

What is your age? _____

Where do you currently reside?

- Albania Kosovo Armenia Bosnia & Herzegovina Iraq Jordan Lebanon
 Romania Syria Turkey

What is your current status in the country where you reside?

- Citizen
 citizen/ Host community
 Internally displaced
 Refugee

What is your social status? (If answer is single, skip to question 9)

- Single Married Widowed Separated Divorced Other

If other, please specify.....

At what age did you get married? -----

At what age did you have your first child:

How many daughters and sons do you have? ----Girls -----Boys

What is your highest level of completed education?

<input type="checkbox"/> None/ illiterate	<input type="checkbox"/> Intermediate level (grade 6 to grade 9)	<input type="checkbox"/> University level	<input type="checkbox"/> Vocational level
<input type="checkbox"/> Primary level (grade 1 to grade 5)	<input type="checkbox"/> Secondary level (High school or grade 10, 11 &12)	<input type="checkbox"/> Postgraduate level	<input type="checkbox"/> Technical level

What is the total number of members living with you in the same household? _

With who do you live in the same household? (Choose all that apply)

<input type="checkbox"/> Husband	<input type="checkbox"/> Children	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Grandparents
<input type="checkbox"/> Sisters/ Brothers	<input type="checkbox"/> Mother-in-law	<input type="checkbox"/> Father-in-law	<input type="checkbox"/> Sisters/ brothers-in-law	<input type="checkbox"/> Husband's grandparents
<input type="checkbox"/> Uncle/aunt	<input type="checkbox"/> Other	If other please specify:-----		

Please indicate if any of your family members are experiencing one of the following? (Choose all that apply)

- Members with physical disabilities
 Members with mental disabilities
 Members chronically ill
 Elderly members (above 75 years old)
 Other (Please specify):

Have you been doing any activity or paid work to help your family and contribute to the household income?

(If answer is No, skip to question 16)

Yes No

If yes, please specify the type of activity or paid work? (Choose all that apply)

Full-time employment

Specify full-time employment: _____

Part-time employment

Specify part-time employment: _____

Freelancer

Specify Freelance work: _____

Family business

Specify family business: _____

Farming/ agriculture

Other

Specify other: _____

What is the monthly family income (including safety nets, allowances and aid)? _____

Who contribute to family income: (choose all that apply)

<input type="checkbox"/> Respondent	<input type="checkbox"/> Children above 18	<input type="checkbox"/> Government/ NGO support/ safety nets/ social allowances	<input type="checkbox"/> Other, Please specify -----
<input type="checkbox"/> Husband	<input type="checkbox"/> Children under 18	<input type="checkbox"/> Extended family members/ in laws Please specify: _____	

If Covid-19 vaccine was available to you and your family*, would you accept to take it with your family or not? (By family we mean members >16 years old)

Yes No I don't know

Decision making in household

In your household, who normally makes most of the decisions about the activities listed below?	If decisions are NOT normally solely or jointly made by the respondent herself (answer 2, 4, 6): To what extent do you think you can influence the person who makes the decisions to change their decision?
1 = Respondent herself (skip to next item) 2 = Husband 3 = Respondent and husband jointly (skip to next item) 4 = Elder member or in-laws 5 = Respondent and another elder member/ in-laws jointly (skip to next item) 6 = Someone outside the household 0 = Household is not involved in this activity (skip to next item)	1 = Not at all 2 = To some extent 3 = To a large extent 9 = N/A

How to spend the money made from family business or main household income-generating activity?	<input type="checkbox"/>	<input type="checkbox"/>
What food to buy and consume	<input type="checkbox"/>	<input type="checkbox"/>
Purchase of furniture/ kitchen equipment	<input type="checkbox"/>	<input type="checkbox"/>
Purchase of plots of land or new house	<input type="checkbox"/>	<input type="checkbox"/>
Whether the household should take out a small loan, from what sources, and how much to borrow	<input type="checkbox"/>	<input type="checkbox"/>
How to invest the money borrowed	<input type="checkbox"/>	<input type="checkbox"/>
What to give relatives when they marry or have a celebration	<input type="checkbox"/>	<input type="checkbox"/>
The education of your children	<input type="checkbox"/>	<input type="checkbox"/>
The profession of your children		
How many children to have	<input type="checkbox"/>	<input type="checkbox"/>
Transfer of property to a relative or any other person	<input type="checkbox"/>	<input type="checkbox"/>
Approve a daughter/ son marriage	<input type="checkbox"/>	<input type="checkbox"/>

Control over household assets

	Does your household Currently own [list the item] ?	If the household owns this item now, ask: Who would you say can decide whether to sell or replace [list the item] if the need arises?
	0=No 1=Yes (If No skip to other item)	1 = Respondent herself 2 = Husband 3 = Respondent and husband jointly 4 = Another household member 5 = Respondent and another household member jointly 6 = Someone outside the household 9 = N/A
Agriculture lands (pieces, plots)	<input type="checkbox"/>	<input type="checkbox"/>
House (and other structures)	<input type="checkbox"/>	<input type="checkbox"/>
Large consumer durables (Stove or oven, TV, washing machine, dishwasher, fridge, sofa, beds)	<input type="checkbox"/>	<input type="checkbox"/>
Small consumer durables (Radio, cookware, pans, kitchen equipment)		
Means of transportation (bicycle, motorcycle, car)	<input type="checkbox"/>	<input type="checkbox"/>
Means of communication (Mobile phone, smartphone)	<input type="checkbox"/>	<input type="checkbox"/>

Experience of GBV

	Now I need to ask you about some things that may have been done to you by someone. Has anyone ever done any of the following to you during the last 12 months?	Did this take place within the household?
	1 = Yes 2 = No (skip to next action) 8 = No answer (skip to next action) 9 = Don't know (skip to next action)	1 = Yes 0 = No 9 = N/A
Say something to humiliate you in front of others		
Threaten to hurt or harm you or someone you care about		
Insult you or make you feel bad about yourself		
Push you, shake you, slap or punch you or throw something at you		
Hit you with hard objects such as stick, belt, etc...		
Threaten to attack you or attack you with a knife, gun or other weapon		
Burn you with hot objects such as cigarettes		
Made you have a sexual/intimate relationship by force, or threat of force?		
Touched you in intimate areas without your consent		

Control over time

	How many hours did you spend doing this activity per day?	How many hours did you husband spend doing this activity per day?
	Number of hours: (put 0 hours if not applicable)	Number of hours: (put 0 hours if not applicable)
Cooking	_____	_____
Cleaning the house	_____	_____
Washing clothes	_____	_____
Formal labour/ paid work outside home	_____	_____
Shopping for groceries	_____	_____
Leisure time (e.g. socializing with neighbours, sports, etc...)	_____	_____
Sleeping at night	_____	_____
Personal care and rest	_____	_____

Ability to redistribute burden of care responsibilities

	How many hours did you spend doing this activity?	If hours>0: How frequently do you delegate this activity to your husband or another adult family member to do another activity or to rest?
	Number of hours: (put 0 hours if not applicable)	0 = never 1-Rarely 2-sometimes 3-often 4-Always
Feeding a child	_____	<input type="checkbox"/>
Bathing and dressing a child	_____	<input type="checkbox"/>
Playing with a child	_____	<input type="checkbox"/>
Helping a child with school work	_____	<input type="checkbox"/>
Accompanying a child to school or clinic	_____	<input type="checkbox"/>
Feeding a disabled, old or sick adult	_____	<input type="checkbox"/>
Bathing a disabled, old or sick adult	_____	<input type="checkbox"/>
Accompanying an adult to health clinic or any other public service	_____	<input type="checkbox"/>

Self-Esteem

To what extent do you agree or disagree with the following statements?	0 = Strongly agree 1 = Agree 2 = Disagree 3= Strongly disagree
On the whole, I am satisfied with myself.	<input type="checkbox"/>
At times I think I am no good at all	<input type="checkbox"/>
I feel that I have a number of good qualities.	<input type="checkbox"/>
I am able to do things as well as most other people	<input type="checkbox"/>
I feel I do not have much to be proud of	<input type="checkbox"/>
I certainly feel useless at times	<input type="checkbox"/>
I feel that I'm a person of worth, at least on an equal plane with others	<input type="checkbox"/>
I wish I could have more respect for myself	<input type="checkbox"/>
All in all, I am inclined to feel that I am a failure	<input type="checkbox"/>
I take a positive attitude toward myself.	<input type="checkbox"/>

Attitude on Gender equality (Sexism)

Please indicate the percentage extent ranging from 0% to 100% to which you agree with each statement	Percentage
People can be both aggressive and nurturing regardless of sex	
People should be treated the same regardless of their sex	
The freedom that children are given should be determined by their age and maturity level and not by their sex	
Tasks around the house should not be assigned by sex	
We should stop thinking about whether people are male or female and focus on other characteristics	
A father's major responsibility is to provide financially for his children.	
Men have more sexual demands than women.	
Some types of work are just not appropriate for women.	
Mothers should make most decisions about how children are brought up.	
Mothers should work only if necessary.	

Girls should be protected and watched over more than boys.	
Only some types of work are appropriate for both men and women.	
For many important jobs, it is better to choose men instead of women	

Acceptability of GBV

In your opinion, is it acceptable for a man to beat his wife if:	1 = Yes 0 = No 8 = No answer 9 = Don't know
She burns food	<input type="checkbox"/>
She argues with him	<input type="checkbox"/>
She goes out without telling him	<input type="checkbox"/>
She doesn't pay attention to her children	<input type="checkbox"/>
She refuses to have sexual intercourse with him	<input type="checkbox"/>
She disobeys him or other family members	<input type="checkbox"/>
He suspects that she has been unfaithful	<input type="checkbox"/>
She spends money without permission	<input type="checkbox"/>
She goes to see her family without permission	<input type="checkbox"/>
Any other circumstance not mentioned above: Please specify:-----	<input type="checkbox"/>

Mental Wellbeing

How frequently do you feel the following?	None of the time (1)	Rarely (2)	Some of the time (3)	Often (4)	All of the time (5)
I've been feeling optimistic about the future					
I've been feeling useful					
I've been feeling relaxed					
I've been feeling interested in other people					
I've had energy to spare					
I've been dealing with problems well					
I've been thinking clearly					
I've been feeling good about myself					
I've been feeling close to other people					
I've been feeling confident					
I've been able to make up my own mind about things					
I've been feeling loved					
I've been interested in new things					
I've been feeling cheerful					

Spiritual Wellbeing

To what extent do you agree or disagree with the following statements?	Strongly agree (1)	Moderately agree (2)	Agree (3)	Disagree (4)	Moderately disagree (5)	Strongly disagree (6)
I don't find much satisfaction in private prayer with God						
I don't know who I am, where I came from, or where I'm going						
I believe that God loves me and cares						

about me						
I feel that life is a positive experience						
I believe that God is not interested in my daily situations (daily problems, stress, etc.)						
I feel unsettled about my future.						
I have a personally meaningful relationship with God						
I feel very fulfilled and satisfied with life						
I don't get much personal strength and support from God						
I feel a sense of well-being about the direction my life is headed in						
I believe that God is concerned about my problems						
I don't enjoy much about life.						
I don't have a personally satisfying relationship with God.						
I feel good about my future						
My relationship with God helps me not to feel lonely						
I feel that life is full of conflict and unhappiness.						
I feel most fulfilled when I'm in close relationship with God						
Life doesn't have much meaning.						
My relation with God contributes to my sense of well-being						
I believe there is some real purpose for my life						

Breaking stereotypes

The following questions will ask you about what your community thinks about the way boys/men and girls/women should act, as well as how people think you should act based on your being male/female.

How much do you agree or disagree with each of the following statements? a. Agree/Partially Agree b. Disagree/Partially Disagree	Letter
Our culture makes it harder for girls to achieve their goals than boys	
Adolescent girls in my community are more likely to be out of school than adolescent boys	
Girls in my community are sent to school only if they are not needed to help at home	
Most people in my community expect girls to be sent to school only if they are not needed at home	
Most boys and girls in my community do not share household tasks equally	
Most people in my community expect men to have the final word about decisions in the home	
Most people in my community do not expect girls and boys to share household tasks equally	
Most men in my community are the ones who make the decisions in their home	
Most women in my community have the same chance to work outside the home as men	
Most people in my community expect women to have the same chance to work outside the home as men	
Most adolescent girls in my community marry before the age of 18 years	
Adults in my community expect adolescent girls to get married before the age of 18 years	

Most families in my community control their daughters' behaviors more than their sons' behaviors	
Most people in my community expect families to control their daughter's behavior more than their sons' behaviors	

Safety and Freedom of movement outside the home

Do you agree or disagree with the following statements?	0=Disagree 1=Agree
Do you feel safe to walk/ move alone around your area during the day?	
Can you go unescorted to your parents' house/ village?	
Are you allowed to go alone to a relative's house inside the village?	
Are you allowed to go alone to meet your friends for any reason?	
Have you ever gone to the market within your village to buy personal items alone?	
Have you ever attended any sort of events/ activities in your community? (Ex: fair, theatre, cultural program, religious event)	

Access to Human Rights, Legal Aid and Assistance

Please answer the following statements?	0=No 1=Yes 8=Not Applicable 9=I don't know
Can you receive legal advice from a lawyer, paralegal or legal aid centre when you need it?	
Is the process to recruit a lawyer/ paralegal to represent you expensive?	
Are counseling services or psycho-social support available when you need it?	
Do you have the same right than your husband/ partner to be the legal guardian of a child during marriage?	
Do you have the same right than your husband/ partner to be the legal guardian of and have custody rights over your own child after divorce?	
Are you required by the law in your country to obey your husband?	
Do you have with your husband equal ownership rights to property (house, land, etc...)?	
In case your husband/ partner deceased, do you have equal inheritance rights to property?	
Can you travel alone with your children to another country or another area?	
Can you register alone your child in school?	
Can you open a bank account alone without a man?	
Can you register a business alone without a man?	

Children survey tool

Survey code number: (to be filled by interviewer, please apply the same code for mother and her child)

C_____

Socio-demographic Characteristics

What is your gender? Girl Boy

What is your age? -----

What are your mother's initials? _____

What is your mother Birth date? (Year/Month/Day)-----

Where do you currently reside?

- Albania Kosovo Armenia Bosnia & Herzegovina Iraq Jordan Lebanon
 Romania Syria Turkey

Have you been doing any of the listed activities at home to help your family?

Cleaning house	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
Cooking	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
Taking care of young family members (Siblings, babies, etc.)	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
Taking care of old family members	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
Taking care of sick family members	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
Taking care of animals	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
Supporting in agriculture tasks	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A

If answer is yes on any activity, how many hours per day do you spend doing the listed activities to help your family?

Have you been doing any activity or paid work to help your family and contribute to the household income? (If answer is No, skip to question 11)

No Yes

If yes, please specify the type of activity or paid work? _____

If yes, how many hours per day do you spend doing paid job? _____

Reported Skills

Language Skills

What is your first Language?-----

Which languages other than your first language do you speak well enough to have a conversation?-----

Computer Skills

	How are you good at using computers for?
	3= very good 2= Fairly good 1= Below average 0=poor 9=NA
Word processing-writing letters or documents (MS Word)	<input type="checkbox"/>
Accessing the internet (WEB) and searching for information	<input type="checkbox"/>
E-mail	<input type="checkbox"/>
Using spreadsheets/database (MS Excel)	<input type="checkbox"/>
Education and learning	<input type="checkbox"/>
Games	<input type="checkbox"/>
Presentation (MS Power Point)	<input type="checkbox"/>

Numeracy Skills

	How good are you at working with numbers when you need to?
	3= very good 2= Fairly good 1= Below average 0=poor 9=NA
Count money	<input type="checkbox"/>
Check and compare price labels	<input type="checkbox"/>
Calculate cost	<input type="checkbox"/>
Calculate the percentage discounts of reduced items	<input type="checkbox"/>

Compare weight of a variety of objects	<input type="checkbox"/>
Recognize shape of a variety of objects	<input type="checkbox"/>
Read time on analogue and digital clock	<input type="checkbox"/>
Calculate time to do an activity	<input type="checkbox"/>

Attitudes towards learning

	To what extent do you agree or disagree with each statement?
	3= Strongly agree 2= Agree 1= Disagree 0=Strongly disagree 9=I don't know
You need skills to succeed nowadays	<input type="checkbox"/>
Learning is something you should do throughout your life	<input type="checkbox"/>
Learning new things is fun	<input type="checkbox"/>
Learning isn't for people like me*	<input type="checkbox"/>
I didn't get anything useful out of formal/ non-formal education*	<input type="checkbox"/>
I don't have the confidence to learn new things*	<input type="checkbox"/>

*Reversed items

School enrolment

Are you attending any formal education*? (If answer No, skip to question 18)

Yes No

*Attending formal education means being registered in a formal school approved by the Ministry of Education

If yes, what is the school level you were enrolled in?

<input type="checkbox"/> Primary (Grade 1 to grade 5)	<input type="checkbox"/> Secondary (High school or grade 10, 11 & 12)	<input type="checkbox"/> Vocational school
<input type="checkbox"/> Intermediate (grade 6 to grade 9)	<input type="checkbox"/> Technical school	

If no, what is your highest level of completed education?

<input type="checkbox"/> None/ illiterate	<input type="checkbox"/> Intermediate level (grade 6 to grade 9)	<input type="checkbox"/> Vocational level
<input type="checkbox"/> Primary level (grade 1 to grade 5)	<input type="checkbox"/> Secondary level (High school or grade 10, 11 & 12)	<input type="checkbox"/> Technical level

If no, what were the reasons for dropping school?

Having a paid job	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
Supporting family with non-paid job (Domestic work, agriculture, etc)	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
Lack of financial resources	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
Lack of personal willingness to continue education	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
Lack of support from parents	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
Unsafe access to the nearest school	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
School far away from home	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A

Diet Diversity

	Over the last 7 days for how many days did you eat/ consumed the following food items at home?
	0= 0 day 1= 1 day 2= 2 days 3= 3 days 4= 4 days 5= 5 days 6= 6 days 7= everyday
Cereals, grains, roots & tubers: rice, pasta, bread, bulgur, potato, white sweet potato	<input type="checkbox"/>
Vegetables and leaves	<input type="checkbox"/>
Fruits	<input type="checkbox"/>
Meat, fish and eggs: Beef, lamb chicken, liver, kidney, fish including canned tuna, eggs	<input type="checkbox"/>
Pulses, nuts and seeds (beans, chickpeas, etc.)	<input type="checkbox"/>
Milk and dairy products	<input type="checkbox"/>
Oil and fats	<input type="checkbox"/>

General Health

	Please answer all the questions by yes or no. The term doctor or other health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse, or anyone else you see for health care.
	0= No 1= Yes 9=N/A
Have you been to see a doctor or other health provider in the last 12 months?	
In the last 12 months, did you get a chance to speak with a doctor or other health provider privately?	
In the last 12 months, did you get a chance to speak with a doctor or other health provider privately about your period? (for girls only)	
In the last 12 months, did a doctor or other health provider talk with you about your weight, healthy eating or diet?	
In the last 12 months, did a doctor or other health provider talk with you about physical activity or exercise?	
In the last 12 months, did a doctor or other health provider talk with you about smoking and drinking alcohol?	
In the last 12 months, did you visit a dentist to check on your teeth and gum?	
In the past 30 days did you smoke cigarettes?	
In the past 30 days did you drink alcohol?	

Do you wear a seat belt when being a passenger in a car?	
In the last 4 weeks, did you exercise or play sports hard enough to make you breathe hard or make you sweat for 20 minutes or more?	

Exposure to violence

PHYSICAL HARM	
	During the last 3 months, how often were you exposed to the following types of unpleasant experiences/ harm and by whom? 0=Never 1= Once 2=Sometimes 3=Often 9= I refuse to answer
Hit or slapped you or kicked you?	
Hit you with hard objects such as stick, belts, etc.?	
Pulled your hair?	
Forced you to stay on your knee?	
Burned you with hot objects such as cigarette, etc?	
Other please specify:-----	
Who is the person/people who have acted in this way? Choose more than one answer if needed.	Someone from your family Another adult you know Friends Teacher Someone you don't know I refuse to answer
EMOTIONAL HARM	
	During the last 3 months, how often were you exposed to the following types of unpleasant experiences/ harm and by whom? 0=Never 1= Once 2=Sometimes 3=Often 9= I refuse to answer
Shouted or screamed at you?	
Called you names or swore at you?	
Say or do something to humiliate you in front of others?	
Threatened to harm you?	
Made you uncomfortable or scared by standing too close to you?	
Made you feel unimportant or without proper attention	
Other please specify:-----	
Who is the person/people who have acted in this way? Choose more the one answer if needed.	Someone from your family Another adult you know Friends Teacher

	Someone you don't know I refuse to answer
INTIMATE HARM	
	Speaking as an expert of children in your community, are you aware or have you heard of children experiencing any forms of inappropriate intimate behaviors from adults or their peers during the last 3 months?
	0=Never 1= Once 2=Sometimes 3=Often 9= I refuse to answer
ONLINE HARM	
	Speaking as an expert of children in your community, are you aware or have you heard of children experiencing any forms of inappropriate online behaviors from adults or their peers during the last 3 months?
	0=Never 1= Once 2=Sometimes 3=Often 9= I refuse to answer
Inappropriate photos or movies while surfing online?	
been asked by anyone to send them their photos online?	
been asked by anyone to send them their nude photo or photo of their body parts online?	
been threatened by anyone with publishing their photos?	
been forced by someone to watch inappropriate photos or movies?	

Self-Esteem

To what extent do you agree or disagree with the following statements?	0 = Strongly agree 1 = Agree 2 = Disagree 3= Strongly disagree
On the whole, I am satisfied with myself.	<input type="checkbox"/>
At times I think I am no good at all*	<input type="checkbox"/>
I feel that I have a number of good qualities.	<input type="checkbox"/>
I am able to do things as well as most other people	<input type="checkbox"/>
I feel I do not have much to be proud of*	<input type="checkbox"/>
I certainly feel useless at times*	<input type="checkbox"/>
I feel that I'm a person of worth, at least on an equal plane with others	<input type="checkbox"/>
I wish I could have more respect for myself*	<input type="checkbox"/>
All in all, I am inclined to feel that I am a failure*	<input type="checkbox"/>
I take a positive attitude toward myself.	<input type="checkbox"/>

Mental Wellbeing

How frequently do you feel the following?	None of the time (1)	Rarely (2)	Some of the time (3)	Often (4)	All of the time (5)
I've been feeling optimistic about the future					
I've been feeling useful					
I've been feeling relaxed					
I've been feeling interested in other people					
I've had energy to spare					
I've been dealing with problems well					
I've been thinking clearly					
I've been feeling good about myself					
I've been feeling close to other people					
I've been feeling confident					
I've been able to make up my own mind about things					
I've been feeling loved					
I've been interested in new things					
I've been feeling cheerful					

Spiritual Wellbeing

To what extent do you agree or disagree with the following statements?	Strongly agree (1)	Moderately agree (2)	Agree (3)	Disagree (4)	Moderately disagree (5)	Strongly disagree (6)
I don't find much satisfaction in private prayer with God						
I don't know who I am, where I came from, or where I'm going						
I believe that God loves me and cares about me						
I feel that life is a positive experience						
I believe that God is not interested in my daily situations (daily problems, stress, etc.)						
I feel unsettled about my future.						
I have a personally meaningful relationship with God						
I feel very fulfilled and satisfied with life						
I don't get much personal strength and support from God						
I feel a sense of well-being about the direction my life is headed in						
I believe that God is concerned about my problems						
I don't enjoy much about life.						
I don't have a personally satisfying relationship with God.						
I feel good about my future						

My relationship with God helps me not to feel lonely						
I feel that life is full of conflict and unhappiness.						
I feel most fulfilled when I'm in close relationship with God						
Life doesn't have much meaning.						
My relation with God contributes to my sense of well-being						
I believe there is some real purpose for my life						

Resilience

To what extent do the following statements apply to you?

	Not at all (1)	A little (2)	Somewhat (3)	Quite a bit (4)	A lot (5)
I get along with people around me					
Getting an education or doing well is important to me					
I know how to behave/ act in different situations (like school, home or church)					
My parents/ caregivers really look out for me					
My parents/ caregivers know a lot about me (for example, what makes me happy, sad, scared)					
There is enough to eat at home when I am hungry					
People like to spend time with me					
I talk to my family/caregiver(s) about how I feel (for example when I am hurt or sad)					
I am usually supported by their friends					
I feel that I belong at my school					
My family/caregiver(s) cares about me when times are hard (for example if I am sick or have done something wrong)					
My friends care about me when times are hard (for example if I am sick or have done something wrong)					
I am treated fairly in my community					
I am given chances to show others that they are growing up and can do things by themselves					
I feel safe when I am with my family/ caregivers					
I have chances to learn things that will be useful when I am older (like cooking, working and helping others)					
I like the way my family celebrates things like holidays					

Empathy

It makes me sad to see a girl who cannot find anyone to play with	<input type="checkbox"/> No <input type="checkbox"/> Yes
People who kiss and hug in public are silly*	<input type="checkbox"/> No <input type="checkbox"/> Yes
Boys who cry because they are happy are silly*	<input type="checkbox"/> No <input type="checkbox"/> Yes
I really like watch people open presents, even when I don't get a present myself.	<input type="checkbox"/> No <input type="checkbox"/> Yes
Seeing a boy who is crying makes me feel crying	<input type="checkbox"/> No <input type="checkbox"/> Yes
I get upset when I see a girl being hurt	<input type="checkbox"/> No <input type="checkbox"/> Yes

Even when I don't know why someone is laughing, I laugh too	<input type="checkbox"/> No <input type="checkbox"/> Yes
Sometimes I cry when I watch TV	<input type="checkbox"/> No <input type="checkbox"/> Yes
Girls who cry because they are happy are silly	<input type="checkbox"/> No <input type="checkbox"/> Yes
It's hard for me to see why someone else get upset	<input type="checkbox"/> No <input type="checkbox"/> Yes
I get upset when I see an animal being hurt	<input type="checkbox"/> No <input type="checkbox"/> Yes
It makes me sad to see a boy who cannot find anyone to play with	<input type="checkbox"/> No <input type="checkbox"/> Yes
Some songs make me sad, I feel like crying	<input type="checkbox"/> No <input type="checkbox"/> Yes
I get upset when I see a boy being hurt	<input type="checkbox"/> No <input type="checkbox"/> Yes
Grown-ups sometimes cry even when they have nothing to be sad about	<input type="checkbox"/> No <input type="checkbox"/> Yes
It's silly to treat dogs and cats as though they have feelings like people	<input type="checkbox"/> No <input type="checkbox"/> Yes
I get mad when I see a classmate pretending to need help from the teacher all the time	<input type="checkbox"/> No <input type="checkbox"/> Yes
Kids who have no friends probably don't want any	<input type="checkbox"/> No <input type="checkbox"/> Yes
Seeing a girl who is crying makes me feel like crying	<input type="checkbox"/> No <input type="checkbox"/> Yes
I think it is funny that some people cry during a sad movie or while reading a sad book	<input type="checkbox"/> No <input type="checkbox"/> Yes
I am able to eat all my cookies even when I see someone looking at me wanting one	<input type="checkbox"/> No <input type="checkbox"/> Yes
I don't get upset when I see a classmate being punished by a teacher for not obeying school rules	<input type="checkbox"/> No <input type="checkbox"/> Yes

Women KII tool

INTERVIEW

Name		
Age		
Gender		
Country		
Date		
Means of communications		
Interviewer		
Main and prompts questions		
Opening	Welcome and warming up	
	Main questions	Probes and Prompts
Q1	<p>How would you describe the gender equality state in your country and in your community?</p> <p>Definition: Gender equality is the state of equal ease of access to resources and opportunities regardless of gender, including economic participation and decision-making; and the state of valuing different behaviors, aspirations and needs equally, regardless of person's gender.</p>	<p>Do you know of girls under 18 years old in your community who have abandoned school because of getting engaged/ married?</p> <p>In your community are boys more supported to continue their education or employment opportunities than girls? If yes, why?</p> <p>What are some of the key problems or rights violations that women and girls face currently?</p>

		<p>What are some of the opportunities and/or positive changes that you see in regards to girls and women empowerment? (e.g. women finding their voice, improving their status and level of well-being, etc.)</p> <p>How does gender equality look like for you? How can gender equality be achieved?</p>
Q2	<p>What is your experience of gender equality in your family?</p>	<p>Tell us few examples on how household responsibilities are distributed among you and your husband?</p> <p>How much time do you and your husband spend on your children on daily bases?</p> <p>Could you describe the decision-making process in your family? E.g. when house item needs fixing.</p> <p>How decisions are made on what to spend money on in your family? How financial resources are managed?</p> <p>How do you utilize your free time?</p>
Q3	<p>How would you evaluate your personal well-being during the last year?</p>	<p>What affects your mood and your emotional well-being the most?</p> <p>How would you describe your own resilience?</p> <p>Do you consider yourself as an empowered women? Why yes/no?</p> <p>How do you think your personal well-being and personal fulfilment affects your children's well-being?</p>

Closing	Is there anything else you think would be helpful to share with regard to this topic?

Children KII tool

INTERVIEW

Name		
Age		
Gender		
Country		
Date		
Means of communications		
Interviewer		
Main and prompts questions		
Opening	Welcome and warming up	
	Main questions	Probes and Prompts
Q1	How would you evaluate your personal well-being during the last year?	<p>What affects your emotional well-being the most?</p> <p>How would you describe your own resilience?</p> <p>Do you consider yourself as a strong/empowered person? Why yes/no?</p> <p>Who can influence your well-being the most?</p> <p>Please tell us about your relationship/connection with your mother and how it affects you (if any)?</p>
Q2	What are the most pressing problems that youth of your age face nowadays?	<p>Do you think that girls and boys are well-protected from physical or emotional violence (intentional harmful act)? Why yes/why not?</p> <p>What are some of the skills or features that youth lack the most in your opinion?</p>

		To what extent are girls and boys influenced by issues that their families experience?
Q3	<p>How would you describe the gender equality state in your country and in your community?</p> <p>Definition: Gender equality is the state of equal ease of access to resources and opportunities regardless of gender, including economic participation and decision-making; and the state of valuing different behaviors, aspirations and needs equally, regardless of person's gender.</p>	<p>What are some of the key problems that women and girls face currently?</p> <p>What are some of the opportunities and/or positive changes that you see in regards to girls and women empowerment? (e.g. women finding their voice, improving their status and level of well-being, etc.)</p> <p>How does gender equality look like for you? How can gender equality be achieved?</p>
Closing	Is there anything else you think would be helpful to share with regard to this topic?	



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