

**STAKEHOLDER ENGAGEMENT PLAN**

**FOR**

**PILOTING SOCIAL PROTECTION AND WASH INTERVENTIONS TO KEEP ADOLESCENT GIRLS IN SCHOOL IN ZIMBABWE**

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**Acronyms**

BEAM Basic Education Assistance Module

CIZ:: Care International in Zimbabwe

CSC : Community Selection Committee

CTP Cash Transfer Program

DSI: District Schools Inspector

DRT: District Remedial Tutor

IGAs: Income generating Activities

MoPSE: Ministry of Primary and Secondary Education

MPSLSW Ministry Of Public Service Labor and Social Welfare

SHEA: Sexual Harassment, Exploitation and Abuse

SEP Stakeholder Engagement Plan

WASH: Water, Sanitation and Hygiene

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# 1.0 Introduction/Project Description

The project aims to test an innovative pilot activity, layering Social Protection and WASH interventions targeting adolescent girls who have been disproportionately affected by coping mechanisms adopted during lockdown, to support their return to school after the several waves of school closure in Zimbabwe. This pilot will directly inform the future policies and programming of the Ministry of Public Service, Labor and Social Welfare (MPSLSW) and other relevant ministries and strengthen their capacities. The pilot will be directly layered over Government’s Basic Education Assistance Module (BEAM) fee waiver program to test whether complementary social protection and WASH interventions are successful in bringing adolescent girls back to school and incentivizing them to stay in school. It will therefore test the effectiveness of complementary measures to the national BEAM program, beyond the fee waiver for vulnerable children, by focusing on gender dimensions and targeting vulnerable adolescent girls within the BEAM caseload. Specifically, the pilot will provide household and school level social protection and WASH support that aim to mitigate negative coping mechanisms that affect adolescent girls, improve access to WASH and menstrual hygiene management, and sensitize households and schools on gender dynamics, GBV, amongst others. The pilot will be overseen jointly with MPSLSW and relevant ministries and knowledge generation and policy dialogue will be undertaken on the findings and recommendations from the pilot towards strengthening government capacity. The pilot will be implemented in Buhera district by Care International Zimbabwe (CIZ), while the process evaluation will be carried out by a third party. The pilot is comprised of two components:

**Component 1**: Household-level Interventions- Cash transfer, Income Generating Activities (IGA), hygiene promotion and menstrual hygiene products: This component will pilot test complementary measures to the BEAM fee waiver, and will help 1,500 households in Buhera District, thereby discouraging negative coping strategies that impact adolescent girls and their education, such as preventing girls from returning to school.

**Component 2**: School-level Interventions- Sensitization, Capacity Building and WASH Promotion: This component will work closely with public secondary schools receiving BEAM support to test the promotion of positive gender norms, sexual and reproductive health messaging, good hygiene and menstrual hygiene management including raising awareness among adolescent girls.

The project is in its early design stages and the following input is sought from stakeholders, particularly MPSLSW and the community:

* A multi-stakeholder and participatory approach will be adopted to enable finetuning of the selection criteria for households. Input from MPSLSW, schools and the community will be vital to finalizing the selection criteria and process for the project. The project will target households with adolescent girls who are part of the BEAM program, but further selection criteria will need to be identified to obtain a final group of 1,500 participating households.
* Payment system for cash transfers and IGA grants. Stakeholders will be engaged on the most effective and appropriate payment system to be employed by the project to pay cash transfers and income generating activity grants to the 1,500 participating households. Logistical and cost implications will also be considered for this decision.
* Household-based WASH support. Component 1 of the project includes the provision of support for WASH management to the participating households based on identified needs and gaps.
* Timing and content of the project Sensitization, hygiene promotion and Capacity Building Meetings. Once participating households and schools have been identified, the project will work closely with them to identify appropriate times and locations for the Sensitization and Capacity Building Meetings. They will also be engaged to contextualize the content of these meetings to ensure that they are useful, acceptable and speak to the context of Buhera district.

## **1.1 Project location**

The project will be implemented in Buhera, a rural district of Manicaland Province in Zimbabwe. it is about 170 km southwest of Mutare which is the provincial capital of Manicaland. It is situated between latitude 19degres 19 South and altitude 31degrees 32 East at an altitude of 1190m. There are three designated urban centres namely Murambinda growth point, Buhera growth point and Birchenough bridge growth point. According to the 2012 census, the district is estimated to have a population of 245,878 people[.](https://web.archive.org/web/20170110192409/http://www.zimstat.co.zw/sites/default/files/img/National_Report.pdf) (With 46,4% being males and 53,6 being females). The district’s local economy mainly depends on subsistence farming and the main crops include maize, millet, roundnuts and groundnuts. Cattle ranching is also practiced for economic reasons albeit at subsistence level. Although a majority of people rely on informal petty trading for a living, the largest employer in the district is the Dorowa Minerals, a phosphate mine, which employs 300 people. The district also boasts of a total of 143 primary schools and 73 high schools including two notable schools namely Nyashanu and Makumbe Mission high schools. The literacy rate for the district stands at 95% whilst a significant number (5%) have never attended school. Christianity and traditional practices are predominant in the district with a significant proportion of the population belonging to apostolic sects (such as Johanne Marange, African Apostolic, Zion, *Jekenishini*).

## **1.2 Physiography**

The highest mountain in Buhera is the Maremare Mountain near Mutiusinazita service Centre in Buhera South. Buhera district has a generally flat terrain but has poor road networks mainly dusty rocky granite and under serviced gravel roads thus posing accessibility challenges amongst its populace to essential services such as health, education, and urban growth points. The district which is mainly rural in nature lies between the save valley(river) from the north to the south-east and the Devure-nyazvidzi river on the southwestern side. Most of the vegetation has been cut down for communal cultivation purposes while the hills and stream banks have retained some substantial amount of vegetation.

## **1.3** **Climate -vegetation, seasonal climatic weather**

The district is characterized by unreliable rainfall and is classified under agro-ecological region 3,4 and 5(dry farming regions) with an average annual rainfall precipitation rate of 780mm and average highest temperatures of 30 degrees in summer and lowest of 8 degrees in winter. Despite having fertile soils under irrigation to complement meagre farm harvests, the semi-arid agro climate and erratic rainfall results in water scarcity and has a potential of contributing to poor rural livelihoods. While Buhera District boasts of one of the largest man-made dams in Zimbabwe called the Marovanyati dam with a capacity of 50 million cubic metres, which is considered adequate to irrigate the whole district and is a potential tourist site, it is however sad to note that over the years the schemes have deteriorated to a sorry state due to neglect and the dam water flows to waste downstream without being harnessed. During the dry season (which usually extends from May to October) each year, most livelihood activities are characterized by gardening activities at nearby boreholes, vleis or wetlands. The gardens are normally watered by women who constitute most of the rural population whilst men spend their time herding cattle and rearing livestock. The major source of drinking water is from ground water, and it is mainly characterized by high turbidity levels thus always contaminated by pathogens and hence likely to cause water borne diseases like typhoid and cholera.

## **1.4 Natural hazards -vulnerability to natural disasters and adverse weather conditions**

Droughts and erratic rainfall are the major climatic hazards that often affect Buhera district and over the years the district has not been spared from disasters such as Cholera, Cyclones and recently the covid 19 pandemic. In recent years (dating back to 2018), Buhera district’s resilience has declined, succumbing to one of the worst El-Nino induced droughts which impacted heavily on crop and livestock production (main livelihood sources). Buhera district’s vulnerability to climatic disasters was exacerbated in the following year (2019) where the District struggled to adequately bounce back from the direct and indirect effects of cyclone Idai which affected and collapsed households, WASH, schools and road infrastructure, saw a significant drop in crop harvests and pushed most households to deep poverty levels by destroying and washing away major sources of livelihood such as gardens, irrigation plots and small livestock. The year 2020 could not spare the district and since March 2020 when Covid 19 was declared a natural disaster ,Buhera district has been grappling with the Covid 19 pandemic and as the virus continues to evolve, the effects of the pandemic has impacted on household food security, livelihoods and has also greatly affected the education sector resulting in closure of schools and reports of one of the highest dropout rates where a total of 96 female “O” level learners and 49 boys dropped out for reasons of marriage and joining the job market. (https://www.herald.co.zw/400-drop-out-over-pregnancies-illness/)

## **1.5 Map 1: Wards and villages targeted by the project**

* 1. *source: https://scontent.fhre2-1.fna.fbcdn.net/v/t1.6435-9*

## **1.6 Summary of Potential Social and Environmental Risks and Impacts**

Potential environmental and social impacts of the project, which may need to be paid particular attention to as part of the stakeholder engagement activities, include:

**Component 1**

* **Increased risk of household GBV incidents:** There is a potential of GBV conflicts over prioritization and procurement of domestic food, sanitary ware including menstrual hygiene management materials. If GBV incidents occur and root causes not investigated, high risk of recurrence and unintended consequences. However, global evidence suggests that cash transfers are generally associated with a reduction in GBV within the household.
* **Project misinformation:** If project goals are not clearly explained there is a risk of political misconception and misinformation about the project goals.
* **Fraud and Corruption**: If risk control measures are not transparent, there is a likelihood of fraud from project field staff. SHEA (sexual harassment, exploitation and Abuse) of community members: Possibility of discrimination based on race, ethnicity, disability, age, sexual harassment, exploitation and abuse of female community members by their intimate partners and project workers to influence enrolment into the cash transfer intervention.
* **Complaints/Grievance mechanism**: lack of provision of adequate and effective complaints and grievance mechanism and platform may increase risk of internal and external cash transfer component abuse
* **Environmental pollution**: Improper disposal of IGA materials and menstrual hygiene products disposal may contaminate and pollute the environment.

# 2.0 Purpose and objectives of SEP

This pilot project is being prepared under the World Bank’s Environment and Social Framework (ESF). As per the Environmental and Social Standard ESS 10 Stakeholders Engagement and Information Disclosure, the implementing agencies should provide stakeholders with timely, relevant, understandable and accessible information, and consult with them in a culturally appropriate manner, which is free of manipulation, interference, coercion, discrimination and intimidation.

The overall objective of this SEP is to define a program for stakeholder engagement, including public information disclosure and consultation, throughout the entire Project cycle. The SEP outlines the ways in which the Project team will communicate with stakeholders and includes a mechanism by which people can raise concerns, provide feedback, or make complaints about Project and any activities related to the Project. The involvement of the local population is essential to the success of the Project to ensure smooth collaboration between Project staff and local communities and to minimize and mitigate environmental and social risks related to the proposed Project activities.

## **2.1 Brief Summary of Previous Stakeholder Engagement Activities**

The project held consultative meetings with Buhera district social services department head (District Social development officer) confirming availability of updated data on secondary school BEAM participants. A separate meeting with Buhera district disability network organization Chairperson (Mr. Mangwiro) confirmed the organization’s active participation in selection of BEAM beneficiaries and the chairperson shared data on the number of disabled BEAM participants in the district. The project also held formal meetings with the Buhera District Remedial Tutor (DRT) where information on selection criteria, number of secondary school participants disaggregated by sex, age and disability and number of schools on BEAM was also shared. A formal meeting was also held with the District Schools inspector (DSI) where the BEAM budget for 2021 was shared indicating that the funds were insufficient compared to the requirements on the ground.

The project leveraged the existing relationships between the START for girls project and MoPSE to gather data on the vulnerability status of the learners during the covid 19 waves of closure

# 2.2 Stakeholder identification and analysis

### **2.2.1 Project affected Parties**

For the purposes of effective and tailored engagement, stakeholders of the proposed project can be divided into the following Three (3) categories:

* Affected Parties – persons, groups and other entities within the Project Area of Influence (PAI) that are directly influenced (actually or potentially) by the project and/or have been identified as most susceptible to change associated with the project, and who need to be closely engaged in identifying impacts and their significance, as well as in decision-making on mitigation and management measures;
* Other Interested Parties – individuals/groups/entities that may not experience direct impacts from the Project but who consider or perceive their interests as being affected by the project and/or who could affect the project and the process of its implementation in some way; and
* Vulnerable Groups[[1]](#footnote-2) – persons who may be disproportionately impacted or further disadvantaged by the project(s) as compared with any other groups due to their vulnerable status, and that may require special engagement efforts to ensure their equal representation in the consultation and decision-making process associated with the project.

The groups are discussed in detail in the coming subsections.

The project identified two levels of stakeholders: national-level stakeholders and community-level stakeholders. At the national level, the key stakeholder will be MPSLSW, particularly the BEAM team, as they will provide oversight of the pilot. The pilot’s results are extremely relevant as they will provide vital experience and evidence to better inform program-level and strategic decisions on BEAM and social protection more broadly. This will also include district and province-level BEAM and MPSLSW staff involved in day-to-day program implementation. The following community-level stakeholders were identified:

Table 1: Project affected Parties

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Stakeholder** | **Description** | **Issues** | **Significance Level** |
| Adolescent Girls | -Adolescent girls in the BEAM program  -Adolescent girls who are not in the BEAM program but attend BEAM schools  -Adolescent girls in Buhera district | Adolescent girls have faced multiple waves of school closures with limited access to remote learning opportunities, which makes them increasingly vulnerable to dropping out of school. During COVID as well as previous shocks like cyclone Idai, adolescent girls have also been disproportionately affected by negative coping mechanisms such as reduced nutrition, early marriage and increased responsibilities in the household.  Though adolescent girls in the BEAM program will be the primary target of the pilot project, non- BEAM girls who attend BEAM schools will also benefit from WASH and sensitization and capacity building activities at their schools. Further, other adolescent girls may have an interest in the pilot project and may benefit from the spillover effects of activities taking place in their communities. | High |
| Adolescent Boys | -Adolescent boys in BEAM schools  -Adolescent boys in Buhera district | Adolescent boys have also been affected by multiple waves of school closure with limited access to remote learning opportunities, also impacting their ability to complete secondary education. Economic pressures to support their households as a result of multiple shocks will also affect the education and wellbeing of adolescent boys. The participation of adolescent boys will be essential to creating behavior change through sensitization and capacity building, particularly on issues on gender dynamics and GBV.  Adolescent boys in BEAM schools will benefit from WASH and sensitization and capacity building activities while other adolescent boys may benefit from spillover effects of activities carried out in their community. | Medium |
| Parents/Guardians and household members of Adolescent Girls | -Parents of BEAM adolescent girls | Parents and households of adolescent girls have faced multiple shocks, further exacerbating high poverty levels in Buhera. The pilot project aims at alleviating increased stresses in the households to support both the adolescent girls and their households so that education and wellbeing are prioritized. Parents will benefit from cash transfers, IGA grants, WASH supports and sensitization and capacity building activities aimed at promoting positive parenting, financial literacy and gender awareness. | High |
| BEAM School Staff | -BEAM school teachers  -BEAM school staff | Schools have faced challenges as a result of school closures and COVID-19. This is coupled with a pre-existing lack of functional WASH and menstrual hygiene management infrastructure and systems that affects adolescent girls’ performance and attendance, but also poses a risk due to COVID. BEAM school staff also face challenges around capacity and resources, despite support from BEAM (which can often be in arrears). | High |
| BEAM Community Selection Committees (CSC) | Committee that participates in the selection of BEAM beneficiaries | As a vital stakeholder in BEAM, the CSC may have interest in participating in the pilot’s stakeholder engagement, particularly around the selection of beneficiary households and schools. | Medium |
| Local leadership | Local leadership at the county or community level | Local leadership will be interested in participating in stakeholder engagement to understand the purpose of the intervention. Securing buy-in from key local leadership may be critical to supporting dissemination of information and the successful implementation of the pilot | Medium |
|  | Non-participating households and their children | These households may be positively impacted if the social protection and WASH interventions spillover beyond schools and households to the community. Activities such as sensitization and capacity building are particularly prone to spillover as the awareness raised among participants may spread to the rest of the community. However, it is also possible that these households may perceive a negative impact as a result of not being selected to participate in the pilot. | Medium |
|  | Non-participating school staff | They may be positively impacted if the capacity and knowledge generated among pilot school staff spills over to other schools. However, it is also possible that they perceive a negative impact as a result of not participating in the pilot | Medium |
|  | Local-level MPSLSW and BEAM officers | Positively impacted as their participation in this pilot will provide experience and build their capacity on social protection and WASH interventions. Findings and recommendations from the pilot will also provide lessons learned and evidence that can help guide their future work and better understand how to sustainably support BEAM beneficiaries. | Medium |

## **2.3 Other interested parties**

This section identifies relevant and influential stakeholders who may be interested in the project as community gate keepers who are influential in authorization of project rollout and may be influential in community acceptance of the interventions. The identified stakeholders may not be directly influential in its day to day implementation but by virtue of their broader mandates may be critical for social mobilization and support from government, civil society and community leadership. The table below shows a breakdown of these interested parties.

Table 2: Project other interested parties

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Stakeholder** | **Description** | **Interest in the project** | **Significance Level** |
| District Development Coordinator | DDC office is local governance and coordinating arm | The DDC office coordinates all community development activities and may be interested in knowing the goal, contents of the project, target beneficiaries and selection criteria. | medium |
| The Buhera Rural District Council | The rural local authority | The local authority which owns most of the secondary schools and may be interested in information about BEAM activities in its schools. | Medium |
| Ministry of health and Child Care | Technical Covid 19, WASH and Public health and hygiene promotion experts | Provision of technical guidance sensitization and public health promotion. on Covid 19, Water and Sanitation and health and hygiene promotion. | Medium |
| Ministry of Women Affairs, Community development, Small and Medium Enterprise | Technical guidance in proposal business idea generation, proposal development and community business enterprise management | Economic empowerment of women through participation in income generating activities | Medium |
| Press and media | The local information and news dissemination platform | The local press and media are responsible for disseminating news to the local populace and in this case may also play an active role in influencing community perceptions about gender dynamics affecting girls learning during covid 19 | Medium |
| General Public | This is the target group comprised of Parents ,Girls ,Boys and the disabled | They constitute the duty bearers as Parents and Guardians responsible for supporting readmission of girls to school and supporting their gendered needs for learning to ensure girls schools retention and completion. Girls are the rights holders who have the right to demand support in continued education. | Medium |
| Non governmental organization | The civic society of education partners (Non governmental organisations) | The civic society are working with the girl learners in and out of school and may be implementing in the same project area thus may be interested in avoiding duplication and double enrolment of project participants. | Medium |

# 2.4 Disadvantaged / vulnerable individuals or groups

This section seeks to describe the project impacts and how they may disproportionately affect the disadvantaged and vulnerable groups such as Adolescent girls, people with disabilities and extremely poor households in Buhera district. The section outlines the social inclusive approaches that will incorporate the voices , views of these marginalized and vulnerable groups and enable their meaningful participation The table below summarises the potential limitations faced by vulnerable groups and the project support approaches.

Table 3: Limitations & project support mechanisms for disadvantaged/vulnerable individuals/group

|  |  |  |  |
| --- | --- | --- | --- |
| **Vulnerable Group** | **Number and Location** | **Limitations to participation in/consultation with the Project** | **Additional support/resources to be made available** |
| Girls (in and out of school) | 1500 | Access to transportation may also be a challenge. Adolescent girls may be unable to fully participate in project activities due to competing responsibilities and lack of time availability. They may also be constrained by lack of support from their household or other groups who hold influence and power over adolescent girls. It may also be unsafe for them to travel to participate in consultation activities. Further, women and girls may feel uncomfortable being open around men and the community at large. | To ensure that vulnerable stakeholders are able to participate, consultation activities will take place at a time that is convenient for most participants with particular consideration being given to vulnerable groups. The venues for events must be easily accessible for vulnerable groups, including people with disabilities, and must allow for the observation of COVID-19 protocols. To help vulnerable groups feel more comfortable, small and focused meetings will be organized targeted specifically at key vulnerable groups and their guardians. Further, prior to these activities, awareness of the pilot and the important of participating in stakeholder consultation will be raised in the communities to encourage the participation of adolescent girls in particular the disabled. |
| Disabled girls and young women |  | People with disabilities may lack access to transportation and face security concerns when traveling to consultation activities.  Lack expert of communicators/interpreters may limit communication and participation of the disabled | Public consultation is normally conducted during day time from 9am to 4pm.The disabled need to be visited and consulted at household level as most are usually invisible in public places for a number of reasons including mobility challenges, lack of access to assistive devices like wheel chairs, hearing aids and absence of (lack of relative willing) to accompany them to events venues. CARE conducted a mapping exercise for disability representative organisations and engaged their representatives during the START4Girls inception meetings. CARE has actively involved the disability organisations representatives (Buhera Disability network & Buhera association of the disabled) in the design of Guidance and counselling learning and teaching materials. CARE has also facilitated a Youth analysis and situational assessment which sought to identify vocational and entrepreneurial needs of youths especially girls and the disabled. The assessment also unpacked barriers and enablers to youth economic participation with a specific lens on girls’ access to and participation in vocational skills training to promote equitable access of adolescent girls and young women, including those with disabilities, to relevant, diverse and accessible technical and vocational skills training opportunities. |
| Parents, Guardians and household members from poor households | 1500 | Households may be unable to fully participate in consultation activities due to time constraints and the need to conduct other income generating activities.  Households may not be aware of the project information (goals, selection criteria, targeting) | Information about projects and activities is normally disseminated through community voluntary workers such as village health workers ,Child protection Case care workers who conduct door to door visits .Community members are usually invited to community development meetings facilitated by government extension workers and it is during these meetings that information on various projects and activities is shared .However, these extension information dissemination services are not so girl friendly and therefore girls will rely on the school or their peers for information about project activities. Schools (when open) also act as information centres where project information may be disseminated through in-class lessons, mass lectures and through distribution of information broachers or leaflets to learnersfor further distribution at household level. The disabled are usually reached through the existing disability associations and organisations |

**2.5 Summary of project stakeholder communication needs**

The table provided below summarizes the level of interest in and potential influence over the project of the various stakeholder categories identified above. Most of the stakeholder will require regular and frequent engagement, typically face-to-face and several times month, including written and verbal information

*Table 4: Analysis & prioritisation of stakeholder groups based on stakeholder's communication needs*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Community** | **Stakeholder group** | **Key characteristics** | **Language needs** | **Preferred notification means (e-mail, phone, radio, letter)** | **Specific needs (accessibility, large print, child care, daytime**  **meetings** |
| Buhera District Community | Adolescent Girls | Approximately 1500 adolescent girls (12 to 19 years/form 4) including the disabled who are enrolled at Secondary schools in Buhera, are BEAM beneficiaries ,school attendance affected by the multiple phases of school closure due to covid 19 and are from poor households. | Official language (English/shona) | Interpersonal announcement by Community extension worker ,Written information, cell phone. | Day time meetings |
|  | Adolescent boys | Adolescent boys (12 to 19 years) attending the same BEAM supported Secondary schools, advocating for support of continued education of girls including the disabled. | Official language (English/shona) | Mass information and education through mass awareness campaigns, written IEC materials, in class awareness sessions. | Day time meetings,class lessons |
|  | Parents/Guardians and household members | Are a parent, guardian or related to adolescent girls supported by BEAM, residing in the same household with the BEAM beneficiary, are registered for cash transfer, are participants of the Income generating projects | Official local language (Shona) | Monthly /fortnight physical visits or Inter-personal meetings ,notification may be through calling on phones or sending a learners or community extension worker with message | Day time meetings as most have child care or household competing needs such as cattle herding and household chores. |
|  | Beam School Staff | The School heads. school teachers and non-teaching staff participating in BEAM selection of learners. The BEAM school staff will participate in various capacity building and hygiene awareness sessions | Official language (English) | Monthly feedback meetings virtual or physical, notification may be through calling on phones or emailing, awareness may be raised through IEC materials. | Day Time meetings most preferable in the late afternoon after completion of core teaching activities. |
|  | BEAM Community Selection committee (CSC) | Community members drawn from the School development committee and community members | Official language (Shona/English) | Monthly feedback meetings usually physical in nature, notification through calling on phones, awareness raising through interface meetings and IEC materials distribution. | Day time meetings as most members have household work of cattle herding, household chores. |
|  | Local leadership | Local development councilor, local traditional leadership (Village heads, headman and Chief) | Official Local language (Shona & English)) | Monthly ward meetings, notification through calling on phones and sending messages via local village extension workers such as village health workers (VHWs) and Child case care workers (CCWs), |  |
|  | BEAM Officers and MPSLSW | District level BEAM Officers and MPSLSW officers | Official language (English) | Monthly feedback meetings, Quarterly review meetings and annual review and feedback meetings conducted through virtual platforms and physical interface depending on the covid 19 situation at that time. Official communications will be relayed through emails, calling on phones and written. | Meetings may be scheduled on agreed upon convenient times since they can be done through virtual means. |

# 3.0 Stakeholder Engagement Program

## **3.1. Purpose and timing of stakeholder engagement program**

The stakeholder engagement process will be conducted in phases that are in tandem with the project implementation stages. The project stages will consist of the sensitization stage, project inception and joint planning, project implementation and rollout, monitoring, accountability and evaluation stages.

The project sensitization stage will involve informing relevant stakeholders about the project goals, target groups and outcomes, outline the project concepts and mitigatory measures, plan for joint rollout of the project, explain the project stakeholder roles. The sensitization meetings will be conducted at project inception stage targeting district technical stakeholders, progressing to community leadership and finally to household level.

## **3.2 Proposed strategy for information disclosure**

This section details how the project information will be communicated to the different stakeholder groups targeted by the project including the vulnerable groups and disabled. In order to increase effectiveness in coverage ,a variety of methods will be adopted by the project prioritizing locally existing channels of communication including media briefs, print media such as newspapers and posters, electronic media such as television including social media and official websites to reach out to the project stakeholder groups. Below is a table outlining the various methods of communication that will be used, the timelines, target groups and expected coverage and reach for each project information phase.

Table 5: Project information communication strategy

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Project stage** | **List of information to be disclosed** | **Methods proposed** | **Timetable: Locations/ dates** | **Target stakeholders** | **Percentage reached** | **Responsibilities** |
| Sensitization | Project goals, project outcomes, Target group, project reach, funding source (donor), project duration, Project key concepts and mitigatory areas. SHEA | Virtual and physical interface meetings | Ward centres once a month on a date scheduled by community mobilization officers | Households , community leadership ,disability civic organisations and secondary schools | 90% reachable | Field Officer |
| Project inception and joint planning | Project goals, project outcomes, Target group, project reach, funding source (donor), project duration, Project key concepts and mitigatory areas. Project activity plan, Activity budget y, Project monitoring and evaluation plan. SHEA | Virtual and physical interface meetings | District level workshop located at central district points. The inception meetings will be held once per target group | Disability civic society district representatives ,District school authorities, Schools authorities (heads and teachers),District local authorities and local government. | To reach out to 90% | District field Supervisor |
| Project Beneficiary registration and baseline phase | Project goals, project outcomes, Target group, project reach, funding source (donor), project duration, Project key concepts and mitigatory areas. | Virtual and physical interface meetings | Community sensitization, screening and registration meetings twice per month | Household heads, community leadership, school heads and teachers, |  | District Field Supervisor |
| Project rollout phase | Project goals, project outcomes, Target group, project reach, funding source (donor), project duration, Project key concepts and mitigatory areas. Project activity plan, monitoring and evaluation plan. SHEA | Virtual and physical interface meetings | District feedback meetings once a month.  Registration and feedback meetings at community level once a month per area meetings at ward centres. | District BEAM stakeholders.  Community beneficiaries and community leadership |  | District field Supervisor |
| Project midline evaluation | Project goals, project outcomes, Target group, project reach, funding source (donor), project duration, Project key concepts and mitigatory areas, objective of the assessment, SHEA | Virtual and physical interface meetings | Purposive Qualitative and quantitate interviews to be conducted at midline phase of the project | * Cohort group of BEAM beneficiaries, especially girls. * Households participating in IGAs. * School authorities, community leadership and BEAM officers as Key informants. |  | MEAL Specialist |
| End line evaluation | Project goals, project outcomes, Target group, project reach, funding source (donor), project duration, Project key concepts and mitigatory areas, objective of the assessment, SHEA | Virtual and physical interface meetings | Purposive Qualitative and quantitate interviews to be conducted at midline phase of the project | * Cohort group of BEAM beneficiaries especially girls. * Households participating in IGAs. * School authorities, community leadership and BEAM officers as Key informants. |  | MEAL Specialist |

## **3.3 Proposed strategy for consultation**

The project will use a variety of participatory consultative methods for meaningful engagement of each of the stakeholder groups and incorporation of their views into the project planning, implementation to evaluation stage. Each project topic will be consulted on in order to identify information gaps, develop appropriate and culturally acceptable content including appropriate times and venues for project consultation activities. Below is a table showing the various methods that will be used for project consultation.

Table 6: Project consultation strategy

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Project stage** | **Topic of consultation** | **Method used** | **Timetable: Location and dates** | **Target stakeholders** | **Responsibilities** |
| Baseline | Harmful gender norms that are a barrier to education.  BEAM selection criteria.  BEAM extent of support to the girl child.  Covid 19 effects to girls education.  WASH and Hygiene gaps at household and school level.  IGAs and economic empowerment gaps | Focus Group Discussion with school teachers  Public meeting with community  KII (key informant) interviews with BEAM officers from MPSLSW, MoPSE and National level MPSLSW  Questionnaires | August 2021  BEAM schools  From 13:00 hrs to 16hrs | Parents with Children on BEAM,  BEAM learners  School Teachers  BEAM Staff from MPSLSW  DSI and DRT | MEAL Team |
| Project inception and joint planning | Project goal and project components  Project rollout & activity plan.  Selection and registration criteria for participants | Planning Workshops  Participatory group work | September 2021  Buhera School Communities  10:00am to 1300hrs | Parents and guardians  Teachers and School heads  BEAM Staff | Assistant Project Manager |
| Project rollout | Complaints handling procedures.  Code of conduct and SHEA.  BEAM support  IGAS implemented  WASH and Hygiene | Public meetings  Participatory group selection and screening methods | September 2021  Buhera School Communities  10:00am to 1300hrs | Parents and guardians  Learners  Teachers and School heads  BEAM Staff | Assistant Project Manager, |
| Project Midline & Endline | The extent of the project activities in challenging harmful gender norms that are a barrier to education,  BEAM selection criteria and  BEAM support to the girl child.  The extent the project has contributed in addressing Covid 19 effects to girls education.  Impact of project on WASH and Hygiene status of Households  Impact of project on IGAs participation and economic empowerment | Focus Group Discussion with school teachers  Public meeting with community  KII(key informant ) interviews with BEAM officers from MPSLSW, MoPSE and National level MPSLSW, Questionnaires | January 2022  Buhera School communities  From 10:00am to 1300hrs | Parents with Children on BEAM,  BEAM lerners  School Teachers  BEAM Staff from MPSLSW  DSI and DRT | MEAL Team |

## **3.4 Proposed strategy to incorporate the view of vulnerable groups**

The project will deliberately adopt approaches that challenge existing gendered power imbalances that disadvantage and suppress the views and voices of vulnerable groups such as adolescent girls ,women including the disabled .Social Action analysis will be adopted and adapted to enable community leadership to explore harmful gender norms that are a barrier to girls school attendance and generate transformative gender action plans supporting continued education of girls. The project will ensure meaningful involvement of disability organisations and representatives in phases of the project ( from sensitization ,inception and planning ,rollout to end line assessment).Mass school health education sessions will target girls and boys separately to enable creation of girl friendly spaces for discussion and consultation on girl specific ASRHR and menstrual hygiene issues including the menstrual hygiene management kits. The project will facilitate development of an adolescent led position paper as an advocacy approach for lobbying parents and stakeholders to prioritize MHM in the domestic and school budget. In order to show that the boys support girls education, the adolescent led position paper will be jointly presented by both girls and boys (including the disabled) at strategic platforms such as parents consultation days, stakeholder meetings and school assemblies. The project will also facilitate for routine home visits as part of consultation and verification process of participation. The home visits by project field officers will enable participants to share their personal grievances and views about the project. Suggestion boxes and toll free phone lines will be shared with the project participants as a separate mechanism for reporting grievances.

## **3. 5 Future Phases of Project**

At the inception phase, the project will conduct weekly meetings at community level and provide feedback about progress of the project registration, verification and distribution. A baseline report will be shared with the relevant stakeholders.

During the project implementation phase, monthly reports will be generated and shared with relevant stakeholders to keep tract of the environmental and social performance of the project, stakeholder engagement, grievances and general project performance. Quarterly reports will be compiled and shared with relevant stakeholders. A midline report will be generated and given as feedback to the community and relevant stakeholders.

During the phaseout stage, the project will compile and share an annual report including a project end line report. A sustainability plan will be consultatively drawn with relevant stakeholder groups to enable smooth exit of the project, handing over to the MPSLSW and scaling up or continuity of some of the project main components supporting return of girls to school.

# 4.0 Resources and Responsibilities for implementing stakeholder engagement activities

An adequate budget has been allocated to the stakeholder engagement plan which shall be managed by

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The budget covers the following: communication materials, trainings, operational costs (travel, transport, accommodation, stipend). The project will provide funds necessary for effective stakeholder engagement activities. The table below presents an estimated budget for the planned stakeholder engagement activities.

**Table 7: Stakeholder Engagement Plan- Estimated Budget (12 months)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **S/N** | **Stakeholder Engagement activities** | **Quantity** | **Unit Cost** | **Frequency** | **Total Cost (USD)** | **Remarks** |
| 1 | District project launch meeting | 1 | 310 | 1 | 310 | Estimated 20 stakeholders to participate |
| 2 | Quarterly Review Meetings | 3 | 310 | 1 | 930 | An estimated 20 stakeholders per meeting |
| 3 | Sensitisation on Baseline survey | 1 | 600 | 1 | 600 |  |
| 4 | Sensitisation on endline evaluation | 1 | 600 | 1 | 600 |  |
| 5 | Project close out meeting | 1 | 3600 | 1 | 3600 |  |
| 6 | Bi-weekly sensitisation and capacity building meetings | 225 | 60 | 1 | 13500 |  |
| 7 | Bi-Monthly Meetings for School staff | 25 | 120 | 1 | 3000 |  |
|  | **Total** |  |  |  | **22540** |  |

# 4.1 Management functions and responsibilities

Institutional arrangement for project stakeholder engagement plan implementation will rest with the project management Unit comprised of the Team leader, Assistant Project Manager, Cash transfers officers supported by other technical specialists in the project which include the Education Specialist, Monitoring and evaluation specialist, Economic empowerment specialist and Gender specialist for the existing START4Girls project. This team largely has social sciences qualifications and they have been interacting with different stakeholders over the years supporting vulnerable communities in a variety of disciplines.

### **4.1.1 Grievance Mechanism**

CARE has an existing grievance redress mechanism in place to receive concerns, complaints and grievances from community project participants, stakeholders, learners, and care staff members. The existing grievance mechanisms will be adapted to receive complaints and grievances during project implementation.

#### **1. Complaint’s uptake**

CARE has an existing grievance and redress mechanism (GRM) in place to receive concerns and grievances from key stakeholders affected by the project. The GRM receives stakeholder complaints and ensures that the system addresses all these complaints within a reasonable time. The Grievance Mechanism serves as a critical avenue to allow all the key project participants and stakeholders of the project to send their complaints and/or concerns on how the project is being implemented. CIZ will ensure that the GRM be extended to receive the complaints during the Lifecyle of the pilot project.

The GRM ensures that during the project life cycle, measures are taken to inform and raise awareness amongst project participants about the feedback and complaint mechanisms, know how to submit a report, and can give feedback freely, without fear of retribution. All language, reading, visual, and psychosocial barriers will be accounted for and addressed.

CIZ ensures that at all times, project participants have at least two channels for giving feedback, depending on what communication options exist in a given location.  Options will include:

* Information stations/Desks staffed by both women and men, with separate areas for women and men at the distribution or community meeting sites.
* Suggestion/Feedback boxes at each distribution site.
* A Delloite tip of anonymous toll-free line for beneficiaries/participants and stakeholders. The information will be accessed by the Country Director for confidentiality and ensuring proper actioning. In addition a whatsapp number will also be shared for feedback.

Use of the feedback mechanisms is clearly outlined through distribution of informational materials provided before and during distribution and through pre-distribution community meetings.

#### **2. Complaint’s sorting, processing and resolution**

The project will address all these complaints within a reasonable time, protect against

retaliation and allow for escalation of complaints if not resolved in time by the project this should be reported to the project management unit (PMU). Additionally, CIZ has a broad team with different job functions and roles for complaints processing:

* The Project Team leader together with the Project management unit (Education specialist, Women Economic Specialist, Gender Specialist, MEAL Specialist) are the overall Complaints management team responsible for overseeing project management and operations.
* The Meal Specialist collaborates with the communication specialist in receiving and managing complaint processing.
* The Communication Specialist: manages complaint resolution.
* Deputy director: manages operational leadership.
* The country director manages commitment and accountability.

All feedback will be collected by the MEAL and Communications Team and channeled to the CIZ Project Management Unit. The project will ensure that the MEAL and communications team is staffed by both women and men, to accommodate gender sensitivity needs. For extended cash distributions, information on feedback received and resolved will be provided to the CARE MEAL team through monthly reporting. Serious complaints (such as sexual abuse, child abuse, fraud, and/or corruption) are be shared immediately with CIZ project management unit. The project management unit led by the MEAL specialist monitors.

1. Type of complaint, feedback, and/or question received.
2. When it was received.
3. Whether the complaint, feedback or question acknowledged.
4. Status of the complaint (closed, in progress, etc.).
5. Areas for improvement

Complaints are tagged by area(site), focal team, etc., for efficient routing and processing, and are then categorized according to:

1. Outside of project scope.
2. Ideas for future consideration.
3. Request for information.
4. Programmatic complaint- Urgent.
5. SHEA / GBV harassed complaint – urgent
6. Breach of code of conduct-immediately pulled out of the system and referred to the Deputy Director who resolves according to policies.

A summary of the grievances received is included in the monthly and quarterly monitoring reports. A summary of the status of handling of the grievances received is also included in the monthly and quarterly reports to CARE’s Project management unit and to the World Bank. Confidentiality will be paramount in the treatment of complaints. The Code of Conduct expected of staff contracted to work on the project will be disclosed to the public through the stakeholder engagement plan and during the project inception meetings.

If grievances are repeated, unresolved or submitted by several people, this should be escalated to CARE country office and the government of Zimbabwe. The GRM should be broadly communicated to all stakeholders. In addition, the Government of Zimbabwe has a separate Grievance Redress Mechanism (GRM) to deal exclusively with those that involve workers employed by the government public service commission. The project Communications and accountability officer will be responsible for managing the

project GRM.

1. **Handling of SHEA Cases**

CIZ is guided by the SHEA policy to undertake safeguarding risk assessments and identify areas of safeguarding and sexual harassment, exploitation, and abuse, and child abuse risks, and document steps that are being taken to remove or reduce these risks. CIZ incorporates safeguarding measures into the project implementation cycle through collaborative program design approaches which involve partners and program participants, at all stages to produce better design, monitoring and evaluation of safeguarding. CIZ also ensures that multiple reporting mechanisms (prioritizing community based) for reporting sexual harassment, exploitation and abuse, and child abuse are accessible and sensitive to the differing needs of anyone wishing to report, including vulnerable adults and children most at risk of sexual harassment, exploitation and abuse, and child abuse, the communities we work with, our partners, and CARE Employees and Related Personnel. CIZ will always raise community awareness on the expected behaviors of CARE Employees and Related Personnel and on how to make a report and also ensure that anyone responsible for receiving reports understands how to carry out their duties and handle them in a safe and confidential manner. CIZ will always ensure transparency with survivors around any obligations or actions that may need to be taken as a result of their report, including referral to third parties. All actions will be informed by an assessment of risk to all those involved.

1. **Response and follow up to SHEA Reports.**

CIZ will provide support and assistance to complainants and to anyone who has experienced sexual harassment, exploitation and abuse, or child abuse by CARE Employees and Related Personnel. This may include medical treatment, legal assistance and psycho-social support. CIZ support and assistance is informed by a survivor-centered approach, feasibility, and an assessment of risks to all those involved in the SHEA/GBV cases that would have been identified. The identity of the survivor is protected and channels to report GBV/SHEA apart from community-based channels used to complement existing platforms. The SHEA/GBV issues are highly sensitive and confidential thus the MEAL specialist and the APM will respond to these cases being assisted buy the Team leader.

**4.2 Workers grievance mechanism**

CIZ has an existing workers grievance mechanism which stipulate that every employee in CARE has a right to express a grievance in relation to their employment without prejudice to their employment or fear of discrimination or victimisation and seek redress for the grievance. When an employee feels aggrieved s/he shall follow the procedures for addressing his/her grievances as set out below.

## 

### **4.2.1 Grievance Procedure**

**Step 1** -The aggrieved employee (the grievant) shall put in writing his grievance on a Grievance Form (available from HR) and submit it to his immediate supervisor.

**Step 2** -The immediate supervisor must take prompt action to redress the grievance. He/she will discuss with the employee to find out the cause of the grievance and find a solution to the grievance. The immediate supervisor will document the proceedings including his/her suggested solution to the grievance.

**Step 3** -If the employee is satisfied with the suggested solution then there shall be no further recourse in connection with the grievance.

**Step 4** -If the employee is not happy with the suggested solution or the immediate supervisor is unable to solve the problem the grievant can take it up to their direct supervisor’s manager.

**Step 5** -If the employee is unhappy with the manager’s suggested solution then the grievance will be submitted to Human Resources for resolution

**Step 6** -If the grievant is still unhappy with the resolution proffered by Human Resources the grievance will be submitted to the Country Director. When the Country Director has addressed the employee’s grievance there shall be no further internal recourse in connection with the grievance.

***N:B Find attached here in an insert of the grievance policy.***

# 4.3 Monitoring and Evaluation

The GRM will be monitored by the project MEAL Specialist. CIZ will keep record of the number and the type of complaints received and addressed, allowing for performance management of the GRM. The MEAL Specialist will be responsible for producing regular reports (quarterly) for senior management which include:

* Number of complaints received.
* Number of GBV or SEA/SH grievances received
* Compliance with standards & policies (addressing within a certain time etc.);
* The issues raised and trends in these issues over time.
* Causes of grievance/feedback.
* Whether remedial actions were warranted.
* Redress actions actually provided.
* Recommendations to improve /prevent/limit recurrences.

CIZ will submit bi-annual reports to the WB, which shall include Section related to GRM which provides updated information on the following:

* Status of GRM implementation (procedures, training, public awareness campaigns etc.).
* Qualitative data on number of received grievances \ (applications, suggestions, complaints, requests, positive feedback), and number of resolved grievances.
* Quantitative data on the type of grievances and responses, issues provided and grievances that remain unresolved.
* Level of satisfaction by the measures (response) taken.
* Any correction measures taken.

# 4.4 World Bank Grievance Redress System

Communities and individuals who believe that they are adversely affected by a World Bank (WB) supported project may submit complaints to existing project-level grievance redress mechanisms or the WB’s Grievance Redress Service (GRS). The GRS ensures that complaints received are promptly reviewed in order to address project-related concerns. Project affected communities and individuals may submit their complaint to the WB’s independent Inspection Panel which determines whether harm occurred, or could occur, as a result of WB noncompliance with its policies and procedures. Complaints may be submitted at any time after concerns have been brought directly to the World Bank’s attention, and Bank Management has been given an opportunity to respond. For information on how to submit complaints to the World Bank’s corporate Grievance Redress Service (GRS), please visit *http://www.worldbank.org/en/projects-operations/products-and-services/grievanceredress-service*. For information on how to submit complaints to the World Bank Inspection Panel, please visit [www.inspectionpanel.org](http://www.inspectionpanel.org)

# 5. 0 Monitoring and Reporting

## **5.1 Involvement of stakeholders in monitoring activities**

The project will use participatory monitoring and reporting methods. These include participatory development and review of project tools and reporting templates. Due to COVID-19 Pandemic, the project will include community facilitators who will work with the Monitoring and Evaluation unit. Their primary role will be to collect data at community level while school authorities will assist to collect at School level. The community facilitators will be selected based on capacity to collect minimum data standards as expected and defined by project parameters. District stakeholders will also play a pivotal role in collecting and disseminating information in their various jurisdictions. The role of the project monitoring and evaluation staff will be capacity building of key stakeholders and community facilitators in data collection. Consolidated reports will be shared back to key stakeholders and communities for appreciation and knowledge improvement. Key decision points based on reports produced will be done at quarterly basis for improved programming. New knowledge will be factored and infused in workplans. Mitigation measures on identified risks will also guide and be infused in projected workplans.

### **5.1.1 Reporting back to stakeholder groups**

The project reports will be shared with stakeholders on a quarterly basis. However, since the stakeholders will be sources of information gathered, monthly they will have access to key updates on the progress of the reports. The project will ride on stakeholders already working with START4Girls project hence the same reporting channels will be maintained as well as reporting platforms. At community level, local leadership will have access to reports and encouraged to give feedback to their communities using monthly meeting schedules.

The SEP will be periodically revised and updated as necessary during project implementation in order to ensure that the information presented herein is consistent and is the most recent, and that the identified methods of engagement remain appropriate and effective in relation to the project context and specific phases of the development. Any major changes to the project related activities and to its schedule will be duly reflected in the SEP.

Throughout project implementation bi-annual and annual E&S compliance reports will be prepared and submitted to the World Bank. A section on stakeholder engagement will be included in these E&S compliance reports. In addition, CIZ will prepare Incident Notifications for the World Bank, if and when, required

# Annexes

**Annex 1 : CARE Staff code of conduct.**

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**ANNEX 2: CARE International Safeguarding Policy (Protection from Sexual Harassment, Exploitation Abuse and Child Abuse)**



**Annex 3: CARE international Covid 19 Guidelines**



1. Vulnerable status may stem from an individual’s or group’s race, national, ethnic or social origin, color, gender, language, religion, political or other opinion, property, age, culture, literacy, sickness, physical or mental disability, poverty or economic disadvantage, and dependence on unique natural resources. [↑](#footnote-ref-2)