

**SNNPRS**

**Gamo Gofa Zone**

**Finance and Economic Development Department**

**Midterm Evaluation on EECMY-DASSC  
Community Based Health Service project  
in Boreda and Arba Minch Zuria Woreda**

**Arbaminch**

**November 2012**

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# I Executive Summary

The Ethiopian Evangelical Church Mekane Yesus South West Synod development and social services of the church were led by her development department which was established from her institutionalization as a national church. In the year 2000, the EECMY development department was organized into Development and Social Services Commission (EECMY-DASSC) and registered as a legal church based development agency in line with the government policy. In November 2009 EECMY-DASSC received its license as Ethiopian Resident Charity Organization from the newly established government agency for Charities and Societies for three years (Nov. 2009 – Oct. 2012). For the purpose of coordinating development and faith based activities, the church has established synods in the various parts of the country. South West Synod is one of the EECMY synods located in Southern Nations, Nationalities and Peoples' Regional Government. Like any other synods, South West Synod has been serving communities of the area by providing basic social infrastructures, such as health service facilities, water supply, irrigation development and prevention and control of HIV/AIDS in various Woreda. EECMY-DASSC has been working in Arbaminch Zuria and Boreda Woreda of GamoGofa zone in SNNPRS in implementing its project to prevent and control HIV/AIDS, water sanitation and Hygiene, avoiding marginalization abduction and FGM.

This is the report of the midterm evaluation conducted on the project entitled Community Based Health service implemented from June 2010- November 2012 As we, the evaluation team understood from our investigation the organization planned and agreed to implement its project in Arbaminch Zuria and Boreda Woreda of Gamo Gofa zone and the reviewed documents and field observed facts have been indicated activities as per the agreement made initially. .

The report is organized in four parts: the **first section** is the introductory part, presents the executive summary, project identification and description the **second section** discusses the major findings of the evaluation and it sees the projects plan versus achievements and versus key evaluation criteria like relevance, efficiency, effectiveness impact and sustainability of the

project. In **third section** SWOT analysis of the project, the major constraints and lessons learnt are discussed. **Finally** conclusion and possible recommendations are forwarded.

## **1. Project identification**

**1.1 Name of the project** - Community based health service

**1.2 Location** - Arbaminch Zuria Woreda and Boreda of Gamo Gofa Zone

**1.3 Funding Agency** - Norwegian Lutheran Mission

**1.4 Executing Agency** -Gamo Gofa Zone Finance &Economic  
Development Department & Health Department& Women Child  
&youth & Water resource Department

**1.5 Implementing agency-** The Ethiopian Evangelical Church Mekane Yesus Development and  
Social Service Commission.

**1.6 Project duration-** June2010- December2014

**1.7 Total project Budget-** Et .Birr 2,500,000.00

**1.8 Beneficiaries -** Direct 4,238 and indirect 18,550

## **2. Objectives of the project**

### ***2.1. General objectives***

The general objective of the project is to improve health and Social status of the target community.

### ***2.2. Specific objectives***

The Specific objectives of the project are to:

- Bring about behavioral change on HIV/AIDS among Community members to reduce the transmission, Increase care and support and reduce social exclusion in three Kebeles of Arbaminch Zuria and Boreda Woreda by the end of the project period.
- Increase access to potable water supply that leads to reduction of water born disease and reduce workload and increase participation on productive and reproductive social activities for community members living in five Kebeles of Arbaminch Zuria and Boreda Woreda by the end of the project period.
- Increase knowledge, improve attitude and practice on sanitation and hygiene among communities in the six Kebeles of Arbaminch Zuria and Boreda Woreda by the end of the project period.
- Reduce Harmful Traditional Practices to improve the productive health of women and children as well as improve mutual understanding and social acceptance among the people in the five Kebeles of Arbaminch Zuria and Boreda Woreda by the end of the project.

### **3. Description of the project**

#### ***3.1. The project area***

GamoGofa is one of among the 14 Zones of Southern Nation Nationalities and people Regional state having 15 Woreda and 2 town administrations with a total projected population of 1.6 million in 2008. Due to infrastructure & other problems especially in high land area, the health coverage of GamoGofa is very low 58%. There is gradual improvement in every year and currently it reached about 82%. Out of the 15 Woreda of the Zone, this document refers to Arbaminch Zuria and Boreda Woreda.

**Arbaminch Zuria Woreda** with a total projected population size of 173,361 in 2008. More than 85% of the Woreda population lives in rural areas engaged mainly in mixed farming (crop and livestock production). Administratively, the Woreda is organized in to 29 Kebeles. The health coverage of Arbaminch Zuria Woreda by health center is currently only 43% and overall health coverage is 67%. Awareness concerning HIV/AIDS and access to potent water is also too low (36.7%).

**Boreda Woreda**; is also one of the 15 Woreda of the zone having a total projected population size of 77,251 in 2008. Zefine is the capital town of the Woreda located at 102 kilometer from Arbaminch. About 97% of the total population of the Woreda live in rural areas and for the purpose of administration the Woreda is organized in to 29 Kebeles (28 rural and one urban Kebeles). The Woreda health coverage by health center is only 33% and overall coverage is 71%. Access to potent water is critical including the Woreda capital only 16%. Boreda communities are well known by FGM, according to current information, above 70% of female's gets genital mutilation.

## **4. Purpose and Scope of Evaluation**

### ***4.1. Purpose of the Evaluation***

The conducted midterm evaluation was intended;

- To examine to what extent the project objectives achievements started as stated in the project documents.
- To assess the effectiveness and appropriateness of approaches and strategies in relation to local government ownership of project activities and building local capacity to carry out on the project.
- Assess the existing potentials for sustainability of the project in the near future.
- To assess the resource utilization and level of community participation.
- Assess project management, organizational set up and the staff capacity to efficiently plan and implement the project activities.
- Assess the extent of co-signatories participation/ contribution in the project planned activities implementation process.
- Assess how the project worked to empower women.
- Assess the quality / standard of the work undertaken.
- Identify challenges as well as lessons learned during project implementation process.
- Assess the target group perception and overall projects out puts &outcomes.

### ***4.2. Scope of the evaluation***

The scope of the evaluation was to assess the performance of two & half years CBHSP implementation in the targeted Kebeles of Arbaminch Zuria & Boreda Woreda of GamoGofa Zone.

### ***4.3. Evaluation Methodology***

The midterm Evaluation was undertaken by collecting Qualitative and Quantitative data using the following methodologies.

- Document reviewing (like midterm report, financial& audit report and project document.



- Briefing by the project owner.
- Field assessment ( site visit)
- Focus group discussions.
- Interviewing target groups.
- Discussion with Woreda government officials.

#### ***4.4.Evaluation team composition;***

Based on the agreed document of “Community based Health service project” GGoZFED organized and led a team consisting of Zonal co-signatories, pertinent respective Woreda line offices and beneficiaries are participated in the midterm evaluation. The participants were,

- Department of GamoGofa Zone finance and economic development.
- Department of GamoGofa Zone Health.
- Department of GamoGofa Zone women Child& Youth.
- Department of GamoGofa Zone water, mining& energy.

In addition to this, the project coordinator and community worker were participated in the midterm evaluation.

**Table 1. Parties involved in the Evaluation.**

<b>S/No</b>	<b>Name</b>	<b>Organization</b>	<b>Position</b>	<b>Remark</b>
1	Chercos Zeto	DoF&ED	CSOS M & E Officer	Team leader
2	Girma Yosef	DoF&ED	P/P/ M&E Officer	member
3	Eshetu Moaa	Do Health	P/P/M/&E Officer	member
4	Messele	Do Water mining &Energy	P/P/M/&E Officer	member
5	Ahimed	Do Women Ch &Youth	P/P/M/&E Officer	member
6	Azenegash Amare	Oo Women/CH& Youth	P/P/M/&E Officer	member
7	Kefyalew Kinffe	OoF&Ec Dep	P/P/M/&E Officer	member
8	Belete Bekele	Oo Water Mining& Energy	P/P/M/&E Officer	member
9	Dawit Ayka	Oo Health	Disease Prevention	member

10	Haymanot Getachew	Water and mining energy office	P/P/M/&E Officer	member
11	Birknesh Letha	Water and mining energy office	P/P/M/&E Officer	member
12	Zinash thegaye	Office of finance	P/P/M/&E Officer	member

### **Plan versus Achievement**

<b>S/N</b>	<b>Activities</b>	<b>Plan</b>	<b>Achievement</b>	<b>Coverage</b>
1	Training of HEWs for community mobilization towards HIV/AIDS Prevention and control	7	17	243%
2	Training of community counselors how to prevent & control HIV/AIDS	36	80	222%
3	Strengthening anti HIV/AIDS clubs with IEC/BCC materials ( in schools& 3 in community)	6	6	100%
4	School materials support for orphaned children due to HIV/AIDS	20	20	100%
5	Review meetings every 6 month	10	5	50%
6	Construction of water supply schemes	12	12	100%
7	Training of water committees	84	84	100%
8	Construction of model pit latrine	6	12	200
9	Construction of model solid waste disposal	6	10	167%
10	CC dialogue 155 participants per year	310	1000	over
11	Training of community mobilization towards avoiding FGM & Abduction	11	58	527%
12	Review meetings on HTPs	10	4	40%
13	CC dialogue how to avoid FGM& Abduction	278	476	171%

## **5. Project Accomplishments**

### ***5.1. Physical Achievements Vs. Planned***

The major project activities Performed by Mekane Yesus south west synod Community Based Health Service project have been accomplished in line with the agreement made. Generally speaking most of the physical activities were found to be well accomplished in proper time. It is obvious that much effort has been made and good performance has been seen in the project site during field observation, the involvement of the local government especially Woreda concerned government parties including zonal higher officials also mainly being contributed to mobilize the targeted communities.

The completed water project schemes and related activities were observed and the physical accomplishment of each planned activities were checked and almost all of them have been implemented as per the agreement made, hence the evaluation findings are being revealed the following achievements.

### ***5.2. HIV/AIDS Prevention and control***

Project need assessment shows that the major factor casing HIV/AIDS in the Woreda are unsafe sex, night marketing, low awareness and practices of VCT before marriage, In order to tackle such problems the project planned to train seven health extension workers to take CC in target Kebeles accordingly seven HEWs and 11 female and 6 men trained on community mobilization from targeted four kebeles which 243% of the plan is. Besides the training, manuals were also prepared and given for CC facilitators. Due to that communities were awakened VCT, PMTCT increased.

### ***5.3. Training of community counselors how to prevent and control HIV/AIDS***

It was planned to give training for 36 persons in the whole project time, but the accomplishment until this midterm period is 80 trainees. Which is 222%, the trainees are from different CBOs like church leaders, elders of the community, Kebele administrators and others. More of to assist them manuals were prepared and given. While we are on field visit focus group discussion was made and those who were gathered testified that CC which is twice a month increased community's awareness on HIV Aids, more over uptake of VCT, PMTCT and condom use was increased. As a result communities gave witness that discrimination and stigma are reduced.

### ***5.4. Strengthening Anti HIV/AIDS Clubs***

It was planned to strengthen 6 anti-HIV/Aids Clubs in schools and it was fully achieved, the Clubs were supplied with Mini Media materials which enabled them to mobilize in schools and out of schools.

### ***5.5. School materials Support for Orphaned children due to HIV/AIDS***

According to the Project report it was found that many orphaned children were out of school due to lack of financial capacity to purchase school materials. So, in order to solve such a problem out of many orphans the Project planned to support 20 students, which is also practiced only in 2011. Since that time it has stopped because of the comments from NLM and back donors rezoning to avoid dependency. even though the rezone seems convincing, it is known that these students who were obligated to be out of school were orphaned who have lost their families due to HIV/AIDS even when they were selected first by this project the selection was agreed with the donor, Look how it was pain full to take such an immediate action to stop supporting them will bring about, Time should be given and other solutions to be sought before you withdraw what you have promised. So, you better rethink about it.

## **Review meeting on activities of HIV/AIDS Prevention and control**

It was planned to have Review meetings in every six month 10 times and 50% was achieved. The aim of the meeting was to discuss on what was done, what are the difficulties and sought solutions and also experience sharing from one another, also participants were from all churches, school principals, Kebele administrators, CC facilitators, HEWs, local area known elders and lined Woreda offices it was a good opportunity to scale up best practices and lesson learning on community behavioral change. Other than these teaching materials were produced in audio CD by experts who are professionals that it was believed they are highly communicating tools for mobilizing communities.

## **6. Water sanitation and hygiene**

### ***6.1. Water schemes constructions***

It was planned to construct 9 on spot spring development and 3 shallow well with hand pumps in two Woreda Arbaminch Zuria and Boreda, on our field visit communities gave witness that they have participated by collecting local materials like sand and stone due to that all water schemes constructed within short period of time.

From total constructed water schemes 5 water schemes were constructed in Boreda Woreda out of which 2 hands dug and 1 on spot at woyide mulato and 2 on spot springs at genbella Kebeles. The others all 7 water schemes were constructed at Arbaminch Zuria Woreda out of which two of them have an extension of 200m and 300m additional to on spot service, out of seven five were on spot and one hand dug and one shallow water drill as the result incidences of water born diseases especially on children reduced, personal hygiene improved and water fetching distance for women & children reduced.

### ***6.2. Training of water committees***

To ensure the sustainability of the project empowering communities and enhancing their capacity for effective scheme management and to develop ownership spirit the project offered training on scheme management and maintenance for WASHCOS which are 4 females and 3 males from each water schemes and also they were provided with maintenance materials, registration books

and necessary stationeries. High Number of females in WASHCOS is to encourage and empower women to participate in decision making.

### ***6.3. Construction of model dry pit latrines***

It was planned to construct 6 model latrines in rural Kebeles as the result 12 were constructed, as we have observed on our field visit most of water schemes have communal latrines proximity to water point such a major taken was a method to prevent environmental pollution of schemes area and to stop open defecation, It was also initiated others to start constructing by themselves.

### ***6.4. Construction of model waste disposal***

In order to teach communities in a practical manner and show its importance how it prevents communicable diseases and create clean environment the project planned to construct 6 model waste disposals accordingly 10 is achieved which is 167%.

## **7. Community conversation on harmful traditional practices**

As it was stated in the project document two issues under this topic will be given attention, marginalized group and aware target communities to reduce FGM and Abduction.

### ***7.1. Empowering marginalized group***

Such problem is found in Arbaminch Zuria in Genta community, it was very serious and exercised in a hidden way, as we all have some information's it was tried to avoid such practices by law and by force prior than the project But with no result. Studying the root cause and how to stop it, the project designed a strategy called progressive community conversation, within it empowering first the marginalized group and discussions with communities and other stakeholders. To tackle the problem it was planned CC dialogue for 310 participants the achievement was about 1000 participants attended. Repeated meetings with communities and other stakeholders was organized discussion were made in continuous manner many of the people realized the problem which is also against human right, it is also obstacle for development.

with agreement it was decided that such problem will be solved by applying cultural, traditional strategy using local elders as a tool, finally in the presence of GamoGofa Zone administrator and Arbaminch Zuria high officials, president from higher court , Kebele administrators, known local elders , Genta native professionals and Communities gathered at Shoshine market and openly condemned marginalization by showing here after it is no more their problem celebrated started eating and drinking together. While we are on our field observation communities gave witness that the problem has solved, however, mind transformation needs continuous effort they recommended that awareness creation on marginalization should be given for neighboring Kebeles like, Gathe, Zigiti, and Bonke kebeles for fear of people who are coming to their Kebele will revive the problem again. We also support their idea in order to avoid the problem completely the project should think over it even they too need refreshment awareness trainings. To avoid FGM and Abduction problems the project planned community mobilization training and CC dialogue, 11 and 278 respectively and accordingly the accomplishment is 58 and 476, the evaluation team interviewed some community members especially at Boreda Woreda they said that they have community conversation regular meetings twice a month due to that communities awareness is increased, moreover about six known female Genital mutilators found from Kebeles were trained separately taught honorably how FGM is illegal and it is also crime which can be penalized by the government law, they all have agreed not to mutilate here after. Both FGM and Abduction are highly reduced even they testified that now days it is not seen openly, we all believe that human mind transformation does not take place in a short time the project together with concerned government bodies should increase awareness raising in a continuous manner.

## **8. Financial Accomplishment Vs. planned**

The total budget planned for the whole period was 2,500,000 until this midterm period the utilized budget is 2,279,567.45. Thus, the financial utilization of the project as compared to the total planned budget of the project is 91%, nearly finished only 9% was left which cannot cover for rest of the time, but the project explained, due to inflation the constructed water schemes charged over expected expenses which is also understood by the donor and have agreement that the budget is liable an increase of 20% due to inflation. We also convinced that such an

agreement will solve the problem. For details financial accomplishment and audit reports attached as annex.

## 9. Material Accomplishments Vs. planned

In the process of the project implementation the project has purchased office equipment and one motor bike, fixed assets inventory report full information is attached to this Document. See the details on the attached annex.

## 10. Human resource utilization

According to the project documents it was planned to have two full time workers, one project coordinator, three top-up staffs an accountant, cashier and secretary and one community worker in Boreda Woreda, the accomplishment shows it is according to the agreed project document.

For detail information, refer

The Table below

No	Title	Qualification	Qty	Monthly salary
1	Project coordinator	MSc in public health or related fields	1	5,000
2	Woreda level project Facilitator	Diploma in public health or social science	1	1,200
3	Secretary	Certificate in secretary or related fields	1	230
4	Casher	Certificate in accounting or related fields	1	250
5	Accountant	Diploma in accounting or related	1	280
Total				6960



## **11. Project Achievement VS Key Evaluation indicators**

### ***Relevancy***

The evaluation team also proved that all the performed physical activities are responsive to the immediate needs of the targeted communities; this is mainly due to the fact that the targeted communities have been primarily engaged in Identifying, planning and implementing water supply and sanitation projects and related activities, moreover, at this particular juncture the evaluation has found that the over goal and purpose of the project is quite valid in bringing the required amount of potable water, HIV/AIDS prevention and reduce of harmful traditional practices' in the targeted communities as well as in the intervention areas at large.

The relevance of this project has been analyzed in terms of the extent to which the project is consistent with

- The current challenge and concerns of target community
- The existing government policies and strategies.
- The appropriateness of the implementation on strategies of water and health sector in achieving the intended project objectives.

### ***Efficiency***

The evaluation has been looked in to the allocated financial resources, logistic support and human power and investigated to what extent these resources have been utilized to bring change interims of potable water supply and related services among the levels of the target communities. , hence human power, financial and logistic supports are the main inputs required to attain the project objectives and it was found that the project has been efficient in all the aforementioned aspects. The project planned to recruit and deploy one coordinator and one community worker in full time others like accountant, cashier and secretary are agreed on top-up payment in order to execute the job.

## ***Effectiveness***

The evaluation has also been assessed the project implementation strategies and activities effectiveness in the attainment of the intended objectives despite the difficulty of roads (in accessibility of roads) most of the targeted water project activities have been completed effectively in due time. We, the evaluation team also observed that the implementing organization is in a good condition to meet the projects purpose as per the agreement made, even though the nature of terrain is so difficult to limit us to observe the changes and improvements obtained.

## ***Sustainability***

The evaluation has also been investigated whether sustainability strategies are in place and to what extent the sustainability strategies employed are effective and appropriate bring access to potable water supply and solved marginalize, which is serious problem of the society, the level of participation and practice of target beneficiaries and other stalk holders specially at Arbaminch Zuria Woreda mobilizing communities from high land and low land areas including Woreda and zone higher officials gathered at shoeshine market to show openly how they have condemned marginalization which is an obstacle for development and all social interactions of communities shows as a good sign that communities have started to be their own problem solvers.

## **12. Organization and Management of the project**

The present evaluation attempts to assess whether appropriate system of organization and management is in place, to plan, implement and coordinate Mekane Yesus South west Synod Community Based Health Service project , this section of the report discusses the existing institutional arrangement , the collaboration and networking with relevant government offices and the project progress tracking system being utilized , as stipulated in the project document. The project is under south west zone synod Mekane Yesus which is well organized and actively

involved in the intervention of the project, in this regard the organization management of the project we can say it is being successfully performed its project as per the project agreement made.

### **13. SWOT Analysis**

This section of the report discusses the main challenges encountered, the achievements registered and key lessons learnt from the overall process of the project implementation. The project strength, draw backs, opportunities and threats (SWOT) analysis was assessed by the evaluation team and consensus reached after Brain storming on the following four features.

#### ***A). Strength***

The major strength reviewed and discussed during the midterm evaluation of the project are mentioned here below as follows,

- Communities awareness on Harmful traditional practice like Marginalization, Abduction, FGM and HIV/AIDS and sanitation was increased
- All water schemes were constructed on time and construction of latrines adjacent to water schemes to protect area from open defecation.
- The given maintenance materials, enhance sustainability
- Handover of all completed water schemes for concerned Woreda government bodies and communities.
- Strong relationship with communities of Arbaminch Zuria that helped the project to tackle marginalization problem.
- Harmonized and strong relationship with all signatories.

- Water quality test was taken before making it available.

### ***B. Weakness (Drawback)***

The following draw backs were found those which need to be corrected.

- Without discussing with signatories, stopping supporting orphaned children who have lost their parents du-to HIV AIDS
- Before communities were fenced all established water schemes making open to be utilized
- Some community members do not practice what they have been thought about hygiene due to lack of support and follow up from health extension workers.( government offices)
- The existence of some weak community water management committees in terms of fee collection, fencing the surrounding of the scheme.

### ***C). Opportunity***

- Collaboration of government to give support to development partners.
- The participation of local targeted communities and their attitude towards supporting development projects of the intervention areas( specially Arbaminch Zuria Woreda)

### ***D). Threat***

- Problems of related to absence of feeder roads to reach valley and mountainous intervention area to transport construction materials to project sites.
- Regarding sustainability of the project the ignorance of trained people to focus on follow up and management of operation of water schemes

- Project staff turnover.
- Manmade and natural calamities.
- The galloping inflations in the country.

### ***E). Lesson learnt***

- A clear observation on target group communities' behavior is key for sustainability of the project.
- When working with communities empowering them instead of replacing them is mandatory.
- Participation of women in WASSCOS and other committee members as decision maker become effective.

## **14. Conclusions and Recommendations**

### **14.1. Conclusion**

The Ethiopian Evangelical church Mekane Yesus South West Synod development and social services commission (DASSC) performed a two and half years April 2010- Nov 2012 Community based health service project in Arbaminch Zuria Woreda and Boreda Woreda of GamoGofa zone . The project is funded by Norwegian Lutheran mission and planned to provide for five years a total amount of Birr 2,500,000 and until this midterm evaluation it has been utilized Birr 2,279,557.46 which is 91% of the plan. According to the project explanation while we are at their office for evaluation discussions they verified that unexpected cost for water schemes raised the utilization which is also agreed with the donor that the budget will be liable to 20% annual increase due to the inflation risk. So that the evaluation findings revealed that the time lines of the physical and financial accomplishment of the project was found to be Satisfactory.

Finally, the evaluation team would like to note that both the Ethiopian Church Mekane Yesus South West Synod and concerned partners should consider the following given Recommendations.

### **14.2. Recommendations**

- Whenever there is revision of physical plan and financial, the project should consult first signatories.
- In order to develop ownership spirit awareness creation and refreshment trainings should be given ( specially at Boreda)
- Those on spot schemes which are waiting for an extension at Boreda need more attention not to disappoint communities.
- In all places where water schemes were constructed surrounding should be fenced for protection ( government offices should be concerned )

- On utilization of water and sanitation Woreda office of water and Health should exercise joint monitoring.
- Still marginalization needs refreshment trainings on target communities and in a new way on neighboring Kebeles.

Eventually, appreciating the contribution of the project in addressing target community needs and in alleviating bottle necks of social transformation in Boreda and Arbaminch areas, it is further recommended that excelling/extending/replicating the outcomes to other pocket parts of Gamo highlands whereby similar HTPs are practiced. Moreover, water and sanitation needs of the community still show gaps to fill thus EECMY-DASSC and its funding partner, NLM, should give due attention.