

FINAL NARRATIVE REPORT

Ethiopia

Thematic window Gender Equality & Women's Empowerment

Programme Title:

Leave no Women Behind Joint Program (LNWB)



Prologue

The MDG Achievement Fund was established in 2007 through a landmark agreement signed between the Government of Spain and the UN system. With a total contribution of approximately USD 900 million, the MDG-Fund has financed 130 joint programmes in eight Thematic Windows, in 50 countries around the world.

The joint programme final narrative report is prepared by the joint programme team. It reflects the final programme review conducted by the Programme Management Committee and National Steering Committee to assess results against expected outcomes and outputs.

The report is divided into five (5) sections. Section I provides a brief introduction on the socio economic context and the development problems addressed by the joint programme, and lists the joint programme outcomes and associated outputs. Section II is an assessment of the joint programme results. Section III collects good practices and lessons learned. Section IV covers the financial status of the joint programme; and Section V is for other comments and/or additional information.

We thank our national partners and the United Nations Country Team, as well as the joint programme team for their efforts in undertaking this final narrative report.

MDG-F Secretariat



FINAL MDG-F JOINT PROGRAMME NARRATIVE REPORT

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Participating UN Organization(s) UNFPA (lead agency)		Sector(s)/Area(s)/Theme(s) Gender Equality and Women's Empowerment		
WFP				
Joint Program Leave No Women Behind (LNWB)		Joint Programme Number		
Joint Program [Sharing - if a		Joint Programme [Location]		
[Fund Contribution):	8,923,368.00 USD	Region (s): Amhara and Tigray		
Govt. Contribution:	0.00	Governorate(s):		
Agency Core Contribution: Other: TOTAL:	0.00 8,923,368.00USD	District(s): Dembia, West Etsie, East Estie, Sekela, North Achfere, Sekota, Hintalo Wajirat, Samre Seharthi, Gulo Mekeda, Naeder Adet, and Tanqua Abergele		
Final Joint Program	me Evaluation	Joint Programme Timeline		
Final Evaluation Done: Evaluation Report Attach		Original start date February, 2009 Final end date June, 2013		
Date of delivery of final 1 2013	report:7 November,			

Participating Implementing Line Ministries and/or other organisations (CSO, etc)

- Ministry of Finance and Economic Development (MoFED)
- Ministry of Women, Children and Youth Affairs (MoWCYA)
- Regional Bureaus of Finance and Economic Development (BoFED)
- Regional Bureaus of Women Children and Youth Affairs (BoWCYA) and Regional Bureaus of Women Affairs (BoWA)
- Regional Bureaus of Agriculture and Rural Development (BoARD)
- Regional Bureaus of Cooperative Promotion Agency
- Regional Bureaus of Education (BoE)
- Regional Bureaus of Health (BoH)

Report Formatting Instructions:

- Number all sections and paragraphs as indicated below.
- Format the entire document using the following font: 12point _ Times New Roman.





I. PURPOSE

a. Provide a brief introduction on the socio economical context and the development problems addressed by the programme.

Although outlawed, a number of Harmful Traditional Practices (HTP) targeted at women and girls are still rampant in Ethiopia. Harmful Traditional Practices (HTPs) identified in Ethiopia include FGM/C, child marriage, abduction, vulveactomy, tonsillectomy, milk tooth extraction, shaking women after delivery, food discrimination against women and children, bleeding after expulsion of the placenta, massaging the abdomen in labor and others. The government identified FGM/C, child marriage and abduction as the most prevalent and life threatening practices that require attention as reflected in the recently endorsed national Harmful Traditional Practices strategy and action plan of the government EDSH (2011) reported that 69% of women said that they were ashamed of talking about the violence against them EDHS 2011 also reported that 68% of women believe that a husband is justified to beat his wife for either one of the following reasons: burning the food, arguing with him, leaving the house without telling him, neglecting the children and refusing to have sex with him. 45% of men felt the same on the above issues. The DHS 2005 recorded an FGM/C national prevalence rate of 74.3% with some areas such as Afar recording 91.6%, Dire Dawa at 92.3% and Somali 97.3%. EDHS 2011 reported median age at first marriage among women age 25-49 at 16.5 years which the legal minimum age for marriage is 18 years

Ethiopia is reported to be on track for gender parity in primary school enrolment by 2015, with gross enrolment rate (GER) for girls at primary level increased from 53.8% in 2002/03 to 85.1% in 2006/07, while GER for boys increased from 74.6% to 98% during the same period. However, access to education by girls is still very low in certain parts of the country compared to others. Some regions have very low enrolment for girls. For example, the enrolment stood at 28.5% for girls and 33.3% among boys for Afar Region while it was 31.7% for girls and 37.1% for boys in Somali Region. Girls' enrolment at secondary level was only 27.6%, while higher education was 29% in 2008/099 and this is a point of concern that requires due attention of the government and other development partners in the country.

The knowledge of contraceptives is said to be universal in Ethiopia, according to the EDHS 2011. However, only 29% of women surveyed used at least on method of contraception. Likewise, the general knowledge of HIV was said to be universal with 97% women and 99% men having heard of HIV/AIDS. Comprehensive knowledge is still very low with only 19% women and 32% men having knowledge of HIV/AIDS transmission and protection. Maternal deaths accounted for 30% of all death of women between 15-49 years, while Maternal Mortality Ratio was recorded at 676 per 100 0000 for the last 7 years among people surveyed (EDHS, 2011). Infant mortality was recorded at 59 per 1000 live birth, and under 5 mortality at 88 deaths per 1000 live births (Ibid). Only 34% of the women received Antenatal Care (ANC) for their most recent births and 48% received treatment against neo natal tetanus prevention. The fertility rate for women in Ethiopia has declined at 4.8 children per woman in 2011, from 5.5 in 2005 (ibid). Women give birth earlier in their lives. According to the DHS, 34% of the women between 20-49 years surveyed gave birth by the age of 18, while 54% gave birth by the time they were 20 years old. 12% of the women aged 15-19 years surveyed were already mothers or expecting their first child.

The proportion of the poor in Ethiopia is estimated at 29.6% in 2010/2011, which is a substantial decline from 38.7% in 2004/0515. There are some slight disparities among the population proportions between rural areas at 30.4% compared to 25 % in Urban areas. The population of the food poor is estimated at 33.6%, with 27.9% in the urban areas and 34.7% in the bruad areas. Regional imbalances in poverty are also apparent in Ethiopia, with Tigray as the 3rd region with the highest proportion of the poor at 31.8% of the population, after Afar at 36.1% and Somali at 32.8%, Both Amhara and Tigray, which are the focus regions of the joint programme 1/NVB (have the most food challenges in Ethiopia. Amhara region has the highest food poverty in the country at

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42.5%, followed by Tigray at 37.1%. Only 54% of households have access to improved source of drinking water, while only 8% of the households have an improved toilet facility not shared with other households17. According to statistics, 47% of the population is below 15 years, and 27% of the children aged between 5-14 years are engaged in child labour18.

According to the 2003 Agriculture Census study, only 19% of women own land in the country. Despite thier 40 percent, and 80 percent labor contributions in agriculture and livestock production respectively, women only get between 9 percent and 26 percent access to agricultural extension services (World Bank report, 2006). Generally, women have access and control over ruminants such as goats, poultry, household items (mostly those related to her roles) and control over income generated out of selling vegetables and poultry products. Approximately, 25 percent of households in the country are headed by women; exacerbating womens' disadvantaged socio-economic conditions. Female headship is rampant in regions such as Amhara largely due to divorce resulting from child marriage and poverty. In rural Ethiopia, female households heads typically enter into share-cropping arrangements to earn their livelihood, if they are given plots of land. In urban Ethiopia, female household heads engage in the informal sector for daily subsistence, often shouldering the responsibility to raise children out of wedlock. Women in the country are largely engaged in the informal sector (60 percent) while only 32 percent are permanent employees in the civil services with wide regional variations.

The joint programme Leave No Woman Behind was developed with the aim to support the on-going national effort to address the above briefly described challenges faced by women and girls, that include their low status in society; high prevalence of harmful traditional practices; limited knowledge and access to reproductive health services, vulnerability to HIV/AIDS and limited livelihoods opportunities. The design of the LNWB was strongly informed by field tested programmes implemented by UNFPA and WFP in different parts of the country.

b. List joint programme outcomes and associated outputs as per the final approved version of the joint programme Document or last agreed revision.

Four outcome areas as follows:

• Outcome 1:

Increased Enjoyment of human rights at grassroots level through strengthened government efforts in promotion and protection of human rights and community empowerment with special emphasis on adolescent girls and women

JP Output 1.1

Increased community capacities, particularly vulnerable groups' such as women and girls, to participate in decisions that positively affect gender equality

JP Output 1.2

Increased institutional capacity of MoWCYA, BoWCYAs and the district Women Affairs offices

• Outcome 2:

Regional Efforts to strategically address gender disparities in literacy and educational attainment, sexual and reproductive health services and GBV are strengthened

JP Output 2.1

Improved life skills and literacy status of adolescent girls and women





• Outcome 3:

Improved access to and demand for quality gender sensitive and integrated reproductive health care, including HIV/AIDS prevention services at all levels

JP Output 3.1

Strengthened women and girls' right claiming capacity information and services for sexual and reproductive health, HIV/AIDS and addressing GBV

JP Output 3.2

Strengthened institutional capacity of health facilities for effective and efficient sexual and reproductive health service provisions

• Outcome 4:

Target women and their family members enjoy improved and sustainable livelihoods with increased income, improved food and nutrition security and enhanced resilience

JP Output 4.1

Improved knowledge of adolescent girls and women on income generating activities

JP Output 4.2.

Improved skills of women to create and manage physical, human and social assets

JP Output 4.3

Improved access of target women to functioning and financial saving and credit service

c. Explain the overall contribution of the joint programme to National Plan and Priorities

LNWB has responded to some of the national key priorities of Ethiopia by way of mobilizing communities to stop harmful practices that violate the rights of adolescent girls and women, addressing women and girls' low levels of education and illiteracy, limited knowledge on issues related to reproductive health and HIV/AIDS, low level of utilization of reproductive health services (with particular reference to antenatal care, postnatal care and institutional birth delivery), and limited opportunities for livelihood activities and skills. The outcomes of the JP are directly linked to at least two of the 7 strategic pillars of the national Growth and Transformational Plan (GTP) – 'Expansion of Social Development & Guaranteeing its Quality' (pillar 5) and 'Empowering Women & Youth and Ensuring their Benefits' (pillar 7) that further contribute to pillars 1 & 6 in sustaining rapid & equitable economic growth and strengthening of good governance & capacity building. The joint programme has also direct linkage to the National Action Plan – Gender Equality which highlights reproductive health, literacy and livelihood needs of women and girls. The joint programme has contributed its part in strengthening the institutional capacity of the gender machinery at different levels and this has a number of multiplier effects.

In Education, the policy priorities include relevance, quality, equity and ensuring education for all. Accordingly, the joint programme focused on improving life skills and literacy status of adolescent girls and women through facilitating life skills sessions providing Basic Alternative Education and Integrated Functional Adult Literacy (IFAL) to adolescent girls and women. The Life skill and Literacy component of the joint programme has directly benefited 53, 472 community members in two regions and 85.2% of them are able to possess basic life skills, and reading & writing skills. Increasing school enrolment & attendance and also reducing drop out and/repetition are the other areas where the joint programme has clear contribution in the operational areas.

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In line with the government Health policy, the joint programme effectively intervened in enhancing quality service delivery and quality care through of , providing maternal health focused drug and medical supplies/equipment, organizing capacity building trainings, and carrying out advocacy and regular sensitization events.

In terms of improving the livelihood status, the joint programme has enabled 16,375 women and adolescent girls to receive marketable income generating activities (IGA) skill trainings and credit services. More than eight thousand poor women and adolescent girls have been organized in rural Savings and Credit Cooperatives (SACCOs) and the joint programme has strong contribution in improving the saving culture of the community in general and women in particular. Adolescent girls and women who are targeted by the programme has been able to save a total of USD and they have even started using the mobilized savings to provide credit to members of the community.

d. Describe and assess how the programme development partners have jointly contributed to achieve development results

The joint programme design was premised on a partnership approach whereby Ministry of Women Children and Youth Affairs (MoWCYA) and Ministry of Finance and Economic Development (MoFED)took the lead in coordinating and ensuring active involvement of the various government partners in the joint programme. Specifically, MoWCYA and MoFED jointly played a crucial in bringing other sectoral offices on board, providing strategic guidance for the programme implementation and maintaining strong oversight and follow up to the programme.

Sector bureaus (at regional level) and offices (at district level) such as Women, Children and Youth Affairs; Education; Health; Agricultural and Rural Development; and Cooperative were the direct implementing partners of the programme. The two participating rUN agencies in the programme (i.e. UNFPA and_ WFP) have provided technical support for the specific components of the programme based on their respective mandates and areas of comparative advantage in a very coordinated manner with strong support from the Resident Coordinator Office. The main success and unique nature of LNWB is about its holistic and integrated multi-sectoral approach which is realized mainly as a result of the joint and coordinated involvement of the various government organizations at different levels.

Establishment of Programme Management Committee (comprising of senior staff members from all participating organizations) and Programme Technical Committee (comprising of technical staff responsible for the programme from all participating organizations) at federal, regional and district levels was the mechanism designed and put in place to ensure close coordination of the various actors involved in the coordination and implementation of the joint programme.

II. ASSESSMENT OF JOINT PROGRAMME RESULTS

a. Report on the key outcomes achieved and explain any variance in achieved versus planned results. The narrative should be results oriented to present results and illustrate impacts of the pilot at policy level)

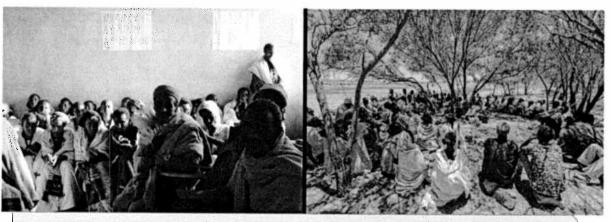
<u>JP Outcome 1</u>; Increased Enjoyment of human rights at grassroots level through strengthened government efforts in promotion and protection of human rights and community empowerment with special emphasis on adolescent girls and women

Community conversation, which is a transformative and participatory methodology to engage communities to facilitate a social change process, was the first entry point as well as the underlying strategy in the promotion and protection of human rights and community empowerment. The joint programme directly reached a total of 51,310 community members in the community convertation interventions in both Amhara and Tigray regions. Those community members who have directly

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participated in the social mobilization efforts have been able to reach over 318,000 community members through a resonance effort promoted by the joint programme.

As a result of the capacities created by being engaged in a regular community conversation sessions, significant positive change has been noted in perception and attitude towards adolescent girls' and women's right and in preventing harmful practices that seriously affect the lives of adolescent girls and women in a multifaceted manner. -Condemning and taking actions against harmful practices/violence acts, carrying out sensitization activities by faith based organizations/religious leaders harmful practices/violence acts, utilizing voluntary HIV counselling and testing services, challenging unfair gender division of labour at family level, addressing stigma and discrimination against PLWHA, initiating community based care and support system for PLWHA, and engaging in other developmental activities that would more benefit adolescent girls and women (like construction of roads) are the most important areas of achievements and change observed at individual, family and community level. More specifically, 497 child marriage arrangements and 1500 FGM/C cases were reported & interrupted by community members themselves. 52, 816 girls/women and men received voluntary counselling and testing in both regions during the programme period.



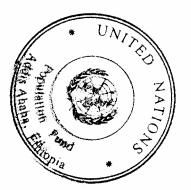
Men and women participating in regular Community Conversation session at village

<u>JP Outcome 2</u>; Regional Efforts to strategically address gender disparities in literacy and educational attainment, sexual and reproductive health services and GBV are strengthened

LNWB JP provided training in life skills and facilitated provision of Basic Alternative Education and Functional Adult Literacy to adolescent girls and women targeted by the programme. The joint programme reached 119,600 adolescent girls and women through life skills and literacy programme component. The following are the major areas where changes have been observed:

- Improved class performance because children are encouraged and allowed to go to school daily by their parents
- Parents allow more time for children to do their homework and study.
- The literacy skill helped those who are targeted by the livelihood programme component to keep records of their income generating projects, and balance their financial books by themselves
- Higher retention of school going age children in schools, and increased school enrolment





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Women attending Literacy and Life skill class

<u>JP Outcome 3</u>; improved access to and demand for quality gender sensitive and integrated reproductive health care, including HIV/AIDS prevention services at all levels

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With two interrelated supports – sensitizing adolescent girls (10-19) and women (15-49) on RH services and equipping health centres and posts with maternal health related medical supplies/equipment, the joint programme succeeded in increasing the women reproductive health seeking behaviour. All in all, the joint programme has reached 141,035 adolescent girls and women under this programme component.

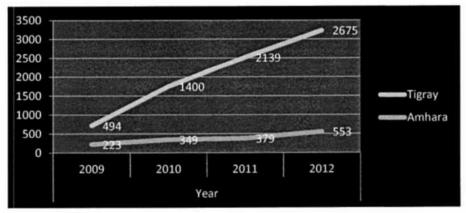
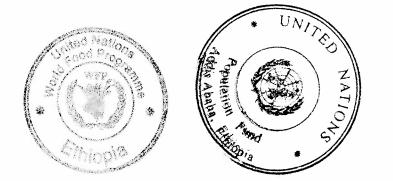


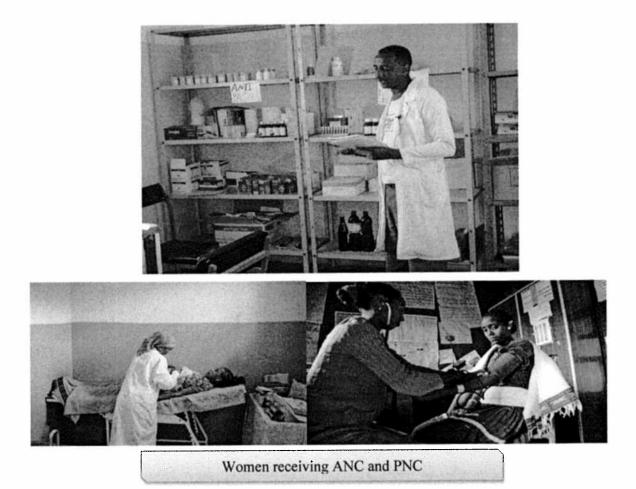
Table 1: Trends on Number of Births in supported health facilities

A total of 94,951 women and girls in Tigray and 107, 509 in Amhara accessed health posts for services, 6,708 births were attended by a health worker in the supported health centres in Tigray and 1504 in Amhara; with a very positive trend in seeking safe deliveries over the four years implementation period.

The JP supported the regional plans by providing Integrated Refresher Training (IRT) for 982 Health Extension workers and health facility staff on RH, HIV and Gender Issues. It also n equipped health facilities (205 in Tigray and 145 in Amhara) with Emergency Obstetric Neonatal Care (EMNOC) and other essential health equipment and commodities in the programme operational districts.



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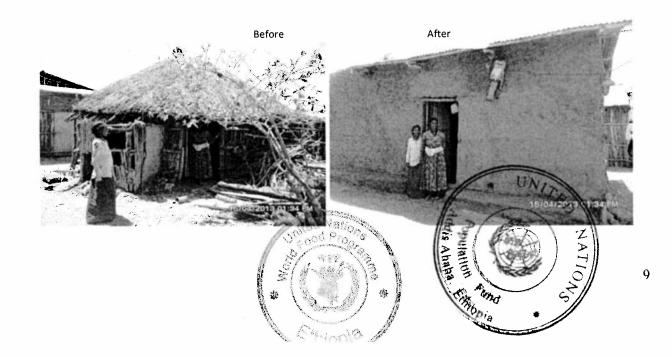


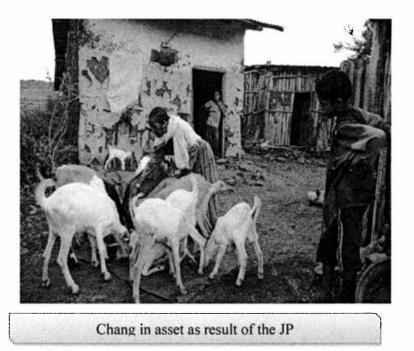
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<u>JP Outcome 4</u>; Target women and their family members enjoy improved and sustainable livelihoods with increased income, improved food and nutrition security and enhanced resilience

Remarkable result has been reported in increased women savings portfolio, and access to credit services, which in turn has helped them increase their income through multiplication of their assets for 13,161 households. Reports indicate that the joint programme has strengthened the capacity and confidence of the economically disadvantaged adolescent girls' and women' by assisting them generate their own sources of livelihoods.

The livelihood component of the program directly enhanced the capacity of adolescent girls and women to contribute to their children's education, their ability to pay hostel fees for those in high school away from home, buying household essentials (like food and clothing), and even building new residential houses as depicted in the pictures below.





b. In what way do you feel that the capacities developed during the implementation of the joint programme have contributed to the achievement of the outcomes?

Building community capacities through target-specific and community based social mobilization is one of the effective holistic strategies used by the JP to enhance women's and girls' ability and selfesteem to assert their rights, make significant change in their perception and attitude towards gender equality, challenge the various harmful practices/violence against women affecting adolescent girls and women, and receive information and access education, health, and livelihood related services.

The JP implemented regular community conversation/dialogue sessions, and periodic general community sensitization forums as capacity buildings at community level. Community conversation strengthened community's knowledge on gender, HIV/AIDS, HTPs and reproductive health. CC capacitates the community to critically question and revise the existing biased social setup and finally address the rights and interests of vulnerable section of the community particularly of women and adolescent girls. LNWB also strengthened capacity at individual level through provision of literacy programme, trainings on life skills and various micro-enterprises identified by women and provision of saving and credit services which resulted in increased income and livelihood at individual and family level.

The JP has also contributed in strengthening the institutional capacities of the various government implementing partners of the programme at different levels. Training of Trainers provided to government staff on different topics which resulted in long terms skills development; 'gaining lessons from the opportunity to design, coordinate and implement such a holistic, multi-sectoral and integrated programme on gender equality and women's empowerment; efforts made to strengthen selected health facilities for better and gender sensitive service delivery; establishing and testing women only saving and credit cooperatives for future intervention; and provision of various logistical support particularly for the gender machinery at different levels (vehicles, motorbikes, and other essential office equipment's & supplies/materials, are among the major capacity building contributions of the joint programme. The government has already started using the lessons from the joint programme to inform the design and implementation of similar joint programmes that focus on gender equality and women's empowerment.





c. Report on how outputs have contributed to the achievement of the outcomes based on performance indicators and explain any variance in actual versus planned contributions of these outputs. Highlight any institutional and/ or behavioural changes, including capacity development, amongst beneficiaries/right holders.

JP Outcome 1, output 1.1 and 1.2 - Capacity Building and Social Mobilization

Information presented in Table 2 summarizes the achievements under Capacity Building and Social Mobilization component of the joint programme

 Table 2: Achievements under Capacity Building and Social Mobilization component

Indicators	Amhara	Tigray	Total
Number of community members directly attended CC meetings	28,730	19,600	48,330
Number of community members reached by CC resonance effect	184,275	134,530	318,805
Number of child marriage cases reported to CC facilitators/WoWCYA or Justice office in LNWB sites	904	107	1011
Number of girls, women, and men who have received VCT on HIV	28,760	24,056	52,816
Number of Women and girls who have received messages on GBV	17,261	43,942	61,203
Number of women and girls opposed to FGM/C	7157	N/A	7157

565 (295 male and 270 female) community based facilitators/ mentors trained for five days on house to house mobilization, group facilitation, communication and rapport building, HIV/AIDS, gender issues and women's rights, among others. In addition to the initial training, 200 Community conversation facilitators were trained on principles of gender based community conversation and specific facilitation & mentorship skills. Trained facilitators, through the support of the district women affairs offices mobilized a total of 48,330 community members directly in 270 sites. These community members reached 318,805 community members in resonance effect.

As prevented in Table 2, 61,203 numbers of women & adolescent girls received messages on GBV and 52,816 numbers of girls, women, & men received VCT on HIV throughout the life of the JP. As the result of capacities created being engaged in regular community conversation there is a marked change in the capacity of targeted population that positively affected peoples' perception and behaviour towards biased gender relations, all sorts of violence against adolescent girls and women, HIV/AIDS, HCPs, importance of girls' education, and other related issues.

Owing to the above inter-related and complementary initiatives, there is an apparent change in communities' perception and behaviour towards the rights of women and HCPs. Targeted



communities are sending their female children to school at the age of 7. They are strongly taking stand against child marriage and FGM/C by identifying and cancelling 497 child marriage arrangements; and 1500 FGM cases. There is encouraging trend among boys and men in challenging the existing unfair gender division of labour and supporting adolescent girls and women in sharing household chores. Communities' capacity on HIV/AIDS has Significant improvements in terms of reducing stigma & discrimination against PLWHA, utilizing VCT services, and -initiating community care and support system for PLWHA and AIDS orphans are important changes observed among community members with regard to HIV/AIDS.

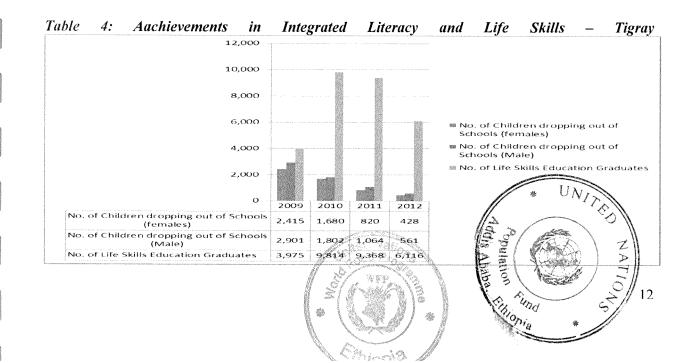
Institutional capacity building initiatives of the joint programme has benefited the direct government implementing organizations (particularly that of the Ministry / Bureau of Women, Children and Youth Affairs) in enhancing their coordination capacity and experience in implementing mulit-sectoral and integrated gender programme.

JP Outcome 2, output 2.1 - Integrated Literacy and Life Skill

The main activities accomplished under Integrated Literacy and Life Skill were mobilizing life skill/literacy facilitators and trainees, training for alternative basic education educators & cluster supervisors on Integrated Functional Adult Literacy (IFAL) manual, providing direct support of life skill/educational materials (exercise books, pens, pencils, erasers, & other teaching aid materials) for targeted women & adolescent girls and provision of supplies & materials for alternative basic education centres, I and facilitating sessions on life skills, reproductive health, HIV/AIDS, and legal rights, and providing sanitary materials for adolescent girls.

Indicators	Amhara			
	2009	2010	2011	2012
No. of children dropping out of schools (Female)	2997	1722	1593	648
No. of children dropping out of school (Male)	2773	2170	1866	1010
No. life skills education graduates	4045	7865	6518	5761

Table 3: Achievements in Integrated Literacy and Life Skills - Amhara



As indicated in Table 3 and Table 4, 53,462 community members graduated from LNWB joint program literacy classes out of the total 141,035 students after acquiring basic life skills including basic numeracy and reading & writing ability. Specifically, graduated adolescent girls and women can do simple mathematics that even support their business for those who are engaged in IGA, use mobile telephones comfortably, read & write vital messages posted around their locality (like on posters & bill-boards), identify car plate numbers in case of accident or crime, know how to use watches, and so on

As per the above data in both Amhara and Tigray regions, the number of children dropping out of schools reduced overtime and more significantly for females in Amhara. As a result of the literacy programme, community members have appreciated the value for education and started supporting their children in education and this led to increased attendance of school by children, including adolescent girls.

JP Outcome 3, output 3.1 and 3.2 - Reproductive Health

Developing and disseminating appropriate and tailored IEC/BCC materials and messages on RH, HIV and gender Issues, conducting sensitization and community mobilization on RH, HIV/AIDS and GBV, supporting the regional plans on Integrated Refresher Training (IRT) for Health Extension Workers and health facility staff on RH, HIV and Gender issues, and procuring and supplying maternal health related essential health equipment and supplies for selected health facilities in the programme operational districts were the main activities implemented under this programme outcome of the joint programme.

Indicators	Amhara	Tigray	Total
Number of clients accessing counselling and testing of HIV	28,841	24,307	53,148
Births attended by skilled health workers at health facility level	1504	7,389	8893
Number of women/girls accessing health posts/centres	107,509	94,951	202,460
Health workers trained in RH/HIV & gender issues	534	448	982
Health facilities equipped with equipment and other supplies related to maternal health	145	205	350

Table 5: Achievements on Reproductive Health – Amhara and Tigray





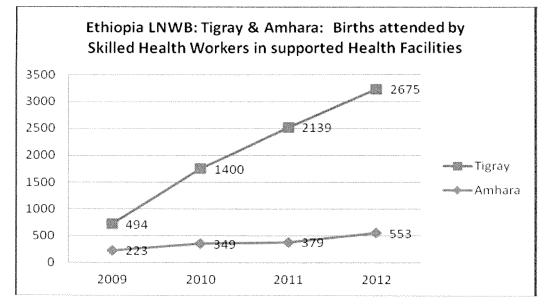


Table 6: Births attended by skilled health workers - Tigray and Amhara

According to Table 5 and Table 6 above, 202,460 adolescent girls and women accessed health posts and health centres throughout the reporting period for various services, as the result of the increased knowledge on reproductive health services. Demand for family planning services has been enhanced and pregnant mothers exhibited a tendency to visit health centres. A total of 8893 births were supported by skilled health workers in health facilities.

LNWB JP strengthened the institutional capacity of 350 health posts & centres by providing maternal health related equipment and other necessary supplies. Also, a total of 982 Health Extension Workers and Health staffs were trained on various issues.

The comprehensive efforts done in capacitating both the health facilities and the health workers had a big impact in saving the lives of mothers and babies, increasing the number of mothers attending ANC, PNC and home visits; increasing the number of VCT and PMTCT service users; and improving home hygiene practices at individual and household level. The community mobilization initiatives under the Capacity Building and Social Mobilization Outcome of the joint programme has created very conducive and enabling environment at family and community level for the above achievements under the Reproductive Health component of the joint programme and this clearly underlines the importance of having different but interrelated programme interventions for better result.

JP Outcome 4, output 4.1, 4.2 and 4.3 - Livelihood

Under the livelihood component of the joint programme, the following were the main activities implemented during the programme life period: providing ToT for technical personnel on facilitating IGA training for women and girls, providing agriculture tools and training as a follow-up incentive mechanism, designing appropriate saving and credit delivery scheme, availing credit to 8000 women for IGAs, and providing technical support and follow-up of credit and savings activities.





Outcome 4 Indicators	Amhara	Tigray	Total
No. of households with increased income	4857	9434	14,291
No. of households with increased assets	3638	9523	13,161
No. of women saving regularly	12709	6684	19393
No. of girls and women trained in IGAs	10145	3520	13665
No. of girls and women reached by peer educators about IGAs	43504	25980	69484
No. of women skilled in credit and savings principles	10591	9682	20273
No. of women engaged in IGAs	9665	9682	19347
No. of women who accessed credit services	7694	9682	17376

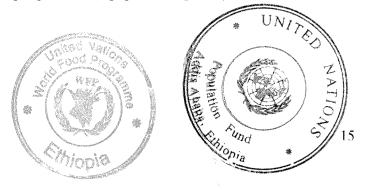
Table 7: Achievements in Livelihood: Tigray and Amhara

The various trainings that focused on different issues related to the livelihood programme component were provided in consultation with Agriculture and Rural Development Bureaus and Cooperative Agencies. This is one area where the joint programme implementation directly benefited from the existing expertise and resources within the government implementing partners.

The changes happening in the community were visible, women assets growth and helped them multiple their income, animal fattening and dairy production and sale of animals and animals products were some of the income generating activities the majority of women engaged. Significant change observed in the larger proportion of beneficiaries' lives, for instance,

In general, there are very visible and tangible changes in the livelihood situation of the adolescent girls and women targeted by the joint programme. For instance, a total of 14,291 and 13,161 adolescent girls and women households have been able to increase their income and asset respectively. Changes have also been noted in home/house structures – for example moving from a grass-thatched house to a corrugated iron house, or from a makeshift structure to a more decent-looking house structure, or from a smaller to a bigger household structure. Achievements under this programme component have also positively influenced the results under the other programme component, particularly that of education of both adolescent girls and women.

d. Who are and how have the primary beneficiaries/right holders been engaged in the joint programme implementation? Please disaggregate by relevant category as appropriate for your specific joint programme (e.g. gender, age, etc)



Types of beneficiaries	Targeted	Reached	Types of services and goods the primary beneficiaries/right holders received
Adolescent girls and Women participating in CC	8,995	38,798	Participated in regular CC sessions, received knowledge on HIV/AIDS, GBV, family planning and HTPs
Adolescent girls and Women engaged in Livelihood - trained on IGA and entitled to credit	8000	16,375	Received general and specific IGA training, and credit.
Community Members engaged in CC including adolescent girls, women and men	17,990	70,030	Participated in regular CC sessions, received knowledge on HIV/AIDS, GBV, family planning and HTPs
Adolescent girls and women participating in life skill and literacy sessions	83,750	141,035	Educated in Life skill and literacy classes Received educational materials support
Adolescent girls and women received sexual reproductive health services	66,639	167,198	Participated in the regular sensitization and awareness raising events Accessed ANC, PNC, Skilled delivery and family planning services
Health extension workers and Health staff trained	437	982	Recieved trainingon RH, HIV and gender sensitive health service delivery.

- e. Describe and assess how the joint programme and its development partners have addressed issues of social, cultural, political and economic inequalities during the implementation phase of the programme:
 - a. To what extent and in which capacities have socially excluded populations been involved throughout this programme?
 - b. Has the programme contributed to increasing the decision making power of excluded groups vis-a-vis policies that affect their lives? Has there been an increase in dialogue and participation of these groups with local and national governments in relation to these policies?
 - c. Has the programme and it development partners strengthened the organization of citizen and civil society groups so that they are better placed to advocate for their rights? If so how? Please give concrete examples.
 - d. To what extent has the programme (whether through local or national level interventions) contributed to improving the lives of socially excluded groups?

Formation of Community Dialogue Groups in all the operational districts of the joint organized and been one important achievement of the joint programme in terms of creating a more organized and systematic forum for the community members (particularly adolescent girls and women) to orice out their issues and concerns. The Community Dialogue Groups were used as a methanism to a proach

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the local administration to advance some of the issues raised during the specific dialogue sessions. Formation of a women only saving and credit cooperative in Tigray Region is one specific example where the Community Dialogue Groups have been successful in negotiating with the local administration. Existing policy of the Region which only allows one saving and credit cooperative (for both men and women) in a village was challenged by the community and finally the local administration agreed to establish women only saving and credit cooperative for the LNWB operational areas. The joint programme has also provided an opportunity for the local community to actively participate in the selection process of those adolescent girls and women who should be targeted for the different programme components of the joint programme, particularly for that of literacy and livelihood interventions. This directly enhanced the decision making power of the community and enabled the programme to target the most vulnerable and needy community members for its interventions. There were some instances whereby the Community Dialogue Groups challenged unnecessary interference by the local administration in the selection of individuals for the livelihood programme component.

f. Describe the extent of the contribution of the joint programme to the following categories of results:

- a. Paris Declaration Principles
- Leadership of national and local governmental institutions
- Involvement of CSO and citizens
- Alignment and harmonization
- Innovative elements in mutual accountability (justify why these elements are innovative)

Paris Declaration Principles	Leave No Women Behind Joint Program		
Leadership of national and local governmental institutions	LNWB JP followed a bottom up approach, in which increased ownership and day to day decision making has been practiced particularly at district level in close consultation with regional level structures. District level government structures took the lead in implementing the joint programme and handling financial management through a coordination mechanism of the Programme Management Committee. Hence, the joint programme has made important contribution in terms of strengthening the institutional capacity of government sectoral offices in implementing similar programmes in the future. MoWCYA and MoFED at federal level played more of a facilitative role to support regions as required.		
Involvement of CSO and Citizens	 CSO (through Women's Associations/Federation and Women and Men Development Groups) and citizens actively participated in decision making and consultation processes on a number of issues related to the programme design and implementation Citizens actively involved in the selection process of beneficiaries for the different programme components and this ensured the inclusion of the programme. Such open and transparent discussion making process paved the way for citizens to develop from sense of ownership for 		
-	the programme.		

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Alignment and Harmonization	The LNWB JP basically aimed at contributing to th
	realisation of government development priorities toward
	gender equality and women's empowerment Hence
	LNWB JP is fully aligned to the national and regional
	development priorities and principles. The joint program
	has also been incorporated into the regular programme of
	the government particularly at district level when
	programme implementation is taking place. The tw
	participating UN Agencies in the joint programm
	(UNFPA and WFP) have been able to harmonize the
	processes and carry out joint engagements and this helpe
	a lot in making the process more easy for the government
	counterparts.
Innovative elements in mutual	The Program Management Committees established
accountability (justify why these elements	different levels (with representatives from government, U
are innovative)	Agencies, United Nations Resident Coordinator Office
	and Spanish Agency for International Development
	Cooperation – Ethiopia Office) played important role i
	ensuring transparency and accountability by different
	partners of the joint programme
	LNWB JP consistently conducted quarterly joint fie
	monitoring and review meetings and this has been ver
	effective to follow up the programme and ensure the
	jointly agreed upon plans have been implemente
	accordingly and timely.

b. Delivering as One

- Role of Resident Coordinator Office and synergies with other MDG-F joint programmes
- Innovative elements in harmonization of procedures and managerial practices (justify why these elements are innovative)
- Joint United Nations formulation, planning and management

The Resident Coordinator Office (RCO) has actively participated in all the processes of implementing the joint programme. RCO is a member of the national programme management committee and this has benefited the joint programme to get appropriate and timely guidance and support. The involvement of the RCO, both at senior and technical staff level, has facilitated cross learning among and between the different MDG-F joint programmes and ensure better coordination of the joint programmes in the country. Existence of a High Level Steering Committee (with senior level representatives from Federal Sectoral Ministries, Resident Coordinator, and Donor Agencies) for all donor supported development efforts in the country has been another important coordination mechanism from which the joint programme LNWB has benefited a lot during the programme life. LNWB joint programme has been part of the United Nations Country Team (UNCS) commitments to the country as expressed in the United Nations Development Associated LNWB is part and parcel of the other UN supported programmes in the country. to the country as expressed in the United Nations Development Assistance Framework. Hence,



III. GOOD PRACTICES AND LESSONS LEARNED

a. Report key lessons learned and good practices that would facilitate future joint programme design and implementation

- Integrated/holistic approach in which all the different components of the JP were implemented for the same target groups toughened the impact on the joint programme.
- Aligning development programmes with existing government development priorities and working mechanisms and structures
- Existence of well-organized and functioning programme management committees is of high importance to effectively coordinate a multi-sectoral joint programme.
- Commitment and sense of ownership among the relevant stakeholders and implementers as well as beneficiaries has crucial contribution for the successful implementation of the joint programme
- Promoting volunteerism (with modest level of incentive mechanism) is vital in running community based programme interventions
- Provision of educational materials and teaching aid materials/manuals has significant contribution to attract and encourage adolescent girls and women participation in education fwe
- Educating mothers hugely promotes regular primary education (enrolment & attendance) for their children, including adolescent girls
- Enabling women to acquire basic numeracy and literacy skills has direct contribution for effective and efficient implementation of the income generating activities and management of the SACCO

b. Report on any innovative development approaches as a result of joint programme implementation

Beneficiary focused integrated and holistic approach is the innovative approach used by LNWB JP. The four outcome areas reinforced each other and enhanced the impact of the joint programme, The first three components (social mobilization and capacity building, lLiteracy and life skill and reproductive health) strengthening the capacity of the beneficiaries to manage outcome 4 (livelihood). On the other hand, increased income from livelihood interventions created financial capacity for women to be able to send their children to school, which is well underlined during the community mobilization and sensitization efforts.

Indicate key constraints including delays (if any) during programme implementation

a. Internal to the joint programme

- Cycle of delays in presenting fund request and facilitating actual fund transfer.
- Delay in preparing specifications and effecting procurement of items, particularly for medical equipment
- Poor documentation and reporting on the joint programme implementation and results
- Limited attendance of male CC participants especially during agricultural seasons and some districts in time of gold mining.



b. External to the joint programme

- Lengthy procurement process in the overall working procedure in the country. This adversely affected the timely interventions under reproductive health component of the joint programme
- Focal persons for the JP in the different government sectoral offices are overwhelmed with other responsibilities and this caused delays in program implementation, budget utilization and reporting
- Reshuffling and high turnover of program focal persons from government structures at district and regional level
- .Weak coordination system among the different government implementing partners in discharging their own sectoral duties and responsibilities. Obviously, this situation affected the smooth implementation of the joint programme
- Poor communication system in the country (telephone, fax, and internet) made communication with some of the remote districts even more difficult. The problem is even worsened by the regular power cuts as well. Government initiated adult literacy programme (i.e. Functional Adult Literacy) targets both men and women together while the JP program targets women separately. Implementing both approaches in parallel in the same operational areas created misunderstanding and confusion.
- The government cooperative guideline that particularly stipulates "...only one SACCO in a kebelle' and "...there should not be SACCO to be established based on sex' were the challenges for the implementation of the livelihood component of the joint programme that specifically focused on women

c. Main mitigation actions implemented to overcome these constraints

- Close supervision, communication and review meetings with concerned district and regional bodies were carried out to create common understanding on the objectives and importance of the JP to the region and the need to pay serious attention and take timely action to ensure quality program implementation and reporting
- Making use of the direct procurement provision for medicines and supplies and providing technical support (through UNFPA Regional Programme Coordinators) and frequent communications with sectors to prepare specifications and micro plans for procurement ahead of time.
- Continuously attempting and trying to arrange convenient time for CC sessions to be able to accommodate participant's interest
- Continues discussions were held with regional officials on flexibility of having women only SACCO so that women can practice and promote leadership capacity and build confidence. Consensus was finally reached to have women only SACCOs with a possibility to open up membership to male members in the future without losing a leadership position to run the SACCOs
- Capacity building trainings on M&E trainings were organized for programme focal persons from both regions. In addition, strong MIS was developed and introduced into the programme
- Introduction of refresher trainings and review meetings for CC facilitators were given as a mechanism to motivate and reduce turn over



c. Describe and assess how the monitoring and evaluation function has contributed to the:

a. Improvement in programme management and the attainment of development results

Monitoring and Evaluation (M&E) system was one of the gaps identified by the external Midterm Review (MTR) of the joint programme. Based on the MTR recommendations, the JP engaged a consultant to revise the M&E Results Framework, and refocus it to reflect the indicators appropriate for each of the outcomes. A Management Information System (MIS) was also developed, with several tools for data collection on a number of areas (see: Annex 5 for the revised Monitoring and Evaluation frame). Capacity building training was provided for regional and districts level program focal persons on the use of MIS tools, and different forms of measuring and reporting results. The programme allocated additional resources for monitoring and evaluation. Joint field monitoring missions were organized with more systematic plans and tools for monitoring, analysis and provision of feedback and capacity building where necessary. Joint field visits were conducted on a quarterly basis which is led by MoWCYA including participating UN Agencies and MoFED. Joint annual experience sharing and review meetings involving both operational regions were organized and made part of the practice for programme improvement.

All the above efforts helped a lot in improving the overall programme management of the joint programme, timely and effectively addressing emerging issues/challenges and designing mechanisms best deliver results from the joint programme.

b. Improvement in transparency and mutual accountability

The establishment and smooth functioning of the Program Management Committees (PMCs) and Program Technical Committees (PTCs) contributed a lot in ensuring mutual accountability and transparency across all sectors in programming, budgeting and overall decision making process from the federal up to district level. Involvement of the community representatives in the different monitoring and evaluation activities also enhanced the transparency and mutual accountability in the programme implementation.

c. Increasing national capacities and procedures in M&E and data

LNWB JP has made efforts and contribution to enhance the national capacities in M&E of programmes through the developing MIS and providing capacity building trainings for focal perons for all implementing partners on data collection, analysis and result based monitoring and reporting techniques. The JP program has created capacity within the implementing partners that can serve to manage future similar programmes.

d. To what extent was the mid-term evaluation process useful to the joint programme?

The mid-term evaluation of LNWB JP was conducted in 2010, after two years of the JP implementation. The midterm evaluation put forward recommendations on the pace of programme implementation, harmonization and alignment of fund transfer that commensurate with programme implementation schedule, addressing deviations in the programme principles and strategy, strengthening M&E and quality assurance mechanisms and development and implementation of an exit strategy for joint programme.

The national level Program Management Committee taken the MFR recommendation scribusly and developed an improvement plan to address all the above recommendations decordingly the joint programme implemented a regular quarterly joint field monitoring visits, conducted a more focused Rand

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bi-annual review meetings, negotiated flexibility and started a bi-annual fund transfer modality (rather than a quarterly fund transfer modality), developed MIS and implemented the various tools, and also developed an exit strategy for the joint programme and this helped a lot address a number of issues in the management of the joint programme.

Describe and assess how the communication and advocacy functions have contributed to the:

a. Improve the sustainability of the joint programme

Based on the Implementation Guidelines provided by the MDG Achievement Fund and as it, has been agreed with various stakeholders and implementing partners, an Advocacy and Communication strategy was developed on the specific LNWB objectives in synergy with the MDGs. This strategy contained the following pillars:

- . Target: focus on rural population where the programme is being implemented
- . Media: radio programmes, newspaper, IEC/BCC material.
- . Advocacy: at institutional level, UN and International Community.

As per the communication strategy, the following were the main activities implemented to advocate the JP experience and lessons

- A radio programme was used to disseminate the JP's outcomes and approaches to the wider community and relevant stakeholders and Higher Government officials.
- Produced different posters, flyers, documentation films, on the joint programme
- Developed and disseminated a case study that illustrates the JP results, impact, lessons and good practices and shared to all stakeholders.

b. Improve the opportunities for scaling up or replication of the joint programme or any of its components

The above mentioned advocacy and communication materials documented the experience and lessons from the joint programme LNWB for the different stakeholders. MoWCYA, the federal level lead government agency for the joint programme, organized a national workshop for representatives from all regions and all sectors to share the experience and lessons from the joint programme LNWB to encourage all regions to adapt the strategies of LNWB. Similarly, the experience from LNWB is also being used to inform the flagship joint programme on gender equality and women's empowerment- a joint programme by six UN Agencies. Otherwise, both government as well as the two participating UN Agencies are keen to explore possibilities to scale up /replicate the programme in the future. The point is also presented for the National Programme Management Committee for the joint programme which is still functional as there is interest among all parties to continue to follow up the status of the joint programme after donor funding ceased.

c. Providing information to beneficiaries/right holders

The LNWB JP produced different posters, flyers, documentation films, and radio programs for the beneficiaries / right holders at all levels. Awareness raising, public sensitization, campaign activities and the various review meetings mentioned in the earlier sections of this report were effective in sharing information about the joint programme with **beneficiaries/right holders**.

Please report on scalability of the joint programme and/or any of its components

d. To what extend has the joint programme assessed and systematized development results with the intention to use as evidence for replication or scaling up the joint programme or any of its components?

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After the MTR the JP developed a Management Information System (MIS) that helps to collect relevant and specific data on the various result areas of the joint progamme. The JP also produced case study (a document that strongly captures the different aspects of the joint programme) with the main aim to share the lessons and look for potential donors to replicate and scale up the best practices of the JP.

Describe example, if any, of replication or scaling up that are being undertaken

It is true that various documentations have been produced and shared with different national government partners both at federal and regional level. The two participating UN Agencies are also sharing the experience among the participating UN Agencies for the gender flagship joint programme. However, more concrete responses are being expected to take place in the future.

Describe the joint programme exit strategy and assess how it has improved the sustainability of the joint program

In December 2011, discussions and meetings were held with different stakeholders on the sustainability Strategy document developed and approved by the regional and federal implementing partners. Based on the endorsed sustainability strategy, the following activities were undertaken so far:

- Different regional level workshops were conducted under the leadership of the Bureau of Women Children and Youth Affairs, on LNWB JP approach, achievements, and lessons for different and relevant stakeholders. In addition, events at community level with a high participation of Women's Associations have also taken place, in order to reinforce the commitment and ownership of the community for the programme at grass root level.
- Harmonization of JP's literacy & life skill approach with the new government FAL system has been carried out and the on the other hand the government has also adopted training women separately as one target group instead of grouping them together with men.
- Reinforcing the linkage of the JP's RH component with the government's health extension package has been instrumental in sustaining the achievements of the joint programme.
- Efforts made to further strengthen the institutional capacity of established SACCOs have been another important activity undertaken by the joint programme to ensure sustained operation of the SACCOs after the phase out of the programme.



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IV. FINANCIAL STATUS OF THE JOINT PROGRAMME

a. Provide a final financial status of the joint programme in the following categories:

- 1. Total Approved Budget = 8,923,368.00
- 2. Total Budget Transferred = 8,923,368.00
- 3. Total Budget Committed = 8,923,368.00
- 4. Total Budget Disbursed = 8,876,521.65

b. Explain any outstanding balance or variances with the original budget

Any outstanding balance or variance with the original budget will be reported once the participating UN agencies in the joint programme (UNFPA and WFP) produce final certified financial report by their respective HQs. UNFPA and WFP will notify MDG Secretariat if there are any changes on the financial status reported above once the certified financial report is released by HQs.

V. OTHER COMMENTS AND/OR ADDITIONAL INFORMATION

As presented under the different sections of this report, the joint programme LNWB has been effective and successful in achieving its intended objectives and this has been strongly verified by external evaluation of the joint programme. In addition, the joint programme has provided valuable field tested effective approach that can be adapted by different stakeholders in designing and implementing similar programmes in the future.

VI. CERTIFICATION ON OPERATIONAL CLOSURE OF THE PROJECT

By signing, Participating United Nations Organizations (PUNO) certifies that the project has been operationally completed.

-		A STANDAN	LITED NAM	
PUNO	NAME	* TITLE	SIGNATURE 7	DATE
UNFPA	Faustin YRO	Representative	Ababa, Ein	5 Nov 2013
	Pascal Joannes Deputy Country Director WFP, Ethiopia		Dis	66 m 1 }

VII. ANNEXES

- 1. List of all document/studies produced by the joint programme
- 2. List all communication products created by the joint programme
- 3. Minutes of the final review meeting of the Programme Management Committee and National Steering Committee
- 4. Final Evaluation Report
- 5. M&E framework with update final values of indicators *





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