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Ref. No.

Date

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⊠ 47 **2** 0463312707 0463312690 Fax 046 3312734 E-mail:gzfeds08@ethionet.et

TO: Ethiopian Evangelical Church Mekane Yesus DASSC

Addiss Ababa

Subject: Sending project mid-term evaluation report

Enclosed is a copy of mid-term evaluation report on a project entitled << Community Based Health Service Project>> that have been implemented by your organization in Gedeb wereda of Gedeo Zone in SNNPR.

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Hence you are kindly requested to respond and take an action based on the recommendation forwarded.

With Best Regards

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CC:

SNNPR Finance & Economic Development Sector/With enclosure/ Hawassa

Gedeo Zone Department of Health /With enclosure/

Gedeo Zone Department of Water Resource /With enclosure/

Development Planning Monitoring & Evaluation Core Process /With enclosure/ Dilla

Gedeb Wereda Finance & Economic Development Office /With enclosure/

Gedeb Wereda Health Office /With enclosure/

Gedeb Wereda Water Resource Office /With enclosure/

Gedeb

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Mid-term Evaluation of Community Based Health Service Project	EECMY DASSC

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ACRYNOMS

AAC	Anti AIDS Club
AIDS	Acquired Immuno Deficiency Syndrome
СВО	Community Based Organization
ChSA	Charities and Societies Agency
CSO	Charities and Societies Organization
EECMY DASSC	Ethiopian Evangelical Church Mekane Yesus Development Social Service Commission
Go	Government
HEW	Health Extension Worker
НН	House Holds
HIV	Human Immuno Virus
ME	Monitoring and Evaluation
NLM	Norwegian Lutheran Mission
SNNPR	Southern Nations Nationalities Peoples Region
тот	Training of Trainers
VCT	Volunteer Counseling and Testing

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EXCUTIVE SUMMARY

Community based health service project is one of the ongoing CSO health projects that has been implemented in Gedeo zone with a project agreement .The agreement of the project was made at zonal level with general objective of reducing health complications caused due poor reproductive health service among people found in reproductive age groups and improve the health situation of the target community.

As per the project agreement its implementation period ranges from March 2010 to December 2014 .As to the total planned project cost, an amended cost of the project was3,589,911 birr which is to benefit directly 8131 peoples of 5 kebeles in Gedeb wereda of Gedeo zone.

This report is organized based on mid-term evaluation of the project undertaken by the evaluation team that was composed of concerned zonal and wereda governmental organizations representatives. According to the report of the implementing organization and the field assessment of the team ,the total amount of budget utilized until the end of the mid-term project period was 1,855,170 which is 77 % of the total planned for the mid-term period while the average overall physical accomplishment is estimated to be 79%. According to the field assessment made by the team and the mid-term report of the implementing organization/EECMY DASSC/, construction of 2 public & school latrines and 3 shallow well hand pumps /safe water schemes /are completed and are now used by the community of the area.

Some construction projects and awareness creating projects were not implemented according to the plan because of the budget shortage. Also the overall physical as well as the financial accomplishment of the project as compared to the plan of the mid-term period is below 80 % mainly due to budget constraint. The major reason for the budget shortage was the donor/NLM/ was unable to release the fund as per the agreement made.

Therefore further joint effort of the donor and the implementer is needed to complete the remaining planned activities as per the project agreement.

I. Background Information

The Ethiopian Evangelical Church Mekane Yesus Development and Social Service Commission is one of the non-profitable charity organizations in Ethiopia working on different development programs and social services. This organization has signed two project agreements with governmental organizations at both zone and region level to implement them in Gedeo zone and other zones in SNNPR. The two projects are renewable energy community based development project and the community based health service projects on which the agreement is signed at region and zone level respectively.

The organization has been implementing these community based projects in Gedeo zone and in other zone of the region since 2010. The project on which the agreement is made at zone level was the community based health service project that have been implemented in Gedeo zone Gedeb weeda /district/. The implementation of the project was started in Gedeo zone in 2010 after an agreement signed amongst zonal Department of Health, Department of Water Resource , Finance & Economic Development sector and the implementing organization/EECMY DASSC/. The project agreement was signed first in August 2010 at zone level with a total project cost of 2,500,000 birr. Later a cost amendment agreement was made due to the occurrence of the price escalation of construction projects. The total amended project cost was 3,589,911 birr.

As per the Go-CSO guideline of the region CSO projects are to be evaluated twice in their project lifetime, one at the middle and the other at the end of the project period. Therefore based on this fact, the community based health service project mid-term evaluation was conducted by the team of officers formed from zonal and werda concerned governmental organizations.

Mid-term period of the project ranges from March to August 2012 which is half of the total project period. But the mid –term evaluation is accomplished after four months due to some problems faced by the implementing organization.

This report describes all the activity accomplishments, lesson learned, strengths and challenges of the project faced from March 2010 to December 2012.

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II.	Proj	iect Identification
	A.	Name of the project:Community Based Health Service Project in
		Gedeo Zone ,Gedeb Wereda,Selected Five Kebeles.
	В.	Project location:-Kebeles:Haremufo,Kedida gubeta,Haloberte,Worka sakaro,&Gedeb town 01 kebele;Werda:Gedeb;Zone :Gedeo;Region: SNNPR.
	C.	Funding Agency:-NLM
	D.	Executing Agency:-Gedeo Zone Finance & Economic Development Sector, Gedeo Zone Department of Health, and Gedeo Zone Department of Water Resource
	Ε.	Implementing Agency:-EECMY DASSC
	F.	Project cost:-3,589,911 birr/amended cost/
	G.	Number of project direct beneficiary: -8131
	Н.	Project period:- March 2010-December 2014
III.	Proj	ect Evaluation Information
	A.	Objectives of the evaluation
		To improve the remaining time performance,
		> To make choices and decisions of the project for future,
		> To learn lessons, and
		To be fast in accomplishing the project
	В.	Methods of the evaluation
		 Gathering of information by the team from project documents &field assessment,
		Discussion on the evaluation result of the project
		Report writing & submission of the report to the concerned regional, zonal and wereda governmental organizations and the implementing
		organization.
	C.	Parties involved in the evaluation
	Þ	Gedeo Zone Finance & Economic Development Sector,
	A	Gedeo Zone Department of Health, and
	À	Gedeo Zone Department of Water Resource
	Mid-te	erm Evaluation of Community Based Health Service Project EECMY DASSC 2

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- Gedeb Wereda Office Finance & Economic Development
- Gedeb Wereda Office of Health
- Gedeb Wereda Office of Water Resource
- D. Time of the evaluation: The mid -term evaluation is conducted in December 2012.The dalliance in

reporting is due to the dalliance of complete report from EECMY DASSC.

- E. Limitations of the evaluation:
 - Mid-term report was not prepared & submitted as per the formats of the evaluation report before the mid –term evaluation time by the implementer,
 - The team was unable to get complete information at once to finalize the report

IV. Project Description

A. General objectives of the project: The general objectives of the project is to improve the livelihood of the community in the target area of the project.

B. Specific objectives of the project:

The specific objectives of the project are to:

- Increase knowledge, improve attitude and practice of family planning methods among the community in the 5 kebeles of Gedeb wereda at the end of the project,
- To increase access to potable water supply for the community living in the 4 kebeles of Gedeb wereda,
- Increase knowledge, improve attitude and practice of sanitation & hygiene among the community of the 5 kebeles in the wereda at the end of the project,
- Increase knowledge, improve attitude about HIV/AIDS transmission and prevention method in the target community, and
- Ensure increased knowledge and participation of the target community in OVC care & support services through active participation.

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V. Accomplishments of the Project

A. Physical Accomplishments:

1. Family planning

Awareness creation on family planning was provided to HEW, women, CBO, and religious leaders to achieve the objectives of the project. The total number of trainees up to now was 78. Quarterly review meeting have been conducted to discuss on the progress of family planning planned activities at the wereda level. The participants of the review meeting was religious leaders, kebele officials, and representatives of the community.

2 . HIV/AIDS Prevention and OVC Care & Support

The major accomplishments of this component are:-

- TOT conducted on home based care & VCT service was provided to 45 beneficiaries
- TOT conducted for 100 school club members
- TOT conducted for 50 peer educators
- Psychological support for 105 beneficiaries.
- Skill training for 62 OVCs, and
- Home to home visit for 781 HH.

3 .Construction projects & hygiene and sanitation activities

Construction of safe water schemes and school & public latrine are planned to overcome the health problem of the community.

Up to the end of the mid period of the project the construction of 3 shallow well with hand pump was accomplished in the three kebeles of the wereda. The kebeles are Haremufo kebele, Haloberite kebele/Udeyi site/, and Halloberite kebele/Lallesa site/.

Also to combat the hygienic and sanitation problem of the community 2 school and 2 public latrines were constructed in the wereda up to the end of the midterm period of the project. In addition activities useful for the sustainability of of the construction projects were accomplished under the hygiene & sanitation components. These are :-

Training of 10 water committee member on safe water scheme operation & minor maintenance.

- > Training of 21 HEW and werda environmental experts on community lead total sanitation.
 - 4 .Overall physical accomplishment of the project

The overall physical accomplishment of the project is roughly estimated by taking the average accomplishment of 28 selected major activities. Therefore the average physical accomplishment of the project is estimated to be 79% as compared to the plan of the mid-term plan. The accomplishment percentage of the project is below 80% , mainly due to the fact that there was budget shortage. The budget shortage was because the donor was unable to release the fund as per the project agreement made at zone level.

Financial Accomplishment:

The amended total project cost was 3,589,911 birr where as the total budget planned for the half of the project period was 2,424,804. Out of this 1,855,170 birr was utilized which is 77 and 52 % of the mid-term and the whole period planned budget of the project respectively.

C. Project Inputs:

1 .Material Inputs Fixed assets of the project are listed as follows.

Table 2.List of Fixed Assets of the Project

Sr/No	Items	Unit	Quantity
1	Motor bike	No	1
2	Computer	No	1
3	Printer	No	1
4	Chair	No	4
5	Cupboard	No	1
6	Table	No D	1

2 .Human Resource

Table 2.Profile of the project staff

Sr/N o	Job title	Sex	Qualification	Quantity	Monthly salary
1	Project Coordinator	F	BA	1	3500
2	Socialmorker	М	Diploma	1	1200

Mid-term Evaluation of Community Based Health Service Project | LECMY DASSC

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Reporting: EECMY DASSC was responsible for the preparation & dissemination of the report of

the project.

VII. Strength and Limitations of the Project

A .Strengths of the project

- Participatory project implementation/especially on OVC support activities/
- The project is more pertinent to the health policy/preventive activities like family planning, hygiene &sanitation, and safe water supply are the major components of the project,/
- Successful achievement of some potable water construction projects where there is inaccessibility problem/for instance safe water schemes constructed at Udeeyi & Lalesa sites in Gedeb wereda /
- Lesson we get from the the child support activities of the project is the strong side of the project.OVC's are supported through the participation of the community which has the effect of avoiding dependency syndrome.
- As to the work relation & communication status of the implementing project office to the zonal & wereda level governmental organizations, there was smooth relation & conducive working environment.
- The awareness creation activities like trainings were conducted at grass root level and the team observed the result through the contact made with the community at kebele level.

B .Limitations of the project

- Some project components are not accomplished base d on the agreement made due to price escalation,
- The donor has not released the fund as per the project cost amendment agreement made at zone level,
- Complete project performance with the number of direct beneficiary were reported properly before field observation
- The physical & financial report table submitted to our department even after field observation is not with complete information and due to this we are unable to compare the midterm accomplishment with the whole period amended project cost by every project component. The total project cost is 3,553,819 as per the amendment agreement but the report table

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submitted to our department shows Birr 2,686,724.Even if there is a fund release problem as per the amendment agreement made, it was not possible to report the financial plan simply by deducting the fund not released , and

> The dalliance of some contractors in accomplishing construction projects.

VIII. Major Findings and Lessons learned

A. Major Findings

The public latrine of kedidagubeta keble was constructed and the implementer handover to the community with one defect recognized later. That defect was the whole wall of the latrine was constructed with corrugated iron sheet and the bottom half part of which is liable for rust damage due to urine splash of the users. Latter the implementing agency decide to improve the design of other latrines that are ongoing and not with finished wall. The solution designed by the implementing agency was to change the bottom half of the wall with cement hollow blocks.

Public latrine of Haloberete town was not finished and the construction work ceased at pit digging stage due to water table over flow. The solution idea told to the team by the project coordinator for this was strip footing after draining out the water accumulated in the pit.

The implementing organization is using the experts from zone governmental organizations, namely the construction and design work process experts of Gedeo Zone Administration and water resource development experts of Gedeo Zone Department of Water Resource. Project study ,design works and technical support services are provided by the experts of these organizations.

- B. Lesson Learned
 - The donor of the project was not releasing the whole project budget required during the mid-term period. Due to this reason the accomplishment of some project activities were not implemented as per the plan document.
 - The community based OVC support under accomplishment is helpful and it is best testimony to show that the local community has the potential to overcome such problems in our country.

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IX. Conclusion and Recommendation

A. Conclusion

The team has got this mid-term evaluation helpful to see the level of progress of the project and forward a corrective measures and recommendation on the drawbacks faced for the future successful achievement of the project with the remaining resources. The physical and financial accomplishment of the project is below the expected level which is below 80%. The major reason for this progress level is shortage of budget. The shortage of budget was faced because of the fact that the donor/NLM/ was unable to release all the fund approved based on the agreement made .

However there were strong sides of the project to be scaled up. Especially the accomplishment of the OVC care and support activities through the direct participation of the community was appreciated by the team because the care and support cost was covered by the money contributed by the community. Awareness creation and construction of latrines and safe water schemes construction activities were participatory as it is reviewed from the report of the implementing organization and field assessment /observation/.

For the future successful achievement of the project the team has forwarded the following recommendation.

B. Recommendation

- The remaining project activities like construction of safe water schemes due to budget shortage should be completed by searching for all the possible solutions. For this great effort is expected from EECMY South Synod DASSC.
- The implementing organization shall prepare and submit the evaluation report of the project before the evaluation time as per the Go-CSO guideline.
- The OVC care and support approach of the community should be scaled up to the other areas of the zone.
- Measures should be undertaken on the contractors that are not completing construction projects as per contractual agreement.

6	UN	4		w	2	-		Din	_		No No	1
Construction of model latrine for community demonstration and sensitization	5 Construction of public latrine	4 Construction of school latrines	Construction of school, public and model latrines	3 Provision of water supply set scheme repair and maintenance kits	2 Study and design of water No supply schemes	f Shallow pump	Water Supply	Direct cost	2	List of Activities		Table 3/Mid-term Accomplishment of the Community Based Health Project Name of the CSO:- EECMYSS-DSSC
No	No	No		set	No	No				measur	Unit	EECMYSS-DSSC
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100	76	51		20	66	53			13=9/5	nanci	hmen	2
		51 Because of budget constraint we decreased 2 school latrines		20 There is no number of maintenance on document		53 Because of budget constraint we decreased 1 shallow well			14	Remark	naire St	1. in .

	14 TOT on Home Based Care and VCT service provision	13 TOT on stigma & discrimination	HIV/AIDS prevention and OVC care	12 Quarterly review meeting on Activities of Family Planning	11 Advocacy Materials preparation on FP	10 Opinion & Religious Leaders sensitization on FP	 9 Family planning training for health extension worker and woreda health expert 	Family planning	extension workers and woreda environmental health expert on community lead total sanitation	8 Training of Health	7 Water committee training on scheme operation and minor maintenance	Hygiene and sanitation
	No	No		y y	No	on	ng No alth			No	nd No	on
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	45			169	725	56	22			21	10	
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	50	0	-	69	60	58	65	10		a	Selver Zool	ne la
	56	0	-	55	56	37	49		ou Aug	N 5010	Con Con Con	22
	50 On 2011 we couldn't prepare the training b/c of budget constraint	0 This training doesn' prepared in all years	-	35	34	37 One workshop was decreased and performed one	39 On the year of 2012 1 FP training was decreased		BIG	77 .	38 After finishing shallow well we will organize the training	and a second

relavel and Transport 10,000		ar I	Travel & Transport		Sub total of Admin. 119, Charges		Office supplies 18	Telephone Expense 15	Bank service charge 2	Review meeting by 34.	Administration charges	Sub total (Payroll) 427	Social worker at project No 1 32 site	Insurance 3% ETB 8	Medical 3% ETB 8	Provident Fund 10% ETB 28	Project contribution for 46 DASSC director 46	Casher (Synod office top No 1 35 up payment)
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