


Progress Report

Progress Report No.: 3

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Title of the Intervention: BERHAN - Sexual and Reproductive Health and Rights Initiative in Amhara
Project Period:01.03.2020- 31.08.2023



Reporting period:

Reporting period: January 1, 2021 - December 31, 2021	Report submitted on (date): February 28, 2022
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 Austrian
Development **Acronyms**
Agency

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BCC- Behaviour Change Communications

CP- child protection

CSC- Community Score Card

EM- Early Marriage

FGC- Female Genital Cutting

GA- Gender Analysis

GBV- Gender Based Violence

GED- Gender Equity and Diversity

GG- Girls Groups

GO- governmental organization

HQ- headquarter

HTP- Harmful Traditional Practice

IGA- Income Generating Activities

MEAL-monitoring, evaluation, accountability and learning

M&E- Monitoring and Evaluation

NGO- Non-Governmental Organization

PPE- personal protective equipment

PSEA- Prevention of Sexual Exploitation and Abuse

SAA- Social Analysis and Action

SNAP- Social Norms Analysis Plot

SRH- Sexual and Reproductive Health

SRHR- Sexual and Reproductive Health and Rights

TOT- Training of Trainers

VSLA- village saving and loan association

Summary of the progress of the intervention

BERHAN – Sexual and Reproductive Health and Rights initiative in the Amhara region of Ethiopia is a 42 months’ initiative implemented by CARE. We work with 32,116 women, girls, men, and boys in rural communities in Este and Fogera woreda of the south Gondar zone, where rates of FGC and EM are high and government SRH capacity/accountability is low. The BERHAN initiative will employ a holistic package of evidence-based, community-led interventions to address the drivers of EM and FGC while improving SRH service delivery and rights.

The main progress achieved in 2021 can be summarized as follows:

- The baseline and SNAP analysis were finalized in September 2021;
- Capacity-building training for project staff and partners on gender-based violence (GBV) and prevention of sexual exploitation and abuse (PSEA) was conducted;
- The consultant working with CARE Ethiopia to mainstream inclusion into defined project areas provided input on CARE’s data collection tools to mainstream inclusion, collected field data for a training pre-assessment, and prepared the training materials that will be conducted in March 2022;
- The norms identified through the Social Norms Analysis Plot were extracted and a norm validation as well as baseline validation and dissemination workshops were conducted with government partners;
- The SAA discussion and SRH & life skill manuals were finalized after incorporating the technical team’s feedback on the draft manual and contextualizing and translating them into Amharic;
- Social Analysis and Action:
 - ✓ Orientation session took place with the community.
 - ✓ SAA core groups were established at kebele/district level.
 - ✓ SAA cascading training for SAA Core groups and SAA group facilitators took place.
 - ✓ SAA group facilitators and SAA core groups conducted discussions and review meetings in each kebele.
- 120 girls’ groups were established in all implementation kebeles with a total of 3,600 adolescent girls. 60 girls’ groups participated in a “Life skill, SRH and HTP” training, that was tailored by the team to the girls’ age. The manuals were validated by the respective government experts and heads of sectors as well.
- Three supportive supervision and review meetings were conducted with zonal and woreda level government partners;

- One review meeting with VSLA management committees, and two supportive supervision visits were conducted in all kebeles as well;
- Thirty six girls' groups mentors were identified in all kebeles, and their support package is ready for distribution;
- 69 arranged marriages and 113 cases of FGC were cancelled in collaboration with government partners and the project;
- Gondar University provided a training on theatre development to 12 school clubs;
- Raw materials were identified and procured for the production of locally made sanitary pads;
- 130 school health package manuals are ready to be distributed;
- One review meeting was conducted with school teachers;
- 120 VSLA groups were established and trained;
- A gender mainstreaming workshop was conducted with government partners;
- Three women with FGC complications (fistula cases) were identified and accessed health services at Hamlin Hospital;
- One training on the Ethiopian legal framework on HTPs and GBV legal service was conducted;
- Anti-HTP committees were re-established and strengthened.

Background/ context (update)

The project has been implemented while considering all the safety procedures put in place in the context of COVID 19. The Government of Ethiopia did not introduce new restrictions due to COVID 19 during this reporting period.

The conflict in Tigray has had some impact on the project's implementation. The Amhara regional state declared an emergency decree on October 31, 2021 which included the suspension of regular activities by all government institutions during the state-wide curfew, and lasted until the end of 2021. Besides, the federal government also declared a state on emergency on 2nd of November 2021. As a result, it has been difficult to work with government partners on project activities during that period. CARE has been relocating field staffs from duty bases in Amhara due to the security situation in July and August 2021. Since then, all staff have been able to work in the field office in Debretabor safely, however with limited mobility due to the state of emergency.

BERHAN project staff attended the Governmental organization (Go) and NGO (Go-NGO) forum organized by Este woreda on June 10, 2021. A total of 33 (27M & 6F) participants attended the forum. The main objective of the forum was to enhance the participants' coordination of activity implementation and reduce resource duplication to benefit the community at large. Moreover, all participants provided a project brief and discussed possible areas of coordination. Best practices and lessons learned were also shared.

Finally, a project harmonization workshop was organized with government leaders at Fogera woreda to introduce the project's objectives, methodologies, and approaches and to harmonize them with the woreda's plans. The workshop was held on June 4, 2021, with a total of 51 (42 M & 9 F) partners from WCYA and Offices of Health, Education, Justice, Agriculture, Administration, Police, Militia, Cooperative, Finance and Economy, Water and energy, and Culture. As the workshop took place during the Ethiopian national election campaign, we also used that opportunity to request from the government partners to avoid using the project's platforms to pass on political messages. Since then the participants of that workshop have been actively involved in the implementation of the project.

Stakeholder analysis (update)

This reporting period, the project started working with 720 adolescent boys. As a result the project's total target increased to 32,116. COVID 19 and the conflict in Tigray made it difficult for CARE to engage the government partners in the implementation at times. This caused some delays in implementation.

	Overall target		Reach to date		
	<i>F</i>	<i>M</i>	<i>F</i>	<i>M</i>	<i>Pwd</i>
DIRECT BENEFICIARIES					
Gate keepers (religious leaders, clan leaders, school principals, key power holders)	160	200	116	244	
Community members older than 20 years old (parents, parents in law, grandparents, young adults)	2000	1600	2385	1215	200
Youth aged 15-19 (girls)	1722		2718 ¹		

¹ Includes girls who also received soap, masks and other items.

Youth aged 15-19 (boys)	720			720	
Youth aged 10-14 (girls)	1878		1878 ²		
Government partners	38	39	17	71	
School girls and boys participating in school sensitization	2545	1091			
Health care professionals (HEW & HW)	20	10 ³	12	6	
School teachers *	28	20	20	30	
Women/girls with FGM complication *	45	4	3		
Community members (awareness raising)	10200	9800	360		
TOTAL	19356	12760	7509	2286	200
TOTAL OVERALL	32116		9795		

Risk Management

One of the major risks anticipated in the coming project year is the continuing conflict in Tigray and its impact on bordering areas of Amhara. COVID 19 will also continue to pose a potential risk in Ethiopia, like the rest of the world. The new strains of the virus also increased the impact of the disease among communities. In addition, there was a risk of floods in Fogera woreda during the rainy season from mid-July to September 2021. Three of the project implementation kebeles close to Lake Tana were affected by floods, which resulted in a pause of community-based activities. The same risk is anticipated to happen in 2022. Similar to the previous risk analysis, lack of access to services as well as other structural barriers that hinder girls and women in achieving their SRH rights will continue to impact the project. To reduce its impact, however, the project team continues building strong partnerships with government authorities at all levels to create an enabling environment and improve SRH service access and quality.

² idem

³ In the half yearly report we made a mistake and inserted 1091, the right number is 10

⁴ In the half yearly report we made a mistake and inserted men under this category, the right number is 0

Risk Register (risk assessment at the time of reporting)			
Description of the risk⁵ (concrete event, its cause, and possible negative impact)	Like- li- hood⁶	Possi- ble im- pact⁷	Risk management measures planned (to reduce either likelihood or possible impact or both)
<p>This reporting period, the conflict had a severe impact on Amhara region. During the conflict, schools, health facilities, electric transformers, telecommunication facilities, and other facilities were looted and destroyed. As a result, the regional government depended more on humanitarian aid. In addition, there were requests by the government to take part in humanitarian activities, and to reallocate some of the project's budget towards that end. Development activities received less attention from government representatives the last 6 months of 2021.</p> <p>This coming year, the conflict in Ethiopia may not be resolved. There is still mass recruitment of military personnel on all sides. The escalation of the conflict might lead to a mass mobilization of militias and youth from different parts of the country and might af-</p>	4	2	To minimize the impact CARE will closely work with government partners and coordinate with all community-level structures in mobilizing the community for the project. Through discussions with the government representatives across all levels, the project will be able to highlight the need to work on development initiatives as well.

⁵ For the purpose of risk management in the context of projects and programmes, ADA defines risk as the danger of an event occurring that has a negative impact on the achievement of the goals of the respective project/ programme, or those of the implementing organisation or ADA. For reference, the ADA Risk Catalogue with standard risks that can arise in the context of projects and programmes is available online and can be consulted (on a voluntary basis) for the identification and description of risks. (<https://www.entwicklung.at/mediathek/downloads>)

⁶ Enter a value: (1) very unlikely, (2) unlikely, (3) likely, (4) very likely.

⁷ Enter a value: (1) insignificant, (2) significant, (3) major.

An ADA staff guidance on assessing likelihood and impact is available online (<https://www.entwicklung.at/en/media-centre/downloads>) and can be used on a voluntary basis for this reporting exercise.

fect the community’s interest in focusing on the project priorities. There will also be IDPs coming to Amhara.			
COVID 19 pandemic	3	2	The project has all the required PPE for the safety of the staff and the community who are engaged in project implementation. The project also coordinated with different government partners to get the staff vaccinated, which has been successful so far. It has been recommended that staff also access a booster dose.
Potential floods in the implementation kebeles of Fogera woreda from July to end of September depending on the amount of rain in the area	3	2	The project will closely work with the disaster prevention and control bureau and will look at options to continue implementation despite possible flooding. If that is not possible, the team will replan accordingly.

Lessons learned and perspectives

Key lessons of this reporting period include:

- The project created strong linkages with the health facilities, and with Health Extension Workers (HEWs) and community level structures (SAA groups) in particular, to follow up with families in the 8-day period after the birth of a child. SAA group members together with HEWs checked in with mothers who gave birth and provided information on the impact of FGC. Project staff observed a reduction in the incidence of FGC in BERHAN’s kebeles as a result of that collaboration.
- The project’s effort to strategically work with HEWs contributes to the reduction of HTPs in the community. HEWs are very close to the community and responsible to deliver health service packages while moving from house to house. HEWs have all the data on the number of pregnancies, ante-natal care (ANC), and post-natal care (PNC)

etc; this makes them a primary focal point for all interventions in the community. BERHAN considers them as strategic partners in all interventions and fully engages them in most of the interventions. As members of the SAA core groups they also actively contribute in reporting and taking action against early marriages and FGC. Besides, HEWs take part in identifying and referring SRH related problems in their kebeles i.e. in cases of FGC complications and GBV related health problems.

- Creating strong linkages between members of SAA community groups and SAA core groups, as well as HEWs and traditional birth attendants leads to an increase in reporting births attended by traditional birth attendants. This makes it easier to contact the family and convince them not to perform FGC on their baby girl. Besides, they also contributed to the cancellation of early marriages in the community. So far 69 were cancelled by community level structures.
- FGC practitioners started rejecting FGC and becoming role models in their community after participating in the SAA discussions. Most of these practitioners were involved in the practice with the intention of upholding their culture and for the social status attached to it, but were not economically reliant on the practice. Even if stopping the practice represents a loss in social status for the practitioners, it seems that the exchange within the SAA groups these last 8 months made that transition easier.

Finances

This reporting period the project made revisions to the budget. Based on the baseline and SNAP's findings and recommendations we suggested to add new activities to the project, as communicated to the ADA with the request for a budget amendment in August 2021. The budget amendment was eventually authorized in November 2021. This budget amendment will enable us to take measures that will help us catch up with the delays in implementation of the project due to the COVID 19 pandemic and the Tigray conflict.

In December 2021 we shared a request with the ADA after the Zonal women affairs office reached out to us to support them in providing a training to 74 women and girls from Nifas Mewcha woreda (Lay Gaynt) who are victims/survivors of GBV as a result of the conflicts that took place in Northern Ethiopia. 30 of them are victims of gang rape and two of them have faced mental breakdown, all have severe trauma. The women affairs office already provided the necessary medical and psychosocial support but wanted to provide a training on life skill and group counselling so that

the women can start improving their livelihoods. This was also authorized by the ADA.

Small changes have been made to the budget with this report. Instead of conducting a press visit (5.11), which given the current context would be a very difficult and sensitive endeavour, CARE will hire a photographer to make pictures and collect stories of project participants. Moreover, additional car rides are foreseen for the implementation of activities and because of this more intensive use, the budget for its maintenance (2.3.1) and insurance have been increased accordingly.

Annexes of the progress report

Annex 1: Matrix with the detailed description of the achievement of outcome and outputs indicators measured against baseline and target values and reflecting the quantitative and qualitative dimension of the achievement.

Preparatory Activities (P.A)

P.A.1 Project launching workshop

Completed in 2020.

P.A. 2 SNAP and gender analysis

The Social Norms Analysis Plot (SNAP) and gender analysis have been conducted together with the baseline assessment and completed in September 2021. More details can be found below.

P.A. 3 (1.2.1) Baseline

The triangulated baseline report was completed and shared with the ADA in September 2021. Based on the findings and recommendations, all the necessary adaptations to the project implementation were made. We involved power holders, as well as representatives from schools, the health and justice sector into SAA groups; supported the HTP committees at zonal, woreda and kebele level to continue or re-start their work; we identified 1,200 marginalized and vulnerable pupils (with no money to purchase school materials, who were married before the age of 18 or who struggle to attend school because of the household work they have to attend to) who will be able

to attend tutorials and school materials; we trained 69 people from the police department, Attorney General's office, and woreda Women Children and Youth office on the existing legal framework against HTP and GBV; we started working with girls to provide them with knowledge and life skills that can help them lead a more empowered and safe life.

P.A.4. (1.2.2) Produce picture code for SAA

The hiring process of the consultant who will produce the picture code reached its final stage. The selection was completed and contract signing will be finalized beginning of 2022. Initially we planned to finalize the process in October 2021 but with the very unstable security situation in the implementation areas the project team had to shift its focus on other areas of work. The picture code is designed to support the SAA groups' regular discussion as most of the participants are illiterate. It will also include a visual audio version⁸ that is interlinked with the SAA discussion manual and will complement the pictures. The picture code will be ready in the first quarter of 2022.

P.A. 5. (1.2.3) Development and implementation of GBV/PSEA monitoring and mitigation plan

During this reporting period, the majority of the key steps to develop the GBV/PSEA monitoring and mitigation plan were completed. One of them was organizing a four-day training on gender-based violence (GBV) and prevention of sexual exploitation and abuse (PSEA) in May 2021. A total of 14 (10F) project staff and 7 (2F) government partners participated.

Moreover, a referral register and tracking form that captures GBV information and SRHR services at kebele and woreda levels was developed and distributed to project staff. A checklist for feedback provision and an observation checklist on the quality of GBV referral services is also included in this form. This form is intended to be utilized by project staff to support survivors' access to services during GBV services site visitation.

In addition, the GBV specialist also provided feedback to the already developed routine data collection tools to make sure the tools capture GBV issues. The project will

⁸ Visual cartoons

also start using CARE international’s GBV mitigation and monitoring handbook that was just finalized.

Another milestone is the finalization of the project’s Feedback and Accountability Mechanism. The latter is for community people to provide feedback, share complaints or report GBV incidences and misconduct related to CARE’s work, CARE employees and related personnel. Already 24 suggestion boxes were procured and installed at community centres and schools for project participants to provide feedback anonymously. Communities can also talk directly to a CARE staff member and/or a local partner staff who works for the BERHAN project while they are in field. The team is analysing if a phone number can also be shared as an additional channel for feedback and complaints.

P.A.6. (1.2.4) Mainstreaming Inclusion

During this reporting period, the hiring process of the consultant for mainstreaming inclusion into the project was finalized. The consultant submitted the inception report and assessment tools which were reviewed and enriched by the project’s technical team in the second quarter of this year. The consultant, based on the approved inception report, collected primary data to identify gaps in knowledge/skills and values of staff and government partners required for mainstreaming disability. Currently, the data analysis and training materials are finalized. The training for the community, government partners, and project staff will be conducted in March 2022.

Monitoring data collection tools were also reviewed by the consultants and recommendations provided to CARE Ethiopia’s MEAL staff to collect enough data on people with disabilities.

Impact: Women and girls in Amhara exercise their sexual and reproductive health rights leading to improved wellbeing

Indicator: % of women aged 15-49 who report making their own informed decisions regarding sexual relations, contraceptive use, and reproductive health care (CI Indicator 9 & SDG indicator 5.6.1)

	Base-line	August 2022	August 2023	Remark
Target	9.8%	25%	50%	

(planned)				
Achievement	N/A			MTR and ETE ⁹ will inform the achievement.
Comparison (e.g., in %)	N/A			

Indicator: % in gender-equitable attitudes toward women's and girls' sexual agency (CI supplementary indicator GE3)

	Baseline	August 2022	August 2023	Remark
Target (planned)	6.9%	25%	42%	
Achievement	N/A			MTR and ETE will inform the achievement.
Comparison (e.g., in %)	N/A			

Outcome: Increased rejection of and improved response to FGC and EM by community members, service providers and Government authorities in Amhara

Indicator: % of community members who think that girls should be married before the age of 18 (contributes to SDG indicator 5.3.1)

	Baseline	August 2022	August 2023	Remark
Target (planned)	18.6%	11%	5%	
Achievement	N/A			MTR and ETE

⁹ MTR= Mid Term Review; ETE: End Term Evaluation

				will inform the achievement.
Comparison (e.g., in %)	N/A			

Indicator: % of households who refrain from subjecting their children to EM although previously planned.

	Baseline	August 2022	August 2023	Remark
Target (planned)	9.8%	40%	70%	
Achievement	N/A			MTR and ETE will inform the achievement.
Comparison (e.g., in %)	N/A			

Indicator: % of households who refrain from subjecting their children to FGC although previously planned.

	Baseline	August 2022	August 2023	Remark
Target (planned)	8.6%	30%	60%	
Achievement	N/A			MTR and ETE will inform the achievement.
Comparison (e.g., in %)	N/A			

Indicator: # respondents who report a case of FGC

	Baseline	December 2021	August 2023	Remark
Target (planned)	60		180	
Achievement	N/A	113		Monitoring data, MTR and ETE will inform the achievement.
Comparison (e.g., in %)	N/A			

Indicator: # respondents who report a case of EM

	Baseline	December 2021	August 2023	remark
Target (planned)	77		180	
Achievement		111		Monitoring data, MTR and ETE will inform the achievement.
Comparison (e.g., in %)				

Output 1. Improved ability and agency of community members to question and address the underlying causes of FGC, EM, and low utilization of SRH services

Indicator: # action plans against FGC/EM endorsed by members of Social Analysis and Action groups

	Baseline	December 2021	August 2023	Remark
Target (planned)	N/A		120	
Achievement	N/A	60		Monitoring data, MTR and ETE will inform the achievement.
Comparison (e.g., in %)	N/A			

Indicator: % of adolescent girls who are empowered to seek sexual and reproductive health information and services when they need them (disaggregated by marital status)

	Baseline	August 2022	August 2023	remark
Target (planned)	27.1%	35%	42%	
Achievement				MTR and ETE will inform the achievement.
Comparison (e.g., in %)				

Indicator: % of unmarried adolescent girls reporting that they have the confidence to refuse marriage

	Baseline	August 2022	August 2023	remark
Target (planned)	8%	13%	20%	

Achievement				MTR and ETE will inform the achievement.
Comparison (e.g., in %)				

Act. Cluster 1:1/ validation of norms and development of training materials

4.1.1.1. Baseline/SNAP/Gender Analysis dissemination and validation workshop

The project organized two validation workshops on the baseline findings. From the draft report, the BERHAN technical team identified key social and gender norms and organized a norm validation workshop with 42 (9F) regional, zonal, woreda, and Gondar university partners in May 2021. The participants discussed thoroughly the norms identified and all agreed that they are the root causes of inequality in their community. This reporting period the participants worked closely with the project in the fight against social and gender norms affecting women and girls' lives in the community, despite the current events in Northern Ethiopia.



Besides, a baseline finding validation workshop was held in the presence of 30 (4F) regional, zonal, woreda signatory office heads in July 2021. The consultant presented both the qualitative and quantitative findings including the main recommendations. Based on the presentation the participants discussed the findings and validated them. In addition to the presentation of the consultant, a short motivational leadership presentation was conducted by the author of the book “Abrhot- Enlightenment”. The latter works at Bahir Dar University and stressed the importance of the commitment of government leaders to show accountability towards improving SRH services.

4.1.1.2. Develop SAA discussion manual, SRH, and life skill training manual:

The development of the SAA discussion and SRH & life skill manual was completed after a multi-level review and contextualization process. The SRH and life skill manual is available for two age categories, for adolescents aged 10-14 and 15-19. The first draft of the manual was developed by the BERHAN technical team referring to the baseline



findings and other similar manuals from CARE Ethiopia. In July 2021, the project then organized a manual review workshop with CARE Ethiopia technical staff drawn from different projects. A total of 17 (11F) participated and provided input to enrich the manual.

To ensure ownership and acceptability of the manuals, a two-day manual review and contextualization session was organized with 18 (2F) government technical experts on December 2-3, 2021 at Debre Tabor town. Furthermore, the manuals were also presented to 15 (7F) higher level government partners on December 5-6, 2021. Eventually, their comments were incorporated by the project team and the manuals were finalized and translated into Amharic. 300 copies of the manual are currently in use.

Act. Cluster 1:2. Social analysis and action: orientation, training and cascading

4.1.2.1 Conduct orientation session for community

SAA orientation sessions were organized in all the 12 implementation kebeles of the BERHAN project in collaboration with government partners who participated in the SAA Training of Trainers (ToT). Participants included kebele government partners, religious leaders, cultural leaders, in-laws, parents, grandparents, and youth. The project's overall description, the purpose of SAA, implementation methodology, and member selection criteria were discussed with the participants. Though the participants expressed doubts and scepticism at the beginning of the project, CARE staff observed already a shift as participants express more and more their interest to support the implementation process.

4.1.2.2. SAA TOT training for project staff and government partners

Completed in 2020.

4.1.2.3. Establish SAA core group at kebele/district level

12 SAA core groups with 360 members (244M and 116F) were established in the 12 implementation kebeles of BERHAN during this reporting period. Each group has 30 members (20F, 10 M), consisting of the head of kebele administrators, kebele managers, HEWs, HWs, school directors, female teachers, religious leaders, cultural leaders, police representatives and other very influential people in the community.

4.1.2.4. Provide SAA cascading training for SAA Core groups

After the establishment of the SAA core groups, trainings focusing on the basic concept, principles, and implementing approaches of the SAA methodology were cascaded in March 2021 to 350 (238M and 112F) members. The training included participatory discussions and provided a platform for open reflections among the participants. A lot of effort was applied to build confidence and transparency during the discussions, especially with the female participants and religious leaders. The community in the northern part of Ethiopia where BERHAN is being implemented is mostly homogeneous in terms of religion and ethnic group, which makes the norms and culture very rooted and strong. The training methodology used was very interactive and included role play. It also enabled participants to practice different SAA tools (including “gender box”, value clarification, pile sorting, problem tree analysis) from the SAA manual. At the end of the training, the participants prepared a plan to hold SAA discussions bi-monthly, support, and follow up on SAA community group discussions. Most of them also agreed that they should prevent EM and FGC in their respective localities and support girls’ education.



This last half-year, the SAA core groups continued their discussions and covered an average of 9-10 topics, including community dreams and visions; changes seen in adolescent girls; power relations in the community; FGC and EM; decision making in

the household; male engagement in SRH; girls and women’s mobility. On average, 28 members per group attended the sessions monthly. Between July and December 2021 some of the group members met less regularly, as the Northern conflict occupied the members’ minds.

4.1.2.5. SAA cascading training for SAA group facilitators

One SAA cascading training was also conducted with 237 (117F and 120M) SAA facilitators (each SAA community group has 2 facilitators) after the establishment of 120 SAA community groups (10 per kebele). The selection of SAA community group members focused on the integration of people with disabilities, marginalized women, and FGC survivors/victims: among the 3,600 SAA group members, 200 are people with disabilities, and 232 are survivors of FGC/EM and/or illiterate women. The establishment of the groups was supported by project staff and government partners who participated in the SAA Training of Trainers in year one of the project.



The SAA facilitators use the manual to guide the discussions of the group members. During this reporting period, the groups covered an average of 9-10 topics during their discussions (same topics as the ones covered by the SAA core groups). In addition, the SAA community groups developed 60 SAA action plans in collaboration with the SAA core groups, mainly to fight the existing HTPs (FGC and EM) in their communities. The group members agreed to create awareness on the impact of EM and FGC during community events and to report any HTP incidence in their vicinity. During this reporting period, 111 EM cases and 113 FGC cases were reported by the SAA members either to core groups or to legal bodies.

4.1.2.6 "Talking Books": Pilot for COVID-19 response

As a response to the COVID 19 pandemic, the project planned to introduce an innovative technology, called the “talking books”. After the development of the concept note and approval by ADA, the project team started working on the development and implementation plan with the company Amplio. Following the

purchase and shipment of 72 talking books to Ethiopia, the devices had to be registered with the Government offices in South Gondar (a new requirement under the state of emergency).

The project team participated in a training provided by Amplio to learn how to use the software and analyse the data collected. The audio content of the talking books is being recorded currently. A major challenge that caused delays in recording the audio content was the interruptions and uncertainties as a result of the security situation in Northern Ethiopia. The team was also focusing on fast-tracking other activities requiring the participation of local government representatives. The team plans to distribute the talking books latest by the end of March 2022.

Act. Cluster 1:3. Training of Girls Groups on SRH and HTPs

4.1.3.1. Provide training for Girls Groups on sexual reproductive health and HTP

The project in collaboration with the government partners and community leaders organized a total of 120 girls' groups with a total of 3,600 adolescent girls in Estie and Fogera Woreda. The girls aged 10 -14 and 15-19 were grouped separately to address their age-specific needs.



This reporting period 60 girls' groups with 1,728 members in Este woreda received training in December 2021 and January 2022 on sexual and reproductive health and HTPs. The training was provided considering the girls' age. The training was facilitated by experts from the health sectors, the biology teacher department, and SRH school club leaders. Before facilitating the trainings, the latter received orientation on CARE's do no harm policy in engaging with adolescent girls. The training modality was participatory, and included role play, drama, group discussions and reflections. The training was provided using the project manual, and there were daily briefings between the facilitators and project staff to ensure the quality of the training. After the training the 60 groups conducted preparatory meetings to select the group leaders and agree on their bylaws. The remaining 60 groups will be trained in 2022.

4.1.3.2. Provide training for Girls Groups on life skills development

One of the major activities executed in this reporting period was providing training to girls' groups on life skill. 1,728 adolescent girls from 60 girls' groups in six operational kebeles of Este woreda were trained for three consecutive days in December 2021 and January



2022. The training covered psychosocial health (self-awareness, self-esteem, confidence), negotiation and decision-making skills, as well as issues of peer pressure, stress management, and the basics of life skills. The training modality was participatory (role play, drama, group discussions and reflections) and daily briefings and recap sessions were conducted with trainees and trainers to ensure the quality of the training. As part of the training assessment the project team attended some of the training sessions and wrote down their observations on the participation of the girls during role play, exercises and presentations of group works. They also took notes on how the trainings were delivered and interviewed girls on the training.

Moreover, a training on life skill and economic empowerment was provided to 74 women and girls from Nifas Mewcha woreda (Lay Gaynt) who are victims/survivors of GBV due to the conflict. The training took place in Debre Tabor and the women were invited to work on a business plan for the income generating activity they have in ind. Government partners from the WYCA office will follow up with them on those plans.

4.1.3.3. Train community mentor to support the Girls Groups (on SRH and life skills)

The BERHAN project trained 36 mentors of girls' group (three from each project kebeles) to equip them on issues of life skills, gender, SRH and HTP. The training took place in Bahir dar City from November 29 - December 01-2021. The training also focused on building the capacities of the mentors in facilitating girls' groups discussions.

4.1.3.4. Print Government Puberty Book for girls

Puberty books were printed for 3,600 girls, who are direct beneficiaries of the BERHAN project, and we started with the distribution in the 12 kebeles. The books have tailored information about adolescents' natural and hormonal changes and explain how to deal with them. It provides critical information (including pictures) on puberty changes and management, which is vital for a smooth transition to adulthood.

4.1.3.5. Support Package for girls' mentors

The project, in close collaboration with the government partners, identified 36 mentors for the girls' groups in all the implementation kebeles. The project procured a support package for 24 mentors, which will include a branded umbrella, bag, raincoat, t-shirt, stationery materials, safety shoes, and BERHAN manuals. The remaining 12 mentors will receive it in 2022.

4.1.3.6 Training for boys' groups on SRH and HTP

With the objective of enhancing men and boys' engagement in SRHR and increasing the agency of boys, BERHAN established 24 boys' groups in each of the 12 project kebeles in the months of September and December 2021. The boys selected for the groups usually dropped out of school, are illiterate or were married under the age of 18. The trainings will take place in 2022.

4.1.3.7 Support (materials and tutorials) for marginalized female pupils

Planned in 2022.

Act. Cluster 1.4. Participatory review meetings, supervision, and class learning

4.1.4.1. Conduct quarterly supportive supervision

Three supportive supervision visits were conducted in June, September and December 2021 in collaboration with government technical experts from offices of woreda women's affairs, education, health, administration, the Attorney General, cooperative and police. The main objective of the supportive supervision was to observe the SAA

implementation at the ground level and to provide support to the facilitators when needed. A checklist was developed to guide the supportive supervision team, who employed various methods including Key Informant Interviews (KII), Focus Group Discussions (FGD), and observations to get the community and individual's reflections on the project's progress.



After each field visit, a reflection session was conducted and led by the head of the woreda administration. In those sessions the team provided a summary of the overall feedback they received and shared suggestions on the way forward. During the first visit the key reflection was that the team should increase the speed of the implementation to respond to the needs of the communities. They also emphasized the need to involve the Anti-HTP committee in supporting the SAA community and core groups, which was realized in the second half of 2021. During the second and third visits, the supervision team observed first changes among individual and group reflections, as they expressed increased willingness to challenge the deeply entrenched social norms that are detrimental to women and girls. The groups expressed their strong commitment to fight against early marriages, FGC and challenged the inequalities at the household level, especially with regards to the division of household chores and decision-making power.

Finally, in December 2021, a large review meeting was held with members of the SAA core and discussion groups to prepare them for the upcoming wedding session (January and early February) in the community. The meeting will also help the group members to organize and strengthen the follow-up in their vicinity and report any incidences of early marriage and FGC to the responsible bodies. A total of 566 (353 M & 213 F) participants attended the review meeting led by woreda signatory office leaders.

4.1.4.2. Conduct monthly review meetings with SAA Facilitators

An average of 5-6 review meetings per group were conducted this year with SAA facilitators and SAA core groups to review their monthly progress, observed changes, challenges, and provide solutions for those challenges. Core group members were also invited to participate in the SAA facilitator review meetings, to better support the SAA community groups and strengthen the linkages between them. The SAA review

meeting also served as an important platform for the groups to share ideas and the remarkable efforts they made in fighting early marriages and FGC in their localities.

Other

In addition to the monthly review meetings, the project in collaboration with the woreda partners organized a one-day review meeting with 345 (229 M & 116 F) SAA core group members in April 2021. The meeting was facilitated by the government partners to review the core groups' discussions and provide direction to the core group members to fight early marriages during the peak periods (January and April), and beyond. The group's commitment to hold regular meetings was high and all promised to work with their group and community structures to monitor and take action against planned marriages in their kebeles- which most of them did in the second half of the year.

As a result, the groups in close collaboration with the woreda government partners were able to cancel 69 early marriages out of 111 total marriages reported. These were done through a series of discussions with the brides' parents and even by inviting the police when the negotiations failed to work. Among the 111 cases, 9 weddings were allowed once the age verification was done at the health center and the girls were 18 years old or older. Unfortunately, 24 early marriages could not be cancelled through negotiations and are still under follow-up by the woreda officials.

Woredas	Number of suspected early marriages reported	Number of early marriages canceled	Number of confirmed early marriages that took place	Number of marriages allowed after age verification from health center (18+)
Este	39	31	3	5
Fogera	72	38	21	4
Total	111	69	24	9

Finally, as mentioned before, the community was also able to detect and convince the families to cancel 119 plans for FGC.

4.1.4.3. Organize cross-learning visits among SAA/VSLA groups

Planned in 2022.

4.1.4.4. Conduct quarterly review meetings with the Girls Groups/mentors

Planned in 2022

4.1.4.5 Training on Ethiopian legal framework on HTPs and GBV for Anti HTP committee

BERHAN supported the re-establishment of the zonal, woreda and kebele anti –HTP committees. The committees were established from regional to kebele level to fight harmful traditional practices that are hindering the development of adolescent girls, women, and children. The committee members consist of representatives of BERHAN’s signatory offices and other sector offices who are working directly and indirectly on the same thematic areas as BERHAN. According to the TORs and scope of work (SoW) the chairperson is a representative of the zonal or woreda administration office and a representative of the women, children, and youth affairs office serves as secretary. After the reestablishment of the committees, the members committed to meet the last week of every month to review the committee’s performance, challenges, and agree on actions plans when necessary. Unfortunately, while the kebele level committee respected that commitment and met regularly, woreda and zonal level committee members did not due to other pressing priorities (Tigray conflict).

A two-day training on the legal framework against HTP and GBV was organized for legal service providers from June 18-19, 2021. The training was organized in collaboration with Fogera woreda’s attorney general office. A total of 69 (51M & 18 F) participants from the police department, Attorney General office, and woreda Women Children and Youth office attended. The purpose of the training was to raise the participants’ awareness on gender equality, international human rights, the content of the Ethiopian constitution on human rights, and domestic laws that exist for the protection of women and children’s rights and the prevention of GBV. Specifically, the participants discussed the legal implications for cases of FGC, early marriage, rape, and human trafficking and the roles of the justice sector in combating Harmful Traditional Practices.

Act. Cluster 1.5: Behavioral Change Communication and involvement of role models

Planned in 2022.

Act. Cluster 1.6. Sensitization of teachers and school clubs

4.1.6.1. Organize and strengthen school clubs

Twelve schools, one in each implementation kebele, were selected. The most important criteria was that they should have large numbers of students aged between 10-19. Afterwards school clubs that work on SRH issues were identified (SRH club, mini media, and theatre club). For the schools that did not have clubs, the project supported their establishment. A gap assessment was conducted in the first year of the project in collaboration with school principals and club representatives to find out what the clubs were missing. Based on the assessment items were listed and procured to strengthen the school clubs. The items bought included audio kits for mini media and theatre clubs, stationary materials, a wooden table and chair for the SRH clubs, and a window cover and plastic carpet for menstrual hygiene management rooms. The material will be distributed in January 2022 to the schools. Finally, as not all schools have MHM rooms, the project staff is negotiating to get one small room in all schools that can be used for this purpose.

4.1.6.2. Training and theater development for school clubs on HTPs, gender, and life skills

The project provided a training to 38 (14F and 24M) teachers (who are also part of school clubs) and 7 project staff (4F and 3M) on theater development in collaboration with Gondar university, school of theatrical art. The plays will create awareness among school girls and boys on social norms that hinder girls to access education and SRH services and make them vulnerable to economic shocks and stresses, early marriage, and FGC.

The types of theater methodologies found suitable for the project's objective include "forum theatre"; this kind of theatre helps participants identify health and psycho-social problems, or SRH and economic issues, use stories to express how these issues impact their life, and collect alternative solutions from the audience. Another method that will be used is "community-based theater", which enables the audience to share their needs and problems and to develop solutions together.

4.1.6.3. Refresher training on HTPs, gender, and lifeskills

Planned in 2022

4.1.6.4. Training for teachers on school health packages, gender and life skills

A training on school health package, gender, life skill, and HTP was provided to 48 teachers and 30 woreda experts from woreda education, women affairs, health and the attorney general's offices from the 12 operational kebeles BERHAN works in. The first round of the training took place at Bahir Dar city for four days on October 11-14, 2021 and the second round from November 29 – December 2, 2021.



4.1.6.5. Refresher training for teachers on school health packages, gender, and life

Planned in 2022

4.1.6.6. Training for teachers on preparation of locally made sanitary pads

Planned in 2022

4.1.6.7. Production of locally made sanitary pad

Raw materials needed to produce locally made sanitary pads were identified and procured and will be distributed in February 2022.

4.1.6.8. Bi-annual review meetings with teachers

Two bi-annual review meetings were conducted with teachers from the 12 operational kebeles of BERHAN. The first review meeting was conducted on June 27, 2021, in Fogera and Este woreda centers, with the participation of 54 (25F) school principals, supervisors, teachers, school club representatives, and one participant from the woreda education office. The second one was held in Debre tabor town on December 22, 2021 with a total of 48 participants (34 M &14F) from Fogera and Este Woreda. The participants were primary school principals, mini-media, SRH, and MHM (hygiene and sanitation) club leaders. The main objective of the review meeting was to

create linkages between the schools and the members of SAA community and core groups. as well as with the girls' group members. Moreover, the principals of each school working with the project are SAA core group members and attend monthly review meetings with SAA facilitators and core groups in their respective kebeles. During that last meeting the participants were also able to discuss some of the issues that had been identified during last year's first meeting:

- The participants had discussed that almost all the schools had no standardized menstrual hygiene management rooms and gender-sensitive latrines. As of now, all 12 schools selected one room for MHM, which will be furnished gradually.
- The participants also said that pupils usually report cases to their teachers, but that they need other channels to report cases. BERHAN distributed suggestion boxes in each school, which teachers check twice per week and discuss with the principal for further action.
- Finally, participants stated that school linkages with Kebele informal (anti-HTP committee, SAA...) and formal structures (health post, health centres, Kebele administration...) were not strong enough. The project strengthened those linkages in multiple activities and meetings.

4.1.6.9. Print and distribute government school health package manuals:

One hundred thirty school health package manuals are ready to be distributed to schools and kebele centres in the twelve operational kebeles of BERHAN. The project team decided to hold on with the distribution, as teachers and students would not have been very motivated to use the manual, given the conflict situation.

4.1.6.10. Produce IEC/BCC materials on SRH/HTPs

Planned in 2022.

4.1.6.11 Establish Menstrual Hygiene Management rooms

Planned in 2022.

OUTPUT 2. INCREASED ABILITY OF MARGINALIZED COMMUNITY MEMBERS (AND FGC PRACTITIONERS WHO ABANDON THE PRACTICE) TO GENERATE INCOME AND SAVE MONEY

Indicator 2.1 # of FGC practitioners in targeted Kebeles who reduced or stopped the practice of FGC

	Baseline	December 2021	August 2023	Remark
Target (planned)	69 ¹⁰		120	
Achievement	N/A	60 (stopped the practice)		Monitoring data, MTR and ETE will inform the achievement.
Comparison (e.g., in %)	N/A			

Indicator: % of women aged 15-49y. participating in VSLA who report they are able to equally participate in household financial decision-making (disaggregated by vulnerability)

	Baseline	August 2022	August 2023	Remark
Target (planned)	42%	60%	80%	
Achievement	N/A			MTR and ETE will inform the achievement.
Comparison (e.g., in %)	N/A			

¹⁰ Who stopped or reduced the practice within the last year

Indicator 2.3 % of women aged 15-49 engaging in VSLA who increased their savings

	Baseline	December 2021	August 2023	remark
Target (planned)	N/A		100% (2363)	
Achievement	N/A	540		Monitoring data, MTR and ETE will inform the achievement.
Comparison (e.g., in %)	N/A			

Act. Cluster 2.1 Village Savings and Loan Association (VSLA) training and distribution of VSLA kits

4.2.1.1. VSLA TOT training

Completed in 2020.

Act.4.2.1.2. Support and follow the formation of VSLA groups

The project team in collaboration with the woreda and the kebele partners discussed with the SAA community groups the introduction of the VSLA approach, in all 12 operational kebeles. All 120 SAA groups were interested in implementing the VSLA approach. The introduction of the VSLA in SAA groups can help to ensure the group’s sustainability and cohesion; it will provide a platform with a financial incentive where members can also discuss topics and challenge inequalities after the project phases out.



Accordingly, 120 VSLAs (60 in Fogera and 60 in Este woreda) were established with 3,593 (1194M and 2398F) members.

Woreda	Total Number Members		
	Male	Female	Total
Fogera	585	1210	1795
Este	592	1206	1798
Total	1177	2416	3593

The VSLA groups agreed on their bylaws and selected five management committee members (chairperson, secretary, treasury, and two key holders). 81% of VSLA management committee leaders and 35% of the group secretaries are women.

s.n.	Woreda	VSLA management committee			Leadership Representation			
		Female	male	Total	Chairperson		Secretary	
					Female	male	Female	male
1	Fogera	179	121	300	39	21	21	39
2	Este	183	117	300	59	1	22	38
	Total	362	238	600	98	22	43	77

Unfortunately, eight members of the VSLA dropped out during this interim reporting period because they either were not interested in saving, not committed to meeting regularly or some of them moved to conflict areas as per the call from the regional government. The project team is currently following up with them to assess if they can commit to their participation.

4.2.1.3. Provide VSLA cascading training

VSLA cascading training was conducted for three days in the project's 12 operational kebeles between July 9 and August 5, 2021. A total of 3,541 members (2,363 female and 1,178 male) participated. The objective of the VSLA training is to help the members understand the VSLA approach, principles, and basic working modalities including procedures for saving, loan reimbursement, and social fund contribution. Besides, it helped the members get familiar with



the role of the management committee, the saving kits' components, the group's by-law/constitution, registration book and documentation requirements. The training included both theoretical sessions on the VSLA methodology and principles as well as role-play on saving and lending procedures.

Since the training took place, VSLA groups started saving and providing loans. As of December 2021, 3,593 VSLAs group members saved a total of 182,980 ETB (about 3,195 EUR¹¹) and contributed 43,718 ETB (about 763 EUR) to the social fund. The total saving activities per kebele are summarized in the table below:

S. N	Woreda	Kebele	# Of members start of cycle			Saving status (ETB)	Social Fund Status (ETB)
			Male	Female	Total		
1	Fogera	Wotenb	99	201	300	12269.4	3260.4
2	Fogera	Zeng	99	201	300	15154.8	4292.4
3	Fogera	Tiwazakena	93	204	297	12189	2868
4	Fogera	Kidist Hana	98	201	299	16245	3933
5	Fogera	Shina	99	200	299	17433	3933.6
6	Fogera	Wagetra	97	203	300	39994.5	6065.1
	Fogera Total		585	1,210	1,795	113,285.7	24,352.5
7	Este	Genamemcha	101	199	300	13050	3060
8	Este	Komtse Abeje	96	204	300	9339	3311.1
9	Este	Denba	100	200	300	10692	3118.5
10	Este	Berkut	95	204	299	13095	3317.4
11	Este	Dengolt	100	200	300	13410	3218.4
12	Este	D/selam	100	199	299	10108.5	3340.2
	Este Total		592	1206	1798	69,694.5	19,365.6
	BERHAN Total		1,177	2,416	3,593	182,980.2	43,718.1

In addition, VSLA groups started providing loans to their members. To date, a total of 143,449 ETB (about 2,504 EUR) were disbursed to 806 VSLA group members (22 people with disability). The loans were used for different economic activities including poultry raising, the production of local alcoholic beverages to be sold on the market,

¹¹ Conversion calculated on 25th Feb 2022

animal rearing, and cotton preparation for weaving. In some rare occasions members used the loans to cover the costs of medical services, to purchase agricultural land fertilizer, and school materials, as the amounts available in the social fund were too low. They will nevertheless pay back these loans. The table below summarizes the loan disbursement:

S. N	Woreda	# Of members start of cycle			Value of loan outstanding (ETB)	Number of persons who took loan			PWDs male	PWD-female
		Male	Female	Total		male	female	Total		
1	Fogera	585	1210	1795	107,284	159	309	468	9	3
2	Este	592	1206	1798	89,713	74	233	307	10	8
	Total	1,177	2,416	3,593	143,449	266	540	806	19	11

4.2.1.4. Procure and distribute VSLA kits

The project initially planned to establish 100 VSLA groups in all operational areas, however, as all 120 SAA groups were strongly interested in using the VSLA approaches the project decided to procure an additional 20 VSLA kits. All the kits were already distributed to all the groups including a savings box, record book, basic calculator, ruler, stationery, different colors of plates, and keys to lock the saving box.



4.2.1.5. VSLA training for the Girls Groups

Planned in 2022

4.2.1.6. Provide VSLA kits to the Girls Groups

The kits were procured in June 2021 and will be distributed to the girls' groups in March 2022, when they will participate in the VSLA training.

Act. Cluster 2.2 Income Generating Activities, livelihood support and linkages to financial institutions

Planned in 2022

Act. Cluster 2.3 Participatory review meetings and supervision

4.2.3.1 Quarterly supportive supervision to VSLA groups

This reporting period, the BERHAN project conducted supportive supervision visits with 43 VLSA groups in September and December 2021 in all 12 kebeles. Experts from woreda offices for WCYA, agriculture, administration, technical and vocational enterprise, as well as kebele level managers and cooperative sector representatives participated. Prior to the supportive supervision, the project team provided orientation to 38(8F) experts on the purpose of conducting supportive supervision visits, the modalities and tools to use during the visits. The team supported the groups during their visit to improve their saving practices, loan utilization and provided guidance on how they can correctly fill in the VSLA registers, passbooks, and loan management and administration documents. They also asked if female members can participate in household financial decisions.

Considering the short period of establishment, VSLA groups have been doing well. Their saving capacity and loan provision are encouraging. Besides, groups have been found to exercise their bylaw, and the majority have been meeting regularly. However, there are also some issues that will need to be improved: i) some groups are losing sight of the SAA activities they are meant to conduct, as they mainly focus on VSLA activities; ii) in some cases, VSLA members would disregard some of the bylaws. At the end of the supervision,



the team together with the VSLA group members developed an action plan for the next quarter to address those issues. Woreda level experts will regularly support the VSLA groups to implement those action plans, and to continue improving record-keeping and documentation.

4.2.3.2. Conduct quarterly VSLA review meetings with the group leaders

A review meeting with 575 (318F) VSLA management committee members of all kebeles was conducted for two days in December 2021. The first day was for review and on the second day a refresher training was conducted to address some of the key gaps identified in the review process. The review meeting was chaired by government partners from woreda head of the women, children and social affairs office, and cooperative office.

During the review meeting, groups brought their savings box and passbooks to be reviewed. The team was able to verify the groups' saving activities per month, the status of their social fund and loans and the type of income-generating activities the members pursue. They reviewed also which members took loans, and if persons with disability are able to participate and are provided with loans. Moreover, they checked if the groups are applying their bylaw, how the management committee is performing, if the documentation is accurate and asked if the groups are facing any particular challenges.

Eventually, the team concluded that 97% of VSLA group members regularly save money. A total of 806 (540F) members (more than 66% women) started income generating activities (IGA) by taking a loan from the group. The project staff also concluded that the high number of women members taking a loan and starting an IGA is inspiring. The overall report of the VSLA groups is attached in annex 1 and annex 2.

Finally, a plan of action was developed to improve certain issues identified, including keeping proper savings records, focusing on increasing women's financial decision-making in the household, and continuing to engage in monthly discussions on existing social norms

OUTPUT 3. IMPROVED ABILITY OF GOVERNMENT STAKEHOLDERS AND SERVICE PROVIDERS TO RESPOND TO SRH SERVICE NEEDS AND TO FGC COMPLICATIONS

Output 3. Improved ability of government stakeholders and service providers to respond to SRH service needs and to FGC complications

Indicator: # of new/strengthened inclusive accountability spaces in which marginalized citizens can negotiate with service providers and public authorities on issues of SRHR.

	Baseline	December 2021	August 2023	Remark
Target (planned)	N/A		5	
Achievement	N/A			Monitoring data, MTR and ETE will inform the achievement.
Comparison (e.g., in %)	N/A			

Indicator: # cases of FGC complications referred within the health system

	Baseline	December 2021	August 2023	Remark
Target (planned)	N/A		45	
Achievement	N/A	3		Monitoring data, MTR and ETE will inform the achievement.
Comparison (e.g., in %)	N/A			

Indicator: # of government stakeholders reporting increased capacity to deliver responsive SRH services (disaggregated by sex)

	Baseline	December 2021	August 2023	Remark

Target (planned)	N/A		77	
Achievement				Monitoring data, MTR ETE will inform the achievement.
Comparison (e.g., in %)				

Act. Cluster 3.1 Training on Gender Equality and Diversity (GED)

4.3.1.1. Annual Gender mainstreaming meeting with Government partners

A two-day gender mainstreaming workshop was conducted with government partners from the South Gondar zone, Este and Fogera woredas from June 30 – July 1, 2021, at Gondar town. A total of 71 (54M & 17F) participants attended the workshop. During that workshop the participants worked on a budget for mainstreaming gender in their offices- CARE will monitor if and how the budget for mainstreaming was utilized by the participants of the workshop in 2022.

4.3.1.2. Gender Equality and Diversity Training

Gender equity and diversity training was provided for four days on September 13-17, 2021, to 17 government partners from zonal and woreda sector office (women, children and social affairs, health, and justice) and 8 project staff.

During CARE’s supportive supervision visit, the government partners reflected on the benefits the training has had on adjusting their lens on gender equality and diversity. One of the Este woreda women, children and social affairs expert, Endalkachew, said “the training has given them (the participants) more capacity and knowledge and has created more initiatives to entertain diversity in their organization and with their beneficiaries. They started providing friendly services to vulnerable community groups; like women with disability, women who faced gender-based violence and women who are economically not empowered”. The same reflection was also observed in the visit to Fogera woredas.

4.3.1.3 Support the regional WCYA office to organize annual regional level anti-HTP platform conference

The first conference is planned in 2022.

Act. Cluster 3.2 Strengthen referral linkages and respond to FGC complications

4.3.2.1. Sensitization events on referral linkage establishment

Creating referral linkages between government, private and non-profit SRH service providers is a prerequisite for marginalized groups, victims/survivors to access the necessary SRH services and care. During this reporting period, BERHAN identified these stakeholders, found out who provides which service, to what extent, and for whom, and created a referral linkage mapping of the implementation kebeles. A sensitization workshop on the mapping was organized at Bahir Dar on March 19, 2021, and Gondar town on March 22, 2021, with a total of 65 participants (Female 14, Male 51). The participants included representatives from the woreda health office, WCYA, attorney general's office, kebele health post, cluster health center, as well as kebele police officers, school principals, kebele managers, and hospital heads. The project team provided 500 referral cards to kebele HEW, who will then distribute them partly to village level focal persons from SAA core groups, school principals, teachers, and village leaders. When HEWs are referred a case, they make a primary observation and when necessary refer the case to health centers (HCs) at woreda level for the client to get the medical/psychological support required.

4.3.2.2 Develop referral cards and review case detection and referral linkage

This reporting period, the BERHAN project created linkages with Hamlin hospital for survivors of SGBV. To date the project identified and screened 41 women in Fogera Woreda from Zenge and Wagetera Kebele. The screening was conducted in collaboration with Hamlin hospital at Aember and Kidist Hana kebele health centers. Per the screening result, 7 cases were referred to Hamlin for further treatment. The project will further strengthen the existing referral system with the health centers to make sure that women get the treatment they need.

S. N	Woreda	Kebele	Identified cases	Linked
1	Este	DenbaQuasaye	2	
2	Este	KometsAbeja	2	

3	Este	Genamemcha	1	
4	Este	Dengolt	1	
5	Este	Berkut	3	
6	Fogera	Wotenb	6	
7	Fogera	Zeng	16	4
9	Fogera	Wagetera	10	3

4.3.2.3. Support women with FGC complications

The process of identifying women and girls with FGC complications was difficult because of the community's negative and concealing attitude towards these complications, especially fistula cases. The latter is mostly considered as a punishment of God and communities are not willing to publicly report these cases or take women and girls to the health facility for medical support, as they fear discrimination from the community. During this reporting period, three women with FGC complications (fistula cases) were identified by their kebele administrators and project community facilitators and received support in October.

4.3.2.4 Psychosocial support and age verification training for health professionals

Planned in 2022.

4.3.2.5 Establish and furnish shelters at woreda level for GBV survivors

Planned in 2022. MoUs will be signed with the woreda administration before construction of the shelters.

Act. Cluster 3.3 Community Scorecard training and interface facilitation

Planned in 2022

Act. Cluster 3.4 Participatory review meetings and supervision

4.3.4.1. Regional project steering committee monitoring visit and review meeting

This review meeting was not conducted this reporting period as the project staff was waiting for the availability of the head of bureaus. The latter had other competing priorities due to the Northern conflict. We plan to conduct it in 2022.

4.3.4.2 Quarterly supportive supervision visit and review meetings with the zonal office

Two supportive supervision visits were conducted in collaboration with the zonal and woreda government offices directly working with the project. The first one was conducted on June 7 -8, 2021 at Este and Fogera woredas respectively. A total of 19 (F 4, M12) participants from the zone and 7 participants from Este



and Fogera woredas who are sector heads and experts from the offices of WCYA, health, education, the attorney general, police, social affairs, and administration.

The second one took place on December 23, and 24, 2021 in Este and Fogera respectively, and a feedback and review meeting session was conducted on December 25 at Bahir Dar city with a total of 11 (9M & 2F) participants from zonal sector heads of Health, Finance, Administration, Communication, Justice, Cooperative, Police, Women, Youth and Children affairs office. In addition, 21 (5F) government partners from Este and Fogera Woredas participated as well.

The visits were participatory, allowing community members to speak about their SAA and VSLA group discussions and the changes they are witnessing as a result of that. The participants could also observe the group discussions first hand to better understand the process. The team discussed with the SAA core and community group, and VSLA group members using a structured checklist covering the project's objectives. The interviews with community members and observations led to the following conclusions: i) group members can identify and speak about power relations and gender equality, particularly about division of labor and economic vulnerability; ii) there is a change in attitude towards early marriage and FGC among most members of the groups; iii) members start to refuse early marriage and FGC practices and started to create awareness

in their surroundings on the harmful impact of traditional practices; iv) community members are using other social platforms like associations, Idris, Equibs, and community-based organizations that exist in their kebele to address the issues they discussed in the SAA sessions; v) members teach their neighbors about the negative consequences of EM and FGCs and actively follow up with new parents who gave birth to a girl in their surroundings; vi) community members work in collaboration with health extension workers to terminate plans of FGC.



4.3.4.3. Annual planning and review meeting with the woreda implementing partners

Planned in 2022, as woreda partners were too busy with other competing priorities.

4.3.4.4. Experience sharing visit and result dissemination meeting with donor and partners.

Planned in 2023.

5. Visibility, publications etc.

5.1.1. Press visit

Given the sensitive situation due to the conflict, we will not conduct a press visit but will alternatively hire a photographer to document change stories of selected beneficiaries. This will be conducted either in the second half of 2022 or at the beginning of 2023.

5.1.2. Visibility and communication activities

During this reporting period, different visibility activities were carried out including:

- 12 signboards were fixed at each implementation kebele and one at CARE's field office. The signboards are sized 2m*1m and include the project's name, logos, project duration, objectives, and key messages.
- All the VSLA saving boxes are branded with ADA and CARE's logo.
- Cups with ADA and CARE logos and the name of the project were printed and provided to signatory office heads.

- Scarfs with ADA and CARE logos and the project's names in English and Amharic languages were printed and distributed to government partners.
- BERHAN VSLA record books were printed with ADA and CARE logos, with the project's name on the cover page and printed messages on SRH and HTP on the back.
- Training notebooks branded for the BERHAN project were printed and used.
- All events organized by the project were branded with banners that have logos and the project's name and key messages.

S. N	Woreda	Kebele	# Of members start of cycle			# Of members save regularly	Saving status (ETB)				Social Fund Status (ETB)			
			Male	Female	Total		Value of saving per person	Value of saving per person Averagely	Monthly saving data	Quarter Saving data	Value of social fund Averagely	Monthly Saving	Quarterly Saving	Social Fund expense
1	Fogera	Wotenb	99	201	300	286	143	14.3	4089.8	12269.4	3.8	1086.8	3260.4	250
2	Fogera	Zeng	99	201	300	292	173	17.3	5051.6	15154.8	4.9	1430.8	4292.4	350
3	Fogera	Tiwa-zakena	93	204	297	239	170	17	4063	12189	4	956	2868	420
4	Fogera	Kidist Hana	98	201	299	285	190	19	5415	16245	4.6	1311	3933	410
5	Fogera	Shina	99	200	299	298	195	19.5	5811	17433	4.4	1311.2	3933.6	1550
6	Fogera	Wagetra	97	203	300	293	455	45.5	13331.5	39994.5	6.9	2021.7	6065.1	1490
7	Este	Genamemcha	101	199	300	300	145	14.5	4350	13050	3.4	1020	3060	0
8	Este	Komtse Abeje	96	204	300	283	110	11	3113	9339	3.9	1103.7	3311.1	0

9	Este	Denba	100	200	300	297	120	12	3564	10692	3.5	1039.5	3118.5	850
10	Este	Berkut	95	204	299	291	150	15	4365	13095	3.8	1105.8	3317.4	210
11	Este	Dengolt	100	200	300	298	150	15	4470	13410	3.6	1072.8	3218.4	510
12	Este	D/selam	100	199	299	293	115	11.5	3369.5	10108.5	3.8	1113.4	3340.2	350
		Total	1177	2416	3593	3455	2116	211.6	60993.4	182980.2	50.6	14572.7	43718.1	6390

S. N	Woreda	Kebele	# Of members start of cycle			Number of persons who took loan					
			Male	Female	Total	Value of loan outstanding	male	female	To-tal	PWDs male	PWD-female
1	Fogera	Wotenb	99	201	300	12614	9	51	60	0	2
2	Fogera	Zeng	99	201	300	14950	10	42	52	0	0
3	Fogera	Tiwazakena	93	204	297	12800	36	46	82	3	0
4	Fogera	Kidist Hana	98	201	299	17350	15	27	42	2	0
5	Fogera	Shina	99	200	299	37670	18	60	78	4	1
6	Fogera	Wagetra	97	203	300	11900	71	83	154	0	0
7	Este	Genamemcha	101	199	300	14750	13	28	41	2	0
8	Este	Komtse Abeje	96	204	300	4900	4	12	16	0	2
9	Este	Denba	100	200	300	5338	13	28	41	0	2
10	Este	Berkut	95	204	299	22135	20	60	80	3	2
11	Este	Dengolt	100	200	300	28890	20	70	90	2	1
12	Este	D/selam	100	199	299	13700	4	35	39	3	1
		Total	1177	2416	3593	143449	266	540	806	19	11

