

SUPPORTING FAMILIES IN COUNTERING VIOLENT EXTREMISM IN NIGERIA

EVALUATION REPORT
2019-2022



Hedayah

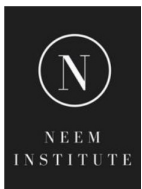
Countering Extremism
& Violent Extremism

HEDAYAH



Hedayah was created in response to a growing desire from the international community and members of the Global Counter-Terrorism Forum (GCTF) representing 29 countries and the European Union to establish an independent, multilateral ‘think and do’ tank devoted to countering extremism and violent extremism. Since its inception, Hedayah has evolved into a passionate, driven and international organization that brings together a vast network of unparalleled experts and practitioners to counter and prevent extremism and violent extremism. Twelve members of the GCTF are representatives of our diverse Steering Board, which provides strategic oversight. As the International Center of Excellence for Countering Extremism and Violent Extremism, we are committed to innovation, neutrality, integrity, diversity and technical excellence by delivering ground-breaking research, innovative methodologies and programs. Our approach is to deliver real and sustainable impact to governments, civil society and people impacted by extremism and violent extremism through local ownership and collaboration.

NEEM INSTITUTE



Neem Institute is a professional development, training and research institute with a focus on capacity-building, psychological services, strategic communications and the use of applied analysis to promote policy and best practices across various sectors. The Institute is made up of members of the team that established Neem Foundation, a non-profit organisation that supports the rehabilitation, social stabilization, economic recovery and reintegration of populations and communities affected by the violent insurgency in Northeast and Northwest of Nigeria. The team also established and implemented Nigeria’s first and pioneer Countering Violent Extremism (CVE) Program. Neem Institute has vast experience in providing psychosocial and psychological services to individuals, business leaders and companies. In addition, the Institute has competency in the area of research and policy, social and economic reintegration, peace building and conflict mitigation,

community engagement, project management and strategic communications. The Institute has conducted training and research across Africa and the Middle-East region.

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DONORS AND STAKEHOLDERS

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ACRONYMS AND ABBREVIATIONS

AFRYDEF	African Youth for Peace Development and Empowerment Foundation
AYOPAD	Association of Youth for Peace and Development
BH	Boko Haram
CBOS	Community-Based Organizations
CCDRN	Center for Community Development and Research Network
CJTF	Civilian Joint Task Force
COVID-19	SARS-CoV-2
CVE	Countering Violent Extremism
HI	Hope Interactive
IDP	Internally Displaced Person
INGO	International Non-Governmental Organization
ISWAP	Islamic State's West Africa Province
LGA	Local Government Areas
MM&E	Monitoring, Measurement and Evaluation
NAPTIP	National Agency for the Prohibition of Trafficking in Persons
NEYID	North East Youth Initiative for Development
NSCF	Nexus Social Care Foundation
ONSA	Office of the National Security Advisor
OSC	Operation Safe Corridor

PFA	Psychological First Aid
PSS	Psycho Social Support
PTSD	Post-Traumatic Stress Disorder
RLVE	Radicalization Leading to Violent Extremism
SEM	State Emergency Management Agency
T-CDI	Taimako Community Development Initiative
TOC	Theory of Change
TOT	Training-of-Trainers
UAE	United Arab Emirates
VEOS	Violent Extremist Offenders

EXECUTIVE SUMMARY

This report summarizes the results of Hedayah's capacity-building program on **Supporting Families in Countering Violent Extremism (CVE) in Nigeria** conducted between **May 2019 and March 2022** in partnership with Neem Institute. The program aimed to contribute towards the ongoing CVE efforts in Northeast Nigeria through enhancing the capacities of community-based organizations (CBOs) and community leaders to support families and communities whose members are either vulnerable to, or affected by, radicalization leading to violent Extremism (RLVE) such as survivors, returnees and/or former violent extremist offenders (VEOs).

More specifically, the program intended to **enhance recipients' knowledge and skills in strengthening family and community members' resilience against RLVE, and positively engaging them in CVE efforts to include the rehabilitation and reintegration of survivors, returnees and/or former VEOs.**

▼ 2019

NEEDS ASSESSMENT (PHASE 1)

May 2019 and November 2019

▼ 2020

INTRODUCTORY CAPACITY-BUILDING TRAINING

February 2020

MONITORING, MEASUREMENT AND EVALUATION (MM&E) (PHASE 1) AND NEEDS ASSESSMENT (PHASE 2)

March 2020 and November 2020

▼ 2021

ADVANCED LEVEL CAPACITY-BUILDING TRAINING

February 2021

TRAINING-OF-TRAINERS (TOT)

November 2021

MM&E (PHASE 2)

December 2021-March 2022

▼ 2022

MM&E FIELD VISIT

December 2021-March 2022

These activities were designed for the same group of twenty-six recipients, including nineteen practitioners from seven CBOs operating in Northeast Nigeria (Borno, Yobe and Adamawa states), as well as seven community leaders from Borno and Yobe states to meet the following specific objectives:

- ▶ **1** Enhance recipients' knowledge and skills in restoring and increasing resilience and providing support to families whose members are potentially vulnerable to or affected by RLVE at different levels
- ▶ **2** Enhance recipients' knowledge and skills in engaging and involving such families in CVE efforts targeting their vulnerable/radicalized family members as well as the wider society
- ▶ **3** Enhance recipients' knowledge and skills in supporting the reintegration and continuation of rehabilitation of survivors, returnees and/or former VEOs
- ▶ **4** Enhance recipients' theoretical and practical knowledge of the multi-stakeholder approach, as well as collaboration and coordination with other actors when working on CVE
- ▶ **5** Establish a pool of national trainers with the capacity to further disseminate the abovementioned knowledge and skills with other practitioners and relevant stakeholders across Northeast Nigeria



These objectives are reflected within the overall Theory of Change (ToC) that links components of the program to the ultimate vision and intended impact on the ground – increased family and community members’ resilience against RLVE and involvement of such members in CVE efforts:

IF

Recipients enhance their knowledge and skills in restoring and increasing resilience of families and communities whose members are potentially vulnerable to or affected by, RLVE at different level

AND

Recipients enhance their knowledge and skills in engaging and involving such families and communities in CVE efforts targeting their vulnerable/radicalized members as well as the wider society

AND

Recipients enhance their knowledge and skills in supporting the rehabilitation and reintegration of survivors, returnees and/or former VEOs and their family members

AND

Recipients enhance their theoretical and practical knowledge of the multi-stakeholder approach, as well as collaboration and coordination with other actors when working on CVE

AND

A pool of national trainers is established with the capacity to further disseminate the abovementioned knowledge and skills with other practitioners and relevant stakeholders across Northeast Nigeria

THEN

Families and communities whose members are potentially vulnerable to or affected by RLVE will increase their resilience and be equipped to participate in CVE efforts for themselves and the wider society

AND

Survivors, returnees and/or former VEOs and their family members will be better supported during rehabilitation and reintegration

BECAUSE

Survivors, returnees and/or former VEOs, their families, communities and the wider society will benefit from recipients’ increased capacity in strengthening family and community members resilience against RLVE and positively involving such members in CVE efforts

Throughout the program, Hedayah utilized its Monitoring, Measurement and Evaluation (MM&E) framework¹ to evaluate the results (outputs, outcomes and projected impact) and capture key feedback to customize each activity to recipients' priorities and needs. In terms of results, the analysis of the quantitative and qualitative data collected during and after each activity indicated that most participants increased their knowledge, understanding and skills of the key topics addressed throughout the program.

For instance, the quantitative analysis of the pre- and post-training questionnaires completed by participants during the introductory capacity-building training (January 2020) showed that their average (mean) score increased from 59% in the pre-training questionnaire to 66% in the post-training questionnaire. Similar increases were found following the implementation of the advanced-level capacity-building training of February 2021 (from 68% to 73%) and training-of-trainers (ToT) of November 2021 (from 57% to 61%).

Through direct observation and professional judgement, Hedayah also measured the considerable increase in the recipients' skills, particularly in relation to trust building, engagement and interviewing techniques during the introductory capacity-building training. This increase was also observed in the recipients' capacity to develop project concepts that aim to mitigate social stigma and ensure community acceptance of survivors, returnees, former VEOs and their family members. Further increase in skills was observed in participants' enhanced ability to facilitate and present the program's content to a wider audience of practitioners during the ToT.

Finally, these results were supported by the positive feedback provided by recipients in post-training surveys, MM&E online roundtable (November 2020) and MM&E field visit (March 2022) which confirmed that the key learning outcomes and skills were relevant to their work, as well as contextually appropriate for Northeast Nigeria.

In terms of intended impact on the ground, during the MM&E field visit in March 2022, the majority of the recipients interviewed indicated that they had incorporated specific elements of the program into their work with the target population (i.e., survivors, returnees, former VEOs, family and community members) and that they had started to share the

knowledge with their peers and colleagues. In addition, many recipients highlighted that the program had allowed them to build follow-up projects and develop partnerships with local and international organizations which points toward sustainability and national ownership of the program.

The final evaluation of the results also emphasized recommendations and lessons learned that could be useful for future iterations of the program. Notably:

- ▶ Fostering cooperation and networking between CBOs operating in the Northeast to avoid duplication of efforts and mutualize capacities and resources through the implementation of joint projects in their respective communities;
- ▶ Creating a long-term monitoring and mentorship mechanism to ensure that recipients are consistently applying the knowledge beyond the scope of the program;
- ▶ Raising recipients' awareness about other national and international CVE initiatives and activities implemented in the Northeast such as Operation Safe Corridor (OSC)² and inviting representatives from these initiatives to the program;
- ▶ Increasing participants' operational capacity in applying for grants, implementing their own CVE projects and evaluating their projected and preliminary impact on at-risk communities; and
- ▶ Supporting and mentoring participants in delivering roll-out trainings to their peers and colleagues across the Northeast in order to appropriately disseminate the program's content and ensure further sustainability and national ownership of the program.



THE NEED FOR INTERVENTION IN NIGERIA

The prolonged presence of Boko Haram (BH) and the Islamic State's West Africa Province (ISWAP) demonstrates the significant challenges that Northeast Nigeria continues to face related to RLVE. Communities face consistent threats to local security and many families have members who are vulnerable to RLVE and/or have joined such groups. Furthermore, survivors, returnees and former VEOs seeking to rejoin their local communities are often stigmatized or ostracized, thereby impeding the reintegration process.

Given the current security situation, several international organizations have been providing local communities with resources, livelihood support and have organized internally displaced person (IDP) camps to host individuals who have fled their homes or have been rejected by their families and communities. However, despite the high number of international organizations present on the ground, Northeast Nigeria still needs additional support in this area.

Families have a critical role to play in CVE and supporting the disengagement, rehabilitation as well as reintegration of survivors, returnees, former VEOs who are radicalized and/or recruited into violent extremism. Consequently, there is a need to equip family members with an enhanced understanding of the RLVE process

and potential CVE responses. When effectively supported, family members may be able to: detect early signs of vulnerability to potential radicalization, contribute towards counter-messaging efforts, build the resilience of their family and community members – and support the rehabilitation and reintegration processes, both within the family and wider community.

In this context, local CBOs and community leaders are well positioned to support CVE activities within such communities and provide families with potentially useful responses, as well as guidance, knowledge and practical support.



NEEDS ASSESSMENT (PHASE 1)

Hedayah conducted two needs assessment visits to Abuja, Nigeria. The first was conducted during 25–31 May 2019 and the second during 10–15 November 2019. During these visits, meetings were held with relevant stakeholders, including government agencies, embassies and delegations, international organizations, and local CBOs. Through these visits, Hedayah was able to gain deeper insights into the local context and identify ongoing relevant efforts, to tailor and contextualize the program and curriculum ahead of implementation, while simultaneously complementing ongoing activities and avoiding the duplication of efforts.

During the first needs assessment visit (May 2019), many possible entry points and potential recipients were recommended for the program, with all stakeholders highlighting the program’s timeliness and appropriateness. Of particular interest was Operation Safe Corridor (OSC) established by the Nigerian government in 2016, which is responsible for the rehabilitation and reintegration of low-risk former VEOs. OSC has relevant practitioners (psychologists and social workers) and engages with families before reintegration. However, the findings also indicated that outside of this mechanism, there was very little support provided to the families back in the community. Moreover, a recurring theme throughout the needs assessment was the difficulty in gaining trust of local communities and families. It was noted that building trust within a community can take a long time. Approaches for building trust would therefore be an important element of the program.

Furthermore, despite the volume of organizations providing support throughout Northeast Nigeria, many of the deployed practitioners on the ground are not from the local communities and either travel from other regions or are hired by international organizations. In this regard, it was determined that the most appropriate recipients for the training would be local CBOs and community leaders. These actors have consistent, existing engagement and relationships with the target families, have the trust of local communities, and are not likely to change their location in the short-term, thereby ensuring the sustainability and long-term impact of the gained knowledge and skills for the target audience.

To identify the most appropriate CBOs and community leaders, Hedayah collected a large sample of recommendations from local embassies, international organizations and trusted partners. Subsequently, a survey was distributed among all recommended organizations to identify those already engaging with families and/or local communities in Northeast Nigeria, that have the technical capacity to provide this type of support, as well as the human resources capacity and willingness to ensure the future implementation of the knowledge and skills gained during the training. Based on the survey responses, nineteen practitioners from seven CBOs operating in the Northeast states of Borno, Yobe and Adamawa were selected, namely³:

- ▶ The African Youth for Peace Development and Empowerment Foundation (AFRYDEF);
- ▶ The Association of Youth For Peace and Development (AYOPAD);
- ▶ The Center for Community Development and Research Network (CCDRN);
- ▶ Hope Interactive (HI);
- ▶ Nexus Social Care Foundation (NSCF);
- ▶ North East Youth Initiative for Development (NEYID); and
- ▶ Taimako Community Development Initiative

(Taimako-CDI).

Seven community leaders from Borno and Yobe states were also selected to participate in the program due to their crucial role as credible voices of their constituents and legitimate authorities to make decisions on behalf of their community. Community leaders are also able to facilitate access for the local CBOs and were, therefore, selected based on the locations in need of support by the participating CBOs.

Based on the findings of the first needs assessment visit, Hedayah tailored the training curriculum to the Northeast context and the selected recipients. For this program to be effectively contextualized, Hedayah also collaborated with a Nigeria-based organization, Neem Institute, which has a presence and ongoing initiatives in Northeast Nigeria, paired with extensive expertise in psychosocial support. Neem Institute carefully revised all curriculum sessions to ensure their relevance to the local context and include locally appropriate case studies and examples.

Subsequently, during the second needs assessment visit (November 2019), Hedayah held a roundtable discussion with each of the recipient CBOs and community leaders. The objective was to further contextualize the training curriculum and ensure it is appropriately tailored to their needs, and the needs of their local communities.



INTRODUCTORY CAPACITY-BUILDING TRAINING

On 17-20 February 2020, Hedayah in partnership with Neem Institute delivered an introductory capacity-building training for twenty-six participants. In alignment with objectives one and two of the program⁴, this training covered concepts of trust building, engagement, interviewing techniques, the role of family in CVE, potential responses to challenges that these families may face – and practitioners’ self-care and well-being among others. The training included practical exercises (e.g. role-plays), multiple local and international case studies, and theoretical sessions, all of which were conducted through a participant-led approach.

The following will provide an overview of the content as well as of participants’ main contributions and feedback during each session of the training:

Session 1 set the foundation for all upcoming sessions. Guided by Hedayah and Neem Institute facilitators, the participants discussed key terminology related to CVE to develop contextualized mutual definitions for terms such as extremism; violent extremism; terrorism – and RLVE. The second

half of the session provided an opportunity for participants to evaluate and reflect on their role in CVE, as well as potential concerns, which the training could address in later sessions. For instance, participants expressed an interest in developing their knowledge and skills relating to social rehabilitation and reintegration of former VEOs and their relatives, which continue to be a significant challenge in Northeast Nigeria. Some participants asked for more support in the area of trust building and conflict resolution to better de-escalate cases of violence within communities and create synergies between CBOs and vulnerable communities.

Session 2 raised practitioners’ awareness of the radicalization process in more depth, focusing on the concepts of macro-level factors, individual-level factors and the CVE-Cycle⁵. Particular emphasis was placed on the radicalization process being non-linear and individualized. Participants were also encouraged to provide examples of factors within their local context, including the possible macro “push” and “pull” factors and community resilience mechanisms at play.

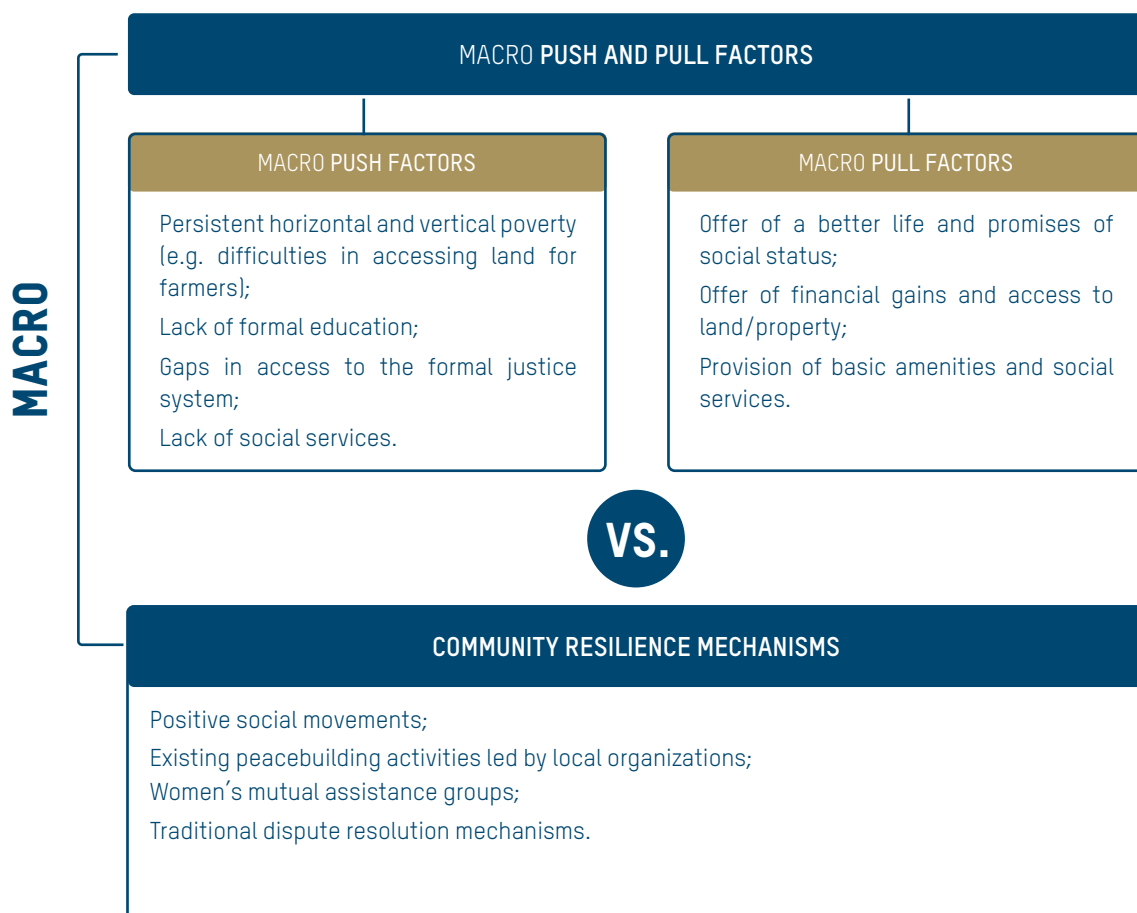


Fig. 11 Macro-level factors contributing towards RLVE and resilience in Northeast Nigeria, as identified by participants during Session 2

Session 3 provided participants with a historical overview of violent extremism in Nigeria. This session included a description of the main violent extremist groups, past and present, operating in Nigeria as well as their leadership and ideology. During the roundtable discussion, participants indicated that this knowledge could help them to better identify the possible “pull” factors resonating with vulnerable individuals as well as the potential response(s) to be developed. The session also included a discussion about a video of a young Nigerian woman indoctrinated by BH to become a suicide bomber, with participants talking about the type of support they could provide.

Sessions four and five aimed to increase practitioners’ knowledge and understanding of the family environment, the various familial circumstances (e.g., displaced or fragmented) and the role families can have in CVE. These sessions also explored ways families can act as potential agents (gatekeepers) in prevention, intervention and ultimately rehabilitation and reintegration given their unique position. The sessions offered basic notions on how to preserve

the resilience of the family unit when a member is vulnerable to RLVE or already radicalized. Finally, participants were presented with a fictional case study of an individual undergoing rehabilitation after handing himself into the Nigerian Army, which also included information regarding the individual’s family. In groups, participants discussed and later presented the potential role of each family member and how they, as practitioners, could engage and support the family. In this regard, participants insisted on the importance of parental control within the community as well as on the crucial role played by mothers in detecting early warning signs of RLVE such as change in beliefs, dressing style and appearance.

Session 6 provided a comprehensive overview of the potential challenges faced by families when confronted with an issue related to violent extremism. This session provided an introduction on the importance of understanding the family’s perspective in order to effectively respond to their identified needs. The types of challenges discussed included: trauma, post-traumatic stress disorder

(PTSD)⁶, grief, fear and stigmatization. This session presented possible approaches that may be utilized to support a family facing these challenges. It was emphasized that the practitioners should focus their support on what the family needs and, therefore, CVE approaches may not always be the primary concern or initial response.

Session 7 featured a practical exercise whereby participants had the opportunity to interview an actor playing the role of an individual vulnerable to RLVE. This exercise was completed before and after the relevant training sessions to measure the baseline and subsequent increase in CVE and trauma-informed interviewing skills. Further analysis of the interview simulation can be found in the MM&E (Phase 1) section of this report.

In sessions eight and nine, practitioners were provided with an overview of good practices for the preparatory stages before engaging with families affected by CVE. Participants gained important understanding of

the five-step strategic process (i.e. “A Practitioner’s Strategy”) for engaging with families, including:

1. Mapping relevant Information;
2. Establishing specific objectives for engagement;
3. Establishing and maintaining trust with a family;
4. Data collection and individual needs assessments; and
5. Planning for an intervention. Additionally, ethical considerations that a practitioner should follow were also addressed.

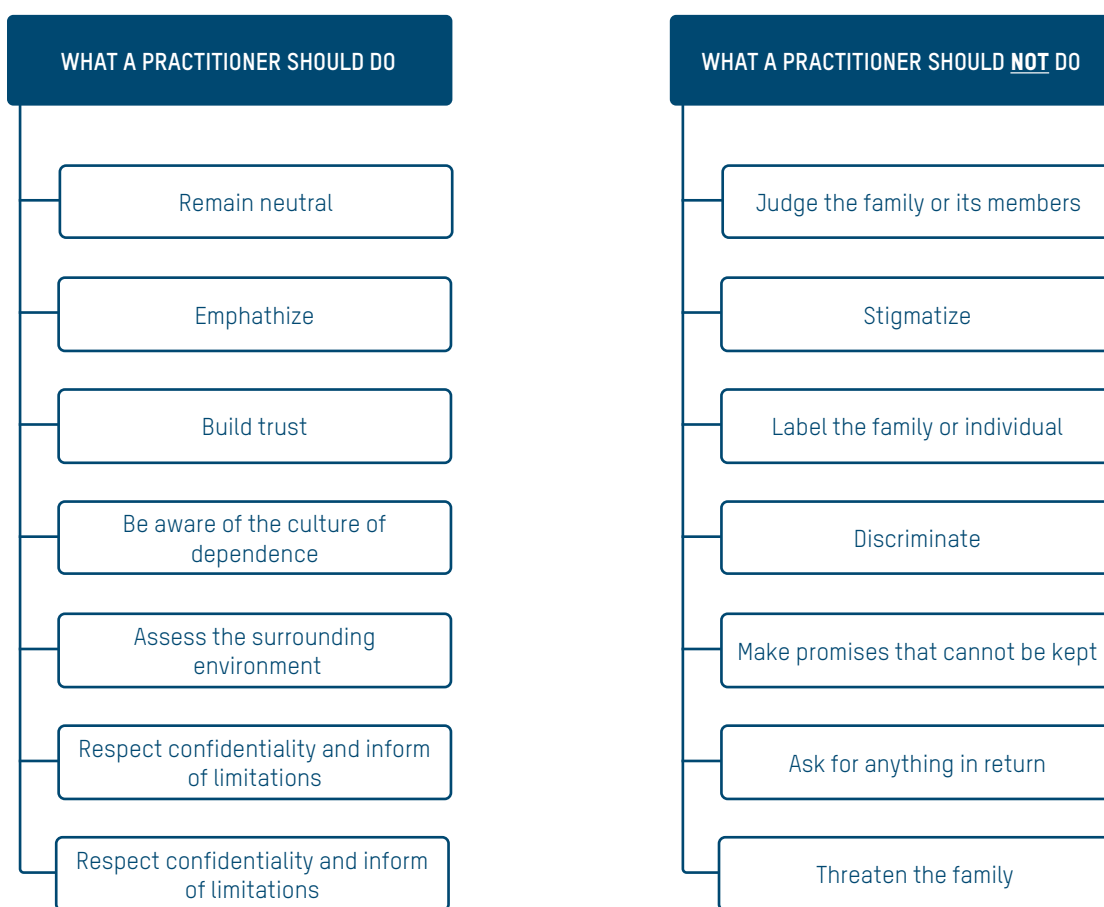


Fig. 2| Good practices and ethical considerations for engaging with families in CVE, as discussed by participants during Session 9



Through the use of a practical exercise, Session 10 then provided participants with an opportunity to apply some of the knowledge they had gained to develop a strategy for engagement using the above mentioned five-step strategic process. The four group presentations clearly highlighted that participants were able to apply the theoretical knowledge gained in previous sessions, which demonstrated a preliminary increase in their practical skills on engaging families affected by violent extremism.

Trust is an essential concept for practitioners to grasp when working with families and individuals affected by RLVE, as it will determine a foundation for cooperation and willingness to accept support. In this regard, Session 11 provided knowledge, insight and practical skills for establishing, building and maintaining trust between practitioners, a family unit and its members.

Sessions twelve and thirteen provided an in-depth explanation on conducting needs and strengths assessments and effective interviewing skills and highlighted the importance of these approaches for practitioners' work. The presentations further expanded on Step 4 of the Practitioner's Strategy, which had been previously introduced. The importance of needs and strengths assessments was particularly stressed as a necessary approach for developing tailored responses that address the individuals' critical needs. While a focus on the concerned individual is key, capturing all family members' critical needs was also emphasized to ensure practitioners

build an intervention that promotes the overall resilience of the family unit.

Building on the previous sessions and following up on the interview simulation exercise (Session 7), session 14 consisted of another practical interviewing simulation, whereby all participants had the opportunity to interview the same actor playing a different role. While the specific circumstances of the character were different, the stage of radicalization and overarching situational theme remained similar to allow for a more accurate comparison of the participants' engagement before and after the relevant training sessions. This session therefore measured the improvement of participants' interviewing skills, with the results showing a considerable improvement in participants' interviewing techniques. For further analysis, see the MM&E (Phase 1) section of this report.

Families are not always willing to cooperate or work with practitioners. Session 15 therefore presented a number of approaches a practitioner can use to prepare for such scenarios, de-escalate any confrontation, and potentially enhance the engagement. During the group discussion, participants reflected on the two interview simulation exercises and acknowledged that trust building, especially with family members who have experienced trauma and PTSD might take time and requires consistent engagement from the practitioner over an extensive period.

Session 16 consisted of group discussions on appropriate advice that practitioners could convey

to families. Specifically, it provided practitioners with an understanding of the most suitable and context relevant approaches for advising and providing insights to families seeking clarity when facing an issue related to RLVE. Based on the learning points from the previous sessions, participants were asked

to give examples of advice to a series of families related to four different scenarios. The following is a summary of the responses provided by participants:

SCENARIO 1

A parent expresses that their child is not respecting other people and wants to know what they can do. What advice could you give?

Participants' contribution: We need to explain the situation to the child, to build trust and to explain why their parents are allies rather than enemies. This will hopefully instill a good attitude. We also need to give advice to the parents as well – some parents may act negatively, that is why we should prioritize a positive approach.

SCENARIO 2

A family member expresses concern that another family member has recently become more religious. What advice could you give?

Participants' contribution: The fact of becoming more religious is not the problem, what we need to assess is whether they are becoming extremist or not. In this regard, we may want to primarily focus on family members who may be more vulnerable to radicalization and carefully monitor their activities. We should not discourage a family member from becoming more religious, it is her/his freedom to do so. In particular, we should focus on the change of behavior of individuals vulnerable to violent extremism and observe their social interaction with the rest of the community to detect potential early warning signs. These signs may include change in clothes, social isolation, speech etc.

SCENARIO 3

A family member is concerned about another family member. They are not sure if they are becoming radicalized, but they are not sure how to talk to them about it. What advice could you give?

Participants' contribution: It is important to detect early warning signs of violent extremism. These signs may include a change in clothes and in behavior, but the change can be very different depending on the individual. As such, family members and practitioners alike should be careful while engaging with potentially radicalized individuals because their intervention could potentially have counterproductive effects and reinforce violent extremist beliefs, if appropriate steps have not been taken, such as a comprehensive needs assessment.

SCENARIO 4

A parent is concerned that the behavior of their child has changed in a negative way. What advice could you give?

Participants' contribution: We need to be very careful in our interventions, as we may face retaliation by Boko Haram if we start to intervene with someone close to them. Going against a child's behavior is not something easy to do. This is why we should have extensive discussions with relevant social institutions and religious leaders of the community. They are best placed to support vulnerable children because they already built trust with the community. That being said, having a child mentored by a respected elder in the community could help to rebuild trust between the child and her/his parents. CBOs can act as mentors in the community to complement the parents' influences.

Fig. 3| Examples of advice to families affected by violent extremism as provided by participants during Session 16

Session 17 focused on realistic questions that practitioners may receive from families affected by RLVE, as well as appropriate responses, in order for practitioners to be better prepared to support families in need. Using the knowledge they acquired throughout previous sessions and the scenarios studied during Session 16, participants answered

a series of questions that might be asked by family members of vulnerable or radicalized individuals. After participants gave their answers, the facilitator commented on each question and provided some guidance on potential answers. The following is a summary of the responses provided by participants:

QUESTION 1

How could this happen to my family?

Participants' contribution: We should first show empathy, highlighting that this could happen to anyone. No situation is permanent and there is always the possibility to change. We should first try to calm the family, listen to their grievances and try to understand the reasons why the individual joined the violent extremist group. At this early stage, the objective is to build trust and strengthen the family's tolerance toward the member who joined the violent extremist group.

Facilitator's comments: The practitioner may also want to inform the family that there is no singular pathway to RLVE, and no single factor can explain the process. Providing examples may help this to be more digestible for the family, you could perhaps mention the local social, political or emotional contexts. The practitioner should always emphasize that they cannot know for sure however, and conducting an assessment would be necessary to be more informed.

QUESTION 2

How can I identify radicalization or RLVE in my other family members?

Participants' contribution: Radicalization or RLVE can be identified based on observations of a change in behavior. For instance, an individual who is becoming increasingly disruptive, disrespectful, and aggressive while engaging in religious or ideological activities may be radicalized.

Facilitator's comments: It should be mentioned that there is no check-list and all cases are unique, however, it is good to provide the examples of change of behavior as this is something the family can look out for. The practitioner should also try to carefully ask whether there is a particular family member they are concerned about and try to gather more information if possible.

QUESTION 3

What is life like for my family member within the violent extremist group?

Participants' contribution: Somebody who has joined Boko Haram lives in difficult conditions, and would probably lack access to social amenities and basic health provisions. Life in a violent extremist group is extremely dangerous, and former terrorist fighters are often stigmatized when they return to their communities.

Facilitator's comments: Try to avoid this question if possible, it is not possible for the practitioner to know the specific circumstances. It is important for the practitioner to avoid lying in any way, as this may lead to a break down in trust later on. The practitioner should focus on calming the family.

QUESTION 4

What are the rights of my family member?

Participants' contribution: It is important to know that the government is welcoming those who are repentant. Returning Boko Haram fighters are entitled to the same rights as the rest of the community.

Facilitator's comments: It may be good to recommend the family member to a relevant resource or stakeholder. If you are not sure of the relevant resource, offer to research on their behalf.

QUESTION 5

(In the case of a returnee from prison facilities, rehabilitation center, or violent extremist group). What kind of help can my family member expect when s/he returns?

Participants' contribution: CBOs can help families who are facing this kind of challenges through psychosocial support, economic empowerment and counselling.

Facilitator's comments: If a complete answer is unknown, offer to research for the family.

QUESTION 6

Is my family member affected by mental health issues?

Participants' contribution: The individual who joined a violent extremist group may suffer from trauma and therefore needs support. However, this kind of pathology could be healed through assistance and counseling and the individual should not be stigmatized for that matter.

Facilitator's comments: It is also important to highlight that RLVE should not be confused with mental health challenges and that usually individuals on the path of RLVE are psychologically "normal". Try to comfort and reassure the family.

Fig. 4I Potential answers to give to a family affected by violent extremism as provided by participants during Session 17

While Session 18 introduced the basic principles of identifying the primary needs and offering elements of psychological first aid (PFA) to families and family members during emergencies, Session 19 introduced the approaches practitioners can use when working with families, such as basic therapy techniques and developing safe spaces for dialogue. These approaches can be tailored and employed to support the family once their critical needs and family dynamics have been thoroughly evaluated through a needs and strengths assessment.

Session 20 addressed the participants' need to consider their own safety and self-care, including psychological well-being, when working in CVE. The presentation provided approaches and techniques for identifying the potential signs, as well as responses.

Community stigmatization of returning former violent extremists and their families, as well as the subsequent isolation of such individuals and families complicates the reintegration process. Addressing these challenges is critical for effective reintegration, therefore, Session 21 provided practitioners with practical guidance and suggestions for responses that may help reduce stigmatization within communities and support the reintegration process. This session was added to the agenda of the workshop based on requests made by participants during Day 1.

Finally, Session 22 provided an opportunity for participants to discuss how they may utilize the knowledge and skills gained during the training. Contributions included the following:

“We have learned a lot, across different topics. The method used by facilitators has been impactful and insightful. The engaging approach has really helped us to learn. When we go back to Northern Nigeria, we will consider extending our partnerships with stakeholders such as government agencies and community representatives”

“The knowledge we have assimilated throughout the training has given us a better understanding of issues such as RLVE and reintegration. This will help us in many ways in our work and practical efforts at the grassroots level. We are also committed to share this knowledge to other stakeholders in the field”

“The practical skills in interviewing that we learnt during the training will be of great help in our work with communities and radicalized individuals. We used to be aggressive when engaging with radicalized individuals, now we know how to engage with them in a respectful way”

“This training bridged a gap. We, as practitioners are dealing with many different problems at the local level and CVE was only one of them. Even though, we have been able to achieve a lot without receiving capacity-building, we will include all the knowledge we gained throughout the training into our strategic planning activities and hopefully, we will achieve so much more”

“We learned a lot. We had been using materials from Hedayah to write proposals and gain funding for our CVE programs. As such, Hedayah has had impact in Borno and Yobe States for years. For further trainings, we need to find areas to collaborate with other stakeholders such as government agencies, the Civilian Joint Task Force (CJTF), community leaders, religious leaders, security operatives, and women groups. We usually have a monthly meeting with security operatives from Northeast Nigeria, but it is only an hour and we do not have enough time to explain our CVE strategies to them”





MONITORING, MEASUREMENT & EVALUATION (MM&E) (PHASE 1)

Hedayah utilized its MM&E framework on impact-evaluation to monitor progress (outputs and outcomes) and assess the results of the training (projected impact), in relation to the program's objectives. The approach consisted in tracking participants' learning progress against the specific session objectives, which were in turn mapped to the overarching objectives of the program. Adopting this "cascade-model" significantly helped data collection and the MM&E process as a whole. As previously mentioned, the introductory capacity-building training related to specific objectives one and two of the program as follows:

1. Enhance recipients' knowledge and skills in restoring and increasing resilience and providing support to families whose members are potentially vulnerable to or affected by RLVE at different levels; and
2. Enhance recipients' knowledge and skills in engaging and involving such families in CVE efforts targeting their vulnerable/radicalized family members as well as the wider society.

The first methodology for capturing the indicators was a knowledge-based questionnaire distributed before and after the training. The questionnaire consisted of multiple-choice questions, which were mapped to the learning points contained in the program curriculum and were therefore designed to measure the level of increased knowledge, understanding and skills with respect to the content of the program and the sessions' objectives.

Direct observation and professional judgment was also employed as an additional collection method. Comments and/or contributions provided by participants throughout the training were captured and analyzed to determine the participants' progression towards the specific session objectives and overarching goals. This method was specifically used in relation to mapping the increase in participants' interviewing skills.

At the end of the workshop, participants completed a feedback survey which consisted of Likert-scale questions and open-ended questions. The participants were also provided with the opportunity during the final session to give any feedback they had verbally, in order to encourage follow-up discussions. This methodology enables Hedayah to further assess the potential impact of the program, particularly in relation to the participants' perspectives on the usefulness of the skills and knowledge learnt to their work and local context, and therefore the likelihood of the participant's implementation of the curriculum learning points. This method also allows for the collection of suggestions for enhancing the curriculum ahead of future training iterations.

Finally, Hedayah and Neem Institute conducted an MM&E virtual roundtable and mentorship event in November 2020 to assess whether participants found the program beneficial with respect to their work with families.

A limitation for the MM&E process was the linguistic challenges faced. During the second needs

assessment, Hedayah identified that all participants would prefer for the training to be held one of the local languages, Hausa. Hedayah thus translated all training materials into Hausa. However, it became apparent during the training that, due to the complex terms and concepts presented, many participants favored the use of English instead, particularly for written materials. As a result, this may have affected the final outcomes of the surveys.

In response, Hedayah used due diligence in translating specific meanings, captured relevant comments, and confirmed the accuracy of the translation with multiple participants, at different stages. Hence, it is important to take into consideration all sources of data in order to develop a clearer interpretation of the results at this stage.

PRE- AND POST- TRAINING QUESTIONNAIRES: RESULTS AND ANALYSIS

Participants received a set of true-or-false questions, before and after the training. The questions remained the same across both questionnaires, in order to measure the change in knowledge and understanding. After the training, each of the participants' responses were scored. A correct answer was scored as +1, while an incorrect response was scored as 0.

Based on the combination of scores across all questions, a total score was produced for each of the participants' pre- and post-training questionnaires.

For evaluation purposes, descriptive statistical analysis was conducted to provide a preliminary summary and indication of the change in results.

The following table and graph provide an overview of the descriptive statistics for the training:

Variable	Observations	Number of Participants Scoring 50% or over	Number of Participants Scoring 75% or over	Average Score
Pre (Paired)	24	16	5	9.42
Post (Paired)	24	19	11	10.63

Fig. 5| Descriptive statistics of the participants' scores (out of 16 questions), for those participants who completed both the pre- and post-training questionnaires (24 respondents)

DESCRIPTIVE STATISTICS OF PARTICIPANTS' SCORES ON PRE- AND POST-TRAINING QUESTIONNAIRES

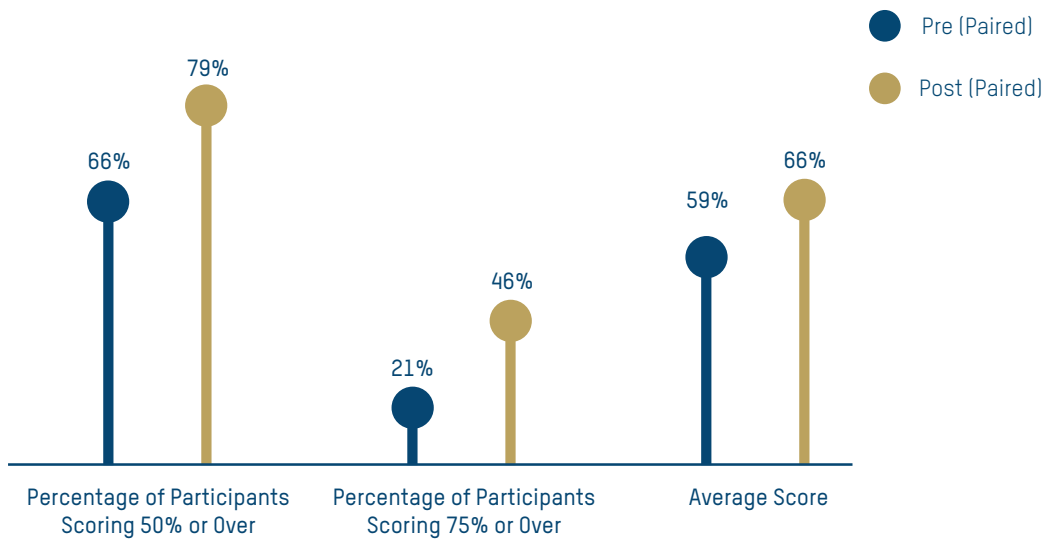


Fig. 6I Descriptive statistics of the participants' total scores (out of 16 questions), for those participants who completed both the pre- and post-training questionnaires (24 respondents)

The above descriptive statistics show a clear difference between the results of the pre- and post-training questionnaires. Specifically, 15 out of the 24 respondents received a higher score in the post-training questionnaire, and there was an increase in the average (mean) score from 9.42 (59%) in the pre-survey, to 10.63 (66%) in the post-survey. It is also worth noting that the number of participants who scored 75% or above greatly increased in the post-survey (46% of participants) compared to the pre-survey (21% of participants). The largest increase in a participant's score was 43.75%, from a pre-score of 37.5% to a post-score of 81.2%.

Inferential statistics were subsequently used to establish the level of significance for these results. The available data was measured at a continuous level. The independent variable consisted of two matched pairs (pre- and post-training questionnaire of each participant), and the distribution of the differences between the two groups was normally distributed⁷. Therefore, a Paired T-Test was employed to determine the statistical significance of the difference between the participants' total scores in the pre- and post-training questionnaires. This approach provides a clear indication of the improvement of participants' knowledge and understanding of the training's learning points. Based upon the selected level of significance ($\alpha=0.05$), the difference between the pre- and post-training results was shown to be

statistically significant ($T=2.7844$, $p=0.01054$). Since the p-value is less than the level of significance ($p<0.05$), we can confidently reject the null hypothesis (H_0 : there is no difference between the pre- and post-training results) and accept the alternative hypothesis (H_a : there is a difference in the results between the pre- and post-training test results).

In other words, it can be stated with confidence that the training reasonably increased the participants' knowledge and understanding of the learning points contained within the curriculum.

DIRECT OBSERVATION AND PROFESSIONAL JUDGEMENT

In addition to a knowledge-based questionnaire, Hedayah also utilized direct observation and professional judgement as a methodology to capture indicators and analyze the results. This methodology was particularly useful to capture the enhancement of participants’ practical skills in applying the learning points of each session. In this regard, every session during the training involved interactive elements, whereby participants were able to contribute, seek clarification, or discuss relevant topics in greater depth. Hedayah and Neem Institute made note of all such input by the participants.

This method was particularly important for mapping the increase in participants’ interviewing skills. As such, participants took part in two simulated interviewing exercises: one before and one after the relevant sessions, which taught the interviewing skills and needs assessment techniques. This allowed for a direct comparison of participants’ quality of questions and interactions in each simulation.

The exercise began by introducing the participants to a fictional character played by a local facilitator, who provided a short briefing on the background and current circumstances of the character. The actor remained the same across both exercises,

while the character was different but with similar characteristics in order to maintain reliability. The participants were tasked with interviewing the actor to collect information, which would support the development of a response plan.

The facilitators diligently took note of each question and/or interaction, which were categorized as either positive or negative, thereby allowing for pre- and post-skill analysis. Negative questions or interactions included: closed questions, accusatory questions such as those beginning with “why?”, beginning the intervention too early, being argumentative (e.g. directly challenging the individuals beliefs) or other negative interactions (such as: offering bad support or advice, telling the person there is something wrong with them, asking about crimes or offences before building trust, etc.). While positive questions were categorized based on whether they were open-ended, showed understanding for the context and background, and either aimed at building trust or collecting appropriate information, which could assist with the development of a response plan. Below is a summary of these interactions:

**SESSION 7 EXERCISE RESULTS
BEFORE THE RELEVANT TRAINING SESSIONS**

	Number of questions or interactions	Percentage of total
Positive interaction or Question	4	12%
Closed Question	17	50%
“Why”/Accusatory question	2	6%
Began intervention too early	3	9%
Argumentative	1	3%
Other negative interaction	7	21%

Fig. 7I Categorical breakdown of each question and/or interaction by participants during the practical interview simulation before the relevant training sessions on interviewing skills and needs assessments

**SESSION 14 EXERCISE RESULTS
AFTER THE RELEVANT TRAINING SESSIONS**

	Number of questions or interactions	Percentage of total
Positive interaction or Question	14	64%
Closed Question	3	14%
“Why” /Accusatory question	0	0%
Began intervention too early	4	18%
Argumentative	1	5%
Other negative interaction	0	0%

Fig. 8| Categorical breakdown of each question and/or interaction by participants during the practical interview simulation after the relevant training sessions on interviewing skills and needs assessments

**POSITIVE AND NEGATIVE QUESTIONS OR INTERACTIONS
BEFORE AND AFTER THE RELEVANT TRAINING SESSIONS**

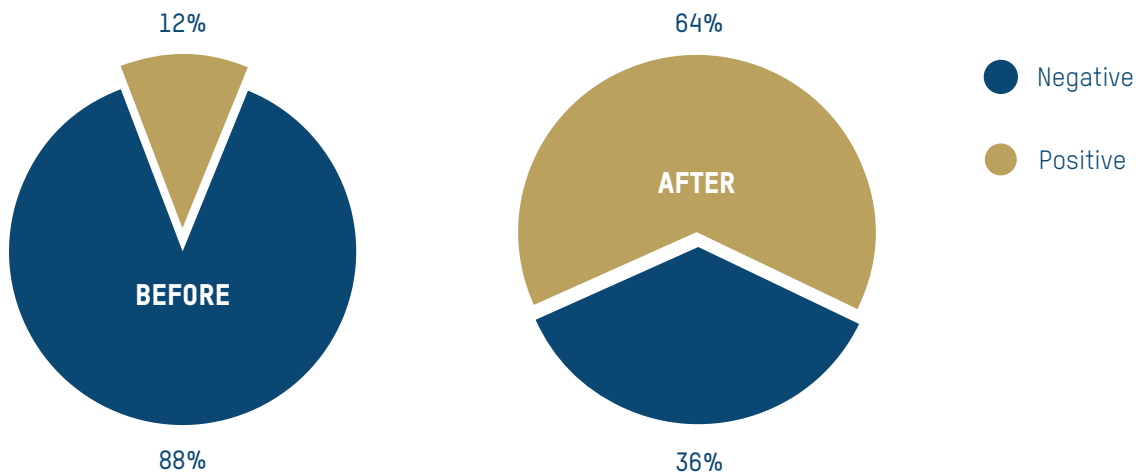


Fig. 9| Percentage comparison of positive and negative questions and/or interactions by participants during the practical interview simulations, before and after the relevant training sessions on interviewing skills and needs assessments

These results clearly show that the training sessions on interviewing and needs assessments greatly enhanced the participants skills in posing appropriate questions when engaging with an individual or family affected by RLVE. Before the relevant training sessions, only 12% of all questions asked by participants were considered to be appropriate. However, after the training, 64% of all questions were considered positive, a significant increase. Most notable was the considerable decrease in closed

questions (50% before and 14% after), as well as accusatory questions, which reduced from 6% to 0%. Therefore, it can be understood that the training enhanced the participants’ abilities to effectively conduct interviews with individuals affected by RLVE. In turn, this would improve their capacity to develop appropriately tailored response plans for families and individuals vulnerable to or affected by RLVE.

FEEDBACK THROUGH POST-TRAINING SURVEY

The above analyses have evidenced an increase in participants' knowledge and skills. However, to ensure that the participants perceived the knowledge and skills to be relevant and useful for their work, Hedayah also used a participant feedback survey, thereby confirming the likelihood of the knowledge and skills being implemented. The survey was also a valuable method for collecting participants' feedback and impressions to inform future activities. The survey included five Likert-scale questions, as well as the

opportunity to provide open-ended feedback. Due to language-related challenges, the surveys were not compulsory. While most participants provided qualitative feedback, only a total of 11 out of 26 participants completed the Likert-scale questions. Thereby challenging the reliability of the results. Below is the breakdown of the feedback results from the five Likert-scale questions.

	Very Low	Low	Moderate	High	Very High
To what extent was the training relevant to your work?	-	-	-	9%	91%
Please indicate your level of satisfaction with the gaining of new knowledge.	-	-	-	36%	64%
Please indicate how useful you found the training overall.	-	-	-	30%	70%
To what extent do you think this training will enhance the capacity of your organization, agency or center?	-	-	-	18%	82%
Please indicate your level of satisfaction with the training methods and pedagogical approaches of this training.	-	-	-	27%	73%

Fig. 10| Results (in percentage) of the participants' (11 respondents) Likert-scale ratings for five questions on the feedback survey

The feedback provided in the open-ended questions also supported the findings from the Likert-scale questions. Participants frequently provided positive feedback on how they would use the knowledge and skills going forward, as well as the benefits they gained from the training. One participant stated: "The overall workshop has been an eye opener into CVE approaches for using with the family unit. I have seen the need to improve my reintegration programming". Additionally, another participant responded that "the workshop is overwhelmingly great and has judiciously touched most of the important areas that affect CVE, disengagement, rehabilitation and reintegration, psychosocial support etc. efforts by practitioners in the Northeast". These quotes demonstrate that

not only was the training relevant for practitioners working on CVE, but the participants felt it was also specifically relevant for the context of Northeast Nigeria.

MM&E ONLINE ROUNDTABLE (NOVEMBER 2020)

During 25-26 November 2020, Hedayah organized an online MM&E roundtable and mentorship event for the program recipients with the support of Neem Institute. This activity aimed to assess whether participants from the February 2020 training found the program beneficial with respect to their work with families. Questions asked to participants included:

- ▶ What went well during the previous training sessions?
- ▶ What was/were the most useful session(s)?
- ▶ Can you tell me some anecdotes of how families reacted when you applied the knowledge and skills acquired?
- ▶ Did you find that your work with families was facilitated and how?
- ▶ Have you shared the knowledge gained with your colleagues and peers? If so, who? And what aspects did you share?

Overall, the responses shared by practitioners were positive and highlighted an overall change on the ground. For instance, a majority of practitioners indicated that they incorporated specific elements of the training curriculum while working with radicalized individuals and vulnerable family members in their local communities. A list of indicative anecdotal impact is provided below:

- ▶ HI used the knowledge and skills acquired during the training to develop trust with – and provide support to – a woman who returned to her local community after leaving BH. The skills gained during the training were highlighted as highly beneficial in relation to addressing the trauma she suffered from being in the violent extremist group, as well as for supporting her re-entry back into the community and school. HI also engaged with another woman who had become depressed and isolated after BH killed her husband. HI were able to help her to re-engage with the community and to improve psychosocially. They have since formed a women's support group that has become very active and has contributed towards significant growth of each of the women, particularly through building strong bonds and helping each other. HI commended Hedayah for

providing the knowledge and skills, which led to this group's establishment. HI also reportedly used the skills and knowledge from the training to improve their programming activities on reintegration and community reconciliation. Through consistent engagement with the local communities, HI has perceived an increase in community acceptance of returning former VEOs.

- ▶ AFRYDEF utilized the learning outcomes from the training to develop a platform to encourage dialogue and reconciliation in local Northeast communities affected by the ongoing conflict. Initial impressions are that the platforms are having a positive impact on community acceptance and reconciliation.
- ▶ NEYID utilized the knowledge and skills gained from the training to conduct interviews with local family members to gain an understanding of their perspectives on the reintegration of former BH members within communities in Borno and Yobe states. The information gathered from these interviews was used to develop a tailored project proposal, which directly addresses the needs and concerns of local families affected by violent extremism.
- ▶ T-CDI have also submitted several project proposals based on the knowledge and skills they learned during the training, and have translated what was taught into action. T-CDI led the implementation of a reconciliation event, in partnership with the local government and an international donor, to increase community acceptance of former BH members reintegrated back into their communities. Until now (November 2020), T-CDI has continued to monitor the situation after the event, which seems to have had a positive impact.



CONCLUSION OF PHASE 1

The preliminary results and analysis of the quantitative and qualitative data indicate that most participants increased their knowledge, understanding, and skills of the key topics addressed throughout the training. The quantitative analysis of the pre- and post-training questionnaires showed a statistically significant increase in the respondents' knowledge related to the key learning points.

Through direct observation and professional judgment, it was also possible to measure a considerable increase in the participants' skills, particularly in relation to interviewing techniques and needs assessments. Direct observation also enabled Hedaya to capture participants' capacity in developing CVE-relevant ideas and approaches that could be implemented and beneficial in their own contexts.

Finally, the data collected through the analysis of feedback surveys and responses provided by participants during the online MM&E roundtable, proved that the knowledge and skills gained were useful and relevant for practitioners engaging in CVE efforts throughout Northeast Nigeria – and that the participants intended to use these skills, thereby showing an initial indication of impact on the ground.

Although additional field visits to the Northeast would have been beneficial to capture the aforementioned points, as per the ToC⁸, it can be assumed that there is preliminary impact on the ground with respect to objectives one and two of the program:

1. Enhance recipients' knowledge and skills in restoring and increasing resilience and providing support to families whose members are potentially vulnerable to or affected by RLVE at different levels;
2. Enhance recipients' knowledge and skills in engaging and involving such families in CVE efforts targeting their vulnerable/radicalized family members as well as the wider society.



As this was the first implementation of the Supporting Families in CVE in Nigeria program, there were a number of lessons learned for the next phase:

- ▶ Many participants expressed their interest in involving a representative of OSC who could provide a briefing for participants on OSC's rehabilitation efforts. Participants explained that they had been engaged or would be engaged by OSC in order to support the reintegration of individuals being released back into the community. However, they also expressed that they had not received adequate information on the rehabilitation process within OSC. This information would be crucial for guiding the development of these reintegration programs.
- ▶ One common feedback from participants was the inclusion of additional stakeholders for future training iterations, including: government agencies, the Civilian Joint Task Force, international organizations, youth associations and other relevant CBOs operating in the Northeast region. Hedayah did take into account which of these additional stakeholders would be most appropriate to include during future iterations of the program.
- ▶ While Hedayah had checked the participants' preferred language prior to the training, participants faced challenges to understand some of the complex concepts in the prevailing northern Nigerian local language (Hausa). Hedayah responded quickly by providing all materials in both English and Hausa. However, it is recommended that for future iterations, Hedayah rigorously assess the suitability of the local language before the training's implementation. This could be done by discussing complex terms and concepts with participants in their local language prior to the training.

These lessons learned were taken into account by Hedayah in the curriculum adjustment process ahead of the implementation of Phase 2 of the program.

NEEDS ASSESSMENT (PHASE 2)

From 25-26 November 2020, Hedayah and Neem Institute conducted, in parallel to the above-mentioned MM&E roundtable, an online needs assessment roundtable in order to identify training needs and priorities for Phase 2 of the program. Some of the recommendations stemmed from the lessons learned from Phase 1, while others were specifically identified during the roundtable.

For instance, participants expressed their interest in receiving more support with respect to specific rehabilitation and reintegration techniques to be used with survivors, returnees and/or former VEOs and their family members. Participants also sought clarity and understanding on the mission and activities of government-led rehabilitation programs in order to be better equipped in supporting, engaging and preparing families before and after former VEOs are released and returned to the community. In this regard, the issue of community stigmatization against survivors, returnees, former VEOs and their family members was also identified by participants as a threat and important obstacle to the reintegration process.

In addition, recipients showed their willingness to learn more about trauma responses for families and individuals affected by violent extremism – and converting the knowledge and skills into effective project designs and proposals.

Finally, participants stressed their desire for follow-up mentorship in the implementation of the knowledge and skills gained. They also expressed their willingness to disseminate the curriculum to their peers and colleagues across the Northeast to amplify the impact of the program and ensure sustainability over the long-term.

Based on these findings and lessons learned from Phase 1 of the program, Hedayah and Neem Institute tailored the program content for an advanced level capacity-building training and ToT. The latter activity aim to provide recipients with the tools and techniques in order to disseminate the program's knowledge and skills to their peers and colleagues working in CVE across the Northeast.



18/11/21

Week (11) Theory

How to make a Fr...

- ① Soya Beans
- ② Sugar
- ③ Powder milk
- ④ Milk Flavo...

ADVANCED LEVEL CAPACITY-BUILDING TRAINING

During February 15-18, 2021⁹, Hedayah implemented an advanced level capacity-building training as part of Phase 2 of the program in collaboration with Neem Institute. As anticipated, this training targeted the same group of practitioners who attended Phase 1 (twenty-six participants).

The training drew upon the positive outcomes of the program's first phase by focusing on further enhancing participants' knowledge, understanding, and practical skills on CVE. This training had an emphasis on supporting and mobilizing families in the rehabilitation and reintegration efforts of their members affected by RLVE including survivors, returnees and former VEOs. The training also provided participants with the opportunity to convert their knowledge and skills into project plans that would address the challenge of community acceptance of individuals affected by violent extremism and their families. Finally, the training enhanced participants' theoretical and practical knowledge of multiagency collaboration and coordination between the different actors working on CVE at both the local and regional level. These learning points were in alignment with specific objectives three and four of the program¹⁰:

3. Enhancing recipients' knowledge and skills in supporting the continuation of rehabilitation and reintegration of survivors, returnees and former VEOs; and
4. Enhancing recipients' theoretical and practical knowledge of the multi-stakeholder approach, as well as collaboration and coordination with other actors when working on RLVE.

The following will provide an overview of the content as well as of participants' main contributions and feedback during each session of the training:

During the training's introduction, participants had the opportunity to share their concerns and expectations with regard to the training. Many participants expressed their willingness to learn more about reintegration and rehabilitation techniques to foster reconciliation and prevent community stigmatization. Other participants indicated their interest to gain adequate knowledge and skills to support families and survivors in coping with the issue of trauma.

Session 1 refreshed key terminology related to CVE such as extremism; violent extremism; terrorism – and RLVE. Although, these concepts were discussed during Phase 1 of the program, it was nonetheless beneficial to revisit them. The second half of the session focused on the macro-level factors and individual-level factors influencing the RLVE process and was based on Hedayah's framework on factors behind RLVE and the CVE Cycle.

Session 2 aimed to refresh and strengthen practitioners' understanding of the family environment as well as the role the family can have in CVE, while Session 3 reviewed some of the strategies and good practices for engagement, trust building, interviewing skills and the process of a needs assessment when working with families.



Session 4 consisted of a roundtable discussion during which participants shared their experiences in conducting CVE related activities within local communities during the global SARS-CoV-2 (COVID-19) pandemic. Statements from participants included:

“COVID-19 has greatly affected our strategies to support communities and families. We used to have activities that target 200 beneficiaries or more. Because of COVID-19, all these activities are on-hold”

“One of the key challenges we are facing relates to providing basic services during the lockdown period. We are facing some difficulties in accessing communities due to restriction of movement. Working remotely through virtual meetings with beneficiaries also affected the way we interact with communities”

“COVID-19 has also affected our ability to receive grants from donors. Working from home has reduced our efficiency and effectiveness. We are now in the process of switching activities to focus on community leaders. The aim is to ensure that community leaders adequately support community members. We are also trying to provide protective gear to our practitioners so that they can safely engage with community members”

In response to these concerns, Session 5 introduced participants to the LIVE Model, a set of practical guidelines that can be utilized to support the continuation of CVE programming during a health crisis. The LIVE Model describes the process of optimizing CVE programs for the given circumstances through: localization; inclusivity; virtualization and evaluation as follows:

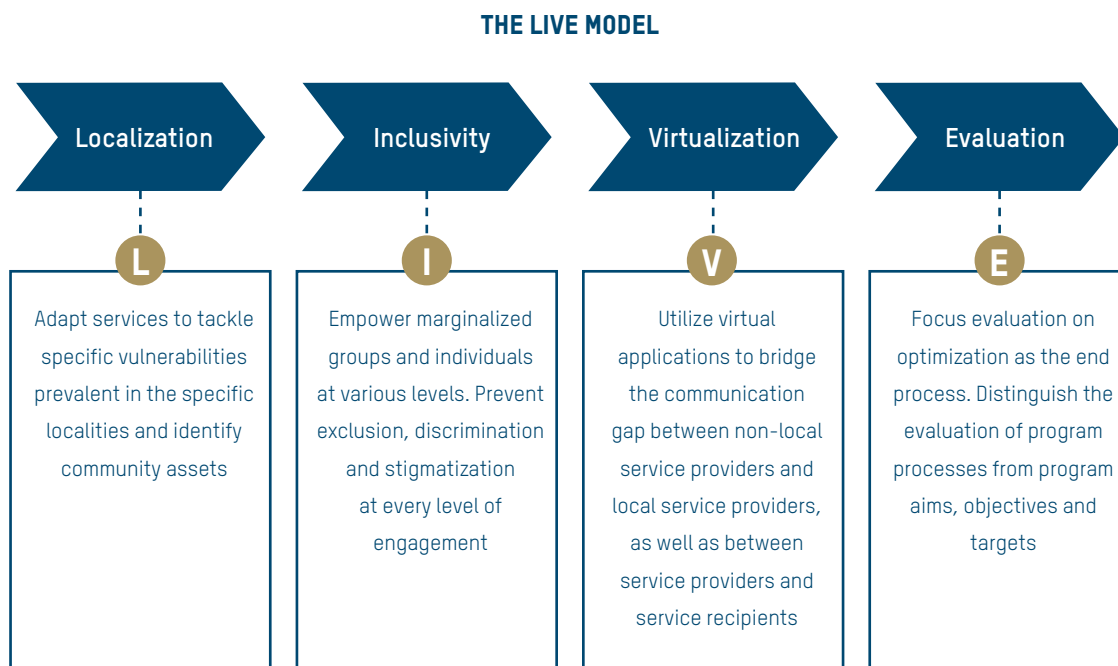


Fig. 11 | The LIVE Model

Participants welcomed the framework and mentioned that it could assist in the development of tailored strategies for their communities. Some of them further pointed out the challenge for community leaders whose workload in the community sharply increased, due to the pandemic. Families, in particular, struggled to access basic services and due to the pandemic children could not go to school. Overall, illegal and criminal activities also increased, leaving communities further isolated in dealing with CVE related issues. These problems were flagged throughout the workshop, signifying that the COVID-19 pandemic strongly affected communities' well-being, safety and security, at a time when the challenge of reintegration and rehabilitation is still significant.

Considering participants' requests during the November 2020 needs assessment roundtable, sessions six to eleven were designed to provide insight into concepts such as psychosocial support (PSS) and psychological first aid, therapeutic communication, clinical interviewing with individuals and families, trauma, PTSD and humanitarian principles. The sessions also included case studies, which allowed participants to reflect on their experiences in providing

support to families affected by violent extremism as well as survivors, returnees and former VEOs suffering from trauma and other forms of psychological distress. Participants received these sessions positively and expressed their appreciation for Hedayah and Neem Institute support in providing solution to challenges related to the rehabilitation and reintegration of individuals affected by RLVE and their family members. This support was deemed as particularly important as community leaders and practitioners in the Northeast often feel isolated in handling cases of individuals affected by violent extremism.

Responding to participants' request to learn more about government efforts towards rehabilitation and reintegration through the Operation Safe Corridor (OSC), Session 13 provided recipients with a platform to further discuss local CBOs and community leaders may contribute to the multiagency collaboration and coordination global efforts for former VEOs and their family members. Contributions from participants during the session included:



“We know that OSC aims to rehabilitate and reintegrate former violent extremist. What we have yet to know relates to the action undertaken by OSC to actually support the rehabilitation and reintegration of individuals who return to the community and to prevent community stigmatization”

“With respect to former combatant rehabilitated through OSC, there is a question on the mechanisms deployed to monitor their activity once they are back in the community”

“We would like to gain more information on the actors, both at the governmental and non-governmental level involved in OSC. We would also like to know more about the activities carried out by OSC within their rehabilitation center: is there a plan that is guiding the process of rehabilitation and reintegration of the repentant? Is there any involvement from CBOs? What about religious leaders?”

These interventions highlighted the importance to create synergy between participants’ work within their local communities and the efforts deployed by OSC to rehabilitate and reintegrate former VEOs and their family members. Despite the absence of an OSC representative during the training, Hedayah committed to participants’ questions and inputs with international partners, and potentially OSC, to ensure information sharing.

Session 14 enhanced participants’ knowledge of potential responses to prevent community stigmatization of survivors, returnees and former VEOs and their families during reintegration. During the session, participants were invited to work in group and reflect on the fictional case study of Fatima, a Nigerian woman abducted by BH, held in captivity for three years and forced to marry one of the group leaders. It was mentioned that Fatima gave birth prior being rescued by the Nigerian Armed Forces (NAF) and reintegrated to her community where she faced stigmatization from both her aunt and fellow community members. When asked “Why does Fatima’s community not accept her back?” and “What can practitioners do to support Fatima?” participants provided the following responses:

GROUP 1

- ▶ Community members fear that Fatima comes back with a mission to infiltrate the village. Before accepting her back, they need to make sure that it is not the case. Additionally, the father of the child might come back to the community, which may pose another threat.
- ▶ Practitioners should act as intermediaries between Fatima and the community through a community acceptance group for example. This group would gather Fatima together with select-community members, community leaders and religious leaders to promote forgiveness and reconciliation. Practitioners should also help both Fatima and community members with psychosocial support and mentorship sessions.

GROUP 2

- ▶ Practitioners should aim for acceptability based on culture and religion. Community members need to heal from the trauma they experienced because of the BH insurgency.
- ▶ As such, practitioners should advocate to traditional leaders and local government stakeholders to establish a community acceptance mechanism that would provide community members and Fatima with psychosocial support and allow for the organization of community dialogue sessions.

GROUP 3

- ▶ There are high chances that the community is associating Fatima with BH. This highlights the need to address the issues of reconciliation and forgiveness within the community. This implies involving all members from the community to include youth through community dialogue initiatives.
- ▶ There is also a need to organize psychosocial counselling sessions for Fatima and to make sure she can develop a source of livelihood for the time she will spend in the community.

GROUP 4

- ▶ The level of trauma within the communities makes forgiveness difficult. Many community members do not believe about the genuineness of BH defectors such as Fatima. This leads to stigmatization of former violent extremists and their families.
- ▶ In addition, there is a lack of understanding about the relevance of rehabilitation programs and it appears to community members that there is no clear action plan for the reintegration of former violent extremists.

Fig. 12| Result of the group work based on the case study as presented by participants during Session 14

As a follow up to the group work, Session 15 provided participants with useful tips on how to implement effective dialogues with and within communities and families, as an approach to reduce stigmatization and increase community acceptance of individuals affected by violent extremism to include survivors, returnees and former VEOs. In addition, Session 16 presented examples of activities to increase community cohesion and acceptance, with emphasis placed on counter narratives and socio-cultural initiatives.

In Session 17, participants shared their experiences in engaging and building community acceptance. For instance, a representative from T-CDI presented the “Launch for Peace” initiative implemented in coordination with USAID and the Northeast Development Initiative. This project aimed to settle a dispute between two communities in the locality of Damasak, Borno State. The dispute allowed BH to gain control over a river that is at the core of subsistence fishing activities in both communities. To settle the dispute, the initiative brought together the communities through cultural activities such as traditional dance, theatre and dinners as well

as through providing a platform for constructive dialogue. According to T-CDI, these activities allowed members from both communities to share grievances in a peaceful manner, which greatly helped to rekindle their relationship.

Another project implemented by AYOPAD with support from the European Union and the international non-governmental organization (INGO) International Alert, aimed to build the capacity of local civil society practitioners to conduct dialogues for community and traditional leaders, amongst other community representatives. This “Recovering from Conflict and Resilience Building” program also focused on providing a safe space and supporting women and girls returning from conflict zones and their family members.

The final sessions (eighteen and nineteen) of the training gave participants the opportunity to translate their knowledge and skills into a project plan that would address acceptance of reintegrated former VEOs and their family members within their local communities. A summary of the different projects can be found in Annex B of this report.



Overall, participants' demonstrated exceptional skills in designing highly appropriate project plans for the implementation of the knowledge and skills gained throughout the training.

In this regard and during the feedback session of the training, participants stressed their desire for follow-up mentorship in the implementation of these project ideas and other locally driven initiatives. Statement from participants included the following:

“Thanks to the knowledge acquired during the previous training, our organization applied for funds through the UN Alliance for Civilization for a program focusing on CVE and the promotion of religious harmony. An idea could be to create a consortium between our organizations for the drafting of proposals and apply for funds with support and mentorship from Hedayah and Neem Institute”

“All the activities that we have been implementing in the Northeast since 2020 result from Hedayah and NEEM capacity-building trainings. Now we need to establish a partnership for CVE that could be supported by Hedayah and Neem Institute”

“There is a need to build the capacities of our practitioners even more. This would help us to improve our skills in project design and project implementation”

Furthermore, participants also emphasized their intention to not only implement the knowledge and skills gained, but to also disseminate the program content to a wider audience of practitioners across the Northeast, confirming statement of commitments made during the needs assessment roundtable of November 2020:

“We found this training meaningful and impactful. We widen and broaden our horizon. Our organization is now planning to implement trainings for partner organizations based on the knowledge and skills shared by Hedayah and Neem Institute”

“We will make sure to disseminate knowledge to other organizations in Yobe and Adamawa states”

“We are facing similar challenges than other organizations in the room. There is a need to disseminate the knowledge and skills we learnt during the training to other organizations”

This feedback guided the development of a complementary activity in the form of a ToT scheduled for November 2021.





TRAINING-OF -TRAINERS (TOT)

Following the implementation of two capacity-building trainings (February 2020 and February 2021) and addressing the need expressed by participants to disseminate the program knowledge and skills to other relevant local actors who engage in CVE efforts throughout Northeast Nigeria, Hedayah and Neem Institute implemented a ToT during November 8-10, 2021¹². This activity reflected the last specific objective of the program¹³:

5. Establish a pool of national trainers with the capacity to further disseminate the abovementioned knowledge and skills with other practitioners and relevant stakeholders.

The activity consisted of a three-day training for the same group of practitioners (twenty-six participants). Through this training, practitioners gained enhanced skills and knowledge on facilitating and presenting, as well as a refreshment of the program. Additionally, all materials developed during the previous phases, including facilitator notes, presentations and exercises were provided to the practitioners as a training package, to assist with future implementation and dissemination of the knowledge and skills to a wider audience.

The training utilized a participant-led approach, consisting of multiple activities each day and focused on refreshing key concepts related to CVE, as well as on providing participants with comprehensive mentorship on the challenges and solutions for training implementation and the identification of needs and objectives for the development of a training curriculum. Finally, participants were provided with the opportunity to deliver the program's content to their colleagues during the last day of the training as part of a simulation exercise to prepare for future implementation.

The following paragraphs will give a more detailed overview of the content as well as of participants' contributions and feedback during each session of the activity:

Session 1 refreshed the participants' knowledge and understanding on the key terms and concepts related to CVE. Notably, the role of the family unit in CVE was reviewed along with some of the good practices to engage and build trust with vulnerable or radicalized individuals and their family members. Other concepts reviewed included psychosocial support, clinical interviewing with individuals and families, issues of community acceptance and stigmatization, establishing effective dialogue and setting up an effective communication strategy. It is worth mentioning that participants showed a good level of knowledge retention in understanding the good practices through which the families can support CVE efforts to the extent that most of their responses were aligned with content of previous trainings. For instance, participants highlighted that in Nigeria, where families are often displaced and members can be missing or incarcerated, the idea of family is particularly important and not only restricted to blood ties. In this regard, allowing individuals to define who is part of the family or not is particularly important for practitioners while preparing for their intervention and identifying healthy and positive support systems.

During the session, the facilitator also emphasized the importance of working with women in CVE in the context of Northeast Nigeria. Indeed, it was emphasized that when appropriately supported, mothers, sisters, and wives can be powerful agents of change when it comes to detecting and preventing early signs of radicalization. This is due to their unique position in the family/community as observant of potential changes in individuals' behavior on their path to potential RLVE. Last but not least, women are not only well-

positioned in relation to their familial relationships, but are also able to support in many other CVE related roles, including, but certainly not limited to:

- ▶ Effective mentors;
- ▶ Intervention officers;
- ▶ Educators;
- ▶ Health care professionals;
- ▶ Policy advisers;
- ▶ Community activities.

Session 2 consisted in a roundtable discussion regarding the challenges that participants may face while implementing capacity-building activities for their peers, colleagues and local actors engaged in CVE efforts. Some of the challenges highlighted by participants included identifying appropriate recipients and target population for their programs as well as ensuring acceptance by community members of programs promoting the rehabilitation and reintegration of survivors, returnees and former VEOs and their family members. Examples of participants' contributions included the following:

“One of the challenge we face lies in identifying the appropriate target audience and participants when anticipating the implementation of a training”

“Community acceptance of our interventions is a major challenge. There are many traumas among community members. I have tried a lot of different interventions to build trust and to ensure the good reintegration of former violent extremists but they keep facing rejection and stigmatization nonetheless”

“It is difficult to talk to these people [community members] about CVE and the reintegration of former BH fighters when they are lacking economic resources, otherwise you create reluctance”

Other challenges identified by participants during the discussion included:

“During activities implementation, we may face

delays. We may also have interesting ideas but reaching out to vulnerable people can be very difficult in terms of logistics”

“Gender sensitivity is another challenge. In some areas we implement activities that are targeted at women in need but some people believe that it is not good to give space to women in that way”

“A challenge is the COVID-19 pandemic. Some donors put a limit of the number participants allowed to attend a training in order to respect health protocols”

“Due to the pandemic and safety concerns, there are a lot of restrictions to movement or travel in the Northeast at the moment. In addition, we have to engage with law enforcement officers and clarify the nature of what we do with communities on a regular basis. This puts a lot of constraints on us”

With regard to the solutions to overcome the above-mentioned challenges, participants highlighted the following:

“It is important to communicate the challenges we face with our donors so that they can help us to find a solution”

“To improve reintegration and community acceptance, it is important to train and to sensitize all those who have not been part of capacity-building programs such as policemen and figures of authority within the community. Then they will become agent of change”

“A solution to solve the challenge of community stigmatization could be to support the creation of reconciliation platforms where former violent extremist and community members can come together and solve their conflicts because people might start thinking over it and forgive”

“It is important that governments put community leadership at the forefront. Communities in the Northeast are more and aware of issues surrounding violent extremism and should be involved in finding local solutions. For example, communities



themselves should come up with solutions for the reintegration of ex-combatants. At the same time, there should be more coordination between the organizations involved in peacebuilding activities at the local level to enhance the sustainability of interventions

Session 3 explored the importance of conducting a needs and gaps analysis as a preliminary step to the development of a CVE capacity-building program. With regard to participants' work in the Northeast, it was highlighted that these needs and gaps refer to the grievances at the community-level (push factors), the palatable narratives used by anti-social groups such as BH and ISWAP (pull factors) as well as to the positive elements, values and practices that the community possess and that can push back the recruiters of violent extremist groups (community resilience mechanism). In order to identify these needs and gaps, participants mentioned that desk research, semi-structured interviews and/or the dissemination of questionnaires to community members are relevant and appropriate methods in the context of Northeast Nigeria.

Reflecting on existing needs and gaps in their local context, participants were then invited to identify the main problem they want to address through their program/activity as well as possible target population and recipients. While the target population are those individuals that are the ultimate goal of a CVE program/activity, the recipients are the main influencers that can bring positive changes in the target population. Participants identified the following categories

of individuals as relevant target population and recipients for their potential programs/activities:

- ▶ Examples of target population:
 - ▶ Youth;
 - ▶ Children;
 - ▶ Women;
 - ▶ Former BH combatants.

It was noted by participants that while youths are mainly recruited for combat, killing, stealing and security, young women are mainly recruited for intelligence gathering, logistical support, domestic chores and sexual exploitation.

- ▶ Example of recipients:
 - ▶ Religious leaders;
 - ▶ Traditional leaders;
 - ▶ Educators;
 - ▶ Youth leaders;
 - ▶ Women leaders;
 - ▶ Social workers;
 - ▶ Health workers;
 - ▶ Psychologists.

The target population and recipients being identified, the last part of the session focused on identifying the needs of these two categories in order to define specific objectives and activities for their CVE programs in the form of a concept note, something that was further expanded upon in later sessions of the training.

Session 4 specifically focused on testing the skills of participants in writing impact objectives, which can be defined as objectives that are:

1. Mapped to the identified needs of recipients/target population and to the problem to be addressed;
2. Specific and measurable;
3. Focused on and phrased around the “change” participants want to see in the recipients/target population; and
4. Phrased around an increase, enhancement or development in the recipients/target population.

Participants were then invited to work in group to write impact objectives based on the identified needs for former combatants, women and children exiting detention facilities or internally displaced people camps or returning from conflict zones.

Building upon the previous steps, Session 5 examined some practical considerations for participants to take into account while working on the design of their CVE programs/activities. These include allocating special attention to conflict sensitivity, gender sensitivity and the importance to abide by the “do no harm” principle in order to avoid exposing the target population to additional risks through action or intervention. Finally, the session introduced participants to standards of practice for evaluating the impact of their CVE interventions with the target population.

More specifically, participants were introduced to Hedayah’s “Seven-Step Framework for MM&E”¹⁴, which contains a set of guiding principles to assist participants with determining the best options for their particular program throughout and after the design phase. The steps are summarized below:

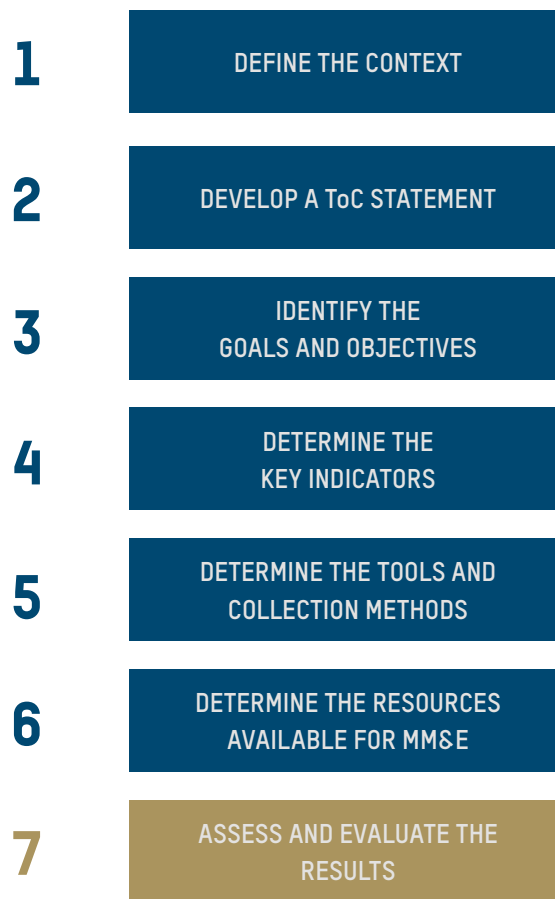


Fig. 13| Hedayah’s “Seven-Step Framework for MM&E”.

During Session 6, some additional guidelines were provided to participants on the development of a comprehensive training curriculum using adult learning principles and inclusive of PowerPoint presentations, lessons plans, facilitator notes and associated handouts. In addition, Hedayah gave some useful tips and recommendations on the creation of other related documents such as external and internal training agendas with roles and responsibilities, pre- and post-training knowledge-based questionnaires to capture key indicators of change and feedback surveys. Other considerations reviewed during the session included determining a budget and capacity resources, coordinating with local authorities to look for resources as well as utilizing other donor opportunities (national and international).

Session 7 focused on providing participants with practical tools and good practices for training implementation and facilitation techniques such as using icebreaker sessions, setting up ground rules, considering time-management and being inclusive. Participants also explored some of the challenges that come with training implementation as well as potential solutions. The level of participants' engagement was high throughout the session and Hedayah and Neem Institute facilitators encouraged participants to develop their own ground rules and training approaches in order to best prepare future training implementations in their local context. Remarks made by participants included gaining a better understanding on the difference between facilitating and lecturing as well as on how to handle a situation in which a participant is not fully committed to the activity. In response to the later, facilitators indicated that a good way to simulate the actual physical and working environment of a training while setting expectations and ground rules is to conduct ice breaker sessions at appropriate times during the training. To illustrate this point, participants themselves carried out three suggested ice breaker sessions ("two truths and a lie"; "something you may not know about me"; "more in common"). The first icebreaker practiced, "two truths and a lie", involved asking participants to introduce and give three statements about themselves, two of which are true and one of which is false; the rest of the group is then invited to vote on which fact is false.

During the last two sessions of the workshop, participants had the opportunity to practice the

delivery of a capacity-building training's content during a simulation exercise. In this regard, participants were provided with all the materials necessary to practice the delivery of content to their peers and colleagues, including PowerPoint presentations, handouts and facilitator notes used for Session 1 and Session 2 of the capacity-building training conducted in February 2020 in Abuja. These two sessions were selected because they lay down the theoretical foundation of the program in Nigeria and were included in the curriculum of the two trainings previously conducted with the same group of participants. Hence, participants already had a good knowledge of these sessions' content to include key CVE terms and concepts, the macro and individual level factors contributing to RLVE and the range of possible interventions relating to prevention, early intervention, rehabilitation and reintegration (CVE-Cycle). This greatly facilitated the practice, and allowed participants to focus on training delivering techniques rather than spending time reviewing the content.

In order to conduct the activity, participants split into groups and assigned roles and responsibilities among themselves as follows:

- ▶ Main facilitator(s): Group member(s) in charge of delivering the content and leading the session;
- ▶ Logistical facilitator: Group member in charge of supporting the group with all logistical aspects of the training, including ensuring that all participants are seated, supporting during group discussions and exercises by giving the floor to participants, and capturing definitions on flipcharts;
- ▶ Timekeeper: Group member in charge of keeping track of the time and notifying the main facilitators about their remaining time to conclude the session; and
- ▶ Note takers(s): Group member(s) in charge of taking notes of participants' contributions and inputs throughout the session.

Based on Hedayah and Neem Institute guidance, each group had 120 minutes to present the content through a participant-led approach. At the end of their presentation, each group received specific feedback from Hedayah expert facilitators based on direct observation and professional judgement. The competencies used to determine the quality of participants' presentations were as follows¹⁵:

1. Ability to keep up the momentum and energy: The main facilitator utilizes an energetic, lively pace while presenting and speaks at a rate that allows participants time to process new or difficult concepts. Presents content with clarity, using clear visuals and unambiguous explanations. Moves through content at an effective pace, avoiding digressions and voids. He/she uses a conversational tone and conveys knowledge of, commitment to, and passion for the content;
2. Ability to facilitate participants' learning process: The main facilitator uses clear expectations, examples, analogies, and personal experiences for answering questions and reinforcing intended learning outcomes. Utilizes numerous procedures to highlight critical points including rehearsal, repetition, and review. He/she illustrates critical points with short, interesting, and appropriate stories that increases participant interest and attention;

3. Ability to listen, engage, and include: The main facilitator utilizes active engagement strategies and expands on comments made by eliciting further responses from them. He/she creates a light, friendly environment, infusing humor without sarcasm or prepared joke; and
4. Ability to coordinate and manage: The logistical facilitator monitors participants' responses and supports when appropriate by looking and listening carefully. Timekeeper helps the main facilitator to move participants through the session by indicating remaining time. The note taker comprehensively and clearly captures participants' comment/question/input.

Throughout the activity, participants demonstrated a good ownership of the above-mentioned competencies as well as an excellent understanding of the curriculum's content and learning points, which greatly helped them to convey difficult concepts with clarity to their colleagues in the room while creating an environment conducive to adult learning. A breakdown of the direct observation and professional judgment analysis employed to evaluate participants' knowledge and practical skills in training and facilitation techniques can be found in the MMSE (Phase 2) section of this report.



In addition to Hedayah and Neem Institute guidance and feedback on the group presentations, participants also had the opportunity to share their feedback on the activity. Comments from participants included:

“The exercise was very insightful. All the presentations were quite beautiful. For the future, when we will implement our own trainings in our localities, we will need to make sure that all logistical requirements are in place, especially regarding IT to avoid any disruption during implementation. It is also important that training start by giving an overview of the content to the participants and clearly say what is expected from them at the end”

“All the group did well and managed to keep participants engaged throughout. Though, we should make sure to respect the timing of each session especially when we include elements of interactivity like ice breaker sessions”

“One element to take into account when we will deliver trainings to our colleagues in the Northeast is the language to be used. The content we delivered is in English but this language is not mastered by everyone in the areas where we are operating”

“This exercise allowed us to improve our skills in delivering trainings. For the future, we should all collectively take ownership of the content and frame it in a way that fits well with our existing local approaches”

Overall, participants proved that they have the required capacity to implement their own CVE capacity-building trainings in their own communities based on the materials and guidance provided by Hedayah and Neem Institute.

Finally, during the feedback session of the training, participants were asked to provide their feedback, specifically on whether they found the material presented to be useful and how they would use and disseminate the program's content going forward.





MM&E (PHASE 2)

Phase 2 of the program included two main activities in the form of an advanced level capacity-building training and a ToT for the same group of practitioners as in Phase 1 (twenty-six participants). Activities within Phase 2 related to the following specific objectives of the program:

3. Enhancing recipients' knowledge and skills in supporting the continuation of rehabilitation and reintegration of survivors, returnees and former VEOs;
4. Enhancing recipients' theoretical and practical knowledge of the multi-stakeholder approach, as well as collaboration and coordination with other actors when working on CVE; and
5. Establishing a pool of national trainers with the capacity to further disseminate the abovementioned knowledge and skills with other practitioners and relevant stakeholders.

Similarly, to Phase 1, these specific objectives guided the development of session objectives that were used as a reference to track participants' learning progress following a "cascade-model". In order to capture participants' progress and retention of knowledge from both a quantitative and qualitative perspective, Hedayah used the same methodologies as in Phase 1 of the program¹⁶ in addition to a MM&E field visit that was conducted in March 2022:

- ▶ Pre- and post-training knowledge-based questionnaires;
- ▶ Direct observation and professional judgement;
- ▶ Feedback through post-training survey; and
- ▶ MM&E field visit.

A limitation of the MM&E process for Phase 2 was the lack of respondents to the pre- and post-training questionnaires during the advanced level capacity-building training of February 2021 (thirteen respondents out of twenty-six participants). This was in part due to the logistical difficulties related to the implementation of a capacity-building training in a hybrid format in the context of the COVID-19 pandemic. As a result, Hedayah's assessment of the pre- and post-training questionnaires results for this activity may be limited.

This point was taken into consideration and the same occurrence was partially avoided during the hybrid format ToT (nineteen respondents out of twenty-six participants).

PRE- AND POST- TRAINING QUESTIONNAIRES: RESULTS AND ANALYSIS

A knowledge-based questionnaire with the same set of close-ended was distributed on the first and the last day of the training to participants of both the advanced level capacity-building and ToT. Descriptive statistics were then conducted to provide a preliminary analysis and to highlight changes.

The following table and graph provide an overview of the descriptive statistics for the advanced level capacity-building training:

Variable	Observations	Lowest Score	Highest Score	Variance (Standard Deviation)
(Standard Deviation)	13	6	14	2.12
Post (Paired)	13	9	14	1.45

Fig. 14| Descriptive statistics of the participants' scores (out of 16 questions), for those participants who completed both the pre- and post-training questionnaires (13 respondents)

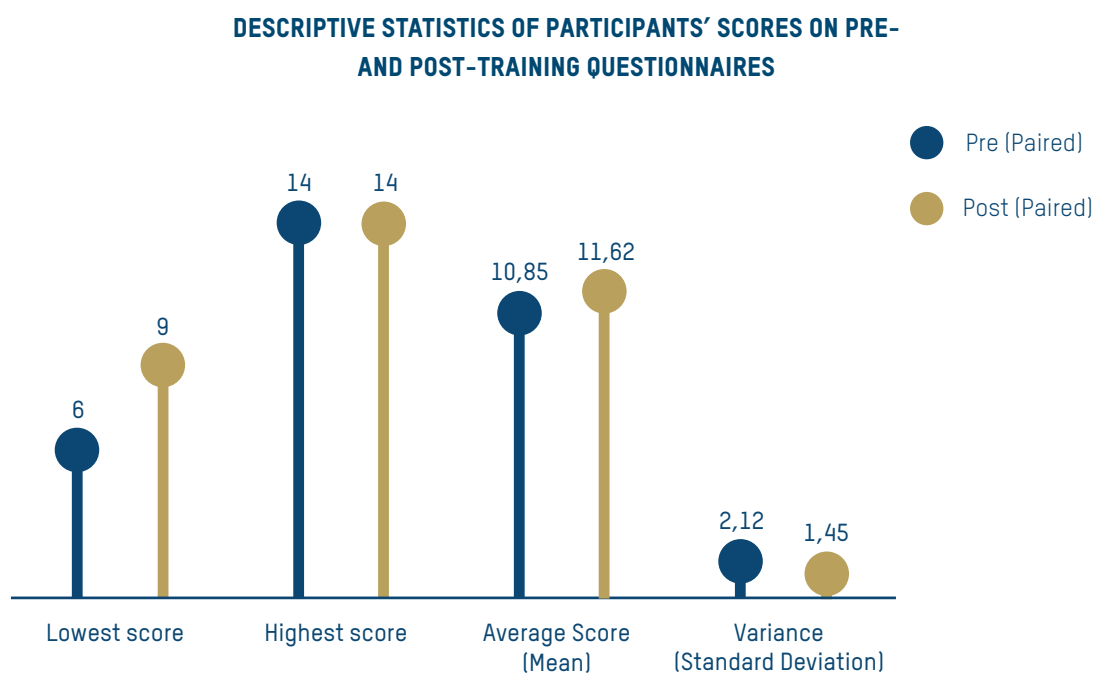


Fig. 15| Descriptive statistics of the participants' total scores (out of 16 questions), for those participants who completed both the pre- and post-training questionnaires (13 respondents)

The descriptive statistics highlight a difference between the results of the pre- and post-training questionnaires. In fact, there was an increase in the average (mean) score from 10.85 (68%) on the pre-training test, to 11.62 (73%) after the workshop. It is also worth noting that there was an increase in the lowest score recorded on the post-training questionnaire (9 out of 16, or 56%) when compared to the pre-training questionnaire (6 out of 16, or 38%).

In addition, the post-training results had a smaller standard deviation result (1.45) compared to the pre-training survey (2.12). The standard deviation represents the similarity/diversity of the participants' scores. A large standard deviation means that the participants' scores varied greatly from the average

(mean) score, while a small standard deviation shows that the scores were closer to that of the average (mean) score. A smaller standard deviation, as was the case here, highlights a greater similarity of the participants' knowledge and understanding.

The descriptive statistics therefore show that the average score increased and that the participants gained a greater similarity of their knowledge and understanding of the learning points within the workshop's curriculum¹⁷.

The descriptive statistics for the ToT were the following:

Variable	Observations	Number of Participants Scoring 50% or over	Number of Participants Scoring 75% or over	Average Score
Pre (Paired)	19	15	7	7.47
Post (Paired)	19	17	8	7.89

Fig. 16| Descriptive statistics of the participants' scores (out of 13 questions), for those participants who completed both the pre- and post-training questionnaires (19 respondents)

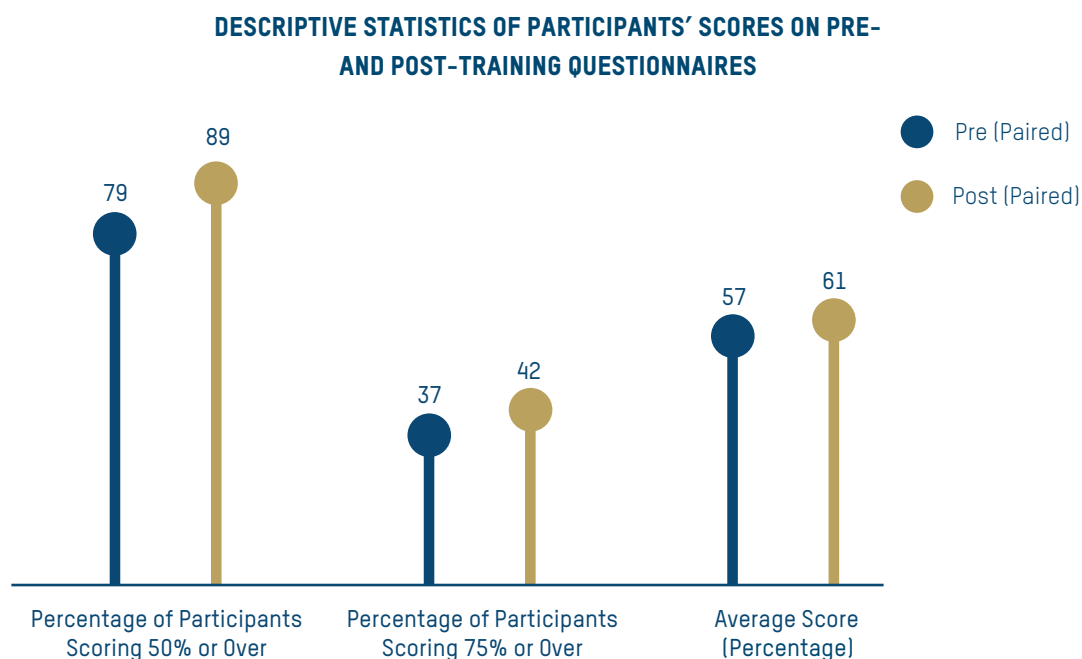


Fig. 17| Descriptive statistics of the participants' total scores (out of 16 questions), for those participants who completed both the pre- and post-training questionnaires (19 respondents)

The above descriptive statistics show a noteworthy difference between the results of the pre- and post-training questionnaires. As a result, 10 out of the 19 respondents received a higher score in the post-training questionnaire, and there was an increase in the average (mean) score from 7.47 (57%) in the pre-training test, to 7.89 (61%) after the workshop. In addition, the number of participants who scored 50% or above improved in the post-survey (89% of participants) compared to the pre-survey (79% of participants) and the largest increase in a participant's score was 38.47%, from a pre-training score of 53.84% to a post-training score of 92.31%.

Additionally, a Shapiro-Wilk Test was employed to determine if the data was normally distributed between the participants' total scores on the pre-

and post-training questionnaires. In this regard, the test found a W-score of 0.9726 and p-value of 0.8261, which for the selected level of significance ($\alpha = 0.05$), confirm the null hypothesis (H_0) of "the sample data is normally distributed". Results of the Paired-T Test then indicated that there was a non-significant yet small difference between participants' results in the pre- and post-training questionnaires ($T = 0.7403$, $p = 0.469$) for the significance level $\alpha = 0.05$. Although the results obtained would have benefited from a larger statistical sample, it can be stated with reasonable confidence that the training contributed – at least marginally – to the increase of participants' knowledge and understanding of the learning points contained within the curriculum.

DIRECT OBSERVATION AND PROFESSIONAL JUDGEMENT

During the advanced level capacity-building, direct observation and professional judgement was adopted as a useful methodology to monitor participants' application of practical skills when developing project plans during sessions eighteen and nineteen. In this regard, Hedayah analyzed the final projects in terms of the language and approaches utilized in their development. Hedayah also captured the level of participants' confidence and local ownership.

As previously highlighted, participants' demonstrated exceptional skills in designing highly appropriate project plans for the implementation of the knowledge and skills gained throughout the program. Indeed, participants demonstrated a clear understanding and ownership of the essential steps of project design, such as identifying the context and statement of the problem, identifying goals and objectives, developing activities that are contextually relevant and that reflect the needs of the target population and/or recipients of the project, determining key indicators of success, collection methods as well as appropriate tools to analyze the project's preliminary impact on the ground. It is also interesting to note that all project ideas reflected the concept of multiagency collaboration and that participants showed an

increased operational capacity in reflecting some of the pedagogies and topics discussed during both capacity-building trainings (i.e., mitigating social stigma, ensuring community acceptance, trust building, PSS, PFA, trauma healing, PTSD therapy).

As per the ToT, direct observation and professional judgement was particularly important for mapping the increase in participants' knowledge and practical skills in delivering presentations to their peers and colleagues during the simulation exercise in sessions eight and nine. Using a set of four core competencies, Hedayah took note of each participant's behavior and application of the guidance provided during previous sessions of the training with respect to their assigned roles and responsibilities within their group. Below is a breakdown of the direct observation and professional judgment analysis captured by Hedayah for each group:

GROUP 1

Competency

Feedback

1. Ability to keep up the momentum and energy

The first facilitator of the session seemed nervous during the first half of their presentation but was getting more comfortable towards the end of their session. The second facilitator was relaxed and presented the content using clear language to convey the main learning points of the session. Eventually, both facilitators moved around the room energetically and had positive body language. They also tried not to read the facilitator notes, which helped participants to remain focused.

2. Ability to facilitate participants' learning process

The second facilitator introduced themselves and their experience working as an NGO worker before explaining the CVE Cycle, which helped to set the stage and to contextualize the knowledge of the session to the Nigerian context.

3. Ability to listen, engage, and include

The first facilitator expanded on participants' comments and tied them to the session's key concepts. Both facilitators tried to give the floor to participants from different institutions in order to reflect on different opinions and insights.

4. Coordination and management

The logistical facilitator reacted quickly to logistical issue such as a signal loss from the main microphone. The group coordinated well and managed to finish the session on time.

Overall feedback

The group did an excellent presentation and managed to finish on time. Both facilitators utilized a participant-led and dynamic approach and reflected on participants' contributions as well as on their own experiences to introduce the different concepts and key terminologies of the session. This element was crucial to create a conducive environment for adult learning.

GROUP 2

Competency

Feedback

1. Ability to keep up the momentum and energy

The main facilitators energetically moved around the room and tried to not look too much at the PowerPoint slides and the facilitator notes. They maintained eye contact with participants in the room, which helped to create a connection with participants. They also used careful, yet effective language to convey key messages.

2. Ability to facilitate participants' learning process

The main facilitators provided examples based on their personal experiences to explain key concepts from the CVE Cycle, notably early intervention and rehabilitation strategies. They also used repetition to emphasize CVE terminologies and concepts, which greatly facilitated the learning process.

3. Ability to listen, engage, and include

The main facilitators consistently thanked participants for their contributions and inputs. They allowed all participants to speak before engaging. However, this led the group to run slightly out of time.

4. Coordination and management

The logistical facilitator effectively helped the main facilitators to overcome technical challenges and ensure that the session was running smoothly by capturing participants' inputs on flipcharts and managing the PowerPoint slides.

Overall feedback

The group slightly ran out of time (around 5 minutes). This shows the importance of limiting the number of interventions from participants in order to have enough time to complete the session. The main facilitators maintained a very good level of interaction with participants throughout the session and explained key concepts very clearly. In particular, the explanation of the CVE Cycle Infographic and Hedayah's framework was presented in a very clear manner.

GROUP 3

Competency

Feedback

1. Ability to keep up the momentum and energy

The main facilitator gave participants a short break before starting the session. This greatly helped since participants' attention span was limited by previous sessions. Both facilitators introduced themselves before starting the session. They moved around the room and maintained eye contact with participants throughout the session. They used clear language and took positive initiatives like using a laser pointer to emphasize the different steps of the CVE Cycle.

2. Ability to facilitate participants' learning process

The main facilitators did an excellent job at tying participants' responses into their presentation, which helped to contextualize the knowledge and created a natural flow for the presentation. The questions asked to participants were clearly formulated. The second facilitator asked whether participants had any question/ comment at the end of the session and clarified some points.

3. Ability to listen, engage, and include

The main facilitators focused on maintaining a good level of interaction with participants. One of the questions asked was not clear initially, but the facilitator repeated with a clearer language, which was appreciated by participants.

4. Coordination and management

The main facilitators gave acknowledgement to the other members of the team at the end of their presentation. The logistical facilitator appropriately supported the main facilitators along with the timekeeper who played a crucial role in notifying the other members of the team about the time remaining.

Overall feedback

The group did very well. The main facilitators managed to keep the room engaged despite being the last group to present before the lunch break. The presentation was very technical but had a very good flow, which greatly helped participants to remain focus on the presentation and to participate. The group also managed to finish on time.

GROUP 4

Competency

Feedback

1. Ability to keep up the momentum and energy

The main facilitators invited participants to participate in the icebreaker session “two truths and a lie” which helped participants to remain engaged despite this group being the last one to present. Both facilitators tried to keep the session very interactive and focus on the practical aspect of Hedayah’s framework for CBO workers operating in the Northeast.

2. Ability to facilitate participants’ learning process

The first facilitator set clear expectations for their presentation at the beginning of the session. Both facilitators invited participants who work on the reintegration of family members to share their experience to illustrate the corresponding type of intervention on the CVE Cycle. Both facilitators also reminded participants about content from previous trainings (e.g. the radicalization process is non-linear and is different for each individual) which increased knowledge retention.

3. Ability to listen, engage, and include

Both facilitators kept the session very interactive and made sure to give the floor to as many participants as possible to ensure diversity in the answers provided.

4. Coordination and management

The use of an icebreaker session at the beginning of the group’s presentation led the session to run slightly late.

Overall feedback

The group managed to keep participants engaged and alert despite being the last group of the day. Both facilitators had a great attitude and were very positive which created a friendly environment for learning.

Fig. 18| Competency analysis as captured by Hedayah during the simulation exercise for each group

DIRECT OBSERVATION AND PROFESSIONAL JUDGEMENT

In order to ensure that the participants perceived the knowledge and skills to be relevant and useful for their work, Hedayah used a participant feedback survey as a methodology to collect feedback and impressions. Similarly, to Phase 1, the survey included Likert-scale questions, as well as open-ended questions.

Below is the breakdown of the feedback results for the advanced level capacity-building training:

	Very Low	Low	Moderate	High	Very High
To what extent was the training relevant to your work?	-	-	-	27%	73%
Please indicate your level of satisfaction with the gaining of new knowledge.	-	-	-	15%	85%
Please indicate to what level the training addressed your needs and expectations.	-	-	16%	42%	42%
Please indicate how useful you found the training overall.	-	-	-	23%	77%
To what extent do you think this training will enhance the capacity of your organization?	-	-	-	12%	88%
Please indicate your level of satisfaction with the methods and pedagogical approaches of this training.	-	-	-	36%	64%

Fig. 19| Results (in percentage) of the participants' (26 respondents) Likert-scale ratings for 6 questions on the feedback survey

The above data show that the knowledge and skills gained were useful and relevant for practitioners, and that the participants intended to use these skills, thereby showing an initial indication of projected impact on the ground.

In addition, the feedback provided by participants in the open-ended questions also supported the findings from the Likert-scale questions. When asked, "Which session did you find to be the most useful for your work?" several participants indicated that they found the interactive exercise on developing project ideas particularly useful as many of them have

started or are planning to design and submit project proposals to international donors. Participants also found the sessions on advanced rehabilitation and reintegration techniques such as PSS, PFA and therapeutic communication useful and contextually relevant to their work with families. Participants also frequently provided positive feedback on how they would use the knowledge and skills going forward. One participant stated: "I hope to share the notion acquired with my co-workers and the society at large as well as communities to share the relevant knowledge gotten from Hedayah and Neem". On the impact of the training and the overall program on

their work with families, one practitioner noted “I want to say that the workshop was very impactful as it has broadened my horizons on certain aspects of engaging with families practically. I want to categorically state that from the previous training’s knowledge we have acquired, we were able to apply

it to funding opportunity in a project that deals with the issue of CVE, interfaith harmony, and marginalized youths.” Another participant wrote, “the training is a key to more success in our CVE works. It has explored a platform and partnership between fellow colleagues”.

For the ToT, the breakdown of the feedback results is the following:

	Very Low	Low	Moderate	High	Very High
To what extent was the training relevant to your work?	-	-	10%	15%	75%
Please indicate your level of satisfaction with the gaining of new knowledge.	-	-	-	15%	85%
Please indicate to what level the training addressed your needs and expectations.	-	-	5%	55%	40%
Please indicate how useful you found the training overall.	-	-	5%	16%	79%
To what extent do you think this training will enhance the capacity of your organization?	-	-	-	35%	65%
Please indicate your level of satisfaction with the methods and pedagogical approaches of this training.	-	-	5%	40%	55%

Fig. 20| Results (in percentage) of the participants’ (20 respondents) Likert-scale ratings for 6 questions on the feedback survey

As shown above, while 90% of participants rated the relevance of the training to their work as either “high” or “very high”, 100% reported that the extent to which the training enhanced the capacity of their organization was “high” or “very high”. This demonstrates the importance of adopting a ToT approach for practitioners in Northeast Nigeria so that they can effectively disseminate the program’s content to their peers and colleagues. As a result,

many practitioners expressed their commitment in the open-ended feedback to use the materials provided by Hedayah and Neem to conduct rollout trainings for practitioners in their localities and to submit proposals to international donors.



MM&E FIELD VISIT (MARCH 2022)

During March 8-10 2022, Hedayah in partnership with Neem Institute carried out a MM&E field visit in Damaturu¹⁹, Yobe State in order to gain further insights into the program's projected impact on the ground. As per Hedayah's MM&E framework, projected impact refers to the ultimate vision of the program, which in this case refers to family members increased resilience against RLVE and involvement of families and communities in CVE efforts. As per the program's ToC²⁰, this result can be assumed if there is evidence of practitioners' inclusion of Hedayah's materials in their work and/ or if there is evidence of any application of newly acquired CVE approaches. One such example may include behavioral changes, such as the introduction/application of pedagogies and/ or application of the program's content and tools on the ground.

In terms of methodology, Hedayah and Neem Institute conducted five focus group discussions (one per participating CBO) and distributed an anonymous survey to each of the 21 participating practitioners from the following organizations:

- ▶ AFRYDEF;
- ▶ AYOPAD;
- ▶ HI;
- ▶ NEYID; and
- ▶ T-CDI.

Overall, the activity confirmed the positive impact of the program on both CBO practitioners operating in the Northeast and the target population. For instance, participating CBOs indicated that the capacity-building activities equipped them with the appropriate skills, knowledge and tools to develop, implement and evaluate their own CVE interventions with families, survivors, returnees, former VEOs and affected community members.

“Besides Hedayah and Neem program, we at T-CDI have received trainings from INGOs on CVE related topics such as early recovery, managing conflict, mental health and PSS. However, the Hedayah and Neem program is very different and unique from the others because other training focused either on providing support to the family of former combatants or providing support to the survivors of terrorism, while Hedayah and Neem covered elements of both survivors and family support within the same program. In addition, the definition of what constitutes the family unit differs. Hedayah and Neem training defined family as friends, schoolteacher, religious and community leaders and any other person who have contact with the affected individual, while other trainings defined family as only father, mother, sisters, and brothers. In that sense, Hedayah and Neem program was clearer and broader”

“Hedayah and Neem trainings are clear, in-depth and cover a broad range of topics like reintegration and reconciliation mechanisms and components of program management and project management, while the training received from other international organizations covered only specific aspect of the CVE issue like PSS”

CBO practitioners also reported that they have been using and started disseminating the program's content and curriculum materials to peers, colleagues, volunteers and community members across the Northeast through rollout trainings and locally driven follow-up initiatives. These materials have also been translated to local languages such as Kanuri and Hausa.



“The materials received from Hedayah and Neem Institute have been incorporated by HOPE Interactive through step-down trainings for our staff and awareness raising and dialogue sessions in local communities. Some of the areas of focus during step-down trainings for staff are radicalization leading to violence extremism, aspect of reintegration and reconciliation, and PSS counselling”

In addition, many practitioners highlighted that the knowledge gained from the program helped them to access partnerships with donors and international organizations to increase the impact of their programs and ensure sustainability of their initiatives over the long-term.

“The trainings and curriculum materials received have been very useful, particularly for proposal preparation and development of theory of change for all programs. This applied knowledge has helped us securing partnerships with international organizations”

A list of success stories and indicative quotes from participants is provided in Annex C.

CONCLUSION OF PHASE 2

In conclusion, the analysis of the pre- and post-training knowledge-based questionnaires completed by participants to the advanced capacity-building training (February 2021) and the ToT (November 2021) showed an overall positive increase in understanding and knowledge of the program key learning points. In addition, the direct observation and professional judgement analysis conducted by Hedayah during both activities demonstrated participants' enhanced practical skills and operational capacity in collaborating and coordinating for the development of highly appropriate project plans as well as in disseminating the program's content and delivering presentations to their peers and colleagues in a simulation setting.

The analysis of participants' feedback through post-training surveys and direct contributions further highlighted that both activities were contextually relevant and appropriate for practitioners' work with the target population and that participants intend to disseminate the program's content and knowledge to practitioners working on CVE across communities in the Northeast. Finally, the findings from the MMSE field visit conducted during March 2022 demonstrated that most of the interviewed practitioners had started including some elements of the program curriculum in their daily activities with positive results, thus applying the knowledge and skills acquired and sharing the program's content with colleagues and relevant stakeholders across the Northeast.

As a result, it can be stated with reasonable confidence that most of the ToC conditions were satisfied with respect to the following specific objectives for Phase 2 of the program:

3. Enhancing recipients' knowledge and skills in supporting the continuation of rehabilitation and reintegration of survivors, returnees and former VEOs;
4. Enhancing recipients' theoretical and practical knowledge of the multi-stakeholder approach, as well as collaboration and coordination with other actors when working on CVE;
5. Establishing a pool of national trainers with the capacity to further disseminate the abovementioned knowledge and skills with other practitioners and relevant stakeholders.

Based on participants' feedback and Hedayah's internal evaluation, there were some lessons to be learned from Phase 2. Notably:

- ▶ Fostering cooperation and networking between CBOs operating in the Northeast to avoid duplication of efforts and mutualize capacities and resources through the implementation of joint projects in at-risk communities;
- ▶ Creating a long-term monitoring and mentorship mechanism to ensure participants are consistently applying the knowledge beyond the scope of the program;
- ▶ Raising participants awareness about other national and international CVE initiatives and activities implemented in the Northeast such as Operation Safe Corridor (OSC) and inviting representatives from these initiatives to the trainings;



- ▶ Increasing participants operational capacity to apply for grants, implement their own CVE projects and evaluating their projected and preliminary impact in at-risk communities; and
- ▶ Supporting and mentoring participants in delivering roll-out trainings to their peers and colleagues across the Northeast in order to appropriately disseminate the program's content and ensure sustainability and national ownership of the program over the long-term.

Hedayah and Neem Institute diligently took account of these points and aims to consider these points for potential future iterations of the program providing there are enough resources and funds available.



GENERAL CONCLUSION AND NEXT STEPS

This report provided key insights into the rationale and results of Hedayah and Neem Institute capacity-building program Supporting Families in CVE in Nigeria implemented between May 2019 and March 2022. As a result of this program, most of the participants (CBO practitioners and community leaders) enhanced their understanding and practical skills with regard to CVE and empowering families to ensure successful rehabilitation and reintegration of their members who are survivors, returnees and/or former VEOs.

As per the program ToC, it can be assumed that there is preliminary impact on the ground (i.e. family and community members increased resilience against RLVE and involvement such members in in CVE efforts to include the rehabilitation and reintegration of survivors, returnees and/or former VEOs) if the following conditions are fulfilled:

IF

Recipients enhance their knowledge and skills in restoring and increasing resilience of families and communities whose members are potentially vulnerable to or affected by, RLVE at different level

AND

Recipients enhance their knowledge and skills in engaging and involving such families and communities in CVE efforts targeting their vulnerable/radicalized members as well as the wider society

AND

Recipients enhance their knowledge and skills in supporting the rehabilitation and reintegration of survivors, returnees and/or former VEOs and their family members

AND

Recipients enhance their theoretical and practical knowledge of the multi-stakeholder approach, as well as collaboration and coordination with other actors when working on CVE

AND

A pool of national trainers is established with the capacity to further disseminate the abovementioned knowledge and skills with other practitioners and relevant stakeholders across Northeast Nigeria

THEN

Families and communities whose members are potentially vulnerable to or affected by RLVE will increase their resilience and be equipped to participate in CVE efforts for themselves and the wider society

AND

Survivors, returnees and/or former VEOs and their family members will be better supported during rehabilitation and reintegration;

BECAUSE

Survivors, returnees and/or former VEOs, their families, communities and the wider society will benefit from recipients' increased capacity in strengthening family and community members resilience against RLVE and positively involving such members in CVE efforts.

While the analysis of quantitative and qualitative indicators captured by Hedayah and Neem Institute throughout the implementation three capacity-building activities showed an overall positive increase in participants' knowledge and practical skills with respect to the curriculum learning points, the MM&E field visit conducted in March 2022 demonstrated that most participants consistently apply the acquired skills and knowledge in their daily activities with the target population. This impact on the ground was further captured in a series of videos produced by Hedayah in early 2022. As a matter of fact, testimonials from survivors - especially women - indicated that the content and knowledge applied has been successful in helping rehabilitation and community reintegration. In turn, it can be stated that most of the ToC conditions and program specific objectives were satisfied to include:

1. Enhance recipients' knowledge and skills in restoring and increasing resilience and providing support to families whose members are potentially vulnerable to or affected by RLVE at different levels;
2. Enhance recipients' knowledge and skills in engaging and involving such families in CVE efforts targeting their vulnerable/radicalized family members as well as the wider society.
3. Enhance recipients' knowledge and skills in supporting the continuation of rehabilitation and reintegration of survivors, returnees and former VEOs;
4. Enhance recipients' theoretical and practical knowledge of the multi-stakeholder approach, as well as collaboration and coordination with other actors when working on CVE; and

5. Establish a pool of national trainers with the capacity to further disseminate the abovementioned knowledge and skills with other practitioners and relevant stakeholders.

It can therefore be assumed with reasonable confidence that given the consistent application and dissemination of the skills and knowledge acquired by participants throughout the program, families and communities whose members are affected by RLVE will increase their resilience and be equipped to participate to the CVE efforts for themselves and the wider society in Northeast Nigeria.

In terms of next steps, Hedayah remains committed to work with national and international partners to support CBOs and community leaders of Nigeria in empowering and mobilizing families and communities in the whole-of-society CVE effort, including the rehabilitation and reintegration process of survivors, returnees and former VEOs.

As such, Hedayah deems necessary to provide additional knowledge and skills to CBO practitioners and community leaders on advanced rehabilitation and reintegration techniques. Additionally, Hedayah aims to support these practitioners in the design, implementation and evaluation of locally owned CVE programs and projects. Finally, Hedayah is committed to support and mentor program recipients in delivering roll-out trainings to their peers and colleagues across the Northeast in order to appropriately disseminate the program's content and ensure sustainability and national ownership of the program over the long-term.



ANNEXES

ANNEX A: DESCRIPTION OF RECIPIENT ORGANIZATIONS

AFRICAN YOUTH FOR PEACE DEVELOPMENT AND EMPOWERMENT FOUNDATION (AFRYDEF)

AFRYDEF promotes and supports sustainable youth empowerment and rural development initiatives in Northeast Nigeria. AFRYDEF is also involved in CVE through several activities such as women-led community awareness campaigns in Borno State, the creation of post-insurgency community dialogue platforms in Yobe State – and the establishment of community “peace building clubs” and “youth peace camps” in Yobe State.

ASSOCIATION OF YOUTH FOR PEACE & DEVELOPMENT (AYOPAD)

AYOPAD collaborates with communities of Northeast Nigeria to enhance self-reliance and resilience. AYOPAD organizes training programs to promote youth participation in conflict prevention. AYOPAD is involved in CVE activities through community awareness campaigns specifically targeting women and vulnerable individuals – and the establishment of community protection working groups in Yobe State.

CENTER FOR COMMUNITY DEVELOPMENT AND RESEARCH NETWORK (CCDRN)

CCDRN engages with community leaders from Borno State to enhance their skills and capacities to identify and resolve issues within communities as a preventive approach to violent extremism.

HOPE INTERACTIVE (HI)

HI is working directly with community members in Damaturu and Yobe states to implement capacity-building trainings on non-violent responses to conflicts, post-conflict reconstruction and rehabilitation. Hope Interactive is also involved in CVE activities at the local level through awareness raising activities and the establishment of youth and women platforms and networks for dialogue and peace building.

NEXUS SOCIAL CARE FOUNDATION (NSCF)

NSCF is working to address basic nutritional, social and psychological needs of communities in Northeast Nigeria. NSCF is also involved in CVE activities through awareness raising activities targeting students, family members and former VEOs.

NORTH EAST YOUTH INITIATIVE FOR DEVELOPMENT (NEYID)

NEYID supports families and communities of Yobe, Borno and Adamawa states through the provision of food security and livelihood opportunities. NEYID is also involved in CVE activities through the establishment of platforms promoting youth dialogue and the organization of sport and cultural activities for communities affected by violent extremism.

TAIMAKO COMMUNITY DEVELOPMENT INITIATIVE (T-CDI)

T-CDI primarily focuses on empowering rural communities in Northeast Nigeria. The organization is involved in CVE activities in Bauchi, Borno and Yobe States through the provision of trainings to improve communities' resilience to violent extremism and to harness youth potential in peace building and conflict management.



ANNEX B: SUMMARY OF PROJECT PLAN PRESENTED BY PARTICIPANTS DURING SESSION 19 OF THE ADVANCED LEVEL CAPACITY- BUILDING TRAINING (FEBRUARY 2021)

PROJECT 1	
Title	Strengthening Responsible Early Warning Systems in Local Government Areas (LGA) in Yobe State
Identified problem	The lack of effective early warning and information sharing systems between community members, civil society practitioners and local government stakeholders in Yobe State.
Overarching goal	Disrupt entry points for BH and ISWAP sympathizers through enhancing early warning systems across LGAs in Yobe State.
Summary of activities	<ul style="list-style-type: none"> ▶ The program consists of a three-weeks training to build the capacity of existing early warning systems in twelve communities across Yobe State. ▶ Participants to the training would represent all categories in the communities to include youth, women, farmers, religious leaders, and traditional leaders. ▶ The content of the training would focus on enhancing coordination and information sharing among different stakeholders from the community as well as on better equipping community stakeholders so they can intervene before an issue escalate. The training would also enhance participant knowledge and skills on RLVE, including counter narratives.
Objectives of the activities	<ul style="list-style-type: none"> ▶ Enhancing community members knowledge and skills to appropriately support and be part of early warning systems at the local level; ▶ Strengthening trust building for information sharing between community members, civil society practitioners and local government stakeholders.

Indicators

- ▶ Strengthened early warning systems;
- ▶ Number of interactions between community members, civil society practitioners and local government

Data collection methods

Pre- and post-workshop knowledge surveys after each activity.

PROJECT 2

Title

Rehabilitation and Reintegration of BH Defectors and their Family Members in Borno State

Identified problem

The stigmatization of BH survivors, repentant and their families by highly traumatized community members has undermined the rehabilitation and reintegration of these individuals across Borno State.

Overarching goal

Ensure the effective rehabilitation and reintegration of BH survivors, defectors and their families across Borno State.

Summary of activities

- ▶ The program consists of a series of capacity-building and awareness raising workshops to enhance community members' understanding of the importance of rehabilitating and reintegrating BH survivors, defectors and their family members.
- ▶ The workshop also aims to equip community members, BH survivors, repentant and their families with the skills necessary to cope with trauma and to be fully involved in the design of community resilience structures to resolve conflict and share grievances at the local level.

Objectives of the activities

- ▶ Reducing community stigmatization of BH survivors, defectors and their family members;
- ▶ Enhancing community members, BH survivors, repentant and their family members resilience against trauma;

Objectives of the activities

- ▶ Strengthening community member's ability to be a part of the rehabilitation and reintegration process of BH victims, repentant and their family members;
- ▶ Strengthening community resilience mechanisms to resolve conflict and share grievances.

Indicators

- ▶ Number of BH survivors and repentant accepted back into the community;
- ▶ Number of family members accepted back into the community;
- ▶ Number of BH survivors, repentant and their family members who received appropriate psychosocial support;
- ▶ Number of community resilience mechanisms developed and/or enhanced.

Data collection methods

- ▶ Pre and post workshop knowledge surveys after each activity;
- ▶ Sign in and feedback sheets.

PROJECT 3

Title

Strengthening Community Resilience and Reintegration of BH Returnees and Survivors Through Dialogue

Identified problem

The sense of injustice within communities impacted by the BH insurgency in Northeast Nigeria has undermined trust and reconciliation with families of BH combatants as well as with repentant and victims of abduction. This fear has led to the stigmatization of these categories of individuals.

Overarching goal

Address the stigma and ensure the reintegration of BH returnees and survivors within their communities.

Summary of activities

The program consists of a series of capacity-building and dialogue workshop to identify the grievances of various community stakeholders to include women, youth and traditional leaders – and to strengthen existing community mechanisms for trauma healing, peacebuilding and social cohesion such as cultural activities (dance, drama etc.)

Objectives of the activities

- ▶ Promoting social inclusion of BH returnees, survivors and their family members through cultural dialogue activities;
 - ▶ Supporting trauma healing of families and returnees through PSS;
 - ▶ Strengthening community engagement for peacebuilding, trauma healing and social cohesion through capacity-building for community stakeholders.
-

Indicators

- ▶ Number of sessions conducted with women, youth, religious leaders and relevant stakeholders to identify grievances;
 - ▶ Number of PSS sessions conducted with the target population;
 - ▶ Number of community mechanism for peacebuilding, trauma healing and social cohesion appropriately supported.
-

Data collection methods

Attendance sheets and reports.

PROJECT 4

Title

Strengthening the Resilience of Community Members During Early Recovery of Former Violent Extremist in Yobe State

Identified problem

The majority of community members in Yobe State do to not welcome the reintegration of BH repentants. As such, there is a need to support community members and to remove psychological barriers to the reintegration process of BH repentants.

Overarching goal

Strengthen community acceptance mechanism for the reintegration of BH repentants and enhance the social cohesion within at risk communities in Yobe State.

Summary of activities

- ▶ The program consists of town hall activities to obtain critical information on the challenges faced by communities when it comes to the reintegration of BH repentants.
 - ▶ The program would then feature a series of awareness raising and dialogue workshops for community members to discuss trauma healing and being sensitized to the importance of being agents of change and participate to the reintegration process of BH repentants.
 - ▶ The program would also include a socio-economic component to strengthen social cohesion.
-

Objectives of the activities

- ▶ Raising awareness of community members on the importance of supporting the reintegration process of BH repentants;
 - ▶ Enhancing community members ability to become agents of change for the reintegration of BH repentants;
 - ▶ Improving community resilience through the creation of locally driven socio-economic initiatives.
-

Indicators

- ▶ Number of community members engaged in peacebuilding and reintegration initiatives as agents of change;
 - ▶ Number of town hall activities conducted to obtain information on challenges for reintegration;
 - ▶ Number of awareness raising and dialogue workshops conducted.
-

Data collection methods

- ▶ Pre- and post-workshop knowledge surveys after each activity;
 - ▶ Feedback mechanisms in order to measure the impact of these sessions.
-

PROJECT 5

Title

Community Acceptance and Youth Resilience

Identified problem

The increasing number of BH returnees who are being stigmatized by their communities.

Overarching goal

Ensure that BH returnees and community members are given adequate PSS to strengthen the reintegration process and prevent community stigmatization.

Summary of activities

The program consists in organizing a series of dialogue sessions between communities, survivors and returnees to enhance social cohesion and community acceptance. In addition, these categories will receive psychosocial support and counseling sessions from CBO practitioners. Finally, the CBO will ensure effective coordination between actors at the local level to include local government authorities and security sector stakeholders.

Objectives of the activities

- ▶ Ensure effective dialogue is supported between communities, survivors and returnees;
- ▶ Ensure the returnees and communities are given adequate psychosocial support;
- ▶ Create awareness of relevant stakeholders and local security actors.

Indicators

- ▶ Number of dialogue sessions held with community members and returnees
- ▶ Number of community members, survivors and returnees receiving psychosocial support and counseling sessions;
- ▶ Number of coordination meeting held with local stakeholders to include local government authorities and security sector stakeholders.

Data collection methods

Attendance sheets and reports.

ANNEX C: INDICATIVE QUOTES AND SUCCESS STORIES AS HIGHLIGHTED BY PARTICIPANTS DURING THE MM&E FIELD VISIT (MARCH 2022)

“I can share the story of a woman I met while conducting research in a community in Yobe State. She managed to survive and escape from captivity of BH and her testimony was devastating and heart touching. She told us how her mother was killed by her side as they were trying to escape BH when Chibok LGA in Borno State was invaded by BH. She carried her mother and sought for first aid, but BH combatants outran them and murdered her mother before her eyes. She told us that soon after this dramatic event, she started to have trouble sleeping despite the use of different kind of drugs. In addition, she was feeling isolated and stigmatized by community members who associated her with BH. After we established contact with her and evaluated her needs, we supported her through sessions on PSS and trauma healing. As a result, she started to feel better, and this was reflected in better sleep habits as well as in her positive interaction with other community members. The community members also came to realize that the woman was not a violent extremism sympathizer, and that she was enrolled by force”

“There was a survivor we interacted with, in Yobe State. He was a middle-aged man who was highly traumatized due to the trauma she had gone through. His mother and siblings were killed by the BH insurgents, and his family house was burnt to ashes. In addition, he was forcefully taken by the insurgents and was forced to pick up arms against his will. Using the knowledge from Hedayah and Neem training, we used appropriate interviewing techniques and were mindful of not using accusatory questions such as “why?” while interacting with him. This created a good environment for trust building. Now, we are planning to go back to the community in order to meet him and conduct follow-up trust building activities with him but

also to involve the town’s traditional ruler as well as a local religious leader who reported that the survivor made considerable progress after our intervention”

“Just last week we helped a survivor who escaped from BH captivity and returned to her community in Yobe State. When she returned, she went to her family but was stigmatized and rejected. Our volunteer reached out and we quickly intervened. We had some rigorous trust building and reconciliation sessions with the family as we normally do with family of survivors, although this case was more sensitive and complicated. We had about eight sessions with the family. We successfully convinced the family to accept her back. In parallel, we supported her to recover from anxiety and psychological issues she was battling with. In our follow up session, she confirms to us that she is fully recovered from the trauma she was facing”

“The survivor was abducted from his community by BH. During his captivity, he was forced to participate in the group criminal activities. He was then rescued by the military intersection around 2013 and was taken to the Niger Republic to be rehabilitated before being transferred back to Nigeria and handed to the Nigerian military and escorted back to his community. The survivor told me that before being captured by BH, he used to love football. Now, he hates football and isolate from his community. Our intervention focused on helping him recover from the trauma he has been through and develop interest in what he used to love. Since our first intervention, the survivor has made a lot of progress and we are now trying to organize follow up activities to reassess his situation and adjust our intervention”

“There is one woman from a community in Damaturu State who came back from BH captivity, she returned home but she was rejected by her family and community and was forced to stay away from them. The family and community members were stigmatizing her because she had a child while in captivity and was infected with HIV. Before we met her, she felt isolated because of stigmatization from her family. We went to the community and consulted with her and her family during several counseling sessions. After some time, we saw a positive dynamic and we were able to reconcile and to reintegrate her back to the family. The only challenge that she and her family are now facing is related to a lack of income and livelihood”

“In a community, Yobe State, community members refused to accept a female survivor and stigmatized her. When we heard about her situation, we intervened by meeting with the community, traditional and religious leaders in order to find a common ground for reconciliation. After several sessions, the community members accepted the woman back. Presently the woman has gotten married and is doing well. We also received financial and material support from community members for the woman and her household”

“In a community in Yobe State, a ten-year-old boy who was kidnapped by BH returned and was stigmatized by community members. Through our intervention and collaboration with the Ministry of Youth, National Agency for the Prohibition of Trafficking in Persons (NAPTIP), and State Emergency Management Agency (SEM) the boy is back to school, he is in primary 4 now”

“I met with a woman who was married to a BH member but when she decided to escape and go back to her community, her family and parents refused to accept her. A community member referred the case to my organization. We went and talked with the parents who said that she was a BH member for two years and that they were not ready to accept her back. It was clear that the woman had been through a lot of stress and was deeply affected by her family’s rejection. She told me that her aunt tried to convince her father to accept her back but her father categorically refused and even refused to allow her aunt to come back to the house. I established contact with the aunt who was ready to give up but I tried to tell her that by working together, we could achieve a positive outcome by joining our efforts. When the aunt and I met with the family, we had thorough discussions and the father was eventually keen to accept her only if she avoid contact with the other children so as not to corrupt them. After some time, we visited her to ensure that she is doing fine. She has now resumed school and is well accepted by all family members”



ENDNOTES

1 For more information on Hedayah’s MM&E framework, please refer to the Hedayah publication: C. Mattei and S. Zeiger (2018) “Evaluate Your CVE Results: Projecting Your Impact” available at: <https://hedayah.com/app/uploads/2021/09/File-16720189339.pdf>.

2 See the Needs Assessment (Phase 1) section of this report for more information on OSC.

3 A brief description of each organization can be found in Annex A of this report.

4 See the Executive Summary section of this report for more information on the program specific objectives.

The CVE-Cycle infographic can be consulted at: <https://hedayah.com/app/uploads/2021/09/File-1712019121944.pdf>. Please also refer to the Hedayah publication: C. Mattei (2019) “The CVE Cycle: An Individual Trajectory” available at: <https://hedayah.com/app/uploads/2021/09/File-171201910950.pdf>.

6 Trauma is a normal emotional response to a terrible event, while PTSD is a mental health disorder that can develop in some individuals who have experienced trauma. Not all traumatic events lead to the development of PTSD. After a traumatic event, some people will experience symptoms severe enough to lead to diagnosis of PTSD, while others will experience only some symptoms, and others will experience none at all. Without effective treatment, PTSD can be a long-term disorder that may worsen over time.

7 The Shapiro-Wilk test was employed to test whether the data was normally distributed. In this regard, the test found a W -score of 0.9529 and p -value of 0.3122. Since the p -value is larger than the significance level ($\alpha = 0.05$), we could confidently accept the null hypothesis (H_0) of “the sample data is normally distributed”, and reject the alternative hypothesis (H_a): “the sample data is not normally distributed”.

8 See Executive Summary section of this report for more information on the program's ToC.

9 Considering the COVID-19 pandemic context at the moment of implementation, the training was held in a hybrid format with participants and Neem Institute facilitators joining in person from Abuja and Hedayah facilitators joining from Abu Dhabi, UAE.

10 See Executive Summary section of this report for more information on the program specific objectives.

11 The LIVE Model was co-developed by Joseph Gyte and Dr. Abiye Iruayenama.

12 Considering the COVID-19 pandemic context at the moment of implementation, the activity was held in a hybrid format with participants and Neem Institute facilitators joining in person from Abuja and Hedayah facilitators joining remotely via videoconferencing from Abu Dhabi, UAE.

13 See Executive Summary section of this report for more information on the program specific objectives.

14 For more information on Hedayah's MM&E framework, please refer to the Hedayah publication: C. Mattei and S. Zeiger (2018) "Evaluate Your CVE Results: Projecting Your Impact" available at: <https://hedayah.com/app/uploads/2021/09/File-16720189339.pdf>.

15 Descriptions of competencies 1 to 3 were taken from Trainer Skills Checklist (2018), Michigan's Integrated Behavior and Learning Support Initiative (MIBLSI) available at: https://mimtsstac.org/sites/default/files/Documents/Presentations/14th%20Annual%20State%20Conf/Day%201/1a/04_Trainer_Skills_Checklist.pdf.

16 Refer to the MM&E (Phase 1) section of this report for more information on each methodology.

17 Due to the limited statistical sample available, inferential statistics were not conducted for the advanced-level capacity-building training in order to limit bias in the analysis.

- 18 A summary of the different projects can be found in Annex B of this report.
- 19 Damaturu was selected to ensure participants', Neem and Hedayah staff safety as well as due to its proximity with the majority of the program recipient organizations headquarters.
- 20 See Executive Summary section of this report for more information on the program's ToC.





Hedayah

Countering Extremism
& Violent Extremism

