# End-term Evaluation Report

## "Healthy Unions: Community Engagement and Behavioral Change to Eliminate Bride Price, Bride Abduction, and Early Marriage in Ethiopia" Project

**Implemented by CARE Ethiopia and EGLDAM**
With financial support from USAID

Evaluation conducted by:
**Yimegnushal Takele**,
(A Development Consultant)

December 2010
Addis Ababa

# Table of Contents


*Acronyms* ____ *4*

*1. Executive Summary* ____ *5*

*2. Introduction* ____ *8*

**2.1 Situation of HTPs in Ethiopia** ____ **8**

**2.2 National response to HTPs** ____ **9**

**2.3 Organization of the report** ____ **9**

*3. Background to the project* ____ *9*

**3.1 Overall objective of the project** ____ **10**

**3.2 Specific objectives** ____ **10**

*4. Objectives and Scope of the Evaluation:* ____ *10*

**4.1 Specific objectives of the evaluation:** ____ **10**

**4.2 Components and scope of the evaluation:** ____ **11**

*5. Methodology* ____ *11*

**5.1 The project evaluation study area, participants and project targets** ____ **11**

**5.2 Project evaluation study design and sample size** ____ **11**

**5.3 Survey instruments** ____ **12**

**5.4 Survey team, data collection, data management and analysis** ____ **12**

*Findings of the Evaluation and Discussions* ____ *13*

*6. Characteristics of evaluation respondents* ____ *13*

**6.1 HH survey respondents** ____ **13**

**6.2 Institutional survey respondents** ____ **14**

*7. Findings of the evaluation according to the key strategic objectives (SOs)* ____ *15*

**7.1 SO_#1 - Change community norms underlying the traditional harmful practices of early marriage, bride abduction and bride price** ____ **15**

7.1.1 Early marriage related issues: ____ 15

a) Perceptions and practices ____ 15

b) Attitude and intentions towards abandonment of early marriage ____ 18

7.1.2 Bride abduction related issues: ____ 19

a) Perceptions and practices ____ 20

b) Attitude and intentions towards abandonment of bride "abduction" 24
7.1.3 Bride price related issues: 26
a) Perceptions and practices 26
b) Attitude and intentions towards abandonment of bride price: 28
**7.2 SO_#2 - Increase the capacity and political will of local actors to take collective action against harmful traditional practices such as bride stealing, bride price, and early marriage 35**
**7.3 SO_#3 - Advocate for the enforcement of laws that reduce the incidence of bride price, bride kidnapping and early marriage 37**
7.3.1 Respondents' knowledge of the law and its enforcement – in relation to the three HTPs: 37
7.3.2 Sense of ownership and local conviction towards the targeted HTPs 42
**7.4 Contribution of the Community facilitators: 43**
***8. Project implementation process and collaboration 43***
**8.1 Reporting, joint planning and review 43**
**8.2 Sustainability: 44**
**8.3 Budget utilization 45**
***9. Project performance against the five major evaluation parameters/criteria 47***
***10. Strengths, limitations and lessons 50***
***11. Conclusion 51***
***12. Recommendations 52***
***13. Annexes 53***
**13.1 Data collection methods: for quantitative and qualitative 53**
**13.2 Sampling Method and size of quantitative data 54**
13.2.1 Setting the determinant variable 54
13.2.2 Setting the sample size 54
13.2.3 Method of selecting the survey sites and distribution of sample 55

## Acronyms

| | |
|---|---|
| AIDS | Acquired Immune Deficiency Syndrome |
| BCC | Behavioral Change Communication |
| BOH | Bureau of Health |
| CBO | Community Based Organization |
| CC | Community conversation |
| CSOs | Civil Society Organizations |
| CSSG | Community Self-help Saving Groups |
| DHS | Demographic and Health Survey |
| EGLDAM | YeEthiopia Goji Limadawi Dirgitoch Aswogaj Mahiber |
| FBO | Faith Based Organization |
| FGD | Focus Group Discussion |
| FGM | Female Genital Mutilation |
| FP | Family Planning |
| HH | Household |
| HIV | Human Immunodeficiency Virus |
| HSDP | Health Sector Development Program |
| HTP | Harmful Traditional Practices |
| HU | Healthy Unions Project |
| IEC | Information Education Communication |
| IGA | Income Generating Activities |
| M&E | Monitoring and Evaluation |
| MDG | Millennium Development Goals |
| MOH | Ministry of Health |
| NGO | Non-Governmental Organization |
| RH | Reproductive health |
| STI | Sexually-Transmitted Infections |
| ToT | Training of Trainers |

# 1. Executive Summary

CARE Ethiopia, operating since 1984, is a non-profit humanitarian organization currently working in three regional states, two city administrations, and twenty woredas. The development work of CARE Ethiopia focuses on interventions that will lead to the alleviation of poverty and social injustice. All of its development initiatives aim at improving the living conditions of the rural and urban poor, pastoral communities, and other vulnerable and marginalized populations. CARE Ethiopia, as part of its development efforts, works collaboratively with the government to achieve these objectives.

In line with its mission to alleviate social injustice, CARE Ethiopia's project, "Healthy Unions: Community Engagement and Behavioral Change to Eliminate Bride Price, Bride Abduction, and Early Marriage in Ethiopia" (HU project) seeks to halt the harmful traditional practices (HTPs) which jeopardize the rights, dignity, and humanity of participating parties, especially the girls forced to take part in such practices. The HU project was a comprehensive 3 year project, implemented in the Oromia region, which involved multiple stakeholders including community members and leaders, CBOs, government officials, and CARE staff. The results of HU project are revealed below.

The overall goal of the project was "to promote the human rights of girls and women in the Oromia Region of Ethiopia by decreasing the interlinked harmful traditional practices of bride abduction, bride price and early marriage".

The purpose of this end-term evaluation is to assess if the HU project achieved its intended objectives. The study was largely participatory, involving a wide range of community members and administrative structures. Tools used to obtain data range from individual interviews, FGDs, institutional assessments, and interviews with key community and organizational level informants. Using the household survey tool, 571 individuals were interviewed (285 respondents from Borena and 286 from W. Hararghe). 54 males and 62 females participated in 6 FGDs and 29 individual or pair interviews. In both zones, nearly four out of the five respondents of the HH survey were women and girls. 99% in Borena and 87% of West Hararghe were Oromo in their ethnic background. About 87% in Borenawere primarily pastoralists while in West Hararghe 97% were agriculturists. In addition, about 30 people, representing local community structures, were interviewed as part of the institutional assessment.

***Main findings of the evaluation:***

Close to 70% of respondents in Borena and 88% in West Hararghe agreed that the practice of early marriage is declining in their respective locality. When respondents were asked to provide reasons for thisdecline, 93% in Borena and 81% in West Hararghe emphasized "awareness raising programs being conducted in the localities". Another key reason indicated was "fear of the law," as state law prohibits the marriage of girls below legal marriage age. Respondents were asked whether they think the practice of "early marriage" should be protected as a positive cultural value of their community, 85% from Borena and 98% from West Hararghe replied "No".

Among the 285 respondents in Borena over 50% replied that bride abduction ("awadi"/"cabsaa") is practiced in their locality while only 6% on West Hararghe disclosed the same. 97% from West Hararghe stated that bride abduction "is decreasing" while only 61% of Borena respondents agreed that there has been a decline. Over 95% in Borena said that decline is due to "awareness raising programs in the locality" while in West Hararghe about 27% of the respondents mentioned "fear of the law", in addition to the increased awareness. When respondents were asked their viewson preserving the practice of "awadi" or "cabsaa" in their respective localities, about 56% in Borena expressed that it should not be "protected as among the good cultural values of the community" while nearly all from West Hararghe rejected the idea of preserving it. In fact, over 70% of respondents in Borena, labeled the practice of bride abduction or "awadi" as a "harmful traditional practice", though some of these same respondents argue for preserving the practice as part of the community's cultural heritage. Note that at the time of Borena baseline survey, 11% of respondents labeled the practice of bride abduction as HTP, but at the end of the HU project, 72% labeled the practice as harmful. Perceptions have changed over the three year project life.

Perceptions of current practices regarding paying or receiving bride price indicate that among the 285 respondents in Borena, about twice as many compared to West Hararghe, stated that bride price is commonly practiced in their locality. However, the younger generation is not as interested in preserving the tradition. Overall, 92% of participants in the West Hararghe household survey responded that the practice has declined in the last three years while only two thirds in Borena confirmed the same.

Other components of the intervention, which include local capacity enhancement and advocating for law enforcement, were successful in advancing the HU project objectives according to project stakeholders and partners. The project strategy, which was primarily community-driven, was found to be very effective in mobilizing not only formal government structures but also traditional community leaders and structures.

**Analysis:**

**Borena** – Regarding community attitudes and intentions towards each of the targeted HTP components, Borena Zone showed the strongest position against "early marriage", followed by a position against bride abduction/"awadi". However, the data shows that much more needs to be done in changing the attitudes of the community with respect to paying or receiving bride price, as there is a wide spread tendency to consider this practice as a source of family income rather than a tradition that harms society. In this regard, the involvement and effort of traditional leaders was found to be relatively limited compared to their advocacy work for the abandonment of early marriage. In the case of bride abduction ("awadi"), the nature of the practice as one practiced

executed with consent from the girl, makes it detection difficult for law enforcement bodies, as there is no forceful action involved in the process. On top of this, there is a general attitude, especially among older people, that this practice holds cultural value within the community.

However, the underlying issue is that as long as paying/receiving bride-price reduces the risk of "awadi" occurring and remains a motivating factor in allowing families their daughters marry earlier than they otherwise would, the abovementioned could remain tenuous. Similarly, unless legal protection is given for girls who are charmed by the "magic" words of "awadi" there is high likelihood that the practice of "awadi" will remain prevalent in the community. There is a strong need for the introduction of a local legal action framework (formal and/or customary) against the brokers, who are also motivated by the amount of money or incentives they gain from the process. A participant, in one of the community discussions in Borena, put the situation well when he argued,

> "although 'qarataa' (a local term for bride-price) is [among the harmless] cultures of the Borena people, the community has confused it with exchange of the girl/woman to monetary benefits." He then explained the link among the three practices as "consequently, those men who can't afford to pay for the expected 'qarataa' resort to bride abduction/awadi. Nowadays, bride stealing/awadi is performed by the mediators, most of the time by women, for whom it is serving as a means of income. Therefore, the mediators, motivated by the money they earn, deceive girls [into] marriage. On the other hand, parents by way of avoiding the practice of 'awadi' [for] their daughters, resort to facilitation of an early marriage. Therefore, bride price is working as one of the factors for the early marriage, which in turn leads to health related problems such as fistula on the girls."

**West Hararghe** – Asthe results indicate, West Hararghe is, in all aspects, in a much better position than Borena. The progress in West Hararghe appears to be facilitated by the fact that the practices are easily detected by law enforcement bodies. For instance, the practice of "bride abduction" ["cabsaa" literally meaning breaking], involves forceful action against the will of the girl and "early marriage" clearly violates the age demarcation set by law. This is reflected in the response of the majority of community members who state "fear of the law" is one of the main reasons for the decline of these practices in their locality. This is not the case in Borena, except for the practice of early marriage.

To summarize, despite the many challenges faced when addressing deep-rooted customs such as HTP's, where one tradition fuels the other, and economic incentives are hidden behind cultural values and norms, the HU Project has achieved positive outcomes, particularly in Borena, by questioning the norms that until recently remained unquestioned.

# 2. Introduction

CARE Ethiopia, operating since 1984, is a non-profit humanitarian organization currently working in three regional states, two city administrations, andtwenty woredas. The development work of CARE Ethiopia focuses on interventions that will lead to the alleviation of poverty and social injustice. All of its development initiatives aim at improving the living conditions of the rural and urban poor, pastoral communities, and other vulnerable and marginalized populations. CARE Ethiopia, as part of its development efforts, works collaboratively with the government to achieve these objectives.

In line with its mission to alleviate social injustice, CARE Ethiopia's project, "Healthy Unions: Community Engagement and Behavioral Change to Eliminate Bride Price, Bride Abduction, and Early Marriage in Ethiopia" (HU project) seeks to halt the harmful traditional practices (HTPs) which jeopardize the rights, dignity, and humanity of participating parties, especially the girls forced to take part in such practices. The HU project was a comprehensive 3 year project, implemented in the Oromia region, which involved multiple stakeholders including community members and leaders, CBOs, government officials, and CARE staff. The results of HU project are revealed below.

## *2.1 Situation of HTPs in Ethiopia*

HTPs in Ethiopia are century old practices rooted deeply among the cultural norms of many community groups. The top five most widely practiced HTPs in Ethiopia are female genital mutilation (FGM), uvula cutting, milk teeth extraction, early marriage, and marriage by abduction. Early marriage and marriage by abduction comprise two of the three focus areas of the HU project.

Surveys completed by EGLDAM in 1997 and 2007 indicate that participation in such practices is decreasing at both the national and Oromia Region levels. The 2007 survey indicates that knowledge about the harmfulness of certain traditional practices, attitudes towards the abandonment of these practices, and the intentionto not practice HTPs in the future is"universally high".[1] Based on the results, people are aware that HTPs are harmful, but this awareness has yet to change their behavior.

[1] Follow-up National Survey on Harmful Traditional Practices in Ethiopia, EGLDAM, 2008, Addis Ababa

### *2.2 National response to HTPs*

Beginning in the early 1990s the Government of Ethiopia began to recognize that HTPs are "harmful" as they degrade women and children, severely affect community health, and in turn, stand in the way of Ethiopia's development as a nation. In 1995, the Federal Democratic of Ethiopia Constitution (FDRE Constitution) was revised to include disapproval of HTPs. More recently, The Family Law revised in 2000 and the Ethiopian Penal Code revised in 2004,now recognize HTPs as harmful and punishable practices. Current efforts to address issues of HTPs take place on a range of levels. These include a health extension program spearheaded by the Ministry of Health, and "in field" programs headed by NGOs, FBOs, and CBOs. Each of these entities is working towards the reduction and ultimate abandonment of HTPs.

### *2.3 Organization of the report*

This report contains the findings of the end-term evaluation and is organized as described. The first section provides an overview of CARE Ethiopia, the principal project implementing body. Next, information on the status of harmful traditional practices (HTPs) in the country is provided, as well as the national response so far, including the link between national priorities/strategy documents and the HU project.

This is followed by background of the project and its key focus areas, purposes of the evaluation, and explanations of the methodology used for this evaluation. The latter parts of the report focus mainly on the findings of the evaluation, which starts with a presentation of the characteristics of respondents for the assessment, followed by the key findings of the evaluation compared to the key objectives of the project, as well as budget utilization compared to the initial budget plan. Coordination and management of the project are discussed in light of the relationship with local government structures. A summary of the status of project performance indictors is given for reference. The project is also examined according to five evaluation parameters.

Finally, there is a brief description of the strengths, limitations, and lessons learned from the project, along with the conclusions and recommendations that can serve as an input for future program design.

# 3. Background to the project

CARE Ethiopia recently concluded the implementation of a three-year anti-HTP project titled: "Healthy Unions: Community Engagement and Behavioral Change to Eliminate Bride Price, Bride Abduction and Early Marriage in Ethiopia" (HU project). The project took place within the Oromia region in a total of five woredas, three in theBorena Zone and two in the West Hararghe Zone. Implementation of the project in Borena Zone was coordinated by CARE Ethiopia in partnership with the Zonal Women's Affair Office. Application of the project in West Hararghe Zone was implemented by Ethiopian Goji Limadawi Dirgitoch Aswegage Mehaber (EGLDAM), the Zonal Women's Affair Office, and local community partners. Financial support for the project was provided by USAID, as part of its support for international development initiatives. Those who

supported work “on-the-ground” to implement the project include the woredalevel offices of the Ministry of Women’s Affairs, Ministry of Justice, Police, and Ministry of Education, traditional leaders (including Aba Gedas), school communities, as well as community volunteers.

### *3.1 Overall objective of the project*

To promote the human rights of girls and women in the Oromia Region of Ethiopia by decreasing the interlinked harmful traditional practices of bride abduction, bride price, and early marriage.

### *3.2 Specific objectives*

(i) Change community norms underlying the traditional harmful practices of bride price, bride abduction, and early marriage.
(ii) Increase the capacity and political will of Community-Based Organizations (CBOs), formal and informal leaders, women and girls, men and boys to take collective action against harmful traditional practices such as bride abduction, bride price, and early marriage.
(iii) Advocate for the enforcement of laws that reduce the incidence of bride price, bride abduction, and early marriage

## 4. Objectives and Scope of the Evaluation:

The main purpose of the end-term evaluation is todetermine if the HU project achieved its intended objectives.

### *4.1 Specific objectives of the evaluation:*

- Assess whether or not all project activities were executed as outlined in the project documents which include- the Detail Implementation Plan, the project log frame, and the monitoring and evaluation plan (M&E Plan )
- Assess whether the principal goals. These goals were:
  i. Community norms underlying the practices of Bride Price, Bride Abduction and Early Marriage are changed
  ii. Capacities of CBOs, formal and informal leaders, women and girls are enhanced in reducing practices of HTPs
  iii. Laws regarding HTPs are more effectively enforced, resulting in a reduced incidence of the stated HTPs
- Assess the outcomes and achievements of the project in terms of the primary goal set to promote the human rights of girls and women in the Borena and West Hararghe zones of Oromia Region.
- Assess the success, lessons learned, and constraints faced by the project
- Assess sustainability of project results in supporting the targeted communities

### *4.2 Components and scope of the evaluation:*

Evaluation components include inputs, activities/processes, outputs, outcomes, and impacts of the intervention. Due to the fact that this is an end-term evaluation, the primary focus of the evaluation will be to determine whether or not the project attained its intended objectives. Intermediate project outcomes and the actual project implementation process, including budget utilization, will be given a secondary focus. The scope of the evaluation is to assess the project using five criteria: relevance, effectiveness, efficiency, impact and sustainability.

# 5. Methodology

### *5.1 The project evaluation study area, participants, and project targets*

Among the five intervention woredas, the evaluation study was conducted in four woredas two, from Borena and two from West Hararghe. Dire and Arero woredas were selected from the Borena and Tullo and Doba from West Hararghe. Data collection was conducted in the four woredas during early December 2010.

According to the Detail Implementation Plan document, the primary targets of the project, at the community level, were women and girls. The project also targeted CBOs such as local coalitions/networks, girls' education advisory committees, schools, traditional leaders (like Aba Gedas), religious and kebeleleaders, NGOs (working at the community level), voluntary community facilitators, and community self-help saving groups. Each of these were targeted during project implementation in an attempt to advance the project goal of enhancing community capacity to politically resistHTPs and to act as a catalysts for increased enforcement of existing laws against HTPs. The zonal and woreda level offices of the Ministry of Women's Affairs, Ministry of Justice,Ministry of Education, CARE Ethiopia, and EGLDAM collaborated r to manage and implement the HU project.

### *5.2 Project evaluation study design and sample size*

The project evaluation study was participatory in nature and involved participants from diverse social groups and administrative structures. Multiple tools were used to conduct the study these include – individual household (HH) level interviews, focus group discussions (FGDs), institutional assessments, and interviews with community and organizational level informants.

The quantitative information was gathered through household and institutional surveys, particularly those from community members and institutions/coalitions actively involved in the implementation of the project. To determine the sample size of participants for the HH survey, Ronald M. Weiers' (2002) formula was applied. Accordingly, a total of 571 individuals were contacted with 285 respondents from Borena and 286 from W. Hararghe.

In the case of West Hararghe both woredas were equally represented in the HH survey. In the case of Borena, given the nature of this pastoral locality and the resulting issues of accessibility, the

evaluation team agreed toselect either of Dire or Yabello woredas for analysis as they are relatively homogeneous. The Arero woreda was also used because it differed from the other two.Accordingly, the lottery picked Dire woreda as one of the two study sites. However, considering the proportion of intervention kebeles in the two woredas, where Arero accounts for fewer kebeles than Dire, it was decided to take only a third of the total sample size from Arero and the remaining from Dire.

A random method was applied in the selection of kebeles.. Considering the issues of logistics and accessibility, particularly in the pastoralist communities of Borena Zone, it was agreed to include two kebeles from each selected woreda, to be selected through a lottery. However, once the kebeles were identified, a strategy for choosing the largest cluster was developed for creating the HH list and determining the sampling interval. *(See the annex attached for the details)*

As part of the qualitative data collection, diverse groups [mentioned above] participated in 6 FGDs and 21 interviews either as individual or in pairs. (Please see the attached composition of participants and the corresponding tools used, in the annex).

### *5.3 Survey instruments*

The study used four methods of data collection, which include—review of documents, quantitative surveys (using a structured questionnaire), institutional assessment, and qualitative data collection (via checklists for conducting FGDs and interviews). A compliance matrix was developed to assess project performance via report documents and other relevant sources. The survey questionnaire was compiled and analyzed to fit to the presentation requirements of the designed evaluation framework. Data from interviews and FGDs was organized and analyzed according to thematic areas.

### *5.4 Survey team, data collection, data management and analysis*

The data collection team participated in a training which taught the correct methods ofdata collection. Topics covered during the training included—general background survey questions, correct administration of the questionnaire, how to set-up interviews, completion of the questionnaire, etc. Before data collection began, the questionnaire was pre-tested for accuracy, completeness, and consistency in the field. Following this initial pre-testing phase, the questionnaire was revised and checked again. This pre-testing was completed to ensure the quality and validity of data collected by the questionnaire.

Interview and FGD data served as a complement to data collected by the questionnaire. In the document review process of the end-term evaluation study, available information was gathered and reviewed to track progress, assess the effectiveness of the intervention strategies, and examine project efficiency. Completed questionnaires were checked for errors, inconsistencies, and gaps by the field supervisors. SPSS version 16 was used to check the data for errors and inconsistencies, as well as to clean and validate the data. This process was completed prior to processing the data.

# Findings of the Evaluation and Discussions

# 6. Characteristics of evaluation respondents

### *6.1 HH survey respondents*

As shown in the table below, the gender mix and ethnic background of the study respondents, both in Borena and West Hararghe zone were similar.Over three quarters of all the respondents were female and almost all participants in Borena and over 87% in West Hararghe were from Oromo ethnic groups. The majority of respondents were between the ages of 21 to30. The next largest group was between the ages of 31 to 40. Finally, the fewest respondents belonged to age groups over 50 and less than 16. However, about 4% more children (under age 16) were involved in the HH survey of Borena than that of West Hararghe. In regard to occupation, over 97% of the respondents in West Hararghe replied that they make their living from agriculture while 87% from Borena stated that they make their living through pastoralism, and only 10% living by agriculture. 87% of respondents in Borena and 56% from West Hararghe received no education (formal or informal). Close to a third of participants of the HH survey in West Hararghe attended formal primary schools.

**Table 1: Distribution of HH survey respondents by:**

| Gender mix | | | Ethnic background | | |
|---|---|---|---|---|---|
| | Borena | West Hararghe | | Borena | West Hararghe |
| Male | 58 | 62 | Oromo | 276 | 250 |
| | 20.4% | 22.0% | | 98.60% | 87.40% |
| Female | 227 | 220 | Amhara | 4 | 36 |
| | 79.6% | 78.0% | | 1.40% | 12.60% |
| Total | 285 | 282 | Total | 280 | 286 |
| | 100.0% | 100.0% | | 100.00% | 100.00% |

**Table 2: Distribution of HH survey respondents by:**

| Major occupation | | | Age category | | | Educational level | | |
|---|---|---|---|---|---|---|---|---|
| | Borena | West Hararghe | | Borena | West Hararghe | | Borena | West Hararghe |
| Agriculture | 27 | 277 | <16* | 15 | 4 | Illiterate | 249 | 161 |
| | 9.60% | 97.20% | | 5.30% | 1.40% | | 87.40% | 56.30% |
| Animal Husbandry | 245 | 0 | 16-20 | 60 | 43 | Read and write in Ethiopian languages | 9 | 16 |
| | 86.90% | 0.00% | | 21.20% | 15.40% | | 3.20% | 5.60% |
| Employed/ salary | 1 | 0 | 21-30 | 105 | 121 | Primary school (1-8) | 25 | 90 |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | 0.40% | 0.00% | | 37.10% | 43.20% | | 8.80% | 31.50% |
| Petty trade | 2 | 0 | 31-40 | 56 | 53 | Secondary school (9-12) | 2 | 18 |
| | 0.70% | 0.00% | | 19.80% | 18.90% | | 0.70% | 6.30% |
| Daily laborer | 0 | 1 | 41-50 | 25 | 31 | College level/TVET | 0 | 1 |
| | 0.00% | 0.40% | | 8.80% | 11.10% | | 0.00% | 0.30% |
| Student | 3 | 6 | Over 50 | 22 | 28 | **Total** | **285** | **286** |
| | 1.10% | 2.10% | | 7.80% | 10.00% | | **100.0%** | **100.0%** |
| Unemployed | 4 | 1 | **Total** | **283** | **280** | | | |
| | 1.40% | 0.40% | | **100.0%** | **100.0%** | | | |
| **Total** | **282** | **285** | | | | | | |
| | **100.0%** | **100.0%** | | | | | | |

** As the project's primary target groups are young girls and adult women, where school aged groups are mainly targeted through school clubs and other coalitions, a deliberate effort was made to capture the opinions of girls aged 13 and above.*

### *6.2 Institutional survey respondents*

The institutional assessment questionnaire was given to a total of 30 individuals representing various CBOs. Among the 30 respondents, 16 were female. 20 of the respondents had attended secondary school or higher. All 30 responded "yes" when asked, "Are there activities in your locality that work towards the abandonment of harmful traditional practices (like bride price, bride abduction and early marriage)?"

**Table 3: Distribution of institutional assessment respondents**

| Category/Representation | Zone | | |
|---|---|---|---|
| | W/Hararghe | Borena | Total |
| **Total respondents** | **14** | **15** | **29** |
| Community self-help Saving Groups (CSSG); | 14.3% | 20.0% | 17.2% |
| Peer groups of boys and girls; | 21.4% | 26.7% | 24.1% |
| Community paralegals; | 7.1% | 13.3% | 10.3% |
| School clubs | 21.4% | 0.0% | 10.3% |
| Voluntary Network Coalitions; | 7.1% | 6.7% | 6.9% |
| Parents and Teachers' Association (PTA) | 7.1% | 20.0% | 13.8% |
| Traditional/Gedastructures | 0.0% | 6.7% | 3.4% |
| Kebeles: HEWs | 14.3% | 6.7% | 10.3% |
| Others: Community conversation facilitator | 7.1% | 0.0% | 3.4% |
| | 100.00% | 100.00% | 100.00% |

# 7. Findings of the evaluation according to the key strategic objectives (SOs)

## *7.1 SO_#1 - Change community norms underlying the traditional harmful practices of early marriage, bride abduction and bride price*

### 7.1.1 Early marriage related issues:

### a) Perceptions and practices

Early marriage, as defined by Ethiopian law is the practice of engaging girls under the age of 18 for marriage.

When evaluation participants were asked to identify the commonly known facilitators of 'early marriage' in the community, among the 225 respondents in Borena Zone, 128 (57% ) identified parents/relatives of the would be husband, followed by the families of the girl. An agreement between the bride and the bride-groom was also identified by 28 participants (12% ) among the ways in which early marriage is facilitated in Borena. In the case of West Hararghe, the latter reason accounted for over a third of perceived early marriages there.

**Table 4: Commonly known facilitators of early marriage**

| Facilitators | Borena | | West Hararghe | |
|---|---|---|---|---|
| | n | % | n | % |
| Parents and relatives of the man | 128 | 56.90% | 124 | 51.20% |
| Parents and relatives of the girl | 69 | 30.70% | 36 | 14.90% |
| The bride and the bride-groom in agreement | 28 | 12.4% | 82 | 33.9% |

Close to 70% of respondents in Borena and 88% of respondents in West Hararghe agreed that the practice of early marriage is declining in their respective localities. In fact, in Borena, around 18% of respondents said they were unaware of the trend over the past three years.

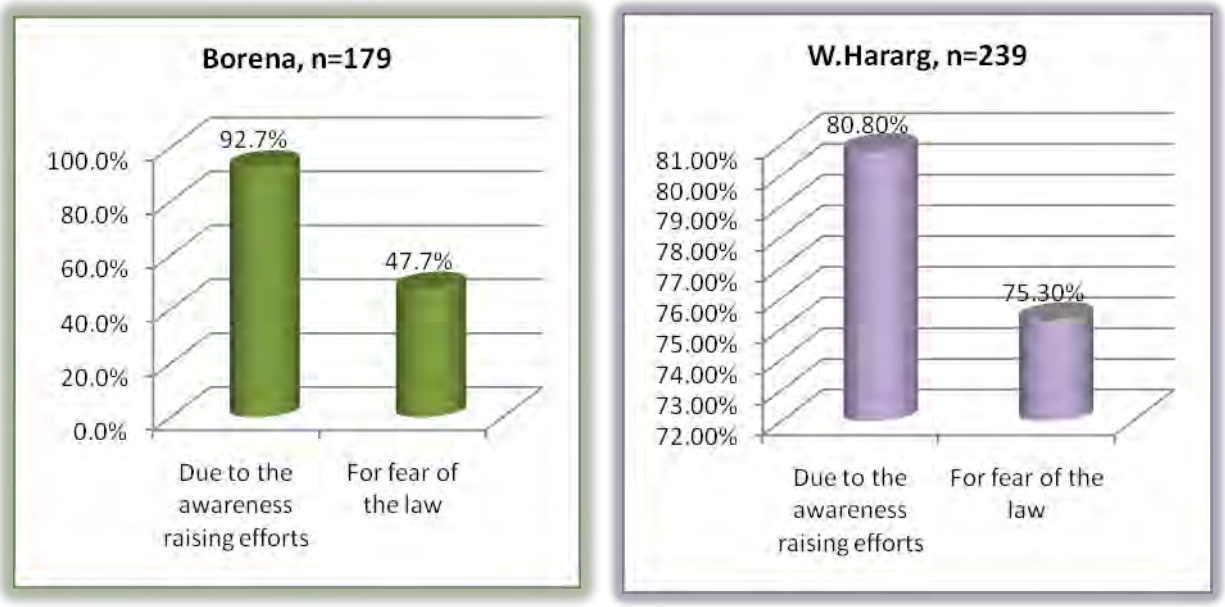
When respondents were asked to explain their reasoning for the declining trend, 93% in Borena and 81% in West Hararghe highlighted "awareness raising programs" in their localities. The other major reason indicated for this perception was "fear of the law" which prohibits marriage of girls below the age of 18. This "fear of the law" perception was much stronger in West Hararghe (75% ) than in Borena (48% ).

**Table 5:** Perceived trend of the practice of early marriage, in the last three years

| Trend | Borena | West Hararghe |
|---|---|---|

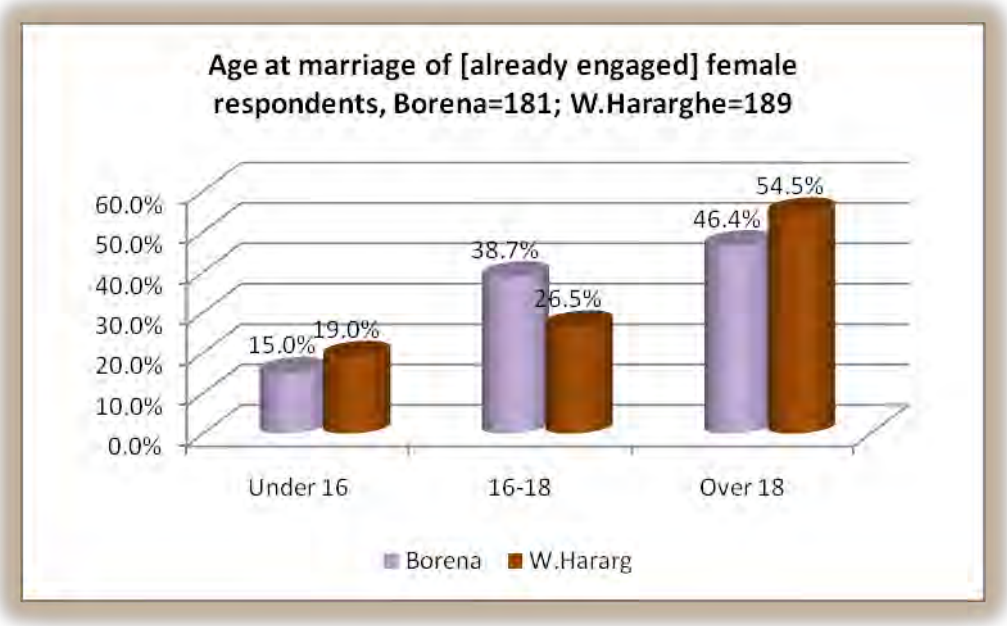
| | | |
|---|---|---|
| Decreasing | 68.6% | 88.3% |
| Increasing | 3.6% | 5.5% |
| No change | 9.9% | 5.5% |
| Don't know | 17.9% | 0.7% |
| Total respondents | 274 | 273 |

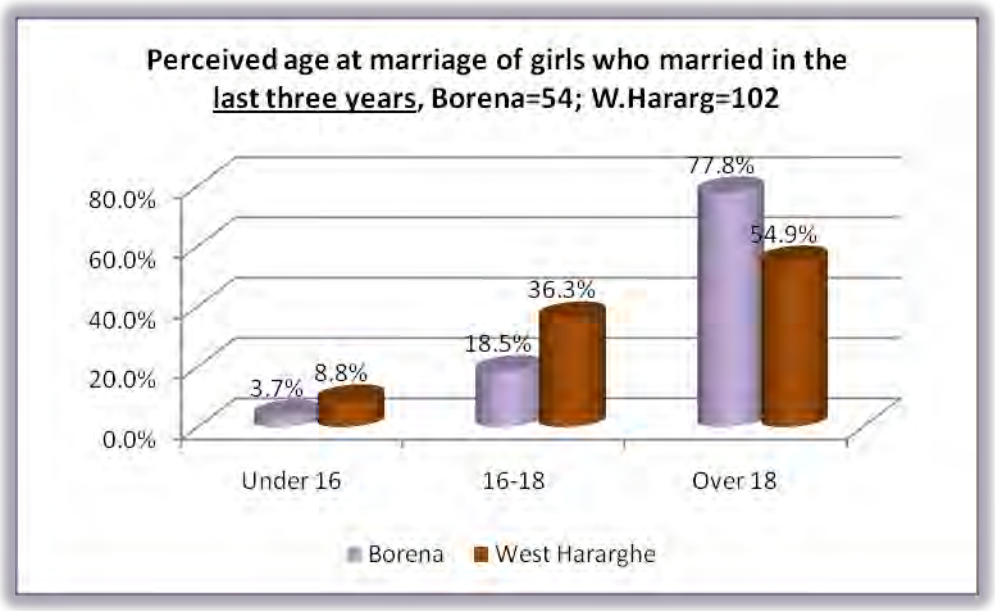
**Figure 1 and Figure 2:** Major reasons for "decrease" in trend ….




To confirm that the trend of practicing early marriage is declining, participants were asked if anyone in their family was married within the last three years, close to 20% in Borena and 36% in West Hararghe confirmed that at least one had. Among these HHs, 78% in Borena and 55% in West Hararghe responded that the recently married girl (who married in the last three years from their family/relatives) was over 18 at the time of marriage.

This data compared with the marriage age of already engaged female respondents can be used as to indicate a shift in girls' marriage age, particularly in Borena Zone. This is due to the fact that, as depicted in the two figures below, there is a decline in the first two age categories of marriage (i.e. under 16 and between 16 and 18) and a sharp increase in the group of 'over 18'.Figure 3 and Figure 4




When asked to indetify the possible consequences of early marriage for young girls, male and female respondents in the both zones listed the most common health problems related to early of sexual intercourse and the subsequent negative effects experienced during pregnancy, delivery, and post delivery. Thus indicating the quality [level and kind] of the awareness raising efforts..

During the baseline survey, the proportion of respondents' that asserted that 18 and over was the 'best age" for girls to marry was higher in West Hararghe (three quarters of respondents agreed)than in Borena where only 55% agreed. However, as the qualitative discussions indicated, the views improved inboth sites, this can be attributed to the awareness building and the resultingincrease in legal actions against perpetrators.

**Table 6:** Perception of respondents on the possible consequences of early marriage

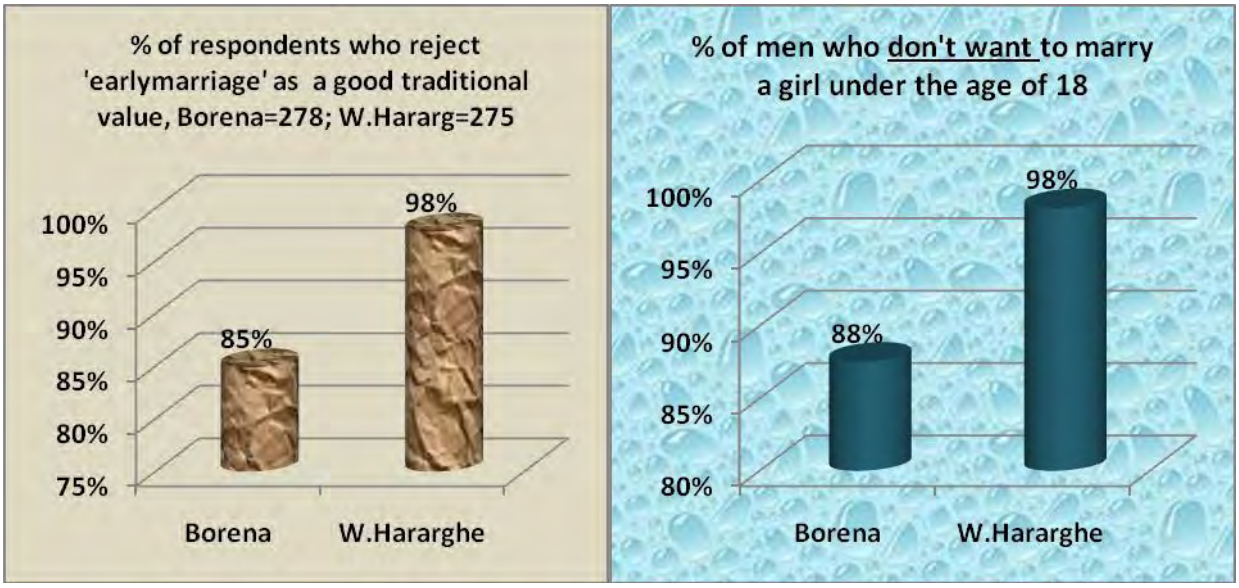
| Perceived reasons: | | Borena | | | West Hararghe | | |
|---|---|---|---|---|---|---|---|
| | | **Male** | **Female** | **Total** | **Male** | **Female** | **Total** |
| Long-term health problems on the girl | n | 37 | 143 | 180 | 45 | 147 | 192 |
| | % | 80.40% | 74.90% | 75.9% | 72.60% | 66.80% | 68.1% |
| Serious problems during pregnancy | n | 33 | 128 | 161 | 30 | 108 | 138 |
| | % | 71.70% | 67.00% | 67.9% | 48.40% | 49.10% | 48.9% |
| Life threatening problems and fistula occurrences during delivery | n | 35 | 92 | 127 | 48 | 154 | 202 |
| | % | 76.10% | 48.20% | 53.6% | 77.40% | 70.00% | 71.6% |
| Serious problems on the health of the fetus/new born | n | 17 | 70 | 87 | 30 | 121 | 151 |
| | % | 37.00% | 36.60% | 36.7% | 48.40% | 55.00% | 53.5% |
| Total | n | 46 | 191 | 237 | 62 | 220 | 282 |

## b) Attitude and intentions towards abandonment of early marriage

Respondents were asked whether they think the practice of 'early marriage' should be protected as a cultural value of their community. 85% of respondents from Borena and 98% from West Hararghe replied “No”.

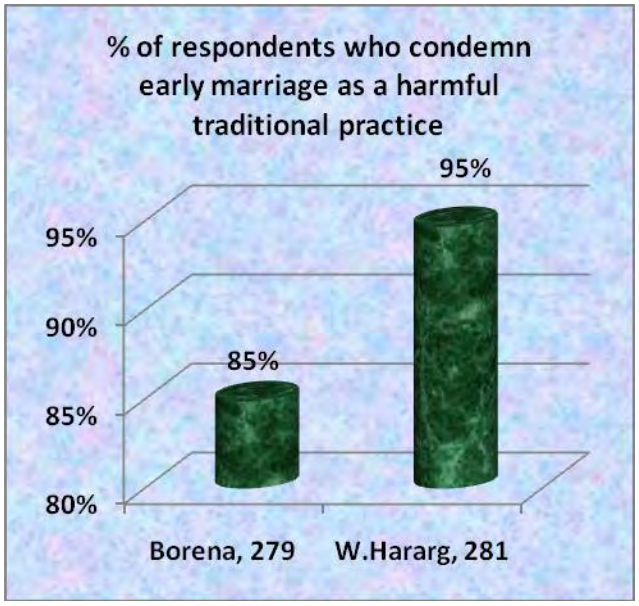
Also men were asked to express their opinion regarding the question, “given the chance, are you willing to marry a girl under the age of 18?”, 88% of Borena respondents and 98% of W. Hararghe responded “No.”

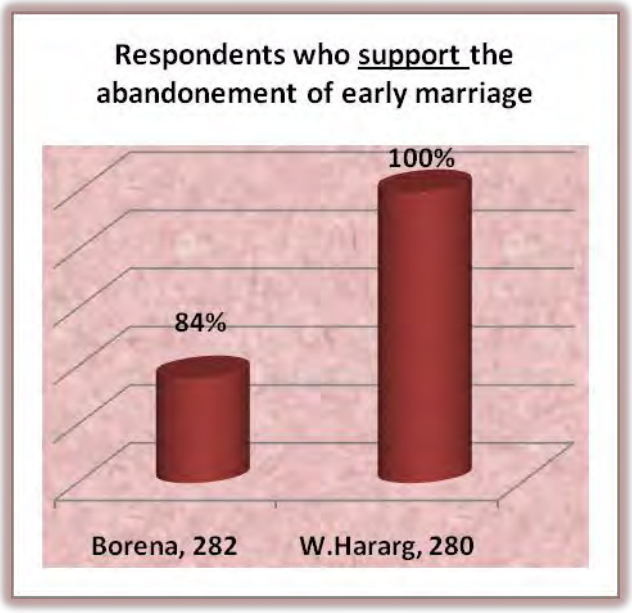
**Figure 5 and Figure 6**



Respondents were asked whether they condemn early marriage as "harmful" and if they support the abandonment of the practice in their community. The majority of respondents replied asserting that they condemned the practice as harmful and supported its abandonment.

**Figure 7 and Figure 8**




### 7.1.2 **Bride abduction related issues:**

**Local practices of Bride abduction:**

In Borena bride abduction is called "awadi". It is said to happen with the "consent" of the bride, but in actuality the girl is allured. The girl is told that she will have a "happy" life if she agrees to marry the proposed person. The person sent to lobby the girl could be a relative of either of the would-be-husband, or the girl. The person is also sometimes a friend of the family or someone trusted in the community [usually women]. The person sent to facilitate the "awadi" raises the interests of the girl, by telling her false stories about the potential husband (about his wealth, physical appearance, social status, etc). At times, the girl is shown a young, good looking man from a distance as her future husband.

As a result, the allured girl agrees to marry the "unknown/proposed man" and hence "willingly gives" her hand in marriage. However, when she arrives at her new home, to her dismay, the actual husband may be elderly, in his 70s or 80s, a disabled person with lost his sight or disabled limbs, or a poor man who may not be able to support the family. Regardlessby time the arrangement gets to this point, the girl ***"***cannot go back***".***[2]

[2] *p.s. – Please note that unlike in many other places, there is no forceful act, per se, to abduct a bride in Borena culture.*

The term for bride abduction in West Hararghe is **"**Cabsaa**"**, meaning "breaking". A group of youngsters 'forcefully break' into the house, where the girl lives, and insiston the girl's hand in marriage. Customarily, denying the requests of the "cabsaa" group causes "dishonor" to the family. Therefore, the family/parents 'agree' to the marriage and allow the girl to go with the "cabssa" group, irrespective of her interests.

## a) Perceptions and practices

Among the 280 respondents in W. Hararghe during the evaluation, only 6% acknowledged that "cabsaa" (a local term for bride abduction, as a forceful act) is currently practiced in their locality. At the time of the baseline 15% acknowledged the practice.

In Borena, where according to culture a girl is not forcefully abducted a large proportion of respondents during the baseline replied that abduction (in the form of open violence against the will of the girl) is not practiced in their locality. However, during the evaluation, which considered the local context of abduction, i.e. "awadi", 54% disclosed that it is still practiced. Yet, as observed during the key informant interviews and FGDs, many admitted that it is among the practices of the community which are on decline due to interventions by the government, non-governmental actors, and community level initiatives such as those occurring in schools and CBOs. In addition, 61% of the respondents during the evaluation perceived "awadi as declining in their locality. (see fig. 11 below)

**Figure 9**

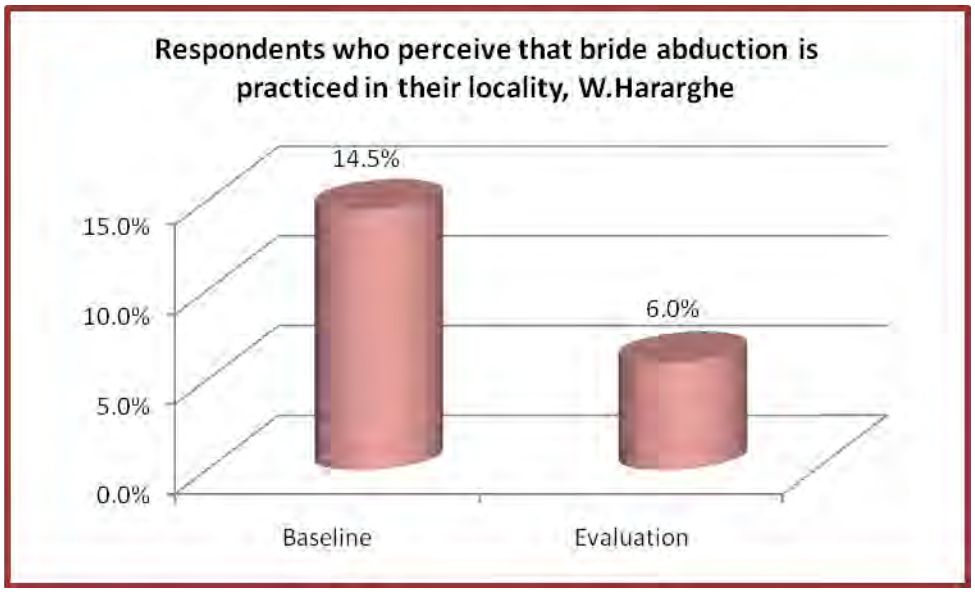
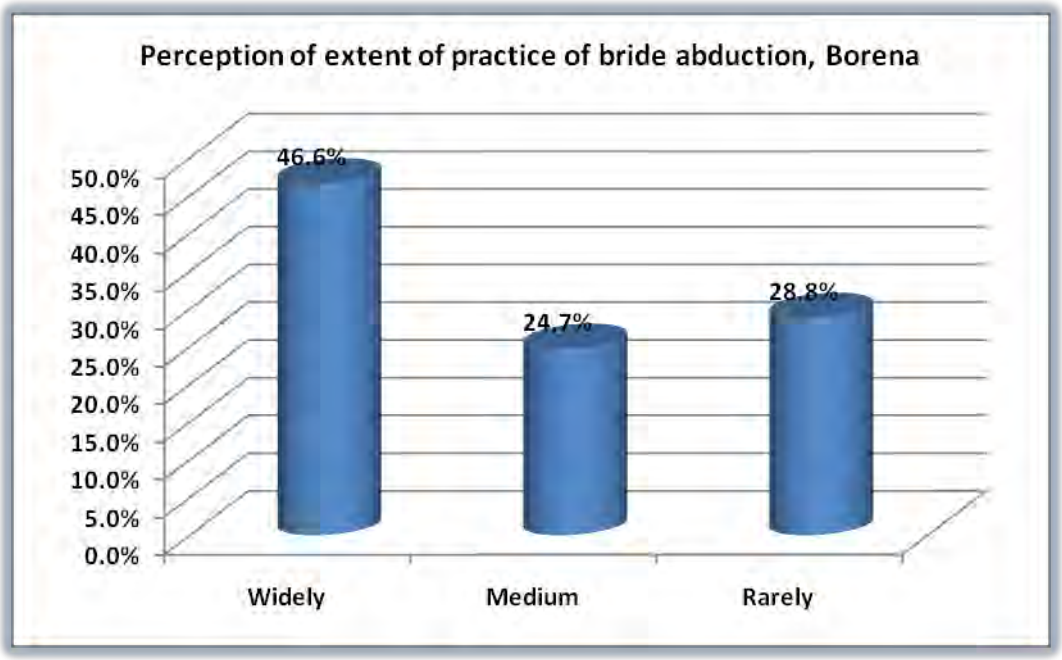


**Figure 10**

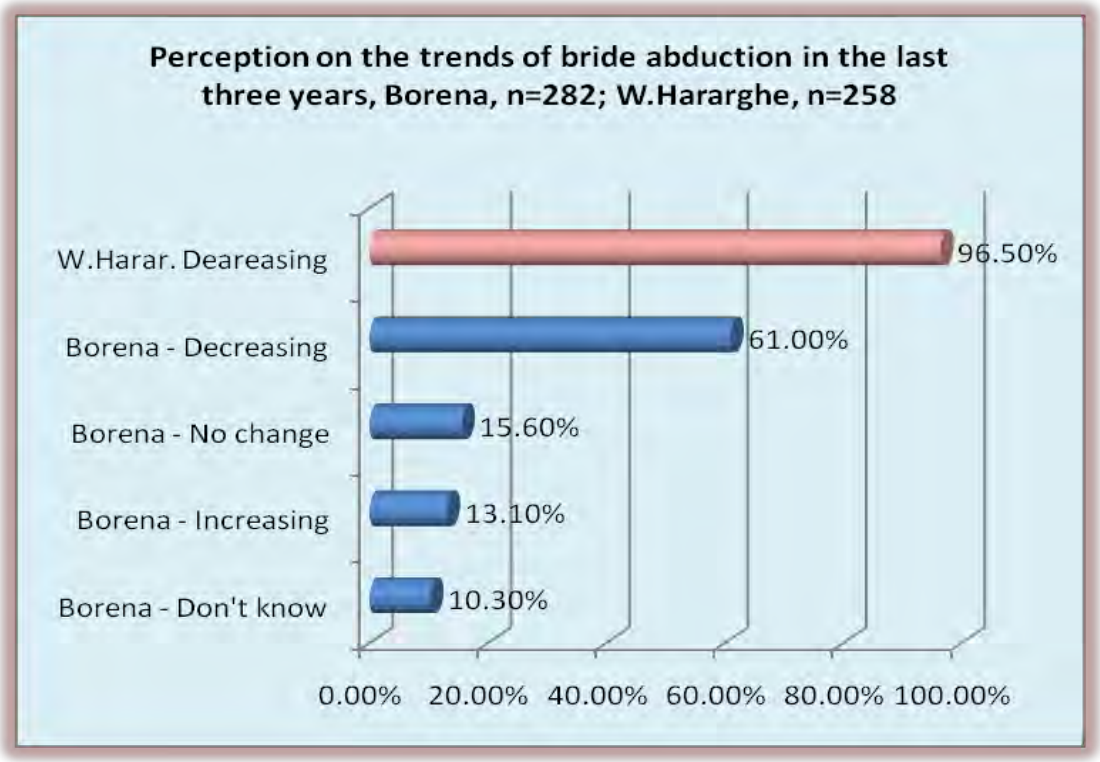



When asked, "Who usually performs or facilitates the 'awadi'?" over 85% confirmed that it is mainly the husband-to-be's cadre (including friends, relatives, and/or parents). The remaining 15% identified involvement of the girl's family/relatives. The arrangement was also said to be made through an internal agreement between the bride and the bride-groom.

97% of West Hararghe respondents stated that bride abduction had decreased over the last three years. In Borena, only 61% stated that awadi" has been decreasing over the past three years. 95% of those who said the trend has declined stated that this decline was attributable to the "awareness raising program" in their locality. West Hararghe respondents mentioned awareness programs as responsible for the decline as well, but 27% also said that "fear of the law" was a another reason for the decline.

The major difference, among the two intervention zones, in the reasons/explanations given for the 'decline' in the trends might be due to the nature of abduction exercised in each local. In Borena there is supposed 'consent of the bride' while in West Hararghe 'force or coercion'' is admittedly involved. Therefore, in West Hararghe there is greater opportunity for law enforcement bodies to act due to the relative ease of detecting the practice.

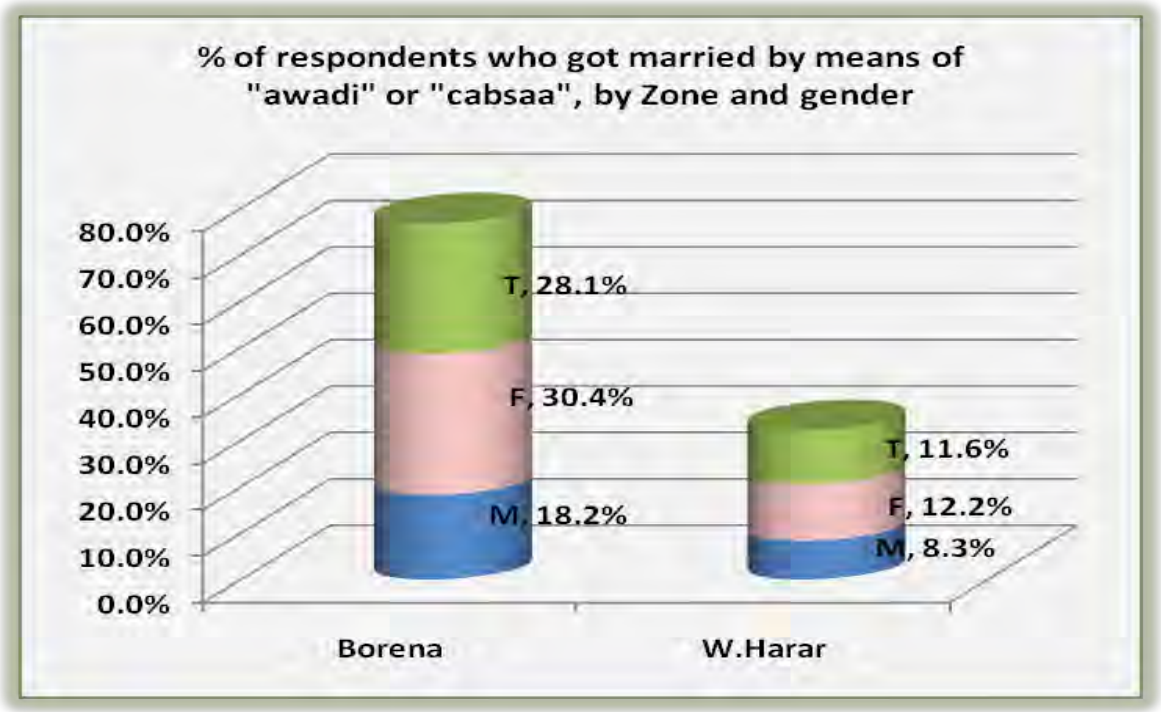
**Figure 11**

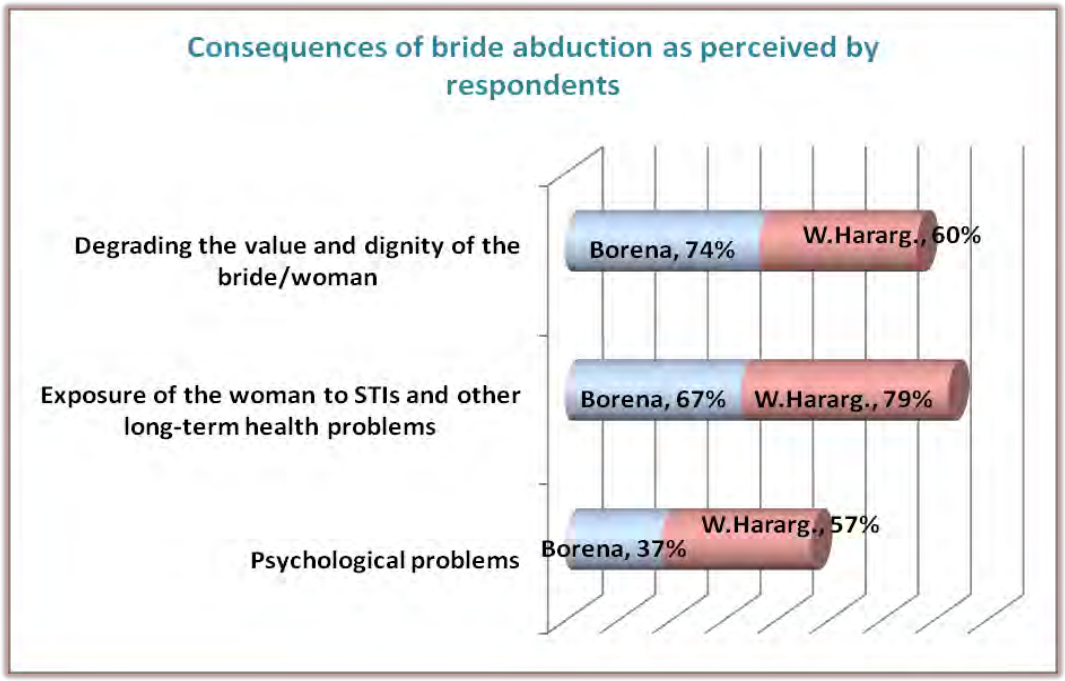



Among the married participants of the evaluation study, 28% in Borena and about 12% in West Hararghe disclosed that their marriage was the product of abduction ("awadi" and "cabsaa" respectively).

Regarding knowledge on the possible consequences of abduction, 74% of respondents from Borena acknowledged that the practice [of "awadi"] degrades the value/dignity of the woman. Over two thirds felt that it would have a negative impact on the long-term health condition of the victim. The West Hararghe respondents emphasized the mental health consequences of the practice asthey acknowledged the negative psychological effects of the practice asserting that the practice robs girls/women of their dignity. During the baseline, the majority of respondents of both intervention zones acknowledged that abduction posed health risks for the girl.

**Figure 12 and Figure 13**



## b) Attitude and intentions towards abandonment of bride "abduction"

When respondents were asked about their attitudes towards preserving the practice of "awadi" or "cabsaa" in their respective localities, about 56% in Borena expressed that it should not be protected "among the good cultural values of the community" while nearly all (98.2% ) from West Hararghe responded that it should not be preserved.

Similarly, almost all respondents (98.4% of men and 96.3% of women) from West Hararghe and 81% of men and 65% of women from Borena asserted that they have no intention of being involved in abduction. Note that about 29% of the females in Borena still have the intention to facilitate "awadi" in some way, allowing for the practice to continue behind closed doors.

**Figure 14: Response for the question: "do you think that the tradition of abducting girls should be protected as among the good cultural practices/values of your community?" by Zone:**

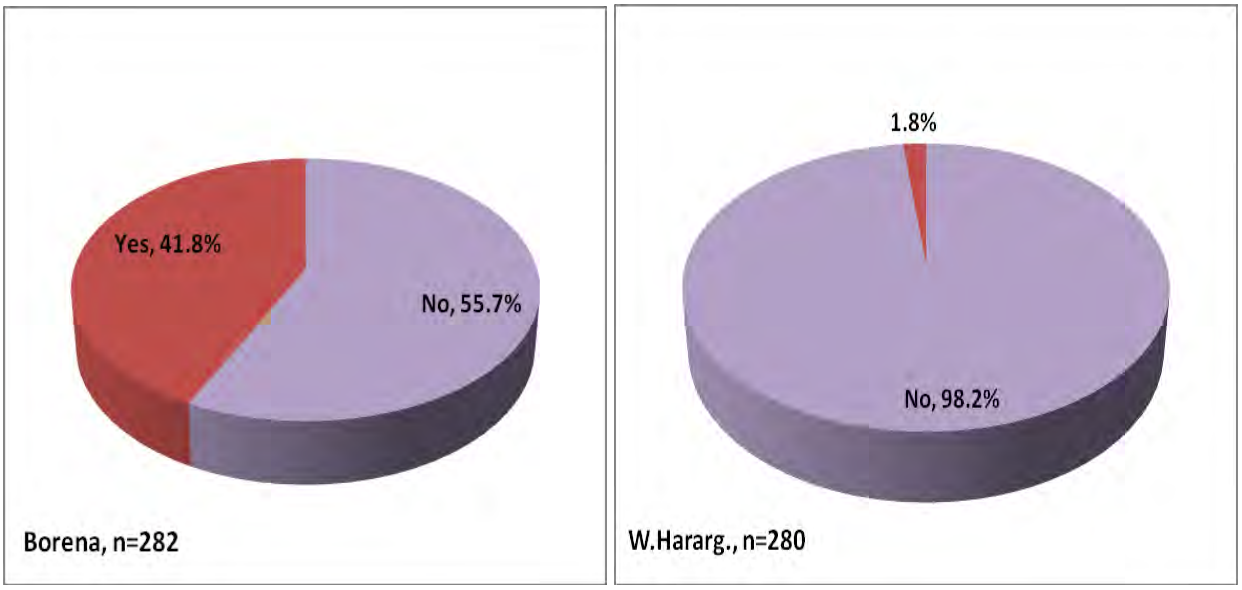
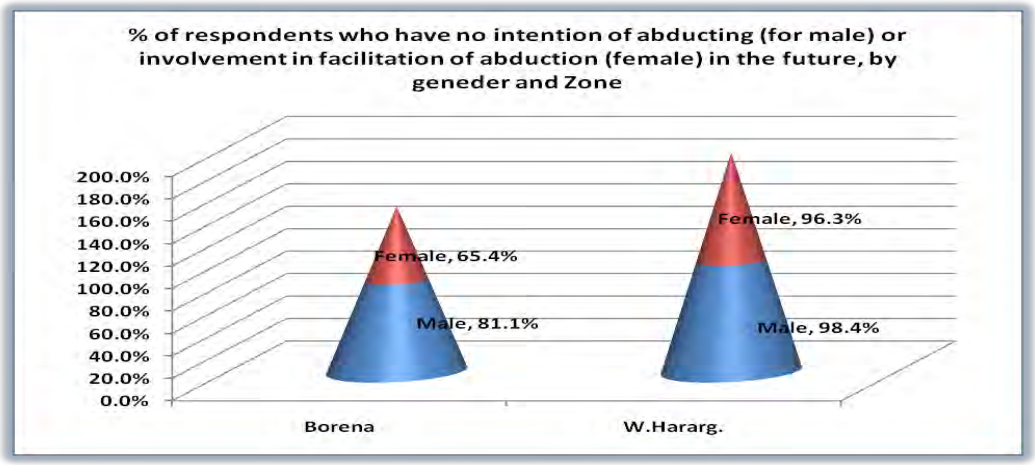
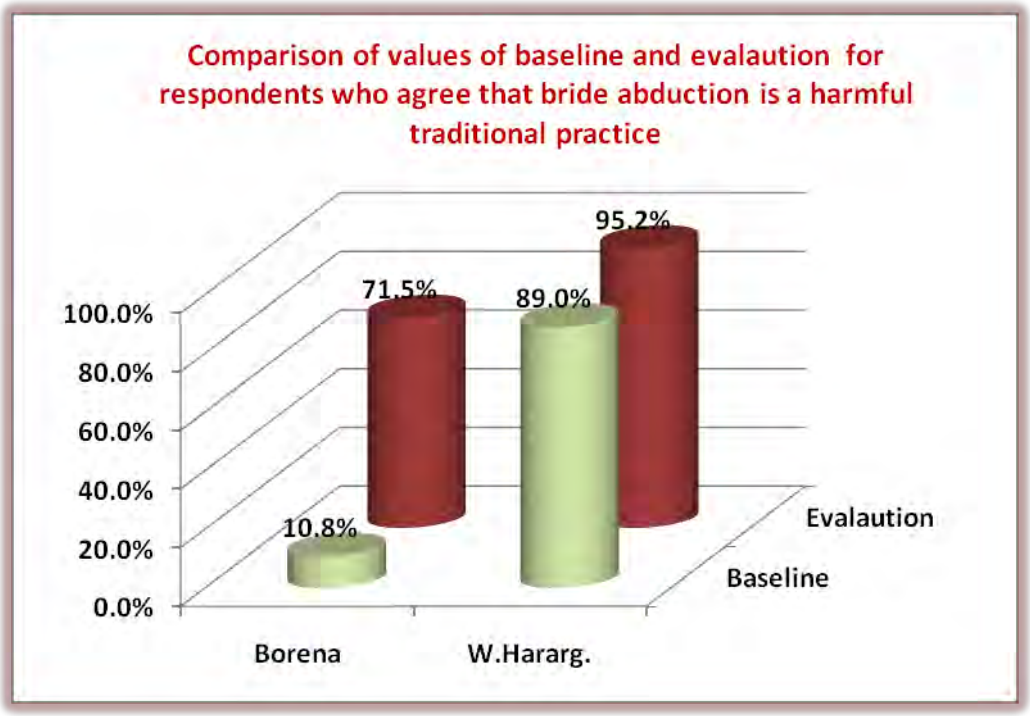



**Figure 15**



In fact, over 70% of respondents in Borena, labeled the practice of bride abduction or “awadi” as a “harmful traditional practice”, but some of these same respondents argued for preserving the practice as part of the communitiy’s cultural heritage. Note that at the time of the Borena baseline survey 11% of respondents labeled the practice of bride abduction as an HTP, but at the end of the HU project, 72% labeled the practice harmful. Perceptions have changed over the three year project life.

**Figure 16**




Among those directly asked their views on the abandonment of bride abduction [in their local context], two thirds from Borena and all from West Hararghe stated that they “support abandonment”. It is interesting to note that a larger proportion of women than men support the practice despite the fact that they are the primary victims. This could therefore indicate a need for future strategies to reach women in particular.

**Figure 17**

### 7.1.3 **Bride price related issues:**

**Bride price –** called "Qarratta" in Borena and "Gabbara" in West Haraghe represents the money/cattle (a minimum of 3 cattle in Borena; varying degrees of cash and gifts in West Hararghe) given to the family of the bride, as a present for the marriage. Once the family receives the bride price and the marriage is concluded, particularly in Borena, the fate of the girl/wife is decided by the husband and his family. Even, after his death [in Borena], she might never remarry and if she does the children born from her new husband will retain the name of the deceased ex-husband.

## a) Perceptions and practices

Among the 283 respondents in Borena, about 60% perceived bride price to be a common practice in their locality. InWest Hararghe, about 34%perceived bride price to be acommon practice. The 60% of Borena respondents represents a large drop from nearly 100% of respondents who thought the practice common at the time of the baseline. In West Hararghe, the drop in perception was a little more than 6%, not nearly as drastic of a change.

Those who acknowledged that bride price practices are common, catergorized the frequency with which they were practiced using three categories—rarely practiced, moderately (medium) practiced, and extensively/widely practiced. In Borena, 40% of respondents rated frequency as extensive/widely while in West Hararghe only 20% of respondent catergorized the of bride price as widely practiced. Most respondents in West Hararghe said the practice was done at a moderate level.

**Figure 18**

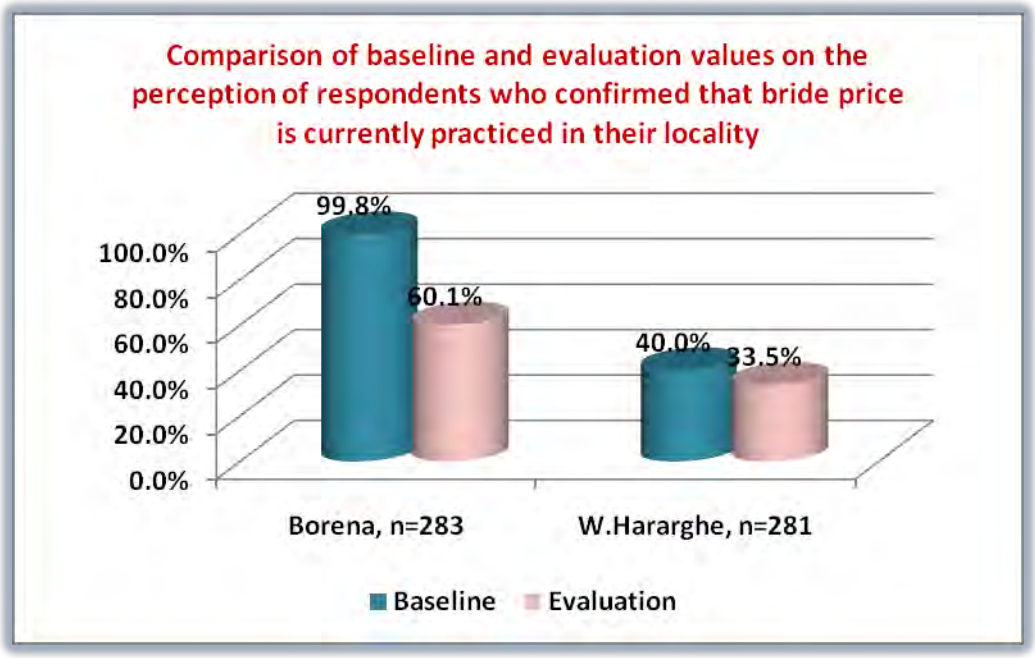


**Table 7: Perception towards extent of the practice of bride price**

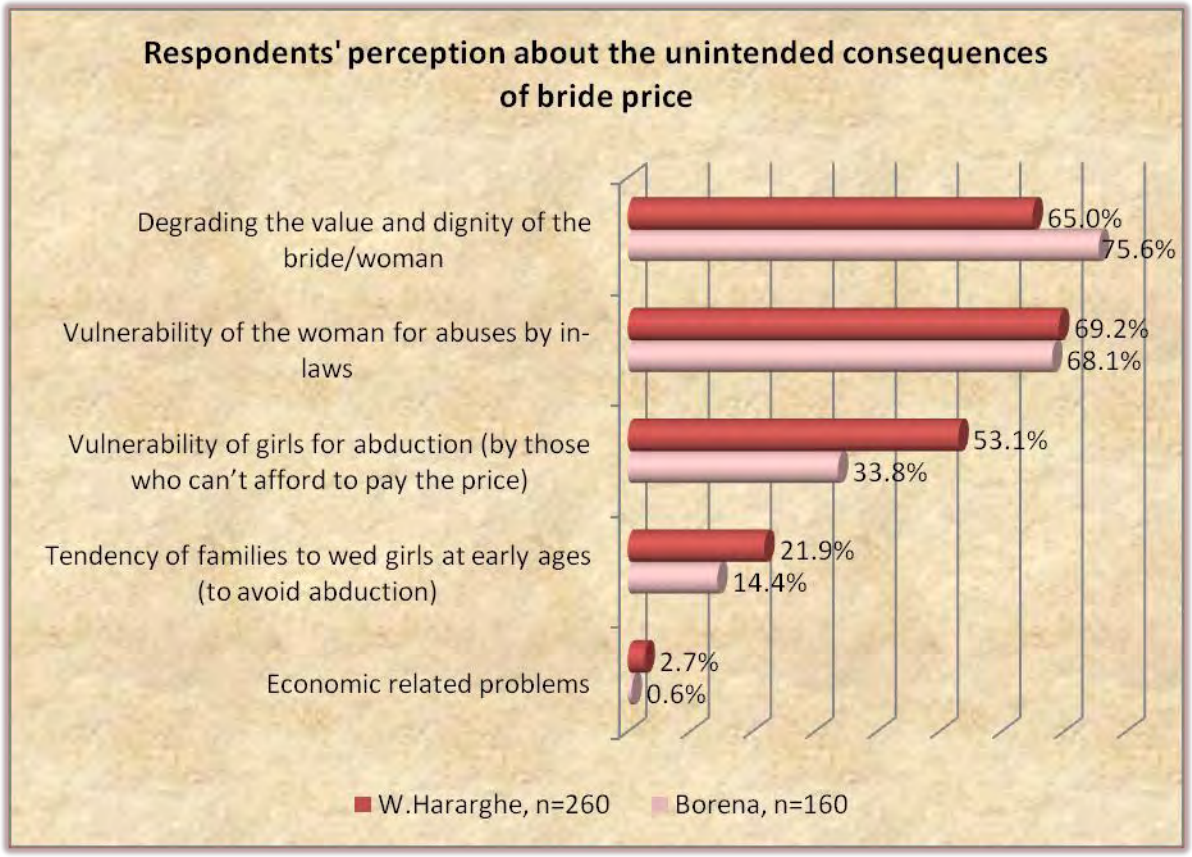
| Extent of practice | Borena (n=166) | West Hararghe (n=80) |
|---|---|---|
| Extensively/widely | 41.0% | 18.8% |
| Medium | 25.3% | 55.0% |
| Rarely | 33.7% | 26.2% |
| Total | 100.0% | 100.0% |

In conforming with the perception of respondents regarding the prevalence and magnitude of bride price, 92% of participants in the West Hararghe HH survey responded that there has been a decline in the last three years while only two thirds in Borena confirmed the same. In Borena 11% of participants felt that the practice is "increasing" while 18% expressed "no change". Among the respondents who perceived a "decreasing trend" in the practice of bride price, about 98% in Borena and 84% in West Hararghe explained that the decline is primarily due to the intensive "awareness raising program" held in their localities.

When the evaluation participants were asked about their perceptions regarding the possible negative consequences of bride price, 65% in West Hararghe and 76% in Borena identified that the practice "degrades the value and dignity of the girl/woman", followed by increased "vulnerability of the bride for abuses by her in-laws", because she is considered as "property of the family". About a third of respondents in Borena and over half in West Hararghe expressed that the practice fuels bride abduction (in alocal context) encourage early marriage facilitated by parents to avoid potential abduction.

These reasons indicates community member's understanding of the issue from a human-rights' perspective and an awareness of the link between the practices of bride-price, abduction, and early marriage.

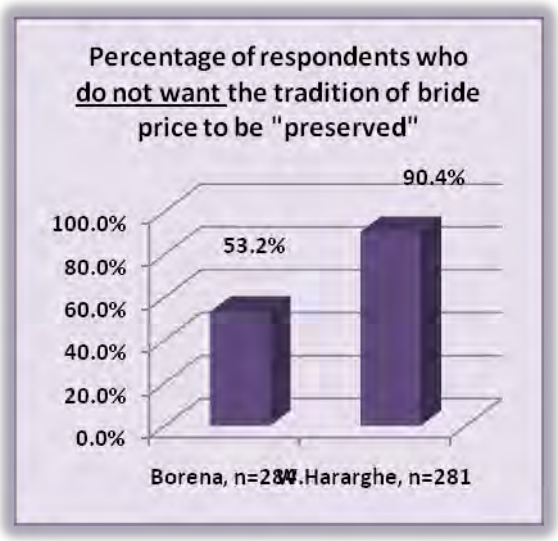
**Figure 19**

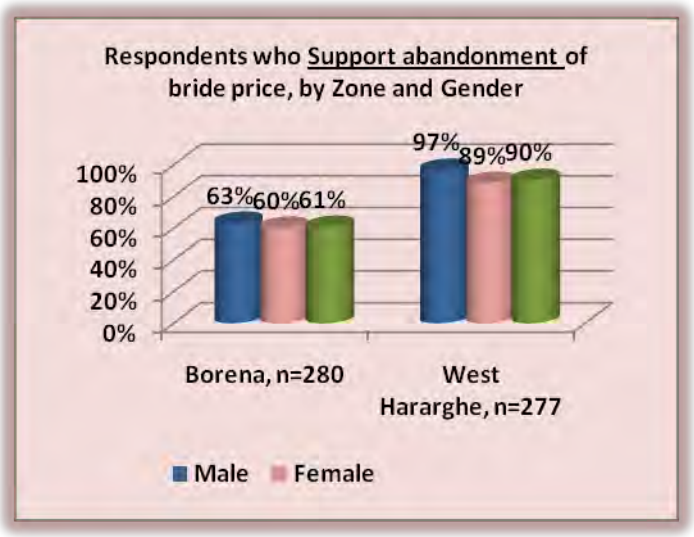



## b) Attitude and intentions towards abandonment of bride price:

When respondents were asked whether "the tradition of paying/receiving a bride price should be protected" as a community cultural practices/values, 45% (of 282 participants) from Borena Zone responded that it should be "preserved among the good cultural practices/values of their community." This group accounted for only about 10% of West Hararghe participants.

**Figure 20 and Figure 21**



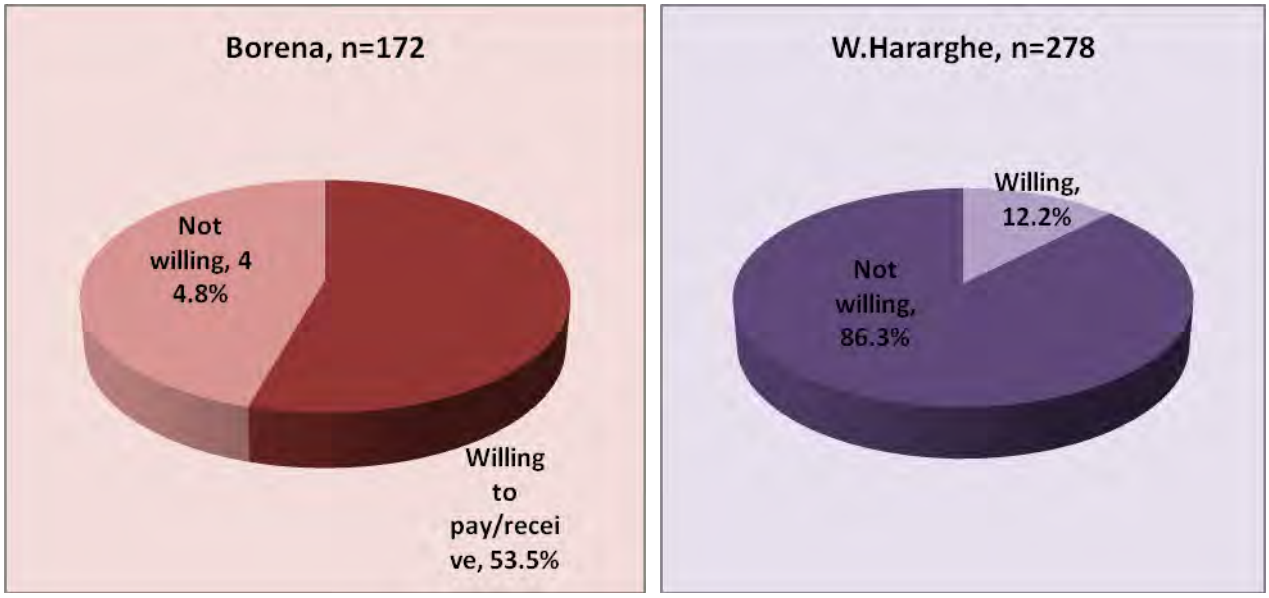

The data revealed that the older the respondents, the higher their support for preserving the custom of bride price. Furthermore, the younger the respondents, the lower their support for the bride price custom. In other words, the newer generation is not as interested in preserving the tradition of paying/receiving bride price among its valued community norms as much as are older generations. This supports the idea of investing in the younger generation to achieve social change.

Overall, there are many respondents in Borena who do not support the abandonment of the practice. In general, however, among those who support the abandonment, in both zones, it appears that men are relatively more opposed to the bride price practice than their female counterparts.

**Figure 22**

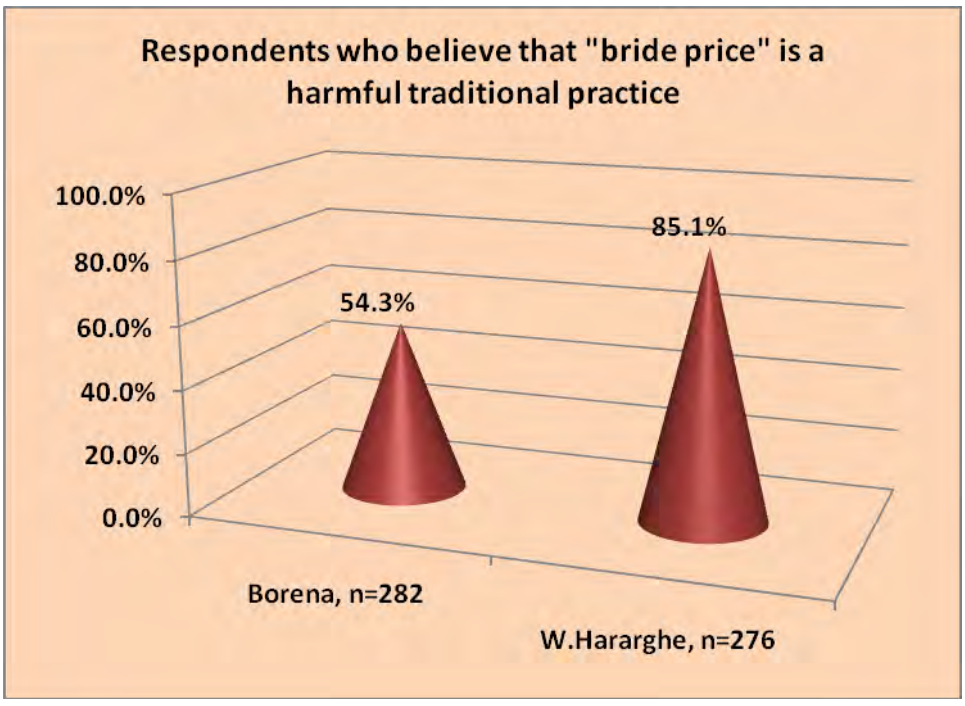

Respondents who do not want the practice of bride price to be "preserved", by age category - Borena
80.0%
70.0%
60.0%
50.0%
40.0%
30.0%
20.0%
10.0%
0.0%
73.3%
63.3%
53.3%
46.4%
44.0%
38.1%
<16
16-20
21-30
31-40
41-50
Over 50

**Figure 23 and Figure 24: Intention to pay/receive bride price in the future, by Zone**




54% of Borena participants responded that they were willing to pay or receive a bride price in the future. Yet, in West Hararghe only 12% said they were willing to do the same. These results support the data which reveal that 54% of Borena participants versus 85% of West Hararghe respondents believe the practice of "bride price" is a harmful traditional practice. In other words, greater numbers in Borena are willing to practice bride price traditions and are less convinced it is harmful where as in West Hararghe few participants said they are willing to participate in the practice and a large number acknowledged the practice as harmful.

**Figure 25**



The practice of paying/receiving a bride-price is perceived by the majority of the respondents as a declining trend in both intervention sites. Most importantly, the majority of respondents viewed the negative consequences of bride-price from a human rights perspective and identified its link to abduction and early marriage. This indicates the success of the HU project in increasing knowledge and changing attitudes.

Despite these results, given the attitudes of a significant portion of the respondents (about 45%) towards preserving the practice of bride-price among the cultural values of the community, and the relatively high intention to pay (53.5%, it can be concluded that there is a lot more to be done. This is particularly true among the "older" age cohort in Borena due to their strong influenceon the community. West Hararghe, in many aspects, has shown a higher rate of positive responses towards the objectives of the HU project as baseline data compared to the end-term evaluation data shows significant changes in community perceptions.

**Discussions with Community members and influential individuals:**

The views expressed by community members regarding the HTPs targeted in the HU project differ greatly. Below are some excerpts of interviews and FGDs, provided to give insight on the types of responses participants gave.

> A Geda leader form Borena comments that "we used to consider 'qarataa' [which is different from bride-price in their context] as one of our cultural values. But as time passed on, the community started to practice it in the wrong way. According to our culture, 'qarataa' is equivalent to a marriage license or a way of confirmation that the girl is given in marriage to the proposed man. However, in the case of the current notion of bride-price, it is being practiced in the form of income generation. Therefore, we will keep on educating the community that bride price is different from qarataa and will work towards stopping the community from practicing one in the name of the other."

Most of the FGD participants acknowledged the harmof early marriage, and to some extent those of "awadi." . Some in the group argued that the practice of bride price is not harmful. FGD participants shared differing views regarding bride price such as:

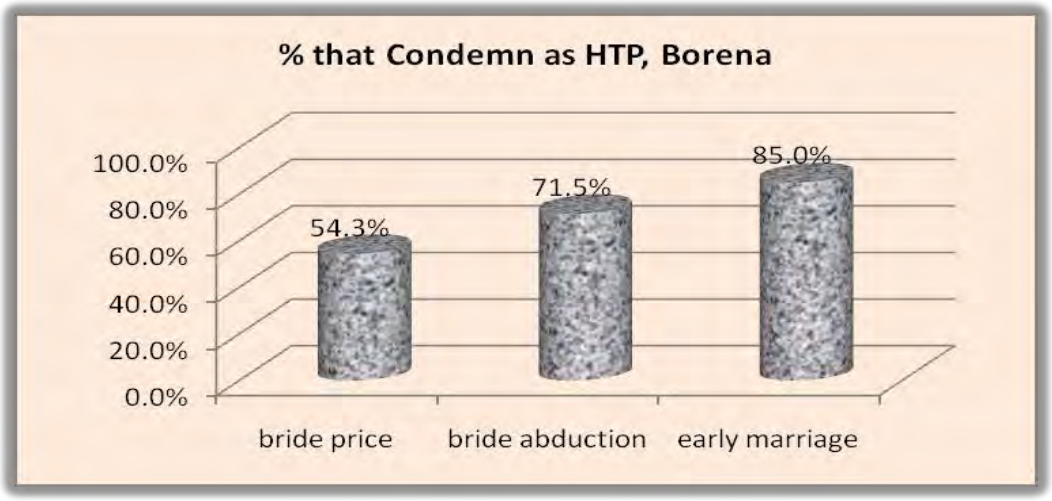
> "receiving and paying a bride price is not harmful. Since I belong to the '*Geda* clan I asked my family whether receiving or paying bride price is harmful or not, and I learnt that it is not."

> "Bride price deprives the right of women which they are entitled by the existing legal provisions. The deprivation due to bride-price goes up to her in-ability to request for divorce, no control over properties and the like."

> , "although it deprives the rights of the girl/woman, it still has benefits for the party receiving it. It is one way of building family asset."

In West Hararghe, a representative of a Woreda Government Office commented that “even if there is no law that prevents bride price in the locality, the community banned it by themselves because of its indirect effect on bride abduction and early marriage.”

**Figure 26, Figure 27 and Figure 28**



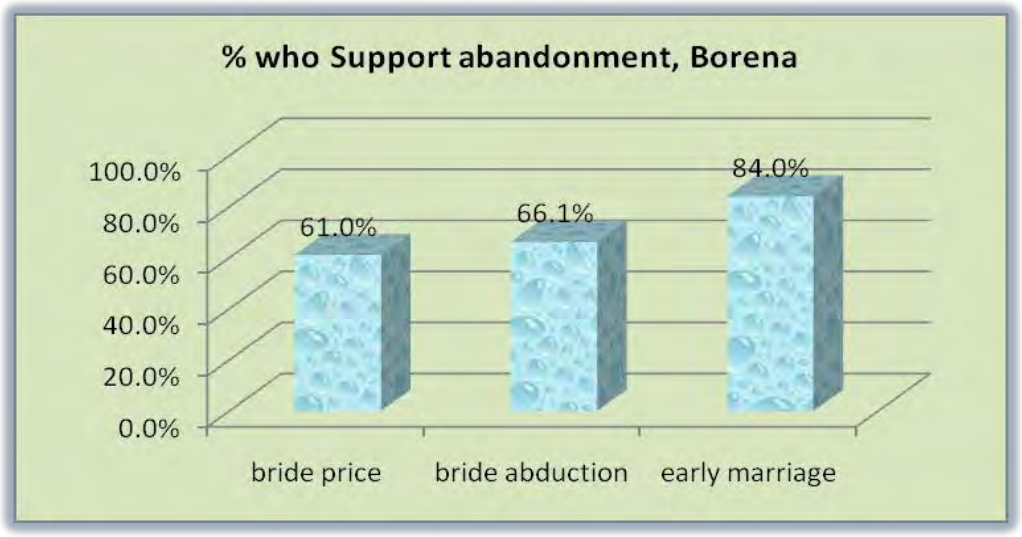
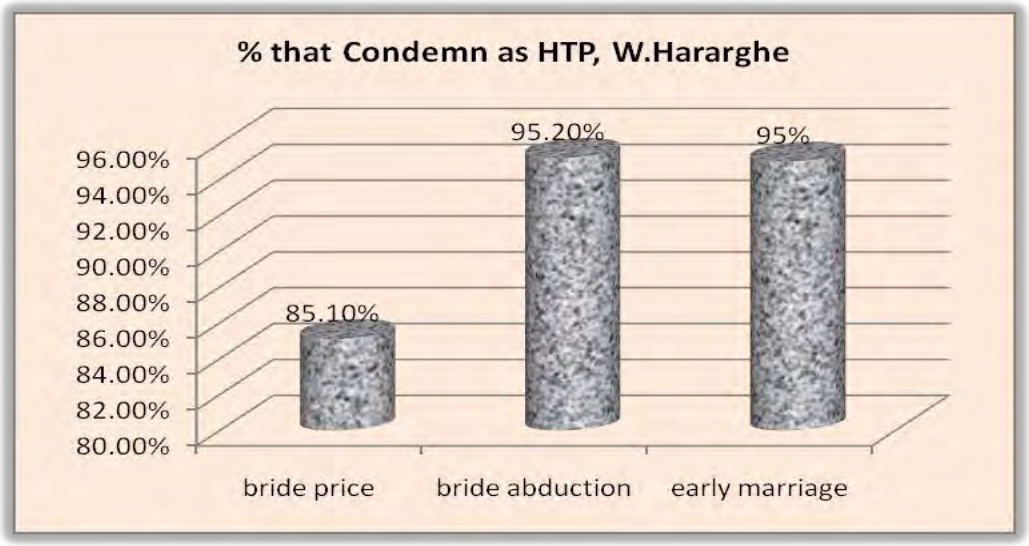




**Figure 29, Figure 30 and Figure 31**





### *7.2 SO_#2 - Increase <u>the capacity and political will</u> of local actors to take collective action against harmful traditional practices such as bride stealing, bride price, and early marriage*

**General awareness and role of different local groups towards the targeted HTPs:**

The targeted local actors were mainly composed of government offices, community self-help saving groups (CSSG); boy and girl peer groups; community paralegals; school clubs; voluntary network coalitions; Parents and Teachers Associations (PTA), traditional and religious leaders including Aba Gedas, ebeles and HEWs, as well as community conversation facilitators.

When representatives of CBOs and coalitions were asked whether there were HTP activities occurring in their localities over the last three years, almost all participants from the Borena and West Hararghe sites confirmed the occurrence. When asked to identify the actors, among government offices, actively engaged in addressing HTPs, respondents primarily mentioned the Ministry of Women's Affairs zonal office, followed by the Ministry of Education zonal office, the Health Extension workers, The Ministry of Justice zonal office and police. Among community based institutions, faith communities, traditional influential people including Aba Gedas, CSSGs, women's cooperatives, community paralegals and Affosha (Iddirs) were mentioned as actively involved groups. Participants mentioned ESHE (USAID project), Goal Ethiopia, AFD, EGLDAM and CARE as organizations and NGOs working on HTP focused interventions through a range of activities from funding to field-level implementation.

As shown in the table below, when CBOs were asked to identify their respective roles in the effort to address the practices of bride-price, bride abduction and early marriage, most of them identified themselves in the correct category, indicating an acceptable level of project coordination.

**Table 8: Perceived roles of CBOs**

| Category/Representation | Perceived role in the community | |
|---|---|---|
| | Educating the community /girls | Reporting to legal bodies, when violations occur |
| Community self-help Saving Groups (CSSG); | Borena, W.Harargе | W.Harargе |
| Peer groups of boys and girls; | Borena, W.Harargе | |
| Community para legals; | Borena, W.Harargе | |
| School clubs | Borena | Borena |
| Voluntary Network Coalitions; | W.Harargе | Borena |
| Parents and Teachers' Association (PTA) | Borena, W.Harargе | W.Harargе |
| Others: Community conversation facilitator | Borena | |
| Geda/Traditional leaders | Borena, W.Harargе | |
| Health Extension workers | Borena, W.Harargе | W.Harargе |

**Local capacity enhancement:**

CBO respondents' knowledge of the laws related to the three focus HTPswas found to be accurate. They were aware of the existence of a national article that prohibits these focus HTPs, regardless of what is legimized by local law. For most, the source of this knowledge was CARE Ethiopia platforms, including formal trainings.

Zonal and woreda-level representatives of the of the Borena Ministry of Women's Affairs, Ministry of Justice, and Ministry of Education highlighted the role of CARE Ethiopia in building the incidence reporting capacity of local institutions through educating the community onvarious media, (such as film shows, radio broadcasts etc.), establishing a pastoralist women's forum, conducting trainings with different social groups, organizing women in saving groups (CSSGs), posting billboards bearing the picture of Geda leaders with strong anti-HTP messages, songs with anti-HTPs themes in the appropriate Oromo languages, and supplying of materials to school anti-HTP clubs. In addition, the discussants in the FGD of CSSG category disclosed that "CARE has been playing a vital role in empowering the capacity of girls/women so as to make them economically independent. In line with this, it has conducted trainings on how to commence saving and also provide supports to establish a number of saving groups." The CSSG FGD added that the CARE project in Borena has done more to fightHTPs than any other actor in the locality.

Participants also appreciated the support of the HU project in organizing women into CSSGs as this has brought extended benefits at the HH level. A kebele leader disclosed that after his wife received training in financial management through the CSSG initiative she was "given the responsibility to manage the family finances." He also noted that she has increased capacity to make wise financial decisions for the household and finished by saying that he does not "buy or sale any asset without her knowledge."

A network member described the support given from CARE Ethiopia to their groupas part of the local capacity building efforts as follows: *"we were given various trainings about HTPs. Besides, the project [showed] us the way to work with school anti-HTP clubs, so that we educate the community through drama during the opening and closing times of schools. We were also supplied with important materials such as [an] amplifier for club works."*

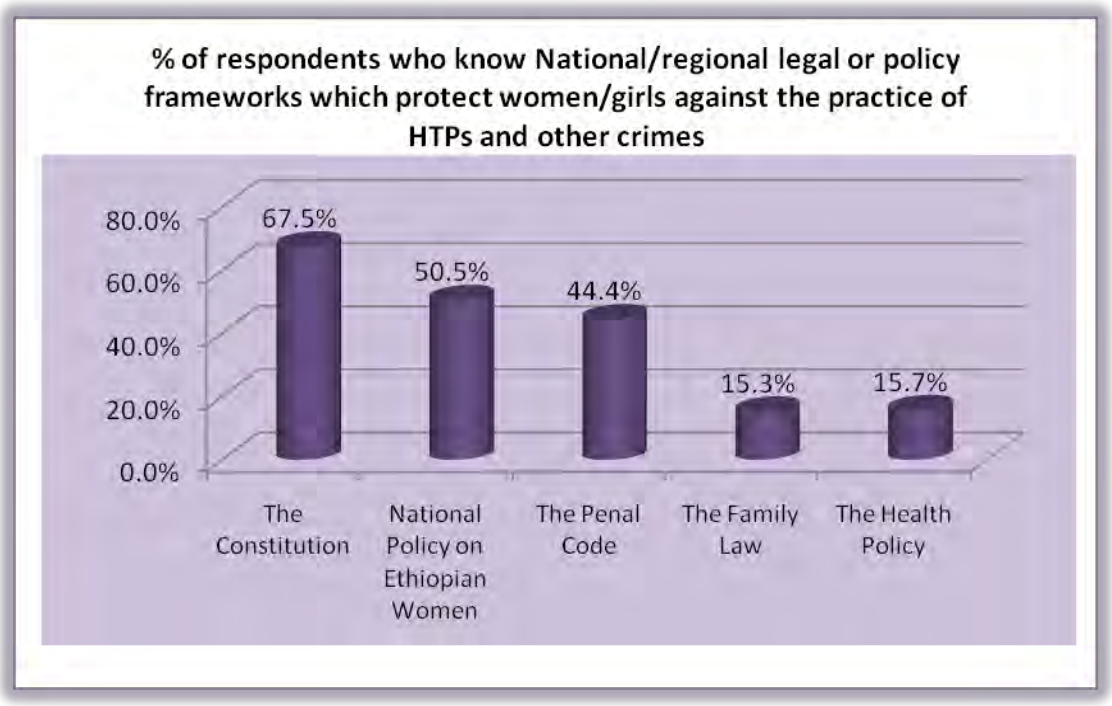
CARE Ethiopia's project staff commented that since local institutions are the backbone of all project implementation, we consistently provided training to raise their awareness and help them stand against HTPs. Also, CARE has worked closely with school anti-HTP & anti-AIDS clubs and provided them with different materials that help them effectively educate the community at large. With the objective of empowering women, CARE has trained women and assisted them in establishing savings groups.

## *7.3 SO_#3 - Advocate for the enforcement of laws that reduce the incidence of bride price, bride kidnapping and early marriage*

### 7.3.1 Respondents' knowledge of the law and its enforcement – in relation to the three HTPs:

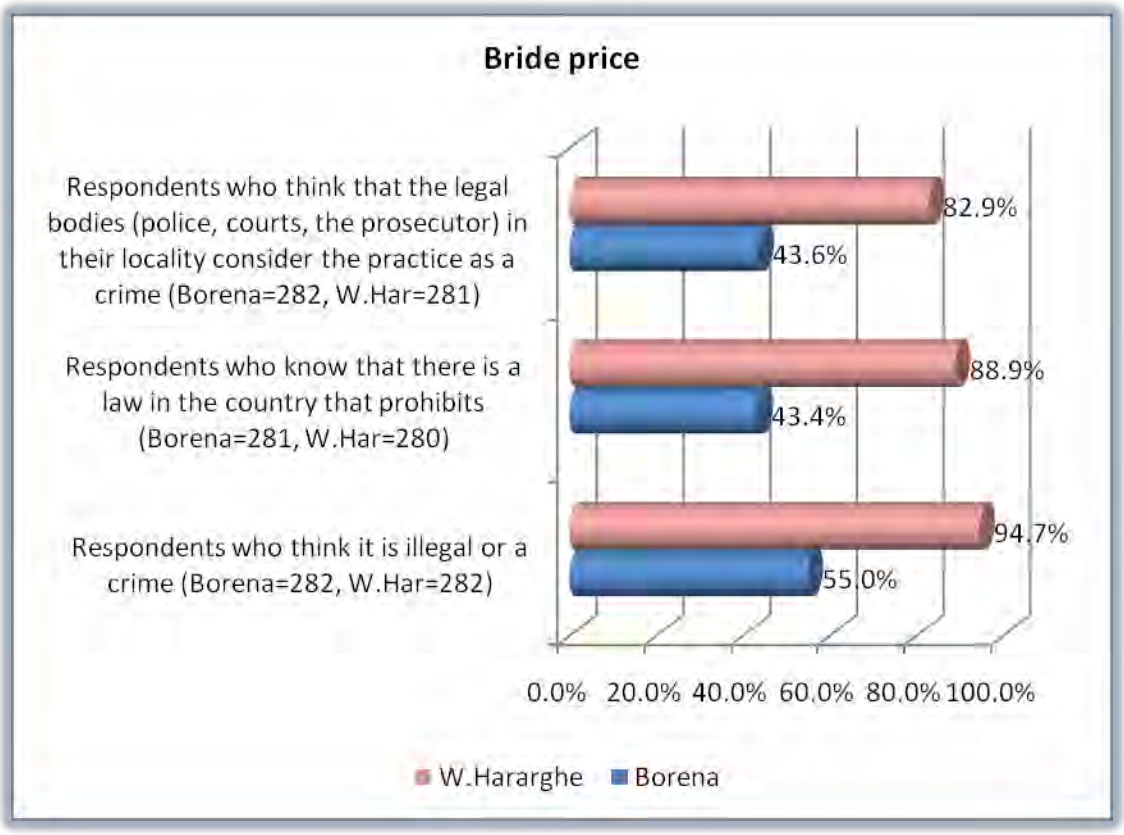
Respondents most often identified the FRDE Constitution as the federal level, legal framework that protects the interests of women and girls in the country. Other federal level frameworks identified were the Women's Policy and the Penal Code. Of these the least know document was the Family Law, which is the document that deals in greatest detail with gender related issues. These awareness levels provide insight for program designers working on basic rights/ gender related issues and seeking to determine where to place awareness raising priorities in federal level legal frameworks.

**Figure 32**



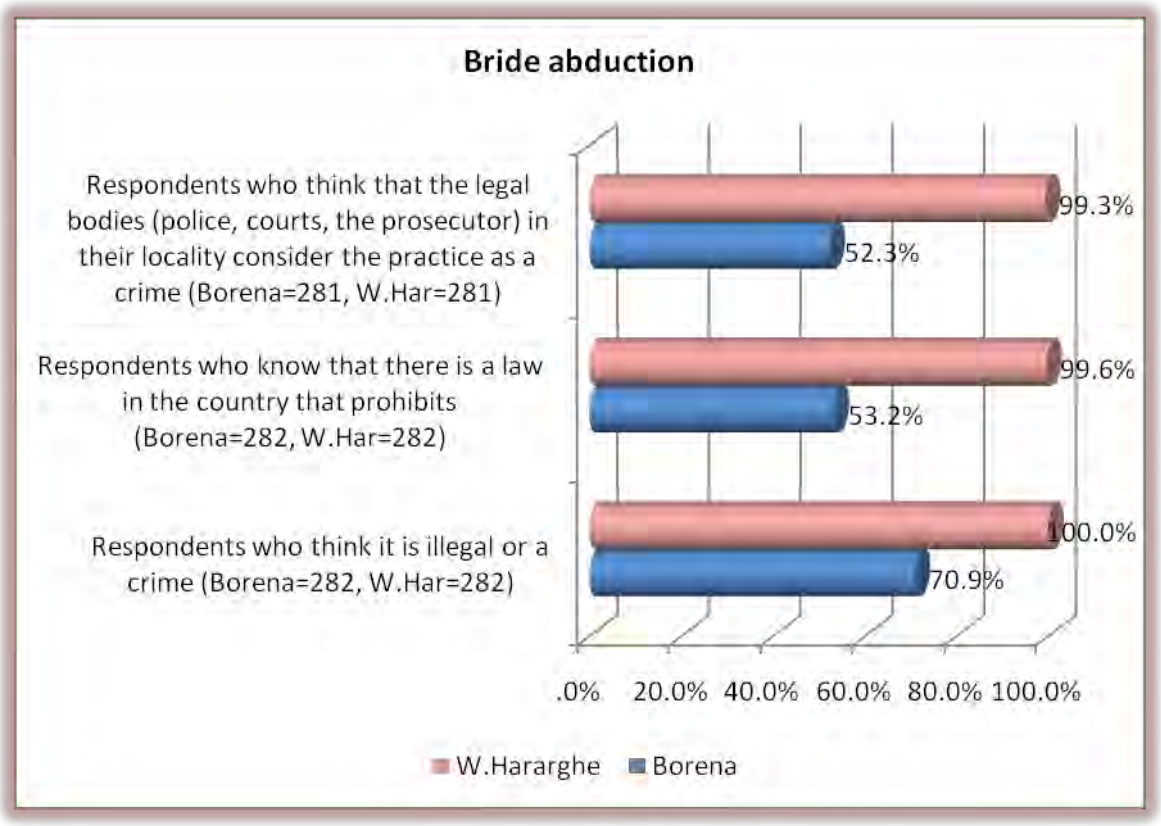

The majority of respondents from West Hararghe were aware of a law prohibiting the practice of bride price, while only about half of respondents from Borena had the same understanding. In the intervention woredas of West Hararghe, the community has introduced "fines" against those who pay a brideprice, though this is not incorporated in the formal legal structure. Note that there is no law at a national or regional level which prohibits the paying/receiving bride price, but the way the community members implement it is fueling by practices that are illegal such as bride abduction and marriage under the age of 18.

**Figure 33**



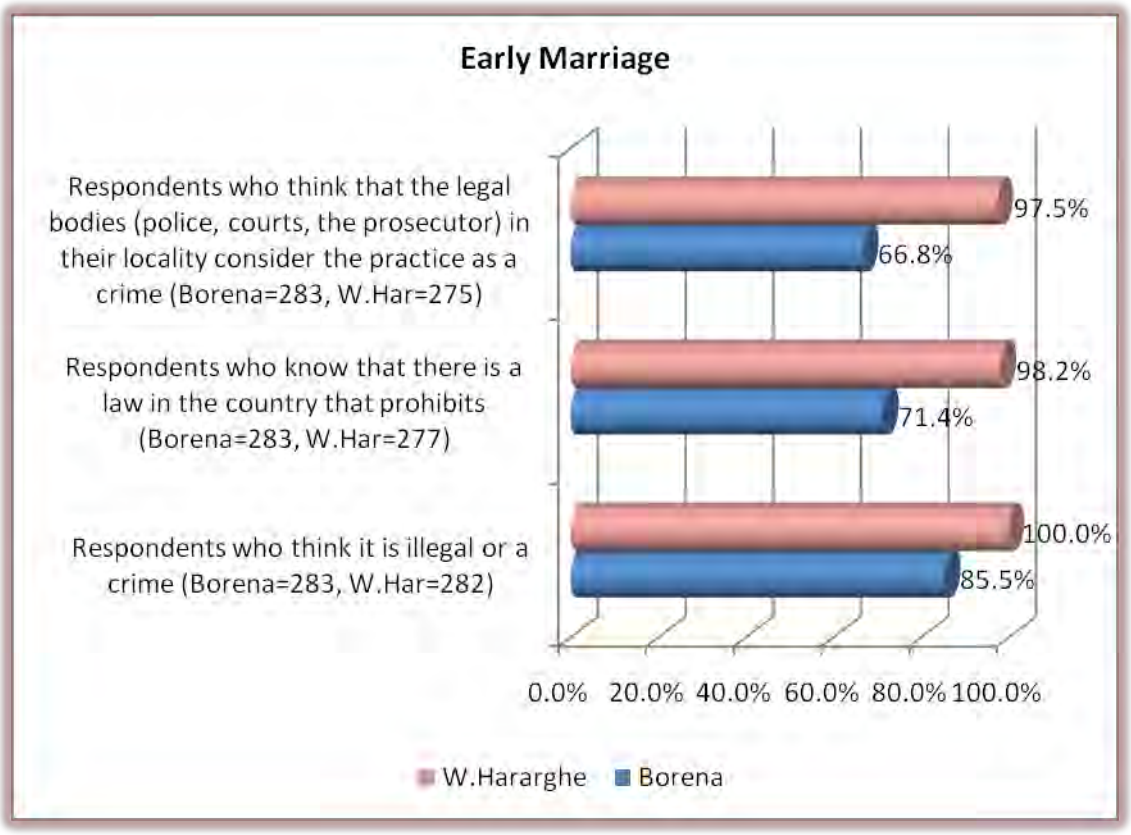

In the case of bride abduction, nearly all West Hararghe participants responded that there is a law which prohibits and criminalizes the practice. These same respondents also stated that their law-enforcement bodies consider this practice as a crime. In Borena, however, only about 50% of respondents thought that their law enforcement bodies considered bride abduction a crime, and only around 50% were confident that there is a law against the practice. However, 71% of Borena respondents think the act is illegal.

**Figure 34**



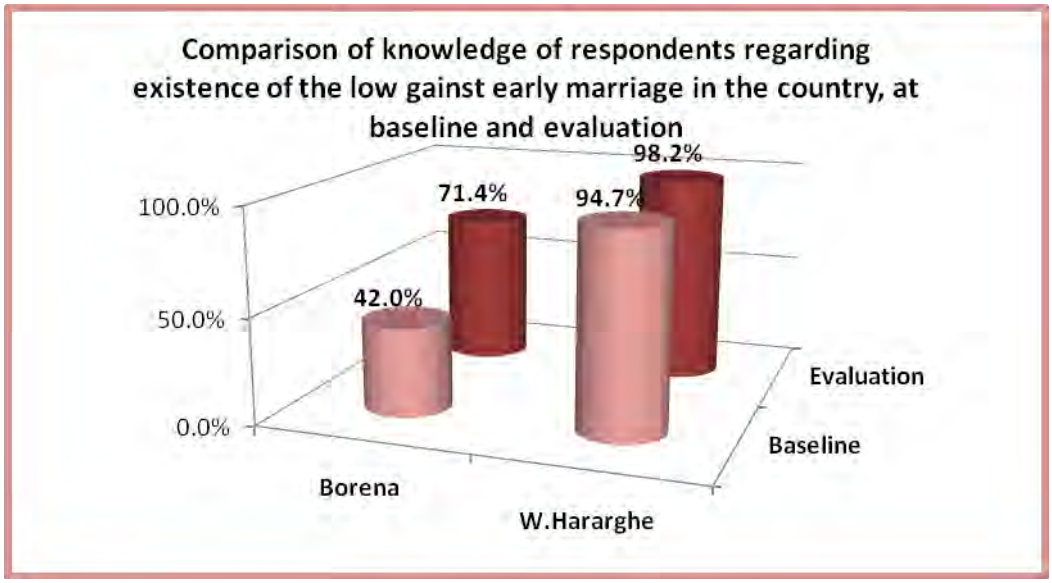

As for early marriage, a large percentage of respondents from Borena and almost all from West Hararghe reported knowledge that early marriage is a crime by law, and that local law enforcement bodies act accordingly. In addition, 85% from Borena and all from West Hararghe stated that there is a minimum age limit set by the government to prevent early marriage. 93% of the respondents mentioned that the minimum age falls between 18-20 years for girls.

**Figure 35**




When comparing the values of the baseline and the end-term evaluation study regarding knowledge ofa law against 'early marriage' in the country, an increase is observed in Borena, from 42% to 71% . West Hararghe maintained the already existing high percentage.

**Figure 36**



### 7.3.2 Sense of ownership and local conviction towards the targeted HTPs

Paralegal groups consist of different social groups, which are dedicated to assisting legal bodies and strengthening the law enforcement process. These groups are mostly composed of teachers, women's representatives, kebele chairpersons, executive committee members, elders and religious leaders. One of the paralegals stated:

> "A village woman in West Hararghe lost her husband, [and was left] with a responsibility of raising five children single handed. Later on her ex-brother-in-law asked her for marriage, for which she declined. Having noticed her clear position, one night the man raped her and also burned her genital with battery acid. The paralegals heard and reported the case to the police and followed up the court charges too. The perpetrator was jailed, but only for the rape case, since the woman disclosed only part of the story to the court. However, later on, she got sick seriously and told the remaining story to a physician, which was also reported to the police and the court by the community legal aids."

Regarding local convictions for HTPs currently under consideration, almost all respondents from both zones said there are none. All of these respondents also say that the decline in the practices of bride abduction and early marriage witnessed over the last three years can be attributed, in large part, to the awareness raising efforts of the HU project.

FGD discussions revealed that communities opposed the HTPs targeted by the HU project. For West Hararghe, the increased understanding of the acts as punishable by law has contributed to the decline in practice. Borena has a rich tradition rooted in the Geda system. Borena communities do acknowledge the negative impacts of the discussed HTPs, however, the Geda system is the authority on regulations within the region. Therefore official statements against the practice of HTPs can only be made at Geda General Assembly meetings. Upon this endorsement, greater efforts will be taken to enforce national laws against prohibited HTPs.

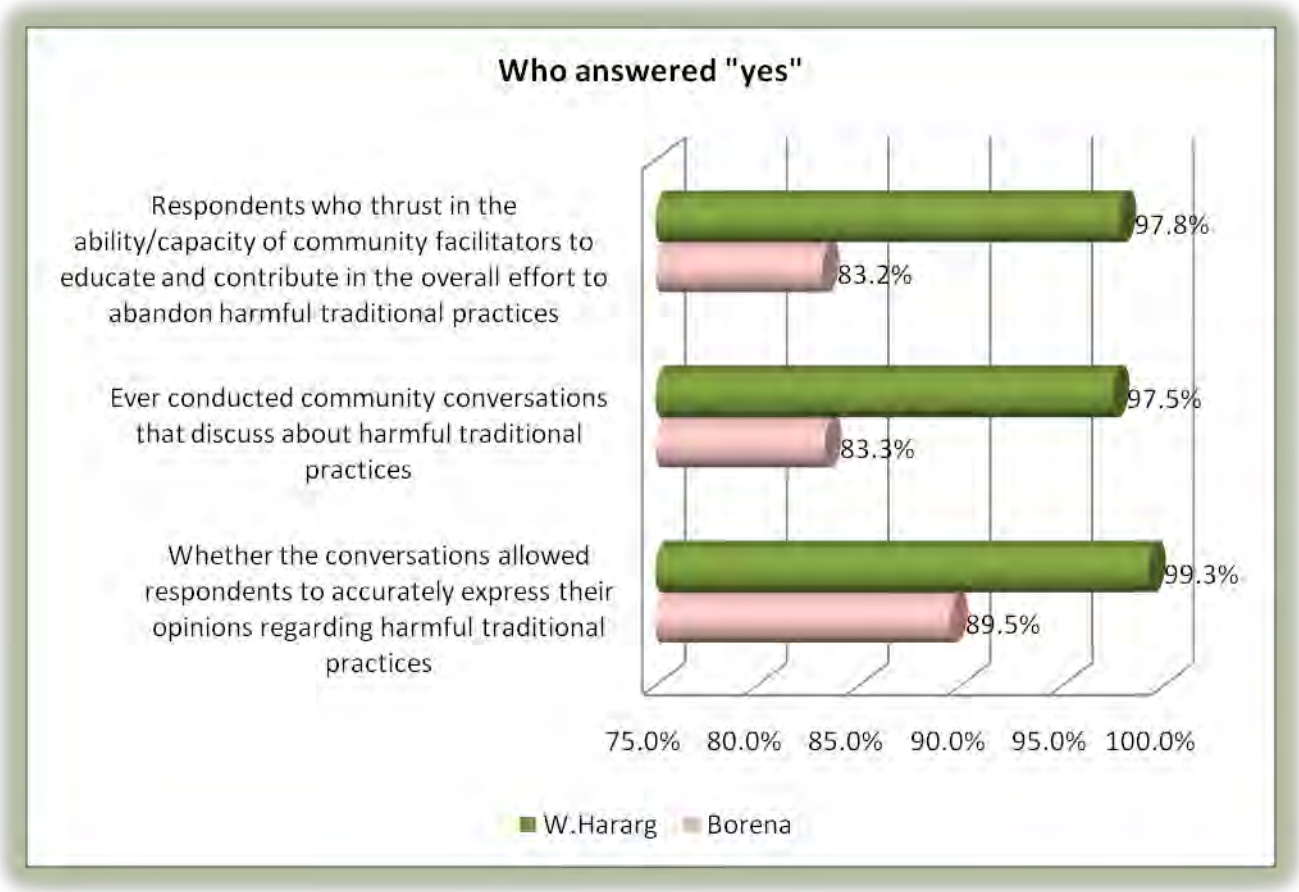
A CSSG member in West Hararghe, commented, at an FGD, that the has been an increase in the reporting of HTPs to local legal bodies, particularly when compared to the situation three years ago. "Earlier the practice [was] not considered a crime and nobody used to pay attention. But with the increased awareness due to the intervention and as time goes on, the trend has changed. If somebody practiced either of the mentioned HTPs, community members directly come to CARE office for logistics support and chase the perpetrator. The community, then [hands over] the [perpetrator] to the police."

The question of whether traditional leaders are supportive of the police and the courts in penalizing bride price, bride abduction and early marriage raised differing opinions. Some of the discussants supported the view. One participants stated, "the Geda leaders have been supportive of the actions of legal bodies in penalizing only two of the HTPs, i.e. early marriage and bride abduction. They do not cooperate with legal bodies in reporting the practice of bride price."

### *7.4 Contribution of the Community facilitators:*

One indicator used in the HU project to measure success is an increased acceptance, by community members, of the community facilitators serving them. Accordingly, when respondents were asked to express their views towards the contribution of community (volunteer) facilitators working on the project over 83% in Borena and nearly all in West Hararghe agreed that facilitators had the capacity to educate and counsel the community on the harms of HTPs. Apart from confirming that the community volunteers facilitated community conversations, respondents also affirmed that the conversation helped them properly express their opinions regarding HTPs. The community facilitators are the ones who worked with the paralegals and other coalitions to strengthen the response capacity of local law enforcing bodies, both in reporting and following up on cases.

**Figure37**




# 8. Project implementation process and collaboration

### *8.1 Reporting, joint planning, and review*

Representatives of the woredalevel offices of The Ministry of Women's Affairs, Ministry of Justice, and Ministry of Education in West Hararghe unanimously said that activities of the HU Project,

implemented by EGLDAM, have been reported to the Zonal Women's Affairs Office on a quarterly basis. The reports included physical performance and budget consumption. Though there was not a regularly scheduled meeting period to discuss project matters, all affirmed that they did come together to discuss the HU project, when necessary. However, the zonal office representative highlighted the fact that, in addition to other necessary meetings, stakeholders met once a year to review project progress.

In the case of Borena, the zonal Women's Affairs Office confirmed that activities of the HU project were reported on quarterly basis. The woreda level interviewees also affirmed that they worked collaboratively on the project implementation, regularly attended joint review meetings, and were involved in monitoring and evaluation activities. One of the interviewees from the woreda office said "the CARE Borena office even provides us with logistics, when we go out to the fields for monitoring activities." There was a schedule for regular monitoring and a platform for local stakeholders to discuss project matters. Government offices and local organizations were actively involved in the joint review, monitoring, and evaluation schedules of the project.

### *8.2 Sustainability:*

After the phasing out of the HU project, almost all the coalitions and CBOs stated that the efforts (and outcomes thus far) of the project to raise awareness and decrease practices of HTPs were sustainable. However, they did express interest in having the project extended due to the fact that HTPs are age-old practices rooted deeply in the cultural traditions of the project's targeted beneficiaries.

The zonal Women's Office representative from Borena felt that "the initiatives related to bride abduction and early marriages may sustain in the future, we are doubtful about bride price". A member of project staff withCARE Borena shared a similar view regarding the potential for sustainability of interventions. He commented that "the initiated efforts may sustain for bride abduction/awadi and early marriage, due to the good level of awareness created in the community. But the initiation related to anti- bride price is unlikely." He justified this view by saying that the Geda leaders have an interest in maintaining the practice of bride price.

Others were skeptical about sustainability. For instance, a participant in FGD of Networks said, "The initiated anti-HTP efforts may not sustain in the future [because] the effort is at its infancy. Thus, the project has to extend [until] the initiated anti-HTP efforts take root." A discussant from the CSSG FGD agreed with the views of the above network member.

Many participants from West Hararghe showed positive attitudes towards the notion of sustainability. In their view, the recently initiated anti-HTP efforts would continue because EGLDAM trained them well and they now better understand the harms of HTP. To express this newfound empowerment, one of themcited a local proverb "Basho nigudisani male hantuta qabi hinjedhanini". Which means, "after supporting a cat to grow, there is no need to tell her to catch a rat, for she will do it automatically."

They were, however, bothered about potential gaps that created with the loss of EGLDAM's support. A kebele leader said that they may not get access to helpful tools such as "training". Participants from the Tullo Woreda offices of the Ministry Women's Affairs, Ministry of Justice, and Ministry of Education expressed fear related to the withdrawal of EGLDAM's support. One of them said, "It was EGLDAM that was providing an immediate hand when cases were reported to our offices, in terms of vehicle, covering the costs of per diem and other logistical supports. At times, it takes a day to reach to the places where the crime is reported. Even after the case is handled, it was EGLDAM which used to facilitate for medical certificates and other critical evidences."

Most importantly, in the light of the broad and evolving program-focused approach of CARE towards CARE's Pastoralist school aged girls program [which focuses on allowing girls to exercise their rights and have an improved and sustained quality of life], the objectives and already achieved results of the HU project have the opportunity to take root in the Borena community. On the other hand, the HU project directly contributed the achievement of the Pastoralist school aged girls program's goals ' as it worked to improve the quality health, education, and basic rights of the girls. .

### *8.3 Budget utilization*

The overall three year budget performance of the project indicates 93% utilization as planned. Except for two expenditure categories (supplies and office administration costs), all categories show a minimum of 90% consumption rate of the allocated budget, indicating a generally good performance in budget utilization.

**Table 9:** CARE Ethiopia, Healthy Unions project financial Utilization, in USD

| | Line Item | Budget 3 Years | Cumulative Utilization | Burn Rate |
|---|---|---|---|---|
| 1 | Direct Labour | 333,086.21 | 309,600.78 | 93% |
| 2 | Fringe Benefits | 211,264.63 | 204,421.45 | 97% |
| 3 | Travel | 56,768.00 | 52,527.26 | 93% |
| 4 | Vehicle | 48,800.00 | 48,800.00 | 100% |
| 5 | Equipment | 10,949.10 | 10,288.08 | 94% |
| 6 | Supplies | 11,814.61 | 8,612.08 | 73% |
| 7 | Training Cost | 6,661.95 | 6,644.10 | 100% |
| 8 | Activity Cost | 246,655.70 | 221,248.32 | 90% |
| 9 | Office Administration Cost | 100,934.02 | 82,266.14 | 82% |

| | | | | |
|---|---|---|---|---|
| 10 | Contractual ( EGLDAM ) | 235,322.29 | 227,090.02 | 97% |
| 11 | Total Direct Cost | 1,262,256.50 | 1,171,498.23 | 93% |
| 12 | Administrative | 123,827.00 | 114,927.83 | 93% |
| ***13*** | ***ALL Costs*** | ***1,386,083.50*** | ***1,286,426.06*** | ***93%*** |

# 9. Project performance against the five major evaluation parameters/criteria

| **(i) Relevance and quality of design - Key observations:** |
|---|
| The overall and specific objectives of the project, which primarily focused on reducing vulnerabilities of rural girls and women caused by the HTPs of bride price, bride abduction and early marriage were in perfect alignment with the country's Constitution, laws that aim at protecting the rights of women and girls, the national Women's Policy, and that of the Health Policy of the government.<br><br>There was also a clear match between the intended beneficiaries of the project and the actual beneficiaries, as assessed by the evaluation. |

| **(ii) Efficiency of implementation - Key observations:** |
|---|
| All implementing and collaborating partners, as well as CARE Ethiopia, reported that they consistently developed their annual work plans before implementation. Most of the cost categories were spent as planned. Overall, regular planning was exercised by all the implementers along with a good tradition of joint review and monitoring of project progress between CBOs and government actors. However, joint planning at the initial stage of the project with the public sector was reported as a limitation.<br><br>Reporting was complete and timely in most cases. Reporting to relevant local government offices was practiced by both intervention sites, as this was witnessed directly by the responsible government sectorial offices. Government partners like the zonal Women's Affairs Offices confirmed not only receipt of regular reports, but also of participation in review meetings and in the regular monitoring visits to project sites. |
| **(iii) Effectiveness - Key observations:** |

Generally, it can be concluded that the project, to a large extent, contributed to its primary goal of "promoting the human rights of girls and women in the Oromia Region of Ethiopia by decreasing the interlinked harmful traditional practices of bride abduction, bride price, and early marriage".

As the results of the end-term evaluation indicated an increase in community awareness of the harms of bride price, bride abduction, and early marriage increased, particularly in the case of West Hararghe. Awareness of the formal laws that prohibit the targeted harmful traditional practices improved. Communities, in general perceived that there is a "decline" in the practices in their localities mainly within the last three years. An increased proportion of respondents labeled the practices as "harmful", and the majority showed no intention of committing the practices in the future and strongly supported abandonment of the practices.

**(iv) Impact to date - Key observations:**

The major impact of the HU project is its effectiveness in challenging the deep rooted and highly valued customs of bride price, bride abduction, and early marriage. Most of the community participants asserted that HTP practices are demeaning and not in the best interests of the society's girls and women. Consequently, many actions, including penalties and discrimination, are being taken against perpetrators of said practices. Community members have started to report these practices to legal bodies. Aba Geda's are waiting for their General Assembley to officially endorse customary laws targeted particularly against early marriage and "*awadi*".

However, most of the partners and collaborators, as well as the community members expressed their view that for the impacts of the project to be worthwhile, the project's life should be more than three years. Moreover, as the project was implemented in only few woredas in select zones, many participants expressed concern regarding possible negative impactson surrounding localities not covered by the project.

**(v) Potential Sustainability of outcomes obtained - Key observations:**

According to a document on the exit strategy of the project, the project was intended to build local capacities at zonal, zoreda, kebele levels and in community structures by creating groups of project stewards responsible for project implementation and trainings created to bring mass awareness and behavioral change. Moreover, the project's strategy of reaching young people/school communities, along with wide range advocacy efforts to encourage the enforcement of the formal and customary laws was a key project element.

Apart from the perceived "short life" of the project, many in the localities felt that it possible to sustain the benefits achieved through the HU project, because it was strategically implemented, mainly through existing local structures. Most importantly, the attitude change, particularly among the younger generation, and the efforts to enforce laws addressing HTPs, created a strong foundation for forward movement.

# 10. Strengths, limitations and lessons

**Relevance –** the project was designed in alignment with national strategies and priority areas with a critical focus on addressing vulnerabilities of rural girls and women

**The log frame** – This ensured harmony across the hierarchies of the project. All implementing partners derived their annual work plans from it.

**Strategic approach and capacity enhancement** - The approach was to work through existing CBOs, strengthen school clubs, and actively engage traditional leaders (such as Aba Gedas) and their structures and the lowest government arm (kebeles) in collectively addressing the targeted HTPs. In addition, the strategy of building capacity at the grassroot level(mainly \girls and women) and organizing them into clubs and CSSGs gave them collective confidence to face challenges. Material and technical supports enhanced the capacities of paralegals and community volunteers. Each of these approaches are appropriate strategies likely to achieve lasting effects and increased community ownership**Achievement of goals and targets set –** Despite the fact that practices like bride-price are deep rooted in the economic interests and social values of the community, the project succeeded in attaining almost all of its targets in West Hararghe and to a large degree in Borena. The project also proved that working through existing community structures, by strengthening their capacities, is the best means of addressing deep-rooted social norms like HTPs. Moreover, this strategy increases community ownership of the project goals and will largely contribute to the project's sustainability.

**Short project life—** considering the depth of the problems within the localities, particularly Borena, short project life is seen, particularly by the community members and its leaders, as a limitation of the project.

# 11. Conclusion

The HU project can be deemed successful when measured against the preset indicators of the intervention and assessing the outward appreciationof target group members, local community based /government institutions, zonallevel government officers, and traditional leader. The HU project met its strategic objectives of "changing community norms underlying the traditional harmful practices of bride price, bride abduction and early marriage, increasing the capacity and political will of Community-Based Organizations, formal and informal leaders, women and girls, men and boys to take collective action against harmful traditional practices; as well as advocating for the enforcement of laws that reduce the incidence of bride price, bride abduction and early marriage". These all contribute to the overarching goal of "promoting the human rights of girls and women in the Oromia Region of Ethiopia by decreasing the interlinked harmful traditional practices".

The evaluation findings— changes in frequency of practice, promising progress in attitude shifts, and future intentions of community members testifies to the project's performance in regards to five major criteria of M&E: relevance and quality of design, efficiency, effectiveness, impact and the potential sustainability of the project outcomes.

However, the results reported in the evaluation assessment cannot be exclusively attributed to the HU project. Rather, the HU project was an important part of the overall effort to address HTPs and contributed significantly to the achievements disclosed in this end-term evaluation assessment.

The achievements obtained in the two intervention sites, Borena and West Hararghe, vary in magnitude, possibly due to the nature of the problems occurring in each locality and community perceptions of HTPs. For example, in West Hararghe there is 'forceful action' involved in the process of "Cabsaa", making it easier for community members to expose and for law enforcement bodies to deal with the problem. However, in Borena, the notion of bride abduction/stealing is concealed in the concept of "awadi" where there is supposed consent of the girl, although, in reality, she is allured into the marriagewith false promises. Therefore, in Borena classifying the issue as a violation of one's right takes tremendous effort. Also, gaining tangible evidence for law enforcement bodies is complicated because of this supposed consent. Finally, in Borena, the practice is more widely accepted as harmless and therefore charging the perpetrator is complicated.

Secondly, the influence and application of the formal law in West Hararghe is, in general, stronger than in Borena. This is due to the fact that the customary law, led by the Aba Gedas, is dominant and accepted thus making the process of legal action slower or weaker than in West

Hararghe. In the light of these challenges, there is a difference between the two sites in terms of achievement. When considering the issue of early marriage, which is easier than bride price or abduction for formal law enforcement bodies to detect, responses towards the abandonment of current early marriage practuces are found to be very encouraging on both sites.

## 12. Recommendations

- It is recommended that CARE Ethiopia build upon the strengths of this project. For example, in addition to having a good logical framework and M&E basis, the project is also found to be highly relevant in the framework of the national response to HTPs.
- The strategic approach of working through existing community organizations and collaborating with government structures, enhancing stakeholder capacities, and working to change the attitudes of the targeted communities for sustainable outcomes are worthwhile practices which should be included in future project/program development and implementation.
- The project life is understood by community members and local development actors to be too short. Therefore, it is recommended that CARE Ethiopia extend the project or at least pass the project idea to other interested non-governmental partners, in order to build on already initiated achievements and to increase sustainability of the project outcomes.

# 13. Annexes

## *(i) Data – size and collection method*

### *Summary of Quantitative data collected*

| Sources of data | West Hararghe | Borena | Total | Remark |
|---|---|---|---|---|
| • Household survey | 287 | 287 | 574 | |
| • Institutional survey of CBOs/Coalitions | 15 | 15 | 30 | |

### *Summary of Qualitative data participants*

| FGDs and Interviews: | # of discussions held | Male | Female | Total |
|---|---|---|---|---|
| West Hararghe | **18** | **28** | **32** | **60** |
| Borena | 17 | 26 | 30 | 56 |

### *13.1 Data collection methods: for quantitative and qualitative*

| Activity | Nature of data | Description |
|---|---|---|
| • Document review | Secondary source | Particularly the project proposal, baseline survey, implementation reports, previous assessments, Detail Implementation Plan, M&E plan matrix, mid-term review reports or proceedings of multi-partner meetings, and other relevant materials |
| • Compliance matrix | Secondary source | Performance status information from the project staff for specific activities mentioned in the log-frame of the project, including budget utilization. |
| • Household Survey | Quantitative from Primary sources | Captured the ideas and views of primary targets of the project and the community at large |
| • Institutional survey | Quantitative from Primary sources | Used with the targeted CBOs/Coalitions |
| • FGD – for exploring 'why's, to see influence of intervention, and | Qualitative from Primary source | Completed with mixed community groups, 8-12 participants in each group |

| | | |
|---|---|---|
| deepen understanding | | |
| • Interviews: for exploring 'why's, to see influence of intervention, and deepen understanding | Qualitative from Primary sources | Used with key community representatives/traditional and religious leaders, implementing partners, collaborating partners, selected beneficiaries(girls/women), CBOs, local governors, Women's and Children Affairs Offices, etc. |

## *13.2 Sampling Method and size of quantitative data*

### 13.2.1 **Setting the determinant variable**

There were two options for setting the determinant variable or the estimated value of the population proportion [i.e. ***'p'*** value of the sampling] for this end-term evaluation, which could be either the prevalence of "bride abduction/marriage by abduction" or "early marriage" in Oromia Region. As there was no woreda/zone specific prevalence rates for Early Marriage or Bride Abduction to apply at each intervention site, it was reasonable to take the regional prevalences as a proxy to determine the sample size of each zone (to be collected as a sum total of woredas under them).

This was due to the following two reasons:

- Bride abduction and early marriage existed in two of the three major focus areas of the Healthy Unions project.
- There was a relatively reliable source of data for measuring their prevalence, measured at the commencement of the project intervention, i.e. in the year 2007. The prevalence of "bride abduction/marriage by abduction and early marriage" according to EGLDAM's National Follow up Survey, 2007 for Oromia region were 13.2% and 23.1% respectively.

As the prevalence of early marriage was higher than that of bride abduction, it was reasonable and convenient to take the former as a ***value of 'P' (which is 23.1% or 0.231)***, as the concerns related to the latter could also be captured/addressed by the former.

### 13.2.2 **Setting the sample size**

According to Ronald M. Weiers (2002), which is standard, the formula applied to determine the sample size (i.e. "n") of the HH survey was:-

$$n = \frac{z^2 * p * q}{e^2}$$

**where:**

- n=sample size;
- **z**= the value for **95% confidence interval** or value for selected alpha level of 0.025 in each tail equaling 1.96;
- p*q=estimate of variance;
- **e**=acceptable margin of error
- **p**= is the estimated value of the population proportion;
- **q**=1-p

$$n = \frac{(1.96)^2 * (0.231) * (0.769)}{(0.05)^2} = 273$$

**Sample size for:** **West Hararghe Zone = 287;** *[which is 273 + 14 (as 5% reserve)]*

**Borena Zone = 287;** *[which is 273 + 14 (as 5% reserve)]*

### 13.2.3 Method of selecting the survey sites and distribution of sample

There are two woredas under the West Hararghe project site and three woredas in the Borena project area. Among these, as per the discussion with the manager of HU Project and the Training and Evaluation Officer of CARE Ethiopia, both woredas from West Hararghe and two woredas from Borena were included in the evaluation study.

In the case of West Hararghe, because both woredas were close to each other, it was agreed to represent both of them equally in the HH survey. In the case of Borena, given the nature of the locality which is a mainly pastoralist community that is sparsely settled and coversa large physical ,the evaluation group agreed to pick either of Dire or Yabello Woredas (as these are relatively homogenious) by a lottery method and retain Arero Woreda in the group (as it is differnt from the two other woredas). Accordingly, the lottery picked Dire Woreda as one the two study sites. However, considering the proportion of intervention kebeles in the two woredas, where Arero accounts for fewer kebeles than Dire, it was decided to take only a third of the total sample size [of 287 HHs] from Arero and the remaining two thrids from Dire.

To select the specific kebeles from each study woreda, a lottery/equal chance method was applied. However, issues of logistics and accessibility, particulalry for pastoralist communities of Borena Zone, were considered and it was agreed to include two kebeles from each selected woreda, with the strategy

of going to the largest cluster in the kebele for developing the actual HH lists and determining the sampling interval. (see the table below for the details).

| Borena Zone | | | | |
|---|---|---|---|---|
| **Woreda** | **# of Kebeles** | **# of Questionnaires** | **Share of kebele_1** | **Share of kebele_2** |
| Arero | 2 | 95 | 47 | 48 |
| Dire | 2 | 192 | 96 | 96 |
| **Total** | **4** | **287** | | |
| | | | | |
| **West Hararghe Zone** | | | | |
| **Woreda** | **# of Kebeles** | **# of Questionnaires** | **Share of kebele_1** | **Share of kebele_2** |
| Tullo | 2 | 143 | 71 | 72 |
| Dobba | 2 | 144 | 72 | 72 |
| **Total** | **4** | **287** | | |

## Qualitative data

| | **West Hararghe** | | **# of participants** | | | |
|---|---|---|---|---|---|---|
| I. | FGDs: | # of discussions held | Male | Female | Total | Age range |
| | boys and girls peer groups | 1 | 4 | 8 | 12 | 12--15 |
| | Network members | 1 | 4 | 1 | 5 | 25--35 |
| | CSSG | 1 | 0 | 12 | 12 | |
| II. | Interviews: | | | | | |
| | Kebele leaders and one ex. comm member (1-2prs in one group) | | 4 | 0 | 4 | |
| | Gedaleader/rep and ex.comm member (2-3prs in one group) | | 0 | 0 | 0 | |

| | | | | | | |
|---|---|---|---|---|---|---|
| | Women's rep. of the kebele | | 0 | 1 | 1 | |
| | Women's Office, Justice and Education office representatives (in one group as KII) | | 5 | 3 | 8 | |
| | Zonal Women's affaris only | | 1 | 1 | 2 | |
| | Implementing NGOs (EGLDAM) | | 1 | 0 | 1 | |
| | CARE Eth. Project staff | | 1 | 0 | 1 | |
| | Community facilitators | | 0 | 1 | 1 | |
| | **Sub-total** | **12** | **20** | **27** | **47** | |

### *(ii) Stakeholders' analysis matrix*

| Stakeholder | Expected role in the Evaluation | Possible interest in the evaluation | How & when to engage in the evaluation |
|---|---|---|---|
| CARE Ethiopia | - Identify components of the project to be evaluated<br>- Coordinate the evaluation process<br>- Advise, supervise and review evaluation process<br>- Plan the evaluation<br>- Facilitate logistics and funding<br>- Use the result for planning and project improvement | - Identified project intervention gaps<br>- Improved M&E system<br>- Generated ideas and recommendations<br>- Discovered lessons for improved design of future projects | - Meetings, discussions, supervisions<br>- During EA and evaluation process |
| USAID | - Identify components of the project to be evaluated<br>- Advise, supervise, and review evaluation process<br>- Use the results for planning and improvement of the project and share lessons learned with other partners | - Identified project intervention gaps<br>- Supported in improving M&E system<br>- Generated ideas and recommendations<br>- Discovered lessons for improved design of future projects | - Discussions and electronic mail exchanges<br>- During evaluation process |
| Implementing partner organizations: | - Remain involved in the evaluation processes (identification, implementation & using findings)<br>- Provide feedback on the identified components of the project for evaluation<br>- Provide information<br>- Facilitate data collection<br>- Use the result for further planning and | - Identified project intervention gaps<br>- Improved M&E system<br>- Generated ideas and recommendations<br>- Discovered lessons for improved design of future projects | - Meetings, facilitate visit to their respective offices,<br>- During EA and evaluation process |

| | | | |
|---|---|---|---|
| | program improvement | Needed information and feedback on the findings of the evaluation | |
| Grass-root implementing CBOs such as: Community self-help Saving Groups; Peer groups of boys and girls; Community para legals; School clubs; PTAs; Voluntary Network Coalitions; Girls Edu. Advisory Committees; etc. | - Involve in the evaluation processes (identification, implementation & using findings)<br>- Provide information<br>- Facilitate data collection<br>- Use the result for planning and project improvement | - Identified project intervention gaps<br>- Discovered lessons for improved participation in design of future projects<br>- Needed information and feedback on the findings of the evaluation | - Meetings,<br>- Facilitate visit to their respective offices and congregants,<br>- During evaluation process |
| Collaborating partners: HAPCO, other NGOs in the locality, | - Provide information<br>- Facilitate data collection | - Identified project intervention gaps<br>- Generated ideas and recommendations<br>- Needed information and feedback on the findings of the evaluation | - Meetings,<br>- Facilitate visit to their respective offices<br>- During data collection and feedback on findings of eval. |
| Selected kebele/traditional leaders | - Mobilize community<br>- Provide information<br>- Guide data collectors | - Identified project intervention gaps<br>- Generated ideas and recommendations<br>- Provided better services<br>- Needed information and feedback on the findings of the evaluation | - Meeting, Visiting to offices During data collection and feedback on findings of evaluation |

| | | | |
|---|---|---|---|
| Primary beneficiaries: girls and women | - Provide information<br><br>- Give support to data collection process | - Needed information and feedback on the findings of the evaluation<br>- Identified project intervention gaps<br>- Generated ideas and recommendations<br>- Needed better access to services | - During visits to their houses<br>- During evaluation process |

### *(iii) Evaluation Assessment Checklist*

| No. | Checklist | Status | Source |
|---|---|---|---|
| 1. | Is the role/responsibility of CARE Ethiopia and its implementing partners clear in the **overall goal and objectives** of the project? | Yes | Project proposal |
| 2. | Are the **specific** roles and responsibilities of each stakeholder??? regarding the proposed interventions (the three Strategic Objectives) clear enough? | Yes | Project proposal |
| 3. | Are the main activities of the project clearly identified? | Yes | Project proposal |
| 4. | Are the resources required to implement the project clearly spelled out? | Yes | Project proposal |
| 5. | Are these resources made available? | Yes | Project agreement doc |
| 6. | Is there a gap between the resources required and those actually utilized to implement this program? | No | |
| 7. | Is there an action plan for the implementation? | Yes | Prepared every year, as Detail Implementation Plan. |
| 8. | When did implementation of the project start? | September 2007 | Financial Status Report of CARE Eth, annexed in progress review and planning meetings |
| 9. | Are there reports/records on the activities carried out with regard to the interventions? | Yes | Annual and bi-annual review reports availed |
| 10. | Is there clarity on the components of the project that needs to be evaluated (process level, outcome level, impact)? | Yes | As it is an end-term evaluation, the main components of the evaluation will be Outcome and Impact levels –with a focus on achievement of Goals and SOs |

| | | | |
|---|---|---|---|
| | | | set. |
| 11. | Are the evaluation questions that are needed to be addressed clear? | Yes | Discussed with technical staff and reached at consensus. |
| 12. | What would be the role of your organization in the in this final evaluation? | Clearly defined | See the stakeholder analysis matrix. |
| 13. | In what ways are you going to utilize the evaluation findings? | | For CARE Ethiopia to answer. |
| 14. | In what ways would you like to strengthen the monitoring and evaluation system of the intervention? | | For CARE Ethiopia to answer. |