



“LEAVE NO WOMEN BEHIND” : A CASE STUDY ON HOLISTIC APPROACH OF INTEGRATING ECONOMIC EMPOWERMENT OF WOMEN IN ETHIOPIA

Management

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ABSTRACT

Women and girls in Ethiopia are strongly disadvantaged compared to boys and men in several areas, including literacy, health, livelihoods and basic human rights. They also suffer from low status in their society and lack social support networks. Manifestations of discrimination against women are numerous and acute: With regard to women's participation in economic life, the 2005 National Labour Force Survey reveals that women represent 47 per cent of labor force in Ethiopia, with highly unequal participation: 68.5 per cent of employed women were unpaid family workers and 24.8 per cent were self-employed in informal jobs. In addition, women's illiteracy and inability to meet the initial payment required to qualify for agricultural credit has limited their access to credit facilities. The Programme-supported baseline survey indicates that only 6 per cent of rural women have access to credit and 1 per cent have vocational skills training. Moreover, despite the widespread involvement of rural women in agricultural work, there is a persistent belief that “women don't farm,” which discounts their vital contribution to Ethiopia's key economic activity. The Programme “Leave No Woman Behind” is an integrated programme aimed to empower women in the Amhara and Tigray regions. It stems from the recognition of the various dimensions of women's poverty and responds with a holistic approach of complementary interventions, integrating economic empowerment with access to reproductive health, literacy and behavioural change at community level. Women participating in the Programme are targeted by all the intervention areas, which results in rounded improvement in their lives. Implemented through local structures, the Programme strengthened pre-existing capacities and contributed to building the Government's service delivery capacity.

KEYWORDS

Introduction

Ethiopia suffers from some of lowest gender equality performance indicators in sub-Saharan Africa. While remarkable progress has been made in several of the Millennium Development Goals (MDGs), it is lagging behind in MDG 3. The Global Gender Gap report 2010 ranks Ethiopia at 121 out of 134 countries in terms of the magnitude and scope of gender disparities.

The morbidity rate of 75.5 per cent for women, against 25.5 per cent for men; the maternal mortality of 590/100,000 live births; and adult HIV prevalence of 1.9 per cent for women, against 1.0 per cent for men, are indicators of persisting gender inequalities in the area of health and life expectancy. Overall, women's health has been adversely affected by poverty, poor nutrition and restricted access to health care services due to financial constraints and cultural beliefs. Contraceptive use among women is low at 20 per cent, and only 10 per cent of births were attended by skilled health personnel in 2011. Moreover, 28 per cent of women of reproductive age are chronically malnourished, with the problem being particularly acute in rural areas.

Ethiopia appears to be on track to achieve gender parity in primary school enrolment by 2015, but the gender gaps are still larger in rural areas. Furthermore, gender disparity increases at higher levels in education, where the enrolment of adolescent girls is lower than boys.

Traditional attitudes, beliefs and practices that reinforce harmful gender roles contribute to constrain women's participation in social development. Harmful traditional practices, including female genital cutting (national prevalence rate of 74.3 per cent) and child marriage disproportionately affect rural women and girls.

The Government of Ethiopia is explicitly committed to the achievement of gender equality. The Constitution clearly stipulates the rights of women and the Women's Policy of Ethiopia reiterates the Government's commitment to gender equality. The revised Federal Criminal Code and Regional Family Law support measures on different forms of gender-based violence, including child marriage and female genital cutting. In addition, the national poverty reduction strategy has included “addressing gender inequality” as one of its eight pillars.

While there is general political will and commitment to address gender inequality, there has been limited capacity to fund and implement community-based interventions targeting vulnerable women. Generally, services have been skewed toward the wealthy, those living

in urban areas, and adult men.

The Programme was conceived and designed to respond to the above challenges, with efforts to support social mobilization; access to reproductive health and HIV prevention services; life skills and literacy; and livelihoods. It has focused its interventions on the Amhara and Tigray regions, two of the most vulnerable of the country, with severe land degradation and a prolonged history of emergency assistance by the government.

2. Objectives

The Programme aimed to:

- Increase enjoyment of human rights at grassroots level through strengthened government efforts in promotion and protection of human rights and community empowerment, with special emphasis on adolescent girls and women.
- Strengthen regional efforts to strategically address gender disparities in literacy and educational attainment, sexual and reproductive health services and gender-based violence (GBV).
- Improve access to and demand for quality, gender sensitive and integrated reproductive health care, including HIV/AIDS prevention services at all levels.
- Increase enjoyment by target women and their family members of improved and sustainable livelihoods, with increased income, improved food security and enhanced resilience to shocks.

3. Key Actors

The United Nations Population Fund (UNFPA) and the World Food Programme (WFP) have been the participating UN agencies. The Ministry of Women's Affairs (MoWA) and Bureaus of Women Affairs (BoWA), through its regional and district offices, have been the lead and coordinating government partners for the Programme.

The Programme did not establish parallel implementation mechanisms; rather, it was integrated into the government decentralization system. The responsibility for implementation lied with the Regional State governments of Amhara and Tigray. The financial management system was also integrated in the Ethiopia public financial management system.

At the regional level, a Programme management team composed of focal persons from the regional Bureaus of Health, Education, Agriculture, Finance and Women's Affairs (as lead) had the responsibility for implementation, monitoring and technical backstopping. At woreda/district level, line offices of the same bureaus

were responsible for direct implementation. At village level, community based associations, like women's associations, and government staff, such as health extension workers and agriculture and development agents were responsible for the mobilization of communities, selection of programme beneficiaries and implementation of activities.

The decision to implement the Programme through existing institutional structures and government staff has helped to create local ownership and to pave the way for sustainability.

4. Strategy

The Programme recognizes the various dimensions of women's poverty and responds with a holistic approach of complementary interventions that combine livelihoods, access to education, access to health services and social mobilization. Women participating in the Programme are targeted by all the intervention areas, which results in all-rounded improvement in their lives.

Implemented through local structures, the Programme strengthens pre-existing capacities and contributes to build government's service delivery capacity.

SOCIAL MOBILIZATION

The Programme recognizes that improving the status of girls and women requires changing the beliefs, attitudes and behaviour of community members, including men, boys and traditional and religious leaders. To encourage such change, it utilizes the Community Conversation (CC) approach, which is a process of engaging communities in an interactive discussion about cultural norms and values. Through participation in the CC series, individuals are empowered to think critically about issues such as gender equality, HIV/AIDS, harmful traditional practices, family planning and more. This interactive discussion allows participants to explore the way their behaviors and values, and those of their families and neighbors, affect others' lives. Through the Programme sites, 400 CC facilitators were trained to recruit community members and engage them in discussion, twice a month, for a period of one year.

Members of CC groups have often come to consensus about stopping harmful traditional practices, like child marriage and female genital cutting, and have agreed to take collective action against those practicing it. Moreover, on the individual level, CC graduates are making dramatic changes in their own homes and families for greater gender equality.

LITERACY AND LIFE SKILLS

Women who cannot read or write are often marginalized by their communities and are unable to fully participate in social and economic development. In its literacy and life skills program, Leave the Programme targets women who have not been engaged in other adult education programs.

These women are invited to join adult literacy classes, where they acquire basic skills in reading, writing and mathematics. They also receive life skills education on a wide range of issues, including sanitation, hygiene, health and livelihoods. The national Functional Adult Literacy Manual is used, ensuring consistency and quality.

Literacy graduates are often beneficiaries in other Programme components and their newfound skills in reading, writing and math contribute to their success in livelihoods. Women participating in the literacy program have become strong advocates for education in their communities, and local teachers report that the newly literate mothers are especially supportive of their children's education.

Leave No Women Behind also supports local schools and functional adult literacy centers with additional supplies, such as exercise books, black boards, benches, chalk and stationery, and provides adolescent girls with sanitary napkins to help improve their school attendance.

HEALTH

The Health Extension Workers (HEW) program is a government strategy where trained community women go house to house and teach other women about 16 basic health extension packages. The Programme strengthens this government programme.

HEWs regularly participate in Community Conversation sessions to

provide information about reproductive health and harmful traditional practices. Women and girls have separate groups, where they discuss family planning, gender based violence, HIV/AIDS, maternal health, seeking anti-natal and post-natal care and safe delivery. Members of the government initiative Women's Development Groups, who have their own focal point for promoting reproductive health in the community, often assist the HEWs with outreach.

In parallel with such interventions to create demand, the Programme also strengthens the supply side of reproductive health service delivery. It supports district authorities to buy drugs, obstetric equipment and other reproductive health materials for health posts and health centers. These drugs and services are provided to women free of charge. In addition, the Programme regularly sponsors trainings of HEWs and other health staff on gender-sensitive reproductive health service provision, to ensure that women receive the highest quality care possible.

LIVELIHOODS

CRITERIA FOR SELECTION OF LIVELIHOOD CANDIDATES

Resident for more than 2 years

Aged 18 years and above

Ability to engage productively in an income-generating activity

No bad credit or history of debt

Willing to participate in all Programme activities

Willing to share experiences with other women

Out of the above criteria, priority is given to landless women, female heads of households, school drop outs, women living with HIV/AIDS, women with disabilities and women with no chance of accessing other credit opportunities.

The establishment of rural savings and credit cooperatives is part of the Government strategy. However, few women join them, because women generally have limited access to assets that make them eligible. Few also have skills to engage in income-generating activities. As a consequence, the Government strategy usually caters to the needs of male farmers.

The Programme interventions target women who do not have sufficient access to government interventions. Based on community agreed criteria, poor and vulnerable women are selected by their communities to participate in livelihood improvements activities. They receive training on the basics of income generation, followed by training on a specific income-generating activity of their choice. Local Development Agents assist them in making their choice, and provide them with continual technical support (appropriate technology, market information, business management, book keeping, cooperative management, etc.) as they build their new business venture. The selected women also join a savings and credit cooperative and are required to save for a specific period of time before they take a loan (at a low interest rate) from the cooperative's revolving grant fund.

At the same time, the regional Agricultural Bureaus are supported to conduct a succession of Training of Trainers for their staff and development agents, in order to train women on income-generating activities and credit cooperative management.

MAINSTREAM STRATEGY: RESONANCE EFFECT

As a mainstream strategy, the Programme promotes what has been called the "resonance effect:" once a woman has been empowered through her participation in the Programme, she often becomes the Programme's strongest advocate. She wants to share her newly acquired knowledge and provide advice to her family, friends and neighbors.

The Programme harnesses the power of the resonance effect by encouraging beneficiaries to share their new knowledge and insights with other members of the community. Thus the new ideas and information are accepted and internalized, not imposed by outsiders, making the Programme's impact all the more sustainable. For instance, in the Community Conversation series, each participant is expected to communicate what he/she has learned with 10 other people; in the Livelihoods program, each woman reaches out to 6 other women.

5. Progress and Results

The Programme reached 11 districts throughout the Amhara and Tigray regions. From February 2009 until February 2012, it engaged

over 100,000 women and adolescent girls. Key achievements include:

- Reduced prevalence of child marriage
- Reduced stigma and discrimination against women living with HIV/AIDS
- Reduced prevalence of harmful tradition practices, including female genital cutting
- Increased access of voluntary counselling and testing for HIV/AIDS by the community
- More equitable division of labour at the household level, as reported by CC participants
- Increased number of deliveries attended by trained health professionals
- Increasing number of women using family planning and pre- and post-natal care
- Increased attendance at Programme-supported schools, particularly among girls
- Newly fostered culture of saving among the participants and in the larger community
- Good return rate on loans

These key achievements are illustrated in the stories and quotes that follow.

REDUCED PREVALENCE OF EARLY MARRIAGE

THE GIRLS MUST DECIDE: A FATHER'S CAMPAIGN AGAINST CHILD MARRIAGE

When Yenew Zeleke first joined the Community Conversation series in his village, he had a plan for his family. Married and a father of 5 children, Yenew had already arranged the engagement of his ten-year-old daughter to an older man. He believed that child marriage was a necessary part of his culture.

While in CC sessions, Yenew learned new information about harmful traditional practices, including child marriage. Health Extension Workers spoke about the connection between child marriage and obstetric fistula, and painful memories were stirred in Yenew: he had once taken care of a relative who suffered from fistula.

Armed with this new information, Yenew made a drastic decision: he cancelled the impending marriage of his ten-year-old daughter. He then enrolled all of his children, including the girls, into school. "Girls must be educated first and then they will decide who they want to marry," Yenew said. "I arranged the marriage of two of my daughters, when they were 7 and 10 years old, but this is not going to happen to my other children."

Webete Adgo, Yenew's wife and mother of his children, is overjoyed by his change of heart. She herself was forcibly married to an older man when she was 13, and she later ran away from her first husband. She states, "I wish the society was informed about harmful traditional practices during my childhood. If the husband is more than 18 and the wife is young, sexual intercourse is so hard."

Webete also reports that after joining the CC series, she and her husband speak more freely about household decisions, and even share domestic chores. She is also now using family planning and participating in other Leave No Woman Behind activities, including literacy classes and livelihood training, all with the full support of her husband.

REDUCED PREVALENCE OF FEMALE GENITAL CUTTING

"There were efforts before to stop harmful traditional practices, but the Community Conversations has made a difference because we learn scientific information. The Health Extension Workers come and share their in-depth knowledge, and that helps us to decide. I have a 10 year old daughter and I've decided to not have her circumcised, because of what I learned here."

COMMUNITY CONVERSATIONS PARTICIPANT

"We had a lot of resistance to ending female genital mutilation. If a girl isn't circumcised, how would she get married, how would she have intercourse? The Health Extension Workers came to Community Conversations and gave us a lot of scientific information, especially about complications during delivery. It took a long time to convince us, but we don't circumcise our daughters anymore."

MALE COMMUNITY CONVERSATIONS PARTICIPANT- REDUCED STIGMA AND DISCRIMINATION AGAINST

WOMEN LIVING WITH HIV/AIDS AND INCREASED VOLUNTARY COUNSELING AND TESTING FOR HIV/AIDS BY THE COMMUNITY

NO MORE STIGMA: LIVING OPENLY AND EDUCATING OTHERS ABOUT HIV

Today TekleHailu, age 35, is a successful businesswoman and a valued member of her community. Both of her business ventures, fattening sheep and the local café that she owns, are thriving. She says that her involvement with Leave No Woman Behind has been transformative: "In just two years' time, I am a different person. I feel so strong, with a bright future."

In 2009, Tekle was diagnosed with HIV. A single mother of two, Tekle recalls, "It was a desperate moment. I was hit the hardest when I thought about my children. Are they going to face the same hardship in life? I was really confused." Some of her neighbors suspected her status, and would avoid her and her children.

When she was identified as a Programme beneficiary, she was unsure about participating: "I didn't believe that I had the capacity to repay and did not want to pass the loan to my children. Thanks to the advice of development agents, that loan changed my life." With the money, Tekle bought 10 sheep, raised the herd to 24 sheep, and sold 8 sheep. She then reinvested the money into a local cafeteria. With her profits, she is sending both of her children to school.

Thanks to adult literacy classes, Tekle can now write her name and do basic math. Tekle also attends CC sessions, where she shares her experiences and encourages fellow villagers to be tested for HIV. "Only five women [in our village] had declared our HIV status when the CC sessions began. We openly gave our testimony about living with HIV and repeatedly taught others the importance of voluntary testing. Today we are 24 people openly living with HIV," Tekle says.

CHANGING GENDER ROLES AND DIVISION OF LABOR OF HOUSEHOLD CHORES AND CONTROL OF HOUSEHOLD ASSETS

"Before, at the end of the day, after coming from work, women used to wash our feet. But now they don't have to do it anymore."

"Now I help my wife when she is cooking and I can also cook."

"I arranged the marriage of two of my daughters, when they were 7 and 10 years old (this last one also FGC victim) but this is not going to happen to my other children."

A GROUP OF MEN PARTICIPATING IN COMMUNITY CONVERSATIONS IN AMARA INCREASED SEXUAL AND REPRODUCTIVE HEALTH-SEEKING BEHAVIOUR AND USE OF HEALTH SERVICES AMONG GIRLS AND WOMEN

Trainings and discussion groups led by health extension workers were used to improve the knowledge of adolescent girls and women on sexual and reproductive health issues, and CC sessions helped to change attitudes and norms. All these efforts combined with additional health supplies and training of health staff on gender sensitive service delivery, resulted in:

- Slightly increasing trend in women delivering at health centers and health posts assisted by a trained health professional.
- Significantly increasing number of women using family planning and maternal health services.
- Improved quality and easily accessible reproductive health service, which is able to respond to the created demand.

"Before the Community Conversation series, pregnant women wouldn't come to the health post. They would just say, 'St. Mary will help us.' What I say to them in CC sessions is, 'St. Mary is also at the health post.' Now the women see [the Health Extension Workers] at the CC meetings and they feel comfortable with us. Before, they were afraid to come. They thought they would be operated on, or something bad would happen. But now, at least six women are having their babies at this health post each month."

MASHOAMARE, HEALTH EXTENSION WORKER

DELIVERING IN A HEALTH FACILITY FOR THE FIRST TIME

Tewres Amare, age 35, was engaged in her local Community Conversation sessions when she learned that she was pregnant with her seventh child. Soon after, Tewres received a visit at home from both her local Health Extension Worker and a Women's Development Group representative. Tewres recalls: "Once it is known in the CC group that you are pregnant, the Health Extension Worker and Women's Development Group representative come to your home and tell you about the importance of delivering in a health facility. Throughout my pregnancy, my Women's Development Group representative has continued to visit me, to follow up on my health".

In her previous pregnancies, Tewres did not seek out any medical services: "I delivered my 6 children at home because I didn't have any other knowledge, and that was supposed to be the way that you do it," she says. But she now visits her local health centre regularly for antenatal services, and she plans to deliver in a health facility. When asked why, she replied: "The health workers give us good advice. They can provide painkillers if we need them, or even blood. They can save our lives".

Tewres says that her seventh child will be her last, and that she will resume family planning after this pregnancy. She also wants a different kind of life for her 18-year-old daughter. She says, "I want my daughter to have fewer children than I did. She must use family planning. When you have many children, your health suffers, and you can't afford to care for them."

WOMEN EMPOWERED THROUGH LITERACY CLASSES AND MORE SUPPORTIVE OF CHILDREN TO ATTEND SCHOOL

"When I first started the literacy class, I didn't know about the use of education and I thought it was a waste of time. I used to tell my children to not spend time studying at home. My husband was also surprised and thought it a waste of time when I started going for literacy classes. But now I have learned to write my name, I can read letters. Now I make sure my children go to school always. My husband also asks me to read his letters. He is happy with my learning and he has also joined the Leave No Women Behind community conversation meetings."

A WOMAN PARTICIPATING IN ADULT LITERACY TRAINING IN TIGRAY**THREE GENERATIONS, ONE GOAL: EMPOWERMENT THROUGH LITERACY**

Nearly 50 women are crowded in a classroom. Some women are elderly and bent, their walking sticks leaning against the desks. Other women are nursing their babies as they scribble in notebooks.

Whatever their age, all of the women are here for the same purpose: to learn to read and write. They are students in literacy classes supported by Leave No Woman Behind. And their newfound literacy is complemented by their economic and social empowerment in other areas: many of the women are participants in other Programme interventions, such as livelihoods and the Community Conversation sessions.

One of the oldest women in the room is Felegu Kiros, age 56. She recalls that she did not attend school as a child and was instead forcibly married at age 15 to an older man. When her local leadership approached her about joining literacy classes, she remembers that she felt grateful: "I want to read and write like others can," she says. "There has never been a program like this before, for women as old as me, to learn." Now she can already read and write her name, and is proudly able to put her signature on documents.

Another student is Chekolu Tegen, a 36-year-old single mother of four children. In addition to attending literacy classes, Chekolu is a participant in the Community Conversation sessions, and she has received diverse income-generating activities trainings and a loan from the local cooperative. Now she is fattening and selling sheep, and has recently started to produce and sell local beer (*areki*).

Chekolu says that the literacy classes have contributed to the success of her business ventures. She explains: "I'm confident in running my business, because I can now do simple math and write down my savings. I'm so proud of myself, that I can generate my own income and look after my children."

Her participation in the directed CC discussions has made another dramatic impact on her life: she says that before she joined the group, she was not using family planning services. But now she is using Depo-provera, and says that she undergoes HIV testing regularly.

She is also an active member of the local Women's Development Group and goes door-to-door in her community to promote family planning and safe delivery. She says: "Before Leave No Woman Behind, I was scared to talk in front of others. Now it's different. I feel comfortable expressing myself to my community."

The youngest student, Ambenes Getewye, is 16-years-old. After reaching Grade 5, Ambenes dropped out of school last year to get married. She and her husband are participants in the CC discussions, and after attending one of the 12 sessions they have made an important decision together. She explains, "We've decided that we only want 2 children. We think that's enough."

IMPROVED LIVELIHOOD OPPORTUNITIES THROUGH CAPACITY BUILDING AND ACCESS TO CREDIT, RESULTING IN INCREASED ASSETS AND REINFORCED WOMEN'S SELF-ESTEEM

Around 7,928 women have had access to skills training and a loan from a revolving fund and started small income-generating activities. The Programme supported the establishment of 77 savings and credit cooperatives and trained women with basic financial and business management skills and leadership. A total of 79 per cent of the cooperative leaders are women. The access and ownership of resources has boosted their self-esteem, changed gender relationships in the household and improved the status of women in the community.

LAKECHASRAT

Lakech Asrat is a 28 year old woman with 3 children. She and her husband own 1/8th of a hectare of farmland, which was their main source of income. Lakech used to supplement the family income by engaging in petty trade. She was selected to be a beneficiary of the livelihood component in the Programme and joined a savings and credit cooperative. After being trained in cattle production, she received a loan of 2,500 birr and started shooat fattening. With the profit, she also rented additional farmland and bought an anti-weed sprinkler tool, which she rents out for 400 birr per day to boost the family income.

Lakech has also learned to read and write and basic mathematics by participating in the adult literacy classes.

She also attends community discussions on issues of HIV/AIDS and family planning facilitated by a mentor. She has attended antenatal care at the health post in the village during her last pregnancy. Talking about the benefits of the program, Lackech says, "I have stopped taking loans at high interest rates from money lenders. And I have reached out to four other women, communicating what I learnt in the Programme and recruiting them to join the Community Conversation programs."

COLLABORATION AMONG GOVERNMENT INSTITUTIONS

The Programme's integrated approach has also encouraged internal collaboration among sectors of the Ethiopian government, including Agriculture, Health, Women's Affairs, and Education. "When we first started the programme, we were confused—we hadn't worked together like this before. We started to talk together and that helped us to fill in the gaps. Now I can speak confidently about what my colleagues are doing, and refer other women to them. Before, I just knew my own activities."

WOREDA (DISTRICT) OFFICIAL IN THE LIVELIHOOD SECTOR

"The integrated approach has brought a total shift in our working culture. We do not work separately anymore—we meet regularly and we can make sure that our efforts are coordinated. Together we can make a change more quickly."

6. OVERALL CHALLENGES

- Using an integrated approach is a savvy investment to yield maximum return on funds and human resources. Each Programme component reinforces and complements each other, creating synergies among sectors and empowering women in a holistic way. The Programme's integrated approach is also consistent with, and in turn reinforces, government Programmes and messaging about social and economic development.
- The lack of a baseline has posed a challenge in subsequent Programme monitoring and evaluation. Similarly, the lack of a pre-existing exit strategy is a current challenge.
- The integrated approach has encouraged multi-sectoral collaboration and coordination within the Government. Officials interviewed expressed overwhelming enthusiasm for this new multi-sectoralism, saying that it enabled them to have a greater impact in a shorter period of time.
- Multi-sectoral coordination is a greater challenge at the regional level. Despite initial hiccups, multi-sectoral coordination is working well on the district level, possibly because of the smaller scale means more opportunities for familiarity.

SOCIAL MOBILIZATION: THE COMMUNITY CONVERSATION SERIES

- By including men in the CC series, the Programme has engaged

entire communities in a constructive and directive dialogue about gender equality. With men engaged as advocates and allies for women's empowerment, change is more deeply rooted and sustainable.

- A well-trained, skilled facilitator is of paramount importance to the successful implementation of a CC group. Without the guidance of a skilled facilitator, groups can flounder, and might even reinforce harmful attitudes and behavior.
- Between the CC series and the work of the local Women's Development Groups, there is a consistency of messaging around the issues such as reproductive health, hygiene and sanitation and education. As locals are hearing the same ideas from different trusted sources, the messaging gains increased legitimacy and there is a greater chance of adoption by the locals.
- CC facilitators reported that doing door-to-door visits to participants, particularly in the early weeks of the CC series, was helpful in improving attendance.

LITERACY AND LIFE SKILLS

- The link between literacy and livelihoods is especially strong, with several women stating that their newfound literacy and numeracy has enabled them to build successful businesses.
- Educating women has had the unintended but welcome consequence of engaging mothers in their children's education. As the women become literate themselves, they are convinced of the value of education for their children, and in turn become advocates for education in their communities.
- Moreover, school attendance rates have improved in communities where the Programme is contributing materials, including sanitary pads for girls.

HEALTH

- The CC series is a key platform for sharing health information within the community. The presence of Health Extension Workers at CC meetings, providing information and dispelling myths about family planning, HIV and FGC, has made a difference.
- By regularly attending the CC sessions, the HEWs also become familiar with various members of the community and are able to follow up where needed. For example, when a woman is pregnant, the HEW can visit her home and encourage her to come to the health post for antenatal services and safe delivery.
- While generating increased demand for reproductive health services, it is essential to improve the supply and quality of services available.

LIVELIHOODS

- Keeping interest rates comparatively low and not requiring collateral for loans has made credit more accessible for the poorest and most vulnerable women. While other livelihoods programs, with their high interest rates and collateral requirements, tend to favor wealthier women or men, Leave No Women Behind is unique in its targeting and prioritization of poor, female-headed households.
- Livelihoods beneficiaries need continuous follow-up and technical support by the local Development Agents to ensure success. Resources, such as transport and allowances for the Agents to visit the beneficiaries, should be continually allocated for such follow-up.

RESONANCE EFFECT

Once a woman has been empowered through LNWB, she often becomes the Programme's strongest advocate. She wants to share her newly acquired knowledge and provide advice to her family, friends and neighbors. It is important to capitalize on this effect and fore see the increased demand for services.

CONCLUSION:

The Leave No Women Behind Programme is an innovative and unique program in Ethiopia, already tested for its effectiveness and impact. The Programme directly addresses the needs of the community in a holistic approach through improving the opportunities and potential of girls and women, and involving in the process the community male members, educators, health staff, women's associations and the cooperatives. In addition, the involvement of community leaders in decision-making, and the inclusion of opinion leaders have strengthened community ownership of and confidence in the Programme and the Programme's credibility. At the same time, the Programme is institutionalized, implemented by and through the

government structures. It works towards capacity enhancement of the regional governments and does not establish a parallel implementation system. Instead, it uses the financial and operational management systems of the Government of Ethiopia and builds on the Government's capacity to deliver services. In brief, the Programme has the potential to be sustainable beyond its lifespan, based on strong ownership and commitment at all levels and its catalytic nature to response to gender equality and women's empowerment.

At the time of writing, a sustainability strategy is being drafted and discussed with all implementing partners at different levels. The strategy consist of strengthening existing structures, like the savings and credit cooperatives, to sustain themselves and continue when the Programme phases out, and reaching an agreement on smooth handover of Programme components like the adult literacy and Community Conversations. Some activities, such as procurement of drugs and supplies to health posts and centres will need financial support to continue after the Programme funds end. Therefore, the strategy also includes advocacy actions to involve and engage sympathetic donors.

Some quick facts on sustainability:

- In Amhara region, CC groups continue to meet after graduation, to discuss progress on community action plans. The CC facilitators lead the graduated groups, with no payment or stipend. That the groups continue to meet highlights the people's commitment to the CC process and their belief that it is beneficial to the community.
- The cooperatives are largely self-sustaining with the revolving fund, which indicates longer sustainability in general.
- A huge demand has been created in the community for the Programme's livelihoods package, including livelihoods trainings and access to loans. This intervention requires the most upfront resources (financial and otherwise). This initial investment to train the women and provide loans needs to be considered in the scaling up strategy.

Regarding potential for replication, the Programme strategy and approach is simple, structured, clear on what to do, who to target and how to address gender equality. Thus, the message is easy to replicate. The Programme has created a huge demand for expansion into other regions, and to increase the number of participating women in each community targeted. Beneficiaries and implementers alike stressed their desire to expand the Programme to reach more women. Such demand is indicative of effectiveness of the Programme's approach, but poses questions about how to scale up in a sustainable manner.

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