FINAL PERFORMANCE EVALUATION OF WATER SANITATION AND HYGIENE TRANSFORMATION FOR ENHANCED RESILIENCY (WATER) PROJECT (COOPERATIVE AGREEMENT: AID 663-A-11-00012)

April 2014

This publication was produced at the request of the United States Agency for International Development. It was prepared independently by SaafConsult B.V.

Final Performance Evaluation of Water Sanitation and Hygiene Transformation for Enhanced Resiliency (WaTER) Project (Cooperative Agreement: AID-663-A-11-00012)

April2014

Prepared under Task Order No: AID-663-O-14-00011

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USAID/Ethiopia

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Table of Contents

ANNEXES

ACKNOWLEDGEMENTS

The consultancy team would like to express its gratitude for the support provided by the USAID mission in Addis Ababa to make this mission a success. The team would also like to thank the International Rescue Committee (IRC) and CARE Ethiopia for their support during the field work.

All pictures in this publication were taken by the field team.

ACRONYMS

FGD	Focus Group Discussion
HHCS	Household level case studies/success stories
IRC	International Rescue Committee
KII	Key Informant Interview
NRMC	Natural Resource Management Committee
V&O	Site visits and observations
USAID	United States Agency for International Development
WMC	Water Management Committee
WASH	Water Sanitation and Hygiene
WaTER Project	Water Hygiene Sanitation Transformation for Enhanced Resiliency Project

EXECUTIVE SUMMARY

In order to contribute towards alleviating the prevailing water and sanitation problems, USAID/Ethiopia designed a three-year and four months (September 6, 2011-March 31, 2014) Water Sanitation and Hygiene Transformation for Enhanced Resiliency (WaTER) Project with a total budget of almost $8 million. The project is implemented by a consortium formed by the International Rescue Committee (IRC) and CARE Ethiopia including other local organizations. The overriding purpose of this evaluation was to gain an independent view of the performance of the project to draw lessons for future USAID financed similar projects and share the lessons for other development partners.

The IRC and, CARE Ethiopia, constructed 22 new and rehabilitated 19 existing borehole-based systems with corresponding distribution networks. Environmental health agents (EHAs) and volunteer community hygiene promoters (HPs) complemented the installation of these new and rehabilitated water systems with hygiene promotion activities in target areas.

The scope of work of the evaluation included a visit to each region (Afar, Somali and Oromya) in which two project sites in each region were to be visited. This amounted to six projects sites visited out of forty-one sites in 13 days in the field and 4 days in Addis

The evaluation team developed a methodology focusing on document reviews, key informant Interviews, focus group discussions, survey of beneficiaries and personal observation to have the following questions answered:

- What were the project's contributions towards meeting the development objective of Economic Growth?
- How effective was the project in achieving its anticipated results?
- How effective was the project in mainstreaming gender issues and addressing the needs of people with disabilities?
- How was the project's approach and methodology designed to achieve project objectives?
- What worked well and what did not work? How? Why?

One of the main conclusions of the performance evaluation is that the project was very effective in achieving its anticipated results in terms of providing access to improved water sources and on hygiene and sanitation awareness. The project implementing partners have operated competently and have met all expectations as indicated in the project documents. The implementation of the core WASH activities worked well. The integration of NRM activities in the project was also appreciated by beneficiaries and served to mitigate some of the less desirable impacts of the project such as settling of pastoralists around water points, allowing livestock to graze around water points and overall sustainability of rangeland around the project site.

It is important to note that even under circumstances where you have a competent organization for implementation, sustainability issues will always remain. Especially in the remote rural areas in Ethiopia sustainability of the water schemes is a concern. The WMCs, for all their enthusiasm, only have limited technical capacities and lack of knowledge. For example the WMC of Afdera where the employees have not received technical training to run the desalination plant that is already in place. Also, experience has shown that without some sort of continued support from the Woreda the WMCs are liable to lose steam and falter. WMCs and their relations with the Woredas are the institutional basis for the sustainability of the schemes, therefore requiring continued attention. It is recommended that a longer term strategy for the sustainability of the WMCs is developed. During the implementation phase the process is sufficient. It is the long term sustainability which needs extra attention.

The rangeland management measures were widely supported by the beneficiaries. In all sites visited by the evaluation team the measures were implemented, albeit in a varying manner.

The monitoring system of the project has elements that could be improved. This refers mainly to the sequencing of the base line survey, the performance evaluation and the end-of-project survey.

1.0 INTRODUCTION

1.1 EVALUATION PURPOSE

The overriding purpose of this evaluation was to gain an independent view of the performance of the project to draw lessons for future USAID financed similar projects and share the lessons for other development partners. The USAID Mission was also interested in learning more about what works and what does not work in terms of Water, Sanitation and Hygiene (WASH) integrated with natural resources management in pastoral development.

1.2 EVALUATION QUESTIONS

The evaluation questions were structured to provide an assessment of the performance of the project, and not a statistically valid conclusion such as can usually be drawn from a full-scale survey. Details on the methodology can be found in section 3 and in the annexes.

Water point at Wajji I

2.0 PROJECT BACKGROUND

In order to contribute towards alleviating the prevailing water and sanitation problems, USAID/Ethiopia designed a three-year and four months (September 6, 2011-March 31, 2014) Water Hygiene Sanitation Transformation for Enhanced Resiliency (WaTER) Project with a total budget of almost $11.4 million. The project is implemented by a consortium formed by the International Rescue Committee (IRC) and CARE Ethiopia including other local organizations. The governmental partners for this project are Water, Health, Disaster Preparedness, Prevention, and Food Security (DPPFSB), Pastoral/Agriculture Development Bureaus and Offices at the region and district levels. The project also partners with NGOs, Community Based Organizations (CBOs) and customary institutions in the respective operation areas.

The pastoralist production system in Ethiopia, once a model of adaptive environmental balance, is under ever-increasing threat. Population growth, climate change, and policy trends are placing pressure on pastoralist communities, whose livelihoods depend on natural rangeland, placing them at risk to accelerating environmental shocks such as droughts. These vulnerabilities are exacerbated by the lack of services available in under-developed pastoralist areas. Pastoralist communities in Ethiopia exhibit some of the lowest water and sanitation coverage rates in the world. Building on considerable water, sanitation, and hygiene (WASH) experience in conflict-prone pastoralist areas, the Internal Rescue Committee (IRC) Water, Sanitation, and Hygiene Transformation for Enhanced Resilience (WATER) project contributed significantly to improving pastoralists' access to clean and sustainable water sources, hygiene awareness and access to sanitation, and rangeland management practices. Ultimately, project activities enhanced resilience and reduced conflict for beneficiary pastoralist communities in Somali, Oromia, and Afar Regions.

Summary of Strategy

The IRC and, CARE, constructed 22 new and rehabilitated 19 existing borehole-based systems with corresponding distribution networks. Environmental health agents (EHAs) and volunteer community hygiene promoters (HPs) complemented the installation of these new and rehabilitated water systems with hygiene promotion activities in target areas. Hygiene education focussed on instilling the value of safe water as well as improving key risky behaviours. Drawing on expertise in sustainable water resource provision and natural resource management, the IRC and CARE worked to ensure that proposed water interventions were implemented through a conflict-sensitive approach that maximized local capacity to manage natural resources and minimizes environmental impact. The capacity building incorporated different approaches including training the local governments in dispute resolution, and building the capacity of the local community to take ownership and enhance engagement in the management of their environment for sustainability.

Figure2: WaTER Components and Activities

IR1: Increased access to improved water sources for beneficiary communities	
1	Conduct assessments of potential new and rehabilitated water sources
2	Conduct gender-segregated community consultative meetings in all target areas
3	Design, drill, and construct 22 new boreholes
4	Rehabilitate and/or expand 19 water systems
5	Conduct pumping and water quality tests on new and rehabilitated Boreholes
6	Facilitate the election or revitalization of 41 WMCs
7	Train WMCs and operators and provide them with basic tools
8	Train WWO staff and provide them with basic tools
9	Identify, link, and build the capacity of spare parts suppliers
IR2: Improved hygiene awareness and access to sanitation among Beneficiaries	
1	Conduct formative research
2	Design, produce, and distribute appropriate information, education, and communication (IEC) materials
3	Provide refresher training for government health staff on hygiene Promotion
4	Train and deploy EHAs and volunteer HPs
5	Conduct hygiene promotion campaigns
6	Conduct collaborative monitoring of HEW, EHA, and volunteer HP field Performance
7	Train volunteer artisans and demonstrate latrine construction
8	Construct institutional latrines
9	Provide digging tools to local communities for latrine and waste pit Construction
IR3: Improved rangeland management practices	
1	Train project staff on Do No Harm approaches
2	Train Woreda administration staff on dispute resolution
3	Generate timelines and analyses of recent conflicts and their Resolutions
4	Produce GIS maps of each intervention Woreda
5	Establish committees to strengthen traditional rangeland management practices and develop rangeland management plans

6	Facilitate community-led natural resource and sociological mapping
7	Train government and pastoralist development agents on holistic resources management
8	Implement management and preparedness plans
9	Supply tools and technical follow up to thin bush from selected grazing enclosures
10	Participate in regional forum on climate change and pastoralist Livelihoods

3.0SCOPE AND METHODOLOGY

3.1 SCOPE OF WORK

The evaluators were asked to assess the progress of the three intermediate results and to what extent these contributed to the objectives of the project to improve access to sustainable safe water supply, improve sanitation and hygiene coverage and improved natural resources management around the water supply catchment.

Specific questions in order of their importance were:

1. What were its contributions towards meeting the development objective of Economic Growth?
2. How effective was the project in achieving its anticipated results? This question should be answered by assessing the project's achievements in (a) increasing access to improved water sources for beneficiaries; (b) improving hygiene awareness and access to sanitation to beneficiaries; and (c) improving rangeland management practices by linking it with water supply.
3. How effective was the project in mainstreaming gender issues and addressing the needs of people with disabilities?
4. How was the project's approach and methodology designed to achieve project objectives?
    a. How effective was the institutional arrangement and working relationship among implementing partners (the consortium in general) and with the government and other partners at different levels including the private sector?
    b. Were the project's approaches cost effective to improve access for potable water supply, sanitation and hygiene?
    c. Was there sufficient program learning, quality assurance, documentation, contribution to government policy, improvement/ development etc.?
    d. What institutional arrangement (at community, government and private sector level) did implementing partners make to ensure sustainability of the project's results/impacts?
    e. How effective was the project in building the capacity of the government staff and community members to sustainably manage the water supply, sanitation and hygiene facilities?

5. What worked well and what did not work? How? Why?

3.2 EVALUATION METHODOLOGY

The evaluation methodology was developed bearing in mind that this was a performance evaluation that would visit randomly selected sites in each region, and not a full-fledged survey of all of the sites of the project. This amounted to six projects sites visited out of forty-one sites.

On the basis of these parameters the evaluation team developed the approach to include the methodology given in the scope of work. This was:

- **Document Reviews**: review of project and other relevant documents (particularly the baseline data), targets and annual performance reports (over the years) to assess progress as reported by the project.
- **Key Informant Interviews (KIIs):**KIIs were to be held with IRC, CARE, Support for Sustainable Development, Agriculture and Pastoral Areas Development Commission of Oromia, and the Oromia Health and Water bureaus. Similarly, key informant interviews were to be organized with the Afar and Somali water, health and pastoral and aagriculture bureaus.

- **Focus Group Discussions (FGDs):** With community members in the selected operation areas.The evaluation team was to propose the number of focus group discussions it would conduct.
- **Survey of Beneficiaries:** covering sample of households/individuals that benefited from the project.
- **Personal observation (V&O)**: While the evaluation team visited project outputs such as water supply facilities, individual and community latrines, and rangeland enclosures, it should document how they were functioning and benefiting the communities.

The methodology was developed on the basis of a set of tools and questions. Triangulation techniques were applied to verify and validate statements and findings. Locations for field work were selected on the basis of the demands of the scope of work and random sampling at the sites for household interviews. Quantitative data was only used if validated. Quantitative data that was provided but could not be verified was considered indicative only.

Another salient feature of the methodology has been the use of a data platform and hand-held devices for data entry (smart phones). Using this technology the team was able to very efficiently go about data collection whilst simultaneously data was analyzed, reviewed, collated and integrated into an overall evaluation matrix from a central coordination point.

The application of the methodology is as shown in the flow-chart below:

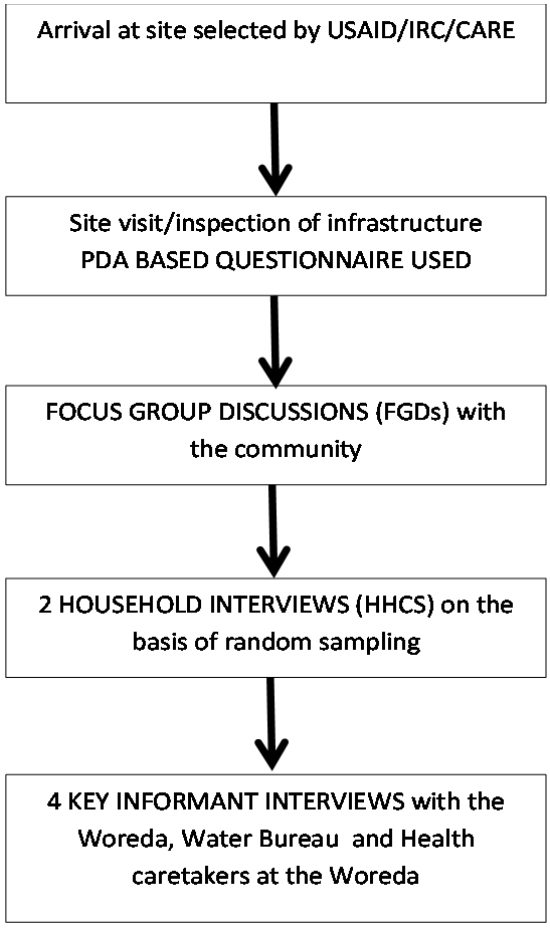

Figure 1: flow chart describing the field work process

From the flow chart shown above it can be seen that a very methodological approach was used to ensure that data acquired was useful for the evaluation. In many cases answers to questions were verified in other fora to ensure that the replies were valid enough for illustrative purposes and conclusions.

In the table below the number of various meetings and interviews are indicated per area. The table also includes the target groups for these interactions.

Type of Information	Regions			Target groups
	Samali	Oromia	Afar	
Questionnaire for WMCs	2	2	2	WMCs
KII	3	4	4	Woreda / water bureau
FGD	2	2	2	Beneficiary communities
HHCS	4	4	4	Beneficiary HHs

Figure 2: Summary tables of interaction during field work.

Regarding the sites visited, they were a combination of sites suggested in the SOW and those proposed by the implementing team and USAID. The final site selection was prepared by IRC and CARE, after consultations with the implementing team. The selection of those sites was based on variety and practicality.

From the community meeting at Gubedely

The detailed evaluation framework is included in annex 2. This framework was submitted to USAID before the field work. The framework includes detailed questions in different formats. Annex 3 and 4 also include all of the documented replies and raw data.

3.3 STRENGTHS AND LIMITATIONS OF THE EVALUATION

The evaluation has been a strong process due to a variety of factors:

- Use of a mobile Personal Digital Assistance (PDA) data platform for data collection, allowing pre-analysis and allowing the team leader to retain an overview of the progress of data collection;
- A strong team of experts that complemented each other in terms of expertise, experience and inputs;
- Strong support from the USAID office, IRC and CARE throughout the implementation of the evaluation;
- Willingness of beneficiaries to speak to the evaluation team at length.

There were also a few limitations that are worth mentioning:

- Planning was tight and logistics in the field were not always reliable;

- The consultants have abided by the scope of work in terms of locations visited, and the numbers of FGDs, KII, etc. On the other hand the baseline survey data was collected on a much larger scale, and the baseline data is often presented in terms of relative numbers such as percentages. On the basis of our field data we are able to draw conclusions specifically for the areas that we visited, and to a certain extent for the whole project. It should however be noted that there may be a margin of error due to the comparatively small sample size that the consultants were obliged to work with due to time and budgetary limitations. The sample sizes are not representative samples for all sites.

5.0 FINDINGS

The findings are presented and discussed for each intermediate result. We have developed the matrices below to integrate the baseline survey numbers with the findings of the evaluation to be able to compare these.

IR 1: Increased access to water sources for beneficiary communities

IR1: Impact indicator: 164,000 beneficiaries have year round access to an improved water source

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	0	0	0	0	IRC	
Evaluation	25,342.00	32,293.00	163,869.00	221,504.00	IRC overview	

For IR 1, no baseline data was available. No data was collected as to the number of beneficiaries that had year-round access to an improved water source. From IRC data the total number of beneficiaries for the project stands at 221,504. This number is larger than the targeted 164,000 that were included in the indicator. The conclusion is therefore that IR 1 was achieved.

A note here is that the IRC data indicated the number of beneficiaries of the project AND NOT SPECIFICALLY the number of beneficiaries that have year-round access to an improved water source.[1]

IR 1.1: Increased number of functioning water systems for human and animal use
Indicator: 22 new boreholes are drilled and constructed and 19 boreholes are rehabilitated

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	0	0	0			
Evaluation Drilled:	6	3	12	22 boreholes drilled 19 water systems rehabilitated and/or expanded(1)	8th QR IR	
Rehabilitated:	3	4	13			

For indicator IR 1.1 the conclusion is straightforward, which is that 22 boreholes were drilled and 19 water systems were rehabilitated and/or expanded. The indicator was therefore achieved.

IR.1.1a: Demonstrated increase in average water usage of target human beneficiaries in liters per person per day.
Indicator: Targeted beneficiaries use an average of 15 liters of water per person per day.

[1]Though this is the case, all water supply interventions under the WaTER project are sourced either from a deep borehole or spring water source with all year round flow. Each water supply system design also takes into account safe yield of each source which is available all year round for use.

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	16%	15%	15%			
Evaluation	100%	100%	100%		Field survey evaluation	For surveyed areas only

In all project areas surveyed by the evaluation team, water use is above 15 litres p/c/p/d. The amount of water consumed was assessed through triangulation of information received through FGDs, KIIs, V&O and quantification by counting jerry cans. In most cases people used the equivalent of one jerry can of water per person per day, which is 20 litres.

IR1.1b: Indicator: (100%) community household water supplies have zero coliform bacteria per 100 ml or measurable Cl residual exceeding 0.2 mg/litres

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	Assumed contaminated at source	Assumed contaminated at source	Assumed contaminated at source			
Evaluation	100%	100%	0%		Field survey evaluation (lab tests from local sites)	For surveyed areas /not all lab tests available

For Oromia the results are good. In Afar we were only able to obtain lab reports for one of the sites visited, and this was also good. For Somali all lab tests excluded bacteriological analyses, therefore no conclusions could be drawn.

IR 1.2: Increased capacity of village water committees to manage the operation and maintenance of their water supply systems

IR1.2: *Indicator*: 41 water systems are adequately operated and maintained by capable WMCs six months after hand-over

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	0	0	0			
Evaluation	Yes	Yes	Yes		Field survey evaluation	For surveyed areas at time of evaluation/systems are new

Strictly speaking the indicator was fully achieved. It must be noted here that this is because the systems are all new, and were within their commissioning period during the evaluation, so there are few breakdowns. Furthermore this finding is only valid for the period in which it was observed, which

the month of February 2014 is and not six months after hand-over of the systems (as per the indicator).

IR2 Improved hygiene awareness and access to sanitation among beneficiaries
IR2: impact *indicator*: 25% increase from baseline in number of caretakers that know the five critical times for hand-washing

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	0%	6%	7%			
Evaluation	100%	100%	100%		Field survey evaluation	For surveyed areas only

Through KII and FGDs, caretakers were asked to name the five critical times for hand washing in a day. All caretakers interviewed knew these times. This compares strongly to the very small number of people that knew this during the baseline survey. Whereas this is of course not a statistically relevant conclusion, this was a very positive finding.

IR 2.1: Improved hygiene promotion knowledge and skill of Woreda health office staff and Health Extension Workers (HEWs)
IR2.1 *Indicator*: 70% of trained Woreda health office staff and HEWs demonstrate improved promotion skills

For IR 2.1 the formulation of the indicator is problematic. "Improved promotion skills" is difficult to quantify and the base line has no data for this indicator. It can be surmised that certain promotion skills are present, if only because of the high score for IR2. It must be noted here however, that this may be a false conclusion as respondents indicated that the large majority of health and hygiene promotion work was done by project staff and not Woreda health staff. When asked who had provided training and awareness raising, the respondents almost always indicated that this had been project staff.

IR 2.2: Improved access to sanitation facilities

IR2.2a*Indicator*:25% of HH have adequate latrines that are hygienic, in use and in compliance with Sphere standards

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	11%	5%	2%			Data supplied in comment by USAID
Evaluation	80%	70%	24%		Field survey evaluation	Data for Oromia was inconclusive

For the latrines, the figures for Oromia and Afar were very promising. For Somali the indicator was almost attained. There is also a clear correlation between this indicator and the next related to hand-

washing facilities. The consultants are of the opinion that the 24% in Somali is a significant figure and indicates the success of the project.

IR 2.2b: Increased number of households with hand-washing facilities and that dispose of solid waste properly

IR2.2b *Indicator*: 25%increase from baseline in HH with hand-washing facilities, disposing of solid waste properly

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	n.a	n.a	n.a			
Evaluation	62%	80%	24%		Field survey evaluation	For surveyed areas only

IR 2.2b was also a positive result for Oromia and Afar. There is a close correlation between the number of adequate latrines and the number of hand-washing facilities. Especially in Somali this is very visible.

IR 2.3: Improved community hygiene and sanitation through health agents and volunteer HPs

IR2.3 Indicator: 75%of target population is reached through targeted hygiene promotion education

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	0	0	0			
Evaluation	100%	100%	100%		Field survey evaluation	For surveyed areas only

From all interviews and observations the reach of hygiene promotion work of the project was indicated as being significant and far-reaching. This is also indicated by the significant increase in hand-washing facilities and latrines that meet Sphere standards.

IR3 Improved rangeland management

IR3indicator: rangeland management measures undertaken in 41 communities

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	n.a	n.a	n.a			
Evaluation	100%	100%	100%	All 41 target communities	Field survey evaluation	

The rangeland management measures were widely supported by the beneficiaries. In all sites visited by the evaluation team, the measures were implemented, albeit in a varying manner. In some cases

large tracts of land were fenced and included in the planning, whereas in other locations sites were small. The photograph of the water point in Gubedely shows a fence around a water point, but a very small tract of land for NRM activities.

IR 3.1: Improved capacity of community groups to develop and implement rangeland management plans

Indicators: 41 natural resources management committees (NRMCs) are established or strengthened and trained to develop rangeland management plans.

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	n.a	n.a	n.a			
Evaluation	100%	100%	100%		Field survey evaluation	

As indicated above, NRM measures were widely supported. At all locations visited there NRMCs were in place. The NRM work however is currently limited to fencing the water points and limiting grazing.

Whereas the conservation measures and scope varied considerably, in all locations measures were undertaken.

IR3.2 indicator: Rangeland conservation measures undertaken in 41 communities

Description	Oromia	Afar	Somali	Total	Source of information	Comments
Baseline	n.a	n.a	n.a			
Evaluation	100%	100%	100%		Field survey evaluation	

Below are some pictures to illustrate the context of the findings and the performance evaluation.

Cattle trough at Mekenissa, Teltele Borena zone Oromia Regional State

The water point at Gubedely, Jigjiga Woreda Somali Regional State

Below are answers to additional questions which were included in the SOW.

What were its contributions towards meeting the development objective of Economic Growth?

In terms of economic growth, the work of the project has provided significant contributions for the areas in which the project has worked. The amount of time previously spent by beneficiaries to get water was sometimes up to 12 hours per day. The water found was also of very inferior quality. The resulting loss of productive time for work and the water borne diseases brought through contaminated water increased poverty forcing HHs to incur health expenses in addition to reducing productive work time. The provision of safe water at a much closer distance (on average people now spend a maximum of 10 minutes fetching water), the provision of safe latrines and the improved health practices (such as washing hands at the five appropriate times per day) has freed up much time for other productive and income generating activities, (primarily for those that would usually fetch the water) or time to go to school and reduced health expenses.

How effective was the project in achieving its anticipated results?

The sub-questions to this main question were:

(a) Increasing access to improved water sources for beneficiaries

The project has built or rehabilitated 41 systems and has benefited 221,504 people. It was very effective in achieving its anticipated results in terms of providing access to improved water sources. The number of liters per capita per day consumed has increased sharply to above 15 per day for project locations visited, and water quality is safe for consumption in those locations.

(b) Improving hygiene awareness and access to sanitation to beneficiaries

The project was effective in improving hygiene awareness and access to sanitation. There was a 25% increase in the number of caretakers that know the five critical times for hand-washing at all locations visited. There was also almost 60% increase in the number of latrines that meet Sphere standards. In those areas which were mainly pastoralist, such as Somali, the hygiene interventions were relatively less successful as the mobile nature of pastoralists limits the options for building latrines, since they are never in one place for a long time.

(c) Improving rangeland management practices by linking it with water supply.

Rangeland management around the water points and the subsequent protection of the wells and other structures was very effective. Due to the pastoralist nature of the beneficiaries the relevance of rangeland management and protection and the importance of keeping livestock away from drinking water points were recognized. The fencing of the water source also protected some of the pasture around the water source during the wet season as access to the water source was regulated.

How effective was the project in mainstreaming gender issues and addressing the needs of people with disabilities?

The project addressed gender issues well in the establishment of WMCs. Approximately one-third of the members of the WMCs are women, who are usually involved in tasks related to cashier and addressing concerns and grievances of villagers. Women are also well represented as beneficiaries of the project. It has been mainly their burden that has been lifted since women are generally responsible for fetching water, thereby losing valuable productive time (details on time saved are included in the above sections). Through the new schemes their lives have been much improved.

There was no indication that the needs of people with disabilities were directly addressed by the project.

How was the project's approach and methodology designed to achieve project objectives?

The sub-questions to this main question were:

(a) How effective was the institutional arrangement and working relationship among implementing partners (the consortium in general) and with the government and other partners at different levels including the private sector?

The institutional arrangement was effective in that the projects were implemented in collaboration with the water offices at Woreda, zonal and regional level and an elected WMC at the project level. Needy areas were identified by the Woreda water office and forwarded to the zonal office then to the Regional office in the case of Oromia and Afar and directly to the Regional Water Bureau in case of Somalia region as the zonal office is not yet established in Somalia region. The Regional water bureaus forwards requests for funds to funding development agencies for fund and monitors its project implementation following the realization of the project. This has been witnessed in all the project areas where WMCs have been established at the inception of the project, trained on scheme management, financial management through the implementer and assigned professionals from the Woreda water office for follow-up. The WMCs fully participate in the construction and locating location of water point sites, and the protection of the water source from external pollutants and damages from floods by constructing fences and flood protection structures, such as soil band and terrace works.

From the above and from KIIs it can be concluded that the relationship and cooperation with the government partners has been consistent, structural and effective.

(b) Were the project's approaches cost effective to improve access for potable water supply, sanitation and hygiene?

The project was cost effective as it conducted project appraisal and identification of potential water source utilization using locally available materials, thereby involving and benefitting the community right from the start-up of the project. The project design follows the country's standard on rural water supply schemes and has been designed and implemented accordingly. The WMC has been trained in scheme and financial management and on the benefit of clean water, and personal and environmental hygiene. This has been witnessed through built and utilized sanitation facilities (latrines) which haven't been there before the project. Time wasted in collecting water has been greatly improved as the water points are nearby their homesteads.

(c) Was there sufficient program learning, quality assurance, documentation, contribution to government policy, improvement/ development etc.?

The Woreda water office conducts studies and design of schemes, trains WMCs on scheme management, and in collaboration with WMCs selects scheme caretakers and trains them on preventive maintenance of the scheme. The Woreda health office assigns health agents to provide training along with the project implementer to the community on personal and environmental hygiene and conducts campaigns on the construction of latrines and follows their utilization. This has been done starting from the inception of the project and during the construction phase. In this way the project has contributed to government policy and development. The WaTER project was part of the development of good practice guidelines for resources management in Somali region based on experiences during the project.

(d) What institutional arrangement (at community, government and private sector level) did implementing partners make to ensure sustainability of the project's results/impacts?

The project implementer works hand in hand with the community elected WMCs and the Woreda water, agriculture and health bureaus. These assigned focal persons at the project level. Along with the Woreda office the project provides training on scheme management, supports the scheme caretakers, and provides practical training during the commissioning period of the schemes under caption. The project also assures provision of spare parts for two years before handing over the project on completion. The establishment and development of the WMCs and their relations with the Woreda is the institutional basis for the sustainability of the schemes.

(e) How effective was the project in building the capacity of the government staff and community members to sustainably manage the water supply, sanitation and hygiene facilities?

To answer this question a number of specific cases are detailed in this section. With reference to Afar, there was no capacity on the installation, operation and maintenance of desalination units among professionals in the Regional water bureau in Afar at the start of the project. Two technicians were trained on the operation and maintenance of the desalination unit during project implementation to enable them to train operators who shall be assigned by the WMC. In the Somali region training in the utilization of groundwater exploration technique has been launched and it is understood that the technique is of great value to the region's hydrogeologists and also to consulting firms. The U.S. Geological Survey helps in delineating potential ground water sites for further hydrogeological investigation such as VES (Vertical Electrical Sounding). The implementation of the project also capacitates the Regional water Bureaus to address others who are not yet supplied with water and sanitation facilities. Within the scope of the project and the timeframe for implementation the project was effective in building capacity for government staff and community members. However, some follow-up will be required. For more details on follow-up please see section 8 on recommendations.

What worked well and what did not work? How? Why?

The implementation of the core WASH activities worked well; as already noted above the implementing agencies were competent and committed. The integration of NRM activities in the project was also appreciated by beneficiaries and served to mitigate some of the less desirable impacts of the project such as settling of pastoralists around water points, allowing livestock to graze around water points and overall sustainability of rangeland around the project site.

Over flowing reservoir at Gubedely

The introduction of new technologies such as desalination and solar pumps worked well up to a point. The team noticed water spillage and wastage at the Gubedely reservoir as the solar pumps kept pumping even when the reservoir was full. No one had any idea as to how to shut down these pumps as they had been told to leave the system alone. The desalination plant in Afar is functioning well and is providing water where no access to safe water had been before. However the sustainability of the Reverse Osmosis unit remains a concern due to a lack of knowledge on O&M of the plant, monitoring of flow and treatment and capacity for larger repairs.

Concluding it can be said that the conventional approaches worked well, and that the integration of NRM measures was a successful addition. The more experimental approaches were courageous and to be lauded. They set a precedent for new projects. They do however require more time and efforts to ensure sustainability.

6.0 OVERALL CONCLUSIONS

The core WASH activities of the project were implemented well, by a competent and committed team from IRC and CARE Ethiopia. To the extent that the evaluation was able to assess the full scope of the project it can be concluded that all of the relevant indicators that measure progress show a successful completion. The implementing agencies are competent and experienced agencies that have an understanding of the context and have been adaptive and creative in addressing the specific challenges encountered in the rural areas in Ethiopia.

The project's approach and methodology was designed in such a way as to optimise the chances of success for the project. The implementing agencies recruited competent and effective staff, and provided them with the necessary tools, system and means to implement their work. The work plan was almost completely on schedule despite the fact that a number of the wells were dry, leading to delays which were absorbed well into the implementation schedule.

The relationships between the project and the government authorities and other partners were good. Governmental authorities and groups interviewed in the communities have expressed appreciation and gratitude for the efforts of the teams and the donor. Training of government staff, mainly health extension workers and in some cases maintenance staff, has been effective.

Natural Resource Management (NRM)

The natural resource management practices under this project are to be encouraged in that they have utilized indigenous knowledge and practices as observed at Mekennisa, Telettele, Borena zone Oromia and at Waji in Jigjiga Woreda Somali region. Rangeland has been properly enclosed, and erosion protection structures with terraces and soil bunds have been constructed to be used during severe draught. Such an enclosure has been also constructed in Argoba special Woreda.

Monitoring and data management

There is a problem with the way that the monitoring of the project was developed and implemented. The indicators developed for the project are not always measurable or do not always measure what they should measure. The subsequent baseline survey that was implemented only measures parts of the indicator set that was developed for the project. Some examples and details of the problems with the indicators are given below:

For IR1 impact indicator : 164,000 beneficiaries have year-round access to an improved water source
This indicator was not useful for several reasons; (1) there was no baseline data to compare it with,[2] (2) the indicator itself does not relate to the beneficiaries of the projects. Many beneficiaries have gained access to water, but not always year-round. The beneficiaries are either pastorals or semi-pastorals. Before the project, beneficiaries from most of the visited sites got their water on an almost daily basis but from unreliable sources. Those sources provided water that had poor quality and a low yield. Understandably, there is no baseline data for this number of beneficiaries. WMCs, Woredas, or the regional bureaus, could only speculate about the number of beneficiaries. Though this should be a quantitative indicator, the team could only treat it as qualitative. We were able to ascertain and observe improved conditions for access to safe water, and we have translated that to an improved number of beneficiaries who have access to an improved water source.

IR1.1a: indicator: Targeted beneficiaries use an average of 15 liters of water per person per day

[2]It was not zero as indicated in previous comments, as it is reasonable to assume that some people had access to an improved water source year-round.

Again, this was meant to be a quantitative indicator. However, for visited systems, as well as others based on the discussions with KIIs from the Woredas and bureaus, there is no hard data that details the number of beneficiaries and the actual amount of water they have consumed to come up with numbers to verify this indicator.[3]The team got an indicative number for the indicator based on the discussions we had during the FGDs, and HH surveys. This indicative indicator we calculated after we asked for the average number of jerry cans collected per household, and the average number of people per household.

IR1.1b: indicator: 41 (100%) community household water supplies have zero coliform bacteria per 100 ml or measurable Cl residual exceeding 0.2 mg/liter[4]

Water authorities in rural areas in Ethiopia do not chlorinate, so there is not likely to be any Cl residual in any water in rural areas in Ethiopia. Also, the assumption that water quality tests should always have zero coliform bacteria is false. Even the EPA Safe Drinking Water Act (U.S.) allows for a certain number of samples to have positive coliforms. The reason behind this is that the SDWA understands that there could be temporary situations where the water samples could have positive coliforms.

IR 2: indicator: 25% increase from baseline in number of caretakers that know the five critical times for hand-washing

This question was posed to health representatives at the Woredas. The answers given indicate that there was an increase in the number of health caretakers that know the five critical times for hand washing. There were no records for the number of caretakers before the project in all Woredas.

Summarizing, (1) indicators do not always measure what they intend/should measure, (2) baseline data is not always available for the measured indicators, thereby making progress monitoring speculative, (3) indicators are not developed bearing the specific circumstances and context of rural Ethiopia in mind.

Finally it is important to note that the performance evaluation would have more effectively contracted AFTER the completion of the second survey, which is due at the end of the project. That way the evaluation could have verified, corroborated and strengthened findings on the basis of much more complete data. In other words there was a sequencing problem in terms of when the performance evaluation was conducted and when the final survey is due.

Sustainability

Sustainability of WMCs and concomitant major maintenance is a concern. The project has actively been promoting the development of WMCs, as per the project design. It is therefore not a criticism of the implementing partners, but rather an issue which needs to be given more attention over a longer period of time. Whereas the WMCs at the time of the evaluation were for the most part present and operational, their long term effectiveness is not guaranteed. The linkages with local authorities, specifically the Woredas is crucial in this context. The case below is illustrative of this issue.

[3]Within the scope of the performance evaluation indications of these figures were calculated on the basis of jerry cans bought and used. However the WMCs do not water consumption from the new systems on the basis of metering.

[4] Should there be a suspicion of arsenic and fluoride values that exceed WHO standards these tests should also be included when doing water quality testing.

There is no plan B

For many of the projects major maintenance was mostly left to the Woredas. Though the Woreda does have the capacity to maintain those projects, the procedure is a lengthy one. This puts the beneficiaries in a situation where they may temporarily need an alternative access to water.

One example is the project under construction in Buda Magada, Bule-Hora. The project depends on two surface water springs that fill a 25 m^3 underground concrete tank. The water is then pumped using a submersible pump to another 50 m^3 concrete tank, with an approximate elevation difference of 200 m. The pump at some point will need maintenance. To do that it has to be taken out, and sent for maintenance to a mechanic's workshop. This process takes time, not less than a week, from the time the pump is dismantled, through its maintenance, and back to be installed. The 50 m^3 storage reservoir can only provide water for less than a day. For the remaining period the beneficiaries would have to get their water from somewhere else. The obvious solution for them is to go back to the spring and try to collect the water directly from it. This should not be an option. However, the project does not provide them with other options (no plan B).

A possible plan "B" could be to have a standby pumping unit readily available for replacement when the one on duty fails and is taken for maintenance. After maintenance the pump could be used as a standby unit. Such planning could avoid the need to have to go back to the old unprotected source.

Sustainability of WMCs depends much on the degree of relevance and legitimacy that these organisations have. In most cases the WMCs are in charge of routine maintenance and the collection of fees for O&M. For repairs that go beyond the scope of the WMCs they have to contact the Woreda. Whereas at present the motivation of the newly formed WMCs is high, this will dissipate after some time. This is a common process with rural water user associations, whether for potable water or irrigation water. When the maintenance and small repairs become crucial, which is after a few years of operations, the WMCs may not be as strong as they are now. This poses an inherent risk on the sustainability of the projects. Suggestions to improve the sustainability of WMCs are presented in chapter 8.

The desalination plant in Afdera

The desalination plant is a typical Reverse Osmosis plant with a capacity of 120 m^3/day, built by an international contractor. It is the second one in the country, and the first to be operated by a civilian entity. The first one is operated by the Ethiopian Army in the same region of Afdera.

The plant feeds into a 75 m^3 reservoir, which supplies a nearby water point, from where people get their water. This water points serves 3 nearby Kebeles. Before the project, the people of these Kebeles got their water from Semera, 225 km away. The water was trucked in using 20 liter jerry cans. The average cost per jerry can was 20 birr. After the project the cost per jerry can is 4 birr. Interestingly, as the desalination plant was nearing completion the truck drivers dropped the cost for filling the jerry cans from Semera to 10 birrs.

During the site visit the plant was operated 8 hours a day. That was enough to produce water for the beneficiaries. The plant was operated by two operators from the Regional Water Bureau. The plan is to train two people from the Woreda Water Office for three months. Though the visit was done after one month from the operation startup, there was no one to be trained from the WMC, raising a concern whether the WMC understands the special needs to properly operate the plant. Even the two operators from the Regional Water Bureau had no records for operating the plant and the water quality the plant is producing to monitor the membrane efficiency.

The reservoir in Afdera

Realizing the significance of the Desalination Plant in Afdera, the CARE team is putting special emphasis on Afdera WMC to make sure that they are aware of the special facility they have. For that reason, the CARE team prepared a plan to help Afdera WMC to do its job in the best possible way. The plan includes:

1. Support the WMCs in preparing a business plan and support the WMC to plan for the replacement of fast moving parts and other parts (like membranes);
2. Support the WMC to learn lessons from other areas (exchange visits to areas where they can see how others are operating);
3. Work more on capacity building at community, Woreda and regional level
4. Provision of skill development training to the electro-mechanical expert to properly operate the machine
5. Link the supply chain (suppliers with the community) for spare parts, particularly for the membrane and micro filters;
6. Look at possibilities of transforming the WMCs to Water Management groups, and then the establishment of a water board at community level;
7. Assign a contact person (community development personnel) who will closely follow up the desalination plant, someone who will document lessons starting from operation to service delivery;
8. Provided spare parts that should be enough to cover the maintenance needed for the coming two years.

The main conclusion of the evaluation team in terms of the desalination plant in Afdera is that it is a risky venture. Nonetheless the risks were assessed well and mitigating measures have been taken to the extent possible. For Afdera it was a matter of doing this or doing nothing, since the high salinity of the water mandated a special approach. Overall it is a worthwhile pilot. Recommendations for alternative solutions are presented in section 8.

Other issues

The implementing agencies and USAID carefully addressed the inherent risk of creating conflict among clans over resources, as well as the natural tendency for populations to become more settled around boreholes, ultimately degrading their grazing land. This was done through the effective integration of natural resource management practices in the project. The acceptance and understanding of the NRM interventions proposed in the project amongst beneficiaries indicates that the link between new water projects in pastoralist regions and NRM practices to ensure these do not contribute to grazing land degradation and settlementmakes sense.

7.0 LESSONS LEARNED

The main lessons learned are addressed first. These can be used to scale-up the project or improve its sustainability.

One of the main lessons learned is that IRC and CARE Ethiopia are competent organizations that have the capacity and will to implement these projects in a professional manner.

The second item to note is that even under circumstances where you have a competent organization for implementation, sustainability issues will always remain. Especially in the remote rural areas in Ethiopia sustainability of the water schemes is a concern. The WMCs, for all their enthusiasm, only have limited capacities. Also, without some sort of continued support from the Woreda the WMCs are liable to lose steam and falter.

The projects implemented have a large impact on the livelihoods of the communities they are built in. Beneficiaries go from having to collect water from remote areas, suffering disease due to low water quality and sacrificing many possibly productive hours for collecting water to having access to safe water within maximum fifteen hundred meters from their homes. This is a huge change in living standards for these people and its importance cannot be stressed enough. Even though there are concerns in terms of sustainability and the impact of the systems on socio-cultural habits[5], the economic value of having access to safe water and significantly improved sanitation facilities cannot be underestimated.

In terms of the sequencing of activities by USAID it would have been advisable to contract the evaluation after the completion of the second base line survey planned for the last month of the project. The parameters of the evaluation as indicated by USAID did not allow the evaluation team to do a detailed survey of all of the project sites. This means that findings and conclusions of the evaluation team come with the caveat that, whereas the team attempted to optimize the representativeness of the sample, it cannot ascertain with 100% certainty that it's' findings are relevant for all project locations. If the second survey had been concluded on the basis of the base-line survey the efforts of the evaluation team would have been more effective as the team could have corroborated findings of the survey and could have focused on certain areas of uncertainty requiring additional focus, thereby minimizing the uncertainty.

The monitoring system of the project has to be adapted to fit the specific circumstances and implementation modalities of USAID in Ethiopia. There is incongruence between the indicators, the base line survey and the evaluation design. Some of the indicators developed during project design are very difficult to measure in the field. Others are not fully represented in the baseline survey. Finally the evaluation design did not allow for a full survey of all sites (see also above). It is advisable for future projects to develop a more rigorous and logical monitoring and evaluation framework with a consistent set of indicators and more details on how these should be operationalized.

8.0 RECOMMENDATIONS

It is recommended that a longer term strategy for the sustainability of the WMCs is developed. Whereas continued involvement of the implementing agencies such as IRC and CARE Ethiopia does not have to be substantial, it is recommended that they are charged with monitoring and reporting on the status of the systems over a longer period of time. This will allow donors and government

[5]E.g. an increase in settlements around the water points.

authorities to be aware of developments, it will provide WMCs and Woreda with a dialogue partner for sustainability and it can preempt serious damage to infrastructure and hardware.

With reference to the above the water governance of the regions may require additional support. Whereas the roles and tasks of the different government organizations are clearly defined, the implementation of these roles and tasks is not always secured, either due to a lack of capacity or due to a lack of knowledge and understanding. This refers specifically to the O&M of village schemes. The schemes are presently all new and in a good state. The concerns are focused on the capacity of WMCs and local water governance bodies to be able to address major repairs and to provide alternative water sources during periods of repair.
Future capacity building components of the project should focus on:

- Continued support to the WMCs through technical assistance and coaching for revenue collection managing funds and operation and maintenance tasks;
- Periodic assessments of the state of the infrastructure;
- Early warning systems for maintenance need so as to be able to organize alternative means to procure water when the main system is shut down for maintenance.

For the Afdera Woreda and similar areas where saline groundwater is the only source of water it is advisable to also review the option of using solar distillation. Technologies for solar distillation have developed strongly over the past decade, and viable systems are available that do not require much energy, very little maintenance, are durable and have a long lifetime. Some of the options to consider are Solar Dew or Zonnewater.[6]

For maintenance and rehabilitation of boreholes, a portable tripod with pulley and chain, a block compressor and a pick-up could be utilized for medium and shallow wells instead of waiting for a rig from the regional water bureau for maintenance. Therefore, the consultant proposes to equip the Woreda water office with such equipment where the water source is from groundwater with boreholes.

Constructions of ponds with infiltration wells around the ponds are also an alternative for areas in Jijiga and Kebribeyah, Borena and in some areas in Afar. Such surface water source is free from high fluoride contents and could also be mixed with high fluoride groundwater sources, hence such sources should not be considered as a lesser quality water source for human consumption provided that appropriate treatment units such as an infiltration gallery is constructed along with the ponds. Ponds are also good artificial recharging units for groundwater source. In Teltelle project area at Mekenissa a pond has been constructed upstream of the borehole. Such construction is ideal for artificial recharge of groundwater hence should be encouraged in other areas too.

Solar and wind mill for pumping water from boreholes should be encouraged rather than using diesel driven generators for a power source to submersible pumps as operation and maintenance of such pumping units are much less than the diesel driven pumping units. In addition getting fuel in remote area like Mekanissa in Teltelle is difficult if not impossible.

Finally it is recommended that a more structured and "linear" monitoring and evaluation system is developed for projects of this kind. This should start at project formulation. The indicators need to be measurable, they need to measure what is being asked and they should be relevant for monitoring. The base line survey should subsequently be implemented in a very structural manner and be monitored by either an external monitoring team or USAID monitoring department. Finally

[6]Zonnewater BV has developed an adapted solar thermal distillation system. It was designed to produce drinking water in tropical and subtropical areas, both for people's needs and for agricultural demand. The processed water originally comes from various sources; it might have been seawater, groundwater with mineral contaminants (arsenic for example), or come from degraded wells or polluted rivers.

the performance evaluation should take place after completion of the project and after completion of the end-of-project survey. This will make the evaluation more effective and monitoring more informative.

ANNEXES

ANNEXE 1: SCOPE OF WORK

Statement of Work

January, 2014

I. EVALUATION TITLE:

FINAL PERFORMANCE EVALUATION OF WATER HYGIENE SANITATION TRANSFORMATION FOR ENHANCED RESILIENCY (WATER) PROJECT.(COOPERATIVE AGREEMENT: AID-663-A-11-00012)

II. PERFORMANCE PERIOD

Evaluation preparations should begin in the first week of February and actual field level data collection will be conducted in the last three weeks of February 2014. Final revised draft report should be available by end of March 2014.

III. FUNDING SOURCE

Mission Funded

IV. PURPOSE OF THE EVALUATION

The overriding purpose of this evaluation is to gain an independent view of the performance of the project to draw lessons for future USAID financed similar projects and share the lessons for other development partners. The Mission is also interested in learning more about what works and what does not work in terms of Water, Sanitation and Hygiene (WASH) integrated with natural resources management in the pastoral development.

SPECIFICALLY, THE EVALUATION WILL:

1. Assess the relevancy of the project to the development objective of Economic Growth;
2. Assess project accomplishments as per set objectives and intermediate results;
3. Assess the project's management structure, consortium relationships and staff composition ; and
4. Identify lessons learned and make actionable-recommendations for future similar project design and implementation.

V. BACKGROUND

The lowland areas of Ethiopia experience the lowest rates safe water coverage, sanitation and hygiene. According to the 2013 report of WHO/UNICEF Joint Monitoring Program for Water and Sanitation (JMP, only 39% of the rural population of Ethiopia has access to an

improved drinking water source. Traditional hand dug Wells, Birkas, flood water harvesting, rivers and ponds remain the primary sources of water for both domestic and livestock use in these. Many of these sources are deemed unsanitary and microbiologically unsafe due to cross-contamination from human and animal use. Moreover, all of these water sources either dry up quickly or their discharge rate rapidly decreases under drought conditions. Government and other donor communities carry out water trucking, particularly during the dry seasons despite its expense. For instance, during the 2009 drought in Somali region, UNICEF spent USD$1.3 million for 60 days water trucking deploying eight water trucks.

Moreover, the functionality rate of constructed few facilities is very low due to several reasons. To mention some: low capacity of the local government partners to offer routine technical support for communities to run the facilities; lack of community ownership, capacity and contributions to sustainably manage the facilities; lack of local spare parts supply due to poor involvement of the private sector; construction of water facilities in inappropriate location without a sufficient understanding of the area's ecosystem, the settlement and mobility pattern of the people and livestock, and the relationships between the different social groups, without sound natural resources management system, and such an approach has sometimes resulted in the degradation of the natural resource base, caused conflicts among users, and resulted in poor usage rates.

Similarly, only 19% of the rural households have 'improved' sanitation facilities.[7] A total of 45% of rural households have no toilet facility[8]; 53% of rural households practice open defecation.[9] The situation is even worse in the lowland areas of the country[10] which are target areas for the project. Additionally, there are few available public latrines in places such as clinics or schools, and these tend to be in poor or non-functioning condition due to poor management. Efforts so far made by government health system in the highland areas using the community led total sanitation approach to improve sanitation and hygiene coverage is bearing good results.

In order to contribute towards alleviating the prevailing water and sanitation problems, USAID/Ethiopia designed a three-year and four months (August 6, 2011-December 31, 2013) Water Hygiene Sanitation Transformation for Enhanced Resiliency (WaTER) Project for about $8 million budget. The project is implemented by a consortium of International Rescue Committee (IRC) and CARE Ethiopia including other local organizations. The governmental partners for this project are Water, Health, Disaster Preparedness, Prevention, and Food Security (DPPFSB), Pastoral/Agriculture Development Bureaus and Offices at the region and district levels. The project also partners with NGOs, Community Based Organizations (CBOs) and customary institutions in the respective operation areas.

The overall objective of the project is to enhance resilience and reduce conflict through improved sustainable access to safe water and sanitation, environmentally sustainable natural resources management, and improved hygiene behavior for targeted pastoralist communities in Somali, Oromia, and Afar Regions.

Specifically, the project has the following intermediate results and set indicators to measure the results.

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[7] JMP, April 2013.

[8] EDHS, 2011, p.16.

[9] JMP, April 2013.

[10] FDRE Ministry of Health National Hygiene and Sanitation Strategic Action Plan for Rural, Per-urban, and Informal Settlements in Ethiopia 2011-2015 (NSAP 2011), p.12.

IR1: Increased access to improved water sources for beneficiary communities
Impact indicator: 164,000 beneficiaries have year-round access to an improved water source.

- **IR 1.1: Increased number of functioning water systems for human and animal use**
  - *Indicator*: 22 new boreholes are drilled and constructed and 19 boreholes are rehabilitated.

- **IR.1.1a: Demonstrated increase in average water usage of target human beneficiaries in litres per person per day.**
  - *Indicator:* Targeted beneficiaries use an average of 15 litres of water per person per day.
- **IR.1.1b: Increased number and percent of community household water supplies with zero coliform bacteria per 100 milliliters and water points with measurable chlorine residual exceeding 0.2 milligrams per liter.**
  - *Indicator*: 41 (100%) community household water supplies have zero coliform bacteria per 100 milliliters or measurable chlorine residual exceeding 0.2 milligrams per liter.

- **IR 1.2: Increased capacity of village water committees to manage the operation and maintenance of their water supply systems**
  - *Indicator*: 41 water systems are adequately operated and maintained by capable WMCs six months after hand-over.[11]

IR2: Improved hygiene awareness and access to sanitation among beneficiaries
Impact Indicator: 25% increase from baseline in number of caretakers that know the five critical times for hand-washing.

- **IR 2.1: Improved hygiene promotion knowledge and skill of Woreda health office staff and Health Extension Workers (HEWs)**
  - *Indicator*: 70% of trained Woreda health office staff and HEWs demonstrate improved promotion skills

- **IR 2.2: Improved access to sanitation facilities**
  - *Indicator:* 25% increase from baseline of households with improved access to sanitation facilities.

- **IR 2.2a: Increased number and percent of household latrines that are clean and in use in compliance with Sphere standards**
  - *Indicator:* 25% of households have adequate latrines that are hygienic, in use and in compliance with Sphere standards.

- **IR 2.2b: Increased number of households with hand-washing facilities and that dispose of solid waste properly**
  - *Indicator:* 25% increase from baseline in households with hand-washing facilities, disposing of solid waste properly.

- **IR 2.3: Improved community hygiene and sanitation through health agents and volunteer HPs**
  - *Indicators*: 75% of target population is reached through targeted hygiene promotion education.

[11] Defined as (1) Existence of a functioning water management committee that meets regularly, (2) Designated people responsible for operations and maintenance who can articulate (or demonstrate) procedures followed to operate and maintain facilities, (3) Appropriate tools in good working order and (4) Water system operational and in good repair.

IR3: Improved rangeland management practices
Impact Indicator: Rangeland management measures undertaken in 41 communities.

- **IR 3.1: Improved capacity of community groups to develop and implement rangeland management plans**
  - *Indicators*: 41 natural resources management committees (NRMCs) are established or strengthened and trained to develop rangeland management plans.
  - **Indicator: Number of hectares of agricultural land (Fields, rangeland, agro-forests) showing improved biophysical conditions as a result of USG assistance**

- **IR 3.2: Improved rangeland practices in selected water point areas**
  - *Indicators*: Rangeland conservation measures undertaken in 41 communities.

VI. SCOPE OF WORK

The evaluators are required to assess the progress of the three intermediate results and to what extent contributed for the objective of the project improving access to sustainable safe water supply, improved sanitation and hygiene coverage and improved natural resources management around the water supply catchment.

Specific questions related to the objectives of the evaluation are indicated below in order of their importance.

6. What were its contributions towards meeting the development objective of Economic Growth?
7. How effective was the project in achieving its anticipated results? This question should be answered by assessing the project's achievements in (a) increasing access to improved water sources for beneficiaries; (b) improving hygiene awareness and access to sanitation to beneficiaries; and (c) improving rangeland management practices by linking it with water supply.
8. How effective was the project in mainstreaming gender issues and addressing the needs of people with disabilities?

9. How was the project's approach and methodology designed to achieve project objectives?
   f. How effective was the institutional arrangement and working relationship among implementing partners (the consortium in general) and with the government and other partners at different levels including the private sector?
   b. Were the project's approaches cost effective to improve access for potable water supply, sanitation and hygiene?
   c. Was there sufficient program learning, quality assurance, documentation, contribution to government policy, improvement/development etc.?
   g. What institutional arrangement (at community, government and private sector level) did implementing partners make to ensure sustainability of the project's results/impacts?
   h. How effective was the project in building the capacity of the government staff and community members to sustainably manage the water supply, sanitation and hygiene facilities?

10. What worked well and what did not work? How? Why?

VII. EVALUATION DESIGN AND METHODOLOGY

It is envisaged that this performance evaluation will employ mixed methods and triangulation of data in order to ensure that the evaluation findings fully respond to the purpose of the evaluation, and answer the key evaluation questions.

a) EVALUATION DESIGN

This is a non-experimental design that will focus on measuring program results before and after project implementation using project monitoring and survey data. The before program data should be drawn from the baseline survey.

b) Methodology

The methods should include the following:

- **Document Reviews**: R**eview of project and other relevant documents** (particularly the baseline data), targets and annual performance reports (over the years) to assess progress as reported by the project.
- **Key Informant Interviews:** Key informant interviews will be held with IRC, CARE, and Support for Sustainable Development, Agriculture and Pastoral Areas Development Commission of Oromia, Oromia Health and Water bureaus. Similarly, key informant interview will be organized in Afar and Somali water, health and pastoral and Agriculture bureaus. The evaluation team will hold key informant interview with water, Health, and Agriculture offices at selected Woredas in Oromia, Somali and Afar regions. Key informant interviews will also conducted with drilling companies and system construction
- **Focus Group Discussions (FGDs):**With community members in the selected operation areas. The evaluation teams should propose the number of focus group discussions it will conduct.
- **Survey of Beneficiaries:** covering sample of households/individuals benefited from the project. Note: The gender aspect should be integrated within the survey questionnaires.
- **Personal observation**: While the evaluation team visits project outputs such as water supply facilities, individual and community latrines, and rangeland enclosures, it should document how they are functioning and benefiting the communities.

The evaluation team will also carry out household level case studies/success stories at least one each on improved access on sustainable safe water supply, improved sanitation and hygiene where a community reached open defecation free status, and on the integration of water supply and natural resources management.

THE FINAL METHODOLOGY WILL BE DEVELOPED BY THE EVALUATION TEAM BASED ON THE IDENTIFIED EVALUATION QUESTIONS.

c) Data Sources and collection methods

The quantitative data collections to be used are surveys of selected beneficiaries (using appropriate sampling method). Secondary data sources such as project reports and other relevant sources can be used to substantiate the primary data.

Sample size: The Contractor will prepare a detailed assessment framework including sample size and instruments which will be reviewed and approved by USAID/Ethiopia.

The final data sources and collection methods will be developed by the team based on the identified evaluation questions.

d) Data analysis plan

Based on the data collection tools designed for the quantitative and qualitative data, collection, data will be summarized and descriptive analysis will be made using appropriate software. Tabular, graphical and other relevant presentations of results can be used.

Thematic analysis should be employed for qualitative data in order to categorize, rank and rate the responses of the interviewees and discussants. Very insightful or special description of interviewees and discussants will be quoted word by word to corroborate findings from other data sources.

The evaluation team will be expected to triangulate information from quantitative and qualitative data collection methods to strengthen their rational explanation or interpretations of the data.

e) Strengths and limitations of the proposed evaluation design and methodology

The baseline survey of the projects was conducted by a contractor outsourced by the implementing organization. USAID's involvement in this survey was limited and some of the core indicators to be captured by this evaluation might have not been included in the baseline survey. The absence of such data will impact the rigorousness of the evaluation. Evaluators are expected to employ a retrospective method of establishing baseline data through collecting data from secondary sources and also posing questions to respondents on situations before the start of the project to strength and validate the evaluation results.

The strength of this evaluation design is that it employs both qualitative and quantitative data collection methods and this will strengthen and reinforce the rigor of the data and validity of the findings. However, any data limitations associated with using either method should be clearly documented as part of the final evaluation report.

Team Composition: Two person evaluation team should be comprised of one international (expatriate) consultant (WASH specialist) and one local consultant (Natural Resources Management and conflict mainstreaming expert). USAID/Ethiopia may propose internal staff members from USAID/Washington or the Missions to accompany the team during site visits or participate in key parts of the evaluation and they are expected to provide written inputs to the draft report.

It is anticipated that the contractor should have the following experience:

- Knowledge of USAID/Ethiopia Programs
- Technical competence in the field of health, in particular water, sanitation and Hygiene.
- Experience with data collection procedures, surveys, and manipulation of data using Statistical analysis tools.

Specifically, the team members should have the following qualifications:

- **Team Leader WASH Experience in the lowland areas** with particular expertise in program/project evaluation, integrated water use and management with 10-15years of practical experience in east Africa and Ethiopia and who has led at least five similar evaluation/studies. The expatriate evaluation team leader will be responsible for team coordination, ensuring the timeliness and quality of deliverables.
- **Local Natural Resource Management (NRM) specialist** with 8-10 years of experience in the management and evaluation of projects working on natural resources management in pastoral areas of Ethiopia and or other east African countries. Skill in conflict sensitive programming and evaluation is also required to see to what extent WaTER project mainstreamed conflict sensitive planning and implementation.

VIII. LOGISTICS

The evaluation contractor will be responsible for all international travel and consultant logistics. Implementing partners will coordinate field level preparation such as making hotel reservations; scheduling stakeholder meetings, key informant interviews, and focus group discussions; and organizing field visits in consultation with USAID/Ethiopia. UASID/Ethiopia will organize Addis level hotel bookings and national level meetings with government offices and partners organizations.

VIX. DELIVERABLES AND PRODUCTS

Based on the above stated purpose, objectives, and key tasks, the evaluation team will submit the following deliverables:

1. The contractor will produce a short written report (no more than 5 pages of text in the body of the report, plus an Executive Summary and annexes) for the initial debriefing meeting on its findings. This report shall focus on issues posed by this SOW.

2. The contractor will also produce a final report of not more than 30 pages that shall include their detailed findings on the final performance evaluation of the project, which will be used by the Mission to inform future designs of similar projects. A suggested format is provided as Attachment A.

The specific deliverables include the following:

- The Evaluation Framework (Inception Report) that shows:
  - The design of the study
  - Methodology
  - The tools to be used in the analysis
- A short debriefing report
- Draft Evaluation Report
- Final Evaluation Report.

Note: The Evaluation Framework: should include revised evaluation questions, detailed approach/methodology, survey protocol, data collection tools, and plans for analysis and dissemination of findings. The contractor will submit the evaluation framework to USAID/Ethiopia. USAID/Ethiopia will then review the proposed work plan/methodology and data collection tools and submit comments to the contractor prior to field work. The evaluation team will revise the work plan/methodology and data collection tools and send the final version to USAID/Ethiopia. The evaluation framework must be finalized and approved prior to the initiation of the interviews and site visits.

X. EVALUATION PROCEDURE

a) Team planning meeting (TPM):
The assignment will commence with a half day Team Planning Meeting (TPM). This meeting will allow the team to meet with the USAID/Ethiopia EG&T staff to be briefed on the assignment. It will also allow USAID/Ethiopia to clarify to the team with the purpose, expectations, and agenda of the assignment. In addition, the team will clarify roles and responsibilities; review and develop final survey questions; review and finalize the assignment timeline and share with USAID/Ethiopia; develop data collection techniques,

instruments, tools and guidelines; review and clarify any logistical and administrative procedures for the assignment; establish a team atmosphere, share individual working styles, and agree on procedures for resolving differences of opinion; develop a preliminary draft outline of the team's report; and assign responsibilities for the final report.

b) Interim Briefings including status reports: The Team Leader will provide weekly status reports on the evaluation plan implementation to USAID/Ethiopia.

c) PowerPoint Presentation (in MS PowerPoint) used during debriefing to USAID/Ethiopia staff and implementing partners on the preliminary findings and recommendations that address set of objectives and associated questions.

d) Draft report in English no longer than thirty pages, excluding coversheets and appendix. The report shall follow the general format indicated below:

(i) Coversheet indicating type of evaluation
(ii) Table of Contents
(iii) Acknowledgments
(iv) Acronyms
(v) Executive summary
(vi) Introduction
(vii) Background
(viii) Scope and Methodology
(ix) Strengths and Limitations of the Evaluation
(x) Findings
(xi) Summary of findings and conclusions
(xii) Lessons learned
(xiii) Recommendations
(xiv) References
(xv) Appendix (includes, but not limited to, SOW, data collection instruments, sources identified, and people contacted or interviewed, statements of differences regarding significant unresolved differences of opinion by funders, implementer, and/or members of the evaluation team, if any).

The findings and recommendations should address set of project objectives, anticipated results and evaluation questions. All findings and recommendations should be linked to data gathered and referenced in the evaluation report. The Team Leader will submit the first draft report to USAID/Ethiopia at the end of the evaluation team's visit. The Mission will provide consolidated, written comments to the evaluation team within 5 working days of receiving the draft report.

Raw Data: The evaluation team will provide electronic files of all raw data to USAID/Ethiopia for future use and submission to a data warehouse.

e) Final report: Will address the Mission's comments. The Team Leader will submit the final unedited report to USAID/Ethiopia within 5 working days after the team receives consolidated comments from USAID/Ethiopia. The evaluation contractor will provide the edited and formatted final document approximately 5 days after USAID/Ethiopia provides final approval of the content. Procurement sensitive information will be removed from the final report and incorporated into an internal USAID Memo. The remaining report will then be released as a public document on the USAID Development Experience Clearinghouse (DEC) (http://dec.usaid.gov) and the evaluation contractor's web site.

The Contractor shall submit edited and formatted final document in hard copies and electronically.

XI. RELATIONSHIPS AND RESPONSIBILITIES

The evaluation contractor will coordinate and manage the evaluation team and will undertake the following specific responsibilities throughout the assignment:

- Recruit and hire the evaluation team.
- Make logistical arrangements for the consultants, including travel and transportation, in-country travel, lodging, communications and others.

The USAID/Ethiopia EG&T Office will provide overall technical leadership and direction for the evaluation team throughout the assignment and will undertake the following specific roles and responsibilities:

Before In-Country Work

- **Respond to any queries about the SOW** and/or the assignment at large.
- **Consultant Conflict of Interest**. To avoid conflicts of interest or the appearance of a COI, review previous employers listed on the CV's for proposed consultants and provide additional information regarding potential COI with the project contractors or NGOs evaluated/assessed and information regarding their affiliates.
- **Documents**. Identify and prioritize background materials for the consultants and provide them, preferably in electronic form.
- **Site Visit Preparation**. Provide a list of site visit locations, key contacts, and suggested length of visit for use in planning in-country travel and accurate estimation of country travel line items costs.
- **Lodgings and Travel**. Provide guidance on recommended secure hotels and methods of in-country travel (i.e., car rental companies and other means of transportation) and identify a person to assist with logistics (i.e., visa letters of invitation etc.).

During In-Country Work

- **Mission Point of Contact**. Throughout the in-country work, ensure constant availability of the Point of Contact person and provide technical leadership and direction for the team's work.
- **Meeting Space**. Provide guidance on the team's selection of a meeting space for interviews and/or focus group discussions (i.e. USAID space if available, or other known office/hotel meeting space).
- **Meeting Arrangements**. USAID and IRC/CARE will arrange meetings; with stakeholders jointly USAID will lead the process.
- **Other Meetings**. If appropriate, assist in identifying and helping to set up meetings with local professionals relevant to the assignment.
- **Facilitate Contact with Implementing Partners**. Introduce the evaluation team to implementing partners and other stakeholders, and where applicable and appropriate prepare and send out an introduction letter for team's arrival and/or anticipated meetings.

After In-Country Work

- **Timely Reviews**. Provide timely review of draft/final reports and approval of the deliverables.

XII. DRAFT WORK PLAN AND LOE

Activity	Team Member(s)	Total Team Days	Period of Performance (illustrative depending on start date)
Consultants recruitment	Washington	-	First week of Feb
Review of documents and begin drafting evaluation protocol and survey instruments; logistics coordinator prepares for survey	1IE, 1LE	4	First week of Feb
Team planning conference call with USAID and modify protocol and tools according to discussion prior to team arrival	1IE	1	Feb 7th 2014
Travel to Country	1IE	2	Feb 10th 2014
In-briefing with USAID, team planning meetings and interviews with key stakeholders in Addis; finalize work plan, protocol, and survey tools; organize logistics for field work	1IE, 1LE	6	Feb 11-13, 2014
Fieldwork including travel days (BuleHora, Teltele, Kebrebeyah, Jijiga, Argoba, Afdera districts)	1IE, 1LE	16	Feb 14-28, 2014
Preliminary data analysis and synthesis; drafting report and presentation materials	1IE, 1LE	10	March 1-5, 2014
Presentation on preliminary findings to stakeholders	1IE, 1LE	2	March 6h , 2014
Debriefing of Mission staff—draft report submitted	1IE, 1LE	2	March 7th , 2014
International (expatriate) consultants depart country	1IE	1	March 8th , 2014
Mission sends technical feedback/comments on the draft report to the team leader	-	-	March 18th , 2014
Draft revised by the team leader and the evaluation contractor submits final report to Mission	1IE, 1LE	4	March 25th , 2014
Missions approves report		-	March 30th , 2014
Total LOE = External Consultants (1)		**27**	
Total LOE = Local Consultants (1)		**26**	
Total LOE		**53**	

IE=International expert; LE=Local expert; LLC=Local logistics coordinator Travel over weekends may be required during site visits. A six-day work week is approved while in-country.

Estimated days for travel and field work per site

Sr.#	Site	Travel day	Working day	Total
1	Discussion/interview with partners in Addis Ababa-including Oromia Regional bureaus/offices	0	3	3
2	BuleHora and Teltele	3	2	5
3	Kebrebeyah and Jijiga	1	3	4
4	Afdera, Semera	2	2	4
5	Argoba	2	1	3
Total		**8**	**10**	**19**

Estimated number of data collections by major data collection techniques and site

No.	Data collection	Estimated number at regional level			Estimated number at district level						Total
		Addis Ababa+ Oromia region	Afar	Somali	Bule Hora	Teltele	Kebre beyah	Jijiga	Afdera	Argoba	
1	Key informant interview	5	3	3	4	4	4	4	4	4	**35**
2	Focus group	0	0	0	3	3	3	3	3	3	**18**

	discussion										
3	Site/facility visit and observation	0	0	0	3	3	3	3	3	3	**18**
4	Household level case study/success story	0	0	0	2	2	2	2	2	2	**12**
Total		**5**	**3**	**3**	**12**	**12**	**12**	**12**	**12**	**12**	**83**

XIII. INSTRCUTION FOR THE PREPARATION OF THE PROPOSAL

Technical Proposal
Bidders shall prepare a technical proposal consisting of three factors below:

Factor 1 – Technical Approach (20-25 *page maximum*)
Technical approach at a minimum shall include the following information:

1. Description of the contactors proposed methodology to complete the evaluation as described in the SOW.
2. Draft work plan to include:
    a. Proposed timeline;
    b. Proposed evaluation design, methodology and schedule;
    c. Deliverables; and
    d. Draft outline of the evaluation report.

Factor 2 – Staffing Plan (2-3 *page maximum*)
The staffing plan at a minimum shall include the following information:

1. Description of the management structure of the proposed team.
2. Delineation of the roles and responsibilities of the members of the evaluation team to ensure coverage of all elements of the statement of work.
3. Description of the ability to access skilled staff to complete the evaluation
4. Resumes of members of the evaluation team (Not included in the 2 page limit – No page limit is established for submission of Resumes.)
5. Confirmation of the availability of the evaluation team throughout the completion of the evaluation.

Factor 3 – Past Performance Information (2-3*page maximum*)

Bidders briefly describe their past performance on similar projects. Past performance information shall include the following:

1. Up to three of the most recent and relevant contracts for efforts similar to the work detailed in the SOW.
2. For each contracts requested above, list contact names, job titles, mailing addresses, phone numbers, e-mail addresses, and a brief description of the work performed to include:
    - Scope of work or complexity/diversity of tasks;
    - Primary location(s) of work;
    - Term of performance;
    - Skills/expertise required;
    - Dollar value; and

- Contract type (i.e., fixed-price, cost reimbursement, etc.)

Price Proposal
A firm bidding on this activity (Evaluation) must, in addition to its technical proposal, submit budge (in Excel) showing the projected level of effort (LOE) for each proposed full time and/or short-time member of the team including subject matter expertise and logistical support.

All other costs such as travel and *per diem*, in country costs for data collection and interviewing, communication, report preparation and reproduction should be included as appropriate.

XIV. EVALUATION CRITERIA/FACTORS

Applicants should note that these criteria serve to: (a) identify the significant matters which applicants should address in their applications and (b) set the standard against which all applications will be evaluated. To facilitate the review of applications, applicants should organize the narrative sections of their applications in the same order as the selection criteria.

The technical applications will be evaluated in accordance with the Technical Evaluation Criteria set forth below. Thereafter, the cost application of all applicants submitting a technically acceptable application will be opened and costs will be evaluated for general reasonableness, allow ability, and allocability. To the extent that they are necessary, if award is not made based on initial applications, negotiations will be conducted with all applicants whose applications have a reasonable chance of being selected for award.

An agreement/s may be awarded to responsible applicant whose application offer the greatest value, cost and other factors considered. Award will be made based on the ranking of applications according to the selection criteria identified below. To make an objective evaluation possible, applications must clearly demonstrate how the organization and the application meet these criteria. For overall evaluation purpose, technical factors are considered significantly more important than cost/price factors. The technical criteria are presented below in descending order of importance. There are no sub-criteria. The bullet statements listed under each technical criterion are illustrative, but not exhaustive, of the considerations that make up that criterion.

Technical Evaluation Criteria
A technical evaluation committee will evaluate applications based on the following specific evaluation criteria and corresponding weights:

Technical Evaluation Criteria	**Weight**
Factor 1 - Technical Approach	50 points
Factor 2 - Staffing Plan	35 points
Factor 3 - Past Performance	15 points
Total Possible Evaluation Points	**100**

1. Technical Understanding and Approach (50 Points)

The technical approach shall be evaluated in accordance with the following:

- Demonstration of a sound technical approach to complete the work outlined in the SOW, including the bidder's approach to conducting evaluation.
- Demonstration of an effective draft work that meets the requirements of the SOW and provides for realistic timelines, deliverables, and an effective draft outline of the final evaluation report.

2. Personnel and Management Plan (35 Points)

The staffing plan shall be evaluated in accordance with following:

- Demonstration of a sound and effective management structure of the proposed team, including clear expectations of roles and responsibilities of the members of the evaluation team to ensure coverage of all elements of the statement of work.
- The demonstration of professional qualifications, education and relevant experience of its proposed personnel, particularly in conducting evaluations of projects/programs working on food security and agricultural research in Ethiopia and other African countries.

3. Past Performance (15 Points)

Past performance shall be evaluated based on the implementation of projects or engagements similar in scope, size and complexity as evidenced by performance records and the testimony of clients. Bidders without evidence or record of relevant past performance will be evaluated neutrally for this criterion. The bullet statements listed below are illustrative considerations that make up this criterion.

- Exhibits past record of quality service provision, including consistency in meeting goals and targets.
- Exhibits a past record of timeliness of performance, including adherence to contract schedules and other time-sensitive project conditions, and effectiveness of team management to make prompt decisions and ensure efficient completion of tasks.
- Exhibits records of customer satisfaction, including satisfactory business relations, addressing the history of professional behavior and overall business-like concern for the interests of the customer, cooperative attitude in remedying problems, and timely completion of all administrative requirements.
- Exhibits records of effectiveness of team management, including appropriateness of personnel for the job and prompt and satisfactory changes in personnel when problems with clients where identified.

USAID/Ethiopia reserves the right to verify the experience and past performance record of cited projects or other recent projects by reviewing Contractor Performance Reports (CPR's), other performance reports, or to interview cited references or other persons knowledgeable of the bidder's performance on a particular project. The Government may check any or all cited references to verify supplied information and/or to assess reference satisfaction with performance. References may be asked to comment on items such as Quality of Product or Service, Cost Control, Timeliness of Performance, Customer Satisfaction, Key Personnel, and Utilization of Small Businesses. Bidders will be provided an opportunity to explain circumstances surrounding less than satisfactory performance reports if not previously provided the opportunity.

USAID may also check other sources of information about the bidder including, but not limited to, other government agencies, better business bureaus, published media, and electronic data bases.

Cost Evaluation Criteria

Proposed costs shall be analyzed for cost realism, reasonableness, completeness, and allowability. In its analysis USAID will assess raise question like: Are the costs realistic for the effort? Do the proposed costs demonstrate that the applicant understands the requirements, and are consistent with the applicant's technical application?

The following sections describe the documentation that applicants must submit to USAID. While there is no page limit for this portion, applicants are encouraged to be as concise as possible, but still provide the necessary detail to address the following:

- Provide a copy of the applicant's business/cost application, formatted in MS Excel file that is not right protected or that display the formula on each worksheet. Present the summary budget by year for proposed activity including uses of USAID funds.

- Include a detailed budget, in US dollars, with an accompanying budget narrative which can facilitate USAID's determination that costs are allowable, allocable and reasonable.

XV. MISSION CONTACT PERSONS

Dubale Admasu
Pastoralists and livestock programs coordinator
dadmasu@usaid.gov

Mohamed Abdinoor
Pastoral and Livestock programs Advisor
Mabdinoor@usaid.gov

Awoke Tilahun,
Mission M&E Specialist
atilahun@usaid.gov

XVI. REFERENCES (PROJECT DOCUMENTS—WILL BE SENT TO THE TEAM ONCE SELECTED)

- Task Order—Project Description
- Annual Reports, most recent Quarterly Reports and other studies by partners e.g. baseline assessments ad formative research reports
- M&E Plan and achievement toward targets
- GOE relevant documents and report

ANNEXE 2: EVALUATION FRAMEWORK

SaafConsult BV
WATER, ENVIRONMENT AND RENEWABLE ENERGY
Office Netherlands:
President Steinstraat 9
2312 ZP Leiden
The Netherlands
info@saafconsult.com

EVALUATION FRAMEWORK

The surveys will be implemented in a sample group to assess the progress of the intermediate results. We will sample on the basis of the people living in the communities using cluster sampling techniques.

Below is a matrix which illustrates the linkages between the techniques used: (1) key informant interviews - KII, (2) focus group discussions – FGD, (3) site visits and observation – V&O, and (4) household level case studies/success stories – HHCS, and the intermediate results and indicators.

	KII	FGD	V&O	HHCS
IR 1	KII/IR1	FGD/IR1	V&O/IR1	HHCS/IR1
IR 2	KII/IR2	FGD/IR2	V&O/IR2	HHCS/IR2
IR 3	KII/IR3	FGD/IR3	V&O/IR3	HHCS/IR3

In some cases the questions formulated in the various sets may overlap or be used within various settings. For the questions below we have "labelled" each question to indicate to which category it belongs within the context of the above matrix.

<u>IR1 – Increased access to improved water sources for beneficiary communities</u>
IR 1 is addressed through an extensive infrastructure survey. These are mainly quantifiable queries, although some are qualitative.

1. Date.....V&O/IR1
2. Interviewer.....V&O/IR1
3. Verifier.....V&O/IR1
4. Name of water facility ……KII/IR1
5. GPS Location No.....V&O/IR1

A) Water Facilities

6. Administrative location of the water facility KII/IR1
    a. District
    b. Division
    c. Woreda
    d. Kebeles

7. Physical characteristic of the surrounding area V&O/IR1

a. Mountains
b. Swampy
c. Plain
d. Forested
e. Arid/Semi-Arid
f. Valley

8. Type of water source/facility or infrastructure V&O/IR1
    a) Pipeline
    b) Borehole
    c) Spring
    d) Conventional well
    e) Giant well
    f) Open earth dam
    g) Sand river bed dam
    h) Storage tank

9. If the water source has a pipeline, please fill in the following: KII/IR1
    a. Name of source
    b. Length of pipeline

10. The water source yield is adequate and meets the needs of the beneficiaries FGD/IR1
    a. Strongly disagree
    b. Somewhat disagree
    c. Disagree
    d. Somewhat strongly agree
    e. Agree
    f. Strongly agree

11. Type of water pump installed V&O/IR1
    a. Submersible
    b. Submersible and generator
    c. Submersible with solar panels

12. Pump Functionality status V&O/IR1
    a. Very poor
    b. Poor
    c. Fair
    d. Good
    e. Very Good
    f. Excellent

13. Is there a pump house for boreholes V&O/IR1
    a. Yes
    b. No

14. If yes, rate the pump house condition V&O/IR1
    a. Very poor

b. Poor
c. Fair
d. Good
e. Very Good
f. Excellent

15. What is the functionality status of the water facility? V&O/IR1
    a. Not functional
    b. Functional but needs repair
    c. Functional and in good condition

16. Give reasons KII/IR1

17. The water facility is managed by KII/IR1
    a. Private operators
    b. Water user group
    c. Elected village water committee
    d. Government constituted water management board
    e. Other

18. Is there a trained pump caretaker (for borehole and wells) KII/IR1
    a. Yes
    b. No

19. Composition of water management team according to gender KII/IR1
    a. Males ……..
    b. Females ……

20. What roles do women have in the management committee? FGD/IR1 and HHCS/IR1

21. What roles do men have in the management committee? FGD/IR1

22. Skills of the water management team (Training) KII/IR1
    a. No. of trained female members
    b. No. of untrained female members
    c. No. of trained male members
    d. No. of untrained male members

23. Based on the work and performance of the pump caretaker, please rate their performance FGD/IR1
    a. Very poor
    b. Poor
    c. Fair
    d. Good
    e. Very Good
    f. Excellent

24. Water protection (Fence availability) V&O/IR1

a. Fenced
b. Not fenced

25. Status of the fence V&O/IR1
    a. Very poor
    b. Poor
    c. Fair
    d. Good
    e. Very Good
    f. Excellent

26. Quality of water (based on chemical and physical analysis) V&O/IR1
    a. Salty
    b. Soft
    c. Colored

27. Recent Lab reports available? KII/IR1

28. What method of treatment (if any) is the water facility using to ensure quality of water is maintained and how often is this done? V&O/IR1

29. Average depth for boreholes …….. KII/IR1

30. Water quantity/yield from the water facility KII/IR1
    a. Dry/no water at all
    b. Insufficient
    c. Seasonal
    d. Enough /satisfactory

31. Number of households (HHs) served by the water facility. KII/IR1

32. Projected population (taking into considerations the known average family size per HH):…… V&O/IR1

33. On a monthly basis, how much does a HH pay for operation and maintenance of the water facility? FGD/IR1
    a. None
    b. Birr 1-10
    c. Birr 11-20
    d. 21-50
    e. Birr >50

34. How much water does a family use in a day? …… KII/IR1

IR2 – Improved hygiene awareness and access to sanitation among beneficiaries

For main indicator: what is the increase from baseline in number of caretakers that know the five critical times for hand-washing? V&O/IR2

IR2.1 How many Woreda health office staff and Health Extension Workers (HEWs) demonstrate improved promotion skills (c.f. baseline)? Specific question as per baseline: Do you remember receiving information from a HEW, or CHP about health or hygiene within the last six months?V&O/IR2

IR2.2 What is the number of households with improved access to sanitation facilities as compared to the baseline?[12] V&O/IR2 and/or KII/IR2

IR2.2a How many households have adequate latrines that are clean and in use in compliance with Sphere standards? [13] V&O/IR2 and/or KII/IR2

IR2.2b How many households have hand-washing facilities and dispose of solid waste properly (Sphere standards)? V&O/IR2 and/or KII/IR2

IE2.3 What percentage of the target population is reached through hygiene promotion education? Specific question as per baseline: For caretakers what are the five critical times for hand washing? FGD/IR2 and HHCS/IR2

[12]People have adequate, appropriate and acceptable toilet facilities,sufficiently close to their dwellings, to allow rapid, safe and secureaccess at all times, day and night

[13]Toilets are appropriately designed, built and located to meet the following requirements (i) they can be used safely by all sections of the population, including children,older people, pregnant women and persons with disabilities, (ii) they are sited in such a way as to minimise security threats to users, especiallywomen and girls, throughout the day and the night, (iii) they provide a degree of privacy in line with the norms of the users, (iv) they are sufficiently easy to use and keep clean and do not present ahealth hazard to the environment, (v) depending on the context, the toilets

are appropriately provided with water for hand washing and/or for flushing, (vi) they allow for the disposal of women's menstrual hygiene materialsand provide women with the necessary privacy for washing and dryingmenstrual hygiene materials (vii) they minimise fly and mosquito breeding (viii) they are provided with mechanisms for desludging, transport and appropriatedisposal in the event that the toilets are sealed or are for long-termuse and there is a need to empty them, (ix) in high water table or flood situations, the pits or containers for excreta aremade watertight in order to minimise contamination of groundwater andthe environment (x)a maximum of 20 people use each toilet, (xi) toilets are no more than 50 metres from dwellings (xii) use of toilets is arranged by household(s) and/or segregated by sex, (xiii) all the affected population is satisfied with the process of consultation andwith the toilet facilities provided and uses them appropriately.

IR3: Improved rangeland management practices

IR3.1 How many Natural Resource Management Committees (NRMCs) are established or strengthened and trained to develop rangeland management plans? KII/IR3

How many hectares of agricultural fields show improved (as compared to what?) biophysical conditions as a result of USGS assistance? KII/IR3

IR3.2 What rangeland conservation measures have been taken? What measures in which communities? KII/IR3

For the Focus Group Discussions with community members and for household level case studies/success stories a generic format for documentation will be used.

a. Names of FGD participants?
b. Number of FGD participants?
c. Gender segregation (no. of men and women)?
d. Number of people from the same HH?
e. Main issues brought to the discussion by the participants?
f. Main impact of the project as presented by the participants?

The evaluation team proposes to hold an FGD at each selected site on the basis of the sample size.

Data Collection Tools

Given the expected size of the sample and the limited amount of time allocated for the data collection, the team proposes to use a custom made product for field collection that will eliminate the need to manually enter data and digitize it. This product is a 'Software as a Service' (SaaS) platform for data collection, hosting and sharing. It allows the user to design a case specific questionnaire to collect field data, including: (a) numbers, (b) text and (c) single choice (radio buttons) and multiple choices (check box).

ANNEX 3: LIST OF PERSONS INTERVIEWED

Date: Feb. 11, 2014
Place: USAID Offices
Meeting with: USAID project team
People met:

Name	Position
Dubale	
Lucy	
Awoke Tilahun	M&E Specialist at USAID
Mohammed	Environmental Specialist at USAID

Date: Feb. 12, 2014
Place: IRC Offices
Meeting with: IRC project team
People met:

Name	Position
Petros Birhane	Project Director from IRC

Date: Feb. 12, 2014
Place: USAID Offices
Meeting with: USAID project team
People met:

Name	Position
Sintayehu Mesele	WASH- Pastoral Community Development Specialist – CARE Ethiopia
Terefe Seife	Support for Sustainable Development (SSD)
Fiseha Israel	CARE Ethiopia
Abebe Belete	Support for Sustainable Development (SSD)
Zelaiem Gelasesus	LOM Advisor, CARE Ethiopia

Date: Feb. 15, 2014
Place: Buda Magda, BuleHora
Meeting with: Buda Magda Water Management Committee
People met:

Name	Position
Tamira Safaye	Chairman
Bule Bali	Secretary
Tadelechi Udessa	Cashier
Shalisa Udessa	Member
Desta Bati	Member
Shitaye Gizaw	Store Keeper
Rodu Kalacha	Purchaser

Date: Feb. 15, 2014
Place: Buda Magda, BuleHora
Meeting with: Buda Magda Focus Group
People met:

Name	Position
Dambobi Gobana	
Darso Vdessa	

Anna Dhadacha	
TureWaji	
NennoKurkura	
GamadaHuka	
ElemaNenno	

Date: Feb. 15, 2014
Place: BuleHora
Meeting with: BuleHoraWoreda
People met:

Name	Position
HabtamuBekele	Deputy Water Office Head
TesemaHotessa	Woreda WASH Focal person at Woreda Health Office
ZemzemHussien	Health Extension Worker

Date: Feb. 16, 2014
Place: Mekanessa, Telltele
Meeting with: Water Management Comittee
People met:

Name	Position
GurachaDabaso	Chairperson
SakkeDida	Cashier
OrgeMalicha	Treasurer
ElemaJarso	Store Keeper
UrgaJilo	Auditor
KamuKanchu	Generator Operator

Date: Feb. 16, 2014
Place: Mekanessa, Telltele
Meeting with: Mekanessa, Telltele
People met:

Name	Position
SaletiBoru	
AdiKanchoro	
GababoDayo	
IoyaHalake	
Goku Wako	
SakoKanchoro	
Done Ksario	

Date: Feb. 17, 2014
Place: Yabello
Meeting with: Yabello Zonal Water Bureau
People met:

Name	Position
KebedGebre-Mariam	Deputy at Yabello Zonal Water Bureau

Date: Feb. 19, 2014
Place: Gachen, Argoba
Meeting with: Argoba Focus Group
People met:

Name	Position
Kemal Ahimad	
SintazehuAhimad	
Ahimaol Mohammad	
AbdoKombalicho	
Mohammad Ayole	
Mohammad Shamy	
Abdu Mohammad	

Note: The system is managed by the Woreda directly.

Date: Feb. 19, 2014
Place: Gachen, Argoba
Meeting with: Argoba Water Woreda
People met:

Name	Position
Nur Ahmed Beshir	Water Head at the Woreda
Mohammad Seid Hamid	Deputy Head
Amino Sirufe	Health Expert
SisayMelake	NRM Expert

Date: Feb. 22, 2014
Place: Gubedele, Jijiga
Meeting with: Gubedele WMC
People met:

Name	Position
AderSh Ali	Chairman
Abu Rashid Hussein Ahmed	Deputy
MaryameMohamoud	Cashier
MahamedYousuf Sheikh	Member
MahamedDayl	Member
AbiShakirMahamed	Member
Mahamed Ali Ibrahim	Chairperson Kebele
Ahmed Yousof Bile	Leader Kebele
Ibrahim Saleban Muse	Member

Date: Feb. 22, 2014
Place: Gubedele, Jijiga
Meeting with: Gubedele Focus Group
People met:

Name	Position
Yusef Osman	
Muse Siyad	
Ali Dayib	
HirseAbdilahi	
Ahmed Dayib	
Mohamed Hasan	
SukiegneChema	
Sefia Abdi	

Date: Feb. 22, 2014
Place: Jijiga
Meeting with: Jijiga Regional Water Bureau
People met:

Name	Position
Abdi Muhuaud	Planning Department
Elias Hussain	Head of Water Supply Deaprtment.
Eng. HajirMursal	Advisor to Regional Water Burue

Date: Feb. 24, 2014
Place: Afdera
Meeting with: Afdera WMC
People met:

Name	Position
Sa'ada Mohammed	
Ali Gumd'or	
AwagashSeid	
Ali Mohammed	
TesfayeBerhane	
Meriam Mohammed	
SeidAbegaz	

Note: At the time of the visit, the WMC has just started to function. Positions were note distributed yet.

Date: Feb. 24, 2014
Place: Afdera
Meeting with: Afdera Focus Group
People met:

Name	Position
Ali Mohammad	
Ali Usuman	
Umar Humad	
Ash Seid	
JamlaSeip	

Date: Feb. 24, 2014
Place: Semera
Meeting with: Afar Regional Water Bureau
People met:

Name	Position
WeleaWitikka,	Acting Regional Bureau Head
Abdelrazaq Mohammad,	Operations and Maintenance and Reservoir Water Supply

ANNEX 4: FIELD REPORTS AND DATA

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Date: ___ February, 2014

Administrative location_____

Place_____

Name of water facility_____

Administrative location _____

1. How effective is the project in achieving set objectives and anticipated results

a. How successfully the project attained the planned objective and intermediate results as embedded in the M&E plan?

i) Increased access to improved water source

ii) Improved hygiene awareness and access to sanitation among beneficiaries

iii) Improved rangeland management practices

b. How effective was the project in linking water supply with natural resources management for sustainable and equitable use?

c. How effective is the project in linking water supply with sanitation and hygiene activities?

d. What percentage of the target population is reached through hygiene promotion education?

e. Do you believe that available water because of the project meets beneficiaries' needs?

f. What percentage, do you think, has been reached through hygiene promotion education?

g. How do you assess your water facility?

h. How do you assess your Water Management Committee?

i. What has not been achieved and why?

j. How effective is the project in mainstreaming gender issues and addressing the need of people with disabilities and needy households?

k. How sustainable are the project interventions?

2. How is the project's approach and methodology designed to achieve project objectives?

a. How effective is the institutional arrangement and working relationship among implementing partners and with the government and other partners at different levels including the private sector?

b. Are the technologies and new practices introduced or used by the project successful to attain the intended results?

c. Were they cost effective to improve access for potable water supply, sanitation and hygiene;

d. Was there sufficient program learning, quality assurance, documentation, contribution to government policy?

e. Has there been sufficient improvement/ development (due to the project)?

f. What institutional arrangement (at community, government and private sector level) did implementing partners make to ensure sustainability of the project's results/impacts?

g. How effective was the project in building the capacity of the government staff and community members to sustainably manage the water supply, sanitation and hygiene facilities?

3. How effective is WaTER project management, structure, consortium relationships and staff composition in terms of:

a. Communication and coordination?

b. The overall project management environment?

"*USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project*"

Beneficiary Survey

Questionnaire to the User of the Project

Date: _20__ February, 2014

Administrative location__Wajji_____

Place_____

Name of water facility___Wajji_____

Administrative location _Kebele_____

1. How effective is the project in achieving set objectives and anticipated results

a. How successfully the project attained the planned objective and intermediate results as embedded in the M&E plan?

i) Increased access to improved water source

Improved significantly, given the difficuklty of getting the water at the moment. A HH can get between 5 to 6 Jirikans a day. Used to walk to Jigjiga. Women activity starts after the water comes much later in the day. The journey takes 12 hrs on camels.

ii) Improved hygiene awareness and access to sanitation among beneficiaries

Improved significantly, All HH were targeted by the educational campaign. As a result 500 HH installed latrines inside their households. The community learned a lot from the project, especially in the area of washing and personal hygine. The community is working to push everyone to install latrines. At the moment, those who don't have

iii) Improved rangeland management practices

All HH have approved on the management plan. That led them to keep their animals away from the source to keep it clean and avoid contamination.

b. How effective was the project in linking water supply with natural resources management for sustainable and equitable use?

Very Effective, and that its good for the project sustaibnability. This is evident when they started to change their behavior around the area of the source. If there is no water project there is no natural resource. That is why we are trying to prtect the water by fencing the water facility and doing some erosion control.

c. How effective is the project in linking water supply with sanitation and hygiene activities?

Very effective. The availability of the water as a result of the project has improved, thus, the sanitation conditions, along with the given training and the educational campaign led to an improved situation.

d. What percentage of the target population is reached through hygiene promotion education?

100%

e. Do you believe that available water because of the project meets beneficiaries' needs?

Yes

f. What percentage, do you think, has been reached through hygiene promotion education?

100%

g. How do you assess your water facility?

The water facility is very effeicient. All is working to make it work. Evvery one is unders scrutiny to check his work. The community is helping it by providing in kind contribution by digging the pipe way, guarding constructuion materials, and digging the access road

h. How do you assess your Water Management Committee?

i. What has not been achieved and why?

Regarding the water issue, they are very satisfied and appreciative of the help they got. They are willing to share the source with other villages

j. How effective is the project in mainstreaming gender issues and addressing the need of people with disabilities and needy households?

Women will save a lot through time, workload, and that they give more to their families with the available time

k. How sustainable are the project interventions?

They feel that the project is sustainable. The MC has been trained, and more importantly, they want to p[ass this project future generations.

2. How is the project's approach and methodology designed to achieve project objectives?

a. How effective is the institutional arrangement and working relationship among implementing partners and with the government and other partners at different levels including the private sector?

They are happy with the current arrangement. They have cooperative relationship with the Water Burue and as a result of their complaint regarding the

b. Are the technologies and new practices introduced or used by the project successful to attain the intended results?

c. Were they cost effective to improve access for potable water supply, sanitation and hygiene;

They are willing to pay as it saves them a lot of time, and provides them with a cleaner water. "Health comes first"

d. Was there sufficient program learning, quality assurance, documentation, contribution to government policy?

They feel that it is Yes. The MC are trained, they are guarding the water source from their animals

e. Has there been sufficient improvement/ development (due to the project)?

There are significant improvement. The water will help in several areas as it is brought to their homes, this will enable them to do more.

f. What institutional arrangement (at community, government and private sector level) did implementing partners make to ensure sustainability of the project's results/impacts?

g. How effective was the project in building the capacity of the government staff and community members to sustainably manage the water supply, sanitation and hygiene facilities?

3. How effective is WaTER project management, structure, consortium relationships and staff composition in terms of:

a. Communication and coordination?

WATER was very effective in communicating with the community. As a result, the community paraticipation was very high. IRC visited us all time, and we are very appreciative to their work. We assumed that the project belonged to them before us.

b. The overall project management environment?

Same as above.

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: ___February, 2014

Surveyor's Name:_____

Administrative location_____

I . Information of Respondent

a. Name of Respondent _____

Please tick the relevant items

c. Age _____

d. Gender 1. Woman □ 2. Man □

e. Number of Members in Living in One Household _____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

b) After the project,How did you get your water?

[ ] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of tap water been improved after the project?

[ ] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Tap Water (Including Turbidity)

Have the color of tap water been improved after the project?

[ ] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Tap Water

Have the color of tap water been improved after the project?

[ ] Yes [ ] No

If you answer no, please state the reason.

_____
_____

5) Amount of Tap Water

Have the amount of available water been improved after the project?

[ ] Yes [ ] No

If you answer no, please state the reason.

_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[ ] as it is [ ] after filtering, [ ] after boiling

b) After the project

How did you drink your water?

[ ] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[ ] reasonableprice [ ] a bit expensive [ ] very expensive

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[ ] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [ ] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

_____

_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[ ] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[ ] Yes [ ] No

11) Do you wash your hands

[ ] after using latrines

[ ] before cooking

[ ] before eating

[ ] before feeding child

[ ] after cleaning child

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: __21__February, 2014

Surveyor's Name:__Loay_____

Administrative location_gudebely_____

Ⅰ. Information of Respondent

a. Name of Respondent _____Ibrahim Suliman_____

Please tick the relevant items

c. Age __30____

d. Gender 1. Woman □x 2. Man □X

e. Number of Members in Living in One Household ___6_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source.__Jerikans from the a bond infested with mosquitos, 4 km away___

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Tap Water (Including Turbidity)

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Tap Water

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

5) Amount of Tap Water

Have the amount of available water been improved after the project?

[x] Yes [ ] No

If you answer no, please state the reason.

_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[x] as it is [ ] after filtering, [ ] after boiling { } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[X] reasonableprice [ ] a bit expensive [ ] very expensive (50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Economically, there will be saving from the cost of water. The second aspect is the huge saving in work load. To get water in the apst it used to take 9 hrs a day to go the before project spring, compared to this one._____

_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[ ] Yes [X } No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"*USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project*"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: ___February, 2014

Surveyor's Name:_Loay_____

Administrative location_BudaMagada_____

Ⅰ. Information of Respondent

a. Name of Respondent ___Bulebali_____

Please tick the relevant items

c. Age _30____

d. Gender 1. Woman □ 2. Man □X

e. Number of Members in Living in One Household ___6_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source.__Jerikans from the spring, thre km away_____

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Tap Water (Including Turbidity)

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Tap Water

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

5) Amount of Tap Water

Have the amount of available water been improved after the project?

[ ] Yes [X] No

If you answer no, please state the reason.

___5 birr per jirikan. They get 5 to 6 jerikans a days_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[ ] as it is [ ] after filtering, [ ] after boiling { } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[ ] reasonableprice [ ] a bit expensive [ ] very expensive (50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Economically, there will be saving from the cost of water. The second aspect is the huge saving in work load. To get water in the apst it used to take 9 hrs a day to go the before project spring, compared to this one._____

_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[X] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"*USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project*"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: __20__February, 2014

Surveyor's Name:__Loay_____

Administrative location_Wajji_____

Ⅰ. Information of Respondent

a. Name of Respondent ___~SafiyahAbdou_____

Please tick the relevant items

c. Age ___40___

d. Gender 1. Woman □X 2. Man □

e. Number of Members in Living in One Household ___6_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source.__Jerikans from a borehole some 6 hrs away, and some times from JigJiga_____

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of tap water been improved after the project?

[ ] Yes [X] No

If you answer no, please state the reason.

___The water from JigJiga tasted the same_____
_____

3) Color of Tap Water (Including Turbidity)

Have the color of tap water been improved after the project?

[ ] Yes [X] No

If you answer no, please state the reason.

_____same as above_____

4) Odor of Tap Water

Have the color of tap water been improved after the project?

[ ] Yes [X] No

If you answer no, please state the reason.

_____same as above_____

5) Amount of Tap Water

Have the amount of available water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

____before the project used to get 1 jerkian for a day, now we get three jerkans a day_____

6) Drinking Water

a) Before the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] after boiling { } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[X] reasonableprice [ ] a bit expensive [ ] very expensive (50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___._____The water is close to home, and it is much cleaner._____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[X] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"*USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project*"

Beneficiary Survey

Questionnaire to the User of the Project

Date: __15__ February, 2014

Administrative location__BulaHora_____

Place_____

Name of water facility_____

Administrative location _Kebele_____

1. How effective is the project in achieving set objectives and anticipated results

a. How successfully the project attained the planned objective and intermediate results as embedded in the M&E plan?

i) Increased access to improved water source

Improved significantly, given the difficuklty of getting the water at the moment. A HH can get between 5 to 6 Jirikans a day

ii) Improved hygiene awareness and access to sanitation among beneficiaries

Improved significantly, All HH were targeted by the educational campaign. As a result 800 HH installed latrines inside their households.

iii) Improved rangeland management practices

All HH have approved on the management plan. That led them to keep their animals away from the source to keep it clean and avoid contamination.

b. How effective was the project in linking water supply with natural resources management for sustainable and equitable use?

Very Effective, and that its good for the project sustaibnability. This is evident when they started to change their behavior around the area of the source.

c. How effective is the project in linking water supply with sanitation and hygiene activities?

Very effective. The availability of the water as a result of the project has improved, thus, the sanitation conditions, along with the given training and the educational campaign led to an improved situation.

d. What percentage of the target population is reached through hygiene promotion education?

100%

e. Do you believe that available water because of the project meets beneficiaries' needs?

Yes

f. What percentage, do you think, has been reached through hygiene promotion education?

100%

g. How do you assess your water facility?

The water facility is very effeicient. The community is helping it by providing in kind contribution by digging the pipe way, guarding constructuion materials, and digging the access road

h. How do you assess your Water Management Committee?

i. What has not been achieved and why?

Regarding the water issue, they are very satisfied and appreciative of the help they got. They are willing to share the source with other villages

j. How effective is the project in mainstreaming gender issues and addressing the need of people with disabilities and needy households?

Women will save a lot through time, workload, and that they give more to their families with the available time

k. How sustainable are the project interventions?

They feel that the project is sustainable. The MC has been trained, and more importantly, they want to p[ass this project future generations.

2. How is the project's approach and methodology designed to achieve project objectives?

a. How effective is the institutional arrangement and working relationship among implementing partners and with the government and other partners at different levels including the private sector?

They are happy with the current arrangement. They have cooperative relationship with the Water Burue and as a result of their complaint regarding the

b. Are the technologies and new practices introduced or used by the project successful to attain the intended results?

c. Were they cost effective to improve access for potable water supply, sanitation and hygiene;

They are willing to pay as it saves them a lot of time, and provides them with a cleaner water. "Health comes first"

d. Was there sufficient program learning, quality assurance, documentation, contribution to government policy?

They feel that it is Yes. The MC are trained, they are guarding the water source from their animals

e. Has there been sufficient improvement/ development (due to the project)?

There are significant improvement. The water will help in several areas as it is brought to their homes, this will enable them to do more.

f. What institutional arrangement (at community, government and private sector level) did implementing partners make to ensure sustainability of the project's results/impacts?

g. How effective was the project in building the capacity of the government staff and community members to sustainably manage the water supply, sanitation and hygiene facilities?

3. How effective is WaTER project management, structure, consortium relationships and staff composition in terms of:

a. Communication and coordination?

WATER was very effective in communicating with the community. As a result, the community paraticipation was very high.

b. The overall project management environment?

Same as above.

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: _15__February, 2014

Surveyor's Name:_Loay_____

Administrative location_BudaMagada_____

Ⅰ. Information of Respondent

a. Name of Respondent ___PetrosMiessa_____

Please tick the relevant items

c. Age _37____

d. Gender 1. Woman □ 2. Man □X

e. Number of Members in Living in One Household ___8_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source._Jerikans from the spring, three km away_____

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Water (Including Turbidity)

Have the color of water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Water

Have the color of water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

5) Amount of Water

Have the amount of available water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[ ] as it is [ ] after filtering, [ ] after boiling { X} chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[ ] reasonableprice [ ] a bit expensive [ ] very expensive (Not set yet, but it should be 50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Economically, there will be saving from the cost of water. Also, as a restaurant owner will be able to better serve the people. The second aspect is the huge saving in work load. To get water in the apst it used to take 9 hrs a day to go the before project spring, compared to this
one._____
_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[X] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"*USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project*"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: ___February, 2014

Surveyor's Name:_Loay_____

Administrative location_BudaMagada_____

Ⅰ. Information of Respondent

a. Name of Respondent ___Bulebali_____

Please tick the relevant items

c. Age _30____

d. Gender 1. Woman □ 2. Man □X

e. Number of Members in Living in One Household ___6_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source._Jerikans from the spring, thre km away_____

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Water (Including Turbidity)

Have the color of water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Water

Have the color of water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

5) Amount of Water

Have the amount of available water been improved after the project?

[ ] Yes [X] No

If you answer no, please state the reason.

___5 birr per jirikan. They get 5 to 6 jerikans a days_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[ ] as it is [ ] after filtering, [ ] after boiling { } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[ ] reasonableprice [ ] a bit expensive [ ] very expensive (50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Economically, there will be saving from the cost of water. The second aspect is the huge saving in work load. To get water in the apst it used to take 9 hrs a day to go the before project spring, compared to this one._____
_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[X] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Date: _16__ February, 2014

Administrative location__Didibe_____

Place_____

Name of water facility_Macknnisa_____

Administrative location _Kebele_____

1. How effective is the project in achieving set objectives and anticipated results

a. How successfully the project attained the planned objective and intermediate results as embedded in the M&E plan?

i) Increased access to improved water source

Improved significantly, given the difficuklty of getting the water at the moment. A HH can get between 4 to 5Jirikans a day. Before the community travelled for 24 hrs to get water. Now its much easier and more safe to get the water. Despite of that, this water point is not enough for all and there is a need for another one.

ii) Improved hygiene awareness and access to sanitation among beneficiaries

Improved significantly, All HH were targeted by the educational campaign. As a result 411 HH installed latrines inside their households and 500 HH installed hand washing facilities.

iii) Improved rangeland management practices

All HH have approved on the management plan. That led them to keep their animals away from the source to keep it clean and avoid contamination. The community built fence, soil banks and have a guard to enforce the protected area.

b. How effective was the project in linking water supply with natural resources management for sustainable and equitable use?

Very Effective, and that its good for the project sustaibnability. This is evident when they started to change their behavior around the area of the source. One note is that the cattle used to drink from open bonds, which was contaminated by leaches. With the project and after drinking clean water, the cattle became in a much better conditions and the leaches are out of the cattle bodies.

Before the project, the land was degraded and overly grazed. Becaseu of the project and the protection, the land has rejuvenated and that led to better recharging to the well.

c. How effective is the project in linking water supply with sanitation and hygiene activities?

Very effective. The availability of the water as a result of the project has improved, thus, the sanitation conditions, along with the given training and the educational campaign led to an improved situation.

d. What percentage of the target population is reached through hygiene promotion education?

100%

e. Do you believe that available water because of the project meets beneficiaries' needs?

No

f. What percentage, do you think, has been reached through hygiene promotion education?

100%

g. How do you assess your water facility?

The water facility is very effeicient. The community is helping it by providing in kind contribution by digging the pipe way, guarding constructuion materials, and digging the access road

h. How do you assess your Water Management Committee?

The committee is trustworthy and doing a good management.

i. What has not been achieved and why?

Regarding the water issue, they are very satisfied and appreciative of the help they got. There is a need for an additional source to help other communities within the kebele.

j. How effective is the project in mainstreaming gender issues and addressing the need of people with disabilities and needy households?

Women will save a lot through time, workload, and that they give more to their families with the available time

k. How sustainable are the project interventions?

They feel that the project is sustainable. The MC has been trained, and more importantly, they want to pass this project to future generations.

2. How is the project's approach and methodology designed to achieve project objectives?

a. How effective is the institutional arrangement and working relationship among implementing partners and with the government and other partners at different levels including the private sector?

They are happy with the current arrangement. They have cooperative relationship with the Water Burue and as a result of their complaint regarding the

b. Are the technologies and new practices introduced or used by the project successful to attain the intended results?

They believe that is yes. The community is passing its knowledge to its children and its neighbors.

c. Were they cost effective to improve access for potable water supply, sanitation and hygiene;

They are willing to pay as it saves them a lot of time, and provides them with a cleaner water. "Health comes first". Though before the project there was no actual financial cost because the water was collected from bushes. The project saved thgem with helth and time/.

d. Was there sufficient program learning, quality assurance, documentation, contribution to government policy?

They feel that it is Yes. The MC are trained, they are guarding the water source from their animals

e. Has there been sufficient improvement/ development (due to the project)?

There are significant improvement. The water will help in several areas as it is brought to their homes, this will enable them to do more.

f. What institutional arrangement (at community, government and private sector level) did implementing partners make to ensure sustainability of the project's results/impacts?

g. How effective was the project in building the capacity of the government staff and community members to sustainably manage the water supply, sanitation and hygiene facilities?

3. How effective is WaTER project management, structure, consortium relationships and staff composition in terms of:

a. Communication and coordination?

WATER was very effective in communicating with the community. As a result, the community paraticipation was very high.

b. The overall project management environment?

Same as above.

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: __16__February, 2014

Surveyor's Name:__Loay_____

Administrative location_AdidibeTelletele_____

Ⅰ. Information of Respondent

a. Name of Respondent ___Bulebali_____

Please tick the relevant items

c. Age __30____

d. Gender 1. Woman □ 2. Man □X

e. Number of Members in Living in One Household ___6_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source.__Jerikans from the spring, thre km away_____

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others
If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Water (Including Turbidity)

Have the color of water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Water

Have the color of water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

5) Amount of Water

Have the amount of available water been improved after the project?

[ ]Yes [X] No

If you answer no, please state the reason.

___Because of the limitation of the source and the large number of people benifiting, he is still getting almost the same amount of water as before.The quality has improved significantly._____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[ ] as it is [ ] after filtering, [ ] after boiling { X } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[X] reasonableprice [ ] a bit expensive [ ] very expensive

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Huge saving in work load. To get water in the past it used to take 24 hrs a day to go the before project spring, compared to this one._____
_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[X] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: ___February, 2014

Surveyor's Name:__Loay_____

Administrative location AdidibeTelletele_____

Ⅰ. Information of Respondent

a. Name of Respondent ___Sake Dida_____

Please tick the relevant items

c. Age ___35___

d. Gender 1. Woman □X 2. Man □

e. Number of Members in Living in One Household ___10_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source.__Jerikans from the bonds out in the bushes

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Tap Water (Including Turbidity)

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Tap Water

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

5) Amount of Tap Water

Have the amount of available water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

___
_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] after boiling { } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[X] reasonableprice [ ] a bit expensive [ ] very expensive (50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Huge saving in work load. To get water in the past it used to take 24 hrs a day to go the before project spring, compared to this one._____
_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[X] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"*USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project*"

Beneficiary Survey

Questionnaire to the User of the Project

Date: __18__ February, 2014

Administrative location__Argoba_____

Place____Gachen_____

Name of water facility____Argoba_____

Administrative location _Worede_____

1. How effective is the project in achieving set objectives and anticipated results

a. How successfully the project attained the planned objective and intermediate results as embedded in the M&E plan?

i) Increased access to improved water source

Improved significantly, the community spent 15400 birr per month before the project. Many people were not bale to access the water. After the electrification of the groid, the cost dropped by 50%. The access for water was highly improved. The project added two water points, plus two refill reservoirs. Previously the access was 4 hrs a day. Now its for 8 hrsaday. Childre used to go for the river fro washing clothes and drink. Before the cost was 600 birr per day, now its cut to 100 birr per day.

ii) Improved hygiene awareness and access to sanitation among beneficiaries

Tremendous change. Before the project, very few people who are aware of hygine practices. With the project and the educational campaigns more than 80% are aware. The same percent of HH has latrines. Care is our local partner and are appreciative for its effort. At the beginning we were embarresed, however we came to understand the importance of this component. One of the members, he constructed a shower house where he offers it for negobors for money. He uses that money ot get his water.

iii) Improved rangeland management practices

Change happened. We are grazing closer to the village, savings were made and the extra money was saved in the bank. Befre the spring in the graze land was dried out, but now its back. The native graces are back as a result of the project. The Gov. is planning to expand the NRM committee experiment into neighboring kebeles. Noticing that the wild life is coming back. We also came to understand the importance of protecting the existing trees and native grass.

b. How effective was the project in linking water supply with natural resources management for sustainable and equitable use?

The project is sutainable, especial for the grassing part. Before the unit of grass was sold by 30 birr, now its 15 birr. The gov. through the worede is responsible for maintaining the water part of the project, and the commubity is responsible for maintaining the sanitation facilities and the grassing land.

c. How effective is the project in linking water supply with sanitation and hygiene activities?

Very effective. The availability of the water as a result of the project has improved, thus, the sanitation conditions, along with the given training and the educational campaign led to an improved situation.

d. What percentage of the target population is reached through hygiene promotion education?

85%

e. Do you believe that available water because of the project meets beneficiaries' needs?

Yes

f. What percentage, do you think, has been reached through hygiene promotion education?

85%. The community is pushing thos who are not using latrines, and also monitoring the usage to make sure that the community is at helath.

g. How do you assess your water facility?

The water facility is functional in a good way. The members are elected and everything is transparent. The committee is responsible and aware of its responsibilities.

h. How do you assess your Water Management Committee?

i. What has not been achieved and why?

Cattle trough, and clothes washing. They were planned but not implemented. They feel that the project will continue with them. They have not asked for why.

j. How effective is the project in mainstreaming gender issues and addressing the need of people with disabilities and needy households?

Women will save a lot through time, workload, and that they give more to their families with the available time. ~They used to stay in que for four hours. The que now is much less. Before they used to go for river to wash clothes, and their children will drink from the river. Because the project has two water points, the avialbailityy of water is much more.

k. How sustainable are the project interventions?

They feel that the project is sustainable. The MC has been trained, and more importantly, they want to p[ass this project future generations.

2. How is the project's approach and methodology designed to achieve project objectives?

a. How effective is the institutional arrangement and working relationship among implementing partners and with the government and other partners at different levels including the private sector?

They are happy with the current arrangement. They have cooperative relationship with the Water Burue and as a result of their complaint regarding the

b. Are the technologies and new practices introduced or used by the project successful to attain the intended results?

c. Were they cost effective to improve access for potable water supply, sanitation and hygiene;

They are willing to pay as it saves them a lot of time, and provides them with a cleaner water. "Health comes first"

d. Was there sufficient program learning, quality assurance, documentation, contribution to government policy?

They feel that it is Yes. The MC are trained, they are guarding the water source from their animals

e. Has there been sufficient improvement/ development (due to the project)?

There are significant improvement. The water will help in several areas as it is brought to their homes, this will enable them to do more.

f. What institutional arrangement (at community, government and private sector level) did implementing partners make to ensure sustainability of the project's results/impacts?

g. How effective was the project in building the capacity of the government staff and community members to sustainably manage the water supply, sanitation and hygiene facilities?

3. How effective is WaTER project management, structure, consortium relationships and staff composition in terms of:

a. Communication and coordination?

WATER was very effective in communicating with the community. As a result, the community paraticipation was very high. Therespondents were very happy with the project as some described it have changed their lifes. They feel that they have established a family relationship.

b. The overall project management environment?

Same as above.

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: __18__February, 2014

Surveyor's Name:__Loay_____

Administrative location_Argoba_____

I . Information of Respondent

a. Name of Respondent ___SentayoNigato_____

Please tick the relevant items

c. Age _30_____

d. Gender 1. Woman □X 2. Man □

e. Number of Members in Living in One Household ___3_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source._Jerikans from the river MilkaJabdu, _____

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Tap Water (Including Turbidity)

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Tap Water

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

5) Amount of Tap Water

Have the amount of available water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[ ] as it is [ ] after filtering, [ ] after boiling { X } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[X] reasonableprice [ ] a bit expensive [ ] very expensive (50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Economically, there will be saving from the cost of water. The second aspect is the huge saving in work load. To get water in the apst it used to take 9 hrs a day to go the before project river, compared to this one by staying in a 2 hrque. The health has improved
significantly._____
_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[X] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"*USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project*"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: __18__February, 2014

Surveyor's Name:__Loay_____

Administrative location_Argoba_____

Ⅰ. Information of Respondent

a. Name of Respondent ___SayyedYemeno_____

Please tick the relevant items

c. Age __60____

d. Gender 1. Woman □ 2. Man □X

e. Number of Members in Living in One Household ___7_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source.__Jerikans from the river MilkaJabdu, _____

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Tap Water (Including Turbidity)

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Tap Water

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

5) Amount of Tap Water

Have the amount of available water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] after boiling { } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[X] reasonableprice [ ] a bit expensive [ ] very expensive (50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Economically, there will be saving from the cost of water. Another aspect is that The respondent established a public shower facility that generated an income to him. He also started to plant his yard with new crops.

_____

_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[X] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"*USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project*"

Beneficiary Survey

Questionnaire to the User of the Project

Date: __21__ February, 2014

Administrative location__Gubeldey_____

Place_____

Name of water facility_____

Administrative location _Kebele_____

1. How effective is the project in achieving set objectives and anticipated results

a. How successfully the project attained the planned objective and intermediate results as embedded in the M&E plan?

i) Increased access to improved water source

Improved significantly, given the difficuklty of getting the water at the moment. Before the project they used to get it from a small bond beside of the river. The workload of the women dropped significantly.

ii) Improved hygiene awareness and access to sanitation among beneficiaries

Only interms of knowledge. Only 20 HH did install a sanitation facility.Its a bigining as it was onlty the IRC that has approached them with this. They have assigned a health education member to push for this. They are committed to push for a 100% coverage of sanitation facilities. Before the project there was shortage of water, now the amount of water is plenty and is used for cleaning and washing.

iii) Improved rangeland management practices

None active.

b. How effective was the project in linking water supply with natural resources management for sustainable and equitable use?

None active

c. How effective is the project in linking water supply with sanitation and hygiene activities?

Very effective.Before the project there was shortage of water, now the amount of water is plenty and is used for cleaning and washing.

d. What percentage of the target population is reached through hygiene promotion education?

100%

e. Do you believe that available water because of the project meets beneficiaries' needs?

Yes

f. What percentage, do you think, has been reached through hygiene promotion education?

100%

g. How do you assess your water facility?

The water facility is very effeicient. The community is helping it by providing in kind contribution by digging the pipe way, guarding constructuion materials, and digging the access road

h. How do you assess your Water Management Committee?

i. What has not been achieved and why?

Regarding the water issue, they are very satisfied and appreciative of the help they got. They are willing to expand the project and help neighboring velliges.

j. How effective is the project in mainstreaming gender issues and addressing the need of people with disabilities and needy households?

Women will save a lot through time, workload, and that they give more to their families with the available time.

k. How sustainable are the project interventions?

They feel that the project is sustainable. The MC has been trained, and more importantly, they want to p[ass this project future generations. The

2. How is the project's approach and methodology designed to achieve project objectives?

a. How effective is the institutional arrangement and working relationship among implementing partners and with the government and other partners at different levels including the private sector?

The Woreda people came and conducted training for the management committee.

b. Are the technologies and new practices introduced or used by the project successful to attain the intended results?

The solar panel technology is new and needs people to be trained to maintain it.

c. Were they cost effective to improve access for potable water supply, sanitation and hygiene;

They are willing to pay as it saves them a lot of time, and provides them with a cleaner water. "Health comes first"

d. Was there sufficient program learning, quality assurance, documentation, contribution to government policy?

They feel that it is Yes. The MC are trained, they are guarding the water source from their animals

e. Has there been sufficient improvement/ development (due to the project)?

There are significant improvement. The water will help in several areas as it is brought to their homes, this will enable them to do more.

f. What institutional arrangement (at community, government and private sector level) did implementing partners make to ensure sustainability of the project's results/impacts?

g. How effective was the project in building the capacity of the government staff and community members to sustainably manage the water supply, sanitation and hygiene facilities?

3. How effective is WaTER project management, structure, consortium relationships and staff composition in terms of:

a. Communication and coordination?

WATER was very effective in communicating with the community. As a result, the community paraticipation was very high. Every time, project members visit the site, a welcome cermeny is made welcoming them.

b. The overall project management environment?

Same as above.

Train two operators for the pump operation.

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: _21__February, 2014

Surveyor's Name:_Loay_____

Administrative location_gudebely_____

Ⅰ. Information of Respondent

a. Name of Respondent _____Ibrahim Suliman_____

Please tick the relevant items

c. Age _30____

d. Gender 1. Woman □x 2. Man □X

e. Number of Members in Living in One Household ___6_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source.__Jerikans from the a bond infested with mosquitos, 4 km away___

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others
If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Tap Water (Including Turbidity)

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Tap Water

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

5) Amount of Tap Water

Have the amount of available water been improved after the project?

[x] Yes [ ] No

If you answer no, please state the reason.

_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[x] as it is [ ] after filtering, [ ] after boiling { } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[X] reasonableprice [ ] a bit expensive [ ] very expensive (50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Economically, there will be saving from the cost of water. The second aspect is the huge saving in work load. To get water in the apst it used to take 9 hrs a day to go the before project spring, compared to this one._____
_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[ ] Yes [X } No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: __21__February, 2014

Surveyor's Name:__Loay_____

Administrative location_gudebely_____

Ⅰ. Information of Respondent

a. Name of Respondent _____rashid_____

Please tick the relevant items

c. Age __45____

d. Gender 1. Woman □x 2. Man □

e. Number of Members in Living in One Household ___10_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source.__Jerikans from the a nearby area by digging into the sand, 4 km away_____

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____

_____

3) Color of Tap Water (Including Turbidity)

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Tap Water

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

5) Amount of Tap Water

Have the amount of available water been improved after the project?

[x] Yes [ ] No

If you answer no, please state the reason.

_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[x] as it is [ ] after filtering, [ ] after boiling { } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[X] reasonableprice [ ] a bit expensive [ ] very expensive (50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Economically, there will be saving from the cost of water. The second aspect is the huge saving in work load. To get water in the apst it used to take 9 hrs a day to go the before project spring, compared to this one._____
_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[X] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"*USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project*"

Beneficiary Survey

Questionnaire to the User of the Project

Date: _23__ February, 2014

Administrative location__Afdera_____

Place_____

Name of water facility_____

Administrative location _Woreda_____

1. How effective is the project in achieving set objectives and anticipated results

a. How successfully the project attained the planned objective and intermediate results as embedded in the M&E plan?

i) Increased access to improved water source

Improved significantly, given the difficuklty of getting the water at the moment. A HH can get between 5 to 6 Jirikans a day

ii) Improved hygiene awareness and access to sanitation among beneficiaries

Improved significantly, All HH were targeted by the educational campaign. As a result 800 HH installed latrines inside their households.

iii) Improved rangeland management practices

All HH have approved on the management plan. That led them to keep their animals away from the source to keep it clean and avoid contamination.

b. How effective was the project in linking water supply with natural resources management for sustainable and equitable use?

Very Effective, and that its good for the project sustaibnability. This is evident when they started to change their behavior around the area of the source.

c. How effective is the project in linking water supply with sanitation and hygiene activities?

Very effective. The availability of the water as a result of the project has improved, thus, the sanitation conditions, along with the given training and the educational campaign led to an improved situation.

d. What percentage of the target population is reached through hygiene promotion education?

100%

e. Do you believe that available water because of the project meets beneficiaries' needs?

Yes

f. What percentage, do you think, has been reached through hygiene promotion education?

100% by project and 7 health burue employees.

g. How do you assess your water facility?

The water facility is very effeicient. We are getting water on a daily basis. It shortened the time we get our water from

h. How do you assess your Water Management Committee?

i. What has not been achieved and why?

Regarding the water issue, they are very satisfied and appreciative of the help they got. They are willing to share the source with other villages

j. How effective is the project in mainstreaming gender issues and addressing the need of people with disabilities and needy households?

Women will save a lot through time, workload, and that they give more to their families with the available time

k. How sustainable are the project interventions?

They feel that the project is sustainable. The MC has been trained, and more importantly, they want to p[ass this project future generations.

2. How is the project's approach and methodology designed to achieve project objectives?

a. How effective is the institutional arrangement and working relationship among implementing partners and with the government and other partners at different levels including the private sector?

They are happy with the current arrangement. They have cooperative relationship with the Water Burue and as a result of their complaint regarding the

b. Are the technologies and new practices introduced or used by the project successful to attain the intended results?

c. Were they cost effective to improve access for potable water supply, sanitation and hygiene;

They are willing to pay as it saves them a lot of time, and provides them with a cleaner water. Before they used to bring water near by Samer for 20 birr per jerkian.

d. Was there sufficient program learning, quality assurance, documentation, contribution to government policy?

They feel that it is Yes. The MC are trained, they are guarding the water source from their animals

e. Has there been sufficient improvement/ development (due to the project)?

There are significant improvement. New practices have improved. The area befoire the project was dirty. After the project when all the community has rallied to clean the area. The wordastrted with itself as a beginning to become as a model to the people. Wash committee was established that led the construction of two solid waste pits.

f. What institutional arrangement (at community, government and private sector level) did implementing partners make to ensure sustainability of the project's results/impacts?

g. How effective was the project in building the capacity of the government staff and community members to sustainably manage the water supply, sanitation and hygiene facilities?

3. How effective is WaTER project management, structure, consortium relationships and staff composition in terms of:

a. Communication and coordination?

WATER was very effective in communicating with the community. As a result, the community paraticipation was very high. Afdera became a better place as a result of the project.

b. The overall project management environment?

Same as above.

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: _23__February, 2014

Surveyor's Name:_Loay_____

Administrative location_Afdera_____

Ⅰ. Information of Respondent

a. Name of Respondent ___Saada_____

Please tick the relevant items

c. Age _30____

d. Gender 1. Woman □X 2. Man □

e. Number of Members in Living in One Household ___6_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source._Jerikansftaken by truckers to be filled from Semera. After a couple of days they are returned back. The cost per jerikan was 20 birr. _____

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Tap Water (Including Turbidity)

Have the color of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

4) Odor of Tap Water

Have the color of tap water been improved after the project?

[ ] Yes [X] No

If you answer no, please state the reason.

___Water from Semera had no odor_____
_____

5) Amount of Tap Water

Have the amount of available water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] after boiling { } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[X] reasonableprice [ ] a bit expensive [ ] very expensive (50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Economically, there will be saving from the cost of water. Plus, the closnes of the water point made the water much secured._____

_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[X] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

"USAIDWater Sanitation and Hygiene Transformation for Enhanced Resilience project"

Beneficiary Survey

Questionnaire to the User of the Project

Entry Date: __23__February, 2014

Surveyor's Name:__Loay_____

Administrative location_Afdera_____

Ⅰ. Information of Respondent

a. Name of Respondent ___Amnah_____

Please tick the relevant items

c. Age __30____

d. Gender 1. Woman □X 2. Man □

e. Number of Members in Living in One Household ___7_____

Ⅱ. Contents of Questionnaire

1) Source of Water

a) Before the project, How did you get your water?

[ ] Tank Water [ ]Wells [X] Others

If you answer others, please specify the water source.__Jerikansftaken by truckers to be filled from Semera. After a couple of days they are returned back. The cost per jerikan was 20 birr. _____

b) After the project,How did you get your water?

[X] Project facilities[ ] Tank Water [ ]Wells [ ] Others

If you answer others, please specify the water source._____

2)Taste of Water

Have the taste of tap water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

3) Color of Tap Water (Including Turbidity)

Have the color of tap water been improved after the project?

[ ] Yes [X] No

If you answer no, please state the reason.

___Semera water had no color_____
_____

4) Odor of Tap Water

Have the color of tap water been improved after the project?

[ ] Yes [X] No

If you answer no, please state the reason.

___Water from Semera had no odor_____
_____

5) Amount of Tap Water

Have the amount of available water been improved after the project?

[X] Yes [ ] No

If you answer no, please state the reason.

_____
_____

6) Drinking Water

a) Before the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] after boiling { } chemical from the Health burue

b) After the project

How did you drink your water?

[X] as it is [ ] after filtering, [ ] Yes, after boiling

7) Water Tariff

How do you feel about water tariff?

[X] reasonableprice [ ] a bit expensive [ ] very expensive (50 cent to 1 birr per jerikan)

7) Water-borne Disease

Have the disease caused by water itself, for example, diarrhea, been reduced after the project?

[X] Yes, I'm aware that disease has been reduced [ ] No change [ ] I do not know

8) Impact on Livelihood

After the project, is there any change in your livelihood owing to the improvement of water supply?

[ ] Not at all, [X] Yes, my livelihood has been improved.

If the answer is yes, please describe the improved situation.

___Economically, there will be saving from the cost of water. Plus, the closnes of the water point made the water much secured._____
_____

9) Sanitation facilities

Does your HH have adequate latrines that are clean and in use?

[X] Yes [} No

10) Do you remember receiving information from health caretakers about health and hygiene within the past six months?

[X] Yes [ ] No

11) Do you wash your hands

[X] after using latrines

[X] before cooking

[X] before eating

[X] before feeding child

[X] after cleaning child

ANNEX 5: SURVEY FORMS AND RESULTS

Water Installation	Afdera (Afar)
Questions	
Administrative_location_of_the_water_facility	Woreda
Administrative_location_of_the_water_facility	Kebele
Physical_characteristic_of_the_surrounding_area	Plain
Type_of_water_source_facility_or_infrastructure	Spring
Name_the_water_source_copy	Aliganda
Give_the_length_of_the_pipe_copy	2 km
The_water_source_yield_is_adequate_and_meets_the_needs_of_th	Strongly agree
Pump_Functionality_status	Excellent
Is_there_a_pump_house_for_boreholes	Yes
If_yes__rate_the_pump_house_condition	Excellent
What_is_the_functionality_status_of_the_water_facility_	Functional and in good condition
The_water_facility_is_managed_by	Elected village water committee
Males	4
Females	3
What_roles_do_women_have_in_the_management_committee_	Secretary, 2 members
What_roles_do_men_have_in_the_management_committee_	Chairperson, cashier, auditor, member
Number1	3
Number2	0
Number3	4
Number4	0
Is_there_a_trained_pump_caretaker__for_borehole_and_wells_	Yes
Based_on_the_work_and_performance_of_the_pump_caretaker__ple	Very good
Water_protection__Fence_availability_	Fenced
Status_of_the_fence	Very good
Quality_of_water__based_on_chemical_and_physical_analysis_	Soft
Recent_Lab_reports_available_	Yes
Get_a_copy_of_most_recent_lab_tests	2014
What_method_of_treatment__if_any__is_the_water_facility_usin	Reverse osmosis
Average_depth_for_boreholes___	0
Water_quantity_yield_from_the_water_facility	ENOugh /satisfactory
Number_of_households__HHs__served_by_the_water_facility	1200
Projected_population__taking_into_considerations_the_kNOwn_a	7000
On_a_monthly_basis__how_much_does_a_HH_pay_for_operation_and	Other
If_Other__how_much_and_why_	4 birr per jerikan
How_much_water_does_a_family_use_in_a_day___m__	20
What_is_the_number_of_households_with_improved_access_to_san	Almost all
How_many_households_have_adequate_latrines_that_are_clean_an	Almost all
How_many_households_have_hand_washing_facilities_and_dispose	Almost all
What_percentage_of_the_target_population_is_reached_through_	Almost all
How_many_Natural_Resource_Management_Committees__NRMCs__are_	1
How_many_hectares_of_agricultural_fields_show_improved__as_c	UnkNOwn
What_rangeland_conservation_measures_have_been_taken__What_m	Built stone banks around the source water. 2.5 km
Do_you_remember_receiving_information_from_a_HEW__or_CHP_abo	Yes

	Gubadley (Somali)
Questions	
Administrative_location_of_the_water_facility	Kebele
Physical_characteristic_of_the_surrounding_area	Plain
Type_of_water_source_facility_or_infrastructure	Borehole
Name_the_water_source_copy	Gubedely
Give_the_length_of_the_pipe_copy	1 km
The_water_source_yield_is_adequate_and_meets_the_needs_of_th	Strongly agree
Type_of_water_pump_installed	Submersible with solar panels
Pump_Functionality_status	Excellent
Is_there_a_pump_house_for_boreholes	Yes
If_yes__rate_the_pump_house_condition	Excellent
What_is_the_functionality_status_of_the_water_facility_	Functional and in good condition
Give_reasons	Just started
The_water_facility_is_managed_by	Elected village water committee
Males	8
Females	1
What_roles_do_women_have_in_the_management_committee_	Cachier
What_roles_do_men_have_in_the_management_committee_	Chairperson, secretary, deputy, accountant, m&e, health, members
Number1	1
Number2	0
Number3	8
Number4	0
Is_there_a_trained_pump_caretaker__for_borehole_and_wells_	NO
Water_protection__Fence_availability_	Fenced
Status_of_the_fence	Very good
Quality_of_water__based_on_chemical_and_physical_analysis_	Soft
Recent_Lab_reports_available_	Yes
Get_a_copy_of_most_recent_lab_tests	2014
What_method_of_treatment__if_any__is_the_water_facility_usin	NOne
Average_depth_for_boreholes___	75
Water_quantity_yield_from_the_water_facility	ENOugh /satisfactory
Number_of_households__HHs__served_by_the_water_facility	1500
Projected_population__taking_into_considerations_the_kNOwn_a	12000
On_a_monthly_basis__how_much_does_a_HH_pay_for_operation_and	Other
If_Other__how_much_and_why_	5 birr per month per households up to 6 jerikans per day
How_much_water_does_a_family_use_in_a_day___m__	15
What_is_the_number_of_households_with_improved_access_to_san	20
How_many_households_have_adequate_latrines_that_are_clean_an	20
How_many_households_have_hand_washing_facilities_and_dispose	5
What_percentage_of_the_target_population_is_reached_through_	100%
How_many_Natural_Resource_Management_Committees__NRMCs__are_	1
How_many_hectares_of_agricultural_fields_show_improved__as_c	NOne active . Just kNOwledge.
Do_you_remember_receiving_information_from_a_HEW__or_CHP_abo	3 community volunteers only